



WELCOME MESSAGE

We are excited to welcome you to the inaugural International Conference on Public Health in Africa (CPHIA), 14-16 December 2021.

CPHIA will take place at an important moment for the African continent. We will gather against the backdrop of the COVID-19 pandemic, which continues to have devastating effects on health and economic development globally.

Throughout the pandemic, many African countries have demonstrated tremendous leadership, acting quickly to limit the impact of the virus. However, Africa's dependence on international sources for vaccines and supplies has made it difficult for governments to mount a fully localized response.

It is time for this to change. Despite the immeasurable human cost, COVID-19 has created a historic opportunity for the African continent to build a new public health order – one that can secure Africa's future and guarantee its development.

The Africa Centres for Disease Control and Prevention (Africa CDC) and African Union have created a unique platform for the best and brightest minds in public health to gather in service of this larger goal. CPHIA will bring together thousands of public health stakeholders from across the continent to share scientific findings; collaborate on research and implementation; and chart a shared course towards a more secure future for Africa.

We are grateful to the Africa CDC for all of their efforts to improve public health in Africa, including this gathering; and to the members of the Organizing Committee for their constant support and contributions in planning this meeting.

We hope you'll join us in December!

Conference Co-Chairs 2021



Professor Senait Fisseha, MD, JD

Director of Global Programs The Susan Thompson Buffett Foundation Omaha, Nebraska



Professor Agnes Binagwaho, MD, M(Ped), PhD

Vice Chancellor and Professor of Pediatrics University of Global Health Equity Kigali, Rwanda

NEEDS ASSESSMENT

Ending COVID-19 and mitigating its impact will only be possible through collective use of effective, evidence-informed interventions. The world has already witnessed significant achievements in combatting the pandemic through unprecedented multisectoral efforts across the fields of arts, science, technology, entrepreneurship, politics and the humanities. This is exemplified by the rapid pace of development for multiple COVID-19 vaccines, as well as efforts to test drugs for managing COVID-19 infection.

However, countries across the globe have had varied experiences in their efforts to combat the pandemic. Countries in the Global South have especially suffered from an inequitable distribution of COVID-19 vaccines.

The pandemic has put a spotlight on several key challenges facing the African continent:

Weak Health Systems

COVID-19 has further stretched health system capacity, with many countries reporting inadequate critical care capacity and overburdened healthcare workers.¹

Not only have weak health systems increased suffering and death due to the virus, they have also led to insufficient delivery of critical primary and secondary health services to populations in need. Services such as immunization have been disrupted, with many fearing a rollback in progress against health outcomes to date. Moreover, given the disproportionate impact of COVID-19 on people with underlying conditions such as non-communicable diseases (NCDs), there's a need to determine how best to build and strengthen NCD care within health systems to avoid disruption during other health threats.

Impact of COVID-19

(As of 28 September 2021)

Global Statistics

Cases: > 228 million
Deaths: > 4.7 million



Case distribution among World Health Organization Regions:

• Eastern Mediterranean: 6%

European: 30%Americas: 39%

South-East Asia: 19%Western Pacific: 4%

Africa: 3.6%

Africa Statistics

Cases: >8.3 million

Deaths: > 210k



Out of the 55 African Union Member States, 54 have experienced at least a second wave of COVID-19 cases, 43 have experienced a third wave and seven have experienced a fourth wave.

Mortality in critically ill patients with COVID-19 is higher in African countries than in Asia, Europe, North America, and South America as reported from studies done. Increased mortality was associated with insufficient critical care resources, as well as comorbidities with HIV/AIDS, diabetes, chronic liver disease, kidney disease and severity of organ dysfunction at admission.²

Source: Africa CDC

¹ WHO Afro. Rising mortality as Africa marks one year of COVID-19. Published 11 February 2021. Accessed 2 June 2021. https://www.afro.who.int/news/rising-mortality-africa-marks-one-year-covid-19

² The Lancet. Patient care and clinical outcomes for patients with COVID-19 infection admitted to African high-care or intensive care units (ACCCOS): a multicentre, prospective, observational cohort study. Published May 2021. Accessed 29 September 2021. https://www.sciencedirect.com/science/article/pii/S0140673621004414

Persistent Inequities

The pandemic has highlighted and exacerbated existing inequities, putting at risk the progress made in health and economic and human development over the past decade.

