



AfricaCDC
Centres for Disease Control
and Prevention

Safeguarding Africa's Health

Realizing Africa CDC's Autonomy

Making Measurable Impact in
Africa's Health Security



2023
Annual Report



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Africa CDC is a continental autonomous health agency of the African Union established to support public health initiatives of Member States and strengthen the capacity of their public health institutions to detect, prevent, control and respond quickly and effectively to disease threats.

Safeguarding Africa's Health

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Message from the Director General

I am delighted to present the **Africa Centres for Disease Control and Prevention (Africa CDC) Annual Report 2023**, encapsulating the efforts undertaken by Africa CDC over the past year – our second year of autonomy. This period was marked by significant health challenges for the continent, including prolonged Cholera outbreaks in Southern Africa, 2022-2023 Ebola Virus outbreak in Uganda, Marburg virus disease outbreaks in Equatorial Guinea and Tanzania, natural disasters, and the ongoing COVID-19 pandemic.

The achievements detailed in this Annual Report are attributed to the dedication and bravery of our 361 staff, as well as the robust partnerships and unprecedented support from our donors. We also commend the strong leadership demonstrated by Africa Union Heads of State and Government, committed Ministers of Health, and other national stakeholders. In 2023, notable governance milestones were reached, including the establishment, and convening of meetings for the new Advisory and Technical Council, as well as the constitution of the new Governing Board for Africa CDC.

Key strategic advancements in 2023 included the approval of the 2023 – 2027 Strategic Plan for Africa CDC by the Governing Board. Additionally, there was a strategic realignment of the Saving Lives and Livelihoods initiative, a partnership of \$1.5 billion between Africa CDC and Mastercard Foundation, to prioritize the vaccination of high-risk populations, integrate COVID-19 response into routine immunization and primary health care, and proactively prepare for potential future pandemics on the continent. The approval of the African Vaccine Manufacturing Accelerator (AVMA) and the implementation of PAVM's strategic priorities also took precedence, focusing on vaccine manufacturing and supply chain capabilities in Africa. The 3rd Conference on Public Health in Africa (CPHIA 2023) was hosted in Lusaka, Zambia demonstrating the power of a united Africa to break barriers in global health.

As we execute our Africa CDC 2023 – 2027 Strategic Plan, we will concentrate on ensuring that Africa

KEY STRATEGIC ADVANCEMENTS IN 2023:

- approval of the 2023–2027 Strategic Plan
- strategic realignment of the Saving Lives and Livelihoods initiative
- approval of the African Vaccine Manufacturing Accelerator (AVMA) and the implementation of PAVM's strategic priorities



H.E. Dr. Jean Kaseya,
MD, MPH

CDC is adequately equipped and staffed with the necessary technical expertise to fulfill its mandate at continental, regional, and country levels. We have established internal mechanisms to empower our staff, provide training and career growth opportunities, and offer essential support. Furthermore, we are committed to maintaining a robust governance and accountability framework, promoting efficient financial management, accountability, and transparency, alongside the Africa CDC financial sustainability plan to secure sufficient, predictable, and sustainable funding.

While there are still considerable challenges ahead in recovering from pandemic-related disruptions to health service delivery and access, these, are opportunities to integrate innovative approaches adopted to sustain services during the pandemic into future strategies.

I extend an invitation to all our national, regional, and global partners to join us in realizing this strategic vision and building “The Africa We Want”. I express gratitude to our Member States and partners for their unwavering support for the 2030 global health sector strategies, which I believe provide a solid foundation for recovery from setbacks and better preparation for future health shocks.

The achievements detailed in this Annual Report are attributed to the dedication and bravery of our 361 staff, as well as the robust partnerships and unprecedented support from our donors.



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Abbreviations

AES	African Epidemic Services
Africa CDC	Africa Centres for Disease Control and Prevention
AU	African Union
CoE	Centre of Excellence
COVID-19	Coronavirus Disease 2019
CPHIA	Conference on Public Health in Africa
DHIS2	District Health Information System version 2
FETP	Field Epidemiology Training Program
HAIs	Healthcare-Associated Infections
HMIS	Health Management Information System
ICT	Information Communication Technology
IMPACT	Integrated Management Platform for Africa CDC's Training
IPC	Infection Prevention and Control
M&E	Monitoring and Evaluation
MHPSS	Mental health and psychosocial support
MoH	Ministry of Health
MS	Member State (AU)
NCD	Non-Communicable Disease
NCDIMH	NCDs, Injuries and Mental Health
NGO	Non-Governmental Organization
NGS	Next Generation Sequencing
NPHI	National Public Health Institute
NTD	Neglected Tropical Disease
PHEOC	Public Health Emergency Operations Centre
PHI	Public Health Informatics
PHIR	Public Health Institutes and Research
PPPR	Pandemic Prevention Preparedness and Response
SLL	Saving Lives and Livelihoods
SMART	Specific, Measurable, Achievable, Relevant, Time-bound
SOP	Standard Operating Procedures
TOC	Theory of Change
TOR	Terms of Reference
UNICEF	United Nations Children's Fund
USAID	United States Aid for International Development
WHO	World Health Organization



Assembly of Heads of State and Government 2022, Addis Ababa

Executive Summary

In 2022, the Assembly of Heads of State and Government elevated the Africa Centres for Disease Control and Prevention (Africa CDC) to an autonomous health agency of the Africa Union. This expanded mandate has empowered the Africa CDC to better respond to public health threats across the continent and simultaneously work towards building resilient health systems. Africa CDC aspires to a safer, healthier, and prosperous Africa, in which Member States are prepared to timely prevent, detect, and respond effectively to public health threats and outbreaks.

This annual report highlights the Africa CDC's unwavering commitment to safeguarding the health of its 55 Member States. It highlights critical achievements across six strategic priorities, as well as some shortcomings and ongoing challenges. Despite the complex environment, and many competing health priorities, Africa CDC rose to the occasion, delivering strategic and impactful health interventions for the continent.

Africa CDC's aim is to provide strategic guidance and support Member States through a well-coordinated decentralized model in which the five strategically located Regional Coordinating Centres (RCC) serve as the central hub for surveillance, preparedness, and emergency response. Six pillars support and guide Africa CDC's vision: Disease Control and Prevention (DCP), Surveillance and Disease Intelligence (SDI), Emergency Preparedness and Response, National Public Health Institutions (NPHIs), Laboratory Systems and Networks, and Product and Technology Innovation and Manufacturing.

Africa CDC, in its onward journey, is guided by and is advocating for the New Public Health Order, urging for a fundamental shift towards an equitable, strong, and resilient health system in Africa. Africa CDC is

playing a leading role in responding to current health emergencies and preparing for future public health challenges to advance continental and global health security through strong local leadership grown innovation, and investment in public health infrastructure and systems.

In 2023, the African continent faced increased disease outbreaks, with more than 185 public health events detected by the Africa CDC surveillance system. Notably, the continent faced severe and protracted multi-country cholera outbreaks in Southern Africa; Marburg virus disease outbreak in Equatorial Guinea and Tanzania; natural disasters, and the ongoing COVID-19 pandemic. Amidst these challenges, Africa CDC emerged as a beacon of hope, playing a critical role in immediate in-country support to Member States, strengthening continental health security, saving lives and livelihoods. In 2023, the Africa CDC expanded its response and support to Member States to strengthen public health institutions, surveillance systems, outbreak detection and sequencing, emergency response, and health systems. Africa CDC distributed vaccines and commodities, valued at more than \$37 million to 33 Member States; supported critical laboratory equipment to 30 Member States; distrib-



H.E. Moussa Faki Mahamat, Chairperson, Africa Union Commission and China Foreign Affairs Minister H.E. Qin Gang at the Inauguration of the new Offices of the Africa Centres for Disease Control and Prevention (Africa CDC) in Addis Ababa.

uting 113.89 tons of aid to 28 AU Member States with critical supplies such as oxygen concentrators, Infection Prevention and Control (IPC) items in response to outbreaks; established PHEOCs in 2 RCCs and 2 Member States; and trained more than 2800 experts in disease surveillance; laboratory detection, biosafety and biosecurity, leadership, and emergency response.

In partnership with Member States, key partners, and various stakeholders, the institution achieved significant milestones.

During the past year, 35 million doses of COVID-19 vaccines were administered as part of the Saving Lives and Livelihoods (SLL) programme across the continent, thus contributing to the overall increase in the COVID-19 vaccine coverage from 3% in 2022 to 53% in 2023. However, a pause directive, which took effect in July 2023 temporarily stopped implementation activities in Member States. The 8-week pause was necessitated by WHO declassifying of COVID-19 from a Public Health Emergency of International Concerns (PHEIC) to a Public Health threat. To shift the strategy to focus on vulnerable groups and other needs on the continent it became necessary to conduct an audit of implementing partners. This pause resulted in near expiry of most COVID-19 vaccines that had been procured for Africa. Acknowledging this set back, Phase 2 of SLL in partnership with Mastercard Foundation was officially launched in November 2023 aiming to target the vulnerable population (the elderly, those with comorbidities and frontline health care workers) with COVID-19 vaccines, integrating COVID-19 into the Expanded Program Program on Immunization (EPI), preparing the continent for the next pandemic (genomic sequencing, PAVM, NPHIs) and strengthening Africa CDC.

In 2023, Africa CDC continued to support Member States to strengthen laboratory systems and networks by building capacities including for pathogen genomics, workforce development, as well as developing guidance and policies. Africa CDC has also im-

plemented initiatives to strengthen health systems including the continued support to Member States to establish and operationalize National Public Health Institutes, strengthening of community health systems, strategies and taskforces for NCDs, injuries, mental health, and endemic diseases such as HIV/AIDS, tuberculosis, malaria, and viral hepatitis fostering collaboration across Africa CDC departments and partners. The Africa CDC Partnership for Vaccine manufacturing (PAVM) continued in 2023 to advocate for local manufacturing to address the needs of Member States. Africa CDC is working to develop an African Pooled Procurement Mechanism for health products manufactured in Africa, ensuring sustainability of the vaccine manufacturing ecosystem in Africa.

The Ministerial Executive Leadership Programme (MELP) is a flagship initiative officially launched during the 36th Ordinary session of the African Union Assembly of Heads of State and Government in February 2023, convening seven (7) Heads of States through their solidarity statements, and forty-five (45) Health Ministers under the theme 'Political Strategy and transformative leadership in the new Public Health Order'.

In November 2023 Africa CDC successfully held the third international Conference on Public Health in Africa (CPHIA 2023) in-person, in Lusaka, Zambia under the theme 'Breaking Barriers: Repositioning Africa in the Global Health Architecture'. This African-led scientific convening brought the global health community to Africa, with over 5,000 in-person and 30,000 virtual live stream attendees, spotlighting science and solutions from Africa, fostering collaboration and respectful partnerships that collectively reposition Africa, setting us on a positive trajectory to collectively set Africa's health agenda.

Introduction

The Africa CDC is the continent’s public health institution, mandated to protect its people from diseases, prevent and respond to health threats, and promote well-being. The Africa CDC was established in January 2015 at the 24th Ordinary Assembly of Heads of State and Government as a specialized technical agency of the African Union and was then officially launched in January 2017. Aligned with the Africa Union’s Agenda 2063, it aims to provide strategic guidance and support to Member States through six pillars, to which its Regional Coordinating Centres (RCC) serve as the central hubs for surveillance, preparedness, emergency response and public health interventions, closer to Member States.

Africa CDC was elevated to an autonomous health agency of the Africa Union during the 35th Ordinary Assembly of Heads of State and Government in February 2022, granting it the agility and required flexibility to respond effectively and efficiently to public health threats.



The population in Africa is projected to almost double to reach 2.5 billion by 2050 and will account for more than 60% of the projected global population growth over the same period.¹ Furthermore, 40% of Africa’s population is under 15 years of age, while the population of those above 65 years has grown from 3% in 2006 to 4% in 2017.² Africa still has the lowest life expectancy and the highest mortality rates for women, children, and newborns compared to all other regions in the world. This is coupled with the current epidemiological transition in Africa, characterized by a shift from disease-burden profiles dominated by infectious diseases to profiles featuring an increasing predominance of non-communicable diseases (NCDs); as well as the growing impacts of climate change on health. The expansion of health systems infrastructure and services, and the machinery to adequately prepare, prevent, and respond to health threats, will be more and more critical to cater to the needs of Africa’s population in the future.

1 Population Reference Bureau. African Overview. Africa – Population Reference Bureau (prb.org). Last accessed 17 August 2021.

2 Second Session of the Specialised Technical Committee on Health, Population and Drug Control, Addis Ababa, Ethiopia 20-24 March 2017, state of Africa’s population 2017.

