

AFRICAN UNION

الاتحاد الأفريقي



UNION AFRICAINE

UNIÃO AFRICANA

Addis Ababa, Ethiopia

P. O. Box 3243

Telephone: 5517 700

Fax: 5517844

Website: www.au.int

EXECUTIVE COUNCIL

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**REPORT OF THE 4TH SPECIALIZED TECHNICAL COMMITTEE ON
HEALTH, POPULATION AND DRUG CONTROL**

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AddisAbaba,ETHIOPIA P. O.Box3243 Telephone: 011-5517700 Fax: 011-5517844

Website: www.au.int

**FOURTH ORDINARY SESSION OF THE AFRICAN UNION
SPECIALISED TECHNICAL COMMITTEE ON HEALTH,
POPULATION AND DRUG CONTROL (STC-HPDC-4) -4
4th; 5th,14th and 21st June 2022**

STC-HPDC-4/MIN/RPT

Original: English

**Theme: “Advancing health security and the socio-economic well-being of Africa’s
population: Value of nutrition as an intervention”**

Slogan: “Nutrition for Socio-Economic Development”

**REPORT OF THE MINISTERIAL MEETING OF FOURTH ORDINARY SESSION OF
THE AFRICAN UNION SPECIALISED TECHNICAL COMMITTEE ON HEALTH,
POPULATION AND DRUG CONTROL (STC-HPDC-4)
4th,5th ,14th and 21st June 2022**

DRAFT REPORT OF THE MINISTERS' MEETING

INTRODUCTION

1. The Ministers' Meeting of the Fourth Ordinary Session of the African Union Specialized Technical Committee on Health, Population and Drug Control (STC-HPDC-4) was held from 4-5 June 2022 in Cairo, Arab Republic of Egypt, under the theme "*Advancing Health Security and the Socio-economic Well-being of Africa's Population: Value of Nutrition as an Intervention*".
2. ATTENDANCE 4th to 5th April: The Meeting was attended by the following AU Member States: Twenty-one (21) out of 51 Member States were present. as follows: The People's Democratic Republic of Algeria, Central Africa Republic, Comoros, Republic of the Congo, Republic of Côte d'Ivoire, Democratic Republic of Congo, Arab Republic of Egypt, Federal Democratic Republic of Ethiopia, Republic of Liberia, Republic of Madagascar, Republic of Namibia, Republic of Rwanda, Sahrawi Arab Democratic Republic, Republic of Senegal, Republic of Seychelles, Republic of South Sudan, United Republic of Tanzania, Republic of Uganda, Republic of Zambia, and Republic of Zimbabwe.
3. Four (four (4) member states are under sanctions namely the Republics of Burkina Faso; Guinea; Mali and Sudan.
4. The following AU Organs, Regional Economic Communities, Inter-Governmental and Non-Governmental Organizations and cooperating partners were represented during the meeting: Food and Agriculture Organisation (FAO), International Committee of the Red Cross (ICRC) and United Nations Population Fund (UNFPA)

OPENING CEREMONY

5. The Commissioner for Health, Humanitarian Affairs and Social Development - H.E. Minata Samate Cessouma welcomed Honorable Ministers and distinguished members of the Health, Population and Drug Control Specialized Technical Committee to the Fourth Ordinary Session (STC-HPDC-4).
6. The Commissioner in her opening remarks underscored the importance of the African Union theme of the year "*Advancing health security and the socio-economic well-being of Africa's population: Value of Nutrition as an intervention* which is of particular interest to African Union Member States as they continue to rebuild socio-economic systems following the COVID-19 pandemic. She stated that "*Nutrition for Socio-Economic Development*" reinforces our common priority to maintain strong political momentum on nutrition across Africa, which calls upon us to consolidate our commitment to achieve Aspiration 1 of Agenda 2063, which envisages an African population with a high standard and quality of life, good health and well-nourished citizens.

7. Her Excellency further stated that the continent continues to experience an upsurge in public health problems due to the increased availability and use of mind-altering substances trafficked or produced locally. She also noted these challenges are more than just a threat to public health as they undermine the socio-political and economic stability of our continent. In conclusion, HE thanked all delegates and in particular the Arab Republic of Egypt for hosting the STC-HPDC-4.
8. The Honorable Minister of Health and Population of the Arab Republic of Egypt and the Outgoing Chairperson of third Specialised Technical Committee on Health Population and Drug Control (STC-HPDC-3) in his opening remarks appealed to his fellow ministers to use the opportunity provided by STC to advance the aspiration of the Agenda 2063, to reach every individual in our continent with healthcare coverage and access to nutrition as the world faces great uncertainty due to the recent events.
9. The Honorable Minister called for solidarity and reemphasized the significance of continuous and fruitful collaboration among the AU Member States and partners including international organizations, civil societies, NGOs, global funders, the pharmaceutical industry, and other stakeholders.

