

# GET



4<sup>th</sup> African  
Conference  
on Emerging Infectious  
Disease and Biosecurity  
Freetown, Sierra Leone

## MANAGING THE SPECTRUM OF DATA GENERATED DURING DISEASE OUTBREAK AND BIOSECURITY THREATS

26th - 28th September 2018

Radisson Blu, Mami Yoko

### PROGRAMME BOOK

S P O N S O R S



MINISTRY OF HEALTH  
AND SANITATION  
THE REPUBLIC OF SIERRA LEONE

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## WELCOME SPEECH FROM THE CHAIRMAN, LOC

Mr Chairman, Government representatives, Local and International Guest speakers, members of the fourth estate, Sponsoring Organizations and participants, good morning.

I feel highly privileged on behalf of the host country (Sierra Leone) to welcome you all to this important 4th ANNUALAFRICAN CONFERENCE ON EMERGING INFECTIOUS DISEASE AND BIOSECURITY which is hosted in Sierra Leone. The consideration itself during our last conference in Ghana to host this year's conference in Sierra Leone is indicative of a milestone that Sierra Leone which has been working in collaboration with donor partners through its Ministry of Health and Sanitation in handling Emerging Infectious Diseases and Biosecurity is geared towards accelerating regional and continental political and public awareness of biological threats and align with international efforts such as the Biological Weapons Convention, United Nations, 1540 Security Council Resolutions. Your presence and participation in this conference is a testament that all of us are interested in finding permanent solutions in handling Emerging Infectious Diseases and Biosecurity challenges in the continent.

The sad Ebola menace which has engulfed the lives of hundreds and thousands of people in Congo, Nigeria, Guinea, Liberia and Sierra Leone is a very strong signal that we need to brace ourselves to tackle subsequent eventualities. To this end, I have the conviction that this conference is going to be a professional thought sharing platform that would be germane to our subsequent scientific researches. The Theme of this year's conference "Manage-

ing the spectrum of data generated during disease outbreaks and biosecurity threat" is appropriate where we are opportune to discuss the numerous challenges in managing data during disease outbreaks .

The Sierra Leone office has been working in collaboration with our partners in Ghana, Nigeria and South Africa through email exchanges, phone calls etc in planning this conference.

To our Hon Ministers of Government, Parliamentarians, members of the fourth estate and distinguished guests, I also welcome you to this praiseworthy conference as we consider your presence and participation very crucial.

To all our partners here, I welcome you to this conference and wish to thank the Organizing Committee for bringing together eminent speakers and high profiled people to this conference. Thank you for a job well done.

I plead on your indulgence for your proactive participation in this conference as we strive to solve the numerous challenges surrounding the tackling of emerging infectious disease outbreaks and biosecurity threats in our continent.

Thank you.

Prof S.M Gevao  
Chairman, Local Organizing Committee

# CONFERENCE OBJECTIVE

*The conference is an academic and policy based meeting that will address response mechanism to biological threats and increasing incidences of Emerging Infectious Diseases (EID) from a Continental perspective.*

## **General Objective of the Conference:**

To accelerate regional and continental political and public awareness of biological threats and align with international efforts such as the Biological Weapons Convention, United Nations, 1540 Security Council Resolutions, (IHR and PVS) and the One Health Paradigm that addresses such threats. Provide the impetus for adaptation of policies and practices that will maximize effective management of data generated during disease outbreaks.

## **Focused Objectives:**

1. Share experiences, best practices, and challenges in collection and management of biological information generated during disease outbreaks
2. Identify regional and international opportunities for collaboration in support of collection, storage and management of biological data.
3. Identify activity going on the Continent and use information shared to develop milestones for achieving an African Agenda.
4. Fast track a harmonized African Strategy to receive full political backing in addressing the plethora of samples not thoroughly inventoried.
5. Opportunity to present the latest breaking research activity and Collaborations from Ebola and other deadly Emerging infectious diseases
6. Debate evolving vaccine and immunological therapeutic modalities

The conference will focus on Seven (7) thematic areas. Abstracts on these and related topics are being solicited from academic, industrial and governmental organizations at the local, national, continental and international level. Abstracts of 200-300 words are being sought for both oral and poster presentations under the following thematic areas:

1. Era of Emerging Infectious Diseases (EID)
2. Biosecurity
3. Biobanking,
4. Public Learning and Understanding of Science (PLUS),
5. Vaccine and Immunological Strategy The Cultural, Anthropological Social and
6. Economic Impact of Emerging Infectious Diseases (CASE)
7. Junior Faculty: Mentoring the next generation of African Scientists on EID.

