

Building a Healthier Africa Together!

Agenda for enabling attainment of health-related
SDGs in the WHO African Region, 2025-2030

Dr. Faustine E. Ndugulile

*Candidate for WHO Regional Director for Africa
Proposed by the United Republic of Tanzania*

Politician; Parliamentarian; Scientist; Former deputy minister of health; Former minister of communications



Who is

Dr Faustine Ndugulile

Dr. Faustine Engelbert Ndugulile is a distinguished African leader, politician, scientist and public health expert with extensive experience in both technical and policy roles. He holds a Doctor of Medicine (MD) and a Master of Medicine (MMED) in Medical Microbiology and Immunology from the University of Dar es Salaam, a Master of Public Health (MPH) from the University of Western Cape, and a Bachelor of Laws (LL.B) from the Open University of Tanzania.

His career has seen him serve in pivotal policy positions such as the Minister for Communication and Information Technology and Deputy Minister of Health.

Dr. Ndugulile is a sitting Member of Parliament for Kigamboni constituency in Dar es Salaam and he is the Chairman of the Parliamentary Health Committee, Vice Chairman of the Inter-Parliamentary Union (IPU) Advisory Group Health and a member of the Executive Committee of the Network of African Parliamentary Committees of Health (NEAPACOH) among many of his roles in global bodies.

At the technical level, Dr. Ndugulile has worked as a director at the ministry of Health Tanzania in charge of the diagnostic services and he was also the founding programme manager of the National Blood Transfusion Services. His international technical experience includes serving as a Resident Advisor for the Centers for Disease Control and Prevention (CDC) in South Africa providing technical support to many other countries such as Angola, Mozambique, Tanzania and Rwanda.

Dr. Ndugulile has participated in numerous WHO activities at technical, legislative and policy levels, reflecting his commitment to improving health outcomes both locally and globally.



Transformational Leader, Not Transactional Leader The WHO Regional Director Africa Needs

**Africa seeks a new WHO Regional Director at a time of
severe existential threat to WHO in Africa.**

Africa's public health landscape has permanently changed. Some stakeholders now question the role and relevance of WHO.

To be relevant, **WHO in Africa needs to reposition** – prioritizing political mainstreaming thus becoming more politically intelligent and engaged; technical leadership that builds capacities of regional research and public health institutions and fosters generation and use of regional evidence for health agenda setting; strategic partnerships towards one Africa strategy and leadership for health.

Obviously, we do not need transactional Leaders or insiders who are out to sustain the status quo at WHO Africa Region Office. It is time for a transformational Leader to be at the helms in the WHO secretariat for Africa; someone with experience, vision, and courage to reposition WHO in Africa.

Dr. Ndugulile is that fit for purpose Transformational Leader Africa needs – politician, parliamentarian, scientist, former deputy minister of health, and former minister of communications; versed in health leadership and political mainstreaming, and hands-on deploying digital technologies for health and socio-economic transformation.

