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**THIRD SESSION OF THE AFRICAN UNION CONFERENCE  
OF MINISTERS OF HEALTH  
9– 13 APRIL 2007  
JOHANNESBURG, SOUTH AFRICA**

**CAMH/MIN/3(III)**

Theme: ***“Strengthening of Health Systems for Equity and  
Development in Africa”***

**MINISTERS’ MEETING  
10 - 13 APRIL 2007**

**REPORT OF THE AU COMMISSION CHAIRPERSON**

## Introduction

1. The problem of controlling the disease-burden continues to be one of the major challenges in Africa and is viewed as a constraint to socio-economic development. The AU Conference of Ministers of Health (CAMH) provides an opportunity for African Health Ministers and partners to share experiences and best practices on how to improve the health situation in Africa. It is also an opportunity for the AU Commission to update Ministers of Health from AU Member States on developments in the health sector.

## Situation Analysis

2. The health sector in Africa is severely constrained by limited infrastructure, weak health systems, inadequate budgetary allocations, and increasing erosion of the human resources for health. Moreover, the sector is also plagued by heavy disease burden including the HIV/AIDS pandemic whose devastating impact continues to affect millions of lives, communities, economies, and social institutions. Malaria and other infectious diseases exert tremendous pressure and remain formidable challenges for public health in Africa. There are also several health problems caused by malnutrition, poverty, violence and injury as well as underdevelopment.

## Summary of Activities of the AU Commission

3. In an effort to address the challenges in the areas of health, nutrition and population, the Commission has been engaged in developing, promoting and implementing different policy instruments and advocacy tools during the period under consideration. Some of these include:

- Development of the AUC HIV/AIDS Strategic Plan and AIDS Watch Africa (AWA) Strategic Framework;
- Launch of “2006 as the Year for HIV/AIDS Prevention”
- Revising the Africa Regional Nutritional Strategy;
- Development and adoption of the Continental Policy Framework for Sexual and Reproductive Health and Rights in Africa and Elaboration and adoption, by African Ministers of Health, of the Maputo Plan of Action on Sexual and Reproductive Health and Rights in Africa;
- Special Summit on HIV/AIDS, TB and Malaria (ATM), Abuja, May 2006;
- Development of a Draft Plan of Action for the Prevention of Violence in Africa;
- Elaboration of the Draft Pharmaceutical Manufacturing Plan for Africa;
- Revitalization of the role of traditional Medicines in Africa;
- Preparation of the “State of Africa Population Report 2006”;
- Preparations for the convening of the 3<sup>rd</sup> AU Conference of Ministers of Health, and the 6<sup>th</sup> Session of the General Assembly of the African Population Commission.

## **Development of the AUC HIV/AIDS Strategic Plan and AIDS Watch Africa (AWA) Strategic Framework**

4. In 2005 the AU Commission developed the AUC HIV/AIDS Strategic Plan and AIDS Watch Africa (AWA) Strategic Framework. To re-energize AWA as an advocacy platform at Heads of State level, a Meeting of Advisors on HIV/AIDS to AWA Heads of State and Government was convened on 4 – 5 September 2006 in Addis Ababa. The Advisors elaborated an Action Plan to guide them as they coordinate the responsibilities allocated to each AWA Member at the July 2006 Banjul Meeting. Among others, they decided to meet twice a year to compare notes and prepare progress reports to the AWA Chairperson, Head of State of Nigeria. The second Meeting of the AWA Advisors is took place in January 2007 where plans were finalized for operationalization.

### **Launch of “2006 as the Year for HIV/AIDS Prevention”**

5. On 11 April 2006 the AU in collaboration with WHO, UNAIDS, ECA, UNICEF and other UN Agencies organized a programme to Launch “2006 as the Year for HIV/AIDS Prevention”, as was declared by the Resolution of the WHO Regional Director for Africa. In attendance was, among others, H.E. the Prime Minister of Ethiopia, the AU Commission Chairperson, Executives of WHO and UNAIDS and the Diplomatic Corps. This is a campaign aimed at focusing efforts on HIV/AIDS Prevention as the only sure way to conquer the pandemic in the absence of a cure and an effective vaccine.