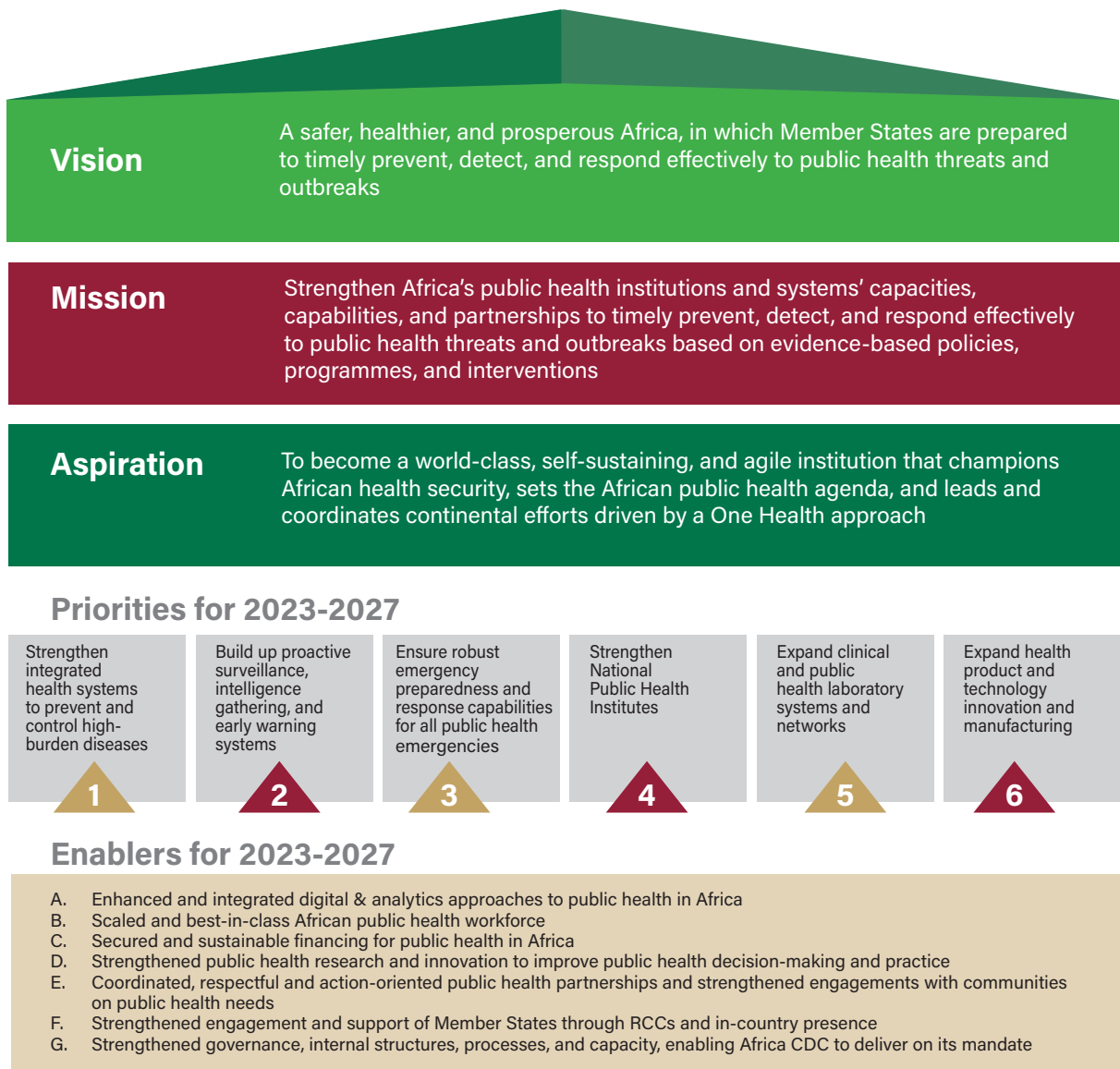


Figure 1. Africa CDC Strategic Plan (2023-2027) with priorities and enablers

Africa CDC has spearheaded the establishment of National Public Health Institutes (NPHIs) as vehicles for national health security at country level. NPHIs are mandated to ensure population wellbeing and national health security by establishing and maintaining robust public health surveillance and disease intelligence systems; timely detection and reporting systems through fully operational Public Health Emergency Operations Centres (PHEOCs); and respond with evidence-based prevention and mitigation measures.

In 2023, Africa CDC developed and published its second strategic plan (2023-2027) that outlines six programmatic priorities and seven cross-cutting enablers to achieve the organization's vision and

goals (Figure 1). The strategic plan was carefully designed to address the complex public health challenges at a local, regional and global levels.

It is against this backdrop that we present the work for Africa CDC for the year 2023. This report covers the collective achievements made together with Member States, highlighting the key successes, challenges, lessons learned, and offers insights into the strategic focus for 2024.



Launch of African Epidemic Services (AES) on the margins of CPHIA 2023, in line with the New Public Health Order for Africa AES is a collaborative effort to strengthen prevention and response, enhance laboratory leadership, and strengthen health informatics across the continent.

Africa CDC in 2023: Key Achievements

In 2023, the Africa CDC made significant strides in implementing its programmatic priorities and institutional reforms in line with its 2023-2027 strategic plan under its new autonomous status.

A world class and fit-for-purpose Africa CDC: In 2023, Africa CDC continued the implementation of its operational autonomy with a new organizational structure and strategic plan. Africa CDC attracted and retained talent with a 54% increase in its staff to a total of 361 employees based at the secretariat, and Regional Collaborating Centres (RCCs). Africa CDC continues to improve its operational efficiency; as of December 2023, the overall budget execution rate of 90% was achieved for the first time since its launch in 2017.

Responding to disease outbreaks: Africa CDC's surveillance system detected and monitored 185 public health events during the reporting period. The majority (81%) of these events were reported in humans, and reported from the western Africa region, and 53 (29%) were evaluated to be high risk events. In addition to the ongoing COVID-19 pandemic, the African continent faced an extended, multi-country, and severe cholera outbreak; Marburg virus disease outbreak in Tanzania and Equatorial Guinea; multi-country diphtheria outbreak; the Ebola virus disease in Uganda; natural disasters such as the flood in Libya had challenged public health systems in Member States.

In 2023, the Africa CDC expanded its response and support to Member States to strengthen public health institutions, surveillance systems, outbreak detection and sequencing, emergency response, and health systems. Africa CDC distributed vac-

cines and commodities valued at more than \$37 million to 33 Member States; supported critical laboratory equipment to 30 Member States; distributing 113.89 tons of aid to 28 AU Member States with critical supplies such as oxygen concentrators, Infection Prevention and Control (IPC) items in response to outbreaks; established PHEOCs in 2 RCCs and 2 Member States; and trained more than 2800 experts in disease surveillance; laboratory detection, biosafety and biosecurity, leadership, and emergency response.

Strengthening NPHIs and Health Systems: In 2023, the Africa CDC focused on various initiatives and partnerships to strengthen public health institutions and health systems in Member States. The Africa CDC supported the establishment of 6 NPHIs and peer-to-peer exchange among 19 NPHIs. To successfully build back better and stronger from the current COVID-19 pandemic, the Africa CDC developed and launched the **African Epidemic Service (AES)**, a continental training program with three major tracks: epidemiology, laboratory, and health informatics. To this end, in the last reporting period, Africa CDC continued to expand workforce development programs to address critical gaps in Member States this includes the Kofi Annan Global Health Leadership program, African epidemiological and statistical capacity building programs and others. Furthermore, Africa CDC developed IMPACT (Integrated Management Platform for Africa CDC's Training), a resilient

learning Management System (LMS) and various eLearning courses to strengthen capacity building for health professionals and institutions across the African continent. Research and ethical framework development have been facilitated, contributing to the execution of research projects and drafting ethical frameworks.

Africa CDC implemented initiatives to strengthen health systems. This includes strengthening of community health systems, strategies and taskforces for non-communicable diseases (NCDs), Injuries, mental health, and endemic diseases such as HIV/AIDS, tuberculosis, malaria, and viral hepatitis, fostering collaboration across Africa CDC departments and partners. Evidence-based strategies for combating these health challenges and extensive training programs for healthcare workers underscore a commitment to proactive healthcare measures. Advocacy and awareness initiatives have been deployed to reduce stigma and raise awareness, particularly among youth, through on-line suicide prevention campaigns.

Strengthening and expanding laboratory systems: In 2023, Africa CDC continued to support Member States to strengthen laboratory systems and networks by building capacities, workforce development, developing guidance and policies. Africa CDC established the **Africa Biobanking Network**, fostering collaboration and supporting advancements in diagnostic evaluation, research and development, and local manufacturing. Africa CDC had also established the continental **Diagnostics Advisory Committee (DAC)**, in collaboration with Member States, the Africa Union Development Agency (AUDA-NEPAD) and the Africa Medicines Agency (AMA). The DAC will be critical in streamlining regulatory pathway for diagnostics in Africa. Africa CDC made significant progress in the implementation of biosafety and biosecurity measures by supporting the development of capacity, workforce development, establishing Centres of Excellences and supporting Member States to develop legal framework. In 2023, the Africa CDC supported 30 Member States in strengthening genomics and bioinformatics capacity. This effort led to 41 Member States developing local sequencing capacity. Furthermore, over 500 experts were



trained in various laboratory areas to develop a workforce that can deliver at speed, quality and scale.

Ministerial Executive Leadership Programme (MELP): The MELP is a flagship initiative officially launched during the 36th Ordinary session of the African Union Assembly of Heads of State and Government in February 2023. MELP's core mission is to enhance the leadership capabilities of Health Ministers, both on the continental and global scales, with the overarching aim of catalysing transformation in the public health landscape of African Union (AU) Member States. This mission is intricately interwoven with the broader aspiration of realising Agenda 2063: The Africa We Want and ensuring the health security of the African continent.

In delivering on the objectives of the MELP, the Africa CDC successfully convened two major events: The Ministerial high-level forum (February 2023) and The Ministerial Retreat (November 2023). Both events have convened Heads of States, Health Ministers and other

global health experts with the aim of strengthening the execution capacity of Ministers to enable them to spearhead cross-functional initiatives that will drive breakthrough in health through the New Public Health Order.

Conference on Public Health in Africa (CPHIA 2023): The 3rd International Conference on Public Health in Africa (CPHIA) held in Lusaka, Zambia, in November 2023, achieved remarkable success, drawing over 5000 in-person attendees and engaging an additional 30,000 participants through virtual livestreaming. The conference provided a platform to showcase wins from collaborative efforts and partnerships that have been critical for Africa's public health.

A major success to Africa CDC, CPHIA is now recognized amongst the key global health convenings published by the UN agencies annually – Global Health Timeline 2024.



NATIONAL PUBLIC HEALTH IN AFRICA



5

Progress made in the implementation of programmatic priorities

The Africa CDC continued to accelerate the implementation of its programmes and activities across all 55 Member States, guided by the six programmatic priorities outlined in its five-year strategic plan (2023-2027). This section highlights key results, challenges, and priority actions for the coming year.

Priority 1: Strengthen integrated health systems to prevent and control high-burden diseases

In Africa, infectious diseases such as malaria, tuberculosis, viral hepatitis, and HIV remain the major causes of morbidity and mortality. However, the continent is undergoing a rapid epidemiological transition with an increasing burden of non-communicable diseases (NCDs). In 2023, the Africa CDC implemented programs targeted to support health systems strengthening in Member States. These included strengthening of community health systems, training healthcare workers, launching disease surveillance initiatives, developing evidence-based strategies to combat NCDs, mental health and injuries, endemic diseases (HIV/AIDS, tuberculosis, malaria, and viral hepatitis), and neglected tropical diseases (NTDs).

Non-communicable diseases (NCDs), Injuries and Mental Health:

The Africa CDC strategy on NCDs, injuries, and mental health has been an important tool to mobilize resources to support Member States in this area guided by our priorities and the new public health order. In 2023, more than \$10 million have been

mobilized to advance the implementation of the strategy.

In 2023, Africa CDC launched a Taskforce for NCDs, Injuries and Mental Health (NC-DIMH) to coordinate multisectoral action with the African Union (AU) departments, organs, and institutions, as well as Regional Economic Communities (RECs), and other partners.

To strengthen surveillance systems for NCDs, injuries, and mental health, **continental guidance has been launched**. The guidance provides a set of recommendations to Member States in four important components of NCDs, Injuries and Mental Health surveillance

In 2023, Africa CDC conducted two high-level capacity-building seminars in Tanzania and Morocco, bringing together NCDs, mental health and NPHI directors from 46 Member States to discuss challenges and opportunities in the implementation of evidence-based NCDs, injuries, and mental health programs in Member States. A continental network of NCD Leads and experts has been established to advance Member States peer review, peer-learning and peer and peer support in preventing and controlling NCDs, Injuries and Mental health.





In the reporting period, the Africa CDC assisted five (5) Member States in reviewing and implementing mental health legislation; conducted training programs for mental health personnel, including workshops on Mental Health and Psychosocial Support (MHPSS) interventions during public health emergencies.

During 2023, the Africa CDC effectively incorporated MHPSS into Emergency Preparedness (EPR) in Western, Central, and Eastern Africa. Eighty Mental Health Leads and Emergency Officers were trained in utilizing MHPSS during emergencies and its integration into EPR. In addition, it developed the African Volunteers Health Corps' (AVoHC) capacity for MHPSS and successfully deployed experts to assist in emergencies, such as the aftermath of the storm in Libya. Additionally, Africa CDC facilitated collaborative learning between countries to foster regional collaboration, identified lessons learned from past emergencies, sharing best practices, and conducted regional advocacy initiatives to ensure that national incident management plans and structures routinely included MHPSS, as exemplified by the Presidential Taskforce on Mental Health in Sierra Leone. Furthermore, the Africa CDC initiated online suicide prevention campaigns targeting youth with a focus on addressing causes, increasing workplace awareness, and providing supportive services for mental health.

Strengthening Community Health Systems: In 2023, Africa CDC supported the development of the [Monrovia Call to Action](#), which aimed to fund, scale, and strengthen community health programs as an integral part of the health system. Africa CDC developed strategies to integrate community health programs, evaluated existing initiatives, and identified strengths and lessons to ensure financial sustainability. Furthermore, Africa CDC supported the development of community health strategies and investment cases in 32 Member States and promoted experience sharing and sustainable financing. Additionally, the Africa CDC supported the deployment of 3,000 CHWs for Ebola and 1,150 for cholera responses in Uganda and Malawi respectively.

Africa CDC Established a continental coordination mechanism for community health system to promote a coordinated and collaborative approach to strengthening community health in Africa. The continental coordination mechanism will ensure a coherent and inclusive participatory approach to coordinating the Community Health Systems among African Union Member states in order to more efficiently achieve the call by African Heads of

The Africa CDC strategy on NCDs, injuries, and mental health has been an important tool to mobilize resources to support Member States in this area guided by our priorities and the new public health order



States to have 2 million more CHWs on the continent

In the reporting period, Africa CDC advocated for partnerships to accelerate investment in community health workforce programs in Africa. Partners such as the Global Fund (to Fight AIDS, Tuberculosis and Malaria), Africa Frontline First, the Children’s Investment Fund Foundation (CIFF), the Johnson & Johnson Foundation, the Susan Thompson Buffet Foundation, the Mastercard Foundation, the Skoll Foundation, the Rockefeller Foundation, PEP-FAR, the U.S. President’s Malaria Initiative (PMI), USAID, and UNICEF, have renewed and strengthened their collective commitment to boost support for community health workers.

