



Wellness and the future of food

Cross-industry strategies for tackling Non-communicable diseases in Africa

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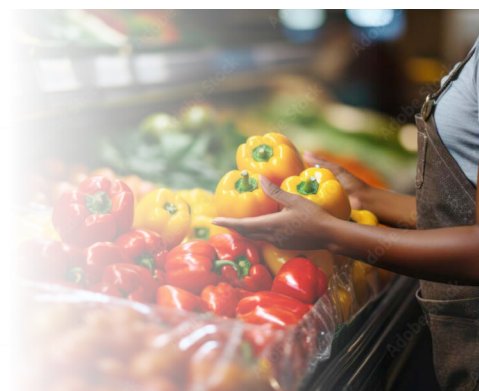
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Executive summary

Non-communicable diseases (NCDs) are rapidly becoming the **leading cause** of mortality in Africa, driven by shifting food choices and persistent socioeconomic inequalities.

Non-communicable diseases (NCDs) are rapidly becoming the leading cause of mortality in Africa, driven by shifting food choices and persistent socioeconomic inequalities. With NCD deaths occurring under age 70 reaching 64% – well above the global average – the continent faces an urgent challenge. Addressing this crisis requires a distinctly African, action-oriented, multisectoral approach that prioritises food systems transformation, in step with pharmaceutical management and government stewardship.

Food providers are pivotal in reshaping Africa's nutrition landscape. Food retailers and manufacturers must expand access to affordable, healthy and fortified foods, especially for low-income and vulnerable groups. Transparent, digital-first nutritional labelling should empower consumers to make informed choices. Responsible marketing, aligned with WHO/UNICEF standards, must restrict unhealthy product promotion to children, while measurable targets for healthier product portfolios are essential. Food providers should also harness AI and digital tools to personalise healthy eating plans, reflecting Africa's diverse dietary needs and economic realities.

Policymakers must establish rigorous criteria for public-private partnerships (PPPs), ensuring partners are genuinely committed to public health and nutrition outcomes. Expanding PPPs beyond healthcare to food security and local production is critical, as

is regular monitoring and evaluation to ensure accountability and impact. Governments should set clear standards and offer incentives – such as tax deductions for healthy foods – to drive better choices and innovation.

Meanwhile, healthcare institutions must integrate NCD prevention and management into primary care, equipping local clinics with the resources, training and digital tools needed to reach underserved populations and improve patient outcomes. Pharmaceutical companies should continue focusing on supporting policy co-creation, strengthening local capacity and promoting patient adherence through education and community engagement. Ultimately, Africa's path to “wellness for all” depends on prioritising these actionable strategies, fostering cross-sector collaboration, and embedding equity and local ownership at the heart of every intervention. Only then can the continent effectively curb NCDs and build resilient, future-proof health and food systems.



Introduction

The prevalence of chronic illnesses across Africa is rising. Cardiovascular disease, cancer, diabetes and chronic respiratory disease now account for a significant portion of deaths.

The prevalence of chronic illnesses across Africa is rising. Cardiovascular disease, cancer, diabetes and chronic respiratory disease now account for a significant portion of deaths. It has been estimated that by 2030, non-communicable diseases (NCDs) will be Africa's leading cause of mortality¹.

NCDs remain a key public health concern across the continent, exacerbated by changing diets, sedentary lifestyles, limited access to healthcare or nutritious food options (due to affordability) or patients' non-adherence to treatment².

Data from the World Health Organisation³ (WHO) showed the African Region had a higher probability of premature NCD mortality (21%) than the global average (18%), with 64% of NCD deaths occurring under age 70 – well above the global average of 42% and the highest among all WHO regions.

Integrated food systems, and the ability to afford nutritious foods, would help prevent the risk factors leading to these diseases. As healthcare costs continue to rise, prevention through healthier behaviours and eating choices become increasingly important. Governments in Africa are continuing to examine what Deloitte has previously called “whole health” strategies⁴: the collaboration and integration across health services, sectors and agencies. A whole-health approach emphasises addressing the many external factors involved in human health and encourages community investments that promote it.

Essentially, there is a strong need to establish not just a landscape of better medical care, but one of **wellness**. What do we mean by wellness? As the global wellness institute explains⁵: it is **the active pursuit of activities, choices and lifestyles that lead to a state of holistic health**.

