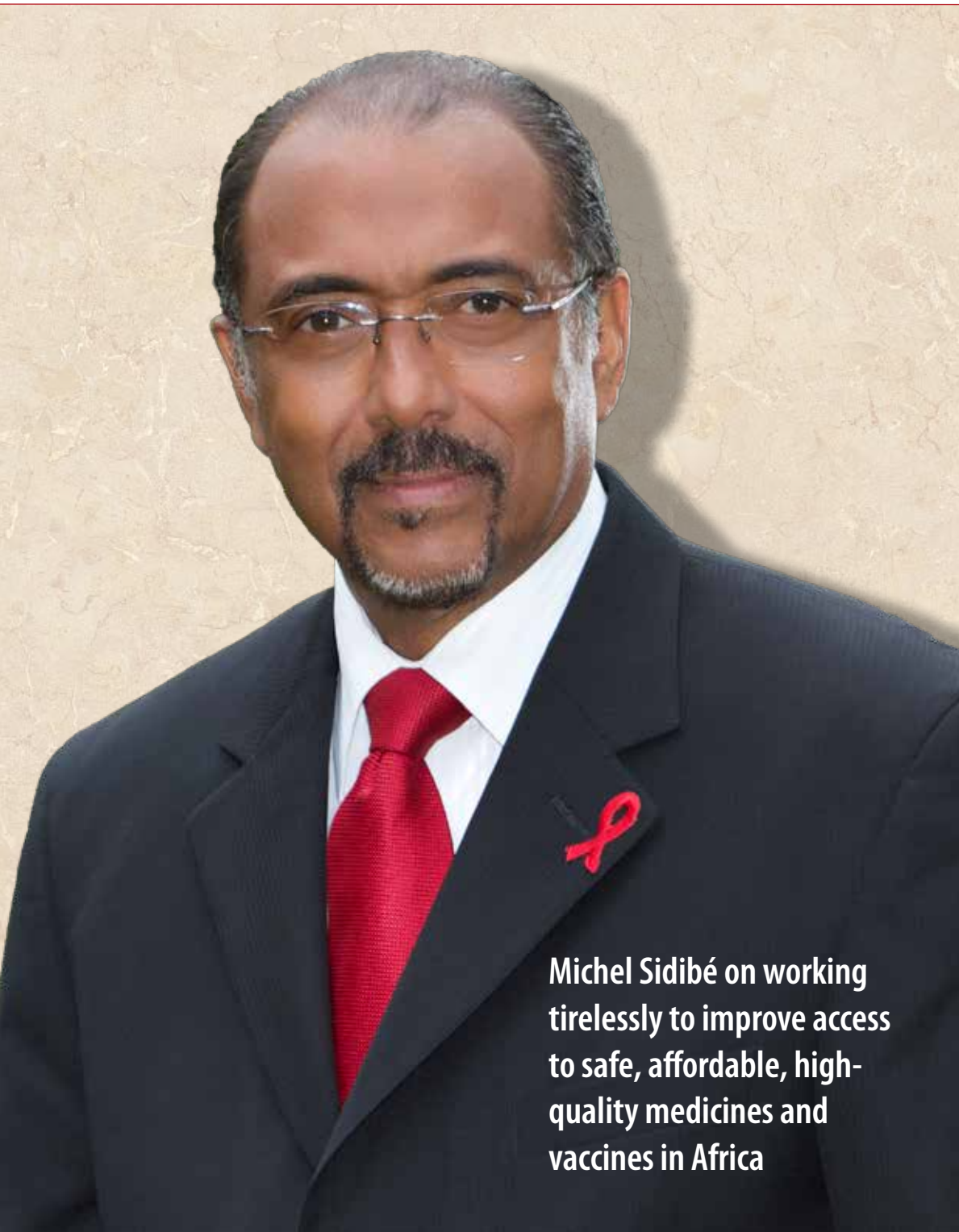


Newsletter of the
**African Continental Free Trade
Area-anchored Pharmaceutical Initiative**



Michel Sidibé on working tirelessly to improve access to safe, affordable, high-quality medicines and vaccines in Africa

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Editorial

Welcome to the first issue of the newsletter for the African Continental Free Trade Area-anchored Pharmaceutical Initiative (Pharma Initiative). It has been over two years since the Economic Commission for Africa (ECA), the Government of Seychelles (representing select small island developing States), the Intergovernmental Authority on Development, the African Union Commission and the African Union Development Agency launched the Pharma Initiative in collaboration with the United Nations family.

