



Eastern Africa Regional Taskforce for Cholera Control and Prevention (EATFCC)

Terms of Reference



January 2024

1. Background

Africa CDC established the Regional Integrated Surveillance and Laboratory Network (RISLNET) to support Member States' efforts to improve prevention, detection, and response to public health emergencies of regional concern. The network aims to leverage existing public health assets in the region to achieve its targets. The assets include surveillance and laboratory networks operated by public and private agencies, foundations, and academic institutions.

The Eastern African Region, through its Regional Technical Advisory Committee (EA-ReTAC) launched the Eastern Africa RISLNET (EA – RISLNET) and its governance framework in November 2023 and further established the RISLNET (EA-RISLNET) committee in December 2023. In line with the public health priorities of member states, the EA-RISLNET Committee developed a 2-year operational plan, which, among other activities, recommended the establishment and operationalization of a regional cholera taskforce.

Owing to the above recommendation, the 4th extraordinary meeting of the EA-ReTAC approved the establishment of the Eastern Africa Multi-Sectoral Taskforce on Cholera Control and Prevention (EATFCC) to serve as the coordination mechanism for all the existing regional collaborative efforts towards cholera control and prevention in the Eastern African region. This document summarizes the roles, membership, leadership and governance structure of the EATFCC.

2. Roles of the Eastern Africa Region Taskforce for Cholera Control (EATFCC)

The roles and responsibilities of the EATFCC are as follows:

- a. Harmonize new and existing regional policies, documents, plans and procedures for cholera preparedness and response to avoid duplication among partners.
- b. Foster the research and exchange of knowledge, information, data, and experience sharing to help countries prevent, prepare for and respond to cholera in a timely manner
- c. Support the conduct of root-cause analysis (RCA) and hazard mapping risk assessment for cholera at the regional and high risk country level to identify appropriate and sustainable solutions and enhance preparedness.
- d. Strengthen cross-border multisectoral partnerships, collaboration, surveillance and response for cholera control in the region.
- e. Identify specific regional thematic priorities for cholera prevention, preparedness, and response in the region and collaborate with MS and other stakeholders to implement them effectively.
- f. Develop and disseminate standard protocol for Cholera management and provide technical assistance to member state response teams including capacity building on surveillance and laboratory (genomic sequencing) to enable them prevent, prepare and manage cholera outbreaks more effectively.
- g. Plan and mobilize resources (partner and donor mapping and advocacy) for cholera prevention, preparedness, and response activities at the regional levels.

- h. Conduct regional readiness assessment and regularly monitor and evaluate readiness and progress in terms of capacity of MS in alignment with the GTFCC Strategy.
- i. Advocate for improved policy measures including inclusion of migrants, displaced and mobile population in the national and regional response plans in order to improve access to services without discrimination.
- j. Advocate for increased investments and domestic financing for prevention, preparedness, and response in member states

3. Composition of EATFCC

Membership of the Taskforce

- Membership of the Eastern Africa Region Taskforce for Cholera Control and Prevention (EATFCC) is constituted by the 14 AU MS in the region, RECs and Partners with 2 representatives per MS and one representative per REC and partner.
 - National Cholera Coordinator representing the Ministry of Health/NPHI
 - National Coordinator for Water Sanitation and Hygiene (WASH) representing the Ministry/Agency responsible for Water and Sanitation,
- Regional Economic Committees - One Representatives each from:
 - IGAD
 - EAC
 - IOM
- Partners – One representatives each from regional health organizations:
 - WHO
 - UNICEF,
 - US CDC,
 - Water aid,
 - MSF,
 - GIZ,
 - IOM,
 - ECSA-HC, and other key stakeholders
- Africa CDC Eastern Africa Regional Coordinating Centre (EA-RCC) serves as the Secretariat for EATFCC.
- **NB: Representatives from Ministries of Education, Finance and Environment will be invited in as advisers based on Needs.**

