



# GF-TADs

GLOBAL FRAMEWORK FOR THE  
PROGRESSIVE CONTROL OF  
TRANSBOUNDARY ANIMAL DISEASES



# GF-TADs for Africa

## 8th Steering Committee

Accra, Ghana

17 – 18 June 2013

## Minutes and recommendations

## Session 1:

### Welcome - Opening Remarks and Presentation of the Agenda

The President of the Steering Committee (SC) and FAO Regional Animal Production and Health Officer, Dr Cheikh Ly, welcomed the members of the SC on behalf of FAO and thanked the Government of Ghana for hosting the meeting. He informed the SC that the Global Framework for the Control of Transboundary Animal Diseases (GF-TADs) for Africa will be 10 years in 2014, and a regional 5-year action plan was developed. However there is a need for the SC to strengthen the tool to meet regional needs. Dr Baba Soumare representing the African Union Inter-African Bureau of Animal Resources (AU IBAR) acknowledged the collaborations between the organisations and the significant progress and efficiency in implementation of past recommendations such as African Swine Fever (ASF) and *Peste des Petits Ruminants* (PPR). He observed that GF TADs can provide a leading role in the control of TADs in Africa. Dr Yacouba Samaké from OIE and Secretariat of SC, outlined the draft agenda of the SC8 meeting which was adopted with minor modifications. The participants introduced themselves and the status of implementation of the recommendations of SC7 was presented by the Secretariat (see Annex 1).

## Session 2:

### Governance aspects

#### Update from the Global GF TADs, including Global Action Plan

Mr. Fulvio Biancifiori, Coordinator from the GF-TADs Global Secretariat stated that the Global Action Plan is based on the conclusions and recommendations of the meetings of the GSC, RSCs<sup>1</sup>, GF-TADs Regional Action Plans and the conclusions and recommendations of key meetings that encouraged the use of the GF-TADs mechanism to influence and/or implement activities. He elaborated on the 7 general objectives and detailed the area of focus regarding the diseases that are given global top-priority being Rinderpest (RP) post eradication activities, Highly Pathogenic Avian Influenza (HPAI), Foot and Mouth Disease (FMD), Peste des Petits Ruminants (PPR), Rabies, Rift Valley Fever (RVF) and African Swine Fever (ASF). In Africa the main focus is on PPR, FMD, Contagious Bovine Pleuropneumonia (CBPP), RVF and Rabies. Cross cutting topics addressed by the GF-TADs include reinforcement of Veterinary Services (VS) and strengthening the GF-TADs supporting structures (Global Tools) to make them sustainable. Expected results regarding the above mentioned diseases were outlined. With regards to rinderpest, global freedom from RP should be maintained and the activities regarding sequestration of RVCM<sup>2</sup> were presented. FMD is a priority identified by all GF-TADs RSCs. Countries are encouraged to apply for the OIE endorsement of their FMD Control Programme once in PCP stage 3 as recognition of their effective management of FMD and to continue the official OIE recognition pathway for FMD-free status of the country or a zone. The expected progression of countries along the FMD PCP from stage 0 to 5 was outlined with expected timelines.

PPR is a priority for the RSCs for Africa, Middle East, Europe and an important disease in several Asian countries. Sub-regional and Regional Strategies should be developed and implemented under the umbrella of a Global Strategy. Other expected results regarding surveillance, control and

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<sup>1</sup> Global and Regional Steering Committees

<sup>2</sup> Rinderpest virus containing materials

preparedness were highlighted. Rabies control is a priority in many GF-TADs regions. OIE, FAO and WHO have agreed on a strategy to stimulate globally the control of rabies in regions where dogs are crucial in the epidemiology of the disease. The GSC4 meeting identified rabies as a priority for the implementation of the One Health approach to demonstrate its credibility. RVF is a priority in Africa and the Middle-East. Efforts to increase the knowledge on RVF epidemiology, prediction and prevention (including vaccination) are recommended. In addition to the above mentioned diseases, ASF, Classical Swine Fever (CSF), CBPP, Brucellosis, Newcastle Disease have been mentioned as regional priorities by one or more of the Regional GF-TADs Steering Committees. The GF-TADs Global Action Plan is a live document and emerging or re-emerging animal diseases that may develop global dimensions, will need to be incorporated.

Dr Biancifiori went on to detail future activities such as FAO-OIE training course on ASF/CSF, epidemiology and diagnosis in Italy scheduled for September 2013 to be hosted by Istituto Zooprofilattico Sperimentale dell'Umbria E Marche (IZS-UM), a national reference laboratory for CSF and ASF. Participants targeted are field veterinarians from Eastern Europe and African countries.

The SC8 discussed options available to regions to update the Global Secretariat regarding priority diseases and activities. Since some regions do not meet annually it was proposed by the Global secretariat that updates on challenges, options etc. may be requested from Member Countries on identified priority diseases and activities of common interest and those specific to each region. E-learning tools could also be used between meetings to exchange information and documents.

### **Regional GF TADs for Africa 5 year Action Plan (2012-2016)**

Dr Samaké outlined the status of implementation of the 5 year Action Plan. He lamented that information is not readily available from countries to inform the status of implementation. Information missing includes the number of vaccination campaigns, contingency plans, outbreaks by disease and by country.

With regards to ASF he stated that the FAO training course on ASF, epidemiology and diagnosis, to be held in Italy, is an activity labeled as a GF-TADs event. There will be a launching of study on CBPP and NCD in WAEMU Member States.

He informed about the launching of a pilot project "Vaccine Standards and Pilot Approach to PPR Control in Africa (VSPA) by OIE/HQ and AHC/HQ with the support of AU-PANVAC in Addis Ababa on 11 – 12 February and OIE sub-grant devoted to AU-PANVAC in Dakar on 25-27 February, 2013. This project is supported by Bill & Melinda Gates Foundation. An update on the PPR project in IGAD region was made together with the workshop to prepare SADC Member Countries for the prevention and control of PPR that was held in June, 2013, in Dar-Es-Salaam. This workshop was an activity labelled as GF-TADs event. The recommendations of the Inter-regional Conference on RVF in Mombasa, November, 2012 addressed the Member Countries and international organisations and donors and the highlights included capacity building, approach to RVF on the *One Health* concept and intersectoral collaboration.

Reinforcement of Veterinary Services follows the implementation of the OIE PVS pathway. A seminar on veterinary legislation for stakeholders from ECOWAS Member States, with the technical and financial collaboration from WAEMU was held in Cotonou (Benin) in January, 2013. A workshop was held in N'Djamena in February, 2013 under the FAO technical assistance program for CEMAC. OIE and Uganda signed a Veterinary Legislation agreement in Lomé (Togo), 18 to 22 February 2013 to improve veterinary legislation framework of this country. Forthcoming seminars on veterinary legislation with AU-IBAR are proposed for October in Tanzania and November in North Africa since the southern African countries held their seminar in 2011 in Botswana.

Various modalities to improve the contribution and buy-in from the RECs to the GF-TADs and especially the 5 Year Action Plan were discussed among them creating awareness of the action plan to the highest authorities. There has to be a strategy developed to engage the authorities and AU IBAR was identified as best positioned to play the leading role as they have already an established system and engage the Ministers responsible for livestock every two years. This will easily lead to linkage with the RECs and donors. The absence of the RECs and the donors at the SC8 was noted with concern.

The SC8 concluded that the organisations should strengthen this mechanism and continue to work together and label activities as GF TADs for Africa for improved harmonisation and coordination.

## **Session 3**

### **Reporting on TADs situation in Africa**

#### **Update on epidemiological situation in Africa**

The Epidemiological status of priority diseases in Africa in 2012 and early 2013 was presented by Dr N. Mapitse from OIE. He stated that TADs and their reporting to OIE are increasing with more details and consistency being added. The time it takes to report disease events in Africa, is decreasing same way as the global average. Diseases with highest number of reporting countries in Africa are CBPP, FMD, ND, PPR and Rabies. This improving trend in reporting is also attributed to more countries using the WAHIS web based system whose second version was launched in August 2012. This makes reporting simpler such as by separation between the six-monthly reports for terrestrial and for aquatic animals, better identification of wildlife species affected and possibility to report on monthly basis on selected diseases present.

According to the exceptional epidemiological events of FMD reported between January 2012 and April, 2013, Botswana, Libya, South Africa and Zambia notified the reoccurrence of FMD and on-going outbreaks were also reported in Botswana, Egypt and Libya. In 2012, Egypt notified the occurrence of new FMD strain, serotype SAT 2. The quality of the information provided by countries has consistently improved across the years and the proportion of African countries that reported FMD serotypes increased markedly in 2011 and 2012. List of African Member Countries (mainly in southern Africa) with official recognition of freedom from FMD (country or zone) in 2012 with vaccination and or with zone(s) free from FMD where vaccination is not practiced were listed. Algeria, Morocco and Tunisia are countries with official recognition of FMD control Program.