Since then, the Initiative has grown considerably. In this issue, you will read about the remarkable work that has been undertaken by ECA and partners on the establishment of the Africa Medical Supplies Platform, which is the centralized pooled procurement mechanism recommended to the pilot countries and the African Vaccine Acquisition Trust. The newsletter also discusses the ratification of the Treaty for the Establishment of the African Medicines Agency and what it means for the continent. Many other historic achievements are also presented. ECA is committed to the operationalization of the African Continental Free Trade Area by translating ideas into actions, in line with our commitment to ensuring



that private and public sector dialogue yields tangible outcomes. We look forward to working with member States to build resilient health-care systems for our people.

Through this newsletter, we will communicate policy-dialogue and stakeholder-engagement activities. We endeavour to share engaging content, promote activities and receive feedback from our member

States and all our partners. You are all invited to contribute content to this newsletter.

Welcome aboard!

Vera Songwe

Executive Secretary of the Economic Commission for Africa

Michel Sidibé

Working to improve access to safe, affordable, high-quality medicines and vaccines in Africa

During the first meeting of African health ministers, which ran from 14 to 17 April 2014 in Luanda, member States of the African Union were requested to allocate resources for the envisaged African Medicines Agency. Envisioned as a specialized agency of the African Union, the Agency would seek to harmonize regulations on medicines in Africa and improve access to safe, efficacious and high-quality medical products on the continent. The Treaty for the establishment of the African Medicines Agency was signed on 11 February 2019 during the thirty-second ordinary session of the Assembly of Heads of State and Government of the African Union. It was a challenge, however, to secure the requisite number of ratifications for the Treaty to enter into force.

It is against this backdrop that, in March 2021, the Chairperson of the African Union Commission, Moussa Faki Mahamat, appointed the former Minister for Health and Social Affairs of Mali and former Executive Director of the Joint United Nations Programme on HIV/AIDS (UNAIDS), Michel Sidibé, as the African Union Special Envoy for the African



Medicines Agency with a mandate to canvass for the rapid ratification and subsequent implementation of the Agency. By 28 July 2021, only a few months after Dr. Sidibé's appointment, the Agency had received the requisite number of ratifications. The Treaty entered into force on 5 November 2021.

The African Union Commission has invited member States to submit proposals for the hosting of the Agency's headquarters, which the Agency is expected to establish in 2022.

Dr. Sidibé sat for an interview with this publication to talk about what the Agency means for the African health sector, the importance of continental partnerships and his role as Special Envoy for the Agency.

He described the African pharmaceutical sector as "one of the fastest-growing sectors in the world", noting that it was expected to grow from \$19 billion (in 2012) to \$66 billion by 2022. He also noted that the health and wellness sector in Africa was expected to be worth about \$259 billion by 2030, and that the sector provided an opportunity

for large-scale investments in health care to achieve economies of scale in health infrastructure, expand employment opportunities to create more than 16 million jobs and deepen regional integration. It was an opportunity that the continent could not afford to miss, especially given the current glaring shortage of global solidarity in the management of the coronavirus disease (COVID-19) pandemic. The global health response to the pandemic had put the African continent under the spotlight. In particular, unequal access to vaccines had forced African countries to import \$14.5 billion of pharmaceuticals a year, a staggering 97 per cent of the pharmaceuticals that it uses. He emphasized that the COVID-19 pandemic had shown that the Agency was needed now more than ever, noting that, although 16 per cent of the world's population lived in Africa, the continent produced less than 0.1 per cent of global vaccines.

He urged the private sector to leverage the African Continental Free Trade Area through the Pharma

Initiative to help to address the social and economic challenges that African countries faced in their efforts to improve access to essential medicines and commodities. He expounded on the Pharma Initiative and its three-pillar approach, which seeks to build up the continent's health-care industry through the managed pooled procurement of pharmaceutical products in the pilot countries; facilitate local production of pharmaceutical goods; and ensure a sustainable, harmonized, regulatory framework governing the quality and standard of medicines and related medical products.

