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**ASEOWA EVALUATION WORKSHOP  
MAHE, SEYCHELLES  
26-28 OCTOBER 2015**

# DRAFT CONCEPT NOTE

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# Background

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The first cases of Ebola in West Africa are believed to have occurred in December 2013, in Guinea yet with scarce surveillance and laboratory capacities, it was not until three months later, on 21 March 2014, that a confirmed case was actually reported and the World Health Organization (WHO) was officially notified of the rapidly evolving EVD outbreak on 23 March 2014. By this time it had spread to neighboring countries of Sierra Leone and Liberia from Guinea. The outbreak of Ebola virus disease in parts of West Africa is the largest, longest, most severe, and most complex in the nearly four-decade history of this disease. On 8 August 2014, the WHO declared the epidemic to be a “**public health emergency of international concern**” (PHEIC).

In response to the growing humanitarian need and in the spirit of African Solidarity, the Peace and Security Council (PSC) of the African Union, at its 450th meeting held in Addis Ababa, on August 19, 2014 invoked Article 6 (f) of its mandate with regard to humanitarian action and disaster management and decided that “given the emergency situation caused by the Ebola outbreak, to authorize 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”.

The PSC mandate of ASEOWA, which was for an initial period of six months, ending 18 February 2015, has been extended twice to 31 December 2015, notwithstanding that the epidemic is contained and under control, though not completely eradicated in the three most affected countries. The PSC at its 520th meeting at which it decided to extend the mandate of ASEOWA till 31 December 2015, on the understanding that this extension of mandate does not necessarily compel ASEOWA to maintain physical presence in the three most affected countries.

At the peak of the epidemic, ASEOWA deployed to Liberia, Sierra Leone and Guinea, 855 African health workers and hundreds of local volunteers with objective of the

ongoing efforts of the national and international community to stop the Ebola transmission in the affected Member States, prevent international spread and rebuild the health systems.

Accordingly, ASEOWA supported epidemiological surveillance and response, Ebola case management, psychosocial support, community engagement, capacity building and health service restoration in the three most affected countries. ASEOWA volunteers were actively involved and performed creditably in containing the epidemic. Liberia has been declared Ebola free and the transmission rate in Sierra Leone and Guinea is almost at zero and the two countries are on the verge of being declared Ebola-free. Surveillance and response capacities have vastly improved and there is a very good picture of current chains of transmission, and know how to break them. There has been enough technical capacity building within the affected countries to enable them easily detect and respond timely to all disease threat including Ebola.

Given the vast improvements in the overall situation and the approach to zero new infections, the Commission in line with ASEOWA's CONOPs and Exit Strategy, commenced the gradual reduction in the number of volunteers in the theatre of operation from March 2015. By 30 September 2015, all the volunteers have returned leaving only the three Country's Team leaders to wind up before the end of ASEOWA mandate on 31 December 2015.

The African Union has experience in peacemaking and peacekeeping operations but it is the first time in responding to health emergency of this nature. Overall, the ASEOWA mission has been rated as a huge success but there were challenges. What were the challenges? What were the success stories? With the exit of the ASEOWA mission, it is time take stock of the AU response to Ebola and to properly document all that transpired and the lessons learned with a view to better responding to future public health emergency of international concern and indeed, all humanitarian crisis.

Learning from ASEOWA's creditable response to the EVD outbreak and the imperative of adequate preparations for future disasters, as well as the coming on board of the Africa CDC, the Assembly and the PSC requested the Commission to review the AU

Humanitarian Policy Framework with a view to developing a comprehensive disaster management protocol and filling all existing gaps in the coordination of the Commission's responses to disasters and emergencies consistent with Article 15 of the Protocol Relating to the Establishment of the Peace and Security Council and other relevant instruments for submission to the 26<sup>th</sup> Ordinary Session of the Assembly in January 2016.

It is in this context that the African Union Commission is planning to organize a three-day (3) ASEOWA Evaluation Workshop.

## General and Specific Objectives:

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The general objective of the post ASEOWA workshop is to evaluate the planning and execution of the mission in order to **better respond to future public health emergency of international concern and indeed, all emergencies and humanitarian crisis.**

### Specific Objectives

1. To review the processes of ASEOWA humanitarian response mission.
2. To assess success, constraints and/or challenges encountered and solutions provided,
3. To draw lessons learned and experiences gained
4. To validate a concept note of building Africa public health volunteers roster for epidemics and emergency disease management
5. To contribute to the review of AU Humanitarian Policy Framework to capture an expanded disaster management and recommendations to improve humanitarian missions in the future.

## Expected Outcome of the Meeting

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- A final ASEOWA mission report

- An ASEOWA mission review report
- Validated Concept Note for Public Health Volunteers Roster

## Participants

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About 70 participants are expected at the Evaluation Workshop including officials of the Commission, ASEOWA Head of Mission, Deputy Heads of mission/Country Team leads; and independent Experts; as well as Partner Countries and Organizations that supported ASEOWA.

## Date, Venue of Meeting and Organizational Matters

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The Workshop will take place from 26-28 October 2015 in **Mahe Seychelles, at the Kempinski Seychelles Resort**. The AUC and ASEOWA will be responsible for the invitations and the preparations of all related documents. Translation and interpretation services in English and French, and secretarial support, will be availed by the AUC.

## Documentation

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- ASEOWA CONOPs
- ASEOWA M&E reports
- Field reports (Epi surveillance, IPC, Restoration, Psychosocial and humanitarian, communication and logistic reports)
- Operational interim report
- Draft Concept Note of building Africa Public Health Volunteers Roster
- Any other related documents

# Contact Persons

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Additional information about the ASEOWA Evaluation Workshop can be obtained from:

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**Head of ASEOWA Mission Support**  
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The Commission has negotiated a package with the Coral Strand Hotel comprising of full board. For confirmation of participation and information about hotel accommodation and related logistical arrangements, please contact:

**Ms. Zula Afawork**  
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