In 2012 and early 2013, eight (8) immediate notifications on PPR were submitted to the OIE by African countries. Reoccurrences were reported by Algeria in March 2012 and later in January 2013. The Comoros reported a reoccurrence in August and September 2012 and Tunisia in April and August 2012. First occurrence of PPR was reported by Angola (in the zone of Cabinda) in October 2012. An unexpected increase in morbidity and mortality was reported by Congo (Dem. Rep. of the) in January 2012. Cross border control of PPR collaborative efforts between Angola, DRC and Zambia were noted.

CBPP is present in Central, Eastern, Western and parts of Southern Africa, but is still absent in North Africa and maintenance of freedom should be continued and where the disease is endemic, eradicated. Details of CBPP in Gambia and Senegal were presented where Gambia notified reoccurrence of the disease in traditional small farming villages in August 2012. Imported bovines

from Mali and Mauritania were suspected as source of the outbreak that vaccination was done. Senegal notified the reoccurrence of the disease with one outbreak identified in November 2012 and began a campaign of emergency vaccination.

Egypt continues to report outbreaks of HPAI subtype H5N1. Since the onset apparition of the disease in the country , the backyard poultry were more affected than commercial farms, because vaccination is easier easy to carry out in industrial structures. In 2012, LPAI H5N2 and H7N1 serotypes were detected in South African farmed ostriches. Vaccination of ostriches against avian influenza is prohibited. Nigeria submitted to the OIE a self-declaration of freedom from HPAI in January 2013.

## Update on Diseases

This section provides an update on various strategies and activities in the control of key diseases by all the three organisations.

### Foot and mouth disease Progressive Control Pathway

This was a presentation by Dr Joseph Domenech (OIE) on behalf of the joint FAO/OIE FMD Working Group. The focus was on the state of play of the Global FMD Control Strategy after the Bangkok Conference. The presentation covered aspects of the Global Strategy, global and regional activities. The SC8 was informed that the joint FAO/OIE FMD Working Group meets every two months and their activities relate to FMD, support to and coordination of regional meetings, PCP guide update and assessment tools preparation with EUFMD. Other activities discussed by the Working Group are the establishment and training of a group of experts, and follow up to the recommendations of the Bangkok Conference.

FAO Initiatives on FMD Global Control include support to member countries in response to incursion of FMD outbreaks. The FAO-Wide meeting of December 2012 reviewed FMD programs in five (5) FAO regions with the goal to harmonize and support countries to embark on FMD control program i.e. formulating project proposal, establishing regional programs for FMD management and develop guidelines for socio-economic impact studies.

The Eastern Mediterranean countries (Egypt, Iraq, Jordan, Lebanon and Syria) are to meet on 18 December 2013 in Beirut and the main objectives of the meeting are:

- i. to get every country ready to prepare a mid-term national control project/programme and present it to their government and donors; and,
- ii. to ensure a proper national commitment in order to strengthen the fight against FMD and improve the country and regional situations.

The Gulf Cooperation Council countries (Bahrain, Kingdom of Saudi Arabia, Kuwait, Qatar, Oman, United Arab Emirates and Yemen) met on 8 April 2013 in Dubai with the same objectives as the Beirut meeting. Other regional meetings will be organized in Central and West Africa in the future. Again in the near future, an OIE FMD Unit for Central Asia will be established in Astana, Kazakhstan.

Ongoing projects in Near East and North Africa (NENA) region focus on regional coordination for FMD control, surveillance and diagnosis especially in Sudan. A draft regional strategy of NENA countries is currently being reviewed. Workshop on Regional Coordination of FMD Surveillance, Diagnosis and Control was held in Cairo, Egypt in December, 2012.

Other activities presented were the OIE/FAO FMD Reference Laboratory Network, Global Laboratory Network Diagnostics for Global FMD Control Strategy and Post Vaccination Monitoring Guidelines.

## Peste des petit ruminants: progress on the development of a global strategy

This update regarding the PPR control strategy in Africa was also presented by Dr Joseph Domenech, on behalf of the Joint FAO/OIE GF TADs PPR Working Group . The evolution of PPR in Africa, the Middle East and Asia between 2005 and early 2013, and vaccination strategies reported for 2011/2012 were covered. Articles of the OIE Terrestrial Code and Manual related to PPR including the activities of the Scientific Commission on Animal Diseases (SCAD), Code Commission and Ad Hoc Groups work relating to proposed Standards Chapters 1.6 and other horizontal chapters and chapter 14.8 related to import of animals and animal products with science based and risk analysis approaches were presented. Explanations of articles related to an official PPR status for a country or a zone, applications for recognition, procedures for self-declaration and for official declaration by the OIE, surveillance principles and methods were adopted at the 81st General Assembly, in May 2013.

FAO / OIE GF-TADs PPR Working Group first meeting was held in January 2013 and PPR was included in the Regional 5-year Action Plan of Africa, the Middle East and South Asia. The WG is now working to prepare a Global PPR Control Strategy following similar principles to the FMD Global Strategy. A consultative process for the development of the strategy is underway with experts, national and regional authorities, policy-makers, development partners and private industry. Lessons learned from regions (Middle East and Central Asia, Far East Asia, South Asia: India, SAARC countries, Africa - AU-IBAR led strategy, REMESA for Northern Africa, Eastern Africa and SADC countries), inputs from the OIE Scientific Commission and its Ad Hoc Group will inform the strategy development. SADC countries have developed a strategy which was already under discussion at the June 2013 meeting in Dar es Salaam (Tanzania). Other regional workshops will be organized similarly.

Highlights from the FAO Position paper on PPR Control, 2013: “FAO’s approach for supporting livelihoods and building resilience through the progressive control of *Peste des Petits Ruminants (PPR)* and other small ruminant diseases” were presented.

OIE and FAO support research on PPR to inform the standards. The two organisations will establish a Global Research and Expertise network with the objectives to support the Global PPR Control Strategy implementation, to offer technical advice and veterinary expertise to Member Countries, exchange scientific data and biological materials between veterinary labs, promote development and ensure coordination of PPR research needs with close link and interactions with strategy development.

*The Global PPR Research Alliance* promoted by certain research centers (ILRI) cannot not be supported by OIE and FAO since it will be redundant with the GF-TADs Network.

Dr Domenech mentioned the progress made regarding the project “Vaccine Standards and Pilot Approach to PPR Control in Africa” (VSPA). The project is currently piloted in Ghana and Burkina Faso and its components are :

- a) The establishment of a PPR Vaccine Bank,
- b) The strengthening of the capacities of the Pan African Veterinary Vaccine Centre of the African Union (AU/PANVAC)
- c) The development of a pilot strategy to progressively control/eradicate

Dr Vincent Martin of FAO presented FAO field activities on PPR which included surveillance, training, movement control, laboratory equipment, socio-economic data collection to formulate guidelines on socio-economic study in Algeria, Libya, Mauritania, Morocco, Surveillance, vaccination and movement control in Angola, Surveillance, movement control, vaccination, socio-economic study in Tanzania, surveillance, vaccination, sero-monitoring, movement control, socio-economic study in Somalia, and a recently approved regional TCP on emergency preparedness for Malawi, Mozambique and Zambia. The IAEA supported 10 African laboratories on PPR virus sequencing.

AU-IBAR presented other regional PPR control programs in Africa. The VACNADA project conducted 17.4 million vaccinations in 14 concerned countries in 2011. The project also addresses PPR diagnostics and vaccine production. Project LEISOM applied 2.4 million vaccinations in Somalia. AU-IBAR in collaboration with ILRI, implemented in 2012 pilot studies in two Eastern African countries to assess the efficacy of PPR thermostable vaccine and institutional mechanisms for effective and sustainable delivery of PPR control services to small ruminant producers. The pilot studies will continue in Uganda and South Sudan. The EC-SHARE programme in IGAD Region: *“PPR and small ruminant diseases control for building resilience amongst the pastoralist communities of the Horn of Africa”* is an AU-IBAR, IGAD and FAO initiative in Eastern Africa for the regional coordination of epidemiological and socio-economic situation, development of roadmaps methodology/strategy, improvement to delivery systems and to close identified knowledge gaps among others. The beneficiary countries are Kenya, Ethiopia, Djibouti, Somalia, South Sudan, Sudan and Uganda. This program is continuing. PPR-PCP was endorsed by the 9<sup>th</sup> Pan African Ministerial Conference in April 2013. AU-IBAR & AU-PANVAC held a retreat in May 2013 to work on the PCP-PPR. Morocco and Somalia approach to PPR control was presented as model during the Middle East PPR regional workshop. Morocco managed to swiftly and effectively control the disease within the shortest possible time.