Reproductive Health: The Africa CDC officially launched its [Reproductive Health Strategy 2022-2026](#) to improve maternal and reproductive health in Africa and contribute to reducing maternal mortality within the AU Member States. The strategy was validated by AU MS and partner organizations. The strategic priorities focus on supporting Member States that are lagging

Africa CDC supported the deployment of 3,000 CHWs for Ebola and 1,150 for cholera responses in Uganda and Malawi respectively.

on sexual and reproductive health by facilitating accelerated action leveraging political support to overcome the challenges. As part of implementing the strategy, Africa CDC trained 30 Health care workers from 25 African Union Member states with highest recorded Maternal Mortality Ratio on Emergency Obstetric and New born care management.

Infection prevention and control (IPC): During 2023, Africa CDC supported six (6) Member States (Saharawi Republic, Zambia, Liberia, DRC, Kenya, Tanzania) with financial and technical support to strengthen national infection prevention and control (IPC) programs. The MS have made significant progress in developing IPC plans, conducting needs assessments and implementing necessary IPC interventions. Furthermore, Africa CDC developed a robust [IPC legal framework](#), currently [domesticated in 4 MS](#), in addition to capacity-building sessions for healthcare professionals, and development standardized assessment tools for primary healthcare facilities. Africa CDC convened expert meetings to define healthcare associated infections (HAI) surveillance protocols, supported countries during outbreaks, and reshaped the IPC landscape through [evidence-based strategies](#).

RISLNET: The Regional Integrated Surveillance and Laboratory Networks (RISLNET) encompassing East and Southern Africa were effectively established with regional workshops conducted. Comprehensive framework and implementation documents were formulated for their regions to support these networks.

Prevention and control of endemic and NTDs In 2023, Africa CDC trained 21 decision-makers from three (3) AU MS using an experiential multisectoral approach for viral hepatitis C prevention and control and supported **Hepatitis B in Africa Collaborative Network (HEPSANET)** in the development of continental guidelines for hepatitis B management by training 24 experts from 10 Member States on Good Clinical Practices for longitudinal data collection. Africa CDC also promoted awareness of the **African Union Continental Framework for the Elimination of NTDs by 2030** and the **Common African Position on NTDs** for 50 representatives from 24 AU Member States. Africa CDC also collaborated with GAVI on the Malaria Vaccine Allocation Framework, prioritizing 12 AU Member States for the limited supply of the RTS/SA01 vaccine. Within the ongoing Malaria Vaccine Allocation Framework Implementation Group, Africa CDC also continues to aid decision-making on allocating the new R21/Matrix-M to AU Member States.

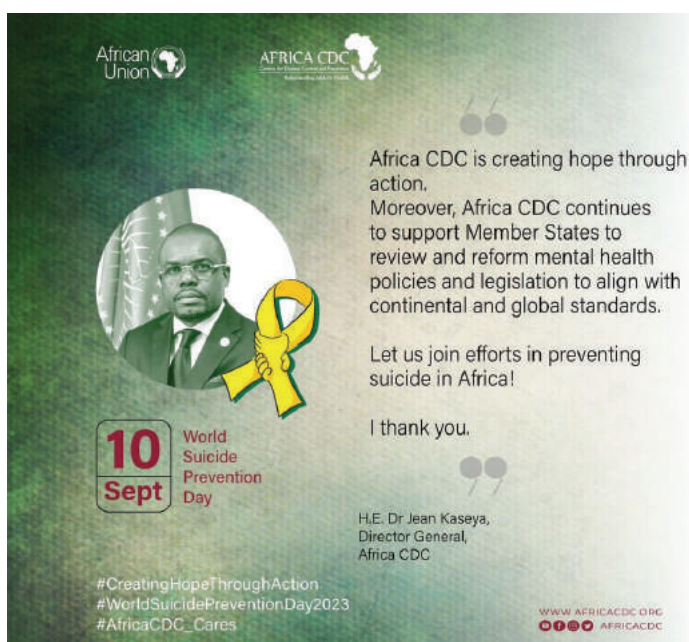
In Africa, infectious diseases such as malaria, tuberculosis, and HIV remain the major causes of morbidity and mortality. However, the continent is undergoing a rapid epidemiological transition with an

increasing burden of non-communicable diseases (NCDs). In 2023, the Africa CDC implemented programs targeted to support health systems strengthening in Member States. These included strengthening of community health systems, training healthcare workers, launching disease surveillance initiatives, developing evidence-based strategies to combat NCDs, mental health and injuries, endemic diseases (HIV/AIDS, tuberculosis, malaria, and viral hepatitis), and neglected tropical diseases (NTDs).

Priority 2: Build up proactive surveillance, intelligence gathering, and early warning systems

The Surveillance and Disease Intelligence Division is one of the Africa CDC’s strategic pillars to strengthen public health surveillance systems for improved public health decision-making and action. It is structured into five units: **Epidemic Intelligence (EI)**, **One Health (OH)**, **Health Informatics (HI)**, **Epidemiology & Biostatistics (EB)**, and **Surveillance Units (SU)**.

Event-based Surveillance (EBS): Africa CDC, the World Health Organization (WHO) and the Robert Koch Institute (RKI), launched a **Health Security Partnership to Strengthen Disease Surveillance and Epidemic Intelligence** in 6 AU Member States in Africa (The Gambia, Mali, Morocco, Namibia, Tunisia, and South Africa). Event-based Surveillance also supported eight (8) AU MS (Egypt, Eswatini, Liberia, Lesotho, Madagascar, Mali, Namibia and Si-



Africa CDC effectively incorporated Mental Health and Psychosocial Support (MHPSS) into Emergency Preparedness (EPR) in Western, Central, and Eastern Africa

erra Leone) to adapt the revised EBS framework to serve the animal, environmental and human sectors in detecting and reporting public health threats promptly.



Figure 2. African Union Member States that were supported to adapt the Africa CDC revised EBS Framework in 2023

Event-based Surveillance trained 820 Surveillance Officers in 12 AU MS on the Africa CDC EBS modules using a multisectoral, One Health approach (Botswana, Cape Verde, Egypt, Eswatini, Gabon, Liberia, Mali, Namibia, Sierra Leone, Tunisia, Zambia and Zimbabwe). Africa CDC supported six (6) AU MS (Egypt, Liberia, Madagascar, Mali, Namibia and Sierra Leone) to establish technical working groups to coordinate of implementation of EBS. It also conducted a continent-wide evaluation of the capacity of EBS in 49 AU MS to guide the allocation of resources for effectively implementing EBS on the continent. Of the 49 MS evaluated through the EBS scorecard, none had optimal capacity for EBS. Only 34 MS (69,38%) stated having EBS in place, and 17 MS reported multisectoral, One Health collaboration as part of EBS implementation.

Africa CDC also established a continental EBS Partners Coordination Forum, to share the findings of the EBS capacity assessment and define a framework for building capacity for Member States. Thirty (30) partners and donor agencies were trained in how to deploy the Africa CDC EBS resources to ensure efforts on the continent are well coordinated.

Detection of public health events on the continent through the EMS in 2023

The EBS team detected and monitored 166 public health events on the continent this year, with 52 weekly reports on public health events in Africa disseminated widely. The majority (81%) of these events were reported in humans, and reported from the western Africa region, and 53 (29%) were evaluated to be high risk events. All these events were captured in the event management system and are summarized below in Table 1.

Table 1. Public health events captured in the EMS by AU region in 2023

Region	Human	Human and non-human	Non-human
Central	28		
Eastern	33	1	2
Northern	9		1
Southern	24	1	3
Western	56		8
Total	150	2	14

Table 2. Notable disease outbreaks recorded in 2023

SN	Disease event	Number of cases	Number of deaths
1	Anthrax	1,336	14
2	COVID-19	12,368,752	257605
3	Cholera	238,582	3,767
4	Ebola	26	18
5	Dengue fever	280,411	808
6	Diphtheria	26,765	770
7	Marburg	48	37
8	Measles	375,908	5,446
9	Mpox	14,941	738
10	Yellow fever	2,945	45
11	Lassa fever	10,557	277

Communication products: The Epidemic Intelligence unit produced several communication products to share information about the status of public health threats on the continent. These communication products include outbreak briefs, spot reports, and weekly EI reports, and outbreak briefs. In 2023, the EI unit produced a total of **88 outbreak briefs** on six (6) events on the continent. These briefs were produced based on the epidemic potential and likelihood of spread to other AU Member States.

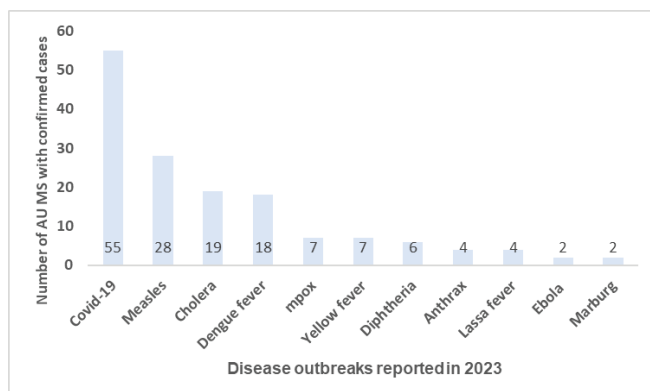


Figure 3. Notable disease outbreaks reported in 2023 and number of AU MS that reported confirmed cases.

Table 3. Number of events and weekly briefs produced in 2023.

No	Event	Number of Briefs	Risk level	Geo Scope
1	Mpox	21	Very high	Very high
2	Sudan Ebola Virus Uganda	11	Very high	Low
3	Ebola DRC	2	High	Low
4	Wild Poliovirus in Malawi	1	Very high	Low
5	Wild Poliovirus in Mozambique	3	Very high	Low
6	COVID-19	50	Very high	Very high
Total	6	88		

Weekly reports: A total of **52 Africa CDC EI weekly reports** highlighting the events detected and monitored weekly on the continent were produced and hosted on the Africa CDC website.



Figure 4. Different outbreaks reported across the continent in 2023

Mortality surveillance programme: The mortality surveillance program aims to strengthen routine all-cause mortality surveillance for improved availability of timely and reliable mortality data/information for epidemic preparedness and response and ultimately contribute to better health outcomes through evidence based interventions.

Key achievements

Published the Continental Framework (CF) for Strengthening Mortality Surveillance Systems in Africa; <https://shorturl.at/AH159>

- 45 Member States supported with development of initial drafts of their country specific strategic plans for mortality surveillance.
- Conducted **regional advocacy & technical meetings to orient participants from Member States on the Continental Framework** in all the five AU regions. Over 170 participants from 46 Member States and collaborating partners and RECs participated and oriented.
- Launched the mortality surveillance e-learning course and enrolled the first cohort of 50 learners who are currently undertaking training.
- 7 Member States (Cameroon, Djibouti, Uganda, DR Congo, Egypt, Gabon and Burkina Faso) supported with national level stakeholder meetings to advocate for mortality surveillance as part of their national level planning processes for strengthening mortality data.
- Established the continental community of practice (COP) for mortality surveillance; which together the public health practitioners and experts for a continuous learning experience. Over 200 members enrolled, and 2 events hosted on the platform. <https://shorturl.at/ijrz6>
- Disseminated the country reports from the mortality surveillance readiness survey which was con-

Experiential learning exchange training and Demonstration of Digitalization systems for Birth, deaths, and the medical certifications of causes of Deaths in November 2023, Egypt





Activity for the development of the national mortality surveillance framework and adaptation of the continental framework for mortality surveillance in DRC, December 2023

- ducted in 33 AU Member States
- Conducted stillbirth survey data recording, collection, and use in 30 MS.
- Conducted the mortality surveillance training of trainers (ToT) for north Africa, the TOT provided Member States with knowledge and technical skills to effectively implement mortality surveillance and establish an African roster of experts for mortality surveillance. It involved a field experiential to provide the participants a practical field experience and bench marked with Egypt's digitized system for monitoring births and deaths. <https://shorturl.at/gHLV0>
- Developed the mortality surveillance operational guide, to provide necessary guidance, tools and resources for implementation of the continental framework recommendations at country level.

Cross Border Surveillance Programme: aims at strengthening cross-border surveillance, coordination, collaboration, and timely information sharing among AU member states.

- Developed the Continental Strategy for Strengthening Cross border Surveillance Coordination and timely information sharing in Africa through a consultative process with AU Member States and partners
- Established the core technical working group to support the development of the continental strategy for cross-border surveillance. The first core group meeting was held [in Kigali, Rwanda 12-15 December 2023 to review and refine the draft.](#)
- Supported training of 100 Community health workers, 50 health facility workers and 15 dis-

- strict rapid response teams from refugee communities and POE staff in Uganda to enhance capacity for cross border surveillance for Ebola virus disease and other priority events.
- Trained 50 PoE Staff from all the points of Entry in Uganda on Enhanced Surveillance for Viral Hemorrhagic Fevers.
- Supported training of 150 beach managers and other PoE staff on cross border surveillance for Marburg virus disease in Tanzania
- Supported development of Cross-border surveillance Joint Action Plan for Cholera response in Mozambique and Malawi
- Conducted stakeholder mapping for key players in Cross border Surveillance activities in Africa. An updated database is in place.
- Conducted 4 Regional technical workshops on cross border surveillance and enhanced information sharing at Points of Entry (PoEs)

Epidemic Intelligence Networks: In alignment with Africa CDC's vision to advance the health security agenda for the continent, [a continental EBS community of practice](#) was launched this year, bringing together over 80 focal points from MS, partner organizations and regional economic communities. The aim of this community is to discuss public health threats plaguing the continent and best practice of early detection, reporting and response.

