

## **CIPESA Submission to World Health Organization (WHO) Regional Office for Africa *The Global Strategy on Digital Health 2028–2033***

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### **Introduction**

The Collaboration on International ICT Policy for East and Southern Africa (CIPESA) is pleased to contribute to the ongoing WHO Regional Office for Africa (WHO AFRO) consultations to shape the next Global Digital Health Strategy. This submission builds on our participation in the WHO AFRO stakeholder engagement conducted in February 2026. It focuses on key issues identified by WHO AFRO, alongside related priorities critical to inclusive and progressive digital health.

Across Africa, digital health is rapidly expanding, fuelled by innovations and investments by private and public entities. However, in the absence of governance based on human rights, equity, and public accountability, technology can worsen exclusion, undermine privacy, and reinforce inequalities. Below, we provide actionable recommendations for priority strategy areas.

### **1. Digital Public Infrastructure (DPI)**

DPI, such as shared health registries and interoperable platforms, connect patients, clinics, and public health systems, thereby enhancing efficiency in the delivery of health services. However, in the absence of transparent governance, public oversight, and open standards, DPI may create vendor dependencies, diminish accountability, and exclude individuals who lack digital access.

#### **Recommendations**

1.1 Develop rights-oriented governance frameworks for DPI that require transparency, mechanisms for citizen appeal, and performance reporting.

1.2 Prioritise open standards and open-source solutions to avoid vendor lock-in (over-reliance on specific vendors) and support local customisation.

1.3 Design DPI to be inclusive by default by guaranteeing affordable access, offering multilingual interfaces, and facilitating offline functionality for under-served communities.

### **2. Health Data Governance**

Although national laws on data protection and privacy exist in some countries, only a few have dedicated laws governing data in the health sector - such as the [Kenya Digital Health Act](#). As such, many African countries face persistent gaps in regulatory enforcement, consent safeguards, cross-border regulation, and clarity on health data ownership. These [gaps](#) in health data rights protection can undermine trust and hinder participation in essential health systems, while also exacerbating inequalities.

#### **Recommendations**

2.1 Support Member States to adopt comprehensive health data governance laws and regulations that incorporate explicit consent processes, retention limits, and enforcement measures.

2.2 Promote the principles of data minimisation and purpose limitation to reduce unnecessary exposure.

2.3 Establish independent oversight bodies such as Data Protection Authorities and strengthen

regional collaboration on harmonising cross-border data governance and exchanging best practices.

### **3. Artificial Intelligence (AI)**

AI can assist in disease diagnosis, enhance the pace of clinical decision-making, and boost the efficiency of health systems. However, biased, unclear, or untested [AI risks](#) harming communities, [for instance](#) by providing inaccurate diagnoses to individuals whose data was excluded from training datasets. Africa contributes only an [estimated](#) 2-3% of global health data, implying most health AI in use today was not trained on African populations' data. No African country [has enacted](#) an AI-specific legislation (although a few have developed national strategies), and algorithmic bias in public services remains largely ungoverned.

#### **Recommendations**

3.1 Develop ethical, rights-based AI governance frameworks that prioritise safety, fairness, and transparency, and require explainability and routine auditing of AI systems.

3.2 Demand local validation and testing of AI tools with representative datasets from Africa.

3.3 Invest in national and regional capacity to govern AI responsibly, including for regulators, healthcare professionals, and civil society.

### **4. Interoperability**

Numerous digital health systems continue to be isolated and incompatible, hindering smooth data exchange, squandering resources, and compromising patient care. Global guidance, such as the WHO's [SMART Guidelines](#), highlight the importance of standards-based architectures for creating interoperable, sustainable systems.

#### **Recommendations**

4.1 Adopt national interoperability frameworks that are in accordance with the WHO SMART Guidelines as well as regional and global standards.

4.2 Invest in shared public health information exchange systems with clear governance and data quality standards that connect clinics, laboratories, and national initiatives.

4.3 Mandate that all new digital health vendors adhere to interoperability standards and the utilisation of shared infrastructure.

### **5. Equity and Inclusion**

Digital health may worsen existing disparities by excluding individuals that lack internet connectivity, digital skills, or official identification. Leaving them out deepens inequality and hinders health goals. Regrettably, numerous digital tools favour urban and more digitally connected groups, neglecting rural and marginalised communities. As examples, in Uganda, making the national digital ID a prerequisite for accessing public services [excluded](#) hundreds, including pregnant women and elderly patients, from accessing health care due to registration gaps and errors, while in [Kenya](#), women, older persons, and persons with disabilities are consistently less well-served by digital health platforms, even where connectivity is comparatively strong.

#### **Recommendations**

5.1 Perform equity impact assessments during digital health planning and monitoring, including prior to rolling out any digital health programmes.

5.2 Support digital literacy initiatives and community engagement to facilitate uptake of digital health services.

5.3 Maintain offline and hybrid service delivery options to ensure universal accessibility, not limited to those who are digitally connected.

### **6. Governance**

Even the best technologies fail if they lack strong governance. Ineffective coordination,

ambiguous roles, and limited oversight reduce effectiveness and erode public trust. Regional approaches such as the Africa Centers for Disease Control (CDC) Digital Transformation [Strategy](#) emphasise robust governance and stakeholder coordination as vital for resilient health systems.

### **Recommendations**

6.1 Strengthen multi-sector coordination, bringing together health, technology, finance, and regulatory bodies.

6.2 Establish clear accountability structures that encompass performance indicators, budget transparency, and public reporting.

6.3 Encourage participatory policy development processes that ensure meaningful civil society and community contributions.

### **7. Financing and Capacity**

Many digital health initiatives rely on short-term donor funding, resulting in countries being dependent and unable to scale such programmes. Additionally, gaps in workforce capacity [constrain](#) implementation. Consequently, it is essential to align financing with national priorities and to monitor the efficiency of investments.

### **Recommendations**

7.1 Promote sustainable domestic funding for digital health systems that are integrated into national health budgets.

7.2 Allocate resources for the advancement of the digital health workforce, encompassing technical personnel and decision-makers.

7.3 Align digital health investments with national priorities to enhance long-term scale and impact.

### **Conclusion**

Digital health offers significant potential to enhance Universal Health Coverage and strengthen health systems across Africa. However, without governance anchored in rights, equity, inclusion, and accountability, this promise will remain unfulfilled.

CIPESA calls on WHO AFRO to ensure that the Global Digital Health Strategy (2028–2033) embeds human rights, equity, and accountability at its core. This necessitates emphasising inclusive digital public infrastructure, strong data governance, accountable AI, interoperability, and sustainable funding.

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