He underscored the key role that collaboration and partnerships would play in advancing the continental agenda. He commended the African Union Development Agency, which, in collaboration with the Commission, the Pan-African Parliament, the World Health Organization (WHO), the Bill and Melinda Gates Foundation, the World Bank and partners of the African Medicines Regulatory Harmonization programme, had been instrumental

in developing and coordinating the implementation of the four frameworks, namely, the Pharmaceutical Manufacturing Plan for Africa, the African Medicines Regulatory Harmonization programme, the African Union Model Law on Medical Products Regulation and the establishment of the African Medicines Agency. He said that the African Medicines Regulatory Harmonization programme continued to assist countries and regional economic communities in strengthening and harmonizing their national regulatory systems through its governance structures, which included the African Union-recognized African Medicines Regulators Conference as its assembly.

He explained that the African Medicines Agency would work in six areas:

(a) Marketing authorization

It would be responsible for evaluation and decision-making for selected medical products used to treat priority diseases and



conditions, as determined by the African Union.

(b) Inspection

It would coordinate the inspection of manufacturing sites and regularly share information on all products that it had authorized to be marketed.

(c) Market surveillance

It would coordinate the collection and sharing of information on all medical products, including substandard and falsified medical products.

(d) Safety monitoring

It would make regulatory decisions concerning products selected for the treatment of priority diseases and conditions, as determined by member States, based on available safety information. In addition, it would collect and store information on the quality and safety of medical products and share it with all the States parties to the Treaty and other parts of the world. It would also establish collaboration agreements on safety monitoring with global and regional centres.

(e) Oversight of clinical trials

It would coordinate joint reviews of applications to conduct clinical trials.

(f) Quality control

It would coordinate access to and would network quality control laboratory services for national and regional regulatory authorities.

Dr. Sidibé reaffirmed what the Agency represents for many countries and said that it was the fulfilment of the promise that local pharmaceutical production would be developed across



AMA | African Medicines Agency

the continent, that centres of excellence for research would be opened, that security of supply chains would be strengthened, and that measures would be taken to address substandard medicines. The operationalization of the Agency would be a turning point for the continent, as it would enhance regulatory oversight and facilitate access to safe and affordable medicines across Africa. The Agency would be the second continental health agency, after the Africa Centres for Disease Control and Prevention. It had the unique opportunity to become one of the most efficient and modern regulatory systems and would benefit all African countries equally. He concluded by commending ECA and partners for the successful launch of the centralized pooled procurement mechanism on 29 July 2021.

In his role as the Agency's Special Envoy, Dr. Sidibé works with the African Union Commission and other partners of the Agency, including ECA (within the context of the Pharma Initiative) and WHO, to encourage and facilitate the ratification and implementation of the Treaty by African Union member States.

He has been a champion of a people-centred approach to health and development for over 40 years. He has served as Minister for Health and Social Affairs of Mali (2019–2020) and as Executive Director of the Joint United Nations Programme on HIV/AIDS (UNAIDS), holding the rank of Under-Secretary-General (2009–2019). Prior to joining UNAIDS, he worked at the United Nations Children's Fund, where he supervised programmes that provided 10 French-speaking countries with assistance in formulating their national programmes, and at Terre des Hommes, where he first developed his passion for advancing global health and social justice. He will continue to work towards ensuring that the Agency's framework helps to prevent substandard medical products from circulating in African countries by harmonizing the registration of medicines and related products and requiring them to adhere to established standards and follow approval procedures. This will improve access to affordable medicines and vaccines for people throughout the continent. ■

Economic Commission for Africa hosts the Africa Investment Summit on Health in partnership with the African Business Coalition for Health and the National Institutes of Health of the United States of America

ECA, the African Business Coalition for Health and the National Institutes of Health of the United States of America hosted the online Africa Investment Summit on Health 2021 on 20 September 2021 on the margins of the seventy-sixth session of the General Assembly.

The Summit, presided over by the Under-Secretary-General of the United Nations and Executive Secretary of the Economic Commission for Africa, Vera Songwe, brought together private sector and government officials, development banks and philanthropists to catalyse substantial investment in local pharmaceutical manufacturing

to significantly increase access to vital health commodities and supplies in Africa and beyond.

