



ENTREPRENEURSHIP AND INNOVATION ECOSYSTEMS IN THE PATIENT EXPERIENCE: A REVIEW OF THE AFRICAN CONTEXT

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SUMMARY

Introduction

In the current healthcare context in Africa, numerous challenges remain to be addressed, including limited access to services, disparities in the quality of care, and inequalities in health outcomes. Furthermore, the lack of innovative business models capable of responding to the diverse and evolving needs of patients represents a major obstacle. This situation highlights the need to further integrate the patient's experience into the design of healthcare services, which could transform traditional business models by incorporating a human-centered and experiential dimension.

Material and methods

A systematic review of the existing literature was conducted to identify and synthesize the main contributions in this field.

Results

We examined the fundamental principles of a business model that emphasizes patient experience, particularly in the healthcare sector in Africa. We also explored the factors influencing the economic functioning of these experience-based healthcare services. In addition, we analyzed the different ways in which these services are organized and marketed. Finally, we assessed how key performance indicators relate to various components of the experience-driven business model in healthcare.

Conclusions

A theoretical framework will be developed to clarify the experiential business model and its implications for healthcare stakeholders, particularly regarding its design, promotion, and implementation.

Keywords

Business models, patient experience, healthcare, Africa.

ECOSISTEME ANTREPRENORIALE ȘI DE INOVARE ÎN EXPERIENȚA PACIENTULUI DIN AFRICA: REVIU SISTEMATIC

Introducere

În contextul actual al sistemului de sănătate din Africa, există numeroase provocări care trebuie abordate. Acestea includ accesul limitat la servicii, disparități în calitatea îngrijirii și inegalități în rezultatele de sănătate. În plus, lipsa unor modele de afaceri inovatoare, capabile să răspundă diverselor nevoi în continuă schimbare ale pacienților, reprezintă un obstacol major. Această situație evidențiază necesitatea integrării mai profunde a experienței pacientului în proiectarea serviciilor medicale, ceea ce ar putea duce la transformarea modelelor tradiționale de afaceri prin includerea unei dimensiuni centrate pe om și pe experiență.

Material și metode

A fost realizată o revizuire sistematică a literaturii existente pentru identificarea și sintetizarea principalelor contribuții în acest domeniu.

Rezultate

Au fost studiate principiile fundamentale ale unui model de afaceri care pune accent pe experiența pacientului, în special în sectorul sănătății din Africa. De asemenea, au fost analizați factorii care influențează funcționarea economică a acestor servicii medicale bazate pe experiență. În plus, am examinat diferite modalități de organizare și promovare a acestor servicii. În final, am analizat modul în care indicatorii cheie de performanță se raportează la diferite componente ale modelului de afaceri axat pe experiență în domeniul sănătății.

Concluzii

Va fi elaborat un cadru teoretic pentru a clarifica modelul de afaceri bazat pe experiență și implicațiile acestuia pentru „actorii” din domeniul sănătății, în special în ceea ce privește proiectarea, promovarea și implementarea.

Cuvinte-cheie

modele de afaceri, experiența pacientului, servicii medicale, Africa.

INTRODUCTION

Over the past few decades, the concept of *patient experience* has undergone substantial evolution within healthcare systems worldwide. As noted by Wolf, this transformation has progressed from a rudimentary measure of satisfaction to a holistic approach encompassing the emotional, social, and behavioral dimensions of the care journey (1). Giebel *et al.* further emphasize that this shift represents a paradigm change in which patient-centered care has become a foundational element of organizational strategies in healthcare (2).

