



World Health
Organization

African Region

UNIVERSAL HEALTH COVERAGE/
LIFE COURSE (ULC) CLUSTER



PARTNERING FOR PROGRESS: LIFE COURSE ACTION FOR UNIVERSAL HEALTH COVERAGE

NEWSLETTER

JANUARY – MARCH 2025

FOREWORD



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WHO Regional Office for Africa

It is with great pleasure that I welcome you to the first edition of the ULC Cluster Quarterly Newsletter for 2025. This newsletter offers a snapshot of the transformative work taking place across the African Region to advance Universal Health Coverage (UHC) through a life course approach, placing people, their needs, and their well-being at the heart of every intervention.

Over the past quarter, we have witnessed an encouraging acceleration of efforts aimed at addressing some of the most pressing health challenges in our Region. From bold reforms in Malawi to improve primary health care and data systems, to the launch of the North African Medicines Regulatory Harmonization Initiative, our Member States are demonstrating strong leadership, resilience, and a collective commitment to health equity.

The stories featured in this edition are a testament to what we can achieve through effective partnerships, evidence-based planning, and country-led innovation. The regional meeting on early childhood development held in Nairobi underscored the importance of nurturing care as a foundation for lifelong health. The AfHEA conference in Kigali brought renewed focus on sustainable health financing and investment in Africa's health workforce, two pillars critical for delivering on the promise of Universal Health Coverage. We are also proud to highlight progress in maternal and newborn health, health law reforms, and regulatory system strengthening. These efforts are laying the groundwork for more inclusive, accountable, and resilient health systems, better equipped to respond to current and future health needs.

As we look ahead, I encourage each of you to build on these successes, share your experiences, and continue advocating for solutions that prioritize the most vulnerable.

We appreciate all our partners for their valued partnership to accelerate action to improve the health and well-being of the people we serve towards achieving Universal Health Coverage. Together, let us drive forward a shared vision of healthier populations and stronger health systems, across every stage of life.

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NEW CHILD MORTALITY ESTIMATES UNDERSCORE THE URGENCY TO INVEST IN AFRICA'S FUTURE



The number of children dying globally before their fifth birthday declined to 4.8 million in 2023, while stillbirths remained at approximately 1.9 million, according to new reports released on 25 March 2025 by the United Nations Inter-Agency Group for Child Mortality Estimation (UN IGME). In the WHO African Region, under-five mortality has decreased by 55% since 2000, with more children surviving the most critical stages of life. Five countries, one high-income, two upper-middle income, and two lower-middle income, have achieved the Sustainable Development

Goal target of under-five mortality at or below 25 per 1,000 live births. Encouragingly, several low-income countries are also making significant progress.

However, the region still bears a disproportionately high burden of preventable deaths. Most countries are at risk of missing the global targets for reducing maternal, newborn, and child mortality, as well as stillbirths. Stark inequities persist, with mortality rates in some sub-national areas comparable to global levels from 1990.



“From tackling malaria to preventing stillbirths and ensuring evidence-based care for the tiniest babies, we can make a difference for millions of families” said Dr Tedros Adhanom Ghebreyesus, WHO Director-General, adding **“In the face of global funding cuts, there is a need more than ever to step up collaboration to protect and improve children’s health.”**

Progress has been driven by increased coverage of evidence-based interventions, stronger health systems, and multisectoral efforts to improve determinants like water and sanitation. Continued investment in primary health care reforms will be key to accelerating progress and delivering the future Africa’s children deserve.

AFRICA TAKES A BOLD STEP TOWARD HEALTH EQUITY WITH INNOVATIVE FINANCING PLATFORM



In a landmark effort to address the persistent health financing gap in low- and middle-income countries, the World Health Organization (WHO) and leading multilateral development banks launched the Health Impact Investment Platform (HIIP) in June 2023. Designed to accelerate primary health care (PHC) investment, the platform has already mobilized over US\$30 million in catalytic funding and aims to reach over US\$1.5 billion.

HIIP provides flexible grants and WHO-led technical assistance to governments for PHC investment planning aligned with national strategies. With its secretariat hosted at WHO headquarters and African coordination led by the WHO Regional Office for Africa, the platform is especially critical for the African Region, where resilient PHC systems are key to achieving universal health coverage (UHC) and pandemic preparedness.

