



THE ORGANIZATION OF AFRICAN FIRST LADIES FOR DEVELOPMENT



STRATEGIC FRAMEWORK

2025 - 2030



THE ORGANIZATION OF AFRICAN FIRST LADIES FOR DEVELOPMENT (OAFLAD)

STRATEGIC FRAMEWORK 2025 - 2030

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Abbreviations and Acronyms

AU	African Union
AIDS	Acquired Immunodeficiency Syndrome
CDC	Centre for Disease Control
CSW	The Commission on the Status of Women
FGM/C	Female Genital Mutilation/Cutting
FOCAC	Forum on China-Africa Cooperation
GBV	Gender Based Violence
HBV	Hepatitis B Virus
HCV	Hepatitis C Virus
HIV	Human Immunodeficiency Virus
ICASA	International Conference on AIDS and STIs in Africa
MEL	Monitoring Evaluation and Learning
OAFLA	Organization of African First Ladies against HIV/AIDS
OAFLAD	Organization of African First Ladies for Development
RECS	Regional Economic Communities
SDG	Sustainable Development Goal
SRHR	Sexual Reproductive Health and Rights
STEM	Science Technology Engineering and Mathematics
STWG	Sectoral Technical Working Groups
TA	Technical Advisors
TICAD	Tokyo International Conference on African Development
TVET	Technical and Vocational Education and Training
UN	United Nations
UNFPA	United Nations Population Fund
WEE	Women Economic Empowerment
WHO	World Health Organization



This framework embodies our collective vision and unwavering commitment to the progress and empowerment of girls, young people and women across the African continent. The pillars of our strategy—health, education, women’s economic empowerment (WEE), and the prevention of gender-based violence (GBV)—are focal points and vital threads that weave the fabric of sustainable development in Africa.

Foreword

It is with great pride and a deep sense of responsibility that we present the Strategic Framework for the Organization of African First Ladies for Development (OAFLAD) for 2025-2030. This framework embodies our collective vision and unwavering commitment to the progress and empowerment of girls, young people and women across the African continent. The pillars of our strategy—health, education, women’s economic empowerment (WEE), and the prevention of gender-based violence (GBV)—are focal points and vital threads that weave the fabric of sustainable development in Africa.

The strategic timeline of this framework coincides with the conclusion of the Sustainable Development Goals (SDGs) in 2030, providing a unique opportunity for us to galvanize our efforts as we work toward achieving these global objectives. Our framework is designed to directly contribute to realizing the SDGs, particularly those related to health, education, and gender equality. The framework also aligns seamlessly with the aspirations of Agenda 2063, our continent’s roadmap for sustainable development and inclusive growth, as well as other continental commitments aimed at advancing health, education and gender equality across Africa.

We recognize that the health of our people, particularly women and children, is paramount and influences the trajectory of our nations. By working to strengthen health systems and ensuring access to quality healthcare for children, youth and women, we lay the foundation for a healthier, more prosperous Africa. Education is the cornerstone upon which we will build a brighter future. We emphasize the importance of education as a tool for socio-economic development and empowerment. Women’s economic empowerment is vital for the acceleration of our development agenda. We contribute towards environments that support entrepreneurship and skills development for women, to uplift individual lives and strengthen our economies and communities. The fight against GBV remains a pressing concern. We will support coordinated action to establish a secure and supportive environment for all women, ensuring that GBV is addressed at every level.

We acknowledge the urgent challenges posed by climate change and the ongoing need for peace and security. Climate action is integrated into our development strategies, recognizing that women and children are often disproportionately affected by climate change. We aim to promote sustainable practices that safeguard our communities and empower women as agents of change. Lasting peace and security are prerequisites for development. We commit to advocating for peaceful resolutions and enhancing the role of women in peacebuilding processes.

This Strategic Framework represents a collaborative effort, a reflection of our shared aspirations and the enduring principles of empowerment and equity that OAFLAD embodies. We are grateful that this Strategic Framework has been developed through a thoroughly inclusive and transparent consultation

process, including sessions with Technical Advisors, the OAFLAD Secretariat, our Partners and other key stakeholders. Our special gratitude goes to all of them for their invaluable support, and for their participation and substantive contributions.

As we embark on the implementation journey, let us harness our collective strength, creativity, and passion to create a future where every woman and child in Africa can access all the opportunities they deserve. We believe this framework provides clear direction to achieve these important objectives. We believe the framework is ambitious but achievable; comprehensive yet targeted; structured yet adaptable. It will require greater engagement and collaboration with all stakeholders.

Together, let us forge a path toward a brighter, healthy, more equitable, and prosperous Africa.



H.E Mrs Fatima Maada Bio
OAFLAD President



Dr Nardos Berhanu
Executive Secretary

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Who We Are

1.1 About OAFLAD

The Organization of African First Ladies for Development (OAFLAD) is an advocacy organization that seeks to leverage its unique position to advocate for policies that make health services accessible and laws that boost women and youth empowerment. OAFLAD reinforces favourable policies and programs through advocacy, convening, resource mobilization and partnerships with all stakeholders at all levels. Founded in 2002 as the Organization of African First Ladies against HIV/

AIDS (OAFLA), the change to OAFLAD signalled an expanded focus on contributing towards Africa's overall development.

The goal of OAFLAD is to advocate for increased awareness of African populations on issues pertaining to development in health, education and economic empowerment through mobilization of resources, the contribution to the development of leadership, and for permanent action aiming to improve overall wellness.

1.2 Our Vision



At OAFLAD we envision:

A united, equitable, healthy and developed Africa where children, youth and women prosper.

1.3 Our Mission



At OAFLAD we aim:

To advance equity, health and empowerment of children, youth and women through advocacy, resource mobilization and strategic partnerships.

1.4 Our Guiding Principles

Our principles represent our values and express our identity, our lenses, how we work today and our ambitions for the future.



2 How We Work

2.1 Our Strategic Approaches

We contribute to lasting change in Africa through three main strategic approaches:



Leveraging on the offices of the First Ladies, we collaborate with like-minded partners to drive positive change at the country, regional, continental and global levels.

- Partnerships for impactful collaborations with allies, communities, duty bearers and other stakeholders to amplify our impact.
- Evidence-based advocacy to inform, sensitize and effectively influence policies and shift mindsets.
- Community engagement to actively involve local populations in initiatives to catalyse change.
- Mobilize resources from public and private entities for impactful and sustainable initiatives.



Our advocacy model

Advocacy is at the heart of OAFIAD's efforts to influence policies at national, regional, continental, and global levels, while driving political will and ensuring the rights and needs of children, girls, youth and women are prioritized. We advocate for stronger commitments to gender equality, better policies in health, education, women's economic empowerment, and protection from

