



Impact case studies

September 2026

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Introduction

Transforming access to healthcare in a new era

Every day, remarkable medical innovations save and protect lives. From new vaccines and diagnostics to treatments for infectious diseases, cancers and other chronic conditions, scientific progress pushes the limits of what we thought possible just a few decades ago. Yet, every day, millions of people miss out on the health products that could change their lives.

MedAccess exists to change that.

Our partnerships – fuelled by patient capital to shape health markets – are helping people in more than 120 countries to access life-changing health products. Our guarantees have accelerated the use of highly effective next-generation mosquito nets. They have enabled millions of pregnant women to protect their unborn babies by being tested for syphilis. And they have helped ensure continued production of the world’s first malaria vaccine. Behind every agreement, every product delivered and every market shaped are individuals, families and communities with greater opportunities to live healthy, productive lives.

Every MedAccess agreement depends on the expertise, commitment and shared purpose of manufacturers, governments, investors, procurers, global health organisations and civil society partners. We combine our individual strengths to target specific problems with tailored solutions, creating the conditions for affordable pricing, reliable supply and long-term sustainability.

Over the past year, the global health landscape has changed dramatically. Funding pressures, evolving procurement systems and a growing focus on regional manufacturing have created both challenges and opportunities. In response, MedAccess has expanded its network of partners across the public and private sectors to build practical, sustainable solutions that expand access to essential health products.

Guided by our five strategic priorities, we are focusing our energy where innovative finance and market shaping can unlock the greatest change: accelerating innovation uptake, scaling proven solutions, strengthening regional manufacturing, building next-generation procurement systems and enhancing domestic and private financing. These priorities reflect our firm belief that innovative finance and market shaping will play a central role in supporting country health leadership.

Thank you for taking the time to learn more about our work. I hope these stories leave you with the same sense of optimism and determination that inspires us every day.



Warm wishes

Michael Anderson

Michael Anderson
Chief Executive Officer, MedAccess
manderson@medaccess.org

5 strategic priorities



Accelerate innovation uptake



Scale proven solutions



Strengthen regional manufacturing



Build next-generation procurement systems



Enhance domestic and private financing

Introduction

MedAccess at a glance

At MedAccess

We work across **multiple health areas**, including:



Cancer



HIV



Malaria



Nutrition



Oxygen



Sickle Cell Disease



Syphilis



TB

... helping people in
**more than
120
countries...**



... to access **life-changing products**



Vaccines



Diagnostics



Treatments



Other prevention tools



Nutritional supplements

Our agreements

We **shape markets** by:

Pioneering **new pricing models** in LMIC markets

Supporting the **introduction of innovative products** into LMICs

Building competition by removing barriers for suppliers to grow presence in LMIC markets

Securing supply commitments for LMICs' access to health products

In 2025 alone, our guarantees enabled manufacturers to
enter 24 new markets

... unlocking **economic** and **commercial benefits**

\$228m
in direct savings
for procurers



\$872m
worth of sales
unlocked

(Since 2017 through volume guarantee agreements)

... and **saving** and **improving** lives

3.8m
additional children with vitamin A deficiency reached

2.6m
children vaccinated against malaria

162k
stillbirths averted

46,200
additional people with multidrug-resistant TB experienced improved treatment outcomes

19,800
people with HIV started treatment

(Impact from selected agreements since 2017)



HIV | Syphilis
Increasing access to dual HIV and syphilis testing
2021–2025



While HIV testing in antenatal care has reached high levels in many countries, syphilis screening has lagged behind, despite World Health Organization (WHO) guidance that all pregnant women should be tested at their first antenatal visit. This gap contributes to preventable stillbirths, neonatal deaths and other adverse pregnancy outcomes.

MedAccess partnered with SD Biosensor and CHAI to support the introduction and scale-up of dual HIV and syphilis rapid diagnostic tests, allowing two essential screenings to be delivered in a single visit. By the end of 2025, the partnership had enabled pregnant women in 61 countries to benefit from simultaneous screening for these two major causes of adverse pregnancy outcomes.

Through a volume guarantee, MedAccess reduced SD Biosensor’s market risk, enabling the company to lower the price of its dual HIV/syphilis test to below \$1 for public purchasers in more than 100 low- and middle-income countries. The lower price accelerated a shift from separate HIV and syphilis tests – with countries often forced to choose between the two – to combined testing, helping

countries integrate syphilis screening into established antenatal care platforms with minimal additional cost or operational complexity. The test also improved efficiency for frontline health workers and aligned dual testing with existing HIV testing budgets.