On 17 March 2025, HIIP's inaugural Steering Committee, comprising WHO, the European Investment Bank, and the Islamic Development Bank, convened to approve operational documents and endorse concept notes for seven countries. Ethiopia's proposal received full approval, unlocking funds to finalize its PHC investment plan.

Currently, five African countries are actively engaged, with more in the pipeline. The African Development

Bank is also finalizing its participation, signaling growing momentum and broader institutional commitment.

Rooted in national ownership and long-term sustainability, HIIP builds on WHO's convening power and technical guidance to align financing with country priorities and SDG targets. By linking investment to strong, country-driven PHC plans, the platform is helping African nations strengthen equity-focused, climate-adaptive, and crisis-resilient health systems, paving the way for lasting impact.

As momentum grows, HIIP is set to become a cornerstone in transforming how health systems are financed and supported in Africa.



This platform is a transformative initiative to build climate-adaptive and crisis-resilient primary health care” said Dr Tedros Adhanom Ghebreyes,WHO Director-General .



SPOTLIGHT ON HEALTH WORKFORCE INVESTMENT: AFHEA PRE-CONFERENCE SETS THE STAGE FOR REGIONAL ACTION



At the 7th African Health Economics and Policy Association (AfHEA) Scientific Conference in Kigali, Rwanda, a pivotal pre-conference session held on 10 March 2025 spotlighted a key regional priority: transforming and investing in Africa’s health workforce. Co-convened by WHO and The Global Fund, the event rallied multisectoral leaders to advance the operationalization of the Africa Health Workforce Investment Charter.

Chaired by Dr. Nertila Tavanxhi (The Global Fund) and moderated by Dr. Sunny C. Okoroafor (WHO), the session featured a keynote from Dr. James Avoka Asamani, Health Workforce Team Lead at WHO Regional Office for Africa. He emphasized the Charter’s role in addressing Africa’s projected shortfall of 6.1 million health workers by 2030 and catalyzing sustainable investment.

Country spotlights from Uganda, Zimbabwe and Kenya highlighted practical steps toward applying health labour market analysis to inform policy reforms and investment strategies. Panelists shared early implementation lessons, including Uganda’s workforce optimization strategies, Zimbabwe’s

investment compact, and Kenya’s analytical approach to strategic planning.

Participants affirmed the need for smarter, better-aligned financing to tackle workforce gaps, emphasizing the Charter’s value in guiding such reforms.

As the African Region pushes toward Universal Health Coverage and health security, the momentum generated at the AfHEA pre-conference promises to accelerate coordinated, country-led action on health workforce investment. Also, the preconference garnered a strong commitment from stakeholders to operationalize the principles of the Charter.



Implementing the principles of the Africa Health Workforce Investment Charter is a path to unlocking sustainable investments in Africa’s Health Workforce towards halving the 6.1 million shortages by 2030.

Dr James Avoka Asamani, Team Lead - Health Workforce Unit, WHO Regional Office for Africa

FINANCING HEALTH FOR ALL: WHO REGIONAL OFFICE FOR AFRICA EXPLORES MEASUREMENT, POLICY, AND LEARNING AT AFHEA 2025



At the 7th African Health Economics and Policy Association (AfHEA) Scientific Conference held in Kigali, Rwanda, WHO Regional Office for Africa convened a high-impact satellite session on 11 March 2025, titled “Financing Health for All in the African Region: Measurement Issues, Policy Responses and Learnings.” The session brought together policymakers, researchers, and technical partners to explore financial protection, primary care financing, and policy learning as pillars for achieving Universal Health Coverage (UHC) in Africa.

The event unfolded across three thematic sessions. The first focused on using financial protection data to inform policy, featuring case studies from Ethiopia, Côte d’Ivoire, and Uganda. The second session examined the role of public financial management in primary health care financing, presenting innovative approaches and ongoing challenges. A final session delved into improving policy learning processes to support sustainable reforms across the region.

Presentations from WHO, UNICEF, GFF, Results for Development, and national governments provided practical insights into how countries are reducing fragmentation, strengthening governance, and applying evidence for action.

Participants called for deeper alignment between technical tools and local realities, while reinforcing the importance of cross-country learning and collaboration.