AGENDA ITEM 2: PROCEDURAL MATTERS
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Election of the Members of the Bureau for STC-HPDC-4:

10. In conformity with the AU Constitutive Act on the composition of the STC and the Rules and Procedures of the STC-HPDC and following due consultations amongst Member States, representative of the AU Office of the Legal Counsel announced the composition of the elected bureau as follows:

Designation	Region	Country
Chairperson	Central Africa	Democratic Republic of Congo
1st Vice-Chairperson	Eastern Africa	Republic of Tanzania
2nd Vice-Chairperson	Southern Africa	Republic of Namibia
3rd Vice-Chairperson	Western Africa	Republic of Côte d'Ivoire
Rapporteur	Northern Africa	Consultations on going

Announcement of the Members of the Bureau for Africa Population Experts Committee (APEC):

11. In conformity with the AU Constitutive Act on the composition of the STC and the Rules and Procedures of the STC-HPDC and following due consultations amongst Member States, the AU Office of the Legal Counsel announced the composition of the elected bureau as follows:

DESIGNATION	REGION	MEMBER STATE
Chairperson	Southern	Consultations ongoing
1st Vice-Chairperson	Northern	Consultations ongoing
2nd Vice-Chairperson	Central	Consultations ongoing
3rd Vice-Chairperson	Eastern	Republic of Kenya
Rapporteur	Western	Federal Republic of Nigeria

12. The Honorable Minister of Health and Population of the Arab Republic of Egypt, handed over the meeting to the newly elected Chairperson of the Bureau, Honorable Minister of Health of the Democratic Republic of Congo Dr Jean Jacques Mbungani. In his acceptance remarks, the incoming Chairperson thanked the outgoing Chairperson for the outstanding work he additionally thanked all the Honorable Ministers present for the confidence bestowed in the new Bureau. He reassured the Committee meeting that the new Bureau will work closely with the AU Commission during its tenure.

AGENDA ITEM 3: ADOPTION OF THE AGENDA AND PROGRAM OF WORK

13. The meeting adopted the Agenda and Program of Work and decided to proceed with briefing sessions and postpone the remaining of then agenda until a quorum for the meeting was reached:

AGENDA ITEM 4: BRIEFING SESSION

BRIEFING BY THE AFRICA CDC

14. H.E Dr Monique Nsanzabaganwa, Deputy Chairperson of the African Union Commission, updated the Honourable Ministers of the 4th STC-HPDC on the progress that had been made with the amendment of the Statute of the Africa Centres for Disease Prevention and Control (Africa CDC). H.E. Dr Monique recalled EX.CL/Dec.4 (XXXVIII) and EX.CL/Dec.1110(XXXVIII) decisions which instructed the Commission to operationalize Africa CDC. She proceeded to provide a briefing on the steps taken by the African Union Commission. H.E Dr Nsanzabaganwa further recalled the decision of the 35th Ordinary Session of the Assembly(Assembly/AU/Dec. 835(XXXV) , delegating its authority to the Executive Council to consider, during its July 2022 Session, the amendments to the Africa CDC Statute and the associated legal, structural and financial implications of the draft amendments to the Statue. .

15. H.E Dr Nsanzabaganwa provided an overview of the key main amendments to the Statute and invited Dr Ahmed Ogwel Ouma to walk the delegates through the detailed amendments.
16. The Ministers took note of the briefing and, on a point of order, suspended further discussion on the amendments to the draft Statute till a quorum was reached.

Briefing on the theme of the year “Strengthening Resilience in Nutrition and Food Security on the African Continent: Strengthening Agro-Food Systems, Health and Social Protection Systems for the Acceleration of Human, Social and Economic Capital Development

17. The acting Director for Health, Humanitarian Affairs Directorate Dr Margaret Agma briefed the Ministers of the STC-HPDC-4 on the theme of the year which was officially launched by the Deputy Chairperson of the African Union Commission H.E Dr. Monique Nsanzabaganwa. She noted the theme calls upon Member States and stakeholders including Regional Economic Communities, Civil Society Organizations, the private sectors, the UN, and other partners to secure greater political commitment and investment in nutrition and to address the ongoing food security challenges.
18. The focus of the theme of the year on food security and nutrition is to promote strong political momentum on nutrition across the African continent and at the highest level of decision-making. The activities being implemented provide an opportunity to strengthen continental commitment to end malnutrition in all its forms given in line with the following priorities.
19. The Ministers took note of the progress made in the implementation of the 2022 Theme of the Year.

Consideration of Cairo declaration on addressing drug use and substance use disorders among youth, children and women in Africa.

20. The representative of the Commission presented the Cairo declaration on addressing drug use and substance use disorders among youth, children and women in Africa preceded by a brief overview of the Pan African Epidemiology Network on Drug Use (PAENDU) report for This 2020 which highlighted an exponential rise in the number of young people and women treated for drug dependency and also the UNODC 2030 and 2050 projections on increased drug use on the continent.
21. Following deliberations, the Ministers took note of the draft Cairo declaration on addressing drug use and substance use disorders among youth, children and women in Africa with amendments.

