

2022 **ANNUAL REPORT**



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Abbreviations

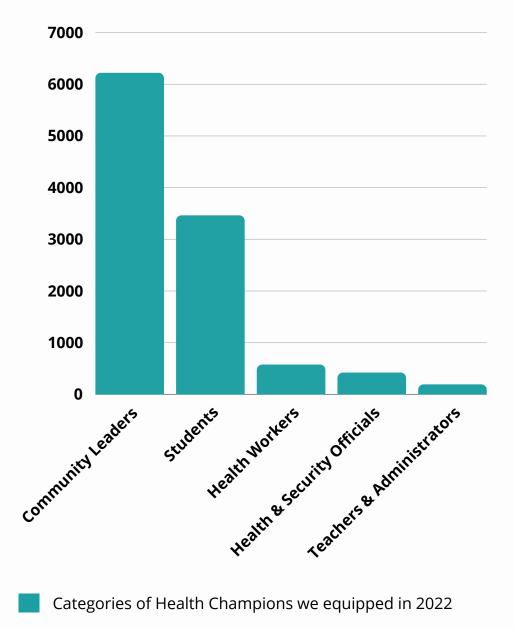
ACDC: Africa Centres for Disease Control and Prevention AFENET: African Epidemiology Network AMR: Antimicrobial Resistance AMRSCH: Antimicrobial Resistance School Program CBSF: Cross-Border Surveillance Forums CICAPS: Centre for Infection Control and Patient Safety CMAC: Chairman Medical Advisory Council CMUL: College of Medicine University of Lagos CPHIA: International Conference on Public Health in Africa DRASA: Dr Ameyo Stella Adadevoh DSNOs: Disease Surveillance and Notification Officer FAAN: Federal Airport Authority of Nigeria FCTA: Federal Capital Territory Administration FMOH: Federal Ministry of Health GCFR: Grand Commander of the Federal Republic GHD: Global Handwashing Day HAIs: Healthcare-Associated Infections HCFs: Healthcare Facilities ICAN: Infection Control Africa Network ICU: Intensive Care Unit **IEC:** Information Education and Communication **IPC:** Infection Prevention and Control IRPHEN+: Integrated Response to Public Health Emergencies In Nigeria Plus LGA: Local Government Area LMIC: Low and Middle-Income Countries NAFDAC: National Agency for Food and Drug Administration and Control NAHCO: Nigerian Aviation Handling Company NAQS: Nigeria Agricultural Quarantine Service NCDC: Nigeria Centre for Disease Control and Prevention

Abbreviations

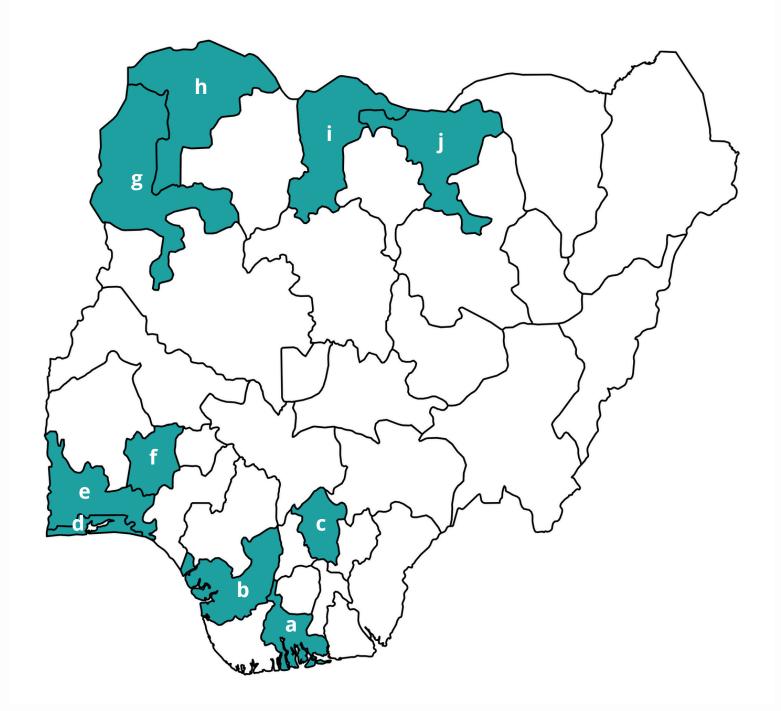
NCS: Nigeria Customs Service NDLEA: National Drug Law Enforcement Agency NIMASA: Nigerian Maritime Administration and Safety Agency NIPCO: Nigerian Independent Petroleum Company NIS: Nigeria Immigration Service NPA: Nigerian Ports Authority NPOM: National Productivity Order of Merit **OON:** Order of Niger PHI: Pro-Health International PHE: Public Health Emergencies PHECP: Public Health Emergency Contingency Plan PHEMT: Public Health Emergency Management Team PHS: Port Health Services POE: Point of Entry POEs: Points of Entry PPE: Personal Protective Equipment **RKI:** Robert Koch Institut SOPs: Standard Operating Procedures TNO: Turn Nigeria Orange TTX: Table Top Simulation Exercise US CDC: United States Centres for Disease Control and Prevention WAAW: World Antimicrobial Awareness Week WASH: Water, Sanitation, and Hygiene WHHD: World Hand Hygiene Day WHO: World Health Organisation

WPSD: World Patient Safety Day

2022 At A Glance Image: State S







Our primary work locations in 2022:

f. Osun

g. Kebbi h. Sokoto

i. Katsina

j. Jigawa

- a. Rivers
- b. Delta
- c. Enugu
- d. Lagos e. Ogun
 - in

Director's Statement

Reflections from 2022

From a cholera outbreak that lasted months to the international spread of mpox, 2022 was a year of re-emerging infectious diseases. As we reflect on the events of the year, it serves as a reminder that in the fight against infectious diseases, we have to move forward together. There is no "them", there is only "us" because it is through strategic partnerships and strong collective support that we can extend our reach and ensure that every Nigerian citizen is safe from common and new communicable diseases.

2022 was full of achievements for DRASA. From scaling our school program to reach 2 states, to expanding our health security work to reach 13 points of entry, to launching an Award for African frontline health workers in partnership with the Africa Centres for Disease Control, to receiving two national posthumous awards in honor of Dr. Ameyo Stella Adadevoh (OON), it was indeed a busy year.

As we reflect on our successes, analyze, and learn from our failures, we remain as committed as ever to developing a network of Health Champions who take responsibility for their health and the health of those around them and are actively participating in solving public health challenges.

Thank you for being part of our story.

Niniola Williams

Mrs. Niniola Williams Managing Director, DRASA Health Trust



About DRASA Health Trust

"

Our core model is to invest in building Health Champions who work alongside us as we strengthen Nigeria's health system together at every level. It is an inclusive, people-centered approach to preventing illness, improving healthy behaviors, and building a safer, healthier country.

Dr. Ameyo Stella Adadevoh (DRASA) Health Trust is a public health nonprofit organization working to build a strong and resilient health system that is accessible to all, prepared to handle emergencies, and able to provide quality care that saves lives. Vulnerable populations across the country suffer from inadequate hygiene and sanitation, preventable diseases, and a weak health system that cannot deliver quality care or contain public health threats.

Our solution is to educate and support people across Nigeria to stay healthy and safe. We design curricula and train health workers, students, and border health and security officials on health, hygiene, and infection control and we prepare border health and security officials to detect and manage public health emergencies. We support the creation, review and adoption of health policies, guidelines, and procedures and we disseminate targeted health information to improve knowledge and change the behaviors of children, religious leaders, and community leaders.

Our core model, which is reflected across all that we do, is to invest in building Health Champions who work alongside us as we strengthen Nigeria's health system together at every level. It is an inclusive, peoplecentered approach to preventing illness, improving healthy behaviors, and building a safer, healthier country.

DRASA was founded because one person's actions in one city were enough to protect and save millions around the country and beyond so we believe investing in individuals to develop a nationwide network of Health Champions will help us achieve the change we desire to see in our health sector.



