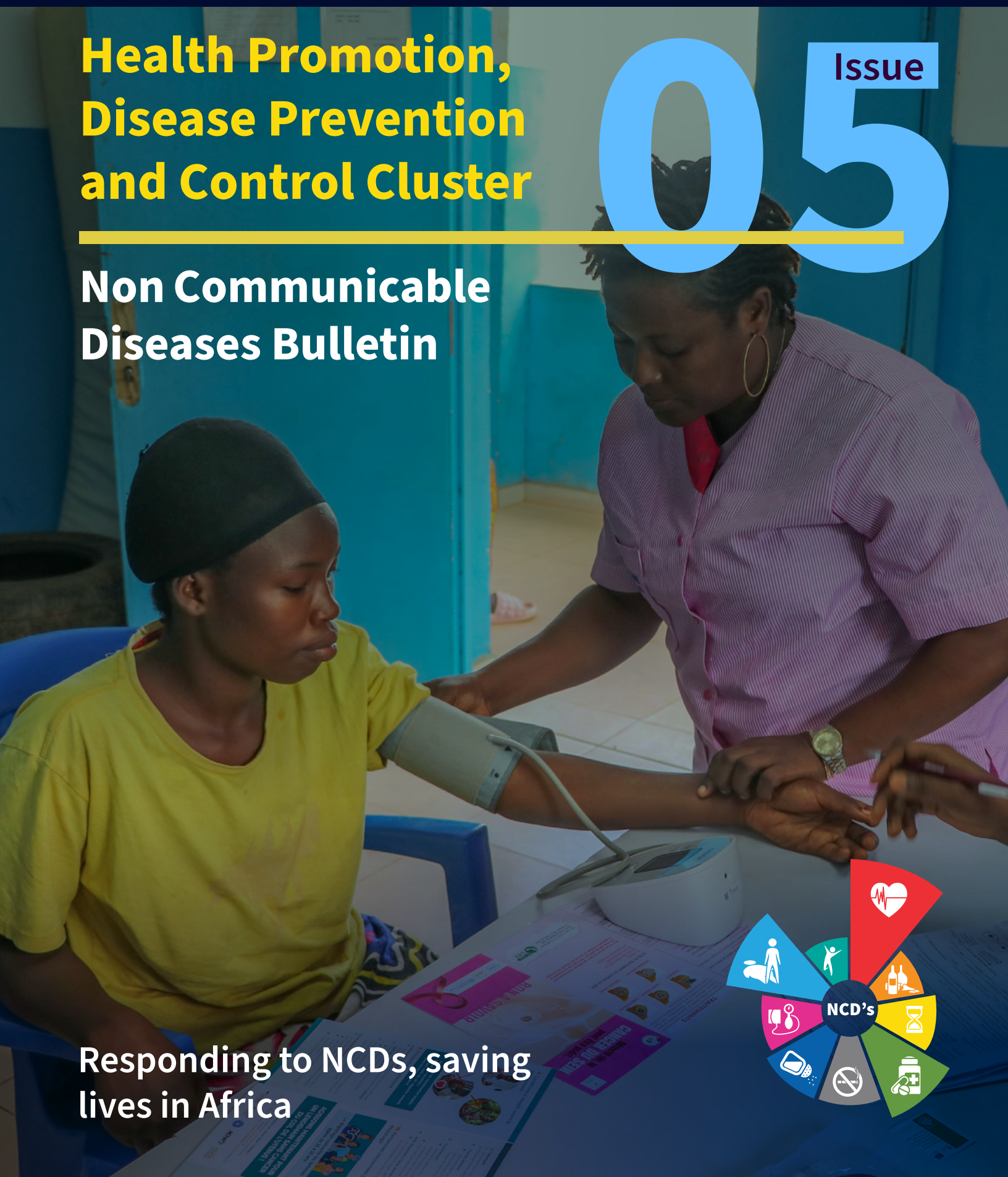
World Health Organization

African Region

Health Promotion, Disease Prevention and Control Cluster

Issue 05

Non Communicable Diseases Bulletin



Responding to NCDs, saving lives in Africa

Foreword

Dear colleagues and partners,

Noncommunicable diseases (NCDs) continue to place a growing burden on individuals, families and health systems in Africa. Expanding access to quality, integrated care is critical to reducing premature deaths and advancing universal health coverage. In the African Region, WHO and its partners have continued to support countries to strengthen health systems through innovative approaches that bring prevention, diagnosis and treatment services closer to communities.

