

NEWSLETTER

GET AFRICA NEWSLETTER ON ONE HEALTH AND BIOSECURITY

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Spotlight

PROFESSOR AKIN
ABAYOMI



Save The Date

The 9th African
Conference on One
Health and Biosecurity

**STRENGTHENING PUBLIC-PRIVATE PARTNERSHIPS
TO PREVENT FUTURE PANDEMICS IN AFRICA**





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Welcome Address

by GET COO



I welcome you all to another brilliant edition of our quarterly released Newsletter. The theme for this edition is Strengthening Public-Private Partnerships to Prevent Future Pandemics in Africa. This edition highlights the immense benefits of strategic collaborations between public and private institutions to address public health emergencies in Africa. It is general knowledge that Sub-Saharan Africa has persistently witnessed emerging and re-emerging infectious diseases at an alarming rate in recent years. Between 2016 and 2018, over 260 infectious-disease epidemics, disasters and other potential public-health emergencies were recorded in Sub Saharan region.

The private sector has a significant role in strengthening Africa's health sector. Several public-private sector partnership initiatives in Africa assisted public institutions in mitigating the devastating effect of public health emergencies. These partnerships facilitate some benefits, such as mobilising additional funding, enhancing access to essential goods and services, fostering innovation and research, improving efficiency and quality, and building stakeholder trust and solidarity.

However, public-private partnerships present risks and challenges, such as potential conflicts of interest, lack of transparency and accountability, unequal power dynamics, misalignment of incentives and expectations, and trade-offs between public health goals and private interests. A carefully designed framework that regulates activities of public-private partnerships to respect human rights, adherence to ethics, guide implementation, monitoring, and evaluation of such initiatives becomes highly important.

This present edition of our newsletter parades painstakingly selected articles from experts and scholars across the globe with a focus on Strengthening Public-Private Partnerships to Prevent Future Pandemics in Africa. I thank our writers and readers for their continuous support, and we look forward to your feedback. We hope you enjoy reading our Newsletter!

**Dr. Bobadoye Ayodotun,
Chief Operating Officer,
Global Emerging Pathogens Treatment (GET) Consortium.**

SPOTLIGHT

Name:

PROFESSOR AKIN ABAYOMI



About:

Prof. Akin Abayomi is the former Honourable Commissioner for Health, Lagos state. He is an experienced and versatile Medical Doctor, who has served as a lecturer and practitioner in Africa as well as West indices and written numerous research publications on Cancer, Diabetes, and Sickle Cell Anaemia. He obtained an MBBS degree from the University of London, the United Kingdom, and a Master of Philosophy (M.Phil.) in Ecology and environment Health Management from the University of Pretoria, South Africa. He was a consultant Haematologist and lecturer at the University of Zimbabwe Medical School and Harare Group of Teaching Hospitals, Zimbabwe between 1994 and 1998. He was also the Chief Physician at the Princess Marina Hospital Gabarone, Botswana in 1998. He is a fellow of the Royal College of Physicians of Edinburgh (2010) and the Royal College of Pathologists of the United Kingdom (2013). He was the Consultant Haematologist, Faculty of Medicine research, Queen Elizabeth Hospital, University of West Indies Bridgeton, Barbados from 1998 to 2006. He was a Bone Marrow Transplant research fellow at the University of Stellenbosch as well as a consultant clinical haematologist, Constantia Berg bone marrow transplant unit, Tygerberg academic hospital, Cape town, South Africa. He was the head of division, department of Pathology, faculty of medicine and health sciences, Stellenbosch University Cape town, South Africa. He has held various positions in the field of medicine including Consultant, Lagos state biosecurity and Genomic project, Lead consultant to the West African Health Authority (WAHO), ECOWAS, and President Federation of African Society of Pathology, Nigerian Institute of Medical Researcher (NIMR) among others



Strengthening Public-Private Partnerships to Prevent Future Pandemics In Africa

Authors: Benjamin Djoudalbaye and Shingai Machingaidze

Affiliation: Africa Centres for Disease Control and Prevention, Addis Ababa, Ethiopia.

Email address: BenjaminD@africa-union.org

The COVID-19 pandemic has exposed the fragility of the global health system and the need for effective and coordinated responses to prevent future pandemics. One of the key strategies to achieve this goal is to strengthen public-private partnerships (PPPs) that can leverage the resources, expertise, and innovation of different sectors and stakeholders. In this opinion, we review some existing and emerging PPPs established to address the COVID-19 pandemic and its consequences in Africa and also discuss their potential implications and challenges for future pandemic preparedness and response.

