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PROGRESS REPORT ON THE ESTABLISHMENT OF THE AFRICA CENTRES FOR DISEASE CONTROL AND PREVENTION (AFRICA CDC)

**PROGRESS REPORT ON THE ESTABLISHMENT OF THE AFRICA
CENTRES FOR DISEASE CONTROL AND PREVENTION
(AFRICA CDC)**

A. **Background**

1. The AU Assembly in its Decision **Assembly/AU/Dec. 554(XXIV)** of January 2015 formally endorsed **the establishment of the African CDC** and "*expressed immense satisfaction for efforts made by the Commission to speed up the process for the establishment of the Centre by mid-2015, pursuant to the relevant Executive Council and Assembly decisions*".

2. The relevant Executive and Assembly decisions referred to in Assembly/AU/Dec.554 (XXIV) are:

i) Declaration of the AU Special Summit on HIV, TB and malaria (ATM) in Abuja in July 2013, in which the Heads of States and Government took cognizance of the need for an African Centre for Disease Control and Prevention (African CDC).

ii) AU Assembly Decision **Assembly/AU/Dec.499 (XXII)** of January 2014 that stressed the urgency to establish the African CDC.

iii) The Decision of the 1st African Ministers of Health meeting jointly convened by the African Union Commission (AUC) and World Health Organization (WHO) held in Luanda, Angola, from 16 to 17 April 2014, in which the Ministers committed themselves to the implementation of the AU Assembly Decision **Assembly/AU/Dec.499 (XXII)** of January 2014 and established the Multinational Task Force to define the modalities and work out the roadmap for the establishment of the African CDC.

iv) The 16th Extraordinary Session of the African Union Executive Council meeting on Ebola held on 8 September 2014, the Council requested the Commission to take all the necessary steps for the rapid establishment of the African CDC pursuant to Assembly Decision AU/Dec 499 (XXII) and ensure the functioning of the African CDC by mid-2015

3. The Assembly Decision **Assembly/AU/Dec. 554(XXIV)** of January 2015 also requested the Commission, in close collaboration with the Multinational Taskforce, to consider *the practical modalities for the operationalization of the Centre* and report thereon to the Assembly **in June 2015**. The decision then **authorized the Commission**

to undertake the mobilization of funds from Member States; development partners and the private sector. Finally, the decision requested the STC on Justice and Legal Affairs to consider the statute of the Africa CDC and submit it to the 25th Ordinary Session of the Assembly. This report is submitted in line with the implementation of the Assembly decision **Assembly/AU/Dec. 554(XXIV)** and it covers progress made in the following areas:

    i)   Practical Modalities for the operationalization of the Africa CDC;
    ii)   Resource Mobilization and Sustainable Funding for Africa CDC; and
    iii)   Statute for the Africa CDC

B. Practical Modalities for the Operationalization of the Africa CDC

4. Pursuant to the implementation of decision **Assembly/AU/Dec. 554(XXIV)** the Commission convened the 2nd Meeting of the Multinational Task Force from 14 to 15 April 2015 in Addis Ababa. The main objectives of the Meeting are: to examine the Implementation Plan for the take-off African CDC by mid-2015 and key activities by the end of 2015 and funding for these activities; (b) make inputs into the Draft Statute of the African CDC and the Framework for the operation of the Africa CDC.

The Implementation Plan

5. The Multinational Task Force validated the Implementation Plan for the take-off and functioning of the African CDC by mid-2015. The Implementation Plan provides a comprehensive, 18-month step-by-step plan for the Africa CDC, spanning set-up and initial launch in **July 2015** through the first 18 months of operation. The Implementation Plan is a **62-page** document but the Table below summarizes the key milestones to be accomplished.

Key Implementation Milestones

This table reflects the top activities or milestones needed to execute the Africa CDC implementation plan over the next 18 months.

	#	Activity Name	Completion Date
Pre-launch	1	Submit Fiscal Year 2016 budget for Approval	April 2015
	2	Secure Approval for the Africa CDC working space/offices and be made ready for occupancy	May 2015
	3	Secure Office Space & Equipment	May 2015
	4	Ensure Technology & Communications are in place	June 2015
	5	Secure Provisional Staff for Start Up Phase	June 2015
	6	Establish HR, Accounting, Budgeting processes	July 2015

Post-launch	**7**	Launch Public Health Operations (African CDC Surveillance and Response Unit) i.e. **Formal take-off of the CDC**	July 2015
	8	Establish Transitional Governing Board (TGB)	August 2015
	9	Confirm Advisory Council members	August 2015
	10	Assessment of the Public Health Reporting Systems in Guinea, Sierra Leone & Liberia	September 2015
	11	Convene Meetings of TGB & Advisory Council	September 2015
	12	Designation of five Regional Collaborating Centers	September 2015
	13	Finalize Africa CDC Strategic Plan	October 2015
	14	Complete the recruitment Permanent Regular Staff	Oct 2015-June 2016

Table. **Implementation Milestones**

Inputs into the draft Statue Africa CDC and the Framework for the operation of the Africa CDC

6. The Multinational Task Force members made useful inputs into the draft Statute for the Africa CDC and the Framework for the operation of the Africa CDC to be submitted to the Legal Counsel. The Framework will be annexed to the Statute. The following points were strongly emphasized by the Task Force:

i) The obligations of Member States and their relationship with the Africa CDC should be clearly defined in the statute, particularly as it relates to their reporting obligations and response in the event of disease outbreak or any threat to Public Health;

ii) The Africa CDC should be given adequate power to ensure its effectiveness;

iii) Task Force members and Experts from Member States are invited to make additional inputs into the Statute and the Framework. Hence it should be circulated to all Member States for their inputs.

