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PROGRESS REPORT ON THE IMPLEMENTATION OF THE STRATEGY FOR SCALING UP HEALTH INNOVATIONS IN THE AFRICAN REGION

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BACKGROUND

1. In 2020, the Seventieth session of the WHO Regional Committee for Africa adopted the Strategy for scaling up health innovations in the WHO African Region.\textsuperscript{1,2} The strategy aims to foster Member States’ commitment to accelerate health improvements by harnessing and scaling up innovations as key determinants for achieving universal health coverage (UHC) and the health-related Sustainable Development Goals (SDGs).

2. The Strategy underlined that by the end of 2023, eighty per cent of Member States should have performed needs assessment to identify critical gaps in their health systems that need support with innovations; 75% of Member States should have developed policies and incentive frameworks to stimulate the development of high impact health innovations; 50% of Member States should have developed analytical tools to assess the economic and social impact of innovations to support decision-making; and 80% of Member States should have established high-level coordination mechanisms and platforms to facilitate the scaling up of innovations.

3. This first progress report summarizes the progress made in implementing the Regional strategy for scaling up health innovations and proposes the next steps for action.

PROGRESS MADE/ACTIONS TAKEN

4. While 80% of Member States were supposed to have undertaken health systems needs assessments, only 68% of Member States undertook some form of assessment. Thirty-two Member States conducted a digital health infrastructure survey and confirmed the development of digital strategies to lay the foundation for implementing technological innovations.\textsuperscript{3} Only nine Member States (representing 19% of all Member States in the Region)\textsuperscript{4} were assisted in revising their national health policies and legal frameworks to accommodate emerging technologies. Seventeen Member States (representing 36%)\textsuperscript{5} took part in a telemedicine workshop conducted in Cabo Verde, where they presented road maps and were trained in telemedicine approaches for strengthening their health systems.

5. To further assist Member States, the Secretariat published a framework to guide countries in strengthening their innovation ecosystems.\textsuperscript{6} The framework is an important tool that is used to assess the capacity of local innovation ecosystems to provide evidence on areas of investment and support towards building robust ecosystems that harnesses innovations adapted to local needs.

\textsuperscript{2} Adoption of the resolution on the Strategy for scaling up health innovations in the WHO African Region AFR/RC70/R3: WHO Regional Office for Africa; 2020 (https://apps.who.int/iris/handle/10665/366052 , accessed 5 January 2023)
\textsuperscript{3} Thirty-two countries - Algeria, Benin, Burkina Faso, Burundi, Cabo Verde, Cameroon, Chad, Comoros, Congo, Democratic Republic of the Congo, Eswatini, Gabon, Ghana, Guinea, Kenya, Lesotho, Madagascar, Malawi, Mali, Mauritania, Mauritius, Mozambique, Niger, Nigeria, Rwanda, Senegal, Seychelles South Sudan, Togo, Uganda, Zambia and Zimbabwe.
\textsuperscript{4} Nine countries - Burkina Faso, Côte d’Ivoire, Eritrea, Gabon, Ghana, Kenya, Senegal, South Africa and Uganda.
\textsuperscript{5} Seventeen countries - Benin, Botswana, Cabo Verde, Comoros, Democratic Republic of the Congo, Ghana, Guinea-Bissau, Kenya, Madagascar, Malawi, Mozambique, Nigeria, Senegal, United Republic of Tanzania, Togo, Uganda, Zambia.
6. In the WHO African Region, 75% of Member States were considered to have developed incentive frameworks; however, to promote science-driven product innovations, six countries on the African continent\(^7\) (13%) were selected to be the first on the continent to receive and manufacture the technology needed to produce mRNA vaccines. Furthermore, the Secretariat supported the setting up of the global mRNA technology transfer hub in Cape Town, South Africa, aimed at increasing the capacity of low- and middle-income countries to manufacture quality mRNA vaccines at scale. In addition, a new model of working with African research institutes and WHO collaboration centres across the Region was established to spur increased collaboration between WHO and African research institutes, with research and innovation as a priority.

