

ECDC CORPORATE

Highlights from the Consolidated Annual Activity Report – achievements, challenges and major outputs in 2024

June 2025

2024 in brief

The Centre continued to implement its reinforced mandate throughout 2024. In December 2022, the European Commission launched the European Health Union with the aim of supporting EU countries to better anticipate, prepare, and respond to future health threats. Two key pillars of this initiative were the strengthening of ECDC's mandate and the introduction of a new regulation on serious cross-border health threats. Together, they form the strategic framework guiding ECDC's core activities.

In 2024, ECDC strengthened its commitment to providing scientific excellence, reliable public health intelligence, and enhanced preparedness across Europe. ECDC also prioritised public trust by providing transparent, evidence-based information to support decision-making and safeguard public health. Efforts focused on building a more proactive and forward-looking ECDC continue. Europe needs a strong and resilient European infectious disease agency that can act with efficiency and agility to respond to health threats in a timely manner, providing relevant guidance and recommendations to the EU Member States, EEA countries and key partners.

This report summarises ECDC's achievements in 2024.

New leadership

There were several changes in ECDC's senior management and policy landscape in 2024. In February, the Management Board elected Dr Pamela Rendi-Wagner as the new Director of ECDC for the 2024–2029 term.

At its meeting in November, the Board elected Gesa Lücking and Lieven De Raedt as Chair and Deputy Chair of the Management Board, respectively. Following the European Parliament elections in June 2024, a newly formed European Parliament was constituted on 16 July in Strasbourg. The subcommittee on Public Health of the ENVI Committee became a standing committee (SANT) on 18 December. ECDC now falls under the remit of the newly established SANT Committee and interacts with its members on topics related to public health and infectious diseases. The new European Commission began its mandate on 1 December 2024. The Commissioner for Health and Animal Welfare, Mr Olivér Várhelyi, and the Commissioner for Equality, Preparedness and Crisis Management, Ms Hadja Lahbib, will play important roles for ECDC.

Key scientific projects and activities

ECDC developed a new methodology for assessing prevention, preparedness and response plans in EU/EEA countries, as required by Article 8 of the Regulation on Serious Cross-Border Threats to Health. This methodology was piloted for the first cycle (2024–2026) of Public Health Emergency Preparedness Assessments in Belgium, Finland, Estonia and Spain, and subsequently in Sweden, Malta and Luxembourg. These missions – involving experts from ECDC, the Directorate-General for Health and Food Safety, the Health Emergency Preparedness and Response Authority, the World Health Organization and EU Member States – assessed 16 preparedness capacities to identify best practice and provide recommendations aimed at strengthening national and EU preparedness for public health emergencies.

Concluding a two-year initiative, ECDC completed its strategic foresight project, integrating multiple systematic methodologies such as desk research, expert elicitation, and scenario-based analysis. The project bolstered ECDC's ability to anticipate future public health challenges and to strengthen resilience against emerging health threats.

ECDC and the European Commission took a major step towards strengthening microbiological capacities by launching the establishment of six European Union Reference Laboratories (EURL). An initial group of three laboratories will focus on antimicrobial resistance in bacteria; vector-borne viral pathogens; emerging, rodent-borne and zoonotic viral pathogens; high-risk, emerging and zoonotic bacterial pathogens; Legionella; diphtheria; and pertussis. The remaining three EURLs will begin operations in 2026.

ECDC continued working closely with EU/EEA Member States and rolled out several new initiatives. ECDC provided advanced modelling support for EU Member States, and in 2024 RespiCompass, an online platform that uses mathematical modelling to simulate respiratory disease dynamics under various longer-term scenarios, was launched.

The EU Health Task Force played a pivotal role in strengthening preparedness, supporting nine assignments across seven EU Member States. Expert teams were deployed for emergency response operations in four major outbreaks across the Middle East and Sub-Saharan Africa. Further enhancements to preparedness mechanisms included the establishment of expert pools, the delivery of expert training, and ongoing dialogue with Member States.

In November 2024, ECDC launched the ECDC Lighthouse, an EU-wide online community of practice focused on using social and behavioural sciences to prevent infectious diseases. The ECDC framework for prevention of communicable diseases and related special health issues was published in 2024, with the aim of supporting and promoting effective, evidence-based prevention of communicable diseases in the EU/EEA.

ECDC strengthened its coordination with EU institutions and agencies, and collaboration with non-EU countries, global partners and stakeholders. In March 2024, ECDC adopted the EU Agencies' Network (EUAN) Charter on Diversity and Inclusion, reinforcing its commitment to fostering a diverse and inclusive workplace. Throughout the year, several actions were taken to promote diversity and inclusion, including reviews of HR processes, webinars and workshops designed to cultivate a more respectful work environment.

The Cross-agency One Health Task Force (ECDC, European Medicines Agency (EMA), European Food Safety Authority (EFSA), European Chemicals Agency (ECHA), European Environment Agency), established in late 2023, launched its operational collaboration with the development and publication of the Cross-agency One Health task force framework for action (2024–2026). Within this framework, ECDC leads on strategic objective 4: One Health Stakeholder engagement and communication, and co-leads with EFSA on strategic objective 3: One Health capacity building.

