

STRONGER SYSTEMS, HEALTHIER LIVES: DELIVERING IMPACT ACROSS THE AFRICAN REGION

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FOREWORD

It is with great pleasure that I present to you the second quarter edition of the Health Systems and Services (HSS) Cluster Newsletter for 2025.

This quarter was marked by the regional celebration of World Health Day 2025, under the theme "Healthy Beginnings, Hopeful Futures." The campaign reignited global and regional attention on maternal and newborn health, calling for action to end preventable deaths and ensure every woman and child can survive and thrive. Vibrant national commemorations, high-level advocacy events, and community-based activities echoed this message across the continent.

In May, we recognized the vital contribution of health workers during the International Day of the Midwife and International Nurses Day. Through regional webinars, we celebrated midwives and nurses, especially in humanitarian settings, and emphasized the urgent need to invest in their training, protection, and empowerment.

World Blood Donor Day 2025, observed in June under the theme "Give Blood, Give Hope," offered an opportunity to mobilize people across the Region around voluntary, unpaid blood donation. The campaign highlighted the power of solidarity in saving lives and giving hope to families and communities.

We are also proud to spotlight Mauritius, which became the first Small Island Developing State (SIDS) in the WHO African Region to receive essential medicines through the WHO-led pooled procurement initiative, an important step for equitable access and regional solidarity.

The stories in this edition reflect the Cluster's broad work in strengthening health systems, from health financing and regulation to advances in adolescent health. I am particularly proud of the collaboration behind these efforts, whether through technical support, joint programmes like 2gether 4SRHR, or regional dialogues on health investment.

We extend our heartfelt appreciation to all our partners, stakeholders and healthcare professionals whose dedication continues to drive progress across the African Region. Your efforts are a powerful reminder that collective action can turn hope into lasting impact. Together, we will keep striving for a future where every individual, especially women, children, and adolescents, can enjoy the right to health and well-being.

Thank you for your continued partnership and commitment.

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World Health Day 2025: A Powerful Call for "Healthy Beginnings and Hopeful Futures" Across Africa

On 7 April 2025, the WHO Regional Office for Africa joined global celebrations to mark World Health Day (WHD) under the compelling theme "Healthy Beginnings, Hopeful Futures." This year's observance launched a year-long campaign to champion maternal and newborn health across the continent, calling attention to the urgent need for equitable, high-quality care for women and children.

In the African Region, maternal and newborn mortality remains alarmingly high. Every hour, 20 mothers and 120 newborns die, most from preventable causes, adding up to 178,000 maternal and 1 million newborn deaths annually. New WHO data further reveals that four out of every five countries in the Region are set to miss global maternal survival goals by 2030, and most of the 65 countries that will fall short on newborn mortality targets are in Africa.

As part of the regional commemoration, WHO, in partnership with the Ministry of Health of the Republic of Congo, organized a series of high-level events in Brazzaville. A symbolic Walk the Talk on 6 April gathered health officials, UN partners, civil society and the public for a 5-km march. The event drew attention to the importance of community action and solidarity in advancing maternal and child health.

On 7 April, a high-level visit to Blanche Gomez Maternity Hospital in Brazzaville preceded the official WHD ceremony. Dr Ihekweazu and Health Minister Prof. Ibara Jean Rosaire engaged with mothers, newborns, and health workers, celebrating Congo's progress particularly its reduction in maternal deaths from 546 to 243 per 100,000 live births between 2000 and 2023. Healthcare workers who contributed significantly to these improvements were officially recognized and honoured.



"These are not just numbers" said **Dr Chikwe Ihekweazu**, **Acting WHO Regional Director for Africa.** "They represent real lives lost, families shattered and futures cut short."
He added, "On this World Health Day, let's reaffirm our commitment to ensuring that every mother and baby in Africa has a healthy beginning and a hopeful future."



