

ANNUAL REPORT

Advancing Evidence Use for Africa's Transformation and Self-Reliance







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AFIDEP in Brief

The African Institute for Development Policy (AFIDEP) is a non-profit policy and research institute established in 2010 to bridge the gaps between research, policy and practice in development efforts in Africa.

AFIDEP is registered as a non-governmental organisation (NGO) in Kenya, and has diplomatic status in Malawi. It is also recognised as a non-profit institution in the USA, with 501(c)3 status.

We seek to contribute to the realisation of the Africa's Agenda 2063, and the global 2030 Sustainable Development Goals (SDGs), with gender, equity and inclusion as central cross-cutting considerations. The Institute supports the use of evidence in the formulation and implementation of development strategies, policies and programmes.

What we do:

- Strengthen capacity and provide technical assistance in evidence-informed decision-making (EIDM)
- O Generate, synthesise and translate demand-driven evidence on SDGs
- Advocate for greater use of evidence in policy and practice, and
- Elevate African voices in national, regional, and global policy discourses.

The Institute is governed by a Board of Directors comprised of seasoned experts who provide strategic direction and institutional oversight.

OUR FOCUS AREAS

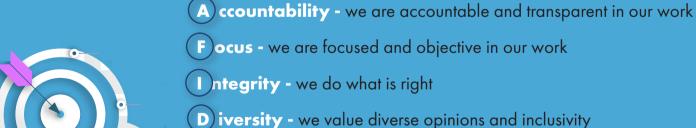




MISSION •

To generate and translate evidence and support governments and other development actors to use evidence in decision-making

OUR VALUES



- **E** xellence we continously strive for excellence
- Passion we are passionate about our work



Message from the Executive Director

s we reflect on 2024, I am filled with immense pride on the progress we have made at the African Institute for Development Policy (AFIDEP). The year 2024 has been one of profound impact, strategic growth, and meaningful partnerships—all reinforcing our commitment to putting evidence at the heart of Africa's development.

In a time marked by rising global uncertainties and shifting development priorities, AFIDEP has remained steadfast in its mission to bridge the gaps between research, policy, and practice. Through collaborative action, groundbreaking research, and policy engagements, we have continued to position evidence as a cornerstone of sustainable development on the African continent.

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Through collaborative action, groundbreaking research, and policy engagements, AFIDEP continued to position evidence as a cornerstone of sustainable development on the African continent.

One of the defining highlights of the year has been our work through the Advance Domestic Health Financing (ADHF) project. Across Kenya, Malawi, Uganda, and Zambia, we spearheaded efforts to mobilise increased domestic resources for health and promoted more efficient and transparent use of national health budgets. Through national dialogues and capacity building on SMART advocacy for civil society organisations (CSOs), we helped build momentum towards sustainable financing solutions in the health sector.

Throughout the year, we intensified efforts to promote evidence-informed decision-making. We participated in influential forums such as the Evidence-Policy-Action Forum in Côte d'Ivoire, as well as conducted workshops to enhance the capacity of policymakers such as those in national tuberculosis programmes of Kenya, Malawi, Nigeria and Uganda to integrate evidence into policy processes and strategic planning.

In advancing science, technology, and innovation (STI), our partnerships with the African Union Development Agency (AUDA-NEPAD) led to significant milestones. Together with AUDA-NEPAD, we hosted the high-level dialogues in Lilongwe, Malawi and Nairobi, Kenya spotlighting how innovations can transform healthcare in Africa. These initiatives are paving the way for the inaugural Evidence for Development Conference, which we will co-host with AUDA-NEPAD and the Science for Africa Foundation in May 2025, to centre STI and evidence-informed policymaking in Africa's achievement of development targets and goals.

Our leadership on the nexus between population and development remained central to our agenda. This year, we co-hosted the 9th African Population Conference (APC) with the Government of Malawi and the Union for African Population Studies (UAPS), along with other partners, leading sessions on the age structure transitions, maternal health, and the demographic dividend. Notably, we served as the secretariat of the first-ever Parliamentary and Policy Forum at the APC, where we were able to bring policymakers to the scientific conference.

These engagements underscored the importance of implementing policies that leverage population dynamics to drive sustainable development. In the aftermath of the conference, we supported national dialogues—such as with Malawi's Parliament—to translate the conference commitments into concrete national actions.

As we look ahead, AFIDEP remains committed to driving policy-relevant research and fostering partnerships to advance evidence use for the continent's positive transformation. We are grateful to our partners, funders and collaborators for their unwavering support. We will continue to build on the successes of 2024, addressing emerging challenges with resilience and innovation.

Dr Eliya Zulu Executive Director

AFIDEP Highlights Over the Past Five Years



AFIDEP staff celebrating the organisation's 10th anniversary, held in a hybrid format—in person in Malawi and virtually in Kenya.



AFIDEP is announced as a top finalists at the ONE Africa
Award which celebrates Africans whose efforts contribute
to achieving the Sustainable Development Goals (SDGs)—
the world's blueprint for a better future.



Through a webinar, AFIDEP convened the Southern African Development Community (SADC) First Ladies' initiative to mainstream gender in national development efforts.



AFIDEP gets diplomatic status in Malawi. (Pictured: AFIDEP's Director of Development Policy and Head of Malawi office, Prof. Nyovani Madise with the then Minister of Foreign Affairs, Hon. Eisenhower Mkaka.



Her Excellency Monica Chakwera, First Lady of the Republic of Malawi, seated at the centre, alongside officials during AFIDEP's National Policy Dialogue where she was the Chief Guest.



AFIDEP at the International Conference on Family Planning (ICFP) to champion evidence-use to address existing gaps in satisfying family planning demand.



AFIDEP's Clive Mutunga presenting at the inaugural Africa Climate Summit held in Nairobi, Kenya.



AFIDEP's Dr Rose Oronje (left) and Prof. Richard Mukabana (second from left) at the Africa Health Agenda International Conference (AHAIC) in Kigali, Rwanda.



AFIDEP's Executive Director, Dr Eliya Zulu (Second from left), in New York as the organisation receives the 2023 United Nations Population Award.

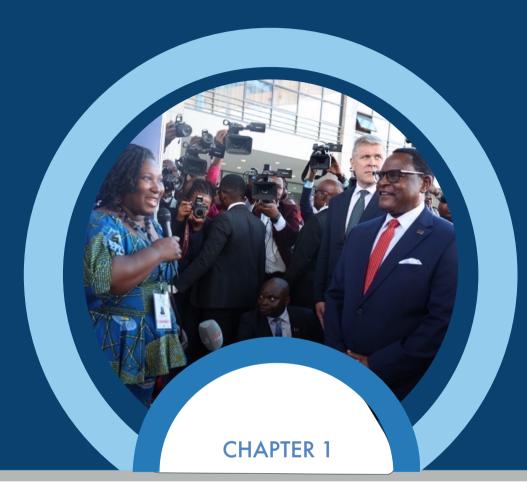


Delegates engage at a parliamentary forum during the 9th African Population Conference which was hosted by AFIDEP.



