

Participants:

TB-Flagship project: Erick Strauss, Elizabeth Kigondu, Edwin Murungi, Rajshekhar

Kapoormath, Gabriel Mashabela, Konrad Mostert

Malaria-Flagship project: Richard Amewu, Lyn-Marie Birkholtz, Fabrice Boyom, Dinkorma Ouologuem, Laurent Dembele, Winston Nxumalo, Amanda Rousseau,

Rawdat Baba-Adam

DMPK Network: Collen Masimirembwa, Arnold Forkuo Donkor, Ali Duchu, Rose Hayeshi, Janine Scholefield, David Twesigomwe, Liezl Gibhard, Mwila Mulubwa,

Roslyn Thelingwani

Natural Products Box: Fidele Ntie-Kang

GC cohort 1&2 grantees: Grace Mugumbate, Fortunate Mokoena

Other GC ADDA members: Peter Mubanga Cheuka, Hoseah Akala, John Igoli BMGF: Gang Liu, Peter Warner, Jenn Maroa, Whitney Lynn McMartin, Monicah

Otieno

LifeArc: Julie Brady, Mike Strange

MMV: James Duffy

DDU: Ian Gilbert, Kevin Read, Suze Farrell

H3D: Susan Winks, Jessica Akester, Nicola Elliott-Wong, Greg Basarab **SFA**: Moses Alobo, Angeline Yalwala, Doris Wangari, Fatu Bediane

Objectives of the Workshop:

Day 1: Consolidating GC ADDA

- 1. Agree on GC ADDA governance structure
- 2. Develop GC ADDA vision, mission, principles, goals and activities for the network
- 3. Establish groundwork for building the GC ADDA brand identity and website
- 4. Build a list of needs for the network members
- 5. Agree on communication strategy

Day 2: Research visibility and opportunities

- 6. Create visibility around current collaborations within the network, highlighting successes and challenges
- 7. Create visibility around fundraising initiatives within the network
- 8. Opportunity to pitch project ideas to network members

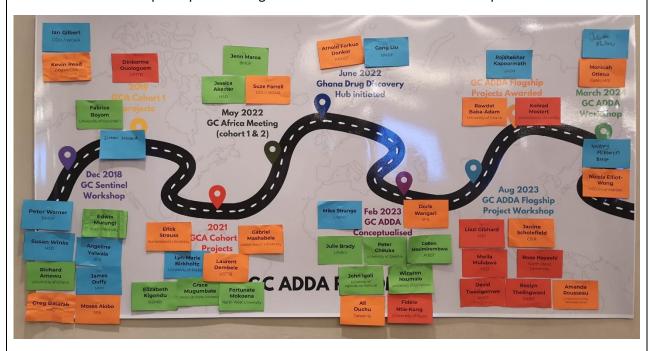


Date: 4-5 March 2024 Time: 09h00 – 16h30

Venue: Asana Room, Serena Hotel, Nairobi

DAY 1: Discussions and Decisions

Icebreaker involved all participants adding their names to the GC ADDA Roadmap



GC ADDA Governance

- There is currently an "EXCOM" who have overseen both GCA RFPs and the GC ADDA flagship
 project RFP. EXCOM will attend the GC ADDA annual convening meeting and support the GC
 ADDA network. H3D Foundation, BMGF and LifeArc to propose a revised structure for the
 EXCOM.
- The GC ADDA flagship **projects** have implemented their own, project specific governance structures and steering committees to manage the **projects** for the duration of the grants.
- The GC ADDA network requires an **operational leadership** structure focused on the needs and success of the network. GC ADDA Operational Leadership team membership should include any GC ADDA member who is a PI/co-PI currently managing a drug discovery project with value >\$500k (currently this would include Kelly Chibale, Susan Winks, Erick Strauss, Richard Amewu, Lyn-Marie Birkholtz, Collen Masimirembwa, Fidele Ntie-Kang).
- There was also the proposal to have a GC ADDA advisory board, who will bring in wider, global
 perspectives, connections to industry and funding, and provide advice and expertise for growing
 the network. GC ADDA advisory board would also guide and advise on increasing the scope of
 the network beyond infectious diseases. The operational leadership team together with EXCOM
 will propose membership for the GC ADDA advisory board.