This quarter, the WHO Regional Office for Africa, with support from The Leona M. and Harry B. Helmsley Charitable Trust, held the 3rd International Conference on PEN-Plus in Africa, at which the report *Scaling Up PEN-Plus: Expanding Life-Saving Care for Severe Noncommunicable Diseases in Africa* was released. The report highlights significant progress, with 20 countries engaged in implementing the PEN-Plus model, services available in more than 120 district hospitals, and over 170 000 patients receiving ongoing care for severe chronic conditions.

Country experiences continue to demonstrate the impact of integrated approaches to care. In Cameroon, for example, PEN-Plus is bringing specialized services for conditions such as sickle cell disease, type 1 diabetes and severe heart disease closer to patients. In The Gambia, expanded HPV vaccination efforts through school and community outreach programmes are helping to protect adolescent girls from cervical cancer.

WHO is also advancing action on mental health by strengthening countries' capacities to expand mental health care through regional learning meetings; has launched technical guidance on the oral neglected tropical disease, noma; and is promoting the integration of eye, ear and oral health services into WHO PEN and PEN-Plus platforms. Meanwhile, innovative initiatives such as Women's Integrated Cancer Services (WICS) and the Cancer Control Reality Lab are strengthening cancer prevention, early detection and integrated cancer care.

In this quarterly bulletin, we focus on WHO's strategic work on the ground and its impact, while looking ahead to the critical next steps for expanding the integration of NCD services in health systems to strengthen the NCD response in Africa, ensuring that no one is left behind.

Dr Benido Impouma,

Director
Health Promotion, Disease Prevention and Control Cluster
WHO Regional Office for Africa

NCD situation and response actions in Africa Spetember 2026

In this issue: 05

NCD stats at a GLANCE

WHO STEPwise approach

- In five years **(2021 -2026)**, **18** countries have conducted STEPS surveys.
- Eleven countries have completed the full STEPS process.

Mental health

- All **47** countries in the Region conducted mental health landscape analyses in preparation for the Mental Health Intercountry Learning Workshops organized by WHO African region.
- As of **2025, 16** of the **47** countries had incorporated MHPSS into their national disaster preparedness and risk reduction plans.

PEN-Plus project

- 20 countries in the region have either initiated, or are implementing and scaling up PEN=Plus model
- Over 170 000 people are receiving treatment for severe NCDs in PEN-Plus clinics across the implementing countries.

Eye health

WHO SPECS 2030 initiative expanded across eight African countries, advancing refractive error services and integrated people-centred eye care through situation analyses, policy and operational planning, multisectoral coordination, and preparations for national implementation and scale-up.

WICS project

- Over 3 million girls protected from cervical cancer through HPV vaccination.
- More than 19 500 women screened for breast, cervical cancer, and other NCDs.

3 Countries engaged	**19** Health facilities supported as pilot sites	**180+** Health workers trained
19 500+ Women screened for cervical and breast cancers	**Over 3 million** Girls protected from cervical cancer through HPV vaccination	**80+** Pre-cancerous lesions treated

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Spotlight on NCD activities in the region

New WHO report shows progress in PEN-Plus rollout and impact

PEN-Plus brings life-saving care for severe NCDs closer to communities through district hospitals.

The report, Scaling up PEN-Plus: Expanding life-saving care for severe noncommunicable diseases in Africa, released recently by the WHO Regional Office for Africa with contributions from The Leona M. and Harry B. Helmsley Charitable Trust, provides insights into the burden of severe chronic diseases in Africa and highlights the significant progress of the PEN-Plus model in addressing these conditions across implementing countries. The PEN-Plus model expands upon the WHO PEN (Package of Essential Noncommunicable disease interventions), which decentralizes care for common NCDs to primary healthcare facilities. PEN-Plus extends care for severe NCDs to first-level referral facilities, such as district hospitals. The initiative has shown significant success in increasing patient access to treatment for severe NCDs. Twenty countries are at different phases of implementing the PEN-Plus model of care, with services delivered in more than 120 district hospitals and training in the management of severe NCDs provided to more than 1750 health workers.