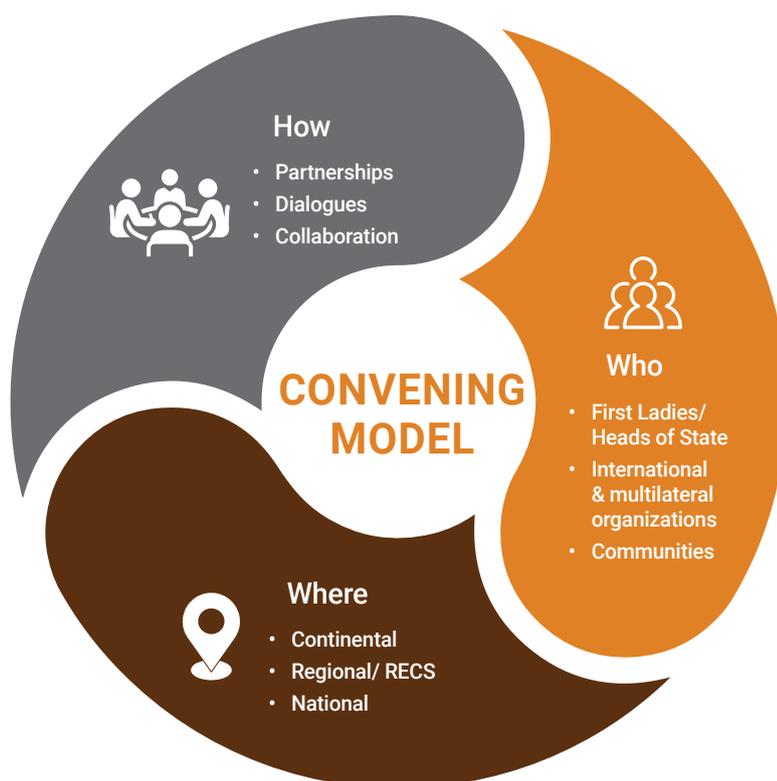
gender-based violence (GBV). By amplifying the voices of First Ladies and leveraging their unique political platforms, the advocacy includes engaging in public campaigns, policy influence, and collaborating with key stakeholders to push for the implementation of international and regional commitments.



Our convening model

Recognizing the unique influence and leadership of First Ladies, OAFLAD leverages its convening power to bring together a wide range of stakeholders, including governments, civil society, private sector partners, international and multilateral organizations. We co-create cross-sectoral partnerships, promote

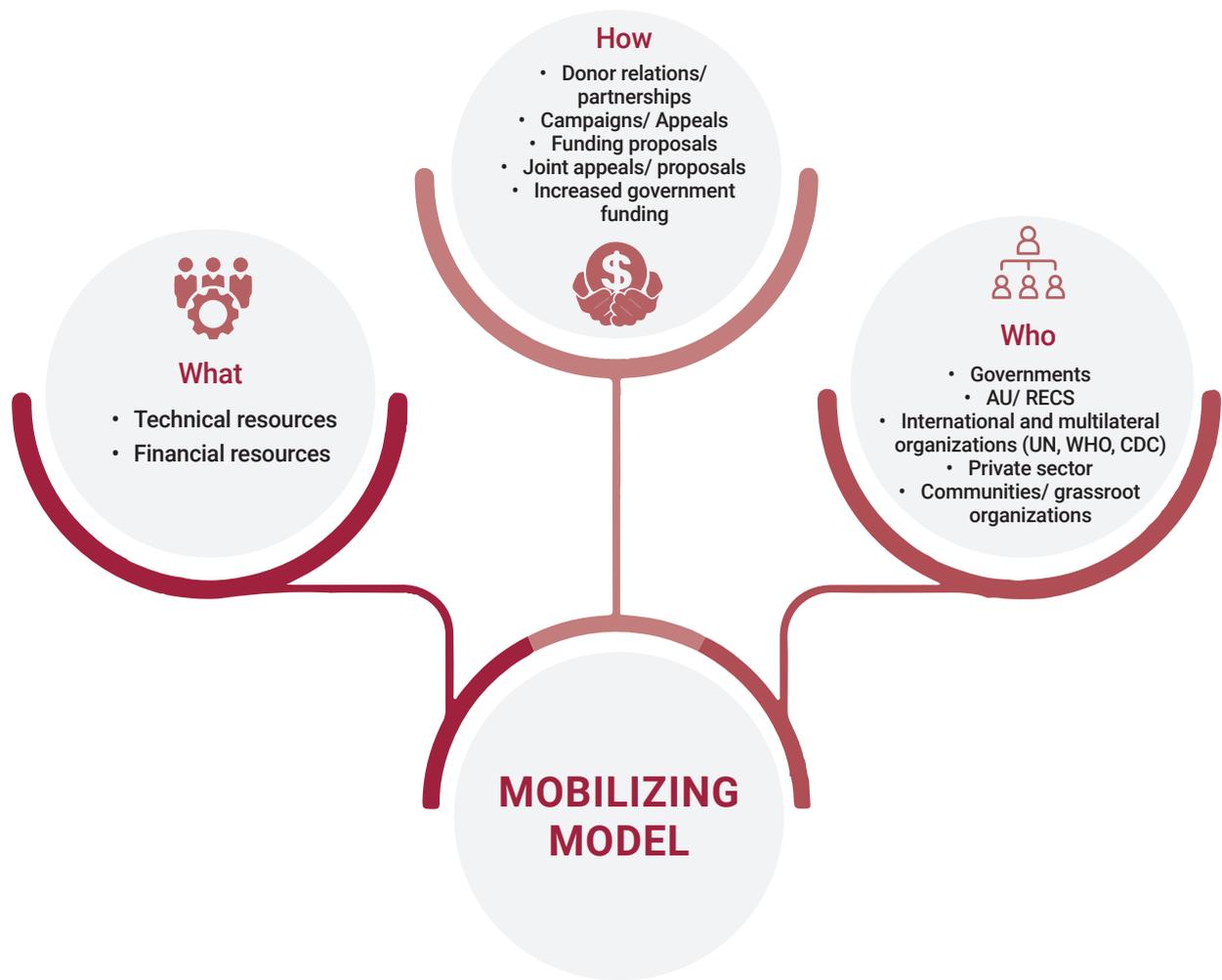
joint initiatives, ensuring a coordinated approach to addressing complex challenges like gender inequality, climate change, health, education and GBV. Participating and organizing regular high-level meetings, conferences, and workshops, we provide platforms to build consensus and align stakeholders around our collective goals.



Our mobilizing model

We strategically leverage OAFLAD's resources, networks, and influence to rally support, secure funding, and activate collective action for key initiatives and innovations. This involves mobilizing both financial and technical resources to implement initiatives that support the priorities in our focus areas. By building strong

relationships with development partners, civil society, the public and private sector, we ensure sustained financial backing and technical support for critical initiatives. First Ladies contribute to mobilizing national governments, regional organizations, and grassroots movements to act in their respective countries and communities.