PPPs are collaborative arrangements between public and private actors that aim to achieve a common goal or deliver a specific service that would otherwise be difficult or impossible to achieve by either sector alone [1]. PPPs can take various forms and operate at different levels, depending on the partnership's nature and scope, the partners' roles and responsibilities, and the governance and accountability mechanisms in place [2]. PPPs can offer several benefits for the pandemic response, such as mobilising additional funding, enhancing access to essential goods and services, fostering innovation and research, improving efficiency and quality, and building stakeholder trust and solidarity [3].

However, PPPs also entail risks and challenges, such as potential conflicts of interest, lack of transparency and accountability, unequal power dynamics, misalignment of incentives and expectations, and trade-offs between public health goals and private interests [4]. For these reasons, PPPs require careful design, implementation, monitoring, and evaluation to ensure they are aligned with public health priorities, adhere to ethical principles, respect human rights, and deliver equitable and sustainable outcomes for all [5]. Most importantly, the power dynamics of PPPs require special attention as they historically have not favoured low- and middle-income countries that often rely on such PPPs to drive some key agendas in health.

In Africa, PPPs have played a crucial role in responding to the COVID-19 pandemic and mitigating its impact on health systems and populations. Some PPPs are adaptations or extensions of existing partnerships established before or during previous health crises, such as HIV/AIDS, malaria, tuberculosis, Ebola, and other infectious diseases. Others are new initiatives that have emerged in response to the specific challenges and opportunities posed by COVID-19. Here are some examples of PPPs that have been active in Africa during the COVID-19 pandemic:

The **Access to COVID-19 Tools (ACT) Accelerator** [6] is a global PPP launched in April 2020 by the World Health Organization (WHO) and several partners, including the Bill & Melinda Gates Foundation (BMGF), The Vaccine Alliance (Gavi), The Global Fund to Fight AIDS, Tuberculosis and Malaria (The Global Fund), Unitaid, Wellcome Trust, The Coalition for Epidemic Preparedness Innovations (CEPI), The Foundation for Innovative New Diagnostics (FIND), and others. The ACT Accelerator aims to accelerate the development, production, and equitable access to COVID-19 tests, treatments, and vaccines for all countries.

President Cyril Ramaphosa, during his tenure as Chairperson of the African Union, established the COVID-19 **African Vaccine Acquisition Task Team (AVATT)** as a component in support of the Africa Vaccine Strategy that was endorsed by the AU Bureau of Heads of State and Government on 20 August 2020 [7]. AVATT secured 400 million doses of COVID-19 vaccines for African countries.

Another PPP initiative is the **African Medical Supplies Platform (AMSP)**. The AMSP is a not-for-profit initiative launched by the African Union as an immediate, integrated and practical response to the COVID-19 pandemic. The online platform was developed under the leadership of African Union Special Envoy Strive Masiyiwa and powered by Janngo and Vaya on behalf of the African Union's Africa Centres for Disease Control and Prevention (Africa CDC) and in partnership with African Export-Import Bank (Afreximbank) and United Nations Economic Commission for Africa (ECA) with the support of leading African & international Institutions, Foundations & Corporations as well as Governments of China, Canada & France. Other technology & knowledge partners include Baobab Circle [8]. The AMSP facilitated the procurement and distribution of COVID-19 diagnostics, therapeutics, personal protective equipment (PPE), and oxygen.

The African Union Commission and the Africa CDC launched the **Partnership to Accelerate COVID-19 Testing (PACT)** in June 2020 to train and deploy one million community health workers across the continent. UNAIDS partnered with Africa CDC to implement the PACT initiative in seven countries, i.e., Algeria, Côte d'Ivoire, Gabon, Ghana, Madagascar, Malawi and Namibia. The initiative engaged networks of people living with HIV and community-led organisations to support two pillars, test and trace and the sensitisation to protective measures against COVID-19 for the most vulnerable populations. It later expanded to improve access to COVID-19 vaccines [9].

For PPPs to be strengthened in Africa, there is a need for a conducive policy environment that encourages collaboration between the public and private sectors. PPPs should be enabling and aim to build lasting capacity in the African Member States. Governments should create an enabling environment incentivising private sector participation in developing and delivering healthcare technologies and services. This might entail providing tax incentives, subsidies, or regulatory support.

In conclusion, the COVID-19 pandemic has highlighted the urgent need for stronger public-private partnerships in Africa's healthcare system. Such partnerships can help to enhance health systems, improve access to healthcare services, and develop innovative technologies that can prevent and respond to future pandemics. Governments and the private sector should work towards creating a conducive policy environment that supports collaboration and fosters innovation to build resilience and preparedness in Africa's healthcare system.

