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COVID-19: The public-private sector partnership is the key to a successful strategy for Africa

On March 31 2020, the European Business Council for Africa and the Mediterranean (EBCAM) communicated to the European Commission its analysis of the risks that the COVID-19 pandemic could pose to the economies and health systems of African countries, and formulated proposals for emergency measures to be taken to limit their effects.

An unprecedented economic recession in Africa

A year later, the health impact is less severe than expected. The African continent, which is home to 17% of the world's population, had less than 5% of the 135 million infections recorded globally at the end of March.

The causes of this resilience are known:

- Africa has a younger population than other continents and therefore is less at risk from COVID-19;
- a lower urban concentration than in Europe which limits the speed of circulation of the virus and;
- it has above all some experience in the management of epidemics which enabled countries to react quickly as soon as the virus appeared.

A deficient tracing system, especially in some large African cities; a perfectible monitoring of contaminations and a lack of proper diagnosis of causes of death have also been mentioned as reasons for the reported seemingly low rates of infection. Initially, the deaths were attributed to simple pneumonia, as it was not possible to make a diagnosis, and even less so post-mortem. As a result, it is still too early to learn all the lessons draw proper conclusions, especially since Africa has been facing a second wave since the end of 2020, more deadly than the first.

In any case, these relative advantages in dealing with the pandemic have not spared Africa economically and socially. It is clear that the global crisis led to a collapse in the price and demand for raw materials. Moreover, the GDP on the African continent fell by 2.6% in 2020 for the first time in 30 years.

Most important, the exit from the economic crisis is almost certain to be slower in Africa, especially in countries that do not have the capacity to deploy economic support or recovery plans of a scale comparable to those put in place in European countries.



The African continent must have access to COVID-19 vaccines

One of the main lessons to be learned from the sanitary crisis is the vulnerability of the pharmaceutical industry's supply chains and its difficulty in ensuring rapid and continuous distribution of personal protective equipment, tests and essential products in urgent situations. Indeed, with more than 80% of these products manufactured in Asia, Europe and Africa remain very dependent on Asian producers (China and India in particular).

Currently, the delay in the deployment of national COVID-19 vaccination campaigns in Africa has revived the debate on relocation to Europe or the installation of industrial capacities to manufacture tests, vaccines and drugs in the African continent.

The COVAX initiative is expected to cover only 20% of the African population with COVID-19 vaccines while Africa accounts for only 2% of the COVID-19 vaccines administered worldwide. The WHO estimates that only 0.1% of vaccines are produced on the continent for routine immunization (COVID and non-COVID).

The private sector is a key actor on which the European Union can rely and invest

This situation reinforces the conviction of EBCAM and its members - European national chambers that partnership with the private sector is one of the essential keys to resolving the crisis, both economically and in terms of health.

Our proposals, which were put forward and retained within the framework of the Working - Group on health for the next Europe-Africa Business Forum (EABF), can be summed up in three strategic axes, for which the mobilisation of the private sector has many advantages:

1. The re-establishment of critical parts of the supply chain in Europe and the creation in Africa of new production capacities for essential health goods and materials (masks, tests, medical devices, vaccines, drugs, etc.). To achieve greater autonomy, the medium-term strategy should be to establish regional hubs for production facilities. This requires sustainable partnerships with companies in industrialised countries. African countries could jointly build up a pharmaceutical industry and production facilities for medical goods through foreign investment.
2. Preparation for the management of pandemics through the development of shared tools for health monitoring, for measuring health, economic and social impacts, and new training frameworks for economic actors in crisis management. In addition to easier access to the vaccine, Africa must be able to quickly acquire adequate personnel, infrastructures and follow-up systems for these vaccinations. Through this health crisis, the African continent must be helped to build up its systems, train its personnel and pursue measures to access primary care, starting with the establishment of "health coverage".
3. Innovation and digital tools as a lever to help strengthen innovative health systems.



We propose that the European Union releases substantial funding , through its financial instruments, and effectivly :

1. Support European companies, particularly in the Medtech and Biotech sectors, which invest in research and development of epidemic crisis management tools as well as new prevention and rapid diagnostic solutions, by encouraging strategic partnerships between European and African companies.
2. Support the ecosystem of start-ups and micro-entrepreneurs in the informal sector in Africa, which is very dynamic in terms of innovation in the fields of health, cleantech, fintech and logistics.
3. Finance industrial projects to create new production units or strengthen existing local capacities for the manufacture of vaccines and other essential health products, which will contribute to the creation of new sustainable jobs in Africa.
4. Support for the creation of a platform to identify and centralise initiatives taken in several countries by companies and /or local governments for a better control of the pandemic. It would make sense for an optimization of solutions and their funding as well as their fast implementation throughout the continent if needed.