Our Guiding Principle 1



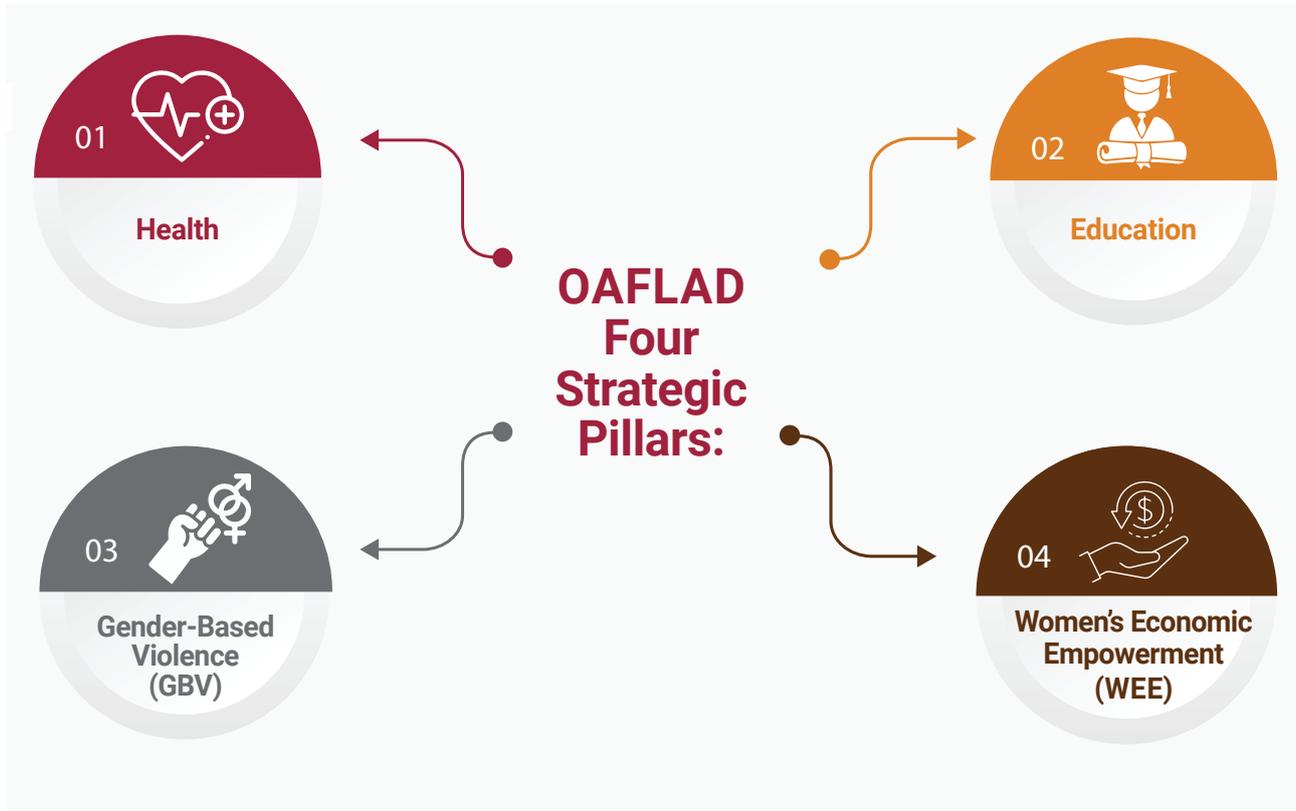
Engagement

We partner, convene, and collaborate to catalyse transformative change.

3 The Strategy 2025-2030

Introduction

For the period 2025-2030, OAFLAD prioritizes four strategic pillars:



These pillars reflect OAFLAD's commitment to addressing the most pressing issues facing children, youth and women. In addition to these core areas, climate change, and peace and security are integrated as cross-cutting themes, recognizing their profound impact on children, youth, women's and communities' well-being and development in the continent.

This strategic focus is shaped by the lessons from the implementation of the 2019-2023/24 strategy, insights gathered from discussions with member states and partners, and an assessment of the epidemiological,

socio-political and economic landscape. Through the strategic pillars, OAFLAD aims to advance the commitments outlined in key continental and global declarations, ensuring meaningful contribution to progress in health, education, GBV and WEE. The strategy recognizes that there are linkages between the actions across the strategic pillars. The priority areas respond directly to the issues and challenges emanating from the broad strategy formulation consultation processes. Each strategic pillar is outlined in detail in the following sections.

3.1 Health

The health pillar of our strategic framework prioritizes the well-being of children, youth and women. Careful consideration is given to vulnerable groups, such as migrants and internally displaced persons. Recognizing that good health is fundamental for individuals to thrive and contribute meaningfully to their communities and nations, this pillar aims to contribute to the enhancement of access to comprehensive and quality healthcare services. By addressing key health issues such as maternal and child health, malnutrition, HIV/AIDS and sexual and reproductive health and rights (SRHR), we seek to promote a holistic approach to health that empowers women and youth to make informed decisions about their well-being.

3.1.1 The Imperatives

Maternal and Child Health

- Africa has made significant strides in maternal and child health over the past two decades.
- Maternal mortality decreased by one-third from 788 to 531 deaths per 100,000 live births in 2023 but only South Africa, Zambia, Algeria, Cabo Verde, Mauritius, Mozambique, and Seychelles achieved the SDG target of fewer than 140 deaths per 100,000 live births.
- Africa still bears the highest maternal mortality ratio, accounting for about 69% of global maternal deaths in 2020.
- Early childbearing, high fertility rates, and inadequate access to health services are the main factors that contribute to the high number of maternal deaths among women in Africa.
- Obstetric haemorrhage and hypertensive diseases of pregnancy account for half of all maternal deaths.





- Nearly half of women in Sub-Saharan Africa lack access to essential healthcare during pregnancy and childbirth due to factors like cost and distance.
- Child mortality halved since 2000.
- Newborn and under-five mortality rates in many member states are off track for the 2030 targets.
- The stillbirth rate remains disproportionately high, with a risk up to 23 times greater in the worst-affected countries.
- Migrants, refugees and people on the move are disproportionately affected and lack access to health services. Undocumented children also lack vaccination.



660,000

New cases of Cervical Cancer also fourth most common cancer in women globally



350,000

Deaths from cervical Cancer in 2022

91,252

Deaths from Breast Cancer in 2022



198,000

Breast Cancer is the leading cancer in African women with 198,553 new cases in 2022.

Cancer in Women

- Cervical Cancer is the fourth most common cancer in women globally, with about 660,000 new cases and 350,000 deaths in 2022.
- The highest rates of incidence and mortality are in low- and middle-income countries.
- Major inequities are driven by lack of access to HPV vaccination, cervical screening, and treatment services, as well as social and economic factors.
- Breast Cancer is the leading cancer in African women. In 2022, there were 91,252 deaths and 198,553 new cases.
- Challenges in tackling breast cancer include late-stage disease presentation, lack of screening and therapeutic infrastructure, limited awareness, and scarce resources.



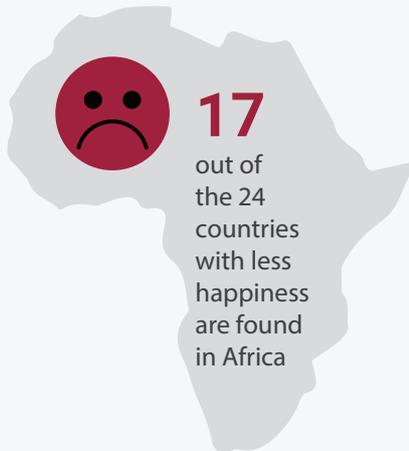
1 per 100,000

Africa has 1 mental health worker per 100,000 people, compared with a global average of 9 per 100,000.