### **Global Steering Committee on scaling up Towards “Universal Access to Prevention, Treatment, Care and Support**

6. Following the establishment of the Global Steering Committee on scaling up Towards HIV/AIDS “*Universal Access to Prevention, Treatment, Care and Support*” by the 2005 World Summit, the AU Commission, in collaboration with UNAIDS and WHO coordinated country consultations that culminated in the Continental Consultative Meeting in Brazzaville, Congo from 6-8 March 2006. The consultation adopted the Brazzaville Commitment on “*Scaling up Towards Universal Access to HIV and AIDS prevention, treatment, care and support in Africa by 2010*”. This was submitted to the Global Steering Committee (GTT) together with contributions from other continents. The Report of the GTT was submitted to the UN General Assembly Special Session on AIDS in June 2006.

### **Abuja Special Summit on HIV/AIDS, TB and Malaria (ATM), May 2006**

7. The Special Summit on HIV/AIDS, TB and Malaria, Abuja, Nigeria, 2 – 4 May 2006 adopted the following documents:

- (i) Abuja Call for Accelerated Action Towards Universal Access to HIV/AIDS, Tuberculosis and Malaria (ATM) Services in Africa;

- (ii) Africa's Common Position to the June 2006 UN General Assembly Special Session/High Level Meeting on HIV/AIDS. Held in New York, 31 May to 2 June 2006. Annexed to the Common Position is the Brazzaville Commitment for Accelerated Action on Scaling up Towards Universal Access to HIV/AIDS Prevention, Treatment, Care and Support in Africa by 2010.
- (iii) Continental Framework for Harmonization of Approaches Among Member States and Integration of Policies on Human Rights and People Infected and Affected by HIV/AIDS in Africa;

8. The outcomes of the Special Summit on ATM aim at acceleration of efforts towards universal access to comprehensive HIV/AIDS, TB and Malaria services through access to prevention, treatment, care and support by all people everywhere.

9. A draft Implementation Plan for the Abuja Special Summit outcomes has been drafted for presentation to the AU Conference of Ministers of Health in April 2007.

#### **The AU/AAVP Regional Consultation on HIV Vaccine Research and Development**

10. HIV/AIDS prevention is important in the absence of a cure. One way of prevention being explored is a vaccine. The African AIDS Vaccine Programme (AAVP) was established to address this area. The AAVP operates within the framework of the International AIDS Vaccine Initiative (IAVI). It urges and supports African Researchers and Research Institutions to collaborate with 1<sup>st</sup> World Research institutions and development partners to carry out HIV research in Africa, with African Scientists. As a follow up to the 3<sup>rd</sup> African Forum of AAVP which was held in Yaoundé, Cameroon, in October 2005, the AU/AAVP Regional Consultation on HIV Vaccine Research and Development was organized in October 2006 in Addis Ababa, and adopted constructive recommendations for the continent to consider.

#### **Re-launch of the Malaria Eradication Campaign in Africa**

11. After a period of satisfactory control, malaria resurged in Africa near the end of the last century and not only became epidemic once more, but also spread to new areas. This was due to many challenges such as drug and insecticide resistance, global warming, environmental degradation and conflicts. At the same time malaria was eradicated in many countries in the World, including a few in Africa. If this could happen in some countries, it can happen in others. It is with this conviction and in implementation of the May 2006 Abuja Special Summit on ATM commitments that the AU, in collaboration with Member States, RECs and UN Partners, plans to launch the Malaria Eradication Campaign in 2007. The AU, in collaboration with the Multilateral Initiative on Malaria (MIM), is also calling for support to health research in Africa, particularly for malaria control. In this regard, MIM seconded a Research Expert to the AU between June and November 2006 to address this neglected area.

## **Polio Eradication**

12. In 2003, there was hope that Polio would be eradicated by 2005. At that time, only three countries were reporting Polio transmission. However, this was not to be due to some challenges in Africa and Asia. In Africa, Polio got exported to countries where transmission had stopped; from West Africa to the other four regions. To stop children from dying or being maimed by a disease which is easy to prevent with an effective and easy-to-administer vaccine, every individual has a role to educate the public and disseminate correct information so that all children get immunized. At the AU Commission, the Chairperson is taking a lead in urging Heads of State and Government of affected countries to intensify efforts to have all children immunized.