Epidemic Intelligence Networks supported the Africa CDC in establishing regional EBS communities in the Western and Southern regions to promptly share information on regional public health risks before they spread. This will contrib-



ute to curbing the cross-border spread of disease. Cumulatively, **4 functional regional communities** were established through which over 200 events have been shared across the different networks.

- Epidemic Intelligence Networks also supported two regional workshops (Western and Southern) that were held this year aimed at strengthening EBS regional communities to detect swiftly, share information and respond to diseases in real-time. Through these workshops, a road map for strengthening regional early warning systems was developed for both regions.
- Africa CDC, through the Integrated Disease Surveillance Unit, established continental coordination groups for cholera and polio for information exchange. Further, Africa CDC held a continental polio stakeholders' workshop in the Democratic Republic of Congo (DRC) in October 2023, to validate polio indicators and data elements for a continental polio dashboard.
- Through the Integrated Disease Surveillance unit, Africa CDC successfully established two regional polio networks to enhance the sharing of best practices and information exchange, conducted continental assessment on polio surveillance, and used findings to develop a draft policy brief for polio.
- With support from the Member States Event Management System Unit, the Africa CDC in three Member States (Eswatini, Lesotho, and Rwanda) supported the development and customization of the event management systems. At least 150 district officers have been trained on the utilization of the system. Additionally,

three dashboards (Ebola, measles and polio) were developed within the Africa CDC continental EMS for enhanced visualization and decision-making.

AMR Programme: The AMR programme successfully launched the findings of a 3-year multi-country AMR surveillance data **Mapping Antimicrobial Resistance and Antimicrobial Use Partnership (MAAP)** which collected data on consumption and usage in 14 AU MS. MAAP reviewed 819,584 AMR records from 2016-2019, from 205 laboratories across Burkina Faso, Cameroon, Eswatini, Gabon, Ghana, Kenya, Malawi, Nigeria, Senegal, Sierra Leone, Tanzania, Uganda, Zambia, and Zimbabwe. MAAP also reviewed data from 327 hospital and community pharmacies and 16 national-level AMC datasets. Key findings include that most laboratories in Africa are not ready for AMR testing, and that in eight of the 14 countries, more than half of the population is out of reach of any bacteriology laboratory.

Priority 3: Ensure robust emergency preparedness and response capabilities for all public health emergencies

The Public Health Emergency Division ensures Member States' health systems are resilient enough to prepare for, prevent, and respond effectively to public health emergencies by strengthening prevention and preparedness capacities at continental, regional, and member-state levels and robust emergency response and recovery capacities.

The increasing number of health emergencies due to emerging infectious diseases has led to significant challenges in Africa. Between January and December 2023, 185 public health events (PHEs) were reported through the Event Based Surveillance (EBS) system, with 32 graded 2 and 4 graded 3. Factors such as unplanned urbanization, population increases, climate change-related events, and humanitarian crises have contributed to the spread of infectious diseases and disrupted access to health services.

In 2023, Africa CDC made significant efforts to address EPR issues across the continent. These interventions are divided into several areas, including strengthening Public Health Emergency Preparedness and Readiness at national, regional, and continental levels.

Public Health Emergency (PHE) Preparedness: Africa CDC implemented supply chain management and Medical Countermeasures (MCM) measures in Douala, Cameroon, including the construction of a warehouse, renovation of the African Union Commission (AUC), and commencement of ongoing processes with a 2024 completion target. The successful distribution



of vaccines and commodities, valued at more than \$37 million, was accomplished to benefit 33 Member States of the African Union. Furthermore, a financial allocation of \$322,842.52 was employed to furnish MCM to Equatorial Guinea and Malawi. This allocation included critical supplies such as oxygen concentrators, IPC items, and cholera medical supplies. In addition, 8.5 tonnes of medical supplies destined for Sudan are on standby now.

Training: Training of Trainers (ToT) for 27 experts from 18 Member States to conduct simulation exercises, training for 32 experts from francophone Member States, and assistance for 6 MS to conduct their Joint External Evaluations (JEE) have been components of PHE preparedness initiatives. Prioritisation and ranking of epidemic-prone disease risks in Eastern Africa have been established.

Public Health Emergency Operations Centres (PHEOCs): Regarding the establishment of the PHEOC and the enhancement of the Africa CDC and Member States (MS), advancements have been achieved in the provision of information and communication technology (ICT) to two MS and two Regional Collaborating Centres (RCC). In addition, twenty-two PHEOC assessment missions have been executed, a five-year strategic plan for PHEOC has been formulated and introduced, and eight associates were inducted into the PHEM Fellowship on October 1, 2023. Across

22 PHEOC assessment missions have been executed and a five-year strategic plan for PHEOC has been formulated and introduced

the continent, 263 specialists have received training in various facets of Emergency Operations Centres (EOC).

Public Health Emergency Management: Africa CDC deployed multiple Rapid Response Teams (RRTs), provided technical assistance to countries facing outbreaks and disasters, and coordinated cross-border collaboration for emergency preparedness and response. In collaboration with WHO, the PHE workforce, specifically the **AVoHC SURGE Initiative**, has witnessed the formation of national Rapid Response Teams in 20 MS. A total of 1378 AVoHC SURGE members have enrolled, and 15 Member States have successfully completed the onboarding training bundle. Developing training materials and completing an AVoHC induction training course by 55 AVoHC members have contributed to this initiative's success.

In 11 MS, the PHE response support efforts have been expanded to include seven additional PHEs, including cholera, diphtheria, Ebola Virus Disease (EVD), floods, Marburg Virus Disease, and an unidentified ailment in South Sudan, in addition to COVID-19. In response to various health crises, notable accomplishments include training 785 frontline healthcare workers, deploying 14 Rapid Response Teams (RRT), and distributing 113.89 tonnes of aid to 28 AU Member States.

JEAP: As a major milestone for Emergency Preparedness and Response during WHA76, Africa CDC, WHO-AFRO, and WHO-EMRO, under the leadership of WHO HQ, launched a **Joint Emergency Preparedness and Response Action Plan (JEAP)**. During this launch, the Director General reaffirmed his commitment to continued engagement with the global health community to strengthen Africa CDC's relationship with the WHO, especially the AFRO and EMRO regions, for a cordial working environment aimed at achieving Africa CDC's strategic vision and executing its mandate across the continent.

In addition, Africa CDC co-hosted a pandemic preparedness prevention and response **(PPPR) side event** on the margins of the BRICS summit in May 2023 in South Africa. The dialogue sought to elicit a collaborative framework for AU and BRICS 3P2R that is actionable and implementable by tabling concrete suggestions, drawing from the AU and BRICS collective experiences of dealing with COVID-19 and other pandemics, identifying the existing capabilities and acknowledging the gaps that would need to be closed for adequate pandemic preparation and response.

Priority 4: Health Systems Strengthening and Public Health Institutes (HSS & PHIs)

National Public Health Institutes (NPHIs) are the vehicles for national health security at country level. Success in building robust health systems in

Africa requires countries to have well established public health institutions. NPHIs are mandated to ensure population wellbeing and national health security by establishing and maintaining robust public health surveillance and disease intelligence system; timely detection and reporting systems; and respond with evidence-based prevention and mitigation measures.

In 2023, Africa CDC was instrumental in the formation of National Public Health Institutes (NPHIs) in Chad, South Sudan, Sierra Leone, and the Democratic Republic of the Congo. Additionally, financial and technical assistance was provided to the Republic of Botswana on legal framework drafting and policy revision. In collaboration with the Division of Emergency Preparedness and Response, Africa CDC facilitated a peer-to-peer exchange program for 19 NPHIs across Africa. The countries involved in this program include Comoros, Madagascar, Rwanda, Somalia, South Sudan, Tanzania, Lesotho, Botswana, Liberia, Zambia, Ethiopia, Burkina Faso, Chad, Central African Republic, Democratic Republic of Congo, Guinea, Togo, and Mauritania. In the reporting period, Twelve (12) NPHIs across the five regions were assessed between May and August 2023 using a customized tool focusing on five key thematic areas: corporate governance, health information system, public health workforce development, emergency response and public health research. The institutions were rated, and eight Centres of Excellence were identified for thematic areas. Africa CDC continues its advocacy for the establishment and strengthening of NPHIs



Meeting of Directors of National Public Health Institutes to develop an action plan for the acceleration of NPHIs development and SLL implementation in Central African Member States in Bujumbura, Burundi

through regional, continental and global forums.

In 2023, Africa CDC developed and launched African Epidemic Services (AES), a continental training program workforce development initiative with three specialized tracks: Epidemiology, Laboratory Leadership, and Public Health Informatics. Furthermore, the Kofi Annan Global Health Leadership Programme graduated 20 mid to senior-level professionals; 15 senior nurses and midwives trained on population health and health systems management in partnership with Harvard T.H. Chan School of Public Health; and 98 experts from 49 Member States were trained on utilizing Burden of Disease estimates to influence public health decision making.



Figure 5. Number of people trained by HSS & NPHIs Division

In strengthening workforce development, Africa CDC conducted training of 151 trainees from 25 Member States in biostatistics, implementation science, and epidemiology. Sixty-three (63) advanced-level field epidemiology residents from 13 Member States were also assisted in their ed-

ucation, and training was also conducted for 49 frontline field epidemiologists. A comprehensive Training Needs Assessment (TNA) was conducted to ensure the delivery of targeted and relevant on-line training courses that bridge knowledge gaps, improve program quality, and align with current and future requirements. The TNA was carried out between 22nd March and 5th April 2023 across AU Member States, covering English, French, Portuguese, and Arabic languages. The assessment aimed to map the existing skills and needs of the public health workforce, enabling the design of tailored interventions.

- Twelve (12) NPHIs across the five (5) regions were assessed between May and August 2023 using a customized tool focusing on five key thematic areas: corporate governance, health information system, public health workforce development, emergency response and public health research. The institutions were rated, and Centres of excellence were selected for thematic areas, namely Central Africa: Burundi, Democratic Republic of Congo; East Africa: Ethiopia, Rwanda, Uganda; North Africa: Libya, Morocco; Southern Africa: Mozambique, South Africa, and Zambia; West Africa: Burkina Faso, Liberia, Nigeria.

Africa CDC developed IMPACT (Integrated Management Platform for Africa CDC’s Training), a resilient Learning Management System (LMS) and various eLearning courses to strengthen capacity building for health professionals and institutions across the African continent. The project’s primary purpose is to address the critical need for cost-effective and timely dissemination of accurate health information to public health practitioners. A collaborative effort with various Divisions of Africa CDC has resulted in the creation of eLearning courses on Mortality Surveillance, Laboratory Sample Management and Referral, Community Health Worker, and Learning Lessons from Public Health Emergencies, and are concurrently developing multiple courses for the Africa Epidemic Services (AES) Fellowship. Two Communities of Practice (CoPs) are also currently active on the IMPACT platform on Mortality Surveillance and Research Ethics.

Africa CDC also provided financial and technical support to the **6th Congress of the African Association of Epidemiology** hosted by the Malian Society of Epidemiology in Bamako, Mali from 25 to 27 October 2023 attended by more than 500 people from the Anglophone, Francophone, and Lusophone countries. Furthermore, Africa CDC supported the Morocco Field Epidemiology Training Programmes Conference financially and technically, where more than 300 participants attended the conference.

To successfully build back better and stronger from the current COVID-19 pandemic, Africa CDC developed a continental **African Epidemic Service (AES)**, an elite workforce hosted and directed by the African Union, based on the model of the US CDC Epidemic Intelligence Service (EIS); linked to supportive transnational laboratory networks and surveillance systems. This African epidemiology service program has three major tracks, namely epidemiology, laboratory, and health informatics. To this end, in the last reporting period, Africa CDC developed a detailed curriculum for all three tracks and validated the developed curriculum. All tracks have subsequently developed learning content based on each track's individual requirements. Training host sites have been selected for each of the tracks and work is underway to prepare the host sites for this training. The call for applications for the Africa Epidemic Service - Epidemiology track was launched on September 7, 2023, on the margins of the World Field Epidemiology Day with more than 4200 applications received for the program. Furthermore, the AES was launched on 27th November 2023 during the annual NPHIs pre-meeting in Lusaka, Zambia at the 3rd Conference on Public Health in Africa.

The **third cohort of the Kofi Annan Global Health Leadership programme** with 20 fellows was onboarded in 2023 - 10 male and 10 female, from 14 Member States. The Kofi Annan Fellowship in Global Health Leadership seeks to model aspirational African public health leaders to emulate the exemplary leadership qualities of the late Secretary-General Kofi Annan and to support them in acquiring advanced skills and competencies needed to strategize, manage and lead public health programmes that will positively transform

public health in Africa. The aspiration is for Kofi Annan Public Health Fellows to contribute to and lead the implementation of a new public health order for Africa and develop the next generation of public health leaders. This program was launched in 2021 and graduated 39 fellows through 2 cohorts; 14 countries represented in cohort 1 and 17 in cohort 2.

The European & Developing Countries Clinical Trials Partnership (EDCTP) and the Africa Centres for Disease Control and Prevention (Africa CDC) joined forces in a **€7.5 million epidemiology training initiative**. This initiative aims to enhance African epidemiological and statistical capacity through master's degree programs. Ten consortia, involving 42 African and 9 European institutions, were selected through a competitive process to receive support for three-year training programs. The goal is to empower National Public Health Institutes, Ministries of Health, and other African health institutions to conduct robust public health research and respond effectively to disease emergencies. As of 2023, all 151 students from the 10 consortia were progressing well with their training. The graduation of 151 'EPI-Biostat Fellows' from across the African continent is expected in 2024. Africa CDC and EDCTP also supported the participation of all Epi-Biostat Fellows in a pre-meeting at the 11th EDCTP Forum organized in Paris in November 2023.

The PHIR division is in the process of developing a Framework for Establishment and Development of Capacities of National Public Health Institutes (NPHIs) and Centres of Excellence (CoE) in Africa, with the aim of providing context for Member States to develop and strengthen their NPHIs.



