



**EAST AFRICAN COMMUNITY**

**1<sup>ST</sup> INTERNATIONAL CONFERENCE ON PROMOTING EAST AFRICA  
PHARMACEUTICAL SECTOR INVESTMENTS**

**LAICO REGENCY HOTEL NAIROBI, KENYA**

**2<sup>ND</sup> – 4<sup>TH</sup> NOVEMBER, 2016**

**REPORT**

**EAC Secretariat  
EAC Headquarters Building  
P.O. Box 1096  
Arusha, Tanzania.**

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## 1.0 INTRODUCTION

The East African Community (EAC) Secretariat in collaboration with the EAC Partner States held the “**1<sup>st</sup> International Conference on Promoting Pharmaceutical Sector Investments in the EAC Region**” at the Laico Regency Hotel in Nairobi, Kenya from 2<sup>nd</sup> to 4<sup>th</sup> November 2016.

The conference brought together key stakeholders in the EAC Partner States including Ministries of Health, Finance and Industry, National Medicines Regulatory Agencies (NMRAs), National Medicines Procurement Agencies (NMPAs), other Regional Economic Communities (RECs), AU-NEPAD Planning and Coordinating Agency, World Health Organization (WHO), BMGF, UNCTAD, UNAIDS and the private sector (local and international pharmaceutical manufacturers) as well as international development partners and investors amongst others.

### 1.1 CONFERENCE OBJECTIVES

The overall objective of the conference was to develop a common and shared vision for promoting investment in the regional pharmaceutical manufacturing sector.

The specific objectives included the following:-

- a) To sensitize pharmaceutical manufacturers on the EAC harmonized medicines registration guidelines, procedures and address their concerns if any;
- b) To discuss and propose the most viable incentive schemes for promoting local pharmaceutical manufacturing;
- c) To make recommendations for consideration by the Partner States' Governments on promotion of local pharmaceutical manufacturing industry; and
- d) To promote and foster dialogue between the policy makers, regulators and pharmaceutical manufacturers.

## OPENING SESSION

### Session summary and recommendations

**Mr Nazeem Mohammed** thanked the EAC Secretariat and the Development Partners for convening the conference. He stressed that the investment in pharmaceuticals was fundamental if the region was to achieve sustainable development goals and improving access to quality and affordable medicines. He stressed the need for governments in the region to implement policies that will support growth of the sector and the need to harmonize the various sector policies. He concluded by stating that the local manufacturers were focused improving quality systems with the help of partners including the regulatory agencies and that

FEAPM looks forward to forming stronger and sustainable partnerships to strengthen the pharmaceutical sector in the East African Region.

The EAC Deputy Secretary General in charge of Productive and Social Sectors, **Hon. Christopher Bazivamo** said that poor performance of the EAC health sector has contributed to shortage of essential medical products and health technologies, which could be produced within the region by EAC industrial sector. He urged Partner States to consider implementing incentive packages to promote domestic pharmaceutical production in the region.

In her speech, **Hon. Josiane Nijimbere**, Burundi's Minister of Public Health and the Fight Against AIDS, said medicines have become a very important and powerful tool, now more than ever, in improving the health status of populations and, in the long term, for reducing healthcare costs and ensuring sustainable development through health working human resource. She underscored the importance of the health sector for the citizens of East Africa as the EAC integration agenda aims at improving sharply standard of living the East African Citizenry.

In a speech read on her behalf by **Mr. Barrack Ndegwa**, the Integration Secretary and Kenyan Cabinet Secretary for East African Community Integration, Labour and Social Protection, **Hon. Phyllis Kandie** described the pharmaceutical sector as a critical area of cooperation in health matters within the EAC. Hon. Kandie said the conference was therefore significant as it provides a platform for stakeholders to have a conversation among the policy makers, industry players, the civil society, as well as development partners on how to deepen cooperation in the sector. The Minister's speech is attached as **Annex 1** .