The agreement enabled rapid adoption and early integration of dual testing into national antenatal screening programmes. Countries scaled more quickly from initial introduction to routine use, helping to close long-standing gaps between HIV and syphilis testing coverage. The entry of SD Biosensor as an additional, competitively priced supplier also strengthened supply security and improved procurement predictability.

Over time, increased demand enabled production efficiencies and further price reductions, reaching a record low of \$0.84 per test in 2026. The partnership has helped procurers move from fragmented early uptake towards a more mature and sustainable market, with wider implications for integrated diagnostics.

In partnership with

 SD BIOSENSOR



770,000
additional pregnant
women treated

162,000
stillbirths averted

\$13.6m
saved for procurers

“



This partnership helped more pregnant women access lifesaving testing in a single visit. Earlier syphilis diagnosis means earlier treatment, healthier pregnancies, and a better start in life for thousands of babies.

Dr Tristana Perez,
Head of Impact



Scale proven
solutions

In partnership with



1.23m
additional people
tested for HIV

19,800
people starting HIV
treatment

\$1.12m
saved for procurers

“



Everyone deserves to know their HIV status without barriers or stigma. By expanding access to self-testing, we are helping more people take control of their health and access care sooner.

Emilie Gard,
Health Investment Analyst



Scale proven
solutions

HIV

Expanding discreet, affordable HIV self-testing 2022–present



More than 40 million people worldwide are living with HIV. Testing is the gateway to prevention, treatment and care, yet nearly five million people do not know their status. Many people at higher risk of HIV, including men who have sex with men, trans and gender-diverse people, sex workers and people who inject drugs, may avoid health facility testing because of stigma, discrimination or criminalisation. This leaves them without treatment and at risk of unknowingly passing the virus to others.

Self-testing enables people to test quickly, conveniently and discreetly, while reducing the burden on healthcare workers. Although the World Health Organization (WHO) recommends self-tests as part of HIV testing services, and WHO-prequalified products have been available since 2017, high prices limited their use.

In 2022, MedAccess partnered with diagnostics manufacturer Wondfo to secure a \$1 price for a blood-based HIV self-test – the lowest ever for an HIV self-test and 50% below the most widely used product. Through MedAccess’ volume guarantee,

Wondfo had greater certainty over future demand, enabling the company to offer the test at this record-low price in 140 low- and middle-income countries. CHAI helped facilitate the guarantee and supports countries to adopt WHO-prequalified HIV self-tests.

Using a finger prick blood sample, the test provides accurate results in less than 30 minutes. People who test positive can then seek a confirmatory test with a qualified health worker.

By expanding access to affordable self-tests, the partnership helped national HIV programmes and partners scale up self-testing, prevention and treatment. By the end of 2025, it had enabled 1.23 million additional people to be tested, leading to 19,800 people beginning lifesaving HIV treatment, while saving procurers \$1.12 million. The low price has also become a market benchmark, driving competition and helping make HIV self-testing more affordable.

HIV

Redefining the market for viral load testing 2018–2022



Viral load testing shows whether HIV treatment is working. This helps reduce the spread of the virus and prevents drug resistance. The World Health Organization recommends testing six months after starting antiretroviral therapy (ART) and then every 12 months. When a person’s treatment is working, their viral load is suppressed, they stay healthier and they cannot transmit the virus. If it is not, their healthcare provider can switch them to another regimen.

In 2017, only 81% of people receiving ART were virally suppressed, and millions of people living with HIV lacked access to viral load testing. In many countries, high costs for diagnostic platforms and supplies, poor maintenance and limited operating budgets prevented regular testing.

From 2018 to 2022, MedAccess provided a volume guarantee to Hologic, enabling the company to offer the world’s first all-inclusive ceiling price of \$12 per patient test on its Panther® platform. This price – a 50% reduction for some countries – included supplies and equipment maintenance. In return for the lower price, MedAccess

committed to make a shortfall payment to Hologic if patient volumes fell short of projections.

By the end of the agreement in 2022, more than 932,000 people with unsuppressed HIV viral load had been identified, 457,000 people had switched to appropriate second-line treatment and 13 countries were using the Panther® platform for HIV viral load testing.

The guarantee changed the viral load testing market as Hologic’s per-patient-test price became the benchmark for global health purchasers. By the end of 2022, it had generated \$45 million in savings for procurers including the Global Fund and PEPFAR, freeing funding for reinvestment in HIV programmes.

