eHealth AFRICA

2025 Mid-Year Report

www.ehealthafrica.org

#WeAreeHA
#WeAreeHA
#WeAreeHA

Table of Contents

List of Acronyms

AIT –	Area of intractable Transmission
BISKIT –	The Blood Information System for Crisis Intervention and Management
CAHFSN –	Climate Adaptation in Health Food Security and Nutrition
CO_2 –	Carbon Dioxide
cVDPV2 –	Circulating Vaccine-Derived Poliovirus Type 2
DPM –	Disease Prevention Monitoring
DRC –	Democratic Republic of the Congo
eHA –	eHealth Africa
EOCs –	Emergency Operations Centers
FCT –	Federal Capital Territory
GPLN –	Global Polio Laboratory Network
Indigo –	A vaccine carrier technology or system
LGAs –	Local Government Areas
LIPs –	Laboratory Infrastructure Projects
LoMIS	Logistic Management Information Systems
LS&D –	Laboratory Systems and Diagnostics
NIMR –	Nigerian Institute of Medical Research
OBR –	Outbreak Response
PEOCs –	Public Health Emergency Operations Centers
PH –	Public Health
PHLs –	Public Health Laboratories
PHEM –	Public Health Emergency Management
PortaBat –	A digital solution designed for optimal vaccine maintenance
REACH –	Resiliency through Azithromycin for Children
RI –	Routine Immunization
SERICC –	State Emergency Routine Immunization Coordination Center
SLS –	Strengthening Laboratory Systems
SPOCR –	Strengthening Public Operations and Coordination Response
TWG –	Technical Working Group
VDD –	Vaccine Direct Delivery
WFP –	World Food Programme

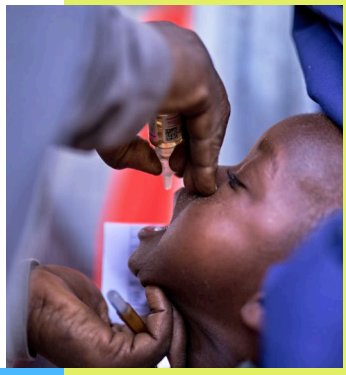
About eHealth Africa

Our Mission

eHealth Africa empowers vulnerable and underserved communities to achieve healthier, more prosperous lives by strengthening health systems through innovative, data-driven digital solutions and person-centered care.

Our Vision

A world where everyone lives healthy and more prosperous lives.



Our Core Values

01 **Impact and Quality:** We push ourselves to maintain high standards ensuring that we produce the most meaningful results in everything we do, no matter how big or small.

02 **Innovative Problem Solving:** We maintain a worldview driven by possibilities, not limitations. We take smart risks and foster an environment where creativity and innovation thrive.

03 **Integrity:** We are honest and truthful in our work. We always do what is right, even when it is not easy. We put our values into practice and hold each other accountable.

Key Numbers Driving Impact

7,205

Health practitioners utilized the Emergency Operation Centers (EOCs)

4,092,496

Vaccines and other commodities delivered

16,013

data collectors and field workers trained on GIS tracking

4,906

blood donors registered via The Blood Information System for Crisis Intervention and Management (BISKIT) digital solution

194,467

settlements reached via GIS tracking systems

Mapped

3,632

industrial data points

820,559

children reached with immunization via vaccine direct delivery

Over 50

solar-powered PHCs

saving ₦2.5m

in fuel and maintenance cost

Aligning progress to sustainable development goals (SDGs)

9 INDUSTRY, INNOVATION AND INFRASTRUCTURE

7 AFFORDABLE AND CLEAN ENERGY

13 CLIMATE ACTION

3 GOOD HEALTH AND WELL-BEING

17 PARTNERSHIPS FOR THE GOALS

Use of AI and digital tools for planning, diagnostics, and data visibility

Reduced CO2 emissions and improved 24/7 healthcare delivery through renewable energy

Enhanced health facility preparedness for floods, heatwaves, and droughts.

Improved disease detection, vaccination coverage, NCD control, and early diagnosis of SCD

Strengthened multi-sector collaboration for health systems strengthening

Core Competencies:

Global Health Informatics (GHI):

At eHealth Africa, Global Health Informatics is central to our work in transforming healthcare delivery through data and technology. Our bespoke informatics solutions provide real-time data collection, analysis, and visualization, enabling governments and health stakestakeholders to make informed, evidence-based decisions. By integrating digital tools with public health systems, we empower underserved communities with access to timely and reliable health services, improving outcomes across Africa.

Public Health Infrastructure:

eHealth Africa is committed to building and maintaining robust public health infrastructures. Our team of engineers and project managers design and construct world-class facilities, including laboratories, public health emergency operation centers, and health offices, all adhering to international best practices. We incorporate renewable energy sources to enhance sustainability, ensuring that health systems remain resilient and effective, even in the most remote and resource-limited areas.

Supply Chain Logistics & Last Mile Delivery Systems:

We provide cutting-edge solutions to ensure the efficient distribution of health commodities, such as vaccines, to even the most underserved regions. By addressing bottlenecks and managing resources through data-driven technologies, we enhance the delivery of essential healthcare supplies, strengthening health systems across Africa.

Implementation Research & Data Analytics:

eHealth Africa leads in implementation research and data analytics to drive continuous improvements in public health. We design and deploy data-driven tools to monitor and evaluate health programs, providing actionable insights for policymakers and health professionals. Our expertise in data collection, management, and analysis enables stakeholders to assess program effectiveness, optimize resource allocation, and enhance service delivery for long-term impact.

Public Health Emergency Management (PHEM) Program Area

Public Health Emergency Management (PHEM)

At-a-Glance

Building Stronger, Faster Health Emergency Systems Across Africa

Key Outcomes (H1 2025)

20 of 36 EOCs supported **(55% coverage)** with country-led maintenance.

1,800 stakeholders trained, 59% rise in practitioner capacity.

23% increase in practitioner use; **24,733 visits** to EOCs by June 2025.

799 technical meetings (up from 98) and 143 scorecards driving accountability.

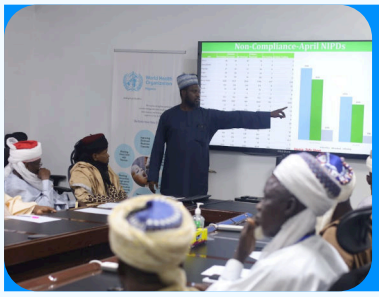
Our Strategic Priorities for Partnership and Impact

1. Investment to Sustain & expand EOC infrastructure across Nigeria and Africa
2. Invest in practitioner training for lasting national resilience
3. Scale real-time data systems for faster outbreak response
4. Embed climate-health resilience into emergency systems.

PUBLIC HEALTH EMERGENCY MANAGEMENT (PHEM) PROGRAM AREA

At eHealth Africa (eHA), our Public Health Emergency Management programs give governments and health organizations the tools, skills, and systems to detect, investigate, and respond to health threats swiftly, even in the most remote regions. From developing high-functioning Emergency Operations Centers (EOCs) to integrating real-time data systems and delivering rapid logistical support, we are helping countries move from crisis response to proactive public health leadership.

FEATURED PROJECTS



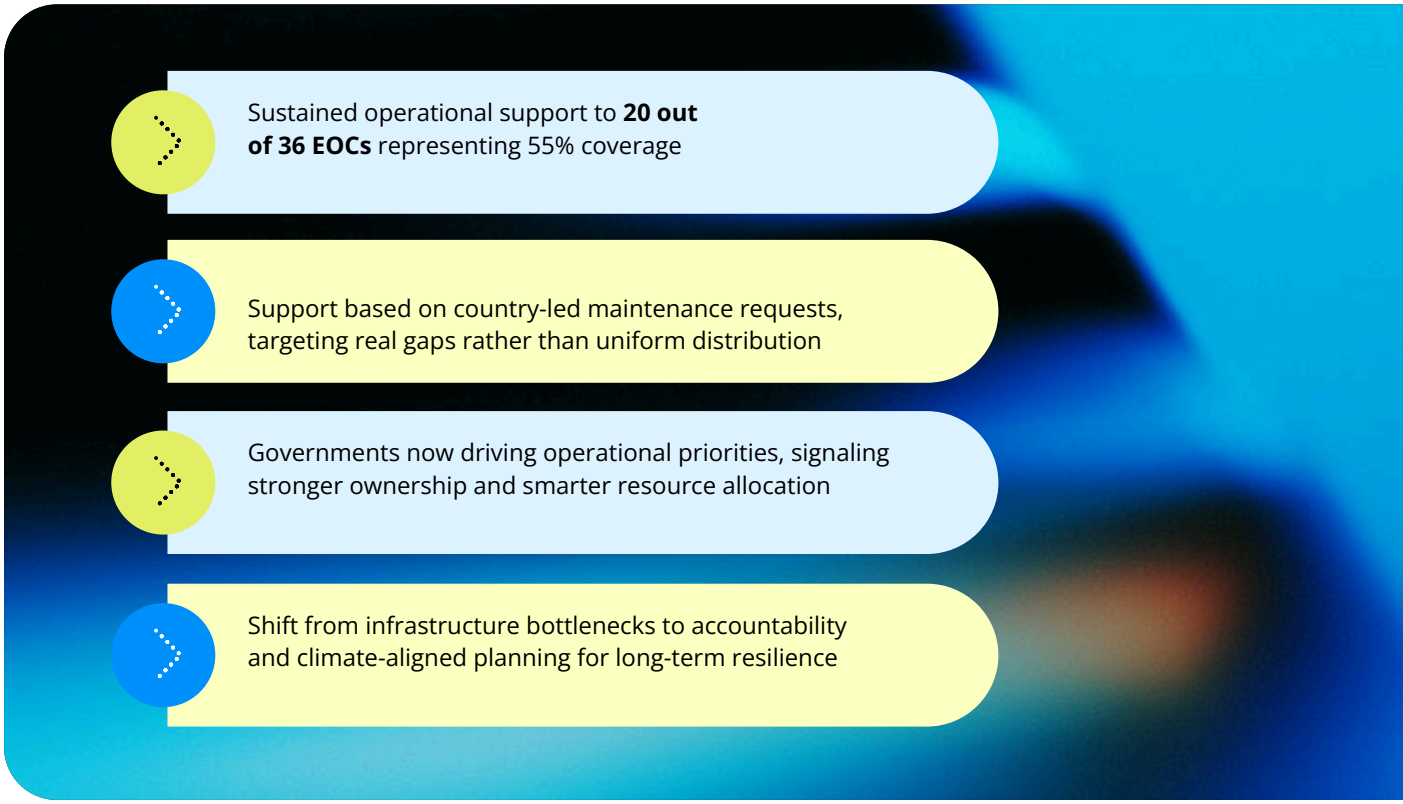
Polio Outbreak Control Rooms (POCRs): Strengthening governments across Africa to combat polio and other vaccine-preventable diseases by establishing control rooms and delivering essential technical and operational support.