## **SESSION I: IMPLEMENTATION OF EAC MEDICINES REGULATION AND HARMONIZATION GUIDELINES**

**Chair of session: Dr Fred Siyoi, Deputy Registrar, Kenya Pharmacy and Poisons Board**

### **Session summary and recommendations**

**Margareth Ndomondo-Sigonda**, Pharmaceutical Coordinator at African Union – New Partnerships for Africa's Development (AU-NEPAD) Agency made a presentation on the African Medicines Regulatory Harmonization (AMRH) Programme and African Union Model Law for Medical Products Regulation. She informed participants that the AMRH programme is a partnership initiative which was formalized in 2009 and launched in the East African Community (EAC) in 2012. The main aim of this initiative is to improve the fragmented regulatory system for product registration in Africa by changing from a country-focused approach to a collaborative regional approach. A stepwise approach starts by harmonizing and streamlining technical requirements for product registration leading to increased and timely product access. She also informed participants that the AU Model Law was adopted by the Twenty-Sixth Ordinary Session of Heads of State and Government of 30 - 31 January 2016 and called upon Member States to act as expeditiously as possible to enable the domestication of the model law at national level.

**Mr. John Patrick Mwesigye**, Senior Health Officer (Medicines Regulation) at EAC Secretariat made a presentation on the overall progress of the EAC MRH programme. He shared the benefits of medicines regulation harmonization which include among others; quick access to larger markets in the region, reduced cost to manufacturers in terms of time and resources in preparing for individual NMRA's inspection. He presented progress in the four thematic areas of the EAC MRH programme namely medicines evaluation and registration (MER), good manufacturing practice (GMP), quality management system (QMS) and information management system (IMS). He concluded by encouraging domestic and international pharmaceutical Industry to take advantage of EAC MRH programme in marketing their products in the region.

**Dr Stanley Sonoiya**, Principal Health Officer at EAC Secretariat made a presentation on promotion of local pharmaceutical production for Public Health and Industrial Development. He informed the meeting that local production in the EAC region is still low although demand for medicines is high and hence called for investments in this area. He shared enabling factors for investments in the region which include among others:-

- a) The fact that pharmaceutical sector is among the six priority sectors in the EAC Industrialization Strategy and Policy.
- b) Implementation of East African Community Pharmaceutical Manufacturing Plan of Action (EACRPMPOA): 2012 – 2016;
- c) Development of new plan EACRPMPOA: 2017 -2027 on-going;
- d) On-going EAC MRH programme including joint MER and GMP inspections by EAC Partner States' NMRAs;
- e) Implementation of the Common Market Protocol;
- f) Strong private sector representation in EAC decision making process (Consultative Dialogue Framework).

**Mr. Adam Mitangu Fimbo**, Director of Medicines and Complementary Products at Tanzania Food and Drugs Authority (TFDA) made a presentation on the roll out of the EAC MRH guidelines by the EAC NMRAs. He informed participants that the EAC harmonized guidelines were adopted and became effective in EAC Partner States as shown in **Table 1** below. He also informed participants that the national sensitization meetings on the use of EAC harmonized guidelines were conducted in 2015 in all the EAC Partner States except the Republic of Burundi. He concluded his presentation by urging collaboration between the industry and regulators on the use of EAC harmonized guidelines and registration procedures.

**Table 1: Adoption and implementation of EAC harmonized guidelines by EAC Partner States' NMRAs**

EAC Organ/Ministry/NMRA	Adoption/ Approval date	Effective date for implementation
EAC Council of Ministers (EAC/CM29/Decision 36)	20 <sup>th</sup> September 2014	1 <sup>st</sup> January 2015
National Drug Authority - Uganda	1 <sup>st</sup> January 2015	1 <sup>st</sup> January 2015