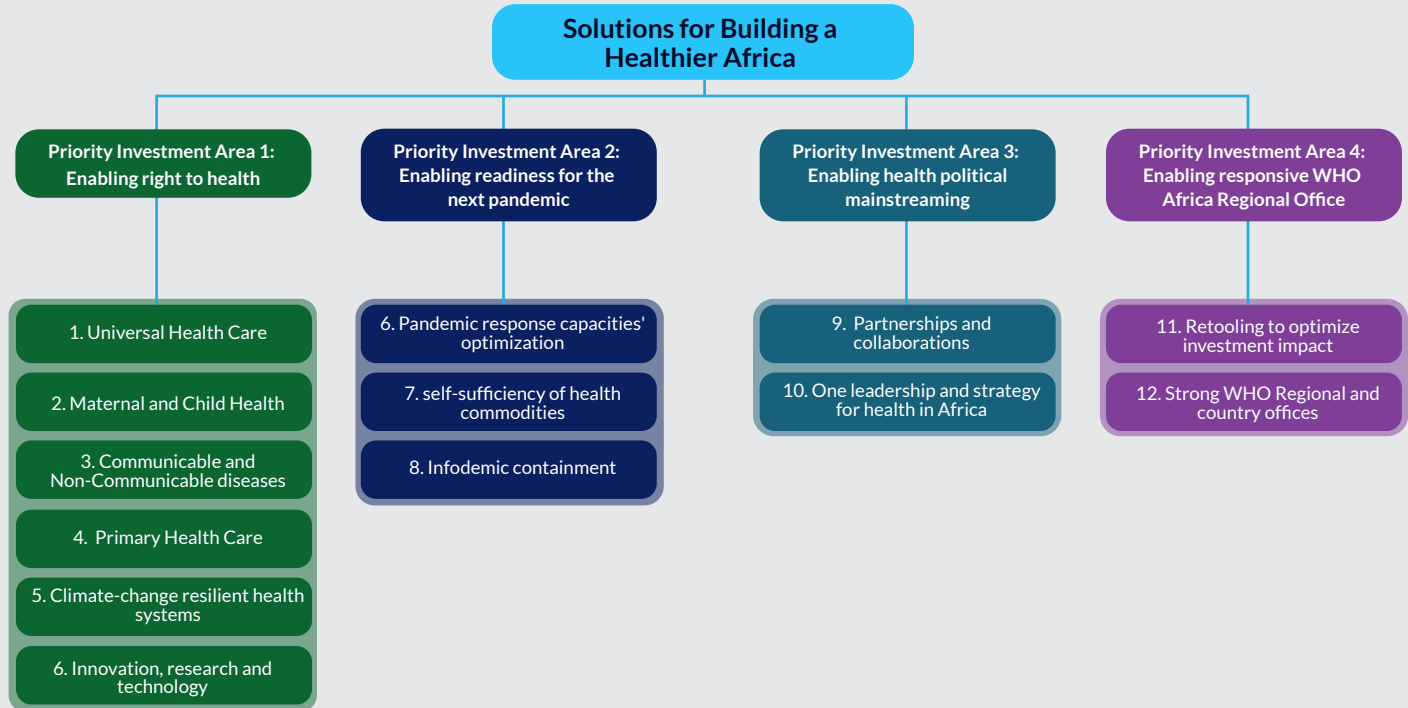
As a member of parliament, Dr. Ndugulile advocated for and contributor to passage of the Tanzania Universal Health Insurance Act in the year 2023, contributed to the increase of domestic resources for health services between 2015-2024, and through providing legislative oversight for universal health coverage, contributed to advancing universal health coverage (UHC).

As a Deputy Minister for Health and Minister for Communication and Information Technology was actively involved in advancing the universal health coverage, communicable and non-communicable diseases agenda including the reduction of maternal and child mortality in Tanzania. On the technology front, Dr. Ndugulile championed increased connectivity in Tanzania and the use of digital technologies to improve health outcomes.

As a scientist, Dr. Ndugulile has been involved in multi-country health laboratory capacity building during years 2007 to 2010; institutional capacity strengthening in disease surveillance, outbreak control, and laboratory management; establishment of field epidemiology and laboratory training programs in South Africa, Mozambique, Angola and Rwanda

Solutions for Building a Healthier Africa

Four Priority Investment Areas: enabling right to health; enabling readiness for the next pandemic; enabling health political mainstreaming; and enabling responsive WHO AFRO Regional Office for impact.



The Vision, Mission and Expected Outcomes

Vision:

A continent of Africa where every individual flourishes with optimal health and well-being, enabled by accessible, equitable and sustainable healthcare systems.

Mission:

Fostering the final push for attainment of the health-related SDGs as mandated the 14th WHO General Programme of Work, 2025–2028 (GPW14).