# ABOUT GET

The Global Emerging Pathogens Treatment Consortium (GET) was established in 2014 as a direct response to the 2014-16 Ebola virus disease outbreak in West Africa and ongoing outbreaks of Lassa Fever, Meningitis, Multidrug resistance (MDR) enteric fevers and Yellow Fever across the sub region. There was clearly a need to create an African-led multidisciplinary forum of experts capable of working together with international partners to strengthen Africa's preparedness and resilience in tackling such infectious disease outbreaks caused by emerging pathogens, public health emergencies and pandemics.

GET now operates firmly in the African Biosecurity and pandemic preparedness, space and functions as a think tank, providing high level advocacy and operational and necessary expertise to support Countries and communities achieve improved resources to combat outbreaks and other public health emergencies that can threaten stability, peace and security thereby undermining economic growth and well being.

GET is legally registered in Lagos, Nigeria, Accra, Ghana, Sierra Leone and United State of America. Our primary purpose is to develop African-led and Afrocentric strategies within an international context in order to effectively address emerging infectious diseases.

Since its inception, GET has been successful in bringing together a diverse body of specialists drawn from within and outside of the African continent with expertise across a range of fields that include health systems strengthening, infectious diseases surveillance and control, pathology diagnosis and laboratory medicine, bioinformatics, bio-banking, biorisk management, biocountainment, public health, ethics, community engagement and patient advocacy.

The Consortium creates an opportunity for the development and delivery of a rapid, informed response strategy by providing advice, guidance and technical assistance to governments, regional and international health authorities, stakeholders and international aid agencies.

# GET SECRETARIAT

GET is administered by the Executive Steering Committee with oversight from the Board of Advisors. Members of the consortium are functional in working groups which provides members the opportunity to discuss matters and implement strategic capacity development projects which fall within the terms of reference of the respective working groups. The chair of the Executive Steering Committee is the Principal Investigator (PI).

#### The Consortium has 9 working groups.

- a. Biosecurity
- b. Biobanking
- c. ECEPAS (Ethics Community Engagement and Patient Advocacy and Support)
- d. CASE (Culture, Anthropological and Socio Economic)
- e. Research and Clinical Trials
- f. GPP which is Grants, Publications and Proposals
- g. One Health or the CESI (the Climate, Environment, Surveillance and Intelligence)
- h. Policy and governance
- i. Convalescent blood strategy

#### GET has 6 Portfolios:

- (1) Human Resource and Administration,
- (2) Accounting and Finance,
- (3) Legal,
- (4) Communication,
- (5) IT website and
- (6) Conference and event planning.

# GET SECRETARIAT STAFF



**Prof. Akin Abayomi**  
*Principal Investigator*  
Global Emerging Pathogens Treatment Consortium (GET)



**Dr. Bobadoye Ayodotun**  
*Chief Operating Officer*  
Global Emerging Pathogens treatment Consortium (GET)



**Dr Babatunde Akeem Saka**  
*Global/ Executive Secretary*  
Global Emerging Pathogen Treatment Consortium (GET)

# FACULTY LEADS

## *Biosecurity Sub Faculty*



Bonnie Jenkins



Jamechia Hoyle

## *Biobanking Sub Faculty*



Pasquale De Blasio



Maimuna Wendy

## *Vaccine Strategy Sub Faculty*



Wiysonge Charles



Toritse Orubu

## *Emerging Infectious Disease Sub Faculty*



Clement Jaidzeka



George Akpede

## *Public Learning and Understanding of Science (PLUS) Sub Faculty*



Elizabeth Rasekoala



Yewande Alimi

## *Cultural, Anthropology, Social and Economic Impact (CASE) Sub Faculty*



Primus Chi Che



Samuel Uweje



## WELCOME ADDRESS BY THE CHAIRMAN, GET CONSORTIUM BOARD DIRAN MAKINDE

It is my pleasure, once again to welcome you to the 4th African Conference on Emerging Infectious Diseases and Biosecurity taking place here in Freetown. Sierra Leone organized by the Global Emerging Pathogen Treatment Consortium (GET). The conference is an academic and policy based meeting that will address response mechanism to biological threats and increasing incidences of Emerging Infectious Diseases (EID) from a continental perspective. The theme for this year is "Managing the spectrum of data generated during disease outbreaks and biosecurity threats".

