ADVANCING ACCESS

Global priorities to improve access to NCD medicines, diagnostics and medical devices

NCD Alliance

NCD POLICY LAB

UNIVERSITÉ DE GENÈVE

TIME TO LEAD
GLOBAL WEEK FOR ACTION ON NCDs

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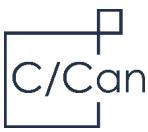
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Introduction

In most low- and middle-income countries (LMICs), access to essential medicines, vaccines, diagnostics, and other medical devices for noncommunicable disease (NCD) treatment and care remains inadequate, increasing health inequities globally (WHO and World Bank 2025). These barriers also impact access to medicines and medical products to treat complications and comorbidities, palliative care, and strategies to address antimicrobial resistance (AMR). This challenge is amplified within countries for certain marginalised groups, including the economically disadvantaged, rural populations, and ethnic minorities, who often face limited access to medicines, diagnostics, and medical devices (hereafter: medicines and medical devices) due to their unavailability and/or unaffordability, as well as populations impacted by humanitarian emergencies.

Improving access to medicines and medical devices is integral to achieving universal health coverage (UHC), promoting health equity, improving health outcomes, and reducing the global NCD burden. As people living with NCDs need a complete package of services for adequate diagnosis, treatment, care, and management, it is crucial to address the full spectrum of essential health products. The 'diagnostics gap' is particularly severe: in LMICs, only 19% of patients have access to appropriate diagnostics at the primary health care level (Fleming *et al.* 2021).

Simultaneously, the world has failed to meet the global target of 80% availability and affordability of essential medicines and basic technologies for NCDs by 2025 (World Health Organisation 2011).

The Political Declaration emerging from the Fourth High-Level Meeting of the United Nations General Assembly on the prevention and control of NCDs and the promotion of mental health and wellbeing (HLM4) has renewed global focus on access to essential medicines and medical devices for NCDs through a global target of '*at least 80% of primary health care facilities in all countries have availability of World Health Organization-recommended essential medicines and basic technologies for noncommunicable diseases and mental health conditions, at affordable prices, by 2030*' (UN General Assembly 2025). Simultaneously, Member States recommitted to strengthening financial protection, setting a global target for '*at least 60% of countries to have mechanisms in place by 2030 to cover essential NCD and mental health services and health products*'.

Medicines account for over half of out-of-pocket (OOP) health spending in three-quarters of countries, and recent research finds that if countries procured medicines at the lowest observed prices, spending needs could fall by 20–50% (NCD Alliance 2025b). Tackling the access problem is therefore an effective way to accelerate action on both targets and move toward concrete reforms to reduce OOP expenditure and improve financial protection (WHO and World Bank 2025).

Compared to previous Political Declarations, there is also a shift in discourse toward operational solutions to improve access, including specific mention of pricing policies and price transparency, stronger regulatory systems, efficient procurement including pooled procurement, resilient supply chains, local production and technology transfer, and voluntary licensing, in addition to language around the use of TRIPS flexibilities. This language is an important addition allowing to push for the adoption and/or strengthened implementation of specific policies.

The 2026 3rd International Dialogue on Sustainable Financing for Noncommunicable Diseases and Mental Health (3FD) and UN HLM on UHC in 2027 offer critical opportunities to strengthen implementation of the two HLM4 targets, addressing at one time the insufficient and fragmented financing for NCDs and the persistent unaffordability and limited availability of essential medicines and medical devices.

This brief outlines the NCD access community's priorities for improving access to medicines and medical devices in the context of these ongoing processes.

Global commitments around access

Access to medicines has been addressed at global level since the World Health Organization (WHO) first defined the concept of 'essential medicines' in 1977. WHO Member States have since made various commitments, reflected and reaffirmed in political declarations and resolutions, to improve global access. Access to medical devices entered the international radar more recently, starting with the first WHO resolution on diagnostics in 2023, nearly 50 years after the definition of essential medicines.

NCDA's 2024 advocacy briefing, co-developed with the University of Geneva and in collaboration with 19 civil society organisations, mapped the existing global resolutions and commitments on access to NCD medicines and medical devices (NCD Alliance 2025a). This exercise concluded that the mandates for solving these challenges exist, but implementation is lagging behind.