This final push can be achieved through deploying problem-solving approaches that optimize the intersection of people, technologies, and processes, and rallying member states and stakeholders for joint action in the four Priority Investment Areas:

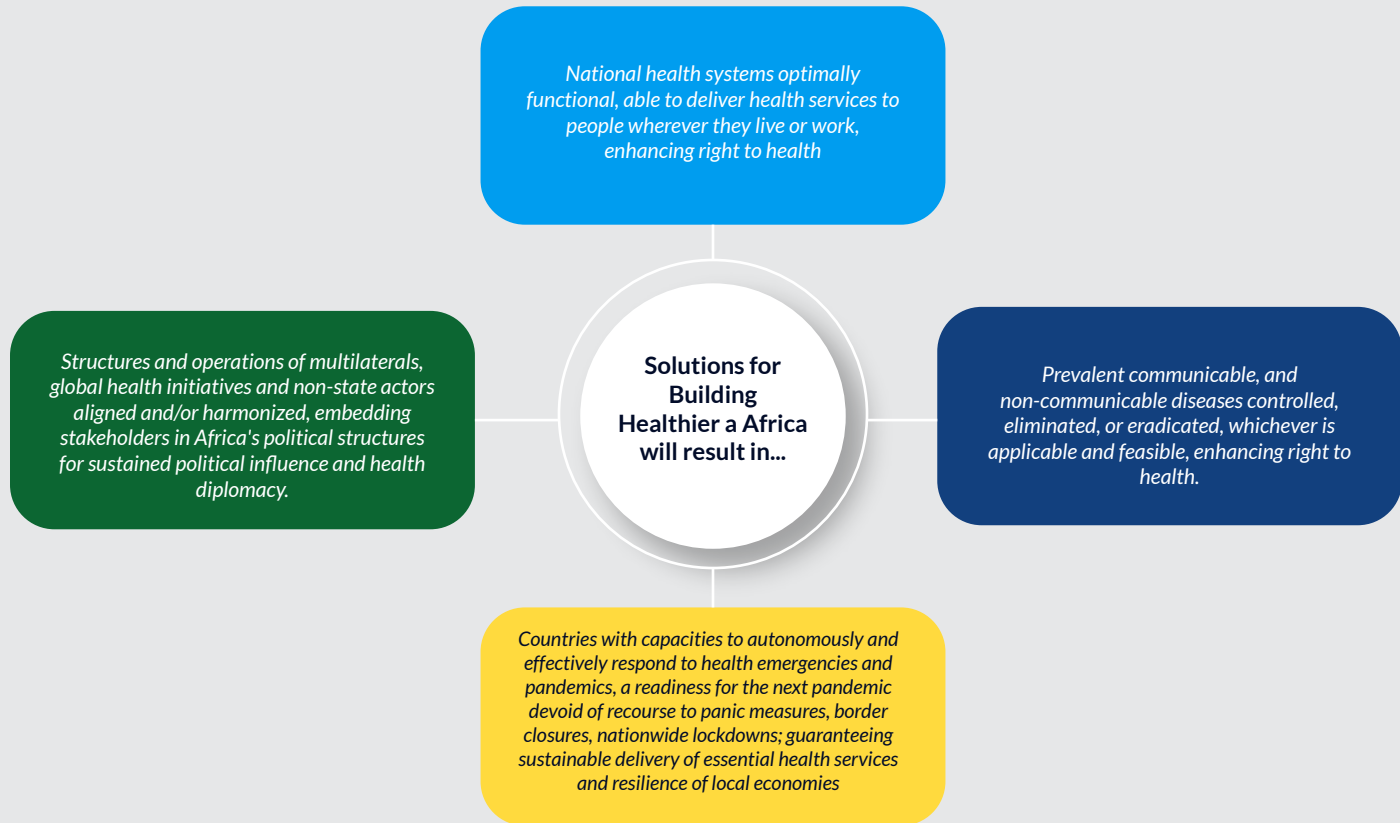
- Priority Investment Areas 1: Enabling right to health.
- Priority Investment Area 2: Enabling readiness for the next pandemic.
- Priority Investment Area 3: Enabling health political mainstreaming.
- Priority Investment Area 4: Enabling responsive WHO Africa Regional.