This is the first time we are holding the annual conference at the epicentre of the Ebola outbreak some five years ago. Previous venues were Dakar (2015), Lagos (2016), and Accra (2017). I am particularly delighted that GET Consortium has performed so well despite the challenges of diminishing resources and members did not allow themselves to be deterred by this and continue to forge ahead in organising this conference. I am particularly grateful to the secretariat staff, the LOC and the management for this great sacrifice in rendering humanitarian services to the people of Africa.

The general objective of this conference is to accelerate regional and continental political and public awareness of biological threats and align this with international efforts such as the Biological Weapons Convention, United Nations, 1540 Security Council Resolutions, (IHR and PVS) and the One Health Paradigm that addresses such threats.

In addition, it will provide the impetus for adaptation of policies and practices that will maximize effective management of data generated during disease outbreaks.

The conference will focus on seven thematic areas, that includes; Era of Emerging Infectious Diseases (EID); Biosecurity; Biobanking; Public Learning and Understanding of Science (PLUS); Vaccine and Immunological Strategy-The Cultural, Anthropological, Social and Economic Impact of Emerging Infectious Diseases (CASE); and the Junior Faculty- Mentoring the next generation of African scientists on EID.

The theme for this year arose from GET Consortium practical experience during and after the Ebola outbreak of 2014 that confirm that data management, in public health is the poor cousin of analysis, as it is often undervalued and underfunded. It is generally accepted that without accurate data there is little capacity to monitor changes in health status, to evaluate access to services and the response of service to needs or to quantify the resources expended on health services. It highlights how it is possible to construct an information system, which allows greater access to well, preserved public health data to enable it to be reused and shared.

It has been suggested that with an appropriate system design that "data that are unmanaged can be managed, data that are disconnected be connected, data that are invisible be highlighted, data that are single use be reusable, within a structured collection". Managing data presents many challenges such as deciding responsibilities, funding, resource allocation, and what data should be kept and for how long? Lack of investments in health information technology, and knowledge synthesis are the key factors lacking in many of the African countries' strategic direction. Consortium continue to play in Africa.

The organization has been able to achieve much with less resources. The challenges of data collection, collation, compilation, analysis and reporting are caused by inadequate human resources who lack the capacity to undertake the assigned tasks: excessive and uncoordinated reporting requirements; lack of data ownership occasioned by health workers' perception that the purpose is simply to enable submission of reports to the higher levels, leading to a situation where there is no incentive for health workers at levels below the national level to analyse, use and interpret health data. In addition to these, are the lack of training on how to use health information for planning and other decision making; and the complex process usually required to access the processed health data.

Other challenges are incomplete, inaccurate and untimely data which is not useful for health management decision-making at any level. The poor quality data scenario is made worse by lack of adequate ICT knowledge among health workers, as well as under-investment in health information system in Africa.

mation system in Africa.

In many African countries, recent evidence have shown very low levels of data demand and use by the targeted users. Success of a national health information system needs to be measured not only on the quality of data produced, but also on evidence of the continued use of data to improve health system performance, to respond to emergent threats, and to improve health. The overall objective with health information system is to be able to generate, analyze and disseminate health information to facilitate effective policy formulation, management, planning, budgeting, implementation, monitoring and evaluation of health services and program interventions in the health sector.

The ultimate goal is therefore, to produce good-quality data that is subsequently used to generate relevant information for evidence-based decision making in designing health system interventions. The evidence of the continued use of data are to improve health system performance, to respond to emergent threats, and to generally improve public health. To enhance the use of health information in Africa, there is need to enhance health workers sense of data ownership and eliminate the perception that the health worker's role ends when they collect data and transmit it to the next level.

In conclusion, please allow me to again appeal to governments and African philanthropists for financial support for the enviable roles that GET.