More: Access to care for severe chronic diseases in Africa growing: new report | WHO | Regional Office for Africa

Specialized services for severe chronic diseases now closer to communities in Cameroon

Mfou – To bring specialized care closer to communities and reduce long travel distances for people with severe noncommunicable diseases, Cameroon is gradually implementing the PEN-Plus approach to care, with technical support from WHO and its partners.

This strategy aims to strengthen the capacity of district hospitals in rural and peri-urban areas, enabling them to provide local care to people with severe noncommunicable diseases (NCDs) such as sickle cell disease, type 1 diabetes, severe asthma, or certain heart conditions, which until now have been treated only in specialized hospitals in urban areas.

In the Central Region of the country, in Mfou, the implementation of PEN-Plus is already changing the daily lives of many patients, including 17-year-old Jeanine, who has had sickle cell disease since birth. Now that she receives regular care at the PEN-Plus Clinic at Mfou District Hospital, near her home, she no longer has to wait for an attack before seeking help. “I would be in the middle of a sickle cell crisis but have only FCFA 1200 on me to pay for my treatment,” she recalls. “Before, I used to stay home a lot, and every now and then I’d go to the hospital just to get painkillers.”

Click here to read more: [Specialized services for severe chronic diseases now closer to communities in Cameroon | WHO | Regional Office for Africa]

PEN-Plus Impact so far

20 Countries engaged	**PEN-Plus operational Manual developed**	**120+** District hospitals involved
170 000+ Patients enrolled and receiving ongoing care	**Over 17 000** Health workers trained in management of severe NCDs	**Development of PEN-Plus course on WHO academy ongoing**

Protecting girls from cervical cancer in The Gambia

Banjul—In The Gambia, bold and coordinated efforts are improving access to lifesaving vaccines for adolescent girls across the country. To catch up on vaccination of girls missed during a 2025 campaign, The Gambia implemented a week-long human papillomavirus (HPV) vaccination campaign targeting girls aged 9–14 years in three regions in April 2026.

The campaign moved beyond traditional facility-based delivery, bringing vaccines closer to where girls learn and live: schools, madrassas and community settings. Vaccination teams were deployed across multiple outreach points to ensure that eligible girls were not left behind.

Read more: *Protecting girls from cervical cancer in The Gambia | WHO | Regional Office for Africa*

Oral health

Accelerating action against noma through new technical guidance: Launch of the noma control technical brief

Noma is a rapidly progressing and often fatal gangrenous disease of the mouth and face. It primarily affects vulnerable and marginalized populations, particularly malnourished children living in poverty, affected by infectious diseases, experiencing poor oral health or living with weakened immune systems. Although its true global distribution remains unknown, most reported cases occur in sub-Saharan Africa.

Following noma's inclusion in the WHO list of neglected tropical diseases (NTDs) in December 2023, WHO launched the Noma Control Technical Brief in July 2026, with financial support from Hilfsaktion Noma e.V. The publication provides countries with guidance for designing, implementing and monitoring interventions aligned with the WHO NTD Road Map 2021- 2030. It outlines strategic interventions, monitoring indicators and 2030 targets, while promoting the integration of noma prevention and control into health systems through multisectoral action.

Sensory function and oral health

Side Event at the 3rd International conference on PEN-Plus in Africa: Delivering integrated care for neglected NCDs

This side event highlighted the urgent need to integrate eye, ear and oral health services into WHO PEN and PEN-Plus platforms, recognizing these conditions as neglected noncommunicable diseases (NCDs). Participants emphasized that efficient primary care systems offer a practical and scalable pathway to expand access to essential services and advance universal health coverage. Experiences from Tanzania and Zimbabwe demonstrated that integration is achievable through health worker training, strengthened referral systems and community outreach. Despite challenges such as limited financing, workforce shortages and data gaps, participants called for sustained investment in integrated, people-centred care within existing NCD frameworks.