4. Coordination of of EATFCC

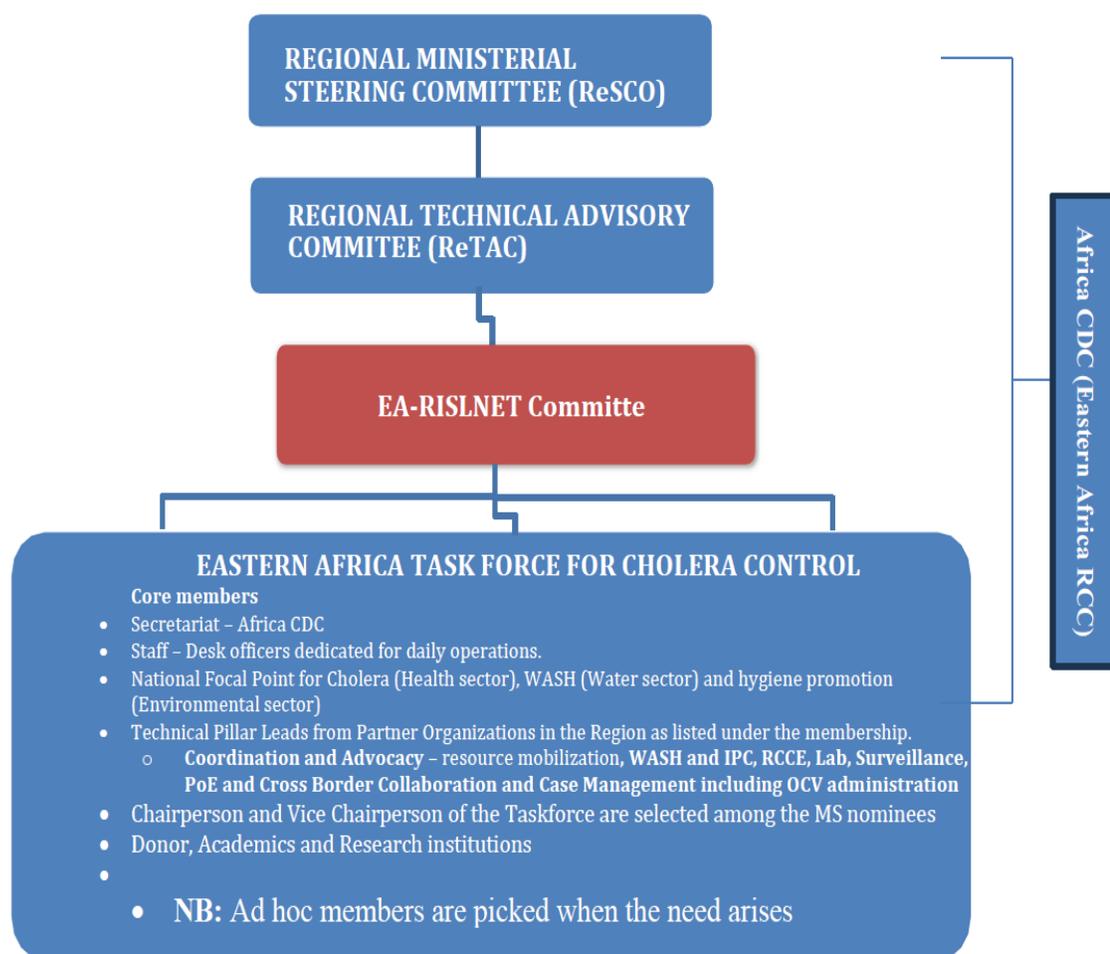
The EATFCC will be coordinated under the leadership of the Eastern Africa RISLNET through the support of the Africa CDC EA-RCC.

