Jembi Health Systems

IMPACT REPORT

2024/25

jembi

Contents

Letter from the CEO

I am pleased to report on Jembi Health Systems' successful and productive 2024–2025 fiscal year. It has included significant achievements in a number of important areas.

Our HQ Programme and Technology Division, based in South Africa, continued working in several other countries in sub-Saharan Africa and South Asia.

As one of the prime awardees under CDC Atlanta's Technical Assistance Platform (TAP) programme, Jembi continued digital health strengthening projects in Cameroon, Ethiopia, Botswana and Rwanda. A significant achievement was the development of a Central Data Repository for the Addis Ababa City Administration Health Bureau. These included data integration, interoperability and digital health records.

As a subcontractor to JSI under the Country Health Information Systems and Data Use (CHISU) programme, Jembi implemented the OpenHIM and mediators for HIV and maternal health programmes in Indonesia, working with local organisations.

Funding from the Dovetail Impact Foundation and the Patrick J McGovern Foundation was also used to strengthen Jembi's OpenHIM Platform and Implementers Community. It was also used to implement a health information exchange for the Ministry of Health in Sri Lanka and assist Palladium Kenya to de-duplicate the national HIV data warehouse.

Funding received from Grand Challenges Canada was used to initiate an exciting new project in climate and health, focusing on malaria and maternal mortality in Ethiopia.

We initiated an exciting new project focusing on malaria and maternal mortality in Ethiopia.

Our Mozambique programme covered a diverse project portfolio, including continued work with CDC Mozambique.

It also included supporting the national HIV electronic medical record system and continuing its productive collaboration with FACT Zimbabwe on the USAID-funded Data.FI project.

We worked with the Italian corporation to develop technology hubs and support the Angolan government with a DHIS and OpenMRS integration project.

Other projects included training curriculum development with the Regenstrief Institute and exciting work in the field of civil registration with various CRVS projects extending prior groundbreaking work integrating health and civil registration.

+12%

Jembi's turnover increased by 12% to a combined total of R139.2 million

80

Jembi's headcount, including 31 in Mozambique and 49 in HQ programme

15

Years of unqualified statutory audits with no material findings

Our Corporate Services division continued to provide exceptional support to the company as a whole.

We finished the fiscal year with another set of clear audits from the South African and USA governments.

Jembi's turnover across all programmes in South Africa and Mozambique increased by 12% to a combined total of R139.2 million over this period. Jembi's headcount was slightly increased to 80 over the period, including 31 staff in the Mozambique programme and 49 staff in the HQ programme, based mainly in South Africa as well as other countries in Africa, and India.

During this period, Jembi also continued its work on internal organisational strengthening and development, and is using this foundation to diversify its programmes and funders, including impact funders such as the Dovetail Impact Foundation. This will help Jembi adapt to the reduction in funding from United States government sources and the onboarding of new funders.

It has been a pleasure to lead Jembi over this period with its revised strategy and its new funding sources. We anticipate an exciting next phase with new programmes beginning in 2025 and 2026.

With best wishes,

Dr Christopher Seebregts
Founder and Chief Executive Officer

Executive summary

Building the future of health systems, together

At Jembi, we believe that empowering connection is essential for our shared future. We envision a world where shared data paints a more complete picture to support healthier societies from Africa to Asia.

Our mission to deliver impactful digital health solutions in low-resource settings is increasingly urgent as healthcare becomes more digital and as the climate increasingly impacts our health.

It's at these intersections that real groundbreaking innovation and opportunity arise.

In 2023/24, we expanded our role as digital health architects across Africa and beyond, implementing solutions like Kenya's Master Patient Index (MPI) and Sri Lanka's FHIR-based data exchange. These projects show the value of empowering locally led, interoperable systems.

We supported health ministries across twelve countries in modernising their digital infrastructure. Projects ranging from HIV case management in Ethiopia to EMR integration in Cameroon enabled efficient, secure data flow from local clinics to the national level.

Our next phase will continue scaling digital health systems to reach more people, building on lessons from 2024 and leveraging growing momentum with partners.

This isn't just digital health. It's digital public infrastructure – country-owned and built for scale. It's about redefining what an interconnected health system can do when it's built for everyone from the start. It's about one health system for all.

We're working to build better health systems that are faster, cheaper and more equitable than ever.

