

Elucid

ANNUAL
REPORT



2025

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Opening remarks



Dear partners, friends, and supporters of Elucid,

When we founded Elucid, we started from a simple conviction: when farming families are healthy, everyone wins. Farmers stay productive. Supply chains grow more resilient. And the companies that source from these communities build a stronger foundation for their business.

Health is not a cost. It is infrastructure. 2025 has shown us just how far that conviction can carry.

This year, we launched operations in Uganda and Côte d'Ivoire, bringing Elucid's presence to six countries across three continents. We enrolled over 25,000 additional people into our programs, onboarded 63 healthcare providers, and financed more than 24,000 healthcare visits. Care that keeps farming families healthy and supply chains moving.

We also expanded the partnerships that make this work possible. We welcomed The Hershey Company, Sucafina, ETG, JDE Peet's, and Olam Agri among our new corporate partners, while deepening our work with Tony's Chocolonely, Touton, Max Felchlin AG and others. Institutional co-funders, including UBS Optimus Foundation, Bayer Foundation, Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), and DEG Impulse helped us scale and extend our work beyond the supply chain to communities.

In Côte d'Ivoire and Ghana, we extended our collaboration with Gavi, the Vaccine Alliance, to reach over 210,000 children with vaccination campaigns, while strengthening quality of care at health facilities and deploying mobile clinics to underserved communities. We also strengthened our research partnership with the Charité Center for Global Health and partner institutions in origin countries, helping build the evidence base for health as a driver of supply chain resilience.

Seeing the energy and commitment of our colleagues in the field has been one of the most rewarding parts of the year. Their work brings us close to the realities behind the data — and to the moments that show why access to care matters.

During a recent field visit to Côte d'Ivoire, a farmer told us about his child falling severely ill with complicated malaria. The whole village came to visit the family, fearing the worst. Through the Elucid program, the child received urgent medical care and recovered fully. The village came to visit again, this time to celebrate.

Sometimes that is all it takes: a program that simply delivers when it matters most.

Dr Samuel Knauss & Dr Julius Emmrich
Co-founders & Managing Directors

Elucid at a glance

Elucid at a glance

2025 marked a year of expansion, consolidation, and learning across Elucid’s programs. As our footprint grew, so did our understanding of how health programs function across different supply chain contexts.

- 3

New pillars launched as Community Health Services reaching rural communities beyond the supply chain

 - Mobile Clinics
 - Quality of care support
 - Vaccination activities
- 6

Countries of operation across Africa and Latin America

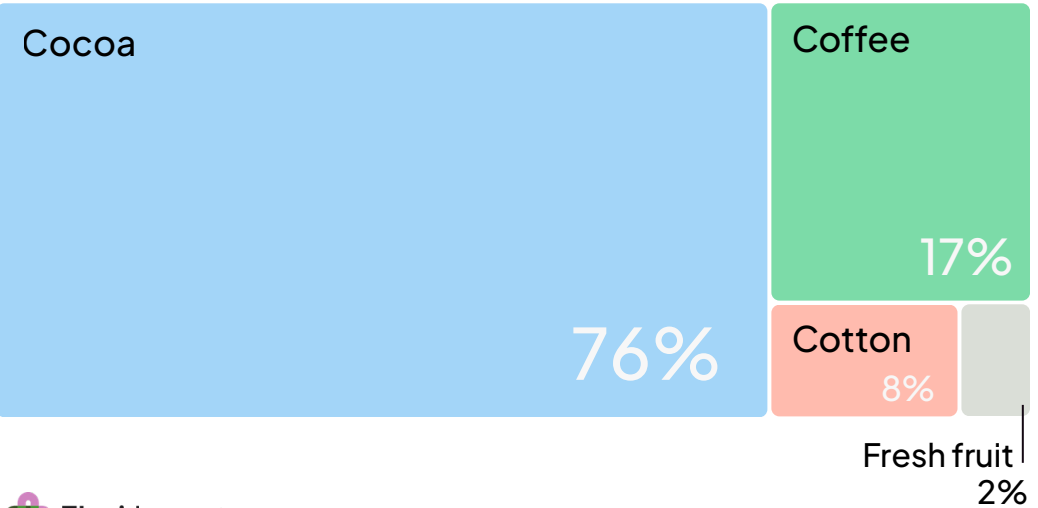
+

Expansion into Uganda and Côte d’Ivoire

[Learn more on page 28!](#)

Reach across sectors

Growing our reach in coffee supply chains, making it our largest sector after cocoa.



+ 41 k

↑ 79% INCREASE!

people benefit from better access to healthcare

129

↑ 77% INCREASE!