AGENDA ITEM 5: ANY OTHER BUSINESS
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22. Delegation of the Republic of Côte d'Ivoire presented Center of Excellence Against Hunger and Malnutrition (CERFAM). The delegation further highlighted the activities undertaken by the Republic of Côte d'Ivoire and the request to the Commission to endorse the African Union (IA) of the Center of Excellence Against Hunger and Malnutrition (CERFAM).

23. This Centre, currently fully funded by Côte d'Ivoire, works in partnership with the World Food Program (WFP) which provides it with technical support. The Center aims to stimulate a dynamic relationship between African Union member states in terms of sharing good practices, lessons learned and innovative solutions for the elimination of hunger and malnutrition in all its forms. The Ivorian government seeks to promote the opportunities that the Center has on offer for AU member States.

SUSPENSION OF THE SITTING OF THE STC

24. The meeting was suspended and to reconvene virtually on the 14 June 2022 at 11:00 EAT,.

RECONVENING OF THE STC 14th June

Introduction

25. The chair of the bureau Honorable Minister of Health of the Democratic Republic of Congo Dr Jean Jacques Mbungani called the meeting to order once the quorum had been reached.

ATTENDANCE 14th June 2022

26. The Meeting was attended by the following thirty-five (35) AU Member States : People`s Democratic Republic of Algeria, Republic of Angola, Republic of Botswana, Republic of Burundi, Republic of Cote D'Ivoire, Republic of Chad, Democratic Republic of the Congo ,Republic of Djibouti, the Arab Republic of Egypt, Federal Democratic Republic of Ethiopia, State of Eritrea, Kingdom of Eswatini, Gabonese Republic, Republic of Ghana, The Gambia , Republic of Kenya, Kingdom of Lesotho, Republic of Malawi, Republic of Mauritius, Kingdom of Morocco, Republic of Madagascar, Republic of Mozambique, Republic of the Niger, Federal Republic of Nigeria, Republic of Namibia, Republic of Rwanda, Republic of Senegal, Federal Republic of Somalia, the Republic of South Africa, Republic of South Sudan, Republic of Togo, United Republic of Tanzania, Republic of Uganda, Republic of Zambia, the Republic of Zimbabwe.

AGENDA ITEM 1: REVIEW OF THE DRAFT AMENDED STATUE OF THE AFRICA CENTRES FOR DISEASE CONTROL AND PREVENTION (CONTINUED)

27. Hon. Ministers requested the chair to proceed by reading the articles of the draft Statue article by article. In addition, the concern was raised that the comments that had been made by experts were not included in the version of the Statute that was circulated.

28. Further concern was raised with regards to Article 3e, under Objectives and Functions of the Statute, which states that Africa CDC's strategic objectives shall include "*Declaring PHECS in consultation with relevant stakeholders*". Honorable Ministers indicated that such an additional mandate requires careful review by the AU Member States to ensure alignment with similar global instruments and the International Health Regulations. Ministers were of the opinion that Member States were not given

adequate time to consult and review the Statute amendments and requested more time to review the Statute.

29. The representative of the Africa CDC in response explained the steps and processes leading to the consideration of the Statute by the Executive Council scheduled in July, 2022. He further reminded the honorable delegates on the urgency of the Heads of State and Government decision to fully operationalize Africa CDC and pleaded to Member States to intervene in alignment with the decision and direction of Heads of State and Government.
30. Ministers , considered proceeding with the consideration of the draft Statute and to place the consideration of Article 3 on hold. Following extensive deliberations however, eighteen-member states requested more time to consider the statute.
31. 32. Subsequent to the guidance of the Office of the Legal Counsel and the requirement to report to the 44 session of the Executive Council, the consideration of the draft Statute was adjourned to the 21st June at 11:00am to allow for member states to study the draft Statute and communicate inputs to the Africa CDC

AGENDA ITEM 2: CONSIDERATION OF THE REPORT OF THE MEETING OF EXPERTS OF STC-HPDC-4

32. The Acting Director of the Health and Humanitarian Affairs directorate presented the Experts report highlighted the summary recommendations under each thematic areas of Health, Nutrition, Population and Drug Control.
33. The Honorable Ministers of the 4th STC-HPDC considered the recommendations from the Experts as follows:

SECTORIAL SESSION OUTCOMES - HEALTH

Biosafety and Biosecurity Legal Framework

34. The Ministers took note of the expert recommendations on the Biosafety and Biosecurity Legal Framework. Following deliberations, the Ministers endorsed Framework the following recommendations:
 - i. Excluded Domain 7 on proliferation of biological weapons (as this is already covered in other international statutes)
 - ii. Requested Member States to utilize the Legal Framework to guide the development of country specific legal instruments and subsequent policy guidance where legal instruments for biosafety and biosecurity do not exist.
 - iii. Called upon on Member States to use the Legal Framework as a benchmarking tool to review and complete legal mapping of existing legal instruments to identify potential gaps and barriers.