## **African swine fever (ASF)**

AU IBAR presented an update on ASF and pointed out that prevention, control and eradication of ASF is complex and difficult in most of the African countries. In 2012, ASF was widely reported and continued to spread across Africa. The disease is widespread and is endemic in most of the affected countries. According to AU-IBAR's Pan African Animal Health Yearbook, ASF in 2012 affected 22 countries in 4 African regions (East, Central, Southern and Western regions) with 471 outbreaks recorded, accounting to 149, 116 death of pigs. Activities undertaken in 2012 include a workshop on ASF in Accra for West Africa in June and for Eastern Africa in Mombasa in July. An ASF working group was launched in Eastern Africa and developed ASF regional control strategy and joint action plan. AU-IBAR and FAO are setting up an ASF taskforce which was supposed to meet in June 2013 in order to propose a draft joint regional strategy and program on ASF control to be proposed for endorsement by GF-TADs Africa. Future activity on ASF are the planned presentation of the regional strategy and program at the Global Alliance on ASF meeting in Rome in October 2013 as well as to ALive General Assembly and Executive Committee. Support on capacity building for surveillance, diagnosis, communication and containment to Members will continue.

## **Contagious bovine pleuropneumonia (CBPP)**

AU-IBAR reported that 23 countries were affected by CBPP in 2012 accounting for 330 outbreaks and 15,556 mortalities. This was a significant increase from the 19 countries and just over 3,000 mortalities in 2011. Endemic infection extends throughout the pastoral herds of much of western, central and eastern Africa, with Angola and northern Namibia in southern Africa. The SC8 was reminded of the May 2012 OIE recognition of Botswana National Veterinary Laboratory (BNVL) as an OIE Reference Laboratory for CBPP and the proposed establishment of a sub-regional CBPP network between Angola, Botswana, Namibia and Zambia with technical assistance from the CBPP Reference Laboratory, IZS in Italy.



Activities undertaken in 2012 included the formulation of a project on progressive control of CBPP in Africa with the aim to reduce the prevalence and spread of CBPP. The action will produce three key results:

- reliable data for progressive control of CBPP with eradication as the ultimate target generated,
- appropriate strategies for CBPP control implemented and advocacy and
- resource mobilisation strategy for progressive control of CBPP initiated and promoted.

Other activities include technical support provided to Gambia which recommended a regional meeting of experts and partners under the auspices of ECOWAS and WAEMU to harmonise strategies and develop zoonosanitary agreements. Harmonization of animal health standards for CBPP surveillance and diagnosis in IGAD region under the ongoing SMP-AH will continue together with the planned STDS projects. AU-IBAR will continue its support to improve the capacity of CBPP vaccine production, provide emergency support to newly infected AU MS and improve knowledge and awareness for institutional change.

FAO presented a draft Concept note for a Regional Consultation “*Development of a Regionally Coordinated Strategy for prevention and control of Contagious Bovine Pleuropneumonia in Africa*” an initiative and advocacy for a conference. The objectives is to identify the key elements for a collective strategy for sustainable control of CBPP in Africa using the knowledge and experience of countries and design an action plan for controlling the disease in different epidemiological settings. The role of the different Regional Economic Communities (RECs) in coordinating and providing the requisite political awareness and technical platform for the prevention and control of CBPP will be discussed at the Consultation. . The event is proposed to be under the umbrella of the GF-TADs for Africa.

## Avian influenza A(H7N9) in China

Presentations from OIE and FAO both covered the evolution of the novel avian influenza H7N9 and on OIE and FAO expert missions to China in April/May 2013. The missions revealed that wholesale live bird markets (LBM) seem to play an important role in virus amplification and that the source of the infection of poultry is most likely to be asymptomatic sub-clinically infected birds that have contaminated the environment within the markets. Experimental finding were that there were no clinical signs in poultry (chicken, duck, geese, turkey) and pigeons. This finding seemed to be confirmed by the drop of human cases. Risk mitigation measures by China involved temporary closure of LBMs, cleaning and disinfection of LBMs, transport control of live birds, centralized slaughtering and culling on positive tested LBM with compensation. H7N9 human cases in 5 most affected provinces dropped following LBM interventions and closures.

Primary approach to detect virus was through Real time PCR for influenza A virus, Real time PCR specific for H7 and isolation of virus. HI test may be used to detect circulation of H7N9 for sero-surveillance and antisera panels in Europe, USA and Canada will detect H7N9 antigen. Through the FAO-OIE OFFLU network, reference laboratories shared and validated diagnostic assay for detection of H7N9 and experimental research findings in different species.

The H7N9 outbreak is a novel event and China has notified all outbreaks related to animals to the OIE and consultations by FAO OIE and WHO and information exchanges coupled with well organised surveillance systems led to a successful intervention and control of the disease. The disease was limited to the live bird markets where these interventions were made. Lab support to countries at risk for H7N9 was improved surveillance in animals (*through AAHL, FAO reference centre, Australia*) and *production of FAO's guidance on surveillance, risk assessment and laboratory protocols on H7N9*. There are Technical Cooperation Projects at global, 2 regional (S-E Asia and South Asia) and 1 inter-regional in preparation to cover Africa where Cameroon, Côte d'Ivoire, DRC, Egypt, Ethiopia, Ghana, Kenya, Nigeria, Senegal, Tanzania and Zambia will be involved.



OIE highlighted the recent changes regarding the avian influenza viruses' chapter of the OIE Terrestrial Code including removing reference to "notifiable avian influenza" and requirements on notifying low pathogenic avian influenza to the OIE such as the requirement to notify H7N9 occurrence in poultry.

The transparency of the Chinese government and the collaborative efforts of the international community (FAO/OIE/WHO and FAO-ECTAD) were exemplary and led to effective and rapid response. There was full access to data and information to analyse and make informed decisions as shown by the quick suppression of the outbreak. The interventions at the LBM worked well and there are proposals to introduce new LBM systems and these have been shown to work in other countries such as Vietnam as long as biosecurity measures such as *all - in all - out* are implemented. Nigeria was one example where there was change in risk behaviour and LBM that worked.

Africa is at risk of H7N9 due to travel and trade and therefore has to be on the alert by ensuring diagnostics works and revive inter-sectorial coordination.

## Rabies

Dog rabies is endemic in most parts of Africa and it is complicated by the presence in various species of wildlife. Dogs are considered to be the main source of exposure and a primary vector for this virus, and they are consequently the focus of most strategies. The role of wildlife cannot be ignored since it can contribute to sustaining the infection.

The strategy followed across the regions varies depending on the epidemiological situation of the disease. Thus, in many countries, the most important strategy adopted is focused on mass vaccination of dogs to reduce/eliminate the infection in domestic dogs; other countries target stray dogs' populations with the aim of reducing their numbers. These strategies have been followed in several regions; and good results have been obtained, particularly in certain areas of Europe, the Americas and Asia.

Control of stray dog populations and sustained immunity through dog vaccination remain key issues in the fight against rabies in many countries of Africa where the majority of human deaths are caused by rabid dogs. OIE, FAO and WHO continue to implement the recommendations from the first OIE Global Conference on Rabies Control, Seoul, Republic of Korea, Sept. 2011. They work regionally to encourage international solidarity and donor support for countries in need and to initiate and sustain control programmes for rabies. In this sense, the Terrestrial Code chapter on rabies has been updated with an article on rabies control in dogs which was adopted at the OIE General Assembly on May 2013. Similarly, the vaccine part of the Terrestrial Manual chapter on rabies was also adopted.

Laboratory Twinning project between Nigeria and South Africa on rabies was successfully closed in March 2012. There is an ongoing collaboration between OIE, FAO and WHO through the Global Alliance for Rabies Control (GARC). OIE conducted a proficiency testing exercise for southern Africa, Congo Basin and some selected countries in east Africa to improve rabies diagnostic capacity using OIE standards. FAO conducted national rabies seminars in DRC, Cameroon and Congo in 2012 and 2013. The seminars brought together animal health and human health national experts to identifying activities to strengthen intersectoral collaboration for a better control of rabies.

## Rift Valley Fever (RVF)

Dr W. Masiga and Vincent Martin gave a brief history of RVF and its evolution in Africa and concluding on recent outbreaks in southern Africa and Mauritania. The geographic distribution of the virus has since grown significantly and now includes most countries of the African continent.

The GF-TADs Inter-Regional Conference on Rift Valley Fever in the Horn of Africa and the Middle East was held in Mombasa Kenya in November 2012 and was attended by 18 countries and 20 national, regional and international technical agencies. The theme was “challenges, prevention and control”. In his presentation Dr Martin highlighted some of the issues and challenges facing countries especially those outside of the Horn of Africa as lack of epidemiological understanding. National Veterinary Services have little or no capacity to monitor, anticipate and respond to RVF. The non-specific clinical signs make detection difficult when using passive surveillance to monitor the disease. Regionalization of the prediction in EWS is required for effective response and safe and efficient vaccine is still required to prevent the disease which is also one of the best *One Health* candidates for a “system-perspective” and ecosystem health approach

Dr Martin gave a brief history of the disease forecasting system developed by NASA and how the Early Warning System at FAO EMPRES intends to revamp the system for RVF risk mapping and make it available to Members online. He mentioned an EU funded project (*Vmerge*) which is a consortium of 16 collaborators (12 countries in West and North Africa, and Europe) led by CIRAD to address the risk of RVF emergence and spread in uninfected countries using new innovations in diagnosis, improvement of our understanding of vector ecology, disease modeling, forecasting and assess the existing surveillance networks in West and North Africa. Risk maps from *Vmerge* will be shared online via EMPRES-I and GF-TADS for Africa will have access to it. He said the current system works well in East Africa but is not validated for other areas in Africa.