The next four years from 2025 to 2028 constitute a unique window in which to reinvigorate actions to get the health-related Sustainable Development Goals back on track for 2030, while future-proofing health and care systems for the inevitable long-term trends and acute shocks... This will need an exceptional focus on substantially enhancing equity in health and care service coverage; building health systems resilience; and mobilizing individuals and relevant sectors to act. Achieving this ambition in today's particularly challenging environment will require unprecedented alignment among health, development and humanitarian actors at the country, regional and global levels, with a common vision, priorities and agenda, a measurement framework and a commitment to country-driven collective action in support of national goals and leadership.

Global Programme Work 14

Expected Outcomes of fully deployed Solutions for Building a Healthier Africa



Priority Investment Area 1:
Enabling Right to Health

1. Universal Health Coverage (UHC):

Issues

Despite improvements in access to health services over the years, more than 400 million people in Africa still face the challenge of not being able to access essential health services due to the financial hardship of out-of-pocket health expenses.

These require expanding access to a comprehensive package of essential health services, improving the quality of care, and developing innovative health financing mechanisms to reduce out-of-pocket spending.



Solutions

Securing political commitment and leadership from governments to develop and implement national UHC strategies with clear goals, targets, systems and budget allocations to achieve UHC within a defined timeframe.

Strengthening partnerships and collaboration with civil society, the private sector and international partners to leverage resources and expertise.

2. Maternal and child health:

Issues

Despite declines in recent years, maternal and child mortality rates in sub-Saharan Africa remain alarmingly high, with more than 70% of maternal deaths occurring in the region. In addition, sub-Saharan Africa accounts for 56% of global under-five deaths.



Solutions

Invest in collaborative efforts to ensure that all women and girls in the region have access to quality health services, including antenatal, delivery and postnatal care. In addition, a comprehensive approach is needed to address child mortality, focusing on neonatal care, increased immunization coverage, proper nutrition and early childhood interventions.

Priority Investment Area 1:
Enabling Right to Health

3. Communicable and Noncommunicable Diseases (NCDs):

Issues

The African continent has made significant progress in the control, elimination and eradication of some communicable diseases, with some countries eliminating diseases such as polio and malaria and neglected tropical diseases (NTDs). However, our health systems in Africa continue to struggle with the burden of communicable diseases, particularly HIV/AIDS, malaria and tuberculosis, which remain the leading causes of death. In addition, data show a decline in immunization coverage for preventable diseases in Africa, with 12.7 million children under-immunized in 2021, 8.7 million of whom did not receive a single dose, also known as "zero-dose" children.

Africa has also seen a significant increase in non-communicable diseases (NCDs), which now account for 37% of all deaths.



Solutions

Energizing Member States and partners to ensure that we get back on track in tackling the burden of communicable diseases on the continent. This should go hand in hand with the commitment to improve immunization coverage for vaccine preventable diseases.

Strengthening of NCDs services by prioritizing health education, promoting healthier lifestyles and ensuring better access to NCD treatment by integrating it into primary health care services.

Investing in evidence for decision making by promoting the use of research to identify disease patterns and determinants and to develop cost-effective prevention and treatment strategies specific to regional contexts.

Deploying analytics and technologies to stratify occurrence of health conditions, identify the affected or left behind geography or demography, enhance evidence-base of health strategic plans, and develop cost-effective prevention and treatment strategies specific to regional contexts.

Priority Investment Area 1:
Enabling Right to Health

4. Primary Health Care (PHC):

Issues

Primary Health Care (PHC) is the foundation of health systems in Africa. Investing in PHC is critical to the success of UHC. The Ouagadougou Declaration on Primary Health Care and Health Systems in Africa (2008) remains a relevant tool for achieving PHC on the continent, however, the full roll out of the PHC in Africa has faced with a number of challenges including leadership and organizational issues, fragmented health systems, limited facilities and equipment, inadequate skilled workforce, urban-rural divide and inadequate financial investment and high out of pocket expenses deter access to PHC services.

Solutions

→ Investing in PHC as the foundation of health systems through promotion of health governance and leadership, infrastructure, workforce development, use of community health workers (CHWs), and integration of services and use of health technologies for equitable impact.