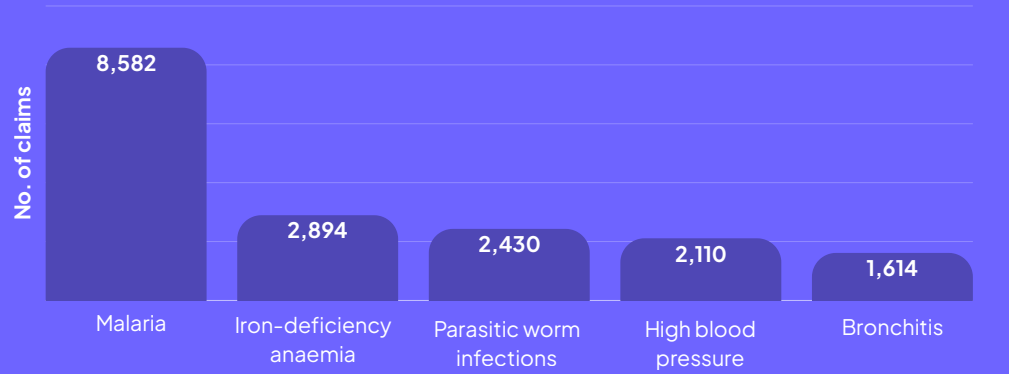
healthcare facilities in the network

+ 30 k

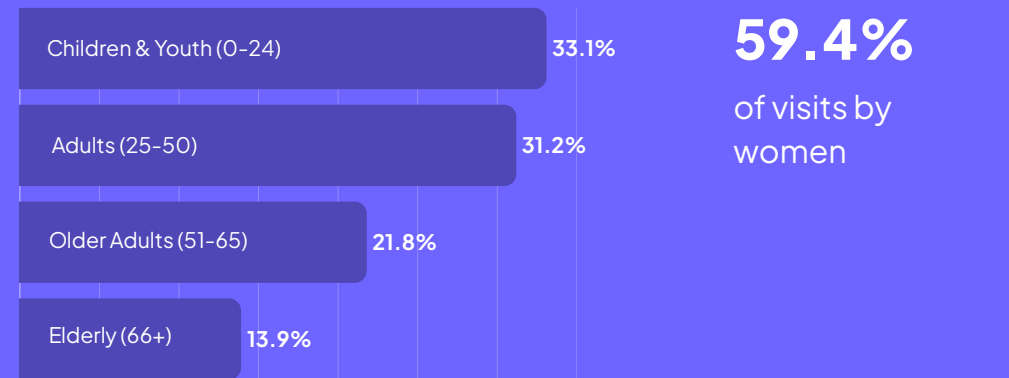
↑ 216% INCREASE!

doctor visits covered

Health needs addressed



Who’s accessing care



What the data shows

What the data shows

Across our six programs, the data shows consistently that the value of a health program is not captured at enrollment. It materializes over time — through who seeks care, how often, and the behavioral change that follows when healthcare stops being a financial risk. The patterns differ across countries, but they point in the same direction.

1 Access changes who seeks care

Women consistently access care at a higher rate than their enrollment share would predict — and the pattern holds across every country.

Across the portfolio, almost 60% of everyone who has ever received treatment is female. In Ghana and Madagascar, women account for roughly 60% of healthcare visits despite representing just over half of those enrolled. The same gap appears in Uganda and Venezuela.

It is widest among women of childbearing age: in Ghana, women account for 69% of all visits in the 18–35 age group.

When financial barriers to care are removed, women use the access they were previously often priced out of.

2 Health emergencies are also financial shocks

For farming households operating near or below living-income thresholds, a medical emergency without coverage means debt, asset sales, or foregone care. All three leave damage that does not end with recovery — to the household, and to the farm itself.

Across our programs, around half of people surveyed report that a health emergency would be very difficult to absorb without the Elucid program.*

Removing that exposure protects health. It also stabilizes the household income that keeps farmers in their supply chain.

*60 Decibels report; Ghana/Ecuador/Venezuela, 2025; CRADES evaluation, Madagascar, 2025

3 Programs at different stages produce different evidence

The evidence a program generates depends on its maturity. Year 1 builds the operational foundation: identifying households, activating coverage, onboarding providers, and removing first barriers to access. Years 2 and 3 build trust and utilization. From Year 3 onward, behavioral change becomes measurable.

Ghana and Madagascar are our longest-running programs: independent external evaluations confirm what the year-on-year utilization data has been showing — high program participant satisfaction, demonstrable health improvement, and a willingness to co-fund the program that is unusually high for the sector.

Côte d'Ivoire is in Year 1: where the focus has been on helping enrolled farming households move from limited use of national health insurance toward more practical access to care. Reducing this first access barrier is the starting point for longer-term change, with stronger healthcare utilization, shifts in household behavior, and greater financial resilience continuing to build over the coming years.

Ecuador is in Year 3: participants who have been enrolled longer report different financial behavior from those who joined more recently — they are almost four times more likely to report reinvesting in their farms than those more recently enrolled.* This suggests that sustained access to healthcare can help farming families become more financially resilient over time.

*60 Decibels report; Ghana/Ecuador/Venezuela, 2025, 41% vs 11% of participants reporting increased farm investment

What the data points toward How health access strengthens commercial relationships

Across the data, one pattern runs deeper than any single indicator: when health access is embedded in an existing supply chain relationship, it can build trust that strengthens the commercial relationship itself. Farmers do not experience Elucid health programs as standalone interventions. They experience them through the cooperative, company, or buyer already connected to their livelihoods.

That link matters. When healthcare access is delivered through an existing commercial relationship, it can strengthen enrollment, increase service use, and build trust over time. In the strongest programs, health becomes part of what makes the relationship more reliable — supporting farming households while also contributing to cooperative loyalty and supply chain continuity.