Pharmacy and Poisons Board - Kenya	1 <sup>st</sup> January 2015	1 <sup>st</sup> January 2015
Ministry of Health - Rwanda	1 <sup>st</sup> January 2015	1 <sup>st</sup> January 2015
Zanzibar Food and Drugs Authority	1 <sup>st</sup> January 2015	1 <sup>st</sup> July 2015
Tanzania Food and Drugs Authority	15 <sup>th</sup> January 2015	1 <sup>st</sup> August 2015
Department of Pharmaceuticals and Medical Laboratories - Burundi	6 <sup>th</sup> February 2016	6 <sup>th</sup> February 2016

**Dr. Rogers Atebe**, Federation of East Africa Pharmaceutical Manufacturers (FEAPM) made a presentation on the private sector view on the EAC harmonized guidelines. He informed participants that the manufacturers are happy with harmonization initiative however called for the following:-

- a) The EAC Secretariat to fast track development of EAC medicines Policy, Legislation and Regulatory Frameworks;
- b) EAC NMRAs to consider having an abridged common technical document (CTD) for local manufacturers in the region;
- c) Manufacturers to consider the use of *invivo* mathematical model to predict bioequivalence/bioavailability (BE/BA) in humans.

**Mr Pierre Claver**, Siphra Pharmaceuticals Burundi made a presentation on private sector experience on complying with the EAC harmonized Guidelines. The presentations are attached as **Annex 2**.

Recommendations:

- Fast track harmonization of drug policies, legislations and regulatory frameworks in the region;
- Harmonize essential medicines list to be manufactured by the local manufacturers;
- Replicate the good manufacturing practice (GMP) roadmap to manufacture essential medicinal products from regional facilities which are WHO prequalified;
- Harmonize registration and GMP by the EAC Partner States' National Medicines Regulatory Authorities (NMRAs);
- Encourage regional manufacturers to apply for joint assessment and inspection using the EAC procedures;
- Fast track development of registration guidelines for other medicinal products e.g. vaccines, biological, biosimilars, medical devices and veterinary medicines;
- Regulators to explore ways to abridge the EAC common technical document (CTD) for local manufacturers in the regions;
- Manufacturers to consider the use of *In Vitro Tests Predictive of Human In Vivo Bioavailability* (In Vitro-In Vivo Correlation Studies); and
- Operationalize the proposed incentives for local manufacturing.

## **SESSION II: IMPLEMENTATION OF EAC MEDICINES REGULATION AND HARMONIZATION GUIDELINES – (INDUSTRY - REGULATOR EXCHANGE)**

**Chair of Session: Dr S. Azatyan, World Health Organization**

1. **Jane Mashingia, EAC Senior Health Officer**, Overview of EAC regional pharmaceutical policy and regulatory framework
2. **Daniel Murenzi, EAC e-health Officer**, Overview of EAC MRH IMS architecture
3. **Mr. Alex Gisagara**, National Medicines Regulation Officer, MOH Rwanda, Overview on Harmonized guidelines for Medicines Evaluation and Registration
4. **Ms. Kate Kikule, NDA, Uganda**, Overview on Harmonized guidelines on Good Manufacturing Practices
5. **Dr Wiberforce Wanyanga, UNIDO**, The Kenya GMP Roadmap: Current status, Experience and Lessons for scale up

### **Session summary and recommendations**

The session presentations are attached as **Annex 2**.

## **SESSION III: CAPACITY BUILDING ON PHARMACOVIGILANCE AND POST-MARKET SURVEILLANCE FOR THE LOCAL PHARMACEUTICAL INDUSTRY**

**Chair of session: KUSHEMERERWA Donna, Executive Director, Uganda NDA**

1. *Christabel Khaemba , Kenya Pharmacy and Poisons Board, Support for Pharmacovigilance Systems in the East African Community*
2. *Dr. Mustapha Hajjou ,USP, Capacity building on Good Manufacturing Practice to promote domestic pharmaceutical manufacturing*
3. *Dr Robert Miano, GSK , The role of manufacturers in strengthening PV and PMS systems*
4. **Prof. Gibson Kibiki, Executive Secretary, EAHRC, East African initiative to support health Research and Development**

The session presentations are attached as **Annex 2** .