AFIDEP hosted the Regional Economic Communities (RECs) Dialogue on Leveraging Emerging Technologies for healthcare in Nairobi, Kenya.

AFIDEP



Positioning Africa's Population Dynamics at the Centre of Development

Photo: His Excellency Dr Lazarus Chakwera (right), President of the Republic of Malawi, and the Prime Minister of Iceland, Mr. Bjarni Benediktsson, listen as AFIDEP's Dr Naa Dodoo (left) gives a highlight of AFIDEP work at the Institute's booth during the 9th Annual Population Conference.

cross Africa, understanding population dynamics remains central to achieving inclusive, sustainable development. Rapid population growth, a youthful demographic profile, and persistent inequalities in access to health, education, and economic opportunities present both challenges and immense potential for transformation.

Realising the continent's potential requires strong political will, evidence-informed policies, and coordinated action to integrate population issues into national and regional development agendas. In 2024, AFIDEP demonstrated strong leadership in advancing Africa's population and development agenda by mobilising political will, generating evidence, and facilitating action at both national and regional levels.

Harnessing political will on population issues

With the Government of the Republic Malawi, AFIDEP, a key partner of the 9th African Population Conference (APC) held in Lilongwe, Malawi, convened over 750 high-level stakeholders, which included scientists and practitioners for dialogues aimed at accelerating progress toward population and development commitments.

Furthermore, the Institute served as the secretariat of the first-ever Policy and Parliamentary Forum at APC. The Forum, which featured parliamentarians, ministers, policymakers, and heads of national population councils from across the African continent, created a space for high-level discussions on strengthening political accountability and integrating population dynamics into sustainable development strategies, backed by relevant data and evidence.

Discussions culminated in the adoption of the Lilongwe Political Declaration on Population and Development, a collective commitment by African parliamentarians to reposition population issues at the centre of national and regional development policies.

Among its key commitments, the Lilongwe Political Declaration calls on governments to:

- Integrate population dynamics into development planning and budgeting processes;
- Increase investments in health, education, and youth empowerment to reap the demographic dividend;
- Strengthen the collection, analysis, and use of population data for policy and planning;
- ☐ Foster partnerships between governments, parliaments, civil society, and development partners to drive coordinated action; and
- Uphold human rights, especially those related to gender equality and sexual and reproductive health and rights (SRHR).



AFIDEP's Executive Director, Dr Eliya Zulu, together with the UN Resident Coordinator to Malawi (right), the UNFPA Malawi Resident Representative (left), and the Officer-in-Charge of Partners in Population and Development (PPD) Mr. Oliver Zambuku (left), welcomes the Prime Minister of Iceland, Mr. Bjarni Benediktsson, at the 9th Annual Population Conference (APC) in Lilongwe, Malawi.

In the months following the 9th APC, AFIDEP collaborated with UNFPA Malawi to ensure that the commitments outlined in the Lilongwe Political Declaration did not remain abstract aspirations. Through a series of dialogues, AFIDEP supported the alignment of the Declaration with Malawi's policies and development programmes, working closely with the Ministry of Finance, the Parliament, and the National Planning Commission.

These dialogues provided a platform for local leaders and decision-makers to contextualise the regional commitments



within Malawi's Vision 2063 and medium-term development plans. They also helped identify priority areas for policy action, including addressing teenage pregnancies, increasing youth access to family planning and skills training, and integrating population data into district-level planning.

AFIDEP's strategic leadership on population dynamics underscores its enduring mission: to generate and promote the use of evidence in policymaking for improved development outcomes across Africa. By translating the momentum of a regional political declaration into concrete national action, AFIDEP continues to be at the forefront of shaping Africa's demographic future, one grounded in commitment, collaboration, and evidence-informed decision-making.

Data on population

In 2024, AFIDEP partnered with the Demographic and Health Surveys (DHS) Program in the ninth phase of the project (DHS-9) to work towards bridging the gap between data and decision-making. Funded by the United States Agency for International Development (USAID) through ICF International, the collaboration aimed to strengthen local capacity to use DHS Program data and cultivate a culture of evidence-based decision-making, enabling stakeholders across low- and middle-income countries to access, interpret, and apply data in addressing Africa's most pressing health challenges.



Beyond technical support, AFIDEP through its engagement with the DHS Program, aimed to transform how data drives impact by delivering tailored workshops and mentorship that equips policymakers, researchers, and programme managers with the practical skills needed to integrate data into health programme planning, resource allocation, and evaluation.

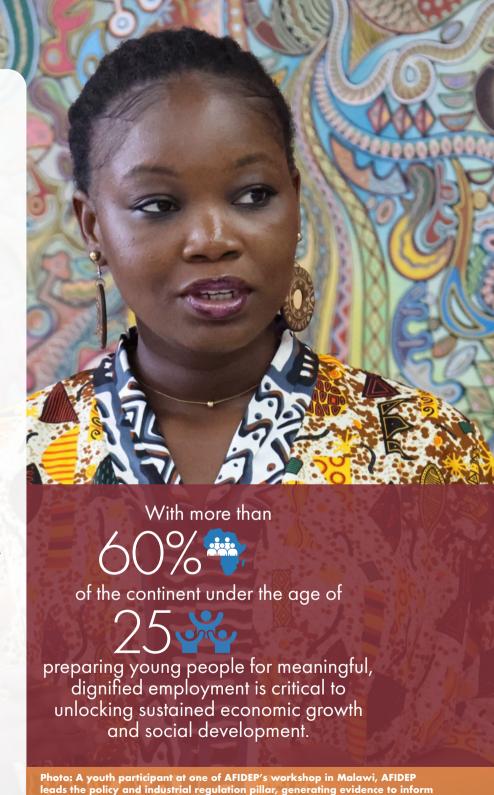
Africa's youthful potential

Africa's future prosperity hinges on its ability to harness the potential of its rapidly growing youth population. With more than 60% of the continent's population under the age of 25, preparing young people for meaningful, dignified employment is critical to unlocking sustained economic growth and social development.

In 2024, AFIDEP laid the foundation for the "Youth Futures Portfolio in Dignified and Fulfilling Work in Africa" a three-year initiative in Kenya, Ghana, Ethiopia, Nigeria, Senegal, Rwanda, Uganda, and South Africa. AFIDEP leads the policy and industrial regulation pillar, generating evidence to inform youth employment policies that promote dignified and fulfilling work, particularly for marginalised groups such as young women, refugees, and persons with disabilities.