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Member States' celebration of the WHD2025

Beyond the regional events, World Health Day 2025 marked the launch of a continental movement. Throughout the year, WHO is supporting Member States in amplifying country-led actions through storytelling, data-driven advocacy, and strategic communication. Across the Region, countries were encouraged to highlight local innovations, community engagement, and inspiring success stories that reflect both progress and resilience, even in the most challenging settings. The photos below capture the vibrant and diverse ways in which World Health Day was commemorated across the African Region.





"When midwives are trained, respected and empowered, health systems grow stronger, and every mother and child has a better chance at life. Let's act, because midwives are not only critical in every crisis. They are essential to every solution." stated Dr Chikwe Ihekweazu, Acting WHO Regional Director for Africa

Celebrating Midwives and Nurses: Building Stronger Health Systems Across the Life Course

In May 2025, the WHO Regional Office for Africa celebrated the International Day of the Midwife (5 May) and International Nurses Day (12 May) with two regional webinars that drew over 500 participants from across the continent. These events underscored the vital roles that midwives and nurses play in strengthening health systems and advancing Universal Health Coverage (UHC) across the life course.

Under the theme "Midwives: Critical in Every Crisis", the midwives' event focused on their leadership in humanitarian and fragile contexts. Panelists called for integrating emergency preparedness into midwifery training and strengthening professional development. The need to address systemic crises such as underfunding, supply shortages, and lack of recognition was also emphasized. A compelling example from South Sudan highlighted midwives leading efforts to expand sexual and reproductive health services in remote areas.

The International Nurses Day webinar, themed "Our Nurses, Our Future – Caring for Nurses Strengthens Economies", coincided with the release of the 2025 State of the World's Nursing Report. The report projects a shortfall of 1.8 million nurses in the African Region by 2030. Speakers addressed critical issues including gaps in pre-service education, curriculum-practice mismatches, and fragmented regulation. There was a strong call to harmonize nursing standards and bridge divides between Francophone and Anglophone systems for a more unified regional approach.

Both events reinforced that nurses and midwives are central to delivering quality care, ensuring continuity across life stages, and building resilient systems. WHO AFRO reaffirmed its commitment to advancing policies and partnerships that place the health workforce at the heart of UHC strategies. Investing in these professions is essential for equitable, peoplecentred health systems that leave no one behind.



"Nurses are more than caregivers. They are educators, innovators and frontline responders, often working in the most remote, under-resourced or crisis-affected areas. Let us move beyond words to action and commit to building a future in which nurses are trained, protected, respected, and empowered to lead." Said Dr Chikwe Ihekweazu



"Give Blood, Give Hope": WHO AFRO Marks World Blood Donor Day 2025

On 13 June 2025, the WHO Regional Office for Africa marked World Blood Donor Day with a mobile blood donation drive in Brazzaville under the global theme: "Give blood, give hope: together we save lives." The campaign highlighted the lifesaving power of voluntary, unpaid blood donations and called for greater solidarity to ensure safe blood is available to all who need it

Blood transfusion is a vital component of health care, especially in maternal care, emergencies, and the treatment of chronic conditions like sickle cell disease and cancer. In the African Region, over 5.2 million blood units were transfused in 2023, yet the supply remains far below need. Only six countries meet the WHO-recommended minimum of 10 donations per 1,000 population, and the regional average remains at six, well behind high-income countries.

The celebration aimed to raise awareness, recognize donors, and encourage more people, especially youth to become regular donors.

Despite progress, many countries still face challenges related to weak policies, inadequate infrastructure, and low public awareness. With funding from the European Commission, WHO continues to assist Member States in building strong, sustainable national blood systems that uphold safety, quality, and equity.

By organizing blood drives, raising public awareness, and investing in robust blood policies, the African Region moves closer to ensuring universal access to safe blood, a key pillar of health systems and life-saving care throughout the life course.