Impact across supply chains

GHANA

Four years of building access. Expanding impact.

Ghana is Elucid's most established country portfolio across multiple cocoa-growing regions through Ghana's National Health Insurance Scheme, with complementary coverage for services NHIS does not include. In 2025, the focus shifted toward deepening existing operations — onboarding a new commercial partner, expanding the service scope, and launching the first community health activities alongside the supply chain programs.



What changed in 2025

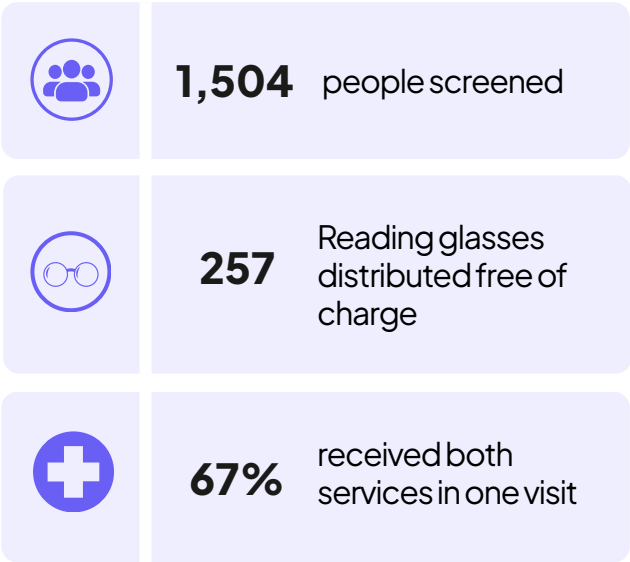
Supporting Ghana's National HPV vaccination campaign

In October 2025, we collaborated with Ghana Health Service (GHS) to support the national HPV vaccination rollout — covering vaccination team expansion, staff training, and field logistics in partner districts. The campaign reached 35,477 girls aged 9–14.



Mobile clinics for rural communities

In 2025, Elucid ran 23 mobile clinics across Kibi and Suhum in partnership with RestoringVision, Tony's Chocolonely, and co-funders UBS Optimus Foundation, Bayer Foundation, and Gavi, The Vaccine Alliance on free eye and lung screenings, eyeglasses, and treatment referrals.





257

Reading glasses distributed free of charge



67%

received both services in one visit

Target 2026:

5,000 people reached through vision screening

Welcoming Hershey as a new commercial partner

In October 2025, we officially launched our partnership with Hershey through the ECOM supply chain during a multi-stakeholder event in Assin Fosu, Ghana. The initiative expands healthcare access and strengthens local health systems for cocoa-farming communities, reinforcing the role of health as part of resilient and sustainable supply chains.

“

The health and wellbeing of cocoa families is essential to the resilience of our value chain and to improving livelihoods across cocoa growing communities.

Timothy S. McCoy

Director, Cocoa Partnerships, Hershey Trading GmbH



Key figures

5

active programs in
the cocoa supply
chain

61%

women accessed
healthcare visits

51%

of enrolled supply
chain members are
women

33%

of enrolled household
members are children
(≤15)

What stands out

Ghana shows the strongest and most established healthcare utilization across our programs. In 2025, the systems we built for enrolled farmers became a platform for something larger — vaccination campaigns, mobile clinics, and quality-of-care work now serving the wider community. The move into Community Health Services is a turning point, showing that infrastructure built around a single group can extend its reach to an entire community.

“

During my pregnancy, the Elucid card covered everything — all hospital visits, my cesarean section, and prescribed medications. I had already planned to borrow money. However, thanks to this card, I didn't need to borrow a single pesewa. (Ghanaian currency)

Monica Nti,

Cocoa farmer, Ahafo region, Ghana



Partners:



MADAGASCAR

Expanding access in hard-to-reach communities

In 2025, Madagascar's cocoa program in the Sambirano Valley expanded significantly. By the end of 2025, it nearly doubled compared to 2024, allowing new farmers and their families to join the program. Around 98% of cocoa farming households had no health insurance when this program began. For most, a serious illness meant one of three things: borrowing from family, selling assets, or going without care and risking death from often preventable diseases.

Madagascar is where we learned that enrollment alone does not solve the problem when healthcare remains physically out of reach. To solve this, we introduced mobile health clinics — teams from partner health centres travelling directly into farming communities with medicines and equipment, organized jointly with the Ministry of Health district office.



Key figures

1

active program in
the cocoa supply
chain

92%

had never accessed
similar health services
before Elucid*

94%

report better quality
of health services*

74%

would struggle to
cover a health
emergency without
Elucid*

52%

of enrolled
supply chain
members are
women

43%

of enrolled
household
members are
children (≤ 15)

60%

women
accessed
healthcare
visits

*CRADES evaluation, Madagascar, 2025

What stands out

From hesitation to advocacy

After some initial hesitation, participants are now talking openly about the program with their neighbours. They are sharing what care they received, what they paid, and what costs they avoided — encouraging others to seek care when they fall ill.