Working within a consortium of four African organisations, AFIDEP's activities include political economy analyses, a case study on Kenya's gig economy, policy scenario modelling, economic analyses, and training youth in research-to-policy and advocacy skills. AFIDEP also coordinates a Community of Practice to share lessons, foster collaboration, and translate research into scalable programmes, while ensuring ethical and robust data practices.

This initiative represents a strategic step toward turning Africa's demographic advantage into a powerful engine for inclusive growth and long-term development. Through the initiative, AFIDEP will contribute to the evidence base on the required adjustments in the policy and regulatory environment to catalyse the creation of dignified and fulfilling job opportunities for Africa's young workforce.





Promoting Domestic Financing for Health and Posterity

Photo: A delegate shares her perspectives during the Regional Dialogue on Emerging Health Technologies, held in Lilongwe, Malawi, and hosted by AFIDEP in collaboration with the African Union Development Agency (AUDA-NEPAD).

chieving universal health coverage (UHC) as a central component of SDG 3 requires that everyone has access to the healthcare they need, regardless of their ability to pay. Sustainable financing for the health sector is therefore critical, particularly in developing countries where domestic financing for health still lags behind, and households' out-of-pocket expenditure on health averages 35.8% of current health expenditure (WHO, 2021). Conversely, over 20% of current health expenditure in nearly half of the 46 countries in the WHO African Region is provided by external sources, reflecting a significant dependency on donor funding. Not only do developing countries struggle with the allocation of resources to the health sector, but they also face higher levels of inefficiency in utilising healthcare resources, stemming from inadequate funding, weak healthcare systems, and ineffective resource management, among other challenges.

Through the Advance Domestic Health Financing (ADHF) project, AFIDEP has been at the forefront of driving policy reforms, strengthening health financing mechanisms, and ensuring that data-driven decision-making translates into tangible improvements in healthcare delivery across the continent. The ADHF project is a joint initiative between AFIDEP and Partners in Population and Development-Africa Regional Office (PPD-ARO).

Enabling universal health coverage through sustainable financing in Kenya



In Kenya, the ADHF project, provided evidence and technical support that led to the enactment of four key universal health coverage laws: the Primary Health Care Act, the Digital Health Act, the Facility Improvement Financing Act, and the Social Health Insurance Act. These legislative reforms mark a significant milestone in strengthening Kenya's healthcare system, ensuring equitable access to essential services, and promoting sustainable health financing.

According to the analysis by the ADHF project, successful implementation of the Social Health Authority (SHA) could generate an additional Ksh 65 billion in revenue for the Social Health Insurance Fund (SHIF), exceeding

the Ksh 60 billion collected under the National Health Insurance Fund (NHIF) from all funding sources. This potential revenue boost highlights the transformative impact of the SHA on enhancing Kenya's capacity for domestic health financing.

AFIDEP's technical support to the Ministry of Health (MoH) also contributed to secure significant increases in health funding. Primary healthcare (PHC) funding rose from US\$6 million to US\$20 million, and allocations for family planning, and maternal and child health increased from US\$185,052 to US\$274,871. Funding for family planning commodities doubled

to US\$7,812,500—further solidifying Kenya's commitment to sustainable health financing and improved service delivery.

At sub-national level, AFIDEP conducted targeted training for Kenya's MoH and medical officials from five counties—Laikipia, Nyandarua, Homa Bay, Tana River, and Taita Taveta—focusing on public finance management (PFM), programme-based budgeting (PBB), and costing. These training sessions aimed to enhance the technical capacity of government officials in managing healthcare finances efficiently. The results are demonstrating better and smarter spending decisions in the health sector.

Traditionally, most counties relied on line-item budgeting that focused on inputs such as salaries, equipment, and drugs without directly linking spending to health outcomes.

Following AFIDEP's support, all five counties have now adopted programme-based budgeting, aligning financial resources with measurable results and data-informed planning. aligning resources with measurable results.



"Before, we would submit PBB documents but still execute using line-item budgets," said Ms Lina Mole, Senior Administrative Officer in Taita Taveta County. "Now, we are using programme-based budgeting in full. This has improved planning, transparency, and accountability."

A comparison of the Taita Taveta County's budgets before and after training reveals a clear change. The new budgets now link spending directly to health outcomes and use real-time data to justify allocations. This shift from reactive to proactive planning exemplifies how evidence-based policymaking is being translated into practice. Officials in the other counties have also reported how these new skills have enabled them to transition from line-item budgets to programme-based budgets in the 2025/2026 financial year.



Participants from national and sub-national governments during ADHF's capacity-building workshop on domestic health financing in Kenya.

Advancing health facility financing for better service delivery in Malawi

In Malawi, AFIDEP has been instrumental in transforming Primary healthcare (PHC) financing. Through the ADHF project, AFIDEP provided evidence and technical support that enabled the Ministry of Health to adopt Direct Facility Financing (DFF), a reform modelled on Kenya's Facility Improvement Fund (FIF) Act. This shift has granted PHC facilities greater financial autonomy, enabling more efficient

access to and management of funds. As a result, facilities now benefit from improved transparency, timely access to resources, and enhanced service delivery, better meeting the healthcare needs of their communities.

The impact of these reforms is evident in Malawi's increased health sector investment. Budgetary allocations rose by 12%

Strengthening data-driven health financing in Zambia

AFIDEP also supported Zambia's Ministry of Health in addressing long-standing health financing challenges through the ADHF project. A key achievement was the establishment of a Health Financing Unit (HFU), which included assembling experts such as a Chief Health Financing Officer and a Health Economist to enhance MoH's capacity for strategic planning and ownership of health financing reforms. Additionally, the revitalisation of the Health Financing Technical Working Group (HCF-TWG) strengthened coordination among government agencies, development partners, and civil society organisations, ensuring more efficient policy development and financing mechanisms.

Another major achievement was ADHF's support in updating Zambia's National Health Accounts (NHA), providing essential data that has informed budgeting decisions, leading to a 12% increase in the primary healthcare allocation for 2025. These efforts laid the groundwork for sustainable health financing, empowering the MoH to make data-driven decisions that will enhance healthcare delivery across the country.



AFIDEP workshop with Zambia's Ministry of Health officials to address long-standing challenges in health financing in Lusaka, Zambia.

Mr Lucas Zulu, Assistant Director of Policy and Planning at the MoH, highlighted the critical role ADHF project had played. "The support from the ADHF project by AFIDEP and PPD-ARO has been pivotal in setting up the Health Financing Unit and the revitalisation of the Health Financing Technical Working Group (HCF-TWG) which mark significant milestones in Zambia's journey toward sustainable health financing. These efforts have laid the foundation for the development and implementation of innovative financing mechanisms, improved resource allocation, and enhanced accountability in the health sector. As MoH continues to strengthen its Health Financing Unit, the technical support provided by the ADHF will remain crucial in advancing our health financing agenda."