Polio Emergency Operations Center (PEOC): Serving as centralized hubs where state health administrators and partners coordinate responses, design solutions, and strengthen the national healthcare system against polio and other major health challenges.

KEY IMPACT:

Enhanced efficiency and effectiveness in operations and logistics support for Emergency Operation Centers

In H1 2025, eHA moved from expansion to strategic optimization, ensuring resources go exactly where they are needed most. By providing targeted, country-led operational support, we've strengthened resilience, boosted efficiency, and set the stage for sustainable emergency response systems. The highlights are:



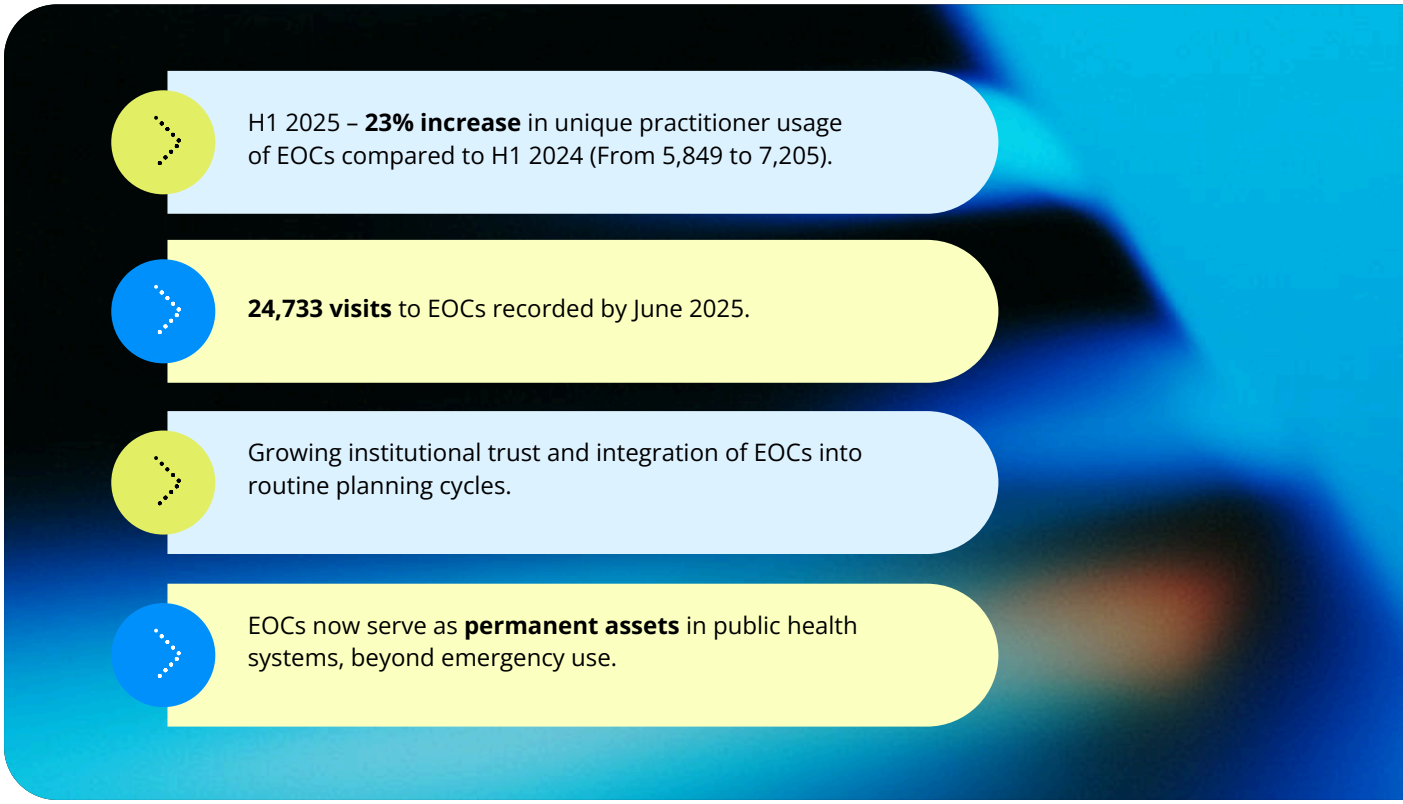
In H1 2025, eHA moved from expansion to strategic optimization, ensuring resources go exactly where they are needed most.

50% of Polio control rooms provided operational support in Africa

KEY IMPACT:

Effective utilization of EOCs as Strategic Health Planning Hubs

Data shows that EOCs are transitioning from emergency-only coordination hubs to powerhouses for strategic health planning. This shift shows they are now embedded in everyday public health operations, trusted by practitioners, and central to decision-making. The highlights for H1 2025 are:



1,811 public health practitioners and POCR personnel trained for effective planning, coordination of public health emergencies.

24,733 visits to the EOC by 7,205 health practitioners

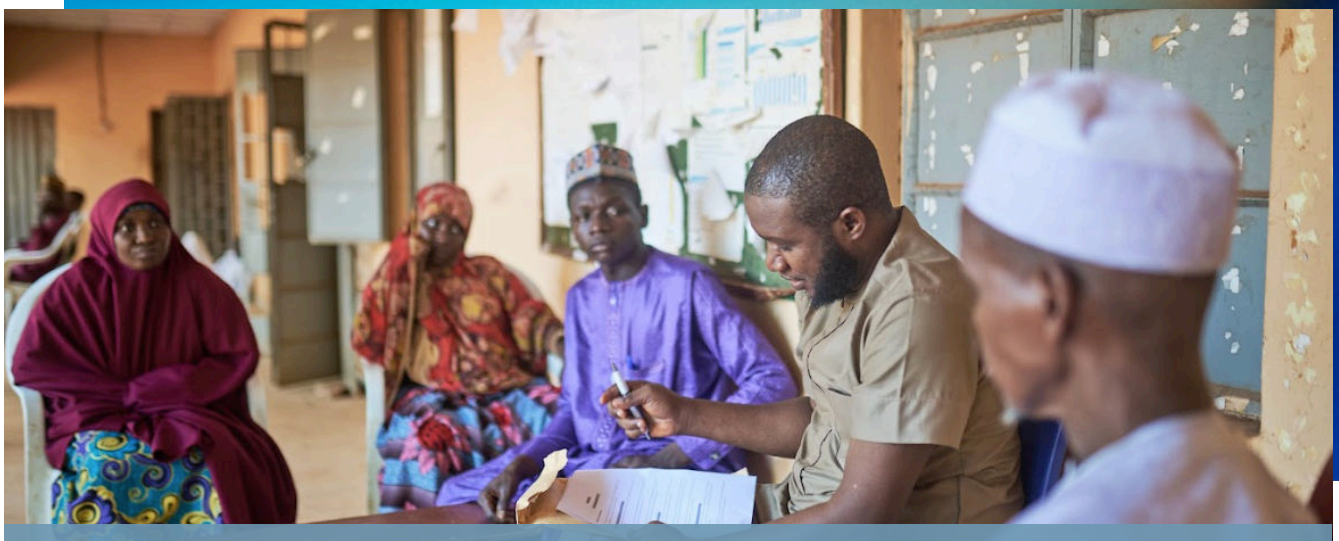
413 organizations have utilized the EOC for coordination and planning

KEY IMPACT:

Strengthened capacity of public health practitioners to effectively manage EOCs across Africa

In H1 2025, our training approach changed. We made significant investments in training, with a deliberate shift to quality over quantity. We focused on hands-on, skills-based learning, strengthening health systems in line with SDG 3 and marking a clear shift towards local ownership and long-term resilience. The highlights are:

- 1,800 health stakeholders trained, driving a 59% rise in capacity and assessment scores from 62% to 84%.
- The POCR project trained 11 practitioners with 100% demonstrating improved knowledge.
- Quality-over-quantity approach to ensure sustained impact and EOC functionality beyond donor support.



50% of trained Public Health Practitioners with reported 84% knowledge gain in skills

KEY IMPACT:

Deepened Stakeholder Engagement and Technical Leadership in Public Health Coordination

In H1 2025, eHA's role in technical governance and public health coordination expanded significantly, embedding us deeper into national and sub-national decision-making. Our influence is now measurable in both reach and results:

Actively participated in 799 Technical Working Group (TWG) Meetings

Testimonials

The Emergency Operations Center has successfully connected all 25 Local Government Areas (LGAs) in real time, enabling virtual meetings, data reporting, and rapid response to health emergencies.

– Dr. Ibrahim Ahmed Dangana
Honourable Commissioner for
Primary Healthcare

When it comes to vaccination, the role of the Emergency Operation Center is vital especially in tackling non-compliance and reaching hard-to-access communities during disease outbreaks.

– Yusuf Muhammad Anderson
State Coordinator, Niger state field office

With the Emergency Operations Centre acting as an anchor point for public and primary healthcare activities, every major stakeholder is now able to leverage its available resources and manpower.

– Dr Fatimah Ibrahim
Incident Manager, Niger state Emergency
operation Centre

Access to state-of-the-art gadgets, provided by the Emergency Operation Center, ensures instant feedback from the LGAs. This has led to a significant improvement in data collation across the state.

– Mr Abraham Bako
State Monitoring and Evaluation Officer,
Ministry of Primary Healthcare, Niger State

Community engagement drives our strategy—through the Emergency Operation Center, we collaborate with the State Health Educator to ensure life-saving information reaches every corner, from LGAs to grassroots mobilizers.

– Abubakar Muhammad Kaoje
Kebbi State Immunization Officer

The Emergency Operation Center has transformed our response from reactive to proactive by enabling real-time information sharing, joint planning, and effective coordination among stakeholders.

– Dr Bala Muhammed Aminu
Deputy Incident Manager

Our data team is the backbone of the Emergency Operation Center—uniting partners, delivering real-time insights, and guiding every decision we make with precision and purpose.

– Mubarak Yakubu Saleh
State Team lead, SOLINA Polio
Outbreak Response project, Kebbi

The Emergency Operation Center (EOC) functions like one big family, bringing together all public health stakeholders. The Sultan Foundation is now well represented in the state and operates as an integral arm of the Emergency Operation Center.

– Dr Fahad Muhammed
Kebbi State Team Lead for Sultan Foundation

Laboratory Systems and Diagnostics (LS&D) Program Area

Laboratory Systems & Diagnostics (LS&D)

At-a-Glance

From Planning to Execution for Faster Disease Detection

Key Outcomes (H1 2025)

5 laboratories fully modernized (Nigeria, Zimbabwe, Madagascar, Uganda) → faster outbreak confirmation & response.