The Legal Framework for Infection Prevention and Control in Healthcare Facilities (IPC);

35. The Ministers took note of the expert recommendations and endorsed the Legal Framework for Infection Prevention and Control in Healthcare Facilities (IPC) without any amendments.

The Campaign on Accelerated Reduction of Maternal Mortality in Africa (CARMMA) Plus Draft Proposal and its draft Accountability Partnership Framework and Action Plan

36. The Ministers took note of the expert recommendations on the Campaign on Accelerated Reduction of Maternal Mortality in Africa (CARMMA) Plus proposal and its Accountability Partnership Framework and Action Plan. Following deliberations, the Ministers endorse the CARMMA) Plus proposal and its Accountability Partnership Framework and Action Plan with the following recommendations:

- I. Requested the Commission to include issues of ending Child Marriages and adolescent pregnancies in the CARMMA Plus Campaign.
- II. Requested the Commission include CARMMA Plus in the Africa Peer Review Mechanism (APRM) to encourage Member States to prioritize MNCH activities.
- III. Requested the Commission to ensure the CARMMA Plus campaign promotes the use of confidential enquires in maternal health data collection, which will reveal the causes of maternal death.

The revised Terms of Reference (ToR) of Maternal, New-born and Child Health (MNCH) Taskforce

37. The Ministers took note of the expert recommendations on the revised Maternal, New-born and Child Health (MNCH) Taskforce Terms of Reference and following deliberations, endorsed Taskforce Terms of Reference with the following recommendations:

- i. The need to take into consideration 'Adolescent' by renaming of the Taskforce as: Maternal, Newborn, Child and Adolescent Health Taskforce.
- ii. The CARMMA Plus campaign should advocate free Family Planning services to reduce unintended pregnancy, which will eventually decrease maternal, and child mortality in Africa.
- iii. Membership of the MNCH taskforce should include MNCH professionals from AU Member States.

Revised Mama Afrika Award Concept Note

38. The Ministers took note of the expert recommendations on the revised Mama Afrika Award Concept Note and following deliberations endorsed the revised Mama Afrika Award Concept Note with the following recommendations;

- I. Requested the Commission to decentralize the Award to the five regions of the African Union
- II. ii. Requested that the award at the level of the five regions is of the amount of 20,000USD in order for member states at the regional level to contribute towards the award scheme.

Report of the Second Decade on Traditional Medicine (TM) (2011 -2021)

39. The Ministers took note of the expert recommendations on the Draft Review Report of the Second Decade on Traditional Medicine (TM) (2011 -2021) and following deliberations endorse the Report with the following recommendations;
- I. National budgets to take Traditional Medicine programs and initiatives into account and make budgetary resource allocations. resources. .
 - II. The extension of the Decade for a third décade from 2022 to 2030

Term of Reference (ToR) of the AU Continental Hepatitis Technical Working Group (TWG)

40. The Ministers took note of the expert recommendations and endorsed the Term of Reference ToR) with (following amendments
- i. Under the structure and management of the AU continental TWG, a Second Vice Chair is recommended.
 - ii. The Commission to explore the possibilities of including Arabic and Swahili as working languages of the Technical Working Group and its documentation.
 - iii. Operationalization of Cairo declaration should also consider Hepatitis E as well as B and C in line with pre-existing continental strategies.

Draft Continental Framework on The Control and Elimination of Neglected Tropical Diseases (NTDs) In Africa by the Year 2030

41. The Ministers took note of the expert recommendations and endorsed the t Continental Framework withthe following recommendations ;
- i. There is need to include surveillance as one of the strategic approaches for the control and elimination of NTD as. Data sharing and cross border collaboration are very important in addressing NTDs.
 - ii. The word “treatment” should be associated with diagnostic tools, and therefore be corrected to read “diagnostic tools and treatment”.

Draft Common African (CAP) Position on Neglected Tropical Diseases (NTD's)

42. The Ministers took note of the expert recommendations and endorsed the CAP on NTDs with the following recommendations;
- i. The word “treatment” should be associated with diagnostic tools, and therefore be corrected to read “diagnostic tools and treatment”.
 - ii. Data and information on NTD has to be disseminated to all AU Member States.

The Africa Leadership Meeting on Investing in Health (ALM) Declaration Progress Report

43. The Ministers took note of the expert recommendations and endorsed the Progress Report without amendments.

Draft Common African Position (CAP) on the 2021 High-Level Meeting of the General Assembly on HIV/AIDS:

44. The Ministers took note of the expert recommendations on the Draft Common African Position on the 2021 High-Level Meeting of the General Assembly on HIV/AIDS and endorsed the CAP without amendments.