New tools and processes

The Centre undertook a comprehensive review of its public health output categories and types to improve clarity, relevance and impact. This included refining internal procedures for scientific outputs and advice, implementing a structured approach to sort requests, and enhancing the functionality of the Scientific Advice Repository and Management System.

The Centre's AI Working Group rolled out critical deliverables by developing a use case repository, setting responsible AI guidelines, and piloting productivity tools to drive efficiency and innovation.

Furthermore, the Centre integrated innovative tools and deepened collaboration with Member States and international partners, reinforcing its leadership in communicable disease prevention and control. ECDC also prioritised public trust by providing transparent, evidence-based information to support decision-making and safeguard public health.

ECDC became Eco-Management and Audit Scheme (EMAS) certified in January 2024. EMAS is a voluntary EU initiative that provides a structured framework for organisations to evaluate, report, and improve their environmental performance. By adopting EMAS, ECDC has taken a proactive step toward integrating environmental sustainability into its daily operations and long-term strategic planning.

Foreword by the Chair of the Management Board



It is my great pleasure to introduce the ECDC Consolidated Annual Activity Report 2024, which summarises the work carried out by ECDC last year with special focus on implementing the Agency's strengthened mandate.

The year 2024 was the first in which ECDC's amended mandate was implemented. Similarly, the provisions of the EU Regulation on Serious Cross-Border Threats to Health related to ECDC's work were also put into effect and began to move ahead at full speed. This included the initiation of the Public Health Emergency Preparedness Assessments (PHEPA) to evaluate the prevention, preparedness and response plans of the EU Member States and European Economic Area (EEA) countries, with seven assessments conducted. In addition, the EU Health Task Force (EUHTF) was operationalised for remote support and rapid in-country field deployment in the EU and beyond, and has

already had several deployments to Africa to support responses to mpox and Marburg virus disease outbreaks.

In the area of surveillance strengthening, which remains the backbone of disease prevention and control, the Centre's work involved the development of surveillance standards, the building of whole genome sequencing infrastructures and laboratory support, with the designation of the first EU Reference Laboratories (EURLs) for public health.

Key developments also included the adoption of the ECDC Prevention Framework; ECDC's One Health Framework to strengthen, develop and implement the One Health approach for the prevention and control of communicable diseases; and the ECDC Foresight Programme.

The COVID-19 pandemic showed the importance of close collaboration and coordination between countries to address potential global health threats. In 2024, ECDC intensified collaboration with non-EU countries and international partners. The Centre has implemented several technical assistance projects, funded by the European Commission, to support the EU enlargement and the European Neighbourhood Policy partner countries and has also worked in partnership with the Africa Centres for Disease Control and Prevention (CDC) to build capacities to prevent and combat threats from communicable diseases. ECDC continued to work closely with the World Health Organization (WHO), while developing international relationships with new partners to establish mutually beneficial collaboration to help contribute to global health security preparedness.

As Chair of the Management Board, I would like to draw your attention to certain elements of ECDC's work in 2024 which will have a far-reaching impact for the future, including the elections of the new ECDC Director and the Chair of the Management Board.

During its sixth extraordinary meeting in February 2024, the Management Board elected Dr Pamela Rendi-Wagner as the new Director of ECDC for the period 2024–2029.

At its sixtieth meeting in March, the Management Board was updated on the methodology, planning process and timeline of the PHEPA, the work of the EUHTF, and progress with the EURLs and the ECDC draft One Health Framework. At the sixty-first and sixty-second meetings in June and November, the Board members received a report on the PHEPA missions conducted, along with feedback from the Member States assessed. The Board found this to be a very useful exercise for sharing experiences and best practices and will therefore continue to follow and receive regular updates on this topic. At its sixty-second meeting in November 2024, the Board elected Gesa Lücking and Lieven De Raedt as Chair and Deputy Chair of the Management Board respectively.

During the course of 2024, the Management Board approved the Memorandum of Cooperation between ECDC and the Ministry of Health, Labour and Welfare of Japan. It also endorsed the Internal Audit Service 2024 Audit Plan for ECDC and appointed a working group for the revision of the Management Board rules of procedure and the Audit Committee mandate.

In accordance with legal obligations, the Management Board approved the Consolidated Annual Activity Report 2023 and the final annual accounts for 2023. It also approved the ECDC Single Programming Document 2025–2027 and the budget and establishment table for 2025. In addition, the Board members discussed the draft ECDC Single Programming Document 2026–2028. Other topics presented and discussed were ECDC's international activities and collaboration with other relevant EU agencies.

I would like to take this opportunity to thank my fellow Board members for their valuable and insightful contributions during the ECDC Management Board meetings. I also wish to express my profound gratitude to ECDC staff for their invaluable collaborative work in public health, and for embracing emerging challenges and opportunities. With our strong foundation, let us continue to be inspired in our shared quest to improve lives across Europe and globally.