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**Dr Benjamin
Djoudalbaye**

Dr Benjamin Djoudalbaye is a Senior Health Expert MD, MSc. MPH, Pg. Dipl. Infectious Diseases. He has over 20 years of experience in global health with extensive expertise in the African context, focusing on the design, management, and evaluation of Public Health programs. He successfully managed major programs, including proven ability to set a clear vision, lead diverse teams, mentor/inspire others toward the accomplishment of goals, possess excellent negotiation skills, experience with complex, high profile, or sensitive agreements, and recruiting supporting and leading senior staff. He is currently the Head of Policy, Health Diplomacy, and Communication at the Africa Centres for Disease Control and Prevention. He is also the Acting Coordinator of the Africa CDC Regional Coordination Centre for Central Africa in Libreville, Gabon. He was appointed in May 2020 as Executive Secretary of the African Union COVID-19 Response Fund. Dr Djoudalbaye is the author and co-author of several peer-reviewed scientific articles and has published a book in psychiatry.



**Shingai
Machingaidze**

Shingai Machingaidze is an epidemiologist and public health specialist. Her experience is in the public health and clinical research fields where she has gained considerable experience building and leading workforce development programs that build the capacity of African-based scientists and institutions. Her expertise includes strategic engagement, planning and support of large public health programmes; conducting and managing clinical trials and clinical research; managing research grants and finances; as well as managing strategic partnerships and engagements with national, regional, and international agencies. She is an experienced vaccinologist, with many years of experience in the area of vaccine research. She is an alumna of ADVAC (Advanced Course of Vaccinology), a member of faculty for the Vaccines for Africa (VACFA) Annual Vaccinology Course as well as a Future Africa Forum Fellow. She is a member of several advisory committees including the Advisory Committee for the Clinical Trial Community as well as the Scientific and Technical Expert Group for the 100 Days Mission. She is currently the Ag. Chief Science Officer at Africa CDC as well as the CPHIA Secretariat Lead.



Learned Lessons from COVID-19 to Strengthen Health Systems in Africa

Author: Sr. Dr. Margaret Wandera Nyongesa
Affiliation: Lecturer at Technical University, Nairobi, Kenya.
Email address: maggwande@gmail.com



POVERTY AND HEALTH

The World Health Organization (WHO)'s March declaration of COVID-19 as a global pandemic[1] has removed any doubt about the threat emerging diseases pose to every country. African policymakers should use the COVID-19 scenario to take decisive steps to protect their citizens and economies from future pandemics by improving weak health systems.

The health challenges faced during COVID-19 and other emerging and re-emerging diseases in Africa are worrying. Africa's health systems are weak, and the health workforce is already overworked and lacks equipment. Africa may be sitting on a time bomb, a serious potential loss of life either directly or indirectly related to the COVID-19 virus and other pandemics that might originate. What is then the future for Africa where all these resources are already scarce even before any pandemic? Further, Africa is already confronting multiple health challenges, including HIV/AIDS, tuberculosis, malaria and other infectious diseases, and thus millions of people are immunocompromised and more at risk of serious emerging diseases like COVID-19.

The emergence of a new disease can have a devastating and lasting impact on already fragile health systems. It is possible that many people in Africa may die of HIV/AIDS, TB, and malaria due to the additional COVID-19 strain on the health system. As focus and resources are shifted and redirected to emerging diseases like COVID-19, programmes on primary, maternal and child as well mental health are affected, eroding gains that were previously made.

However, the COVID-19 pandemic provided an opportunity to evaluate the resilience of the entire health system beginning from the household and community (primary) to the tertiary levels and develop strategies for strengthening it in preparation for the future [4]. All stakeholders should be involved. Governments should collaborate with the WHO and other partners to ensure that public, private, and faith-based health facilities are better prepared for such a pandemic. An inclusive approach should comprise professional bodies, health specialists, as well as workers in communities such as civil society, health workers, provincial and county administration and religious and cultural leaders. The focus should be on improving the planning process in preparation for future ones.

DYING FROM LACK OF MEDICINES



Currently, each of these countries is battling with economic collapse due to covid-19 and staring at an uncertain economic future. The COVID-19 pandemic hard-hit traditional countries that support Africa and are now focused on their internal affairs with limited attention and resources to support African countries. This provides the opportunity for African countries to develop homegrown innovations and explore other sources of support. For instance, the production of medical and personal protective equipment and pharmaceuticals by local industries will reduce the supply chain and the large unemployment rate and improve medical care in many African countries.



SUFFERING FROM LACK OF MEDICAL CARE

The strategy of looking inward should be supported by a strong quality assurance approval and monitoring system. This calls upon adequate and robust national legislative, regulatory, and technical infrastructure through deliberate prioritization in respective African countries. For instance, tax incentives would provide the needed advantage for local, national, and regional industries not only develop but grow and survive in a global competitive space. Utilizing regional organizations such as the East Africa Community, COMESA, IGAD, and the African Union, Africa can produce and have a ready market for these products and commodities.