29 mil

People suffered from depression in Africa in 2023



11

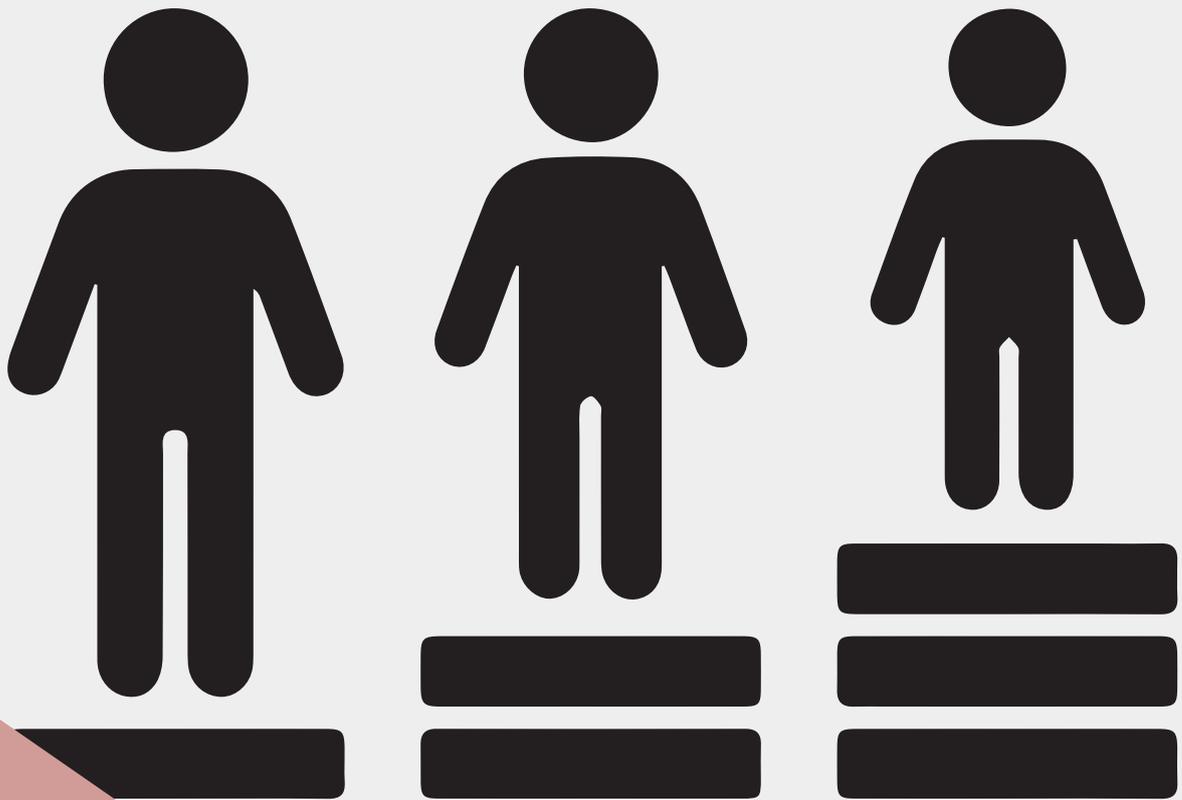
People per 100,000 die by suicide in Africa,



Mental Health

- In 2023, about 29 million people suffered from depression in Africa, while 17 out of the 24 countries with less happiness are found in Africa.
- Mental health programs remain grossly underfunded in Africa: in 2020, Africa spent less than 1.00 US\$ per capita on mental health, compared to the global spending of US\$ 7.49 per capita.
- Africa has 1 mental health worker per 100,000 people, compared with a global average of 9 per 100,000.
- The global annual rate of visits to mental health outpatient facilities is 1051 per 100,000 populations; in Africa, the rate is 14 per 100,000.
- The COVID-19 pandemic had a profound impact on mental health in Sub-Saharan Africa, exacerbating existing disparities and rendering individuals undergoing treatment particularly susceptible.
- Mental health and well-being require interventions beyond traditional healthcare.
- 11 people per 100,000 die by suicide in Africa, higher than the global average of 9 per 100,000 people.

Our Guiding Principle 2



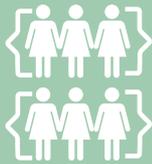
Equity

We prioritize action for groups and communities that are marginalized or disproportionately affected by addressing systemic barriers and creating pathways to positive change.



59%

Decrease in new HIV infections (from 1.1 million to 450,000) between 2010 to 2023



65%

Decrease of HIV prevalence among women and girls since 2010



4000

Adolescent girls and young women globally, and 3,100 in sub-Saharan Africa, contract HIV weekly.



15-45%

Transmission rates range from mothers living with HIV to their children during pregnancy, labour, delivery, or breastfeeding.



65%

Treatment coverage for children remains low



84%

Of people living with HIV aged 15 years and above (estimated 20.8 million individuals) were receiving antiretroviral therapy (ART).

High-burden Endemic Infectious Diseases (HIV, TB, Malaria, Hepatitis)

HIV/AIDS

- From 2010 to 2023, the Eastern and Southern Africa region saw a 59% decrease in new HIV infections (from 1.1 million to 450,000) and a 57% reduction in AIDS-related deaths (from 600,000 to 260,000).
- HIV prevalence among women and girls in the region has decreased by 65% since 2010.
- Despite reductions, women aged 15 years and older accounted for 62% of new HIV infections across sub-Saharan Africa in 2023.
- Adolescent girls and young women (aged 15–24 years) accounted for 27% of new HIV infections and were three times as likely to acquire HIV than their male counterparts
- Without intervention, HIV transmission rates from mothers living with HIV to their children during pregnancy, labour, delivery, or breastfeeding range from 15% to 45%.
- 84% of people living with HIV aged 15 years and above (estimated 20.8 million individuals) were receiving antiretroviral therapy (ART), with viral suppression rates of 94% among those on treatment in the region.
- Only seven countries—Botswana, Eswatini, Kenya, Malawi, Rwanda, Zambia, and Zimbabwe—have reached the 95-95-95 testing and treatment targets for the general population.
- Treatment coverage for children remains low at 65%, similarly treatment coverage for men also lags behind at an estimated 79% in the region.
- In 2022, the region faced a 5% HIV funding shortfall against the 2025 target, with only 39% of total HIV resources in 2022 coming from domestic financing.

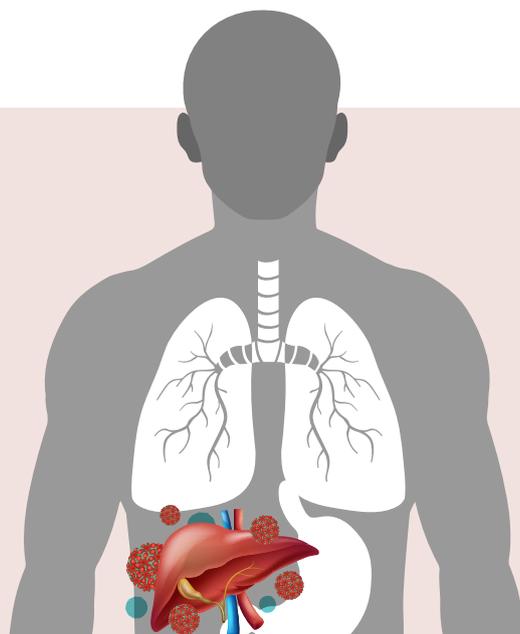
Viral hepatitis

- **Dying from viral hepatitis in Africa is becoming a bigger threat** than dying from HIV/AIDS, malaria or tuberculosis.
- **The epidemic of viral hepatitis B and C affects 325 million people globally** and is 10 times larger than the global HIV epidemic. Every day, more than 3600 people die of viral hepatitis-related liver disease, liver failure and liver cancer.
- **In Africa, chronic viral hepatitis affects over 70 million Africans** (60 million with hepatitis B and 10 million with hepatitis C). Hepatitis B infection is preventable, treatable and hepatitis C virus infection (HCV) is now curable. Over 90% of people living with hepatitis B and C in Africa lack much needed care.
- **The result is at least 200 000 deaths a year in Africa**, often among the continent's most youthful and productive population.
- **Fewer than 1 in 10 people in Africa have access to testing and treatment**, so the disease often progresses to advanced liver disease with its associated catastrophic financial burden as well as emotional distress and stigmatization.
- **HBV transmission in Africa is most spread from mother to child at birth**, or through exposure to infected blood, especially from an infected child to an uninfected child during the first 5 years of life.
- **HIV co-infection adds considerably to the clinical burden**, with 70% of the 36 million people worldwide who have HIV living in sub-Saharan Africa. An estimated 2.6 million HIV-HBV-co-infected individuals are in sub-Saharan Africa.
- **Access to screening, diagnosis, vaccines and treatment are real issues.** There is an urgent need for advocacy to mobilize sufficient funds to enhance access for prevention and care for viral hepatitis.