By making routine monitoring more affordable, MedAccess’ guarantee helped strengthen HIV treatment programmes. Alongside wider improvements in treatment and care, these advances contributed to 95% of people receiving ART achieving viral suppression by 2025, meeting UNAIDS’ target.

In partnership with



932,000
patients not virally
suppressed identified

457,000
switched to second-line
treatment

\$45m
direct savings for
procurers

“



MedAccess’ first guarantee showed how innovative finance can support a company to move a whole market in a new direction, bundling tests with support services at an affordable and transparent price.

Evans Mburu,
Head of Implementation



Scale proven
solutions

In partnership with



46,200
additional patients
experienced improved
treatment outcomes

39,700
adverse events averted

\$20.4m
saved for procurers



Timing was critical when announcing a new pretomanid ceiling price. MedAccess and partners collaborated closely to announce the new price immediately after new WHO guidance on BPaLM to build momentum for access to the regimen.

Gillian Leitch,
Head of HIV, TB & AMR



Tuberculosis

Lowering costs for pretomanid to tackle drug-resistant TB

2022–present



Drug-resistant TB, when bacteria become resistant to standard antibiotics, is one of the deadliest forms of antimicrobial resistance. Previously available treatments required up to 20 pills a day for as long as 20 months, often with toxic side effects. As a result, many patients stopped taking the medicine, and treatment success rates in 2020 were just 64%.

In 2022, the World Health Organization recommended BPaLM, a six-month regimen combining relatively new drugs: bedaquiline and pretomanid plus linezolid and moxifloxacin. The regimen is shorter, more effective and has fewer side effects, but the higher price that often accompanies new products initially put it out of reach for many patients.

TB Alliance developed pretomanid, the Pa in BPaLM, and granted non-exclusive licences for high-burden, low- and middle-income countries to several manufacturers, including Viatris. In December 2022, MedAccess worked with Viatris and TB Alliance to reduce the price of pretomanid

by 34% for more than 130 low- and middle-income countries, bringing the overall cost of BPaLM closer to the target price recommended by TB advocates.

MedAccess provided Viatris with a volume guarantee in return for the lower price. If sales fall short of agreed targets, MedAccess will make a payment to the manufacturer, reducing financial risk and giving Viatris the assurance needed to maintain production and affordable pricing.

By the end of 2025, the partnership had contributed to an additional 46,200 patients experiencing improved treatment outcomes, helped avert 39,700 health complications requiring hospitalisation or causing disability, and saved governments, non-governmental organisations and public sector procurers \$20.4 million – savings that can be reinvested in TB care.

Thanks to new treatments like BPaLM and wider efforts to improve TB care, treatment success rates for drug-resistant TB rose from 64% in 2020 to 71% in 2024.

Tuberculosis

Making 3HP TB preventive treatment more affordable

2021–2023



About one-quarter of the world's population has TB infection, also known as latent TB. Most people have no symptoms and will never develop TB disease, but without treatment 5–10% will. People living with HIV and household contacts of people with TB disease, particularly children under five, are at higher risk.

TB preventive treatment can stop infection progressing to disease. The previous standard of care, isoniazid preventive therapy (IPT), was developed more than 60 years ago. While effective, it required a daily pill for six months or more. Many people did not complete the full course, leaving them at risk.

A newer treatment regimen, called 3HP, is easier to complete: one dose a week for three months. The fixed-dose combination of isoniazid and rifapentine has fewer side effects and much higher completion rates than IPT – 90% compared with 50%. Although the World Health Organization recommended 3HP for TB prevention in 2018, uptake was slow because of higher costs and limited supply.

In 2021, MedAccess provided a volume guarantee to Macleods, enabling the Indian manufacturer to scale up production while reducing the price per patient course from \$40 to \$15 for 138 low- and middle-income countries. In 2022, Macleods reduced the price further to \$14.25. The agreement complemented the Unitaïd-funded IMPACT4TB programme led by The Aurum Institute with CHAI, KNCV Tuberculosis Foundation and Johns Hopkins University.

By the end of the agreement in 2023, the partnership had contributed to 661,000 additional people living with HIV completing treatment with 3HP, averted 166,000 hospitalisations from treatment side effects compared with IPT, and prevented 1.3 million cases of TB infection in household contacts. Fifty-two countries purchased 3HP under the agreement, saving procurers \$29 million. The lower price set a new benchmark, and a second supplier entered the market at the same price, improving competition, supply sustainability and product choice.

In partnership with



661,000
additional people
completing treatment
with 3HP

166,000
hospitalisations due
to treatment side
effects averted

1.3m
approximate cases of
latent TB in household
contacts averted



Preventing tuberculosis saves lives and protects communities. By expanding access to shorter preventive treatment, this agreement helped stop TB before it starts and reduced suffering for families.

