

DRAFT SPEAKING NOTES

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OPENING CEREMONY AT THE 4TH INTERNATIONAL CONFERENCE ON PUBLIC HEALTH IN AFRICA (CPHIA 2025)

THEME: MOVING TOWARDS SELF-RELIANCE TO ACHIEVE UNIVERSAL HEALTH COVERAGE AND HEALTH SECURITY IN AFRICA

Your Excellencies,

Ambassador Amma Twum-Amoah, Commissioner for Health,
Humanitarian Affairs and Social Development,

His Excellency Dr. Jean Kaseya, Director-General of the Africa Centres
for Disease Control and Prevention,

Dr. Mohamed Yakub Janabi, Regional Director of the World Health
Organization Regional Office for Africa,

Ms. Bience Gawanas, Vice Chair of the Board of the Global Fund to
Fight AIDS, Tuberculosis and Malaria,

Mr. Cyril Xaba, the Executive Mayor of eThekweni Municipality,

All Distinguished delegates, colleagues, and friends,

Ladies and gentlemen — all protocol observed.

It is with immense pride and deep humility that I officially open the 4th International Conference on Public Health in Africa — right here in the vibrant city of Durban, on the warm shores of KwaZulu-Natal. On behalf of His Excellency President Cyril Ramaphosa, the Minister of Health, Dr Aaron Motsoaledi, and the Government and people of the Republic of South Africa, I would like to extend our gratitude to the Africa Centres for Disease Control and Prevention, the African Union, and all our

continental and global partners who have made this moment possible and for bringing this premier African event to the shores of South Africa. This conference is not a standalone gathering; it complements and sustains the critical conversations initiated at other global and continental forums. From the World Health Assembly to the WHO-Afro meeting in Lusaka, the Africa CDC Sovereignty Conference, and the recent UN High-Level Meeting on NCDs and Mental Health, this conference builds on shared commitments, translating dialogue into actionable strategies. Together, these platforms strengthen collaboration, amplify Africa's voice, and ensure continuity in advancing resilient, equitable, and people-centered health systems.

The theme of this conference, namely: ***“Moving Towards Self-Reliance to Achieve Universal Health Coverage and Health Security in Africa”*** — marks a defining moment in our collective journey. It reflects Africa's determination to shift from dependency to autonomy, from vulnerability to resilience, and from being recipients of aid to being architects of our own health future. Africa is no longer content to be a site of global response. We should now shape global health priorities. This conference should indeed affirm that *our destiny must be African-led, African-financed, and African-owned.*

Over the past decade, Africa has made tremendous progress — but progress alone is not enough. The real measure of success lies in *whether our decisions we make today will translate into better health and improve lives for our people.* Therefore, our challenge is not to make new promises, but to make our existing commitments count. This conference must therefore move us from rhetoric to measurable outcomes, namely:

- Policies that are implemented.
- Innovations that reach the last mile.
- Investments that save lives, not just make headlines.

This conference must deliver a legacy of action in various tracks — a **Durban Declaration** that is practical, forward-looking, costed, and trackable, setting in motion measurable commitments that turn Africa's vision of self-reliance and health sovereignty into tangible, lasting change for its people.

The conference is happening at a strategically important moment, on **the eve of the G20 Ministers of Health meeting in Polokwane and ahead of the G20 Heads of State Summit in November 2025**. This conference presents a vital opportunity for Africa to shape discussions, influence decisions, and ensure that the continent's priorities—resilient health systems, health financing for universal health coverage, pandemic prevention, preparedness and response, and health equity—are firmly anchored in the outcomes of these high-level G20 engagements.

The eight tracks of this conference are fully aligned with South Africa's **G20 Presidency theme "Solidarity, Equality, and Sustainability"**. The South African theme aims to create an inclusive future by focusing on issues like inequality, access to opportunities, and sustainable development, with a particular emphasis on bringing African and Global South priorities to the forefront.

These eight tracks also reflect the **G20 Health Working Group (HWG) priorities** of building resilient health systems, advancing universal health coverage through a PHC approach and health financing; health and care workforce investment; strengthening pandemic prevention, preparedness and response (PPPR) and local manufacturing; science, innovation, and economic growth and promoting health equity and global solidarity.

Ladies and gentlemen

Today, Africa stands at a crossroads defined by both crisis and opportunity. The continent is facing a series of overlapping and mutually reinforcing crises, including climate change, underdevelopment, inequality, poverty, hunger, unemployment, technological changes and geopolitical instability. Furthermore, our continent continues to grapple with the cumulative effects of decades of chronic underinvestment in health systems, persistent aid dependency, and inequitable global financing structures.

In many of our countries, out-of-pocket spending remains the primary source of health financing, pushing vulnerable households into poverty, while the burden of debt servicing diverts vital resources away from health, education, and social protection. Africa continues to face the dual challenge of longstanding infectious diseases—including HIV/AIDS, TB, and malaria—alongside the rising epidemic of non-communicable diseases and mental health conditions. These ongoing health threats, compounded by recurrent outbreaks such as cholera and Ebola, underscore the urgent need for coordinated, resilient, and innovative approaches to protect the continent's health security and advance equitable access to care.

Declining health funding threatens to reverse decades of progress, leading to increased deaths from diseases like HIV and tuberculosis, reduced access to care, and a greater burden on patients. Threats to the WHO and the Global Fund's future funding could reverse gains in global health and disrupt essential programs for prevention, diagnosis, and treatment. The replenishment of the Global Fund is critical to sustaining and scaling up efforts to combat infectious diseases, build climate-resilient health systems, and support vulnerable populations.