The Experiential Business Model (EBM) represents a substantial conceptual innovation in the management of healthcare organizations, going beyond conventional approaches by prioritizing value co-creation and emotional engagement at the heart of organizational strategy. In the healthcare sector, Busch *et al.* demonstrate that this model can significantly improve the quality of care while optimizing operational efficiency (3). The integration of Biomedical Engineering Institutes (BIIs) into healthcare facilities, as explained by (4), facilitates the development of personalized experiences that enhance patient engagement and improve clinical outcomes. The African context presents particularities that require specific adaptation of the EAR (Enterprise Application Archive). Maphumulo & Bhengu, highlight the structural and contextual challenges facing African healthcare systems that negatively affect patient experience (5). In South Africa, there is a pronounced gap between the satisfaction levels of private and public providers, as shown by (6). Cultural dynamics also have an impact on interactions, with some people feeling marginalized, fostering mistrust and discouraging them from seeking care (7). Understanding patients' experiences is essential to improving healthcare delivery in Africa. In addition, the public health sector faces inadequate funding, poor infrastructure and a shortage of qualified staff.

The limited adoption of the EBM across the continent raises important questions regarding its contextual adaptation and the mechanisms required to overcome barriers to its implementation. Within this framework, the present study seeks to explore the potential of the experiential business model in African healthcare, based on a systematic review of the existing literature. The analysis aims to identify strategic levers and adjustments necessary for integrating this model into environments as diverse and complex as those found in Africa. This reframing encourages healthcare systems to position themselves as facilitators of holistic care experiences, thereby fostering trust between patients and providers while strengthening the overall healthcare ecosystem.

The main contributions of this article are as follows: first, it examines the conceptual foundations of patient experience, its transformation through innovation, the role of entrepreneurial ecosystems, and the defining features of experiential business models. Second, it details the methodological approach, which involves a systematic literature review. Finally, it presents results and proposes concrete strategies for clarifying the experiential business model and its implications for healthcare stakeholders. The overarching objective is to enrich the body of knowledge on integrating patient experience into healthcare services in Africa, with the aim of fostering patient loyalty. The findings underscore the need for innovative business models that prioritize human-centered approaches and seek to transform conventional practices in the healthcare sector.

MATERIAL AND METHODS

SYSTEMATIC LITERATURE REVIEW

The aim of this *Systematic Literature Review* (SLR) is to develop comprehensive and coherent theoretical concepts. This objective is pursued through the synthesis of existing evidence and the identification of methodological gaps in prior research. The study will commence with a descriptive analysis, followed by a qualitative analysis that examines the thematic patterns present in the literature. This approach is intended to identify critical variables rather than merely grouping findings into broad thematic categories, thereby providing a stronger analytical foundation. Furthermore, the review will adopt an integrated perspective on patient experience and the patient journey, while also examining emerging technologies and innovations in the field. Finally, strategies to minimize the risk of bias will be outlined.

ARTICLE SELECTION PROTOCOL

In this study, primary literature was collected using the Web of Science (WOS) database. The WOS database is widely regarded as one of the most comprehensive and reliable academic databases, incorporating a wide range of renowned publishers and journals. To ensure the relevance of the information collected, emphasis was placed on journal articles, as they are considered to provide more in-depth and impactful research than conference proceedings (10).

The selection process was carried out meticulously in three stages. First, we conducted a search using specific search terms. These search terms included expressions such as:

("Business model" OR "Commercial strategy" AND "digital transformation" OR "innovation" AND "Healthcare" OR "Medical care" AND "Patient experience" OR "Patient journey" AND "Africa" OR "continent of Africa")

Only articles published in journals specializing in patient experience were selected. In the subsequent step, the selection was refined by reviewing abstracts, with particular attention to studies addressing strategic issues. This process yielded a total of 60 articles. In the third phase, exclusion criteria were applied following a comprehensive review of the full texts. This phase resulted in the retention of 28 articles (Tab. 1).

Table 1. Results filtering process.