About DRASA Health Trust

Mission

Developing a network of Health Champions who are preventing disease and saving lives through education and training, community engagement, emergency planning, and policy change



A healthy society supported by a strong health system and a network of Health Champions who are equipped to reduce preventable infections



- Integrity
- Excellence
- Teamwork
- Passion



- Deepen our health security work by supporting more borders and entry points
- Expand the reach of our Health and Hygiene Clubs to develop more Health Champions in schools
- Increase support of quality healthcare delivery, patient safety, and health worker safety through infection control education and policy development



What Our Health Champions Say



"

As a Customs Officer, my work demands that I make personal contact with travellers and other luggages. The Public Health Emergency Management Team training has been excellent and has given me a clue on how to identify sick passengers or infected goods. I now understand some of the public health acronyms and learned how to use PPEs to take proper preventive measures. My team and I also make reference to the emergency plans during our knowledge sharing. My most memorable moments are during our inter-border collaboration meetings with our colleagues from Niger Republic where we share and change important outbreak information.

Member, Public Health Emergency Management Team, Katsina-Jibia-Magama Border As an IPC Focal Person in my facility, there is a minimum requirement of knowledge you need to make impact in your facility. My expectations before coming are to become empowered knowledge-wise, especially in terms of preventing and controlling emerging and reemerging diseases. With what I have learned, along with my colleagues, we will go back to our facilities better prepared to engage with our leadership on behavior change needed to improve further Infection Prevention and Control activities reduce Healthcare and Associated Infections in our facility.

IPC Focal Person, University of Abuja Teaching Hospital, Gwagwalada, Abuja



Program Areas

We develop Health Champions across 4 key program areas:

Antimicrobial Resistance (AMR)

Infection Prevention and Control (IPC)

Health Security

Community Health and Hygiene

Antimicrobial Resistance (AMR)

Ensuring safe and proper use of effective medications to treat infections and diseases

Antimicrobial Resistance (AMR) is a global health crisis where drugs no longer work against harmful microorganisms. It leads to prolonged illness, preventable death, and high economic costs. DRASA fights AMR by:

- Establishing Health and Hygiene Clubs in schools to develop student Ambassadors who work to improve hygiene and responsible antimicrobial use in their schools, homes, and communities.
- Training health workers to prevent misuse and overuse of antimicrobials.
- Developing strategies and policies to address AMR at national and local levels.



Infection Prevention and Control (IPC)

Identifying and stopping the spread of preventable infections in hospitals and communities

IPC is a multi-disciplinary approach to stopping the spread of infections in hospitals and communities. It is important for patient safety and improving healthcare quality. DRASA contributes towards filling the IPC gaps in the health system by:

- Educating and building the capacity of medical and non-medical health workers in IPC.
- Conducting site assessments in healthcare facilities to identify and address infection prevention challenges.
- Supporting the establishment of IPC programs in health facilities to help them deliver safe, quality care to all patients.
- Supporting the review and implementation of national and subnational IPC policies, guidelines, manuals, and SOPs.



Health Security

Building people and systems to protect and minimize the impact of events that endanger health across our borders and region

Nigeria's epidemic preparedness, which assesses its ability to handle health crises, is at 46%, below average. Despite improvements, the country faces ongoing threats like Lassa fever, COVID-19, and other diseases. DRASA helps enhance health security by:

- Strengthening emergency response by creating systems and plans, and training the health and security workforce at our nation's borders to detect and respond to outbreaks and other public health emergencies.
- Improving collaboration through the establishment of cross-border surveillance forums to share information and improve notification of public health events between Nigeria and our neighboring countries.
- Developing Health Champions within border communities to support community-led surveillance: quick detection and reporting of possible communicable disease outbreaks.
- Conducting simulation exercises to test the capacity of frontline health workers and border security officials to handle health emergencies.



Community Health and Hygiene

Promoting good health and hygiene activities and behaviors, especially in vulnerable communities

In Nigeria, 68% of the population has no access to a toilet and more than two-thirds of the population does not have access to adequate sanitation1. In these communities, people face a high risk of suffering from the spread of infectious diseases. DRASA aims to address this by:

- Providing hygiene education and vital health information to communities to encourage healthy habits like personal hygiene, handwashing, safe food storage, and proper waste disposal.
- Empowering community members to become Health Champions who drive behavior change that protects themselves and their loved ones from infectious diseases.
- Advocating for water, sanitation, and hygiene improvements in communities.



Notes from the field

Spotlight stories from our work

Preventing Antimicrobial Resistance One Ambassador at A Time: The Second Phase of Our AMR School Program

launched the Five years we ago, #ItStartsWithMe program in Nigeria to support Nigerian youth to become Health Champions who improve their health and influence the health of those around them. The program initially focused on secondary schools in Lagos State, implementing DRASA Health and Hygiene Clubs. From 2018 to 2019, with support from the World Health Organization, over 320 student ambassadors were trained, resulting in a significant increase in knowledge about antimicrobial drug use and AMR.

Our strategy is to promote integrated awareness, education, and behavior change interventions using youth to effectively reduce the spread of AMR in the country. We believe that youth have a major role to play in reducing the burden of AMR. If engaged and educated early, they can become champions of AMR in their schools, homes, and communities, reaching and influencing the behavior of people around them.

In the second phase of the AMR School Program (AMRSCH22) from January to June 2022, we expanded to establish Health and Hygiene Clubs in more schools in Lagos and Osun State.





The interactive curriculum previously used was reviewed and strengthened and additional topics and activities on personal and menstrual hygiene, handwashing, germ theory, environmental health, reproductive and sexual health, and food safety were included. 15 new team members were recruited and trained to scale the program from 10 to 30 schools across the 2 states.

Youth trainers were trained and schools were briefed for program implementation. Parents gave consent for students to join the DRASA Health and Hygiene Club to learn and become ambassadors. The goal of the program was to achieve behavior change among in-school adolescents to prevent AMR and turn them into Health Champions who can drive further changes within their circles of influence.

Overall, the program aimed to educate young people about AMR, promote responsible use of antimicrobial drugs, and instill good hygiene practices to combat antimicrobial resistance. Through partnerships with schools and the dedication of trainers and staff, the program succeeded in making a positive impact on the understanding and behaviors surrounding AMR - a global public health challenge.

Onboarding Lagos and Osun Youth Trainers

In January, 15 Youth Trainers were onboarded to the project in Lagos and Osun. The purpose of the workshops was to meet with the team, communicate expectations of the project, train them on curriculum delivery and adolescent engagement, and give them hands-on experience in delivering the lesson plans. This was followed by a role play which was evaluated by the training team.

A highlight of the Osun onboarding workshop was Professor Aaron Oladipo Aboderin, Deputy Provost, College of Health Sciences and Consultant Clinical Microbiologist at the Obafemi Awolowo University Teaching Hospital who joined the workshop. Prof Aboderin stated how important the project is and the role it would play in combating AMR as a global threat.

Project Implementation

Using a structured curriculum, Youth Trainers engaged the Ambassadors in biweekly Health and Hygiene Club activities. To underscore the importance of AMR and how their daily activities may promote AMR, each Club meeting was structured to include a key message on AMR. For example, during the menstrual health and hygiene lesson, Ambassadors were taught that menstrual cramps should not be confused with stomach pain which can be caused by microorganisms. Hence, they were encouraged not to use antimicrobials such as Flagyl (metronidazole) or tetracycline to cure the pain. This was to address a common practice and reiterate the key message they had been taught that "Using antimicrobials when the body does not need them can lead to AMR." Our Youth Trainers also used songs and games to teach key curriculum concepts.



To ensure that our Ambassadors could put into practice what we taught them, we provided supplies such as Veronica buckets and liquid soap to encourage a behavioral change and buy-in from the wider school community. For example, after receiving the supplies, administrators in one of the schools in Lagos went ahead to purchase 10 more sets of Veronica buckets because they saw the importance of hand hygiene and wanted to ensure the school had enough for everyone to use.

Further, to build leadership and oratory skills among the Ambassadors, all meetings involved an Ambassador presenting in front of their fellow Ambassadors. This was to prepare them to speak during their school's morning assembly where they were given slots to speak to the entire school community about lessons from the DRASA Health and Hygiene Clubs.

