

Primary Care International will be closing at the end of March 2026.

This has been a difficult decision. PCI has been a small organisation with a global footprint. Working alongside governments, multilateral agencies, and local partners, it has supported primary healthcare strengthening across diverse and often challenging contexts. This work has been delivered by a highly skilled, practitioner-led team, grounded in a shared commitment to people-centred care.

Over its lifetime, PCI worked in nearly 30 countries across Africa, the Middle East, Asia, and the Caribbean. It reached over 10,000 primary healthcare workers through training, mentoring, and learning programmes; developed hundreds of hours of training content and multiple nationally adopted clinical guidelines; and partnered with, and was trusted by, organisations such as WHO, UNHCR, Save the Children, GiZ, IRC, and national Ministries of Health. Through its work, PCI supported measurable improvements in knowledge, confidence, and system capacity within primary healthcare services, often in limited resource and humanitarian contexts.

These achievements reflect the commitment, professionalism, and care of the people who shaped PCI's work staff, associates, partners, and funders alike. We are proud of what we have built together.

PCI is closing not because the work is no longer needed, nor because it failed to deliver impact, but because of conditions that make it increasingly difficult for small, specialist organisations to survive. Small organisations are required to carry the same administrative and procedural burden as far larger ones, while operating with a fraction of the internal capacity and unrestricted funding. The resources needed to comply can outweigh what is reasonable or sustainable, diverting focus away from delivery, learning, and impact.

This is not simply a funding issue. It is a systems issue.

Importantly, it is also one that can be addressed. The challenges PCI has faced point to the need for funding and governance models that are genuinely aligned with the principles of localisation and sustainability, models that recognise the value of small, trusted organisations and enable them to focus on impact rather than survival.

PCI's closure reflects a wider reality across the sector: organisations are closing not because their work is ineffective or unwanted, but because funding and regulatory structures have not yet caught up with their stated intentions. We hope this moment contributes to a more honest and constructive conversation about reform and how organisations like PCI can be better supported to thrive.

PCI has invested in ensuring its learning and values continue beyond closure. The PCI Academy will carry forward under new stewardship within Amref Health Africa, preserving the knowledge and approach that defined PCI's work.