ANNEX: Situation updates May 2021

Africa has recorded more than 100,000 deaths from the coronavirus. The delay in the deployment of COVID-19 vaccines is very worrying on the continent, which is experiencing a second wave more alarming than the first, according to the WHO. The virus is circulating in Africa faster, with a death rate of 2.5%, now above the global average.

Due to the global competition for vaccines, African countries have so far not been as successful in obtaining supplies as the more developed countries, which are focused on managing the epidemic at home.

Launched in spring 2020, the COVAX mechanism, under which countries have decided to pool their resources to support the development of effective vaccines and ensure equitable access for all, is slow to deliver tangible results. COVAX is expected to deliver up to 600 million doses to Africa by the end of 2021 to vaccinate around 20% of its population.

Next to COVAX, the African Union (AU) has launched its own initiative AVATT (African Vaccine Acquisition Task Team) which has made it possible to obtain 400 million additional doses for the continent, ordered from the Indian laboratory Institute Serum of India, producing AstraZeneca vaccine for developing countries.

The first African countries like Egypt, Morocco, Senegal or Guinea that have obtained COVID-19 vaccines so far have done so largely through direct purchases from manufacturers, or have benefited from donations from China, Russia and India.



COVID-19 vaccines at the centre of geopolitical strategies

Taking advantage of the absence of Europe and the United States in this field in Africa, China in particular is again focussing on the African continent to sell its vaccines, increase its influence and strengthen its public image throughout the world. This is also the case with Russia, which is barely mentioned but is very assertive in promoting the Sputnik vaccine in certain countries like Gabon.

China in particular offered 200,000 doses of the vaccine produced by the Sinopharm company to Sierra Leone and has also undertaken to provide 100,000 doses to Tunisia. Some 200,000 doses of Sinopharm's vaccine helped launch the vaccination campaign in Senegal faced with the resurgence of COVID-19 cases.

China is Delivering its vaccines to African countries clearly as part of an expansionist strategy aimed at gaining market share in the biotechnology sector. Although less efficient than their Western counterparts, Chinese vaccines appear easier to use in African countries, which remain limited in terms of medical infrastructure and cold chain. These vaccines can be stored in the refrigerator, unlike those from Pfizer / BioNTech and Moderna which must be frozen.

China could soon take another step, by having its vaccines produced in Africa. In this sense, Morocco has announced that it has started negotiations with Beijing to be able to produce Sinopharm's vaccine and export it to other African countries.

South Africa is another country on the continent preparing to produce the COVID-19 vaccine locally. A partnership agreement was recently signed between the American laboratory Johnson & Johnson and the South African group Aspen Pharmacare to allow the manufacture of the vaccine at its site in Port Elizabeth.

Producing locally: a major issue for Europe and Africa which the EU must take up

The health context increases the need for European and African countries to strengthen their local capacities for the production and distribution of essential health products such as vaccine tests and treatments, in order to be able to react quickly to emerging diseases. European companies have not only industrial capacities but also networks and know-how which would make it possible, through strategic partnerships with African companies, to manufacture and distribute vaccines on both continents.

The EU could play a key role in this field by taking into consideration important initiatives that take place in the African continent such as the very recent partnership signed between the United Nations Economic Commission for Africa (UNECA) and the African Business Coalition for Health (ABC Health) in order to support governments' efforts on health with the involvement of the private sector.

The European Union which initially supported the COVAX mechanism to the tune of 100 million euros in the form of grants and 400 million euros in guarantees for low and middle-income countries, recently announced a doubling of its contribution, including 100 million



euros in humanitarian aid for the vaccination campaign in Africa through support to Africa CDC, Centers for Disease Control and Prevention.

These contributions make the EU one of the main donors to COVAX, a mechanism which mainly finances the purchase of vaccines produced outside the EU.

European funds should be directed towards investments aimed at accelerating the development and production in Europe of tests, vaccines and treatments against COVID-19 as part of an innovative public-private partnership.