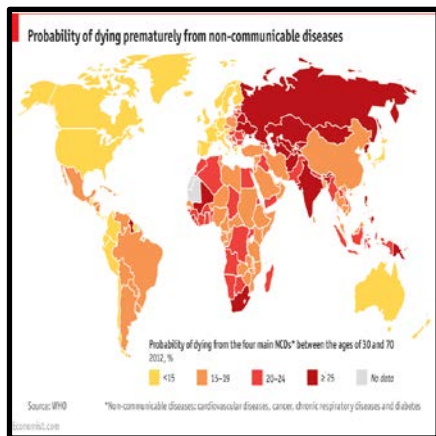




Lessons from Africa: Building Resilient Community-Based Health Systems

Dr Uzma Alam, Senior Programme Officer | DELTAS Africa, AESA
8th October 2020 Wilson Centre

COVID-19: Accelerating and Mitigating Factors in Africa



High disease burden



Informal food markets



Extreme poverty



Large informal settlements



Weak health system



Rural-urban ratio



High youthful Demographic Dividend

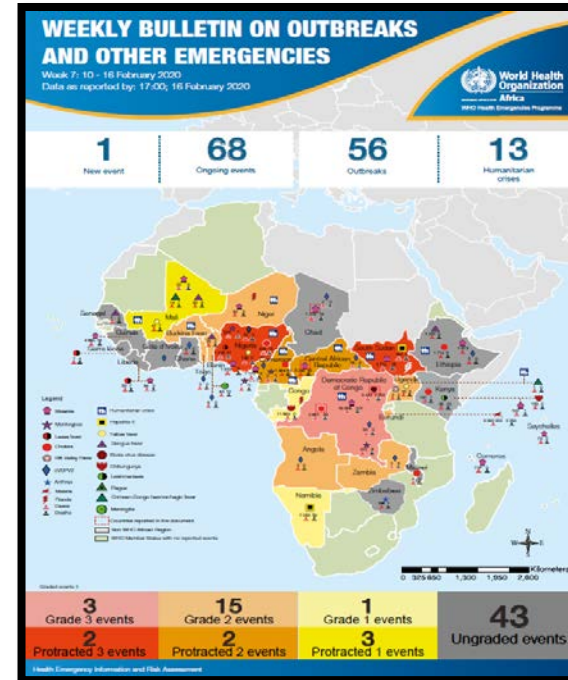


Low mobility index

Unfolding Across Africa Were another 69 Public Health Emergencies



18 million displaced people

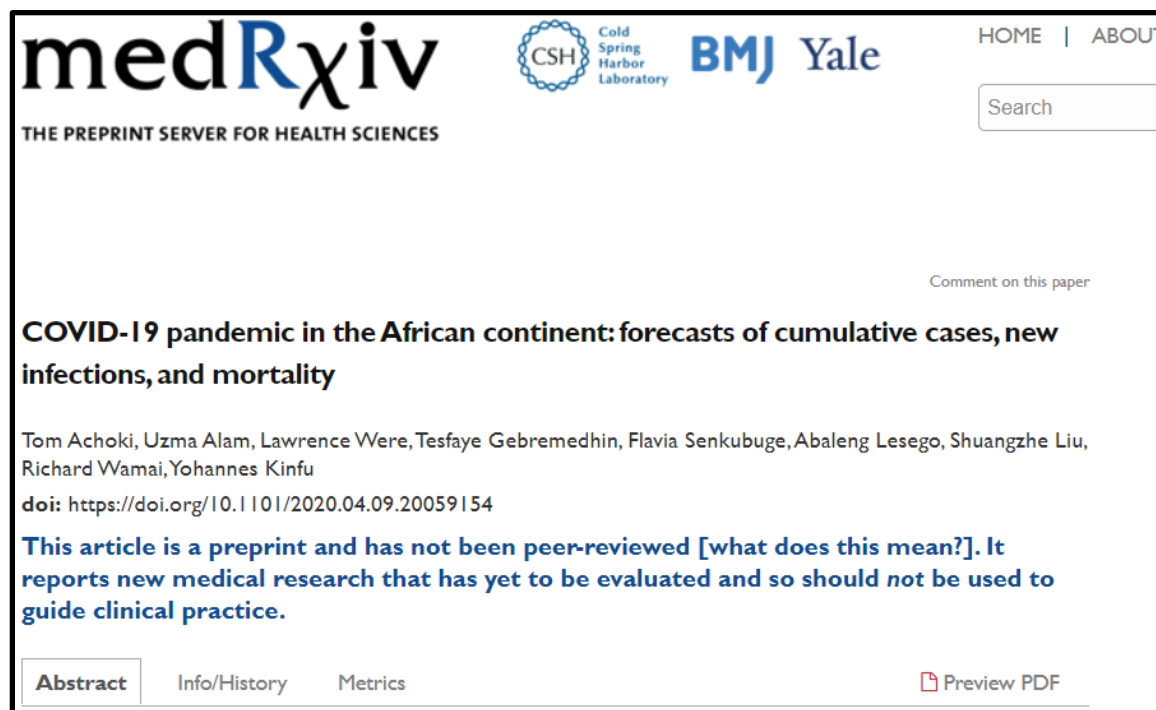


	Cases	Deaths
Measles (CAR)	5724	83
Measles (Chad)	5810	28
Cholera (DRC)	2651	43
Ebola (DRC)	3432	2253

<https://www.afro.who.int/>

Research in Africa in the Context of COVID-19

Modelling COVID-19 in Africa