ADHF initiatives have laid the groundwork for sustainable health financing, empowering MoH to make data-driven decisions that will enhance healthcare delivery across the country.

for the 2023/24 and 2024/25 financial years, in line with the Abuja Declaration's commitment to strengthening healthcare financing. Additionally, funding for family planning commodities increased by 32%, and PHC funding rose by 10%, ensuring greater access to essential services. These successes highlight the ADHF project's critical role in advancing sustainable health financing and reinforcing Malawi's commitment to UHC.

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ADHF efforts have laid the foundation for the development and implementation of innovative financing mechanisms, improved resource allocation, and enhanced accountability in the health sector.

Mr Lucas Zulu, Assistant Director of Policy and Planning MoH, Zambia

Financing surveillance and pandemic preparedness



AFIDEP convened a country-level dialogue bringing together MoH, Zambia National Public Health Institute (ZNPHI), and Parliament to build consensus on Zambia's path to pandemic preparedness, Lusaka, Zambia.

Launched in 2024, AFIDEP's Surveillance and Pandemic Preparedness and Response (PPR) Financing Project supports African governments in strengthening the financial foundations of pandemic readiness. Through technical assistance, research, and policy engagement, the project addresses key gaps in domestic health security financing, with a focus on strengthening surveillance systems, rapid response, and governance. The initiative aligns with global and continental frameworks, including African Leadership Meeting (ALM) agenda, the Pandemic Accord, and International Health Regulations (IHR).

Working with ministries, parliaments, and regional bodies, the project diagnoses and costs national PPR needs; integrates PPR into public financial systems; mobilises sustainable domestic resources; and institutionalises accountability mechanisms. These were demonstrated in Zambia's first country-level dialogue under the project, themed "Building Consensus on Zambia's Path to Health Financing and Pandemic Preparedness." Co-convened by AFIDEP, the Ministry of Health, Zambia National Public Health Institute (ZNPHI), and Parliament, the dialogue led to key outcomes as outlined.

Key outcomes included:

- □ 10% Annual PPR Budget Increase from 2025
- Operationalisation of a Public Health
 Emergency Fund with independent oversight
- Costed Technical Assistance Plan focused on surveillance, workforce, and resource flow
- Public financial management reforms to centralise PPR funding and improve transparency
- Parliamentary commitment to budget advocacy and legislative support
- National health insurance and strategic purchasing reforms including mobile payments and performance-based financing

Zambia's leadership shows that pandemic preparedness is a development and economic priority. Its bold, domestically driven reforms offer a model for other countries seeking to reduce donor dependence and build resilient health systems.

AFIDEP



CHAPTER 3

Driving a Multisectoral Approach for Climate Action

Photo: Dr Mohamed A. Sheikh (left), the Director General of the National Council for Population and Development, with AFIDEP's Clive Mutunga presents a certificate to a Population, Health, Environment and Development (PHED) trainee Fidelis Mutuku in Kenya

he world continues to grapple with how to effectively solve the climate crisis, through solutions that address competing concerns and priorities. One such avenue is by examining and addressing the issue through a multisectoral lens that recognises the interconnectedness of environmental, health, and population issues.

In 2024, AFIDEP deepened its commitment to addressing the complex and interlinked challenges of population dynamics, environment, and health outcomes. Through cross-sectoral partnerships and evidence-led advocacy, the Institute helped shape key national and regional responses to the escalating impacts of climate change on human wellbeing.

Shaping climate and health policies at regional and national levels

AFIDEP played a key role developing Africa's Common Position on Climate Change and Health, which was officially launched at the 29th United Nations Climate Change Conference (COP29). Developed in collaboration with World Health Organization (WHO), African Medical and Research Foundation (AMREF), and Pan African Climate Justice Alliance (PACJA), the position paper presents a unified African agenda for climate-resilient health systems and calls for urgent investments and global solidarity in addressing climate-health vulnerabilities.

At the national level, AFIDEP co-developed the Kenya Climate Change and Health Strategy (KCCHS) 2024–2028 in partnership with the Ministry of Health and the London School of Hygiene and Tropical Medicine (LSHTM). The strategy outlines a robust framework for risk assessment, mitigation and adaptation measures, and improved governance for climate resilience within Kenya's health sector. The KCCHS is expected to be formally rolled out in 2025.



Participants at the Health and Climate Change Technical Working Group session in Nairobi,
 Kenya, where AFIDEP had provided technical support for the development of the 2024–2028
 Strategy.

Exploring population-climate interactions

AFIDEP continued to deepen its commitment to advancing the understanding of how population dynamics influence climate outcomes. An AFIDEP paper, "Understanding the Complex Relationship Between Population and Climate Change Mitigation," published in the Vienna Yearbook of Population Research, argues that addressing climate change requires a nuanced approach that recognises the complex interactions between population dynamics and climate strategies. The study highlights that population factors—such as size, growth rate, age structure, and socioeconomic composition—play a critical role in shaping emissions and adaptation pathways.

The paper calls for all countries, including those with low emissions, to adopt climate mitigation strategies, since fast-growing economies could become major emitters in the future. It also stresses that effective climate and population policies need global cooperation and that development aid must be made available to help low-income countries invest in sustainable agriculture and renewable energy. However, financial resources to support these investments remain insufficient, limiting progress in tackling both population growth and climate change challenges.

Advancing sustainable development through integrated approaches: Lessons from the BUILD Project



Population, Health, Environment, and Development (PHED) implementers from across Africa at a Learning and Knowledge Sharing meeting organised by the BUILD Project in Lilongwe, Malawi, May 2024.

From 2021 to 2024, AFIDEP led the Building Capacity for Integrated Family Planning/Reproductive Health and Population, Environment, and Development Action (BUILD) Project, an ambitious initiative that aimed to embed cross-sectoral thinking into development planning and practice. Implemented in Kenya, Malawi, Côte d'Ivoire, and in partnership with the Philippines NGO Council on Population, Health and Welfare, Inc., (PFPI), Family Health International (FHI 360), Leadership for Environment & Development – Southern and Eastern Africa (LEAD SEA), and Pan African

Climate Justice Alliance (PACJA), the project championed a holistic PHED approach to resilience and equity.

BUILD's most significant contribution lied in its success in positioning PHED integration a development imperative effectively—linking climate action, reproductive health, and governance in new and practical ways. The project offered a blueprint for sustainable development rooted in systems thinking, policy innovation, and inclusive leadership.