## **Control of HIV/AIDS at Workplace**

13. In line with the Abuja Declaration on HIV/AIDS, Tuberculosis and other Related Infectious Diseases (2001) and subsequent commitments of African Leaders, and the AU Commission HIV/AIDS Strategic Plan (2005-2007), the Commission with the support of the ILO, organized a workshop on HIV/AIDS at Workplace (AU Commission), which took place at ILRI, Addis Ababa 17-18 October 2006. The workshop adopted the AU Commission Workplace Policy on HIV/AIDS. This policy will be processed for adoption through normal AU channels.

## **The Decade of African Traditional Medicine (2001-2010)**

14. The 2<sup>nd</sup> Ordinary Session of the AU Conference of Ministers of Health recommended that a Mid-Term review of the decade of African Traditional Medicine be undertaken. In this respect the Commission with the support of the South African government conducted an assessment of the state of African Traditional Medicine as an initial step to the mid term review of the decade.

## **Nutrition**

15. In the field of nutrition, the Commission would like to report that the Revised African Regional Nutritional Strategy (ARNS) during the AU Conference of African Ministers of Health in Botswana in October 2005 was endorsed by the African Union Assembly in January 2006. The Commission is now in the process of establishing a Nutrition Task Force whose Terms of Reference are being finalized. The actual ARNS document is being processed for printing and will be circulated to Member States. An Experts Meeting to harmonize the ARNS and the NEPAD Nutrition Initiative and adopt an action plan with specific timeframes for the implementation of the ARNS took place from December 4-8, 2006 in Brazzaville, Congo. There was also a Food Security Summit in Abuja, Nigeria during the same period.

## Highly Pathogenic Avian Influenza (HPAI)

16. Highly Pathogenic Avian Influenza (HPAI) caused by the H5N1 virus is now pandemic in Asia having established an ecological niche in poultry. The disease poses a very big challenge for Africa than any other part of the world as the regions is not adequately prepared. Eight countries in the African Union have reported cases of bird flu and these include Nigeria, Egypt, Niger, Cameroon, Burkina Faso, Cote d'Ivoire, Sudan and Djibouti. Out of these countries Egypt and Djibouti have reported human cases with Egypt also reporting some fatalities.

17. The 2<sup>nd</sup> Session of the Conference of African Ministers of Health, which was held in Gaborone, Botswana from 10-14 October 2005, requested the AU Commission to put in place early warning systems to facilitate emergency preparedness and response to health emergencies such as the Avian Flu and asked the World Health Organization to help countries in Africa to stockpile drugs in case the continent is hit by the pandemic.

18. In line with this recommendation the African Union, in collaboration with WHO convened a meeting on HPAI Preparedness and Response in January 2006 in Brazzaville, Congo which brought together experts from both the animal and human health sectors. The WHO has already adopted a Preparedness Plan for the AFRO Region and the AU will soon be adopting a Preparedness Plan for the entire AU.

## Violence Prevention in Africa

19. The First Session of African Union (AU) Conference of Ministers of Health, which took place in Tripoli, Libya in April 2003, considered the World Report on Violence and Health published by the World Health Organization in 2002 and made some recommendations to the Executive Council and Assembly in Maputo, Mozambique for adoption. The Executive Council endorsed the recommendations and requested AU Member States to declare **2005** as the “**African year of Prevention of Violence**”. The Executive Council further urged Member States to prioritize the development and implementation of multi-sectoral plans of action for the prevention of violence and enhanced systems for the collection of data on violence.

20. The AU has been a key partner in the continent and the AU Commission in collaboration with the WHO prepared a Draft Report on the Situation Analysis of Violence and Health in Africa which is yet to be finalized. The report analyzes the scope and magnitude of violence in the region and a reflection on what prevention initiatives exist. The report was also intended to provide the basis for a Continental Strategy for Violence Prevention and Control in Africa. The Commission has developed a Draft Plan of Action for Violence Prevention in Africa which will be considered by the Third Session of AU Conference of Ministers of Health.

