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16th – 17th JULY, 2025
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West African Institute of Public Health

FOASPS

Executive Summary Report

Leveraging Innovation to Advance UHC in Africa

16th -17th July 2025, Abuja, Nigeria

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Executive Summary

Africa stands at a pivotal moment in its journey toward Universal Health Coverage (UHC), where moving from policy to measurable action is critical to improving health outcomes, reducing poverty, and driving economic growth. Despite outdated health systems, limited funding, and the highest out-of-pocket health costs globally, the continent continues to demonstrate resilience and innovation, ranging from mRNA vaccine technology transfer to AI-driven outbreak forecasting.

Progress toward UHC remains uneven. Only South Africa and Rwanda are close to full implementation, while most countries fall short of the Abuja Declaration's 15% health funding target. Infrastructure gaps are severe, with 40% of health facilities lacking electricity, and physician migration draining about 20,000 professionals annually. Although Africa's service coverage index rose from 23 in 2000 to 44 in 2021, this rate of progress must accelerate nearly tenfold to achieve the 2030 goal.

Nigeria, home to an estimated 250 million people, is emerging as a leader in advancing UHC through bold reforms. The National Health Insurance Act (2022) makes insurance mandatory for all citizens and legal residents, while the Basic Healthcare Provision Fund (BHCPF) secures 1% of consolidated revenue for primary care. An ambitious revitalization plan aims to upgrade 17,000 primary health centres by 2027, and the Presidential Initiative on Unlocking the Healthcare Value Chain is providing incentives for local pharmaceutical and diagnostic production. These reforms have already delivered results, including a 15% increase in insurance coverage and the removal of tariffs and VAT on critical health inputs, although persistent challenges such as underfunding, workforce migration, and suboptimal insurance uptake remain.

The private sector has proven to be a powerful enabler of UHC. In Nigeria, the Healthcare Federation of Nigeria (HFN) has successfully advocated for zero VAT on life-saving products and supported innovative financing models, though greater integration of private hospitals is still needed. The West Africa Private Healthcare Federation/ Federation Ouest Africaine du Secteur Privé de la Santé (FOAPS), is driving regional collaboration through digital health adoption, financing innovations, and local pharmaceutical manufacturing. Public-private partnerships (PPPs) are showing measurable results, such as Delta State's primary healthcare initiative, which achieved zero maternal deaths over five years by activating an otherwise unused rural facility. These examples highlight that healthcare systems require not just infrastructure but also skilled personnel, integrated processes, and operational capacity.

Opening Ceremony

To sustain momentum and accelerate progress, four strategic priorities stand out for Africa. First, sustainable financing must be achieved through increased domestic resource mobilization, innovative funding mechanisms, and stronger public-private collaboration. Second, innovation needs to be embedded at every level, with digital health, telemedicine, and AI scaling to improve access and efficiency. Third, local manufacturing of pharmaceuticals and diagnostics must expand to reduce dependence on imports and strengthen health security. Finally, emerging threats—including climate change and pandemics—must be met with climate-resilient systems, stronger preparedness, and enhanced regional cooperation.

Africa's path to UHC and health security will ultimately be defined by innovation, strategic partnerships, and political will. Nigeria's progress demonstrates the transformative potential of coordinated action across governments, private sector actors, and development partners. With collective resolve, the continent can move from potential to proof, building the healthiest and most resilient generation in its history.



















Speakers

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World Bank

KEYNOTE
Isiuwa Onayiga
Manager, English-speaking West Africa
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Executive Summary

Healthcare financing in Africa remains a critical challenge, despite its centrality to sustainable development and the continent's potential to harness a demographic dividend. While Africa has made notable progress in strengthening health systems and expanding access to care, underfunding, inequitable access, and structural inefficiencies continue to limit outcomes.

The health financing landscape is defined by several persistent challenges:

- **Persistent Financing Gaps:** Africa relies on a mix of donor funding, public budgets, and private contributions, particularly out-of-pocket (OOP) payments. Yet, health systems face a widening funding gap, with global estimates indicating USD 274–371 billion needed annually through 2030 to achieve UHC.
- **Limited Public Investment:** Despite the Abuja Declaration's 15% budget allocation target, only three countries—Rwanda, Botswana, and Cabo Verde—have met it. More than 30 countries still allocate less than 10%.
- **High OOP Expenditure:** In many countries, households bear 30–40% of health costs, exposing families to catastrophic spending and worsening inequities.
- **Overreliance on Donor Funding:** In some countries, up to 90% of health financing comes from external partners, raising sustainability risks amid shifting global priorities.
- **Systemic Inefficiencies:** Weak public financial management, low insurance coverage, and delayed budget disbursements undermine resource utilization.
- **Shifting Health Needs:** The dual burden of persistent infectious diseases and rising non-communicable diseases (NCDs) places unprecedented pressure on systems originally designed for acute care.

