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**REPORT OF THE COMMISSION ON  
PROGRESS IN OPERATIONALIZATION OF THE AFRICA CENTERS  
FOR DISEASE CONTROL AND PREVENTION (AFRICA CDC)**

## **REPORT OF THE COMMISSION ON PROGRESS IN OPERATIONALIZATION OF THE AFRICA CENTERS FOR DISEASE CONTROL AND PREVENTION (AFRICA CDC)**

### **I. INTRODUCTION**

1. Emerging and re-emerging diseases have repeatedly demonstrated the high cost of lack of preparedness and the subsequent negative social and economic impact on the African continent. Collectively, HIV/AIDS, Ebola Virus Disease (EVD) and the COVID-19 Pandemic have claimed the lives of millions of Africans. Public health threats also continue to undermine the progress made in poverty reduction by pushing people into extreme poverty, with COVID-19 alone contributing close to 40 million people, of which women, youth and low skill workers bear the highest burden. The dire consequences of unattended public health threats also extend to the macroeconomy of the African Union (AU) Member States (MS). For example, the Western Africa EVD outbreak in 2014 costed up to USD 53 billion of the affected member states' economies. The current delay in the rollout of COVID-19 vaccines is estimated to be costing the continent 13.8 billion USD in lost gross domestic product every month.

2. As the continent continues to face concurrent disease outbreaks, endemic infectious diseases and non-communicable diseases, Africa CDC must be optimally enabled to meet its mandate and avert such socio-economic losses. Investment in Africa CDC's full operationalization, and implementation of Africa's New Public Health Order, will save lives and enhance the continent's economic prosperity. Moreover, the successful implementation of the Union's flagship projects, such as the open skies, free trade and free movement of people, will only be possible with effective control of disease threats and health emergencies on the continent.

### **II. EXECUTIVE COUNCIL DECISIONS ON THE FULL OPERATIONALIZATION OF AFRICA CDC**

3. In October 2020, in response to the directive by the Bureau of the Assembly of the Union that Africa CDC be strengthened for better preparedness and response to COVID-19 and other public health emergencies, the Executive Council at its 37th Ordinary Session passed decision **EX.CL/Dec.1106(XXXVII)**. This decision requested the Commission to prepare a report, including a road map and Framework of Operations, outlining the financial, legal and structural implications to fully operationalize the Africa CDC in line with its Statute. The report was for submission to the Council at its 38th Ordinary Session through the AU Policy Organs.

4. Successively, in February 2021, the Executive Council, during its 38th Ordinary Session, in decision EX.CL/Dec.1110(XXXVIII), further instructed the Commission to produce a report including a Road Map and Framework of Operations, outlining the financial, legal and structural implications to fully operationalize the Africa CDC in line with its Statute. This report was for consideration by the 39<sup>th</sup> Ordinary Session of the Executive Council.

### III. ACTIONS TAKEN BY THE COMMISSION

5. In February 2021, the Chairperson of the Commission established the Phase I Taskforce on Operationalization of the Africa CDC. This Task Force completed its work in June 2021 and made proposals that the Chairperson of the Commission subsequently approved. These approved actions are currently being implemented by Africa CDC and the relevant departments of the Commission.

6. To build on the work of the Phase I, the Chairperson of the Commission established a high-level Task Force for Phase II operationalization chaired by the Deputy Chairperson of the Commission. The high-level task force was tasked to review the Statute of Africa CDC and where applicable, propose amendments that would address the numerous concerns and requests made by several Heads of State and Government on the urgent need for a stronger and autonomous Africa CDC. The high-level task force made recommendations, including the revision of the Statute of Africa CDC.

7. At its 40th ordinary session in February 2022, the Executive Council passed decision EX.CL/Dec.1146(XL) directing the Commission to put in place all necessary measures to expedite the full operationalization of Africa CDC, including implementation of the Phase I Taskforce recommendations provided there were no additional legal, structural and financial implications.