Step	Action	Results
Initial search	Keyword search with equation	80 850 documents identified
Filter by domain	Limited to Business, Management, Economics, Social Sciences	10,901documents
Filter by document type	Limited to items	998 documents
Filter by language	Limited to articles in English	960 documents
Filter by access	Limited to open access articles	775 documents
Filter by citations	Selection of the most quoted articles	28 documents

CODING AND ANALYSIS TECHNIQUE

After identifying 28 articles that met the sample selection criteria, the data were processed using NVivo 15. A thematic analysis was performed to identify critical variables related to the business model, the healthcare sector, and the patient experience. These variables were subsequently classified into themes and incorporated into a conceptual framework (3, 10). The results were strengthened by situating them within a clearly defined conceptual framework grounded in well-established theoretical foundations from the existing literature.

The analytical process comprised the following steps:

1. **Idea generation from primary studies.** In this stage, the significant findings from each reviewed article were identified and documented.
2. **Data coding, synthesis, and simplification.** Recurring patterns and themes were identified through systematic analysis of results with similar contexts and concepts. Findings were organized according to a predefined coding system, which facilitated the grouping of results and the subsequent identification of themes. Keywords encapsulating these findings were then extracted.
3. **Development of a contextual framework.** Based on the initial literature, a contextual framework was formulated and organized into three components: the design, promotion, and practices of the experiential healthcare business model.

RESULTS

DESCRIPTIVE ANALYSIS

The annual distribution of publications (Fig. 1) reveals a marked upward trend beginning in 2022, peaking at seven publications in 2023 – the highest level of activity in the corpus. Although 2024 recorded a slight decline, publication levels remained relatively high.

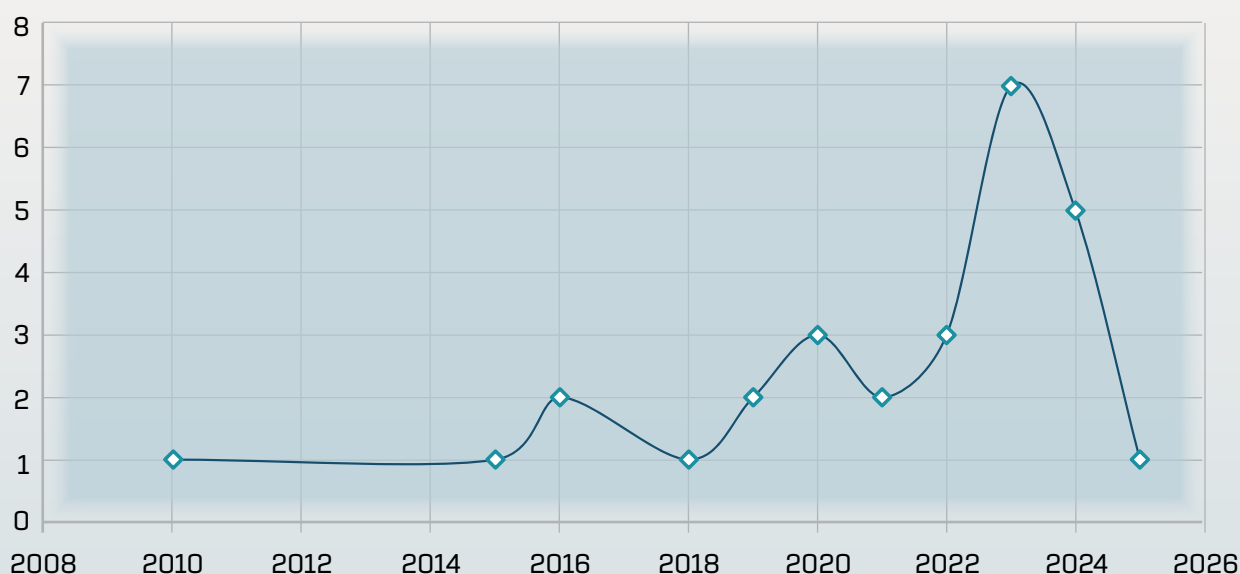


Figure 1. The visualization shows the number of publications published each year.

TYPES OF REFERENCES

The distribution of the 28 references by type is shown in fig.2. Articles were the main source of information for our literature review, accounting for 71% of the total. The other references were book chapters (11%) and conference papers (17%).

