Taking Action against Epidemics

The Schnell Einsetzbare Expertengruppe Gesundheit (SEEG) – the German Epidemic Preparedness Team – supports partner countries to identify and control disease outbreaks.

**The Challenge**

COVID-19 spread very rapidly from China throughout the whole world. The world was only partly prepared for this pandemic. There was a shortage of diagnostic tests and protective equipment, and laboratory personnel and health care workers were insufficient in numbers or insufficiently trained.

The COVID-19 crisis demonstrates that if dangerous outbreaks of infectious diseases are not recognised quickly enough, people die, health systems become overwhelmed and previous advances in development can be put at risk.

In order to react quickly and effectively to outbreaks of infectious disease, comprehensive and sensitive early warning systems, well-equipped and well-functioning laboratories and health facilities, as well as motivated and well-trained staff.

**A response mechanism**

The German Epidemic Preparedness Team (SEEG) supports partner countries and partner organisations in preparing for and responding to disease outbreaks – at short notice, flexibly, professionally, and around the globe.

Following the devastating epidemic of Ebola Fever in West Africa, Germany set itself the goal to respond better and faster to international health crises. The founding of the SEEG in 2015 by the Federal Ministry for Economic Cooperation (BMZ), in collaboration with the Federal Ministry of Health, (BMG), was one contribution to this goal. The Federal Ministry of Food and Agriculture (BMEL) is now part of the collaboration.

Since then, the SEEG has been deployed more than 30 times in more than 20 countries, including to strengthen responses to dengue, Ebola, Lassa und Zika.

In action against the COVID-19 pandemic the SEEG has supplied test reagents and laboratory material for various countries, and trained laboratory personnel and health workers, to identify suspect cases and investigate samples. The more COVID-19 cases are recognised, and the earlier they are identified, the quicker transmission chains can be interrupted effectively – and in this way the outbreak can be contained locally and ultimately globally.

<table>
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<tr>
<th>Project title</th>
<th>German Epidemic Preparedness Team (SEEG)</th>
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<tr>
<td>Commissioning party</td>
<td>Federal Ministry for Economic Cooperation and Development (BMZ), Federal Ministry of Health (BMG), Federal Ministry of Food and Agriculture (BMEL)</td>
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<td>Implementing organisations</td>
<td>Bernhard Nocht Institute for Tropical Medicine (BNITM), Charité – Universitätsmedizin Berlin, Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH, Friedrich-Loeffler-Institut (FLI), Robert Koch-Institute (RKI)</td>
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<td>Assignment location</td>
<td>Worldwide</td>
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<td>National partners</td>
<td>Ministries of Health and other local authorities</td>
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**SEEG deployments: rapid, flexible, worldwide**

Triggers for a deployment are a formal request for support from Germany - from a partner country, for example through a Ministry of Health, or from the World Health Organisation (WHO). The final approval for a deployment comes from the Permanent Secretary of the BMZ. Deployments are agreed with the Federal Ministry of Health and the Federal Ministry of Food and Agriculture.
The deployment teams are composed according to the illness, the outbreak situation and context. They usually comprise two to six colleagues from the five partner organisations: the Robert Koch-Institute (RKI), the Bernhard Nocht Institute for Tropical Medicine (BNITM), the Friedrich-Loeffler-Institute (FLI), the Charité University Hospital as well as the German Development Corporation (Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH). A deployment will usually be – according to need - one to two weeks long and may benefit from additional support from other institutions.

In this way, the SEEG is able to work cross-sectorally in the sense of a One Health Approach at the interfaces between human and animal health and the environment.

Results

The SEEG deployments help in two ways: Firstly, they improve the immediate situation in the outbreak in question; secondly, they can contribute to the sustainable strengthening of the local health system, coherent with the goal of Universal Health Coverage. SEEG-deployments are always aligned with existing structures. In this way, this development cooperation has positive short- and long-term effects. Partner countries are also supported in this way to achieve the Sustainable Development Goals 2030 and develop core capacities under the International Health Regulations. The SEEG therefore helps avoid an outbreak becoming an epidemic or a pandemic, and this contributes to Global Health Security in the country itself and globally.

SEEG made real: Namibia and Bolivia versus COVID-19

In February 2020, the first cases of COVID-19 in Africa were confirmed. At this time there were only a few African countries that could identify the causative virus SARS-CoV-2. In March 2020 therefore, the SEEG deployed a team to Namibia, with diagnostic tests and laboratory material in their luggage. Laboratory personnel were trained in the diagnosis of SARS-CoV-2. The first two COVID-19 cases were identified a week later. In Namibia it was therefore possible to respond to the pandemic before it had even reached the country.

In October 2020, Bolivia was facing a comprehensive health crisis as a result of COVID-19. Two teams deployed: one consulted strategically with representatives of the health institutions and ministries, whilst the other trained laboratory workers in the use of the PCR test reagents they had brought with them.

SEEG deployments in 2020 supported the battle against COVID-19 in the following countries: Namibia, Benin, Colombia, Ecuador, Togo, Peru, Mexico, Bolivia, Guatemala, Honduras, Kyrgyzstan, Costa Rica and the Dominican Republic.