For instance, the World Bank estimates that global poverty rates will rise for the first time in 20 years.³ Moreover, vulnerable populations, such as informal sector workers, are more affected by the public health measures put in place to curb the spread of the virus. This deepening of inequities has tragic implications for people living in precarious conditions, as well as for the global economy, health security, and sustainable development.

Economic Under- development

The economic impacts of the pandemic have been devastating. The International Monetary Fund has projected that sub-Saharan Africa will enter into a recession for the first time in 25 years due to the COVID-19 pandemic, with growth falling to -3.2% in 2020 from 3.1% in 2019. COVID-19 has put pressure on underlying economic deficiencies linked to years of mismanagement of state funds, underinvestment in public infrastructure and a failure to implement economic reform policies.

However, the worst may still be ahead as the drop in gross domestic product could stall economies and exacerbate historical structural inequities in most African economies. Africa will need to find innovative economic recovery measures to respond to the impact of COVID-19 pow



³ World Bank. Poverty and Shared Prosperity 2020: Reversals of Fortune. Published 2020. Accessed 2 June 2021. https://openknowledge.worldbank.org/bitstream/handle/10986/34496/9781464816024.pdf

THE OPPORTUNITY

There is currently unprecedented momentum to strengthen the public health response in Africa. Prioritizing sustainable investments in line with the WHO Health System Pillars - be it through mainstreaming IT and data collection systems or establishing track and trace systems of serialized medical products - offers the potential to reorganize health systems in a way that maximizes impact across the entire health landscape in support of COVID-19 and other health issues. Now is the time to plan, accelerate and sustain investments that could generate a lasting legacy on the reach and sustainability of national and global health systems.

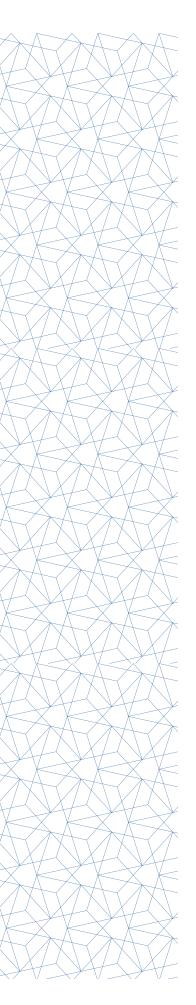
A New Public Health Order for Africa

Africa needs a more holistic public health approach to safeguard the health and economic security of the continent as it strives to meet the aspirations of its Agenda 2063.

A New Public Health Order for Africa will require continental collaboration and synergy, based on five pillars:



- **Bolstered African** manufacturing capacity for vaccines, diagnostics, and therapeutics;
- Strengthened public health institutions for peoplecentered care;
- **Expanded public health** workforce;
- Respectful, action-oriented partnerships; and
- **Engagement with the** private sector.



ABOUT CPHIA 2021

CPHIA 2021 will provide the opportunity to reflect on how to advance African solutions in support of the five above pillars. The conference will put a special spotlight on emergency health response in Africa and allow participants from around the world to share and learn about progress made, best practices in public health interventions and the latest in

innovative research. The conference will also provide a platform for discussing how to develop systems better able to prepare for and respond to the next health threat.

The conference is an official program of the Africa CDC and the African Union that aims to grow into an annual gathering.

Conference Objectives

- 1. Review lessons learned from the COVID-19 pandemic and opportunities to re-evaluate the new normal in public health practice in Africa.
- 2. Advocate and promote continental instruments in the context of global policies to advance health equities and public health (e.g., Agenda 2063, Aspiration 1, Goal 3; Africa Health Strategy (2016-2030); The Catalytic Framework to End AIDS, TB and Eliminate Malaria in Africa by 2030; Business Plan for the Pharmaceutical Manufacturing Plan for Africa; Health Research and Innovation Strategy for Africa.)
- 3. Strengthen African health security and preparedness based on the New Public Health Order for Africa.
- 4. Develop and advance public health practice, education, training, and research in Africa.

Expected Outcomes

CPHIA 2021 will help accelerate progress towards African health security and preparedness, while tackling long-standing health emergencies such as HIV, tuberculosis, and malaria by helping to create more collaborative networks and encouraging multisectoral coordination. The conference can also help to shape a new public health

order in Africa defined by resilient health systems; continuous learning and innovation; and more equitable health outcomes. Discussions and recommendations will be synthesized into an outcome document, which will help inform the development of key materials, including: an advocacy agenda targeting various stakeholders, policy brief(s), and an action plan.