"

Being a DRASA Ambassador has increased my self-esteem, I now have the boldness to speak with others and advise them.

— DRASA Ambassador

Past Ambassadors' Visits

During the project supervisory visits conducted halfway through the academic term, former Ambassadors from the 2018/2019 and 2019/2020 programs visited the schools in Lagos and Osun to share their personal experiences being DRASA Ambassadors, share what they learned and the highlights that have stayed with them over time, and highlight benefits and impacts of the Health and Hygiene Club activities.

Some shared how their dedication as AMR Ambassadors led to them being chosen by DRASA and WHO for opportunities even after graduating from their secondary schools. The interaction between the old and new Ambassadors encouraged the new Ambassadors and inspired them to stay committed to the program. During the visit, the team also assessed the youth trainers for their ability to manage their lessons, communicate key lesson concepts, and deliver the lessons effectively. This was part of our commitment towards ensuring that the overarching goal of the program which is to reduce the AMR through behavioral change practices in young people, was achieved.



"

Yes, before now, my mum liked self-medication and did not like us completing our drug dosage, but ever since I told her about supergerms and AMR, she now visits the doctor and has now made it compulsory for us to complete our dosage of drugs.

- DRASA Ambassador







Ambassadors had a 161% increase in their knowledge of AMR - its definition, causes, and prevention.



Ambassadors reached 8,332 persons within their circles of influence about AMR and other topics taught



Ambassadors conducted 1,366 independent activities outside the Club to influence the health practices of those around them



My Ah-ha moment was when I realized that antibiotics can only be used for bacteria, and antivirals for viruses, I now fully understand antimicrobial resistance, I now fully understand menstruation and menstrual hygiene.

DRASA Ambassador



Arts Meets Health As Our DRASA Ambassadors Create Supergerm Comic Illustrations

Having received lessons on germ theory, hygiene principles, handwashing, and AMR in humans and animals, our 900 DRASA Ambassadors—i.e, student members of the Health and Hygiene Clubs—were asked to develop creative ways to represent the concept of supergerms.

Supergerms are microorganisms that have become resistant to the antimicrobial drugs that would normally kill them, thereby causing AMR - a global health threat that is estimated to kill 10 million people annually by 2050. To communicate this burden of AMR, the Ambassadors worked in groups to develop supergerm characters and create comic illustrations to present to the rest of the school. The comic illustration activity aimed to provide Ambassadors with the opportunity to express their talents innovatively, share important health messages, and increase understanding of the concepts of AMR, personal health and hygiene, and environmental health.

Each group developed unique supergerm characters, sharing their features such as the type of microorganism, how it spreads and multiplies, why it became so strong, any special powers it has, how it infects people, and what can kill it.



Their fellow Health and Hygiene Club members provided feedback and shared what they learned from the presentations, creating a supportive learning environment.

Several groups went ahead to share their comics with the rest of their peers during their school-wide assembly. By engaging students in creative and interactive activities, we sought to reinforce in these Ambassadors an understanding of AMR, the importance of responsible antimicrobial use and hygiene practices, and their role in driving healthy practices among those around them.





Nigerian Students Fighting Supergerms: Our Work Was Spotlighted by WHO on Its Inaugural Webinar on Antimicrobial Resistance

On the 4th of May, 211 attendees from 13 African countries gathered to learn about our work on curbing AMR through our Health and Hygiene Clubs. The webinar event, titled Innovative Strategies for Youth Engagement, was the first of the AMR webinar series hosted by our partners at the World Health Organization Africa Regional Office (WHO-AFRO).

At the inaugural event, we shared the journey of our AMR School Health and Hygiene Club Program from inception to date, highlighting the need for the program, our all-of-society approach to simplify AMR, and fun and provide practical ways to equip the youth Ambassadors to become influencers of healthy behaviors and AMR in their schools, homes, and communities. We cannot be successful in our education and awareness initiatives if we do not engage all the necessary sectors. Today we have seen what we can achieve through our school health program. If a child in a rural area can know about common beverages and soda drinks, I think that we can reach everyone in a way that is practical and easy for them to participate.

— Mrs. Niniola Williams, MD DRASA Health Trust

In attendance was the Team Lead for AMR and Assistant Regional Director at WHO-AFRO, Dr. Ali Ahmed Yahaya, who highlighted that the essence of the webinar series was to support member states and to promote global voices in addressing AMR. Pharm. Omotayo Hamzat, Technical Officer, Essential Drugs and Medicine at WHO Nigeria, also shared insights on how targeted health education programs improve antimicrobial use and hygiene behavior in school-age children. Attendees expressed their support and appreciation of the work we have done through the AMR school program while seeking opportunities to partner with us to scale and replicate this initiative in other member states across the continent.

"

Interventions on antimicrobial use and hygiene behaviors have notable potentials of success in school-age children. These students serve as positive peer pressure influences in their circles. We recommend these targeted programs, for an understanding of AMR

 Pharm. Omotayo Hamzat,
Technical Officer, Essential Drugs and Medicine at WHO Nigeria



Fortifying Our Frontlines and Shielding Our Nation: How We Are Equipping Stakeholders to Battle Infectious Diseases At Our Points of Entry

The Second Phase of Our Health Security Project

It takes about 36 hours for an infectious disease to spread through our borders. Nigeria is vulnerable to these health threats because of our tropical climate, high population density, constant movement across borders, and fragmented health system.

The Integrated Response for Public Health Emergencies in Nigeria [IRPHEN]+ Project was funded by the US Centres for Disease Control (US CDC) and implemented by Pro-Health International (PHI) as its primary partner. Between May to November 2021, DRASA executed the first phase of this project which was to work with key stakeholders at 10 points of entry (POEs) in 8 states around the country to develop public health emergency management systems.



This involved developing Public Health Emergency Contingency Plans (PHECPs), testing those plans through simulation exercises, and establishing Public Health Emergency Management Teams (inter-agency teams working together and responsible for health security and the PHECP) at each point of entry.



Building on the successes and lessons we learned from the first phase of this project, the second phase was implemented from February to September 2022 and involved assessing and filling all gaps in the established response systems, building more capacity among point-of-entry stakeholders, engaging border communities, and building platforms for exchange and learning between Nigeria and neighboring countries. We also scaled the project to add 3 new points of entry, making 13 locations total as follows:

- Akanu Ibiam International Airport, Enugu
- Apapa Seaport, Lagos
- Delta Seaport, Warri, Delta
- Idiroko Ground Crossing, Ogun
- Illela Ground Crossing, Sokoto
- Jibia-Kongolam Ground Crossing, Katsina
- Kamba Ground Crossing, Kebbi
- Maigatari Ground Crossing, Jigawa
- Onne Seaport, Rivers
- Port Harcourt International Airport, Rivers
- Rivers Port Complex/Port Harcourt Seaport, Rivers
- Seme Border, Lagos
- Tin Can Island Port, Lagos

We also sought to tackle some of the barriers we noted from phase one that would hinder the sustained adoption and use of the established PHECPs and PHEMT structure at each POE.

Across the 13 POEs, DRASA completed 116 advocacv meetings, 79 Public Health **Emergency Management Team** (PHEMT) training sessions, 11 POE-wide meetings, supported coordination for 7 tabletop simulation exercises (TTXs), conducted 18 Cross-Border Surveillance (CBSF) meetings, 6,162 engaged border members, community and conducted baseline and а endline Knowledge Attitude and Practice survey



Building Capacity to Reach More Entry Points: Our Project Inception Meeting

To kickstart the second phase, DRASA onboarded additional Project Officers during a 3-day residential workshop and inception meeting in February in Lagos to:

- Familiarize and establish the objectives for the second phase of the project
- Review the requirements for the project components
- Share experiences, and clarify milestones and expectations

The onboarding workshop also covered training sessions on IPC, maintaining and sustaining PHECPs at the POE, referral and safe transfer of suspect/ill travelers, risk and crisis communication at the POEs,



cross-border engagement, and public health information sharing, social and behavior change communication and integrated disease surveillance and response, to mention a few. The workshop also included a work planning session as well as training on project operations and financial management. Armed with this training, our team was ready to hit the ground running as they returned to their respective locations and began implementation.