To better the continent's chronic disease management and build wellness, a tailored, multi-sectoral approach is required – with nutrition, medication and better health behaviours combined to not only save lives but relieve the burden on African healthcare systems.

This report will examine some of the ways in which we can achieve longer lifespans through food systems, inspiring healthier choices through food providers, primary care support through healthcare institutions and treatment management strategies in the pharmaceutical sector – all enabled by government policy.

¹ <https://www.un.org/africarenewal/magazine/december-2016-march-2017/lifestyle-diseases-pose-new-burden-africa>

² Non-Adherence to Treatment Among Patients Attending a Public Primary Healthcare Setting in South Africa: Prevalence and Associated Factors - PMC

³ Non-communicable diseases in the WHO African region: analysis of risk factors, mortality, and responses based on WHO data - PMC

⁴ Integrated health care and the government's role in funding

⁵ What is Wellness? - Global Wellness Institute

Food and health: healthy eating as prevention

Not only does healthier eating boost immunity and support healthy pregnancies, it lowers the risk of heart disease, type 2 diabetes and certain cancers, all of which are NCDs lowering African lifespans.

Better nutrition and positive healthcare outcomes are inextricably linked⁶. Not only does healthier eating boost immunity and support healthy pregnancies, it lowers the risk of heart disease, type 2 diabetes and certain cancers, all of which are NCDs lowering African lifespans.

Africa not only faces severe undernutrition but also rising rates of obesity, with both extremes contributing to the risk of NCDs. Dietary interventions have proven effective in reducing disease risk across non-communicable and communicable diseases.

For example, tuberculosis (TB) remains one of the world's top infectious killers with the WHO Africa region accounting for a substantial contribution to both case load and deaths – despite recent progress in improving access to treatment⁷. This is exacerbated by the prevalence of HIV (Human Immunodeficiency Virus) as a co-morbidity. As reported in 2026, the WHO African Region has achieved faster declines in TB burden than the global average. Between 2015 and 2024, TB incidence fell by about 28% and TB deaths by about 46% in the Region, compared with global reductions of 12% and 29% over the same period.

However, recent research has reiterated that malnutrition remains a factor in the ability to fight against contracting TB and the disease's worst possible outcomes⁸. A recent programme in India⁹ revealed that healthy eating habits can cut TB infections by nearly

50%. By providing nutritious food to families of relatives suffering from TB, this reduced all forms of the disease spreading by nearly 40%, and infectious TB by nearly 50%.

Similarly, addressing malnutrition has repeatedly been proven to assist in the overall prevention of NCDs¹⁰. This applies across one's lifespan, with correct nutrition for infants fostering healthy growth and improved cognitive function alongside preventing the future development of NCDs¹¹, and for the elderly, reducing the progress of NCDs¹².



Meanwhile, some studies estimate that 30 to 40% of all cancers can be prevented by lifestyle and dietary measures¹³, with recommendations to engage in a high-fibre, vegetable rich and sugar-free diet to prevent the disease. For those already suffering from cancer, recent research¹⁴ examining numerous other diet-related studies argued that the correct food – alongside other appropriate therapy – can be effective at ameliorating cancer-treatment related toxicities and even improving prognosis (with the caveat that more research on the topic will be needed in future).

However, for many people across Africa, socioeconomic inequalities prevent healthy eating as an option at all. In South Africa, for example, poverty is the root cause of food and nutrition security – limiting access to nutritious food. Food and beverages high in calories and fat are more readily available and affordable than fruits and vegetables, while aggressive marketing campaigns for processed and calorie dense foods shift spending habits¹⁵. Ultra-processed foods dominate not due to preference, but due to cost concerns, according to one recent study, where it was noted that during periods of fluctuating food prices (such as the COVID-19 pandemic), households were far more likely to purchase starchy foods and far less protein. This is not merely a concern in the developing world, as revealed in the Food Foundation's Broken Plate report. The report explained that if citizens were to adhere to the United Kingdom's recommended healthy diet, low-income households would have to spend at least 45% of their disposable income, rising to 70% for families with children.

The reason for this significant cost is due to myriad factors: import/export costs of healthier products that can't be grown locally at scale, increased perishability of fresh, organic food products and the relative cheapness of processed foods. The World Bank has explained that as countries become more developed, their food systems are more proficient at providing healthier options cheaply – but they also get better at providing the less healthy options.