In her address at the Summit, Ms. Songwe said that too many children were being lost to diseases owing to the shortage of vaccines, which could be manufactured in Africa. She explained that manufacturing vaccines on the continent would save lives and ensure that more children went to school every day, grew healthily and created innovations. Noting that, since the launch of the Africa Continental Free Trade Area, the public and private sector in Africa had been gradually grasping the opportunities

for economic prosperity, she highlighted the enormous business opportunities in the African health-care market.

She drew attention to the growth in imports of medicines and medical equipment in Africa, which had risen from \$4.2 billion in 1998 to \$20 billion in 2018, noting that the private sector could and should be a part of the health security solution for Africa to create jobs, build capacity, grow imports and potentially reduce health-care costs. She praised Africa for the manner in which, at the height of the COVID-19 pandemic, it had demonstrated its ability to pool procurement and



create instruments and institutions and had shown that innovative financing could solve the continent's biggest challenge: acquiring COVID-19 vaccines. She called upon all parties to step up their collective efforts to improve health outcomes in Africa.

In his opening remarks, the Chair of the African Business Coalition for Health, Aigboje Aig-Imoukhuede, said that it was deeply satisfying to see that, only two years after the Aliko Dangote Foundation and the African Business Coalition on Health had launched the partnership between ECA and the Coalition on the margins of the thirty-second ordinary session of the Assembly of Heads of State and Government of the African Union, the partnership had matured enough for the two organizations to jointly host an event such as the Africa Investment Summit on Health.

Stakeholders at the Summit agreed that the capacity of Africa to manufacture safe, high-quality pharmaceutical goods that were internationally recognized needed to be boosted in preparation for future pandemics. They also noted that doing so would create jobs for young Africans.

The Deputy Chairperson of the African Union Commission, Monique Msanzabaganwa, described the COVID-19 pandemic as a "challenge and a learning opportunity" for the continent. She highlighted the need for African countries to commit themselves to fulfilling their pledge of allocating 15 per cent of their budgets to the health sector.

The Chief Executive Officer of the African Union Development Agency, Ibrahim Mayaki, said that, in 2012, member States had endorsed the Pharmaceutical Manufacturing Plan for Africa to ensure self-sufficiency in terms of access to safe, affordable and high-quality pharmaceutical goods for all essential medicines and to contribute to improved health outcomes. He noted, however, that challenges such as access to affordable capital for manufacturers, access to technology and know-how, access to markets, policy regulations and investment in intellectual property first needed to be addressed.

The Director of the Africa Centres for Disease Control and Prevention, John Nkengasong, highlighted the importance of a "new public health order" to enable Africa to tackle infectious diseases in the twenty-first century. He said that vaccine-related innovation was critical for the continent's health security. He also said that initiatives such as partnerships for African vaccine manufacturing should be encouraged and that the Centres were calling for new, coordinated funding models that were aligned with the continent's aspirations for local vaccine manufacturing.

The Director of the Fogarty International Center and Associate Director for International Research at the National Institutes of Health, Roger Glass, said that partnership with Africa was of the utmost importance to the National Institutes of Health. Noting that South-South partnerships needed to be encouraged around Africa, he added that North-South partnerships were also essential to bring some of the newest technologies to Africa and

to see how they could be adapted locally.

He highlighted the need to re-engage African scientists in the diaspora back in the continent, given their understanding of the landscape and their sensitivity to local needs, and cited Dr. Nkengasong as a good example in that regard.

Representing the voice of African young people, Chiamaka Nwachukwu, from Nigeria, called for a shift from the conversation where young people were seen as "leaders of tomorrow and heirs of existing structures" to one where they were seen as "collaborators and co-owners in the present".

During the launch of the West African Pharma Initiative, Jane Karonga, of ECA, said that the Initiative was designed to foster local production of prescription drugs and medical equipment in West Africa, and ultimately the rest of the continent. She also drew on the lessons learned from the parent Pharma Initiative. She concluded that, with a combined population of over 411 million, the subregion presented enormous potential for the health sector.