Integrating eye, ear and oral health into PEN/PEN-Plus can expand access to essential NCD services and advance universal health coverage through stronger primary care systems.

Cancer control

Cancer burden in Africa: Women's Integrated Cancer Services (WICS) as the response

WICS is an innovative, integrated approach designed to address cancers affecting women through PHC. At its core, WICS functions as a one-stop shop for women's health, replacing fragmented, vertical services with coordinated care delivered in a single visit.

In practical terms, when a woman attends a WICS-supported facility whether for maternal and child health, HIV care or another routine service, she can also receive cervical cancer screening via HPV testing or visual inspection, breast examination, screening for hypertension and diabetes, basic mental health screening, and counselling, referral and follow-up as needed.

This integrated model minimizes missed opportunities. The objective is simple: no woman should leave a health facility without being offered screening for major women's cancers and other NCDs.

WICS is delivered through PHC clinics and community outreach, aligning fully with countries' UHC agendas and global targets including the WHO 90–70–90 cervical cancer elimination strategy. By embedding cervical cancer screening into routine care, WICS helps countries move toward screening 70% of women by the time they are aged 35–45 years and toward ensuring 90% of women with precancer symptoms or cancer receive appropriate treatment. Integration is WICS's greatest strength. Unlike siloed, single-disease programmes, WICS leverages existing health workers, infrastructure and community platforms to address multiple needs simultaneously. A woman may visit a health facility for a diabetes check and receive a cervical screening, or vice versa, saving time, reducing travel and lowering stigma by normalizing cancer prevention as part of routine health care.

WICS Impact so far

3 Countries engaged	**19** Health facilities supported as pilot sites	**180+** Health workers trained
19 500+ Women screened for cervical and breast cancers	**Over 3 million** Girls protected from cervical cancer through HPV vaccination	**80+** Pre-cancerous lesions treated

Turning evidence into action for cancer control in Africa

At the 3rd International Conference on PEN-Plus in Africa (ICPPA 2026), WHO African region brought cancer control challenges and solutions to life through its innovative Cancer Control Reality Lab. Using real life experiences, country settings, action tables and a donor spotlight, participants identified critical gaps, practical interventions and opportunities for effective partnerships.

The highly interactive session transformed evidence into actionable priorities, demonstrating WHO Africa's unique role in convening stakeholders, synthesizing knowledge and catalyzing country-led, integrated responses to cancer and other noncommunicable diseases in the region.

The Cancer Control Reality Lab translated evidence into practical, country-led actions to strengthen cancer control across Africa.

"Early detection gave me a second chance at life. Together, we must ensure that no woman dies because she was diagnosed too late or could not access quality cancer care."

Mrs. Karen Nakawala
Cervical cancer survivor

"Integration works. By embedding cervical cancer, breast cancer, NCDs, and mental health services into primary health care, we have demonstrated that women can receive comprehensive, people-centred care closer to their communities. The next step is scaling this model sustainably across the country".

Dr Simon Boni
Ministry of Health

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Best practices from countries

Côte d'Ivoire: advancing cervical cancer elimination

Côte d'Ivoire is bringing cervical cancer prevention and care closer to women through integrated vaccination, screening and primary health services.

With WHO support, Côte d'Ivoire is translating its cervical cancer elimination strategy into tangible results for women. By combining national planning with the rollout of the WHO Integrated Cancer Services (WICS) approach, the country has strengthened primary health care-based screening, developed national guidelines and better linked HPV vaccination campaigns with screening services. These efforts are improving access to care, reducing referral delays and expanding community outreach. Stories from health providers and women benefiting from these services highlight how integrated action is bringing lifesaving cervical cancer prevention and care closer to communities.

Disability

Incorporating disability inclusion in Côte d'Ivoire's health sector planning

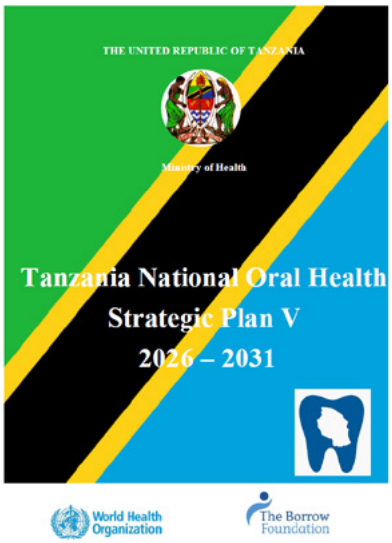
To strengthen equitable access to health services for persons with disabilities, Côte d'Ivoire used the WHO Disability Guide for Action to identify structural and systemic barriers and define targeted measures for making health policies and programmes more inclusive.