## **SESSION IV: INCENTIVES FOR LOCAL PHARMACEUTICAL MANUFACTURING**

**Chair of session: Eng. Jennifer Gache, EAC Secretariat**

**Keynote 1: Mr Nazeem Mohammed, Chairman, FEAPM& CEO Kampala Pharmaceutical Industries**

'Proposed East African Pharmaceutical Manufacturing Incentive Package'

**Keynote 2 : Mr Emmanuel Alenga, Ernst and Young Kenya**

'Promoting growth of local manufacturing industry: Lessons from other sectors'

The keynote speakers were Mr. Nazeem Mohamed, the Chairman of FEAPM and CEO of Kampala Pharmaceutical Industries; and Mr. Emmanuel Alenga Makhethi of Ernst and Young, Kenya. The panellists for the session were Laurean Rugambwa Bwanakunu, CEO Medical Stores Department Tanzania; Moses Kamabare, CEO National Medical Stores Uganda; Ermias Biadgleng, Legal Officer UNCTAD; and Annonciate Nshimirimana, Advisor of Ministry of Finance, Burundi. The session was chaired by Eng. Jennifer Gache of the EAC Secretariat.

The session was centred on the presentation from FEAPM which proposed the following policy interventions as per the attached position paper ( **Annex 3** ) :

This was aligned with the recommendations by Ernst & Young which included a review of EAC CET. The presentation are attached as **Annex 2**.

## Recommendations

The EAC and Partner States should :

- Adopt the proposed incentive package. While negotiations at WTO may be difficult there are other mechanisms that have been successfully used and can be adopted to implement import exclusions.
- Make a commitment/ resolution to ensure that 100% of products procured locally that meet the quality requirements are procured.
- Ensure that procurement agencies share their annual procurement plans with local manufacturers to enable them to plan their production to meet national demands.
- Incentivize investment in improved quality production by local manufacturers.
- Address the challenges local manufacturers face in regards to delayed payments.

## **SESSION V: POLICY COHERENCE FOR PHARMACEUTICAL SECTOR DEVELOPMENT IN EAST AFRICA**

**Chair of session: Dr Wilberforce Wanyanga, UNIDO, KENYA**

### **Session summary and recommendations**

The presentations were made by Mr. Ermias Biadgleng, Legal Officer, UNCTAD; and Eng. Jennifer Gache, EAC Secretariat. The panellists were Samson Ndayizeye, PS Ministry of Trade and Industry, Burundi; Pamela Dede, Ministry of Industry, Trade and Cooperatives, Kenya; and Alex Gisagara, Ministry of Health, Rwanda. The session was chaired by Dr. Wilberforce Wanyanga of UNIDO, Kenya. The main recommendation made by Mr. Biadgleng's was for the EAC to adopt a policy coherence approach in the renewal of the EAC Regional Pharmaceutical Manufacturing Plan of Action (2016-2021) as called for in the Nairobi Statement on Investment in Access to Medicines (2016).

Eng. Gache presented on the EAC development vision, industrialisation policy and the EACRPMPOA. She indicated the following as the way forward for the regional pharma sector ;

- The Incentive package to inform policy review.
- Development of a regional GMP Roadmap .
- Have a EACRPMPOA that is supportive of investments in local production;
- Need to strengthen working between academia and industry

The panel discussion raised the following points:



- Pharmaceutical manufacturing needs to take its important place in economic development in the region. To succeed there is need for a shared vision and improved interrelations with other sectors.
- In Kenya the focus has been implementation of GMP roadmap, the country is now looking at providing incentives for local manufacturers beyond financing
- Pharmaceutical manufacture is also a priority in Rwanda and the Ministry of Health has been tasked with the role of regulator for pharmaceutical production. So far they have managed to pass a law that establishes the Rwanda Food and Medicine Authority and will soon establish the institution in the country. There are two manufacturing facilities in Rwanda – 1 is government owned and the second is privately owned. There are also 5 investors who are in the pipeline, 2 of whom have already signed MoUs with the government: Cooper Pharma from Morocco and CIPLA/QCIL. The MoH works with investors and is willing to fast-track the process. Rwanda also provides the opportunity to access the market in the Democratic Republic of Congo.