Gesa Lücking
Chair of ECDC Management Board

Introduction by the Director



As ECDC prepares to mark its 20th anniversary, I am pleased to introduce you to the highlights from the Centre's Consolidated Annual Activity Report 2024 (CAAR).

In today's increasingly complex world where public health faces challenges from climate change, natural disasters, geopolitical conflicts, population displacement, growing health inequalities and misinformation and disinformation campaigns, there is a need for a strong and resilient European infectious disease agency.

Reflecting the rapidly changing public health landscape in Europe and globally, and with a new European Parliament elected in 2024 and a new European Commission, our aim is to build a more proactive and forward-looking ECDC.

Since taking up office as the fourth director of ECDC in June last year, my priority has been to ensure that ECDC can act with efficiency and agility to respond to health threats in a timely manner, providing relevant guidance and recommendations to the EU Member States, EEA countries and key partners.

With ECDC's reinforced mandate, the Agency plays a key role in implementing Public Health Emergency Preparedness Assessments (PHEPA) in EU Member States, as required in the EU Regulation on Serious Cross-Border Threats to Health. ECDC collaborates with EU and EEA countries to identify best practices, gaps, or areas for improvements in national prevention, preparedness, and response plans. In 2024, seven PHEPA missions were conducted, and ECDC developed country-specific recommendations to ensure that Member States have robust plans in place for health emergencies, thus enhancing overall preparedness at Union level.

ECDC played an active role in the Cross-Agency One Health task force in 2024, working with EMA, EFSA, ECHA and the European Environment Agency to build on existing joint activities, strengthen collaboration, and advance the implementation of the One Health approach.

With regard to antimicrobial resistance (AMR), while progress has been achieved in the EU in a number of critical areas, AMR continues to threaten to undo a century of medical advances. We must continue to find innovative ways to tackle the threat of AMR, while continuing to promote antimicrobial stewardship and the prudent use of antibiotics.

In line with ECDC's commitment to supporting Member States, the Agency produced several risk assessments and provided public health guidance, including guidance for national health authorities on managing mass gatherings during the Paris Olympics and the EURO 2024 football tournament. ECDC also made additional resources available to Member States that enable enhanced surveillance activities, whole genome sequencing, long-term funding of EU Reference Laboratories, training in genomic surveillance and improved e-health surveillance.

Following the declaration of mpox as a public health emergency of international concern in August 2024, we promptly delivered a rapid risk assessment for the EU/EEA in response to the upsurge in cases in the Democratic Republic of the Congo, to ensure national public health systems were prepared for potential further spread or importation of cases into the EU.

Furthermore, detections of vaccine-derived polio virus type 2 through environmental surveillance in several cities across four EU Member States have sounded the alarm for heightened surveillance and vaccination efforts to prevent polio disease from recurring in the EU. In response, ECDC launched a process of rapid data collection from the affected Member States, with particular focus on reporting sequenced polioviruses data to the Centre. ECDC also convened experts and country representatives to discuss this unprecedented situation in the EU and to prepare EU-wide guidance on response and vaccination measures.

In line with our Agency's strengthened mandate, ECDC has increased its international outreach and response work during the past year, working in close collaboration with key partners such as WHO and major Centers for Disease Prevention. In October 2024, ECDC signed a Memorandum of Cooperation with the Ministry of Health and Welfare in Japan. This agreement strengthens our relationships in East Asia – a vital region for global surveillance – and complements our existing agreements with China and South Korea.

The European Health Task Force deployed experts to the Democratic Republic of the Congo, Zambia and Rwanda to support local response efforts for mpox clade Ib, Marburg virus disease and cholera. These deployments enabled ECDC to gather crucial intelligence about the new clade and inform our risk assessments for the EU/EEA.

For ECDC to succeed in its mission, it is essential that we rebuild public trust in science following the COVID-19 pandemic. Providing timely, relevant updates in plain language that engage the public will form the foundation of this work. To that end, ECDC began the roll-out of a social listening platform to detect false narratives early – before they gain traction. Such narratives can then be countered with clear, evidence-based information. ECDC has also adopted a new methodology that places social and behavioural sciences at the heart of our work.

Our commitment to leading in prevention activities and international collaboration, and working in partnership with Member States, is reflected in the adoption of our Single Programming Document 2025–2027, which will further expand ECDC’s potential for impact. We will also continue to work closely with our EU and international partners to advance a One Health approach to addressing Europe’s public health challenges.

I look forward to building on the achievements laid out in this report as we work toward a healthier, safer, and more resilient Europe.

Pamela Rendi-Wagner
ECDC Director

1. Strengthen the relevance and accessibility of scientific outputs to support public health policies

Strategic objective 1 of the 2021–2027 strategy is to maintain the independence and rigour of scientific processes and strengthen the relevance and accessibility of scientific outputs to support public health policies and practices at national and EU levels. The aim is that by 2027, evidence used to inform public health policies and practices will be based on independent and robust science and scientific expertise.