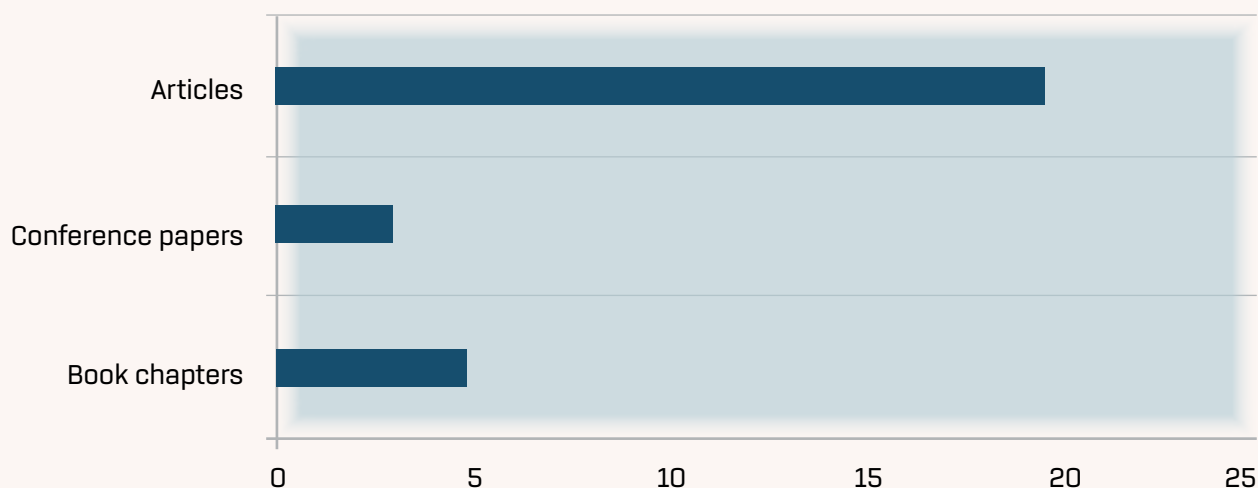


Figure 2. The types of references.

PUBLICATION SOURCES

The table below presents the main journals in which the selected sources were published. Most articles appeared in management and public health journals, suggesting that these are the preferred venues for research on entrepreneurship and innovation ecosystems in the context of patient experience. According to the data, 60% of studies on experiential business models were published across 17 different journals classified in the “other” category (Tab. 2), indicating that research on this topic is dispersed across a broad range of specialized publications.

Table 2. Distribution of references by journal title.

Journal Title	Number of corresponding sources	%
Journal of Contemporary Management Issues	1	3%
Technovation	2	7%
Journal of best practices in health professions diversity	1	3%
Journal of the Division of Health Psychology	1	3%
International Journal of Person-Centered Medicine	1	3%
Applied Nursing Research	1	3%
Revue Management & Avenir	2	7%
Journal of Business Venturing Insights	1	3%
Journal of Supply Chain Management Science	1	3%
Others	17	60%
Total	28	100%

QUALITATIVE ANALYSIS

Issues and Challenges in the Healthcare Sector in Africa

Despite notable progress achieved in recent years, the African continent continues to face structural and systemic barriers that hinder the optimal development of its health sector (Tab. 3). A key challenge is the lack of universal access to healthcare, particularly in rural areas where medical infrastructure is often inadequate or under-equipped and the availability of qualified personnel remains critically low (11). Continuity of care for discharged patients is another persistent problem, exacerbated by insufficient follow-up and poor coordination across different levels of the health system (12, 13).

These difficulties are further compounded by widespread socioeconomic constraints (12). Poverty, low levels of education, and geographic isolation – especially in remote areas – limit access to healthcare services and reduce the capacity of individuals to adopt health-promoting behaviors (12). Moreover, healthcare providers, often overworked, operate under chronic shortages of material and human resources, diminishing their ability to meet the increasing needs of patients (14).