Format

CPHIA 2021 will be a three-day virtual conference consisting of:

Keynote presentations Plenary sessions Participatory sessions Panel discussions

Topic Highlights

Track 1: Epidemiology of SARS-COV-2, Virology, Prevention and Clinical Management

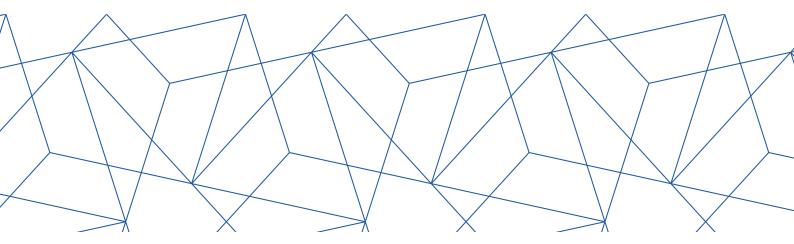
While the African continent was predicted to be particularly vulnerable to COVID-19, African populations appear to have thus far evaded widespread morbidity and mortality due to the virus. This track will assess how the pandemic has unfolded on the African continent, discuss possible biologic mechanisms that may have mitigated the impact of the disease, identify areas of particular need for future research in the African setting, and discuss the future of COVID-19 in Africa.

Track 2: Vaccination in Africa: Research Capacity, Advocacy, Manufacturing and Distribution

As the world looks toward preparing for future health threats. African countries need to strenghten their vaccine manufacturing capacities by strengthening regulatory agencies, developing the necessary human resource potential and attracting financial and technical investment. This track will explore the current state of COVID-19 vaccine distribution in Africa and the way forward, as well as the future of vaccine manufacturing on the continent.

Track 3: Establishment of the New Public Health Order

The proposed New Public Health Order is an urgent call for Africa to strengthen public health institutions, decentralize public health engagements for more efficient implementation, bolster capacity for local production of vaccines, therapeutics and diagnostics, while creating significant investments in the health workforce and leadership programs, and building respectful public-private partnerships. This track will focus on two tenets of the New Public Health Order: building the capacity of Africa CDC and National Public Health Institutes, and investing in the public health workforce.





Track 4: Assessing the Response to COVID-19 in Africa to Prepare for Future Health Threats

While African countries have responded relatively well to the pandemic, the continent has faced a variety of challenges, including in some instances weak leadership; restrictions in the global supply chain with insufficient test kits, personal protective equipment and vaccines; and misinformation. This track will examine the effectiveness of Africa's response to the COVID-19 pandemic and highlight key successes, challenges and lessons learned to prepare for future health threats. It will also explore ways to prevent the severe unintended economic and social consequences that often follow health crises such as COVID-19.

Track 5: COVID-19 and Equitable Health System Strengthening in Africa

African countries and continental public health institutions have had to develop innovative approaches to meet the

challenges presented by the COVID-19 pandemic - from a rapid expansion of diagnostic capacity and genomics, to pooling resources between nations and across the publicprivate sector. This track will explore case studies that can inform innovative approaches to building strong health systems in Africa.

Track 6: Digitisation, Modelling and Analytics to Support an Effective Public Health Response to the COVID-19 Pandemic

The COVID-19 pandemic has accelerated the advent of digital tools and technologies for public health messaging, epidemiologic surveillance, screening and diagnosis for rapid case identification, interruption of community transmission and clinical care delivery. This track will explore how digitisation, modelling and analytics can be fruitfully employed to sustain the public health goals of quality, accessibility, efficiency and equity in health care.

Track 7: Agenda 2063: Wholeof-society - Private sector, Community and Leadership - Approach in Combatting COVID-19 and other Emerging **Diseases**

Effective partnerships and collaborations across all sectors will be critical to winning the fight against COVID-19. This track will focus on what can be done to create and harmonize more effective platforms for publicprivate dialogue to strengthen health systems; the innovations and investments that should be prioritized to better prepare for and respond to future pandemics and outbreaks; how leveraging private sector supply chain best practices can improve health supply chains in lowand middle-income countries: the role of local leadership in effective testing and diagnostics; and community engagement best practices.

Target Audience

The virtual conference will host thousands of participants from around the world across several key categories of stakeholders, namely:



- Researchers and academics
- Public health specialists



- Faith-based, community-based and national/regional organizations
- Private sector



- Government officials
- Advocates



Frontline providers

Enduring Materials

Conference sessions will be recorded and will be made available for individuals to revist later through the Africa CDC and conference websites, as well as podcasts and online Journal of Public Health in Africa platform: https://www. publichealthinafrica.org/index.php/jphia.