Border Health Champions: Preparing for Public Health Emergencies Through Stakeholder Mapping at Border Communities

People residing in border communities need to be educated and equipped to identify and prevent infectious diseases, as well as notify the necessary public health authorities for further management and action. Thus, we identified key groups of local leaders and influencers in six land border communities who we worked with to help identify, prevent, and manage disease outbreaks in their communities. The six POEs included the ground crossings in Jibia (Katsina), Kamba (Kebbi), Illela (Sokoto), Maigatari (Jigawa), Idiroko (Ogun) and Seme Border (Lagos).

Altogether, we identified over 17,600 stakeholders in these key religious communities, including leaders, market union heads, road transport workers and officials, cattle breeders, staff of primary health centers and general hospitals, health educators, and community volunteers, among others. We engaged with them through advocacy visits to secure their support and commitment to helping safeguard country's our health through their border communities.



We identified over 17,600 key stakeholders in these communities

Surveillance Beyond Borders: Cross Border Surveillance Forums Connecting Neighboring Countries

To ensure public health intelligence on infectious diseases in the West Africa region is exchanged in real-time, we established and activated collaborations across borders (between Nigeria and our neighboring countries) through Cross Border Surveillance Forums (CBSF).

The platforms were to connect government health and security officials in 4 land borders in northern Nigeria and 2 land borders in Lagos and Ogun states with their counterparts in the Republic of Niger Republic and the of Benin, respectively.



The CBSFs in each location meets share epidemiological regularly to surveillance data relating to recent illnesses or outbreaks in their border communities - confirmed or suspected cases of infectious diseases in the vicinity. We generated a contact directory of leaders/key informants of kev population groups within the 6 land borders and worked with the members of these CBSFs to establish a rapid for information exchange system between Nigeria and our neighbors as a way of sustaining collaborations and ensuring emergencies are communicated promptly.



The Road to Readiness: Building Resilient Public Health Emergency Management Teams Through Simulation Exercises

We trained and supported Public Health Emergency Management Team (PHEMT) members at the 13 POEs to better understand how to use their PHECPs and corresponding Standard Operating Procedures (SOPs); how to activate, deactivate, screen, notify, communicate, and plan for a sustained PHE; and how to deactivate, demobilize, and conduct postevent recovery after a PHE.

We also reviewed the role each ministry, government agency, and private sector company operating at the POE has to play in the emergency system that was developed and assessed their collective capacity for response through tabletop simulation exercises (TTXs).



These realistic scenarios were used to test 142 stakeholder groups including Port Health Services (PHS), Nigeria Customs Service, Nigeria Agricultural Quarantine Services, Nigeria Police, Nigeria Immigration Service, the National Agency for Food and Drug Administration and Control, National Drug Law Enforcement Agency, and others. The TTXs, which were held in 7 POEs across 4 states, helped us use real-life scenarios to guide the collaborative response required from these frontline agencies during public health events. It also helped them identify new operational gaps identified in their PHECPs, which were then documented in an action plan to be addressed.

Establishing Emergency Referral Linkages from Points of Entry to Health Facilities

In addition to the mapping, training, and simulation exercises, we established a formal referral pathway for the transfer of suspected ill persons from the POEs to a health facility equipped to manage infectious diseases. DRASA carried out several advocacy meetings with State Ministries of Health in Delta, Katsina, Kebbi, Jigawa, Lagos, Ogun, and Sokoto which resulted in the signing of a Memorandum of Collaboration/Mutual Aid Emergency Agreement between the PHS and referral facilities in 2 POEs (Warri Seaport and Warri Central Hospital, Port Harcourt International Airport and University of Port Harcourt Teaching Hospital) in the South-South; and in 4 Northern POEs namely, Jibia Ground Crossing

and Jibia General Hospital, Kamba Ground Crossing and General Hospital Kamba/PHC Kamba, Maigatari Ground Crossing Hospital and General Maigatari and Illela Ground Crossing and General llela. Hospital These documented collaborations are evidence of the crossgovernmental support we have facilitated between federal and state authorities.



Strengthening Cross-Border Collaborations for Health Security Through Community Involvement

In September we carried out community engagement activities with the 6,162 members of the identified groups in 5 border communities. We educated them on visual surveillance, notification, and infection prevention practices. We distributed 11,394 IEC materials and at the end, community members demonstrated increased understanding of types, sources and modes of transmission of infectious diseases.



Guardians of Wellness, Controlling The Contagion: Success Stories Our Infection Prevention and Control (IPC) Program

DRASA Supports NCDC and Robert Koch Institut to Equip Frontline Change Agents on Infection Prevention and Control

In May we trained 26 Change Agents from 5 health facilities on IPC as part of the nationwide IPC strategy and efforts led by NCDC in collaboration with the Robert Koch Institut (RKI) and the Centre for Infection Control and Patient Safety (CICAPS), to identify and support IPC change agents across the country to strengthen their capacity to prevent infections, improve quality of care, and keep patients safe in their various health facilities.

These Change Agents are IPC practitioners from various medical specialties who lead IPC efforts in facilities that serve as models and centers of excellence in implementing and sustaining IPC in Nigeria (called the Orange Network). We conducted an interactive and participatory training session that covered topics such as environmental auditing and cleaning, hand hygiene, respiratory hygiene, cough etiquette, donning and doffing of PPE, and understanding injection safety, amongst others.

Participants also took part in practical demonstrations to help gain a deeper grasp of what they had been taught. In addition, there were moments for them to reflect and interact with each other on how they were implementing these activities in their facilities, as well as suggestions on areas to forge relevant partnerships for improvement.

"

I acquired more knowledge to help me perform better in my role as an IPC focal person in my facility, especially in preventing the spread of re-emerging diseases. I am happy that you have done well and in collaboration with other attendees from my facility, we will go back with the evidence-based resources shared and then engage with our staff all in the hope of reducing hospital-associated infections and other risks associated with healthcare practices.

— IPC focal Person,

University of Abuja Teaching Hospital Gwagwalada



Fostering the Partnership Spirit for Infection Prevention and Control: The US CDC and ICAN Visit Nigeria

To strengthen IPC activities in Nigeria, a team from the US CDC Atlanta and Infection Control Africa Network (ICAN) South Africa visited to Lagos, Nigeria in February. The activities began with a 2-day workshop for the NCDC's IPC Orange Network: a network of health facilities around the country that are becoming centers of excellence in infection control and patient safety with quality healthcare delivery to all.

DRASA supported NCDC in welcoming 16 new facilities into the Network, making 41 health facilities total in all 36 states and the Federal Capital Territory (FCT)



These 16 new facilities learned about The Orange Network's expectations, how to establish IPC Programs in their health facilities, and how to access support from the network, while also learning from the perspectives and experiences of existing facilities. They also made presentations on the baseline IPC assessments they conducted in their facilities to highlight their current strengths and weaknesses and developed action plans to address these gaps. Thereafter, we met with the USCDC and CICAPS team to review Nigeria's Diploma in IPC course curriculum and the results of the recently concluded evaluation of its impact. The US CDC and ICAN team met with the management of the College of Medicine, University of Lagos, represented by the Chairman of the Medical Advisory Council (CMAC) who led us on a tour to visit selected wards and units including a new intensive care unit (ICU) which is currently under construction, 2 cancer centers, and their dental clinics. Through this site visit, we were able to spotlight some of the IPC measures put in place to ensure the safety of the patients seeking care in the facility.



Supporting Safe Healthcare In Nigeria: DRASA's Commitment and Collaboration towards Educating Health Workers

Basic, Intermediate, and Advanced Diploma Courses on Infection Prevention and Control

In collaboration with the Center for Infection Control and Patient Safety (CICAPS) at the University of Lagos, we demonstrated our dedication to enhancing the IPC knowledge and skills of health workers and developing a cadre of trained IPC professionals across the country through the 2022 Basic, Intermediate and Advanced Diploma in IPC courses. These hybrid virtual and in-person modules took place from January to May, involving 32 participants - 12 of whom successfully progressed through to the Advanced level.