## Recommendations

The EAC Secretariat and EAC partner states should:

- Complete the market study and avail market data to stakeholders
- Work towards utilizing the flexibilities available as a result of TRIPS – partner states should evaluate their progress and make steps to achieve compliance
- Work in partnership with private sector to support private sector to take advantage of TRIPS flexibilities
- Integrate the utilization of TRIPS flexibilities in the development of industrial policy at regional and national level
- Complete the process of enacting the competition bill and the anti-counterfeit bill at EALA and implement the policy.

## **SESSION VI: INCENTIVES FOR LOCAL PHARMACEUTICAL MANUFACTURING – ACCESS TO APPROPRIATE FINANCING**

**Chair of session: Elizabeth Maloba, Consultant**

**Keynote 1: Dr Geoffrey Banda**, University of Edinburgh, Co-author of the book “Making Medicines in Africa”

*Financing African Pharmaceutical Production*

**Keynote 2: Amitabh Mehta**, Director: Innovative Financing Solutions, Fundraising Strategy & Corporate Partnerships, Indus Blue Consulting, Geneva  
*Exploring Innovative Mechanisms for Financing Local Manufacturing*

### **Session summary and recommendations**

Two presentations were made in the session, one by Dr. Geoffrey Banda from the University of Edinburgh, and another by Mr. Amitabh Mehta from Indus Blue Consulting. Additional insights were shared by the panellists: Mr. Martin Nicholson of UNIDO, Ms. Martha Osier of Catalyst Principle Partners, and Mr. Nihal Shah of Biodeal Laboratories. The session was facilitated by Elizabeth Maloba.

Dr. Banda defined the financing challenges for local manufacturers, outlined the activities that need to be financed, and proposed a number of ways to finance the sector. Specifically:

- The funding challenge is not a simple access to finance issue – it is a complex issue that includes issues related to financial systems architecture, financial capability, and policy frameworks.
- The challenges of financing the pharmaceutical manufacturing sector are related to financial capability of the pharmaceutical manufacturers, the entrepreneurial nature of the sector (most are SMEs), weak linkages between industry development and health systems strengthening, technological challenges, and weak institutional and policy frameworks.
- The sector can be financed by government, innovative procurement, financial institutions and trade credit.

Mr. Mehta's presentation was focused on how to access funding especially via innovative mechanisms such as advance market commitments; revolving funds; bond/ loan structures that use capital markets to finance with government/ public sector commitment backing the borrowing; private partners; social impact bonds; social impact funds; Islamic financing; and new donors – bilateral funding agreements and philanthropy. Both presentations are attached as Annex 1.

## **Recommendations**

- The EAC secretariat and the EAC partner states should Work towards harmonization of the regional procurement of medicines. This will create a large, well-defined market and make the region attractive to investors in pharmaceutical manufacturing and guarantee utilization of local production capacity. This will make local manufacturers more competitive and therefore enable them to attract investment.
- The federation should engage in continuous dialogue with the relevant EAC organs and Partner States governments in order to ensure support for the sector.
- The federation should establish a relevant platform for engaging with potential financiers – financial institutions and other investors - on a regular basis so that the latter may understand the unique industry dynamics and be able to develop investment solutions that meet the needs of manufacturers.
- Banks and local pharmaceutical manufacturers should work together to increase mutual understanding so as to ensure better working relationships
- More transparency needed: Local manufacturers need to put together a better profile of the market with more data.

A detailed DAY 2 Sessions report is attached as **ANNEX 4** .