The session reinforced financing reform and strategic learning as essential drivers of resilient, people-centered health systems in Africa.



Moving forward, it is imperative that we translate evidence into action by fostering collaborations across sectors, implementing sustainable financing models, and continuously learning from best practices globally and regionally.”

said Dr Sophie Faye, Technical Officer -Economic Evaluations & Priority Setting, WHO Regional Office for Africa.

STRENGTHENING LEGAL AND STRATEGIC HEALTH SYSTEM FOUNDATIONS FOR UHC IN THE AFRICAN REGION



The World Health Organization (WHO) is accelerating efforts to support African countries on their path to Universal Health Coverage (UHC) by bolstering the legal and strategic foundations of national health systems. Through targeted legal reforms, strategic planning, and country-level collaboration, WHO is working with governments to ensure their health systems are fit for purpose, inclusive, and resilient.

A major highlight this year was the ongoing regional legal assessment initiative, which examines how existing public health laws across 47 countries in the African Region influence progress toward UHC.

WHO worked in partnership with the O'Neill Institute at Georgetown University to gather and analyze legal data, producing summary reports, a compendium of public health laws, and technical guidance. The initiative has gathered and analyzed legal data, producing summary reports, a

compendium of public health laws, and technical guidance. Ghana and Rwanda have already undergone sensitization sessions, while validation engagements are planned in Ethiopia, Eswatini, Gambia, Liberia, Namibia, Angola, Mozambique, and Zambia. These efforts support countries in identifying legal gaps and implementing evidence-based reforms.

To advance this work, a regional webinar will be held on 24 April 2025 to prepare WHO country policy advisers and Ministries of Health for the next phase of validation. The session will introduce the validation tools and methodology, highlight early lessons from Ghana and Ethiopia, and present the Country Planning Cycle (CPC) database, an important platform for accessing national strategic and legal health instruments.

FRENCH PARLIAMENTARIANS VOICE SUPPORT FOR CONTINUED MUSKOKA FUND INVESTMENT IN AFRICA'S WOMEN AND CHILDREN



A high-level advocacy meeting was held with members of the French National Assembly's Foreign Affairs Committee to rally support for the continuation and potential increase of the Muskoka Fund for Women's and Children's Health. The Muskoka Fund, established by France in 2010, is a vital source of funding for maternal, newborn, child, adolescent health and nutrition across six WHO African Region countries: Benin, Côte d'Ivoire, Guinea, Senegal, Chad, and Togo.

Since its inception, the Fund has provided €193 million through four UN agencies, with WHO receiving around €53 million (27%). These funds support life-saving interventions across a population of 110 million, including 3.7 million annual births.

During the meeting, Dr Leopold Ouedraogo, Technical Officer for Sexual and Reproductive Health at WHO Regional Office for Africa, outlined

the critical impact of Muskoka-supported work in strengthening health systems, human resources, essential medicines, and quality of care. He emphasized the need to maintain or expand this support to sustain progress made in the region.

The session featured a joint inter-agency presentation where regional focal points from WHO, UNFPA, UNICEF, and UN Women showcased their respective contributions. Two videos provided concrete examples of Muskoka's positive impact in beneficiary countries. Parliamentarians expressed strong interest in maintaining or doubling the Fund's budget for 2026, recognizing its value despite national fiscal pressures. The session concluded with a call for more frequent engagements with parliamentarians. This united front from the four UN agencies sends a strong message: investing in women and children's health remains central to advancing global health and sustainable development.



During the meeting, Dr Leopold Ouedraogo Technical Officer, Sexual and Reproductive Health, outlined the critical impact of Muskoka-supported work in strengthening health systems, human resources, essential medicines, and quality of care.

NURTURING THE FUTURE: COUNTRIES UNITE TO BOOST EARLY CHILDHOOD DEVELOPMENT IN THE HEALTH SECTOR



A regional technical meeting held in Nairobi, Kenya from 25–28 February 2025 brought together health and development leaders from eight Eastern and Southern African countries to strengthen support for early childhood development (ECD) through the health sector. The event was co-organized by UNICEF’s Eastern and Southern Africa Regional Office and WHO’s Regional Office for Africa.

