

Africa**PressDay**

Health Is Wealth: How Investing in Health Can Transform the Future of African Women and Societies

Insight Report



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What is health worth? What is it worth to save a woman's life in Africa? What is it worth to save a mother's life and protect a generation? What is the value of a healthy worker to an African nation's productivity? And what is the true value of strong, resilient African health systems to their people, their societies and their future?

*“Women’s lives matter.
Period.”*

Dorothy Nyong'o
Managing Trustee of the Africa Cancer Foundation
and First Lady of Kisumu County, Kenya

These complex questions have long been asked. Today, however, new data are beginning to answer them. While health has historically been treated as a cost in national budgets, growing evidence shows that strategic health spending delivers a return on investment. Health is not a cost. It is an investment – an investment in productivity, resilience, equity and sovereignty. Health is wealth.

This is especially evident when it comes to women, who are pillars of Africa's families and economies. Breast cancer is one of the greatest threats to that foundation. As the leading cause of cancer death among women in Africa¹, late diagnosis continues to drive avoidable loss of life, productivity and economic stability. According to research by the WifOR Institute, investing in breast cancer care can reduce societal costs and improve outcomes². Every USD 1 invested in innovative cancer care can generate up to USD 12.40 in economic return, primarily through restored productivity and longer, healthier working lives³.

“When a woman survives cancer, families stay together, children stay in school and communities retain economic activity. And that is why at Roche we are rewriting the story of breast cancer in Africa,” said **Jacqueline Wambua**, General Manager for East Africa at Roche, Kenya. She added: “We have an ambition we call the Africa Breast Cancer Ambition (ABCA). Our goal is clear: to achieve a 60% increase in breast cancer survival by strengthening every step of the patient journey, from early detection and diagnosis to treatment and long-term follow-up care.”

As **Oluranti Doherty**, Director of Export Development at Afreximbank, pointed out: “Cancer is not only a health burden. It is a competitiveness tax. It removes people from the workforce in their most productive years, reduces household income, forces caregivers to leave work and drains savings. For governments it has a big impact; long-term health costs, as most patients present late, and a weakened tax base as labour participation declines”.



Dr Ouma Oluga, OGW, Principal Secretary for Medical Services at Kenya's Ministry of Health

1. International Agency for Research on Cancer (IARC), (2022). Africa Fact Sheet. Global Cancer Observatory, Lyon: IARC/World Health Organization. Available at: <https://gco.iarc.who.int/media/globocan/factsheets/populations/903-africa-fact-sheet.pdf>
2. WifOR Institute. (2025). The value of investing in innovative medicines: Socioeconomic Burden of HER2+ breast cancer and annual social impact of Roche's treatments for the disease in Africa. Sponsored by F. Hoffmann-La Roche AG. Available from: <https://www.wifor.com/en/download/the-value-of-investing-in-innovative-medicines-socioeconomic-burden-of-her2-breast-cancer-and-annual-social-impact-of-roches-treatments-for-the-disease-in-africa/?wpdmdl=359741&refresh=68dbe54dd95fc1759241549>
3. WifOR Institute. The value of investing in innovative medicines: socioeconomic burden of HER2+ breast cancer and social impact in Africa, 2025.



Jacqueline Wambua, General Manager for East Africa at Roche, Kenya

Progress is already happening, not because of one organisation but because of partnerships. As **Dr Ouma Oluga**, OGW, Principal Secretary for Medical Services at Kenya's Ministry of Health, emphasised: "At every meeting I attend, I usually tell people: 'You may think that someone else in another room will solve the world's problems. Yet that is not the case. It is us.'" Across Africa, innovative programmes, public-private partnerships and digital solutions are transforming women's cancer care and strengthening health systems. From early detection and access to treatment, to AI-driven diagnostics and behavioural insights, collaboration and innovation are improving outcomes and saving lives.

"Inaction is costly. Africa's cancer burden is projected to double by 2040, yet many of our countries still invest less than 5% of the health budget in cancer care. We cannot afford to lose another generation to diseases that are preventable and treatable."

Jacqueline Wambua,
General Manager for East Africa, Roche, Kenya



Breast cancer care: the case for investing in women's health

Only 50% of women diagnosed with breast cancer in Africa will survive five years, while more than 90% survive in high-income countries⁴. "When a woman dies from cancer, children lose a beloved caregiver, families lose income and communities lose stability. In 2020 alone, 90,000 African children became maternal orphans due to breast cancer. This creates a well-documented and alarming chain reaction that affects not only women and families, but also communities and societies", stressed **Dorothy Nyong'o**, Managing Trustee of the Africa Cancer Foundation and First Lady of Kisumu County, Kenya.