Michael Anderson,
Chief Executive Officer



In partnership with



20,500
additional people
on any treatment

42,300
P. vivax malaria
relapses averted

\$2m
saved for procurers

“



This agreement shows the impact that a targeted guarantee can have on a relatively small market. By supporting SD Biosensor, we ensured that the market remained active ahead of new entrants.

Kaodili Udeh,
Head of Regional Manufacturing



Accelerate innovation uptake



Scale proven solutions

Malaria

Enabling safe treatment for *P. vivax* malaria with G6PD testing

2022–2025



Several different species of parasite cause malaria, a disease that kills more than 600,000 people each year. *P. vivax* causes fewer deaths than other species but is difficult to eliminate because it can remain dormant in the liver after the bloodstream infection clears, re-emerging weeks or months later to cause repeated illness. Severe cases can be fatal.

Treatment for *P. vivax* malaria requires medicines that clear the parasite from both the bloodstream and liver. However, the dose required to clear *P. vivax* in one go can cause severe anaemia in people with glucose-6-phosphate dehydrogenase (G6PD) deficiency, which affects more than 400 million people worldwide. In 2023, the World Health Organization (WHO) therefore recommended G6PD testing to guide safe treatment.

Many countries lacked affordable, reliable access to G6PD tests. Despite more than 5.4 million *P. vivax* cases in 2022, testing demand was uncertain ahead of WHO's recommendation and the market remained small. Some suppliers left the market, and doctors often prescribed longer, lower-dose treatment courses. Patients often stopped

treatment once they felt better, leaving the infection unclear and increasing relapse.

In 2022, MedAccess partnered with PATH and SD Biosensor, the producer of the only quantitative point-of-care G6PD test then available. The portable STANDARD G6PD Test uses a pinprick of blood to measure enzyme activity in two minutes, helping health workers choose treatment quickly. MedAccess provided SD Biosensor with a volume guarantee to support demand certainty and continued production. In return, SD Biosensor reduced device and test strip prices, while PATH supported countries to introduce testing and increase radical cure uptake.

In 2024, Brazil became the first country to introduce point-of-care G6PD testing alongside single-dose tafenoquine treatment for *P. vivax* malaria. By the end of the agreement in 2025, the partnership had enabled 20,500 additional people to receive treatment, averted 42,300 *P. vivax* malaria relapses and saved procurers \$2 million. The guarantee also kept the G6PD testing market active while new suppliers prepared to enter, supporting a more competitive, sustainable market.

Malaria

Securing production of RTS,S, the world's first malaria vaccine

2021



In 2021, MedAccess partnered with Gavi, the Vaccine Alliance, and GSK to maintain production of RTS,S, the world's first malaria vaccine. RTS,S protects young children against *P. falciparum*, the parasite responsible for the deadliest form of malaria. Given to children aged 5–17 months in a four-dose schedule, it had been shown to reduce malaria cases by more than 50% in the first year and child mortality by 13%.

At the time, RTS,S implementation pilots were underway in Ghana, Kenya and Malawi. Wider rollout depended on two decisions: a World Health Organization (WHO) recommendation and Gavi funding for a malaria vaccination programme. GSK had produced enough doses for the pilot, but without certainty on demand it could not guarantee continued production. If manufacturing stopped while decisions were pending, restarting and scaling up would have taken significant time, delaying access for millions of children.

To bridge this gap, MedAccess, Gavi and GSK developed an innovative financing arrangement. Gavi agreed to fund continued RTS,S production for up to three

years. If WHO recommended the vaccine and Gavi's Board approved rollout, GSK would credit Gavi's funding towards future RTS,S purchases. If the programme was not approved, MedAccess would reimburse Gavi for most of the costs incurred. This reduced Gavi and GSK's financial risks before demand was certain and ensured supplies would be available sooner after approval.

WHO recommended RTS,S for widespread use in October 2021, and Gavi approved funding two months later. Because production had continued uninterrupted, countries were able to introduce the vaccine faster than would otherwise have been possible.

Since rollouts began in 2024, MedAccess estimates the agreement has enabled 2.6 million children to be vaccinated, prevented three million malaria cases, averted more than 12,100 deaths and generated US\$93.6 million in savings for procurers. Alongside other prevention tools, RTS,S is helping improve malaria prevention for children in Africa.