Participants from Botswana, Burundi, Kenya, Malawi, Mozambique, Uganda, Tanzania, and Zambia convened to reflect on progress, share innovations, and build action plans to better support nurturing care and caregiver well-being. The meeting featured a blend of expert presentations and country-led discussions,

emphasizing practical exchange and peer learning. By the end of the four-day session, each country team had refined action plans to scale up nurturing care interventions, with technical support needs identified. Country teams reported high satisfaction with the meeting’s relevance and outcomes, expressing commitment to integrating learnings into national plans and sustaining inter-country collaboration.

This gathering is a milestone in advancing the 2018 Nurturing Care Framework, which has galvanized multisectoral approaches to early childhood development and placed caregivers and their young children at the heart of health and nutrition services.



“Inter-country meetings such as these serve to grow country capacities, promote the diffusion of learning and innovations to drive scale up, and increase accountability for access to quality ECD interventions to reach all children” said Dr Janet KAYITA, Team Lead- Child and Adolescent Health Unit, WHO Regional Office for Africa.

Supported by the Conrad Hilton Foundation through Myriad USA, this initiative highlights the power of partnerships between WHO, UNICEF, and Member States in achieving SDG targets on child health and development.

ACCELERATING MATERNAL AND NEWBORN HEALTH GAINS IN MALAWI



Malawi is intensifying its push to reduce maternal and newborn deaths, aiming to meet the SDG 3 targets of fewer than 70 maternal deaths and 12 newborn deaths per 100,000 and 1,000 live births, respectively, by 2030.

Despite recent progress, such as a reduction in neonatal mortality from 26 in 2015/16 to 24 in 2024 per 1,000 live births, challenges remain. To close the gap, WHO is working closely with the Ministry of Health in Malawi, under the Maternal and Newborn Health (MNH) Acceleration Plan 2025–2027.

A major focus is to improve the Maternal and Perinatal Death Surveillance and Response (MPDSR) system. Through 70 zonal and district mentors, Malawi has rolled out three rounds of training in 18 districts, reaching over 700 healthcare workers. These sessions emphasized quality improvement, use of the International Classification of Diseases 11th Revision (ICD-11) for accurate death reporting and developing responsive action plans.

WHO has also helped integrate Maternal and Perinatal Death Surveillance and Response into routine quality improvement systems, linking audit findings with actionable solutions, with a goal of preventing future deaths through timely review and systemic change.

Capacity building goes beyond audits. Simulation-based training and use of skills labs are bridging gaps in emergency obstetric and newborn care, with special focus on postpartum hemorrhage, infections, and hypertensive complications.

Through this collaborative approach, WHO and Malawi are laying the groundwork for safer pregnancies and healthier newborns, progressing toward a future where every birth is a celebration, not a risk.

DRIVING HEALTH SECTOR REFORM IN MALAWI: A UNIFIED APPROACH FOR IMPACT



Malawi continues to make strong strides in implementing its Health Sector Strategic Plan III (HSSP III) 2023–2030, guided by the national reform principle of “One Plan, One Budget, One M&E Report.” With WHO’s support, the country is aligning its 2024/2025 health priorities with Universal Health Coverage (UHC) and Sustainable Development Goal 3 (SDG 3).

The reform agenda focuses on nine priority areas, including service delivery, health financing, workforce, and governance, in line with the Lusaka Agenda. These strategic shifts emphasize domestic leadership, donor coordination, stronger investment in primary health care (PHC), and results-driven planning. WHO plays a key role in facilitating implementation.

Milestones include the 2024/2025 Aide Memoire outlining priority interventions and revitalized coordination through the health donor group. WHO also supports stronger engagement between the Ministry of Health and partners via Sector Working Groups and technical taskforces.



“WHO is supporting the Lusaka Agenda to realize the HSSP III vision. The year 2025 will further prioritize PHC and resilient health systems” **said Dr Neema Kimambo, WHO Representative in Malawi.**

District-level planning and implementation have been strengthened, with integrated service delivery models piloted in three districts, focusing on maternal, newborn, HIV, and noncommunicable diseases.

With a renewed emphasis on PHC, from health promotion to palliative care, Malawi is demonstrating strong commitment to health reform. WHO continues to provide technical guidance and support annual performance reviews, driving progress toward 2030 health goals.

