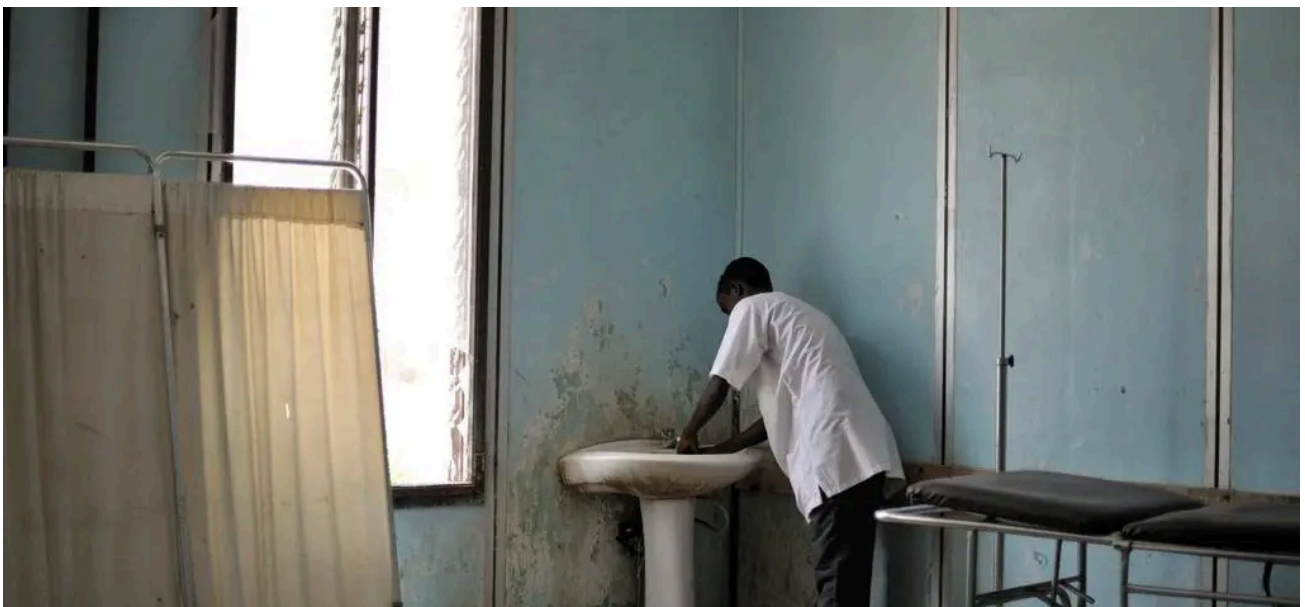


Health

Health money for Africa now comes through one-to-one deals, and patients' data is part of the price.

IN BRIEF

- At the UN in September, governments could not agree a plan to prepare for the next pandemic, while the worst Ebola outbreak in the history of the Democratic Republic of the Congo was spreading.
- For Africa, the bigger change is how health money now arrives: the United States has replaced much of its funding for shared global programmes with separate deals with each country, and those deals ask for access to health data and for governments to pay a rising share.
- African governments should agree one common set of rules for these deals, and use their own budgets to hire the nearly one million trained health workers who have no job.



A nurse washes his hands in an emergency ward in Somalia.

Photo: AMISOM Public Information, [CC0 1.0](#), via [source page](#).

7,890

Confirmed Ebola cases in the DRC by 23 September 2026, with 3,799 deaths

[Source: who.int](https://www.who.int)

\$3bn

Raised for Ebola at a meeting led by the United States; African governments gave \$110m

[Source: africacdc.org](https://www.africacdc.org)

24

African countries with a US health deal, worth about \$23bn over five years

[Source: kff.org](https://www.kff.org)

943,000

Trained health workers in Africa with no job in 2024

[Source: afro.who.int](https://www.afro.who.int)

5.85m

Health workers Africa will be short of by 2030

[Source: afro.who.int](https://www.afro.who.int)

4.3%

Share of Nigeria's government budget spent on health in 2023, against a promised 15%

[Source: data.worldbank.org](https://data.worldbank.org)

01

HOW SURE WE ARE: OBSERVED

What happened at the UN

Every September, heads of state and ministers meet in New York for the opening of the UN General Assembly. This year one meeting was meant to agree a political declaration on preparing for pandemics. On 25 September it failed. The United States said it could not support the text, and Italy and the European Union also objected. African governments, speaking together through Burundi, supported it. The text now goes to a vote before the end of the year.