Health as loyalty driver

Nearly half of farmers rank health programs among their top two reasons for selling to their cooperative — behind price, but ahead of community ties and training.*

*CRADES evaluation, Madagascar, 2025

“ Since we started working with Elucid the number of people coming to the health center has increased. We've also noticed a decrease in the number of patients going into debt.

Randrianantenaina Thérie

Healthcare provider at Centre de santé FANILLO, Anjiabory, Madagascar



Partners:



CÔTE D'IVOIRE

Building the foundation for long-term access

In 2025, Elucid expanded to Côte d'Ivoire, launching two programs simultaneously across two sectors and building a local team of 30 from scratch.

Côte d'Ivoire is the world's largest cocoa producer, but in many farming communities, national health insurance (the Couverture Maladie Universelle - CMU) still does not translate into actual access to care. Across both programs, we focused on closing that gap: making sure national health insurance translated into actual access to care for farming households.



What stands out

Facilitating CMU registration

Most farmers had never successfully navigated CMU registration before the program began. Year 1 work focused on identifying uncovered households, facilitating registration, and integrating CMU into the program's coverage model. Within 12 months, active coverage moved from 2% to 54% of enrolled households.

Blended finance, built with the public health system

Côte d'Ivoire is the first country where Elucid's model brought together commercial supply chain investment, bilateral development funding, and multilateral health co-investment from the start. Rather than adding these layers over time, Elucid co-designed the program with public health actors and partners around a shared goal: improving access to healthcare for farming communities while strengthening the system that serves them.

Community health partnership with Gavi

We secured agreements with 31 public health facilities and prepared Mobile Medical Units for Q1 2026 launch. Over the next three years, the program is expected to reach 170,000 children with routine vaccines as well as vaccines against malaria and human papillomavirus (HPV), which helps prevent cervical cancer, one of the most common cancers in women.

“ We need to go to the hospital immediately. It is a reality: this project offers us easy access to healthcare.

Koukou Yao Frédéric

Cocoa farmer, Lôh-Djiboua region,
Côte d'Ivoire

“ I often witness serious cases of illness that lead to the death of the patient due to a lack of resources. I take this role very seriously — I see it as a mission.

Donafologo Marc Soro

Community Engagement Agent and farmer



Key figures

2

active programs in
the cotton and
cocoa supply chain

30

team members
joined

43%

of enrolled supply
chain members are
women

36%

of enrolled household
members are children
(≤15)

99%

of cocoa farming households
in Gôh-Djiboua region paying
entirely out of pocket at
baseline*

*Baseline survey, in Gôh-Djiboua region, 2025, n=663

“ The insights Elucid provides helps us strengthen our child labor risk model & living income strategy — It's becoming part of our core business.

Julie McBride

Senior Sourcing Specialist Human Rights, Tony's Chocolonely

Partners:



UGANDA

Launching a cooperative co-financed model

In 2025, Elucid also launched in Uganda, marking our first entry into the coffee sector in Sub-Saharan Africa. By the end of the year, two coffee supply chain programs and one feasibility study were underway, laying the foundation for program expansion.



What stands out

Built with the cooperative

The Ankole Coffee Producers Cooperative Union (ACPCU) joined Elucid's first program in Uganda as a formal partner and co-funder, making the cooperative central from the start. By linking health coverage to cooperative membership, the program builds trust and encourages farmers to use available services early.

Growing through sector recognition

Winning the SCTA Next Generation Sustainability Prize for innovative healthcare design in coffee in 2024 set an early marker for the program. The Happel Foundation and Partners Group joined as co-funders in 2025 — bringing additional support as the program moved into its first full year of operations.

Launched in a context of limited alternatives

Over 50% of surveyed coffee-farming households reported losing nearly a week of productive labor time due to illness, while borrowing, delayed treatment, and the sale of livestock or crops were common ways of covering healthcare costs. With Uganda's National Health Insurance Scheme still unimplemented, the findings highlighted the limited healthcare protection available to farming households in the region and directly shaped how the programs were developed.

“Healthcare plays a cardinal role in building market systems resilience in global trade. It awards farmers control and ownership over their crops while assuring companies of the product. Without health insurance or savings, farmers resort to mortgaging their crops or gardens and side-selling their produce to meet immediate financial demands for healthcare. These negative coping strategies distance farmers from their crops and act as the fulcrum of supply chain instability. At Elucid, our supply chain health financing model guarantees farming households access to quality, timely and integrated essential and emergency healthcare services. This fosters farmer loyalty with buyers and ensures stable, sustainable product supply.

WATCH ME!



Gratian Nareebah

Uganda Country Director at Elucid

Key figures

3

active programs in
the coffee supply
chain

86%

of coffee farming
households face
financial barriers to
healthcare*

80%

relied on borrowing
or loans to cover
healthcare costs*

74%

of surveyed people
delayed healthcare
treatment*

Nearly
50%

of farmers reported missing an
average of 11 workdays due to
illness in the past three
months*

*Baseline study, Masaka region, 2025

“ When the coffee harvest is poor — because of weather or other difficult conditions — we don't have money from coffee sales. We can't afford medical treatment.