## **SESSION VII: PARTNERS SUPPORTING THE EAC PHARMACEUTICAL SECTOR.**

**Chair of the Session Prof, Gibson, Kibiki, EAC Health Research Commission**

### **Presentation of the PTB Project on support to quality infrastructure in the Pharmaceutical sector**

**Mr. Tobias Diergardt**, PTB Project Coordinator East Africa presented PTB project on establishment of a regional Quality Infrastructure for the pharmaceutical sector for improving medicine quality and safety, he highlighted to the stakeholders the purpose of the project which include strengthen the private as well as the public sectors to overcome the existing challenges of insufficient availability of the appropriate calibration services, access to affordable chemical reference standard and regular inter laboratory companies and reliable maintenance services for laboratory equipment within the EAC region.

He highlighted to the stakeholders on the area of technical cooperation since fifty years back for the strengthening the private as well as the public sector to m to overcome with the existing challenges within the region.

Furthermore he mentioned on the new intervention area for East African Partner States countries which will be implemented through EAC Medicines Regulatory Harmonization Project (EAC – MRH) which include Post Marketing Surveillance (PMS) on which the project have been already conducted baseline assessment for all Partner States countries in order for analysing the existing gaps within the region and to come up with the actionable and meaningful implementable action plan.

### **Presentation of the East Africa Community Medicines Regulatory Harmonization (EAC MRH) Programme**

**Dr. David Mukanga**, Senior Health Officer from Bill and Melinda Gates (B & MG) Foundation presented the EAC Medicines Regulatory Harmonization (MRH) initiative to the stakeholders since the launch in March, 2012 aimed for improving public health through increasing medicines accessibility, quality and safety, he also informed stakeholders on the new identified area future support by foundation which is technological transfer which will assist local Pharmaceutical Manufacturer jointly working with academicians in transforming the existing pharmaceutical products for improving quality and safety.

**Mr. Vincent Ahonkhai** in introducing Dr. David Mukanga who will replace him in the foundation he urged stakeholders to stand with strong leadership and commitment which is very key in providing them to have good policies for acquiring demanded incentives for promoting local pharmaceutical, he also urged them to have at least one regional Bioequivalence centre which will help to produce competitive products and not to depend only EAC market.

## **Presentation on the United Nations Industrial Development Organization (UNIDO) Project on the Strengthening the local Production of Essential Medicines in Developing Countries – Development of Good Manufacturing Practice (GMP) Road Map**

Quality is built into a medicine during its design, development, and manufacture. Manufacturers are primarily responsible for the quality of the medicines they produce by following the tenets of good manufacturing practices (GMP). After a product leaves the manufacturer's premises, distributors, procurement agencies (purchasers), dispensers, and users are responsible for maintaining the quality of the product through proper storage, transport, distribution, dispensing, and use.

**Dr. W.O. Wanyanga**, National Pharmaceutical Expert, UNIDO presented GMP road map with the main goal of assisting local pharmaceutical manufacturer in increasing capacity of production and improving quality, in his presentation he highlighted on three key steps for implementing the road map addition to that he also urged EAC – MRH project to incorporate the developed GMP road map into the Medicine Regulatory Harmonization processes in order to have a good plan for implementation of GMP harmonized guideline.

### **Presentation of the GIZ/GFA project on Pharmaceutical Sector Promotion**

**Mr. Wesley Ronoh**, from EAC Secretariat presented project on Pharmaceutical Sector Promotion supported by GIZ/GFA which is focusing on the improving access to medicines through local production. He also mentioned the areas of support within the region which include:-

- a) Development and implementation (mainly coordination) of the EACRPMPOA: 2012 -2016.
- b) Currently supporting the development of the new plan - EACRPMPOA: 2017 – 2027.
- c) Strengthening FEAPM Advocacy and Service delivery efforts.
- d) Working with other partners in capacity building efforts for the sector.
- e) Promoting dialogue and exchange on policy coherence with regards to pharmaceutical production.

### **Presentation of the United Nations Programme on HIV/AIDS (UNAIDS) by Country Director Kenya**

HIV/AIDS affect many people in Africa and young people are more victim of this disease, inadequate access of quality antiretroviral drugs is among the key challenges in Africa.

