GS1 Healthcare Newsletter

GS1 Healthcare Africa

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Pharmaceutical traceability progress in Africa: Achievements, challenges and outlook following the 2019 Lagos Call to Action

Background

At the second Africa GS1 Healthcare Conference in Lagos in 2019, African countries were invited to sign a Call to Action (CTA) establishing a framework for pharmaceutical supply chain traceability. Led by Professor Mojisola Adeyeye, then Director General of Nigeria's National Agency for Food and Drug Administration and Control (NAFDAC) and Chair of the African Medicines Regulatory Harmonisation (AMRH), the agreement was signed by 25 regulatory authorities and six health financing organisations.

Shortly after, the Covid-19 pandemic disrupted health systems worldwide, shifting priorities and delaying initiatives across the sector. The third Africa GS1 Healthcare Conference, originally planned for November 2020, was postponed and will now take place in November 2025 alongside the 40th GS1 Global Healthcare Conference — six years after the Lagos CTA was signed, coinciding with the 20th anniversary of GS1 Healthcare.

This event will provide an opportunity for countries, partner organisations and Regional Economic Communities (RECs) to review progress since 2019, identify success factors, share lessons learned and chart the next steps to advance patient safety in Africa.

Assessing progress

To enable a comprehensive evaluation of progress in the countries, three categories have been set. These categories are detailed below and serve as the foundation for assessing progress across different countries, as illustrated in the accompanying country progress infographic.

Of the 25 countries that endorsed the 2019 Lagos call to action, **14** have started the process of establishing tracea-

Category	Category Description
1 **Foundation building** and establishing the regulatory framework and integration	A robust foundation is essential for building an effective traceability system. This includes raising stakeholder awareness, securing executive sponsorship and establishing a comprehensive regulatory framework.
2 **Launching implementation** — pilot projects, integration with systems	Pilot projects and test deployments are crucial for learning and advancing traceability, such as replacing manual entry with scanning and automated verification for selected products. This phase typically focuses on a limited number of product categories.
3 **Scaling up** & widespread implementation	Traceability is widely implemented across all levels of the supply chain, engaging multiple stakeholders and covering a wide range of products. This stage involves the use of advanced standards such as GS1 Electronic Product Code Information Services (EPCIS) and downstream implementations, such as in hospitals.

bility systems, at least by raising awareness among stakeholders. **22** countries have established foundations, while **8** have launched pilot projects.

Additionally, **8** non-signatory countries have since begun foundational activities related to pharmaceutical traceability.

Country perspectives

Participating countries shared insights on successes, challenges, and lessons learned. These are outlined in the following section.

Successes:

- **High-level leadership:** Commitment from senior government officials has been pivotal in advancing the traceability agenda. Their prioritisation of traceability sets a strong precedent, fosters accountability, secures resources, aligns stakeholders, and creates an enabling environment for successful implementation.
- **Stakeholder coordination:** Effective engagement across both public and private sectors is essential, as traceability is inherently a multi-stakeholder effort. Involving the right people at the right time also supports smoother change management.
- **Integration with digital health strategies:** Positioning traceability within broader digital health initiatives strengthens overall system performance. This integrated approach ensures traceability is seen as a core component of improving patient safety, supply chain efficiency, and achieving better health outcomes, while also driving more sustainable, cohesive solutions.
- **Realistic timelines:** Countries recognise that traceability is a long-term journey. For example, the US Drug Supply Chain Security Act (DSCSA) took more than a decade to implement fully. Defining short, measurable milestones—such as pilots, regulatory frameworks, or oversight structures—helps sustain momentum, keep stakeholders engaged, and ensure steady progress.
- **Adoption of global standards:** Stakeholders have acknowledged the critical role of global standards in establishing effective traceability frameworks, with GS1 standards widely recognised and well received in both local and regional contexts.

Challenges faced:

- **Gaining stakeholder buy-in:** Convincing local actors of the benefits of pharmaceutical traceability has been difficult, with resistance sometimes coming from within government agencies themselves. Progress has been made by steadily building understanding of GS1 standards, their role in traceability, and the financial, organisational, and human resource commitments required.
- **Uncertainty on where to start:** Many countries struggled with initial steps. Building awareness—particularly among local stakeholders—proved essential to generating momentum. Collaboration with neighbouring countries, development partners, and use of trusted tools and platforms provided valuable lessons and practical guidance.
- **Limited funding:** A lack of dedicated budgets has been a major barrier. Countries that developed a clear strategy and costed implementation plan were better able to secure funding from local governments and development partners.
- **Capacity gaps:** Shortages of trained professionals with both knowledge of global standards and understanding of local health system realities slowed implementation. Many countries had to invest significant time in developing this expertise and tailoring solutions to their specific context.

Looking ahead:

- **Pan-African leadership:** Regional leaders must embed supply chain visibility and traceability into broader continental health and economic strategies, leveraging lessons from early adopters.
- **Cross-country collaboration:** More advanced countries should support those beginning their journey, fostering a culture of “move together, support each other.”
- **Global community engagement:** Development partners should continue aligning global expertise with local priorities by integrating traceability into their country-level programmes and sharing tools, best practices, and recommendations.
- **Shared tools and resources:** Expanding access to centralised resources on supply chain visibility and traceability—such as UNICEF’s Traceability and Verification System (TRVST), USAID’s, Traceability Interoperability Platform (TIOP), model directives, implementation roadmaps and success stories—will accelerate harmonisation and adoption across the continent.

About GS1 Healthcare

GS1 Healthcare is a neutral and open community bringing together all related healthcare stakeholders to lead the successful development and implementation of global GS1 standards, enhancing patient safety, and operational and supply chain efficiencies.

The development and implementation of GS1 standards is led by the experts who use them: pharmaceutical and medical device manufacturers, wholesalers, distributors, group purchasing organisations, hospitals, pharmacies, logistics providers, solution providers, governmental and regulatory bodies, and trade associations. Evidence available from industry implementations shows that GS1 identification, data capture and data sharing standards in healthcare deliver tangible benefit to all stakeholders. Global members of GS1 Healthcare include more than 100 leading healthcare organisations worldwide.

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GS1 Global Office
Avenue Louise 523 | BE-1000 Brussels, Belgium
T +32 2 788 78 20 | **E** healthcare@gs1.org

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