Despite these challenges, the continent has a unique opportunity to transform its health financing architecture through systemic approaches encompassing:

- **Increased domestic public** spending, achieved through improved tax-to-Gross Domestic Product (GDP) ratios and targeted "sin taxes".

- **Transition to strategic purchasing** through health insurance entities and the implementation of "social compacts" to define and finance basic health service packages for vulnerable populations.
- **Leveraging private sector partnerships** and fostering innovation through private capital.
- **Prioritizing primary healthcare** as the system's backbone to address the majority of health issues and ensure end-to-end patient care.
- **Improving the quality and availability of health data** for accountability, transparency, and demonstrating return on investment.
- **Develop human capital** by expanding and upskilling the health workforce, strengthening digital and team-based care models, and implementing policies to curb brain drain.
- **Foster regional & continental collaboration** by pooling resources, harmonizing strategies through the AU and Africa CDC, and positioning Africa as a hub for clinical trials and innovation.
- **Diversify financing sources** and exploring innovative tools such as health bonds, diaspora remittances, blended finance, and Corporate Social Responsibility (CSR) funding to supplement government budgets.
- **Breaking down silos** between health, finance, and economic ministries to ensure a converged approach to health investment and outcomes.

While Africa's health financing challenges are significant, they are not insurmountable. With greater domestic resource mobilization, stronger accountability, and private sector innovation, the continent can build resilient and equitable systems that unlock its demographic dividend and make health a driver of sustainable development.














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Chairman
National Tertiary Health Institutions Standards Committee

KEYNOTE
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Executive Summary

UHC is central to Africa's health and development agenda, aiming to provide equitable, high-quality, and affordable care for all without financial hardship. While significant progress has been made across the continent, health systems continue to face systemic challenges, including underfunding, shortages in human resources, inequities in rural access, fragmented services, and weak governance. Addressing these barriers requires sustained commitment, innovation, and collaboration.

Several African countries and institutions provide valuable lessons on how to advance UHC. Nigeria has introduced structured hospital ratings and strengthened regulatory oversight to transform tertiary institutions into Centers of Excellence, building public confidence in service quality. In Egypt, a major reform in 2018 established the Universal Health Insurance System (UHIS), which unified financing and governance, reduced out-of-pocket spending, and expanded equitable access. Shefaa Al Orman Hospital in Upper Egypt demonstrates how integrated, patient-centered cancer care can thrive in resource-constrained settings. Through free treatment, outreach campaigns, technological integration, and environmental sustainability, it has become a model of equitable care delivery. In East Africa, The Aga Khan University Hospital pursued global accreditation and implemented an electronic health record system across 54 outreach centers, strengthening patient trust, improving diagnosis and treatment, and ensuring the next generation of health professionals are trained to deliver high-quality care.

Maternal and reproductive health services serve as a litmus test for UHC success. They expose inequities, reflect service quality, and significantly influence broader public health outcomes. Africa accounts for 69% of global maternal deaths, most of which are preventable. Ensuring access to quality maternal care reduces catastrophic OOP costs for families and strengthens community well-being. Investments in family planning further highlight the economic value of this area. For every dollar invested, families and societies gain an estimated eight dollars in benefits, making it one of the highest-yielding health interventions. Expanding contraceptive access, increasing the number of midwives, and strengthening frontline health workers are therefore critical steps toward achieving UHC.

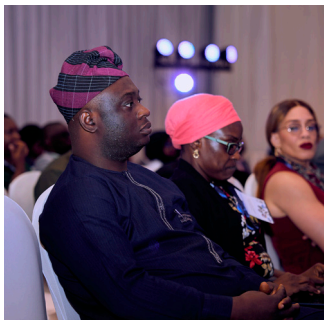
To build resilient, inclusive, and sustainable health systems, six areas of action are essential: embedding quality standards and accountability mechanisms at every level of care; mobilizing domestic resources and innovative financing while tailoring benefit packages to vulnerable populations; scaling up digital health tools such as electronic records, telemedicine, and AI-based diagnostics to extend reach and efficiency; fostering collaboration across governments, private sector, non-governmental organisations (NGOs), and academia while encouraging cross-country learning from successful reforms; institutionalizing community engagement through feedback mechanisms, advocacy, and storytelling to strengthen trust and accountability; and expanding family planning services while building the capacity of midwives and frontline health workers, particularly in underserved areas.