Sponsorship Opportunities

CPHIA 2021 welcomes conference sponsors, who will have an opportunity to engage with leading researchers, public health experts, advocates, government officials and more on shaping a new public health order for Africa.

Sponsoring CPHIA 2021 comes with the following benefits:

Visibility

- Prominent placement of your logo on virtual conference materials (subject to approval)
- Pre-event marketing and branding through:
 - o Banners posted on the homepage of the website
 - o Traffic generation to your website via the conference website
 - Your logo placed on email distributions to registrants

Contribution to the Program

- Organize satellite symposia/round tables
- Participate in discussions
- Host virtual exhibition space

Organizing Committee

The Organizing Committee is responsible for planning the conference, including preparations of the scientific sessions and presentations, and maintaining the highest level of scientific standards.



PhDSc, PhD Africa CDC

John Nkengasong, MSc,



Agnes Binagwaho, MD, M(Ped), PhD University of Global Health Equity (UGHE) CPHIA 2021 Co-Chair



Members

- Abraham Anang, PhD Noguchi Memorial Institute for Medical Research (NMIMR), University of Ghana, Ghana
- 2. Adama Gansane, PhD, Pharm.D - Centre National de Recherche et de Formation sur le Paludisme

(CNRFP), Burkina Faso

- 3. Aggrey Ambali, PhD New Partnership for Africa's Development (NEPAD), South Africa
- 4. Agnes Kiragga, PhD Makerere University, Uganda
- 5. Ahmed Ogwell Ouma, MPH, **BDS** - Africa CDC, Kenya
- 6. Alain Tehindrazanarivelo -University of Anatananarivo, Madagascar
- 7. Alimuddin Zumla, MBChB, PhD, - University College London, **United Kingdom**
- 8. Amadou Alpha Sall, PhD -Institut Pasteur de Dakar, Senegal
- 9. Ames Dhai, PhD, MBChB -University of the Witwatersrand, South Africa
- 10. Amit Thakker, MBChB, eMBA - Africa Health Business, Kenya
- 11. Charles Shey Wiysonge, MD, PhD - Cochrane South Africa, South African Medical Research Council, South Africa

- 12. Chikwe Ihekweazu, DTM&CM, MBBS - Incoming Assistant Director-General, WHO Hub for Pandemic and Epidemic Intelligence, Germany
- 13. Chinwe Ochu, MBBS, MPH - Nigeria Centre for Disease Control (NCDC), Nigeria
- 14. Christian Happi, PhD -African Centre of Excellence for Genomics of Infectious Diseases (ACEGID), Redeemer's University, Nigeria
- 15. Daniel Bausch, MD Foundation for Innovative New Diagnostics (FIND), United Kingdom
- 16. David Heymann, BA MD, DTM&H - Global Health Programme, Chatham House, **United Kingdom**
- 17. Deborah Watson-Jones, PhD, MBBS - London School of Hygiene and Tropical Medicine (LSHTM), United Kingdom
- 18. Ebere Okereke, DTM&H, MBBS - Tony Blair Institute for Global Change, United Kingdom
- 19. Echezona Edozie Ezeanolue, MD - University of Nevada School of Medicine, United States
- 20. Edem Adzogenu, MD -AfroChampions, Ghana

- 21. Ehimario Uche Igumbor, PhD - Independent Public Health Consultant, Nigeria
- 22. Francine Ntoumi, PhD -Fondation Congolaise pour la Recherche Médicale, Republic of Congo
- 23. Francois-Xavier Mbopi-Keou, PhD - University of Yaoundé, Cameroon
- 24. Georges Alain Etoundi Mballa, MD - Ministry of Public Health, Cameroon
- 25. Githinji Gitahi, MD Amref Health Africa, Kenya
- 26. Glenda Gray, MBBCh South African Medical Research Council (SAMRC), South Africa
- 27. Hassan Sefrioui, PhD -Moroccan Foundation for Advanced Science, Innovation & Research (MAScIR), Morocco
- 28. Helen Rees, MRCGP Wits Reproductive Health and HIV Institute, South Africa
- 29. Ilesh Jani, MD, PhD National Institute of Health, Mozambique
- 30. Iruka Okeke, PhD University of Ibadan, Nigeria
- 31. James Eustace, BSc (Hons) Economics - Dalberg Advisors, Switzerland