2 additional labs renovated/IT-upgraded for high-performance diagnostics.

10 consumable requests delivered to **8 labs** across Africa.

New Supply Hub built in South Africa to streamline procurement & logistics.

3 equipment requests fulfilled, strengthening critical diagnostic capacity.

National ownership embedded → ensuring sustainable, long-term integration into health systems.

Our Strategic Priorities for Partnership and Impact

To accelerate early detection and disease control, we seek partners to:

1. Investment in the Development of Operational Guidelines for Public Health Infrastructure in Africa
2. Support and partnership for the development of Lab systems database across Africa
3. Expand systems integration for real-time data sharing and faster decision-making.

LABORATORY SYSTEMS AND DIAGNOSTICS (LS&D) PROGRAM AREA

In 2025 , eHealth Africa's laboratory systems strengthening program area made a decisive leap from planning to full execution, replacing fragmented support with a cohesive operational model that accelerates early detection and confirmation of Vaccine-Preventable Diseases (VPDs). This program area demonstrates how strategic investments in procurement, infrastructure, and systems integration can meaningfully improve public health readiness across the region.

FEATURED PROJECTS

Laboratory Infrastructure Procurement Systems: This project supports WHO AFRO to strengthen the Global Polio Laboratory Network (GPLN), enabling rapid confirmation of cVDPV cases and swift outbreak response. These include the rollout of novel OPV2, giving affected countries the tools to act faster and effectively to contain disease spread.

10 requests of consumables delivered to 8 Labs in Africa.

KEY IMPACT:

Five Labs Upgraded with Modernized Infrastructure; Driving Faster Outbreak Response

In H1 2025, we completed 100% renovations and IT upgrades across five major polio and virology laboratories in Nigeria, Zimbabwe, Madagascar, and Uganda. These upgrades have transformed the labs into high-performance diagnostic hubs, accelerating outbreak detection and strengthening national capacity for rapid, coordinated responses.

- Five fully modernized labs now operational and aligned with national health priorities
- Faster detection and confirmation of outbreaks, enabling quicker containment measures
- Improved data accuracy and reliability for disease surveillance
- Strengthened public health infrastructure at both national and global levels
- Advances SDG 3 (Good Health & Well-being), SDG 9 (Industry, Innovation & Infrastructure), and SDG 17 (Partnerships for the Goals)
- Sustainability embedded through national ownership and integration into long-term health strategies

3 requests of equipment delivered to 3 Labs labs in Africa.

2 completed Renovation/IT upgrades done for 2 labs in Africa.

Supply Hub construction completed in South Africa to facilitate supply chain and logistics materials.

"This is the biggest transformation I have witnessed in the Polio laboratory, University of Zimbabwe, since I started working here over 2 decades ago"

– Professor Rooyen Mavenyengwa,
Director of Zimbabwe Polio Laboratory -

Disease Prevention Monitoring (DPM) Program Area

Disease Prevention Monitoring (DPM)

At-a-Glance

Harnessing Digital Tools and Data for Stronger Disease Surveillance

Key Outcomes (H1 2025)

Strengthened Polio Response across 8 high-risk Nigerian states with integrated tools (GIS, microplanning, traditional leader engagement).

Expanded Reach:

12.7M children immunized through GTS & Polio SI campaigns.

194,467 settlements tracked with 88% geospatial coverage and 95% accuracy.

13,950 settlements reached in security-compromised areas (70% coverage).

Capacity Building:

15,815 field staff trained on devices & protocols.

25,000+ tracking devices deployed for campaign oversight.

Cold Chain & Vaccine Delivery:

820,559 children reached Sokoto via VDD.

4M+ commodities delivered despite global shortages.

61,000+ children vaccinated in hard-to-reach areas using Indigo carriers.

Child Health Innovations:

669 newborns screened for sickle cell; early detection & follow-up ensured.

SARMAAN & REACH trained 18,000+ teams, reducing under-five mortality risk.

Malaria & NCDs:

99.6% monitoring coverage for mosquito net distribution in Zamfara.

Hypertension treatment coverage: 90%, with 74% controlled in intervention sites.

Our Strategic Priorities for Partnership and Impact

To scale prevention and monitoring impact, we seek partners to:

1. Expand digital surveillance tools for faster outbreak detection across Africa
2. Strengthen cold chain systems and last-mile vaccine delivery in fragile settings
3. Expand digitization of microplanning via PlanFeld across Nigeria
4. Support integration of NCD & child health innovations into routine systems
5. Advance cross-border data systems to improve regional disease monitoring.

DISEASE PREVENTION MONITORING (DPM) PROGRAM AREA

eHealth Africa strengthens disease prevention and monitoring by providing digital tools and operational support for effective disease surveillance. Our solutions enable timely data collection and analysis, allowing governments and health organizations to detect outbreaks early, track vaccine distribution, monitor disease trends, and take preventive action. By combining real-time data collection, GIS technology, and community engagement, we help reduce disease burdens and build healthier, more resilient communities across Africa.

FEATURED PROJECTS

Support for Sub-National Polio Outbreak Response in Nigeria (SNPOBR): Strengthens Nigeria's polio outbreak response through improved immunization campaigns and by fostering state and community accountability.

Engagement of Traditional Leaders Initiative (ETI): Mobilizes traditional leaders as advocates to boost immunization coverage and interrupt cVPV2 transmission through targeted advocacy and training.

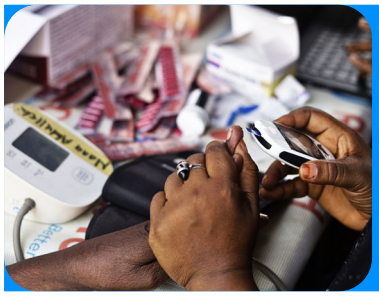
FEATURED PROJECTS

Digitization of Micro Plans (DMP): Enhances immunization coverage by developing GIS-based microplans, building state capacity, and optimizing vaccine distribution.

Vaccine Direct Delivery (VDD): Supports Sokoto's vaccine delivery by maintaining cold chain integrity, tracking stock, strengthening healthcare capacity, and managing waste disposal.

Safety and Antimicrobial Resistance of Mass Administration of Azithromycin on Children 1–59 Months in Nigeria (SARMAAN): Evaluated the impact of mass azithromycin administration on infant mortality, to inform future child survival strategies in Nigeria.

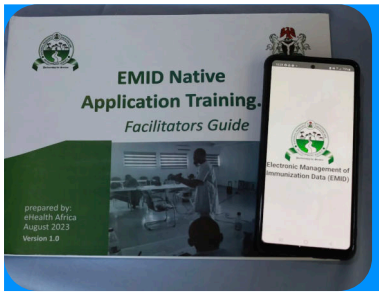
Geospatial Tracking System (GTS): Uses geospatial tracking to improve immunization coverage, reduce missed settlements, and update the Polio Master List in Northern Nigeria.



Digitizing for Impact: Improving Rural Access to Integrated Healthcare Services for Non-Communicable Diseases in Nigeria (DIIAN): Enhances rural NCD management through patient tracking, health worker training, data synchronization, and collaboration with health authorities.

FEATURED PROJECTS

Against Malaria Foundation Post Distribution Monitoring (AMF PDM): Tracks mosquito net presence, usage, and condition in Bauchi, Zamfara and Plateau states, post- distribution.



Electronic Management of Immunization Data (EMID): Optimizes Nigeria's immunization data system with better synchronization, offline functionality, and a more user friendly interface.

GTS

467 LGAs Visited

194,467 settlements reached

25,058 trackers deployed

16,013 data collectors and Field workers trained

12,680,904 children immunized

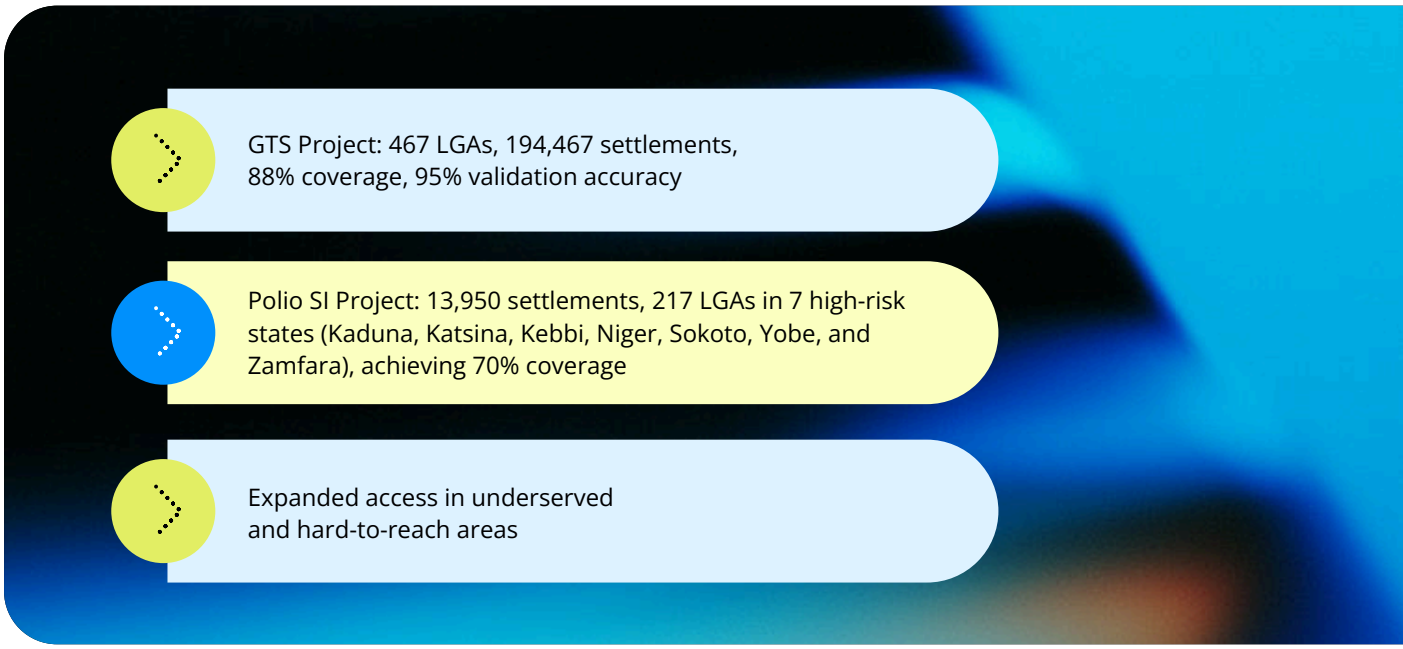
KEY IMPACT:

Coordinated Strategies to Strengthen Nigeria's Polio Response in High-Risk States

In 2025, eHA deployed five integrated initiatives to accelerate Nigeria's fight against cVDPV2 across eight high-risk states. By combining Geographic Information Systems, Digitization of Microplanning, targeted interventions, outbreak response support, and traditional leaders' engagement, the program is driving higher vaccination coverage, delivering real-time data for faster decisions, and building trust in underserved and security-challenged communities. This approach is closing immunization gaps and strengthening the polio response where it is needed most.

