

Barriers to accessing essential breast cancer medicines in sub-Saharan Africa, a scoping review protocol

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ADMINISTRATIVE INFORMATION

Support - None.

Review Stage at time of this submission - Piloting of the study selection process.

Conflicts of interest - None declared.

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Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 21 May 2026 and was last updated on 21 May 2026.

INTRODUCTION

R **ev**iew question / **O**bjective Review question / Objective

What are the barriers to accessing essential breast cancer medicines in sub-Saharan Africa (SSA)?

Objectives:

1. Identify regulatory challenges hindering access to essential breast cancer medicines across SSA.
2. Identify health system-related barriers affecting access to essential breast cancer medicines across SSA.
3. Identify economic and trade-related factors influencing affordability and availability of essential breast cancer medicines across SSA.
4. Examine how pharmaceutical system performance influences access to essential breast cancer medicines across SSA.
5. Identify country-specific or subregional (e.g., East, West, Central, Southern Africa) factors identified in the literature, if any.

6. Identify populations in SSA that are reportedly most disadvantaged in their access to essential breast cancer medicines.

Rationale Despite policy recognition through the WHO Model List of Essential Medicines (EML), the availability, affordability, and consistent use of essential breast cancer medicines remain highly uneven across SSA. Many countries face persistent challenges related to medicine selection and registration, procurement and supply chain inefficiencies, high prices and limited financing, gaps in health insurance coverage, and broader political and economic constraints. As a result, inclusion of medicines on the WHO EML does not reliably translate into equitable access at the point of care.

Barriers to accessing essential breast cancer medicines in SSA are complex and operate across multiple, interrelated levels of the health and pharmaceutical system, including regulatory frameworks, national essential medicines selection processes, procurement and supply chains, pricing

and financing mechanisms, health insurance coverage, and wider political and economic contexts. While individual studies, policy reports, and commentaries have examined aspects of these barriers, the evidence base is fragmented and dispersed across peer-reviewed and grey literature.

Given the diversity of health-system contexts within the region, and the mix of empirical studies, policy analyses, and descriptive reports addressing this topic, a scoping review is the most appropriate methodological approach to comprehensively characterise the literature, identify key themes and gaps, and clarify how access barriers are conceptualised and examined.

Condition being studied Background: Breast cancer is the most frequently diagnosed cancer among women globally and a leading cause of cancer related mortality in SSA. Although early-stage breast cancer is highly treatable, survival outcomes in SSA remain substantially poorer than those observed in high income countries. This survival gap is largely attributable to delayed diagnosis, health system constraints, and limited access to effective treatment, including essential medicines.

Access to essential medicines is a core component of the right to health and a cornerstone of universal health coverage. In 2015, the World Health Organization (WHO) undertook a comprehensive, disease-based review of cancer medicines to update the WHO Model EML, prioritising malignancies based on disease burden and the magnitude of clinical benefit. Breast cancer was identified as a priority condition due to its high global incidence and the substantial therapeutic impact of available medicines.

METHODS

Search strategy The search strategy will be constructed following the PCC elements of Population, Concept, and Context.

Population: Patients who are affected by breast cancer in SSA.

Concept: Barriers to accessing essential breast cancer medicines, pharmaceutical policies, health system characteristics, and economic and policy factors.

Context: All SSA subregions (East, West, Central, Southern Africa) and all SSA countries and territories by name.

Participant or population Population : Patients who are affected by breast cancer in sub-Saharan Africa.

Context: All SSA subregions (East, West, Central, Southern Africa) and all SSA countries and territories by name.

Intervention Concept : Barriers to accessing essential breast cancer medicines, pharmaceutical policies, health system characteristics, and economic and policy factors.

Comparator Not Applicable.

Study designs to be included Original research articles, research letters, reviews, systematic reviews, meta-analyses. Grey-literature sources including technical reports, government publications, conference proceedings, theses and dissertations, working papers, committee reports, institutional reports, white papers, policy briefs, newsletters, fact sheets, market research reports, annual reports, project reports, guidelines and protocols. Non-research papers including opinion pieces and editorials, blog posts, non-research-based reports, non-systematic reviews.

Eligibility criteria • English-language publications
• Published from 2015 onwards
• Studies conducted in SSA
• Peer-reviewed literature and grey literature.

Information sources PubMed, Scopus, Web of Science, Embase/Ovid, CINAHL/EBSCO, Cochrane Library, Google Scholar, GLOBOCAN, as well as WHO, WHO Regional, UN agency, and NGO websites.

Main outcome(s) This scoping review aims to address the evidence gap on barriers to accessing essential breast cancer medicines in SSA by systematically identifying and synthesising the existing literature. The findings are intended to inform policy-makers, researchers, and other stakeholders by providing an organised overview of current knowledge, highlighting areas where evidence is limited, and supporting further research and health-system strengthening efforts to improve equitable access to life-saving breast cancer treatments in the region.

Data management All retrieved records will be imported into Covidence for de-duplication, screening, and data extraction. Two reviewers will independently screen studies, with discrepancies resolved through discussion or a third reviewer.

Quality assessment / Risk of bias analysis Not Applicable (Secondary research).

Strategy of data synthesis Data will be charted using a standardised extraction form and synthesized narratively, with themes mapped across access dimensions.

Subgroup analysis Not Applicable.

Sensitivity analysis Not Applicable.

Country(ies) involved South Africa - University of the Western Cape.

Keywords Breast cancer, essential medicines, access to medicines, cancer medicines, sub-Saharan Africa, low- and middle-income countries, low resource settings, barriers to.

Dissemination plans The results of this review will be developed into a manuscript and submitted to a relevant journal for consideration and publication. The results will also be included as part of the corresponding author's doctoral thesis.

Contributions of each author

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