### **Pharmaceutical Manufacturing Plan for Africa**

21. At its 4th Ordinary Session from 30-31 January 2005 in Abuja, Nigeria, the AU Assembly of African Heads of State and Government adopted a decision Assembly/AU/Dec.55 (IV) reaffirming its commitments to invest increased resources in health and to address obstacles impeding their utilization. Within such context, Member States were urged to take the lead in TRIPS negotiations and implement measures identified for promoting access to affordable generic drugs. Generic drugs are those without brand names and expensive packaging. The Assembly further RESOLVED to take all the necessary measures to produce with the support of the international community, quality generic drugs in Africa, supporting industrial development and making full use of the flexibility in international trade law and REQUESTED the AU Commission within the framework of NEPAD to lead in the development of a Pharmaceutical Manufacturing Plan for Africa.

22. A Draft document has now been prepared which will be considered by the Third Session of AU Conference of Ministers of Health

### **Co-Ordination of HIV/AIDS, TB and Malaria Response**

23. Since there are many players at different levels in the implementation of HIV/AIDS, TB and Malaria Strategies, it is necessary to coordinate and harmonize programmes and actions at various levels. It is in this regard that the AU Commission, in collaboration with UNAIDS, ECA, WHO and other UN Agencies, organized an Inter-Agency Meeting on Coordination and Harmonization of HIV/AIDS, TB and Malaria Strategies in Addis Ababa, 6 – 8 November 2006. The main objectives were to work out how the AU and RECs could coordinate better and harmonize their programmes and work towards a common agenda. The UN Agencies and ADB were encouraged to coordinate and improve their support to AU and, including capacity building and technical support. The AU and RECs were advised to endeavour to collaborate in planning and operationalizing their major programmes. The AU was urged to bring RECs together while the UN Agencies were advised to set up a Task Force to coordinate their support. As a follow up to the Inter-Agency meeting the AU Commission collaborated in the Regional Stakeholders Review of the Five-year HIV/AIDS Strategic Plan of the East African Community, Arusha, Tanzania, 4 – 5 December 2005. In the same vein, the AU participated in the International Conference on the Social Sciences and HIV/AIDS in Africa: New Insights and Policy Perspectives, Addis Ababa, 20 – 22 November 2006.

### **Sexual and Reproductive Health and Rights**

24. During the Second Session of the AU Conference of Ministers of Health in Gaborone, Botswana (October 2005), Health Ministers adopted the Continental Policy Framework on Sexual and Reproductive Health and Rights (SRHR) and decided to convene a Special Session in 2006, to further operationalize the Policy Framework. The

Government of the Republic of Mozambique agreed to host the Meeting. This Framework was endorsed by our Heads of State and Government at the Khartoum Summit in January 2006. Accordingly, the Special Session was held in Maputo, Mozambique, from 18 to 22 September 2006 which came up with the **Maputo Plan of Action** for the Operationalization of the SRHR Policy Framework. The Maputo Plan of Action was endorsed by the AU Summit in January 2007.

### **The State of African Population Report 2006**

25. The African Union Commission (AUC) is spearheading the promotion, coordination and harmonization of population and development policies, strategies and programmes on the Continent. The African Population Commission (APC), which is composed of high level national population focal points, is providing the necessary guidance and direction to the AUC in population and related matters. One of the activities being carried out by the APC and its Secretariat, the AU Commission, is preparing "**The State of African Population Report**" every two years. The first issue was released in 2004 and second was due in 2006 and will be launched during the 6<sup>th</sup> Session of the African Population Commission, which will take place in South Africa from July 16-17, 2007.

### **Child Survival and Development in Africa**

26. It will be recalled that in Decision Assembly/AU/Dec.75(V), adopted in July 2005, on "*Accelerating Action for Child Survival and Development in Africa to Meet the MDGs*" , the AU Commission was mandated to develop a roadmap on Child Survival in collaboration with UNICEF and WHO. Subsequently, a draft has been developed and the AU Commission is in the process of finalizing it. The final draft of the document will be presented to the Mid-Term Review Meeting on the African Common Position on Children to be in May 2007.

### **CONCLUSION**

27. From the foregoing it is clear that the AU Commission has and continues to carry out a number of activities aimed at improving the health situation on the continent. The Commission could, however, have done more if it was operating at full capacity. Presently there are only 2 regular staff members working in the field of health and population. The Commission will be increasing the staff complement in this area during the course of 2007 to cope with the increasing workload.