It was announced at the Summit that Biodeal Laboratories, based in East Africa, had won a bid to receive investment and Good Manufacturing Practice support for the manufacture of maternal, neonatal and child health products under the Pharma Initiative. The support package included investment, as well as support with applying good manufacturing practices. ■

African Continental Free Trade Area-anchored Pharmaceutical Initiative launches centralized pooled procurement mechanism

The centralized pooled procurement mechanism of the Pharma Initiative was launched on 29 July 2021. The launch was attended by several entities: ECA, the African Union Commission, the African Union Development Agency and the Intergovernmental Authority on Development. The Initiative's pilot-country focal persons and State and non-State representatives also attended, as did private sector representatives.

Hosted by ECA, this special event was a significant milestone, with a high-level, multi-stakeholder commitment to addressing the continent's health-care challenges.

The launch follows the adoption of two key ECA studies: a situational analysis and feasibility study of the Pharma Initiative, focusing on reproductive, maternal and child health products, and a framework for implementing a centralized pooled procurement mechanism in 10 pilot countries. The latter study showed that centralized pooled procurement could cut costs by 43 per cent.



Senait Fisseha, Director of Global Programmes, Thompson Buffett Foundation

Delivering the keynote address on behalf of Ms. Songwe, the Director of the Regional Integration and Trade Division, Stephen Karingi, said that the global response to the COVID-19 pandemic had exposed shortcomings and gaps in supply chain and health-care management. As such, it was crucial for the continent to rethink methods and strategies to align the objectives of the Pharma Initiative with current realities to create more robust and impactful regional and continental approaches to improve health outcomes in Africa.



Stavros Nicolaou, senior executive, Aspen Pharmacare

He said that the objective of the launch was to solicit buy-in from pilot countries on the proposed centralized pooled procurement mechanism and the corresponding work programme, time frames and expected objectives, as well as to establish the necessary institutional arrangements (at the secretariat and national levels) for the successful implementation of the mechanism. He concluded his remarks by emphasizing that the launch was intended to showcase health business opportunities for private sector investment, which would create jobs, reduce costs and boost productivity, leveraging

the African Continental Free Trade Area and the African Medicines Agency for sustainable and inclusive development in Africa.

The Director of Global Programmes at the Susan Thompson Buffett Foundation, Senait Fisseha, emphasized the relevance of the launch, in particular given how the pandemic had highlighted the failure of the global system to distribute much-needed supplies fairly. Ms. Fisseha drew attention to the power of African countries coming together to build their own solutions through initiatives such as the African Vaccine Acquisition Trust. She said that, through the Trust, ECA, the African Export-Import Bank, the World Bank Group and the Africa Centres for Disease Control and Prevention, among others, had worked in partnership to ensure that Africa would achieve its goal of administering safe and efficacious COVID-19 vaccines to at least 60 per cent of the continent's population. She also commended the Pharma Initiative for its focus on select maternal, neonatal and child health pharmaceuticals and



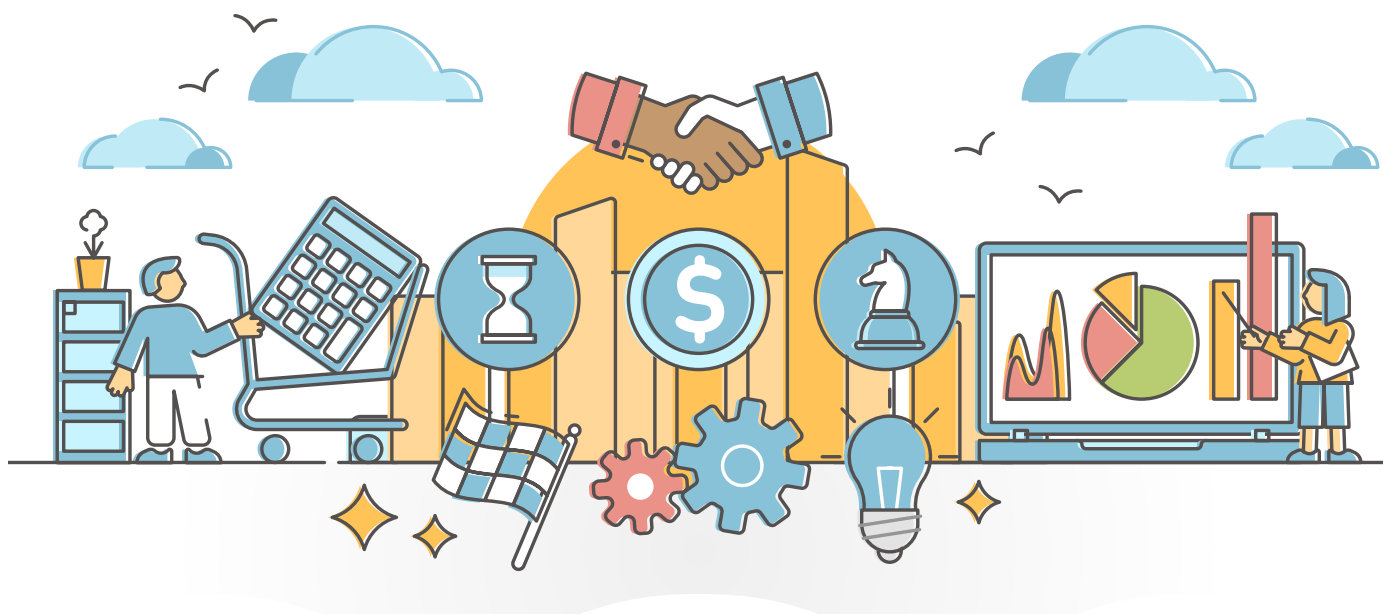
Stephen Karingi, Director of the Regional Integration and Trade Division