Documents submitted for information

45. The Ministers reviewed and took note of the following documents submitted for information:

- i. Common Africa Position (CAP) on The 2021 High-Level Meeting of The General Assembly On HIV/AIDS*
- ii. The Progress report of the two (2) Million Community Health Worker Initiatives*
- iii. AU Decision on the Cairo Declaration on Viral Hepatitis in Africa*
- iv. The 2020 Tuberculosis Scorecard*
- v. Analysis of the current state development of the local pharmaceutical manufacturing and regulatory capabilities Africa Union (AU) recognized Regional Economic Communities (RECs)*

SECTORIAL SESSION OUTCOMES - NUTRITION

African Union Continental Nutrition Report

46. The Ministers took note of the expert recommendations on the Report and following deliberations endorsed the Report with the recommendations as follows;

- i. The adoption of a Continental Declaration by Heads of State and Government on nutrition that places emphasis on the need for increased financing for nutrition as part of activities of the 2022 African Union Year of Nutrition.*
- ii. The Commission to prepare the African Union Continental Nutrition Report every three years in order to continue disseminating and facilitating lesson sharing amongst AU Member States.*

The Cost of Hunger in Africa (COHA) Continental Report

47. The Ministers took note of the expert recommendations on the Cost of Hunger in Africa (COHA) Continental Report as follows;

- I. Increased support and strengthening of fortification and bio-fortification programs across the the continent*
- II. The setting up sustainable food systems with nutrition-oriented value chains as a game-changer in the fight against child and adolescent's malnutrition.*
- III. The urgent pre-requisite to invest in quality data on nutrition.*

48. The Ministers following deliberations endorsed the Report with the following recommendations;

- I. The strengthening of investment in quality data on nutrition and the need to strengthen the monitoring, evaluation, accountability and reporting mechanisms. Noting the increased rates of the double burden of malnutrition, the Commission working closely with key stakeholders should update the COHA methodology to integrate the aspects of overweight and obesity as well as micronutrient deficiency.*
- II. African Union Commission and stakeholders to follow up with member states regularly and report on the progress of the implementation of the recommendations at the national level.*

Draft Report on the Mid-Term Review of the Africa Regional Nutrition Strategy

49. The Ministers took note of the expert recommendations on the Report and following deliberations endorse the Draft Report Mid-Term Review of the Africa Regional Nutrition Strategy without amendments.

African Task Force on Food and Nutrition Development (ATFFND) Report and Terms of Reference (ToR) of the ATFFND

50. The Ministers considered the expert recommendations of the Report and the (and following deliberations endorsed the Report and ToR with recommendations as follows;
- I. That the Specialized Technical Committee for Health Population and Drug Control be extended to include Nutrition and recommended that the STC be renamed – **Specialized Technical Committee on Health, Nutrition, Population and Drug Control.**

SECTORIAL SESSION OUTCOMES – POPULATION

Draft Common African Position on Population and Development (CAP-P&D)

51. The Ministers took note of the expert recommendations on the presentation and discussion on the Draft Common African Position on Population and Development (CAP-P&D) and endorsed the CAP-P&D without amendments.

SECTORIAL SESSION OUTCOMES – DRUG CONTROL

Draft Report of the Pan African Epidemiology Network on Drug Use (2019-2020)

52. The Ministers took note of the expert recommendations on the Draft Report of the Pan African Epidemiology Network on Drug Use (2019-2020) and endorsed the Report with its recommendations as follows
- I. Member States to take appropriate measures (including legislative, administrative social and educational) to protect children, youth and other people in vulnerable situations from illicit use of narcotic drugs and psychotropic substances by rolling out evidence-based drug use prevention and early intervention programmes;
 - II. The Commission to work with Regional Economic Communities and other stakeholders to establish and strengthen sub-regional drug surveillance sentinels to foster international cross-border collaboration and drug surveillance on the continent;
 - III. The Commission to carry out high level advocacy at continental and national level for Governments to allocate sufficient resources to sustain operations and sustainability of national drug epidemiology networks;
 - IV. The Commission to consider developing an Online/E-learning platform and an Internet based data collection platform to facilitate operationalization of the Pan African Epidemiology Network on Drug Use;
 - V. Member States to align national Focal Points that are responsible for coordinating national reporting on drugs data to relevant agencies (African Union, ECOWAS and UNODC) to promote validity, accuracy, completeness and ensure consistency of data reported through the various data collection instruments;

Draft Biennial Implementation Report of the AU Plan of Action on Drug Control (2019-2023)