"Blood donation is an act of solidarity, a gift that connects us all. Behind every donation is a story of hope, humanity, and healing," said Dr Chikwe Ihekweazu, Acting WHO Regional Director for Africa, in his message for the day. "We thank all blood donors who came to give blood today and encourage them to do so on a regular basis"

Mauritius Leads the Way in Improving Access to Medicines Through Pooled Procurement

Mauritius has become the first Small Island Developing State (SIDS) in the WHO African Region to receive essential medicines through the WHO-led SIDS Pooled Procurement Initiative, marking a major milestone in strengthening access to affordable, quality-assured medicines and advancing Universal Health Coverage (UHC).

Launched in response to the high cost of medicines faced by SIDS with small populations and limited bargaining power, the pooled procurement programme enables participating countries to consolidate demand, reduce costs, and ensure reliable access to essential pharmaceutical products. The initiative was formally endorsed through the Seychelles Declaration in 2017 and operationalized in 2020 with six African SIDS (Cabo Verde, Comoros, Guinea-Bissau, Mauritius, Sao Tome & Principe, and Seychelles.)

On 27 May 2024, during the Seventy-seventh World Health Assembly, Mauritius signed a long-term supply agreement with Angel Biogenics Pvt Ltd, becoming the first country to finalize the pooled procurement process. The agreement secures 17 essential medicines, now available in public hospitals across Mauritius.



"We are taking a significant step toward alleviating the financial burden on our health system and ensuring that essential medicines remain within the reach of every Mauritian" said **Dr Anil Kumar Bachoo, Mauritian Minister of Health.**



The initiative, hosted by WHO and soon to transition its secretariat to Mauritius, achieved an average cost reduction of 56% on selected medicines. WHO continues to provide technical and strategic support to expand participation and ensure sustainability.

Mauritius' leadership sets a powerful example of regional solidarity and innovation in procurement, paving the way for equitable access to medicines and stronger health systems in other SIDS and African countries committed to Universal Health Coverage.



Zimbabwe: A Collaborative Journey Toward Adolescent Health and Wellbeing

From 10–13 June 2025, Zimbabwe hosted the Regional Interagency Steering Committee (RISC) meeting of the Joint UN "2gether 4 SRHR" Programme in Harare. Funded by the Swedish International Development Cooperation Agency (Sida), this initiative brings together WHO, UNFPA, UNICEF, and UNAIDS to drive progress on sexual and reproductive health and rights (SRHR) across East and Southern Africa, with a strong focus on adolescents.

Zimbabwe, where 42% of the population is under age 15 and teenage pregnancy affects 23% of adolescent girls, showcased its comprehensive adolescent SRHR programme. The Ministry of Health and Child Care (MoHCC), with technical support from WHO, has adopted WHO's Global Accelerated Action for the Health of Adolescents (AA-HA!) framework to implement inclusive, youth-responsive health services.

Key milestones include the rollout of an accreditation system for Adolescent-Friendly Health Facilities, with over 300 facilities now aligned with WHO standards. The country has also begun integrating WHO's self-care guidelines into service delivery, supporting initiatives such as HIV self-testing, HPV DNA self-sampling, and self-injectable contraception.



"Zimbabwe's commitment to adolescent health exemplifies how countries can translate global guidance into impactful local action, However, limited resources for scaling up remain a challenge, making sustained investment and partnership essential" said **Zvanaka Sithole, Technical officer, RMNCAH, WHO Zimbabwe**

As Zimbabwe finalizes its national self-care guidelines and strengthens health worker capacity, it reinforces its position as a regional leader in adolescent health within the UHC agenda.



"Investing in adolescents is investing in the future. Zimbabwe's model shows that with the right support, countries can achieve universal health coverage that truly spans the life course." **Dr Ogochukwu Chukwujekwu, Health Financing Lead, WHO Regional Office for Africa.**

Madagascar Develops First-Ever National Strategic Plan for Adolescent and Youth Health

With over 40% of its population under 15 and a growing youth demographic, Madagascar is prioritizing adolescent health as a core part of its "health for all" agenda. Recognizing the historical focus on sexual and reproductive health alone, the Ministry of Public Health, in collaboration with WHO and partners, has adopted a broader, data-driven approach to improve health outcomes for adolescents and young people.