Therefore, redesigning overall food systems – and enhancing availability and affordability – requires a concerted effort from both the public and private sectors. Subsidising healthier foods and potentially taxing less healthy options, while promoting the benefits of the former are an important first step.

⁶ [Benefits of Healthy Eating for Adults | Nutrition | CDC](#)

⁷ [Tuberculosis \(TB\) | WHO | Regional Office for Africa](#)

⁸ [23.pdf](#)

⁹ [TB research shows a good diet can cut infections by nearly 50%](#)

¹⁰ [Healthy diet](#)

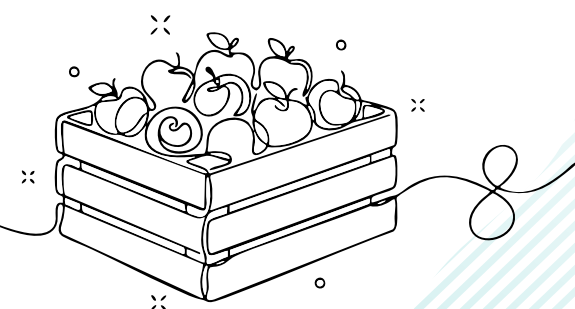
¹¹ [Noncommunicable diseases fact sheet | Africa Health Organisation](#)

¹² [The Role of Nutrients in Reducing the Risk for Noncommunicable Diseases during Aging - PMC](#)

¹³ [Nutrition and cancer: A review of the evidence for an anti-cancer diet - PMC](#)

¹⁴ [Food intake during cancer therapy: a systematic review - PMC](#)

¹⁵ [ncd-prevention-through-an-equitable-food-system-in-south-africa_opportunities-and-challenges.pdf](#)



The role of food providers as health enablers

Future grocery retail models must demonstrate improvements in transparency and earn trust amongst consumers... This integrated approach to nutrition signifies a future where healthy food is a foundational element in health care strategy, shaped by opportunities to involve trust and transparency.



Deloitte's 2024 research¹⁶ (in collaboration with the American Heart Association) on the effects of food on health provided insight into the role of the private sector on the provision of healthy food.

"Future grocery retail models must demonstrate improvements in transparency and earn trust amongst consumers... This integrated approach to nutrition signifies a future where healthy food is a foundational element in health care strategy, shaped by opportunities to involve trust and transparency," the report reads.

Grocers, retailers and food service providers must ensure the accessibility of affordable, nutritious foods – but also provide the transparent nutritional information to ensure consumers can be the CEOs of their own health¹⁷.

In several African countries, retailers are increasingly promoting health and wellness products, responding to consumer demand – and need¹⁸ – for healthier options. The most recent Deloitte Consumer Signal report for South Africa¹⁹ showed a rising number of younger South Africans (18 – 34) are "splurging" on health and wellness products despite the rising cost of living.

This is a continuation of Deloitte 2024 study²⁰ finding that consumers worldwide are becoming more aware of the potential harmful effects of chemicals and additives in their products and are seeking out natural alternatives. In the South African context,

this is corroborated by the South African Council of Shopping Centres that noted consumer demand to decrease packaging waste and source ingredients responsibly – alongside the rise of plant-based meat alternatives market that is mirroring global growth projections²¹.

However, this has not been enough to stand against the increasing rate at which Africans across the continent consume ultra-processed food for convenience and affordability. One study²² noted this rising trend in sub-Saharan Africa over the past 50 years, with a surge in the early 2020s, linked to the malnutrition and obesity issues experienced in the region.



This processed food trend has not been lost on food and nutrition researchers across the continent, such as in Tanzania, where the first independent assessment of the local food and beverage (F&B) manufacturing sector was conducted last year²³. The study examined health thresholds of products that represent almost half of the formal packaged market in the country, with only 37% of products declared healthy. To remedy this, and to help shift consumer behaviours, the report asked that F&B producers adopt clear policies and implement measurable targets to:

-  Increase sales of healthier and affordable foods and assign executive-level accountability for nutrition,
-  Improve availability of fortified products that meet health standards and are affordable across all income groups,
-  Fully align marketing practices with WHO and UNICEF standards – defining children as under 18 and restricting or limiting child-directed marketing to only healthy products through all media channels,
-  And publicly report on nutrition and fortification policies while ensuring back-of-pack nutrition labelling.