Improving Vaccination Reach and Geospatial coverage

In H1 2025, the GTS Project transformed campaign monitoring, tracking vaccination coverage in real time across eight states. The Polio SI Project targeted security-compromised areas, ensuring children in previously inaccessible communities were reached. Together, they directly advanced Nigeria's polio interruption strategy by ensuring that previously inaccessible children were reached, contributing directly to Nigeria's broader polio interruption strategy. The key results are:



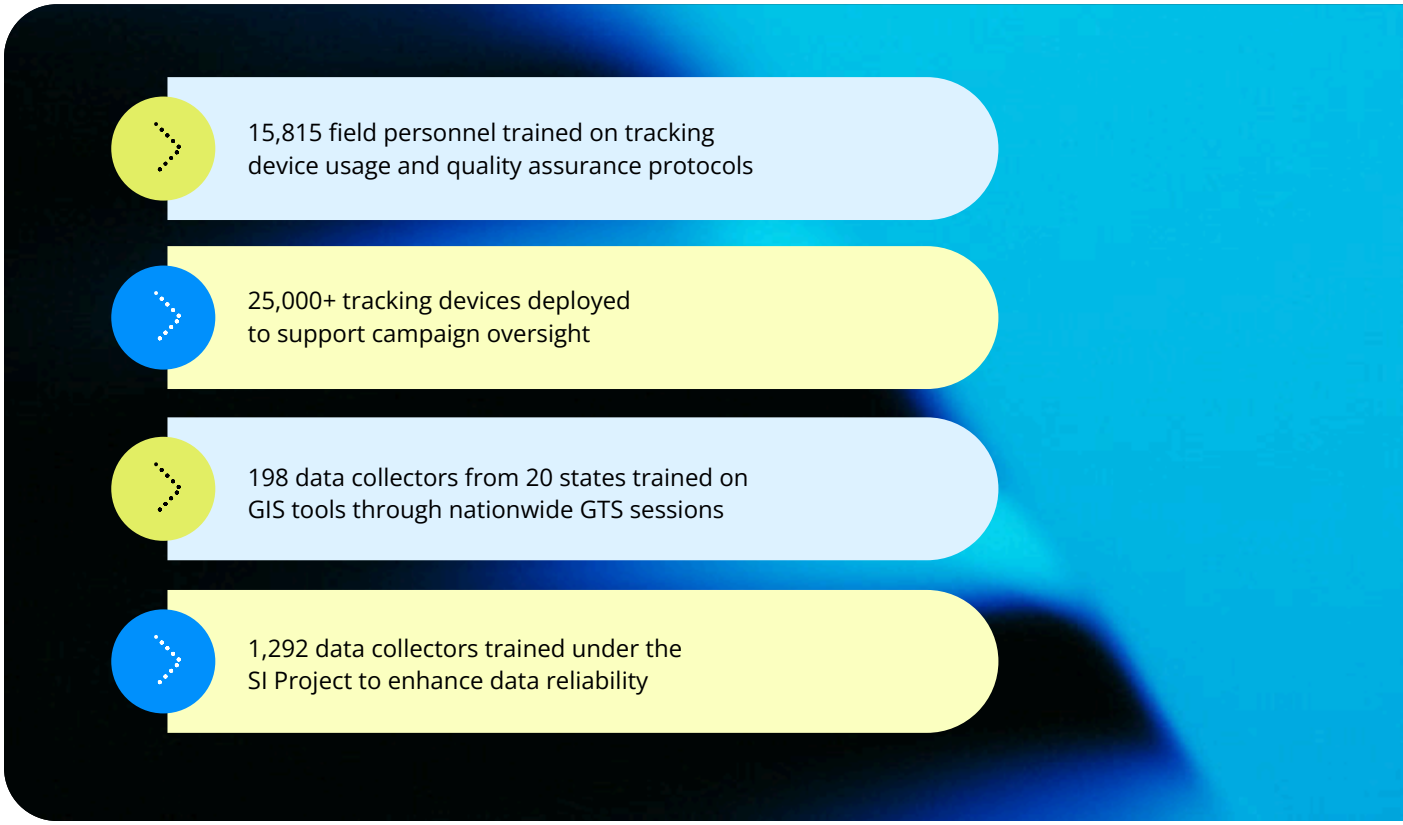
The GTS Project is transforming campaign monitoring, tracking polio vaccination coverage in real time across 467 LGAs and 194,467 settlements in eight states. It achieved an 88% geospatial coverage rate with 95% settlement validation accuracy delivering precise, actionable data to strengthen the polio response.

Simultaneously, the Polio SI Project focused on security-compromised states. It reached 13,950 settlements across 217 LGAs in seven states, achieving 70% geospatial coverage.

KEY IMPACT:

Capacity Building for Field Health Staff

In H1 2025, eHA invested in large-scale training to strengthen data quality and tracking in vaccination campaigns. By equipping field personnel and data collectors with the right tools and protocols, we enhanced oversight, improved GIS capacity, and boosted the reliability of campaign monitoring. The key results are:



Improved Campaign Efficiency through Digital Microplanning

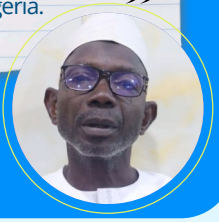
To replace slow, manual planning methods, eHealth Africa implemented a Digitized Microplanning Project using an automated, GIS-integrated tool, PlanFeld. Piloted and deployed in Kebbi State, PlanFeld streamlines planning from MLoS to Daily Implementation Plans (DIPs), optimizes team deployment, and improves data accuracy. A User Assessment Test (UAT) conducted in May revealed that 100% of users preferred PlanFeld over traditional methods.

Testimonials

"Microplan is key to the success of any public health program and eHealth Africa is towing that path to ensure we have a standard and realistic database and planning systems for all our campaigns."

– Dr. Audu Musa
Deputy Incident Manager National Emergency Operation Center, FCT

"Planfeld is user-friendly and effective. I recommend that PlanFeld be scaled up and deployed for the development of microplans for vaccination campaigns across Nigeria."



– Muhammed Bagudu
Kebbi State incident Manager

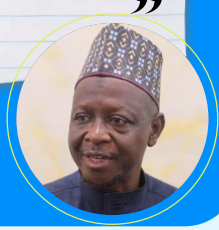
"Planfeld is very user-friendly. Within minutes, we can generate a comprehensive micro-plan. Before now, this would have taken days. This saves us time and allows for more accurate targeting."

– Usman Abubakar Kpantu
State Immunization Officer for Niger State

"With Planfeld, a Daily Implementation Plan (DIP) that used to take a week now takes just 30 minutes. It gives us real-time visibility into resources, team movements, and vaccine allocation. This is a significant strategic shift"

– Dr. Abdullahi Musa Garba
Incident Manager at the Kaduna State Emergency Operation Center.

"We now have a clearer picture of security-compromised areas and can proactively plan for them. We even mapped out high-risk settlements during training. That's progress."



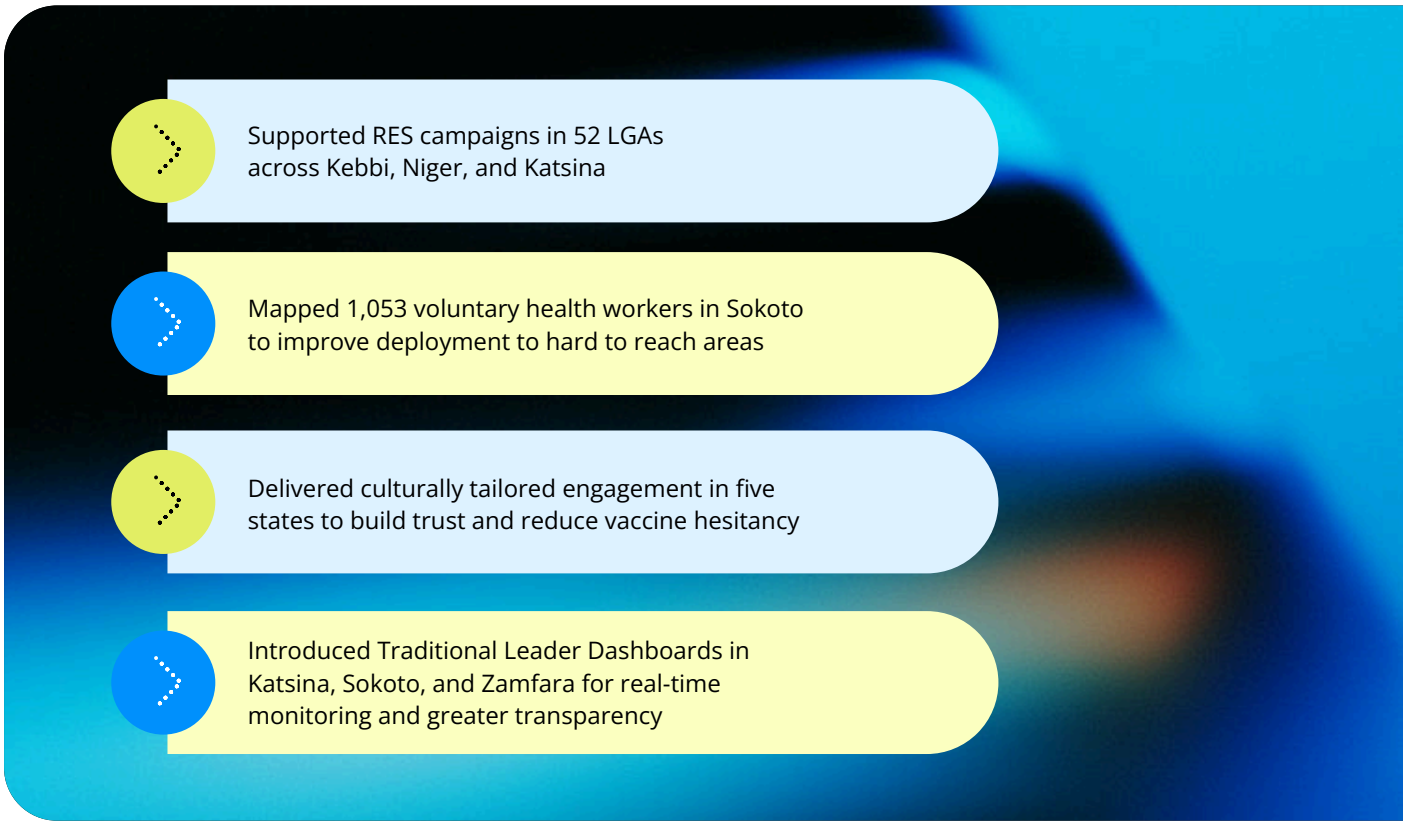
– Abubakar Kaoje
Kebbi State Immunization Officer

"Big thanks to eHealth for championing health digitization over the years and embracing new tech to upgrade our national plans. This aligns with our 2025 strategic shift, which we're already embracing."