New recommendations that emanated from the inter-regional conference were that countries develop targeted surveillance and control strategies and apply existing SPS and OIE standards and enhance inter-sectorial collaboration. The international organisations were requested to re-establish the FAO/OIE GF-TADs “study group” on RVF, strengthen their collaboration with private / NGO and industry partners, FAO / OIE and partners to develop Early Warning Systems (EWS) models to fit the different eco-systems in Africa and the Middle East and most importantly FAO and OIE to assist in the transfer and capacity building of appropriate EWS to regional institutions.

First meeting of the new OIE *ad-hoc* group on RVF took place in the week of June 2013 with two African representatives. The meeting reviewed the Code Chapter with particular attention to (i) Infective period, presence or absence of carrier state, quarantine periods (ii) risks linked with commodities (iii) resumption of trade after 6 months, as compared to a 1-2 months epizootic period

The SC8 noted that forecasting in itself is a good tool but there has to be an appropriate response from Countries. The meeting noted some improvements and positive feedback and mind shift from the countries on EWS.

## **International Scientific Council for Trypanosomiasis Research and Control**

The International Scientific Council for Trypanosomiasis Research and Control (ISCTRC) is a platform to promote international collaboration and cooperation in research and control of human and animal trypanosomiasis. ISCTRC Secretariat is hosted at AU-IBAR and the partners include Member States, RECs, PATTEC, AU-IBAR, Technical Partners (OIE, FAO, IAEA, WHO), Research Institutions (ICIPE, CIDRES, Universities), Development partners (EU, AfDB, BADEA), and NGOs (FIND, GALVMED, DNDi).

The recommendations of the 31<sup>st</sup> ISCTRC General Conference to guide trypanosomiasis research and control during the period 2011-2013 were shared with MS and other stakeholders and ISCTRC contributed to the PAAT strategic framework on enhancement of coordination of T&T interventions, 26th-27th September 2012, Vienna, Austria. ISCTRC also participated in PATTEC Coordination meeting in June 2012 and supported information sharing and coordination of T&T interventions

through the 37th ISCTRC Executive Committee meeting in November 2012 in Khartoum, Sudan. AU-IBAR continued to work closely with ICIPE on the project '*Validation and Initiation of Diffusion of Pro-poor and Poor Environment Tsetse Repellent Technology*'

The 38<sup>th</sup> ISCTRC Executive Committee meeting will be held on 7<sup>th</sup> September 2013 followed immediately by the 32<sup>nd</sup> ISCTRC General Conference in Khartoum Sudan on 8<sup>th</sup> – 12<sup>th</sup> September 2013.

## **The Programme Against African Trypanosomiasis(PAAT-)**

Dr Oumar Diall stated that PAAT Alliance is a multi-agency whose ultimate aim is to promote control integrated and effective for trypanosomiasis sustainable development of agriculture and livestock in the affected areas the tsetse and trypanosomiasis. He detailed its structure and members. He reminded the SC8 that African trypanosomiasis is a serious endemic but neglected TAD affecting 37 countries with 50 million cattle and 70 million people at risk.

The control of trypanosomiasis is still unsatisfactory with less than 5% of infested area receiving any control actions. Deployed resources are insufficient for the needs(20 billion USD). There was renewed interest in the control of T&T with the advent of PATTEC. Notwithstanding, there is political commitment of African Heads of State and there is a need to strengthen the coordination of the efforts of many actors.

Coordination and collaboration activities focus on bringing partners together to agree on priorities and action plans including conducting meetings and workshops organized by the PAAT or partners; AU-IBAR,PATTEC, GALVmed etc.).Assistance to ongoing control projects address issues of:

- Improving food security in sub-Saharan Africa by supporting the progressive reduction of tsetse-transmitted trypanosomiasis in support to PATTEC in the framework of NEPAD
- Development of innovative site-specific integrated animal health packages for the rural poor (West and East Africa)
- Supporting the prevention and fight against animal trypanosomiasis in Angola
- Pilot project in support for the fight against tsetse and trypanosomiasis by the beneficiaries in the province of Kéné Dougou, Burkina Faso
- Project in support for the fight against tsetse and animal trypanosomiasis in the Sikasso region of Mali
- QC/QA of trypanocides – Joint FAO/IFAH/GALVmed/IAEA initiative.

Future projects will provide support to transfer proven technologies to control trypanosomiasis and other parasites of cattle in the north and center of Côte d'Ivoire and to enhanced trade, and sustainable use of trypanotolerant livestock in West Africa. Other activities are training organized by PATTEC at Bobo-Dioulasso and support to six countries Ethiopia, Kenya, Uganda, Burkina Faso, Ghana and Mali operating projects financed by ADB in the field of GIS.

## Session 4

### Reporting on transversal topics

#### Good governance of Veterinary Services (OIE PVS Pathway)

Dr Daniel Bourzat (OIE) made a brief summary on the status of PVS Evaluation missions and pointed out that the Africa region was doing well in this area and that of the 53 members submitting requests, 49 have missions completed and 38 reports were available for access. Remaining countries not evaluated were Cape Verde, Congo Rep., São Tomé & Príncipe and Somalia. Regarding PVS Gap Analysis missions, 34 of the 39 mission requests have been conducted.

The SC8 discussed ways to make the countries have a much stronger ownership of the findings of the PVS Pathway Evaluation missions and how to pilot a few projects to show case some countries benefits from the evaluations. The benefits of the PVS Evaluation missions were demonstrated in Kenya where EU funded the veterinary services for Euro 10 Million for certain activities following the round tables with donors.

#### Trade and STDF projects

Dr Bourzat reminded that the mandate of STDF is to increase SPS awareness, mobilize resources, strengthen collaboration, identify and disseminate good practice and support and funding for development and implementation of projects that promote compliance with international SPS requirements. Members are FAO, OIE, WB, WHO, WTO (founding partners), selected developing country experts (6), donors (13) and observers. Strategic results of STDF are enhanced collaboration on SPS-related technical cooperation, improved capacity of beneficiaries to identify and prioritize SPS needs and formulate project proposals that are able to secure funding from STDF or external funding sources and improved performance of beneficiaries of STDF-funded projects. Applications for Grants for project development can be made to the STDF up to US\$50,000 and can cover application of capacity evaluation / prioritization tools, feasibility studies and project development. Synergies with other initiatives are required. STDF can also mobilize donor funds. Project grants focusing on projects that improve SPS situation and enhance market access have to be linked to topics covered by STDF's work have the qualities of disseminating good practice, use regional approaches, innovative, collaborative and inter-disciplinary and STDF contribution is up to US\$1 million over a 3 year duration, or less.

Multi-Criteria Decision Analysis (MCDA) tool to *help* decision-makers prioritize SPS investments was briefly presented with examples from Mozambique. Ongoing works on MCDA include review findings of initial applications (Mozambique, Zambia, and Malawi) and use of the MCDA framework in the COMESA region. A regional training workshop for Africa was held in August 2011.

#### Vet-Gov Programme

The Vet-Gov Programme is jointly implemented by AU-IBAR, RECs, and FAO/OIE. The programme has achieved unprecedented cooperation between partners. Year 2 was devoted to baseline data collection and documentation or country mapping. The tools used include training workshops jointly organised. Policy hubs have been set up. The project has rolled out ARIS in MS and there are an increasing number of reports sent to ARIS II. Interoperability between ARIS and WAHIS is on-going with a meeting to exchange details of the systems planned for July 2013 in Nairobi between OIE and AU IBAR.

Livestock policy training workshops are conducted by FAO under the Vet-Gov programme. Modules have been developed and training workshops are planned for Bujumbura in July 2013 (FR) and September 2013 (EN). The livestock policy hubs will assist in influencing livestock policy. Another area of intervention is to revive and or strengthen regional and sub-regional networks. It is intended to initiate socio-economic network(s) in order to be better used by experts.

Dr. Bourzat provided a brief of the status of the veterinary legislation missions and how they linked with the Vet-Gov programme OIE component especially in addressing result 2 of the financing agreement “Institutional capacity for livestock policy formulation, animal health strategies and legislation enhanced”. He informed the SC8 that Uganda signed an Agreement with the OIE during the 20th Conference of OIE Regional Commission for Africa to build capacity for review and development of animal health legislation.