The International Trade Centre has recommended the introduction of traceability requirements to ensure food safety and enhance transparency²⁴. Traceability – the ability to identify the origin of food and feed ingredients and food sources – not only helps in preventing outbreaks of food-related disease but guarantees product authenticity and gives reliable nutritional information to customers. However, the implementation of such systems and evolve African supply chains requires concerted efforts in establishing standards across a nation. Future efforts should focus on strengthening regulatory frameworks, leveraging digital innovations and building collaboration between both government and supply chain stakeholders²⁵.

Beyond the expectations for food providers to be transparent, they are also expected to be technologically savvy. For example, nutrition labelling – as mentioned above – could, in the digital era, be accessible through barcoding or QR coding or other 2D digital

standards (such as the GS1 Data Matrix in healthcare products)²⁶ to access even more data online. Recent innovations globally include retailers assisting consumers in building highly personalised, healthy meal plans through Artificial Intelligence (AI) tools²⁷.

By leveraging machine learning algorithms that process diverse health data sources including wearables, medical records and dietary preferences, food retailers can become an active partner in public health promotion.

Similarly a greater implementation of near field communication (NFC) packaging could help smartphone users identify the nutritional value of the products they buy. NFC-enabled packaging uses small chips to communicate with smart devices, meaning a customer can tap their phone on the product and immediately receive information: from nutritional value and the product's origin to special offers and preparation tips²⁸.

This may sound like a global trend, but African retailers are already using AI²⁹ to curb fraud, optimise pricing and forecast demand, while local packaging companies are already providing smart crates and NFC tags³⁰. Digitally developed, personalised health plans for Africa's unique dietary needs are unlikely to be far off.

But innovation does not always have to rely on emerging technologies, especially for retailers in Africa that may be looking for more cost-efficient options. One recent Australian study showed that online supermarkets were able to promote healthier choices through subtle “digital nudging” – using subtle prompts like product placement, food labels and visual cues to guide consumers toward healthier options without restricting their freedom. This nudging can also extend to pricing, such as providing discounts on healthier food options or offering rewards (or loyalty programme points) for healthier choices.

²⁶ [MC07_GS1_Datamatrix.pdf](#)

²⁷ (PDF) [AI-Powered Personalized Nutrition: Transforming Grocery Retail into a Public Health Partner](#)

²⁸ [IoT-Enabled Biosensors in Food Packaging: A Breakthrough in Food Safety for Monitoring Risks in Real Time - PMC](#)

²⁹ [Retail_automation_payment_solutions_SR_2025-6.pdf](#)

³⁰ [Silafrica is the First African-Based Packaging Company to Introduce Smart Crate Technology](#)

CASE STUDY: African Retailers driving better nutrition

African retailers are playing an increasingly pivotal role in improving nutrition and food security across the continent, utilising innovation, supply chain control and consumer empowerment to address both undernutrition and the rise of non-communicable diseases.

In South Africa, Woolworths' acquisition of in2food, a long-term supplier of prepared foods, exemplifies how retailers are enhancing quality and nutritional standards. By integrating in2food into its operations, Woolworths gains direct oversight of product quality, food safety and innovation, enabling the rapid development of healthier, premium food options. This move also strengthens supply chain resilience and supports sustainability, as in2food operates South Africa's first five-star green-rated food production site, incorporating waste management and renewable energy. Such vertical integration ensures consistent availability of nutritious, high-quality products for consumers.

Meanwhile, Shoprite, Africa's largest food retailer, is tackling affordability and accessibility through its extensive private-label range and targeted pricing strategies. The Shoprite Group's South African Food Security Index, launched in 2025, also tracks progress on food accessibility, affordability, dietary diversity and stability. Recent findings show a marginal improvement in food security, with increased dietary diversity and expanded school feeding schemes. Shoprite's initiatives – such as subsidising 27.7 million loaves of bread at R5 each and delivering over R55 billion in savings via its Xtra Savings programme – demonstrate a commitment to making nutritious food more affordable and accessible, especially for vulnerable households.

