Dear Pandemic Fund Strategy Team,

Thank you for the opportunity to provide feedback on the Pandemic Fund Strategic Plan. I'm writing on behalf of Africa Frontline First to suggest the following changes to strengthen the plan, and particularly emphasize the need to improve integration of the health workforce and community engagement.

Proposed changes:

Section 1.4 Unique Value Proposition | Paragraph 3
- Add a reference to the Monrovia Call to Action as part of the changing global landscape. The Monrovia Call to Action calls for increased and integrated investment in community health programs following a community health symposium with over 46 country delegations. Proposed sentence revision: Recent activities in the broader global health architecture, including global efforts such as the ongoing Intergovernmental Negotiating Body (INB) discussions on a convention, agreement, or other international instrument on pandemic PPR (“Pandemic Agreement”), and the Working Group on Amendments to the IHR, as well as multi-stakeholder efforts such as the Future of Global Health Initiatives, the Lusaka Agenda, and the Monrovia Call to Action are further accelerating changes in the landscape.

Section 2.4 Deep dive on underlying themes
- Disease outbreaks start in communities, often among underserved, remote, and marginalized populations where conditions allow pathogens to thrive. In these settings, which are often cut off from regular access to the health system, the likelihood of an outbreak escalating into an epidemic or even a pandemic is significantly increased.
- Community engagement is particularly critical for the success of the Pandemic Fund given the localized nature of disease outbreaks and the critical need to involve communities and community health workers (CHWs) in pandemic PPR efforts, from outbreak reporting to the adoption of public health measures. Evidence shows professional CHWs can help maintain community healthcare provision during COVID-19, and by extension, can assist with preparedness for the inevitable future pandemics. Source: https://bmjopen.bmj.com/content/12/5/e052407#ref-13

Appendix C: Deep dive on programmatic priorities and cross-cutting enablers

Workforce Section
- Opening paragraph: In workforce, there are major programs (led by the U.S. Centers for Disease Control and Prevention, Africa Centres for Disease Control and Prevention, the Global Fund) to provide training for general public health workforce, particularly the Africa Union's initiative to train and scale 2 million professional CHWs, as well as pandemic PPR-specific skills (e.g., field epidemiology), though there is limited funding for multisectoral workforce strategies with a focus on One Health and community engagement.
- Add profession to this bullet (professionalized CHWs are the most effective and aligned to Africa CDC strategy): Training and education of community-facing workforce (e.g., professional community health workers, nurses, animal and environmental health
Commenter: Africa Frontline First

workers) to build trust and communicate public health policies to ensure community engagement in outbreak reporting and public health response;

Thanks,
Katey