**Diran Makinde  
Chairman, GET Consortium Board  
September 2018**

# CONFERENCE KEYNOTE SPEAKERS



**Diron Makinde** is the immediate past Director, NEPAD Planning and Coordinating Agency, African Biosafety Network of Expertise (ABNE) based in Ouagadougou, Burkina Faso and now serves as Senior Advisor to the Head, NEPAD Industrialization, Science, Technology and Innovation Hub and based at the NEPAD Agency Head Office in South Africa. He was formerly the Director of the NEPAD West African Biosciences Network in Dakar, Senegal. He earned the degrees of Doctor of Veterinary Medicine in 1976, a PhD in Veterinary Physiology from the University of Ibadan in 1986 and Diploma in Neurophysiology from Edinburgh University in 1981. Prior to joining NEPAD Agency, he was Professor of Animal Science at the University of Venda, South Africa where he also served a five-year term as Dean of the School of Agriculture, Rural Development and Forestry (1997-2001).



**Sahr Gevao** attended the College of Medicine, University of Lagos from 1977 -1982, graduating with a Medical Degree. He commenced residency training in Laboratory Medicine at the University College Hospital, Ibadan Nigeria specializing in Hematology and Blood Transfusion and was certified by the West African College of Physicians in 1988.

His next appointments from 1989 -1992, as a research fellow, were at the Medical Research Council Laboratories, Fajara. Banjul, the Gambia, and Royal Postgraduate Medical School, Hammersmith Hospital, London, United Kingdom, where he was involved in varied research projects on HIV, Polio, and Sickle cell Disease.

Gevao commenced an academic and professional career at the College of Medicine and Allied Health Sciences, University of Sierra Leone and Ministry of Health and Sanitation. He was Deputy Vice Chancellor and Head of the College from 2005- 2009. He served as National Manager Laboratory Services from 2009- 2013 and have extensive experience in Medical Education and Management.



**Jennifer Maroa** has about 16 years in biomedical (HIV) research involving human cohorts. Currently, she oversees the implementation of the Human Heredity and Health in Africa (H3Africa) initiative and advocate for genomics research on the African continent. She is also an Aspen New Voices 2018 fellow. @AspenNewVoices2018.

She is passionate about global health, human rights and social justice and she is dedicated to contributing in lasting ways by supporting capacity building, research, innovation and advocacy.



**Emmanuel Akin Abayomi:** Professor of Medicine and Health Sciences at Stellenbosch University in Cape Town, South Africa. Abayomi drew from his experience working on the Ebola outbreak to demonstrate how global health issues can be examined not only from a medical perspective, but also a political and historical one.

Abayomi is also the Principal Investigator for Global Emerging Pathogens Treatment Consortium (GET), formed at the height of the Ebola outbreak in 2014 to help combat and control the spread of the disease. GET aims at addressing ongoing and emerging biosecurity threats through research and by strengthening states' technical capacities.

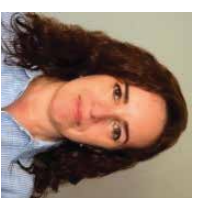


**Daniel Bausch** is the Director of the United Kingdom Public Health Rapid Support Team (UK PHRST), a joint effort by Public Health England and the London School of Hygiene and Tropical Medicine to respond and conduct research to prevent and control outbreaks of dangerous infectious diseases around the world. He is trained in internal medicine, infectious diseases, tropical medicine, and public health. Dr. Bausch specializes in the research and control of emerging tropical viruses, with over 20 years' experience in sub-Saharan Africa, Latin America, and Asia combating viruses such as Ebola, Lassa, hantavirus, and SARS coronavirus. He places a strong emphasis on capacity building in all his projects and has a keen interest in the role of the scientist in promoting health and human rights.



**Dr. Tsai** is a Branch Chief in Antiviral and Antitoxin programs at BARDA. As a branch chief, Dr. Tsai is the lead for advanced development and acquisition of Anthrax, Botulism, Smallpox and Filovirus therapeutics. Dr. Tsai received Secretary's Award for Distinguished Service 2012 for her contribution in leading CBRN MCM through FDA approval. Five different MCM therapeutics were approved in her branch through FDA's Animal Rule since then. The last approval for TPOXX for Smallpox treatment occurred in Aug 2018. It was approved using segregate orthopoxviruses under the FDA animal rule under her leadership. She was also the lead that takes the first Ebola therapeutics drug, ZMapp, to clinical phase, and lead the effort for USG to develop and procure two different Ebola drugs into Strategic National Stockpile in 2017. She is currently served as the incident commander in BARDA for the Ebola outbreak in DRC.