In Kenya, Carrefour's 'Choose Better' programme empowers consumers to make healthier and more sustainable choices. Through clear nutrition labelling, support for local farmers and incentives like loyalty points and discounts on healthy products, the goal is to make nutritious options more visible and appealing. The retailer also extends its impact beyond stores, running school tours to educate children on balanced diets, thus fostering healthier habits from a young age.

The multi-sectoral approach: creating an accessible food, medicine and care ecosystem



Partnerships across government, academia, NGOs, private sector and community groups must be fostered and integrated, ensuring that **collaboration** is meaningful and not merely symbolic.

A recent Global Health Action study³¹, **Multisectoral interventions for urban health in Africa**, explained that meeting African health objectives (including curbing NCDs) is best achieved through a multisectoral approach. This requires multiple sectors “to consider health and wellbeing as a central aspect of their policy development and implementation, recognising that numerous determinants of health lie outside (or beyond the confines of) the health sector”.

The review examined collaborations across 22 sectors and 16 African countries and recommends that multisectoral interventions for urban health in Africa should be designed and implemented with a strong focus on equity, sustainability and local ownership. Partnerships across government, academia, NGOs, private sector and community groups must be fostered and integrated, ensuring that collaboration is meaningful and not merely symbolic.

Interventions should prioritise health equity as a core outcome, targeting the most marginalised and vulnerable populations, and addressing power imbalances between international and local actors. Building local capacity is essential, with investment in leadership, resource and research led by African-based institutions to ensure interventions are contextually relevant and sustainable. Community engagement should be embedded throughout, with local knowledge, languages, and preferences respected, and volunteer involvement supported to prevent fatigue.

Ultimately, the review calls for a shift away from externally driven, short-term projects towards locally owned, equity-focused, and sustainably integrated approaches, supported by strong partnerships, ongoing evaluation, and genuine community involvement, to ensure that multisectoral interventions can effectively improve health outcomes across Africa.

³¹ Full article: *Multisectoral interventions for urban health in Africa: a mixed-methods systematic review*

Non-adherence and closing the treatment gap



Across the developing world, treatment non-adherence continues to be a significant barrier to effective disease management – especially in the realm of chronic disease³². Simply put, patients who do not take their medications as prescribed may be at higher risk for negative health outcomes. While patient education is the key to improving compliance, studies suggest proper motivation and support are proven to increase medication adherence. However, it is not merely a lack of knowledge that affects non-adherence, as other socioeconomic factors that also require redress. For example, accessibility, such as for those who can't afford to take time off work to stand in queues for several hours to pick up medication, or the travel costs needed to get there.

To address this, the World Heart Foundation³³ partnered with leading institutions to mark 27 March as World Adherence Day, “a global call to action to ensure patients stay on track with life-saving medicines and healthier lifestyles”. Established in 2025, this global awareness campaign calls on patients, caregivers, the pharmaceutical industry and the medical community to unite in breaking down barriers to adherence.

While awareness is important, the pharmaceutical sector has a major role to play in building up the ecosystems that can fight against NCDs – from developing new treatments to consulting on policy.

According to the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA), the pharmaceuticals industry is essential to regain the momentum in addressing NCDs. By bringing innovative solutions and informing policy, the sector can help accelerate health coverage and bridge the care gap identified by the United Nations' Sustainable Development Goals³⁴. Among its recommendations is the need to develop new medicines and vaccines to fight disease, design the implementation of policy solutions that are co-created with people living with NCDs and work with health systems to build capacity to treat lifelong conditions.

Meanwhile, it is vital to create an enabling policy environment that supports innovation, clinical trials and improved access to medicines and vaccines, while also strengthening data systems to ensure no one is left behind. Sustainable financing mechanisms tailored to each country's context should be established, and NCD care should be integrated into existing health infrastructure and programmes. Additionally, fostering strong multi-sectoral collaborations and participatory approaches will ensure that the expertise of all stakeholders is harnessed for comprehensive NCD management.

This goal for the pharmaceutical sector is exemplified in the Access Accelerated initiative³⁵, where at least 22 pharmaceutical companies have joined – alongside numerous civil society organisations and the World Bank. Access Accelerated aims to improve access, prevention and care for patients with NCDs in low- and middle-income countries (LMICs). As of 2024³⁶, the initiative invested over USD\$25 million in 44 global, regional and national initiatives. These included piloting NCD programmes, providing technical assistance and policy advice and producing flagship reports. These efforts resulted in several notable outcomes, including strengthened institutional capacity in select LMICs, overall enhanced knowledge and improved coverage and quality of NCD services.

