



Summary Report on Research Preparedness Ecosystem Engagement Workshop

Advancing Research Capacity in West Africa (ARC-WA)

30 October – 1 November 2024

Lancaster Hotel, Accra, Ghana

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LIST OF ACRONYMS

Africa CDC	Africa Centres for Disease Control and Prevention
ARC-WA	Advancing Research Capacity in West Africa
AMA	Africa Medicines Agency
AVAREF	African Vaccine Regulatory Forum
CEPI	The Coalition for Epidemic Preparedness Innovations
COVID-19	Coronavirus Disease 2019
ECOWAS	Economic Community of West African States
IVI	International Vaccine Institute
MoH	Ministry of Health
MRCG	Medical Research Council Unit The Gambia at the London School of Hygiene and Tropical Medicine
NPHI	National Public Health Institute
PREVAIL	Partnership for Research on Vaccines and Infectious Diseases in Liberia
TCP	Technical Coordinating Partner
TWG	Technical Working Group
WAHO	West African Health Organization
WANETAM	West African Network for Tuberculosis, AIDS and Malaria
WHO	World Health Organization

1 BACKGROUND AND SUMMARY

Effective prevention of disease outbreaks requires robust mechanisms for early detection, rapid response, and a comprehensive understanding of emerging threats, a critical component of which is strong research preparedness. Previous assessments, including a stakeholder and landscape analysis and consultation with Lassa fever stakeholders at a workshop in Dakar (25-27 June 2024), identified key challenges hindering these efforts, including network limitations, inefficiencies in cross-border collaboration, and deficiencies in research infrastructure and human capacity. These findings underscore the imperative for further investment and concerted attention to address these gaps.

Enhancing research preparedness requires fostering regional collaboration, establishing robust networks for response, and developing the capacity of research networks and stakeholders to protect populations from the devastating effects of pandemics. To facilitate this process, a follow-up sub-region-wide workshop was held to validate the findings from the landscape analysis and to co-develop an engagement plan for a West African research preparedness ecosystem. The workshop was co-hosted by the Africa Centres for Disease Control and Prevention (Africa CDC), the West African Health Organization (WAHO), the Coalition for Emergency Preparedness Innovations (CEPI) and the Technical Coordinating Partner (TCP) for the Research Preparedness Programme made up of the International Vaccine Institute (IVI) and the Medical Research Council Unit, The Gambia at the London School of Hygiene and Tropical Medicine (MRCG).

The objectives of this workshop, proceedings and outputs are outlined in the pages that follow. Based on the gaps identified, six proposed solutions were proposed which are detailed in Section 8, with next steps articulated in Section 9.

2 WORKSHOP OBJECTIVES

The objectives of the workshop were:

- a. To consult a range of stakeholders in West Africa on preparedness for clinical research, clinical trials and product development.
- b. To share and finalize mapping of the research preparedness landscape in West Africa including key stakeholders, existing infrastructure, networks, capabilities, strengths, and challenges.
- c. To obtain stakeholders' feedback on the vision for a regional ecosystem/network for research preparedness.
- d. To co-develop an engagement plan/roadmap for sustainable capacity development in research preparedness in West Africa.

3 OVERVIEW OF THE WORKSHOP

The workshop took place from 30th October to 1st November 2024 at the Lancaster Hotel in Accra, Ghana. Efforts were made to identify key MoH, public health, and other relevant stakeholders in each country through initial contacts and subsequent referrals. In the end, the meeting brought together 120 participants from Africa CDC, WAHO, representatives from 15 West African states, and other stakeholders relevant to pandemic preparedness and response in the sub-region. Participants from countries included representatives from Ministries of Health (MoH) and National Public Health Institutes (NPHI), researchers, and clinical trialists. The list of participants is attached as Appendix 10.1.

The three-day meeting included the following sessions (the full agenda is attached as Appendix 10.2):

- Introductory messages from the IVI, MRCG, Africa CDC, WAHO, and CEPI.
- An overview of our existing understanding of the research preparedness landscape in West Africa, which formed the basis for developing an engagement plan for sustained research preparedness.
- Breakout sessions, country engagement meetings, and interactive plenary sessions.