Two days earlier, the United States brought a group of countries together outside the World Health Organization. That meeting raised about \$3 billion to fight Ebola in the Democratic Republic of the Congo (DRC). African governments together gave \$110 million, less than 4% of the total. Africa CDC asked that every dollar be tracked from promise to payment.

A group set up by Ghana's President John Mahama, called the Accra Reset, also published a plan. It proposes merging several global health funds and handing their work to African governments over five to ten years. It records that outside money for health in Africa fell by almost 70% between 2021 and 2025.

Sources for this section (3)

- [Health Policy Watch: the pandemic declaration heads to a December vote](#)
- [Africa CDC: \\$2.997bn raised for the Ebola response](#)
- [Health Policy Watch: the Accra Reset's plan](#)

02

HOW SURE WE ARE: OBSERVED

What is really going on

The Ebola outbreak in the DRC is the largest the country has ever had. By 23 September, WHO had confirmed 7,890 cases and 3,799 deaths, most of them in Ituri province in the east. This type of Ebola, called Bundibugyo, has no approved vaccine or treatment. Trials of possible vaccines began in August and September.

At the same time, the money that paid for much of Africa's health care is shrinking. Global aid for health fell to about \$38 billion in 2025, less than half its level in 2021. The Global Fund raised \$12.6 billion against a target of \$18 billion. Gavi lost its US pledge and cut a third of its staff.

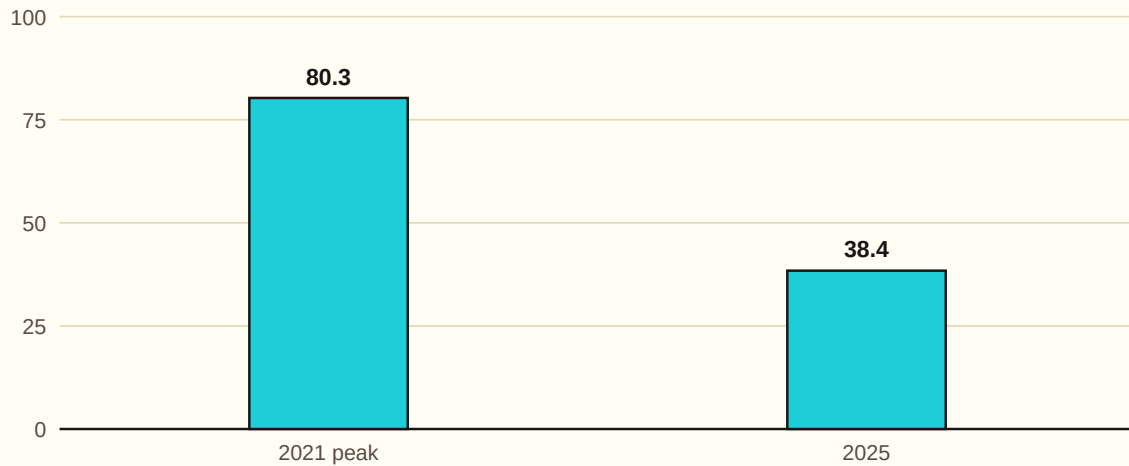
The United States now sends much of its health money through separate deals with individual countries, which it calls "America First" health agreements. Thirty-five countries have signed, 24 of them in Africa. Each government must pay a share of the cost, on average 39%, and that share rises each year. Several deals also give US agencies access to patient records, disease tracking systems and samples of viruses.

Africa is short of health workers, yet many trained ones cannot find a job. WHO expects the region to be short of 5.85 million health workers by 2030. It also counts 943,000 trained nurses, midwives and doctors with no job in 2024. Many leave for Europe and North America, where nurses earn about seven times more. Hiring all of them would cost about \$7.8 billion a year.