KEY IMPACT METRICS THIS YEAR

Here are the specific ways our work is creating sustainable impact:

DIGITAL PUBLIC INFRASTRUCTURE FOR HEALTH

- Successfully implemented National EHR system in Sri Lanka
- Centralised data from 65 facilities in Ethiopia
- Implemented FHIR workflows and HIE systems in multiple countries

CAPACITY BUILDING

- Trained 500+ professionals through free Digital Health courses
- Conducted technical training for local specialists in Ethiopia and Eswatini
- Developed FHIR Implementation Guide and Terminology Service
- First-certified FHIR educator in Africa, Richard Langford

HEALTH OUTCOMES

- Integrated four major point-of-service systems with HIE in Sri Lanka
- Supported better cross-border care with an International Patient Summary implementation
- Improved One Health collaboration in Southern Africa

By focusing on sustainable, locally-owned solutions, we're helping countries build the digital foundation for resilient health systems that will serve generations to come.

Jembi's model is working faster, cheaper and more effectively each year.

Jembi is active in

14 countries

4,146,439

records processed

650+

professionals trained

Our cost to serve drops

below $3

Why now? The case for urgency

Health systems across Africa are at a crossroads. Most still rely on paper-based or siloed digital tools that limit care coordination and delay national response. But for the first time, a convergence of political will, donor alignment and technical possibility offers a chance to leap ahead. If we act now.

The window is open, but it won't stay open forever.

1 THE CHALLENGE

SILOED SYSTEMS

Patient data is scattered across siloed platforms, leaving gaps in care, duplicated effort and limited visibility for health authorities.

CAPACITY CONSTRAINTS

Many Ministries of Health lack in-country digital health expertise, resulting in underused systems and stalled innovation.

POLICY PRESSURE

Donors like PEPFAR, Gavi and The Global Fund increasingly require interoperable, real-time data for results-based financing.

Countries are under pressure to modernise without having the internal capacity to do so.

2 THE MOMENT: THREE FORCES ARE CONVERGING

1. THE DPI SURGE

Digital Public Infrastructure (DPI) is now central to national health strategies, championed by Africa CDC and WHO.

- ✔ *Governments are choosing open, interoperable systems over closed, proprietary ones.*

2. AI READINESS

AI is only as effective as the data beneath it. WHO's guidelines stress that trustworthy, structured data is the foundation.

- ✔ *Jembi's platforms like OpenHIM and JemPI already enable this.*

3. LOWER COST TO SERVE

Jembi's cost per user will decline by over 50% by 2027. This is proof that scale and efficiency are achievable.

- ✔ *With each implementation, the marginal cost drops further.*

3 THE OPPORTUNITY

By 2030, DPI is expected to underpin resilient, inclusive and responsive health systems across Africa, enabling better health outcomes for all. Failure to act now could lock countries into costly, non-interoperable systems for another decade.

TAKING ACTION NOW ALLOWS COUNTRIES TO:

- ✔ *scale universal health coverage efficiently;*
- ✔ *build real-time, cross-border epidemic response tools;*
- ✔ *strengthen local digital talent pipelines; and*
- ✔ *create ethical, AI-ready health systems.*

With over 15 years experience in more than 20 countries, we are ready to scale and help shape the future of health systems together.

> "Failure to act now could lock countries into costly, non-interoperable systems for another decade.

From pilot to scale:

Delivering impact across health systems

As we've seen, the window for digital health transformation is open, but it won't stay open forever. The convergence of DPI momentum, AI readiness requirements and shifting donor priorities has created a unique opportunity to reshape health systems at scale. Jembi is answering this call to action by moving beyond proof-of-concept to deliver real-world digital health systems that are country-owned, interoperable and built to last.

TRANSFORMING HEALTH SYSTEMS AT SCALE

Across multiple countries, we've partnered with Ministries of Health to scale digital platforms that are streamlining care, improving data quality and building the foundations for AI-ready health systems. Our approach bridges critical capacity gaps while ensuring sustainable local ownership.

This year, Jembi-supported systems processed over 4.1 million health records, while reducing the cost per person served by nearly 50% since 2020.

> **“ Jembi-supported systems processed over 4.1 million health records, while reducing the cost per person served by nearly 50% since 2020.**

FROM REGIONAL PRESENCE TO GLOBAL IMPACT

Our work in Africa and Asia shows how digital health tools improve care when tailored to local needs. Each country uses the same core technology, but adapts it to solve their specific healthcare problems.

In the following sections, we show how we work with health ministries to improve health outcomes and make systems more efficient.

Each country's example includes real data and shows how better connected health information helps solve specific problems.