8. Also in February 2022, the Assembly decided in its **Assembly/AU/Dec. 835(XXXV)** decision, to delegate its authority to the Executive Council to consider, during its July 2022 Session, amendments to the Africa CDC Statute in line with the following directives: a) The Africa CDC shall be an autonomous body of the Union charged with the responsibility of prevention and control of diseases in Africa; b) A new governance structure that allows for strategic leadership and ownership by the Member States at the highest level of Heads of State and Government; c) The Africa CDC Secretariat to be headed by a Director General at a proper grade; and d) The Commission to put in place modalities for full implementation of the updated Africa CDC Statute. The Assembly also directed the Commission to report on the implementation of this decision through the relevant AU Policy Organs. The Assembly also decided to upgrade the current AU COVID-19 Response Fund to be the Africa Epidemics Fund, to mobilize resources for preparedness and response to disease threats on the continent and directed the Commission to develop a framework of governance and management of the Africa Epidemics Fund as per the AU FRR with the Africa CDC as the Secretariat.

### SECTION ONE

#### IV. PHASE I IMPLEMENTATION STATUS

9. The Council in decision **EX.CL/Dec.1146(XL)** requested the Commission to report on the progress in implementation of the Phase I recommendations. The Commission has taken the following actions:

- 9.1 **Human resources** – an administrative guideline on emergency recruitment was developed and approved, and is currently in use to ensure standardized selection of rapid responders. Secondly, of the 65 approved positions, only 21 have been recruited, 18 advertised, and the remaining 25 are now ready for advertising. However, full implementation of HR management functions within Africa CDC, including recruitment, contract management, and staff administration, is delayed due to a lack of appropriate staff who are yet to be recruited.
- 9.2 **Management Information System** – a detailed work plan for the roll out of the electronic management system (SAP) for Africa CDC has been developed. This will help streamline management of Africa CDC’s business processes and information flow. Training of relevant Africa CDC staff to be effective users is ongoing with the aim of full rollout as soon as possible.
- 9.3 **Procurement** – an Emergency Procurement Guideline including proposal on the thresholds and delegation of procurement authority to Africa CDC have been developed. The process of transferring all procurement functions to Africa CDC based on this guideline is in progress.
- 9.4 **Finance:**
- 9.4.1 The Executive Council Decision **EX.CL/Dec.1106(XXX-VII)**, which requires the Africa CDC budget to be carried over to the subsequent calendar year is being implemented. The part of the decision requiring a Biennial budgetary cycle for the Africa CDC, has not yet been implemented.
- 9.4.2 The Africa CDC SAP system is now fully implemented and all transactions are being done at the institutional level. In addition, the identification and verification processes have started for assets located at the Africa CDC Regional Coordination Centers (RCCs) and Secretariat.
- 9.4.3 The transfer of bank signatories to Africa CDC is almost completed and Africa CDC leadership will then be responsible for its bank accounts.
- 9.4.4 The Executive Council Decision **EX.CL/Dec.970 (XXXI)**, which directs that 0.5% of the annual operational budget of the Union be allocated to the Africa CDC as emergency funds for disease surveillance, detection and response, has not yet been implemented.
- 9.5 **Delegation of Authority** – in August 2020, the Chairperson delegated authority to the Director of Africa CDC, enabling him as CEO to fully manage Africa CDC operations, including approval of work travels, procurement, staff appraisals and recruitment process. Since this decision was made and implemented, it has significantly improved the speed of implementation of Africa CDC’s priority initiatives, including timely deployment of rapid responders during health emergencies.

## SECTION TWO

### V. PHASE II PROGRESS UPDATE

10. Following Assembly Decision **Assembly/AU/Dec. 835(XXXV)** of February 2022, the Commission has presented proposed amendments to the Africa CDC Statute, and initiated revision of the Africa CDC Organizational Structure and the design of a financial sustainability plan for Africa CDC.

11. **Amendment of the Africa CDC Statute** – the Commission has proposed amendments to the Statute of the Africa CDC in line with the Assembly decision of February 2022. An autonomous, strong and effective Africa CDC requires a Statute that is coherent with its mandate to respond rapidly to any disease threat on the continent and to engage with its peer organizations globally based on mutual respect.

12. On June 21<sup>st</sup> 2022, the proposed amendments were considered by the Specialized Technical Committee on Health, Population and Drug Control. After extensive deliberations, the Honorable Ministers of Health endorsed the amendments with additional inputs.