Using WHO's Global Accelerated Action for the Health of Adolescents (AA-HA!) guidance and the Global Action for Measurement of Adolescent Health (GAMA)-recommended indicators, stakeholders across sectors, including youth associations, participated in a comprehensive process of mapping, analysis, prioritization, and planning. This culminated in the development and national validation of Madagascar's first National Strategic Plan for Adolescent and Youth Health.

The plan is structured around five strategic axes, including strengthening legal frameworks, expanding youth-friendly services, promoting social and behavior change, improving coordination, and enhancing monitoring and evaluation.

WHO provided technical and financial support throughout the process, organizing workshops and facilitating multi-sectoral collaboration. Key contributors included multiple government ministries, civil society, and donors such as World Bank/Global Financing Facility (WB/GFF) UNICEF, UNFPA, and Doctors of the World - Médecins du Monde (MDM).

By centering adolescent and youth health in its national agenda, Madagascar is making a powerful commitment to ensuring that no young person is left behind.





"The use of AA-HA! and GAMA has enabled Madagascar to design a plan that responds to the real and diverse health needs of young people. This holistic approach will undoubtedly pave the way for significant improvements in the health and wellbeing of Madagascar's youth" said **Dr Anaclet Ngabonzima**, **WHO Medical Officer.**



"I am delighted to see the Strategic Plan for Adolescent and Young People's Health come to fruition, with contributions from various ministries. This unprecedented collaboration highlights our unified approach to addressing the diverse health needs of our youth." Lethicia Lydia YASMINE, Secretary General of the Ministry of Public Health in Madagascar.



Ghana has taken a bold step toward achieving Universal Health Coverage (UHC) by convening a landmark National Policy Dialogue focused on transforming its health workforce. Held on 9th to 10th April 2025 under the theme "Transforming Ghana's Health Workforce for UHC: Align, Invest, Sustain," the forum brought together over 100 high-level stakeholders from health, education, finance, labour, civil society, and development partners.

The dialogue was informed by findings from Ghana's Health Labour Market Analysis (HLMA), conducted with technical support from WHO and funding from the UK FCDO. The HLMA revealed that while Ghana has tripled its public health workforce over two decades, challenges remain in aligning education with labour market needs, managing migration, and ensuring sufficient budget space for employment and retention.

Participants adopted a consensus to align workforce training with national health priorities, create a Health Professions Education Fund, and develop a Health Workforce Investment Plan integrated into Ghana's Medium-Term Expenditure Framework. A major milestone was the proposal to absorb 25,000 new health workers annually and implement a Health Worker Skills Preservation Scheme for unemployed professionals.

Ghana is also positioning itself as a global training hub through a Ghana Global Skills Sharing Programme that promotes ethical and mutually beneficial health worker migration. The WHO-supported dialogue reflects a whole-of-society approach and strong political will.

By transforming policy commitments into action, Ghana demonstrates how evidence-based planning and inclusive dialogue can drive progress on health workforce resilience.



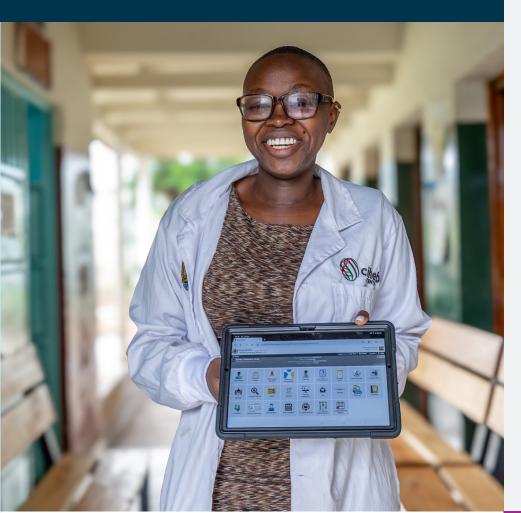
"This dialogue is not just another meeting. It is a call to action and the future of Ghana's health system depends on the choices we make today" said Hon. Kwabena Mintah Akandoh, Minister of Health.