Key achievements include:



- Mainstreaming PHED in climate and development Policies: BUILD supported governments in integrating PHED into national adaptation plans, national climate policies, and broader development strategies. It contributed to Kenya's PHE Policy Guidelines, leading to the finalisation of Malawi's National Population Policy, and helping to shape Africa's Common Position on Climate and Health.
- Strengthening legislative influence and policy advocacy: BUILD reactivated and supported parliamentary caucuses such as Malawi's Population and Sustainable Development Caucus (PSDC) and provided training to Members of Parliament and key legislative staff across all hub countries. Through these efforts, BUILD informed legislative proposals such as the Population and Development Bill in the Philippines and supported stronger commitments to FP/RH financing in Kenya and Côte d'Ivoire. BUILD's advocacy was further amplified through engagement at high-level platforms such as the 9th African Population Conference, where it championed the integration of PHED approaches into national and continental development agendas.
- **Building a pipeline of youth and gender-responsive leaders:** Through the PHED Young Leaders Program, BUILD trained 60 emerging leaders from Eastern and Southern Africa in advocacy, systems thinking, and negotiation. Many of these young leaders have established national PHED youth networks and are actively implementing action plans in Kenya, Malawi, Uganda, Zambia, and beyond.

- Senerating evidence to inform action: BUILD produced in-depth landscape analyses, thematic reports on population, climate change, and development, a comparative study on demographic dividend trajectories, and more than ten technical and advocacy products including policy briefs and a cross-sectoral framing paper.
- >>> Amplifying PHED voices in global and regional forums: BUILD elevated PHED perspectives into global and regional spaces, including United Nations Climate Change conferences, the African Climate Summit, and regional climate-health conferences—ensuring that population dynamics, gender, and FP/RH were not left out of environmental and sustainability discussions.
- >>> Strengthening PHED communities of practice: BUILD revitalised PHE networks in Kenya, Uganda, Madagascar, and the Philippines; supported the formation of new networks in Malawi and Tanzania; and facilitated South-South learning to deepen PHED integration across low- and middle-income countries.

As countries work to align climate, health, and development goals, BUILD offered a timely, tested model grounded in local leadership, powered by evidence, and designed for long-term impact.



The BUILD Project PHED Young Leaders Program Fellows East Africa Cohort two during graduation after two weeks of training, in Kenya

Trained

60

emerging leaders from Eastern and Southern Africa in advocacy, systems thinking, and negotiation.

AFIDEP



Enabling the Agenda for Regional Integration Through Evidence and Innovation

frica's development hinges on its ability to collaborate across borders, share innovations, and strengthen systems that respond to the continent's most pressing challenges. In 2024, AFIDEP played a catalytic role in shaping regional dialogues and influencing policy action to advance equitable, gender-responsive, and sustainable development—especially in health. Through a strategic mix of high-level policy engagements, capacity strengthening, and media mobilisation, AFIDEP championed the use of evidence and innovation to accelerate regional integration and achieve the Sustainable Development Goals (SDGs).

Supporting parliamentary leadership

At the heart of efforts to strengthen Africa's health systems, AFIDEP played a key role shaping the 15th meeting of the Network of African Parliamentary Committees of Health (NEAPACOH) in Maseru, Lesotho. The meeting, organised by the Partnership for Population and Development Africa Regional Office (PPD ARO), AFIDEP, and other partners, brought together over 150 delegates from 15 African countries — including parliamentarians, health committee members, civil society practitioners, researchers, and development partners — to interrogate progress, bottlenecks, and policy priorities in achieving universal health coverage (UHC).

AFIDEP facilitated critical sessions that addressed some of the continent's most pressing health challenges including advance domestic health financing (ADHF), the population, health, environment, development (PHED) nexus, and the burden of tuberculosis (TB) in Africa with a gender lens.

Dr Jackson Otieno, Senior Research and Policy Analyst at AFIDEP, presented evidence showing that high levels of out-of-pocket (OOP) healthcare expenditure—especially in countries such as Uganda, Kenya, Burundi, and Tanzania leading with more than 20%—undermine access to essential health services. He called on African



AFIDEP team with a section of participants at the NEAPACOH meeting on February 28, 2024, in Maseru, Lesotho.

governments to reduce OOP costs to below 15%, in line with international benchmarks, and to prioritise domestic health financing to ensure sustainability.

A cross-sectoral approach, for instance, health sector funding from linked programmes in environment and climate change was also highlighted as a critical pathway towards supporting healthcare in Africa.

AFIDEP's Building Capacity for Integrated Family Planning/Reproductive Health and Population, Environment, and Development Action (BUILD) Project Director, Mr Clive Mutunga, urged the parliamentarians to institutionalise cross-sectoral population, health, environment and development (PHED) approaches, and engage with other sectors' parliamentary committees e.g., environment and climate committees for joint advocacy and legislation. This can help ensure that health, and particularly family planning, is central to sub-national, national, regional, and global climate change action.

AFIDEP also brought to the fore compelling evidence on the urgent need for gender-responsive TB policies, given the substantial disparities in TB incidence — with men accounting for 5.8 million cases globally compared to 3.5 million among women and 1.3 million among children. Through the UK-aid funded Leaving no one behind: transforming Gendered pathways to Health for TB (LIGHT) Consortium, a global health research programme, AFIDEP convened a pre-NEAPACOH session on transforming gendered pathways to TB care. Key takeaways included the need to address the structural and behavioural barriers limiting men's access to diagnosis and treatment, and the need for integrated biosocial approaches throughout the TB care cascade. Parliamentarians committed to strengthening legislative oversight, increasing domestic funding, and championing implementation of gender-responsive TB frameworks aligned with NEAPACOH outcomes.

By fostering evidence-informed dialogue and empowering parliamentarians as champions of universal health coverage, AFIDEP is playing a key role in prioritising the provision of quality and accessible healthcare for all across Africa. These efforts contribute to reducing the continent's disease burden and bring Africa a step closer towards achieving SDG 3 – Good health and wellbeing for all.



AFIDEP's Dr Rose Oronje engaging at the NEAPACOH meeting on February 28, 2024, in Maseru, Lesotho.



Members of Parliament in a Capacity Strengthening Workshop organised by the BUILD Project in Abidjan, Côte d'Ivoire to sensitise them on PHED integration, identify legislative opportunities, and promote collaboration.

3 GOOD HEALTH AND WELL-BEING

By fostering evidence-informed dialogue and empowering parliamentarians as champions of universal health coverage, AFIDEP is playing a key role in prioritising the provision of quality and accessible healthcare for all across Africa.

Driving Africa-led innovation for health system transformation



Experts in emerging health technologies gathered in Malawi for a regional dialogue hosted by AFIDEP and AUDA-NEPAD

As health challenges across Africa grow more complex, the need for bold, innovative solutions has never been more urgent. In response, AFIDEP took a leading role in spurring conversations around the integration of cutting-edge technologies into health systems.