Dorothy Nyong'o, Managing Trustee of the Africa Cancer Foundation and First Lady of Kisumu County, Kenya

This impact has now been quantified in socioeconomic terms. Research by the WifOR Institute⁵ shows that HER2-positive breast cancer, a subtype accounting for up to 20% of cases on the continent, resulted in more than USD 10 billion in lost productivity costs across seven African countries (Algeria, Côte d'Ivoire, Kenya, Morocco, Nigeria, South Africa and Tunisia) between 2017 and 2023. Nearly 90% of these losses came from women in their prime working years.

The WifOR study also showed that every dollar invested in innovative breast cancer treatments can generate up to USD 12.40 in economic gains, with around 70% of the total economic and social

4. International Agency for Research on Cancer (IARC), 2021. Breast cancer outcomes in sub-Saharan Africa: An evidence summary brief. [pdf] Lyon: IARC. Available at: https://www.iarc.who.int/wp-content/uploads/2021/03/IARC_Evidence_Summary_Brief_1.pdf
5. WifOR Institute. (2025). The value of investing in innovative medicines: Socioeconomic Burden of HER2+ breast cancer and annual social impact of Roche's treatments for the disease in Africa. Sponsored by F. Hoffmann-La Roche AG. Available from: <https://www.wifor.com/en/download/the-value-of-investing-in-innovative-medicines-socioeconomic-burden-of-her2-breast-cancer-and-annual-social-impact-of-roches-treatments-for-the-disease-in-africa/?wpdmid=359741&refresh=68db54dd95fc1759241549>



Left to right: Dr Caroline S. Mbindyo, Chief Innovation Officer at Amref Health Africa; Maturin Tchoumi, Area Head at Roche Africa

benefits generated when disease is diagnosed and treated early⁶. In the same vein, **Dr Caroline S. Mbindyo**, Chief Innovation Officer at Amref Health Africa, noted that there is strong evidence that investing in health drives economic development. For example, investments in community health can generate significant economic returns, with studies suggesting that every dollar invested can yield up to ten dollars in economic gains by reducing child and maternal mortality, containing infections and improving early diagnosis.

Building on this point, **Maturin Tchoumi**, Area Head at Roche Africa, noted: “If we invest in healthcare, we can turn those USD 10 billion in productivity losses into positive gains with a direct impact on GDP.” He added: “The evidence clearly shows that investing in women’s health is not a cost or a social expense, but a powerful economic driver that underpins productivity, resilience, equity and sustainable growth across the continent.”

The catalytic effect of strategic healthcare investments

Dr Oluga stressed that health policy decisions must be strategic and designed to create catalytic effects across the system. With limited resources, he argued, governments must identify investments that can unlock broader benefits. Recalling an example from Kenya, he explained how investing in ophthalmology equipment generated revenues that were later used to strengthen maternity services. “Sometimes the solution is sitting right next to you,” he noted, adding that the goal is to find “a catalytic action – one that you take and then it becomes a snowball solving other problems.”



Dr Sarah Nietz, President-Elect of the Breast Interest Group of Southern Africa (BIGOSA), South Africa

“When we’re talking about spending on health, the question isn’t really how much we spend, but how intelligently we invest it. And healthcare systems grow the most if we spend towards strengthening the actual system and focusing on what matters most, and that is obviously treatment and what it does for the patient’s outcome,” said **Dr Sarah Nietz**, President-Elect of the Breast Interest Group of Southern Africa (BIGOSA), South Africa.

“We are now thinking of health systems as the infrastructure for human capital. And human capital is the real engine of economic growth and industrialisation for Africa.”

Oluranti Doherty

Director of Export Development at Afreximbank



6. WfOR Institute. (2025). The value of investing in innovative medicines: Socioeconomic Burden of HER2+ breast cancer and annual social impact of Roche’s treatments for the disease in Africa. Sponsored by F. Hoffmann-La Roche AG. Available from: <https://www.wfor.com/en/download/the-value-of-investing-in-innovative-medicines-socioeconomic-burden-of-her2-breast-cancer-and-annual-social-impact-of-roches-treatments-for-the-disease-in-africa/?wpdmid=3597416&refresh=680be54dd95fc1759241549>

Although breast cancer receives considerable attention and public awareness, investment in the systems that deliver care often remains limited. Moving beyond vertical, donor-driven programmes towards more sustainable, system-wide improvements is therefore critical. Improving cancer care requires coordinated investments across several areas. “The first one would be to invest in data systems. If we want to improve cancer care, we must measure things. So we must have clinical registries, digital patient records and track outcomes and national quality indicators,” said **Dr Nietz**. Structural innovations such as digital referral systems, tele-oncology and specialised training programmes can further expand access and impact. These efforts are increasingly enabled through strong public-private partnerships, which bring together expertise, resources and innovation to strengthen care delivery and improve outcomes for patients.