Africa CDC organized two regional meetings (Central and North Africa) and one continental NPHIs meeting at the margin of the 3rd International Conference of Public Health in Africa (CPHIA) held in 2023. During the regional meetings, fully established NPHIs shared experiences with the countries in developing their NPHIs. Each country identified key challenges and priorities and developed action plans to accelerate NPHI development and SLL implementation in their respective countries. The regional meeting also offered a platform for creating a community of practice between NPHIs in the region for Networking.

Priority 5: Expand clinical and public health laboratory systems and networks

Africa CDC has expanded its efforts to expand laboratory systems and diagnostics, not only for outbreak detection and surveillance, but also to strengthen national clinical laboratory services in all 55 Member States. Early detection and diagnosis remain a critical tool against our concurrent disease epidemics.

Strengthening laboratory diagnostic capacity: In 2023, Africa CDC prioritized improving and conducting the assessment of laboratory diagnostic capacity of Member States for the Africa CDC's priority diseases. This revealed a significant deficit, prompting the launch of [tailored guidelines for testing capacity development](#), specifically for epidemic-prone diseases. The document provides guidance for Member States to strengthen their capabilities to detect and respond effectively to potential outbreaks. Additionally, Africa CDC supported advocacy sessions to promote the adoption of molecular multiplex testing, advancing diagnostic capabilities. The continental specimen referral network established for COVID-19 was further streamlined for sample transportation and analysis, expediting outbreak confirmation and characterization. In 2023, Africa CDC supported the transportation of 527 samples for outbreak detection and/or characterization, playing a pivotal role in the prompt confirmation and enhanced understanding of disease outbreaks.

Laboratory Quality Management System and accreditation: In 2023, a momentous achievement was recorded as 1,026 laboratories from 29 Member States secured international accreditation. This milestone signifies a robust commitment to upholding globally recognized standards, ensuring the credibility and reliability of laboratory services on a continental scale. Furthermore, in responding to the evolving landscape of epidem-

ic services, the Division successfully finalized the curriculum for [Laboratory Leadership Training](#). This program was formally launched, integral to the Africa Epidemic Services (AES) initiative. It aims to cultivate strong leadership within laboratory settings, ensuring a resilient and adaptive approach to epidemic response.

In 2023, a comprehensive **Laboratory Quality Management System (QMS) training curriculum**, adopting a holistic One Health approach, was developed. A total of 63 laboratory experts from 29 Member States were trained from both animal and human health sectors. Furthermore, 987 laboratories across 30 Member States were enrolled in External Quality Assessment (EQA) schemes, specifically focusing on molecular diagnosis and sequencing. This widespread effort aimed at enhancing precision and reliability in regional laboratory diagnostics.



Figure 6. Africa CDC Laboratory Mapping was conducted in 2023. A total of 31 NPHIs were mapped across 21 countries in 4 AU regions (Central, East, Southern, and Western Africa)

Advancing Diagnostic Access: During 2023, Africa CDC achieved significant progress in establishing the [Africa Biobanking Network](#), fostering collaboration among 11 institutions across all regions of the continent. The biobank network serves as a foundational framework for collective advancements in diagnostic evaluation, research and development, and local manufacturing. To strengthen the workforce and infrastructure, trainings and crucial support was provided to biobanks, ensuring they have essential resources such as storage space equipped with deep freezers, sample archiving systems, and a 24-hour temperature monitoring system. An information management system was also implemented for operational efficiency. Recognizing the need for strategic oversight and leadership by Member States, a Biobanking Steering Committee was successfully formed and actively engages in guiding collective efforts towards shared objectives. Several biobanks, ben-



efiting from these initiatives, have initiated preparations for international accreditation, demonstrating a commitment to upholding global standards of excellence.

In parallel efforts, the Africa CDC is working with Member States and partners to address the imperative of regulatory harmonization for diagnostics. This led to the establishment of the **[Diagnostics Advisory Committee \(DAC\)](#)**, collaborating with AU-DA-NEPAD and AMA to create an alternative approval process aligned with WHO pre-qualification. This initiative aims to facilitate a streamlined and efficient regulatory pathway for diagnostics in the region.

Safeguarding biosafety and biosecurity in Africa: Africa CDC made significant progress in the implementation of biosafety and biosecurity measures across the continent. Notable achievements include the establishment and operationalization of Technical Working Groups (TWGs) in all five regions through consistent support fostering regular virtual and face-to-face meetings. This collaborative effort has improved coordination and communication among key stakeholders. To reinforce legal frameworks, the Africa CDC supported eight

To reinforce legal frameworks, the Africa CDC supported eight Member States in the domestication of the Africa Union Biosafety and Biosecurity legal framework. This initiative ensures alignment with continental standards and strengthens national capacities in biosafety and biosecurity.

Member States in the domestication of the Africa Union Biosafety and Biosecurity legal framework. This initiative ensures alignment with continental standards and strengthens national capacities in biosafety and biosecurity. A pivotal step was taken in the development of a comprehensive training program covering essential areas such as biorisk management, biological waste management, biosafety cabinet maintenance and certification, and the handling of high-consequence agents. This program equips professionals with essential skills, fostering a culture of safety and compliance within the biosafety and biosecurity domain.

Furthermore, Africa CDC conducted assessments and certified three Centres of Excellence (CoE) for biosafety and biosecurity across different regions, including the Tanzania Public Health Lab for East Africa, NICD for Southern Africa, and IPD for West Africa. The impending certificate handover for IPD by the Director-General is a testament to the acknowledgement of their excellence in biosafety and biosecurity. The tangible impact of these initiatives is reflected in the higher scores achieved in the Joint External Evaluations (JEE), surpassing

baseline assessments. This underscores the Division’s success in fortifying biosafety and biosecurity measures, contributing significantly to a more resilient and prepared public health infrastructure throughout the continent.

Strengthening Molecular Diagnostics and Pathogen Genomics in Africa: In 2023, the Africa CDC supported 30 Member States in strengthening genomics and bioinformatics capacity. This effort led to 41 Member States developing local capacity. The Africa CDC supported Cameroon, Zambia, Nigeria, Senegal and DRC to develop data infrastructure for genomics. In addition, high performance workstation desktop computers delivered to DRC, Egypt, Ethiopia, Morocco, Nigeria, Senegal, Uganda, and Zambia. Furthermore, the Africa CDC in collaboration with ASLM, BMGF, and SpaceX is working to address connectivity problems for bioinformatics analysis and data sharing. At the period of reporting, MOU had been signed with Nigeria, Mozambique, and Zambia. We are in the process of finalizing MOUs with Benin, Kenya, and Malawi. Africa CDC has also supported five (5) AU Member States in strengthening capacity for the detection and sequencing of cholera.

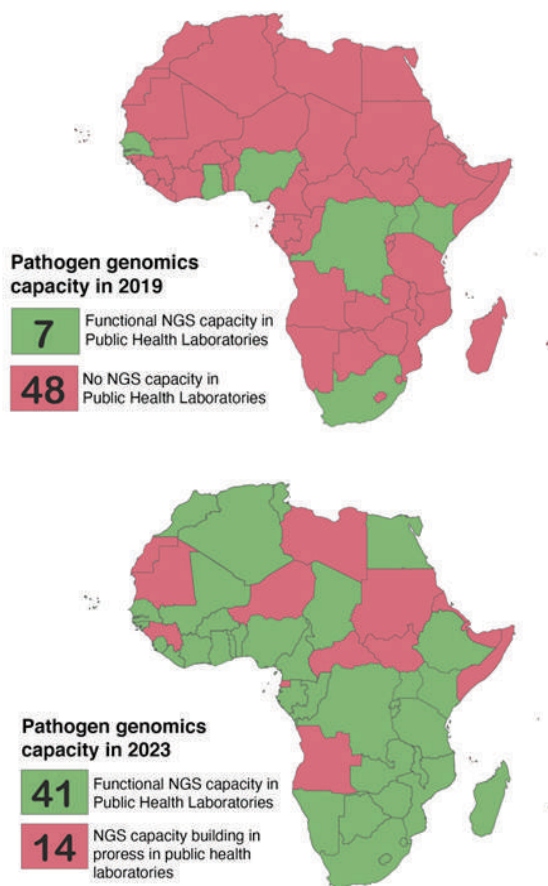


Figure 7. Expansion of pathogen genomics in Africa between 2019 and 2023

Workforce development in molecular diagnostics and genomics: In 2023, the Africa CDC – Africa PGI in collaboration with its partners, trained a total of 334 trainees from 51 Member States through 21 training workshops. The workshops have been sample referral and management (n=3), external quality assurance for next-generation sequencing (1), RT-PCR for Marburg virus detection and surveillance (1), microbial genome sequencing for multi-pathogen detection and antimicrobial resistance surveillance (10), bioinformatics analysis (4), and scientific writing (2). Between 1 January and December 2023, 5 African Union Member States (Cameroon, Chad, Libya, Egypt and Mali) were supported with an onsite technical support on pathogen genome sequencing and bioinformatics analysis at various laboratories within the Africa PGI network.

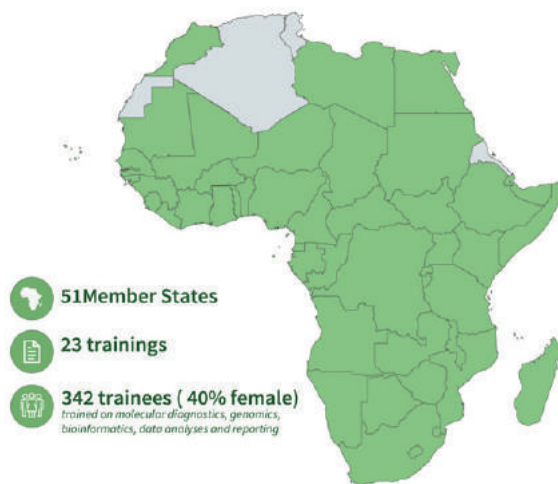


Figure 8. Shows trainings in genomics, bioinformatics, data analyses, and reporting conducted by the Africa CDC in 2023

Operationalization of the Africa CDC Reference Laboratories: A multidisciplinary team of experts from the Member States has been engaged to craft the operational plan for the reference laboratory. This team will delineate a comprehensive roadmap to operationalize the laboratory, outlining human resource requirements, estimating running costs, etc.

Priority 6: Expand health product and technology innovation and manufacturing

The African Union New Public Health Order calls for expanded the local manufacturing of health products and technologies in order to ensure that Member States have reliable, and sustainable access to health products and technologies for



Figure 9. Partnership for African Vaccine Manufacturing (PVM) strategically focused on aligning its priorities with the Africa CDC strategy and PVM FFA (key areas to strengthen vaccine manufacturing and supply chain capabilities across the continent).

pandemic prevention, detection and response. In 2023, Africa CDC continued to implement PVM’s strategic priorities with a focus on vaccine manufacturing and supply chain capabilities in the continent.

Market Design and market shaping: In 2023, PVM developed healthy and sustainable markets for locally produced products. This involved drafting legal framework agreements and technical designs for syndication with Member States and AVMI. The crucial components were initiating a Technical Working Group (TWG) and mapping supply capacity vs. forecasted demand. Commitment from vaccine-producing countries was demonstrated through a Communiqué.

Africa CDC and Gavi, the Vaccine Alliance hosted by the Kingdom of Morocco opened [the First Manufacturers Marketplace for Vaccine Manufacturing African Union Member States](#). The meeting saw the participation of Ministers of Health or Representatives, Heads of National Regulatory Authorities (NRAs) of the 13 African Union (AU) Member States signatories of the Communiqué of the Video- Teleconference (VTC) Meeting of the Bureau of the Assembly of the AU Heads of State and Government extended to African Vaccine Manufacturing Countries held in May 2022, representatives from the Regional Economic Communities (RECs), stakeholders such as UNICEF, AfCFTA Secretariat and African vaccine manufacturers. Furthermore, Africa CDC and the European Union Commission signed an [agreement to support access to health products and local manufacturing in Africa](#) as part of the Team

Europe Initiative on Manufacturing and Access to Vaccines, Medicines, and Health Technologies. The agreement was signed by H.E Dr. Jean Kassey, Director-General of Africa CDC, and Jutta Urpilainen, European Commissioner for International Partnerships, during the Global Gateway Forum in Brussels on October 25-26. This agreement complements the Team Europe Initiative on Manufacturing and Access to Vaccines, Medicines, and Health Technologies (TEI MAV+) for Africa.

Strengthening the Innovation Ecosystem: In 2023, PVM focused on facilitating increased tech transfer, intellectual property (IP), and research and development (R&D) activities. PVM initiated the development of an R&D position paper and assessed the African R&D ecosystem. The mapping of research institutions and contribution to competency frameworks are integral to this effort.

Manufacturing and Supply Chain Capacity Building: In 2023 Africa CDC incubated and scaled up regional manufacturing and supply chain capabilities. Training sessions for biomanufacturers and regulators, development of competency frameworks, and infrastructure/value chain assessments through diagnostic analyses were key components. Infrastructure/Value Chain efforts involve the supply chain diagnostic analysis and localization assessment.

Talent development: PVM enhanced its training efforts around the continent, including the global training of biomanufacturers and regulators and the launch of competency frameworks.

6

Cross-cutting Enablers

Recognizing the complexity of the six (6) strategic priorities it is essential that the Africa CDC facilitates and creates an enabling environment for efficient delivery of the numerous programmes and activities being implemented with Member States. To this end, there are seven concurrent cross-cutting areas of work that support the functions across the six strategic priorities.

Strengthening Health Economics and Financing Capacity for Secured and Sustainable Health Financing in Africa

The Africa CDC Health Economics and Financing Programme (HEP) was established in November 2020 with a mission to strengthen Africa CDC and Member States' capacity for generating and utilizing health economics evidence to improve public health decision-making and practice, leading to more equitable allocation of resources, stronger and more efficient and effective health systems, and healthier populations and communities.