The meeting was also informed that OIE and AU IBAR are working on exchange of data between ARIS and WAHIS systems and there is a planned meeting soon to discuss details and that there are proposed. Joint capacity-building programmes on veterinary legislation for English-speaking Africa, planned for Arusha, October 8 – 11, 2013 and for French-speaking Africa in Algiers, November 25 - 28, 2013 (Both to exclude SADC, ECOWAS and WAEMU as previously trained) were agreed between OIE and AU-IBAR

## Day-1 veterinary competencies

Dr Francois Caya pointed out that, as per indicated in the PVS Evaluations of its Member Countries, the organisation, the OIE documented that there is a need to improve the quality and the international harmonisation of veterinary education, as a mean to improve animal health and welfare globally. He indicated that this can be done by providing appropriate initial and continuous Veterinary Education. The current quality of veterinary education is not acceptable in many countries and this situation is often worsened by inadequate functioning or even absence of the Veterinary Statutory Body (VSB). He pointed out that there exist OIE International Standards on the Quality of VS such as capacity of VSB to determine the minimum standards of initial and continuing education. He presented some highlights of the OIE Conferences on Veterinary Education of October 2009 such as establishing strong linkages between Veterinary Education establishments and VSB. The second Global Conference (May 2011) made strong recommendations on the establishment of Twinning projects for VEE.

The OIE ad hoc Group on Veterinary Education, where each of the 5 OIE regions is represented is charged with defining minimum competencies of veterinarians. He emphasised that the OIEs' objectives in relation to Veterinary Education were not to define accreditation standards, prescribe a specific curriculum and or accredit veterinary medical educational programs or institutions. The Day 1 Graduates competencies were developed during previous Ad Hoc group meetings (July 2009, Dec 2010, Aug 2011, Jan 2012) and went through the adoption process by Members and endorsed in May 2012. These recommendations are referenced in OIE Terrestrial Code / 2012 (chapter 3.2, article 3.2.14). He also briefly covered the recommendations on Veterinary Education Core Curriculum and Twinning Programme for Veterinary Education Establishments. He concluded by inviting the SC8 to the Third Global Conference related to Veterinary education and entitled “Global Conference on Veterinary education and the Role of the Veterinary Statutory Body (VSB)” to be held in Brazil in December 2013.

AU-IBAR stated that they were considering harmonisation of training programs for veterinarians to facilitate exchange of staff and therefore OIE guidelines will provide an opportunity to harmonize this approach.

## Market chain analytical methodologies

Dr Cheikh Ly presented the methodology and scope of the value chain analysis. According to him, applying value chain analysis will enable Veterinary Services to collect and put into perspective socio-economic information to support formulation, monitoring and evaluation of programmes on animal health and production more efficiently. In this respect, FAO is establishing a group of socio economic experts to assist in carrying out value chain analysis, with the support of the VETGOV programme.

## Session 5

### Reporting on GF-TADs 'tools' achievements in Africa

#### *Regional Animal Health Centres (RAHCs)*

This topic was jointly presented.

RAHCs were created in April 2006 by OIE and FAO as a platform to tackle avian influenza crisis. AU-IBAR joined the Centre after creation and left albeit on a temporary basis from January 2012. The inaugural ceremony of the RAHC/Bamako was presided by Malian Prime Minister in October 2007 and the Commissioner of ECOWAS shared the interest from ECOWAS to the Centre to be considered as a specialized tool.

There was a meeting of stakeholders (AU-IBAR, ECOWAS, FAO and OIE) in July 2010 and ECOWAS livestock Ministers visited the Centre during their meeting in March, 2011. The report of livestock Ministers was endorsed by statutory ministerial meeting in August 2011 in Abuja. At the Ordinary Session of the ECOWAS Heads of States, 16-17 February, 2012, a decision was taken on the establishment of the RAHC in Bamako, as a specialised technical agency of the community. A few days before this decision, AU-IBAR left the centre. The President of ECOWAS Commission visited the centre on 17th March, 2012.

A notification by ECOWAS Commissioner was made on 15 May, 2013, to OIE Regional Representative for Africa and permanent Secretary of RAHC/Bamako of ECOWAS' Decision on RAHC/Bamako to be considered as a specialised technical agency of the community, reflecting the decision taken by ECOWAS in February 2012. During the 9<sup>th</sup> Ministerial Conference of AU/C in Abidjan in April 2013, there was a meeting on RAHC/Bamako. There was again a bilateral meeting on RAHC/Bamako in Paris in May 2013 between OIE and the Government of Mali.

The meeting suggested to finalize the implementation of the ECOWAS RAHC/Bamako and to support the principle of a transitional period preparing the final step. Since ECOWAS has decided to "take ownership" of RAHC/Bamako, technical persons should recommend how RAHC is linked to ECOWAS and or delegated responsibilities by ECOWAS. If it is a technical arm of ECOWAS, it will have to follow the rules of ECOWAS and be run as an ECOWAS technical body. The AU Ministerial meeting in Abidjan (2013) recommended absorption of the RAHC by REC, AUC should give strategic guidance to this recommendation.

FAO has received letters regarding the operationalization of the RAHC Bamako. The SC8 recommended that activities of the RAHC should take into account the existing partners activities. It



was clarified that RAHC activities reflected on country activities and are not a stand-alone. Organisations take activities from the mandate of their Members. The priorities of the GF TADs are not necessarily, country priorities; therefore, GF TADs Africa should be more flexible to assist countries along their priorities such as in development of priority disease control strategies. The RECs and Members do request the three organizations to develop intervention measures or capacity building activities. It was also noted that, through RAHCs, a platform to plan and better coordinate activities between the partners be provided. It also provided our credibility before the host country but RAHCs were not structured to enable them to sign financial agreements with donors and this will always result in activities tied up to one or more organisations.

## **Regional Networks and Programmes**

This topic was jointly presented.

Networks are for the purpose of sharing of expertise and data; facilitating cross-border collaboration Functional networks at the national level are key importance for ensuring the effectiveness of regional networks.

First regional networks established during PARC & PACE were considered critical to the success of the Rinderpest eradication in Africa. Currently Regional Animal Health Networks and programmes are structured around the RECs examples being REMESA for North Africa, RESOLAB and RESEPI for western and central Africa, EARLN and EAREN for eastern Africa and EIS and Veterinary labs and Diagnostics for southern Africa. Intended to meet the identified regional needs and to implement GF-TADs Programs e.g FMD PCP, PPR, RVF and are supported technically by the AU-IBAR, FAO, OIE. Increasingly support from other organisations is being realised. Strengthening of Veterinary Services systems is the donor preferred approach lately as it offers more sustainability and the systems can respond to any TADs or emergency irrespective. However regional structures are different and do not respond similarly to technical assistance and this requires « tailor made » approaches to fit these structures

The structures and the activities of the networks were elaborated. To highlight a few, the recent activities in eastern Africa included its establishment and is composed of CVOs and appointment of coordinators as follows: Regional laboratory network (Uganda & Ethiopia), Regional epidemiology network (Kenya & Tanzania). The first meeting of Regional Network Coordinators was held in Nairobi, November 2012. The eastern Africa joint epidemiology and laboratory network meeting held in July 2012 established an ASF Working Group that has been launched on 14<sup>th</sup> June in Kampala, Uganda. The Directors of Veterinary Services Committee was established in WAEMU region in March 2006, and in ECOWAS region in August 2012. RESEPI and RESOLAB were been split in 2012 into two separate regional epidemiology and laboratory networks with the appointment of regional coordinators.

Five regional support laboratories: OVI (South Africa), BNVL (Botswana) for the SADC network, LNERV (Senegal), NVRI (Vom, Nigeria) for RESOLAB and NAHDIC (Ethiopia) for the EARLN have been selected with the support of FAO/IDENTIFY project. Work is ongoing to link these regional support labs to the RECs.

## **GLEWS – OFFLU – CMC-AH**

This topic was jointly presented.

The Global Early Warning and Response System for Major Animal Diseases, including Zoonoses (GLEWS) is a joint FAO, OIE and WHO initiative which combines the strengths of the three organizations to improve disease intelligence, risk analysis and surveillance of priority diseases. It is a system that formally brings together human and veterinary public health systems to share zoonotic disease outbreak information, epidemiological and risk analysis data and to deliver early warning messages to the international community on areas at risk. GLEWS was launched in 2006 and is supported by regional/local networks FAO field program, OIE, WHO. At Regional level it is supported by EC, SADC, ASEAN, CAN, CVP and International Reference Laboratories (WRL FMD, Avian Influenza), National Authorities, unofficially by (PROMED, GPHIN), NGOs. Others include laboratory and epidemiological networks.

Activities of FAO-GLEWS were presented including tracking of disease events (TADs and emerging) globally using EMPRES-I, produce and disseminate early warning messages to facilitate/provide data analyses to support field operations, conduct of rapid risk assessments and identification of disease drivers. EMPRES-i – workflow was outlined briefly. Outputs of FAO EMPRES/GLEWS are disease situation updates/digested analysis and alert and forecasting messages.

Major threats in Africa continue to be Rift valley fever, foot-and-mouth disease, African swine fever, Peste des petits ruminants, ND, CBPP and Lumpy skin disease. African Trypanosomosis and East Coast Fever are the most prevalent diseases in livestock. GLEWS+ in Africa serves to increase interoperability, surveillance, data sharing and epidemiological analysis on animal diseases from the different platforms available (OIE, FAO, WHO) to better understand drivers and dynamics of animal diseases. Decision on the implementation of a GLEWS+ African platform is pending until more resources are available to increase disease data sharing and increase risk assessment activities. In the future, GLEWS plans to undertake “horizon scanning” and joint risk assessment at the animal/human/ecosystem interface, wildlife health monitoring, food safety along food value chains and climate change and its relationship to animal diseases. Development and link with regional disease surveillance platforms (Africa, Asia) will be enhanced.