In 2024, in partnership with the African Union Development Agency (AUDA-NEPAD), through the Platform for Dialogue and Action on Health Technologies in Africa (Health Tech Platform), AFIDEP facilitated high-level policy dialogues in Lilongwe, Malawi and Nairobi Kenya, that explored how technologies such as artificial intelligence (AI) and blockchain can be harnessed to enhance health service delivery, increase transparency, and improve efficiency in healthcare management.

The convenings brought together researchers, academicians, civil society practitioners, the media, government officials, representatives from the regional economic communities, and members from the African Union High-Level Panel on Emerging Technologies (APET). These dialogues, held under the second phase of the Health Tech Platfrom marked a turning point in how African policymakers and stakeholders envision the role of technology in solving entrenched health challenges.

Participants explored practical, evidence-informed solutions to improve data integrity, enhance efficiency, streamline supply chains, and personalise patient care. Importantly, the dialogue emphasised building ethical, regulatory, and policy frameworks that ensure responsible innovation while centring Africa's priorities.

These dialogues, held under the second phase of the Health Tech Platform, marked a turning point in how African policymakers and stakeholders envision the role of technology in solving entrenched health challenges.



Second edition of the Emerging Health Technologies Media Award of Excellence



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This award is not just a personal honour, but a celebration of Africa's ingenuity. By telling these stories, we shine a light on homegrown solutions and affirm that Africa has the creativity and determination to tackle its own health challenges.

Leocadia Bongben, Grand Prize Winner, Cameroon.

2

AFIDEP, in collaboration with the African Union Development Agency (AUDA-NEPAD), celebrated the power of storytelling to drive change through the second edition of the Emerging Health Technologies Media Award of Excellence, under the Health Tech Platform. The award recognised African journalists whose compelling reporting spotlighted homegrown innovations, demonstrating how local solutions are already transforming lives.

The second edition attracted 119 eligible entries from 19 countries in Africa, which were evaluated by a judging panel comprising experts working in science and journalism. At the virtual award ceremony, Leocadia Bongben from Cameroon received the Grand Prize for her article "Made in Cameroon: The Locally Fabricated Incubator

Designed to Give Pre-term Babies a Fighting Chance", published in Nigeria Health Watch. The story, on the use of a locally manufactured incubator to combat premature infant mortality, showcased an affordable, home-grown solution built for the local context.

"This award is not just a personal honour, but a celebration of Africa's ingenuity. By telling these stories, we shine a light on homegrown solutions and affirm that Africa has the creativity and determination to tackle its own health challenges," stated Leocadia Bongben.

In the Print Category, Nigeria's Afeez Hanafi won for his story, "Outages: Non-electric Ventilator Offers Relief in Respiratory Failure Treatment," published in *Daily Trust Nigeria*. Ghana's Portia Garbor took home the top prize in the TV Category with her feature, "Greater Accra Regional Hospital (GARH) Doctors Use Virtual Reality for Neurosurgery," that aired on TV3 News.

In the Radio Category, Nigeria's Dajie Odok won for her feature "Emerging Technologies for Malaria Eradication," broadcast on *Radio IITA*. In the Online Category, Zimbabwe's Derick Matsengarwodzi was recognised for his story, "In Rural Zimbabwe, Electric Tricycles Are Saving Lives," published by GAVI, the Vaccine Alliance.

At the award ceremony, judges noted that it is critical for journalists to grasp and effectively communicate the complex nature of technologies, and particularly emerging technologies, as crises continue to unfold on the continent that require impactful journalism to help inform policy and programming decisions.

Championing gender-inclusive evidence use to transform policymaking in Africa

AFIDEP's Learning Together to Advance Evidence and Equity in Policymaking for Achieving SDGs (LEEPS) project is strengthening evidence use in policymaking across Africa, placing gender equity and inclusion at the heart of transformation.

Through partnerships with the African Research and Impact Network (ARIN), Makerere University's School of Women and Gender Studies (MakSWGS), the African Institute for Health Policy and Health Systems (AIHPHS), and national governments, the project has so far trained more than 200 policymakers and researchers from Kenya, Nigeria, and beyond in evidence-informed policymaking (EIP), gender-responsive analysis, and inclusive decision-making.

One striking case is that of Kaleb Mwendwa, a lecturer at Masinde Muliro University of Science and Technology in Kenya. After a two-week virtual LEEPS training for 52 ARIN Fellows, he began applying structured approaches to evidence synthesis and gender equity in his teaching and research. He later cascaded this knowledge to colleagues at his institution and went on to lead the Mathematics Instructional Practices Improvement Project, funded by the International Development Research Centre (IDRC). Launched in July 2024, the project now applies gender-inclusive principles across school selection, teacher training, and data collection.

This marks a concrete shift toward institutionalising equity in education, research and programming, directly shaped by insights gained from the LEEPS training.



In late 2024, LEEPS also delivered in-person training for 54 mid-level policymakers from Kenya's Ministry of Health and Ministry of Energy and Petroleum. Participants produced seven policy briefs, including recommendations to reduce adolescent pregnancy, expand maternal health services, and support Kenya's clean energy transition through evidence on biomass energy.

In Nigeria, LEEPS supported the Federal Ministry of Health (FMoH), the National Primary Health Care Development Agency (NPHCDA), the National Health Insurance Agency (NHIA), the National Agency for Food and Drug Administration and Control (NAFDAC), and the ICT Department of the National Assembly to reinforce and institutionalise EIP practices.

By equipping individuals and institutions with practical skills and centering gender equity, LEEPS is catalysing lasting policy transformation. From universities to ministries, the project demonstrates that when evidence and inclusion drive policymaking, the result is stronger policies—and better lives.



AFIDEP's Dr Violet Murunga presenting at a high-level forum in Nigeria on strengthening evidence-informed, equity-centred decision-making in health, energy, and environment.

Building Africa's next generation of evidence champions

Across Africa, the gap between research and policy has long limited the impact of development investments. In 2024, AFIDEP took bold steps to close this gap by empowering policymakers and researchers with the skills, tools, and confidence to use evidence in tackling real-world challenges.

Through the Saving lives by stepping up Africa's response to sepsis (STAIRS) project, which aims to save lives through innovative sepsis research in Sub-Saharan Africa, 149 policymakers from seven countries underwent handson training to enhance their ability to source, assess, and apply evidence in health policymaking. This wasn't just about learning—it was about impact.

Participants developed 27 policy briefs focused on this critical but often overlooked public health issue. Several of these briefs have since informed policy discussions and decisions within ministries of health, showcasing the power of timely, context-relevant evidence to save lives.