Nduhukire Marion

Coffee farmer, ACPCU, Masaka region, Uganda

Partners:



Netherlands Enterprise Agency



ECUADOR

Into indigenous cacao supply chain

In 2025, we expanded our partnership with Max Felchlin AG in Ecuador, extending the program from the Afro-Ecuadorian coastal communities of Esmeraldas to Kichwa Indigenous communities in the Napo Amazon. The program now covers Felchlin's full cacao supply chain in Ecuador, which supplies cacao to many premium chocolatiers in Switzerland and around the world. The Amazon launch also marks Elucid's first program in an Indigenous cacao supply chain, with a delivery model co-designed with Ecuador's Ministry of Public Health.



What stands out

Expansion into the Amazon

July 2025 launch in Napo province, in partnership with the Kichwa cacao cooperative Kallari. Communities here are reached by river — some seasonally cut off by flooding — and have minimal contact with formal healthcare. The first deep-Amazon cacao operation in the portfolio.

Public health, made mobile

The model activates Ecuador's national health system rather than substitutes for it. Working with Ecuador's Ministry of Public Health at the regional level, the program established a formal arrangement: Elucid coordinates and funds mobile clinics logistics. The public system doesn't disappear — it becomes mobile, able to reach communities it otherwise cannot.

A tenure effect on reinvestment

People enrolled for two or more years are four times more likely to report reinvesting savings into their farms than newer participants* — a return on access that compounds over the contract period.

“ Here, when you get sick, there's no easy way out.

Lorena Alvarado

Cacao farmer, Puní Bocana, Ecuador



Key figures

2

active programs in
the cocoa supply
chain

50%

women accessed
healthcare visits

47%

of enrolled supply
chain members are
women

23%

of enrolled household
members are children
(≤15)

“ In Latin America, Elucid has demonstrated that health is the fundamental pillar for rural development. During 2025, our strategy focused on breaking down the barriers that most affect producers: long distances, lack of resources, and a lack of awareness of their benefits. For us, true success goes beyond the achievement of operational goals; it is measured in the peace of mind of families. By guaranteeing them private and timely medical care, we not only protect their well-being, but also their economy, ensuring that agricultural communities are stronger, safer, and more resilient.

Isaac Romero Cueva

LATAM Project Manager at Elucid



Partners:

Felchlin
SWITZERLAND

GREENYARD 

VENEZUELA

Three years of healthcare delivery

Venezuela's public health system has been under severe pressure for years, with medicine shortages, staff shortages, and limited service capacity affecting many facilities. For most farming families in the cacao communities around Lake Maracaibo, there is no functioning local health service. A medical emergency here is not just a health event. It arrives in a context where most households have no savings, no insurance, and no system to fall back on.

The program reaches these communities through mobile clinics — teams travelling into farming areas several times a year, bringing doctors, medicines, and laboratory services.



Key figures

1

active program in
the cocoa supply
chain

53%

women accessed
healthcare visits

45%

of enrolled supply
chain members are
women

29%

of enrolled
household members
are children (≤ 15)

What stands out

Meaningful expansion

In 2025, healthcare interactions grew by over sevenfold year on year, as the provider network expanded and communities increasingly understood what the program offered.

“ The fact that there is this connection between Elucid and Cacao San José (cooperative) gives a sense of trust. Because it's not just about the price — it's also about the support the company can offer to the producers. That, honestly, is priceless.

Gabriela Mujica

Cocoa farmer, La Azulita region,
Venezuela

Trust through the commercial relationship

When care arrives through the same relationship that buys a farmer's cacao, farmers are more likely to see the program as reliable, long-term support rather than a temporary intervention.

“ Honestly, I feel better because, thanks to the support received from the health area, I can buy medicines at a discount. This is a saving that helps me use that money for my crops instead. It gives me a lot of peace of mind and stability in my life because I feel less worried, knowing there is medical support, and this also benefits the agricultural area.

Male, 57

Lake Maracaibo region, Venezuela

Partners:

Felchlin
SWITZERLAND

Beyond supply chain

Community health beyond the supply chain

Extending our model

Most of our programs improve healthcare access for enrolled farming households. In 2025 we launched community health services to reach the wider rural communities around our supply chains, delivered through Elucid Health gGmbH, our non-profit subsidiary created in 2025.

How it works

Three connected activities:

01 QUALITY OF CARE

Working with existing public and private health facilities to strengthen local health facilities, support local teams to assess gaps, improve clinical processes, and build more reliable services from within.

02 MOBILE CLINICS

Mobile teams offer general consultations, maternal and child health services, eye and lung screenings, and on-site treatment, with referrals and follow-up for cases that need more.

03 VACCINATION

Before running any campaign, we map where children are being missed and why — identifying gaps, assessing barriers, and making sure the right support is in place to reach the most underserved. Campaigns target HPV and malaria and are open to all children in the area, not just those enrolled in Elucid programs.