The consequences of these challenges are significant, including patient attrition, rising antimicrobial resistance, and dissatisfaction among both patients and providers (12, 15). Addressing these multifaceted issues requires comprehensive and innovative strategies aimed at improving equity, accessibility, and sustainability within African health systems (16). In this context, the development of public-private partnerships and the promotion of inter-institutional collaboration are essential. Table 3 summarizes the main challenges and the corresponding solutions proposed for the healthcare sector across the continent (17).

Table 3. Synthesis of challenges and proposed solutions.

Identified Challenges	Proposed Solutions	References
Limited access to healthcare infrastructure	Optimized healthcare infrastructure planning and affordable technologies	(11)
Insufficient continuity of care post-hospitalization	Development of personalized treatment plans and active patient engagement	(12, 13).
Socio-economic constraints (poverty, isolation)	Cross-subsidy models to ensure equity in healthcare access	(12, 16)
Overburdened healthcare providers	Organizational innovation (Entrepre Nursing) and capacity building	(14, 17)
Weak interinstitutional collaboration	Public-private partnerships and interinstitutional collaborations	(14, 18)

Transforming the Patient Experience through Healthcare Innovation in Africa

Designing innovative, patient-centered solutions for healthcare in Africa requires a holistic approach that emphasizes collaboration and patient engagement (18). A key strategy involves leveraging digital health technologies to broaden patient access to healthcare services. Telemedicine, for instance, has emerged as a transformative solution by enabling remote consultations and overcoming barriers commonly encountered in traditional healthcare delivery systems. This innovation not only enhances accessibility but also appeals to patients who prioritize convenience and efficiency throughout their care journey (19).

Another promising avenue for innovation is the integration of patient feedback mechanisms within healthcare settings. Utilizing patient-reported outcome measures (PROMs) alongside patient-reported experience measures (PREMs) ensures that patients' perspectives are incorporated into care delivery, aligning services more closely with their expectations and preferences (Tab. 4). Such engagement empowers patients to take greater ownership of their care, leading to improved satisfaction and clinical outcomes (20).

Moreover, healthcare organizations should promote co-creation processes involving patients from the initial stages of product and service development. Collaborations with patient advocacy groups and other stakeholders across the healthcare ecosystem help ensure that innovations effectively address patients' real-world challenges. Participatory approaches have demonstrated enhanced relevance and efficacy, thereby reducing the risk of developing solutions that fail to meet actual needs (21).

Finally, embedding innovations within value-based healthcare business models can better align incentives between providers and patients. For example, implementing reimbursement models tied to performance metrics linked to patient satisfaction encourages providers to prioritize high-quality, patient-centered care while optimizing operational efficiency (19, 21).

By adopting these innovative strategies, African healthcare systems can substantially enhance the patient experience while addressing persistent gaps in service delivery.

Table 4. The aspects and implications of patient experience through innovation.

Authors	Aspect	Description	Implication
(Sodiq Odetunde Babatunde, 2024)	Digital health technologies	Tools to expand patient access to healthcare services	These innovations not only improve accessibility, but also resonate with patients who prioritize convenience and efficiency in their healthcare journey.
(Fernandes et al., 2020).	Patient feedback mechanisms	Using patient-reported outcome measures (PROMs) as well as experience measures (PREMs),	This type of commitment allows patients to take ownership of their care pathway.
(Glover et al., 2024)	Co-creation between companies in the sector	Partnering with patient advocacy groups and stakeholders across the healthcare ecosystem	Innovators can ensure that the solutions they develop directly address the real challenges faced by patients.
(Sodiq Odetunde Babatunde, 2024)	Integrating innovations into business models	A substantial conceptual innovation in the management of healthcare organizations	The implementation of models that incorporate reimbursements based on performance directly linked to patient satisfaction measures.