Prior to joining HHS, Dr. Tsai served as a scientist in DVC that supports a Department of Defense plague vaccine development program, also served as project lead in Malaria Vaccine Development Branch in NIAID. Dr. Tsai received her PhD from Univer-



**Dr Edith Valles** studied Veterinary Medicine and holds a PhD. in toxicology, she was also trained by the OPCW and United Nations Office for Disarmament Affairs on alleged use of chemical and biological weapons. She spent her early career undertaking scientific research in toxicology and from 2004 she has been advising different Argentinian agencies on export control of dual use commodities, multilateral export control regimes, CWC and BTWC.

Since 2013, she has been participating in the Argentinian Project on "Education for the Safe and Responsible Use of Chemical Sciences and Technologies for the Scientific, Economic and Social Development of Argentina" and she is currently carrying out outreach activities to industry and academia on awareness raising related to chemical and life sciences and export control of dual use goods and technologies. She is at present a member of the 1540 Committee.



**Jefferey Froude** holds a Ph.D. in Chemistry. He is a Major in the US Army. He develops, designs, and conduct research programs aimed at advancing the field of therapeutic drugs targeting Tier 1 biological threat agents, with a focus on immunotherapeutics (e.g. - mAbs) to Viral Hemorrhagic Fevers (e.g. - Ebola, Sudan and Marburg) and Alphaviruses (i.e. - VEEV and EEEV). Manage and support several multi-institute research platforms with direct supervisory responsibility over civilian, contract and enlisted personnel. Provide subject matter expertise aimed at the development and characterization of antibody-based therapeutics.



**Addia Benton:** She is a cultural anthropologist with interests in global health, biomedicine, development and humanitarianism and professional sports. Broadly, she is interested in patterns of inequality in the distribution of and the politics of care in settings "socialized" for scarcity. This means understanding the political, economic and historical factors shaping how care is provided in complex humanitarian emergencies and in longer-term development projects – like those for health. These concerns arise from my previous career in the fields of public health and post-conflict development in sub-Saharan Africa and Southeast Asia



**Alan Christoffels** hold a Ph.D. in bioinformatics from the University of the Western Cape, South Africa. Subsequently, completed a 3-year postdoctoral study in Singapore in the laboratory of the Dr Byrappa Venkatesh and Novel Laureate Dr Sydney Brenner and then established a research lab at Temasek LifeSciences Laboratories (TLL) in Singapore, for 3 years before returning to South Africa. He is the director of the South African National Bioinformatics Institute and director of the Medical Research Council Bioinformatics Capacity Development Research Unit. In 2009 he received the Department of Science and Technology/National Research Foundation Research Chair in Bioinformatics and Public Health Genomics. As of 2009 I have coordinated genomics trainin on the african continent for the WHO-tropical disease research programme - the GLOSSINA Functional Genomics Network (GFGN) as part of the International GLOSSINA Genome Initiative.





**Michela Th. Mayrhofer** is the Chief Policy Officer and also CS ELSI Chief Coordination Officer. BBMRI-ERIC is a European research infrastructure for biobanking. The organisation bring together all the main players from the biobanking field – researchers, biobankers, industry, and patients – to boost biomedical research.



**Jasper A. Bovenberg** (JD, LL.M, Ph.D) is an attorney at law, admitted to the Bars of The Netherlands and New York; he counsels on all aspects of medicine's perennial pursuit of cure, care and prevention. He currently serves as legal counsel to Biobanking and Biomolecular Research Infrastructure (BBMRI NL) Netherlands and Health RI. He is also Co-Director of the BBMRI European Research Infrastructure (BBMRI ERIC) Common Services for Ethical, Social and Legal issues. In addition to representing patient organizations, tissue banks, academic medical centres, and industry, in and out of court, Bovenberg acts/facts as legal counsel for the OECD, the Human Genome Organisation ("HUGO") and Sage BioNet-works (USA) and served on the Medical-Ethical Review Boards of the Dutch Cancer Institute and the Netherlands Pathology Archives. He is an active member of the Global Alliance for Genomics and Health.