In 2001, African governments promised in Abuja to spend 15% of their budgets on health. Few have done so. In 2023, South Africa spent 16.9% and Namibia 15%, while Nigeria spent 4.3% and the DRC 4%.

Global health aid has more than halved from its 2021 peak

Development assistance for health, US\$ billion

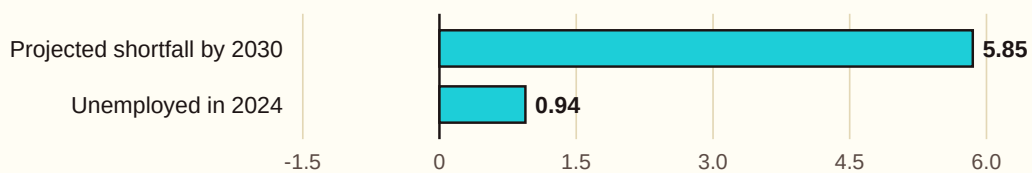


The 2025 figure is the lowest since 2009.

Source: [IHME estimates, reported by Euronews](#)

Africa is short of health workers while nearly a million trained workers have no job

Millions of health workers



Source: [WHO Africa, State of the Health Workforce in Africa 2026](#)

Sources for this section (6)

- [WHO: Disease Outbreak News, 23 September 2026](#)
- [Global Fund: eighth replenishment result](#)
- [Health Policy Watch: Gavi cuts staff](#)
- [KFF: tracker of US health agreements](#)
- [WHO Africa: State of the Health Workforce in Africa 2026](#)
- [World Bank: government health spending as a share of all government spending](#)

Country by country

Kenya signed its US deal in December 2025. The deal totals \$2.48 billion, and Kenya pays \$850 million of that. A Kenyan court suspended the deal because of the way it shares health data. A higher court later let it continue, and its final ruling is due on 30 October. Kenyan law already says health data must be kept in Kenya.

Other governments have pushed back. Zimbabwe ended talks in February 2026 and Ghana turned down a deal in April. Zambia's negotiators objected to sharing data for 25 years in return for five years of money. On 25 September, Zambia said the United States had agreed to replace those terms.

