

Safeguarding Africa's health

AVoHC Framework of Operations Overview

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African Volunteers Health Corps (AVoHC) establishment as a continental health emergency workforce



Context...

- 2014-16 The Africa Union deployed experts to support Ebola outbreak in West Africa, Libera, Sierra Leone and Guinea.
- This group was known as the African Union Support to the Ebola Outbreak in West Africa (ASEOWA)
- ASEOWA was given an orientation to understand the disease and the response interventions, as well as country context.
- However, effective, and efficient health emergency response requires a well-trained and well-equipped health emergency workforce.



African Volunteer Health Corps (AVoHC) establishment following the Ebola outbreak in West Africa 2014-2016



The African Union Heads of State and Government in their Assembly Decision /AU/Dec.570 (XXV) of June 2015, requested the African Union Commission in collaboration with Member States (MS) and Development Partners to establish an African Volunteer Health Corps (AVoHC) to be deployed during disease outbreaks and other health emergencies.



The African Volunteers Health Corps (AVoHC) established as a result of the HoGs Assembly Decision to constitute a corps of multidisciplinary and multi-sectoral health experts to be deployed for health emergency response



VISION

Reduced morbidity, mortality and socioeconomic harm from public health emergencies across Africa.

MISSION

Provide efficient and effective technical support for public health emergencies across Africa and strengthen the capacity of Member States to mount state-led responses to these public health threats.

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AVoHC Roster Check/gap identification





AVoHC Strategic Framework for the path forward and the strategic pillars



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All AVoHC strategic documents translated into AU working languages (Arabic, French, Portuguese and Spanish)





AVoHC Recruitment plan as a multidisciplinary team of experts





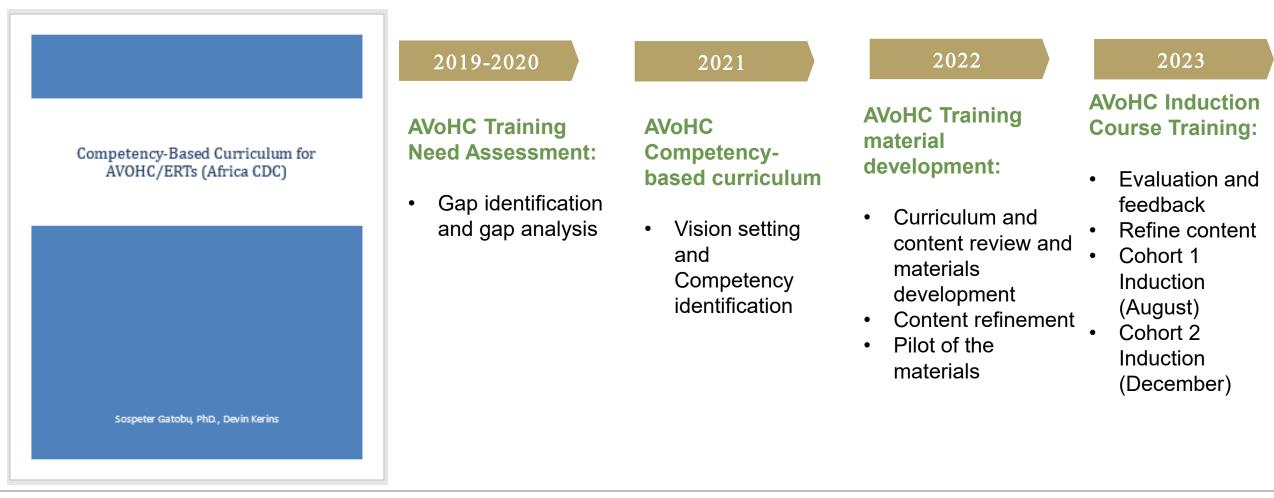
AVoHC Training Needs Assessment (TNA) revealed key gaps and challenges for an effective deployment:

- 1 in 4 did not feel fully prepared to have been deployed at that time;
- Limited knowledge of Africa CDC and its role in Emergency Response
- Lack of knowledge of AVoHC processes, policies, principles & practices
- Soft skills such as liaising with international partners, relationships with different stakeholders & team dynamics
- Gaps in operational areas such as reporting, emergency response systems and ethical issues
- Gaps in discipline-specific technical skills e.g. cross border surveillance, laboratory quality control, risk communications, RCCE,.....