African scientists have also largely depended on support from countries and organizations outside the continent. Once again, this Covid-19 pandemic has taught us that this is not sustainable[3]. Without looking inward, priority and funding for African scientists is and will continue to be decided by others. He who pays the piper calls the tune. African countries require dedication and disbursement of a proportion of their budgets to research that is unique to the health challenges of their countries. This will ensure that research is targeted, scientists focused and results and recommendations applicable to country and regional specific products, policies, and practice. In this way, African scientists can be real experts in Africa-specific areas where others have no experience of.

We had no choice in the entry of Covid-19 into the continent. Neither do we know when another pandemic will arrive. We however have a choice to learn from the COVID-19 pandemic. This pandemic is ending, and we are moving on to revive urgent areas like agriculture, economics and politics, among others, to improve the health of the citizens[2]. We can choose to utilize the lessons learned from the pandemic and strengthen our weak health systems.

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Sr. Dr. Margaret Wandera Nyongesa

Sr. Dr. Margaret Wandera Nyongesa is a Public Health Systems specialist. PHD in public Health, MPH, BSC. Lecturer at the Technical University of Kenya. Research interest; Health Systems Strengthening and Public Health.



The Role of Local Pharmaceutical Companies or Local Manufacturing in Pandemic Preparedness in Nigeria

Author: Dr Stephanie Oluyide

Affiliation: Manager at ARC_ESM, Lagos, Nigeria

Email Address: sfowler@arcng.org

The COVID-19 pandemic has underscored the importance of adequate pandemic preparedness through strategic partnerships and the promotion of local manufacturing to ensure access to essential medicines and health commodities. In Nigeria, one successful example of such a partnership is between the State's Drug Management Agency (DMA) and Local Pharmaceutical Manufacturers (LPs), which played a vital role in managing a Cholera Outbreak during the pandemic. This partnership enabled the State to access the necessary intravenous infusions, saving many lives at a time when medical supplies were scarce due to importation challenges.

Now, imagine if these partnerships existed across all 36+1 states in Nigeria, providing primary health facilities with access to quality and affordable medicines and health commodities from local manufacturers. This would create an enabling environment that encourages local manufacturing of essential and life-saving medicines, significantly enhancing medicines security and pandemic preparedness not only in Nigeria but also across Africa.

In this article, we will explore a Public-Private Partnership (PPP) model that has been designed and implemented by the Africa Resource Center for Excellence in Supply Chain Management (ARC_ESM) in Nigeria. This model aims to strengthen the supply of quality and affordable medicines to the last mile, aligning with ARC_ESM's vision of achieving equitable access to healthcare commodities in the country.

Let's start by understanding what a Public-Private Partnership (PPP) entails. According to the World Bank, a PPP is " a long-term contract between a private party and a government entity, for providing a public asset or service, in which the private party bears significant risk and management responsibility. They combine the skills and resources of both the public and private sectors through sharing of risks and responsibilities enabling governments to benefit from the expertise of the private sector, and allows them to focus on policy, planning and regulation". (1) It is important to note that the World Bank also states that "there is no standard, internationally accepted definition of a PPP as the term is often used to describe a wide range of types of agreements between public and private sector entities with different countries adopting different definitions". (1)

To prevent future pandemics, it is crucial to focus on strengthening primary healthcare and improving access to medicines and health commodities. An article by UNICEF (3), highlights five key areas of focus, one of which is the strengthening of logistics and supply chains at the Primary Healthcare level. Here, the PPP model developed by ARC_ESM comes into play by leveraging the expertise of local pharmaceutical manufacturers to ensure access to quality and affordable essential medicines.

The PPP model described below provides an avenue to strengthen logistics and supply chains at the PHC level by leveraging the expertise of local pharmaceutical Manufacturers to ensure access to quality and affordable essential medicines.

The Problem

In the 1980s, many states in Nigeria established Drug Revolving Funds (DRFs) to address the persistent issue of stockouts which was described as the “out-of-stock” syndrome. However, sustaining these funds has proven challenging due to issues such as poor overall management, corruption, and expired medicines. To address these challenges, Drug Management Agencies (DMAs) were established. These agencies are responsible for implementing policies, sourcing and distributing medicines, and ensuring quality control within the state's supply chain system.

One newly established DMA reached out to ARC_ESM for support, facing challenges such as limited fiscal space and insufficient supply chain capacity for immediate procurement of required health commodities. ARC_ESM, as a resource platform providing access to supply chain expertise and financing, engaged the Pharmaceutical Manufacturers Group of the Manufacturers Association of Nigeria (PMG-MAN) to assess their readiness for a potential partnership with states. Local manufacturers expressed concerns about low patronage from government institutions, lack of WHO qualification, limited access to data on government needs, and payment challenges.