In partnership with



2.6m
children vaccinated

3m
malaria cases averted

12,100
deaths averted

“



Innovative finance is most effective when it is tailored to address a specific problem. In this case, we used our capital to address a problem that could have delayed the rollout of the world's first malaria vaccine.

Guy Pickles,
Head of Vaccines



Accelerate innovation uptake

In partnership with



BASF
We create chemistry

Gates Foundation

15.6m
cases averted (additional
to standard nets)

122,000
severe cases averted

36,200
deaths averted (additional
to standard nets)

“

By partnering with BASF, we helped ensure that tens of millions of people were protected with an innovative and highly effective new tool ahead of an expected WHO recommendation.

Jonathan Hutchins,
General Counsel &
Chief Operations Officer



Accelerate
innovation uptake

Malaria
Accelerating access to next-generation mosquito nets
2019–2022



Malaria remains one of the world’s deadliest diseases, killing more than 600,000 people each year. Around 95% of deaths occur in sub-Saharan Africa, with young children most at risk.

Insecticide-treated mosquito nets have saved hundreds of millions of lives by protecting families while they sleep. But growing mosquito resistance to pyrethroids, the main insecticide used in standard nets, threatens their effectiveness.

To respond to this threat, the Innovative Vector Control Consortium and BASF developed Interceptor® G2, a next-generation net combining pyrethroids with chlorfenapyr, an insecticide class new to public health. During trials, the nets were highly effective at reducing malaria infections and hospitalisations. However, order volumes remained low as countries waited on a recommendation for use from the World Health Organization.

MedAccess worked with BASF and the Gates Foundation on a volume guarantee for 35 million nets. Greater assurance on volumes helped BASF plan production, scale up supply and reduce prices by up to

40%, making the nets more affordable for countries where resistance was rising.

By the end of the agreement in 2022, more than 41 million nets had been shipped to 19 African countries through the President’s Malaria Initiative and the New Nets Project, a partnership led by IVCC and co-financed by the Global Fund and Unitaid. The Interceptor® G2 nets were calculated to have averted 15.6 million malaria cases and saved 36,200 lives over their three-year lifespan. By preventing illness, the nets helped health systems save \$34.2 million in treatment costs, while agreement-backed price reductions generated at least \$24 million in direct savings for procurers.

Studies in Tanzania and Benin showed that nets treated with chlorfenapyr and pyrethroid reduced malaria incidence by 44% to 46% compared with standard, pyrethroid-only nets. In 2023, based on these studies, WHO recommended dual-insecticide nets instead of pyrethroid-only nets, enabling more countries to introduce the new technology and encouraging additional manufacturers to enter the market.

Nutrition
Helping millers fortify cooking oil with vitamin A
2025–2026



Food fortification is one of the most cost-effective public health interventions available. Good nutrition reduces the risk of illness and death from common infections. Adding essential vitamins and minerals to foods people consume every day can improve nutrition across entire populations without requiring changes in eating habits or behaviour.

Many low- and middle-income countries require edible oil to be fortified with vitamin A as part of national food fortification programmes. However, oil millers often face volatile prices or shortages of vitamin A premix, making it harder to plan production and maintain oil fortification over time. Improving access to affordable, consistently fortified foods is therefore both a nutrition challenge and a market challenge.

MedAccess worked with dsm-firmenich to stabilise the vitamin A market. In return for a volume guarantee, the company agreed to offer its vitamin A and a vitamin A/D3 blend at an agreed ceiling price in 73 low- and middle-income countries. This gave edible oil millers in these countries better visibility on their input costs and assurances that prices would not spike as violently as in the past.

In return for dsm-firmenich’s ceiling price, MedAccess has committed to make a payment for any shortfall in sales volumes. By reducing price volatility, the agreement gives manufacturers greater confidence to continue fortifying edible oil, even during periods of market uncertainty.

In the first year, more than 3.8 million children with vitamin A deficiency were reached, helping reduce associated health risks, and oil manufacturers saved \$1.39 million. Through this guarantee, millions of families have benefited from affordable access to edible oil fortified with vitamin A, helping children and pregnant women access a key nutrient they need to grow and stay healthy.

In partnership with



3.8m
additional children with
vitamin A deficiency reached

\$1.39m
saved for edible oil millers

“

Simple interventions can have extraordinary impact. By improving access to vitamin A, this agreement supports healthier childhoods, strengthens immune systems and helps children thrive in their earliest years.

Thili Sutharson,
Senior Health Investment Associate



Scale proven
solutions

In partnership with



“



These agreements showed what is possible when partners come together at speed and scale. They helped countries access critical COVID-19 tools and better protect communities during a global crisis.