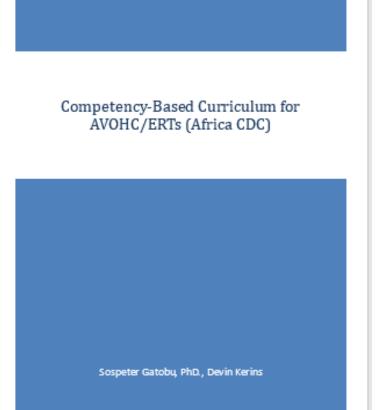


AVoHC Training Curriculum developed with 3 competency-base





AVoHC Training Curriculum developed with 3 competency-base



Level 1 : Adaptive and Relational Competencies: (Soft skills)

 Level 1 Core Competencies are also known as "soft skills" and they include :Safety awareness, Relationship building, Professional understanding, Communication and Risk communication, Cultural competency, Diversity, Equity and Inclusivity etc...

Level 2: Professional Competencies (Technical)

Level 2 Core Competencies (also called technical competencies) are required for every volunteer or cadre. These competencies are part of the professional qualifications from formal education and training at the necessary level (as required by AVoHC), and from recognized education or training institutions.

Level 3: Leadership and Management competencies

Level 3 competencies are for those in the team that are identified for leadership or management roles, or those interested in these roles. These competencies will be an addition to expertise in the individual's technical areas, and adaptive and relational competencies



AVoHC Training Curriculum developed, and Course roll out





- 1. Introduction to AVoHC
- 2. Overview of AVoHC deployments
- 3. Working with partners on deployment
- 4. Equity, diversity and inclusion
- 5. Relationship building during deployments
- 6. Cultural competency
- 7. Professional conduct on deployment
- 8. Safety and security during deployments
- 9. Personal health and wellbeing
- 10. Public communication
- 11. Community engagement
- 12. Introduction to risk communication

Separate mandatory courses

- 1. Security
 - awareness/BSAFE/UNDSS



African Volunteer Health Corps Mode of Operations as a strategy to build local as well as regional capacities for health emergency response

Local level operations



- National Roster development/maintenance
- National ERT capacity building
- National/local deployments

Regional and continental operations

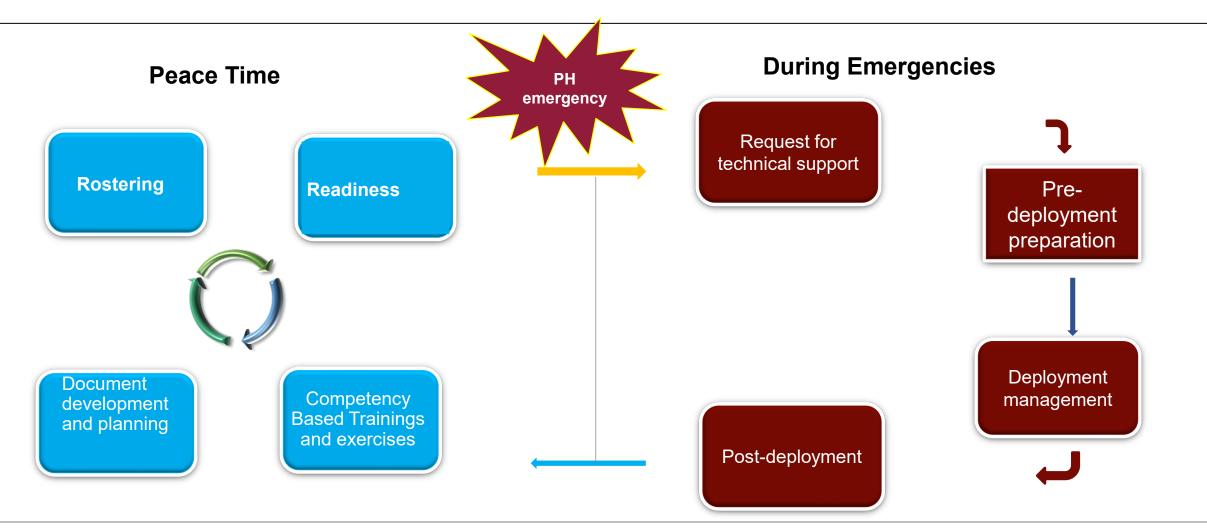


African Volunteer Health Corps/ AVOHC

- Regional and continental Roster development/maintenance
- Availability of diverse set of skills and capabilities
- Access to surge capacity across the continent
- Regional and continental capacity building
- Deployment operations and logistics support