Each country example highlights our work with national health systems, featuring concrete implementation metrics, and shows how interoperable digital health infrastructure addresses specific healthcare challenges.

From Ethiopia's national data repository connecting 65 health facilities, to Sri Lanka's FHIR-compliant EHR system linking 50+ million annual patient encounters, these examples illustrate how digital infrastructure can support better healthcare for more people.

African overview

Jembi has strengthened three African healthcare systems in 2024 through tailored interoperability solutions.

In **Kenya**, we implemented an Master Patient Index (MPI) that successfully processed and deduplicated 3.5 million patient records, improving continuity of care across facilities.

In **Ethiopia**, our Central Data Repository (CDR) connects more than 50 health facilities managing over 53,500 HIV patient records – this reduces facility data aggregation for reporting from weeks to days, with 99.9% data accuracy.

In **Mozambique**, our OpenHIM platform enables real-time birth registration with over 11,589 births digitally registered, while supporting the country's first digital hospital, saving an estimated $7.8 million annually (see story on page 14).

These projects show how strategic digital investments speed up data centralisation, improve accuracy, increase confidence and open access to services faster across diverse African contexts.

Kenya

In 2024, we supported the deployment of an MPI solution – jeMPI – to assist with deduplication of HIV patient records in Kenya's National Data Warehouse (NDW).

WE SUPPORTED THE DEPLOYMENT OF THE NATIONAL MPI:

Through collaboration between Jembi Health Systems, CDC Kenya and Palladium Kenya, we implemented an MPI solution (jeMPI) that addresses identification challenges in Kenya's HIV care facilities.

> *jeMPI supported the deduplication of 3.5 million patient records in the NDW.*

INTEGRATING LOCAL EXPERTISE

The success of this project comes from combining Jembi's technical knowledge with Palladium's deep understanding of Kenya's health environment. Extensive stakeholder engagement guided the adaptation process, ensuring the solution addressed Kenya's specific healthcare needs.

TECHNICAL INNOVATION

The MPI solution uses advanced matching algorithms and data standardisation processes tailored to Kenya's healthcare landscape. The system integrates with existing infrastructure, minimising disruption while maximising impact.

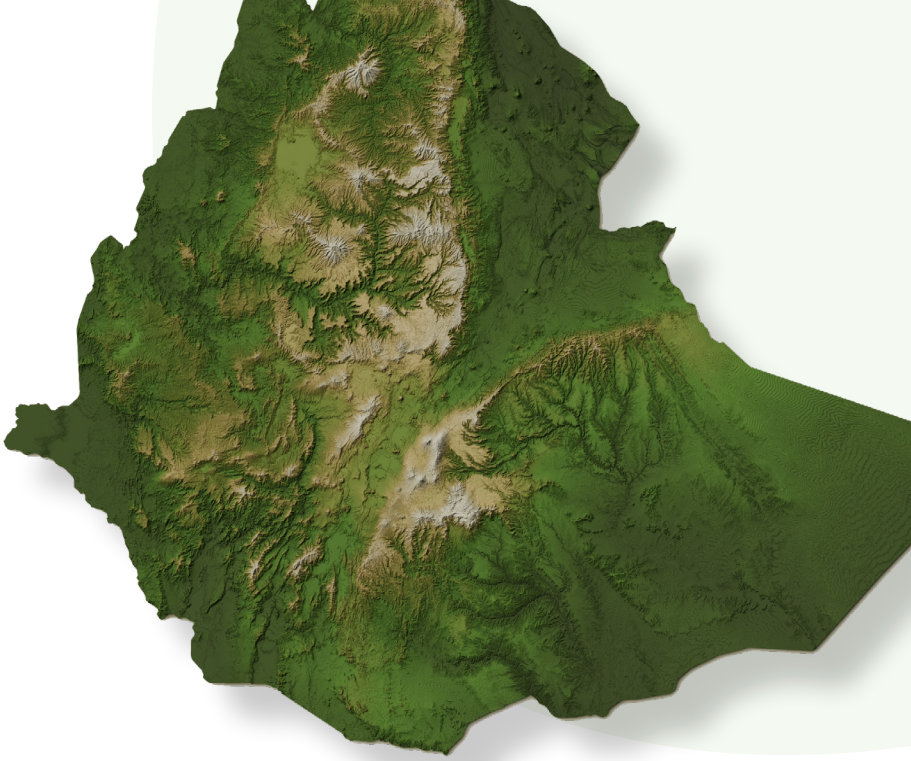
WHY THIS WORK MATTERS

- **For patients:** Consistent identification improves continuity of care and reduces treatment gaps.
- **For health workers:** More reliable patient histories support better clinical decision-making.
- **For facility managers:** Better data quality enables more accurate reporting and resource allocation.
- **For health authorities:** Improved patient tracking enhances monitoring of national health programmes.
- **For digital health:** Stronger identification foundations enable healthcare innovation.