³² *Non-Adherence to Treatment Among Patients Attending a Public Primary Healthcare Setting in South Africa: Prevalence and Associated Factors - PMC*

³³ *World Adherence Day Launched by WHF and Partners to Improve Health | WHF*

³⁴ *Action on NCDs: How the innovative pharmaceutical industry helps bridge the care gap | IFPMA*



Transforming chronic disease care in African healthcare systems

Digital healthcare services will likely be at the core of this evolution.

In 2021, the Africa Health Agenda International Conference released its report³⁷ into universal health coverage in Africa, claiming that 615 million Africans do not have access to the healthcare services they need. An urgent paradigm shift was needed – towards promoting health and wellbeing and addressing the root causes of disease across the continent. This was the catalyst for the PEN-Plus strategy, introduced by the WHO the following year, urging African countries to introduce standardised programmes to treat chronic diseases and NCDs³⁸.

For many Africans suffering from these afflictions, the only options for treatment were at health facilities in urban centres, meaning treatment was often out of reach for most rural, semi-rural and low-income patients. For the urban health facilities, this also meant capacity constraints to effectively manage the major burden of treating non-communicable diseases. However, key to the PEN-Plus strategy was the move to equip local health centres with the capabilities to treat NCDs, making medicines, technologies and diagnostics available at district hospitals and local clinics. This alongside training and skills development for health workers to bolster procedures for preventing, caring for and treating NCDs. All 47 member states of the WHO African region had endorsed the model as their official strategy for caring for individuals with severe NCDs³⁹.

Last year, the WHO revealed that thanks to this strategy, twenty African countries have increased access to free services for severe chronic disease such as type 1 diabetes, sickle-cell disease and rheumatic and congenital heart diseases⁴⁰. This significant progress has saved lives while also reducing the financial burden on families caring for those living with severe chronic diseases. Thousands of patients are now receiving treatment, while hundreds – if not thousands – of rural clinicians and nurses have been upskilled, improving health outcomes and lowering overall disease burden on facilities across these 20 countries.

However, the work does not stop there. Healthcare models must continue to evolve, leveraging new technologies and shifting from reactive to preventative care.

Digital healthcare services will likely be at the core of this evolution, such as those examined in Deloitte's previous global research into Smart Health Communities (SHCs)⁴¹.

SHCs engage patients, companies and public entities to deliver digital health services, to develop and shape communities, reducing costs dramatically, improving wellness and longevity and promoting economic growth. The focus is on reducing health inequality by developing partnerships and community



engagement, addressing the root causes of poor health (such as unhealthy diets), increasing access to health care and human services, improving health outcomes and utilising data to optimise research.

Across Africa, key success stories focus on the mobile health (mHealth) platforms that offer video medical consultations and increased access to care through mobile phone apps⁴². However, several other projects have shown the power of emerging technologies. Unmanned aerial vehicles (or drones) are building healthcare capabilities in sub-Saharan Africa, where they deliver life-saving medicine, vaccines, and blood to solve last mile hurdles. As of 2024, they deliver 75% of Rwanda's blood supply outside Kigali⁴³, flying predetermined routes and parachuting blood products.

A 2026 pilot project by the Gates Foundation and OpenAI is set to launch in several countries across the continent, Expanding access to health care through AI technology⁴⁴. By providing AI tools to African healthcare workers, the project aims to help lower overall workloads (such as helping with the onerous paperwork), allowing more patient consultations while improving the quality of care overall.

However, while technological innovation is important in building access, meeting Africa's unique healthcare needs still requires a human-centric, layered approach.



³⁹ *Boosting efforts to transform care for severe chronic diseases in Africa* | WHO | Regional Office for Africa

⁴⁰ *New WHO report highlights progress in the fight against severe chronic diseases* | WHO | Regional Office for Africa

⁴¹ *Smart Health Communities* | Deloitte Global

⁴² *Technology in African Healthcare: 2026 Digital Health Innovations* | MOHAC AFRICA

⁴³ *Drones Deliver Humanitarian Aid in Africa* | Think Global Health



Partnerships and government action



PPPs have increasingly been adopted as a tool to address common risk factors for the development of NCDs.