ECDC strives to make its outputs more relevant and accessible. Transferring knowledge to bridge the gaps between science, policy and practice, and addressing areas of uncertainty and knowledge gaps through modelling and forecasting are some examples of this work. Communicating research priorities identified by ECDC to EU research initiatives and other EU bodies are other ways the Centre works to bridge the gaps. Below are some highlights of the 2024 work in this area.

Foresight

In 2024, ECDC concluded its strategic foresight project, which began in early 2022. This comprehensive project utilised multiple systematic methods, including desk research and expert elicitation, to enhance preparedness and resilience against future health threats and other long-term developments. The strategic actions previously identified for ECDC to ensure effective mission delivery until 2040 were evaluated for their relevance, effectiveness and efficiency through surveys and in-depth interviews with ECDC staff and key external experts, decision-makers and stakeholders. These actions were then tested using 'wind-tunnelling' exercises, conducted with ECDC staff and the Advisory Forum, to assess their robustness against six future threat scenarios developed earlier in this project. This process resulted in a refined set of 'future-proofed' actions for operational, strategic and policy consideration.

In parallel, ECDC provided monthly foresight training courses and hands-on workshops for all staff, further bolstering the Centre's anticipatory capacity. A range of relevant foresight skills and competences were taken up in the Competency Library for ECDC staff: under transversal competencies for all staff, specifically for managers under 'strategic vision', and as core technical competencies for staff in operational positions. The capacity building curriculum included a general introduction to foresight, deep-dives into easy-to-apply foresight methods that teams would be able to use independently, and advanced sessions on institutionalising strategic foresight and anticipatory culture.

Modelling

ECDC's biostatistics and mathematical modelling team continued contributing in-depth and advanced biostatistical and mathematical modelling analyses and insights to ECDC outputs, such as rapid risk assessments and technical reports. ECDC also expanded the successful European COVID-19 Forecast and Scenario Hubs to include additional respiratory diseases: [RespiCast](#), which combines multiple forecasting models into an ensemble forecast for several respiratory disease indicators, including influenza-like-illness, acute respiratory infection, and indicators related to COVID-19 and RespiCompass, which provides insights by simulating respiratory disease dynamics under different scenarios.

External and risk communication

ECDC carries out communication activities as part of its annual work programme and in response to emergencies or ad-hoc events. During key global awareness campaigns (e.g. World Tuberculosis Day, World Hepatitis Day, World Hand Hygiene Day, World Polio Day, Flu Awareness Week, European Immunisation Week (EIW), European Antibiotic Awareness Day (EAAD), and World AIDS Day), the agency shared its work and the latest data, customising messages for specific target groups, including the public, healthcare professionals, policymakers and the media.

ECDC developed communication materials and campaigns, using traditional media, social media, videos, toolkits, infographics, and other content formats that were shared with partners and stakeholders across the EU. Materials were developed in editable formats that could be easily adapted to local languages and practices. As in previous years, ECDC published joint communication outputs on TB and HIV/AIDS in collaboration with WHO's Regional Office for Europe.

Five influencer campaigns in 2024 engaged 96 influencers across all EU countries, promoting key messages on vaccination and immunisation, AMR and antimicrobial consumption (AMC), HIV/AIDS, sexually transmitted infections (STIs) and respiratory viruses. These campaigns produced 457 pieces of content, reaching over 10.2 million people. ECDC produced 116 videos in 2024, including 91 publicly available on YouTube. In August 2021, ECDC launched its podcast 'ECDC: On Air'. To date, 62 episodes have been aired, accumulating nearly 500 000 plays across platforms (including YouTube), with 11 episodes published in 2024.

The Centre maintained a strong presence in mainstream media throughout the year, with a total of 55 515 references in high-quality European and international media. ECDC's website saw a 45% increase in traffic, with a peak in August, driven by heightened interest in updates on mpox, COVID-19, dengue and West Nile virus. The European Vaccination Information Portal saw a considerable increase in traffic in 2024, with 2 821 634 page views, reflecting a 316.3% rise compared to 2023.

ECDC handled 19 806 emails through its information mailbox, of which 5 922 were registered and information requests processed. Of these, 112 were delegated for handling by the Communication section.

ECDC had a presence at four conferences, including the European Congress of Clinical Microbiology & Infectious Diseases, the 25th International AIDS Conference, the EU Agencies and Joint Undertakings networking event 'Contributing to Europe's resilience' at the European Parliament, and ESCAIDE.

2. Provide recommendations to enable evidence-informed decision-making

Strategic objective 2 of the 2021–2027 strategy is to provide relevant, reliable and timely information and science-based recommendations to enable evidence-informed decision-making at national and EU levels. The aim is that by 2027, science-based information, public health evidence and recommendations drive public health policy decisions and actions.

Surveillance

Through its surveillance activities, the Centre continued to support and inform public health authorities across more than 60 communicable diseases in all 27 EU Member States and two EEA countries (Iceland and Norway). Focus was placed on improving data quality, timeliness of data collection and reporting, and the comprehensiveness of surveillance reports. Key activities included the promotion of molecular surveillance, strengthening of whole genome sequencing, infrastructure and training, and enhancing the accessibility, relevance and usability of surveillance outputs.