CHARACTERISTICS OF EXPERIENTIAL BUSINESS MODELS

In healthcare, experiential business models seek to create value by comprehensively understanding patients' needs and preferences. These frameworks emphasize patient engagement through systematic feedback mechanisms, which enhance satisfaction and health outcomes. Unlike traditional transaction-based models, experiential models provide holistic experiences that promote overall well-being.

Technology plays a crucial role in enabling personalized care delivery, with services such as telemedicine allowing patients to consult providers remotely, thereby meeting growing demands for convenience and accessibility. These models frequently adopt community-focused strategies tailored to local healthcare needs. For example, Philips' Community Life Centers in Africa demonstrate how experiential models can effectively engage communities to provide essential healthcare services in a cost-efficient manner (22). By focusing on specific contexts and leveraging available resources, such innovations help bridge gaps in healthcare access.

Moreover, experiential business models foster collaboration among diverse stakeholders within the healthcare ecosystem. Partnerships between providers, technology companies, and patients facilitate information exchange and resource sharing, which are vital for driving innovation and enhancing service delivery.

Additionally, these models often incorporate varied payment structures that align incentives among stakeholders, shifting from fee-for-service toward value-based care paradigms. This transition encourages an emphasis on patient outcomes rather than volume of services rendered (19, 22).

LEVERS OF THE EXPERIENTIAL HEALTHCARE BUSINESS MODEL

The experiential business model centers on creating enriching experiences for all stakeholders, including patients, providers, and healthcare institutions. Its primary objective is to optimize interactions among these groups to enhance satisfaction and improve healthcare outcomes (6, 23). This model emphasizes a patient-centric approach that encompasses engagement, education, and support alongside traditional care delivery (23, 24).

Enhancing the quality of communication between patients and healthcare professionals is essential to strengthening patient-centered care (25–27), improving understanding of patient needs, and encouraging active patient involvement in co-constructing their care pathways (28–30). Developing strategies tailored to specific patient needs, such as personalized treatment plans, is crucial for delivering holistic, customized care that increases patient satisfaction while optimizing clinical outcomes (14, 22, 31).

Integrating people-centered approaches within healthcare systems has been identified as a key strategy to elevate care quality and foster lasting trust between patients and providers. In terms of organizational innovation, fostering innovative behaviors among healthcare professionals – such as Entrepreneur Nursing, which promotes entrepreneurial spirit in nursing – is imperative (17, 31). This approach stimulates creativity and the implementation of novel solutions to address challenges faced by the healthcare sector.

Moreover, the integration of technological tools acts as a strategic catalyst for improving both access to and the quality of healthcare services. As noted by Al-Bader *et al.*, innovation models based on affordable technologies play a pivotal role in transforming healthcare systems, particularly in settings marked by limited organizational efficiency and inequitable healthcare access (18, 32).

Finally, inter-institutional collaborations – especially strategic partnerships among hospitals, community clinics, and private entities – are recognized as crucial mechanisms for optimizing resource utilization and expanding healthcare coverage (14, 32).

DIMENSIONS OF THE EXPERIENTIAL HEALTHCARE BUSINESS MODEL

Design

This study began with a comprehensive review of existing literature on business models in the healthcare sector, drawing upon seminal works such as those by (19, 24, 32). In addition to the literature review, direct observations and in-depth discussions were conducted with key stakeholders, including local health authorities, administrators, hospital Information Technology (IT) directors, general practitioners, and pharmacists, following the recommendations of (25, 32).

The literature review revealed that much of the existing research either remains at a relatively abstract level – for example, the business model frameworks proposed by (26, 32) – or focuses on very specific aspects, as noted by the European Commission (2011). Notably, there is a scarcity of studies providing in-depth analyses of common business logic models. Similarly, in practice, we observed a lack of robust conceptual approaches to business design.

To address this gap, we broadened our perspective on e-health business models by exploring general business logic derived from e-commerce, which enabled a deeper understanding through field-based discussions. To illustrate the practical application of business design models in e-health, we selected three specific design models for detailed analysis.