53. The Ministers took note of the expert recommendations of the Report of the AU Plan of Action and endorsed the Report with its recommendations;
- i. Extension of period of implementation of the African Union Plan of Action on Drug Control and Crime Prevention (2019-2023) by two years to 2025 to compensate for time lost due to the outbreak of Covid-19 in 2020 and 2021;
 - ii. The Commission and Member States to prioritise children and youth in drug control policies to harness the continent's demographic dividend by developing and scaling up comprehensive evidence-led early interventions including treatment and school-based prevention programmes;
 - iii. Member States to develop gender-sensitive drug dependency treatment programmes to especially eliminate barriers for women to access such services due to stigma and discrimination;
 - iv. The Commission to collaborate with the relevant AU organ for promoting and protecting the Rights and Welfare of Children to develop a General comment on Article 28 of the African Charter on the Rights and Welfare of the Child to facilitate monitoring of State Parties' reports on protection of children from the use of narcotics and psychotropic substances;
 - v. The Commission to leverage technical assistance to Member States by engaging the International Narcotics Control Board to jointly convene consultations with AU Member States on the development of guidelines on the cultivation, manufacture and production of cannabis and cannabis-related substances for medical and scientific purposes.

Report of Recommendations from Continental Consultations on Drug Demand Reduction

54. The Ministers took note of the expert recommendations on the Report of Recommendations from Continental Consultations on Drug Demand Reduction held since the last Ministerial meeting held in Cairo, Egypt in 2019. Following deliberation, the Ministers endorsed with its recommendations;

Continental Level Actions

55. Request the African Union Commission to:
- i. Appoint goodwill ambassador(s) and/champion(s) to promote the overall objective of the AU Drug control action plan to improve the health, security and socio-economic well-being of the people of Africa by addressing drug trafficking and problematic drug use in all its forms and manifestations and preventing the onset of drug use;
 - ii. Investigate and address the incidence and magnitude of substance use disorders and associated health and social consequences in humanitarian settings as an emerging public health issue especially in the context of Africa hosting over one-third of global forced displacement population, working with stakeholders including the United Nations.
 - iii. Convene a Summit/Special session on Drugs, Children, youth, and women to discuss solutions to the upsurge in public health problems as a result of increased availability and illicit use of psychoactive substances trafficked into the continent and also produced locally.

- iv. Strengthen inter-continental (global) dialogue with Latin America, Caribbean and Asian Countries for experience sharing, bench marking and joint programs;

Role of Traditional Communities in Drug Demand Reduction.

56. The presentation of discussed the roles of different traditional communities as follows;

- a. The Role of Traditional Health Practitioners (THPs) in Drug Dependency, Prevention, Treatment and Care.
- b. The Role of Traditional and Religious Leaders in Drug Dependency Prevention, Treatment and Care.

57. The Ministers took note of the expert recommendations on the role of Traditional Communities in Drug Demand Reduction and endorsed the recommendations as follows;

Continental Level Actions

The African Union Commission to:

- i. Establish an African Union vision for the role of Traditional Health Practitioners (THPs) and Traditional and Religious Leaders (TRLs) in drug demand reduction, including establishing conceptual extent of each role while acknowledging THPs and TRLs as resource;
- ii. Re-administer the rapid assessment conducted to map out the architecture and roles of Traditional Communities in Drug Demand Reduction.

Provision of Treatment as an Alternative to Incarceration/Imprisonment

58. The Ministers took note of the expert recommendations on the presentation on the Provision of Treatment as an Alternative to Incarceration /Imprisonment and endorsed the document with its recommendations as follow;

- I. Member States to address biopsychosocial risk and protective factors through evidence-based prevention and unconditional Social Support;
- II. Member States to ensure accessible and evidence-based treatment and care in the community;
- III. Member States to explore and evaluate alternatives to conviction or punishment along the criminal justice continuum including traditional courts and ensure availability of evidence-based treatment in prison settings.

African Civil Society Common Position on Drugs

59. The Ministers took note of the following expert recommendations on the presentation on the on the African Civil Society Common Position on Drugs and endorsed the call to action as presented in the document;

Continental Level Actions

- i. The Commission to formally create an inclusive and balanced platform for engagement of African Civil Society with one voice to contribute to regional dialogue on drugs with the forum funded – in similar ways to international platforms like the Vienna NGO Committee on Drugs.

Draft Cairo Declaration on addressing Drug Use and Substance Use Disorders among Youth, Children and Women for consideration by Ministers.

60. After extensive deliberations on the outputs of the Drug Control sectoral segment of the meeting, the Ministers adopted the Draft Cairo Declaration on addressing Drug Use and Substance Use Disorders among Youth, Children and Women.

Briefings

61. The Ministers took note of the following documents that were circulated for briefing and information namely :

- i. AU-UNODC briefing note on the Provision of Treatment as an Alternative to Incarceration/Imprisonment.*
- ii. AU-INCB briefing note on facilitating Access to controlled substances for Pain Management Medication while preventing diversion.*
- iii. African Union Technical Paper on Cannabis presented as background document for Member States ahead of the Reconvened 63rd Session on the United Nations Commission on Narcotic Drugs (CND) in December 2020.*

ADJORNMENT OF THE SITTING OF COMMITTEE

62. The sitting of the Committee was adjourned to the 21 June 2022. The meeting is to be convened virtually and shall proceed on the quorum established on 14 June.