The screenshot shows the medRxiv preprint server interface. At the top, there are logos for medRxiv, CSH Cold Spring Harbor Laboratory, and BMJ Yale. The text 'THE PREPRINT SERVER FOR HEALTH SCIENCES' is visible. A search bar is present in the top right. The main title of the preprint is 'COVID-19 pandemic in the African continent: forecasts of cumulative cases, new infections, and mortality'. Below the title, the authors are listed: Tom Achoki, Uzma Alam, Lawrence Were, Tesfaye Gebremedhin, Flavia Senkubuge, Abaleng Lesego, Shuangzhe Liu, Richard Wamai, and Yohannes Kinfu. A DOI link is provided: <https://doi.org/10.1101/2020.04.09.20059154>. A disclaimer states: 'This article is a preprint and has not been peer-reviewed [what does this mean?]. It reports new medical research that has yet to be evaluated and so should not be used to guide clinical practice.' At the bottom, there are navigation buttons for 'Abstract', 'Info/History', 'Metrics', and 'Preview PDF'.

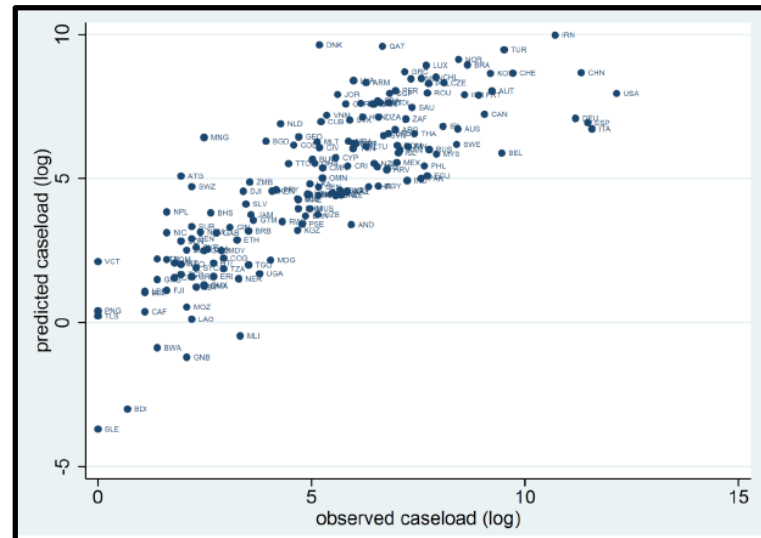
Several models existed (US and Europe)