13. Subsequently, on July 4<sup>th</sup> 2022, the Specialized Technical Committee on Justice and Legal Affairs reviewed the proposed amendments, adopted the revised Statute with additional inputs and forwarded its report, the final amended Statute, and a draft decision for consideration of the Executive Council at its 41<sup>st</sup> Ordinary session.

14. **Africa Epidemics Fund** – the Assembly also established the Africa Epidemics Fund and requested the Commission to put modalities of its operations in place. .

15. The elaboration of the Fund's structure, responsibilities and function is at an advanced stage. The completed report will be submitted for approval to the 42<sup>nd</sup> Ordinary Session Executive Council through relevant AU policy organs. .

16. **Structural Implications** – the Commission has developed a revised organizational structure and identified the appropriate professional levels required to fully operationalize Africa CDC as directed by the Assembly. The proposed structure will be submitted for approval to the 42<sup>nd</sup> Ordinary Session Executive Council through relevant AU policy organs. This is to allow the Executive Council to first consider and approve the amended Africa CDC Statute.

### VI. RECOMMENDATIONS AND WAY FORWARD

17. The Commission therefore makes the following recommendations to the Executive Council;

- 17.1 To note the progress in implementation of the Phase I and II operationalization of Africa CDC;
- 17.2 To request a full report on the governance and functions of the Africa Epidemics Fund and the revision of the Africa CDC organizational structure at the next ordinary session of the Executive Council; and
- 17.3 To remain seized of this matter.

**DRAFT**  
**DECISION ON THE REPORT OF THE COMMISSION ON PROGRESS IN  
OPERATIONALIZATION OF THE AFRICA CENTERS FOR DISEASE CONTROL AND  
PREVENTION (AFRICA CDC)**

**The Executive Council,**

1. **WELCOMES** the Commission's report on Phase I and Phase II operationalization of the Africa Centers for Disease Control and Prevention (Africa CDC) and its recommendations;
2. **RECALLS** Executive Council decisions EX.CL/Dec.1106(XXXVII) **and EX.CL/Dec.1110(XXXVIII) which REQUESTED and INSTRUCTED** the African Union Commission to: "prepare a report, including a road map and Framework of Operations, outlining the financial, legal and structural implications to fully operationalize the Africa CDC in line with its Statute, for submission to the Council through the AU Policy Organs";
3. **ALSO RECALLS** Executive Council decision EX.CL/Dec.1146(XL) which **DIRECTED** the Commission to: "put in place all necessary measures to expedite the full operationalization of Africa CDC, in line with the relevant decisions of the Policy Organs, including the completion of the implementation of the Phase I Taskforce recommendations provided there are no legal, structural and financial implications and report to the 41st Ordinary Session of the Executive Council in June/July 2022";
4. **FURTHER RECALLS** Assembly decision Assembly/AU/Dec.835(XXXV) to: "delegate its authority to the Executive Council to consider, during its July 2022 Session, the endorsement of amendments to the Africa CDC Statute in line with the following directives: a) The Africa CDC shall be an autonomous body of the Union charged with the responsibility of prevention and control of diseases in Africa; b) A new governance structure that allows for strategic leadership and ownership by the Member States at the highest level of Heads of State and Government; c) The Africa CDC Secretariat to be headed by a Director General at a proper grade; and d) The Commission to put in place modalities for full implementation of the updated Africa CDC Statute";
5. **NOTES WITH CONCERN** the slow progress on implementation of the Phase I operationalization of Africa CDC;
6. **REAFFIRMS** its resolve to strengthen Africa CDC, at both the Secretariat and Regional Coordinating Center levels, for effective preparedness and response to disease threats and public health emergencies;
7. **DIRECTS** the Commission to expedite the full implementation of the recommendations of the Phase I operationalization of Africa CDC;

8. **REQUESTS** the Commission to submit the revised Africa CDC organizational structure and a detailed report on the operations of the Africa Epidemics Fund, including financial, legal and structural implications, to the 42<sup>nd</sup> Ordinary Session of the Executive Council through the AU Policy Organs; and
9. **DECIDES** to remain seized on the matter.



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