The Solution

ARC_ESM leveraged its expertise to broker a PPP between the State Drug Management Agency and Local Manufacturers through PMG-MAN. The recommended PPP model involved Local Pharmaceutical (LP) Companies providing credit facilities or "Distributor Finance" to newly established Drug Management agencies. This allowed the agencies to access a range of essential medicines and health commodities at discounted prices while committing to long-term patronage of large volumes of these commodities.



It is important to note that the PPP model was designed to serve as a stop-gap measure for new DMAs to support their operations till they reach a level of maturity where they have both the capacity and fiscal space to conduct open bidding. This makes the model scalable.

To ensure the success of the PPP, an implementation framework was developed. It includes an oversight committee comprising relevant stakeholders, a secretariat consisting of ARC_ESM and PMG-MAN to oversee the implementation and a review committee to address operational issues. A communication strategy was also established to facilitate smooth collaboration between the public and private sectors.

Impact

ARC_ESM has successfully supported six State Drug Management Agencies in brokering PPPs with over 19 Local Pharmaceutical companies. Beyond sales, this partnership has increased access to a wider range of essential medicines, improved health facility coverage, and fostered collaboration between the public and private sectors. It has also created opportunities for knowledge sharing, peer learning, and capacity strengthening. Additionally, a Community of Practice (CoP) has been formed, focusing on public health supply chain management.

The adoption of this partnership model across states, particularly those with newly established DMAs, can have a significant impact on improving the availability of health commodities at the last mile, ultimately benefiting citizens. Furthermore, this partnership can be leveraged to address supply chain challenges related to emergency or pandemic preparedness, last-mile distribution, inventory management systems, and data visibility at the health facility level. It also highlights the urgent need to increase local manufacturing capacity for essential medicines and commodities to enhance medicines security and support pandemic preparedness.

In conclusion, strengthening Public-Private Partnerships (PPPs) is crucial for preventing future pandemics in Africa. The PPP model implemented by ARC_ESM serves as a promising example of collaboration between the public and private sectors to enhance healthcare supply chains. By investing in local manufacturing and fostering strong partnerships, we can improve access to essential medicines, enhance healthcare infrastructure, and better prepare for future health crises.

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**Dr Stephanie
Oluyide**

Dr Stephanie Oluyide is a public health professional with over 14 years of experience working in public and private health sectors with expertise in project management, team building, relationship management, human resource capacity building, report writing, and data management. She worked with the Lagos State Government as a clinician supporting service delivery at the Primary Healthcare level. She worked at Ardova Plc (formerly Forte Oil Plc) as an Occupational Health Officer ensuring all staff received optimal care. She also worked at the Private Sector Health Alliance of Nigeria as an Associate supporting and overseeing various public health initiatives. She currently works at ARC_ESM as a Manager.



Public-Private Partnerships: A Crucial Element in Mitigating the Next Pandemic

Author: Vanessa Owusu-Ansah

Affiliation: Health Economist at Zipline International, Accra, Ghana.

Email Address: vanzyorke@gmail.com

Introduction

Experts¹ have reiterated the importance of Public-Private Partnerships (PPPs) as a catalyst for development. It balances the advantages of operating a purely public or private sector while minimizing the drawbacks. Western countries have well been ahead of African countries in projecting PPPs. Over centuries ago, Governments mostly adopted PPPs as a financing mechanism for capital-intensive projects such as road construction. However, with time, this has evolved to cover a broad range of projects.

The move towards investing in PPPs in Africa began more than two decades ago² in a select few countries. More than half³ of all successful PPP programs were concentrated in about five countries between 1999 to 2019. These were South Africa, Nigeria, Egypt, Morocco, and Ghana. The projects were heavily focused on energy, transport, and Information, Communication, and Technology (ICT) which are mostly capital-intensive. Sectors such as health, Water, and Sanitation Hygiene (WASH) accounted for less than one-tenth of the value of the partnerships. This is an indication of the low investment in PPPs that focus on health, and other related sectors. However, as the pandemic hit, most governments saw the need to join forces with the private sector to work towards a common goal to end the pandemic.

During the pandemic⁴, pressure mounted on existing healthcare resources which called for the need to bring in the private sector to improve the overall nature of healthcare. A case in point is the Nigerian Government's⁵ collaboration with the Joseph Ukpo Hospitals and Research Institute (JUHRI) to support free Covid-19 tests parts of the country. Also, the private sector coalition⁶ against Covid-19 managed the set-up of 39 isolation centers across all the states in the country. This helped eased the pressure on public sector resources and minimized the spread of the disease. The pandemic revealed the significant role the private sector could play in improving healthcare delivery.

