



PHASA



FACULTY OF
PUBLIC HEALTH

Africa and Global Public Health Security & Primary Health Care Communiqué

ADVANCING AFRICA AND GLOBAL PUBLIC HEALTH SECURITY AND PRIMARY HEALTH CARE AGENDA:

Investing Better and Investing More in Health Equity, Solidarity, and Sovereignty
through aligned, coordinated Health Services and Systems

Building Africa and Global Public Health and Primary Health Care Coalition Seventy-Ninth World Health Assembly (WHA79)

Geneva, Switzerland | 18-23 May 2026

We, the Ministers of Health, Senior Health Officials, Heads of Delegation, representatives of WHO Member States, regional health organizations, public health, professional associations, colleges and faculty, academia, faith-based and civil society organizations, health development and financing partners, philanthropy, and private sector stakeholders, gathered during the Seventy-Ninth World Health Assembly (WHA79), May 2026 in Geneva, Switzerland, **reaffirm:**

That health, well-being, through positive lifestyles, throughout individual and collective families, communities, peoples, and populations' life course, are a **fundamental human right** and a **strategic investment in human development, social harmony and peace**, economic productivity, resilience, and sustainable development;

That National Health Service, Systems and Institutions based on strong foundation of prioritizing Public Health (PPH); Protection, Promotion and Prevention systems and vital Primary Health Care (PHC), supported through comprehensive Health Systems Strengthening (HSS), remain the most effective, efficient, equitable, affordable, and sustainable pathways toward achieving and sustaining Universal Health Coverage (UHC), Sustainable Development Goal 3 (SDG3), public health security, and resilient and sovereign societies;

The COVID-19 pandemic and recurring epidemics and emergencies old and new emerging infectious diseases, including malaria, tuberculosis, HIV, cholera, mpox, measles, viral haemorrhagic fevers, environment and climate-related health risk and threats, lack of access to health products, and the escalating burden of Non-Communicable Diseases and mental health conditions and injuries, have exposed persistent vulnerabilities, inequities, and underinvestment in national, regional and international global health services and systems;

That persistent underfunding of Public Health protection, promotion, prevention, and PHC services, combined with essential public health and primary health care health professional competency-based education and training, leadership and management development, empowerment with, equitable distribution and retention, inequitable access to essential and emergency health services and products, debt pressures, fiscal austerity, and declining domestic health investment and international health development assistance for health, threatens progress toward UHC and SDG3 targets by 2030 and beyond.

We therefore jointly commit to:

1. Prioritize Public Health and Primary Health Care

Recognize Public Health (Protection, Promotion, and Prevention) and community and people-centred Primary Health Care as the foundation of resilient national health services and systems and essential pillars for achieving equitable universal health service delivery by all for all.

2. Health Systems Strengthening

Accelerate integrated, decentralized District and National Health Systems Strengthening based on the Public Health and Primary Health Care and Health Systems Orientation Framework through investment in:

- Universal health service delivery based on community-based District Health Systems
- Leadership, Governance, and Management
- Essential Public Health and Primary Health Care workforce competency education, motivation, and retention;
- Reproductive, Maternal, Newborn, Under-five children, school children, youth, and seniors' services
- Prevention and Control of Communicable and Non- Communicable Disease and Mental Illness, and Injury
- Essential and Emergency Health Products supply chain: vaccines, diagnostics, medicines, public health insecticides, and appropriate health technologies;
- Public health intelligence, surveillance, information, laboratories, and epidemic-emergency preparedness and rapid response;
- Digital health systems, research, innovation, and data governance;
- Environmental and Occupational Health and Climate Mitigation

3. Increase and Sustain National Health Financing

Call for:

- Better and increased domestic health financing through national health tax, sin taxes, and National Health Insurance, prioritizing Public Health and PHC;
- Fulfilment of existing regional and global financing commitments, including the 15% annual health investment African Union Abuja Declaration and WHO recommended 5% of GDP for Health;
- Debt swaps for health and innovative and blended health financing approaches aligned with national priorities;
- Expanding accountable south-south and south-north transparent collaboration and cooperation for institutional twinning and two-way exchange of knowledge, skills, supported by health development agencies, philanthropy, and the private sector;
- Protection of national and international health budgets during periods of economic stress and fiscal adjustment.

4. Advance Universal Health Equity and Solidarity

Commit to reducing inequities within and between countries by prioritizing underserved and vulnerable populations, rural and remote communities, women, mothers, under-five children, school children, youth, older persons, indigenous ethnic groups, refugees, and displaced populations, and vulnerable groups through equitable access to essential and emergency quality health services for all.

5. Promote National Health Security and Sovereignty

Strengthen national and regional capacity to forecast, prevent, prepare for, detect, and respond to epidemics, pandemics, humanitarian crises, and environment and climate-related health emergencies through coordinated Public Health and PHC systems.

6. Strengthen Health Professional Workforce Leadership and Capacity

Support competency-based education, lifelong professional development, south-south and south-north collaboration, institutional twinning, and strengthened leadership, governance, and management capacity for Public Health and PHC professionals.

7. Build an Africa and Global Coalition for Public Health and PHC

Promote communities, people, and population universal health service delivery. oriented stronger multilateral and bilateral collaboration and cooperation among all WHO member states, supported by three levels of the WHO, regional health organizations, health professional associations, colleges and faculty, academia, faith-based organizations, civil society, and financing institutions with urgency and emergency, to accelerate implementation of UHC and SDG3 by 2030.

8. Reposition Health as a Strategic Development Investment

Affirm that investment in Public Health and PHC is not a cost, but a high-return investment that strengthens economies, social cohesion, human capital, productivity, stability, and national resilience.

We further call upon:

- All of Society and Governments
- Health Professional councils, colleges, and associations
- Academic and research institutions;
- Civil Society and faith-based health and development organisation
- Regional health and socio-economic development organizations
- All levels of WHO, UNICEF, UNFPA, and other health-related UN agencies at all three levels;
- Multilateral and bilateral health and development financing institutions;
- Philanthropic and Private Health Sector organizations;

to align health policies, technical and systems support, and leadership governance and accountability mechanisms around **a renewed international and global movement and campaign for prioritization of Public Health and Primary Health Care revitalization with Health Systems Strengthening.**

Operational Follow-Up

We support the development of:

An Africa and Global Public Health and PHC Coalition;

- A Universal Health Service Delivery Technical and Operational Systems Platform;
- Health observatories for real-time joint monitoring and accountability tracking and action on the path for and progress for UHC and SDG 3 with PH, PHC, and HSS implementation of outcomes and impact with result-based financing;
- Inter-country and cross-border south-south and south-north two-way exchange learning, appropriate technology transfer, innovation, with institutional twinning programs;

Conclusion

We reaffirm that the future of national, regional, and global public health security, equity, and sustainable development depends on politically supported, professionally led, adequately financed, community-centred, and resilient Public Health and Primary Health Care systems strengthened through integrated Health Systems Strengthening approaches.

We therefore commit ourselves to collective action, solidarity, accountability, and sustained investment to ensure health and well-being for all people, in all countries, leaving no one behind.

Adopted at the Seventy-Ninth World Health Assembly (WHA79), Geneva, Switzerland, May 2026.

NAMES AND SIGNATURE WHO MEMBER COUNTRIES AND ORGANIZATIONS