The role of government in managing public healthcare while supporting health and wellbeing has always been complex⁴⁵. Beyond providing quality healthcare services – ensuring they are well funded and run by well-trained professionals – governments are also responsible for putting in place policies, frameworks and health standards. In the fight against NCDs, improving access to quality care and better nutrition for citizens is yet another complicating factor.

Similarly, the digitisation of medical records has emerged as a critical factor for governments across the continent to address, to enhance efficiency, accuracy and accessibility of patient data. While some progress has been made in certain regions⁴⁷, such as in South Africa and Kenya⁴⁸, it is still a concern that requires a layered approach.

Public-private partnerships (PPPs) may not be a universal solution, but for strengthening health systems and food security, they can combine the capital and technology of the private sector and the authority and regulation of government.

In recent years, PPPs have increasingly been adopted as a tool to address common risk factors for the development of NCDs. However, as one study explained, it is essential that the right private sector partners are brought on board, those whose interests lie in public health alongside their bottom line – while avoiding conflicts of interest.

For thousands of patients, successful PPPs can be life-changing (and life-extending) when implemented correctly. For example, the ongoing work between pharmaceutical company, Roche, and the Ministry of Health in Côte d'Ivoire. Through infrastructure support, digital health solutions and funding mechanisms, five-year breast cancer survival rates rose from 20% to 56% nationally and from 20% to 63% at Côte d'Ivoire's National Radiotherapy Centre⁴⁹.

Meanwhile, the South African government has partnered with health and wellness retailers, Clicks, to vastly improve access to medication across the country. Acting as pick-up points for state supplied medication, the group processes more than 2 million parcels each year⁵⁰ on behalf of the Department of Health.

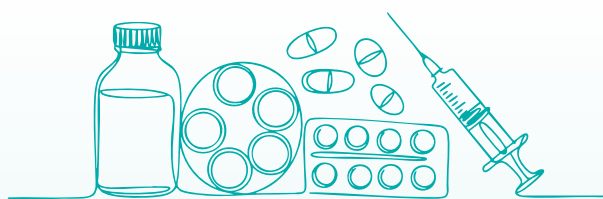
Other programmes, like Project Last Mile, connect government ministries with the logistics expertise of companies like Coca-Cola to improve the delivery of health supplies across 12 African countries⁵¹.

In terms of improving better nutrition, governments can also work with food providers, and agricultural suppliers, to help affordability of key products. This is a key objective of South Africa's Poultry Masterplan, a public-private compact tackling food insecurity and malnutrition. By improving the affordability of poultry for lower-income households, while providing funding and support to contract farmers, poultry processors and small businesses⁵², the masterplan aims to improve poultry exports while making this important protein more readily available to lower income families.

These examples demonstrate how carefully structured public-private partnerships can deliver tangible improvements in healthcare access, outcomes and nutrition for all populations. However, PPP initiatives require regular, ongoing assessments to measure their impact. While PPPs can enhance service delivery in resource-constrained settings, their effectiveness in NCD management, for example, can be limited by structural and governance issues⁵³ without the proper oversight.

Recommendations:

- A partnership ecosystem is central to discovering the greatest opportunities in achieving wellness for all Africans. Cross-collaboration between healthcare institutions, pharmaceutical companies, government entities and food providers will be integral across the following recommendations.



Pharmaceutical Companies

- **Innovate and Expand Access:** Invest in the development of new medicines and vaccines for NCDs – including a heightened focus on alleviating cause of disease rather than after a disease has already been contracted. Work with governments to ensure affordable and equitable access, including in rural and low-income settings.
- **Support Policy and Capacity Building:** Partner with health systems and policymakers to co-create solutions, strengthen local capacity and support the integration of NCD care into national health strategies.
- **Foster Multi-sectoral Collaboration and Data Sharing:** Participate in and support multi-sectoral initiatives (e.g., Access Accelerated), share data and best practices and contribute to robust monitoring and evaluation of NCD interventions. Design digital disease management tools to track, monitor, and treat acute or chronic medical conditions.
- **Promote Patient Adherence and Community Engagement:** Implement patient education and support programmes – alongside healthcare institutions and government – to improve treatment adherence and actively involve communities in the design and evaluation of health services. Continue to work alongside medical aid fund administrators to sponsor existing programmes.