The journey to UHC in Africa requires more than expanded coverage; it demands health systems that are equitable, accountable, and high quality. Country experiences show that reforms anchored in strong governance, community engagement, and investment in maternal and reproductive health can drive real progress. With sustained political will, innovative financing, and cross-sector collaboration, Africa can achieve UHC that truly protects families, empowers communities, and advances sustainable development.











Speakers

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Executive Summary

Digital health is no longer a future promise for Africa; it is a strategic necessity and a cornerstone of modern healthcare systems. By improving access, quality, equity, and efficiency, digital solutions can accelerate progress toward UHC. Yet, progress is hindered by fragmented platforms, disconnected data, insufficient financing, policy gaps, and limited community engagement.

To overcome these barriers, five core imperatives-the 5 C's of Digital Health, must guide action:

- **Connectivity-**Reliable electricity and internet are fundamental public health needs. Without them, digital health cannot reach underserved areas.
- **Capacity-**Training healthcare workers in digital tools and nurturing leaders fluent in both health and data are essential for sustainable transformation.
- **Collaboration-**Public Private Partnerships (PPPs) built on shared governance and alignment with national priorities can pool resources, co-design interoperable systems, and scale innovations.
- **Capital-**Moving from "pilotitis" to scale requires making health technology bankable, unlocking domestic financing, and transitioning innovators from grants to growth capital.
- **Community-**Designing with, not just for, communities through local language tools, mobile education, and co-creation builds trust and ensures equity.

Case studies from Ghana and Nigeria demonstrate how digital transformation can deliver measurable impact. Ghana's digitized National Health Insurance Scheme (NHIS) has reduced inefficiencies, enabled data-driven policy, and introduced value-based care. In Nigeria, AI-powered tools under the Global Fund–supported TB and HIV program have improved case detection, prevention, and reporting efficiency while empowering decision-makers.

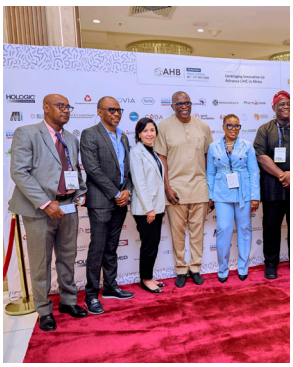
Nigeria's evolving policy and governance frameworks from the National Strategic Health Development Plan to the National Digital Health Initiative show increasing commitment to unified, interoperable health data systems, electronic medical records, and secure data exchanges. These efforts are complemented by innovations like Project ECHO, which uses low-bandwidth tele-mentoring to extend specialist expertise to frontline health workers across Africa, and the Africa Digital Health Networks (ADHN), which fosters cross-sector collaboration for scaling homegrown solutions.

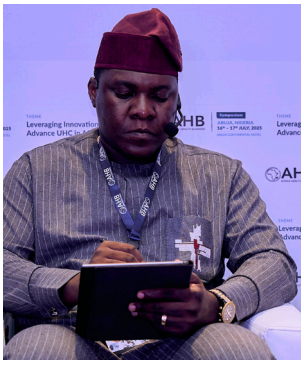
Key recommendations to accelerate digital health for UHC include:

1. Strengthening partnerships between public, private, and civil society actors.
2. Supporting local innovation through funding, incubation, and capacity building.
3. Investing in infrastructure and connectivity, particularly in rural areas.
4. Promoting digital literacy among health workers and communities.
5. Building communities of practice to connect innovators and align efforts.

Africa is already demonstrating its capacity to lead its digital health transformation. With the right investments, governance, and inclusive approaches, digital health can turn the vision of UHC into a reality-delivering better health outcomes, greater efficiency, and dignity for all.













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Executive Summary

Access to quality diagnostics is critical for achieving UHC and reducing health inequities in Africa. The 2023 World Health Assembly Resolution marked a pivotal milestone by urging governments to integrate diagnostics into national health strategies, strengthen infrastructure, invest in workforce capacity, and promote public–private collaboration.

