BACKGROUND

Recent outbreaks of Zika in the Americas and Ebola in West Africa have exposed vulnerabilities in the global health system. West Africa often presents a particular challenge, with its growing population, often poor infrastructure, and vulnerable health systems. This leads to increasingly visible dangers which can no longer be ignored by Europe due to its geographical vicinity and growing exchange of people and goods with the African continent.

In order to facilitate a productive exchange among the global health community in Berlin, on June 30, 2016, eHealth Africa hosted a discussion event dedicated to Global Health Security – Focus Africa. The event aimed to address questions on possible pandemic outbreaks in Africa and Europe, methods of containment, and learnings from previous pandemics.

Audience members included medical practitioners, researchers, and employees of nonprofit organizations, who represented such institutions as Save the Children, the Robert Koch Institute, the Charité Berlin or ONE.org. The event was supported by WeWork, Vadoli, the European Leadership in Cultural, Science and Innovation Diplomacy, the German Association for the Control of Viral Diseases, the Robert Koch Institute and the Charité Berlin.

PANEL DISCUSSION

WeWork, a modern and beautiful coworking space on the 8th floor of the Sony Center with a generous view of downtown Berlin including the German Bundestag, hosted the event on their premises. In his welcome speech, Geerd-Dietger Hoffmann, eHealth Africa’s CTO, expressed his gratefulness to the supporters and introduced Julius Murke, co-founder of Young Leaders for Health, who moderated the panel discussion. Dr. Annamarie Bindenagel Šehović, a researcher with the EL-CSID’s Horizon2020 programme at the University of
Warwick and Prof. Dr. Heinz Zeichhardt, Vice President of the German Association for the Control of Viral Diseases completed the expert panel.

The panel began with an elaboration on lessons that could have been learned from previous pandemics. The experts mentioned how the HIV epidemic taught the global community that everyone infected should have the right to receive treatment, which, however, must be adjusted to personal needs and customs of the patients. Moreover, the rapid spread of HIV in the 1990s demonstrated the underpreparedness of health care systems, in Africa especially, that was partly due to the brain-drain of qualified medical personnel, a still unresolved problem. Additionally, several relatively cost-effective factors influencing preparedness were discussed, including solid hygiene practices, sufficient supply of clean drinking water, and from the technical side, functioning and reliable telephone or online reporting systems.

Such reporting systems were implemented in the form of databases by eHealth Africa in Liberia and Sierra Leone during the Ebola outbreak, thus allowing for real-time tracing of suspected and confirmed cases via mobile applications. In this case, digitisation didn’t only make reporting much more reliable, since well established telephone connection is missing in many remote West African communities. It also helped save time compared to paper-based reporting and built the groundwork for sound and rapid decision-making on the political level.

It was stated that Ebola is likely to come back since many countries, including those affected by the recent outbreak, can not afford to improve their health care systems. Financial help from Western countries is essential here since outbreaks are global in the modern age. Should one occur and not be contained in Africa, it would quickly spread to the West. Regarding Germany specifically, the most severe challenge wouldn’t be virus detection, but the potential instability of the strain and resistance to it. This could lead to potential dangers, especially since there is a growing number of people in Germany who reject any vaccination treatment.
BREAK-OUT SESSIONS

The panel discussion was followed by three parallel interactive break-out sessions:

**How can eHealth improve public health in developing countries? (Expert: Geerd-Dietger Hoffmann)**

The session elaborated on several examples of how eHealth Africa improved health care in West Africa using digitisation. One of the examples discussed in detail was a suite of mobile apps (MOVE and Vaccine Direct Delivery) developed by eHealth Africa which allow for reliable availability and distribution of life-saving medicine in Nigeria. Thus, information on stock-outs or routine immunisation, for example, can be reported instantly bypassing the slow and unreliable paper-based process.

Another topic eagerly discussed was how infrastructure built for health emergency response can benefit vulnerable communities in the long-term. eHealth Africa’s experience shows that benefits can be drawn from installed internet networks, reliable maps drawn as well as call centers that can be used as hotlines for medical emergencies.

**What next for HIV in Africa and Europe? (Expert: Dr. Annamarie Bindenagel Sehovic)**

One of the issues raised was the inequality of treatment of HIV since patients in developed countries have much better access to drugs than those in developing countries. Luckily, India has managed to produce drug therapies that are affordable for patients in the developing world. For Africa, it would be even more beneficial if drugs could be produced on the African continent directly. However, a project to build a respective laboratory in Uganda is currently suffering from lack of funding.

Whilst it cannot be ruled out that an HIV vaccine may be developed in the future, it is hard to predict since
HIV is a mutable virus and no recovered patients exist. For treatment, infrastructure in vulnerable communities must be improved and much more medical personnel need to be found to provide treatment in hard-to-reach places as well.

What are the possible scenarios if a pandemic breaks out in Germany? (Expert: Prof. Dr. Heinz Zeichhardt)

The first topic addressed was the probability of disease imported by refugees. It was stated that, whilst we were lucky not to have had a massive influenza epidemic in refugee camps last winter, diseases in Syria are roughly the same as in Germany and additionally, the level of vaccination in Syria is very high.

In order to contain outbreaks in Germany, vaccinations must be promoted and roundtables between pharmaceutical companies, medical experts and political groups need to be organised on a regular basis.

RESULTS

The event provided an interactive and open platform for discussion on the acute topic of ‘Global Health Security – Focus Africa’, which is likely to become a growing challenge in international affairs. Thus, eHealth Africa was able to facilitate a productive exchange among global health professionals in Berlin, strengthen the community, and provide food for thought as well as inspiring ideas for potential future public health projects.

NEXT EVENT

This event was the first in a series of events eHealth Africa is planning to host in Berlin on topics dealing with international public health. The next event is scheduled to take place in October 2016 and deal with the impact of digital health on developing countries.

Pictures: Jan Johannes and Jasper Timm