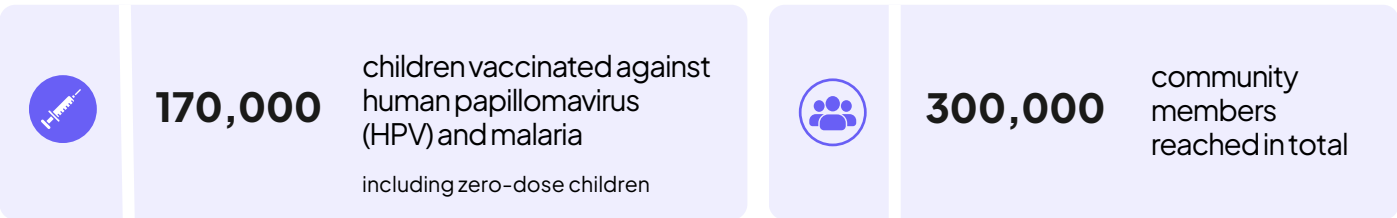
Active in Ghana and Côte d'Ivoire. Coming next: Uganda.

Who makes it possible

These activities don't run on commercial funding alone. A company's investment in farmer health creates the conditions for Gavi, the Vaccine Alliance, UBS Optimus Foundation, and Bayer Foundation, to co-fund these community health activities in the same areas. For commercial partners, this means their investment reaches further than the supply chain — at no additional cost to them.

What it builds toward

Active in Ghana and Côte d'Ivoire in 2025, the program expands to Uganda in 2026, targeting over **420,000** people across four coffee-growing regions in the next three years. Across all three countries:

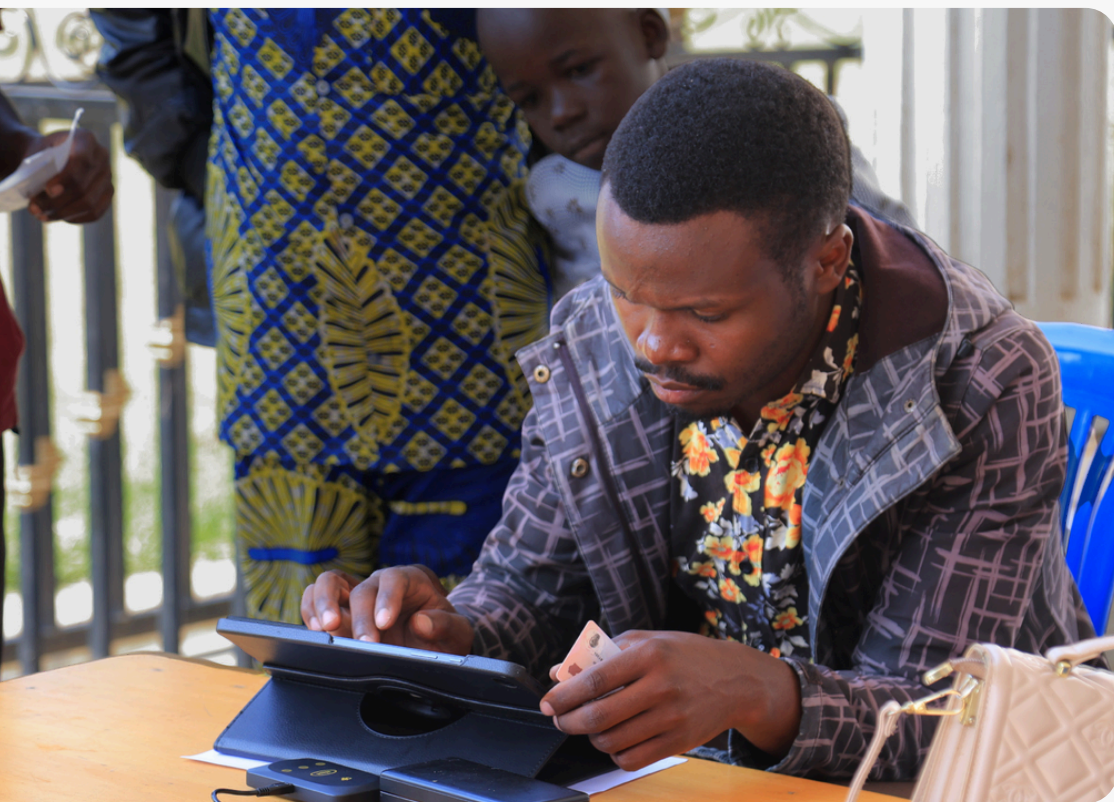


Key product highlights

From data to decisions

Key product highlights

As our programs grow, so does the amount of data they generate. In 2025, we focused on making that data easier to use — for the partners who fund our work, the teams who run it, and the cooperatives we work through.



Our milestones

01 HEALTH RISKS MADE VISIBLE

Farmer and worker health is one of the most under-recognized risks in a global supply chain. The data Elucid generates — anonymized, aggregated, real-time — makes that risk visible: which regions carry the highest disease burden, where utilization is climbing, which parts of the supply base are most exposed.

For partners working under EU due diligence and sustainability reporting requirements, including CSDDD and CSRD, this data supports social reporting while also informing targeted interventions — from prevention and outreach to improved access to care — without adding reporting burdens on farming communities themselves.