C.   Resource Mobilization and Sustainable Funding for Africa CDC

7. The Assembly had in its decision **Assembly/AU/Dec. 554(XXIV)** authorized the Commission to undertake the mobilization of funds from Member States; development partners and the private sector. The Commission had approached Member States soliciting their financial support for the Africa CDC. Though, there has been no firm commitment of financial or material support by any Member State, the Commission is optimistic that some Member States will at the appropriate time make financial contributions toward the functioning of the Africa CDC.

8. The Commission has also approached the African Private Sector that supported the Commission financially in the response against the Ebola Virus Disease (EVD) outbreak, and has received firm commitment that the Private Sector considers the Africa CDC as part of the AU's medium to longer-term programme to build Africa's capacity to deal with public health emergencies and threats in the future. Consequently, the Africa CDC will benefit from the Africa Against Ebola Solidarity Trust (AAEST) set up by the Private Sector starting from 2015.

9. Finally, the Commission has approached and received the intent to support the Africa CDC from a number of partners and Foundations including the African Development Bank (AfDB), Bill & Melinda Gates Foundation, Paul Allen Family Foundation, European Union, China and the United States of America. It is in this context that the Commission and the USA signed a Memorandum of Cooperation (MOC) on 13 April 2015. Similar agreement is envisaged with other partners.

10. While considering the Implementation Plan, the Multinational Task Force at its Meeting of 14-15 April 2015 underscored the need for financial predictability and sustainability of the Africa CDC. They cautioned that **resources from Partners are neither predictable nor assured**. The Meeting strongly emphasized that **if the Africa CDC is to be an Africa-owned institution** with sustainable funding, then a significant amount of its operational and programme costs must come from AU Member States. To this end, the Task Force recommended the **creation of an Africa CDC Fund made up of the following contributions**:

    i)   At least 0.5% of the African Union's annual operational budget must be made as contribution to the Fund;

    ii)   Voluntary contributions and donations from Member States;

    iii)   Financial support from the African Private Sector;

    iv)   Financial support from Development Partners,

11. A Terms of Reference (ToR) should be developed for the use of the Fund which should include setting aside a mandatory amount annually for emergency deployment.

D.   Statute for the Africa CDC

12. The Assembly Decision **Assembly/AU/Dec. 554(XXIV)** requested the STC on Justice and Legal Affairs to consider the statute of the Africa CDC and submit it to the 25th Ordinary Session of the Assembly i.e. June 2015. The STC on Justice and Legal

Affairs has postponed its meeting to November 2015, and will not be able to place the Africa CDC Statute before the Assembly for endorsement until the 26th Ordinary Session in January 2016.

13. The postponement of the meeting of the STC on Justice and Legal Affairs to November 2015 is both an opportunity and a challenge. On one hand, it provides more time to improve the Statute and the Framework for the operation of the Africa CDC. On the other, it creates a lacuna for certain critical decisions that need to be undertaken after the take-off of the Africa CDC in mid-2015.

14. Mindful of this, and taking advantage that the Meeting of the Multinational Task Force was taking place on the margins of the first Meeting of the STC on Health Population and Drug Control (STC-HPDC-1), the Task Force sought the guidance of the Ministers at the STC on transitional institutional arrangements and sustaining funding for the Africa CDC.

E.   STC-HPDC-1 – Working Group of Ministers of Health

15. The report of the Meeting of the Multinational Task Force on the Africa CDC was presented to the Ministers at the STC-HPDC-1. Following the presentation, the Ministers decided to refer the report to the **Ministers of Health, as a Working Group of the STC** at their meeting in Geneva in May 2015 on the margins of the World Health Assembly (WHA). The STC requested the Working Group to deliberate on the report with special emphasis on:

    i)   The Transitional Institutional Arrangements. The Commission shall provide alternative scenarios on the establishment of the Transitional Board of the Africa CDC for the consideration of the Ministers;

    ii)   Budget, Funding Sources and Resource Mobilization;

    iii)   Making inputs into the draft Statute and the Framework for the operation of the Africa CDC; and

    iv)   Implementation Plan

Outcomes of the Ministerial Working Group Meeting

16. The Ministers and their Experts met in Geneva on 16, 19 & 20 May 2015 and decided as follows:

i) Needed to have further discussions on the Implementation Plan and the draft Statute of the Africa CDC plus its annex, the Framework of Operations of the African CDC;

ii) To take advantage of the International Conference on Africa's Fight against Ebola scheduled for 20 -21 July 2015 in Malabo, Equatorial Guinea, to meet and take decisions;

iii) The meeting should be organized as follows: Experts' meeting, 17-18 July 2015; and the Minsters on 19 July 2015;

iv) To nominate Focal persons to receive documents from the Commission and to participate at the Experts' meeting in Malabo;

v) Emphasized the need for the Africa CDC to owned by AU Member States. To this and due to the need to secure some budget for 2016 for the Africa CDC, To this end, endorsed the idea to have a seed amount from the AU operational Budget for 2016. Hence, the Ministers requested AUC to include US$ 1 million or 0,5% of the AU operational Budget as proposed by the Multinational Task Force.