Zimbabwe Advances Health Financing Reform with WHO Support

The Ministry of Health and Child Care (MoHCC) in Zimbabwe, with support from the World Health Organization (WHO), has initiated a comprehensive review of its 2017 Health Financing Strategy (HFS). This process will guide the development of a revised strategy for 2026–2030, aimed at enhancing equity, efficiency, and sustainability within the national health system.

From 11–13 June 2025, a three-day orientation workshop on the Health Financing Progress Matrix (HFPM) was held in Harare. The workshop convened 22 members of the national health financing review team and was facilitated by WHO experts from the country office, the Regional Office for Africa, and headquarters. Its objective was to build capacity in applying the HFPM framework and developing tools to support a thorough analysis of the country's health financing landscape.

The HFPM is a structured, evidence-based tool used to assess the performance of health financing systems, helping countries identify strengths, gaps, and opportunities for reform.





"This is more than a technical exercise. It is a strategic investment in our collective capacity to build a financing system that leaves no one behind" said **Dr Tiruneh Desta Alamerew, WHO Representative in Zimbabwe.**

Key workshop outputs included a deeper understanding of the HFPM's application, the development of tailored data collection tools, and a detailed roadmap for the review process. Participants also emphasized the importance of inclusive, consultative, and evidence-based policymaking.

With funding from the Global Fund, WHO provided technical and logistical support, alongside contributions from UNICEF and CHAI. The activity showcases effective collaboration across all three levels of WHO.

With this strong foundation, Zimbabwe is well-positioned to finalize a revised Health Financing Strategy that will improve health outcomes.



Tracking Every Death, Saving Every Life: Strengthening Surveillance to End Preventable Child Mortality

Ending preventable stillbirths, newborn, and under-five deaths is a core priority for achieving Universal Health Coverage (UHC) across the life course. In the WHO African Region, understanding the precise causes of these deaths is critical for designing effective policies and health system responses that save lives.

To address this, WHO is supporting the implementation of robust mortality surveillance and response systems, including maternal and perinatal death surveillance and response (MPDSR) and paediatric death audits. Complementary initiatives such as the Child Health and Mortality Prevention Surveillance (CHAMPS) Network, operating in seven countries (Ethiopia, Kenya, Mali, Mozambique, Nigeria, Sierra Leone, and South Africa) in the Region, investigates causes of stillbirths and deaths in children under five using advanced diagnostic methods including minimally invasive tissue sampling (MITS), with consent from families.

Findings from CHAMPS confirm that over 80% of deaths among children are due to preventable causes, often involving multiple conditions and a complex chain of events. The network's granular data is being used to improve national policies, health planning, and service delivery, complementing routine data systems and quality improvement initiatives. WHO contributes thought leadership through its role on CHAMPS' Global Partners Board.

Moving forward, the aim is to scale data use for action, improve community engagement, and strengthen quality of care across health systems, bringing the region closer to ending preventable child deaths.



"Each stillbirth, newborn, and under-five death deeply affect families and communities. By recording and reporting these deaths and with the family's consent undertaking further investigations, we can better understand the avoidable factors and act to prevent future deaths," said Dr Chikwe Ihekweazu, Acting Regional Director, WHO African Region, at the CHAMPs Annual Network meeting and Global Partners Board meeting.

Spotlight on Child Safety: Tackling Injuries to Advance Universal Health Coverage

As Africa makes progress in reducing childhood deaths from infectious diseases, a silent but deadly threat is rising injuries among children and adolescents.

Often neglected in health and development planning, injuries are now among the leading causes of death in children across the WHO African Region, posing a major challenge to achieving Universal Health Coverage (UHC) and the Sustainable Development Goals.