70 million

In Africa, chronic viral hepatitis affects over 70 million Africans (60 million with hepatitis B and 10 million with hepatitis C). Hepatitis B infection is preventable, treatable and hepatitis C virus infection (HCV) is now curable. Yet, despite the availability of diagnostic tools and effective treatment, over 90% of people living with hepatitis B and C in Africa lack much needed care.





247 million

There were roughly 247 million malaria cases worldwide in 2021



619,000

Deaths caused by Malaria in 2021



96%

Of Malaria deaths occurred in Africa, and about three quarters of malaria deaths occurred among children under five.



Malaria

- Malaria remains a significant public health threat to the health and well-being of millions in Africa.
- Most vulnerable population to malaria are children under five and pregnant women.
- Out of the global 247 million malaria cases, and 619,000 malaria-related deaths, 95% of the cases and 96% of deaths occurred in Africa, and about three quarters of malaria deaths occurred among children under five.
- Nigeria (27%), the Democratic Republic of the Congo (12%), Uganda (5%), Mozambique (4%) and Niger (3%) account for about 51% of all cases worldwide.
- Malaria accounts for a high proportion of public health expenditure on curative treatment.

Tuberculosis

- Africa accounts for 25% of global deaths attributable to TB and 42% of the globally estimated 3 million undetected cases.
- 16 African States are among the 30 globally identified TB High Burden Countries, which contribute over 90% of the burden of TB, TB/HIV and MDR/TB worldwide.
- West Africa TB prevalence is higher than the other sub-regions due to the high rate of factors that contribute to its spread.
- High burdens of co-infection between TB and HIV in Nigeria, Ghana, Liberia, and Guinea Bissau. Nigeria accounts for approximately 4% of global TB incidence.



25%

Africa accounts for 25% of global deaths attributable to TB.

16

African States are among the 30 globally identified TB High Burden Countries.

3.1.2 Priority Areas, Strategic Actions & Outcomes

By 2030, we aim to achieve significant improvements in health and well-being in Africa by contributing to equitable access to comprehensive healthcare services that effectively address HIV/AIDS, maternal and child

health, sexual and reproductive health, breast and cervical cancer, pandemic preparedness, and food security and nutrition.

Table 3.1: Health Pillar priority areas, strategic actions & outcomes

Priority Area	Strategic Actions	Outcomes we contribute to
HIV/AIDS 	<ul style="list-style-type: none"> High level advocacy for the renewal of commitments to ending AIDS Champion comprehensive and universal HIV treatment access and adherence Advocate for psychosocial support programs for treatment adherence Advocate for paediatric-focused HIV research to improve treatment outcomes for children Advocate for dissemination of accurate information on HIV/AIDS, syphilis and hepatitis B Advocate for increased investment to support HIV/AIDS, syphilis and hepatitis B diagnostic tool, vaccination for children, and treatment for mothers and children 	<ul style="list-style-type: none"> Renewed commitments to ending AIDS in Africa Reduced new HIV infections Increased adherence and retention in care Increased integration of HIV and related health services Zero stigma and discrimination
Maternal and child health 	<ul style="list-style-type: none"> Advocacy for routine immunization of mothers and children Strengthen collaboration with strategic partners to promote vaccination Advocate for prioritization of the integrated service delivery approach for maternal and child health care Advocate for the triple elimination of mother-to-child transmission of HIV, syphilis and hepatitis B Advocate for and support interventions that promote increased ANC contacts for pregnant women Champion and advocate for policy changes that prioritize maternal health and reduce maternal mortality Support strategies to increase demand for maternal health services. Raise awareness on obstetric fistulae prevention, causes, symptoms and treatment availability within communities. Advocate for investment in quality maternal care to improve service delivery and care. 	<ul style="list-style-type: none"> Improved quality of care for maternal health services Reduced maternal mortality End preventable deaths of newborns and children under 5 years of age Reduced obstetric fistula and other maternal-related morbidities

Priority Area	Strategic Actions	Outcomes we contribute to
<p>Sexual and reproductive health</p> 	<ul style="list-style-type: none"> ▪ Advocate for compliance with the African Union’s Maputo Protocol that has established a minimum standard for SRH and women’s rights that all countries in the region should meet. ▪ Support the development and implementation of other gender-responsive policies that uphold and protect the right to SRH for all. ▪ Advocate for youth-friendly, destigmatized SRH services ▪ Advocate for an increase in domestic financing for health infrastructure and integration of SRH into primary health care ▪ Collaborate with young people and empower SRH champions to advance education and destigmatize SRHR. ▪ Include and engage men and boys in SRH education, discussion, and responsibilities. 	<ul style="list-style-type: none"> ▪ Enhanced access to comprehensive sexuality education ▪ Improved awareness among adolescents and young people of how to prevent unintended pregnancy. ▪ Improved access to compassionate sexual and reproductive health services for adolescents and young people (AYP) ▪ Reduced stigma and disinformation around SRH services; and greater awareness of where and how to access SRH care. ▪ First Ladies working in collaboration and building champions for SRH across the continent ▪ Increased recognition and compliance with the Maputo Protocol across the continent.
<p>Breast and cervical cancer</p> 	<ul style="list-style-type: none"> ▪ Raise the profile and visibility of breast and cervical cancers (awareness, prevention, detection, treatment) for better health outcomes. ▪ Promote screening and early detection of breast and cervical cancer ▪ Advocate for the development and implementation of national cancer control policies that include comprehensive strategies for breast and cervical cancer prevention, screening, diagnosis, treatment, and palliative care ▪ Advocate for and champion the HPV vaccine for cervical cancer prevention 	<ul style="list-style-type: none"> ▪ Increased awareness and demand for cervical and breast cancer screening ▪ Increased investment in breast and cervical cancer prevention and response ▪ Reduced incidence of late cancer diagnosis

Priority Area	Strategic Actions	Outcomes we contribute to
<p>Pandemic preparedness</p> 	<ul style="list-style-type: none"> ▪ Support coordination for technical teams translate information to influence social determinants of health care access ▪ Strengthen the role of First Ladies in infodemic management – managing knowledge to ensure simplification for all to appreciate ▪ Advocate for policies at national, regional level that prioritize pandemic preparedness as a critical component of health security ▪ Mobilize technical and financial resources to support pandemic preparedness initiatives 	<ul style="list-style-type: none"> ▪ Increased investment in pandemic preparedness and institutionalization of integrated and inclusive pandemic preparedness ▪ Strengthened and resilient health systems
<p>Food security and nutrition</p> 	<ul style="list-style-type: none"> ▪ Champion youth and women’s increased participation and leadership in climate-resilient agriculture. ▪ Support women’s leadership in developing climate change adaptation strategies to include safe, orderly and regular migration. ▪ Support community-based nutrition education campaigns on dietary diversity and nutrition during pregnancy and early childhood ▪ Support sustainable food production initiatives to improve community resilience and food security ▪ Mobilize resources to support young people and women in agriculture ▪ Support the participation of youth including learners in food security initiatives 	<ul style="list-style-type: none"> ▪ Increased adoption of sustainable and climate-smart farming technologies ▪ Enhanced access to nutritious food ▪ Facilitated mobility (including labour mobility) for climate change adaptation
<p>Mental health</p> 	<ul style="list-style-type: none"> ▪ Advocate for mental health policies that prioritize mental health services, investment and integrate them into healthcare systems. ▪ Strengthen collaboration with strategic partners to promote mental health ▪ Promote greater public awareness and understanding of mental health issues 	<ul style="list-style-type: none"> ▪ Increased investments in mental health programs ▪ Enhances access to mental health services

3.2 Education

The education pillar of our strategic framework is a foundation for promoting equitable and sustainable development and empowerment of women and youth. Recognizing that education is a fundamental human right and a catalyst for social change, this pillar aims to promote equitable access to quality education for girls and young women. We seek to contribute to reducing gender-based disparities and equipping future generations with the knowledge and skills necessary to succeed in an increasingly competitive world. We focus on building strong partnerships with governments, educational institutions, civil society organizations and private sector allies to create inclusive learning environments that support both academic excellence and personal development.