RESUMPTION OF SITTING OF COMMITTEE 21 OF JUNE 2022

63. The meeting of the Ministers for the Fourth ordinary session of the specialized technical committee meeting on health, Population and drug control resume on the 21st June.

64. The meeting opened with the opening remarks by the STC Chair HE the honorable Minister of Health of the Democratic Republic of Congo, the Honorable Ministers in his remarks thanked delegates of the Member States and reminded them of the importance of the meeting. the honorable chair of the STC handed over the meeting to the second vice chair of the bureau Member, HE Deputy Minister of Health of Namibia

AGENDA ITEM 1: REVIEW OF THE DRAFT OF THE AFRICA CENTRES FOR DISEASE CONTROL AND PREVENTION AMENDED STATUTE (CONTINUED)

65. H.E Dr Monique Nsanzabaganwa, Deputy Chairperson of the African Union Commission(DCP) thanked honorable Ministers of Health and distinguished delegates for their commitment in this historic journey of the full operationalization of Africa CDC. H.E updated the participants on the joint meeting conducted with WHO and the agreement was reached with regards to the statutes.

66. The Ministers deliberated on the draft Statue and raised the following observations;

- a) The urgent need to supported the strengthening of Africa CDC as autonomous agency in line with the decision of the Assembly of Heads of States and Governments), on the speedy and effective operationalization of Africa CDC(**Assembly/AU/Dec. 835(XXXV)**.
- b) The Ministers emphasized on the need to accelerate transmission of the document to the Legal and Justice STC and to the Executive Council at the earliest .
The following concerns were raised as follows :

1. **Article 1** did not refer to the STC on Health ; Population and Drug Control.
2. **Article 2** (Para 3) –The Framework of Operations referred too was not appended to the Article under consideration.
3. **Article 3** (e)-Declaring PHECS in consultation with relevant stakeholder-T
 - I. The declaration of a public health emergency of continental threat should not create a parallel structure with the existing global mechanisms. There is the need to clarify the role of WHO and Africa CDC in declaring of a public health emergencies and proposed text for consideration eg in working together with WHO”.
 - II. Article 3 (h)- should be reviewed and amended so that it does not affect the sovereignty of Member States
4. **Article 7**- Paragraphs 1 and 2: meetings should be held only at headquarters or in one of the Member States which offers to host and not as the proposal of a cooperation partner
5. **Article 8**-Clarity is needed :
Clarify whether it is a "Committee" of Heads of State, as indicated in the definitions, or a "Council" of Heads of State and make the necessary corrections.
6. **Article 8(b)**-Section 2(b)-On the membership of the Council,of Heads of State and Government -
paragraph 2: composition: must be reviewed, to ensure exclusivity and equality of representation between Member States.
7. **Article 9**: the Governing Board
Paragraph 2 c) on the convening of extraordinary sessions or point (c) on the STC has been deleted. The reference to the STC must be maintained. The Ministers of Health of the Member States may request the holding of an extraordinary session if necessary.
8. **Article 10** –Composition of the board
The number is increased to 19 instead of 15. With these additions, the number of other members will be almost equal to that of Ministers of Member States. In particular the addition of 4 members appointed by the Chairperson of the AUC. This needs clarification

Paragraph 1: the board must remain responsible to the STC and the Council of Heads of State and Government (CHSG). The Board of Directors has a restricted composition and must report to all Member States.

9. Article 12 (7)-Function of the board

The submission of decisions to the Health STC must be maintained, within the framework of respect for the process established before any submission to the AU's legislative and Policy Organs.

10. Article 19 Secretariat :19(4): "The Chief Executive Officer is the Chief Executive/General Manager or Chief Executive Officer of CACM". It must not conflict with Article 8ter on the role of the President of the Commission.

11. Article 24: Africa CDC Regional Coordinating: Center RCC's needs to be defined

12. Article 25 : under the selection of Regional Coordinating Centres , no amendment shall be done in this section . and the translation should be aligned with original French text

67. The Ministers adopted the draft Statute with the following recommendations to the following Articles ;

13. Article 1: Definition :

« STC » means any of the Union's Specialized Technical Committee this is to read-*"STC" means any of the Union's the Specialized Technical Committees and in particular the STC on Health, Population and Drug Control;*

14. Article 3: Objectives and Functions

3(e)-Declaring PHECS in consultation with relevant stakeholder-Should read - **Article (3, e):** *Declaring a public health emergency of continental security (PHECS), in close consultation and approval of the concerned member states, and in consultation with the WHO and the relevant stakeholders.*

3(f)- Point (f): delete the added word "coordination". And to Read-Supporting Member States in health emergencies response particularly those which have been declared PHECS.....Neglected Tropical Diseases(NTDS)

3(h)-Harmonizing diseases control and prevention policies and the surveillance systems in Member States ; and -To read - *"The harmonization of disease control and prevention policies and surveillance systems in Member States at the continental level in concert with Member States"*.