4 WELCOME AND INTRODUCTION

The TCP, represented by Prof Florian Marks and Prof Ed Clarke welcomed participants to the workshop, noting that engagement with key stakeholders in the region is critical to the goals of the research preparedness programme. The team pointed out that the workshop was expected to facilitate the development of a tangible roadmap with clear deliverables to improve existing capacity minimise the risk and enhance the response to future pandemics.

Dr. Nebiyu Dereje Abebe of Africa CDC presented the Africa CDC Strategy Plan 2023–2027, focusing on its priorities and enablers. He emphasized the importance of the New Public Health Order, explaining its necessity in addressing the continuous need for health systems strengthening. He also highlighted the critical role of strong local leadership, fostering innovation, and investing in broader public health infrastructure to achieve self-reliance to ensure that health systems remain resilient during and after crises.

Dr. Virgil Lokossou of WAHO also gave an overview of WAHO's mandates and vision, reflecting on WAHO's 15-year journey in promoting research capacity amid challenges. Dr. Lokossou highlighted WAHO's areas of commitment to supporting the research preparedness agenda through strategic and moral approaches.

Dr. Christof Vinnemeier from CEPI gave an overview of the rationale and goal of CEPI's research preparedness programme aiming to leverage clinical trial capacity for routine

vaccine development for the generation of evidence in future outbreaks. He pointed out that, as a funder and facilitator, CEPI recognises that the stakeholders present are the experts. It was highlighted that existing capacity and ongoing efforts in the region should be leveraged in achieving the programme's goals.

5 THE CURRENT LANDSCAPE

In advance of the workshop, the TCP conducted stakeholder mapping and landscape analysis using desk reviews, key informant interviews, and a regional pilot ecosystem engagement workshop in Dakar in June 2024. Through this process, a range of stakeholders involved in governance and coordination, research, surveillance, regulatory, and healthcare delivery were identified, as well as strengths and gaps in research preparedness across the region.

Based on this analysis, participants in Accra were presented with a high-level overview of the research preparedness landscape in West Africa. It was highlighted that one of the outputs of this workshop is to develop a stakeholder engagement plan and a strategy for emergency evidence generation readiness in West Africa.

In breakout groups, participants discussed the identified strengths and gaps of the current state of research preparedness and proposed additions or refinements.

Although each country has its strengths and gaps, a consensus was attained on the high-level strengths and gaps of research preparedness across the region as follows:

5.1 Strengths

- i) Varying levels of national coordination structures for outbreak response and mechanisms for emergency preparedness and response in place
- ii) Active research institutions and laboratories conducting clinical trials and vaccine research, and health facilities and clinical trial sites with the capability to detect cases and conduct clinical research
- iii) Some countries with strong regulatory oversight for trials and licensing of vaccines and pharmaceuticals
- iv) Some in-country engagements among stakeholders involved in implementing and funding emergency preparedness and response efforts
- v) Increased political will for addressing epidemics across the region
- vi) Existence of regional and continental bodies with health emergency mandates (Africa CDC and WAHO)

5.2 Gaps

- i) Limited prioritisation of national agenda for research preparedness
- ii) Limited regional and national coordination of research preparedness activities
- iii) Limited capacity for clinical research (clinical trial units, human resources, and community participation)

- iv) Limited regulatory and ethical review capacity at regional and national levels
- v) Limited in-country and cross-border collaboration for clinical research
- vi) Inadequate funding/resources for research preparedness activities

6 AFRICA CDC'S VISION FOR RESEARCH GOVERNANCE AND COORDINATION

Dr Mosoka Fallah shared the Africa CDC's research vision for research governance, coordination, and prioritization. He outlined the Africa CDC's six strategic priorities as:

- i) Strengthening integrated health systems
- ii) Building up proactive surveillance
- iii) Ensuring robust emergency preparedness and response capabilities
- iv) Strengthening NPHIs
- v) Expanding health product innovation and manufacturing
- vi) Expanding clinical and public health laboratory systems

He emphasized the importance of avoiding duplication and reinventing the wheel by leveraging existing governance structures at both national and regional levels to ensure a more efficient, cohesive, and sustainable system for research preparedness governance. He added that clear communication and coordination mechanisms are essential to align research priorities and public health responses at both levels. National and regional governing bodies must work collaboratively to ensure that these efforts are well-funded, effective, and responsive to emerging health threats. At the end of this session, we had a plenary discussion to reinforce the collective agreement on these key points.

