



**AFRICAN UNION PERMANENT REPRESENTATIVES' COMMITTEE
(PRC) BRIEFING ON THE OUTBREAKS OF COMMUNICABLE
DISEASES OF 2016 IN DIFFERENT PARTS OF AFRICA
16th AUGUST 2016**

ADDIS ABABA, ETHIOPIA

**Statement by
Amb. Olawale Maiyegun
Director of Social Affairs**

***Excellences
Distinguished Guests
Ladies and Gentlemen***

On behalf of the Chairperson of the African Union Commission, H.E Dr. Nkosazana Dlamini Zuma and the Commissioner for Social Affairs, Dr. Mustapha Sidiki Kaloko, I wish to welcome you all to this important briefing of the PRC on the outbreaks of communicable diseases in Africa. This is the second time that the Department of Social Affairs is organizing a briefing for the Diplomatic Corp during the African Humanitarian Week in collaboration with UNOCHA.

The first briefing took place in August 2014 that later led to the AU Peace and Security Council Decision on 19 August 2014 authorizing “the immediate deployment of an AU-led Military and Civilian Humanitarian Mission, comprising medical doctors, nurses and other medical and paramedical personnel, as well as military personnel, as required for the effectiveness and protection of the Mission”. This led to the establishment of the AU Support to Ebola Outbreak in West Africa (ASEOWA) with the primary objective to contribute to the on-going efforts of the national and international community to stop the Ebola transmission in the affected Member States, prevent international spread and contribute to re-building the health systems.

The overall objective of this briefing is to raise awareness about the spread of communicable diseases in Africa to inform decisions at the highest levels of the AU and its Member States and to mobilize support from a broad range of stakeholders for concrete actions that address the impacts of communicable diseases.

The specific objectives are to:

1. Provide a situational awareness on the recent epidemics of communicable diseases in Africa and public efforts at local, national and regional levels to prepare as well as to responding to the outbreaks;
2. Communicate to the Diplomatic Corp on anticipated communicable diseases public health threats for the coming 6 months.

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Ladies and gentlemen**

While outbreaks of emerging and re-emerging infectious diseases have surfaced all over the globe, no continent has been harder hit than Africa.

The Ebola epidemic was West Africa's first real experience with the virus, and it delivered some horrific shocks and surprises. What began as an epidemic outbreak quickly escalated into a humanitarian, social, economic, and security crisis. Schools, markets, businesses, airlines, shipping routes, and borders closed. The epidemic claimed the lives of more than 11,300 people and infected over 28,500 and brought devastation to families, communities and the health and economic systems of all 3 most affected countries in West Africa.

As I am speaking, there are many ongoing outbreaks in Africa. Yellow Fever in Angola and in Democratic Republic of The Congo (DRC), Cholera in Central African Republic just to name few.

As of 4 August 2016, a total of 3867 suspected cases have been reported, of which 879 are laboratory confirmed in Angola. The total number of reported deaths is 369, of which 119 were reported among confirmed cases.

As of 8 August, the DRC has reported a total of 2269 suspected cases. Out of 1943 samples analyzed in DRC 74 cases have been confirmed including 16 deaths.

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In the last two decades, the global health landscape has undergone rapid transformation. People around the world are living longer than ever before, and the population is getting older. The number of people in the world is growing. Many countries have made remarkable progress in preventing infectious diseases. As a result, disease burden is increasingly defined by disability instead of premature mortality. The leading causes of death and disability have changed from communicable diseases in children to non-communicable diseases in adults. While there are clear trends at the global level, there is substantial variation across regions and countries.

Africa's tropical climate makes it a hot zone in the most literal sense. The continent is a breeding ground for emerging pathogens. Add to that environmental changes - such as global warming, desertification and destruction of the rain forests - rapid population growth and haphazard development, and the scene is set for pathogens to thrive.

Since the mid-1970s, the world has seen the emergence of 30 new infectious diseases and the return of such killers as malaria and cholera - many of them originating in the African continent.

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A major lesson learned from the Ebola outbreak is the need for the AU to put in place a medium to long term program to build Africa's capacity to deal with public health emergencies and threats in the future. Disease surveillance, detection, emergency preparedness for health and natural disasters and response are vital. Therefore, capacities and systems most needed to prevent, detect and respond to public health threats must be reinforced in order to ensure that in the medium to long term, African countries attain and possess all International Health Regulations (IHR) capacities and systems. It is in this context that the AUC fast tracked the establishment of the Africa Centers for Disease Control and Prevention (Africa CDC) and to ensure that the African CDC is operational its full capacity in the next couple of months as directed by the Policy Organs of the Union. The Africa CDC will partner with the WHO and other relevant stakeholders to assist our Member States to address gaps in International Health Regulations compliance, complementing one another and ensuring effectiveness.

Finally, allow me to say that we should not just stop at such one off briefing in a year, but to explore concrete steps and mechanisms for frequent interactions and effectively follow up.

I wish to thank you all for the support and particularly UNOCHA for its support.

Thank you for your attention.