In May 2024, ECDC published the third '[Point Prevalence Survey on Healthcare Associated Infections and antimicrobial use in European acute care hospitals \(2022–2023\)](#)'. The Centre also continued developing structure and process indicators for infection prevention and control and antimicrobial stewardship in long-term care facilities, which will be published in 2025.

In August 2024, ECDC activated its Public Health Emergency (PHE) plan for approximately five weeks in response to the expansion of mpox caused by MP clade II in the Democratic Republic of the Congo (DRC). The PHE activation enabled ECDC to reallocate essential resources to support European Union (EU) Member States and the European Commission. During the period, ECDC published multiple epidemiological updates, including the development of a methodology for assessing the mpox clade II transmission patterns at the national level and globally. These updates, along with the transmission pattern assessments, were published weekly in the Communicable Disease Threats Report (CDTR). In addition, ECDC published rapid scientific advice on public health measures for mpox, which continues to be updated as more information becomes available.

The Centre continued monitoring and strengthening the epidemiological and laboratory surveillance of vaccine-preventable diseases (VPD), with renewed efforts to improve quality of reporting and continued investment in supporting the implementation of the whole genome sequencing strategy. The VPDs under surveillance were the pilot for the launch of EpiPulse Cases in 2024.

ECDC continued to implement its strategic framework to support the use of genomic surveillance across all disease areas, enhancing pathogen monitoring at the EU level.

Digital solutions for surveillance

In 2024, EpiPulse Cases went live with the collection of VPD surveillance data from 2023, marking the beginning of its phased replacement of The European Surveillance System (TESSy) over the next two years. ECDC also expanded electronic health record-based surveillance, adding STIs to its existing monitoring of severe acute respiratory infections (SARIs) and bloodstream infections. The first e-health-based surveillance network meeting was held in September to support this transition.

EpiPulse Events continued to be further developed through the ECDC surveillance portal for infectious diseases (EpiPulse). This included the implementation of interoperability with the Early Warning and Response System (EWRS), which allows the sharing of daily and weekly communicable disease threat reports (CDTRs), as well as situational awareness on events under monitoring across the two platforms. In addition, work started on improving the user experience for the EpiPulse platform, including its functionality to allow direct communication between users within the platform. This functionality will be implemented in 2025. In addition, ECDC initiated the planning and design of an open-source, EpiPulse-like solution for Member States as a first step to offer a global solution for event-based surveillance. This project, entitled Epi+, has garnered significant interest from several Member States, and it will continue until 2026.

ECDC successfully completed its pilot of the European Health Data Space (EHDS), demonstrating the feasibility of federated data query and analysis through EHDS infrastructure using AMR data from Belgium, Croatia and Finland.

European Union Reference Laboratories

In 2024, ECDC continued its work on the implementation of European Union Reference Laboratories (EURL) to enhance public health microbiology capacity across EU/EEA countries. Together with the European Commission, ECDC initiated the establishment of six EURLs, with three more set to begin operations in January 2026. These initial EURLs will focus on AMR in bacteria; vector-borne viral pathogens; emerging, rodent-borne and zoonotic viral pathogens; high-risk, emerging and zoonotic bacterial pathogens; Legionella; and diphtheria and pertussis. The additional three EURLs will focus on food- and waterborne bacteria; food-, water-, and vector-borne helminths and protozoa; and food- and waterborne viruses.

The first EURL for Legionnaires' disease was nominated. A protocol for EU/EEA genomic surveillance was produced, shared and discussed with Member States' representatives at the European Legionnaires' Disease Network meeting. ECDC also conducted continuous, near real-time surveillance for Travel-Associated Legionnaires' Disease (TALD).

3. Support prevention, preparedness and control

Strategic objective 3 of the 2021–2027 strategy is to support the development of plans, systems and capacities for prevention, preparedness and control of communicable diseases and related special health issues at national and EU levels. The aim is that by 2027, EU and national prevention and preparedness capacities will have been strengthened to respond to cross-border health threats and future health crises.

Provide support for countries to strengthen their programmes and systems to prevent and control communicable diseases

ECDC continued working closely with EU/EEA Member States through the ECDC Coordinating Competent Bodies and the national coordinators to enhance knowledge and align targeted country support with ECDC's annual planning cycle. ECDC established an integrated approach and process to support a coherent and coordinated overview. The Country Overview Dashboard was released to nominated Member State users, who provided feedback on the data points. Based on their feedback and ECDC's core work developments, the dashboard was updated, and ongoing maintenance work will continue.

Social and behavioural aspects of disease prevention

ECDC has continued to address social and behavioural aspects of the prevention and control of communicable diseases.