7 SUSTAINABILITY

The session on sustainability aimed to explore strategies for ensuring the long-term sustainability of West Africa's clinical research ecosystem. Africa CDC, WAHO, and IQVIA delivered a presentation highlighting the critical importance of sustainability in research and development.

This was followed by a breakout session where participants discussed both traditional and innovative financing mechanisms to support the sustainability of research preparedness in West Africa.

While this workshop report provides a summary, a detailed analysis of the extensive discussions will be included in a separate report that is being finalized.

It was agreed that all new initiatives must prioritize sustainability to ensure the longevity and impact of efforts to strengthen the region's research capacity.

8 DEVELOPING AN ENGAGEMENT PLAN

Based on the gaps that were agreed upon by the participants on the preceding day, high-level ideas were presented, along with key considerations to guide the next steps. This iterative process followed a structured approach of assessment, validation, and refinement of initial ideas, leading to the development of actionable solutions. The breakout sessions and country meetings were designed to facilitate brainstorming and discussions, ensuring that these solutions could be effectively incorporated into the engagement plan.

The proposed solutions, organised according to the identified gaps, are summarized below:

8.1 Prioritization of national agenda for research preparedness

- i) Organise national-level consultations or workshops to collaboratively define a cohesive research agenda.
- ii) Ensure early, inclusive stakeholder engagement involving all relevant parties - such as community stakeholders, industry representatives, researchers, and leaders from national public health institutes (NPHIs).
- iii) Secure high-level advocacy within each country and at the regional level to establish a unified commitment to include research preparedness in national action plans.
- iv) Identify existing research prioritization tools in use or being developed (within countries, Africa CDC and WHO).
- v) Adopt appropriate and aligned tools for prioritization of diseases/pathogens with epidemic potential at country and regional levels
- vi) Pilot the prioritization tool in 2-3 countries to evaluate its feasibility and effectiveness, with plans for a phased scale-up informed by the outcomes of the pilot.
- vii) Present a detailed plan with research priorities to funders to secure funding.

8.2 Regional and national coordination of research preparedness activities

- i) Leverage existing national research preparedness and regional coordination structures rather than creating new ones, ensuring national representation at the regional level.
- ii) Address gaps in national coordinating structures identified by WAHO in 2017-2018, ensuring that assessments are completed in all countries.
- iii) Embed research preparedness in national health policies and align regional research agenda with national health priorities
- iv) Africa CDC and WAHO to strengthen community leadership and collaboration in alignment with national and international partners.
- v) Secure political commitment to supporting research preparedness at the regional level, demonstrated by legal frameworks and performance monitoring systems to ensure accountability and sustainable funding.

8.3 Strengthening capacity for clinical research

- i) Develop or adopt a comprehensive assessment tool to map clinical research resources across the region (e.g. Africa CDC to pilot tracking strengths (human resources, infrastructure) in two countries soon).
- ii) Implement a hub-and-spoke model as a strategy to enhance linkage and networking among clinical research sites, thereby strengthening capacity and improving research preparedness and response across the region.
- iii) Following a comprehensive research site assessment, evaluate the capacity of sites to support the hub and spoke model for networking research sites, and define criteria for designation as hubs and responsible actors at national and regional levels.
- iv) Consider population size, disease burden, and geographical spread in hub selection to avoid oversaturation of hubs in some countries and to ensure regional balance and equitable support.
- v) Designate or create at least one clinical research site per country as a national centre of excellence endorsed by health/research ministries as part of the broader regional hub and spoke model.
- vi) Establish clinical research training programmes with inter-country mobility.
- vii) Improve bio-banking capacity in West Africa while addressing the high costs and data access challenges associated with bio-banking through collaboration with global biobanks.