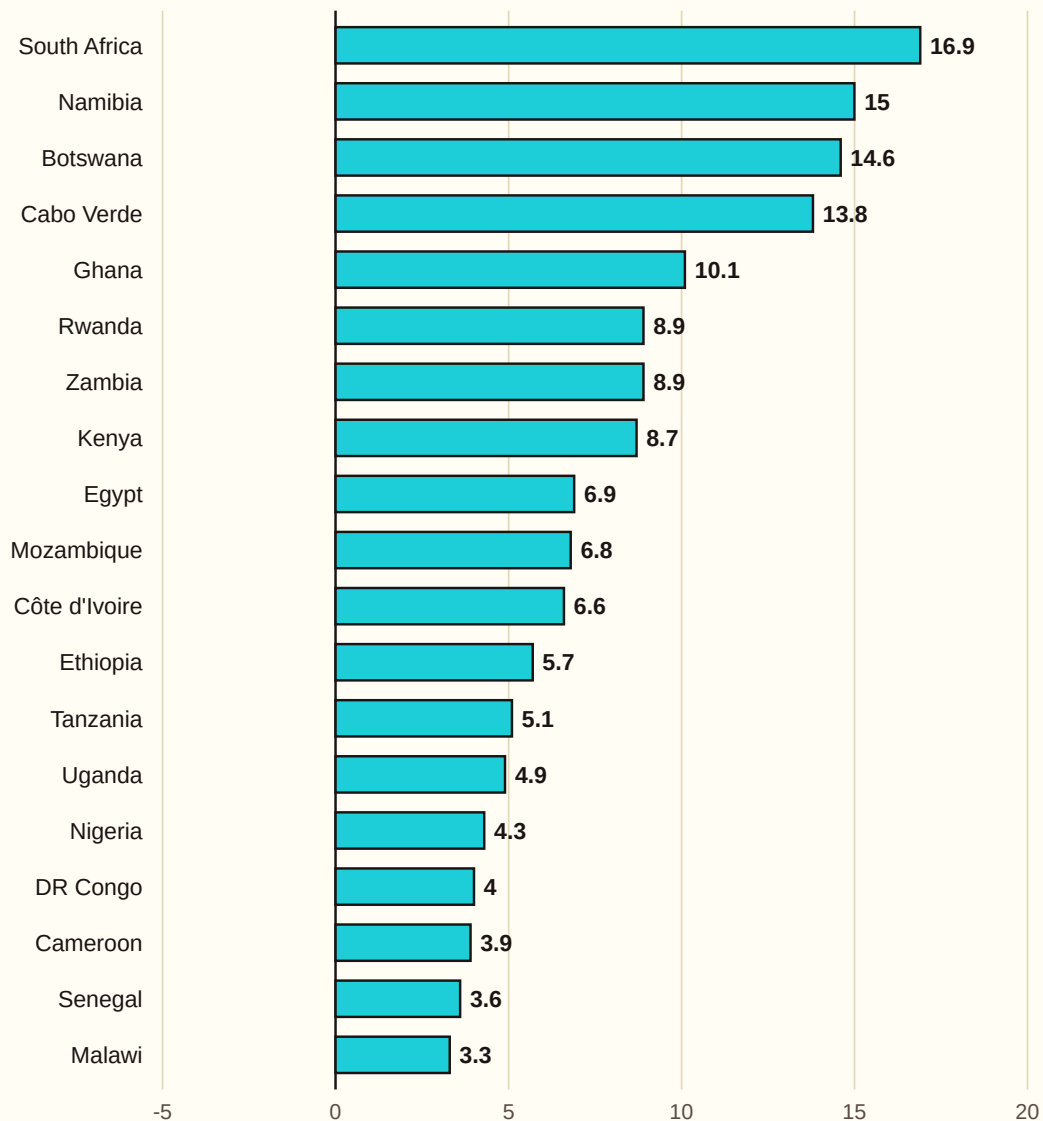
Nigeria has the largest deal, \$5.05 billion, and has promised to pay 59% of it. That is a big promise from a government that spent 4.3% of its budget on health in 2023. Mozambique pays under 4% of its deal and Malawi under 7%, so both will struggle as US money falls away.

The DRC is fighting Ebola with a health budget that took 4% of government spending in 2023. Its US deal asks it to pay a quarter of \$1.2 billion. Neighbouring Uganda has already ended its own outbreak.

Africa makes about 0.1% of the world's vaccines, and the African Union wants Africa to make 60% of what it needs by 2040. Some firms are building that capacity, including Biovac in South Africa and EVA Pharma in Egypt. The African Medicines Agency, a new continental regulator based in Rwanda, started work in October 2025.