OFFLU’s contributes to animal influenza surveillance and research and its objectives were outlined. OFFLU technical activities include applied epidemiology, biosafety, research agenda, vaccination, proficiency testing/ring trial, development of standardized reference materials, swine influenza group, code of conduct and training. Highlight of OFFLU surveillance strategy are benefits for surveillance in each animal species comprising wild birds, provide high level strategic guidance, coordination and harmonisation of approaches to animal influenza surveillance and worldwide relevance.

A questionnaire was sent to all OIE Regional Representations and FAO regional offices asking for high level information about surveillance and epidemiological projects. There was a full response from Africa, 50% Europe, partial from Asia and the broad conclusions were that:

- *Objectives for surveillance and epidemiology projects vary between different regions;*
- *Trade focus in Europe; development and training focus in Africa; understanding the role of environment in Asia;*
- *Africa and Asia projects are dependent on external funding;*
- *Coordination between donors and agencies undertaking surveillance is essential to avoid duplication and leaving gaps;*
- *EU survey is well coordinated – with EU wide legally binding plan;*
- *Sustainability of surveillance? With several projects relying on external sources of funding and*
- *There are technical and economic advantages to targeting high risk areas i.e. with a high density of poultry.*

OFFLU has a comprehensive research agenda and priorities on influenzas in general. OFFLU conducted a comprehensive evaluation of AI control measures especially the vaccine and vaccination component of the control measures applied in 69 countries. Information is collected through questionnaire and official visits. Two manuscripts are published in the OIE Scientific and Technical Review “*Assessment of national strategies for control of HPAI and LPNAI in poultry with emphasis on vaccines and vaccination*” and “*The influence of economic indicators, poultry density and the performance of Veterinary Services on the control of HPAI in poultry*” both in 2011.

The first OFFLU global proficiency test exercise is completed. OIE and FAO Reference Centres for avian influenza participated in an avian influenza diagnostic ring trial using a panel of inactivated influenza viruses in Real time PCR from different geographical regions. This helps in consistency in diagnostic testing by labs worldwide. The second ring trial started involving Reference Centres and regional laboratories are underway. OFFLU future activities involve updates of the OFFLU surveillance strategy document, research agenda, review of epidemiological and surveillance projects worldwide and a vaccination handbook. The technical group provides assistance to countries for selection of seed viruses for AI vaccines.

FAO and OIE continue their collaboration with WHO through OFFLU network to support and coordinate the global efforts in view of the avian influenza A/H7N9 outbreaks in China.

Crisis Management Centre-Animal Health (CMC-AH) is a joint OIE-FAO mechanism to provide rapid technical advice and support to countries requesting assistance with animal disease crises. This technical assistance is provided by a CMC-AH multi-disciplinary expert team which is deployed to a country following a specific request. The CMC-AH was initially established in response to the rapid global spread of highly pathogenic avian influenza H5N1. However, now the missions have been triggered by aquatic and other terrestrial animal health disease events. Collaboration with WHO is an important part of the response when animal health crises involve zoonosis. Operations and logistics are managed from FAO Headquarters and expert support is provided by OIE and FAO’s network of expertise including Reference Centres. Administrative and technical assistance provided to CMC-AH missions in coordination with FAO to countries requesting assistance with animal disease crisis according to the mission objectives, suitable experts are identified and provided with background information on the relevant topic for the mission. Provision to FAO of relevant OIE PVS Pathway reports prior to team deployment is important and useful for the preparation of teleconferences and presentation of debrief mission findings and supplementary to comments provided in the mission reports.

Recent CMC-AH Missions;

<i>PPR Congo (April 12)</i>	<i>Newcastle Disease Pakistan (July 12)*</i>	<i>RVF Mauritania (November 12)</i>
<i>FMD Libya (May 12)*</i>	<i>PPR Angola (October 12)</i>	<i>Rabies Vietnam (May 13)*</i>
<i>FMD Gaza (May 12)*</i>	<i>CBPP Gambia (October 12)</i>	<i>Newcastle Disease Libya (May 13)*</i>

## Session 6

### What is next?

## International Agenda

Global and regional events by organisations were presented and are consolidated as per *Table 1: GF TADs for Africa Global and Regional Activities (from July 2013 - ) Annex 2*

The SC8 noted that to make progress on PPR, funds for regional meetings have to be found for 2014.

## GF TADs Financing/Resource mobilisation

This topic was presented by Dr Biancifiori, GF-TADs Global Secretariat.

To fulfil its mandate GF-TADs as a whole strongly depends on the proper functioning of both the global and regional level and a smooth and effective interplay between the two levels and within the regions with the major stakeholders and the countries. This interdependence has consequences for the financing of the activities of both the global and regional GF-TADs level and the sustainability thereof. Eligible activities for financing include organization of GSC and MC meetings, GF-TADs-labeled meetings and conferences, activities of the global GF-TADs Secretariat (facilitation, coordination and monitoring role, participation to the RSC annual meetings, GF-TADs website). Activities of specialized working, study and advice groups, such as the FMD, PPR and RVF Working Groups, the FAO-OIE Rinderpest Joint Advisory Committee can also be financed.

Delivery of the expected results is closely linked to the budgets available. No specific budget has been made available so far for the staff and the activities of the GF-TADs Global Secretariat and the Regional Secretariats. The Global Secretariat depends on FAO regular funds and “in kind” contributions of member states and partners, both for staffing and activities, with the support of the OIE. The Regional Secretariats depend for staffing on regular OIE funds. The governance-related activities that are not sponsored by third parties are also shared between OIE and FAO. As for the Secretariats, no specific budget is available for the GF-TADs Working Groups and therefore these rely on regular FAO and OIE funds and “in kind” contributions of countries. The GF-TADs Global Steering Committee recommended on several occasions FAO, OIE and development partners to address the financial situation and make it more sustainable (GSC2-Rec 17. GSC3 - Rec 6. GSC4 - Rec 1).

During the GSC2 meeting in 2009, a conservative estimate of the basic needs (*metabolisme de base*) for the Global and Regional Secretariats amounted to 2.9 million US dollars for 5 years. As requested by the GSC, a revised budget was presented in 2010 in which an amount of 258,600 US dollars was mentioned per year. The implementation and assessment related costs may be included in the activity related budgets at regional or country level, but the preceding meetings to develop the policies/strategies clearly require a budget at the global level. This is also the case if the global level is to support the meetings that should be organized in several (sub) regions to determine the disease control priorities and find sensible and cost-effective combinations of activities. A “strategy and coordination development budget” for the global level has not been worked out yet.

GF TADs has not set up an institutional linkages or relationships with the REC and therefore GF TADs should have a system of communication with the REC and it is then that we can have proposals on how the RECs could support the funding of the GF TADs.

A minimum budget for the Secretariat should be made available to implement some activities including printing, publication and distribution of action plan and reports. The GF TADs faces a funding challenge from donors because donors have prioritised countries first for loans and these come from banks. Budget for participations at regional meetings may be best placed on regional

proposals and minimum level allocated at national level. RECs may be considered for financing the GF TADs but we have to create ownership and strengthen linkages first.

## **Future of RAHCs**

(Refer to RAHCs above)

OIE and FAO continue to assist the RAHC platform. AU IBAR was optimistic on the future of RAHCs and FAO official positions has not changed and continue to support the concept and structure working closely with OIE. However, there are on-going discussions at FAO on the RAHC. The RAHCs are still considered as relevant tools for GF TADs for Africa, but there is still work to be done to refine their structure and relationships including with the RECs.

## **Future of ALive**

This topic was jointly discussed.

ALive was created in 2004 as a continental multi-stakeholder partnership platform with the aim of repositioning and mainstreaming the African livestock sector into the development agenda of national, regional and international policy makers, by emphasizing its crucial impacts in terms of poverty alleviation and sustainable economic growth and its overall contribution towards achieving the Millennium Development Goals. Its organizational structure including members of the Executive and Secretariat were outlined

The last Executive Council meeting in December 2012 requested the Chair and Secretariat to revise the operational modalities of the ALive platform where draft operational guidelines which are still being deliberated on were developed. The meeting of the EC planned for July 2013 is to discuss and adopt the revised strategy which is also still at a very early stage of discussion. ALive will be refocused to be a think tank with 6 thematic working groups (instead of caucuses) and one of the thematic areas is on TADs and Zoonosis which will be managed by GF-TADs Africa secretariat making the GF-TADs effectively a technical arm of ALive. Regional thematic groups will be created to address regional specificities. The Livestock Investment and Policy Toolkit developed and tested by the WB and CIRAD in Mali and Zambia will be rolled out with ToT of relevant experts. Four (4) experts from AU-IBAR are already trained.