– Dr. Audu Musa
Deputy Incident Manager National Emergency Operation Center, FCT

Enhanced Coordination, Community Engagement, and Data Visibility for Effective Outbreak Response

In H1 2025, the SNPOBR Project strengthened Nigeria's outbreak response capacity, enabling faster, more targeted polio interventions in high-risk and security-compromised areas. By combining rapid campaign support, community engagement, and real-time monitoring tools, the project boosted immunization reach and reinforced local leadership in public health. The key results are:



By improving accountability, empowering communities, and enhancing visibility of vaccination efforts, SNPOBR is laying a stronger foundation for sustained immunization coverage and rapid outbreak containment in Nigeria.

SIP Data

217 LGAs tracked

13,950 settlements reached

SIP Data

1,432 settlements missed

1,292 data collectors trained

Digitized Microplan

2,895 utilized the generated DIP

2,895 generated microplans were distributed

Malaria Diagnostic

27 blood smears tested

15 tested positive with Malaria

12 tested negative

8 laboratory staff trained on Gazelle device Usage

Genotype Project

669 Newborns screened for SCD

0.007 newborn tested positive

24 newborns' results managed by Gazelle

22 health workers trained on the use of Gazelle device

In H1 2025, eHA's leadership in health data systems, digital tools, and capacity development continued to deliver measurable impact across West Africa. Two complementary interventions: SARMAAN and REACH played pivotal roles in reducing under five mortality, improving data driven health programming, and ensuring the safe, evidence-based administration of Azithromycin at scale.

SARMAAN Project – Nigeria

- Expanded child health surveillance for children aged 0–59 months in six high-burden states.
- Command centers resolved field-level data issues in real time, achieving a 96% average resolution rate with Sokoto and Kebbi at 100%
- Trained 17,500+ frontline workers and 818 LGA coordinators, with 60% showing knowledge gains and an average 24% score improvement
- Training covered digital tools, ethics, and supervisory practices, strengthening oversight and field operations

REACH Project – Burkina Faso, Mali, Niger, Nigeria

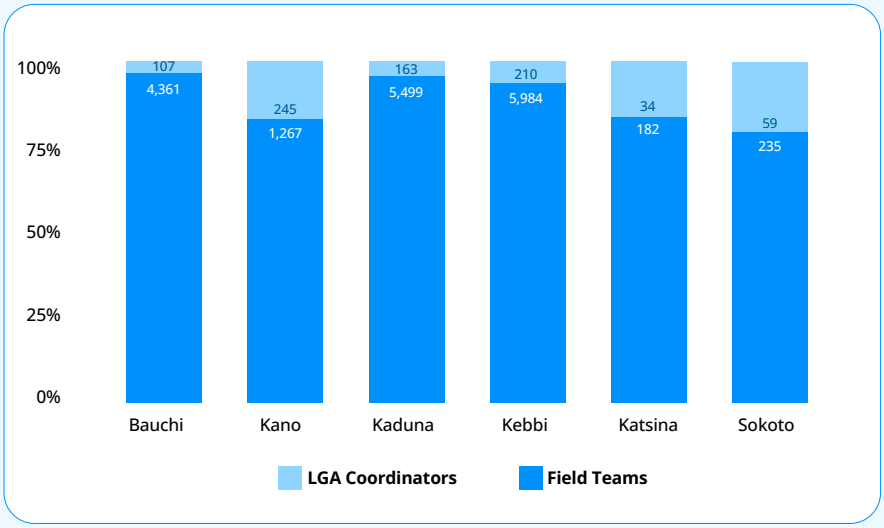
- Developed a comprehensive indicator set and draft regional dashboard for real-time campaign monitoring
- Mapped country-specific data flows and produced stakeholder guidance and a technical learning report
- Established the groundwork for a unified, cross-border health data ecosystem for antimicrobial stewardship

IMPACT:

Together, SARMAAN and REACH demonstrate how digital innovations, real time feedback loops, and targeted training can improve operational efficiency, ensure high quality health data, and accelerate progress toward reducing under-five mortality across West Africa.

18,346 field teams trained across 6 states for effective household data enumeration

H1 2025 Trained Participants



H1 2025 marked a period of data-driven implementation, technical excellence, and field-scale optimization in the SARMAAN project.

Resolution of technical data issues during SARMAAN field work across the implementation states

State	Issues Resolved	Issues Logged	% Issues Resolved	Period	Activity
Sokoto	179	179	100%	January 2025	AMR, Coverage
Kaduna	94	95	▲ 99.00%	April 2025	Census
Kano	42	53	▲ 79.00%	May 2025	AMR, Mortality
Kaduna	12	14	▲ 86.00%	May 2025	AMR, Mortality
Kebbi	4	4	▲ 100.00%	May 2025	AMR

KEY IMPACT:

Enhancing Cold Chain Resilience and Last-Mile Vaccine Delivery in Underserved Communities

In the first half of 2025, eHealth Africa advanced vaccine access in underserved communities through three connected initiatives: the Precommercial Indigo Deployment, CFD-50 and Cold Chain Data Advocacy, and Sokoto Vaccine Delivery & Distribution (VDD). Together, these projects strengthened Nigeria's immunization supply chain especially in remote and conflict-affected regions.

INDIGO DEPLOYMENT

61,000
Children vaccinated

98%

146 → **289**
2024 2025

160
frontline health workers trained

200%

52 → **160**
2024 2025

The Indigo Deployment vaccinated over 61,000 children and nearly doubled vaccine trips from 146 to 289 (a 98% jump). Training for frontline health workers surged from 52 in 2024 to 160 in 2025 (+200%), expanding from Borno to South Sudan and Sudan, showcasing regional leadership in cold chain innovation.

Cold Chain Data Advocacy improved real-time vaccine storage monitoring across **four Nigerian states,** later onboarding Adamawa and Taraba. Tools like Varo and PogoLT tracked temperature records in **over 100 facilities** at peak use. Data-driven maintenance led to targeted repairs such as spare parts for Bayelsa and 24 technical reports in Kano helping address functionality drops in Metafridge units.

These efforts are delivering stronger cold chain systems, faster repairs, and more reliable vaccine access where it's needed most. The Sokoto VDD project maintained its focus on ensuring the last-mile delivery of vaccines in a context marked by national and global vaccine shortages. From January to June 2025, the project successfully delivered vaccines and related commodities to health facilities across the state, despite significant upstream stockouts.

Sokoto VDD

820,559 children reached with immunization

4,092,496 Commodities delivered

654,091 Vaccines returned to the state cold store to prevent wastage

100% Successful Deliveries

The VDD project is closing last-mile gaps to ensure no child misses life-saving vaccines. By maintaining cold chain systems, deploying digital tools, and building cross-border skills, it safeguards timely, optimal vaccine delivery. Sustained collaboration among government, partners, and donors will be key to resolving supply challenges and expanding these gains nationwide and across the region.

KEY IMPACT:

Early detection and improved care for newborns with sickle cell disease, powered by integrated digital genotype screening technology.

The Genotype Screening Initiative project is focused on creating awareness on sickle cell disease and early detection of SCD in newborns. From January to June 2025, the Genotype Screening Initiative screened 669 newborns in Kano State, detecting 5 cases of sickle cell disease early and ensuring prompt counselling, caregiver notification, and linkage to follow-up care. To sustain impact, 22 health workers were trained on the Gazelle device, with 72% showing improved knowledge and confidence post-training, strengthening the integration of genotype screening into routine newborn care.

In H1 2025, the Genotype Screening Initiative advanced early detection of sickle cell disease (SCD) in newborns using integrated digital genotype screening technology. The project not only identified cases early but also ensured prompt follow-up and caregiver engagement, embedding SCD screening into routine newborn care in Kano State. The key results:

- 669 newborns screened in Kano State, with 5 SCD cases detected early
- Prompt counselling, caregiver notification, and linkage to follow-up care for all positive cases
- 22 health workers trained on the Gazelle device, with 72% showing improved knowledge and confidence post training

KEY IMPACT:

Enhancing Malaria Diagnosis Through AI-Assisted Microscopy: Advancing Accuracy and Efficiency

The malaria diagnostic project piloted the AI-powered Octopi device to speed up and improve the accuracy of malaria testing. Integrated into laboratory workflows after targeted staff training, the technology is set to ease workloads and strengthen diagnostic quality in high-burden settings. The key results:

- Installed at a pilot facility in April 2025
- 8 laboratory staff trained on operation and maintenance
- 27 blood smear samples analyzed between January and June 2025 (15 positive and 12 negative)
- Initiated structured data collection to inform wider scale-up

KEY IMPACT:

Digital Transformation of Blood Supply Chain Management Using BISKIT at AKTH

eHealth Africa is transforming Nigeria's blood supply chain through BISKIT, a custom-built health solution designed to provide timely data for informed decision-making. Currently piloted at Aminu Kano Teaching Hospital (AKTH), BISKIT streamlines key components of the blood management process, including donor registration, blood product tracking, crossmatching, and transfusion documentation, ultimately reducing reliance on manual records and enhancing operational efficiency. The key results are:

a. Utilization of BISKIT

- 4,906 blood donors registered, improving donor traceability and expanding the hospital's pool for emergency response.
- 348 blood transfusions documented through BISKIT, enabling a transparent trail from donor to recipient and reducing the risk of mismatches.
- 3 blood donation drives supported, with real-time inventory tracking enhancing planning and clinical response.

b. Capacity Building

- 8 healthcare workers trained on system use and digital inventory management.
- 22% average knowledge gain in post-training assessments, showing improved competence in using the application for routine operation

KEY IMPACT:

Kano Industrial Mapping: Building an Intelligent Economic Database for Strategic Growth