Few African governments give health the 15% of spending promised at Abuja

Domestic government health spending, % of government spending, 2023

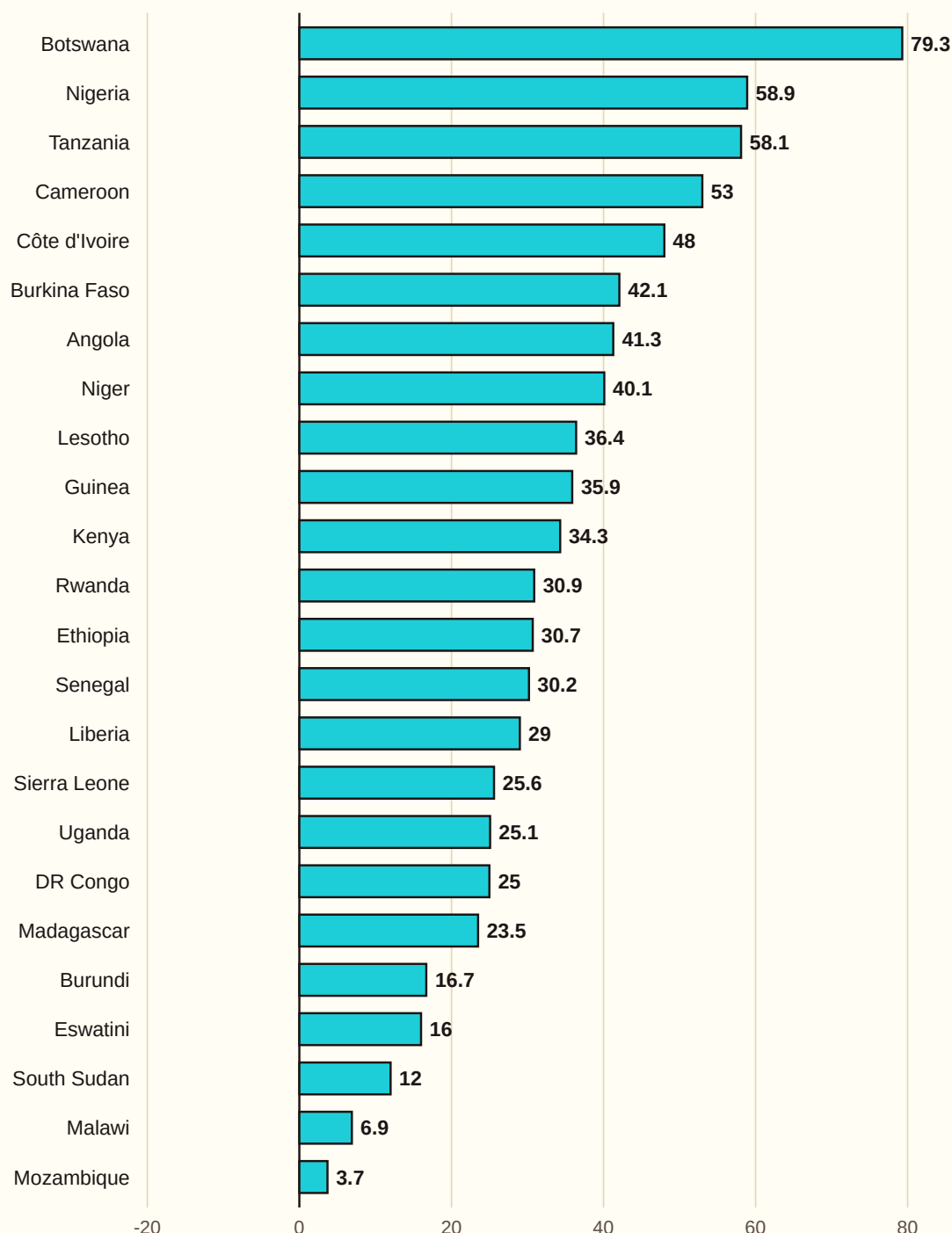


Abuja Declaration target: 15%. Namibia's value is 14.99%. Domestic general government health expenditure as a share of general government expenditure; excludes external aid channelled through government.

Source: [World Bank WDI from WHO Global Health Expenditure Database, indicator SH.XPD.GHED.GE.ZS \(last updated 13 July 2026\)](#)

African countries pay between 4% and 79% of their US health agreements

Country co-investment as % of total agreement value, 2026-2030



All 24 African signatories. Agreements run five years (2026-2030) except Botswana and South Sudan (three years). Largest totals: Nigeria \$5.05bn, Tanzania \$3.1bn, Kenya \$2.48bn, Uganda \$2.30bn, Mozambique \$1.90bn. Overall co-investment share across all 35 countries: 39%.

Source: [KFF tracker of America First bilateral global health MOUs, Table 1 data \(as of 11 September 2026\)](#)

Sources for this section (7)

- [Capital FM: Kenya's Court of Appeal on the health deal](#)
- [Carnegie Endowment: Kenya's data protection and the US health strategy](#)
- [Lawfare: how African data laws shape the US deals](#)
- [Semafor: Zambia and the US health data dispute](#)
- [KFF: amounts and government shares by country](#)
- [Gavi: vaccine manufacturing in Africa](#)
- [Health Policy Watch: the African Medicines Agency](#)

04

HOW SURE WE ARE: STRONG INFERENCE

Why this matters

When health money comes through one-to-one deals, each government negotiates alone. A small country has little power to refuse data terms or payment schedules. If 24 African governments agreed the same basic rules, they would be much harder to ignore.