02 ONE SHARED SYSTEM ACROSS SIX COUNTRIES

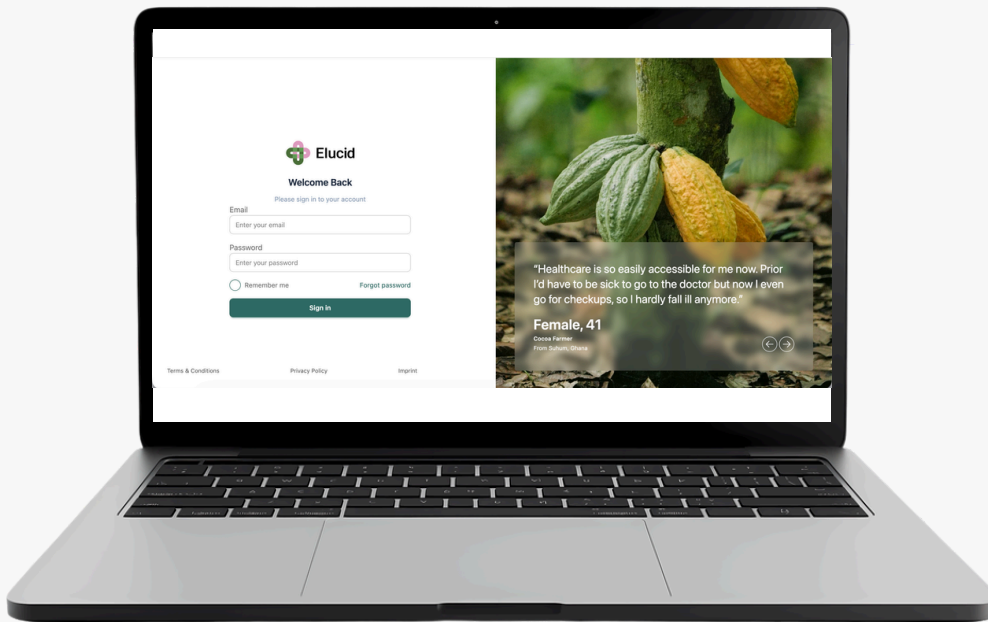
Every healthcare visit across our programs is recorded in a single standardized system — from clinic visit to claim payment.

The system is also beginning to capture data from our community health service activities, including vaccination, mobile clinics, and quality of care. The result: a clear, comparable view across Ghana, Côte d'Ivoire, Madagascar, Uganda, Ecuador, and Venezuela.