ECDC published the '[ECDC framework for prevention of communicable diseases and related special health issues](#)', which sets out a vision for strong, effective and evidence-based prevention of communicable diseases in the EU/EEA. As per ECDC's strengthened mandate, the framework broadens ECDC's approach to prevention (building on the agency's historical biomedical, microbiological and epidemiological expertise) to include the social and behavioural sciences, health promotion, health literacy, health education, behaviour change and to address socio-economic risk factors.

A key initiative of the framework was the development, piloting and launch of the [ECDC Lighthouse](#) at ESCAIDE 2024, an EU-wide online community of practice dedicated to the prevention of infectious diseases through the use of social and behavioural sciences. Membership in the Lighthouse is open to professionals in public health authorities, universities and research institutions, and civil society and community-based organisations from all EU/EEA countries. The platform provides an online space for support including networking and the exchange of good practice, as well as trainings and other learning opportunities.

One Health initiatives

The Cross-agency One Health Task Force (ECDC, EMA, EFSA, the European Environment Agency and ECHA), formally established at the end of 2023, initiated its operational collaboration with development and publication of the joint '[One Health Framework for Action \(2024–2026\)](#)'. ECDC leads on strategic objective 4 of the Framework's five strategic objectives and this is dedicated to One Health Stakeholder engagement and communication. In addition, ECDC co-leads on strategic objective 3, One Health capacity building, together with EFSA. In 2024, ECDC took on the chairmanship of the Cross-Agency One Health Task Force and organised its annual meeting, hosted by EMA.

In May 2024, ECDC's One Health Task Force published the [ECDC One Health Framework](#), outlining how the Centre intends to strengthen, develop and implement the One Health approach in its activities. The Framework has three strategic objectives at the EU level, focused on effective coordination mechanisms and collaboration at the EU level; and three strategic objectives for supporting the Member States in surveillance, risk assessment, preparedness and capacity building.

ECDC has joined several One Health partnerships, including membership of the One Health Partners' Forum of the Quadripartite (WHO, World Organisation for Animal Health, UN Food and Agriculture Organisation, United Nations Environment Programme) and participated in the first One Health seminar organised by the Forum's European Region.

ECDC also became a member of the European One Health Association (EOHA), consisting of 33 organisations from 18 countries, to ensure dissemination of [One Health European Joint Programme](#) (EJP) results, and participated in the kick-off meeting in September 2024.

ECDC is also one of the founding partners of the Global Laboratory Leadership Programme (GLLP) and further contributed to the development of the programme and hosted the annual GLLP partners meeting at ECDC in November.

Preparedness and response

ECDC completed the first cycle of Public Health Emergency Preparedness Assessments (PHEPA) for EU/EEA countries, with seven PHEPA missions conducted in Belgium, Estonia, Finland, Luxembourg, Malta, Spain and Sweden. These missions – involving 10 or more experts from ECDC, the Directorate-General for Health and Food Safety, the Health Emergency Preparedness and Response Authority, WHO and EU Member States – assessed 16 preparedness capacities to identify best practice and provided recommendations to strengthen both national and EU preparedness for public health emergencies.

In relation to the EU Health Task Force (EUHTF), ECDC established the EUHTF Advisory Group, comprising experts from six Member States, four European Commission Directorates-General (the Directorate-General for Health and Food Safety, the Directorate-General for European Civil Protection and Humanitarian Aid Operations, the Health Emergency Preparedness and Response Authority and the Directorate-General for Research and Innovation), EMA, WHO and the Global outbreak alert and response network (GOARN), one representative from EUPHA, and one from Médecins Sans Frontières. The group met four times in 2024 and provided guidance on EUHTF's technical, operational, and administrative progress. EUHTF supported 13 assignments, including nine in EU countries and four in response to emergencies in the Middle East and Sub-Saharan Africa, deploying 13 experts.

ECDC continued to enhance the EWRS, based on the needs of the European Commission and Member States. A mechanism was developed to improve data exchange and complementarity between EWRS and EpiPulse. Launched in 2021, EpiPulse was extensively used for data collection and expert exchange during disease outbreaks. Its maintenance and enhancement remained a priority, with ECDC experts collaborating closely with stakeholders. In addition, the whole-genome sequencing (WGS) module was integrated into EpiPulse and training courses were provided to Member State experts. Preparations were made to improve user-friendliness and design for 2025.

ECDC is developing a new training programme 'Public Health Preparedness and Response (PHPR) training' under the framework contract 'Emergency preparedness and response training for workforce capacity building', signed in 2024. The course consists of 112 hours of planned activities over a four-month period. This comprehensive course will cover all aspects of the preparedness cycle using a mixed methods approach and expects to train up to 150 individuals over the duration of the contract.

4. Coordination and collaboration with Member States and other ECDC key partners

Strategic objective 4 of the 2021–2027 strategy is to streamline coordination and collaboration with Member States and other ECDC key partners in the EU and worldwide. The aim is that by 2027, prevention, preparedness and response capacities in the EU and worldwide will have been strengthened through increased collaboration and coordination at all levels.

Coordination of priorities and related actions with ECDC partners and stakeholders

ECDC strengthened its coordination with key EU institutions, global partners and stakeholders to align priorities and policy objectives.