personal protective equipment, which showed that the project was focused on the situation on the ground, given that women and children were the most vulnerable.

The participants were shown a presentation of the structural and institutional arrangements for the centralized pooled procurement mechanism. In the presentation, it was highlighted that successful implementation would contribute to the development of the continent's infrastructure and logistics needs and the provision of safe, secure, high-quality products.

Successful implementation would help member States to acquire a sustainable supply of high-quality drugs, predict demand more accurately, reduce transaction costs, and possibly reduce the total price paid for drugs and related products. The presentation also emphasized that the Pharma Initiative envisaged leveraging the single economic area created by the African Continental Free Trade Area to make logistics more secure and develop a controlled environment for procurement and distribution.

In the ensuing discussions, participants discussed the role of private sector participation in the roll-out of the Pharma Initiative. Stavros Nicolaou, a senior executive at Aspen Pharmacare, commended ECA and its partners for the launch and emphasized that COVID-19 had shown that it was time for the continent to fast-track local production of pharmaceuticals. Mr. Nicolaou cited Aspen as a good example of what African countries could achieve as they continued to set benchmarks in the manufacture of general anaesthetic products. ■



Seychelles at the forefront of continental efforts to improve access to high-quality medicines

According to the report “Healthcare and economic growth in Africa”, published by ECA in 2019, Africa still does not spend enough money on health care to meet its growing financing needs, with the financing gap estimated at \$66 billion per annum. The same report stated that, over the period 2000–2015, total spending on health care in Africa remained within a narrow band of 5–6 per cent of gross domestic product (GDP). Globally, spending on health and medical products typically accounts for 20–30 per cent of GDP. For their part, small island developing States face constant challenges when buying medicines, challenges that have become even more pronounced during the current global pandemic. These include high prices, lack of negotiating power and substandard products and have underscored the need to rethink ways and strategies to align the objectives of the Pharma Initiative with current realities to make regional and continental approaches to health care more robust, with a greater impact on health outcomes in our member States.

Seychelles is proud to represent island States in being one of the 10 countries selected to pilot the Pharma Initiative. The right to health

is enshrined in the Constitution of Seychelles and there are specific articles that underscore the commitment of the State to providing health care to its citizens and the duties that it has towards them. The Ministry of Health has one of the largest workforces of all government ministries and one of the largest budgets.

The groundbreaking work that is being undertaken on the Pharma Initiative has shown the potential of what countries can achieve if they leverage the African Continental Free Trade Area and the African Medicines Agency to create scaled-up local pharmaceutical production through pooled procurement and a harmonized regulatory framework. Seychelles has worked tirelessly in ensuring that African small island developing States benefit from pooled procurement for drugs and vaccines to improve the quality and accessibility of maternal, neonatal and child health medicines and other health products. The efforts already undertaken by the pilot



countries in the Pharma Initiative will increase the attractiveness of their pharmaceutical markets.