3.2.1 The Imperatives

- Girls have a lower primary completion rate (68.8%) compared to boys (71.9%), with fewer than 30% of female graduates in STEM fields across many SSA countries.
- An extra year of secondary school can increase women's wages by 15-25%, highlighting the economic returns of addressing gender gaps in education.
- 8% of women in sub-Saharan Africa are enrolled in universities and colleges, compared to 10% of men



Recognizing that education is a fundamental human right and a catalyst for social change, this pillar aims to promote equitable access to quality education for girls and young women. We seek to contribute to reducing gender-based disparities and equipping future generations with the knowledge and skills necessary to succeed in an increasingly competitive world.

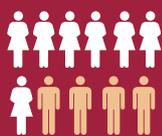
and the global average of 45% for women which is higher than men 39%

- Just 9 out of 49 African countries dedicated 20% or more of their public spending to education, whilst 24 committed at least 15%, and 6 countries directed less than 10%
- Excluding girls from education, especially due to early pregnancy, could result in a \$10 billion GDP loss across Africa.



**50
Million**

girls in Sub-Saharan Africa are out of school, the highest number of any region



Girls in Sub-Saharan Africa have lower enrolment rates than boys, with **23%** of girls not enrolled in primary education, compared to **19%** of boys.



40% of 15- to 19-year-old girls in Africa are out of school and not working or are married or have children, compared to 12 percent of boys



Secondary education increases earnings by 18% per year in low-income countries (World Bank).

3.2.2 Priority Areas, Strategic Actions & Outcomes

We aim to make significant contributions in priority areas that will move the needle on strategic issues.

By 2030, we seek to enhance equitable and universal access to quality education, ensuring that girls and young women have the opportunity to develop

essential skills for personal and professional success. This will be supported by robust policy and legal frameworks and sustainable education financing, leading to improved learning outcomes, reduced inequalities, and empowered communities.

Table 3.2: Education Pillar priority areas, strategic actions and outcomes

Priority Area	Strategic Actions	Outcomes we contribute to
<p>Equitable and universal access to education</p> 	<ul style="list-style-type: none"> Support initiatives to address gender-based barriers in education e.g. child marriage and cultural norms, while promoting girls' education through scholarships, mentorship programs, re-entry programs and community engagement. Advocate for investments in school infrastructure, for safe, accessible, and conducive to learning environments, particularly in underserved areas. Mobilize local leaders, community influencers, and traditional authorities to advocate for education and promote solutions that address local barriers to school attendance. Advocate for the implementation of policies to ensure inclusive and continuous education for women and girls. 	<ul style="list-style-type: none"> Reduced barriers to enrolment, retention and completion for pre-primary, primary and secondary education Elimination of gender disparities in education and equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities and children in vulnerable situations Enhanced safety and elimination of GBV in schools Reduction in child marriages and female genital mutilation among adolescent girls and young women.
<p>Technical and vocational skills development</p> 	<ul style="list-style-type: none"> Advocate for the enhancement and expansion of TVET programs that are aligned with local labour market demands, ensuring that curricula are relevant and adaptable to industry needs Championing the uptake and participation of girls and women in STEM subjects and non-traditional Support the development of lifelong learning programs that provide opportunities for adult education and skills development, to ensure inclusive education Support legal pathways for labour mobility opportunities 	<ul style="list-style-type: none"> Increased access to relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship Increased access to safe, fair jobs that enable prosperity and the development of new skills Increased uptake of STEM education by girls and women Achievement of numeracy and literacy for adults

Priority Area	Strategic Actions	Outcomes we contribute to
<p>Policy and legal framework</p> 	<ul style="list-style-type: none"> Advocate for the development and implementation of inclusive education policies that ensure equitable access for all children, especially marginalized groups such as girls, children with disabilities, and those in rural areas. Advocate for the development and implementation of policies that prioritize inclusion and safety in education. 	<ul style="list-style-type: none"> Strengthened gender responsive education policy framework (Inclusion and re-entry policies) Reformed education system to integrate knowledge and skills to promote sustainable development, human rights, gender equality, promotion of a culture of peace and non-violence
<p>Education financing</p> 	<ul style="list-style-type: none"> Advocate for increased public funding for education and allocation of resources towards achieving equitable access and improving the quality of education. Partner with private sector and other allies to mobilize resources for equitable access to education 	<ul style="list-style-type: none"> Increased public investment in the education sector Increased private sector investment in education

3.3 Cross cutting Issues

3.3.1 Overview

OAFLAD's cross-cutting themes are key issues that have been considered across all of our thematic work, and which require particular visibility. Our Strategic Framework focuses on climate change and peace and

security. The framework favours integration of the crosscutting issues and promotes a more systematic mainstreaming and operationalization of these issues across the strategic pillars and actions. Further to the integration of cross-cutting issues across the strategic pillars and actions, OAFLAD will among others:

- 01 Collaborate to develop a coordination platform for climate change action.
- 02 Advocate for the development of gender-responsive disaster management plans, establishment of situation rooms and early warning systems.
- 03 Pursue strategic involvement in prevention and medication of conflict
- 04 Support strategic initiatives and campaigns on climate change

3.3.2 The Imperatives

- The global average temperature has increased by approximately 1.7°F (0.94°C) from 1970 to 2023. Africa is warming faster than the global average, with significant temperature increases observed over recent decades.
- Africa contributes approximately 3-4% of global greenhouse gas emissions, yet it bears the brunt of the most severe climate change impacts compared to other regions.
- The Sahel is experiencing more frequent and severe droughts, leading to desertification and threatening food security. On the other hand, increased rainfall and rising sea levels contribute to more frequent and severe flooding, displacing communities and damaging infrastructure.
- Climate change is not gender neutral; poses significant vulnerability to women and girls due to social, cultural, and economic factors.
- Women-headed households disproportionately vulnerable to weather and climate variability with 21% more likely to be food insecure
- Climate-induced displacement and natural disasters increase women and girls' vulnerability to sexual violence, exploitation, and trafficking.
- The Africa Climate Summit 2023 underscored the critical intersection of climate change, peace, security, and gender dynamics in Africa; the disproportionate impact of climate change on women and girls, and the need for gender-responsive climate action.
- The summit highlighted the importance of investing in green growth and climate finance solutions that benefit all sectors of society, with a particular focus on empowering women and youth through sustainable economic opportunities.
- More than half of the global 80 million conflict-related displaced people are women and children.
- Women in conflict zones are 7.7 times more likely to experience extreme poverty
- Girls in conflict-affected regions are 2.5 times more likely to be out of school.
- Peace agreement made with the participation of civil society groups, including women's organizations, is 64% less likely to fail.
- Women represented only 23% of delegations in UN-supported peace processes.
- The AU adopted the Continental Results Framework to monitor and report on the implementation of the Women, Peace, and Security agenda, aiming to enhance women's participation in peace processes.