5. Election and Term of Office

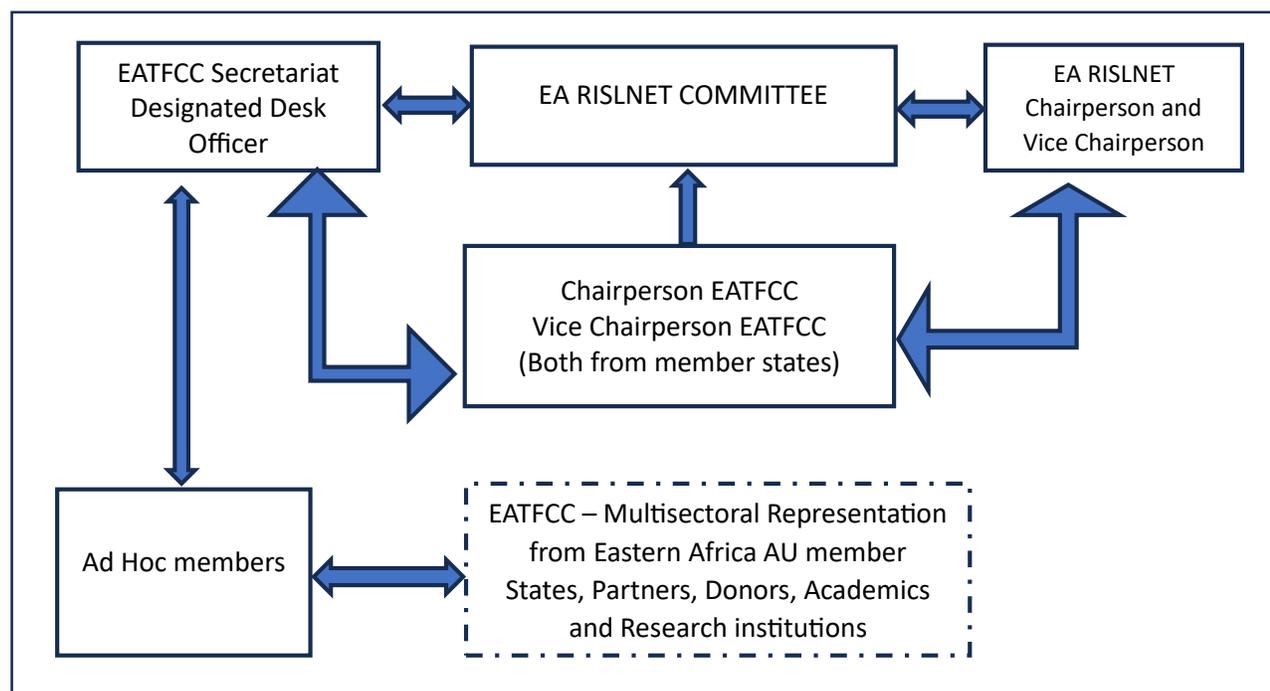
- a) The Cholera Taskforce will elect its Chairperson and Vice-chairperson from among the Member States by a simple majority vote for a two (2) year non-renewable term. Upon election, the Chairperson will automatically become the chairperson of the Taskforce.
- b) The chairpersonship of the Cholera Taskforce will be on a rotational basis among the member states. A country that has served as chairperson will only be eligible for re-election once all countries in the region have had the opportunity to serve.

6. EATFCC Governance and Coordination Structure

The structure below describes the coordination of the EATFCC.



The organogram below describes the communication network of the SATFCC.



7. Quorum and Meetings

- The EATFCC is convened each quarter of the year.
- The meeting will be convened by the EATFCC Chairperson in consultation with the Secretariat.
- The quorum for EATFCC meetings and its decisions making procedures will be validated by 50% + 1 MS representation which is equivalent to six (8) out of the 14 countries in attendance.
- Emergency meetings are convened when necessary and this can be initiated by any of the stakeholders.

8. Voting and decision making

- Decisions of the EATFCC meetings will be taken by consensus or, failing that, by a vote of representatives of Member States in the EATFCC by show of hands or by secret ballot (Only physical meeting).
- Decisions are obtained by a simple majority of the voters.
- The decisions are recorded in minutes signed by the EATFCC Chair and the Regional Coordinator of the Eastern Africa RCC (The Secretariat)
- Each Member State will have one vote
- Right to vote is reserved to the member state