

AFRICAN UNION

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**INTERNATIONAL CONFERENCE ON AFRICA'S
FIGHT AGAINST EBOLA - PLENARY OF AFRICAN HEADS OF
STATE AND GOVERNMENT**

21 July 2015

Venue:

**Conference Room,
Sipopo, Equatorial Guinea**

**Opening Remarks by
H.E. Erastus Mwencha,
Deputy Chairperson, African Union Commission**

Your Excellency, Robert Mugabe, President of the Republic of Zimbabwe and Chairperson of the African Union;

Your Excellency, Teodoro Obiang Nguema Mbasogo, President of the Republic of Equatorial Guinea and our gracious host;

Your Excellencies, Head of State and Government;

Your Excellencies, First Ladies,

Heads of Delegations,

Honorable Ministers,

Commissioner for Social Affairs;

President, ECOWAS Commission;

Secretary General, Mano River Union;

Representatives of UN Agencies and International Organizations

Distinguished Delegates;

Ladies and Gentlemen

It is my honour and privilege to speak before this august assembly gathered on this special occasion on the International Conference on Africa's Fight Against Ebola. I bring you greetings from H.E. Dr. Nkosazana Dlamini-Zuma, Chairperson of the African Union Commission, who very much regrets her inability to be with you

today. However, she sends her best wishes for a successful and productive meeting.

First and foremost, allow me, on behalf of the African Union Commission, to express our sincere appreciation to His Excellency, President Teodoro Obiang Nguema Mbasogo and the people of Equatorial Guinea for hosting this important event in the beautiful city of Malabo. We applaud you, Mr. President, for your commitment to African integration and development agenda. As you have just stated, only recently during the height of the Ebola crisis, Equatorial Guinea successfully hosted the 2015 African Cup of Nations, just to mention one such act of your commitment.

Let me also take this opportunity to pay tribute on our behalf H.E. President Robert Mugabe, for his leadership and for his enormous effort deployed to fight against the Ebola epidemic. Only recently you attended the High-level International Ebola Recovery Conference in New York.

We also salute our Heads of State and Government for your material and financial support, and for taking the time out of your very busy schedule to attend and contribute to this meeting.

Excellencies, Distinguished Delegates,

We are here to share experiences from lessons learned since the onset of the Ebola Virus Disease, and to forge a way forward by mobilizing financial and material support for the post recovery and for tackling the ever abiding challenge of strengthening Africa's Health Care Systems. In this regard, we need to secure concrete support for the full establishment and operationalization of the African Centre for Disease Control (CDC), which will be a major step in ensuring greater preparedness and resilience in tackling similar epidemics on the continent.

The 2014 Ebola Virus Disease (EVD) epidemic is the largest, most severe and most complex in its nearly four decade history of its existence. As of July 14, 2015, total Ebola cases reached 27,679 and total deaths reported stood at 11,276. Most of these deaths occurred in areas with inadequate life-saving health services. In addition to the death and illness caused by Ebola Virus Disease, there was an upsurge in mortality and morbidity from other diseases due to the collapse of health systems. It is estimated that about US\$6.25 billion of GDP was lost during this period. In the health sector alone, the loss of health workers still poses a major problem. The most affected sectors were agriculture, transportation, trade, mining, and hospitality (including tourism). In addition to this, stigmatization and travel bans

that led to isolation of the three (3) most affected countries was a major challenge. Immediate needs for post Ebola reconstruction is highlighted in the ministerial report before you. The three most affected countries will also present their experiences and needs as concerned.

The African Union Support to the Ebola Outbreak in West Africa (ASEOWA) that was established in Aug 2014 mounted an effective campaign that mobilised close to USD 100 million from African private sector and international development partners, and deployed 835 volunteer health workers from 18 member states. These health workers, together with local workers and those from the international community provided technical support that has contained the disease.

On that note, we congratulate the people and governments of Guinea, Liberia and Sierra Leone, for their hard work and commitment to fighting and containing the disease. We also acknowledge and applaud the African private sector and the international community for their contribution to containing the outbreak and to partner in the endeavour of developing stronger public systems in the affected countries.