Tools and initiatives

A diverse and vibrant access ecosystem has emerged in response to these commitments, with multiple initiatives, platforms and tools emerging over the years to support countries in achieving targets. These range from global and overarching, to disease- or product-specific initiatives, led by various stakeholders from WHO and other global health institutions to civil society and industry.

Technical and advocacy tools and initiatives therefore exist, yet poor coordination and implementation to date challenge the achievement of the targets. Existing policies and frameworks are not consistently or effectively applied at national and global levels, and alignment and awareness between different stakeholders is missing, leading to duplication and siloed approaches. These gaps highlight the need for improved coordination between advocates and stronger implementation of existing policies.

Access to NCD medicines and medical devices in the evolving global health architecture

Global health architecture is undergoing a significant transition, driven by a contraction in official development assistance, heightened scrutiny of multilateral effectiveness, and parallel reform processes across United Nations entities and global health initiatives. Within this context, access to medicines and medical devices has emerged as a central issue, given that a substantial share of remaining external health financing continues to be channeled through product- and disease-focused mechanisms (Chang *et al.* 2019; Buffardi 2018; Amanda Glassman *et al*. 2020).

Countries face increased urgency to fulfil their responsibility for financing, procuring, and delivering essential medicines and medical devices for their populations, while global actors reconsider how best to support national self-reliance in a more constrained environment. NCD programmes have long grappled with challenges of sustainable access, domestic financing and integration into health systems as they have not received the same political attention as other global health priorities and are historically underfunded and excluded from vertical financing models. Despite the large burden in LMICs, it is estimated that only 1-2% of total development assistance for health (DAH) has been dedicated to NCDs in the past 20-30 years. Due to this, countries have had no choice but to finance their NCD response through domestic budgets. Moreover, NCDs are a clear example of the potential for maximising limited resources via integrated responses and cost-effective interventions.

More efficient spending on NCD care is needed

An NCD Alliance report finds that:

- Access to medicines is the largest bottleneck to expanding NCD services and the major driver of financial risk.
- Governments are under-spending on NCDs relative to the resources required for essential services (NCD Alliance 2025b). While countries should be aiming to spend 1.1 to 1.7% of gross national income (GNI) on essential NCD primary healthcare (PHC) interventions, currently most are investing only 0.26 to 0.46%.
- Resources are being used inefficiently: for example, stable chronic conditions are often being managed at hospitals instead of primary healthcare clinics, and the cost of medicines varies widely, suggesting that many countries are paying too much for these medicines.
- If countries procured medicines at the lowest observed prices, spending needs could fall by 20–50%, demonstrating the importance of smarter and more coordinated health policies.

Countries calling for global health institutions to invest in NCDs

A new report by UNAIDS and United for Global Mental Health finds that Global Fund allocated funding for NCDs, cancers, mental health and substance use conditions (US$ 61.6 million) is far lower than the demand from countries for integrating comorbidities into HIV and TB programming (US$ 554.7 million). 97% of countries requested integration of at least one comorbidity in grants (Global Fund and UNAIDS 2026).

Advocacy priorities

The recommendations are structured around five key steps of the pharmaceutical value chain that are needed to ensure access: **selection and reimbursement, regulatory processes, forecasting, procurement and pricing**. The ultimate goal at the end of these steps is sustainable access to essential NCD medicines, diagnostics, and medical devices, and inclusion of the product in **national reimbursement packages and/or UHC**.

For Member States:

ALIGN:

- **Ensure that national policies, clinical guidelines, Essential Medicines Lists (EMLs)/Essential Diagnostics Lists (EDLs), procurement prioritisation, national formularies and reimbursement packages and other relevant documents for NCDs are aligned with each other and with WHO guidance**, recognising the critical role played by evidence-based selection and use of medicines, diagnostics, and medical devices.