Maturin Tchoumi noted: “At Roche Africa, we have made breast cancer a strategic priority through the Africa Breast Cancer Ambition (ABCA), because it can have a catalytic effect, improving both health outcomes and economic growth across the continent. We achieve that effect by working with partners across the system who bring complementary capabilities to what we do.” This approach is already reflected in a range of initiatives supported by Roche, including the EMPOWER Clinics, the Unjani Clinic Network and the Women’s Integrated Care for Cancer Services (WICS), as well as memoranda of understanding (MOUs) and public-private partnerships with governments and organisations aimed at expanding access to care and strengthening health systems.

“Therapies change, so health systems must change. They must change because of demand, but they must change because of response.”

Dr Ouma Oluga

OGW, Principal Secretary for Medical Services at Kenya’s Ministry of Health

Health sovereignty: Africa shaping its own future

Health sovereignty means Africa can build stronger, more independent health systems that serve its people reliably, even when global support changes. According to **Dr Hela Hammami**, President of the African Women’s Group for Health (AWGHO), Tunisia, there is a major imbalance in global health resources: Africa carries roughly a quarter of the world’s disease burden yet has less than 2% of the world’s radiotherapy machines. This highlights a systemic challenge rather than a technological one. Many women are diagnosed too late not because treatments do not exist, but because health systems fail to connect screening, diagnosis and treatment effectively.



Dr Hela Hammami, President of the African Women’s Group for Health (AWGHO), Tunisia

“As an oncologist, I look into the eyes of women diagnosed too late, not because the medicine does not exist, but because the system failed them. What is the value of confirming a cancer diagnosis if, after that, we leave women alone to navigate treatment, to fight disease and sometimes cultural beliefs?” she reflected. Achieving true health sovereignty, she argued, requires building an integrated, African-led oncology system that spans the full continuum of care, from prevention and early detection to treatment and research.

Echoing this perspective, **Dr Nietz** noted: “When we talk about gaps, we often assume that the main issue is access to technologies or drugs. But in Africa we face a more fundamental challenge: inconsistent healthcare delivery.”

“Healthy people are not the beneficiaries of development. They are the mechanism through which development happens. Investing in health is therefore a good investment.”

Dr Caroline S. Mbindyo,
Chief Innovation Officer at Amref Health Africa

From a South African perspective, the key gaps include late diagnosis, fragmented care pathways, inequality in access and a lack of structured clinical data. “Africa cannot claim health sovereignty if we cannot measure the treatment and outcomes of our patients. There are basic questions many of us still cannot answer: How many breast cancer patients do we see each month? When do they receive treatment? What treatments do they receive? And are outcomes actually improving? We often see this as bureaucracy, but it is not. Data is the foundation of better care,” **Dr Nietz** concluded.



Bringing care closer

What is health worth if only some people can reach it, and what would it mean for the continent if everyone had an equal chance to be diagnosed and treated in time? In Africa, distance is increasingly described as a disease, and telemedicine as part of the treatment.

Dr Saad Chaacho, Deputy Chief Executive of Mediot Technology and former Director of the Moroccan Society of Telemedicine, explained that in Morocco there are “medical deserts” where patients may need to travel two hours or more to access care.

In response to shortages of doctors and uneven medical distribution, the country launched a national programme supported by the Mohammed V Foundation. The initiative deployed 100 fixed medical units in underserved areas. These units serve as the first point of care, while telemedicine connects local clinicians with specialists in major cities, enabling access to specialist expertise in areas such as ophthalmology and cardiology. Mobile logistics units ensure last-mile delivery of medicines, while tele-biology allows samples collected locally to be analysed remotely.

