

Virtual Meeting on Population Health Issues in Africa

 May 02, 2025

 10 – 11 am (West African Time)



The meeting was attended by the following participants:

1. **Ms. Souad Aden-Osman**, Executive Director, CoDA/AU HLP – IFF Secretariat
2. **Prof. Nosakhare Godwin Bazuaye**, Secretary of the African Blood and Marrow Transplant Society and Former Chief Medical Director of Igbiniedion University, Nigeria
3. **Dr. Benjamin Djoudalbaye**, Acting Head of Interim Secretariat of the African Medicines Agency
4. **Mr. Jens Pederson**, Public Health Expert and Founding Director, African First
5. **Mr. Getachew Teklemariam**, Senior Programme Officer, CoDA/ AU HLP – IFF Secretariat
6. **Mr. Abiyot Dubale**, Programme Officer, CoDA/AU HLP – IFF Secretariat
7. **Mr. Wondwossen Afework**, Finance and Operations Officer

Agenda

The meeting had the following agenda:

1. Introductions
2. Briefing on purpose of the meeting and updates on population health engagements of CoDA
3. Information sharing on engagements and opportunities for collaboration
4. Exchange of views and way forward

Summary

- The purpose of the meeting was to reconnect CoDA with African public health experts, hear from them on the current dynamics and determine how CoDA can add value to population health endeavors in Africa. A key question raised in this regard was whether CoDA is still relevant in the space? And what it can bring to an already crowded space?
- It was shared that population health remains one of the four areas of focus of CoDA, brought about by CoVID-19. Between 2020 and 2022, CoDA was able to usher-in effective collaborations in advocating for access to CoVID-19 vaccines and furthering conversations on continental capacity to manufacture vaccines.
- It was highlighted that the institutional challenges that CoDA faced in the last 2 to 3 years, particularly those challenges related to its legal status within the AU, somewhat reduced the momentum of its engagement in this area of its work.
- The experts acknowledged CoDA as an important platform for policy dialogues and advocacy work. They recognized its strong role during the CoVID-19 Pandemic and noted that it will be important to build on the work carried out during the pandemic. But they also recognized the challenges of working in the multilateral system, particularly the African context. Hence, they appreciated CoDA's initiative to bring them together.
- The experts pointed out that there is so much to be done considering the number of diseases peculiar to Africa, such as Sickle Cell Disease (SCD), which CoDA can help eradicate. Currently, in northern Nigeria 40% of the patients are victims of wrong lab results on the genotype – wrong results.
- The experts suggested that CoDA rekindles its advocacy on manufacturing of diagnostics.
- In terms of approach, they further suggested that CoDA makes the case on key projects, such as malaria or sickle cell disease of SCD first and seek the scaling up.
- Depoliticizing the public health environment is key. As such, CoDA's interventions, prevention and advocacy work, should be carried out more localized, that one country at a time, to avoid backfiring. Although more reflection is needed, an initial focus on sickle cell disease is fitted as it has not yet gathered the required attention.
- The experts stressed that CoDA is still relevant in the space and suggested it focuses on prevention and advocacy towards improving the manufacturing of diagnostics, is still a niche for its interventions. This niche, they noted, should also be one that is focused and spatially defined. It was suggested that starting with one or two countries, and then scaling it up from there would be a good strategy.
- The experts recognized that the space is crowded and too politicized. Hence, finding a niche instead of a role will be important to stay relevant. The current trend in the space is to start from the top, but getting lost in the middle without reaching the bottom. The experts argued that this approach is not working in the interest of Africans. Hence, they suggested that CoDA focuses on an approach that starts small and then scales up.
- While there was an understanding that there is opportunity for CoDA in prevention and advocacy for capacity building in diagnosis, it was suggested that further discussion and reflection is needed to further fine-tune CoDA's other areas of engagement.
- Against this backdrop, it was agreed that CoDA will structure an advocacy campaign in selected countries on enhancing accessibility to rapid diagnostic tools for screening sickle cell disease. In this regard, Dr. Benjamin agreed to write a concept note for such a campaign, which will then be reviewed by the other experts and CoDA's leadership. It was, however, highlighted that the experts will be engaged in such an activity in their personal capacity, not through their institutions.

- It was suggested that involving the new AU Commissioner for Health, Humanitarian Affairs and Social Development will be a good idea to garner a wider buy-in for the campaign. CoDA welcomed the idea of working with the new leadership of AUC and expressed interest in this collaboration.
- The meeting concluded by agreeing that the campaign starts in the coming months and the experts reaffirmed their commitment to work with CoDA on this and other issues that can strengthen its population health pillar.

Key Lines of the Advocacy Campaign

- Enhancing local level access to rapid screening tool for sickle cell disease in Africa.
- Improving the regulation of laboratories for accurate results in the identification of sickle cell disease.
- Creating a favorable environment for manufacturing of rapid diagnostic tools for sickle cell disease in Africa.

Action Points

The following are the main action points agreed in the meeting:

- Enhancing local level access to rapid screening tool for sickle cell disease in Africa.
- Improving the regulation of laboratories for accurate results in the identification of sickle cell disease.
- Creating a favorable environment for manufacturing of rapid diagnostic tools for sickle cell disease in Africa.

No.	Action Points	Responsible Person
1	Sending research and publications that can underpin the Campaign to CoDA/AU HLP – IFF Secretariat Team	Prof. Nosakhare Godwin Bazuaye
2	Preparation of concept note for the “Campaign to Enhance Access to Rapid Screening Tools for Sickle Cell Disease in Africa.”	Dr. Benjamin Djoudalbaye
3	Planning the details of the Campaign in consultation with national and continental stakeholders.	CoDA/AU HLP – IFF Secretariat