5. Climate Resilient and Sustainable Health Systems:

Issues

“Climate change undermines the determinants of health, exacerbates weaknesses in health systems, increases the burden of climate-sensitive diseases and widens health inequities, with disadvantaged groups suffering disproportionately from both its direct and indirect effects.”

Solutions

→ Supporting Member States to conduct vulnerability assessments to identify climate-sensitive health risks and prioritize adaptation measures including development and implementation of national health adaptation plan (HNAP).

→ Supporting Member States to develop and implement early warning systems for disease outbreaks linked to climate variability and to develop plans that integrate adaptation and mitigation strategies.

Priority Investment Area 1:
Enabling Right to Health

5. Climate Resilient and Sustainable Health Systems:

Africa has low capacity for adaptation to climate change. If left unchecked, by 2050, climate will affect about 86 million in Africa. There is a need to build climate-resilient health systems, strengthen systems to predict and respond to climate-sensitive disease outbreaks and health emergencies, prioritize the needs of communities most vulnerable to climate-related health impacts, and work with sectors beyond health to address the broader health impacts of climate change.



Advocating for multi-sectoral collaboration to address the social, economic and environmental determinants of health affected by climate change and also promote knowledge sharing and invest in resource mobilization.

6. Innovation, research and technology:

Issues

Africa is lagging in health innovation and research. Africa accounts for only 1.1% of global research spending, despite having 16% of the world's population.



Solutions

Fostering local research networks and translating discoveries into practical applications including leveraging the use of digital technologies and innovations for health service delivery.

Priority Investment Area 2: Enabling Readiness for the Next Pandemic

1. Health security

Issues

Recent global health emergencies, including COVID-19, have underscored the need for robust pandemic preparedness and response mechanisms. Health emergencies have often impacted the health systems in Africa. Again, lives have been lost due to delay in accessing essential vaccines and other health commodities. Furthermore, the advent of the internet has led “a new epidemic of false information”. The explosion of infodemic or misinformation that damaged confidence in evidence-informed strategies, undermining uptake of novel vaccines and medicines.

It is therefore important to strengthen the capacity of all Member States in the African Region to prepare for, detect and respond to public health emergencies, based on lessons learned from past health crises.



Solutions

Strengthening in-country capacity to detect, prevent and respond to emerging infectious diseases through investing in laboratory infrastructure, strengthening surveillance networks, and facilitating knowledge sharing among health professionals and research collaboration.



Solutions

Fostering local manufacturing of health products for priority diseases and health conditions including vaccines, medicines and other health commodities. This should go hand in hand with strengthening capacities of national regulatory authorities and building on the work of the Africa Vaccines Review Framework.

Strengthening the Africa Public Health Emergency Fund (APHEF), the existing fund for public health emergency response in Africa.

Developing multi-media approach to combat infodemic information to monitor and respond to misinformation about health and health products; conducting regular infodemics webinars and conferences focused on sharing knowledge on occurrence infodemics and their and containment strategies and operationalizing multi-media sites for accessing WHO-certified health information for individuals and groups, mainstreaming sites for certified health information.

Strengthening antimicrobial resistance (AMR) monitoring and management aimed at safeguarding available antimicrobial drugs, including developing AMR monitoring systems and fostering close collaboration between human and animal health sectors.

Priority Investment Area 3:
Enabling Health Political Mainstreaming

1. Partnership and collaboration

Issues

There exist perennial conflicts over organizational mandates and tuffs, among regional health stakeholders. Member states complain of duplication of roles and wastage of resources among regional partners. WHO will foster harmonization of roles and evolution of one Africa strategy and leadership for health.



Solutions

Fostering regional partnerships and collaboration, building strong alliances with stakeholders, leveraging expertise and coverage, and engaging with policymakers to advocate for policies that prioritize health, invest in health systems, and address the social determinants of health.