The model is built on a public-private partnership tailored to local population needs and informed by Moroccan data and research. According to Dr Chaacho, this integrated approach – combining prevention, digital tools, training and logistics – has already served more than one million patients, demonstrating how locally designed telemedicine systems can expand access to care and reduce downstream health impacts. He recalled: “The first patient we saw through telemedicine was a 70-year-old man who had never seen a doctor before and who turned out to have skin cancer. Through a telemedicine consultation, his life was saved.”

UNJANI clinics

Roche has established a partnership with the Unjani Clinic Network in South Africa to support nurse-led primary care in underserved communities. Through this collaboration, nurses receive seed funding, training and resources to open and operate their own clinics, creating local employment and expanding access to affordable healthcare services. Roche has committed to supporting the establishment of 25 Unjani clinics across the country by 2029. So far, ten nurse entrepreneurs have launched their own practices and the network has delivered nearly 17,000 primary healthcare consultations.

In South Africa, nurses provide most primary care for women and children, yet access to services is often constrained by long queues, limited clinic hours and documentation requirements. Unjani clinics help address these barriers by operating after hours and on weekends, offering affordable care without requiring proof of immigration status.

Around 90% of patients are women and children, receiving services ranging from reproductive healthcare and prenatal support to preventive screening.

Through the partnership with Roche, clinics are also equipped with portable wireless ultrasound devices, enabling earlier breast cancer screening at primary care level in a context where delayed diagnosis remains a major driver of mortality.

EMPOWER clinics

Through the EMPOWER Clinics in Kenya, Roche is pioneering integrated screening for breast cancer, cervical cancer, hypertension and diabetes. This initiative enables women to receive timely care and continue supporting their families and communities.

In 2018, Roche partnered with the County First Ladies Association (CFLA), Amref Health Africa, the International Cancer Institute Foundation (ICIF) and the Kenyan Ministry of Health to establish 20 EMPOWER clinics. These clinics introduced daily walk-in access from Monday to Friday, offering free breast and cervical cancer screening.

Today, an additional 57 digital EMPOWER clinics have been established across the country and adopted by the National Cancer Institute. Together, they have reached more than 235,000 women in Kenya, of whom 3,225 have received treatment. The EMPOWER digital health platform integrates screening, diagnosis, treatment and survivorship data into Kenya's National Cancer Registry, enabling more coordinated and data-driven care for women with breast and cervical cancer.



Roche Africa Press Day

Health is one of Africa's most valuable assets. Over more than 70 years of working across the continent, Roche has prioritised listening to patients and stakeholders, identifying locally relevant solutions, and catalysing change that addresses unmet needs. We have seen first-hand the transformative impact that equitable access to medical innovation can have on individuals, communities, and economies.

The Roche Africa Press Day 2026 is an opportunity to share powerful, real-world examples of African-

led innovation and cross-sector partnerships that have measurably improved survival rates, strengthened health systems, and enhanced quality of life.

This event convenes decision-makers, policymakers, patient advocates, economists, scientists and innovators from across the continent while bringing together leading media voices from Africa to spotlight the urgency of investing in health. By investing in women's cancer care, entire communities can be uplifted.



About Roche

Roche (SIX: RO, ROP; OTCQX: RHHBY) is a healthcare company uniquely placed to prevent, stop and cure diseases by uniting leading science and technology across diagnostics, medicines and digital solutions.

Roche was founded in Basel, Switzerland in 1896 and today is a leading provider of transformative medicines and diagnostics for millions of people in over 150 countries around the world. It is dedicated to tackling healthcare challenges that place the greatest strain on patients, families, communities and healthcare systems. Across its Diagnostics and Pharmaceutical divisions, Roche focuses on areas including oncology, neurology, cardiovascular and metabolic diseases, ophthalmology, infectious diseases and immunology with the aim of providing real and positive change for patients, the people they love and the professionals who care for them.

Genentech in the United States is a fully owned subsidiary in the Roche Group. Roche is the majority shareholder in Chugai Pharmaceutical, a major innovator in the Japanese therapeutic antibody market.

For more information, please visit www.roche.com.

About Roche Africa

Improving health is central to fulfilling the immense potential of the continent, yet millions of people continue to face obstacles to accessing the care they need, when they need it. To achieve our vision of a healthier future for all people in Africa, health systems must be able to manage the dual burden of communicable and non-communicable diseases (NCDs), and address the persistent, but solvable barriers to diagnosis, treatment and care. We know a one-size-fits-all approach won't work for the unique challenges that each country in Africa faces, and that building the resilient and responsive systems we need will require everyone involved in health to work together.

For more information, please visit www.africa.roche.com

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