Our work in Kenya demonstrates that targeted digital health investments can solve fundamental challenges while building capacity for future growth. By addressing reliable patient identification, Kenya strengthens its healthcare system through reduced duplicate records and care fragmentation. This directly improves health outcomes for millions of citizens by enabling more coordinated treatment plans and fewer medical errors.

Learn more in our full Kenyan case study.

Ethiopia



This East African nation is building secure health data systems that enhance HIV care while creating a foundation for a stronger national health information network.

WE ACHIEVED TWO KEY MILESTONES:

1. CDR SUCCESSFULLY DEPLOYED

The Addis Ababa City Administration Health Bureau (AACAHB), with Jembi's support, implemented a CDR for HIV programme data connecting more than 50 health facilities and managing over 201,298 patient records.

> *Data aggregation time fell from weeks to days, with 99.9% data accuracy, enabling more responsive decision making.*

2. FOUNDATIONS FOR NATIONAL HEALTH DATA INTEGRATION

Beyond Addis Ababa, the project established the technical foundation for a planned National Data Repository and Health Data Warehouse.

> *Early work on an MPI has begun (as in Kenya) addressing the need for unified patient identification across the health system.*

BUILDING LOCAL CAPACITY

The project focused on knowledge transfer through hands-on training for AACAHB and ICAP teams, comprehensive documentation handover, and a structured transition of day-to-day operations to ICAP, supporting long-term sustainability.

TECHNICAL INNOVATION

The CDR uses open-source technologies with established health data standards:

- OpenHIE-compliant architecture using OpenHIM for secure data exchange
- FHIR standard ensuring future interoperability and longitudinal patient records
- Power BI dashboards providing clear insights for decision-makers

WHY THIS WORK MATTERS

- **For patients:** Integrated records support safer, more reliable care.
- **For health officers:** Automated data aggregation reduces admin burden.
- **For programme managers:** Timely data enables better decision-making.
- **For funders:** Shared infrastructure creates lasting value and improves reporting.

The Ethiopia CDR project shows how joint digital health initiatives can lead to real, lasting improvements in health system performance. The project has brought about both the technical systems and the skills needed on the ground for Ethiopia's digital health future.

Mozambique

This southern African nation is building a future where every birth is registered, every patient record is secure, and every citizen has access to digital health and civil services.

Learn more in our full Mozambique case study.

WE ACHIEVED TWO MAJOR MILESTONES:

1. NATIONWIDE BIRTH REGISTRATION INTEGRATION BEGINS

In July 2024, Mozambique launched real-time digital birth registration by connecting MGDH-Birth (Hospital Data Management) and e-SiRCEV (Civil Registration).

> *This pilot, starting in Inhambane Province, expanded digital birth registration from 5 to 19 health facilities, registering over 11,589 newborns.*
>
> *At Chicuque Rural Hospital, health workers entered birth data directly into MGDH-Birth, with instant confirmation in e-SiRCEV. This was enabled by our OpenHIM interoperability layer.*
>
> *It uses our OpenHIM Platform to enable direct data exchange between systems.*

2. FIRST DIGITAL HOSPITAL LAUNCHED

In December 2024, Mavalane General Hospital in Maputo became Mozambique's first digital hospital. Jembi and partners helped the Ministry of Health design and deploy the Hospital Health Information System (SIS-H), digitising patient admissions and inpatient care.

> *This saves the health system up to $7.8 million annually by eliminating paper records.*

LOCAL CAPACITY BUILDING

In April 2024, Jembi and Saudigitus trained 10 national-level technicians in Inhambane to scale the integration in the province. This Training of Trainers (ToT), funded by the Data for Health Initiative, ensures government teams can lead future rollouts.

BUILDING FUTURE TALENT

Jembi also invests in Mozambique's digital workforce. Its flagship internship programme, developed with universities and the National Institute of Employment (INEP), has trained 30+ students since 2011, with 30% hired full-time.