8.4 Strengthening Regulatory and Ethics Systems at national and regional level

- i) Collaborate with Africa CDC, WAHO, the African Vaccine Regulatory Forum (AVAREF), and the African Medicines Agency (AMA) to map the existing capacity of regulatory and ethics systems across the region using an appropriate benchmarking tool such as the WHO Global Benchmarking Tools for regulatory and ethics oversight.
- ii) Liaise with Africa CDC, WAHO, AVAREF, and AMA to strengthen capacity of national regulatory and ethics bodies including training, increase their awareness and ownership of international guidelines, and promote countries' adoption of best practices with tailored systems and processes.
- iii) Implement a partnership programme to enable countries with stronger regulatory systems to support others (approvals and capacity strengthening)
- iv) Liaise with Africa CDC, WAHO, AVAREF, and AMA to build on their harmonization framework and processes for multi-country approvals.
- v) Consider creating a unified submission entry point for clinical trial applications to streamline assessments and encourage more regional research proposals.
- vi) Promote regional engagement among regulatory and ethics bodies through annual meetings to facilitate linkages and shared learning and resources (e.g. Africa CDC has facilitated such a meeting).

8.5 Strengthening cross-country collaboration for clinical research

- i) Leverage existing regional networks, such as AVAREF, the West Africa Network of Excellence for clinical trials in TB, AIDS, and Malaria (WANETAM), and Partnership for Research on Vaccines and Infectious Diseases in Liberia (PREVAIL).
- ii) Link research institutes and laboratories with existing surveillance platforms.
- iii) Address language barriers by incorporating official and local languages in initiatives.
- iv) Establish comprehensive laboratory databases to improve data sharing and collaboration.
- v) Promote regional collaboration for the local production of diagnostic tools, leveraging shared resources, harmonized standards and cross-country supply chain to reduce reliance on external sources.
- vi) Develop cross-border strategies and partnerships to integrate research into broader health initiatives.
- vii) Establish regional policies for operationalizing cross-country research, focusing on shared regional interests and common health problems.

8.6 Ensure sustainable funding/resources for research preparedness activities

- i) Develop sustainable resource allocation mechanisms for research.
- ii) Ensure long-term commitment to the development of research infrastructure.
- iii) Advocate for the creation of sustainable funding mechanisms for research preparedness through both national sources (e.g., taxes and mining revenue) and regional funds.
- iv) Pursue stronger advocacy for prioritizing research and ensure that government actors understand the value of research and the need to allocate adequate resources.
- v) Implement accountability tools, like a scorecard system, to monitor these commitments and track progress, particularly at high-level meetings, utilizing existing platforms such as AVAREF.

The meeting concluded by emphasizing the interconnected nature of these solutions and the importance of building on existing good practices. Participants agreed on the need for comprehensive assessment tools, regular stakeholder engagement, and the development of sustainable funding mechanisms. The focus will be on implementing these solutions through regional harmonization frameworks while maintaining flexibility to accommodate individual country needs and capabilities.

9 NEXT STEPS

Overall, participants agreed on the following next steps:

- a) Prepare a publication-ready document—either a communiqué and/or a journal submission, based on information derived from the workshop summary report. A communiqué would serve as a concise policy brief for dissemination through platforms such as Africa CDC's website, while a short workshop report or paper could be submitted to a journal. Before the end of 2024, the TCP will convene a meeting with Africa CDC and WAHO, to agree roles and responsibilities and begin drafting the materials, with an aim to move forward to publication in Q1 2025.
- b) Develop a specific and actionable engagement plan based on the proposed 'solutions', which can then be costed and considered for funding support. The TCP will produce a draft engagement plan, for consultation in Q1 2025.
- c) Schedule follow-up meetings with Africa CDC and WAHO to finalize this roadmap, incorporating 2025 activities and strategic objectives.