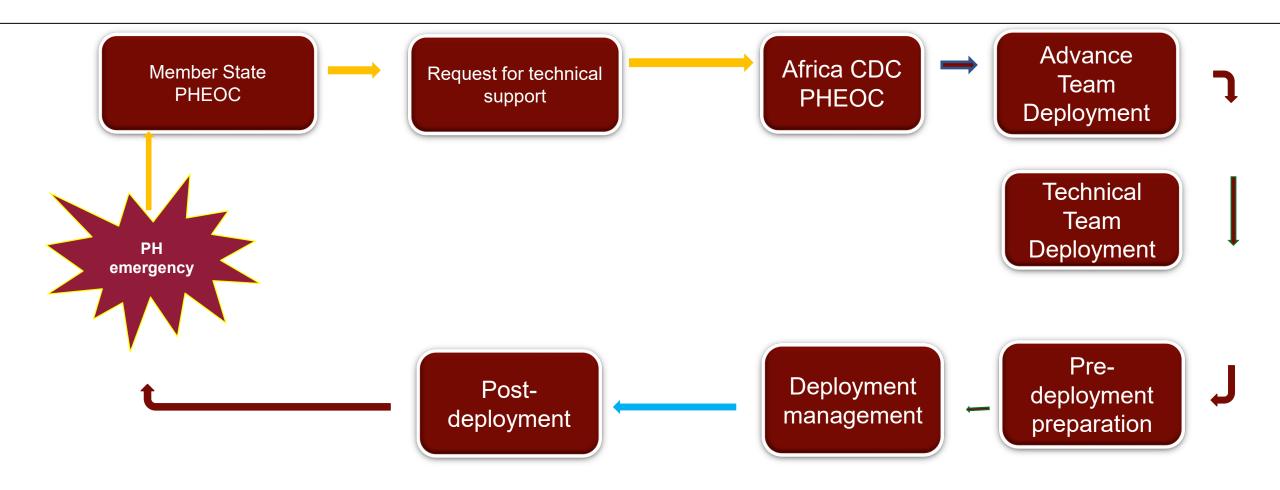
AVoHC framework of operations demonstrates how AVoHC functions both during peace time as well as during health crisis to ensure effective emergency response



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AVoHC framework of operations during health emergencies





Advance team deployment

Terms of reference

- 1. Outbreak response support
- 2. Rapid risk assessment
- 3. National Response plan development
- 4. Africa CDC Response Support Plan
- 5. Implementation of the agreed immediate response activities