Seychelles believes that, by creating a larger stream of demand, it will improve access to high-quality, competitively priced medicines. The country believes that, for Africa to achieve the goal of becoming a prosperous continent, countries need to improve health outcomes to boost productivity and create more jobs. ■

Member States convene to accelerate establishment of a regional medicines database

On 4 November 2021, senior government officials, procurement experts, the focal points from the health ministries of 10 pilot project countries and a team of continental experts attended an online high-level consultative forum on the creation and establishment of a regional pooled procurement database on select maternal neonatal and child health medicines. This consultative forum followed on from the successful launch, on 29 July 2021, of the centralized pooled procurement mechanism of the Pharma Initiative.

The objective of the forum was to advocate the creation and establishment of the e-platform for the pooled procurement mechanism database; to review the list of maternal, neonatal and child health products; and to create awareness on the roles of pilot countries regarding the operationalization of the centralized pooled procurement mechanism. The meeting provided a platform to discuss the creation of the pooled procurement network, which allows staff involved in the procurement of health products to share information on procurement processes.

When delivering the keynote address, the project lead for the

Pharma Initiative, Jane Karonga, said that the global response to the coronavirus disease (COVID-19) pandemic had exposed shortcomings and gaps in supply chains and health-care systems. Even though the Pharma Initiative had been launched a year before the pandemic had hit the world, the groundbreaking work that had been undertaken on it had shown what countries could achieve if they leveraged the African Continental Free Trade Area and the African Medicines Agency to scale-up local pharmaceutical production, influence prices through pooled procurement arrangements and ensure a harmonized regulatory framework and quality standards. Highlighting the successes of the Pharma Initiative, she concluded by drawing attention to the leveraging of the project's three pillars during the establishment of offshoot institutions such as the African Vaccine Acquisition Trust and the Africa Medical Supplies Platform, the first African-owned online pooled procurement mechanism.

The pilot countries unanimously agreed that the regional maternal, neonatal and child health



medicines database would be a game changer for them and, consequently, for the continent as a whole. Operationalization of the database would create a conducive environment for pooling procurement processes to attract favourable prices in the short to medium term. Those favourable prices would then create the much-needed fiscal space for countries to further develop their health sectors or any other sectors of their economies. They also agreed that national stakeholder alignment was critical for successful implementation.

At the end of the Forum, member States expressed their appreciation for the consultation and said that they looked forward to future engagements on the implementation of the Pharma Initiative. ■

Reflecting on the role and significance of the African Continental Free Trade Area-anchored Pharmaceutical Initiative

It has been over two years since ECA, the Government of Seychelles (representing select small island developing States), the Intergovernmental Authority on Development, the African Union Commission and the African Union Development Agency, in collaboration with the United Nations family, launched the Pharma Initiative. For this issue of the newsletter, the editorial team sat down with the project lead spearheading the implementation of the Pharma Initiative, Jane Karonga, who is an economic affairs officer at ECA.



Editorial team: Ms. Karonga, please take us through the Pharma Initiative and tell us what it is about?

JK: The Pharma Initiative journey began in 2018, when ECA commissioned a report titled “Review of policies and strategies for the pharmaceutical production sector in Africa: policy coherence, best practices and future prospective”. The policy recommendations emanating from the report informed the 2019 Africa Business Forum, which was convened on the margins of the thirty-second ordinary session of the Assembly of Heads of State and

Government of the African Union on 12 February 2019.

The objective of the Forum was to facilitate and consolidate a regional partnership between the private and public sector to advance health outcomes and shape African health markets in order to strengthen the continent’s health systems and health-care services and create a sustained and inclusive development economy. In its report on health care and economic growth in Africa, launched at the Forum, ECA advocated improving health to drive economic growth in Africa and called upon the private sector to play a significant role

in achieving that aim. The Forum culminated with the launch of the African Business Coalition for Health, an African-led coalition that mobilizes a core group of private sector champions to advance health outcomes and shape health markets in Africa.

Following the launch of the Coalition, ECA convened a subregional forum on the African Continental Free Trade Area for the Horn of Africa, held in Addis Ababa on 23 and 24 May 2019, on the theme of ratification and implementation of the Area: breaking down geographical, logistical and regulatory barriers to

returning Africa to a sustainable and inclusive economic path for growth.