According to the WHO Global Health Estimates (2021), drowning is one of the leading causes of injury-related deaths among children under five. Among children aged 5–14, road traffic injuries are now the second leading cause of death, following lower respiratory infections.

These deaths are largely preventable. Children are being fatally injured while walking to school on unsafe roads, playing near unprotected water sources, or riding in vehicles without appropriate restraints. Gaps in infrastructure, weak enforcement of safety laws, and low public awareness are key risk factors.

Cost-effective solutions exist, such as fencing pools and open water, enforcing child restraint laws, developing safe school zones, and educating caregivers. Yet many countries still lack national injury prevention policies or mechanisms for effective cross-sectoral action.





"Children must be safe everywhere, at home, on their way to school, at play, and in every public space.
Ensuring their safety is not just a health issue; it is a matter of human rights and sustainable development." says Dr Adelheid Onyango, Director, Health Systems and Services ad interim at WHO Regional Office for Africa.

Through the Universal Health Coverage -Life Course approach, WHO supports countries to develop integrated, child-centred services and promote safer environments.

The Universal Health Coverage Life Course and Healthier Populations teams at WHO AFRO supports countries to develop integrated, child-centred services and promote safer environments.

The message is clear: A child's safety is a fundamental component of their right to health. No child should die from a preventable cause.

Namibia Strengthens Maternal and **Neonatal Health Through High-Level Engagement and Surveillance**

Namibia is intensifying efforts to end preventable maternal and child deaths through strong leadership, robust data systems, and continuous quality improvement. In 2023, the country released the second edition of its National Guidelines for Reviewing and Responding to Maternal Deaths, Near Misses, Stillbirths, and Neonatal Deaths. These guidelines support the work of the National Maternal Stillbirth and Neonatal Death Review Committee (NMSNDRC), which analyzes avoidable deaths and recommends corrective measures to improve outcomes.

With technical and financial support from WHO, the NMSNDRC conducted regional visits and contributed to drafting the 2021-2024 triennial review report and a policy brief summarizing key findings. The Chairperson, joined by WHO and Ministry of Health and Social Services (MoHSS) officials, presented the brief to Minister of Health Dr. Esperance Luvindao and Executive Director Mr. Penda Ithindi. The committee highlighted key challenges, including the absence of designated MoHSS staff positions to coordinate its activities and delays in responding to surveillance findings.

Namibia has reduced maternal mortality from over 450 in 2000 to 139 in 2023, though still twice the SDG 3.1 target of 70 deaths per 100,000 live births. Neonatal mortality remains high at 24 per 1,000 live births, double the SDG target. The main causes of maternal deaths, hemorrhage, hypertensive disorders, and abortive outcomes, mirror regional patterns.



"I reaffirm the Government's unwavering commitment to ending preventable maternal and child deaths. I will ensure that the ministry's structures are fully responsive to the challenges identified by the National Maternal, Stillbirth and Neonatal Death Review Committee, and that appropriate actions are taken without delay" said Dr. Luvindao.

The government is integrating MPDSR into the Primary Health Care Directorate, funding through the RMNCAH Strategy, and creating NMSNDRC staff positions. Through quality improvement cycles evidence-based UHC framework.





Algeria Advances Pharmaceutical Regulation to Strengthen Health Security

In Algeria, the National Agency for Pharmaceutical Products (ANPP) is leading the way in strengthening regulatory systems to ensure equitable access to safe, effective, and quality-assured medical products.

Established in 2018, ANPP oversees the registration, approval, and oversight of pharmaceutical products and medical devices in Algeria. In February 2025, the country marked a critical milestone by participating in the launch of the North Africa Medicines Regulatory Harmonization (NA-RH) initiative, part of the broader African Medicines Regulatory Harmonization (AMRH) programme. This regional effort aims to standardize medical regulations and address persistent bottlenecks such as prolonged product registration timelines and fragmented regulatory frameworks.