- 32. Jean-Jacques Muyembe, PhD, MD - National Institute of Biomedical Research, Democratic Republic of Congo
- 33. John Amuasi, MD, PhD African Research Network for Neglected Tropical Diseases (ARNTD), Ghana
- 34. Justin Maeda, MD Africa CDC, Ethiopia
- 35. Kedest Tesfagiorgis Bill & Melinda Gates Foundation, **United States**
- 36. Kevin Marsh, MBChB, DTM & H - University of Oxford, United Kingdom
- 37. Krishna Udayakumar, MD -Duke Global Health Institute, **United States**
- 38. Lolem Ngong, MPH Amref Health Africa, Kenya
- 39. Lul Pout Riek, MD, MSPH -Africa CDC, Ethiopia
- 40. Magda Robalo Correia Silva - High Commissioner for COVID-19, Guinea-Bissau
- 41. Manhattan Charurat, PhD, MHS - University of Maryland School of Medicine, United States
- 42. Martin Muita Africa CDC. Ethiopia
- 43. Merawi Aragaw, MD, MPH -Africa CDC, Ethiopia
- 44. Michael Iroezindu, MPH -Walter Reed Program, Nigeria
- 45. Millicent Olulo, MD, MSc -PharmAccess Foundation, Kenya
- 46. Mohammed Abdulaziz, MBBS, MPH-FE, MHPM, FWACP -Africa CDC, Ethiopia

- 47. Monique Wasunna, MBBS, MSc, PhD - Drugs for Neglected Diseases Initiative Africa Regional Office, Kenya
- 48. Morenike Oluwatoyin Ukpong, MBA, MA - Obafemi Awolowo University, Nigeria
- 49. MosesBockarie,PhD-European & Developing Countries Clinical Trial Partnership (EDCTP), South Africa
- 50. Nicaise Ndembi, PhD, MPhil, MSc - Africa CDC, Ethiopia
- 51. Nissaf Bouafif, MD, MSc -National Observatory of New and Emerging Diseases, Tunisia
- 52. Nyeki Adelerose, MD, ENT -University of Yaoundé, Cameroon
- 53. Oyewale Tomori, DVM, PhD -Redeemer's University, Nigeria
- 54. Pascale Ondoa, MD, MSc, PhD - Amsterdam Institute for Global Health and Development (AIGHD), African Society of Laboratory Medicine, Netherlands
- 55. Patricia Ayanbadejo, BDS, MPH, FMCDS -University of Lagos College of Medicine, Nigeria
- 56. Placide Mbala-Kingebeni, MD -National Institute for Biomedical Research (INRB), Democratic Republic of Congo
- 57. Pontiano Kaleebu, MD, PhD -Uganda Virus Research Institute, Uganda
- 58. Raji Tajudeen, MD, MPH Africa CDC, Ethiopia
- 59. Salim Abdool Karim, PhD, MS, **MBBCH** - Centre for the AIDS

- Programme of Research in South Africa (CAPRISA), South Africa
- 60. Seun Esan, BSc (Hons), MSc, **DPhil** - University of Liverpool Institute of Population Health, **United Kingdom**
- 61. Shingai Machingaidze Africa CDC, Ethiopia
- 62. Simon Antara, MBChB, MPH - African Field Epidemiology Network (AFENET), Uganda
- 63. Souha Bougatef National Observatory of New and **Emerging Diseases, Tunisia**
- 64. Theresa Madubuko Africa CDC, Ethiopia
- 65. Thomas Kariuki, PhD Alliance for Accelerating Excellence in Science in Africa, Kenya
- 66. Tobias F. Rinke de Wit, PhD -PharmAccess Group, University of Amsterdam, Netherlands
- 67. Trevor Crowell, MD, PhD The Henry M. Jackson Foundation for the Advancement of Military Medicine, United States
- 68. Victor Mukonka, MBChB (Unza), PHD - Zambia National Public Health Institute, Zambia
- 69. William Ampofo, PhD Noguchi Memorial Institute for Medical Research (NMIMR), University of Ghana, Ghana
- 70. Yenew Kebede Tebeje, MD, MSc, MPH - Africa CDC, Ethiopia
- 71. Yvonne Mburu, PhD Nexakli, Kenya

For further information and queries, please contact Dr Nicaise Ndembi at NicaiseN@africa-union.org.























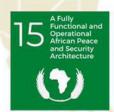






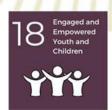
















Copyright @ The Agenda 2063 Academy. All rights reserved.