Examples Of Public-Private Partnerships During the COVID-19 Pandemic

Zipline with Ghana's Ministry of Health



Ghana began strengthening its health supply chain about a year before the pandemic. In April 2019⁷, the Government of Ghana signed a partnership with Zipline- a private aerial supply chain company, to support the existing public health supply chain. Zipline had only been operating for less than a year, complementing the status quo with routine stock gap and emergency supplies of selected products to rural and ex-urban health facilities when the pandemic hit.

Experts⁸ feared the gains made in improving immunization coverage might be derailed due to the ban on movement. The Ministry of Health⁹ decided to fully

leverage Zipline's contactless delivery to expand access to vaccines and Personal Protective Equipment (PPEs) in rural areas, which would have otherwise been difficult in the absence of Zipline. Subsequently, Ghana became the first¹⁰ country to receive Covid-19 vaccines from the COVAX facility because of its logistical preparedness and ability to distribute the vaccines equitably. Zipline continues to support the distribution of vaccines and other health-related products to date and has distributed over 11M doses, including 2.5M¹¹ Covid-19 vaccine doses.

Recently, Zipline supported the Veterinary Services Directorate of Ghana to curb the outbreak of Anthrax just in time for the upheld Eid festival celebrated by Muslims. This was through the prompt delivery of 40,000¹² anthrax vaccine doses to the affected areas to immediately stop the outbreak

Pharm Access with Kisumu County (Kenya) Department of Health and Kenya Medical Research Institute (KEMRI)

PharmAccess, in collaboration with Kisumu County and KEMRI, launched Covid-Dx in May 2020¹³. Covid-Dx is a project to support Kisumu's Covid-19 testing capacity and a monitoring system to drive data-based decision-making. Covid-19 testing was initially carried out in selected public hospitals only, which mounted pressure on these facilities.

PharmAccess, through its experience with previous epidemics, led the partnership to equip 9¹⁴ private and faith-based health facilities to support Covid-19 testing. The Department of Health together, with KEMRI trained the selected facilities to carry out testing. All health facilities used the digital information system to collect patient demographics which was very crucial in contact tracing.

By March 2021, the partnership had accounted for almost one-fifth¹³ of the tests conducted in the county. Subsequently, the detailed patient information collected helped to identify the first omicron variant that was reported in the county. As a result of the success of the partnership, Covid-Dx was rolled out to 13 additional counties¹⁴. Up until January 2023, over 60,000 tests¹³ had been conducted because of this collaboration. Today, the app has evolved into a digital epidemic preparedness network (Epi-Dx) tracking 20 diseases, including Covid.

PharmAccess with Kenya (Kisumu County), Ghana, and Nigeria (Lagos State)

PharmAccess and Luscii Technologies, in collaboration with the University of Ghana Medical Center and the

Ministry of Health (Ghana), launched COVIDConnect in April 2020¹⁵. COVIDConnect¹⁴ is a digital application available on Android and IOS systems to provide users access to a remote medical team. This app was developed to serve to triage patients by limiting potential disease transmission. Users simply had to sign up and log their symptoms, after which a team of medical personnel would evaluate and respond to the user with the appropriate next steps. The service was made available to all at no cost.

Although 800,000¹⁴ patient alerts had been processed from the app, only 23 patients had tested for Covid-19. The app could not yield the expected outcome; hence it is now being repurposed to serve as a Non-communicable Diseases monitor.

The app will serve as a great way to capture the evolving trends with the recent rise¹⁶ in non-communicable diseases in Africa.

How Can We Strengthen PPPs to Prevent Future Pandemics in Africa?

We observed a plethora of collaborations with the private sector within health during the pandemic. Some were extremely successful, and others were unsuccessful. Although the pandemic saw the rise of several collaborations, it also exposed the lack of strong practical frameworks to guide some of these partnerships. Moving forward, we need to be more deliberate in our efforts to strengthen these partnerships to prepare for the unknown.

Most of the deadly pandemics on record are caused by zoonotic diseases. More than half¹⁷ of new infectious diseases reported are zoonoses, out of which about three-quarters have originated from animals. This premise highlights partnerships that need to be prioritized to ensure future pandemics are averted.

The Covid-19 pandemic has helped to reecho the importance of prioritizing one-health initiatives and partnerships. The World Health Organization defines One Health¹⁸ as an “integrated, unifying approach to balance and optimize the health of people, animals, and the environment”. Encouraging partnerships that prioritize the interdependencies between these categories can serve as a preventive measure in averting future pandemics. Decision makers should be intentional in generating funding support for research partnerships that focus on understanding the transmission of zoonotic diseases and protecting the categories. Policymakers should set directional frameworks that serve as the basis for these partnerships, with the benefit of hindsight. For instance, given that most emerging infectious zoonoses originate from bats¹⁹, the framework could cover the prioritization of these animals as a first step. This will ensure that we are placing weight on partnerships that can prevent and/or resolve future outbreaks.