Governments are also negotiating rules on sharing virus samples and data at WHO, with a decision due in May 2027. Until then, the one-to-one deals are setting those rules in practice, one country at a time.

Money for pandemic preparedness mostly goes to disease tracking, testing and research, which protect the whole world from diseases that cross borders. What catches an outbreak early is a trained nurse in a staffed rural clinic, and that gets the least. The world raised \$3 billion for Ebola in a few weeks. Nobody has called a meeting to put Africa's 943,000 idle health workers into jobs.

Sources for this section (1)

- [WHO: talks on sharing pathogens and benefits extended to May 2027](#)

05

HOW SURE WE ARE: CONTESTED

The case against this view

For twenty years African governments have asked to own their health programmes, and paying a rising share is one way to do that. Nigeria and Tanzania chose to pay more than half of their deals, which may protect their own health spending in future budgets. The Ebola money came quickly because one country with resources acted, and a slower UN process might have cost lives. National

courts and data laws, as in Kenya, may already protect patients as well as a common African rule would.

BY AUDIENCE

What you can do

Governments

DO THIS

Publish the full text of your US health deal and the share your government must pay each year, and put that share in the 2027 budget.

WHY

The largest payments fall due in 2027 and 2028, and terms that are not public cannot be defended in parliament or in court.

Governments

DO THIS

Pay for posts for unemployed nurses and midwives before paying for new training places.

WHY

Nearly a million trained workers are idle while clinics are short of staff.

AU and regional bodies

DO THIS

Ask Africa CDC to draft one set of data rules that all 24 African signatories can use, before the World Health Assembly in May 2027.

WHY

One shared position carries more weight than 24 separate ones.

NGOs and civil society

DO THIS

Track the \$3 billion promised for Ebola against what is actually paid, and publish the gap each month.

WHY

Promises mean little until the money reaches clinics in Ituri.

Business and investors

DO THIS

Bid for vaccine supply contracts backed by Gavi, and seek approval from the African Medicines Agency.

WHY

A continental regulator and guaranteed orders lower the risk of making vaccines in Africa.

Philanthropy

DO THIS

Help pay first-job salaries for nurses, on a schedule that governments sign up to take over.

WHY

Hiring workers Africa has already trained is the cheapest way to add health workers.

Researchers and media

DO THIS

Build a public record of each country's health budget, its US deal payments and its hiring of health workers.

WHY

Promises such as the Abuja target can only be enforced if someone measures them.

Young people and citizens

DO THIS

Ask candidates and local governments how many health jobs they will fund, and when.

WHY

Young nurses carry most of the unemployment, and hiring is a budget choice.

OCTOBER 2026 TO DECEMBER 2027

Dates to watch

12 TO 18 OCTOBER 2026

Annual meetings of the IMF and the World Bank, Bangkok

Limits on public wage bills in IMF programmes decide whether governments can hire health workers. [Source](#)

30 OCTOBER 2026

Kenya's Court of Appeal rules on the Kenya-US health deal

The first court test in Africa of the data terms in these deals. [Source](#)

DECEMBER 2026

UN General Assembly vote on the pandemic declaration

Shows whether Africa's joint support can carry the text past US and European objections.

[Source](#)

MAY 2027

The World Health Assembly, the yearly meeting of all WHO members, receives the rules on sharing pathogens

These global rules would cover what the one-to-one deals are deciding now. [Source](#)

Recommendations

30 DAYS · BY 28 OCTOBER 2026

CONTINENTAL

Agree one African set of rules on health data for health funding deals

Leads: Africa CDC with the African Union Commission; Kenya as the first country to use the rules

2 YEARS · BY SEPTEMBER 2028

CONTINENTAL

Pay first salaries for jobless nurses and midwives while governments take over

Leads: WHO's Africa office under the Charter, with African foundations and public development lenders; Kenya and Zambia go first

Dig deeper

Disease Outbreak News: Bundibugyo virus disease, DRC

WHO

The latest official situation report on the Ebola outbreak.