The initiative aims to support evidence-based policy-making, investment targeting, resource allocation, and stronger public-private engagement. The mapping exercise captures critical data on industry location, sector distribution, and registration status, among other indicators. Ultimately, the project seeks to establish a comprehensive industrial intelligence system that will drive economic planning and foster industrial growth.

a. Enumerator Capacity Strengthening

To ensure high-quality and standardized data collection, 60 enumerators were trained on digital tools, industrial classification, and ethical data collection practices. Post-training assessments showed that 78% of participants demonstrated improved knowledge, confirming the team's readiness for field deployment.

b. Industrial Data Compilation Across 44 LGAs

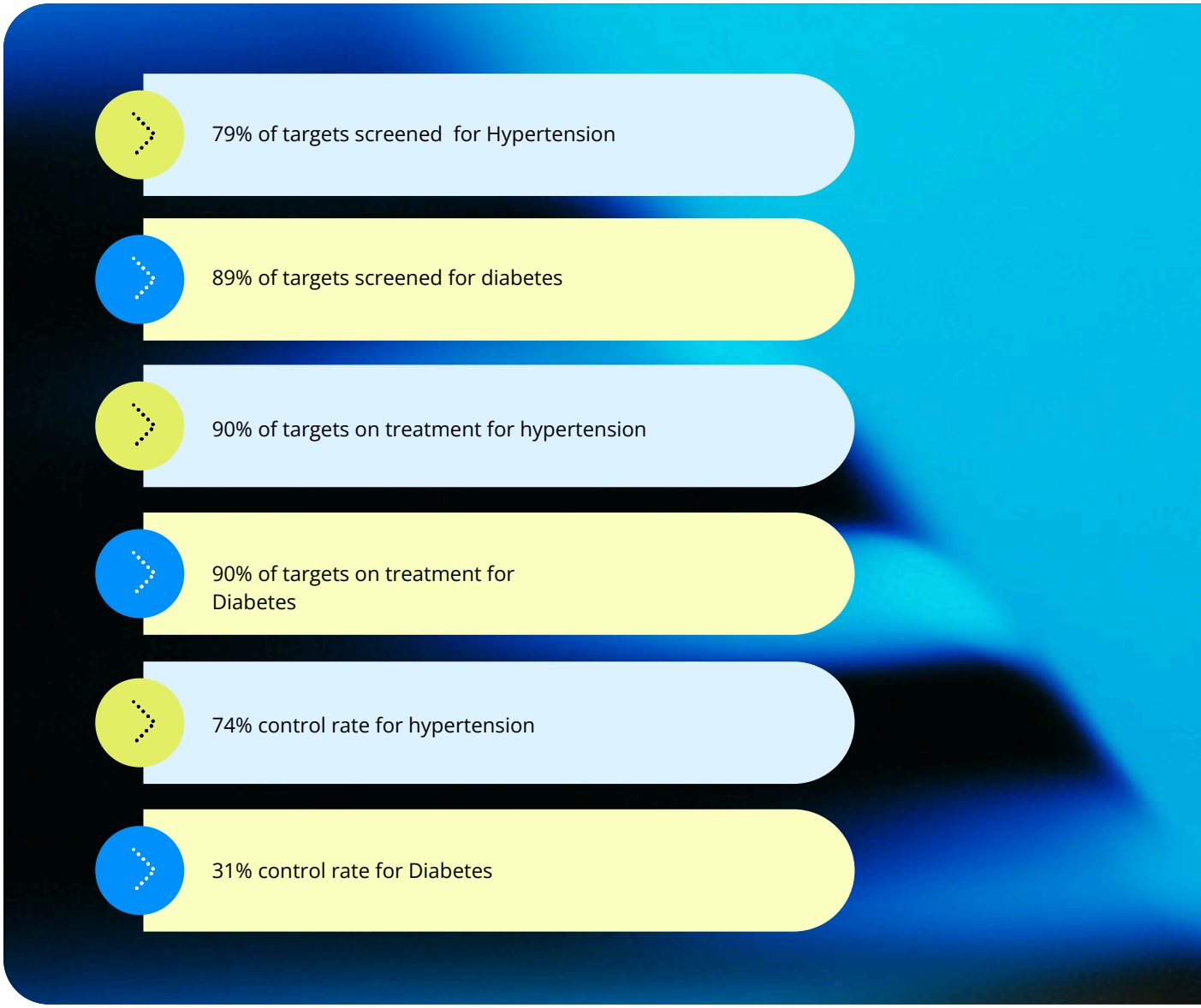
By June 2025, the project had successfully mapped 3,632 industrial data points across the state, offering unprecedented insight into Kano's economic landscape. Findings show that 60% of industries fall within the manufacturing sector, reinforcing Kano's position as a key manufacturing hub in Nigeria. This concentration presents opportunities for targeted infrastructure development, supply chain optimization, and sector-focused investment.

As the exercise progresses into the second half of 2025, the data will play a critical role in shaping policies, guiding spatial investment, promoting industrial clustering, and designing SME support mechanisms, laying the foundation for a more competitive and inclusive industrial economy in Kano State.

KEY IMPACT:

Strengthening Hypertension and Diabetes Care Through the DIIAN Project

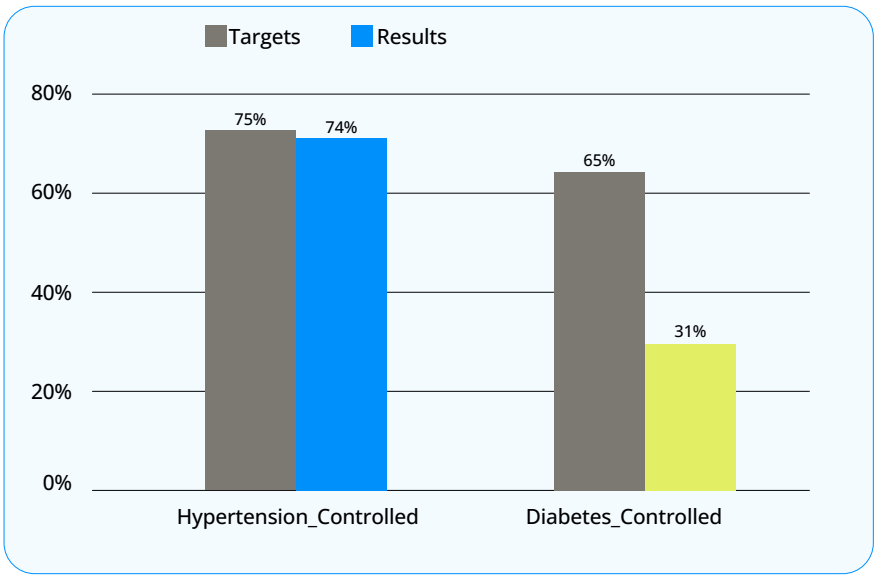
The Digitizing for Impact, Improving Access to Integrated Services for NCDs in Nigeria (DIIAN) Project is an internally funded initiative focused on contributing to efficient management of selected noncommunicable diseases - hypertension and diabetes.



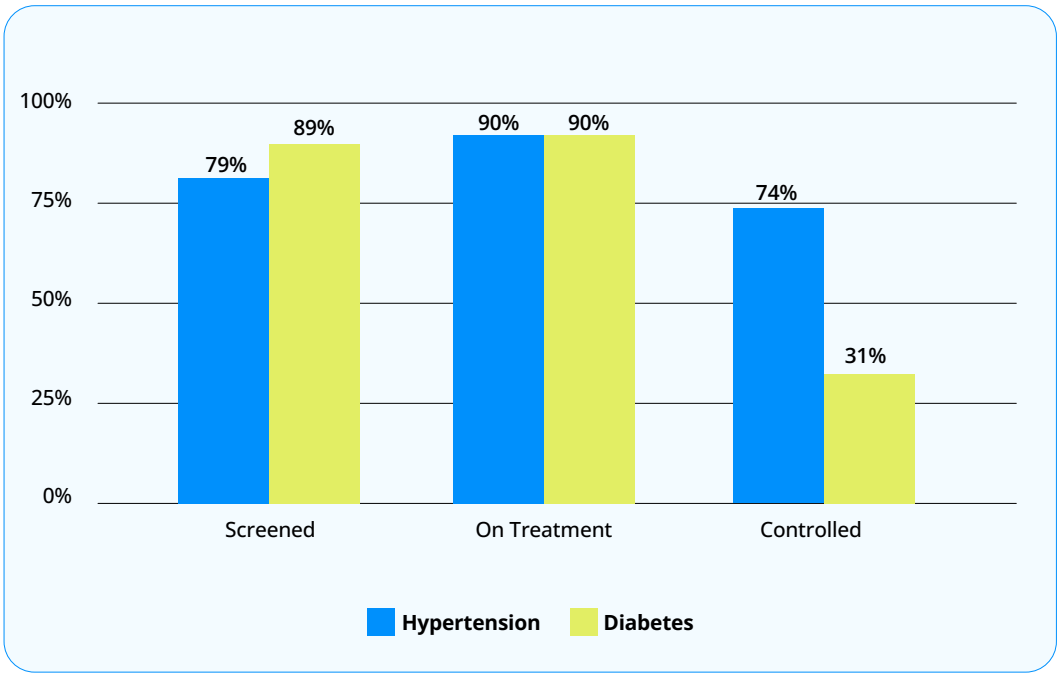
KEY IMPACT:

Controlled hypertension and diabetes rate among patients enrolled in the intervention program in Abuja and Kano , Nigeria.