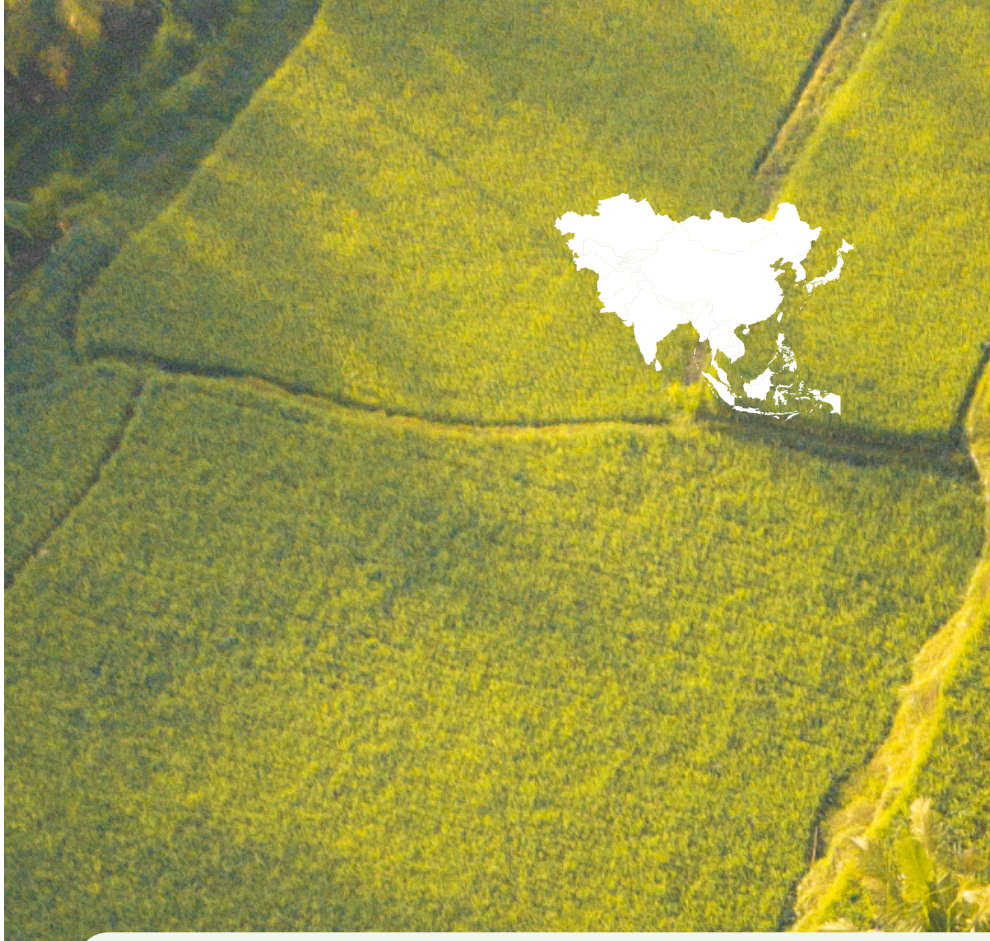
For one mother in Inhambane, this meant that her newborn daughter received her official identity immediately, allowing instant access to vital services, eliminating both the travel and paperwork previously required to register a child.

(Mozambique continued)

WHY THIS WORK MATTERS

- **For mothers:** Faster registration reduces delays in accessing child grants, education and healthcare.
- **For patients:** Digitised records mean safer, more reliable care.
- **For health workers:** Less paperwork, more time for patients.
- **For citizens:** Stronger public services powered by accurate data.
- **For local technicians:** Enhanced skills and careers to sustain these systems.
- **For government authorities:** Timely, more accurate and complete information for planning and budget allocation.

Real change happens when governments, partners and communities work together. These solutions help every newborn get registered, every patient get better care, and every health worker spend more time where it matters most.



Asian overview

Jembi helps connect healthcare systems across Asia with our interoperability tools.

In **Sri Lanka**, our FHIR-compliant EHR system links four major medical record systems, connecting over 50 million patient visits annually.

In **Indonesia**, Open Health Information Mediator (OpenHIM) connects previously separate systems to the national SatuSehat platform, handling 6,696 requests per minute and supporting essential services from TB monitoring to maternity care.

These projects demonstrate how better-connected systems improve healthcare delivery in different Asian contexts.

Sri Lanka

This nation is building a health system where data flows between systems, giving healthcare providers access to patient information and improving care nationwide. In 2024, with support from the Patrick J. McGovern Foundation, we helped implement a national electronic health record system that addressed a key challenge.