The implementation of this rigorous, interactive curriculum through the College of Medicine, University of Lagos is part of the ongoing effort to support Nigeria's IPC strategy and standardize the practice of IPC across the country. The primary objectives of the course were to prevent Healthcare-Associated Infections (HAIs) in patients, healthcare workers, and visitors, thereby improving clinical practice and increasing patient safety.

The intensive educational course, conducted by experienced IPC practitioners with international acclaim, focused on overcoming the challenges of implementing IPC in lowand middle-income country (LMIC) contexts. Utilizing a mixed methodology, including personal study, slide presentations, videos, virtual engagements, group work, facility visits, role plays, demonstrations, site visits, and simulations, the course addressed core IPC components recommended by the WHO.





The modules covered all technical aspects of IPC in detail, but also equipped students with essential supporting skills such as behavior change communications, team building, adult learning mechanisms, leadership, and management in IPC. These are all essential skills they need to successfully gather the support and resources required to implement IPC and make significant changes in their health facilities.

Only successful participants who passed their exams progressed to the next level of the course. The impact was evident as students reported positive learning experiences, skill acquisition, and the establishment of valuable networks for peer learning. The training is expected to catalyze improvements in IPC within their respective healthcare facilities, with participants assuming leadership roles, establishing IPC programs in their facilities, and providing IPC training and support for frontline healthcare workers while also ensuring they have management support to sustain their efforts.



Overall, supporting this course demonstrates our commitment to elevating IPC standards, addressing gaps in healthcare worker training, and fostering a culture of continuous learning and improvement in IPC across Nigeria. It underscored our commitment to fostering a well-prepared and skilled healthcare workforce to address infectious diseases and contribute to the broader goals of public health, patient safety, and quality healthcare delivery for all.



Chasing Zero Infections From Awareness to Action: Our Campaigns To Commemorate Global Health Days

Unite for Safety: Clean your hands: Celebrating World Hand Hygiene Day

Poor IPC culture in hospitals leads to persistent infections, more healthcare visits, longer hospital stays, and high care costs. However, according to the WHO, better hand hygiene practices can prevent 50% of avoidable infections acquired during healthcare delivery and can generate economic savings.

To mark the 2022 World Hand Hygiene Day (WHHD), with the theme "Unite for safety: Clean your hands," we partnered with NCDC and ICAN to carry out the following campaign activities:

- Social media campaign for hand hygiene awareness, including a call to pledge support using a personalized photo.
- Twitter Space event with experts to talk about hand hygiene.
- Training primary healthcare workers on hand hygiene.

Twitter Space Conversation

DRASA organized a Twitter Space talk called "Keeping Patients Safe: It Starts With Your Hands" to discuss the importance of hand hygiene in hospitals. The event had 899 live listeners and 423 replays. DRASA's Managing Director, Mrs. Niniola Williams, moderated the event, and expert speakers, Dr. Tochi Okwor (Programme Coordinator IPC, NCDC, and Chair, National AMR Coordination Committee) and Prof. Folasade Ogunsola (Professor of Medical Microbiology at College of Medicine, University of Lagos, Consultant Clinical Microbiologist at the Lagos University Teaching Hospital and Chair of the Infection Control Africa Network), spoke about infection prevention and control.



One-Day On-Site Capacity Building for Health Care Workers

We organized a training session for 15 healthcare workers at Alli Dawodu Primary Healthcare Centre in Lagos to teach them about hand hygiene and WASH as critical components of preventing and controlling infections within the facility. We partnered with the Nigeria Society of Infection Control (NSIC) and covered key points like the importance of hand hygiene in the healthcare center and community, standard handwashing techniques, and WHO's Five Moments for Hand Hygiene. Afterward, all participants took a pledge to maintain good hand hygiene, and we distributed hand sanitizers.



Pledge to Uphold Hand Hygiene in and Out of the Facility

As part of the WHHD campaign, we asked people to make an online pledge to always practice good hand hygiene. We developed a pledge message, with a photo pop frame and asked participants to add their photo and share it online with their friends, colleagues, and loved ones. Our goal was to get health workers in the facility we visited and our social media followers to pledge to keep their hands clean. In total, 102 people made this pledge.



Walking The Talk On Medication Safety: DRASA Health Trust Collaborates With Federal Ministry of Health, and Others, To Celebrate World Patient Safety Day.

DRASA Health Trust, in collaboration with the Federal Ministry of Health (FMOH), the Nigeria Centre for Disease Control (NCDC), the Centre for Infection Prevention and Patient Safety (CICAPS), and Patient Safety Africa, celebrated World Patient Safety Day (WPSD) with a focus on Medication Safety and the theme Medication Without Harm.

Medications are crucial for healthcare, but unsafe medication practices cause a significant amount of harm. To address this, DRASA along with WHO and its partners organized three key activities.

Overall, these initiatives aimed to enhance awareness and understanding of medication safety for the benefit of patients, healthcare workers, and the public:

- Road Walk for Medication Safety Awareness: On September 17, 2022, we held a 40-minute road walk in Abuja, involving 150 stakeholders. The goal was to educate people on medication safety, covering a distance of 2.7km.
- Ministerial Press **Briefing:** On September 19, 2022, a Ministerial Press Briefing was held at the FMOH building. The Minister of Health discussed the importance of medication safety in healthcare and highlighted ongoing efforts to improve it. Alongside DRASA, stakeholders from various organizations, including WHO, Jhpiego, West Africa Academy of Public Health, Patient Safety Africa, members of the National Patient Safety Desk, and the media, shared their perspectives. Keynote speaker Dr. Asekhame Sonny Isemede praised government efforts and called for increased collaboration for patient safety and support for drafting policies prioritizing patient safety







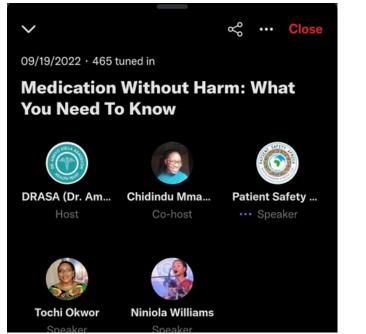
• Twitter Space Conversation: To reach a wider audience online, we partnered with FMOH and NCDC to host an online conversation on "Medication Safety: What You Need to Know." The conversation aimed at raising promoting and awareness best practices in medication safety. Experts like Dr. Asekhame Isemede, Dr. Paul Kwetishe, and Dr. Tochi Okwor answered guestions and emphasized importance of using the drugs correctly to prevent harm. A total of 467 listeners joined in to learn from our subject matter experts.

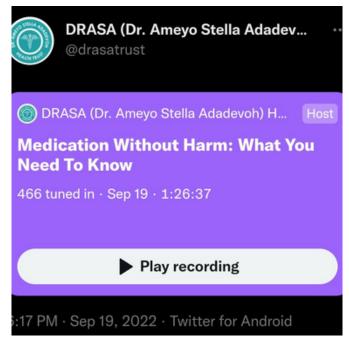


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Drugs should be used in the right doses, for the right diagnoses, on the right patient, and at the right time. If we don't obey these rights, potions can very quickly become poisons. It's a very thin line.

— Dr. Asekhame Sonny Isemede Director, Patient Safety Africa





Global Handwashing Day Outreach: DRASA Educates 1566 Students, 84 Teachers, and 60 Traders.

We celebrated Global Handwashing Day (GHD) by educating students, teachers, and traders about the importance of handwashing. Our team visited six schools and a market as part of our efforts to promote hand hygiene. The goal of these visits was to advocate for better awareness and the adoption of sustainable hand hygiene practices, not just in communities but also within larger systems.

Schools and markets are environments where regular hand hygiene is crucial due to how people gather together and have close, personal contact. The schools were chosen from Lagos and Osun States, and they included Ansar Ud Deen Senior High School Surulere, Apapa Senior High School Apapa, Estate Senior Grammar School Ilupeju, Matori Senior Grammar School Isolo, Anglican Commercial Grammar School Osogbo, and Our Lady's Girls High School, Modakeke. Additionally, the outreach was conducted at Arena Market, Oshodi, Lagos.