STAIRS

AFIDEP's Dr Leyla Abdullahi conducting an Evidence-Informed Decision-Making workshop in Enugu, Nigeria

The LIGHT Consortium's research uptake programme supported a cohort of tuberculosis and gender officers in the MoH's National TB programmes from Kenya, Malawi, Nigeria, and Uganda through a nine-month mentorship journey to embed evidence-informed decision-making and gender-responsive programming in their various institutions. This resulted to development of a series of policy briefs that have been presented at national technical working groups and international health forums

These outputs are helping to reshape TB responses to be more inclusive, equitable, and aligned with the realities of affected communities.

Under the Africa Research and Impact Network (ARIN) fellowship, AFIDEP supported 52 early-career African researchers to strengthen their EIDM expertise, resulting in five collaborative evidence briefs and institutional grants fostering internal EIDM initiatives. These emerging leaders are now driving change from within their institutions, creating ripple effects across national research and policy landscapes.

By investing in people and partnerships, AFIDEP is nurturing a new generation of leaders who champion evidence at every level of decision-making. The growing use of homegrown policy solutions emerging from these initiatives is proof that when capacity meets commitment, transformation occurs on the African continent

AFIDEP's Women's Economic Empowerment (WEE) initiative advanced evidence-based advocacy through a landscape study for Ghana and Kenya and systematic review on women's economic empowerment in Africa. The main areas of focus include women inclusion in decent work with equal pay irrespective of it being formal or informal and addressing structural bottlenecks such as unpaid care, informal work, social protection, and tax justice.

Findings from regional and Kenya-specific studies on Macroeconomic Policy and Women's Economic Empowerment highlighted policy challenges and opportunities, providing actionable solutions for gender-responsive macroeconomic reforms across Africa, especially in East and West Africa. These insights are influencing regional and national policy dialogues, driving progress towards Sustainable Development Goal 5 (SDG 5) on gender equality.



AFIDEP



Advancing Reproductive, Maternal, Neonatal, Child, and Adolescent Health

Photo: AFIDEP's Dr Micheal Chipeta sharing findings of the Putting countries back on the path to achieving the sustainable development goals (Back on track) project during a workshop in Kenya

entering the lives of women and their children as the foundation of development ensures not only the success of programmes but also their long-term impact, transforming both individual lives and entire societies.

In 2024, AFIDEP continued to make significant strides in generating and applying evidence to inform policies and programmes, especially, the lives of women, children, and adolescents. Through flagship projects such as the Adolescent Sexual and Reproductive Health and Rights (ASHER) and Putting countries Back on "The Path to Achieving the Sustainable Development Goals (Back-on-Track)," projects. AFIDEP worked with governments, development partners, and communities to identify what works, where gaps remain, and how to chart a sustainable course towards improved health systems and equitable access to services.

Helping governments rethink adolescent sexual and reproductive health and rights

05

AFIDEP led a consortium with the Universities of Southampton and Portsmouth (UK), in collaboration with Gates Ventures, to identify Low- and Middle-Income Countries (LMICs) that have excelled in reducing adolescent pregnancies. The project documented best practices improving Adolescent Sexual and Reproductive Health and Rights (ASRHR) outcomes, including the prevention and management of unintended pregnancies, in five positive outlier countries: Cameroon, Ghana, Nepal, Malawi, and Rwanda.

Through policy reviews, data analysis, and stakeholder consultations, the project generated robust evidence base arounded in the realities of LMICs and tailored to inform action.

ASHER provides actionable, tested strategies to guide governments in reshaping their approach to ASRHR and in identifying efficient, cost-effective pathways to achieve universal access to sexual and reproductive health services amid competing fiscal and development priorities.

Findings point to five strategic pillars of success:

01 Strong political will and cross-sector collaboration backed by enabling legal frameworks and sustainable financing for ASRHR;

02 Investing in universal primary and equitable secondary education, with compulsory, sexuality education integrated in both school and community settings;

03 Integrated, adolescent-responsive health systems, including youth-friendly services and safe abortion 04

Targeted social protection and empowerment programmes for vulnerable adolescents to address and reduce equity disparities; and

Collaboration with community and religious leaders to address harmful social norms, including child marriage, and foster youth engagement in ASRHR programming.

Building resilience in maternal and child health



>>> AFIDEP's Chifuniro Mankhwala presents findings from the Back-on-Track project in Nairobi, Kenya.



ASHER consortium partners meet in Lilongwe to align research on key drivers of improved adolescent sexual and reproductive health and rights.

The COVID-19 pandemic had severely disrupted health systems worldwide with low- and middle-income countries (LMICs) facing the most significant setbacks. Gains made over decades in reducing maternal and child mortality, increasing contraceptive access, and improving antenatal care coverage were abruptly stalled or reversed. In many countries, resources were reallocated away from essential services such as family planning, maternal health, and immunisation in response to the immediate demands of the pandemic.

To help countries assess the extent of these disruptions and provide a path forward, AFIDEP led the Back-on-Track Project—a multi-country initiative in Kenya, Nigeria, and Ethiopia designed to identify where and how health systems faltered, and what could be done to restore progress toward achieving health-related Sustainable Development Goal number 3. The project focused on maternal and child health (MCH) and ASRHR services, using evidence to map subnational disparities and inform targeted policy and programme responses.

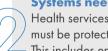
Back-on-Track provided a critical opportunity to reflect on the design and resilience of health systems.

Lessons learned include:





National-level trends masked large disparities. Sub-national data enable more nuanced planning and resource allocation.



Systems need shock-resilience:



Health services for women and children must be protected even during emergencies. This includes ensuring continued access to contraception, antenatal care, safe delivery and child immunisation.





Policies and programmes must account for regional vulnerabilities—such as climate shocks in Ethiopia or protracted insecurity in northern Nigeria—and adapt accordingly.

AFIDEP



Audited Financial Report

Statement of profit or loss and other comprehensive income



			-		
		2024	2024	2023	2023
	Notes	US\$	Kshs	US\$	Kshs
Grants income	3 (a)	8,495,795	1,117,310,878	7,277,847	1,018,898,440
Unrestricted Income	4.	600,000	78,908,040	600,000	84,000,000
Other operating income	5.	189,632	24,939,149	220,454	30,863,560
Total income		9,285,427	1,221,158,067	8,098,301	1,133,762,000
Programme expenses	6.	7,569,044	995,430,707	6,298,050	881,727,000
Administration staff expenses	7.	1,105,903	145,441,063	552,615	77,366,100
Other administrative expenses	8.	959,271	126, 156, 990	1,063,277	148,858,780
Total expenditure		9,634,218	1,267,028,760	7,913,942	1, 107, 951, 880
(Deficit)/Surplus for the year		(348,791)	(45,870,693)	184,359	25,810,120
Other comprehensive income					
Exchange differences on translation from USD to KES		-	(29,438,376)	3	3,806,762
Total comprehensive income for the year		(348,791)	(75,309,069)	184,359	59,616,882