Treatment Controlled Targets and Results at June 2025

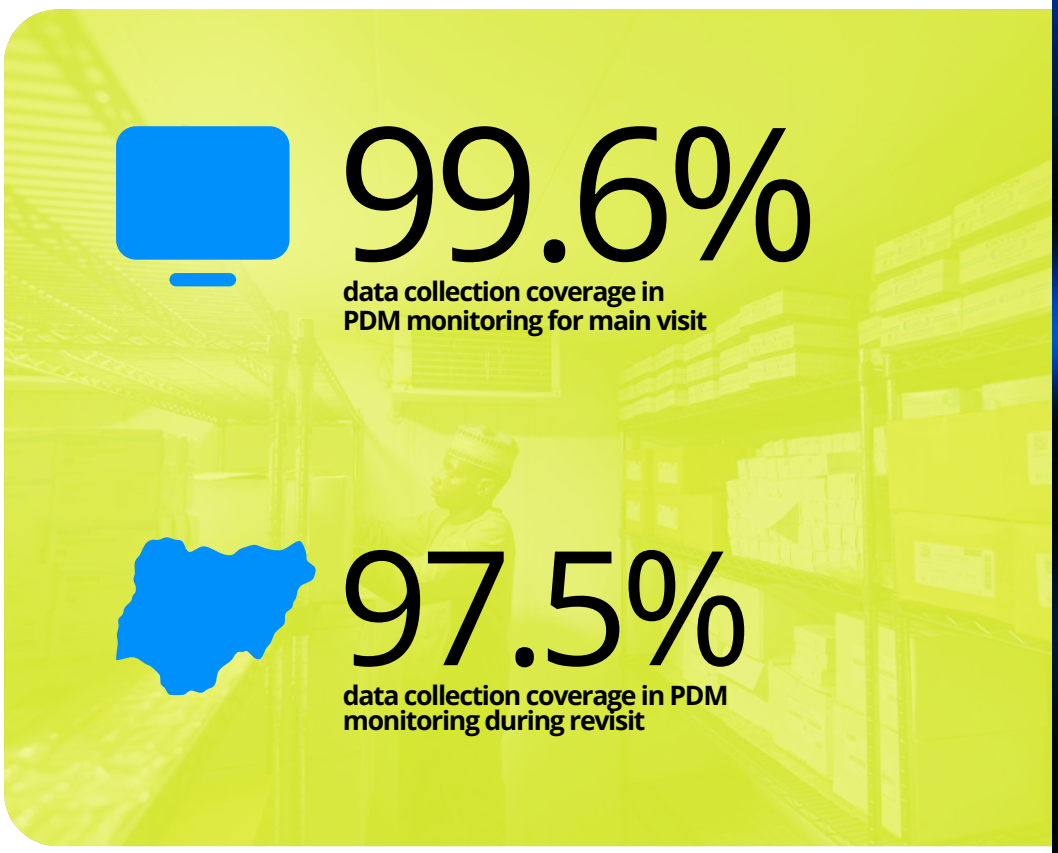


Hypertension and Diabetes Progress Against Targets - June 2025



KEY IMPACT:

Supporting Fight Against Malaria via Post Distribution Monitoring in Zamfara

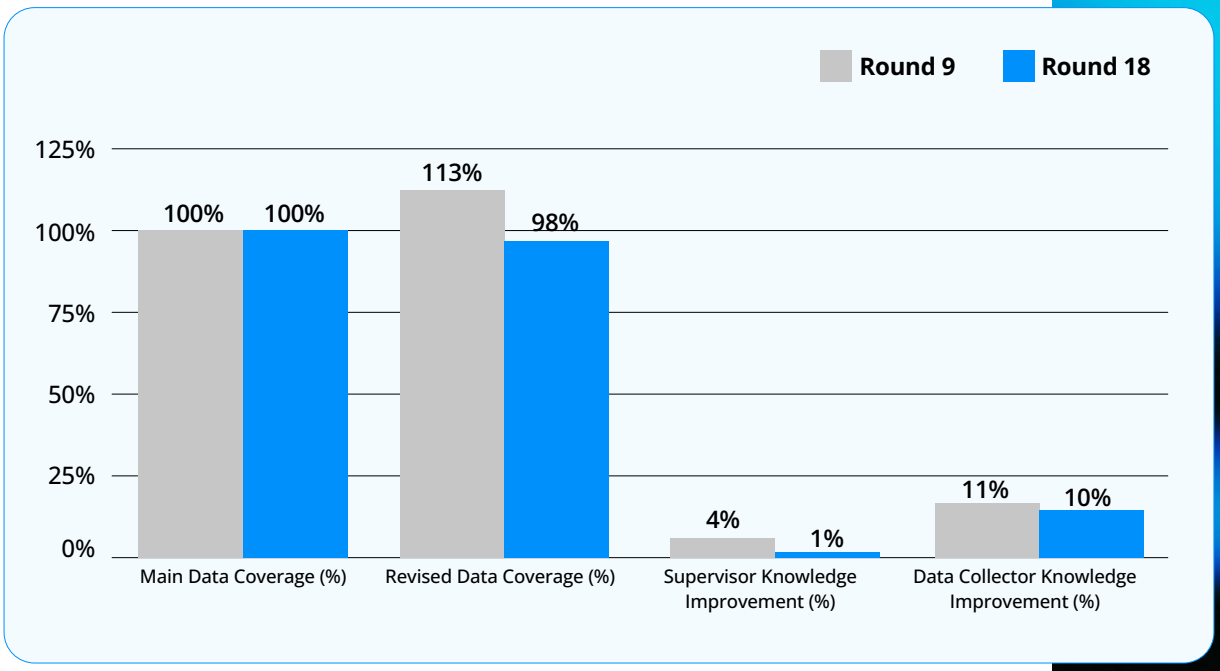


The post-distribution monitoring project in Zamfara State has taken intentional steps to ensure that insecticide-treated mosquito nets (ITNs) remain accessible, properly used, and in good condition. The project achieved outstanding coverage including, 99.6% during main visits and 97.5% during revisits, ensuring that households were reached and data were accurately collected.

Beyond monitoring, the project supports Social and Behaviour Change Communication (SBCC) in communities to promote the importance of mosquito net use as part of broader efforts to eradicate malaria.

The training of over 74 data collectors and 16 supervisors across two rounds demonstrates a strong investment in local capacity, and the continued engagement of these data collectors across rounds reflects retention and system continuity. Overall, the project remains aligned with established standards while strengthening local systems that support more transparent, high-quality health interventions.

Comparison of Key Indicators: Round 9 Vs 18 (Zamfara)



Climate Adaptation in Health Food Security and Nutrition (CAHFSN)

Climate Adaptation in Health, Food Security & Nutrition (CAHFSN)

At-a-Glance

Building Climate-Resilient Systems for Health and Nutrition

Key Outcomes (H1 2025)

Humanitarian Logistics

1,108 consignments managed, ensuring timely delivery to conflict-affected communities.

7,587 m^3 cargo handled with accurate tracking and accountability.

81% reduction in diesel use from renewable energy transition.

Food & Nutrition Accountability

98.4% average performance score across 4 states.

26 WFP food distributions and 134 nutrition activities monitored.

100% retailer evaluations completed; 14 warehouses monitored (117% of target).

Solarizing Primary Healthcare

28 PHCs fully solarized; 59% progress in Jigawa State rollout.

₦2.5M saved in fuel/ maintenance; 65% increase in patient attendance.

Improved cold chain reliability and 24/7 service delivery.

Increase in patient attendance by 65% across selected facilities post solarization

Climate Health Risk Tools

Climate Health Vulnerability Assessment Tool (CHAT) deployed to strengthen facility-level climate vulnerability assessments and preparedness for floods, droughts, and heatwaves.

Our Strategic Priorities for Partnership and Impact

To scale climate adaptation impact, we seek partners to:

1. Partner with us in scaling solar energy solutions for Primary Health Centres across Nigeria's 36 states, driving sustainable healthcare delivery
2. Strengthen climate-health analytics by scaling CHAT to more facilities nationwide.
3. Enhance food & nutrition monitoring systems to ensure transparency and reduce malnutrition risks
4. Partner with us in green logistics to further cut emissions and improve last-mile delivery in fragile settings.

CLIMATE ADAPTATION IN HEALTH FOOD SECURITY AND NUTRITION (CAHFSN)

eHealth Africa's **Climate Adaptation in Health, Food Security, and Nutrition (CAHFSN)** program tackles the growing challenges posed by climate change, aligning with our strategic priorities and Sustainable Development Goal (SDG) 13.2 on integrating climate action into national policies. This program focuses on building climate-resilient healthcare systems, strengthening food security, and improving nutrition.

FEATURED PROJECTS

Implementation of Common Storage Services in Dikwa and Ngala: Operating shared storage facilities in Borno State, eHA supports partner agencies by receiving, storing, managing, and releasing cargo. These hubs improve logistics efficiency and ensure timely delivery of health and nutrition commodities to communities in need.

Solarization of Primary Healthcare Facilities: The solarization project is designed to tackle the persistent challenge of power outages that disrupt essential healthcare delivery in Nigeria. The initiative aims to install photovoltaic (PV) solar systems in 238 Primary Healthcare (PHC) facilities across 12 states.

FEATURED PROJECTS

Climate Health Vulnerability Assessment Tool (CHAT)

Climate Health Vulnerability Assessment Tool (CHAT): The Climate Health Assessment Tool (CHAT) was developed by eHealth Africa as a proactive solution to strengthen climate risk assessment, emergency preparedness, and response mechanisms at the health facility level in Nigeria. Recognizing the increasing threats posed by climate-sensitive events such as floods, droughts, and heat waves, the CHAT tool empowers health facilities to systematically evaluate their vulnerabilities and gaps across critical service delivery areas.

WFP Monitoring & Accountability Project: The Monitoring and Accountability (M&A) project, aims to strengthen the accountability and transparency of food and nutrition interventions in 4 states. The primary objectives of the M&A Project is to supplement WFP's monitoring capacity across all operational areas in Nigeria, ensure neutrality and confidentiality in data collection, and generate high-quality data to guide WFP's decision-making and reporting processes.

KEY IMPACT:

Advancing Sustainable Humanitarian Logistics in Fragile settings

In the North East, warehouse operations ran seamlessly in H1 2025, ensuring accountability and accurate stock tracking for all partner consignments. These facilities continue to serve as lifelines for humanitarian and development partners, enabling timely, coordinated deliveries to conflict-affected communities.

- 1,108 consignments Managed
- 7,587 m^3 Cubic metric tonnes managed
- 81.4% decrease in diesel consumption due to shift to renewable energy source
- 12 fumigations conducted

KEY IMPACT:

Tracking Food and Nutrition Accountability Through the Monitoring and Accountability Project in Zamfara, Sokoto, Borno and Adamawa States

The M&A project achieved an average work order score of 98.4%, monitored 26 WFP food distributions in 3 states, and oversaw 134 nutrition activities (TSFP and FFP), reducing malnutrition risks. All 15 retailer evaluations were completed (100%), and 14 warehouses were monitored against a target of 12 (116.7%), ensuring proper storage and accountability. The project strengthened WFP's monitoring in 4 states, improving transparency and delivery to vulnerable populations.

Across Zamfara, Sokoto, Borno, and Adamawa States, the project achieved:

- 98.4% average work order score for performance and compliance.
- 26 WFP food distributions monitored in 3 states.
- 134 nutrition activities (TSFP and FFP) overseen to reduce malnutrition risks.
- 100% retailer evaluation completion (15/15) and 116.7% warehouse monitoring achievement (14 monitored vs. 12 target).

These results have strengthened WFP's monitoring capacity, improved transparency, and ensured timely delivery to Nigeria's most vulnerable populations.

