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**Progress report on the Framework for health systems development towards universal health
coverage in the context of the Sustainable Development Goals in the African Region**

Information Document

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Background

1. The Sixty-seventh session of the Regional Committee for Africa in 2017¹ adopted the “Framework for health systems development” aimed at achieving universal health coverage (UHC) within the context of the Sustainable Development Goals (SDGs) in the African Region.² This decision acknowledged persistent regional challenges, including the rising burden of communicable and noncommunicable diseases, challenges in scaling up service coverage, disparities in health financing across Member States, insufficient focus on social and environmental determinants of health, and the lack of accountability in meeting health service needs.

2. The Framework proposed an approach for Member States to strengthen and realign their health systems to achieve the health development goals, while providing a foundation for ensuring that health contributes to advancing sustainable development. Priority actions emphasized ensuring the availability of essential health services, increasing protection of the population from financial risks, enhancing health security, improving client satisfaction and addressing health-related SDGs.

3. This is the second report describing the progress against three milestones for 2025, namely: (1) 80% of Member States **improving population coverage**; (2) 80% of Member States **improving health system performance**; (3) 80% of Member States **implementing the health system investment plans**. The first progress report was provided in 2021.³

Progress made/action taken

Improving population coverage

4. The first milestone describes health system effectiveness in reaching underserved populations including in rural, remote and fragile contexts, measured by the UHC service coverage index. According to WHO estimates,⁴ from 2019 to 2021, thirty Member States (64%)⁵ in the African Region made progress in expanding their UHC service coverage. However, eight Member States (15%)⁶ remained stagnant, and nine Member States (19%)⁷ saw a decrease in coverage. Projections based on WHO estimates show that 39 Member States (83%)⁸ are expected to increase their UHC service coverage index between 2021 and 2025.

¹ Sixty-seventh session of the WHO Regional Committee for Africa: Final Report, Brazzaville: World Health Organization. Regional Office for Africa; 2017. Licence: CC BY-NC-SA 3.0 IGO.

² Regional Committee for Africa, 67. (2017). Framework for health systems development towards universal health coverage in the context of the sustainable development goals in the African Region: report of the Secretariat (<https://iris.who.int/handle/10665/260237>).

³ Regional Committee for Africa, 71. (2021). Progress report on the implementation of the framework for health systems development towards universal health coverage in the context of the sustainable development goals in the African Region: information document. World Health Organization. Regional Office for Africa (<https://iris.who.int/handle/10665/345402>).

⁴ WHO (2023). The Universal Health Service Coverage Index (<https://www.who.int/data/gho/data/indicators/indicator-details/GHO/uhc-index-of-service-coverage>, accessed 20 March 2025).

⁵ Algeria, Angola, Benin, Botswana, Burkina Faso, Burundi, Cabo Verde, Cameroon, Central African Republic, Chad, Comoros, Democratic Republic of the Congo, Eswatini, Ethiopia, Ghana, Guinea, Kenya, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Namibia, Niger, Nigeria, Rwanda, Senegal and Sierra Leone.

⁶ Algeria, Botswana, Gabon, Gambia, Lesotho, Malawi, South Africa and Zimbabwe.

⁷ Nigeria, Angola, Eswatini, Mauritius, Ethiopia, Burundi, Eritrea, Senegal, and Sao Tome and Principe.

⁸ All Member States except the following: Algeria, Botswana, Côte d'Ivoire, Gabon, Guinea-Bissau, Lesotho, Namibia, and Zambia.

Improving health system performance

5. The second milestone describes whether the entire population – across all ages and social groups – has access to the health services they need, when they need them, and without financial hardship. This is measured using the share of out-of-pocket health expenditure in total health spending. WHO estimates⁹ that between 2019 and 2021, out-of-pocket health expenditure reduced in 30 Member States (64%).¹⁰ However, according to projections, the out-of-pocket spending is increasing between 2021 and 2025, with out-of-pocket expenditure expected to reduce in only 20 Member States (43%).¹¹ This falls well short of the milestone.

6. To achieve this milestone, between 2021 and 2025 WHO contributed to strengthening the health financing systems of Member States by supporting the development and use of national health accounts (NHAs) and providing training in the systematic assessment of health financing for 32 Member States.¹² Additionally, WHO supported the formulation of evidence-based health financing strategies and reforms in 22 Member States.¹³

Implementing health system investment plans

7. The third milestone describes whether Member States have strong leadership and commitment to strengthening their health systems towards UHC. Progress on this is measured through the existence of updated and costed national health strategies and plans (NHSPs) and the level of domestic budget allocation for health system investment plans. Currently, 25 (53%) of Member States¹⁴ have explicit UHC road maps or strategies. Between 2021 and 2025, WHO supported 43 Member States¹⁵ to formulate NHSPs to review or evaluate their strategies.