It was noted that this year was the only time when the ALive and GF TADs Africa meetings were not synchronised. In the last meeting of ALive, the EU asked questions on the structure of the platform. The meeting reminded AU IBAR, which is hosting the ALive Secretariat to provide to partners an update about the ALive situation. . The meeting resolved that the relationship between ALive and GF TADs be maintained.

The meeting underlined the recommendation N° 14 of the SC7: "IRCM activities be reported at GF-TADs Africa in support of GF-TADs efforts in Africa and serve as a mechanism for linkage with RECs and MS and the coordination of interventions".

## **Discussions and Adoption of SC8 Recommendations**

(Refer to Recommendations Annex 3)

During the discussions, the OIE outlined the VSPA pilot project emphasising on the vaccination aspects involving both the public and private sectors and the three levels of delivery i.e. (i) vaccine availability (ii) logistics of the vaccination program and (iii) coverage. The quality of the implementing teams in the Ghana and Burkina Faso, OIE RR Bamako and Head Quarters experts and the specialized experts from the OIE Reference Laboratory and Collaborating Centres (experts on laboratory diagnosis and research, epidemiology, anthropology and , economy) were presented. Monitoring by serology will be targeted and not for the entire country due to resources and objectives of the project. Training of technicians and investigators to be aware of the disease will be done. A reminder was made about the launching meeting which took place in Addis Ababa in February 2013 and where OIE and AU-PANVAC invited many collaborating partners (FAO, AU-IBAR, ILRI, PPR Ref Centers, CIRAD, GALVmed etc).

Experiences and lessons learnt from this pilot project will be available to the rest of Africa and that is why OIE is investing on good vaccines and a good vaccination programme or delivery systems during this project.

OIE and FAO were not supporting the Global Alliance on PPR as they were establishing a PPR network similar in structure to the OIE/FAO existing networks. A workshop will be conducted where all the relevant partners including AU IBAR and the RECs will be invited to scrutinise the proposed PPR Control Strategy. It is expected by the end of the year and ILRI has been invited to participate.

AU IBAR requested that the visibility of their organization be increased by including the AUC logo on the new GF TADs Africa logo. It was clarified that there is a legal component to the logo and any proposed changes would have to follow the right channels. Consequently, it was agreed that AU IBAR should make a complete proposal (with proposed options and logos) to the management committee for consideration during the next GF TADs Global Steering Committee meeting.

The SC8 also considered opportunities to modify the agenda to make it more precise, avoid repetitions, have more joint presentations and bring in new relevant topics to the agenda. The area of most concern was the presentation on the epidemiological picture that is followed by activities regarding specific priority diseases. The Steering Committee has the mandate to modify the agenda as it sees fit and add new topics before the meeting and the Secretariat and President have to propose as usual.

## **Closing Remarks**

Representatives of all the three organisations made their closing remarks and asked the SC to focus on activities to move GF TADs for Africa forward but in synergy, implement recommendations to improve the livelihoods of livestock keepers. They also thanked Ghana for hosting the SC8 and FAO RAF for the excellent organisation of the meeting.



## Annex 1: STATE OF IMPLEMENTATION OF THE GF-TADs/Africa SC7's RECOMMENDATIONS

RECOMMENDATIONS	STATUS	COMMENTS
1. <i>The Regional GF-TADs for Africa 5-year Action plan drafted by the secretariat be reviewed by GF-TADs members, finalized and approved by OIE, FAO and AU-IBAR</i>	Done	
2. <i>The framework of GF-TADs for Africa promotes the elaboration and cooperation on integrated regional strategies for high impact diseases and zoonoses (AU-IBAR, FAO, OIE)</i>	Ongoing	<p>OIE : Support to the elaboration regional strategies NCD and CPPB (WAEMU member states) and PPR and TADs (ECOWAS countries)</p> <p>FAO: Work under progress on FMD, RVF, PPR, ASF, CBPP with Institutions participating to GF-TADs Africa, GF-TADs Working group or under bilateral agreements</p> <p>AU-IBAR: Capacity building on diseases prioritization using a specific computer based tool has been undertaken covering 11 countries and 4 REC secretariats to date. The training will enable RECs and MSs to objectively identify and prioritize high impact TADs and zoonoses for disease control programming and policy development</p>
3. <i>AU-PANVAC and relevant partners ensure implementation of recommendations of the FAO/OIE Rinderpest Joint Advisory Committee</i>	Done	
4. <i>AU-IBAR and partners continue advocacy for resources mobilization to address Rinderpest-like syndromes and trade sensitive diseases</i>	?	
5. <i>The OIE explores the feasibility to include a critical competency related to the Rinderpest post eradication effort within the OIE PVS Evaluation tool</i>	Ongoing	<p>The OIE decided to not include a specific critical competency related to Rinderpest post-eradication in the PVS Tool as this Tool is not disease specific. The OIE is evaluating the possibility to include, in the PVS Manual for experts, provisions for experts to better take into consideration countries efforts to get OIE recognition of disease status when performing OIE PVS Pathways missions.</p>
6. <i>The GF-TADs Working Group on FMD continue to promote the use of the Progressive Control Pathway (Action led by OIE and FAO)</i>	Ongoing	<p>The GF-TADs Working Group on FMD participates/organizes Regional FMD roadmaps meetings where countries are invited to self-evaluate their PCP-FMD stage; update of the PCP-FMD Guidelines; elaboration of a PCP-FMD Assessment Tool in collaboration with EuFMD to conduct self or external assessment; elaboration of a Template and a "tool kit" for the development of National Control Strategy; elaboration of a Draft Regional FMD control strategy for the Near-East and North Africa</p>
7. <i>Ongoing activities related to the assessment of economic impact of high impact diseases be promoted (Action led by FAO, AU-IBAR and</i>	Ongoing	<p>FAO: PPR socio-economic and livelihood impact assessment conducted in Tanzania within the implementation of a Technical Cooperation Program (TCP/URT/3302)</p>

<b>OIE)</b>		
<b>8. The PPR control strategy be enhanced taking into consideration latest scientific knowledge and regional and country programs (AU-IBAR, FAO, OIE, relevant partner's institutions)</b>	Ongoing	See presentation on progress on the development of a global strategy, by OIE 4 <sup>th</sup> Meeting of the consultative committee of AU-IBAR recommended that AU-IBAR prepare a continent action plan for the progressive control and eradication of PPR in Africa FAO has issued a position paper on PPR and has TCPs under progress or to be implemented (Tanzania, Malawi, Mozambique, Zambia)
<b>9. AU-PANVAC provides required quality certification services for vaccines including PPR, ND and other priority TADs</b>	Done	
<b>10. AU-IBAR, FAO and OIE to pursue the finalization of CBPP progressive control program and appropriate regional strategies and funds mobilization</b>	Ongoing	OIE continue to give the opportunity of sanitary statute of this disease FAO is at a first stage for a meeting on CBPP to be organized before end of 2013 – Event will be proposed as a GF-TADS event AU-IBAR: Funding is being sought from financial partners to support the Progressive Control for Neglected Animal Diseases in Africa (PROCNADA) building on the achievements of VACNADA project
<b>11. AU-IBAR, FAO and OIE to continue ongoing efforts in finalizing the development of the ASF control strategy including project formulation and resource mobilization by engaging other relevant partners</b>	Ongoing	FAO: ASF working group launched in Eastern Africa AU-IBAR: A draft strategy was developed by AU-IBAR/FAO-ECTAD EA and ILRI. A joint AU-IBAR and FAO action plan has been developed for the finalization of ASF control regional strategy and program. These 2 drafts will be merged into one document. A taskforce has been put in place in this regards. A meeting for the taskforce is planned for the last week of June 2013. The developed ASF control strategy and program in Africa will be published in august 2013 and presented at the Global Alliance on ASF meeting in Rome in October 2013. It is planned to propose it for endorsement by GF-TADs Africa
<b>12. Follow up on recommendations on first Global Conference on Rabies with increased commitment of RECs and national veterinary services in implementing control programs and trigger greater collaboration with public health authorities to ensure that funding be directed at controlling the disease at its animal source (especially in dog population)</b>	Ongoing	OIE, FAO and WHO continue to implement the recommendations, working regionally to encourage international solidarity and donor support for countries in need and to initiate and sustain control programs for rabies; the Terrestrial Code chapter on rabies has been updated with an article on rabies control in dogs which was adopted at the OIE General Assembly on May 2013, and the vaccine part of the Terrestrial Manual chapter on rabies was also adopted. OIE laboratory twinning project completed to improve the capacity and expertise of the National Veterinary Research Institute (NVRI), Nigeria to perform rabies diagnosis and surveillance in the region in collaboration with the OIE rabies reference laboratory at Onderstepoort Veterinary Institute, South Africa. Rabies proficiency testing exercise was performed by OVI to improve laboratory diagnostic capacity” AU-IBAR: A concept note has been developed to