Close cooperation continued with the European Commission (the Directorate-General for Health and Food Safety, the Health Emergency Preparedness and Response Authority, the Directorate-General for European Civil Protection and Humanitarian Aid Operations, the Directorate-General for Neighbourhood and Enlargement Negotiations, the Directorate-General for International Partnerships and the Joint Research Centre), the EU External Action Service (EEAS), and EU delegations to support the implementation of the amended ECDC mandate and the provisions of the Serious Cross-Border Health Threats Regulation related to ECDC work, as well as the EU Global Health Strategy.

Regular cooperation and exchanges of views continued to take place with the European Parliament (ENVI, SANT, BUDG and CONT Committees). In March, the annual hearing of the ECDC Director took place in the ENVI Committee. A hearing was also held with the ECDC Director nominee during the spring and an exchange of views on mpox took place in the autumn. Following the election of a new European Parliament, ECDC hosted a delegation of Members of the European Parliament of the SANT subcommittee in June to present the work of the Agency and the implementation of its strengthened mandate.

ECDC also enjoys regular and close collaboration with the EU Agencies and its network (EUAN). On 4 December, the ECDC Director, together with the executive directors for EFSA, ECHA, EMA and the European Environment Agency, jointly introduced the roles and responsibilities of their agencies to the new European Parliament. ECDC actively participated in the Health Security Council meetings, including plenary sessions at the director level, general working group online meetings, and technical-level working groups on EWRS and preparedness. ECDC made significant contributions to the drafting and consulting for implementing and delegated acts under the Serious Cross-Border Threats to Health Regulation, covering topics such as the list of diseases under EU/EEA surveillance and their case definitions, the network for epidemiological surveillance, the surveillance platform, the surveillance standards, the EUHTF and the Article 8 preparedness assessment methodology.

ECDC's close collaboration with WHO continued. ECDC's Director attended the 74th session of the WHO Regional Committee for Europe. However, the negotiation of both the revised Memorandum of Understanding between ECDC and the WHO's Regional Office for Europe and the co-publishing agreement have been delayed and are now foreseen to be concluded in 2025.

Global health

With financial support from the European Commission's Directorate-General for Neighbourhood and Enlargement Negotiations under the Instrument for Pre-accession Assistance, ECDC continued to implement the action described in the Contribution Agreement 2019/409-781 and 2020/422-255: 'Preparatory measures for the participation of the Western Balkans and Türkiye in the European Centre for Disease Prevention and Control with special focus on One Health against AMR and enhanced SARI surveillance, 2020–2024' (ECDC-IPA6 project).

The Eastern Partnership (EaP) is a joint initiative involving the EU, its Member States and five Eastern European Partner countries: Armenia, Azerbaijan, Georgia, the Republic of Moldova and Ukraine. In 2024, ECDC signed a new contribution agreement for 2025–2027 with the European Commission (Directorate-General for Neighbourhood and Enlargement Negotiations) entitled 'Support for health resilience in the Eastern Partnership'. This three-year agreement will involve a series of activities aimed at testing the resilience of EaP health systems to emergencies, providing capacity building opportunities and strengthening regional dialogue on common challenges and opportunities.

ECDC signed a Memorandum of Cooperation with the Japanese Ministry of Health, Labour and Welfare and made significant progress in negotiations for a new Memorandum of Understanding with the Gulf CDC and Africa CDC.

In collaboration with Africa CDC, ECDC continued the technical partnership project, renamed 'Africa CDC – ECDC Partnership', with funding from the European Commission's Directorate-General for International Partnerships. The project, officially extended at no cost (18 October 2024 until 29 April 2026), aims to contribute to health security in Africa by sharing EU practices and strengthening Africa CDC's capacities in preparedness, surveillance and response to health threats posed by communicable diseases.

5. Systems, structures, processes and skilled staff

Strategic objective 5 of the 2021–2027 strategy is to create an acknowledged, agile organisation through efficient systems, structures, processes and skilled staff. The aim is that by 2027, ECDC will be a widely recognised, efficient, and transparent organisation with highly skilled and motivated staff.

Integrated management system

ECDC maintains an Integrated Management Framework (IMF) built on four pillars – governance, organisational performance management, quality management, and internal control framework – supported by two cross-cutting areas: innovation and change management. This framework defines how ECDC operates and ensures that ECDC's management has the necessary information for timely, well-informed decision-making.

In 2024, the IMF Working Group progressed with the development and implementation of the framework, including an external assessment to support future enhancements.

A key milestone was the deployment of PRIME, ECDC's new planning, resources, information, monitoring and execution tool, replacing the former Management Information System (MIS). PRIME integrates the planning of all actions and resources, including procurement and meetings, enabling a more streamlined and effective management of the Centre's workplan.

ECDC also strengthened its steering and support systems, notably by developing a new action plan tool, TeamMate+, which is set for implementation 2025.