He is the founder of the Legal Pathways Institute for Health and Bio-Law, which is a partner in a number of EU tissue and biobanking projects (BBMRI EU, Tiss.EU, BioSHARE, BBMRI LPC, EU Cellex).



**Professor Jean-Jacques Muyembe-Tamfum** is Director-General of the National Institute for Biomedical Research, Democratic Republic of the Congo (DRC), and Professor of Microbiology at Kinshasa University Medical School. He is also an Adviser to the WHO's IHR Emergency Committee regarding Ebola. He was part of the original research team at Yambuku Catholic Mission that investigated the first outbreak of Ebola virus disease and later worked on the WHO team that implemented detection and control measures in the first documented urban outbreak of Ebola in Kikwit, DRC, in 1995. For 20 years, he has chaired international committees for the control of Ebola outbreaks in Gabon (1996 and Republic of Congo, 2001) and DRC (2007, 2012, and 2014).

Professor Muyembe has also received training at the Institut Pasteur de Dakar and the US Centers for Disease Control and Prevention/Atlanta in 1981. He received a PhD in virology from the University of Leuven (Belgium) and a medical degree from Université de Lovanium (Leopoldville, DRC).



**Bonnie Jenkins** is the founder and president of the Women of Color Advancing Peace, Security and Conflict Transformation (WCAPS) nonprofit organization. She is also a nonresident senior fellow at the Brookings Institution and president of Global Connections Empowering Global Change LLC., where she works with several academic institutions on issues of global health, infectious disease and defense innovation.

Prior to this, Jenkins was a visiting fellow at the Brookings Institution and the University of Pennsylvania's Perry World House. Previously, she was an ambassador at the U.S. Department of State from 2009-17, where she served as coordinator for threat reduction programs in the Bureau of International Security and Nonproliferation. She served as the U.S. representative to the 30-nation G-7 Global Partnership Against the Spread of Weapons and Materials of Mass Destruction and chaired the Global Partnership in 2012. She was the Department of State's lead to the four Nuclear Security Summits that took place from 2010-16.

Jenkins was also a leading U.S. official in the launch and implementation of the Global Health Security Agenda (GHSA) and led engagement efforts with the nongovernmental sector in furtherance of the GHSA, to include academic institutions, foundations, and the private sector. She was also the U.S. Department of State International Security and Nonproliferation Bureau's (ISN) nominee for the 2016 Secretary's Award for Excellence in International Security Affairs



**Papa Salif Sow** MD, MS is a Professor of Infectious Diseases at the University of Dakar in Senegal. He trained as a physician specialized in Infectious and Tropical Diseases. He has focused his research on the development on diagnosis and treatment of opportunistic infections and on first line antiretroviral therapies and management strategies in resources limited countries. He is a member of the WHO Writing Guidelines for Access to Care and Treatment in Resource Limited Settings, member of the STAC (Strategic Advisory Committee for HIV/AIDS) and he is also a member of the TRP (Technical Review Panel) of the GFATM during Round 4, 5, 6 and 7

Dr Sow is a member of the WHO HIV/TB working group and he made a plenary communication on TB in people living with HIV during the International AIDS Conference organized by the IAS in 2004 in Bangkok. Dr Sow is the President of the African Network for AIDS Physicians (ANEPA) and the Coordinator of the Regional Centre for Research and Training at Fann Hospital Dakar, Senegal.



**Claudia Emerson**, Associate Professor in the Department of Philosophy and Director of McMaster's Institute on Ethics & Policy for Innovation, and her group are working with partners worldwide including the Bill & Melinda Gates Foundation, the Foundation for the National Institutes of Health in the US and the Wellcome Trust in the UK to lead the creation of principles for genetic manipulation.

Dr. Emerson has recently published a paper on establishing guiding principles that has the support of 13 major funders of gene drive research.