IMPLEMENT:

- **Ensure that national policies, clinical guidelines, EMLs/EDLs, procurement prioritisation, national formularies and reimbursement packages and other relevant documents for NCDs are implemented** at the national level, and translate to the rational selection and procurement, prescription and use of appropriate medicines, diagnostics, and medical devices in-country.
- **Ensure quality and timely access, by streamlining national regulatory processes to accelerate approval for essential NCD medicines and medical devices,** as well as via stringent regulatory authorities and collaborative registration, for accelerated approval.
- **Strengthen forecasting systems and data collection for NCD medicines and medical devices,** by investing in Health Management Information Systems that can accurately estimate the need for medicines, diagnostics, and medical devices to ensure their consistent and reliable availability as well as contribute to strategic purchasing arrangements.
- **Strengthen and optimise national procurement systems** to reduce the cost of NCD medicines, diagnostics, and medical devices through strategic purchasing mechanisms, including negotiated pricing agreements, and pooled or coordinated procurement.
- **Collaborate with regional and international initiatives to improve availability and affordability of NCD medicines, diagnostics, and medical devices** such as regional manufacturing, strategic purchasing arrangements, voluntary licensing, transfer of technology, skills and know-how, pooled funding and procurement, pricing negotiations with manufacturers and distributors, and incentives for providers of essential NCD medicines and medical devices.
- **Ensure affordability of essential NCD medicines, diagnostics, and medical devices** for governments and individuals through pricing policies such as reference pricing, cost-effectiveness and health technology assessments, tendering, negotiations, regulations for mark-ups in the supply and distribution chain, differential pricing and price transparency to ensure that essential NCD medicines, diagnostics and medical devices are affordable and accessible to all, in line with WHO guidance (WHO 2024).
- **Ensure that essential NCD medicines, diagnostics and medical devices are included in nationally defined health benefit packages and financed as part of UHC**, with financial protection mechanisms, availability through the public health sector, especially primary care, and clear referral pathways to specialist care when necessary.
- **Develop transparent health budgets with disaggregated data on NCD spending for monitoring and accountability**, to reduce duplicative efforts and help align health systems under an integrated approach (G20&G7 Health and Development Partnership 2025).

For the World Health Organization to support Member States:

- **Ensure that access to medicines, diagnostics and medical devices remains central to WHO efforts** by strengthening cross-departmental collaboration, recognising the importance of NCDs across access to health products, primary healthcare supported by strong referral systems to secondary and tertiary services, health systems financing, and the management of co morbidities throughout the life course.
- **Ensure that there is technical support to translate WHO guidance to national and regional contexts,** that these changes are promptly reflected into WHO processes and that there is adequate follow up on issues such as registration, pricing and training to ensure implementation and appropriate use.
- **Promote regulatory harmonisation for faster access to NCD medicines, diagnostics and medical devices**, by exploring the expansion of current initiatives such as WHO Collaborative Registration Procedure and Pre-Qualification to cover a broader range of NCD medicines and devices, as well as diagnostic tests to ensure their quality, safety, efficacy, and affordability, particularly in low- and middle-income countries.
- **Support regional and global initiatives to improve availability and affordability of NCD medicines, diagnostics and medical devices**, such as regional manufacturing, strategic purchasing arrangements, voluntary licensing, technology transfer, pooled funding and procurement, pricing negotiations with manufacturers and distributors, promoting the uptake of quality assured generics and biosimilars, and incentives for providers of essential NCD medicines and medical devices.

For other actors:

- **Global health initiatives (GHIs)** should support and accelerate the shift towards integrated, person-centred models of care that address both NCDs and infectious diseases and build broader health system capacity. While GHIs are unlikely to fundamentally change their mandates, working 'diagonally' within existing frameworks by combining disease-specific or vertical funding with system-strengthening efforts would offer a realistic pathway towards better integration of NCDs into current global health priorities.
- **Non-governmental organisations** and civil society should work together on common advocacy priorities and initiatives to avoid siloes and duplication of efforts, as well as monitor and hold governments and institutions accountable for commitments to improving access and financial protection.
- **Non-governmental organisations and civil society** should support access through strong, cross-disease, evidence-based technical advocacy, ensuring global advocacy translates to regional and national levels, supported by the Pathways to Access advocacy toolkit.
- **The relevant private sector** should increase the diversity in and uptake of clinical trials in LMICs to combat the growing burden of NCDs, comprehensively consider aspects of accessibility, including affordability, supply and intellectual property management in their research and development access plans early on in the development pipeline, enable voluntary licensing and technology transfer to support the availability of generic medicines, diagnostics, and medical devices, as well as developing transparent pricing and affordability strategies (Access to Medicine Foundation 2025).[I]

I This recommendations is based on findings by the Access to Medicines Foundation.

