

Commodities for better health in Africa – time to invest locally

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With a rapidly expanding consumer market, African countries have new opportunities to strengthen their manufacturing sectors. The current climate of rising foreign investment will boost national economies and has the potential to benefit the health sector too. African countries now have a historic opportunity to free themselves from a vicious cycle of poverty, disease and dependency.

Africa's development partners, especially the BRICS countries (Brazil, the Russian Federation, India, China and South Africa), have a special role in supporting this critical phase of African development. The BRICS countries have already demonstrated their commitment to promoting global health. Now is the time to forge new partnerships that can support all African countries. The goal is to address health inequities and build capacity to meet supply shortages for essential health commodities that cannot be sourced reliably and sustainably from outside the continent.

Africa remains dependent on imported medicines and other health technologies – a risky situation in a continent with the world's highest prevalence of HIV. The 7.6 million Africans living with HIV now on antiretroviral treatment and millions more waiting¹ depend on 80% of antiretroviral medicines imported from outside the continent.

The local production of medicines and other essential health commodities is important for all health challenges faced by the continent. Demand for health commodities is growing rapidly. The ageing population in Africa requires access to a growing range of medicines and assistive technology that cannot be met with Africa's existing manufacturing capacity and sources of supply.

The world is calling for a new, more inclusive global development framework for the post-2015 era. UNAIDS has asserted that the international community can end the AIDS epidemic by 2030. Reaching this milestone will require the rapid, strategic development of domestic

pharmaceutical industries across the African continent.

We welcome the surge of interest in the manufacturing of essential health technologies in Africa. In 2012, African Heads of State adopted the African Union Commission's (AUC) Business Plan for implementing the Pharmaceutical Manufacturing Plan for Africa (PMPA).² Last year, African leaders called for a strengthening of south–south cooperation – including collaboration with the BRICS countries – to scale up investment in Africa's pharmaceutical manufacturing capacity, especially for generic essential medicines.³

The task of ensuring reliable and sustainable manufacturing of medicines and other health technologies is a complex undertaking that requires highly accountable and strategic partnerships. UNAIDS, UNIDO and WHO are working closely with the AUC to better coordinate inter-agency efforts to support African governments.

Africa can learn a lot from BRICS' successful experience in leveraging the AIDS response as an engine for innovation, and for research and development, including local production. In addition to political support and financing, this endeavour requires a far-sighted vision, the optimal combination of mutually supportive national policies, good governance and rule of law, the establishment of robust national regulatory authorities and other relevant institutions, the availability of diverse technical expertise and access to viable markets.

Quality of medicines is non-negotiable and must be assured through the strict application of Good Manufacturing Practices (GMP) and other quality assurance systems across the pharmaceutical value chain. There is a need for collaboration between African countries to defragment markets and increase the sustainability of manufacturing through economies of scale. The BRICS countries, which are home to many world-class researchers and strong pharmaceutical industries,

can be instrumental in building capacity for local production and strengthening regulatory capacities in Africa.

WHO continues to assist AU Member States and Regional Economic Communities in strengthening their national regulatory authorities and in facilitating regulatory harmonization. WHO's Prequalification Programme has also started having broader impact on the continent as a growing number of manufacturers comply with GMP guidelines.

We emphasize that the local production of health commodities in Africa must be viewed from the perspective of public health. Objectives for industrial development and public health need to be aligned and national goals for health and industrial development must be advanced in unison.⁴ The development of local production should explicitly serve the needs of local populations, as a priority. In our view, it raises ethical questions if domestic pharmaceutical production is thriving while local populations lack access to these same essential health commodities.

The objective of universal health coverage promoted by WHO, and the new mandate of UNIDO to encourage inclusive and sustainable industrial development,⁵ will together support local manufacturing of essential commodities to improve public health in Africa. To meet this challenge, all partners must come together to cultivate a strong vision, backed up by an actionable plan and predictable resources. The AUC's PMPA-Business Plan, as well as its Roadmap on Shared Responsibility and Global Solidarity,⁶ provide excellent platforms around which international partners, including the BRICS countries, can contribute. To this end, we are committed to work with all partners to convene a continental forum before the end of 2014 to take forward this life-saving agenda. ■

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