STRENGTHENING HEALTH DATA SYSTEMS FOR SMARTER DECISION-MAKING IN MALAWI



Malawi is advancing rapidly in its quest to build robust health information systems (HIS), driven by its leadership in the Health Data Collaborative (HDC) and commitment to data for Sustainable Development Goal 3 (SDG 3). With WHO's support, the country is enhancing national and district-level data capacity to enable evidence-based planning and improved service delivery.

Over 428 data officers including Health Management Information System Officers, statisticians, and M&E officers have been trained across nine districts (Rumphi, Mzimba South, Chikwawa, Nsanje, Ntchisi, Thyolo, Mzimba North, Phalombe, and Balaka). This has significantly improved the quality and timeliness of health reporting and empowered facilities to make smarter, data-driven decisions.

To address health inequities, WHO has equipped national and district teams with tools to analyze disparities across regions and population groups, helping ensure targeted interventions reach the most vulnerable.

Malawi also completed key assessments which will guide the rollout of a new data management and capacity-building plan aligned with the 2025–2030 Health Sector Strategic Plan monitoring framework.

Additionally, the country has adopted the 24 Metrix which is a tool to measure health system performance in line with PHC goals, improving donor coordination and reducing duplication.

This integrated, partner-aligned approach is a milestone in digital health and data governance. Malawi is now better equipped to track health outcomes, respond effectively, and advance toward Universal Health Coverage.

NORTH AFRICAN NATIONS LAUNCH GROUNDBREAKING MEDICINES REGULATION INITIATIVE



In a historic milestone for health systems integration, the inaugural meeting of the North African Medicines Regulatory Harmonization (NA-MRH) Initiative was held in Cairo, Egypt, from 18–20 February 2025. The event marked the official launch of the first regional effort to harmonize medical product regulation in North Africa.

Jointly supported by the WHO Regional Office for Africa, WHO Eastern Mediterranean Regional Office (EMRO), and African Union Development Agency - New Partnership for Africa's Development (AUDA-NEPAD), the initiative aims to address longstanding regulatory fragmentation in a region that houses one-third of Africa's pharmaceutical manufacturing capacity. Until now, North Africa was the only subregion without a harmonized regulatory framework, resulting in delays, inefficiencies, and limited cross-border coordination.

Key outcomes included the formal establishment of the NA-MRH Initiative, endorsement of its governance structure and terms of reference, and adoption of a 2025 roadmap to guide implementation.

This is an incredible milestone, North Africa plays a critical role in the regulation, commerce, and manufacturing of medical products” said H.E. Dr Ali Ghamrawy, Chair of Egypt's Drug Authority and the NA-MRH Steering Committee.

WHO Regional Office for Africa contributed technical leadership in the development of governance documents, operating models, and strategic planning, helping lay the groundwork for this launch. WHO's regional offices continue to collaborate closely to ensure continental coherence in regulatory strengthening efforts.



The presence of all North African countries at this meeting is inspiring. The timing could not be more perfect.” noted Dr Mohamed Ismail, Team Lead - Medicines Supply & Health Infrastructure, WHO Regional Office for Africa.

WHO AND UGANDA DEEPEN COMMITMENT TO STRENGTHEN MEDICINES REGULATION



From 20–21 January 2025, a joint mission by WHO Headquarters and the WHO Regional Office for Africa visited Uganda to support progress on regulatory systems strengthening, with a particular focus on enabling the country’s National Drug Authority (NDA) to reach Maturity Level 3 (ML3) under WHO’s Global Benchmarking Tool (GBT).

Hosted in collaboration with the Ministry of Health and NDA, the visit aimed to assess progress since Uganda’s 2019 benchmarking review and advance efforts to implement key legal and institutional reforms. During meetings with the Minister of Health, NDA leadership, development partners, and WHO officials, stakeholders reaffirmed their commitment to fast-track the National Drug and Health Products Bill and conduct self-benchmarking in the next six months.

The NDA’s Quality Control Laboratory was recognized for achieving Maturity Level 4 (ML4), positioning Uganda as a regional leader in pharmaceutical quality assurance.



Achieving Maturity Level 3 is not just a regulatory milestone, it’s a strategic imperative” said Dr Medard Bitekyerezo, NDA Board Chair. WHO reaffirmed its technical and financial support, mobilizing development partners through the Coalition of Interested Parties.