At the schools, DRASA reached 1,566 students and 84 teaching staff to handwashing demonstrate proper techniques. The students also learned a handwashing song from the DRASA Health and Hygiene Clubs while question and answer sessions were held, and prizes were awarded to students who answered correctly. The schools also received handwashing materials including soaps, sanitizers, and Veronica buckets to help them maintain a culture of hand hygiene.





In the market, we engaged with the women traders and emphasized the importance of their participation in Global Handwashing Day. We also taught them how to wash their hands properly with soap and running water. Demonstrations of the proper handwashing steps included several attendees, from buyers to market traders who all learned and participated. The market women were happy to ask questions about certain misconceptions regarding hand hygiene and to express their happiness with the new knowledge gained on the topic. DRASA also donated cartons of handwash to the market management, and a total of 60 people participated in this event. These initiatives aimed to create awareness and encourage the practice of proper handwashing to enhance public health, particularly in schools and markets where it is essential for reducing the spread of germs and diseases.

Preventing Antimicrobial Resistance Together: DRASA Celebrates World Antimicrobial Awareness Week

We marked World Antimicrobial Awareness Week (WAAW) by promoting awareness and action campaigns against AMR. In this serious global health issue, diseases become harder to treat due to microorganisms not responding to medicines. This year's WAAW celebrated from 18th-24th November was themed, "Preventing Antimicrobial Resistance Together," thus emphasizing the need for collaborative efforts. DRASA organized several activities to engage students, teachers, and the public. They included:

An Inter-School Debate Competition: DRASA's Health and Hygiene Club members, known as DRASA Ambassadors, participated in a debate competition to raise awareness about the One Health approach to AMR. The competition, which had a pre-qualifier and final/grand slam round, involved 20 schools from Lagos, and 10 schools from two of the education districts in the state.

The pre-gualifier stage was completed at the district level where the 10 schools in each district competed against one another on the topic "Towards Preventing AMR, Who Plays a Bigger Role: The Government or the Schools?" Three schools from each of the districts (6 in total) gualified for the grand slam/finale. The final debate between these 6 schools explored the question, "One Health as a Solution for AMR: A Reality or a Facade?" State Senior High School emerged as the with New Era Girls Senior winner. Secondary School and Obele Community Senior Secondary School securing second and third places, respectively.

To add smiles to the faces of our Ambassadors, Unilever Nigeria, and Hayat Kimya donated personal hygiene products for the competition.



DRASA Ambassadors Talent Show: showcased their understanding of AMR through creative expressions using their individual and group talents. Submissions included poetry, songs, playing instruments, and acting out skits. The winners included Omole Senior Grammar School, Lagos City College, and others, who highlighted the importance of preventing AMR through their song and drama performances.

Twitter Space **Conversation:** In collaboration with the NCDC, DRASA hosted a 90-minute conversation on Twitter, titled "You, Me and The Supergerms: Preventing Antimicrobial Resistance Together." Over 1,200 listeners joined the discussion, where experts like Prof. Oyinlola Oduyebo (Professor and Consultant Clinical Microbiologist, University of Lagos), Dr. Yewande Alimi (AMR program Coordinator at Africa CDC), and Dr. Zaharat Kadri-Alabi (Veterinary Doctor, Scholar and One Health Researcher) emphasized the critical importance of addressing AMR. Dr. Zaharat Kadri-Alabi pointed out the historical significance of antimicrobials and the potential consequences of uncurbed AMR.

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Years ago, before antimicrobials were discovered, simple cases of boils, diarrhea, or wounds from surgeries could lead to death. If Antimicrobial Resistance is uncurbed, a time will come when infections will no longer be treated with the drugs we have now.

— Dr. Zaharat Kadri-Alabi





ORASA (Dr. Ameyo Stella Ada... Host

You, Me & The Supergerms: Preventing Antimicrobial Resistance Together

1.2K tuned in · Nov 24 · 1:12:19



Celebrating the Life, Labors, and Legacy of Dr. Ameyo Stella Adadevoh

DRASA Day Radio Tour

On the 19th of August 2014, Dr. Adadevoh died after containing the first case of the deadly Ebola Virus in Nigeria. Her selfless sacrifice saved millions of lives of Nigerians. Coincidentally this day of her death is also celebrated globally as the World Humanitarian Day, a day set aside to honor the memory of those who have lost their lives in the cause of humanitarian action and to celebrate the work of humanitarian workers around the world.

On the 8th posthumous anniversary of Dr. Ameyo Adadevoh, we hosted a radio tour across three radio stations to share about her life and contributions as a humanitarian who dedicated her life to helping people and patients in need, regardless of their nationality, religion, or ethnicity.

So, from the 18th to 19th of August, 2022, our Managing Director was hosted at the Nigeria Info FM Abuja, KU FM Benin, and Heritage FM, Imo as a guest where she relived the history of Dr. Adadevoh and shared the impact of the work we have been doing in the past 8 years since her passing.



Gone, but not forgotten: Dr. Ameyo Stella Adadevoh Receives First National Posthumous Award

Dr. Ameyo Stella Adadevoh was conferred the National Productivity Order of Merit (NPOM) Posthumous Award by His Excellency, President Muhammadu Buhari (GCFR), at the 19th National Productivity Day Celebration held on Thursday, the 12th day of May 2022 at the Banquet Hall of the Presidential Villa, Abuja.

The event, which was centered around the theme Achieving Higher Productivity through Improved Educational System, was the first-ever national merit award and the first recognition by the nation since Dr. Adadevoh died in 2014, after saving millions of Nigerians from the first case of Ebola.

The keynote speech by Dr. Sylvester Momoh Onoja highlighted the need to make our education sector functional and efficient while emphasizing its role as a strong determinant of national productivity. Since national security is greatly dependent on health security and economic productivity, the keynote speech resonated with our work in educating and equipping young champions in schools as part of our commitments toward Nigeria's prosperity.

Also in attendance were 48 other meritorious awardees, amongst whom were Dr. Chikwe Ihekweazu (Assistant World Director General. Health Organization), Prof Akin Abayomi (Commissioner of Health, Lagos State), Dr. Obi Peter Adigwe (Director General, National Institute for Pharmaceutical Research and Development), and Boss Gidehyelda Mustapha (Secretary to the Government of the Federation and Chairman of the Presidential Task Force on COVID-19).





2022 National Honors List: Dr. Ameyo Stella Adadevoh Receives Officer of The Order of Niger Award

On Tuesday, 11th October 2022, Dr. Ameyo Stella Adadevoh received the Posthumous National Honor of Officer of the Order of Niger (OON). This was conferred by His Excellency, President of The Federal Republic of Nigeria, President Muhammadu Buhari.

Dr. Adadevoh joined other prominent awardees celebrated by the Federal Government of Nigeria for distinguishing themselves through their service to the nation and humanity, and their contribution to national development. The event, which took place at the International Conference Center in Abuja, had 450 Nigerian and non-Nigerian awardees in various categories. About 100 other Nigerians, along with Dr. Adadevoh, also received the OON Award.

These National Awards are the first to be conferred since the inception of President Muhammadu Buhari's government in 2015. For love, duty, and country we are grateful that the life, labors, and legacy of Dr. Ameyo Stella Adadevoh (OON) were not in vain as we continue to celebrate her through our work and commitment to keeping our nation healthy and safe.

On her behalf, the DRASA Health Trust Board Chairman, Bankole Cardoso, received the award. "It's been about 8 years. And to still get this recognition is very nice for me and my family and I'm sure she's happy." expressed Bankole Cardoso while speaking to the Arise News crew at the event.





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It's been about 8 years. And to still get this recognition is very nice for me and my family and I'm sure she's happy.

— Bankole Cardoso, Chairman, DRASA Health Trust Board

Receiving the Inaugural Africa CDC - DRASA Continental Award for Emergency Health Workers in Africa

In recognition of her role and sacrifice in containing the first case of the West African Ebola Virus Disease epidemic in Nigeria, Dr. Ameyo Stella Adadevoh (OON), also received the first Africa CDC-DRASA Health Trust Continental Award for Emergency Health Workers on Tuesday, December 13th. The award presentation, which marked the official launch of our annual Award for Emergency Health Workers, took place during the 2nd International Conference on Public Health (CPHIA 2022), held in Kigali, Rwanda, Africa's land of a thousand hills.