**Ms. Jantine Jacob**, from UNAIDS addressed the conference by urged the local pharmaceutical manufacturer to increase investment of pharmaceutical production as UNAIDS will support the initiatives and HIV/AIDS remain the priority

area. She also mentioned new emerging area of support which is Global fund for improving quality of domestic production

### **Presentation of the Clinton Access Initiative (Pharmaceutical Manufacturing)**

The Clinton Health Access Initiative (CHAI) working with the Governments of developing countries and the pharmaceutical industry focusing in improving access and quality of lifesaving medicines and diagnostics for HIV/AIDS, malaria, and tuberculosis

**Dr. Franklin Keter** from the Clinton Access Initiative, Kenya, he updated stakeholders on the ongoing project under the Clinton Access Initiative with the aim of assisted local pharmaceutical manufacturer on the dossier reviews to comply with the new medicines requirement also support to the manufacturer on API procurement aimed for cost reduction.

#### Session Recommendations

- Urged EAC Secretariat and Partner States National Medicines Regulatory Authorities to expand scope for EAC Joint assessment list for local Pharmaceutical Manufacturer;
- Urged EAC Secretariat to consider for step wise approach for Local Pharmaceutical Manufacturer on the use of EAC harmonized Common Technical Document (CTD) for requesting of medicines Marketing Authorization;
- EAC to consider harmonization of Veterinary medicines on the ongoing Medicines Regulatory Harmonization initiatives;
- To fast track obtaining market information of pharmaceutical product to enable investment and health policy makers to facilitate decision making;
- To consider EAC market as a one Regional market and to waive the registration requirement for the products which have been already registered by the other country Partner States;
- Partner States National Medicines Regulatory Authorities to increase FOB value for imported medicines for protection of locally pharmaceutical manufacturer;
- Strengthen pharmaceutical networking and communication between National Medicines Regulatory Authorities and Pharmaceutical manufacturer;
- EAC to fast track medicines harmonization process to improve smooth movement of pharmaceutical within the region.

### **SESSION VII: INVESTING IN EAST AFRICA PHARMACEUTICAL MANUFACTURING SECTOR: AN INVESTOR PERSPECTIVE**

#### **Chair of session: Dr Robert Karanja, CEO, VILLGRO KENYA**

1. **Mr Palu Dhanani, CEO** , Universal Corporation/Strides JV, Kenya
2. **Mr Neil Bradford, CEO** , Quality Chemicals/CIPLA JV , Uganda
3. **Harvinder Singh Alag, , CEO , Zenufa** Pharmaceuticals , Tanzania
4. **Pierre Claver Nivonizigiye** , SIPHAR Pharmaceuticals, Burundi

The Chair whilst introducing the session gave an overview of East Africa health sector as an attractive investment destination for private equity, social impact investment amongst others. He demonstrated the regional capacity to attract funds in health, energy and agricultural sectors. The panellist gave interesting perspectives on their experiences in running their respective companies. Mr Palu whilst giving a history of Universal dispelled the widely held notion that local companies were uncompetitive compared to Indian companies. Mr Neil indicated that they had improved their business processes over time to the extent that they are now sharing their best practices with other CIPLA manufacturing sites in India. Mr Havinder and Mr Claver gave an outlook of the operating environment in Tanzania and Burundi . They called for enhanced government support to local manufacturers .

## **SESSION VIII: CONFERENCE RESOLUTION AND CLOSING**

The conference resolutions which is attached as **Annex 5** was presented to the plenary and was adopted with minor amendments . The conference was officially closed by Hon. Josiane Nijimbere, Burundi's Minister of Public Health and the Fight Against AIDS. During her speech she thanked the people and the government of Kenya for hosting the Conference . In addition, she thanked the International Development Partners for supporting the EAC Secretariat in organizing and hosting such an event . In conclusion, she urged the EAC Secretariat and the Partner States to follow up and implement the conference resolutions.