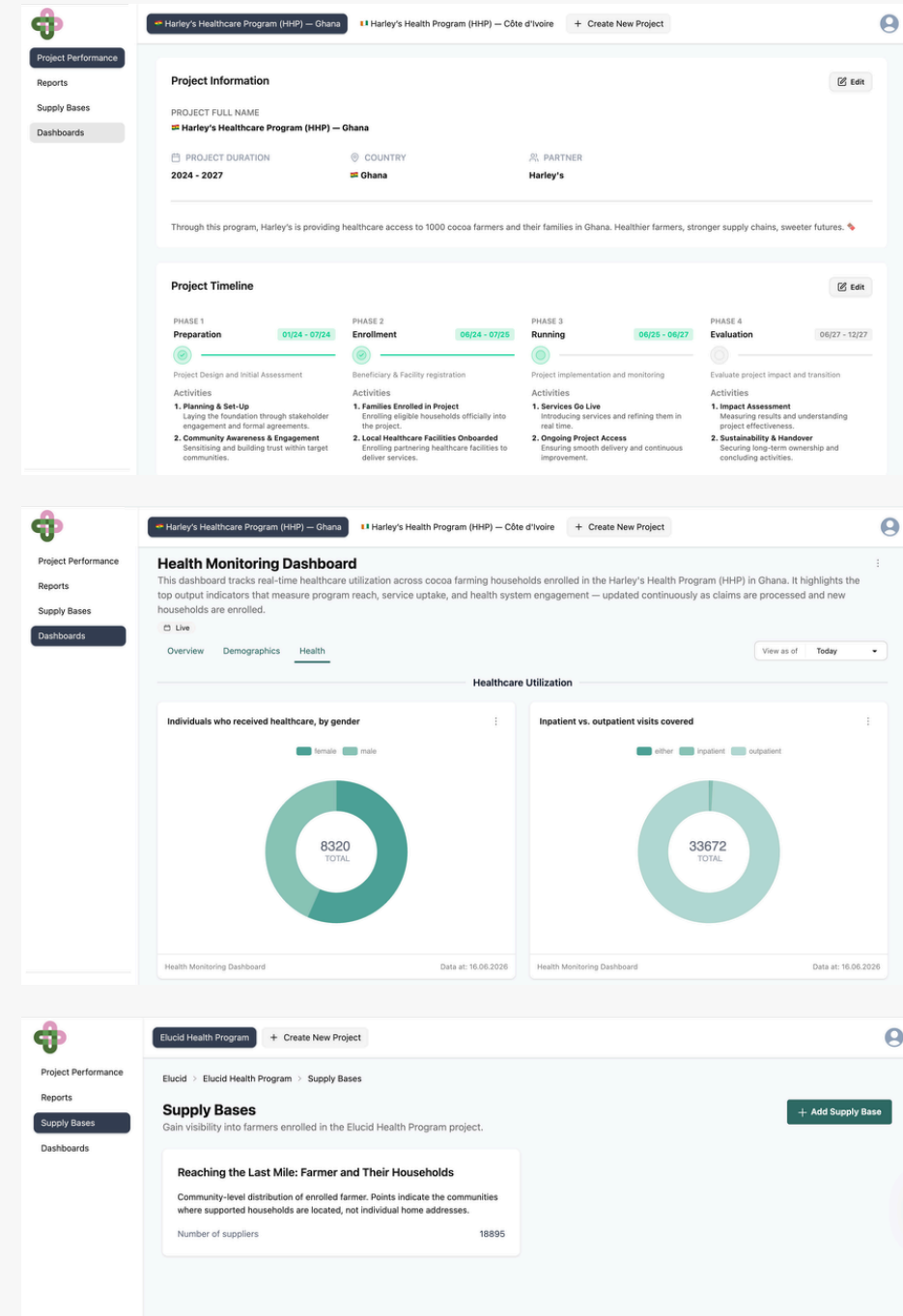
03 A REDESIGNED DATA PORTAL

We fully redesigned the partner-facing Data Portal in 2025. The new version is in phased rollout.

- Cleaner layout
- New Project Performance page
- Simpler dashboards
- New Supply Base section



The data our systems generate also feeds directly into a structured external research agenda — in partnership with the Center for Global Health at Charité – Universitätsmedizin Berlin and local academic institutions across Ghana, Côte d'Ivoire, and Uganda. First findings expected in 2026!



Awards & recognitions

Awards and recognitions

In 2025, Elucid's work — and that of its partners — was recognized across global and sector-specific platforms. These acknowledgements reflect growing attention to the role of healthcare in strengthening supply chains, as well as the importance of measurable, data-driven approaches.



Sustainability & Social Investment Award in Ghana for 'Best Company in Promoting Good Health and Wellbeing'



Silver Anthem Award for our impact communication in sustainability and health



Silver Winner in the MassChallenge Switzerland 2025 program



Finalists in the MIT Solve Global Health Challenge category



Max Felchlin AG won the Swiss Ethics Award 2025 for our work together in their cocoa supply chain



Tony's Chocolonely was a top 5 finalist for the UNIDO One World Sustainability Awards in the Sustainable Supply Chain category for our projects together in Ghana and Cote d'Ivoire



Looking ahead

2026: built to prove, ready to scale

2025 was a year of expansion and operational learning. 2026 is the year that expansion becomes durable.

We are grateful to the companies, organizations and cooperatives who have committed to farmer health as part of their supply chain commitment. Their willingness to invest and their trust have shaped what Elucid is today. The priorities ahead build on that foundation, guided by a clear conviction: when farmer health is integrated into supply chain strategies, it creates lasting value for companies, cooperatives, and farming communities alike.

01 BUILDING LONG-TERM PROGRAM SUSTAINABILITY

In 2026, we are strengthening the role of local partners, including cooperatives, sector organizations, and in-country stakeholders, so they can actively participate in and co-own the health programs that serve their communities.

We are also working toward more collaborative financing models, where companies, public actors, and development partners can come together around a shared goal: improving access to healthcare for farming communities. By moving toward blended finance structures, we aim to build programs that are more resilient, locally anchored, and able to grow beyond the limits of a single funder or supply chain.

02 EXPANDING COMMUNITY HEALTH SERVICES BEYOND THE SUPPLY CHAIN

In partnerships with Gavi, the Vaccine Alliance, UBS Optimus Foundation, Bayer Foundation, we are expanding our work even more into community vaccination, better health facilities, and mobile clinics. This will allow us to reach beyond enrolled farmers and support wider rural communities across Ghana, Côte d'Ivoire, and Uganda. After laying the groundwork in 2025, these activities are expected to reach around 100,000 people in 2026.



03 SCALING DELIVERY AND DEEPENING PARTNERSHIPS

At the same time, we are improving at delivering at scale. We use what works in one country to improve programs in others, while staying responsive to local needs.

And we are growing the partnerships we already have. That means reaching more farmers within existing clients' supply chains, and welcoming new partners across coffee, cocoa, cotton, and beyond.

04 STRENGTHENING OUR EVIDENCE AND RESEARCH

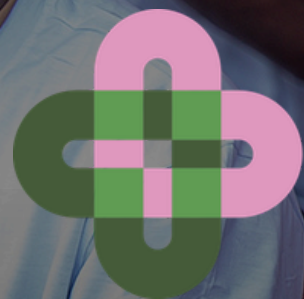
Good evidence is what lets farmer health programs be understood, scaled, and replicated. Two pieces of work carry this forward.

First, we continue to build the Data Portal as the central tool for tracking, reporting, and transparency — so every partner can see clearly how their program is doing.

Second, we are strengthening our research partnerships with the Center for Global Health at Charité – Universitätsmedizin Berlin and local academic institutions. The data collected across Ghana and Côte d'Ivoire in 2025 is now being analysed, with international peer-reviewed publications expected to strengthen the evidence base for healthcare access in agricultural supply chains. In 2026, the research agenda will extend to Uganda in partnership with Makerere University, building comparable evidence across countries and beyond any single program.

As Elucid grows, the reason stays the same: to improve the health of farmers and workers in global supply chains, and to make those supply chains fairer, more stable, and more resilient. None of this happens without genuine partnership. The priorities for 2026 are about making that work last.





Elucid

HEALTHIER FARMERS
STRONGER SUPPLY CHAINS

For any further questions, reach:



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