Advocacy for setting up “*The Africa Council on Health and Health Security*” as a standing sub-committee of the Africa Union Peace and Security Committee – the African Council on Health and Health Security being an annual meeting of the health ministers, ministers responsible for health security or humanitarian affairs, and ministers for foreign affairs from the 53 AU Member states, mandated to serve as coordination and accountability mechanism for health and Setting up one secretariat for the Africa Council on Health and Health Security, mandated to lead development, implementation, monitoring and evaluation of one Africa strategy for health and health security, and to consist of accredited representatives of Africa Union Commission (AUC), Regional Economic Communities (RECs), Africa CDC, multi-laterals, Global Health Initiative (GHIs) and major non-state actors.

Priority Investment Area 4:
Enabling Responsive WHO Africa Regional Office

1. Retooling to Optimize Investment Impact

Issues

There is a lag between policy adoption and policy implementation – absence of progress in implementing strategic policies like integration and people-centered approaches because of unspecified responsible and accountable person or team, the root cause being structural and skillsets misalignment. Also gender and geographic inequity prevails, even using RECs lens, at the leadership of the WHO secretariat in the African Region. Then there is dwindling global resources for health, compelling focus on enhancing investment efficiency, achieving more with less. The WHO AFRO of the future needs to operate with the highest standards of transparency and efficiency, placing Africa at the forefront of the global health agenda. By streamlining processes and improving accountability, WHO will better serve the health needs of Member States.



Solutions

Rethinking and adapting the role and business model of WHO in Africa with the aim of: (a) creating operational systems that drive continued organizational relevance and responsiveness to needs of member states; (b) redefining skillsets needed for optimal performance and impact, and onboarding them while assuring gender and geographical equity, ensuring equitable representation of the RECs in the secretariat; and (c) streamlining operations including centralizing certain strategic functions, devolving some and outsourcing others.

Setting up the office for strategic operations with focus on: (a) development, implementation and monitoring and evaluation of strategic policies and agendas including integration, and people-centered approaches aimed at enhancing access to health services;

(b) knowledge generation and use;

(c) mainstreaming science and coherence in development of WHO regional normative guidance;

(d) institutional capacity building and outsourcing of WHO technical support; and (e) mainstreaming research and development

(f) Documenting best practices and knowledge sharing.

Priority Investment Area 4:
Enabling Responsive WHO Africa Regional Office

2. Strengthening of WHO Country Offices

Issues

Currently, country support functions of WHO in the African Region is led by country offices and supported by multi-country assignment teams (MCATs) of technical experts domiciled in 11 national capitals in the region. The effectiveness of the MCATs is doubtful given their paucity in numbers and their mono-skills as medical officers.



Solutions

Strengthening of the WHO Country Offices, prioritizing the needs and voices of Member States, ensuring that our strategies and policies reflect their unique health challenges. By tailoring our approach, we want to provide more effective support to countries and achieve better health outcomes.

Securing resources for a sustainable future, through active engagement with Member States and other stakeholders to address the financing challenges faced by WHO AFRO and country health programmes through ensuring the sustainability of WHO AFRO and the health programmes implemented across the Region by increasing domestic resource mobilization, innovative financing mechanisms and optimization of available resources.