This award is the first of its kind for the continent to honor African health workers who play a major role in securing our health security in the face of public health threats. We are proud to have launched it as an award by Africans, for Africans. Receiving the award on her behalf was DRASA's Chairman of the Board, Mr. Bankole Cardoso, and Managing Director, Niniola Williams.

Presenting the award at the event, Dr. Ahmed Ogwell Ouma, Acting Director of the Africa CDC, appreciated the efforts of Dr. Adadevoh and highlighted that the initiative of recognizing and rewarding emergency health workers will continue to take place yearly, through a series of careful nominations and selections.



This award is named after Dr. Ameyo Stella Adadevoh, a Nigerian physician, who in 2014, during the devastating Ebola outbreak in W. Africa, managed the first patient in Nigeria, got infected in the process, and died. Succumbing to the disease, in her words she said it was 'For the greater public good'. There is no greater sacrifice than giving your life knowingly so that you can protect 200 million Nigerians and over 1 billion Africans... We at Africa Centres for Disease Control and Prevention have decided to name this award after her, in recognition of her selfless sacrifice, her work, and her efforts, to protect lives for the greater public good.

— Dr. Ahmed Ogwell,

Acting Director General, Africa Centers for Disease Control and Prevention





From Local Heroes to Global Voices: Speaking Up and Standing Out Beyond Our Comfort Zones

Through strategic speaking engagements and media features, we are sharing our work in developing champions who are identifying and preventing infectious disease outbreaks; and amplifying our mission via local and global platforms.

Tweet Chat with BudgIt Nigeria and Nigeria Health Watch

On the 4th of March 2022, DRASA along with over 369 live listeners joined the Twitter Space conversation hosted by BudgIT Nigeria and Nigeria Health Watch, to discuss how to fund epidemic preparedness at national and subnational levels. The panel of speakers included our Managing Director Mrs. Niniola Williams, Mr. Seun Onigbinde (Global Director Budglt Nigeria), Kemisola Agbaoye (Senior Programs Manager, Nigeria Health Watch) and Dr. Olumide Olukaja (Technical Advisor to the Lagos State Commissioner for Health). Speaking at the virtual event, Mrs. Williams stressed the need to view epidemic preparedness as an insurance policy, to scale private sector involvement in resource mobilization and investing in local infrastructure. Also highlighted was the need for increased advocacy and storytelling, cross-sector and cross-border collaboration for sustaining epidemic preparedness





Epidemic Preparedness is a public good. It is like an insurance policy. State governments can find opportunities they can leverage to increase their revenues and create long-term sustainable financing mechanisms for epidemic preparedness

— Mrs Niniola Williams MD, DRASA Health Trust

Financial Times: Antibiotic resistance in Africa: 'a pandemic that is already here'

On the 7th of March 2022, the article Antibiotic resistance in Africa: 'a pandemic that is already here' mentioned our AMR school program work as an intervention towards solving the global burden of AMR in Africa. The article further highlighted the potential of AI to identify and analyze patterns of AMR and assist healthcare professionals in making informed decisions about antibiotic prescriptions. It also addressed ethical concerns and the need for collaborative efforts between researchers, policymakers, and technology developers to tackle AMR effectively. Read more: <u>https://www.ft.com/content/95f150df-5ce6-43cf-aa8d-01ac3bdcf0ef</u>



Feature, Nigeria Health Watch: The True Burden of Antimicrobial Resistance: New Study Has Major Implications for Nigeria

DRASA was mentioned in an article titled "The True Burden of Antimicrobial Resistance: New Study Has Major Implications for Nigeria" as an organization leveraging partnerships to train the public health workforce in Nigeria on Infection Prevention and Control (IPC).

The article further discusses a new study's findings on the true burden of antimicrobial resistance (AMR) in Nigeria which reveals alarming statistics indicating high а prevalence AMR among of common infections in the country. These findings the urgent need for emphasize comprehensive AMR control measures and highlight the potential impact on healthcare in Nigeria, calling for immediate attention and action to address this growing threat.

Read more: https://nigeriahealthwatch.com/the-trueburden-of-antimicrobial-resistance-newstudy-has-major-implications-for-nigeria/

42 PM 🗊 🞯 🧭 Infection prevention and control (IPC) is also critical to limiting the spread of hard-to-treat infections both in the community and in hospitals. This is achievable through the widespread implementation of programmes focused on hand hygiene and access to water, sanitation and hygiene (WASH) services. IPC is essential for a country like Nigeria which is in a region with a high AMR burden and there has been a push by non-profit organisations like DRASA Health Trust, partnering with the government to train health workers. Building laboratory capacity, both infrastructure and human resources, is essential to enable the detection of hard-to-treat infections and targeted treatment. Since 2017, the AMR Technical Working Group and

Rethinking Health Security from Ground-Up and the Role of the Private Sector: Lessons from the COVID-19 Response

We participated in a health security policy dialogue organized by Nigeria Health Watch, emphasizing the pivotal role of the private sector in bolstering health security. The event centered around the theme "Decentralizing Health Security; Lessons from COVID-19," featured discussions and contributions from experts across various health security-related industries

One panel session delved into the private sector's role in responding to epidemic diseases and how to harness its capabilities to fortify national and subnational health security structures.



Dr. Kemisola Agaboye (Director of Programmes, Nigeria Health Watch), led the panel which included Mrs. Niniola Wlliams (Managing Director, DRASA Health Trust) and other experts like Dr. Anne Adah-Ogoh (Head of Policy, Private Sector Health Alliance of Nigeria), Mr. Aliu Israel (National Laboratory Manager, Clina Lancet Laboratories), Dr Omokhudu Idogho (Managing Director, Society for Family Health) and Dr. Emmanuel Agogo (Country Director, Resolve to Save Lives).

Key lessons from this dialogue stressed the importance of a multisector rapid response fund to quell small outbreaks before they escalate into major epidemics. Additionally, it highlighted the necessity of involving subnational levels in the national-level discussions and the significance of aligning national strategies with the specific needs of local communities for effective response structures.

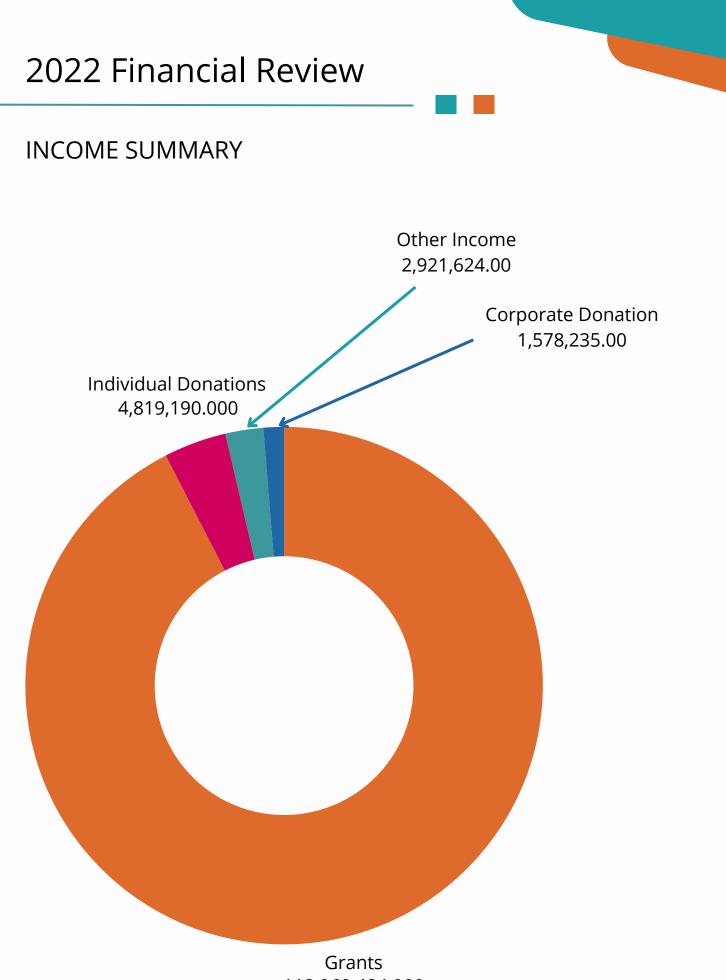
Other notable speakers and panelists at the event included Dr Ifedayo Adetifa (Director General, Nigeria Centre for Disease Control), Peter Hawkins (Country Representative, United Nations Children's Emergency Fund), Dr Festus Soyinka (Director, Public Health, Ogun State Ministry of Health Ogun State), Dr. Olaolu Aderinola (Head, Response Division, Department of Health Emergency Preparedness and Response, NCDC) Dr. Yahya Disu (Director Risk Communications, NCDC), Dr. Ayodeji Ajiboye (Senior Economist, World Bank) and Dr. Ifeanyi Nsofor (Senior Vice President for Africa at Human Health Education and Research Foundation). They lessons shared learned from the performance of epidemic preparedness and response structures deployed at the national level in response to the COVID-19 pandemic and the learnings of sub-national structures.