G20 mobilises \$2.9bn for Ebola response

Africa CDC

The pledges made in New York and the call to trace every dollar.

Tracker of America First health agreements

KFF

Country-by-country amounts and co-financing terms, with downloadable data.

US and Global Fund funding reductions in MOU countries

KFF

How far US and Global Fund money to agreement countries will fall by 2029.

Tracking the America First bilateral health agreements

Think Global Health

Analysis of the terms, including back-loaded domestic contributions.

State of the Health Workforce in Africa 2026

WHO Africa

Shortages, unemployment, migration and the cost of employing idle health workers.

Accra Reset: plan for health sovereignty

Health Policy Watch

The proposal to consolidate global health funds.

Kenya, data protection and the America First health strategy

Carnegie Endowment

The data clauses in Kenya's agreement and the legal challenge.

Interview with the head of the African Medicines Agency

Health Policy Watch

What the new continental regulator will and will not do.

Domestic government health expenditure, % of government spending

World Bank data

Country data for tracking the Abuja target.

Words used on this page

Democratic Republic of the Congo (DRC)

Africa's second-largest country by area, in central Africa. Its east has seen armed conflict for three decades, and it holds much of the world's cobalt. [Security and conflict briefing](#) · [Glossary](#)

UN General Assembly

The meeting of all 193 UN member states, each with one vote. It meets every year from September. It can make statements, elect members of other bodies and approve the UN budget, but most of what it says does not bind governments. [Glossary](#) ·

[Source: un.org](#)

Political declaration

A statement of shared intent agreed by governments. It does not commit money or create legal duties, but funders and agencies use it to set priorities. [Glossary](#)

European Union (EU)

A union of 27 European countries with shared laws, a single market and a large aid budget. [Glossary](#)

World Health Organization (WHO)

The UN's health agency. It sets health standards and coordinates responses to outbreaks. The United States left it in January 2026. [Glossary](#) · [Source: who.int](#)

Africa CDC

The African Union's public health agency, based in Addis Ababa. It coordinates disease control across the continent. [Glossary](#) · [Source: africacdc.org](#)

The Accra Reset

A process started in 2025 by Ghana's President John Mahama after cuts to health aid. In September 2026 its panel proposed merging several global health funds and handing their work to African governments over five to ten years. [Glossary](#) ·

[Source: healthpolicy-watch.news](#)

Bundibugyo Ebola

One of several types of Ebola virus. Unlike the more common Zaire type, it has no approved vaccine or treatment. [Glossary](#) · [Source: who.int](#)

The Global Fund

An international fund that pays for HIV, tuberculosis and malaria programmes. It raises money from governments and private donors every three years. [Glossary](#) · [Source: theglobalfund.org](#)

Gavi

An international alliance that buys vaccines for lower-income countries. Countries pay a rising share as their incomes grow. [Glossary](#) · [Source: gavi.org](#)

US "America First" health agreements

Health funding deals the United States has signed with individual countries since 2025. The receiving government pays a rising share, and several deals include access to health data. [Our recommendation on this](#) · [Glossary](#)

The Abuja target

A promise made by African governments in Abuja in 2001 to spend 15% of their budgets on health. Few have met it. [Glossary](#)

African Union (AU)

The organisation of 55 African states, based in Addis Ababa. Its heads of state meet each February. It can suspend members after a coup. [Glossary](#) · [Source: au.int](#)

African Medicines Agency

A continental regulator for medicines and vaccines, based in Kigali. It is still being set up. [Glossary](#)

World Health Assembly

The yearly meeting of all WHO members, held in Geneva each May. [Glossary](#)

IMF programme

A loan from the International Monetary Fund that comes with conditions on a government's budget, such as limits on the public wage bill. [Development cooperation briefing](#) · [Glossary](#)

Pathogen sharing and benefit-sharing

Pathogens are viruses and bacteria. Countries that share samples and genetic data on them want a fair share of the vaccines and medicines made from them. This is called benefit-sharing. [Our recommendation on this](#) · [Glossary](#)