The notes on pages are an integral part of these financial statements

Statement of financial position

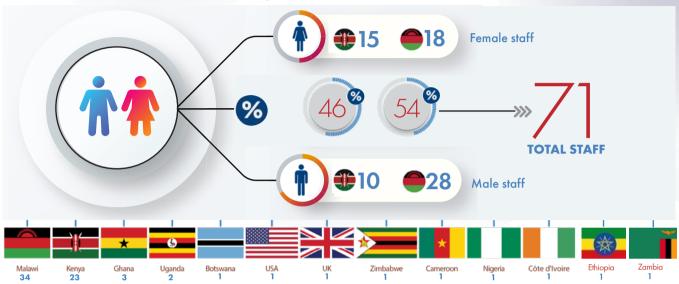


					•
		2024	2024	2023	2023
Assets	Notes	US\$	Kshs	US\$	Kshs
Non-current assets					
Property and equipment	9	258,512	33,456,572	365,809	57,435,828
Current assets					
Grants receivable	3 (a)	699,038	90,469,365	1,301,520	204,351,596
Collaborators debtors	10	235, 156	30,433,845	200,634	31,501,539
Other receivables	11	97,515	12,620,374	180,095	28,276,683
Cash and cash equivalents	12	1,695,048	219,372,792	1,729,507	271,549,856
Bank deposits	13	137,352	17,776,070	1,505,817	236,428,327
Total current assets	_	2,864,109	370,672,446	4,917,573	772,108,001
Total assets		3,122,621	404, 129, 018	5,283,382	829,543,829
Funds and liabilities					
Funds					
Accumulated fund		111,393	(4, 196, 058)	596, 187	59,351,493
Sustainability fund		600,000	70,843,866	500,000	57,901,885
Translation reserve		-	25,420,540	-	54,858,916
Total funds	-	<i>7</i> 11,393	92,068,348	1,096,187	172, 112, 294
Current liabilities	_				
Collaborator payables	10	290,504	37,596,973	271,800	42,675,318
Trade and other payables	14	443,512	57,399,237	270,511	42,472,835
Deferred income	3 (a)	1,677,212	17,064,460	3,644,884	572,283,382
Total current liabilities	_	2,411,228	312,060,670	4, 187, 195	657,431,535
Total funds and liabilities		3,122,621	404, 129, 018	5,283,382	829,543,829

The financial statements were approved by the Board of Directors

AFIDEP Staff Demographics

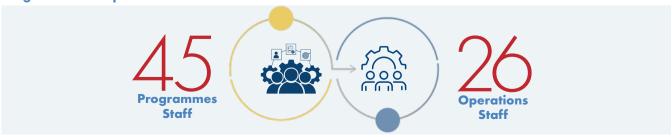
Total Number of Staff in Malawi and Kenya Offices



Qualification For all Staff



Programmes Vs Operation Staff



Board of Directors



Elizabeth Lule Board Chair



Sosten Chiotha, Ph.DBoard Deputy Chair



Cheikh Mbacké, Ph.D Board Member



John Mudany, Ph.D Board Member



Sarai Chisala-Tempelhoff
Board Member



Prof. Andrew TatemBoard Member



Pamela Onyango Board Member



George Werner Board Member



Eliya Zulu, Ph.D Ex-Officio Member and Secretary

Senior Management Team



Eliya Zulu, Ph.D Executive Director



Nyovani Janet Madise, Ph.D DSc Director of Development Policy

and Head of Malawi Office

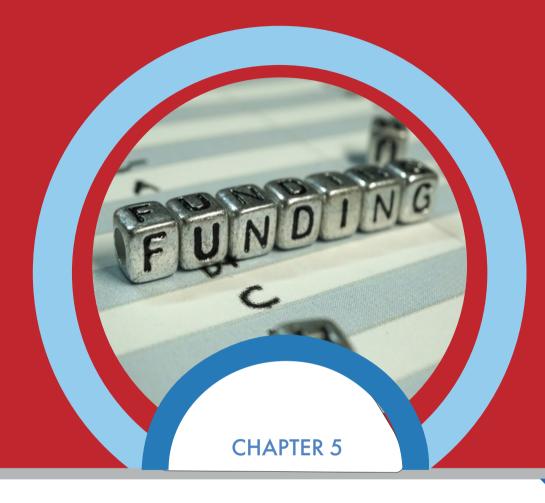


Rose Oronje, Ph.D Director of Public Policy and Knowledge Translation, and Head of Kenya Office



Wicklife Odhiambo Okinda Head of Finance and Operations

AFIDEP



Funders and Partners

Funders

- 1. Anonymous Donor
- 2. Bill and Melinda Gates Foundation
- 3. Children's Investment Fund Foundation (CIFF)
- 4. Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)
- 5. Embassy of Iceland in Lilongwe
- 6. Foreign, Commonwealth and Development Office (FCDO)
- 7. Gates Ventures
- 8. German Development Cooperation
- 9. Global Challenges Research Fund
- 10. Government of Botswana
- 11. International Development Research Centre (IDRC)
- 12. Mastercard Foundation
- 13. Mo Ibrahim Foundation
- 14. National Institute for Health Research (NIHR)
- 15. Preston-Werner Foundation
- 16. Robert Bosch Stiftung GmbH
- 17. Royal Norwegian Embassy in Lilongwe
- 18. The David and Lucile Packard Foundation
- 19. United Nations Population Fund (UNFPA) Kenya
- United States Agency for International Development (USAID)
- 21. Wellcome Trust
- 22. William and Flora Hewlett Foundation
- 23. World Bank

Partners

- 1. Aga Khan Foundation, Pakistan
- 2. African Population and Health Research Center
- 3. African Institute for Health Policy and Health Systems
- 4. Africa Research and Impact Network
- Guttmacher Institute
- 6. Boston University
- 7. Exeter University
- 8. Global Health Policy Lab
- 9. Global Integrity
- 10. Harvard T.H. Chan School of Public Health
- 11. ICF Incorporated
- 12. Itad Limited
- 13. International Centre for Research in Agroforestry
- 14. Liverpool School of Tropical Medicine
- 15. London School of Hygiene and Tropical Medicine
- Makerere University School of Women and Gender Studies
- 17. Oxford Policy Management Limited
- Partners in Population and Development Africa Regional Office
- 19. Results for Development
- 20. Union for African Population Studies
- 21. University of North Carolina
- 22. World Alliance for Lung and Intensive Care Medicine in Uganda

In 2024, AFIDEP's donors and partners' unwavering support empowered the Institute to turn evidence into impact, driving policy, transforming lives, and shaping a better future for Africa. Thank you for walking this journey with us.



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