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Building stronger systems for health innovation introduction

[version 1]

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Abstract

The accelerating pace of health innovation offers unprecedented opportunities to improve health outcomes globally, from long-acting HIV prevention to curative gene therapies and AI-enabled diagnostics. Yet, the gap between innovation potential and equitable delivery remains wide, particularly for low- and middle-income countries (LMICs) facing fiscal constraints, fragmented systems, and declining external aid. Evidence shows that the introduction phase—where countries prioritize, finance, and prepare for new technologies—is a critical bottleneck. Current processes are hindered by fragmented data, misaligned priorities, and weak coordination among stakeholders. This letter calls for urgent reforms to strengthen national systems for innovation introduction through four pillars: (1) whole-of-government coordination and capacity, (2) improved data availability and use, (3) multi-sector engagement for alignment and accountability, and (4) portfolio-based prioritization and planning. The ALIGN Consortium, in partnership with governments in Kenya, South Africa, and Senegal, will implement and evaluate these approaches over the next three years to inform global best practices. Success will enable more efficient, effective, and more sustainable innovation introduction, while failure risks widening health inequities and lost potential impact of innovations.

Keywords

Health innovation, health products, innovation introduction, low- and middle-income countries (LMICs), health systems strengthening, global health policy, data-driven decision-making, prioritization



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Introduction

The pace of health innovation is accelerating at a dizzying rate. Decades of investment and research breakthroughs have brought us to a moment of unprecedented opportunity to improve health and save lives: from HIV prevention and treatment administered just twice a year,¹ to curative gene therapies for sickle cell disease,² from handheld AI-enabled ultrasounds for early detection of pregnancy complications³ to rapid molecular diagnostics that pinpoint infections and guide targeted treatment.⁴

Just as the pipeline is massive and growing, so too is the gap between possibility and reality. Many low- and middle-income countries (LMICs) face rising fiscal pressure, compounded by the shrinking foreign aid and growing debt burdens. Global health programs and investments have saved millions of lives over the past 25 years, but their “vertical” disease focus has led to fragmentation and inefficiency, leaving national governments to juggle competing demands.⁵ Many health systems also struggle with distribution, delivery, and demand generation, limiting sustained and equitable access to promising health innovations.

The innovation bottleneck

Evidence from the past two decades shows that country-level prioritization and introduction of health innovations is a critical inflection point between the promising pipelines and scaled, sustainable, equitable delivery.⁶ Countries are faced with decisions of which innovations to prioritize, how to finance them, and how to prepare health systems to deliver them.

Yet too often these decisions are fraught with challenges. Data remains fragmented, missing, inaccurate, or incomplete, compromising evidence-based prioritizing and decision-making. Innovations are introduced in isolation, without integration across other products and service delivery platforms. Misaligned priorities and processes across various levels of government also delay introduction processes. Additionally, weak coordination and alignment with global stakeholders result in eroded trust, missed opportunities, and inefficiencies.

This is a critical moment for nations to shape how they prioritize, finance, and prepare to deliver health innovations that will support lasting improvements in health and quality of life for their populations over the coming decades. Decision makers at national and global levels must consider reforms to processes, procedures, and financing mechanisms to facilitate and sustain innovation introduction. We believe that by strengthening four pillars, elaborated below, decision-makers will be better able to pursue effectiveness and efficiency through such reforms.

Towards stronger innovation introduction systems

For a more sustainable, effective, and efficient path forward for innovation introduction, countries can take four key actions:

- **Strengthen whole-of-government coordination and capacity.** Aligning decision-making and supporting technical capacity across ministries, departments, and levels of government can streamline prioritization, budgeting, procurement, and implementation planning.
- **Improve availability and use of data for decision-making.** Country-level decision-makers need access to reliable, timely information and actionable insights on supply (products coming to market or recently launched), and demand (disease burden, health policy priorities, and community preferences) factors.
- **Facilitate whole-of-market engagement for alignment and accountability.** Regular multi-sector engagement — bringing together the public sector with civil society and advocacy groups, professional associations, private sector, funders, and other key stakeholders — can enhance coordination on introduction planning, identify constraints, and improve shared accountability while nurturing trust.
- **Apply portfolio-based logic to prioritization and planning.** Rather than considering each health innovation individually, decision makers can apply a portfolio lens to ensure efficient prioritization and introduction decisions across an integrated set of solutions. Portfolio approaches could integrate health products based on shared characteristics such as product category (such as long acting injectables), population served (such as young women), or the point in the care continuum at which an innovation is delivered (such as antenatal care).

Many countries already have planning platforms, dashboards, review groups, or coordination bodies in place to support introduction activities, yet results are often sub-optimal. The opportunity now is to adapt and strengthen systems, policies, and financing for more effective and efficient innovation introduction.

Over the next two years, the ALIGN Consortium — led by Duke Global Health Innovation Center, Keprecon, South Africa Medical Research Council, and ENDA Santé, together with the governments of Kenya, South Africa, and Senegal — will apply these four actions to strengthen introduction systems. At the same time, the Consortium will capture learnings on how this can lead to more efficient and effective innovation introduction for the global health community.

A crucial moment for action

In this moment, the stakes have never been higher. Success means faster, smarter innovation introduction and subsequent delivery, leading to healthier populations and stronger economies. Failure means continued and worsening delays, widening disparities, and wasted potential.

As leaders across Africa commit to health sovereignty and national ownership, now is the time for countries to lead and govern innovation introduction on their terms, effectively, efficiently, and sustainably.

Disclaimer

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