3.4 Gender-Based Violence (GBV)

We are committed to contributing to the eradication of all forms of violence against women and youth, recognizing this issue as a critical barrier to achieving gender equality and sustainable development. This pillar focuses on addressing harmful cultural norms and practices that perpetuate violence. Essential to our approach is the provision of comprehensive psychosocial support for survivors, ensuring they receive the care they need to recover and rebuild their lives. We collaborate with governments, civil society, and community leaders to emphasize robust prevention and response strategies to enhance support services and create safe reporting mechanisms. We advocate for the strengthening of legal frameworks and justice systems to ensure accountability for perpetrators and protection of the rights of survivors. We envision a future where every woman and youth can live free from violence, empowered to thrive and actively participate in development.

3.4.1 The Imperatives

- 85,000 women and girls were intentionally killed by men in 2023, with 60% of those murders committed by someone close to the victim. Femicide!
- Every 10 minutes, a woman is killed.
- A 2023 UN Women report revealed that Africa recorded the highest rates of intimate partner violence (IPV), with 21,000 victims
- Sub-Saharan Africa's girls now face the highest

risk of child marriage globally, with a 10% increase projected by 2030.

- 200 million girls were married off before age 18, and 24.7% of women and girls aged 15-49 in SSA have undergone female genital mutilation (FGM).
- Under-resourced response systems: Limited shelters, counselling services, and legal aid for survivors.
- Weak implementation & enforcement of laws: Insufficient financial and human resources hinder effective enforcement and monitoring of existing GBV laws.
- Humanitarian and crisis situations: GBV often surges during emergencies, but response mechanisms fail to meet the increased demand for support.
- Data on GBV is limited and the true figures are likely to be significantly higher.

3.4.2 Priority Areas, Strategic Actions & Outcomes

Through strategic initiatives supported by partners and allies, we make contributions to significantly reduce the prevalence of GBV across Africa by transforming harmful cultural norms, providing comprehensive psychosocial support, and establishing effective prevention and response mechanisms. We prioritize a holistic approach that will empower individuals, promote gender equality, and create safer communities for all.



85,000

women and girls were intentionally killed by men in 2023



21,000

Victim: A 2023 UN Women report revealed that Africa recorded the highest rates of intimate partner violence (IPV)



200

million girls were married off before age 18



24.7%

Of women and girls aged 15-49 in SSA have undergone female genital mutilation (FGM)

Our Guiding Principle 3



Empowerment

We collaborate to build agency and voice for equal participation in all spheres of life.

Table 3.3: GBV Pillar priority areas, strategic actions and outcomes

Priority Area	Strategic Actions	Outcomes we contribute to
<p>Harmful social norms</p> 	<ul style="list-style-type: none"> ▪ Strengthen alliances with non-state actors to address social norms and issues such as child marriage ▪ Support capacity strengthening of grassroots allies and community-based organizations in FGM/C-affected communities to promote awareness of gender inequalities. ▪ Advocate for a multi-sectoral approach to eradicate FGM/C and child marriages. ▪ Strengthen media engagement to raise awareness on harmful cultural norms 	<ul style="list-style-type: none"> ▪ Positive shift in cultural norms and beliefs ▪ Increased championing of gender equality by community leaders
<p>Psychosocial support</p> 	<ul style="list-style-type: none"> ▪ Advocate for integrated service delivery models that combine health, legal, and psychosocial support, for survivors' comprehensive care ▪ Advocate for increased investment to support provision of psychosocial support services ▪ Partner with communities to strengthen peer-support initiatives to empower survivors to connect, share experiences, provide mutual support, and enhance social networks. 	<ul style="list-style-type: none"> ▪ Increased public investment in psychosocial support services ▪ Increased access to psychosocial support services ▪ Institutionalized support for GBV survivors
<p>Prevention and response</p> 	<ul style="list-style-type: none"> ▪ Advocacy to raise awareness/sensitize communities on GBV statistics and impact of GBV on children, youth, women and community. ▪ Advocacy for the implementation of policy and legal framework of GBV (application of the justice and legal systems) ▪ Promote the establishment of centers dedicated to addressing GBV response (e.g. call centers) ▪ Leverage technology for reporting and case management to address data gaps ▪ Leverage the influence of positive masculinity for GBV response ▪ Mobilize technical resources to support countries to strengthen the development, monitoring and reporting of global norms and standards on ending violence against women and girls ▪ Support measurement and methodologies for data collation on violence against women and girls. 	<ul style="list-style-type: none"> ▪ Policy and legal frameworks for mainstreaming gender including criminalization of GBV ▪ Enhanced GBV awareness and sensitization

3.5 Women Economic Empowerment

We are dedicated to enhancing the economic empowerment and agency of women. This pillar aims to address critical barriers to women's economic advancement, including limited access to financial resources, markets, and decision-making processes. We seek financial inclusion so that women have access to financial services, credit, and investment opportunities that enable them to build and expand their businesses.

We prioritize digital literacy initiatives that equip women with essential skills to navigate the digital economy and leverage technology to support women entrepreneurs. We envision a future where women can achieve their full potential, driving economic growth, innovation, and resilience in their communities and contributing to broader socio-economic development.

3.5.1 The Imperatives



By 2030, an estimated **8%** of the world's female population – **342.4 million** women and girls – will still be living on less than \$2.15 a day. Majority (220.9 million) will reside in sub-Saharan Africa



Among individuals aged 25 to 54, the labour force participation rate is **77%** for women, compared to 92% for men in Africa.



Closing the gender gap could give the global economy a **USD 7 trillion** boost (UN Women)



Women are **20%** less likely than men to have bank accounts, and **17%** less likely to secure formal loans.



Women in SSA spend **3.4** times more time on unpaid care and domestic work than men. Women's and girls' unpaid care and domestic work often subsidises the costs that sustain families, supports economies, and compensates for the lack of social services.



Women's economic empowerment is essential for reducing poverty and driving inclusive growth and development on the continent.



Women are especially held back from certain sectors of the economy, even in the face of job availability. For example, due to limited opportunities for education in STEM and ICT, women have far fewer chances to participate in the growing technology field.



Promoting women's economic empowerment can reduce poverty, drive inclusive growth and development, and advance gender equity on the continent.

3.5.2 Priority Areas, Strategic Actions & Outcomes

By 2030, we aim to amplify comprehensive economic empowerment for women across Africa, promoting financial inclusion, providing robust entrepreneurship support, and implementing effective policy and legal reforms. This integrated approach promotes inclusive economic growth by reducing gender inequalities

Table 3.4: WEE Pillar priority areas, strategic actions and desired outcomes

Priority Area	Strategic Actions	Outcomes we contribute to
Financial inclusion 	<ul style="list-style-type: none"> Collaborate with financial institutions to design and promote financial services and products tailored for women Advocate for financial inclusion policies that address the barriers women face in accessing financial services to promote gender equity in the financial sector Support financial literacy initiatives for women to empower them to make informed financial decisions. Support existing financial platforms by women village savings and loans associations (VSLAs), women’s table banking and merry-go-round (MGRs) for sustainability 	<ul style="list-style-type: none"> Access to financial services and gender responsive financial products Increased savings and investments for women in low-income areas
Digital literacy 	<ul style="list-style-type: none"> Mobilize technical resources for development and implementation of digital literacy training initiatives for girls and women Support partnerships for targeted training and mentorship initiatives targeting girls and women Partnership with digital lenders for development of innovative capacity building programmes for girls and women 	<ul style="list-style-type: none"> Enhanced digital skills and literacy for girls and women
Entrepreneurship support 	<ul style="list-style-type: none"> Advocate for a more conducive regulatory environment for small businesses addressing barriers faced by women. Partners with institutions to design and deploy comprehensive training programs for entrepreneurship Mobilize partnerships to support mentorship initiatives that provide guidance, support, and resources for women entrepreneurs Equip women in business with knowledge and skills, opportunities, to access finance and markets 	<ul style="list-style-type: none"> Improved market access for women-owned businesses