The visit marks a critical step in Uganda’s journey toward a robust, internationally aligned regulatory system. It will ultimately lead to improved access to quality-assured health products, support local manufacturing, and position Uganda to contribute to the African Medicines Agency (AMA) framework.

This mission was supported by the European Commission and engaged key partners including Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), Global Alliance for Vaccines and Immunization (GAVI), the World Bank, and FAO.

PAUL EHRLICH INSTITUTE PARTNERS WITH WHO TO STRENGTHEN BLOOD SAFETY IN AFRICA



In a critical step toward enhancing the safety and availability of blood products in the WHO African Region, the German Paul Ehrlich Institute (PEI) conducted a high-level visit to WHO's Regional Office for Africa in Brazzaville, Congo. Held from 25–28 February 2025, the visit aimed to deepen collaboration on blood regulation and transfusion practices.

The visit builds on the commitments made under WHA Resolution 63.12 and Regional Committee Resolution AFR/RC66/R2, which call for improved blood safety and stronger national regulatory systems. Despite significant progress by Member States, critical gaps remain in blood product regulation and supply.

During the four-day mission, PEI and WHO identified flagship countries to benefit from support under the forthcoming “Blood Train” project. A joint workplan was developed, outlining priority actions to boost regulatory capacity and ensure safe, adequate blood supply in the region.

As part of the visit, WHO Regional Office for Africa facilitated key discussions and provided technical guidance, drawing on its experience in organizing national regulatory strengthening initiatives. WHO also played a central role in coordinating logistics, identifying priority countries, and shaping the proposed activities included in the joint roadmap with PEI.



“The visit comes at a time of renewed momentum for health systems strengthening across Africa. With partners like PEI, we are laying the foundation for sustainable and impactful improvements in blood safety” said Dr Ogochukwu Chukwujekwu, Acting Director – Universal Health Coverage/ Life Course Cluster, WHO Regional Office for Africa.

This collaboration is expected to lead to more robust, self-sufficient national blood transfusion services, ultimately contributing to better health outcomes across the continent.

IGAD EXPERTS TRAINED IN UGANDA TO IMPROVE MEDICINE APPROVAL PROCESS



From March 11–14, 2025, the World Health Organization (WHO) held a special training in Kampala, Uganda for senior medicine experts from countries in the Intergovernmental Authority on Development (IGAD). These countries include Ethiopia, Eritrea, Djibouti, Kenya, Somalia, South Sudan, Sudan, and Uganda.

The training focused on improving how experts review and assess bioequivalence studies. These studies are important because they help make sure that generic medicines (affordable versions of brand-name drugs) are safe, effective, and work the same as the original.

A total of 19 experts took part in the training. They learned using real examples, case studies,

and international guidelines. The goal was to help countries work together more efficiently and avoid doing the same work twice when approving medicines.

Organized with technical and financial support from WHO and funded by the Swiss Development Cooperation, the workshop aimed to close regulatory gaps and prepare national authorities for greater harmonization. WHO also pledged continued support for building regulatory maturity across the region.

The outcomes of this workshop are expected to boost the capacity of IGAD National Regulatory Authorities and contribute to achieving higher WHO maturity levels, ultimately improving timely access to quality-assured, safe, and effective medicines across the Horn of Africa.



This training will help IGAD Member States’ medical products approval processes move faster” said Dr. Joseph Kabatende, Technical Officer, Health Products, WHO Regional Office for Africa.

...Coming Up in Q2 Newsletter

► WORLD HEALTH DAY: APRIL 7, 2025

This April, the WHO Regional Office for Africa joined the world in commemorating World Health Day under the inspiring theme “**Healthy Beginnings, Hopeful Futures.**”

This day was dedicated to highlighting the critical importance of maternal and newborn health, calling for **immediate action to end preventable maternal and newborn deaths** and ensure the well-being of women and children. The 2025 World Health Day marked the launch of a year-long campaign focused on the health and rights of mothers and newborns.

This vital initiative aligns with the World Health Organization’s commitment to accelerate progress towards the Sustainable Development Goals.

Building on the momentum from World Health Assembly resolution 77.5, the campaign emphasizes the urgent need to strengthen maternal, newborn, and child health systems.

Stay tuned!



World Health Organization Regional Office for Africa

Universal Health Coverage/ Life Course 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.