My Commitment

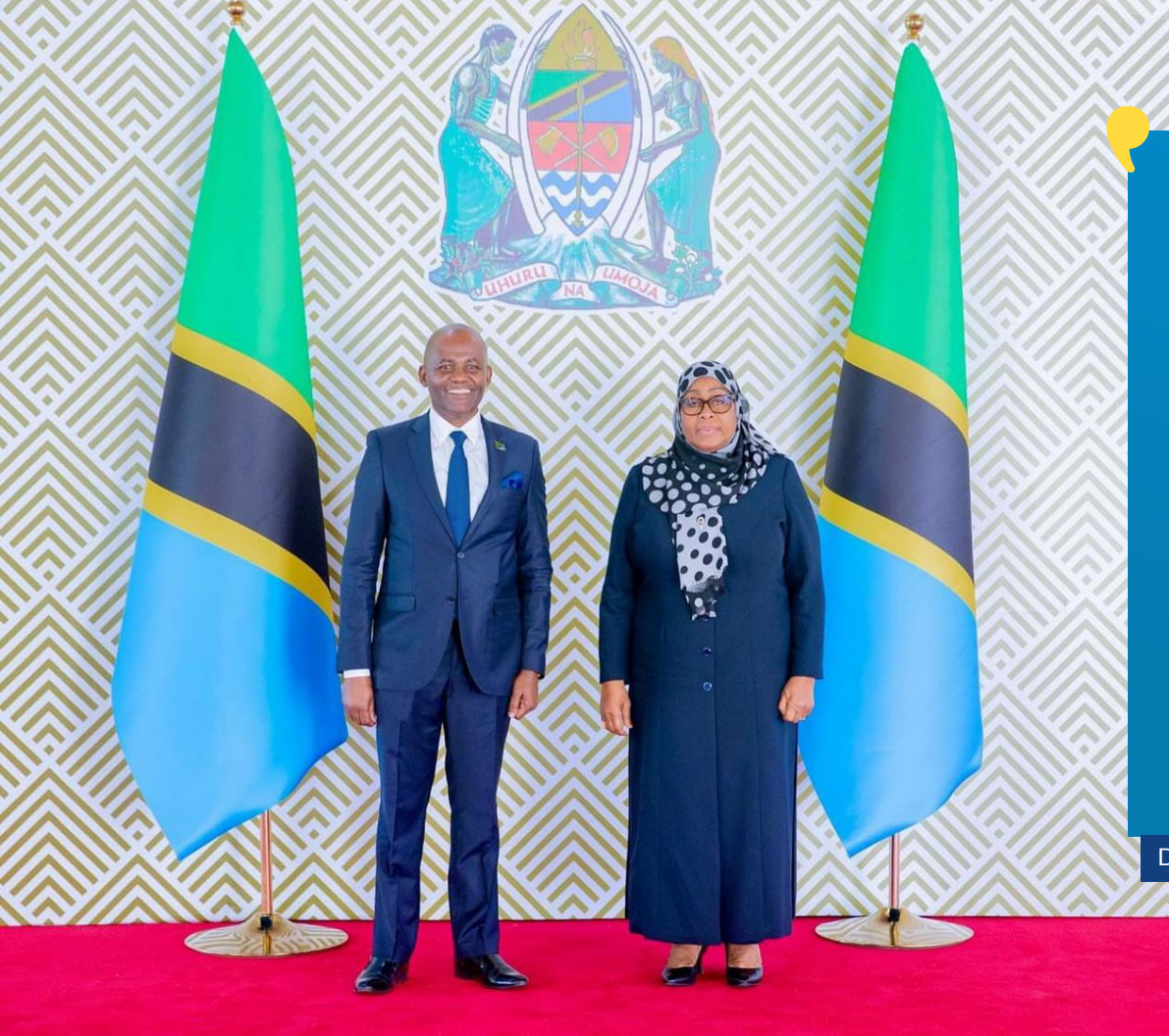
I am convinced that the World Health Organization exists to foster solutions for health and wellbeing. I therefore seek the mandate to, as the WHO Regional Director for Africa, foster solutions for Africa's health and wellbeing through optimizing available people, processes, and technologies towards attainment of the 2030 health related SDG targets in Africa.

I pledge to work tirelessly towards:

- Enabling right to health.
- Enabling readiness for the next pandemic.
- Enabling health political mainstreaming.
- enabling responsive WHO AFRO Regional Office for impact.

I pledge to build on the foundations laid by my predecessors, deepen ongoing transformation agenda of WHO in the African Region with focus on responsiveness to needs of member states and stakeholders, investment efficiency, and equity, and sustain and expand strategic partnerships including partnerships with Africa's political platforms.





I am convinced that the World Health Organization exists to foster solutions for health and wellbeing. I therefore seek the mandate as the WHO Regional Director for Africa to foster solutions for Africa's health and wellbeing through optimizing available people, processes, and technologies towards attainment of the 2030 health related SDG3 argets in Africa."

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