Despite progress, significant systemic challenges persist. These include underfunded health systems, heavy reliance on imported diagnostics, weak regulatory frameworks, and shortages of skilled health professionals. These barriers continue to limit equitable and timely access to essential diagnostic services across the continent.

Practical solutions exist. Essential Diagnostics Lists (EDLs) provide a proven framework for guiding national procurement and ensuring consistent access to critical tools. Scaling innovative delivery models—including point-of-care testing, AI-enabled technologies, and mobile diagnostic units can extend reach into underserved and remote communities.

Several real-world examples demonstrate impact:

- Nigeria has advanced locally driven solutions to improve diagnostic access.
- African Medical Centre of Excellence (AMCE) has implemented collaborative approaches that strengthen capacity.
- Empower Academy is building a skilled diagnostics workforce through targeted training pipelines.

Strengthening diagnostic capacity offers one of the most cost-effective and high-impact investments African health systems can make. It will not only save lives but also enhance health system resilience, reduce disease burdens, and accelerate progress toward health equity.

Speakers

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Executive Summary

The pharmaceutical sector is critical to achieving UHC in Africa, ensuring access to safe, effective, high-quality, and affordable medicines. Despite this, it faces persistent challenges, including limited local manufacturing, fragmented markets, weak regulatory frameworks, heavy reliance on imported active pharmaceutical ingredients (APIs), and vulnerability to global supply chain disruptions. A holistic value chain approach from Research and Development (R&D) to patient access is essential to building a sustainable and resilient pharmaceutical ecosystem.

Across the continent, growth will depend on shifting from fragmented national approaches to coordinated continental action. This includes leveraging sovereign wealth funds, establishing regional manufacturing hubs, and harmonizing regulations to speed market access. The African Continental Free Trade Area (AfCFTA) can accelerate this by removing trade barriers and streamlining cross-border medicine distribution. Shared R&D hubs and centers of excellence will enhance innovation and competitiveness, while expanding clinical trials—currently only 2% of global participation, to more African countries will improve treatment relevance and attract global investment.

Sustainable growth will require clear manufacturing priorities, pooled procurement, incubation support for new facilities, and protection for local manufacturers. Key barriers such as high API import costs, foreign exchange constraints, regulatory delays, and excessive taxation must be addressed through coordinated reforms and strong political commitment.

The moment has come to move from strategy to execution. Uniting stakeholders, securing financing frameworks, and launching pilot projects will deliver early wins and build momentum. Selective, competitive manufacturing, integration into global value chains, predictable investment conditions, and robust infrastructure will be essential. With these measures, Africa can develop a strong, innovation-driven biopharmaceutical sector capable of supporting health security, driving economic growth, and advancing UHC.

Speakers

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Executive Summary

Africa contributes only 3% of global carbon emissions, yet it bears some of the most severe impacts of climate change. Temperatures on the continent are projected to rise by up to 3.5°C per decade-well above the global average-exacerbating floods, droughts, and storms that could affect over 100 million Africans annually. These climate shocks are already disrupting health services, damaging infrastructure, displacing populations, and reversing progress toward UHC.

The health toll is profound. In Nigeria, 21% of the national disease burden is attributable to climate change, underscoring the urgent need for adaptation. Vulnerable groups-including women, children, the elderly, low-income households, and displaced communities bear the greatest burden. Direct impacts include rising vector-borne and infectious diseases, heat-related illnesses, malnutrition, poor water quality, respiratory conditions, and worsening mental health. Indirectly, climate change weakens health systems, disrupts essential care, and drains over 5% of Africa's GDP annually through climate-related disasters.

To respond, governments, partners, and the private sector must embed climate resilience into health systems and policies. Priority areas for action include:

- **Advance Sustainability and Climate-Resilient Health Systems:** Integrate renewable energy, strengthen supply chains, build a climate-literate workforce, and embed climate resilience across all health system building blocks.
- **Elevate Awareness and Advocacy:** Position climate change as a health and development priority through public education, campaigns, and strong policy advocacy at national and global levels.
- **Strengthen Research, Evidence, and Data Systems:** Expand surveillance, early warning, and research on climate-sensitive diseases, and integrate vulnerability assessments and indigenous knowledge into planning.
- **Promote Equity and Inclusion:** Engage women, youth, marginalized groups, and vulnerable communities to co-lead climate-health solutions that are equitable and culturally relevant.