Yet, within this crisis lies a powerful opportunity: to reimagine Africa's development model by building resilient, self-financed, and self-reliant health systems — shifting decisively from dependency to dignity, and from vulnerability to sustainable sovereignty. Therefore, South Africa, during its G20 Presidency, is co-hosting the Global Fund's Eighth Replenishment Summit with the United Kingdom to advocate for increased funding to fight AIDS, Tuberculosis, and Malaria. This fundraising effort, which is taking place on the sidelines of the G20 Leaders' Summit in Johannesburg on 21 November, aims to secure a target of \$18 billion to save millions of lives and strengthen global health systems for the 2027-2029 cycle. This effort underscores South Africa's commitment to advancing health security, equity, and sustainable development on the continent and globally.

Therefore, this conference should place inequality and solidarity at the center of economic health policymaking. Inequality undermines global growth, development, and stability, with the greatest burden felt in the Global South. Addressing these disparities is not only a moral imperative but essential for building sustainable, inclusive, and resilient health and economic systems worldwide.

Ladies and gentlemen

At this conference, I argue that our deliberations must focus on translating these eight tracks into actionable outcomes that should redefine Africa's health future.

Achieving universal health coverage remains a formidable challenge in the current global economic landscape. Record debt levels, rising debt-servicing costs that crowd out social spending, declining aid flows, sluggish economic growth, and the looming risk of major trade wars and disruptions all constrain many of our governments' ability to invest in health. Yet, with growing social needs and competing demands, including expanded defence spending by wealthier nations, investing in health, particularly with a deliberate pro-poor focus, cannot be treated as discretionary. Sustainable, equitable financing is essential to ensure that no one is left behind.

Therefore, this conference must drive consensus on how Africa can finance its own health agenda — by shifting from aid dependency to sustainable self-reliance. This means developing innovative financing instruments, strengthening domestic resource mobilization, and ensuring accountability so that every rand, naira, and franc delivers measurable value to our people. This conference should provide practical and solution-oriented mechanisms on how the Ministers of Health could collaborate with other sectors, particularly Ministries of Finance and our Heads of State, given the substantial public sector investment needed and the need for a whole-of-government approach.

However, many of our countries are **spending more on servicing their debt than on public health and education**, diverting critical funds away from development and social services. Therefore, this conference should provide practical solutions to address this crisis, including what global action to be undertaken to reform the international financial architecture, and how to implement innovative financing solutions like debt swaps to reinvest repayments into social projects.

Boosting Local Manufacturing must move beyond aspiration to continental implementation. Developing regional manufacturing hubs is central to strengthening Africa's health security and self-reliance.

Harmonized regulatory frameworks, led by the African Medicines Agency, streamline approvals, promote mutual recognition, and build capacity in national regulatory authorities to ensure consistent quality and accelerate market access. This conference, therefore, must provide concrete solutions to secure sustainable markets for African-made health products.

A recent example highlighting the complexities of equitable access is Gilead's tiered pricing strategy for its long-acting injectable HIV medication, **lenacapavir**, which aims to reduce costs and increase availability across Africa and other low- and middle-income countries.

We meet at this conference with a shared concern that global progress towards Universal Health Coverage and the Sustainable Development Goals remains far too slow. Today, nearly 4.5 billion people still lack access to essential health services, and two billion face financial hardship due to healthcare costs. This is unacceptable.

Digital innovations are redefining Africa's health landscape — transforming how we deliver, manage, and experience healthcare. From electronic health records and AI-powered analytics to telemedicine and mobile platforms, digital health should drive **efficiency, reduce costs, and expand access** to even the most remote and marginalized communities, including cross-border and internal migrants.

Addressing the **social determinants of health** and advancing **climate and One Health initiatives** must be at the heart of Africa's health agenda if we are to break the vicious cycle of poverty, inequity, and environmental vulnerability.

Tackling cervical cancer is central to Africa's vision of harnessing its **demographic dividend** and empowering its young, expanding population. Yet the continent bears a disproportionate burden, with cervical cancer claiming the lives of women in their reproductive and working prime, compounded by high rates of HIV and entrenched socio-economic inequities. This preventable and treatable disease exposes gaps in sexual and reproductive health and rights, healthcare access, and primary health systems. Africa must act decisively: **prioritizing HPV vaccination for adolescents, expanding equitable screening and treatment, and integrating services into robust PHC platforms.**

Pandemic Prevention, Preparedness, and Response is a central pillar of resilient and equitable health systems. The recently adopted **WHO Pandemic Agreement** and amendments to the **IHR (2005)** provide an unprecedented opportunity to embed equity, sovereignty, solidarity, and human rights at the heart of global health governance. We look forward to the timely conclusion of the **Pathogen Access and Benefit Sharing**

(PABS) Annex negotiations and the upcoming UNGA High-Level Meeting on PPPR in September 2026, which will sustain political commitment and drive rapid action. We should strengthen international cooperation, including public-private partnerships and the **Global Coalition for Local and Regional Production, Innovation, and Equitable Access**, to close gaps in R&D and ensure timely, affordable, and equitable access to life-saving products.

Ladies and gentlemen,

As I conclude, Africa has never lacked vision — what we have sometimes lacked is *alignment and urgency*. Let us reject the business-as-usual paradigm. Our people cannot afford delays while we debate policies and frameworks. Every decision we take here must move us closer to health equity, economic inclusion, and social justice.

Through African leadership and global solidarity, we can build a future where our health systems are financed, powered, and sustained by Africans — ensuring that no community, anywhere on this continent, is left behind.

I wish you all a successful and impactful conference. May the 4th International Conference on Public Health in Africa mark the dawn of a truly self-reliant Africa.

I thank you.