Following the Algerian government request to support advancing its regulatory maturity, the WHO Regional Office for Africa, together with the WHO Country Office in Algeria, facilitated, 25-29 May 2025, a high-level benchmarking study visit to the Egyptian Drug Authority (EDA), a WHO Maturity Level 3 regulatory institution recognized for its operational excellence.

With the self-benchmarking exercise now completed, Algeria is poised to address the identified gaps and to strengthen the ANPP further. By doing so, the country joins a growing movement of African nations including Ghana, Nigeria, Rwanda, Senegal, South Africa, Tanzania, and Zimbabwe, that are advancing regulatory excellence.

These efforts not only safeguard public health but also boost local pharmaceutical manufacturing, promote economic resilience, and drive regional integration, aligning with the WHO vision for stronger health systems.



During the visit, **Dr.**Ali El-Ghamrawy,
Chairman of the
EDA, expressed
the Egyptian
government's
full support for
Algeria's regulatory
reform efforts: This
collaboration marks
a significant step in
Algeria's pathway
toward regulatory
excellence.



High-quality medical products are essential to safeguarding public health. In the WHO African Region, National Medicines Regulatory Authorities (NRAs) have ramped up efforts to detect and prevent the circulation of substandard and falsified (SF) medical products, which threaten patient safety and health system credibility.

From 10–13 June 2025, WHO convened a regional workshop in Nairobi, Kenya, to build capacity for the detection and management of SF products, with a special focus on in-vitro diagnostics (IVDs). These include tools such as pregnancy tests, rapid diagnostic kits for malaria and HIV, and other point-of-care tests vital for timely diagnosis and treatment.

The workshop brought together over 40 participants from 25 countries in the African Region. Discussions emphasized the importance of integrating IVDs into national quality surveillance systems, given that inaccurate test results can lead to misdiagnosis, mistreatment, and increased disease burden. Participants also examined strategies to strengthen consumer reporting mechanisms and regulatory action in response to identified risks.

By the end of the workshop, countries reached consensus on practical actions to enhance vigilance, including targeted post-market surveillance, data sharing, and cross-border collaboration.

This initiative supports WHO's broader strategy to ensure the quality, safety, and efficacy of health technologies as a pillar of resilient health systems. Strengthening regulatory oversight of diagnostics and therapeutics is a critical step toward equitable access to safe care.



"The safety and accuracy of medical products are foundational to public trust and health system performance" emphasized Mr Babatunde Jayeola, Technical Officer - Health Products, WHO Regional office for Africa.

Central African Republic Expands and Reforms Its Health Workforce to accelerate progress towards Universal Health Coverage

The Central African Republic (CAR) has made commendable strides in expanding its health workforce, with the density of doctors, nurses, and midwives rising from 2.55 per 10,000 population in 2016 to 11.79 in 2023. However, major challenges persist, including limited training capacity, high attrition, and overreliance on external funding.

To address these challenges, WHO, through its Health Workforce team, has supported CAR since 2023 to develop transformative strategies. Following a joint scoping mission with the Health Financing team, a Health Labour Market Analysis (HLMA) was conducted to assess supply, demand, and needs for health workers. In May 2025, this led to the development of a Human Resources for Health (HRH) Strategic Plan and an Investment Compact, in alignment with the Africa Health Workforce Investment Charter.



Under the leadership of the Minister of Health, three major policy reforms have been initiated:

- Lifting of intake limits in training institutions: The restrictive numerus clausus policy has been removed, allowing public health training institutions to admit students based on capacity, not capped quotas.
- Training of 2,000 health assistants by 2026: A national programme has been approved to train health assistants for deployment in underserved areas.
- Recruitment of 1,408 health workers in 2025: The government has already hired 1,408 health workers of all kinds including 147 doctors, 168 nurses, and 102 midwives as part of its plan to recruit 2,000 by 2026.