8. Between 2021 and 2025, WHO and Member States focused on increasing domestic public financing to advance UHC and other health priorities. Each biennium, WHO African Region Member States collectively allocated \$1.8 billion to \$2 billion specifically for health system strengthening efforts.¹⁶ This investment implies that this milestone might be achieved or is within reach.

⁹ WHO (2025). The Global Health Expenditure Database, (<https://apps.who.int/nha/database/ViewData/Indicators/en>, accessed 20 March 2025).

¹⁰ Angola, Benin, Botswana, Burkina Faso, Cabo Verde, Cameroon, Central African Republic, Comoros, Congo, Côte d'Ivoire, Ethiopia, Gabon, Ghana, Guinea, Guinea-Bissau, Kenya, Madagascar, Mauritania, Mauritius, Mozambique, Namibia, Niger, Rwanda, Sao Tome and Principe, Senegal, Seychelles, Sierra Leone, South Sudan, Uganda and Zambia.

¹¹ Angola, Benin, Burkina Faso, Chad, Democratic Republic of the Congo, Equatorial Guinea, Eswatini, Ethiopia, Liberia, Lesotho, Madagascar, Malawi, Mali, Namibia, Nigeria, Sierra Leone, South Africa, South Sudan, Togo and United Republic of Tanzania.

¹² Algeria, Benin, Botswana, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Comoros, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Eswatini, Gabon, Guinea, Kenya, Lesotho, Madagascar, Malawi, Mali, Mauritania, Namibia, Niger, Rwanda, Sao Tome and Principe, Senegal, South Africa, Togo, Uganda, United Republic of Tanzania, Zambia and Zimbabwe.

¹³ Algeria, Angola, Botswana, Burkina Faso, Burundi, Comoros, Eswatini, Ethiopia, Ghana, Kenya, Liberia, Madagascar, Mauritania, Niger, Rwanda, Senegal, Sierra Leone, South Africa, Togo, United Republic of Tanzania, Zambia and Zimbabwe.

¹⁴ State of commitment to universal health coverage: Synthesis 2023 report, available at : [2023 SoUHC Synthesis EN.pdf](#)

¹⁵ Algeria, Angola, Benin, Botswana, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Comoros, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Eritrea, Eswatini, Ethiopia, Gabon, Gambia, Ghana, Guinea, Kenya, Liberia, Malawi, Madagascar, Mali, Mauritania, Mauritius, Mozambique, Namibia, Niger, Nigeria, Rwanda, Sao Tome and Principe, Senegal, Seychelles, Sierra Leone, South Africa, South Sudan, Togo, Uganda, United Republic of Tanzania, Zambia and Zimbabwe.

¹⁶ Programme budget 2024-2025, AFR/RC72/12 Regional Committee for Africa 25 August 2022.

Issues and challenges

9. Although progress has been made, challenges persist including stagnant or declining service coverage, rising out-of-pocket health expenditures leading to financial hardship, and limited implementation of health system investment plans. These challenges are driven by economic constraints, policy gaps and operational inefficiencies.^{17, 18}

Next steps

10. Member States should:

- (a) strengthen primary health care, particularly in underserved areas and leverage digital health innovations to expand access to essential services;
- (b) implement comprehensive health financing reforms including abolishing user fees in public health facilities, introducing exemptions for vulnerable populations and enhancing insurance coverage to reduce out-of-pocket expenditures;
- (c) allocate a higher percentage of national budgets to health system strengthening.

11. WHO and partners should:

- (a) promote targeted health workforce training using standardized, competency-based curricula adapted to local contexts;
- (b) provide technical support for the formulation and implementation of evidence-based health financing strategies;
- (c) support Member States to enhance insurance coverage, and to conduct regular National Health Accounts (NHA) assessments;
- (d) facilitate the adoption and use of health sector “briefcase tools” to guide the review and development of NHSPs.

12. The Regional Committee is invited to take note of the progress report and endorse the proposed next steps.

¹⁷ Country NTD master plan 2021–2025: Framework for Development, ([Country NTD Master Plan 2021-25](#)).

¹⁸ Seventy-third session of the WHO Regional Committee for Africa, Gaborone, Botswana, 28 August to 01 September 2023, ([AFRO-2023.pdf](#)).