Promotion

As noted by Garcia *et al.* (27), health promotion and therapeutic education – rooted in care practices – have reached a significant stage of maturity. Concurrently, over the past two decades, new perspectives from patients, relatives, and users have introduced innovative practices into the field (27, 32). This evolving dynamic warrants further exploration to deepen understanding of its theoretical and practical dimensions.

Health promotion plays a crucial role in both individual and collective development by providing valuable information, delivering appropriate education, and strengthening essential daily life skills (3, 16, 32). Such efforts empower individuals to take control of their health and make informed decisions that promote well-being. Encouraging lifelong learning by supporting patients, their families, and other users is essential to help them navigate various life stages with confidence and peace of mind. Given its rapid expansion, this dynamic area merits continued investigation to enhance comprehension of its foundational theories and practical applications.

Practices

Free Healthcare Initiatives and Specialized Service Models in South Africa

Initiatives such as “Free healthcare for pregnant women and children under six” and “Universal access to primary healthcare for all South Africans” illustrate a shift in health system priorities – from focusing on the construction of physical infrastructure to emphasizing the activities and services delivered within these facilities. Increasingly, patients’ perspectives are being incorporated into policy-making processes.

In some cases, a variant of the healthcare business model takes the form of specialist care, where hospitals concentrate on specific services – such as cataract surgery or cardiac care – thereby achieving high levels of efficiency and optimizing staff utilization (3, 16, 32). These facilities play a pivotal role in healthcare development by providing accessible services to large populations (Fig. 3). High staff productivity and the ability to maintain reasonable pricing contribute to the affordability of these services.

However, in sub-Saharan Africa, hospitals employing cross-subsidy models face growth constraints due to the limited number of patients who can afford high-quality care. In response, many healthcare facilities are increasingly adopting cross-subsidy business models as a strategic solution. These models enable hospitals to adjust fees according to patients' financial capacity, distributing operational costs across a larger patient base. Patients with higher incomes may access enhanced services, such as comfortable waiting areas, private rooms, and expedited booking, while lower-income patients benefit from reduced fees that are critical for accessing essential care.

A notable example of innovation in healthcare delivery can be found in Tsilitwa, a rural town in South Africa's Eastern Cape. The Tsilitwa clinic serves approximately 10,000 patients but operates without an on-site physician; the nearest hospital with available doctors is over 15 km away, and the absence of direct transport further limits healthcare access (9, 28, 32). To address this challenge, South Africa's Centre for Scientific and Industrial Research, in collaboration with the University of Cape Town's Department of Informatics, implemented a telemedicine initiative using wireless internet technology. This system enables nurses to transmit medical images to doctors in real time, facilitating remote consultations and significantly improving access to medical expertise.



Figure 3. Synthesis of experiential healthcare business model.

Indicator clusters

In this section, we present the result of cluster coding similarity in Nvivo 15, using Pearson's correlation coefficient. This is a method for detecting any similarity in indicators between Dimensions of the experiential business model (Tab.5).

Table 5. Top 7 common indicators.

Indicators	E-commerce	Therapeutic education	Health accessible	Costs	Co-creation	Ecosystem	Patient opinion
Conception	21	2	1	9	5	12	14
Promotion	8	24	3	7	1	4	6
Pratiques	0	1	17	3	2	1	4

In order to gain a better understanding of the indicators used in the literature on the experiential economic model, we attempted, in the third stage of processing the indicators, to classify them into 7 categories, namely e-commerce, therapeutic education, health accessible, costs, co-creation, ecosystem, Patient opinion. (Fig. 4) shows the frequency of these categories in the dimensions included in the sample. In e-commerce, Therapeutic education is the most frequent. In fact, they have a positive impact on business performance (29, 32). And they have a positive effect on the value of patient experiences (30, 32) and on the two main stakeholders: entrepreneurs and patients, improving the environmental management of a healthcare center can be achieved through the appropriate allocation of economic, human and financial resources.