Led by the Ministry of Health with support from WHO, Sightsavers and other partners, the process brought together a wide range of stakeholders, with organizations of persons with disabilities actively involved at every stage. Following capacity-building support, these organizations strengthened their engagement and leadership in health-sector planning. The resulting priorities were incorporated into the National Health Development Plan 2026 -2030, including disability-inclusive governance mechanisms, more inclusive financial protection schemes and improved disability data in health information systems.

Côte d'Ivoire is strengthening disability-inclusive health planning to ensure equitable access to health services for persons with disabilities.

Oral health

Tanzania launches a new strategy to strengthen oral health services in May 2026: "Tanzania National Oral Health Strategic Plan V 2026-2031"

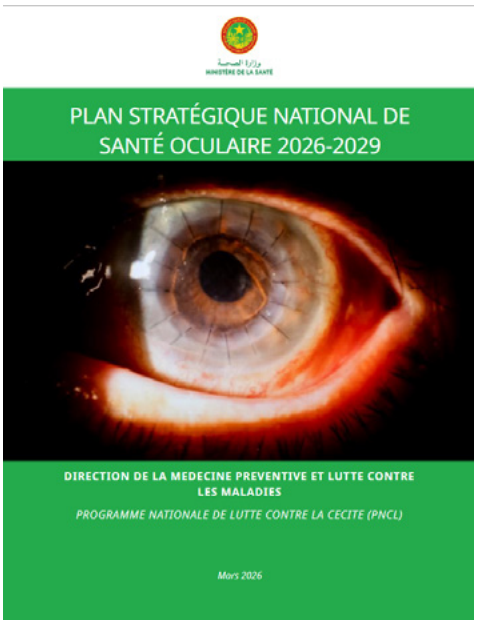


To address the growing burden of oral diseases and persistent inequalities in access to care, the United Republic of Tanzania launched its fifth National Oral Health Strategic Plan , covering 2026–2031. The plan provides a comprehensive framework for strengthening oral health services and expanding equitable access to quality care nationwide.

Developed by the Ministry of Health with financial support from the Borrow Foundation, the strategy aligns with national health priorities, , the WHO Global Strategy on Oral Health 2023–2030 and its African Regional Framework. Building on lessons from previous plans, it addresses gaps in service coverage, workforce capacity and financing, while reinforcing the integration of oral health within the broader health system.

Eye health

Mauritania advances equitable access to eye care: the "Eye health strategic plan"



Mauritania reached an important milestone in April 2026 with the launch of its National Eye Health Strategic Plan 2026–2029. The country also aligned the plan with the pillars of the WHO SPECS 2030 initiative on addressing refractive error coverage, strengthening national action to improve refractive error coverage.

Guided by Mauritania's National Health Development Plan and universal health coverage priorities, the strategy aims to expand equitable access to quality eye care along the continuum of care. It sets a path towards more integrated prevention, screening, treatment and visual rehabilitation services while strengthening governance, resource mobilization and community-centred approaches.

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Mental health corner

From commitment to action: the African region accelerates progress toward mental health targets

Africa has made progress on mental health, but urgent action is needed to accelerate reforms and meet the 2030 targets.

Across Africa, momentum is building to transform mental health from a neglected health issue into a central pillar of health, development and human rights. Two WHO Regional Office for Africa Mental Health Intercountry Learning Workshops, were recently held in Johannesburg, South Africa from 27 to 29 May 2026 for East and Southern African countries and Lomé, Togo from 15 to 18 July for West and Central Africa. These two workshops brought together the 47 countries in the region, technical experts, people with lived experience, youth advocates, civil society organizations and development partners to take stock of progress and chart a path toward accelerating action towards the African Region's 2030 Mental Health Targets.