References

Access to Medicine Foundation. 2025. 'What the 4th High-Level Meeting (HLM) on NCDs Should Prioritise When Engaging the Pharmaceutical Industry.' March.

Amanda Glassman, Kalipso Chalkidou, Lydia Regan, and Y-Ling Chi. 2020. 'Getting to Convergence: How "Vertical" Health Programs Add Up to A Health System.' *Center For Global Development*. https://www.cgdev.org/blog/getting-convergence-how-vertical-health-programs-add-health-system.

Buffardi, Anne L. 2018. 'Sector-Wide or Disease-Specific? Implications of Trends in Development Assistance for Health for the SDG Era.' *Health Policy and Planning* 33 (3): 381–91. https://doi.org/10.1093/heapol/czx181.

Chang, Angela Y., Krycia Cowling, Angela E. Micah, et al. 2019. 'Past, Present, and Future of Global Health Financing: A Review of Development Assistance, Government, out-of-Pocket, and Other Private Spending on Health for 195 Countries, 1995–2050.' *The Lancet* 393 (10187): 2233–60. https://doi.org/10.1016/S0140-6736(19)30841-4.

Fleming, Kenneth, Susan Horton, Michael L. Wilson, Rifat Atun, Kristen De Stigter, and John Flanigan. 2021. 'The Lancet Commission on Diagnostics: Transforming Access to Diagnostics.' *The Lancet Commissions* 398 (10315).

G20&G7 Health and Development Partnership. 2025. Health20 Summit - Chairpersons' *Conclusions Reimagining Partnerships & Building Back Public Trust in Global Health*.

Global Fund and UNAIDS. 2026. *Review and Mapping of Global Fund Investments in Priority Comorbidities in Grant Cycle 7 to Improve the Health and Well-Being of People Living with or at Risk of HIV and/or TB*. https://unitedgmh.org/the-global-advocate/review-of-global-fund-investments/.

NCD Alliance. 2025a. *Access to Essential Medicines, Diagnostics and Medical Devices for NCDs: Priorities for the 4th UN High-Level Meeting on NCDs.* https://ncdalliance.org/resources/access-to-essential-medicines-diagnostics-and-medical-devices-for-ncds-priorities-for-the.

NCD Alliance. 2025b. *Delivering on Health and Financial Protection for All: Financing Benchmarks for Essential NCD Services and Options for Improving Access to Affordable NCD Medicines.* https://ncdalliance.org/resources/delivering-on-health-and-financial-protection-for-all-financing-benchmarks-for-essential.

UN General Assembly. 2025. *Political Declaration of the Fourth High-Level Meeting of the General Assembly on the Prevention and Control of Noncommunicable Diseases and the Promotion of Mental Health and Well-Being.* https://www.who.int/publications/m/item/political-declaration-of-the-fourth-high-level-meeting-of-the-general-assembly-on-the-prevention-and-control-of-noncommunicable-diseases-and-the-promotion-of-mental-health-and-well-being.

WHO. 2024. *Supporting Member States in Reaching Informed Decision-Making on Engaging with Private Sector Entities for the Prevention and Control of Noncommunicable Diseases: A Practical Tool.* https://www.who.int/publications/i/item/9789240094840.

WHO and World Bank. 2025. *Tracking Universal Health Coverage (UHC): 2025 Global Monitoring Report.* https://www.worldbank.org/en/topic/universalhealthcoverage/publication/2025-global-monitoring-report-gmr.

World Health Organisation. 2011. *NCD Global Monitoring Framework.* https://www.who.int/publications/i/item/ncd-surveillance-global-monitoring-framework.

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Accelerating action on NCDs to promote health, protect rights and save lives

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