Regarded as a central component of the Africa CDC's overall programme of work and its flagship programmes, the HEP works to leverage itself by strengthening capacity, research evidence, and health economics thinking across AU Member States, the five Regional Collaborating Centres (RCCs) and, in support of the execution of the strategic functions of the Africa CDC. The HEP places high emphasis in pursuing a partnership model, leveraging opportunities for synergistic collaborations with new and existing Africa CDC partners, health economists, policymakers, and health financing advocates in service of the Africa CDC and Member States by partnering with health economists, policymakers, and health financing advocates.

Africa CDC Health Economics and Financing Programme (HEP) has made significant strides in 2023 towards the realization of its mission to strengthen Africa's public health decision-making and systems. In 2023, the HEP accelerated momentum towards driving meaningful change across three envisioned long-term outcomes: increased domestic resources for public health in Africa, improved coordination of external resources

and alignment with domestic public health priorities and enhanced resource optimization and equity in public health decision making.

Capacity Strengthening: HEP has extensively worked on building capacity in health economics and financing across Member States, with delegates representing 35 Member States. This has been demonstrated by the numerous training workshops conducted. For instance, training on health technology appraisal in Egypt and resource optimization in emergency preparedness in Nigeria, Zambia, and Senegal have been crucial in advancing the skills and knowledge in these areas. Over 280 African delegates and participants were engaged through the HEP's capacity building initiatives.

Strategic Engagements: The Programme has successfully facilitated twelve strategic engagements with Member States, marked by missions and dialogue meetings aimed at fostering collaboration and momentum for financing Africa's health security. The Programme facilitated strategic dialogues with Member States in Uganda and Burkina Faso, and with technical and funding partners during forums like the World Bank Africa Annual Chief Economists of Government Forum in Pretoria, South Africa. While demonstrating a robust effort by the HEP to foster collaboration and align public health initiatives with continental priorities, these platforms have emphasized resource optimization and equity in public health decision-making, enhancement of the efficient use of available resources for health and also underscored the importance of innovative financing mechanisms to secure sustainable health funding, aligning with the African Union's Agenda 2063 and the New Public Health Order's call for increased domestic health investment.

Through Policy and Health Diplomacy, Africa CDC forged connections with African Civil Society Organizations and developed an engagement strategy and collaboration framework. Notably, we launched the first-ever African e-learning course on health diplomacy, emphasizing leadership and diplomatic skills.



Evidence and Strategic Outputs: HEP's commitment to research and evidence synthesis is evidenced by the production of eight strategic outputs such as policy briefs, publications and guidance documents. These publications have provided valuable insights into COVID-19 vaccine rollout scenarios and optimizing strategies for vaccine distribution in various African countries.

Policy and Health Diplomacy at the Centre of Africa CDC's Engagement

The Policy and Health Diplomacy Division is mandated to align the Africa CDC's work with continental policies and foster diplomatic relations. Its core function is to enable the continent to influence the global health agenda effectively. The Division initiated capacity-strengthening efforts for Member States in policy and health diplomacy that supported them in international negotiations, facilitating interaction on common agendas and providing tailored guidance. Additionally, it ensured consistency with the continental development agenda. It was pivotal in facilitating governance-related aspects, overseeing the functioning of the Committee of Heads of States and Governments, the Governing Board, and the Advisory and Technical Council of Africa CDC.

In 2023, the Division adeptly engaged with stakeholders across international multilateral forums, effectively supporting African representatives in global negotiations on Pandemic Prevention Preparedness and Response. Key achievements in-

cluded drafting a Common Africa Position on Pandemic Prevention Preparedness and Response (PPPR) negotiation, convening a Working Group on health within the STC Health Population and Drug Control, and offering substantial support and guidance on policy and technical matters related to international instruments on public health. Further, it reinstated the Africa CDC governance structures in alignment with the revised organization structure. It convened the Advisory Technical Council (ATC) and the Governing Board (GB), where the governance bodies' Rules of Procedures and working modalities were developed and adopted.

Through Policy and Health Diplomacy, Africa CDC forged connections with African Civil Society Organizations and developed an engagement strategy and collaboration framework. Notably, we launched the first-ever African e-learning course on health diplomacy, emphasizing leadership and diplomatic skills. Additionally, we actively represented the Africa CDC as the secretariat for the COVID-19 response fund and the AU COVID-19 Commission.

Communicating for Impact

The year 2023 has been marked with a transition towards 'communicating for impact' by streamlining and strengthening its communication and public information approaches. As a leading public health institution, the Africa CDC continues to improve its brand positioning and image building on the continent and globally.



Interview with Dorothy Sumaili, local leader spearheading control of cholera in Malawi as part of Risk Communication and Community Engagement (RCCE)

Mis- and dis-information is one of the identified challenges that can affect the institution and public health messaging. In 2023, the Africa CDC has made significant effort to strengthen its communication and public information, advocacy, and social mobilization to collectively build Africa CDC as a world-class institution, leveraging technology and participatory engagement.

Africa CDC initiated the process to develop Corporate Communication, Internal Communication, Digital and social media and Continental RCCE strategies, to foster a better understanding of the mandate of the Africa CDC and its key programmes aimed at promoting Africa's health security, through strategic communication, social mobilization and outreach and advocacy programmes. The strategic documents clearly define Africa CDC's path toward building a strong information and communication system that can effectively address inaccessibility to information for all its stakeholders on the continent.

In the year under review, Africa CDC has been focused on improving its media relations and engagement through interviews and pitching of program information. This has been a critical impact for the institution as it allows for a better understanding of Africa CDC's work and how it impacts communities and people on the continent. As a result, key highlights from various online and physical engagements and visibility initiatives

Six Member States collaborated with the World Health Organization and local authorities to conduct a Knowledge, Attitude and Perception (KAP) survey.

were conducted with reputable institutions such as CNN, BBC, CBNC Africa, New York Times, Reuters, and SABC. Strong relationships have been built with these institutions to ensure Africa CDC's image is enhanced, and its reputation continues to grow.

Moreover, Africa CDC's engagement with media, Member States, and the public has grown by over 30%, leveraging data from Facebook, which currently has +3million organic subscribers. These efforts have also been strengthened by public education and awareness campaigns at the World Vaccine Congress in Washington DC, United States, Barcelona, Spain, and Lusaka, Zambia where Africa CDC engaged stakeholders through the exhibition.

- 1. Promote an integrated approach to communication on all public health matters:** Six Member States collaborated with the World Health Organization and local authorities to conduct a Knowledge, Attitude and Perception (KAP) survey. The survey aimed to identify the barriers to vaccination and reduce vaccine hesitancy. The project involved enhancing vaccine safety, engaging communities through radio broadcasts, and targeting influential figures like religious leaders and students. The results from the survey are guiding the development of an evidence-based continental RCCE Strategy. The insights gathered from the KAP survey will also help in creating demand for Covid-19 vaccines and other related vaccines.

2. Increased advocacy for demand-driven programming and resourcing: Africa CDC has been actively advocating for global health observance days throughout the year. They have successfully launched over 10 campaigns on important days such as World NTDs Day, World TB Days, World Malaria Day, World Hepatitis Day, World Mental Health Day, World Suicide Prevention Day, World Rabies Day, World AMR Awareness Week, World AIDS/HIV Day, and World One Health Day among others. These campaigns have helped to raise awareness about various health crises and outbreaks such as dengue fever, Mpox, AMR, malaria, and Cholera, among others. The key messages were tied into the campaigns to shift understanding and increase engagement for the online audience, with over 2 million people reached.

In the Eastern Africa region, 33,246 adverts were deployed to emphasize vaccine safety and foster sustained community demand. Additionally, 67,232,233 people were reached through RCCE approaches, and there were engagements with 7,147 community influencers.

3. Position Africa CDC as the focal source of information that guides policymakers and public health sector professionals in Africa to prompt action that will protect the health security of the continent: Africa CDC CPHIA recently hosted a platform on Risk Communication and Community Engagement (RCCE) and Social and Behavioural Change (SBCC) policy advice. The event attracted over 1000 participants and viewers from across the world who are committed to strengthening the RCCE and SBCC architecture for Africa.

To support Member States, the Africa CDC trained over 150 RCCE Officers from Ministries of Health and National Public Health Institutes. These officers were equipped with RCCE skills to respond to emergency disease outbreaks, control and prevention. Additionally, 46 health journalists across the continent were trained to tell African stories on public health issues.

In line with the training of RCCE officers, the Africa CDC established a Public Health Risk Communication and Community Engagement Community of Practice (PH-RCCE-CoPA). This committee has 100 RCCE leaders and specialists from across the continent who will champion RCCE policy and advocacy efforts. The committee is led by a steering committee of 5 members representing the five regions of Africa.

Empowering Regional Coordinating Centres (RCCs)

In 2023, Africa CDC continued to strengthen RCCs as an implementation hub for its strategic plan. The **East Africa RCC** held its 2nd ReTAC meeting in September 2023, where key decisions were made to strengthen the RCC and establish the EA-RCC RISLNET. The inaugural East Africa Focal Point Meeting in August 2023 saw improved coordination and communication among 12 out of 14 Member States. The RCC enhanced its human resources, deployed additional staff, and secured dedicated office space, expanding its presence in 12 Eastern African countries. Notably, the RCC played a crucial role in supporting Marburg and Ebola outbreak investigations in Tanzania and Uganda, respectively. The launch of the Eastern Africa Regional Integrated Surveillance Laboratory Network (RISLNET) and the successful implementation of SLL activities were notable achievements. The RCC also introduced a regional knowledge hub concept and established a scientific writing committee, contributing to the development of best practices and knowledge sharing. Challenges and lessons learned were identified, and recommendations were made to further improve RCC operations.

The **Central Africa RCC** conducted various activities, including workshops on mortality surveillance, engagement meetings, and supervision of integrated disease surveillance and response in Chad, Cameroon, and the Congo Republic. The RCC faced challenges such as a lack of a data manager, delayed agreements, and insufficient financial resources. Lessons learned emphasized the importance of collaboration, the estab-



Eastern Africa RCC launch of RISLNET launch of RISLNET



Artistic render of the Africa CDC premises

lishment of an epidemic fund, political commitment, and addressing language barriers. Recommendations included supporting the establishment of national public health institutes and improving communication with Member States.

The **Western Africa RCC** engaged in missions to Guinea Bissau, Cote D'Ivoire, Benin, and Senegal to strengthen collaboration with Member States. Challenges included delayed signing of hosting agreements and lack of clarity on reporting lines. Lessons learned highlighted the need to explain Africa CDC processes, build trust, and have staff on the ground. Recommendations focused on improving response time, easing staff movement, and essential personnel recruitment.

The **Southern Africa RCC** operationalized its governance structures and engaged in high-level meetings, including interactions with the Presidents of Zambia and South Africa. The RCC launched the Southern Africa Regional Integrated Surveillance Laboratory Network (RISLNET) and established a knowledge hub. Challenges included logistics, lack of internet, and insufficient staffing and funds. The RCC supported Member States in responding to outbreaks and established partnerships with regional health organizations. Recommendations emphasize flexible fund release, improved response time, and staff renewal.

In the North, **Northern Africa RCC** achieved operationalization with staff deployment, high-level advocacy missions, and knowledge management initiatives. Challenges included reluctance to share data, financial support, and administrative issues. Lessons learned underscored the importance of National Public Health Institute (NPHI) models, one-on-one engagement, and regional hosting events. Recommendations focused on addressing data-sharing reluctance, financial support, and administrative improvements

Supply Chain and Procurement

Strengthening Supply chain: The key success in the supply chain function for 2023 is the fact the function is organized as a division managing procurement, warehouse, and travel of the Africa CDC. The function is to provide service for corporate and emergency response requirements of the Africa CDC. The SCMD strictly follows the AU policies guiding Procurement, Travel warehouse, and asset management. Africa CDC has a distinct procurement structure to allow transparency and accountability and to adhere to segregation of duty. The Africa CDC is audited by the AU Office of Internal Oversight, the Board of External Auditors, and independent auditors from partners. The Africa CDC is currently using SAP-ERP to manage its supply chain activity. Transparency and effective competition are ensured by publishing the Annual Procurement Plan on its website and advertising all procurement opportunities on different websites including Africa CDC, AUC, and UNDB. The Africa CDC has embarked on a continuous improvement of its supply chain function which aimed at making the function a centre of excellence and world-class function that can provide service to Member States

Movement of Africa CDC: The expanded mandate of Africa CDC required additional staffing and resulted in an expected increase in staff size which led to a decision to lease additional office space at a monthly fee of USD 22,000.00. This created inconvenience as some of the key divisions were operating from inside the AUC compound while the Management and support divisions were operating from the leased building.

Following the completion of the construction of the Africa CDC office, a decision was taken to move the office to its current location. The move was completed in less than a month and provided a conducive working environment to the staff members in addition to the cost savings on the rental of office space.