Michael Anderson,
Chief Executive Officer



Build next-generation
procurement systems



Enhance domestic
and private financing

COVID-19 exposed deep inequalities in access to essential health products. As demand surged, low- and middle-income countries faced supply shortages, export bans and volatile prices for even basic medical supplies. Many were quoted prices up to 20 times higher than before the pandemic, while richer countries secured early access to vaccines, diagnostics and protective equipment.

MedAccess responded with two guarantees designed to help global partners move quickly and protect lower-income countries from being pushed to the back of the queue.

In 2020, MedAccess provided a \$50 million procurement guarantee to UNICEF, the world's largest procurer of vaccines and essential supplies. The guarantee helped UNICEF to place larger advance orders for COVID-19 supplies before country payments

COVID-19

Supporting an equitable response to COVID-19

2020–2023



had been received, helping secure products at scale and reduce delivery delays. It supported procurement of masks, gowns, oxygen concentrators, laboratory tests, rapid tests, syringes and immunisation supplies, alongside other essential health products.

By the end of 2022, the UNICEF guarantee had helped supply more than 2.8 billion syringes and safety boxes for safe injections, 456 million COVID-19 and childhood vaccines, and 9.8 million diagnostics and equipment. Countries received products on average seven months sooner than they would have without access to UNICEF's pooled purchasing power.

In 2022, MedAccess joined Gavi and the Open Society Foundations to support the COVAX Cost-Sharing Mechanism.

MedAccess provided a \$100 million guarantee as part of a \$200 million Risk Sharing Facility, enabling COVAX to meet projected demand from 92 lower-income countries seeking additional COVID-19 vaccine doses beyond donor-funded commitments.

Together, these agreements showed how innovative finance can help partners act quickly in a crisis. By backing UNICEF and COVAX, MedAccess helped countries access critical supplies and vaccines faster, protecting health workers, supporting immunisation programmes and strengthening the global response to COVID-19.

Multiple health areas

Bridging financing gaps for essential medical supplies

2023–present



In partnership with



“



Health systems depend on timely, affordable access to essential medical products. This partnership helps UNICEF respond quickly to country requests, so vital supplies can reach people when they are needed most.

Michelle Teo,
Chief Investment Officer



Build next-generation
procurement systems



Enhance domestic
and private financing

Reliable access to vaccines, medicines and other essential health products depends on countries being able to purchase them when they are needed. Rather than negotiate with manufacturers product-by-product, many low- and middle-income countries rely on UNICEF's purchasing power to ensure they can access secure supplies at affordable prices.

UNICEF's Vaccine Independence Initiative (VII) helps countries purchase billions of dollars worth of health products each year. The mechanism allows governments to place orders through UNICEF's procurement services and receive deliveries in advance of making payment.

Originally established to support vaccine procurement, VII has expanded to include diagnostics, medical oxygen equipment, medicines, mosquito nets and other health supplies. VII is particularly important for countries that lack regular access to donor-funded procurement mechanisms and that may not have the procurement systems or negotiating clout to secure reliable supplies and affordable prices on the open market.

We first provided a \$50 million procurement guarantee to UNICEF in 2020 to help reduce country waiting times for COVID-19 supplies and other essential health products. Building on this partnership, in 2023 we provided a new \$10 million guarantee to support VII, increasing it to \$30 million in 2024 and then to \$50 million in 2026. The current agreement runs until 2030.

The guarantee expands the financing available through VII, enabling UNICEF to continue to place orders ahead of receiving funds from countries or donors. This can accelerate access to essential health products by four to six months, while also giving UNICEF greater flexibility to undertake surge procurement for emerging disease outbreaks, climate-related or humanitarian crises, and immunisation programmes.

In 2025 alone, our guarantee supported the pre-financing of \$226 million worth of health products across 35 countries, helping to ensure children and families do not miss out on essential health products due to temporary cash shortfalls.

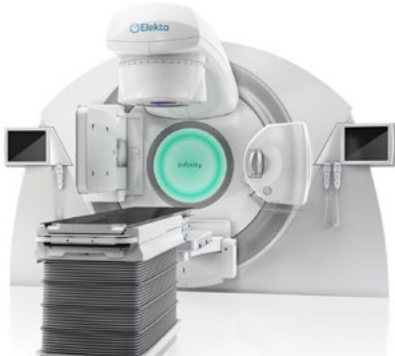


Partnering for impact

Driving impact in new health areas

In partnership with







Scale proven solutions

Projected impact

up to
22,400
more cancer patients treated

up to
1,700
more people surviving for at least five years post-treatment

An innovative pay-per-use model for radiotherapy

2025–present

Radiotherapy is essential for many cancers, using high-energy radiation to damage cancer cells while minimising harm to healthy tissue. Radiotherapy machines are expensive to buy, operate and maintain. This can lead to machines sitting unused as service and maintenance costs are usually additional to the initial capital investment.