NATIONAL ELECTRONIC HEALTH RECORD (NEHR) PLATFORM

Sri Lanka's healthcare system had fragmented patient data across four major electronic medical record systems, affecting approximately 50 million patient encounters annually. This fragmentation affected continuity of care, particularly for patients moving between facilities.

Working with the Ministry of Health, we implemented an FHIR-compliant NEHR platform quickly:

- Implemented the International Patient Summary standard in nine weeks
- Integrated four major clinical systems with the Health Information Exchange
- Enabled data exchange across 17 use case topics during a national connectathon
- Developed an FHIR Implementation Guide and Terminology Service

National healthcare systems can share the International Patient Summary (IPS), a standardised set of essential health information about a patient, during emergencies or unplanned care. Doctors can use it to quickly access critical patient information such as allergies, medications and medical problems.

"We owe a debt of gratitude to the Jembi team, whose dedicated support and expertise played a pivotal role in setting up the essential infrastructure and assisting the Ministry of Health team in the development of FHIR Implementation Guides."

DR CHAMINDA WEERABADDANA, HEALTH INFORMATICIAN AT THE MOH, SRI LANKA

WHY THIS WORK MATTERS

- **For patients:** Comprehensive medical histories are instantly available regardless of which facility they visit.
- **For healthcare providers:** Better data accuracy supports improved clinical decision-making.
- **For health facilities:** Streamlined workflows reduce administrative burdens.
- **For the health system:** Integration of over 50 million annual patient encounters creates powerful opportunities for health planning.

Our work in Sri Lanka shows that nationwide health data integration is achievable even in resource-constrained settings. This success creates opportunities to share knowledge in Asia and beyond, helping other countries improve their health data systems.

Indonesia

Indonesia's healthcare system spans more than 1,000 islands, serving 270 million people through a national Health Information Exchange. In 2024, we supported the implementation of SatuSehat, a national Shared Health Record platform.

Jembi's partnership with the Indonesian government led to the adoption of our OpenHIM software as a crucial part of their digital health strategy. It serves as an interoperability layer connecting regions to SatuSehat.

TECHNICAL INNOVATION

OpenHIM routes, orchestrates and standardises data exchanges across Indonesia's fragmented health landscape, which was previously scattered among more than 400 health systems, 50 hospital systems and 70 primary healthcare systems. It helps ensure compliance with FHIR standards for nationwide data exchange.

ENHANCED HEALTHCARE INTEGRATION

The implementation received strong government support. Our participation at the 2024 AeHIN Conference in Jakarta strengthened relationships within Southeast Asia's digital health community.

WHY THIS WORK MATTERS

- **For patients:** This work supports improved quality of care, with key data exchange use cases such as TB surveillance, outpatient care, antenatal care and lab results.
- **For public health officials:** Builds a foundation for healthcare innovation across thousands of islands.
- **For healthcare systems:** Processes 6,696 requests per minute across the national healthcare network.
- **For infrastructure staff:** Handles 93 requests per second with 888 ms median response time.
- **For developers:** Eliminates redundant FHIR compliance work.

Indonesia shows how digital health infrastructure can unite dispersed healthcare systems. By addressing interoperability challenges at scale, the country is improving healthcare delivery for its 270 million citizens.

Learn more in our full Indonesia case study.

More impact for less

Since its inception, Jembi has expanded its reach across Africa and Asia, supporting Ministries of Health to modernise digital health systems.

We've helped nations move from the handwritten past to a predictable future. Moving away from thousands of A5 paper booklets, we've migrated to complete digital records, then to interconnected systems and finally to automatically consolidated data. Now, creating a single view of a nation's possible outbreaks.

We empower connections between systems, data and people. Our platforms and services have impacted over 9.3 million people worldwide by enabling real-time, data-driven decision-making through high-volume, standards-based health data platforms that improve patient care and national data coordination.

We connect doctors to labs, hospitals to health ministries, and patients to better care. As we scale, we're demonstrating increased efficiency. Our cost per person served has fallen to under $3 across digital health interventions, with projections showing a further drop to approximately $2.28 by 2027 (a 58% reduction over five years).

Every dollar goes further as our systems take root and grow, serving more people at a lower cost per person. We are helping low- and middle-income nations achieve more for their citizens while spending less. The more efficient we become, the more people they can help.

KEY ACHIEVEMENTS:

RECORDS PROCESSED

+4,1 million

health records processed through our platforms.