According to WHO, counterfeit medicines are the world's most lucrative counterfeit goods, with a global market worth roughly \$200bn. Africa accounts for around 42 per cent of those medicines. This leeches money from health-care systems and kills thousands of people, mostly in vulnerable communities. The Pharma Initiative leverages continental frameworks such as the African Medicines Agency to harmonize regulatory frameworks and inspections to ensure that member States have access to high-quality, efficacious medicines and medical products.

Editorial team: What should be the role of WHO, the African Union Commission and other regional bodies in the implementation of the Pharma Initiative?

JK: Partnerships and collaborative frameworks are key to the delivery of universal health care. Diseases know no bounds in a world where there are no more borders. While it is acknowledged that Africa must chart its own developmental path carefully and consider the interests of its citizens, it must do so effectively by leveraging win-win partnerships and it must provide the necessary leadership and direction in technical support and capacity-building initiatives to ensure that the desired outcomes are achieved. Therefore, the roles of partners such as WHO and the African Union Commission are to ensure that the Pharma Initiative builds on existing frameworks, leverages the respective technical expertise and incorporates synergies to reduce fatigue among

member States and deliver the objectives of the Initiative effectively and efficiently.

Editorial team: Can you talk about the importance of the private sector in the implementation of the project?

JK: The continental dimension of the Pharma Initiative provides a critical and promising market for private sector engagement. The private sector can bridge the gap in the direct provision of health care, the management of health-care institutions, the manufacturing of health-care goods and services (such as medicines, pharmaceutical products and rehabilitation), and the financing of health-care products and services to build production capacities for the longer term. The successful implementation of the Pharma Initiative therefore provides a strong business case for the private sector to play a significant role in shaping health markets and contributes towards the improvement of health care in Africa.

The partnership with the private sector provides the much-needed investment in the health sector. It is also important for member States to support and encourage domestic and international investment by creating a conducive business environment. This includes offering incentives to encourage local pharmaceutical manufacturing hubs and working to improve policy harmonization, research and development, human capital development and capacity-building across the pharmaceutical sector.

Editorial team: How has the pandemic affected the roll-out of the Pharma Initiative?

JK: Prior to the COVID-19 outbreak, Africa was ill prepared to meet the pharmaceutical needs of its population. The COVID-19 pandemic further laid bare the weak health systems in Africa. Because African countries rely on imports of pharmaceuticals, they experienced shortages of essential supplies such as medicines and personal protective equipment. This led to an increase in the presence and circulation of substandard products on the market, leading to lives being lost and economies being brought to their knees. Inherently, this reversed economic growth and increased poverty.

On the positive side, the groundbreaking work that was being undertaken under the Pharma Initiative, especially its three pillars, motivated the operationalization of the African Vaccine Acquisition Trust, which led to the successful negotiation to purchase up to 400 million doses of Johnson and Johnson vaccines for African countries. Furthermore, the continental policy relevance of the Pharma Initiative led to the launch of the Africa Medical Supplies Platform, a platform to address the COVID-19 pandemic developed in partnership with the African Export-Import Bank, the Africa Centres for Disease Control and Prevention, Econet and ECA. The Platform is a unique interface that enables volume aggregation, quota management, payment facilitation, logistics and transport to ensure that African Governments have equitable and efficient access to critical



COVID-19 supplies. The Platform unlocks immediate access to vetted manufacturers and strategic procurement partners in Africa and worldwide to make the purchase of certified medical equipment such as diagnostic kits, personal protective equipment and clinical management devices cheaper and more transparent.

Editorial team: Could you outline what it takes for partners to make the Pharma Initiative successful?

JK: For the project to achieve its mandate, it is imperative that

partners, including the pilot countries:

- Align their national and regional policies and strategies with the Initiative's objectives, helping to generate the benefits of economies of scale, build synergies, share the workload and avoid costly duplication;
- Leverage existing expertise and experiences to manufacture pharmaceuticals;
- Put in place education policies that foster research,

innovation and development in pharmaceuticals.

Through active engagement with partners, ECA will continue to prioritize the project and equip member States in developing policies, thus aiding partnership-building and international collaboration. This is in line with the vision of the Pharmaceutical Manufacturing Plan for Africa, an African Union initiative to catalyse local pharmaceutical production in Africa. ■

AfCFTA-anchored Pharma Initiative



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