The meetings aimed to foster peer learning on mental health system strengthening across East and Southern Africa, review progress made toward the 2030 regional mental health targets, strengthen meaningful engagement of persons with lived experience (PWLE), build country capacity in policy reform, financing, data systems, and service delivery, develop

national roadmaps to accelerate progress to 2030 goals and discuss regional priorities ahead of the 7th Global Ministerial Mental Health Summit in March 2027. The message emerging from both meetings was clear: while some progress has been made, the African Region is not on track to meet several 2030 mental health targets unless urgent acceleration occurs.

All participating countries conducted mental health country landscape analyses prior to the meeting which helped guide discussions in intercountry learning groups and with partners and other stakeholders present. The centerpieces of the workshops were the structured country intercountry learning group discussions during which all participating countries got an opportunity to present findings from rapid landscape analyses of their national mental health systems and had candid discussions on challenges and brainstorming on country approaches going forward. All countries developed country roadmaps during the meetings for accelerating progress on the 2030 regional mental health targets.

The intercountry learning process was strengthened by consistent participation of PWLE representatives ensuring lived experience perspectives were embedded in the country planning processes. Networking sessions further enabled broader knowledge exchange, with countries showcasing posters of their landscape analyses alongside stalls from NGOs, civil society organizations, and community-based organizations actively working in mental health across the subregion. This format facilitated rich, informal peer-to-peer dialogue and connection-building among participants.

Despite these challenges, the workshops highlighted a growing sense of optimism driven by innovation, collaboration and leadership across the continent. Countries shared practical solutions to strengthen services, including integrating mental health into primary health care, expanding task-sharing approaches, improving data systems and strengthening community-based services.

In Lomé, a dedicated Youth Mental Health Regional Consultation brought young people to the center of the discussion. With more than 250 million adolescents living in the WHO African Region, participants stressed that achieving the 2030 targets will depend on investing in child, adolescent and youth mental health through schools, primary health care services, digital innovations and community platforms. In Johannesburg, a dedicated session on perinatal mental health revealed a critical need to integrate perinatal mental health screening and care into routine antenatal and postnatal care services; adapt and validate screening tools for use across diverse African cultural contexts and engage communities and families in reducing stigma around perinatal mental health challenges.

Accelerating mental health progress in Africa requires prioritizing youth and perinatal mental health through integrated, accessible and culturally appropriate services.

As countries prepare for the 7th Global Ministerial Mental Health Summit in Kigali, Rwanda in March 2027, the workshops have created a renewed sense of purpose and direction for mental health across the region. A regional community of practice has been established to sustain collaboration and peer learning beyond these meetings. The road to 2030 remains challenging, but the workshops demonstrated that Africa already possesses the knowledge, leadership and solutions needed to advance mental health. The task now is to translate commitment into implementation, ensuring that every person has access to quality, rights-based and community-centered mental health care.

Strengthening the evidence base for NCDs and Mental Health in Africa

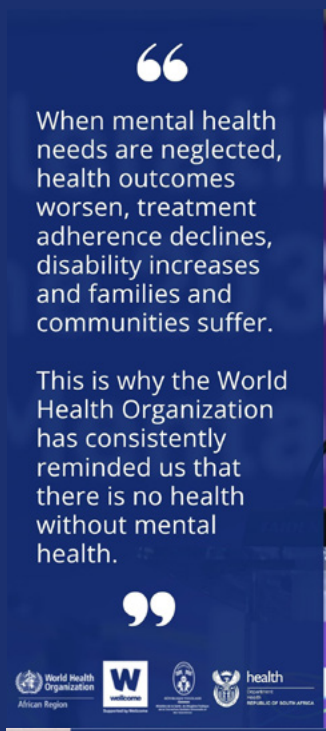
Strong surveillance systems are essential for guiding effective action on noncommunicable diseases (NCDs) and mental health. This quarter, WHO strengthened the regional evidence base through the publication of *Noncommunicable Disease Surveillance in the WHO African Region: Status, Gaps and Priorities*, providing the most comprehensive assessment of NCD surveillance across all 47 Member States. The analysis revealed encouraging progress, with over 80% of countries operating cancer registries and nearly three-quarters using standardized patient-level information systems. However, significant gaps remain, particularly in monitoring cardiovascular diseases and cause-specific mortality, highlighting the need for stronger data systems to support policy and planning.