CAPACITY BUILDING

3,700+

health workers trained across multiple countries since 2011

COST EFFECTIVENESS

< $3

cost per person served

INVESTMENT EFFICIENCY:

$10,000 in initial funding generated an additional $181,500 in resources when we secured the Grand Challenges Canada work on Climate and Health in Ethiopia.

In **Mozambique**, for example, the Minister of Health anticipates that our **digital hospital system will save $7.8 million annually** while improving service quality and data availability.

PEOPLE REACHED

+9.4 million

people impacted across all implementations:

- South Africa: 5 m+
- Kenya: 3.5 m
- Zimbabwe: 250,000
- Indonesia: 250,000
- Ethiopia: 201,298
- Sri Lanka: 183,552
- Mozambique: 11,589

These cumulative impacts extend far beyond individual projects, creating sustainable national systems that are more secure, interoperable and future-ready.

WHY IT MATTERS

Our technical achievements lay the groundwork for **digital twins** in healthcare – virtual replicas of physical health systems that enable simulation, prediction and optimisation. By connecting data across platforms, we're building the foundation for **regional AI readiness.**

Through the **One Health approach,** our systems work to connect human, animal and environmental health data – critical for the early detection of zoonotic diseases and prevention of future pandemics. This integrated view allows health officials to spot patterns across sectors before they become crises.

When climate events trigger disease outbreaks or agricultural challenges affect nutrition, our connected systems help governments respond with coordinated, data-driven interventions rather than siloed reactions. This holistic approach is essential for building resilient health systems in an increasingly interconnected world.

It's essential for lowering costs, and it's essential for reaching more people.

The road ahead

Jembi's next phase will build on the momentum of the past year, guided by our Five-Year Strategy and deepened engagement with Ministries of Health around the globe, including new projects in South America.

In our new five-year strategic plan (2024–2028), Jembi is continuing our current focus on standards, interoperability and health information exchange to digital public infrastructure for health and extending it to include the "One Health" approach, acknowledging the intrinsic connection between human health, animal health and our shared environment. This integrated approach guides our work in four key areas summarised below.

FACT: DRIVING SMARTER, STRONGER ONE HEALTH SYSTEMS

F FOUNDATION:

Build strong national health data systems through health information exchange and interoperability solutions (like OpenHIM) to break down silos and create real-time, connected platforms.

A AWARENESS:

Strengthen pandemic preparedness with surveillance systems that integrate human, animal and environmental health data. Leverage tools like OpenHIM and jeMPI (now a digital public good) to align with countries' priorities and Sustainable Development Goal targets.

C CLIMATE:

Link climate and health through data integration that predicts and mitigates disease outbreaks. For example, our Ethiopia project with Grand Challenges Canada is already using environmental data to anticipate malaria risks.

T TECHNOLOGY:

Harness AI, machine learning and predictive analytics to make health systems more responsive. From the OpenHIM Climate Mediator to scalable ML pipelines, we're advancing data-driven decision-making at national and regional levels.

This approach reflects our commitment to our new positioning: "Empowering the connections that protect us all."

Our work is fundamentally about connecting people, from farmers, to doctors and veterinarians, to epidemiologists, through data systems that enable better health outcomes.

We will continue building local capacity through training and certification programmes, ensuring that digital health systems are not just implemented but also fully integrated, locally owned and positioned for future innovation.

This includes developing new certification pathways for OpenHIM and related technologies, and creating sustainable revenue streams while expanding the community of skilled practitioners.

We are also partnering with pan-african organisations, such as Health Informatics in Africa (HELINA) to deliver Fast Healthcare Interoperability (FHIR TM) training with support from HL7 International.

This roadmap lays the foundations for stronger, more resilient health systems that last – systems capable of responding to the interconnected challenges of pandemic threats, climate change and evolving public health needs.

Leadership team

Our leadership team brings decades of collective experience in digital health, software development and organisational management to our mission to strengthen health systems. Working alongside respected partners and funders across Africa and beyond, we combine technical excellence with deep contextual understanding.

Alessandro Campione, Mozambique Director Leads our largest country operation.

Jonnea Smith, Corporate Services Director – Ensuring operational excellence across our organisation.

Judith Paine, Head of Human Capital Building our talented team across multiple countries.

Dr Chris Seebregts, Founder and CEO With a PhD in medical biochemistry and an honours degree in software engineering, Chris leads Jembi and is also an honorary research associate at the University of Cape Town and an elected fellow of the International Academy of Health Sciences Informatics (IAHSI).