Achieved
98.4%
work order performance score

Monitored 26 WFP food distribution activities

Overseeing 134 implementations of Targeted Supplementary Feeding Program (TSFP)

Conducted 15 retailer evaluations and achieving a 100% completion rate

Powering Health: Impact of the UNICEF-Funded Solarization Project in Nigeria

By June 2025, the project had:

- Trained 75 technicians and engineers in solar system operation and maintenance
- Fully solarized 28 PHC facilities in Kano State and reached 59% completion in Jigawa State.

These upgrades are enhancing cold chain reliability, expanding diagnostic capabilities, and enabling round-the-clock service delivery in primary healthcare facilities.

KEY RESULTS FOR H1

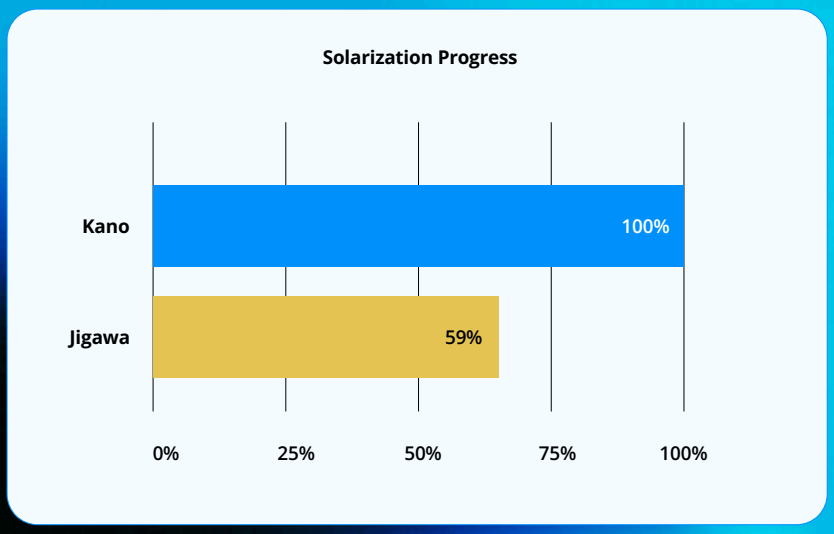
₦2.5m Saved in fuel and maintenance costs

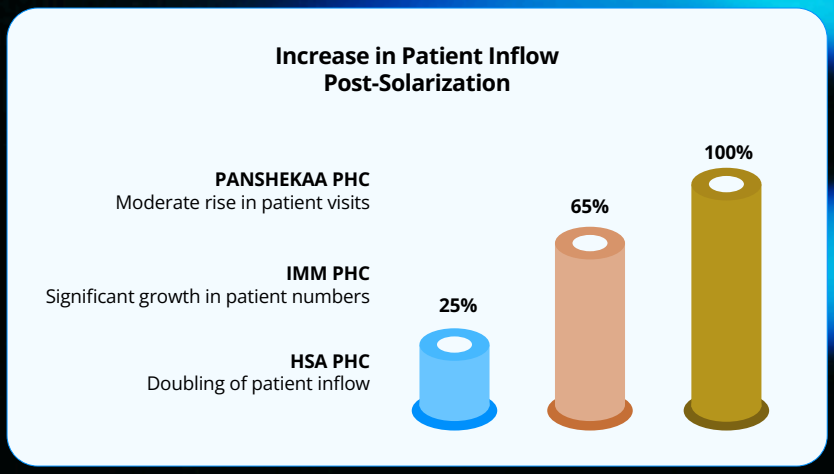
Increased in Patient Attendance by 65%

24/7 round the clock healthcare

Improved cold chain capacity

Faster and Efficient Diagnostic services


Solarization Progress
Kano
100%
Jigawa
59%
0%
25%
50%
75%
100%


Increase in Patient Inflow
Post-Solarization
PANSHEKAA PHC
Moderate rise in patient visits
IMM PHC
Significant growth in patient numbers
HSA PHC
Doubling of patient inflow
25%
65%
100%

Voices from the Field

Improved access to a consistent power supply enhances the delivery of essential healthcare services, positioning the states to provide high-quality routine immunization and ultimately strengthening overall health outcomes. Below are impactful excerpts from the facility stakeholders:

Increased patient inflow for essential care

a. **Bashir Garba Lima** — The IC of Panshekara PHC : "Before the solar installation at Panshekara PHC, we had a significant power problem. Most of the time, when you came to the facility, there was no power supply. Power might come on for an hour, sometimes two, but often we'd go two to three days without any power."

b. **Alawiya Isa Abdullahi** — Nurse at Panshekara PHC : "For some reason, more women go into labour at night than during the day. This was always a cause for worry, as we found it difficult to carry out operations successfully in the dark. It got so bad that there were times we had to use our phone flashlights to work. But now, with the solar installation, all these issues have become a thing of the past."

c. **Ibrahim Muhammad Bello** – Vice IC, Panshekara PHC : "In the pharmacy, there are some injections and some vaccines that we are supposed to keep under cool temperature, like TD, that is tetanus/diphtheria, but before we did not keep them. Why? Because there is no source of power to use for our refrigerator. But now, we keep any kind of vaccine or injection or anything that needs coolness."

d. **Nuraddeen Yusuf Ladan** – Vice IC, Daurawa PHC : "We had to store our vaccines at our associated state hospital, in their fridge. This often meant back-and-forth trips every time we needed to retrieve our stored vaccines, with all the associated stresses involved. So, before the installation of the solar equipment, we had to rely on others, but now others rely on us."

e. **Maimuna Muhammad Yusuf** – Vice IC, Kundila PHC : "It is going to improve the capacity of PHCs across Nigeria. The thing is, many people do not trust PHCs capability to treat then that is why they run to private hospitals. But imagine if projects like this keep being implemented in facilities like ours. It would help change the narrative because to be honest, there is no service a private hospital provides that we do not provide here. We, just like so many other facilities, just need to be properly equipped for it."

f. **Maryam Yusuf Suleiman** – Nurse Midwife, Kundila PHC : "In my two years working here, I never saw electricity from the national grid, not even once. We only had a small solar system for the vaccine fridge, but it was weak and sometimes lost charge, which caused vaccines or drugs to spoil."

100% completion rate of solarized facilities in Kano

59% completion status for solarized facilities in Zamfara

Facility attendance for healthcare increased by 65% across selected solarized facilities in Kano state.

Strengthening Climate Resilience in Health Systems

— In H1 2025, the Climate Health Vulnerability Assessment Tool (CHAT) achieved major milestones in strengthening climate resilience within health systems. Integrated into DHIS2, CHAT now feeds climate risk data directly into national health information flows, improving decision-making from facility to policy level. The tool's scope expanded to include heat waves and droughts, enabling more comprehensive hazard assessments.

— 30 enumerators were trained across three states, and 30 health facilities in Borno, Kano, and Niger were assessed revealing 100% high vulnerability to floods, heat waves, and droughts. These findings provide evidence-based insights for tailored preparedness plans, aligning with national and global climate adaptation goals. CHAT is shaping a new standard for climate-health planning in Nigeria, ensuring targeted interventions to protect vulnerable populations from worsening climate impacts.

In H1 2025, CHAT achieved several firsts:

- Integration into DHIS2, feeding climate risk data into national health information flows.
- Expanded hazard coverage to heat waves and droughts.
- 30 enumerators trained and 30 health facilities assessed in Borno, Kano, and Niger, all found 100% highly vulnerable to floods, heat waves, and droughts.

These insights from the CHAT tool are shaping evidence-based preparedness plans and setting a new national standard for climate-health planning in Nigeria.

30 enumerators were trained across three states

30 health facilities, evaluating their vulnerability to floods, heat waves, and drought across 3 states- Borno, Kano and Niger states

30 assessed facilities are highly vulnerable across all hazard area

BUILDING INFLUENCE THROUGH THOUGHT LEADERSHIP & GLOBAL ENGAGEMENT EVENTS

In the first half of 2025, eHealth Africa strengthened its visibility and influence across global and regional platforms. These engagements positioned eHA as a trusted African voice on digital health, adolescent health, climate-health resilience, and sustainable investment, themes directly aligned with our objectives and priorities.

Sustainability & Investment Dialogues

Sankalp Africa Summit.

Participated in discussions on sustainable health business models, underscoring eHA's approach to blending technology, investment, and partnerships. These conversations seeded future collaborations on healthcare financing and innovation scale-up.

Innovation & Digital Health

Women in Technology & Engineering Summit.

eHA moderated the flagship panel on Innovation & Inclusion, showcasing our thought leadership on digital equity and inclusive innovation.

Health-Tech UHC Stakeholder Workshop.

Delivered remarks emphasizing alignment of digital health solutions with national strategies, a message well-received by NPHCDA, SCIDaR, and partners.

Africa Health Agenda International Conference (AHAIC).

Engaged in the launch of the African Health Research, Innovation & Development Alliance (AHRIDA), strengthening our role in Africa-led research and innovation ecosystems.

Africa Soft Power Summit.

Co-hosted a high-impact side event with BellaNaija on, Edutainment: A Creative Solution for Social Impact, spotlighting how storytelling and digital tools can drive health behavior change at scale.

Global Policy & Gender Equity

CSW69, New York.

eHA's delegation engaged in high-level dialogues on adolescent health and gender equity, including the Bridging the Gap: From Beijing to 2030 – Ending Child Marriage event. These platforms amplified eHA's role as a key partner in adolescent health programming across Nigeria and Africa.

Adolescent Health Partnerships.

We advanced conversations with PSI, UNFPA, and Population Council, reinforcing eHA's capacity to scale interventions such as GBV call centers and digital skills training.

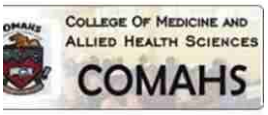
Climate-Health Positioning.

Across multiple platforms, eHA highlighted CHAT (Climate and Health Adaptation Tool) as a leading African innovation, strengthening our credibility ahead of donor and NGO funding calls in this space.

eHealth Africa Recertified as one of the Best Places to Work in 2025

We are proud to share that eHealth Africa has been recertified for the 4th consecutive year, as one of the *Best Places to Work!* This milestone is more than an accolade; it's a testament to our unwavering commitment to fostering a purpose-driven workplace where passion meets impact. This culture of excellence continues to power our efforts, especially in advancing adolescent and girl child health.

Our Partners



eHealth AFRICA

NIGERIA

4-6 Independence Road,
Kano State.

28 Osun Crescent,
Maitama, FCT, Abuja.

U.S.A

1200 G Street NW, Suite 800,
Washington, DC 20005,
USA.

GERMANY

Prenzlauer Allee 186,
10405 Berlin

www.ehealthafrica.org

Scan QR codes to access

eHealth Africa's Profile

Follow us on our social media