Procurement unit milestones: The team successfully worked towards key milestones that will enable more efficient operations for Africa CDC as it implements its numerous programmes and activities including -

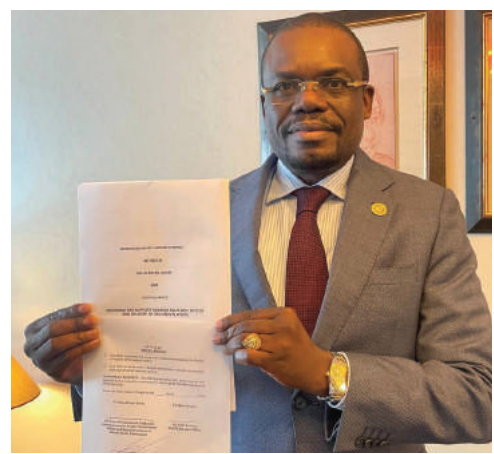
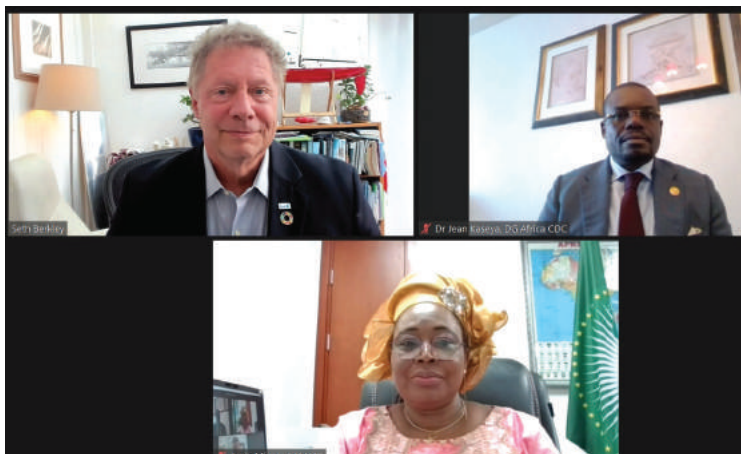
- The approval threshold for Africa CDC is elevated to USD 1.4 million following the autonomy of Africa CDC
- New Membership to the Africa CDC Internal Procurement Committee was constituted.
- Procurement Plan developed, published, and implemented.
- A total of 3422 tickets were purchased to support various activities of Africa CDC at a total cost of USD 3,630,000.00.
- Procurement of goods, consultancy services, and non-consultancy services was undertaken with a total contract price of USD 11,157,549.
- Verification and tagging of all assets were undertaken in Africa CDC HQ and four RCCs (East, Central, South, and West)
- The division is strengthened with additional staffing.

Africa CDC Partnership Landscape 2023

Africa CDC continues to foster and expand partnerships that are essential for bolstering the continent’s public health system and response to emerging health threats. In 2023, the Africa CDC made significant strides in strengthening existing partnerships and establishing new collaborations, further enhancing the organization’s capacity to address public health challenges across the continent. There has been increased inclination to partner with Africa CDC as a leading continental body safeguarding Africa’s health security.

Africa CDC has vigorously worked to fortify its existing partnerships, leveraging the collective expertise and resources of its collaborators to enhance public health outcomes in Africa. Through strategic collaborations with established partners, Africa CDC achieved notable progress in several key areas:

- 1. Memorandum of Understanding with US Government:** Africa CDC solidified its partnership with the United States Government through the signing of a Memorandum of Cooperation (MOC). This landmark agreement encompasses various collaborative endeavors, ranging from capacity building and technical assistance to joint research and knowledge exchange with various USG agencies. The MOU with the US Government represents a testament to the enduring cooperation between Africa CDC and one of its key international partners, underscoring the shared commitment to advancing public health in Africa.
- 2. COP28 Commitment towards Community Health Systems:** At the 28th Conference of the Parties (COP28), a significant commitment of \$900 million towards community health systems was made, demonstrating Africa CDC’s proactive engagement in advancing comprehensive healthcare delivery at the grassroots level. This substantial investment reaffirms the Africa CDC’s dedication to strengthening community-based health infrastructure and addressing the healthcare needs of vulnerable populations, positioning the organization as a driving force in elevating public health standards across the continent.
- 3. GAVI’s \$1 billion Commitment towards Manufacturing:** Africa CDC’s collaboration with the Global Alliance for Vaccines and Immunization (GAVI) culminated in a pivotal commitment towards vaccine manufacturing. This strategic partnership will facilitate the development and expansion of vaccine manufacturing capabilities within Africa, bolstering the continent’s resilience in the face of infectious diseases and reinforcing its self-reliance in vaccine production. Africa CDC’s collaboration with GAVI exemplifies the organization’s unwavering pursuit of sustainable solutions to advance immunization and public health preparedness.



Signing of the Memorandum of Understanding with H.E. Minata Samata, H.E. Dr. Jean Kaseya and Dr. Seth Berkley



The African Union Deputy Chairperson and Africa CDC Director General leading a discussion with Team Europe visiting Africa CDC in Addis Ababa

Key achievements

In 2023, Africa CDC made significant strides in building key partnerships and fostering impactful collaborations across the African continent. Several success stories emerged because of these strategic partnerships, reflecting our commitment to advancing public health resilience and sustainability.

- 1. The Second Africa CDC Partnership Forum (APF2): Africa CDC held the APF2 in February 2023.** The forum offered a platform for knowledge exchange, collaborative initiatives, and resource mobilization, catalyzing innovative approaches to address public health challenges across Africa. This forum facilitated meaningful engagement with a diverse array of stakeholders, enabling the Africa CDC to harness the collective expertise and resources of its partners to address public health challenges in Africa. Success stories arising from the partnership forum include collaborative research projects, joint capacity-building initiatives, and the sharing of best practices in public health interventions.
- 2. Team Europe High-Level Steering Committee:** The inauguration of the Team Europe High-Level Steering Committee marked a significant milestone in the Africa CDC's pursuit of strategic partnerships. This initiative exemplified our commitment to fostering multilateral cooperation, leveraging the collective strength of Euro-

The inauguration of the Team Europe High-Level Steering Committee marked a significant milestone in the Africa CDC's pursuit of strategic partnerships

- 3. In 2023, Africa CDC inked 33 pivotal memoranda of understandings (MoUs) with diverse partners,** signifying a robust commitment to advancing public health resilience and sustainability across the African continent. These MoUs encompassed strategic collaborations with the Government of France, the Empower School of Health, and several other key stakeholders, reflecting Africa CDC's proactive engagement with a spectrum of partners dedicated to fostering impactful public health interventions.
- 4. Significantly, the World Bank provided a grant of 100 millions USD** over 5 years to support the transition of Africa CDC to an autonomous health body of the AU and therefore, enhance its capacity to support AU member states in preventing, detecting and responding current and future public health threats.

These endeavors in 2023 are poised to significantly influence the trajectory of Africa CDC's initiatives in 2024 and beyond. The strategic partnerships forged through the signed MoUs will serve as catalysts for inno-

vative public health interventions, knowledge transfer, and resource mobilization, shaping our strategic priorities and impact in the years ahead. With an emphasis on collaborative engagement, knowledge sharing, and capacity building, these endeavors will underpin Africa CDC's mission to strengthen public health systems, enhance preparedness for emerging health threats, and advance the health and well-being of African populations. In essence, the partnerships established in 2023 are poised to enrich the Africa CDC's collaborative network, shaping our endeavors and influence in 2024 and beyond, and bolstering our steadfast commitment to promoting sustainable public health outcomes across the African continent.

Strengthening public health research and innovation in Africa

Africa Health Research Agenda: Strengthening public health requires that ethically generated evidence on priority health problems in Africa can effectively inform public health decision-making and practices to achieve positive health outcomes. To achieve this, African CDC is spearheading the development of the first-ever Africa Health Research Agenda. Having such a guiding document available will not only help Member States align on key research priorities, but it will also guide partners and donors on which areas of research have been identified as continental priorities. In 2023, the draft African Health Research Prioritization Framework was developed, a strategic plan of implementation drafted, as well as a draft African Ethics Framework for Research During Epidemics and Public Health Emergencies. Its is expected that the final consultations and validations will be conducted in 2024 with two key outputs being published.

Conference on Public Health in Africa (CPHIA 2023): Africa CDC organized and led the 3rd International Conference on Public Health in Africa in November 2023, hosted by the Government of Zambia in Lusaka. This scientific convening brought together more than 5,000 delegates in person from over 90 countries across the globe to discuss Africa's public health agenda. An additional 30 000+ attended the conference through our virtual live stream channels. The conference provided a platform to showcase wins from collaborative efforts and partnerships that have been critical for Africa's public health. Additionally, with 200+ speakers, 400+ scientific abstracts accepted, 97 side events, and 50 exhibitions, the conference was a platform for dialogue, exchange, and relationship building between various agencies, policy organs, institutions, and sector players that enabled them to forge alliances for future collaborations. **A major success to Africa CDC, CPHIA is now recognized amongst the key global health convenings published by the UN agencies annually – [Global Health Timeline 2024](#).**

Research Ecosystem: In May 2023, Africa CDC and AUDA-NEPAD convened sixty experts from across the continent and the globe to discuss concrete solutions for strengthening the impact and efficiency of the African clinical trials ecosystem, with the goal of speeding access to new lifesaving technologies in line with public health priorities in Africa. This meeting—rooted in aspirations of Africa's Agenda 2063 and informed by the World Health Assembly clinical trials resolution provided insights and input into the **[10-year Road Map for Optimising the Efficiency and Impact of the African Clinical Trials Ecosystem](#)** that was subsequently published.

CPHIA 2023 opening ceremony



The Future State of the African Clinical Trials Ecosystem

The future clinical trial ecosystem in Africa will employ innovative trial design and harmonized policies and practices to implement responsive Phase 1, 2, 3 and 4 clinical trials across agile, efficient, sustainable, and financially viable clinical trial networks. Communities will be actively engaged as equal partners in support of impactful clinical research. Actors within the ecosystem will have strengthened and sustained capacity and will harness digital technology to improve efficiency in the review and conduct of clinical trials and dissemination of their results.

Specifically, the ecosystem will accommodate:

- Innovative clinical trial design that is strategic, streamlined and allows pragmatic (adaptive) product development applying simplified trial design and optimizing trial conduct, including use of technology advancements as appropriate to the context in which the trial is conducted.
- Capacity development, including discovery research in Africa to feed into a comprehensive clinical development product pipeline, developing Phase 1 clinical trial centres across Africa to meet international standards and optimizing Phase 2 and 3 clinical trial sites to support the broader health agenda, increasing capacity of Phase 4 clinical trials, developing capacities and accreditation systems for laboratories to include toxicology and genomic analyses. Workforce development in the planning and execution of clinical trials should be accelerated and scaled up using an “Africa-aware” multilingual training curricula.
- Clinical trial networks that are business-oriented, African-led entities with agility, sustainability, and flexibility that align to the continental health research agenda; they should also be resilient and scalable, with government endorsement, and offer a unique value proposition to diverse stakeholders.
- A thriving digital technologies ecosystem that encompasses and supports all activities across the clinical trial process.
- Efficiency and financial viability ensuring the sustainability of clinical centres and their supporting laboratories and ICT infrastructure.
- A comprehensive legal framework and harmonised policies, procedures and guidelines to enable predictable and efficient clinical trial review and oversight and linking other regulatory functions with clinical trial processes.
- People-centred clinical trials that enable active, equitable, mutually beneficial, inclusive and quality engagement and partnership of communities.

Figure 10. The proposed future state of clinical trials in Africa



To enable increased efficiency and impact of the African clinical trials ecosystem a coordination mechanism at Africa CDC was established, managed in partnership with AUDA-NEPAD, WHO AFRO, and AVAREF. This mechanism will foster collaboration across funders and research sponsors, research networks and centres, industry partners, and community representatives. and that its mandate should include evaluation of the pipeline of clinical trials in line with African public health and research priorities, aligning on financing needs and mechanisms, building cohesive capacity strengthening partnerships, and driving evaluation of the impact of these changes on the clinical trial ecosystem.

Scientific Writing and Training: The Science and Innovation team has offered in-house training and support to Africa CDC in scientific writing. In partnership with European CDC and Eurosurveillance Journal, 280+ Africa CDC staff have been trained in key aspects of scientific writing. In-person workshops in evidence synthesis were conducted to up-skill staff with use of secondary data.

Journal of Public Health in Africa: The Journal of

Public Health in Africa is a peer-reviewed academic journal that publishes high-quality original articles, reviews, comments, research reports, case reports, and more on public health-related issues in Africa. The journal aims to promote and move public health discourse from the background to the forefront. Africa CDC currently publishes this journal in partnership with Page Press. In June 2023, the Journal of Public Health in Africa (JPHIA) received its first Impact Factor within the Journal Citation Reports (Clavirate, 2023). As of December 2023, 12 issues, 180 articles, and 2 conference proceedings have been published in JPHIA. The number of submissions increased by 25% in 2023.

Expanding the Africa CDC Human Resources: Attracting and Retaining Talent

In 2023, the Africa CDC undertook initiatives to strengthen its human resources to improve its effectiveness and efficiency.

The Africa CDC staff portfolio has grown significantly between 2018 and 2023 and currently comprises five categories: Regular, fixed term, special Appointments/consultants, youth volunteers, fellowship, and seconded staff. As of December 2023, Africa CDC employed 361 employees at the secretariat, and Regional Collaborating Centres (RCCs). This represents a 54% increase over prior years, and the onboarding of all new employees was completed smoothly. The revised Africa CDC organizational structure contains 155 positions that were approved through the Executive Council. As of December 2023, there were nineteen (19) Regular staff and six (6) Fixed term staff. HR has improved the ability to hire the best candidates by using the Merit Based Recruitment System

(MBRS) to design and implement effective recruitment strategies **through the establishment of the Africa CDC Appointing, Promotion and Recruitment Board (APROB)**. Africa CDC is also supported through partner funded nonregular staff and to date there are 342 of such seconded staff. Africa CDC is strengthening performance management system by training staff and compliance the completion of Performance Planning Agreements, Mid-term and End-year reviews. This has resulted in a higher level of objective achievements.

Africa CDC Structure and Recruitment: As we look ahead to 2024, HR priorities include developing planning and team-building skills, supporting organizational development and institutional capacity building, operationalizing and institutionalizing a functional performance management system, and reviewing current HR materials to distribute to all employees.

Year	Staff category		Total
	Regular staff	Non-regular staff	
2017	0	11	11
2018	0	48	48
2019	4	66	70
2020	13	65	78
2021	21	109	130
2022	18	130	148*
2023	19	342	361**

*2 staff resigned, 1 retired. No new regular staff recruited
 **1 elected



Finance

Budget and Financial Management System

Africa CDC enjoyed the support of Member States and international partners throughout the year. The Assembly decision approved a total budget of US\$ 25.3M through the regular budget for Africa CDC for 2023 Financial Year.