3(i)- leadership training programs. Delete the addition "leadership".

3 to add a new point under Article 3 as Establishments and/or strengthening of laboratory systems and networking for priority public health problems in collaboration with Member States and other stakeholders. In addition supporting the Member States for establishment and or strengthening of National Public Health Institute, in consultation with member state and stakeholders, including the WHO.

15. Article 4-Guiding Principles-

Para 3-Ownership-The Africa CDC is an Africa owned institution. Member States will maintain ownership of Africa CDC simultaneously through an advisory role in the shaping of Africa CDC priorities and through direct programmatic engagement-"appropriation" and not "ownership" (in French). And maintain the phrase "at the national level", deleted in the proposed amendments -To read *Para 3-Ownership-The Africa CDC is an Africa*

owns institution. Member States will maintain national level ownership of Africa CDC simultaneously through an advisory role in the shaping of Africa CDC priorities and through direct programmatic engagement."

16. Article 7. Meetings

Para 2-In the event that a meeting of Africa CDC is held outside of its seat the host member state or cooperating partner shall be responsible for all extra expenses incurred by the secretariat –To read --*In the event that a meeting of Africa CDC is held outside of its seat the host member state shall be responsible for all extra expenses incurred by the secretariat.* Thus delete any reference to “a cooperation partner”.

17. Article 8 : Structure of the Africa CDC-

Clarify whether it is a "Committee" of Heads of State, as indicated in the definitions, or a "Council" of Heads of State and make the necessary corrections.

18. Article 8(b) :Council of Heads of State and Government Function and Composition

8b (d): to clarify who appoints the DG and propose the appointment to be made by the AU Assembly and remove this provision from the role of the Governing Board.(Article 8-para(1))

19. Article 8 (b)-Section 2(b)-Heads of States and Government holding the presidency of the Regional Economic Communities : The presidents of the 8 RECs can be invited in the case for the Bureau of the enlarged Conference, but not as full members, which would imply an unfair representation between the regions. It is a Council of Heads of State representing AU Member States and not RECs. The of Heads of States is lower than the composition proposed. (8 RECs against 5 Member States).

This committee must be composed of 2 member states nominated by their respective regions, through regional consultation. REC shall be invited to the meeting and not part of the committee

20. Article 9: the Governing Board

Paragraph 2 c) the STC to be retained.

21. Article 10 –Composition of the board

Para(1) The board should be answerable to the STC-‘STC’ *to be retained*

10(1): the composition of the Board to add representatives from environmental protection sector to cater for one health approach.

Under Governing Board Composition:, to be added as follows “*voting right is limited to AU Member States*”.

Paragraph 1 (d): nominations must be validated by the Board of Directors with the right to vote (Member States).

22. Article 12 (7)-Function of the board

Articles (12. (2) and (19. 1): The Governing board and the Secretariat shall submit their reports to the Specialized Technical Committee on Health, Population and Drug Control

12(7)Para 2-Examin decision and or proposal submitted by the secretariat and submit its recommendation to “STC . retain STC To read- *Examin decision and or proposal submitted by the secretariat and submit its recommendation to the STC*

23. Article 19 -Secretariat

19(4): “The Chief Executive Officer is the Chief Executive/General Manager or Chief Executive Officer of CACM”. It must not conflict with Article 8ter on the role of the President of the Commission.

19(5) – To read: *In alignment with the AU rules and regulations, The Council of the Heads of States should approve the position of the Director-General, and his/her approval should be endorsed as a Decision of the AU Assembly.* .

AGENDA ITEM 2: DATE AND VENUE OF THE 5TH ORDINARY SESSION OF THE SPECIALIZED TECHNICAL COMMITTEE ON HEALTH, POPULATION AND DRUG CONTROL

68. The Ministers called upon Member States to consult with their capitals and inform the AU Commission of the offer to host in May 2024. Alternatively, the next meeting of the STC will take place at the AU HQ in Addis Ababa, Ethiopia.

AGENDA ITEM 3: ANY OTHER BUSINESS

69. There were no items listed under any other Business.

AGENDA ITEM 4: ADOPTION OF THE MINISTERS’ REPORT OF THE STC-HPDC-4

70. The Honorable Ministers of the 4th STC-HPDC adopted the ministerial report with amendments from Member States

CLOSING SESSION

71. In her closing remarks, H.E. Minata Samate Cessouma, Commissioner for Health, Humanitarian Affairs and Social Development expressed her profound gratitude and congratulated all delegations for efficient and productive sessions...

72. The second vice chair of the Bureau of the 4th STC-HPDC, the Honorable Deputy Minister of Health of the Republic of Namibia thanked all at the participants of the 4th STC-HPDC in the closing ceremony of the Ministerial Meeting of the 4th African Union Specialized Technical Committee on Health, Population and Drug Control (STC-HPDC).