Engaged staff

As part of the review of ECDC's mandate, the Centre received an additional 73 posts (both Temporary Agents and Contract Agents) during the period 2021–2024. Consequently, as in previous years, 2024 was marked by a high volume of recruitment, driven by the expansion of posts, the launch of the new EWRS project, and a significant number of replacement recruitments due to internal candidates taking up new posts (36% of the posts were filled by internal candidates).

A total of 33 posts were filled during the year, and the Centre successfully maintained its vacancy rate below the 5% target, with only 4.4% of the temporary agent posts unfilled by year-end. To enhance human resources (HR) services for candidates and strengthen the Centre's employer brand, ECDC modernised its vacancy notices and improved the recruitment-related pages on its website.

The ECDC strategy provides the foundation for modernising and consolidating HR management services. In line with this strategy, the People@ECDC framework was implemented, focusing on staff health and wellbeing, professional development, and fostering a diverse and inclusive workplace.

In March 2024, ECDC adopted the EU Agencies' Network (EUAN) Charter on Diversity and Inclusion, reinforcing its commitment to fostering a diverse and inclusive workplace. Throughout the year, several actions were taken to promote diversity and inclusion, including reviews of HR processes, webinars and workshops designed to cultivate a more respectful work environment.

Support services

In 2024, the Resource Management Services (RMS) Unit was instrumental in supporting operational needs, ensuring the efficient and high-quality delivery of services across finance and accounting, human resources management, legal services, corporate services, procurement and planning and performance.

Throughout the year, ECDC successfully completed over 387 procurement and grant exercises, managed a meetings plan consisting of 237 meetings (62 with grant funding), organised 783 missions (including core, grant-funded and learning and development activities), and implemented 99.1% of its budget.

Several projects were undertaken to enhance the Centre's performance, effectiveness, and efficiency in future periods. In line with the EU Eco-Management and Audit Scheme (EMAS), ECDC achieved its registration in 2024, which was subsequently confirmed for 2025.

Digital transformation services

Digital Transformation plays a crucial role in supporting ECDC's core work in disease surveillance, response and epidemic intelligence. In addition, ECDC relies on IT systems to facilitate its administrative processes.

In 2024, four major projects were successfully completed: PRIME, EpiPulse Cases, real-time surveillance of Travel-Associated Legionnaires' Disease (TALD), and the Digital Agile Release Train (DART).

PRIME delivered an integrated, modern and user-friendly system for planning and monitoring ECDC's work programmes, enabling informed and efficient decision-making. The new system was launched on time for the preparation of the 2025 workplan, with all users receiving the necessary training and guidance.

EpiPulse Cases reached the readiness level required for a progressive rollout by disease, in accordance with the established schedule. The milestone marks the successful replacement of TESSy and the completion of the revamped Surveillance Data Warehouse.

The real-time surveillance for TALD was also prepared for production, enhancing the quality of historical data and improving efficiency gains through embedded automation and cloud deployment for better performance.

DART marked the full adoption of Agile/DevOps methodologies for the Target Operating Model 2027, improving software quality and delivery timelines for digital solutions.

Finally, a contribution agreement was signed with the Directorate-General for Health and Food Safety to enhance and strengthen the EU Early Warning and Response System (EWRS). This agreement establishes a five-year roadmap for the system's further development.

Internal communication

The objective of internal communication was to enhance staff's understanding of ECDC's vision, mission and strategic priorities and to provide a platform to inform and connect staff.

In 2024, the internal communication team published 282 news items and 195 events announcements on ECDC's Information Centre, averaging 2.6 items published per working day. Additional content was created by page-specific content providers.

The ongoing development and improvement of the Information Centre remains essential for efficient and effective communication within the agency. In 2024, six sections of the Information Centre were updated and further refined: HR, facilities management, IT, beyond work, mailroom and archives, and Director's Support Group. These updates were based on the 2023 usability study of the Information Centre and from feedback from colleagues serving as content providers for these sections. The focus firmly remained on internal communications as a service and support to ECDC staff.

6. Conclusion

In 2024, ECDC successfully completed, or is in the process of completing, 99% of the outputs in its Single Programming Document (SPD) 2024–2026. Of the 122 total outputs defined, 76 were completed, 45 were in progress and one was postponed.

ECDC strengthened its commitment to scientific excellence, reliable public health intelligence, and enhanced preparedness across Europe. It refined scientific outputs, integrated innovative tools, and deepened collaboration with Member States and international partners, reinforcing its leadership in communicable disease prevention and control. ECDC also prioritised public trust by providing transparent, evidence-based information to support decision-making and safeguard public health.

Reflecting the rapidly changing public health landscape in Europe and globally, and with a new European Parliament elected in 2024 and a new European Commission, the aim is to build a more proactive and forward-looking ECDC. Our commitment to leading in prevention activities and international collaboration, and working in partnership with our Member States, is reflected in the adoption of the ECDC Single Programming Document 2025–2027, which will further expand ECDC's potential for impact. The Centre will also continue working closely with our EU and international partners to advance a One Health approach to addressing Europe's public health challenges.