Technical team deployment for outbreak response support

- 1. Introduction to MoH
- 2. Imbedding in the National IMS

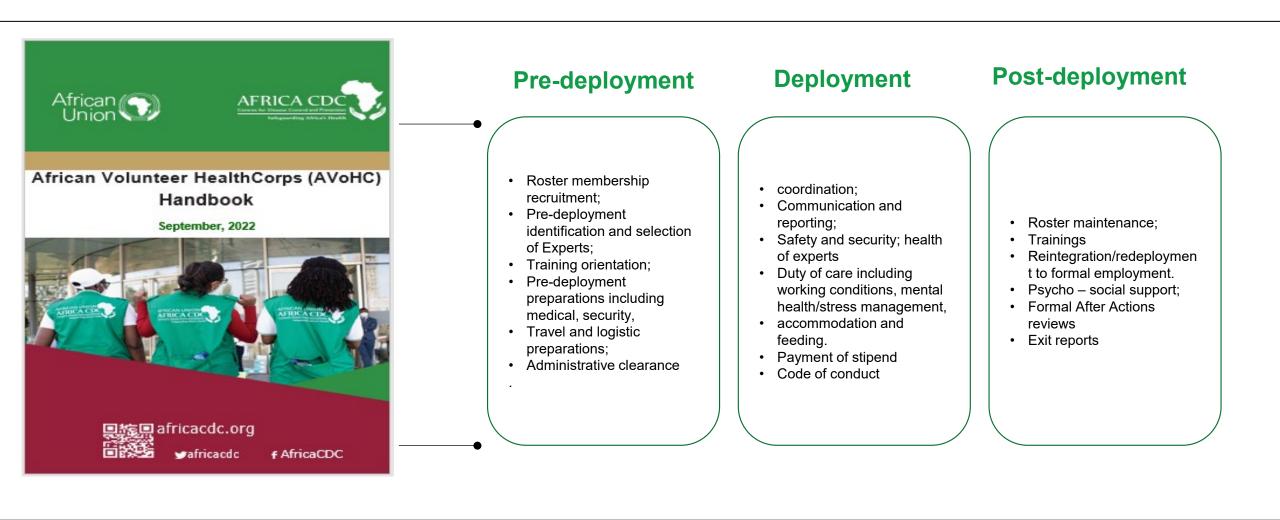
AfricaCDC

- Planning
 - Coordination (with the national coordination team)
 - Document preparation and dissemination (guidelines, SoPs, response plans, meetings...)
- Response operations
 - Surveillance and contact tracing
 - Case management
 - Infection prevention and control
 - Risk communication and community engagement
 - Data management, reporting and dissemination (Sitreps, field report,...)
- Operation support and logistics
 - Medical and non-medical supplies identification
 - $\circ~$ Supply chain and distribution



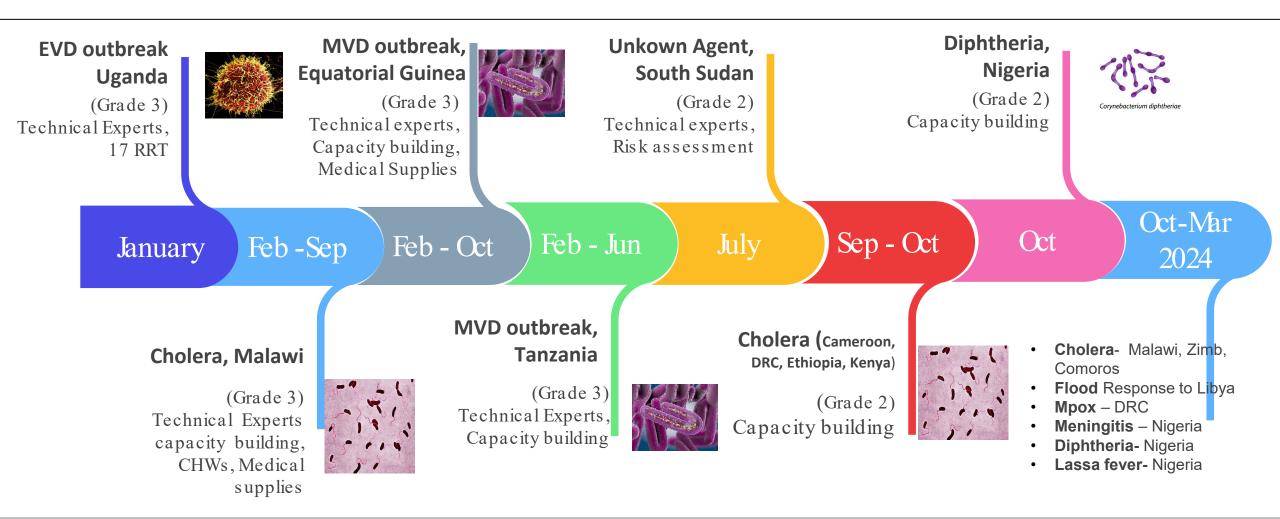


AVoHC Handbook explains processes and procedures





Response Support to MS in 2023- Mar 2024





Lessons learnt and challenges



- COVID-19 Deployment and other PHEs: collaboration with MS for more deployable experts
- Engagement/collaboration with on ground partners



Extensive, laborious bureaucracy hindering public health engagement with regard to emergency response support to MS.



Limited financial resources



THANK YOU

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