7. Currently, 13% of Member States have developed analytical tools to assess the economic and social impact of innovations\(^8\), including costed implementation road maps and monitoring and evaluation frameworks to facilitate the digitization of campaigns. Niger, with support from the Secretariat, also developed a detailed business case for innovation. For further impact, the Secretariat continued to support innovators from Africa through resource mobilization and network building. Eighteen innovators from 11 Member States\(^9\), who were selected from the 2018 Innovation Challenge, continue to make progress in scaling up their innovations to strengthen health systems, with notable impact.\(^10\)

8. Twenty-six per cent of Member States have developed innovation platforms.\(^11\) Botswana was supported, as a use case, to develop and pilot an integrated and robust digital innovation platform to coordinate partnership-driven scaling up of locally relevant health innovations for sustainable impact.\(^12\) Ghana set up a National Vaccine Institute to facilitate innovation and the production of vaccines. Furthermore, the Secretariat developed an Innovation Marketplace platform as a repository of various emerging innovations and technologies that countries can adapt or adopt in their context.\(^13\) A few examples include tailored digital technologies like GIS used by countries in the fight against polio; a monitoring system to track and trace tobacco products under Article 8 of the Protocol to eliminate illicit trade in tobacco products; and an eSTEPS data collection application used in noncommunicable disease surveillance systems across five Member States.\(^14\)

9. While the COVID-19 pandemic affected progress in the implementation of the Regional strategy, other notable dynamics have equally slowed down traction on implementing the agreed resolutions. They include the notably fragmented character of innovation activities; minimal incentives for innovators; lack of concise analytical tools to measure the impact and risk of innovations; and lack of capacity in Member states. Additionally, measurable and consolidated innovation and impact-related metrics still need to be developed and improved to assess the strength of Member States’ health innovation ecosystems.

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\(^7\) Six countries - Egypt, Kenya, Nigeria, Senegal, South Africa, Tunisia
\(^8\) Six countries - Benin, Democratic Republic of the Congo, Kenya, Mozambique, Niger, Nigeria
\(^9\) Benin, Burkina Faso, Cameroon, Ethiopia, Ghana, Kenya, Namibia, Nigeria, Uganda, South Africa and Zimbabwe
\(^11\) Twelve countries- Benin, Botswana, Côte d’Ivoire, Democratic Republic of the Congo, Ghana, Kenya, Madagascar, Mali, Mauritius, Nigeria, Rwanda and United Republic of Tanzania
\(^12\) Botswana Health Innovation Management System: https://mohinnovations.gov.bw , last accessed 4 April 2023
\(^13\) https://innov.afro.who.int/
\(^14\) Burkina Faso, Cabo Verde, Niger, Rwanda and Sao Tome and Principe.
NEXT STEPS

10. Member States should:
(a) Continue to provide leadership, management, and advocacy for scaling up innovations, including by:
   (i) developing sustainability plans for innovations integrated into the health system;
   (ii) allocating domestic resources for the development of analytical tools that measure the impact of integrated innovations;
   (iii) providing incentive mechanisms to spur creativity among innovators; and
   (iv) ensuring synergies across different health system tiers to facilitate the adoption of locally developed innovative solutions that suit local contexts.

11. The WHO Secretariat and partners should:
(a) enhance the usability of the innovation ecosystem measuring tool and conduct assessments;
(b) scale up the development and implementation of health innovation management platforms in other Member States;
(c) continue to support local innovators to sustainably scale up their innovations by linking them with key partners, including funders;
(d) support Member States in the prudent adoption of emerging technologies such as artificial intelligence; and
(e) support Member States to adopt open science to encourage collaboration among researchers and scientists to develop and manufacture medical products that prioritize the needs of African people.

12. The Regional Committee is invited to note the report.