10APPENDICES

10.1 List of participants

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10.2 Workshop agenda

Day 1: Wednesday, 30 October 2024

0830-0915	Registration	
Session 1: “Introductions”		
0930-0945	Welcome, Overview of workshop and participants (15m)	TCP: Prof Florian Marks, Prof Ed Clarke, and Dr Anthony Huszar
0945-1030	Introduction from Africa CDC (10m) + WAHO (10m) + CEPI (10m) + Q&A (15m)	Dr Nebiyu Dereje Abebe, Africa CDC Dr Virgil Lokossou, WAHO Dr Christof Vinnemeier, CEPI
Session 2: “The Current Landscape” Chair: Prof Ellis Owusu-Dabo, KNUST		
1030-1100	High-level summary of the Dakar workshop, regional landscape and cross-cutting issues (30m)	TCP: Dr Nadia Tagoe, Dr Ahmed Futa, and Dr Asma Aziz
1100-1130	Break (including group photo)	
1130-1230	Breakout Rooms: discussion/feedback session (60m)	Africa CDC/WAHO/TCP facilitators (mixed allocation across 5 rooms)
1230-1400	Lunch	
1400-1445	Plenary feedback and discussion (45m)	TCP facilitators
Session 3: “Vision for Governance and Coordination” Chair: Dr Mosoka Fallah, Africa CDC		
1445-1515	Sharing the research vision, proposed continental and regional research governance and coordination (30m)	Dr Mosoka Fallah, Africa CDC
1515-1615	Plenary feedback and discussion (60m)	
1615-1645	Refreshments	
1645-1730	<i>Side Meeting for representatives from Sierra Leone, Liberia, Guinea, and Benin: ARC-WA Ph3 site assessment briefing.</i>	<i>TCP facilitators: Dr Armel Zemsi, Dr Derick Kimathi, Dr Mohamadou Sirbie</i>
1830-	Dinner Reception/Networking	

Day 2: Thursday, 31 October 2024

0900-0915	Recap of Day 1 (15m)	Dr Anthony Huszar, TCP
Session 4: “Developing an Engagement Plan” Chair: Prof Dorothy Yeboah-Manu, Noguchi Memorial Institute for Medical Research, University of Ghana		
0915-0945	Engagement Plan idea development (30m)	TCP: Dr Nadia Tagoe, Dr Ahmed Futa, and Dr Asma Aziz
0945-1045	Breakout Rooms: discussion/feedback session (60m)	Africa CDC/WAHO/TCP facilitators (allocated by professional groupings)
1045-1115	Break	
1115-1245	Plenary feedback and discussion (90m)	TCP facilitators

1245-1400	Lunch	
Session 5: “Sustainability” Co-led by Africa CDC and WAHO		
1400-1600	Sustainability, co-led by Africa CDC and WAHO, technical facilitation by IQVIA (2h)	Dr Elvis Temfack, Africa CDC Dr Virgil Lokossou, WAHO Dr Fiona Pereira, IQVIA
1600-1615	Refreshments	
Session 6: “Country Meetings”		
1615-1715	Country Meetings: representatives from Niger, Benin, Côte d'Ivoire, Cape Verde, Guinea – Landscape Analysis and Engagement	TCP facilitators (5 breakout rooms)
1715-1815	Country Meetings: representatives from Senegal, Togo, Ghana, Mali, Sierra Leone – Landscape Analysis and Engagement	TCP facilitators (5 breakout rooms)

Day 3: Friday, 1 November 2024

0815-0915	Country Meetings: representatives from The Gambia, Burkina Faso, Nigeria, Liberia, Guinea Bissau – Landscape Analysis and Engagement	TCP facilitators (5 breakout rooms)
Session 7: “Developing an Engagement Plan (part 2)” Chair: Dr Virgil Lokossou, WAHO		
0930-1045	Discussion on engagement solutions / structures and activities (75m)	TCP facilitators
1045-1115	Break	
1115-1215	Discussion on engagement solutions / structures and activities (60m)	TCP facilitators
1215-1230	Closure (Final remarks from Africa CDC, WAHO, CEPI) (10m) Next steps, thank you (TCP, 5m)	
1230-1400	Lunch	
1400-1600	<i>Side Meetings: ARC-WA governance</i> - 1400-1500: CMG meeting (by invitation) - 1500-1600: JSC meeting (by invitation)	