The private sector's ongoing critical role in epidemic response was emphasized but collaboration with the government was Williams highlighted essential. Mrs as underscored the need for this collaborative approach, stating, "The private sector cannot do it alone." She cited examples of collaborative projects like the DRASA's AMR School Program, emphasizing the importance of co-creating solutions with the government address public health challenges to effectively.



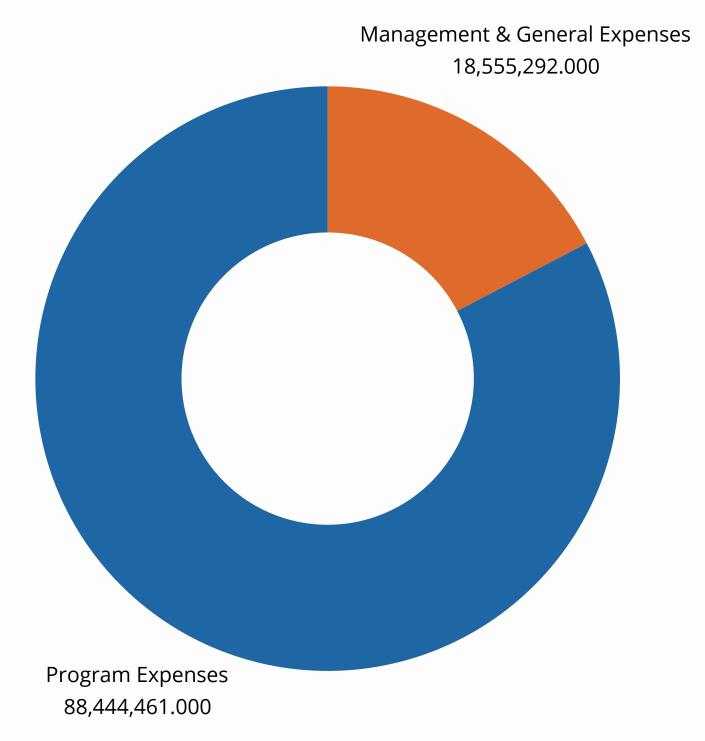


Financials



113,960,484.000

EXPENSE SUMMARY



Appreciation

Thank you for partnering with us, supporting our mission, and donating to sustain our work









DELTA STATE MINISTRY OF HEALTH

ENUGU STATE MINISTRY OF HEALTH

JIGAWA STATE MINISTRY OF HEALTH

KATSINA STATE MINISTRY OF HEALTH KEBBI STATE MINISTRY OF HEALTH

LAGOS STATE MINISTRY OF HEALTH

LAGOS STATE MINISTRY OF EDUCATION

OGUN STATE MINISTRY OF HEALTH OSUN STATE MINISTRY OF HEALTH

OSUN STATE MINISTRY OF EDUCATION

RIVERS STATE MINISTRY OF HEALTH

SOKOTO STATE MINISTRY OF HEALTH





Nigerian Society for Infection Control



More Moments

From 2022

DRASA's AMR Work

















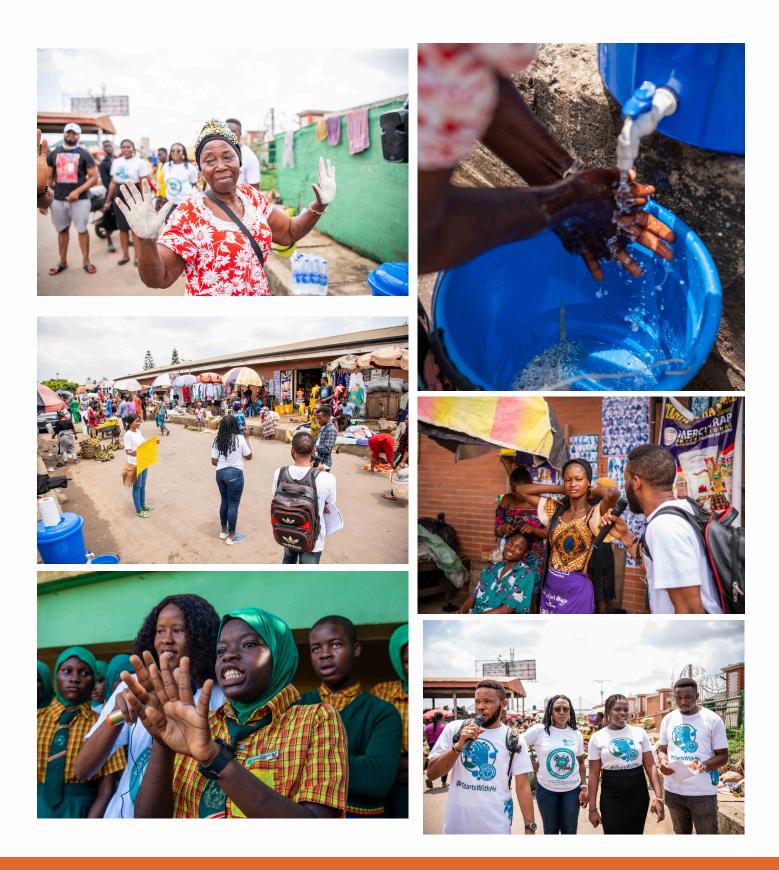
DRASA's AMR Work



DRASA's IPC Work



DRASA's Community Health & Hygiene Work



DRASA's Health Security Work









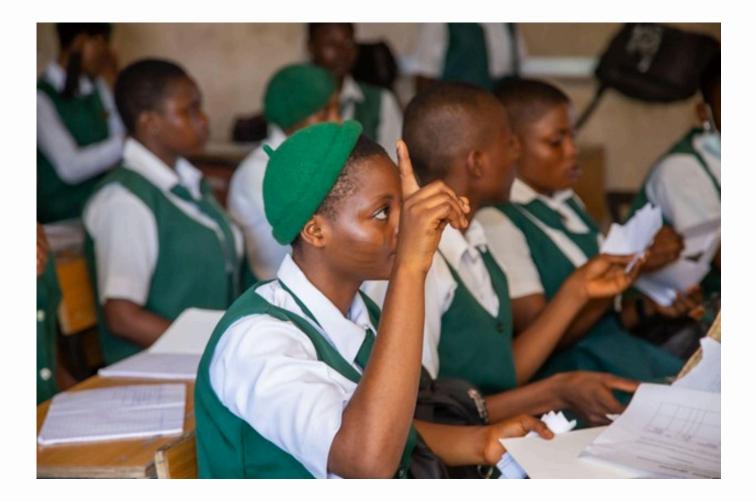




DRASA's Health Security Work



Support DRASA Health Trust



The end of one journey is the beginning of another. We thank everyone - our team members and board, partners, donors, followers and volunteers - who have helped us achieve this impact through the years through their support and donations.

We want to reduce the burden of infectious diseases by equipping at least 250,000 health champions in Nigeria in the next 5 years as we also expand our reach across the continent to continue to prevent diseases and protect health.

Your generosity creates breakthroughs in health and allows our team to continue our lifesaving work. Visit www.drasatrust.org/donate to support our mission.



DRASA Health Trust

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