Healthcare Institutions

- **Integrate NCD Prevention and Management into Primary Care:** Equip local clinics and district hospitals with the resources, medicines and training needed to prevent, diagnose, and treat NCDs, ensuring services are accessible to rural and underserved populations.
- **Leverage Digital Health and Innovation:** Adopt digital tools such as mHealth platforms, telemedicine and AI to expand access, improve patient monitoring and reduce health inequalities – while maintaining a human-centric approach.
- **SMART Health Initiatives:** Collaborate with fellow health stakeholders to invest in Smart Health Communities to support community engagement. This has been proven to address the root causes of poor health while increasing access to healthcare and human services.



Government

- **Establish Rigorous Partner Selection Criteria:** Governments should implement clear guidelines to ensure that private sector partners in PPPs have a genuine commitment to public health objectives, minimising conflicts of interest and prioritising the wellbeing of citizens.
- **Expand PPPs to Address Both Healthcare and Nutrition:** Policymakers should actively seek opportunities to develop PPPs not only for healthcare delivery but also for improving food security and nutrition, targeting vulnerable populations and supporting local producers.
- **Digitise Medical Records:** Meaningfully move forward in mandatory electronic medical records and standards setting – to provide data that is interoperable and accessible to the patient while enabling other digital strategies.
- **Monitor and Evaluate PPP Outcomes:** Regular assessment of PPP initiatives is essential to measure their impact on healthcare access, disease outcomes and nutrition, enabling continuous improvement and ensuring that partnerships deliver sustainable benefits. This alongside setting appropriate healthcare standards and incentives for meeting said standards.



Food Providers

- **Increase Access to Nutritious, Affordable Foods:** Expand the availability and affordability of healthy, fortified and minimally processed foods, especially targeting low-income and vulnerable populations.
- **Enhance Transparency and Consumer Education:** Provide clear, accurate nutritional labelling and transparent information and leverage technology (e.g., AI-driven personalised meal planning) to empower consumers to make healthier choices.
- **Adopt Responsible Marketing and Product Reformulation:** Align marketing practices with WHO/UNICEF standards, restrict child-directed marketing of unhealthy products, and set measurable targets to increase the proportion of healthy products in their portfolios.
- **Implement New Technologies:** By leveraging machine learning algorithms that process diverse health data sources including wearables, medical records and dietary preferences, food retailers can become an active partner in public health promotion. Near field communication technology, for example, can link to smart devices to help consumers make healthier choices in-store.



Conclusion

No single sector can address the NCD challenge alone. Coordinated implementation and monitoring across the public and private sectors are required to ensure healthier lifestyles – facilitating longer lives and offering wellness for all.

Tackling the rising burden of non-communicable diseases in Africa demands a coordinated, multisectoral approach to drive impact at scale.

A redesigned African food-and-health ecosystem is an integrated, equity-first network where affordable, locally produced nutritious foods are widely available and digitally transparent; retailers and manufacturers use clear labelling, responsible marketing and AI-driven nudges to make healthy choices default. Primary care is prevention-centred, digitally enabled and decentralised so clinics deliver routine NCD screening, treatment and adherence support. Rigorous, accountable public-private partnerships mobilise investment, strengthen local manufacturing and logistics, and ensure medicines and fortified foods reach vulnerable communities.

Government standards, fiscal incentives and interoperable health data underpin continuous monitoring, while community leadership and capacity building guarantee local ownership.

Such collective action not only improves health outcomes and quality of life but also helps to future-proof African societies against the complex challenges of chronic disease. The ideal result? Reduced NCD rates, improved life expectancy and resilient, inclusive food and health systems.

⁵⁰ [Clicks opens 700th pharmacy as part of drive to ensure easier access to healthcare - Clicks Group](#)

⁵¹ [privatesector_projectlastmile-partneringforhealth_report_en.pdf](#)

⁵² [Recognition for black-owned commercial poultry farmers | SAnews](#)

⁵³ [Assessing the performance of public-private partnerships in non-communicable disease management with a mixed-methods approach - PMC](#)

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