Still hinging on the one health factor, embarking on multisectoral partnerships can help prevent future pandemics. When stakeholders from multiple sectors buy into a shared objective, it eases the implementation challenges, barriers to scale-up, and the potential impact to be achieved²⁰. Studies²¹ conducted on adopting a multisectoral approach to improving hypertension management observed up to six times increase in the related health outcomes. With the one-health theme in mind, we can elicit participation from multiple sectors to reduce duplication of efforts and produce efficient partnerships.

Also, the common theme of the section discussing examples of some partnerships during the pandemic is responsiveness and adaptiveness. We observed how Zipline worked with a different sector to respond to a potential outbreak of Anthrax which could have easily spread without timely intervention. Similarly, PharmAccess tailored its Covid-Dx app to adapt to serve as a monitoring system for other epidemical diseases. Frameworks serve as a foundation to guide the partnership; nevertheless, these frameworks should not be restrictive to allow partnerships to evolve to suit current needs and trends.

Conclusion

If there is any lesson learned from the pandemic, it is that an all-hands approach is the only way to solve and prevent subsequent pandemics. Collaboration amongst all industries and the public and private sectors is the right way to protect our globe. There should be guided frameworks that can serve as the foundation but are not stringent to stifle innovation.

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**Vanessia
Owusu-Ansah**

Vanessia Owusu-Ansah is a Health Economist on the Africa Go-to-Market team at Zipline International. She received her MSc in Economics and Business from the Erasmus University Netherlands with a specialization in Health Economics, and a BA in Economics and Statistics from the University of Ghana. She is passionate about improving access to quality healthcare. Zipline is an aerial supply chain company that expands access to vital commodities. Vanessia has been instrumental in the team's success in deepening its existing operations in Ghana and expanding across the African continent. Vanessia began her career in the digital healthcare industry as a market access person in an online eye testing company (easee). While at easee, she authored two whitepapers based on an underlying cost-benefit analysis to accelerate the team's engagements to incorporate the service into the treatment regimen of cataract management post-surgery. Vanessia loves to travel around and explore new cultures and people with her family and friends. A good movie could also keep her entertained and glued.

Save The Date: The 9th African Conference on One Health and Biosecurity

The 9th African Conference on One Health and Biosecurity themed *“Maximizing Benefits and Understanding Risks of Synthetic Biology and Other Emerging Biotechnologies in Africa”* will hold from 1st November to 3rd November 2023.

The Conference ‘Call for Abstracts’ is ongoing and the prospectus for the Conference is now available on our website. The prospectus contains details of all past GET conferences, pictures, and collaborators.

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Further details on the conference will be shared with our larger community in due course.

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bobadoyed@getafrica.org
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GET Journal of Biosecurity & One Health

GET published another edition (Vol. 2, Issue 1) of its journal featuring seven articles in the field of Biosecurity and One Health. The publication can be accessed at <https://getjournal.org/volume-2-issue-1/>

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GET organized three (3) other editions of its webinar series in May, June, and July 2023, themed ***'Building Innovative Healthcare Financing for Resilient Health Systems in Africa'***, ***'Addressing Bottlenecks to Bioeconomy Development in Africa'*** and ***'How Prepared is Africa for a Biological Warfare: Lessons from the War in Sudan'***.

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31 MAY 2023
12 PM (WAT)



ZOOM

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Topic: How Prepared Is Africa for a Biological Warfare:
Lessons from the War in Sudan

WEDNESDAY, 28 June, 2023
12:00PM (West Africa Time)



GUEST SPEAKERS



Dr. Jaurès Noumedem

Biosafety and Biosecurity Technical Officer, Africa CDC.

Topic: Understanding regional and national policies and strategies to prevent biological warfare in Africa.



Dr. Levin Damisah

Head of Medical Intelligence, Office of the National Security Adviser, Nigeria.

Topic: Assessing strategies to combat bioterrorism and biological warfare in Africa.



Dr. Olivier Manigart

Senior Team Leader - Support to the Regional Epidemiological Surveillance System for West African Health Organization.

Topic: What should Africa government do to prevent bioterrorism and biowarfare in Africa?