By prioritizing health workforce investment, CAR is taking bold steps toward building a resilient health system and accelerating progress towards Universal Health Coverage, ensuring that quality care reaches every individual.

Driving Momentum for the Lusaka Agenda: A Call for Aligned, Sustainable Health Investment in Africa

Launched in December 2023, the Lusaka Agenda (LA) is galvanizing momentum to reshape how Global Health Initiatives (GHIs) engage with African countries. Framed around five transformative shifts, the Agenda emphasizes alignment with national priorities, strengthening country leadership, and accelerating progress toward domestically financed, resilient health systems and universal health coverage (UHC).

Against the backdrop of global economic challenges, climate shocks, and post-COVID recovery, WHO convened a high-level regional webinar to reflect on LA progress and chart the way forward. The 90-minute session brought together stakeholders from all 47 WHO African Region Member States, including Ministries of Health, WHO representatives, GHI partners, donors, and civil society.

The webinar featured insightful country-level presentations from Malawi and the Democratic Republic of Congo (DRC), highlighting implementation realities, coordination challenges, and opportunities for alignment. Regional actors, including the Joint Coordinating Working Group of the Global Fund, Gavi, and the Global Financing Facility, reaffirmed their commitment to harmonized support, while WACI Health amplified civil society perspectives.



WHO continues to provide strategic coordination and technical support to Member States advancing the agenda, in partnership with GHIs, civil society, and national institutions. Together, they are laying the groundwork for more accountable, country-led health investment in Africa.



"The Lusaka Agenda has become very intuitive. We must adapt more than the Agenda envisaged. It offers Africa an opportunity to rethink our business models, including adopting strategies to improve investment efficiencies and value for money" said Dr Kalu Akpaka, on behalf of the Director for Programme Management, WHO Regional Office for Africa.



Ms Susan Muchache, Executive Director of the African Constituency Bureau for the Global Fund, emphasized: "We would like to see partners aligning with country health plans... programs well harmonized, verticalization eliminated, and wastage reduced."

Dr Polydor Mbongani Kabila from DRC added "We want to call for more countries to join the Lusaka Agenda Champion Countries Forum."



Strengthening Planning and Legal Frameworks in the African Region

Strengthening Health Systems and Services in the WHO African Region requires integrated health sector planning and robust legal frameworks. In April and June 2025, WHO the Regional Office for Africa hosted two high-level regional webinars aimed at supporting countries in aligning national health systems with Universal Health Coverage and health-related Sustainable Development Goals (SDGs).

On 10 June, the Health Strategies and Governance (HSG) team organized a regional webinar introducing WHO's newly developed integrated toolkits for health sector planning, monitoring, and performance review. Participants included representatives from WHO Country Offices and Ministries of Health, including focal points from Senegal and Eswatini. These toolkits are designed to align national health strategies with budgets and reviews, fostering more inclusive, evidence-based, and results-oriented planning processes.



"These toolkits are a game-changer for aligning country strategies with UHC goals and SDG 3" said **Dr Hela Ben Mesmia, Team Lead, Health Strategies and Governance, WHO Regional Office for Africa**

The session allowed countries to share lessons from piloting the toolkits and provided feedback for final refinement. The webinar reinforced momentum toward institutionalizing annual performance reviews and establishing national health observatories.

On 24 April, WHO Regional office for Africa convened a regional webinar on legal reforms for UHC, with technical support from the O'Neill Institute. Countries including Ghana and Ethiopia were guided through a phased approach to assessing and validating UHC-related health laws. Activities are already underway, including desk reviews, stakeholder consultations, and the planning of national validation workshops.



"Legal systems must be proactively designed, not reactively fixed during crises" emphasized Françoise Bigirimana, Techical Officer Health Strategies and Governance, WHO Regional Office for Africa

World Health Organization Regional Office for Africa

Health Systems and Services Cluster

OUR VISION

All people across different population sub-groups in the African region have the health care they need, where and when they need it without suffering financial hardship.