MedAccess and Elekta are addressing this through a pay-per-use model for public and public-private facilities in Kenya and Tanzania. Countries pay a smaller upfront fee, then make per-user payments when patients begin treatment. The package includes equipment, service and maintenance.

MedAccess backs the model with a volume guarantee. For each installed machine, it guarantees Elekta minimum revenue based on projected patient volumes. If demand is lower than expected, MedAccess makes a shortfall payment. This reduces supplier and procurer risks and helps hospitals increase access to radiotherapy through a more affordable financing model.

Based on projected installations, 22,400 additional cancer patients who would otherwise have gone untreated could receive radiotherapy during the first six years, with an estimated 1,700 more people surviving at least five years after treatment.

In partnership with







Strengthen regional manufacturing

Projected impact

840,000
receiving oxygen

126,000
critically ill patients receiving oxygen

\$6m
saved for procurers

Boosting regional production of medical oxygen in East Africa

2025–present

Sub-Saharan Africa has the world’s largest oxygen access gap, with some countries meeting the needs of less than 10% of patients. Access barriers include limited local production, high transport costs and fragmented procurement.

MedAccess is part of the East African Programme on Oxygen Access with Unitaid, CHAI, PATH and the governments of Kenya and Tanzania. Working with regional manufacturers, the programme aims to boost local production of liquid medical oxygen and lower prices by up to 27%.

MedAccess has provided volume guarantees to Hewatele and Synergy in Kenya. The companies will supply medical oxygen to health facilities across Kenya and neighbouring countries at or below an agreed ceiling price. If sales fall short, MedAccess will make payments to the companies, reducing their risks and supporting increased production.

By 2029, the agreements are projected to help health facilities provide oxygen to 840,000 more people, including 126,000 critically ill patients, while saving health systems more than \$6 million.

In partnership with







Accelerate innovation uptake

Projected impact

6m additional people reached with sickle cell disease testing

Bringing laboratory-quality sickle cell testing closer to patients

2025–present

In many low-resource settings, diagnosing sickle cell disease requires trained technicians and costly laboratory equipment often unavailable outside major hospitals. Children may wait years for an accurate diagnosis, while many are never diagnosed.

The Gazelle® platform addresses this challenge. The compact, portable device delivers laboratory-quality results in around eight minutes from a finger-prick blood sample, enabling point-of-care diagnosis without specialised infrastructure or training. Healthcare workers can diagnose sickle cell disease in one clinic visit instead of sending samples to distant laboratories.

By reducing the need for costly infrastructure, Gazelle® helps expand timely diagnosis in remote and underserved communities. It is accurate and easy to use in low-resource settings, and can also test for malaria, hepatitis and COVID-19.

To accelerate access to Gazelle®, MedAccess provided a US\$2.5 million working capital facility to Hemex Health, supporting manufacturing and expansion across India, the Middle East and sub-Saharan Africa. The partnership is expected to improve access to testing for around six million people by 2028, helping more children receive earlier diagnosis and care.

In partnership with







Strengthen regional manufacturing

Projected impact

Will help increase production of vaccines against common childhood illnesses

Supporting regional vaccine manufacturing in Africa

2026–present

Africa accounts for around 17% of the world’s population and around 25% of global vaccine demand, yet more than 98% of vaccines used on the continent are imported. This dependence on overseas manufacturing leaves countries vulnerable to disruptions in global supply chains and limits regional resilience during health emergencies.

In 2026, MedAccess provided a US\$10 million loan to South African vaccine manufacturer Biovac, joining a consortium of development finance institutions and multilateral lenders. The funding will help Biovac build an end-to-end multi-vaccine manufacturing facility in Cape Town, with drug substance and fill-and-finish capability.

Once operational, the facility is expected to produce vaccines against cholera, polio, pneumococcal disease, meningitis and rotavirus. It could produce up to 50 million vials each year, equivalent to roughly 200–250 million doses, helping more communities access vaccines when they are needed most.

By strengthening local production, the agreement can help health workers plan vaccination campaigns with greater confidence and give families a better chance of receiving lifesaving vaccines on time. It also supports a more resilient African manufacturing ecosystem for priority vaccines.