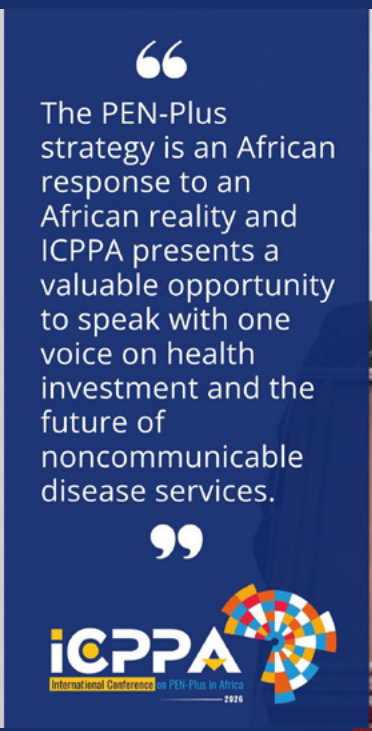
Countries are also advancing efforts to measure the major risk factors driving the NCD epidemic. Zambia completed fieldwork for its STEPwise (STEPS) survey in the first half of 2026, while South Africa, Burundi, Côte d'Ivoire and Guinea are preparing to begin data collection later this year. These surveys provide critical information to guide prevention and control programmes.

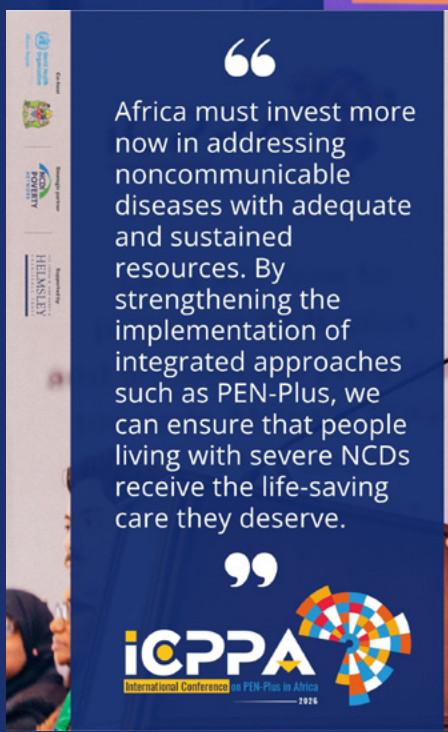
WHO is also strengthening mental health information systems in the region. A comprehensive database covering all 47 countries was developed to support regional discussions on mental health policies, services, financing and workforce capacity. With more than 150 million people living with mental health conditions in Africa, the availability of data helps countries identify gaps, track progress and make informed decisions to improve access to care. These efforts are transforming evidence into action and supporting stronger, more resilient health systems across the Region.

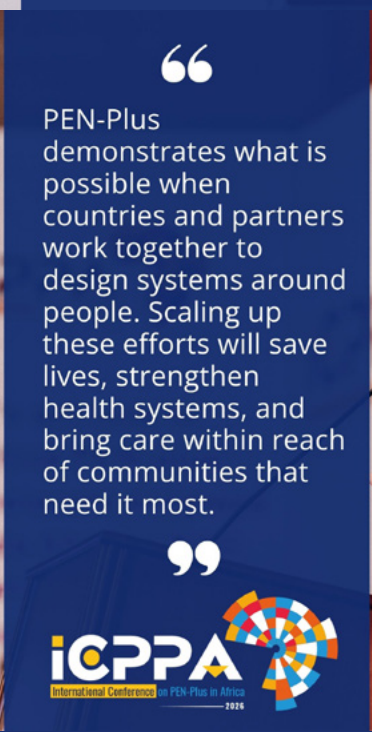
Strengthening mental health data systems across Africa is helping countries identify gaps, track progress and improve access to quality care.

