



African Agency, Agenda-setting in Public Health: The Africa Centre for Disease Control in Perspective

By:

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The African Union (AU) has reached its twentieth year, and this milestone offers an opportunity to reflect upon African agency and agenda-setting regarding the development of continental norms and practices within the AU's public health sphere of competence. This is particularly relevant in view of the current global pandemic. This paper argues that [the establishment of the Africa Centre for Disease Control \(CDC\) under the Statute of the Africa CDC](#), its mechanisms and processes, especially in the AU's continental response to COVID-19, advances African agency and agenda-setting in public health. Importantly, some of the actions of the AU, as part of its continental response to COVID-19, require attention not only because they form the central argument of this paper but also because the scant attention paid to the AU's continental response to the pandemic by scholars and others, in this regard.

Setting the Stage, Owning the Stage: African Agency and Agenda-Setting in Public Health

[The Africa Health Strategy \(AHS\) 2016-2030](#) is the key document setting out the strategic health objectives for the AU, with a policy framework that is premised on policy commitments and instruments, including '[Agenda 2063: The African We Want](#)' and the [2030 Agenda for Sustainable Development](#). The AHS 2016–2030 recognises the importance of developing new paradigms in public health governance that are 'effective' and 'Africa-driven'. This was based on the earlier assessment of [AHS 2007-2015](#), which was found to be challenged by inadequate harmonisation and weak multi-sectoral approaches to health care, a lack of cohesiveness in health policy frameworks, insufficient health-care financing and health information supply and procurement and supply chain management challenges affecting essential medical and health supplies security as well as gaps in health research, innovation and technology.

At the core of this paradigm shift in public health governance is the Africa CDC, which was [founded upon](#), inter alia, strategic leadership and agency as an African-owned institution run by Africans and managing public health emergencies in Africa while building the capacity of African states and institutions as well as their credibility in public health management. These foundational principles have been brought to the fore by the AU's response to COVID-19.

The AU recognised the need for an Africa CDC as a platform for knowledge-sharing and capacity building in response to public health emergencies and threats [in July 2013](#). Following the Ebola virus outbreak in West Africa in 2014, the AU Executive Council [requested the AU Commission](#) to ensure the establishment of the Africa CDC and its Regional Coordinating Centres, as well as their functioning, by mid-2015. It was endorsed [in January 2015](#) by the AU Assembly, [created in January 2016](#), and [launched in January 2017](#) as [a specialised technical institution](#) of the AU to ensure preparedness for public health emergencies, support public health initiatives of member states and strengthen capacity building of public health institutions of member states.

Even during the beginning years of the Africa CDC [with its Institute for Pathogen Genomics \(IPG\) for disease surveillance](#), the stage was set for a

continental response to the COVID-19 outbreak. In fact, [continental preparedness](#) preceded the declaration of a COVID-19 pandemic by the World Health Organisation (WHO) on 11 March 2020. As early as 27 January 2020, the Africa CDC [activated](#) its Emergency Operations Centre and Incident Management System (IMS) for the outbreak of COVID-19. It developed an Incident Action Plan and established the Africa Task Force for Coronavirus (AFTCOR) on 3 February 2020. On 22 February 2020, the AU summoned an emergency meeting of Ministers of Health of member states which began preparations, with the Africa CDC, [for the development of a guiding framework for combatting COVID-19 in Africa](#). This meeting resulted in the adoption of the Africa Joint Continental Strategy—the key soft law document for the AU's response to COVID-19 that sets out the primary strategy of the AU for addressing the pandemic. The Joint Continental Strategy [informs](#) the decisions, policies and practices of the AU as well as its member states in this regard and provides for the coordination of multilateral and multi-level collaborative public health efforts for surveillance, prevention, diagnosis, treatment and control of COVID-19. The prosecution of the Joint Continental Strategy has involved the establishment of an elaborate operational matrix that has seen the strengthening of national public health institutions (NPHIs) through information-sharing and capacity building.

Innovating around the Joint Continental Strategy, the Africa CDC undertook certain key initiatives. It established a [Partnership on Accelerated COVID-19 Testing](#) (PACT), targeted at accelerated testing for the virus in member states; and a [Consortium for COVID-19 Vaccine Clinical Trial](#) (CONCVACT) to secure late-stage vaccine clinical trials in Africa and to ensure the effective rollout of vaccines by removing impediments to clinical trials while ensuring widespread delivery and uptake of vaccines across Africa. The Africa CDC adopted a [COVID-19 Vaccine Development and Access Strategy](#) and established the [African Vaccine Acquisition Trust](#) (AVAT), which was able to secure enough vaccines for about a third of AU citizens even in the face of vaccine nationalism by Western countries. It also established the [Trusted Travel Platform](#) to simplify the verification of test results and public health documentation for travellers; it also launched the Africa Medical Supplies Platform (AMPS) as a ['single online marketplace to enable the supply of COVID-19-related critical medical equipment in Africa,](#)' which has [strengthened the bargaining power of AU](#)

[member states](#) and supports local manufacturers—in addition to a myriad of multi-sectoral interventions undertaken.

AU member states have consistently had to contend with poor democratic governance, corruption and a deficit of vital public assets for combatting public health emergencies, and the AU struggles with its chronic problem of underfunding. Despite this, the AU has successfully established a framework of institutions, processes and networks for addressing public health concerns by informing the decisions, policies and practices of the AU and member states as well as coordinating public health efforts of relevant stakeholders. Poor implementation has notoriously plagued the AU, which is accused of being quick to establish mechanisms but slow in translating them into effective outcomes.

Yet, the Africa CDC and the continental response to COVID-19 stand as an instance of the successful and innovative implementation of the AU's policy and processual framework with tangible deliverables to the benefit of AU citizens. In its very short period of existence, the Africa CDC has been able to fashion itself into the formidable technical and operational powerhouse it has become. In the process, it has [garnered recognition and accolades](#) for its critical role in responding to the COVID-19 pandemic at sub-regional, regional and international levels. Very recently, at the 35th ordinary session of the Assembly of Heads of State and Government of the African Union in Addis Ababa, Ethiopia, the Africa CDC [was elevated to an autonomous health agency of the AU](#), a factor that has important implications for its decision-making and financing. The Africa CDC is responsible for beginning a new public health order in Africa [with a capacious role for regional organisations in public health governance](#).

The Africa CDC and the AU's continental response to the current pandemic exemplify the importance of agency, agenda-setting and strategic leadership in driving continental norms and development. By doing so, it has advanced the continuity of African sagacity beyond public health but also for reform of the AU, [aspirations of supranational powers by the AU](#) and trade multilateralism under the [African Continental Free Trade Agreement](#) (AfCFTA). In furtherance of the AHS 2016–2030, the AU has been able to leverage the Africa CDC in the establishment of a framework for early warning, surveillance, multi-level and multilateral partnerships and collaborations, capacity building, resource

mobilisation and policy harmonisation in response to not just the current pandemic specifically, but more general public health. The Africa CDC and the AU's continental response to COVID-19, despite the problems of the AU, are instructive on how leadership, agency and agenda-setting advance continental norms and drive development. They are also instructive on how the AU can use its normative instruments and processes in public health governance, including providing a template for the management of pandemics. In this regard, the AU should be proud of its achievement thus far.

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