Priority Area	Strategic Actions	Outcomes we contribute to
<p>Policy and legal reforms</p> 	<ul style="list-style-type: none"> ▪ Establish platforms for policy advocacy ▪ Advocate for gender-responsive policies promoting financial inclusion and women entrepreneurship ▪ Advocate for the enactment of matrimonial property legal framework that protect women’s rights 	<ul style="list-style-type: none"> ▪ Gender-responsive policies promoting financial inclusion and women entrepreneurship ▪ Enactment of matrimonial property legal framework that protect women’s rights
<p>Leadership, inclusion and agency</p> 	<ul style="list-style-type: none"> ▪ Advocate for the increased participation of women in decision-making at all levels, including political institutions and processes, in line with AU gender parity principle. ▪ Mobilize technical assistance and capacity-building programs to women-led organizations, equipping them with the skills to actively participate in policy design and decision-making ▪ Engage diverse women leaders, activists, and community representatives in the design, implementation, and evaluation of public policies and services 	<ul style="list-style-type: none"> ▪ Amplified women’s voice, leadership and agency ▪ Increased representation of women in decision-making

4 Implementation and Coordination

4.1 Implementation

Implementation of the Strategic Framework is shared. The OAFLAD Secretariat, member states, partners and other key stakeholders are crucial.

The Strategic Framework recognizes the need for greater collaboration and coordination within OAFLAD and with key partners and allies to agree activities, schedules, monitoring and accountability for implementation. OAFLAD will continue to lead and coordinate strategy implementation. However, everyone has a role to play

and work together to realise the strategy's desired outcomes and vision.

OAFLAD's Sectoral Technical Working Groups (STWGs) on Health, Education, WEE and GBV support strategic collaboration on the Strategic Framework's implementation and provide implementation oversight, including monitoring and evaluation. The STWGs in each pillar support:



To guide focused execution, the 2025-2030 Strategic Framework is implemented in three phases: Phase 1 (2025-2026), Phase 2 (2027-2028) and Phase 3 (2029-2030). These phases synchronize with the OAFLAD leadership or presidency tenures and provide an opportunity for strategic prioritization of action

and focus as well as reinvigoration of the Strategic Framework implementation. The phases also provide opportunities for leadership to identify 'flagship' areas or initiatives, areas that have received less attention for re-strategizing and evaluation or review points for the framework

4.1.1 Role of Member States

To support the implementation of the Strategic Framework, member states:

- Integrate the proposed strategic actions in member state strategic frameworks and work plans for their prioritized strategic pillars
- Implement contextual measures at country level to contribute to the achievement of the desired outcomes
- Participate in consultative mechanisms in support of implementation and assessment
- Provide feedback to the Secretariat on the implementation of strategic actions in the Strategic Framework
- Increase visibility of OAFLAD and its strategic priorities at country level
- Participate in high level forums and discussions with partners on priority areas in the Strategic Framework.

4.1.2 Role of Partners

To support the implementation of the Strategic Framework, partners and allies:

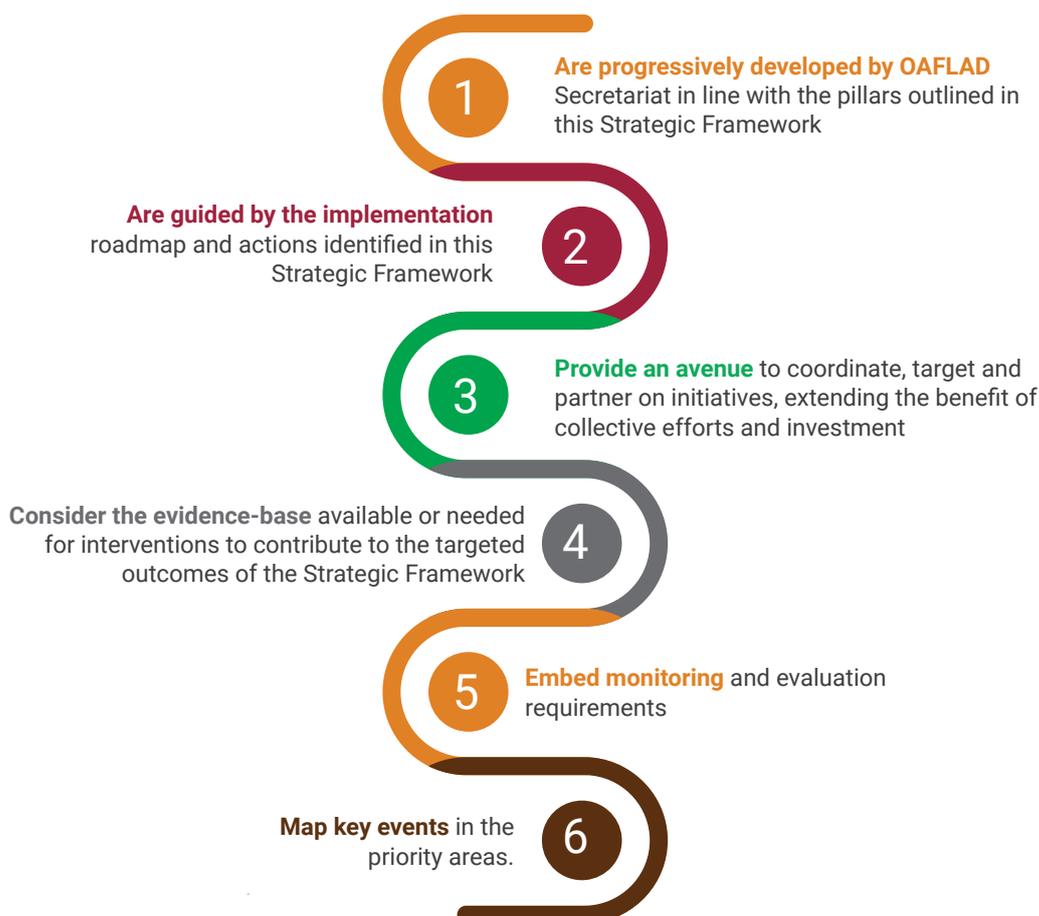
- Contribute expertise, knowledge resources and advisory support in relevant priority areas
- Support resource mobilization for the Strategic Framework implementation
- Provide institutional commitment
- Participate in technical consultations and other consultative mechanisms of the Strategic Framework

4.2 Implementation Roadmap

The implementation roadmap identifies and maps the priorities and actions to guide implementation. It also identifies stakeholders that have a role in the delivery of each strategic action in the key priority areas, including the OAFLAD Secretariat, First Ladies, partners and

other stakeholders (See Annex 1). The member states integrate strategic actions from prioritized pillars and priority areas in their annual work plans to support implementation of the Strategic Framework.

At OAFLAD organizational level, annual work plans:



5 Measuring Success

5.1 Monitoring, Evaluation and Learning

The implementation and success of the Strategic Framework is assessed through the lens of OAFLAD's contributory role and its key strategic approaches: to advocate, to mobilize and to convene. Key indicators of success are linked to the annual work plans.

The monitoring, evaluation and learning (MEL) approach is informed by lessons from review of the 2019-2023/24 Strategic Plan, OAFLAD's scope of influence and action,

and its internal capacity and practicalities for data collection.

The OAFLAD Secretariat works with member states, partners and other key stakeholders to identify appropriate data sources and metrics for performance measurement, including a range of quantitative and qualitative approaches. These include the following:



Our Guiding Principle 4



Evidence-led

We base our actions and interactions on evidence to influence impactful dialogue and change.



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