# CONFERENCE PROGRAMME

26TH – 28TH SEPTEMBER, 2018

## DAY 1 - WEDNESDAY, 26TH SEPTEMBER 2018

Time	Activity	Content	Responsibilities
8:00am	Registration	Collection of Conference Packs	LOC/GET
9:00am	Seating	--	Participants
<b>OPENING CEREMONY</b>			
9:30am	Welcome Address Prof Gevao (Chairman, LOC)		
9:40am	Opening Remarks Prof. Diran Makinde (Board Chairman GET)		
9:50am	Welcome Address Prof. Akin Abayomi (GET)		
9:50am	Address by Special Guest of Honour Her Excellency (Mrs) Fatimah Jabbe-Bio First Lady, Sierra Leone		
<b>TEA BREAK</b>			
<b>PLENARY SESSION I (Chaired by Professor Abayomi)</b>			
11:00am	Keynote Address	Edith Valies	Representative of the UN 1540 Committee
11:30am	Keynote Address	Presentation by Alan Christoffel	
12:00pm	Keynote Address	Presentation by Patrick Tippoo	
12:30pm	Keynote Address	Presentation by Adia Benton	
13:00am	Keynote Address	Presentation by Score Moreland	

### LUNCH AND POSTER VIEWING

#### BREAKAWAY INTERACTIVE WORKSHOP AND TRAINING SESSION

ROOM 1

ROOM 1

A hands on biospecimen laboratory information management (LIMS) training by (Alan Christoffel and Dominique Anderson)

Cultural, legal and ethical challenges in managing data in epidemics, emergencies and disasters (CASE sub Faculty)

# CONFERENCE PROGRAMME

26TH – 28TH SEPTEMBER, 2018

## DAY 1 - WEDNESDAY, 26TH SEPTEMBER 2018

4:30am	<b>TEA BREAK</b>		
5:00am	Dinner and Entertainment	African EID Book Project GET Newsletter GET Ebola TV Mini Series Project	Synthia, Morenike and Co
<b>DAY 2 - THURSDAY, 27TH SEPTEMBER 2018</b>			
<b>COUNTRY PROGRESS REPORT ON BIOSECURITY</b>			
08:15am	Nigeria	Presentation on Lagos Biosecurity Project	Dr. Jide Idris/ Dr Erinosh
	Sierra Leone	Presentation by Sierra Leone Country Rep	Prof. Gevao
	Liberia	Presentation by Liberia Country Rep	Dr. Stephen Kennedy
	Guinea	Presentation by Guinea Country Rep	Dr. Alpha Berry
<b>TEA BREAK</b>			
<b>PLENARY SESSION II (CHAIRD BY PROF. TANGWA)</b>			
10:00am	Presentation	Michaela Mayrhofer	
11:30am	Presentation	Prof. Tsai Chia-Wei	
12:00pm	Presentation	Daniel Baush	
12:30pm	Presentation	Qumou Bah Sow	
13:00am	Presentation	Jennifer Maroa	

### LUNCH

#### BREAKAWAY INTERACTIVE WORKSHOP AND TRAINING SESSION

ROOM 1

ROOM 1

A hands on biospecimen laboratory information management (LIMS) training by (Alan Christoffel and Dominique Anderson)

Cultural, legal and ethical challenges in managing data in epidemics, emergencies and disasters (CASE sub Faculty)

### 16:00pm TEA BREAK

5:00am

Presentation and Artwork

Presentations and Art work by Ebola survivors in Sierra Leone

Ebola Survivors

# CONFERENCE PROGRAMME

26TH – 28TH SEPTEMBER, 2018

DAY 3- FRIDAY, 28TH SEPTEMBER 2018

13:30pm BREAKAWAY INTERACTIVE WORKSHOP AND TRAINING SESSION

ROOM 1

ROOM 2

Abstract presentation  
Biosecurity  
Biobanking  
Emerging infectious diseases  
Vaccine

Abstract presentation  
Science Communication and Public Learning and Understanding of Science (PLUS)  
Cultural, Anthropological, Social and Economic (CASE) Impact of Infectious Diseases

13:30pm LUNCH TIME AND POSTER VIEWING

14:30am Special Presentations Special Presentations from Alan Christofells, B3Africa, the B3Africa, BCNet, H3Africa, Maimuna Mendy, ABG-Net, HC-Order, CFA, Nigeria CDC, Africa CDC, and WAHO, AAS, WAHO, NCDC, Africa CDC, AU,

14:30am TEA BREAK

PLENARY SESSION II (CHAIRD BY PROF. TANGWA)

17:00pm Closing Remarks Prof. Akin abayomi

17:0am Vote of Thanks by Host Prof. Gevao

17:50pm Announcement of the location of the 5th Conference in 2019 Prof. Makinde Chairman of GET

# CONFERENCE SPONSORS



MINISTRY OF HEALTH  
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