Public health priorities for China-Africa cooperation

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In September, 2018, the heads of State from 53 African countries and world dignitaries gathered in Beijing (China) for the seventh triennial Summit of the Forum on China–Africa Cooperation (FOCAC). The outcome of the Summit was the adoption of the FOCAC Beijing Action Plan (2019–21) focusing on the implementation of eight major initiatives to strengthen the cooperation between China and Africa. Some of the initiatives included industrial, trade, and cultural promotion, with public health ranking as a top priority for the China–Africa health cooperation plans. Just a month before the FOCAC Summit, the High-Level Meeting on China–Africa Health Cooperation had also emphasised the importance of public health cooperation.

The fulfilment of the ambitious China–Africa health initiative builds on years of efforts of Chinese and African health authorities and professionals, which can be traced back to 1963 and is more recently exemplified by the collaborating public health teams in Sierra Leone, in 2014. Public health security is a crucial component of this collaboration.

As of 2017, there were about 1050 health professionals from China working in 53 African countries. Strengthening the public health system in this vast continent requires strong political commitment and secured financial investment. The development of national public health institutes (NPHIs) in African states, centrally coordinated by a continent-wide agency—the Africa Centres for Disease Control and Prevention (CDC)^{2,3}—equipped with recognised technical expertise and authority, is critical.

Since 2014, when the most severe Ebola outbreak in West Africa occurred, to the ongoing epidemic in the Democratic Republic of the Congo, China CDC has been working with the African Union and other international partners to support the establishment of Africa CDC^{2,3} by promoting its strategy, institutional development, and capacity building. Exchange visits, trainings, and consultations are frequently organised for leaders and professionals from Africa CDC and its five Regional Collaborating Centers (RCCs) to understand public health services and systems in China, and to identify China's potential resources or successful models that can be used in local African contexts.

The progress is encouraging; in addition to the Chinese Government's commitment to support the development and equipment of Africa CDC, China CDC is helping develop public health training and disease-control programs in Africa focused on emerging infectious diseases, malaria, HIV/AIDS, and health informatics, in collaboration with Africa CDC, US CDC, and other partners.

Priority public health activities to strengthen partnerships will focus on the areas defined by the Africa CDC 5-year strategic plan. First, Africa CDC is a unique technical public health agency that operates with five RCCs as a network to support all African member states to facilitate the development of their own NPHIs and response capabilities. However, Africa CDC and many countries will need trained and competent health professionals to fulfil their mandates effectively. Hence, strengthening the Field Epidemiology Training Programs and providing Africa CDC assistance will be crucial.

Second, since little data exist in some key health areas in Africa, it will be vital to strengthen the entire range of data use including data acquisition, warehousing, timely use, and sharing. Good data collection will be instrumental in planning overall public health programmes that addresses health risk factors beyond infectious diseases.

Third, strengthening regulatory processes and creating an environment that facilitates access to high-quality, cost-effective diagnostic reagents, vaccines, and drugs developed and manufactured in China and other developing countries to foster the south-south collaboration could greatly benefit the African community.

Fourth, how African health organisations consider the Chinese public health model for their home countries is of great importance. Since African health organisations (Africa CDC, RCCs and NPHIs, etc) have a similar structure to the Chinese hierarchical system of national, provincial, prefectural, and county CDC, China can adjust its technical strategies or protocols to support the national health plans or programmes in African countries. Through the partnership, China and Africa will invest in strengthening regional networks, through the established regional Integrated Surveillance and Laboratory Networks.



For more on Africa CDC strategic plan see http://www. africacdc.org/press-centre/fact-sheets-and-brochures/fact-sheets-and-brochures/ africa-centres-for-disease-control-and-prevention-strategy-at-a-glance-sa20269-english/download

Finally, external partners of Africa CDC—such as US CDC, the Bill & Melinda Gates Foundation, the Wellcome Trust, Public Health England, Resolve to Save Lives, the World Bank—are diverse but are brought together by the mutual goal of promoting global health security in Africa. Ideally, at the national level, all efforts of international partners should be coordinated by a national authority with a clear and unified structure to measure progress made according to a one country, one plan model and to facilitate information sharing and avoid duplication and fragmentation of efforts. Meanwhile, at the continental level, Africa CDC, RCCs, and WHO Regional Offices will fulfil their coordinating roles and manage emergency responses and resource allocation.

China and Africa CDCs are strengthening their mutual trust and confidence to address the challenges and opportunities of the development of a strong African public health infrastructure by sharing information, providing expertise, and expanding resources according to the 4C principles—ie, cooperation, communication, and coordination. Indeed, cooperation is the key factor for the accomplishment of such a big project; competition will expedite the whole process;

communication will help balance cooperation and competition; and coordination will be necessary to overcome unpredictable factors that can impede communication.

As CDCs Directors, "prevention first, public health as priority"⁴ will be our guiding principle for planning all collaborative projects under the framework of the China–Africa Cooperation Forum, the Belt and Road Initiative, and south-to-south cooperation.

*George Fu Gao, John N Nkengasong

Chinese Center for Disease Control and Prevention, Beijing 102206, China (GFG); Africa Centres for Disease Control and Prevention, Addis Ababa, Ethiopia (JNN); qaofu@chinacdc.cn

We declare no competing interests.

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