4 Insights from experts on NCDs in the African region









5 Recognizing our partners

WHO acknowledges The Leona M. and Harry B. Helmsley Charitable Trust– the largest single donor for NCD response in the African region's history. With HCT support, the WHO Regional Office for Africa has assumed a major leadership role as it rolls out technical support for Member States to implement the management and care of severe NCDs at first-level referral hospitals by ensuring that the capacity, infrastructure and logistics for care are available.

Wellcome Trust is a key partner for mental health globally and regionally. For the 2026/2027 biennium the Wellcome Trust is providing support for the Global Mental Health Ministerial Summit to be held in Africa for the first time in 2027. Additionally, the Region is being supported to host two preparatory pre-summit meetings bringing together mental health experts from across the region; people with lived experience; partners and stakeholders to discuss strategies to accelerate progress on the mental health regional framework targets and prepare for the 2027 summit.

Hilfsaktion Noma e.V supports the control of noma in the WHO African region by developing, implementing and monitoring by integrated into the national NTDs programme, in priority countries. In Ethiopia, the noma control programme has been implemented as part of the NTD activities and Madagascar is ongoing process of rapid assessment of noma situation.

WICS project: WHO's Women's Integrated Care for Cancer Services (WICS) strengthens early detection, treatment, and NCD integration through Primary Health Care (PHC). More than 30 000 women have been screen across three countries in three years, promoting equity and Universal Health Coverage. It is supported by WHO, Ministries of Health in pilot countries: Côte d'Ivoire, Kenya, Zimbabwe, and Roche funding.

With Sightsavers' support, WHO African Region advanced health equity by helping ministries identify and address barriers faced by persons with disabilities. The implementation of the WHO Disability Inclusion Guide enabled countries to integrate disability into health system strengthening, with active participation from organizations of persons with disabilities.

In collaboration with Humanity Inclusion(HI), WHO African Region developed training packages to build capacity of primary health workers responding to the needs of vulnerable populations, namely persons with disabilities and women and children who experience violence. Civil society organizations like HI play an essential role in empowering communities, advocating for policy change, and supporting equitable access to health care, especially in emergencies.

The CDC Foundation (CDCF) has been a long-standing partner to WHO African Region in NCD Risk Factor Surveillance and Prevention. In 2025, it supported Global Adult Tobacco Surveys (GATS) in Ethiopia, Mauritania, Nigeria, Senegal, and Uganda, providing both technical and financial assistance. The GATS reports are now instrumental in guiding policy making and monitoring progress in tobacco control across the region.

(Road Safety & Drowning Prevention)
Bloomberg Philanthropies is the principal funding partner advancing road safety and drowning prevention efforts across multiple African countries. Bloomberg Philanthropies supports global and national initiatives by funding data collection for the Global Status Report on Drowning Prevention, contributing to the development of technical guidance, and supporting countries in raising awareness, strengthening prevention efforts, and creating national action plans.

Ending Violence Against Children (VAC)
The Children's Investment Fund Foundation has been a key partner since 2025 in accelerating progress toward ending violence against children, particularly in the African Region. CIFF provides critical support for regional follow up to the Bogotá pledges, enabling capacity building and high level convening among governments and stakeholders. Its funding also supports preparations for the 2026 Global Ministerial Conference on Violence Against Children, helping ensure that countries have the technical readiness, political commitment, and coordinated approaches needed to strengthen child protection systems.

LEGO Foundation

As a key donor to WHO, the LEGO Foundation supports the scale-up of evidence-based parenting and caregiver interventions, including in Tanzania, with a focus on integrating parenting support into health and community systems. This includes strengthening the capacity of frontline workers and embedding parenting within existing service delivery platforms.

WORLD DIABETES FOUNDATION

World Diabetes Foundation is supporting the WHO Africa Regional Office and Member States to implement and operationalize the Global Diabetes Compact through the Diabetes and Cardiovascular Disease Initiative in Africa (D-Card Africa).

novo nordisk fonden

Novo Nordisk Foundation is supporting the WHO African region and South Sudan and Burkina Faso to strengthen national health systems to integrate NCD services into emergency preparedness and response.

Thanks to all our partners.

your unwavering support fuels our fight against NCDs and drives life-saving progress across Africa.

Together, we're ending diseases and building a healthier Africa.

Acknowledgements

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