- **Mobilize Financing for Climate-Health Action:** Integrate health into climate finance instruments, expand domestic budget allocations, and leverage private sector investment and Environmental, Social, and Governance (ESG) commitments.

- **Enhance Strategic Partnerships for Impact:** Build cross-sector and public-private collaborations to mobilize innovation, expertise, and capital for renewable energy, digital health, and resilient service delivery.

A case study from Nigeria highlights the catalytic role of the WHO in advancing climate-health integration through evidence generation, national policy alignment, solar-powered health pilots, workforce training, and enhanced early warning systems.

Climate change is a health and economic crisis for Africa. Protecting health must become the visible face of climate action. By embedding resilience across health systems, empowering communities, and securing sustainable financing, Africa can safeguard vulnerable populations, preserve progress toward UHC, and build climate-ready, inclusive, and sustainable health systems for the future.

















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Executive Summary

Advancing UHC in Africa requires bold, coordinated action to close systemic gaps while harnessing the power of innovation and partnerships. This entails investing in resilient health systems, prioritizing quality and equity, and ensuring that no one is left behind. Key priorities for progress include sustainable financing, digital innovation, improved diagnostics, stronger pharmaceutical value chains, and climate-resilient health systems.

Public-Private Partnerships (PPPs) and innovative financing models such as social bonds and sin taxes—are emerging as essential tools for strengthening UHC financing. Their success depends on reliable data to guide tax collection, enhance efficiency, and ensure resources are used strategically. The ultimate goal is to achieve "more health for the money" by moving beyond traditional approaches and embracing solutions that deliver greater value and impact.

Patient-centered care lies at the core of UHC. Artificial Intelligence (AI) is increasingly seen as a powerful tool to address Africa's health worker gap, supporting healthcare professionals rather than replacing them. By enabling improved care delivery and making "healthcare in their pockets" a reality, AI can transform access and outcomes across the continent. Digital health, guided by the "Five C's"—Connectivity, Capacity Building, Collaboration, Capital, and Community Trust—offers scalable platforms and technologies that can expand access, improve efficiency, and empower communities.

Diagnostics, which inform up to 70% of clinical decisions but currently receive only 3–5% of healthcare spending, must become a stronger focus. Affordable, accurate, and accessible diagnostic tools are critical to improving patient outcomes and strengthening health systems. Similarly, localizing research and development, expanding manufacturing, and strengthening regulatory frameworks are essential to building resilient pharmaceutical value chains. Reducing dependence on imported raw materials, particularly active pharmaceutical ingredients (APIs), will require a selective and strategic approach, informed by available resources and partnerships.

Climate resilience is another cornerstone of UHC. Enhancing preparedness for public health emergencies, fostering cross-sector collaboration, integrating gender-responsive policies, and investing in smart, climate-resilient infrastructure are critical to safeguarding health systems from the impacts of climate change while ensuring equitable access to care.

Closing Ceremony

Health must be reframed from a cost to a high-return investment. Evidence from the WHO Foundation shows that every USD 1 invested in WHO programs generates an estimated USD 35 in combined health and economic benefits. Positioning health as a driver of economic growth encourages long-term commitments from governments, private sector players, and development partners. The WHO Foundation is helping to enable this vision, bridging donors and implementers, and mobilizing innovative financing. Its inaugural investment round, launched in 2024, aims to raise USD 7.1 billion for 2025–2028, with more than half already secured. A dedicated USD 50 million fund will support high-impact projects in digital health, laboratory systems, mental health, and emergency response hubs.

Across the continent, UHC is increasingly recognized as a fundamental right anchored in availability, affordability, and quality of care. Many countries are advancing universal health insurance schemes designed to provide equitable coverage for all citizens. Efforts are also underway to integrate the private sector as an equal partner in UHC delivery, ensuring parity with public systems and maximizing reach. At the same time, there is a shift toward adopting a unified "Africa" identity, moving beyond "sub-Saharan Africa" to better reflect the continent's shared opportunities and challenges particularly in the face of climate change and other cross-cutting issues.

Africa now has an opportunity to reimagine its health systems through innovation, collaboration, and investment. By mobilizing resources, embedding technology, and fostering inclusive partnerships, the continent can accelerate progress toward UHC and health security, ensuring a healthier, more resilient future for all.

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