GC ADDA Vision, Mission and Strategic Objectives:

• **Vision:** to establish a **sustainable** African Drug Discovery Accelerator Network to leverage the drug discovery research expertise, capabilities, infrastructure, and resources across the continent to support **drug discovery for unmet medical needs**.

• Mission:

- To discover medicines for African priority diseases to address unmet medical needs, sustainably.
- Develop drug discovery and translation science talent in Africa and obtain a critical mass of researchers.
- To establish African centres of excellent regionally placed, that feed the drug discovery pipeline.

Strategic Objectives

- To establish a formal GC ADDA network to leverage drug discovery network capabilities infectious as short-term goal and potential to expand to non-infectious diseases in the
 long-term.
- Build a pipeline of drug discovery projects that will deliver a flow of optimized leads and high-quality drug candidates into clinical development.
- **Sustainable** drug discovery and development on the African continent by building and diversifying funding streams, obtaining government buy-in, infrastructure development and extending the ecosystem (biotech, pharma, academia, PDPs)
- To connect with those outside the continent, including those in the **African diaspora**, to accelerate the impact of the network.
- To support and train the next generation of African drug discovery researchers.

GC ADDA Membership

- GC ADDA Member is:
 - A research leader, based in Africa, with a research team who can provide skills, expertise, and facilities towards drug discovery. i.e. a recognized drug discovery research leader, track record of funding, publication record, long term commitment to the mission, evidence of ability to collaborate, with access to infrastructure and research team.
 - The GC ADDA Member brings their **institution** to the network. The institution will sign the GC ADDA consortium agreement.
 - Active participation, collaboration with government and institutions, and maintaining scientific credibility are expected from members. Members receive healthy competition, access to facilities and expertise, credibility and visibility, collaboration opportunities and preferences for workshops/training.
 - Criteria for Losing Membership: Non-delivery, non-compliance, misuse of funds and
 ethical concerns may lead to losing membership. Inactivity for 12 months or lacking
 integrity also warrants membership loss. NB: Membership will be reviewed annually and
 all members will vote on addition or removal of members. GC ADDA will perform annual
 surveys to track activities and provide accountability for all members.
 - Partner/Affiliate member: from other continents, industries, funders, and academic partners including African diaspora.
 - **Student/trainee member**: membership through their PI while they work on GC ADDA projects.



GC ADDA Projects

- A GC ADDA project is a drug discovery project that is led (or co-led) by a GC ADDA member. The
 emphasis is on demonstrating scientific innovation and leadership in drug discovery out of
 Africa. It is understood that some funding schemes by design will require that the principal PI is
 based in Europe, UK or North America, but provided that the African partner is contributing
 equally to driving the project, then this could also be considered a GC ADDA project.
- Current GC ADDA projects:
 - Discovery of novel antimalarial lead candidates in Africa PI Richard Amewu, University of Ghana, Co-PI Lyn-Marie Birkholtz, University of Pretoria, South Africa
 - Pursuing Targeted Protein Degradation as a New Strategy for Antituberculosis Drug Development -PI Erick Strauss, Stellenbosch University, South Africa
 - African DMPK Research Network -PI Collen Masimirembwa, African Institute for Biomedical Science and Technology, Zimbabwe
 - African Derived Natural Product Library PI Fidele Ntie-Kang, Buea University, Cameroon

GC ADDA Activities:

- Support the GC ADDA projects to be successful
- Showcase success through publications, patents, conferences and a consolidated communication strategy
- o Increased community engagement and awareness through public engagement.
- o To support drug discovery **training of post graduate students and early career researchers** and placements in different laboratories, including mentorship, workshops, webinars etc.
- Establish a framework to facilitate sharing of compound libraries.
- Create a framework to facilitate **data sharing** for collaborative projects.
- o Implement a framework to facilitate access to specialized biology assays, to DMPK assays and to critical analytical equipment.
- Aid the establishment of regional drug discovery hubs
- O Coordinated fundraising and engagement with funding bodies and governments
- Establish database of infrastructure, capabilities, experts.
- o Investigate solutions to common challenges like procurement, equipment maintenance etc.