Wayne Naidoo, Technology Director Driving innovation in our technical solutions.

Thank you to our partners and supporters!

Our work is made possible through strategic partnerships with ministries of health, academic institutions and implementing partners across Africa and Southeast Asia, with vital support from funders dedicated to advancing digital health solutions.

GOVERNMENT MINISTRIES AND AGENCIES:

Angola Department of Defense
Botswana Ministry of Health
Cameroon Ministry of Public Health
Ethiopian Ministry of Health
Kenya Ministry of Health
Mozambique Ministry of Health
Mozambique Ministry of Justice
Rwanda Ministry of Health
Sri Lanka Ministry of Health
Western Cape Department of Health, South Africa
Zambia Ministry of Health

INTERNATIONAL ORGANISATIONS AND FUNDERS:

Centers for Disease Control and Prevention (CDC)
Country Health Information Systems and Data Use (CHISU)
COSV
Data.FI, Palladium
John Snow, Inc. (JSI)
Management Sciences for Health (MSH)
USAID

IMPACT FUNDERS

Dovetail Impact Foundation
Patrick McGovern Foundation
Grand Challenges Canada

ACADEMIC AND RESEARCH INSTITUTIONS:

South African Medical Research Council
Universities of Cape Town, Pretoria, Eduardo Mondlane (Mozambique), University of Gondar (Ethiopia), and Zimbabwe

OTHER NGOS AND IMPLEMENTATION PARTNERS:

Digital Square
Health Enabled
HISP-SA
IDRC Canada
Mott MacDonald
New Legacy Digital
PATH
PEPFAR (Cameroon, Ethiopia, Mozambique, Rwanda, US)
PEPFAR TAP
Reach Digital Health
Regenstrief Institute
The Health Foundation
Turn.io
Unicef
Vital Strategies
Vital Wave

TECHNICAL COMMUNITIES AND NETWORKS:

OpenHIE
OpenCRVS
OpenMRS

LOCAL ORGANISATIONS:

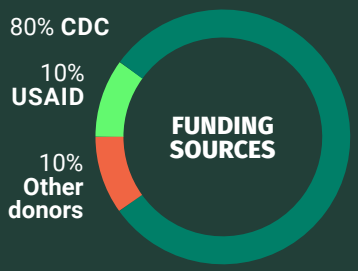
FACT Zimbabwe (Family AIDS Caring Trust)
QT System (Rwanda)
Saudigitus (Mozambique)

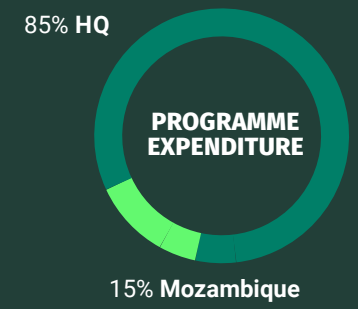
For more, refer to our full Financial Report

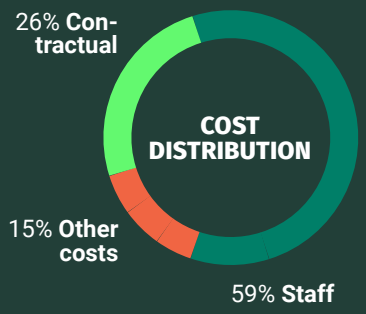
Financial summary

Jembi has achieved 15 years of unqualified statutory audits with no material findings, 14 years of unqualified CDC audits, and 10 years of unqualified USAID audits – all without a single material finding.

This exceptional track record positions Jembi as a trusted steward of donor funds, demonstrating our ability to manage large-scale grants and contracts with integrity and compliance across Africa and further afield. As we move to replace USG funding, this record strengthens our hand in forging new, diversified partnerships for the next era of growth.







KEY FINANCIAL INDICATORS

TOTAL INCOME
R139.2 M
+12% from 2023/24

TOTAL EXPENDITURE
R139.6 M
+11% from 2023/24

STAFF COUNT
80
49 in South Africa, 31 in Mozambique

RESERVES INCREASE
R1.9 M
from interest earned

FINANCIAL CHALLENGES AND OPPORTUNITIES

11% reduction in USAID funding (January 2025) → Diversifying funding sources

Uncertainty for CDC funding post-September 2025 → Streamlining operations and refocusing strategy

This visual summary highlights Jembi's financial position for FY2024/25, showing healthy growth despite funding challenges. The organisation maintains a balanced approach with staff and contractual resources, which enables flexibility in programme delivery.

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