Figure 4. Categories frequency by dimension.

DISCUSSIONS

Our study underscores the critical role of healthcare innovators in enhancing the patient experience, particularly in resource-constrained regions such as Africa (7, 32). Concrete actions are required to encourage these stakeholders to develop innovative solutions aimed at improving both the quality of care and patient satisfaction. Entrepreneurs are encouraged to leverage technological advances to create platforms that facilitate communication between patients and healthcare professionals. Digital health innovations – such as telemedicine and mobile applications – offer substantial opportunities to expand access to care in underserved communities, enabling remote consultations and follow-up services, thereby overcoming geographical barriers (30, 32).

Incorporating patient feedback into service design is fundamental to developing effective care solutions. Actively involving patients in the development process fosters trust and loyalty, granting them a participatory role throughout their care journey. Collaboration with established healthcare providers can further strengthen service quality. Start-ups should explore strategic partnerships to share best practices, provide team training, and ensure standardized patient management, thereby optimizing the use of available resources.

Investment in data analytics represents another strategic lever for improving the patient experience. The use of big data enables a deeper understanding of patient behavior and treatment outcomes, allowing for more personalized interventions that can enhance both clinical results and patient satisfaction. Addressing systemic inequalities within healthcare systems is equally essential for sustainable progress. Initiatives targeted at marginalized populations – including individuals with disabilities and those in remote areas – are crucial to promoting equitable access to care (22, 32).

However, current research on entrepreneurship and innovation ecosystems in the patient experience reveals several notable gaps. One such gap is the

limited exploration of how innovation can be strategically harnessed within entrepreneurial models. While a substantial body of literature examines the application of innovation to patient experience and customer engagement, there remains a need for further research on tailoring innovation to foster brand loyalty at the territorial level and effectively engage local populations. Moreover, the relationship between entrepreneurship and patient loyalty is insufficiently understood (32).

This study contributes to addressing these gaps by exploring the integration of entrepreneurship and innovation ecosystems into the patient experience within the African healthcare context. It examines the challenges of limited access, disparities in care quality, and the need for innovative business models that prioritize human-centered approaches (6, 32). By focusing on inpatient clinical pathways, it synthesizes evidence from randomized controlled trials to provide actionable insights for improving both patient experience and outcomes in African healthcare settings.

Finally, building networks among innovative actors in the healthcare sector will strengthen the entrepreneurial ecosystem. Collaborative platforms for sharing challenges and successes can foster collective advancement while opening opportunities for mentorship and funding – both essential to supporting the development of sustainable businesses dedicated to improving the patient experience across Africa.

CONCLUSIONS

1. The potential of the Experiential Business Model (EBM) in the African healthcare sector is significant, particularly in reimagining how organizations can place patient experience and engagement at the core of their practices. However, successful implementation requires overcoming key challenges, including the fragmentation of healthcare systems, limited infrastructure funding, and the absence of governance frameworks that foster innovation.
2. For effective integration, the EBM must be tailored to local African contexts, taking into account the socio-economic, cultural, and technological factors unique to each setting. While community dynamics can serve as important positive levers, disparities in technology access – especially in rural areas – remain critical obstacles to address.
3. A phased approach, beginning with localized pilot projects, appears to be a prudent strategy for testing and refining the EBM to align with field-specific realities. This process necessitates collaborative governance supported by multisectoral partnerships involving public, private, and non-governmental stakeholders, enabling the exchange of best practices and the promotion of innovation.
4. Further applied research is needed to explore how the EBM, along with its technological components such as the Enterprise Application Repository (EAR), can be adapted to diverse environments. It is essential to examine the influence of institutional dynamics, develop reliable indicators for measuring the patient experience, and assess the contribution of digital technologies – such as telemedicine and data analytics – to optimizing the care pathway.

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