In Scope	Out of Scope
 Disciplines within DD pipeline (including preclinical development activities such as process chemistry, analytical methods, toxicology both non-GXP and GXP.) Infectious diseases will be the initial priority and will expand to all diseases. Advocacy and Community engagement to educate and inform and build support Training, workshops, and mentorship Resource sharing Establishing centres of excellence Attract funding Engage government and funding bodies Drug disposition in African populations Publications 	 Vaccines Clinical trials Clinical development Manufacturing for scale Diagnostics Traditional medicine Antibodies Policy making



- · Create database of infrastructure and skills
- Establishing a community of practice, networks for exchanges people/students

Setting critical success factors: Key goals (3 years)

- Training in integrated drug discovery hubs. Ongoing support, train the trainer, mentorship, set of training
- Deliver on current project goals
- Next phase of funding in place
- Strengthen network by including diaspora and others international supports and addressing gaps/weaknesses
- Additional 2 funders
- Additional 3 projects initiated
- Stronger engagement from pharma
- Better access to infrastructure
- Bring in toxicology capabilities and expertise into the network

Communication strategy

- GC ADDA needs to develop a coherent strategy to raise the profile of the network, convey strategic messages to stakeholders, BUT avoid unnecessary hype and avoid giving mixed messages.
- H3D Foundation and the GC ADDA operational leadership team will develop and approve the communication strategy with input from EXCOM and funders.
- H3D Foundation and the GC ADDA operational leadership team will produce a GC ADDA slide deck akin to the TBDA and/or MalDA slide deck.
- Produce an article on GC ADDA.
- H3D Foundation to send out monthly newsletters of upcoming opportunities collated by the members.
- Create a GC ADDA website

GC ADDA Brand and Identity

The following suggestions from the workshop will be used as a basis to design the GC ADDA logo, website and social media presence.

- Symbol:
 - o the map of Africa, but abstracted.
 - O Tree with the fruit as capsules? Roots going deep to Cape Town?
 - Also suggested: no molecules or pills.
 - Network many parts contributing to a whole
 - o Interconnected circles
- Colour:
 - Colourful, earthy colours representing fertile land of opportunity.
 - Green productivity, possibility, hope of meeting unmet medical needs.
 - Shades of red and yellow



- Concept:
 - o Focus on the patient as priority
- Words:
 - o GC ADDA
 - "Sustainable health innovations"
- Target audience:
 - o as wide a reach as possible students, funders, patients

Actions	☐ Nicola Elliott-Wong to oversee digitizing the GC ADDA Roadmap
	☐ H3D Foundation, BMGF and LifeArc to propose a revised structure for the
	EXCOM
	☐ H3D Foundation to draft definitions and roles for the GC ADDA operational leadership team, advisory board and members
	☐ H3D Foundation to draft definition for "GC ADDA project" so that it is clear which projects are included
	☐ Operational leadership team will be formed within the next quarter (Q2 2024)
	☐ MoU for members will be circulated to potential members within the next 4 months (July 2024)
	☐ Brand, website and consolidated slide deck to be drafted by end 2024
	☐ Advisory board to be formed by Q3 2024
	☐ H3D Foundation and the GC ADDA operational leadership team and EXCOM will develop and approve a communication strategy by Q3 2024.
	☐ H3D Foundation and the GC ADDA operational leadership team will produce a GC ADDA slide deck akin to the TBDA and/or MalDA slide deck by Q3 2024.
	□ Produce an article on GC ADDA by Q4 2024.
	☐ H3D Foundation to prepare template for monthly newsletter