

communities of the value of women's contributions and challenging traditional gender stereotypes. Breaking barriers calls for partnerships for capacity-building initiatives and resource sharing and expertise. Additionally, institutional support, including gender-sensitive policies and flexible work schedules, can help women succeed in research.

Beyond gender equality, empowering women to conduct clinical research is essential for expanding medical knowledge and enhancing healthcare outcomes in Africa. By addressing gender and diversity gaps in research leadership, we can bridge knowledge disparities, break barriers, and build a more inclusive and resilient healthcare system for the continent.

OA-904 **ROLE OF PATHOGEN GENOMICS IN PUBLIC HEALTH: LESSONS FROM HIV AND COVID-19 TOWARDS PANDEMIC PREPAREDNESS**

^{1,2}Sikhulile Moyo*, ^{1,3}Wonderful T Choga, ³Mpaphi B Mbulawa, ³Onalethata Lesedi, ³Pamela Smith-Lawrence, ¹Rosemary Musonda, Joseph Makhema, ^{1,2}Simani Gaseitsiwe, Trials of Excellence in Southern Africa (TESA) network. ¹Botswana Harvard AIDS Institute Partnership, Botswana; ²Department of Allied Health Professions, Faculty of Health Sciences, University of Botswana, Botswana; ²Department of Immunology and Infectious Diseases, Harvard T.H. Chan School of Public Health, USA; ³Ministry of Health and Wellness, Botswana

10.1136/bmjgh-2023-EDC.61

The invaluable lessons learned from the application of pathogen genomics during the HIV and COVID-19 pandemics hold significant implications for pandemic preparedness. These insights can shape our strategies to tackle future infectious disease outbreaks and reinforce global health readiness. Firstly, the understanding of transmission dynamics gained through genomic surveillance has highlighted the importance of early detection and rapid response. By closely monitoring viral mutations and genetic diversity, public health authorities can swiftly identify emerging pathogens, track their spread, and implement containment measures.

Secondly, the successful evaluation of interventions and treatment success using genomics data emphasises the need for evidence-based decision-making. Pathogen genomics provides real-time information on the effectiveness of therapeutics and vaccines, allowing the refinement of treatment strategies. By leveraging these insights, future pandemic responses can be more agile and effective, saving lives and reducing the burden on healthcare systems.

Furthermore, the identification of SARS-CoV-2 variants and their geographic distribution has demonstrated the importance of a globally coordinated surveillance network. Early detection and characterisation of variants enable the development of region-specific public health measures and targeted vaccination campaigns. Building international collaborations and data-sharing mechanisms will be crucial in facilitating a rapid response to emerging variants in future pandemics. Moreover, the ethical considerations surrounding pathogen genomics underscore the necessity of establishing robust ethical frameworks in pandemic response.

Lastly, the collaborative efforts demonstrated during the HIV and COVID-19 pandemics underscore the significance of global partnerships in pandemic preparedness which should be

strengthened. International cooperation, knowledge exchange, and resource-sharing are essential in addressing global health challenges effectively.

In conclusion, lessons from HIV and COVID-19 genomics have far-reaching implications for pandemic preparedness. Integrating pathogen genomics into public health systems can revolutionise disease control efforts, optimise outbreak response, and foster a proactive approach to tackling emerging infectious threats and mitigating the impact of future pandemics.

Abstracts of Poster and e-Poster Presentations

PA-6 **PROVIDER AND USER ACCEPTABILITY OF INTEGRATED TREATMENT FOR THE CONTROL OF MALARIA AND HELMINTHS IN SARAYA, SOUTHEASTERN SENEGAL**

¹Muhammed Afolabi*, ²Aminata Diaw, ³El haji Babacar Fall, ³Fatimata Bintou Sall, ²Adams Diédhiou, ²Amadou Seck, ⁴Baba Camara, ⁴Diatou Niang, ²Isaac A Manga, ⁴Ibrahima Mbaye, ²Ndèye Mareme Sougou, ³Doudou Sow, ¹Brian Greenwood, ³Jean Louis A Ndiaye. ¹London School of Hygiene and Tropical Medicine, UK; ²Université Cheikh Anta Diop, Senegal; ³Université de Thies, Senegal; ⁴Saraya Health Centre, Senegal; ⁵Université Gaston Berger de Saint-Louis, Senegal

10.1136/bmjgh-2023-EDC.62

Background Integration of vertical programmes for the control of malaria, schistosomiasis and soil-transmitted helminthiasis has been recommended to achieve the elimination of malaria and neglected tropical diseases (NTD) by 2030. Given the dearth of studies on the acceptability of the integrated approach, we conducted this qualitative study within the context of a randomized controlled trial to explore the perceptions and views of parents/caregivers of at-risk children and healthcare providers to determine their acceptability of the integrated malaria-helminth treatment approach.

Methods Randomly selected parents/caregivers of children enrolled in the trial, health care providers, trial staff, malaria and NTD programme managers were interviewed using purpose-designed topic guides. Transcripts obtained from the interviews were coded and common themes identified using content analysis were triangulated. Fifty-seven study participants comprising 26 parents/caregivers, 10 study children aged ≥ 10 years, 15 trial staff, four health care providers and two managers from the Senegal Ministry of Health were interviewed.

Results Thirty-eight of the participants (66.7%) were males and their ages ranged from 10–65 years. Overall, the integrated malaria-helminth treatment approach was considered acceptable but the study participants expressed concerns about the taste, smell and side effects associated with amodiaquine and praziquantel in the combination package. Reluctance to accept the medications was also observed among children aged 10–14 years, due to peer influence and gender-sensitive cultural beliefs.

Conclusion Addressing concerns about the taste and smell of amodiaquine and praziquantel is needed to optimize the uptake of the integrated treatment programme. Also, culturally appropriate strategies need to be put in place to cater for the inclusion of children aged 10–14 years in this approach.