Excellencies, Distinguished Delegates,

The Ebola virus disease adversely affected these three countries because of the fragility of their health systems. This is a common feature of the health sector in Africa. We have a huge burden of preventable and treatable health problems where millions suffer, and in some cases, die from diseases and conditions that are relatively simple to prevent or treat. This in turn undermines the growth and development of many African Countries.

It is reported that one in six children born today will die before age five. African women face more than 100 times the risk of maternal mortality the women in the developed world. And the average life expectancy in Africa is 58 years as compared to 68 years in Asia, 76 years in Europe and 77 years in the Americas.

Three problems make up the most important barriers to efficient and effective health care:

- A lack of access to basic primary care, which is at most only one-third (1/3) of what is required,
- Insufficient and under-trained healthcare workforce, which is only a fraction of the size actually needed, and
- Several operational weaknesses, which prevent national health systems from functioning well.

Excellencies, Distinguished Delegates,

This is partly the reason why you adopted Agenda 2063 and its first Ten Year priority programs, aimed at achieving sustainable structural transformation and long-term inclusive economic growth. Agenda 2063 lays out seven key priorities, which include “Inclusive growth and sustainable development” and “People centered and people-driven development”.

There are three priority areas for enhancing resilience of the health sector, namely:

1. Investments in Human Resource

While Africa has 13% of the world population, it bears 25% of the global disease burden and has only 3% of the global health work force. To rectify this, there needs to be national programs to attract, train and retain health professionals, with an emphasis on greater involvement of local women to serve as health officers whenever possible.

2. Investments in Early Warning Systems, ICT and Manufacturing

Utilization of technological innovations in the context of the establishment of the Africa CDC is one of the promising ways to

accelerate information transfer and build Africa's early warning system through the creation of effective communication and information systems, in the perspective of monitoring, tracking and recording health activities across the continent.

The Africa CDC will work collaboratively with WHO and various partners to ensure that systems and measures are put in place to deal with future epidemics with special emphasis on outbreaks in States with weak health institutions.

3. Investments in Health Care Systems

We need to honor the commitment of at least 15% of national budgets to health, in line with the Abuja decision of 2001. To achieve this, we need to explore alternative financing mechanisms including:

- a. Domestic resource mobilization through diversified sources of revenue such as the enlargement of tax structures, remittances and diaspora bonds, a greater private sector engagement and financial deepening of capital markets.
- b. Efficient collection and utilization of external resources with the view of increasing global partnerships and solidarity to ensure universal access for low-income communities to critical health services. This was indeed the subject of the recent international

meeting on Financing for Development that took place in Addis Ababa Ethiopia last week.

The development of a viable pharmaceutical industry is vital as this will only impact on our capacity to respond to the health needs, but also contribute to the overall socioeconomic development of the continent. The AU Commission is taking a two-pronged approach in this area and to this end, technology transfer and the harmonization of medicine registration systems is very important.

Excellences, Ladies and Gentlemen

The immediate priority is to end the epidemic. It is also critical to note however that even after all 3 countries are declared Ebola-free, the virus may remain latent in that region. As the mandate of ASEOWA comes to an end on 18 August, there is a need for an extension, as there are still challenges to overcome in the affected countries. As such, post-disaster recovery programmes must integrate systems and processes to ensure that disease surveillance is improved, and other relevant local and national capacities are in place. It is vital that we address the adverse conditions that enabled a localized epidemic to escalate into national crises with serious regional and global response and to minimize the risk of its resurgence.

We welcome the commitments made by the international community at the recent New York Ebola Conference. We must ensure a mechanism is in place to monitor the pledges made so that the affected countries are able to implement their post recovery plans.

The African Union will continue to work with Regional Economic Communities, Member States and partners to harness greater support for recovery efforts in the three-affected countries, including the continued development of their health systems to enable them to defeat the disease and overcome other non-Ebola health issues.

Your Excellences, I thank you for your kind attention and wish you fruitful deliberation.