These are of little value to decision makers in Africa- missed the context

Africa Data Initiative produced the first estimates for Africa

A COVID-19 Contextualized Model Accounted for Realities

Understanding the epidemiological dynamics of COVID-19 within the local context is fundamental



- **Connectivity would be the main driver though Africa has a low mobility index**
- **Population level prevalence of COVID-19 will be low (< 1.5%)**
- **Under a very high infection scenario, infection rates are unlikely to reach more than a quarter of the continent's population**

Africa Balanced Interventions With The Need of Maintaining Livelihoods and Social Cohesion



Adapting physical distancing measures

Ref: AAS DFID Report – Rapid Review of Physical Distancing in Africa

Physical distancing adaptations	Examples of Countries that have implemented the adaptation
Imposing of dusk to dawn curfews or partial lockdowns rather than full lock downs	Kenya, Senegal
Staggered introduction of physical distancing measures	Kenya, Senegal
Risk based movement restrictions rather than blanket restrictions across the country. For instance, in Kenya, movement restrictions have been imposed in transmission hotspots - Nairobi, and coastal counties, and a residential neighbourhood in Nairobi and Mombasa, rather than the entire country (2)	Kenya, Ghana, Nigeria
Keeping the informal economy operational – allowing food markets and small-scale traders to operate with measures to reduce physical distance such as reducing the number of traders and customers, relocating traders to decongest markets, and hygiene	Kenya, South Africa
“Temporal distancing”(3) – opening markets on specific days and times of the week, and closing them on other days and times. For instance, in Nigeria, markets are open on specific days of the week, and for a shorter time on the open days	Nigeria
Allowing public transport to operate with guidelines reduce carrying capacity, space out seating, and hand hygiene	Ghana, Nigeria, Kenya, Senegal

How Has COVID-19 Changed Research in Africa

Epidemic preparedness and global health security

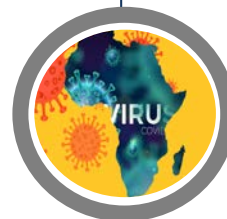
AAS COVID-19 webinar

26 March the AAS hosted a webinar to kick start common thinking towards defining a research agenda for the COVID-19 pandemic in Africa. **275** scientists attended



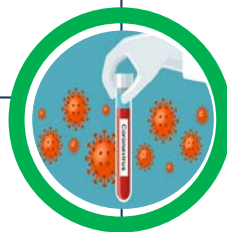
Survey collating Africa's R&D priorities

- **4-8 April** African scientists invited to participate in an open survey to develop a priority list for R&D to supplement the WHO coordinated Global research Roadmap **844 completed responses**
- 17 new priorities specific for Africa identified and listed against global priorities



COVID-19 experts in Africa

Developing a **list of COVID-19 experts and researchers** working on COVID-19 related research on the continent through the AAS Clinical Trials Community (CTC) programme



Funding for COVID-19 R&D priorities

The AAS mobilized partners to provide ~ USD 3M funding for identified research priorities, A **COVID-19 call shared 1 May 2020**



Lessons From Africa in Building Resilient Health Systems

Data and communities make powerful partners

- Health systems need to be resilient, agile and equitable
- Current model of health care is broken
- Data complimented with local knowledge drives cost effective choices
- Community-driven initiatives need to be leveraged



**Investing in
research and
innovation**



**Open access
health data
networks**



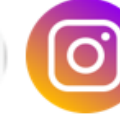
**Framework
based on
transparency
and mutual
accountability**



Contact The AAS for more information or to join mailing list



www.aasciences.africa



@AAsciences

Email: communications@aasciences.africa