Ms. Ifeoluwa Alabi

Project Officer, GET Consortium

MODERATOR

Registration Link: <https://bit.ly/GETWebinarJune2023>

GET WEBINAR SERIES: JULY EDITION

Topic: Addressing Bottlenecks to Bioeconomy Development in Africa



MR. FORTUNATE MUYAMBI

Deputy Executive Secretary
East Africa Science and
Technology Commission
(EASTECCO)



PROF JUSTUS WESSELER

Professor
Wageningen University



DR NICHOLAS OZOR

Executive Director
African Technology Policy
Studies Network (ATPS)



Moderator

MS IFEOLUWA ALABI

Project Officer
GET Consortium

26th July, 2023 AT 12:00pm (WAT)

Registration Link: <https://bit.ly/GETWebinarJuly2023>

GET One Health School Project (Ogun State Chapter Inauguration)

GET inaugurated GHSP in five (5) Public Senior Secondary Schools (Abeokuta Grammar School, Lisabi Grammar School, African Church Grammar School, Government Science and Technical College and St. Peter's College in Abeokuta, Ogun State on the 7th of July 2023.

Student representatives from each pilot school were inaugurated to serve as ambassadors, while teacher representatives from each school were also inaugurated to serve as their mentors. 50 GET One Health student ambassadors, and 10 GET One Health school mentors were inaugurated. The One Health handbook was also distributed freely to the students as well.

Pictures from the inauguration of the Ogun state chapter of GET One Health School Project in Abeokuta can be seen below.





GET Capacity Building Training

GET organized capacity building training in Lagos State from the 21st to 23rd of June 2023. GET invited Five (5) different facilitators to train the participants on various aspects relating to the topic which is **'Introduction to Biosecurity and Biosafety Training'**.

Certificates of participation were awarded by GET Consortium to the trainees at the end of the 3-day training.



Participants receiving lectures at the training



Presentation of Certificate to a Participant by GET COO



Group photograph with GET COO

World Environment Day Celebration

In commemoration of World Environment Day 2023, themed '**Solutions to Plastic Pollution**', GET joined the world to celebrate world environment day by hosting a twitter space on the 6th of June 2023 where Dr Babatunde Taiwo (GET Senior Project Officer) and Ifeoluwa Alabi (GET Project Officer) had discussions with the audience on the topics '**Exploring the Landscape of Plastic Pollution in Africa**' and '**Inventing Solutions and Alternatives to Plastic Pollution in Africa**' respectively.

The programme was attended by people from different parts of the world.

GET Global Emerging Pathogens Treatment Consortium

TWITTER SPACE

Solutions to Plastic Pollution

Dr. Babatunde Taiwo
Senior Project Officer
GET Consortium

Ms. Ifeoluwa Alabi
Project Officer
GET Consortium

Ms. Omowunmi Okunniyi
Administrative Officer
GET Consortium

MODERATOR

Tuesday
6th June, 2023 | **12 pm (WAT)** | **Twitter Space**
@GETConsortium

Set a reminder & join with this link: <https://bit.ly/GETTwitterSpace>

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WORLD ENVIRONMENT DAY

Theme: Solutions to Plastic Pollution

Today's actions determine tomorrow's world. Embrace sustainable alternatives to tackle plastic pollution. #BeatPlasticPollution.

5 JUNE 2023

Scholarships/Grants Opportunities

Africa The Royal Society Entrepreneur in Residence Scheme

<https://www.advance-africa.com/the-royal-society-entrepreneur-in-residencescheme.html>

Application Deadline: September 3, 2023

Harvard University Academy Scholars Programme for International PhD Students

<https://www.advance-africa.com/harvard-university-academy-scholars-programme-for-international-phd-students.html>

Application Deadline: September 22, 2023

Geneva Centre for Security Policy Prize for Innovation in Global Security

<https://www.advance-africa.com/geneva-centre-for-security-policy-prize-for-innovation-in-global-security1.html>

Application Deadline: September 25, 2023

UNESCO Future Designer International Innovation Design Awards (IIDA) & Science for SDGs Innovation Contest

<https://www.advance-africa.com/unesco-future-designer-international-innovation-design-awards-iida-science-for-sdgs-innovation-contest.html>

Application Deadline: September 30, 2023

Fully Funded Women for Africa Foundation Science by Women Programme for African Women Researchers

<https://www.advance-africa.com/fully-funded-women-for-africa-foundation-science-by-women-programme-for-african-women-researchers.html>

Application Deadline: September 30, 2023

The Wits-TUB-UNILAG Urban Lab Scholarships Programme in Urban Studies

<https://www.advance-africa.com/the-witstunilag-urban-lab-scholarships-programme-in-urban-studies.html>

Application Deadline: September 30, 2023

German Chancellor Fellowship Programme for Emerging Leaders

<https://www.advance-africa.com/german-chancellor-fellowship-programme-foremerging-leaders.html>

Application Deadline: October 15, 2023

Fonds SUEZ Grants for Improving the Living Conditions of Individuals 2023

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Application Deadline: October 15, 2023

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