Investors and funders

Thank you for supporting our work

Our funders and investors

In an era of declining funding for global health, our \$170 million capital from our anchor investor, British International Investment, allows us to invest with confidence. Our capital is unrestricted, meaning we can use it to support any product that we believe will make a meaningful difference to people’s health in low- and middle-income countries. We use our capital in two ways: to back our guarantees and loans and to generate investment returns to cover some of our agreement costs as well as operational overheads.

We also receive grant funding to target specific health areas. Our Global Fund Accelerator grant from the UK’s Foreign, Commonwealth & Development Office enables us to construct agreements that target HIV, tuberculosis and malaria as well as associated co-infections. Our work on improving access to nutrition via volume guarantees is funded through the Gates Foundation. We are scoping potential guarantees to increase access to mental health treatments in four African countries thanks to a grant from the Wellcome Trust agreed in September 2025. And through a grant from Coefficient Giving we are assessing which innovative finance and market shaping tools will help accelerate access to future TB vaccines. All of these grants enable us to do the detailed work required to shape effective agreements.

In November 2025, we announced a new innovative Guarantee Agreement with the European Investment Bank (EIB). Through the agreement, worth up to €52 million, EIB will provide a counter guarantee on eligible MedAccess guarantees covering up to 30% of potential losses. The partnership aims to increase access to medical supplies in Africa.

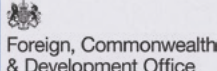
How their support powers impact

Grant funding enables us to do the work that turns capital into impact. It funds the detailed, labour-intensive effort required to design, model, diligence and negotiate agreements that strengthen markets and get health products to the people who need them.

Every MedAccess agreement is tailored to a specific product and market. That work starts with deep market analysis as MedAccess experts map country demand, access barriers and future market entrants.

We work closely with health officials to build robust demand and impact models, which shape our engagement with manufacturers from the outset.

Alongside this, we coordinate with country, regional and global partners to navigate complex funding, policy and regulatory pathways. Before any capital is deployed, we undertake detailed structuring and negotiations to ensure each agreement benefits all parties, while keeping health impact at the centre. When agreements are signed, our work continues, supporting implementation, helping countries prepare to scale and tackling problems as they arise.



Supporting information

Photography credits

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06: © UNICEF / UNI425937 / Dejongh, Chad – A mother with her child, at the refugee site of Adré, in the East of Chad, close to the border of Sudan.

07: © Arete / Bernard Kalu / MedAccess, Rivers State University Teaching Hospital, Port Harcourt Rivers State, Nigeria – Godwin Neebeh, a laboratory technician, sets up to conduct a HIV and syphilis test with the dual kits.

08: © CHAI – A man speaks to a healthcare worker.

09: © Hologic – The Panther® viral load testing machine.

10: © Dato Koridze / TB Alliance – Diagnosing TB often requires x-rays to see damage to the lungs.

11: © The Global Fund / Yousuf Tushar / Panos, Dhaka, Bangladesh – A patient takes her TB treatment at her home.

12: © MedAccess / MMV / PATH, Porto Velho, Brazil – Nurse Raissa training healthcare worker Angel on how to use the G6PD test.

13: © Gavi / White Rhino Films / Lameck Orina, Malava County Hospital Child Welfare Clinic in Kakamega, Kenya – Nurse Janet Wanyama vaccinates 9-month-old Brilliant Hope against malaria while his mother Julia Machanja watches.

14: © BASF / Oliver Lassen, Nigeria – Infants, children under five and pregnant women are the most vulnerable groups to malaria.

15: © UNICEF / UNO846229, Chiyenda Usiku, Balaka, Malawi – Lucia Juma a beneficiary of the social cash transfer programme and her 3-month-old baby Prince Patrick.

16: © UNICEF / UNI331385 / Haro – UNICEF supports the Government of Niger, IOM, and partners to deliver aid to migrants in the midst of the COVID-19 pandemic.

17: © UNICEF / UNI409319 / Brown, Copenhagen, Denmark – UNICEF staff members and volunteers pack boxes with supplies that will be shipped for children at the UNICEF Supply Division’s warehouse.

18: © UNICEF / Laxmi-Prasad-Ngakhusi, Nepal – Birma Devi Kunwar, a health staff in Darchula carrying lifesaving vaccines to the remote Health Post.

20: © Elekta – Elekta’s Infinity machine enables operators to treat a diverse range of patients on one multifunctional platform.

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22: © BASF / Xiao Nan – A warehouse full of mosquito nets manufactured by BASF.

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