Summary of 2023 Budget approved by Member States (Intramural Budget)

Budget Category	Amount US\$
A Operational Budget	4,204,209
B Program Budget	21,129,825
Total	25,334,034

A further amount of US\$ 61M of Covid-19 Support Funds was taken forward from the 2022 Financial Year.

Budget Execution

The total expenditure on operational budget for 2023 amounted to US\$ 4.1M representing 99% of approved budget amount of US\$4.2M (for personnel cost and operational activities) whereas program budget expenditure amounted to US\$18.6M being 90% execution of US\$21M budget for the year. Overall execution stood at 91% for the year.

Summary of 2023 Intramural Budget Execution

Budget Category	Approved budget (US\$)	Released Budget	Expenditure (US\$)	% of Execution
Operational Budget	4,204,209	4,204,209	4,141,307	99%
Program Budget	21,129,825	20,689,816	18,564,216	90%
Total	25,334,034	24,894,025	22,705,523	91%

Status of Covid-19 Funds

At the advent of Covid-19 pandemic in early 2020, the Africa Union Head of States launched a response fund to which Member States and Partners were encouraged to contribute to the fund in response to the pandemic. Member States and partners overwhelmingly donated as follows:

Contribution status of Covid-19 Response Fund as the end of 2023

Details	Amount (US\$)
Member States Donation	46,278,920
Partners' Donation	99,692,283
Total Contribution	145,971,203
Total Expenditure 2020 - 2023	73,946,709
Fund Balance as of 31 December 2023	72,024,494

Extramural Funds and Budget Execution

Africa CDC received considerable support from partners, supporting various activities across the priorities set out in our strategic plan. The total budget received from partners for 2023 was US\$ 121M.

Summary of 2023 Extramural Budget and Execution

Implementation Partner	Budget (US\$)	Expenditure (US\$)	Burn rate
AFENET	70 804 371,77	40 497 207,20	57%
APHF	12 438 929,56	8 713 069,28	70%
ASLM	15 822 790,24	18 289 494,74	116%*
AMREF	21 782 002,30	20 775 515,45	95%
TOTAL	120 848 093,86	83 650 443,83	73%

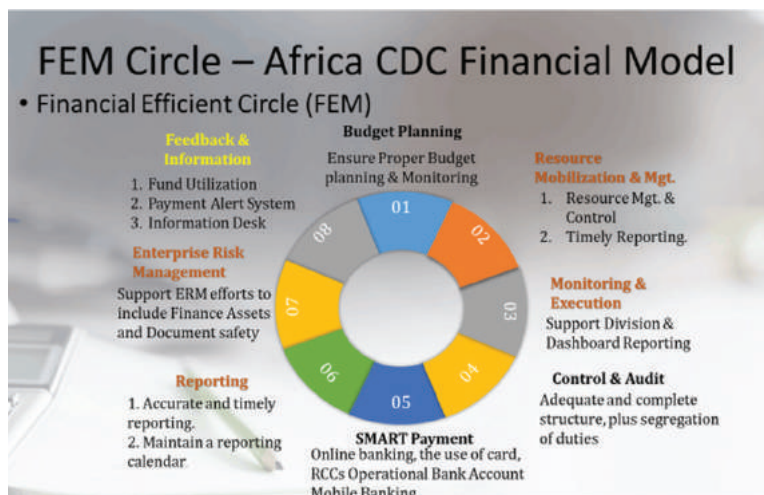
*Some activities from 2024 were brought forward and implemented in 2023 due to urgent requests presented to Africa CDC

Africa CDC works with four implementing partners: African Field Epidemiology Network (AFENET), Africa Public Health foundation (APHF), African Society for Laboratory Medicine (ASLM) and Amref Health Africa. The overall budget execution across the four (4) implementing partners was 73%.

Audit and Financial Reporting

In support of Africa CDC's greater autonomy and expanded mandate, the African Union Executive Council, through its decision [EX.CL/Dec.1218 \(XLIII\)](#) approved. Subsequently, a new structure was adopted with the institution headed by a Director General, the Accounting Officer.

Africa CDC complies with the African Union Financial Rules (2022) and prepares financial statements in accordance with the International Public Sector Accounting Standards (IPSAS). The financial statements are consolidated with those of other African Union organs and institutions. The financial statements of the institution are audited annually by the African Union Board of External Auditors. There are regular independent project-specific audits conducted on some programs required by international partners. The African Union Office of Internal Audit (OIA) conducts regular internal audit reviews of the institution. The Office of Internal Audit reports directly to the Board External Auditors which constitutes a board appointed from African Union Member States.



periodic Budget execution and information, resources mobilization and Grant management and periodic reporting

Enterprise Resource Planning (SAP-ERP) System

Africa CDC deployed the use of SAP-ERP System for financial processes. Following the operationalization procedure for her independence in **April 2021**. This is an integrated system covering Finance, Human Resources and Procurement. The system is used in Finance for various processes including financial reporting, budgeting and monitoring, payments processing, bank reconciliations, payroll processing among others.

Fund Management and Control

A model called FEM Cycle (Financial Efficiency Cycle) was adopted to ensure a sound financial management system. This encompasses the following areas:

- a) Internal Control System: Strong segregation of finance roles, the use of SAP system for all transactions, regular bank account reconciliation, monthly account reconciliation and closure among others ensconce the achievement of this.
- b) Banking System: 100% of payments are made through the bank. An online banking system was introduced for payment for both Africa CDC HQ and three operational RCC offices in Kenya, Zambia, and Gabon.
- c) The strict adherence to African Union Travel and other relevant policies
- d) Quarterly Subvention

Budget Planning, Monitoring and Control

The budget planning, monitoring, and control processes entail the following:

- a) Priority Settings, annual budget and procurement planning, feedback information through

Enterprise Risk Management: The enterprise risk management procedures include the following:

SMART Payment Online banking, the use of card, RCCs Operational Bank Account Mobile Banking, **Performance Audit**, Procurement Audit, Financial Audit, Property Insurance cover, Business Continuity, Storage of Financial Assets and safety of documents and Archiving and Establishment of Financial core Value system for Africa CDC

Challenges with the current financial system:

- a) Lack of proper adaptation of the operating system (SAP-ERP) to enhance timely reporting and feedback information is observed as a gap in the
- b) Budget flexibility in received funds from donors during the year for urgent activities does not suit the peculiar nature of the specialized agency of the Union.
- c) Africa CDC has yet to have a dedicated fund in place to respond to emergency health disease outbreaks on the continent.

Recommendations for improvement:

- a) Review the current operating system for re-engineering the financial system.
- b) There is need to have a dedicated Emergency Response Fund with a framework for resource mobilization, execution of activities, accountability, and reporting.

7

Major Challenges in 2023

The continent's health systems were stretched thin from resurging infectious diseases like cholera and Marburg to the ever-present COVID-19 pandemic. Natural disasters and ongoing conflicts added further layers of complexity, testing the limits of resilience, and demanding extraordinary responses. The following are the main challenges the continent faced in 2023:



Insufficient legislation and policies related to mental health created barriers to access and acceptance of mental health services

- **Outbreaks:** Cholera outbreaks in Malawi, diphtheria in Nigeria, Ebola virus disease in Uganda, and Marburg virus disease in Equatorial Guinea tested the continent's capacity for rapid response and containment. These diseases presented ongoing challenges to healthcare systems, requiring sustained prevention, control, and treatment efforts.
- **Natural Disasters:** Floods in Libya, the civil war in Sudan, and a hurricane in Equatorial Guinea exposed vulnerable populations to additional health risks.
- **COVID-19 Pandemic:** The ongoing pandemic strained health systems and disproportionately impacted vulnerable groups.
- Despite progress, key **reproductive health indicators** were off track, including high maternal mortality rates. Challenges included low access to sexual and reproductive health services, varying across sub-Saharan and North Africa.
- Inadequate and non-sustainable funding, **gaps in information systems**, and the absence of comprehensive policies and guidelines.
- **Limited capacity for trained professionals**, suboptimal programs, and insufficient infrastructure, for example, lack of knowledge about IPC at primary healthcare levels and a need for specific guiding documents for humanitarian crises were the major identified issues in 2023.
- **Absence of an IPC legal framework** and criteria for defining healthcare-associated infections (HAIs).

- **Mental health** remained a significant concern, with stigma and discrimination hindering effective response and care. Insufficient legislation and policies related to mental health created barriers to access and acceptance of mental health services.
- **The lack of coordination and inadequate integration of community health initiatives** posed challenges at the country, regional, and continental levels. Strengthening community health systems and ensuring effective coordination became critical for addressing health challenges at the grassroots level.
- The ongoing threat of **public health emergencies**, including outbreaks of infectious diseases and natural disasters, demanded continuous improvement in emergency preparedness and response capabilities. Further, coordinating responses across borders and ensuring adequate resources for preparedness were key challenges.
- Building and maintaining a **skilled health workforce** was a persistent challenge. Adequate training, retention, and distribution of healthcare professionals, especially in remote areas, were crucial for ensuring comprehensive healthcare delivery across the continent.
- **Adequate and sustainable health financing** remained a challenge, impacting the ability to invest in infrastructure, strengthening health systems, and procuring essential medical supplies. Additionally, mobilizing resources for health programs and initiatives requires innovative approaches.
- **Vaccine hesitancy** and challenges in ensuring equitable access to vaccines continued to hinder efforts to control infectious diseases.
- **Climate change and its impact on health** remain a major challenge with an increased frequency of climate-related health emergencies being recorded in particular in Africa.

Climate change and its impact on health remain a major challenge with an increased frequency of climate-related health emergencies being recorded in particular in Africa.



8

Key Lessons Learnt

Despite the many challenges, competing health priorities, and limited resources, there were several lessons learnt during the 2023 implementation period that will help to guide Africa CDC to better address the identified implementations gaps in the future:

- Proper engagement and utilization of a well-trained Community Health Works enhances Risk Communication and Community Engagement (RCCE) activities within communities for increased awareness of public health concerns, supports surveillance events mainly contact tracing and active case finding, facilitating timely referrals for further management and treatment.
- Empowered communities and healthcare workers increased capacity to address health challenges and promoted well-being at the grassroots level.
- Developing legal frameworks and enhancing capacity building across Member States will continue to play a crucial role in safeguarding public health, responding to outbreaks, and promoting a healthier future for the continent.
- Peer-to-peer exchange programmes across Africa lead to increased knowledge, skills, and competencies, strengthened collaboration and networking for both mentor and mentee institutions, and give an opportunity to identify key challenges and draw an action plan to fast-track mitigations.
- Lack of national multi-hazard public health emergency preparedness and response policies results in delays in preparedness and response planning at Member State levels derailing the execution of emergency response activities and aggravating the adverse effects of a pandemic.
- Through regular engagements collaboration and proper coordination with stakeholders and other key players, planning and execution/ implementation of programs is seamless as it avoids duplication of efforts and ensures a systematic and comprehensive approach to addressing public health concerns.
- Strong political commitment from Member States is a prerequisite for the successful implementation of a regional program.
- Strengthened governance and diplomacy ensured effective leadership and representation of Africa's voice on the global stage.
- The knowledge hub concept, which includes deploying platforms to facilitate knowledge and information sharing among Member States supports sharing critical, timely, and lifesaving information with healthcare workers in different geographical locations using virtual conferencing setups.
- The establishment of continental technical working groups plays a vital role in advancing the public health agenda across the continent.

Looking Ahead

In 2024, the Africa CDC will continue to strengthen public health systems and support Member States to effectively detect, and efficiently respond to disease threats. Building on the progress in 2023, Africa CDC will continue to implement its operational autonomy, strengthening the institutional capacity, efficiency, transparency and accountability. The Africa CDC stands ready to secure the health of Africa by implementing its key programmatic priorities:

1. Strengthen institutional capacity, operational autonomy, financial sustainability, efficiency and effectiveness of the Africa CDC to deliver on its mandate in securing the health of Africa.
2. Strengthen Member States capacity for disease surveillance and emergency preparedness, prevention, and response through a coordinated approach for data management, sharing, and information systems, and evidence based public health interventions.
3. Support the development and strengthening of National Public Health Institutions (NPHIs), strengthening health systems, and workforce development in Member States
4. Support Member States develop and utilize the Community Health strategy and investment cases framework document as well as harmonized joint country support plan for community health for guaranteed harmony and alignment among key stakeholders toward a robust community health workforce, programs and systems.
5. Sustain and strengthen ongoing efforts in strengthening laboratory systems with a specific emphasis on developing diagnostic capabilities across the region. This will include the scale up the application of pathogen genomics to enhance early warning surveillance capabilities, promoting more accurate and timely disease detection.
6. Intensify strategic efforts towards increased end-to-end local manufacturing of health commodities including vaccines, therapeutics and diagnostics, as well as strategic investments improve the efficiency of the clinical research ecosystem.

The Africa CDC will continue build on the momentum and deliver support to Member States in the prevention, timely detection, and response to public health threats. The Africa CDC will accelerate its institutional operations to make it world class, fit for purpose, and responsive to the needs of the continent.



Annexes

Africa CDC Published Papers Indexed in Pubmed Central (PMC) in 2023

PubMed® comprises more than 36 million citations for biomedical literature from MEDLINE, life science journals, and online books. Citations may include links to full-text content from PubMed Central and publisher websites.

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SADC accounts for 72.5%

252,934
Cases

4,187
Deaths

1.6%
CFR





MISSION

Strengthen Africa's public health institutions and systems' capacities, capabilities, and partnerships to timely prevent, detect, and respond effectively to public health threats and outbreaks based on evidence-based policies, programs, and interventions.

VISION

A safer, healthier, and prosperous Africa, in which Member States are prepared to timely prevent, detect, and respond effectively to public health threats and outbreaks.

CORE VALUES

- Professionalism
- Evidence-based Decision-making
- Integrity
- Excellence
- Equity



Aspiration statement

To become a world-class, self-sustaining, and agile institution that champions African health security, sets the African public health agenda, and leads and coordinates continental efforts driven by a One Health approach.

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