		<p>guide the development of a continental strategy for the control and progressive eradication of rabies in Africa. The strategy will be anchored on lessons learned from the Kagera Ecosystem in the East African Community. The Kagera ecosystem broadly represents the key challenges facing rabies control in Africa. A broad range of stakeholders will be involved in the development and implementation of the continental strategy.</p>
<p><b>13. African countries be encouraged to undertake the PVS Pathway and to take ownership of its outcomes in order to improve the good governance of their Veterinary Services and to ease access to funding both internally and externally using round tables (OIE, AU-IBAR, FAO)</b></p>	<p>Done (see state of play at 15 May, 2013)</p>	<ul style="list-style-type: none"> <li>- Evaluation: requests received 53, missions completed 49, reports available 38</li> <li>- Gap analysis : requests received 40, missions completed 34, reports available 21</li> <li>- Veterinary legislation : requests received 25, missions completed 17</li> <li>- Roundtable organization in preparation in Guinea, Mali, Benin</li> </ul>
<p><b>14. The preparedness, prevention and control of TADs and zoonoses at RECs and country levels be strengthened through the Integrated Regional Coordination Mechanism (IRCM) and the Good Emergency Management Practices (GEMP) (Action lead by AU-IBAR in close partnership with OIE and FAO)</b></p>	<p>Ongoing</p>	<p>FAO: Two national GEMP training workshops organized in Tanzania and Kenya in April/ May 2013, Regional GEMP training workshop in Côte d'Ivoire in April 2013 for French speaking countries</p> <p>AU-IBAR: Regional Economic Communities have developed implementation plans for setting up coordination mechanisms and strategies for the prevention and control of TADs and zoonoses. In one REC (IGAD) establishment of standard methods and procedures for surveillance and control of TADs and zoonoses in line with the IRCM is ongoing. Efforts are ongoing to mobilize resources to support establishment of capacity and similar systems in other RECs.</p>
<p><b>15. IRCM activities be reported at GF-TADs Africa in support of GF-TADs efforts in Africa and serve as a mechanism for linkage with RECs and MS and the coordination of interventions</b></p>	<p>Ongoing</p>	<p>AU-IBAR: Various activities were undertaken since the previous GF-TADs meeting. These include capacity building of senior officials from MSs (Burundi, Chad and CAR), on the One Health approach, training of epidemiologists from IGAD, EAC and ECOWAS on disease prioritization &amp; categorization, establishment of an Africa specific Compendium of TADs and Zoonoses, development of one health training curriculum for Africa, monitoring and advisory support for AU MSs on the H7N9 outbreak, and resource mobilization for implementation of the IRCM in SADC, EAC, IGAD and other RECs</p>

## Annex 2

**Table 1: GF TADs for Africa Global and Regional Activities (from July 2013 - )**

	Name of event	Date	Place/venue	Lead Org
1	OIE Global Conference on Veterinary Education & the Role of the VSB	4-6 Dec 2013	Foz do Iguazu (Brazil)	OIE
2	82nd General Session of the World Assembly of Delegates	25-30 May 2014	Paris (France)	OIE
3	FAO/OIE Global Conference on PPR	End 2014	TBD	FAO/OIE
4	Conference of OIE Reference Centres*	14-16 Oct 2014	Rep. of Korea	OIE
5	OIE Global Conference on Aquatic Animal Health*	20-22 Jan 2015	Ho Chi Minh City Vietnam	OIE
6	OIE Global Conference on Biological Threats Reduction	June 2015	France	OIE
7	FAO/OIE 3rd Global Conference on FMD	Dec 2015	Africa	FAO/OIE
8	OIE Global Conference on the Movement of High Performance Horse	2015	To be determined	OIE
9	OIE Regional Seminar for Veterinary Products Focal Points (+ Middle East)	1-4 Oct 2013 –	Algiers (Algeria)	OIE
10	21st Conference of the OIE Regional Commission for Africa	Mid Feb 2015	Morocco	OIE
11	Sub-Regional Workshop on Veterinary Legislation (EN)	8-10 Oct 2013	Arusha (Tanzania)	OIE/ AU-IBAR
	OIE Regional Seminar for Wildlife Focal Points (+ Middle East)	12 – 15 Nov 2013	Gaborone (Botswana)	OIE
	OIE Regional Seminar for Veterinary Products Focal Points	3 - 5 Dec 2013	Maputo (Mozambique)	OIE
12	Sub-Regional Workshop on Veterinary Legislation ( FR)	26-28 Nov 2013	Algiers (Algeria)	OIE/AU-IBAR
13	The 38 <sup>th</sup> ISCTRC Executive Committee meeting	7 <sup>th</sup> Sept 2013	Khartoum(Sudan)	AU/C
14	32 <sup>nd</sup> ISCTRC General Conference	8–12 Sept 2013.	Khartoum(Sudan)	AU/C
15	OFFLU Vaccination workshop	Oct-Nov 2013	China	OFFLU
16	OFFLU annual technical meeting	TBD 2014-2015	TBD	OFFLU
17	Regional Workshop: Coordination strategy for prevention and control of CBPP in Africa	TBD 2013		FAO
18	East Africa CVO Meeting			FAO

### Annex 3:

Recommendations: SC8

Accra, 18 June 2013 (1<sup>st</sup> draft)

#### GF-TADs AFRICA 8TH STEERING COMMITTEE MEETING: Recommendations

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Considering that:

1. GF-TADs Africa five-year action plan is in line with the Comprehensive Africa Agriculture Development Program (CAADP),
2. GF-TADs/Africa five-year action plan need to be completed with baseline situation on the listed diseases as priority,
3. The current epidemiological situation of TADs and zoonoses in Africa as provided by OIE, AU-IBAR, and FAO using reporting tools (WAHIS and ARIS) and other information supporting tools such as GLEWS, and recognizing the need to improve surveillance systems in order to address the gaps in the epidemiological knowledge of prioritized diseases in Africa,
4. The priority diseases defined in the GF-TADs For Africa 5-year Action Plan and namely PPR, FMD, RVF, Rabies, African Swine Fever (ASF), Newcastle disease (ND) and CBPP,
5. The 2011 declaration of Rinderpest eradication at global level, the ongoing post eradication phase and the establishment of the FAO/OIE Rinderpest Joint Advisory committee,
6. The recommendations of the FAO/OIE Global Conference on Foot and Mouth Disease (FMD) Control held in Bangkok, Thailand in June 2012 especially those referring to the Global FMD Control Strategy and its supporting tools such as the FMD Progressive Control Pathway (PCP), the PVS Pathway and OIE Terrestrial Code chapters particularly regarding the official recognition of country control programme and disease status,
7. The ongoing activities and progress made on Peste des Petits Ruminants (PPR) control by AU-IBAR, OIE, FAO and other partners and the ongoing work of the GF-TADs Working Group on PPR,
8. The new articles of the OIE Terrestrial Code related to PPR adopted during the recent OIE General Session of the World Assembly of Delegates in May 2013, which make PPR a new disease with official OIE Status and open the possibility for endorsement of national PPR control programme,
9. The need for concrete actions on the "One Health" approach including better information sharing on TADs and zoonoses,
10. The recommendation of the 4<sup>th</sup> consultative Committee meeting of AU-IBAR in Abidjan on 19 April, 2013,
11. Donors require appropriate coordination mechanism and strong basis to justify the investment being made in the animal health sectors,
12. RAHCs are appropriate tool at regional level for taking in charge TADs, although there are uncertainties regarding their funding,
13. Veterinary Services are global public good and that reinforcing their governance is crucial for animal health, food safety and food security, while ensuring safer trade in animals and animals products in Africa,
14. The ongoing IRCM initiative and progress made, and the need to report to GF-TADs
15. The need expressed by participants for a more inclusive membership within the GF-TADs,
16. The uncertainties related to funding of GF-TADs Africa,
17. the GF-TADs for Africa is the animal health component of the ALive platform, and

18. The recommendations of the FAO-OIE Inter-Regional Conference on Rift Valley Fever and the establishment of the OIE Ad Hoc Group to review the Terrestrial Code on RVF.

The Steering Committee of the GF-TADs for Africa recommends that:

1. The Regional GF-TADs for Africa 5-year Action plan approved by AU-IBAR, FAO and OIE be widely shared with relevant GF-TADS partners in Africa (OIE as Secretariat)
2. The Regional GF-TADs for Africa 5-year Action plan be completed with baseline situation provided by countries and RECs (OIE as Secretariat, in collaboration with AU-IBAR and FAO),
3. The framework of GF-TADs for Africa promotes the elaboration and cooperation on integrated regional strategies for high impact diseases and zoonoses (AU-IBAR, FAO, OIE),
4. AU-PANVAC and relevant partners continue to ensure implementation of recommendations of the FAO/OIE Rinderpest Joint Advisory Committee,
5. AU-IBAR and partners continue advocacy for resources mobilization to address Rinderpest-like syndromes and priority TADs in Africa,
6. The Secretariat of the Alive Executive Committee, supported by key partners of GF-TADs for Africa, ensure a proper advocacy at the highest authority (Ministers/policy makers) to promote ownership of the GF TADs for Africa mechanism and its 5 year Action Plan by the REC and Members Countries,
7. When relevant, OIE take into account the efforts made by countries related to official disease status recognition when performing PVS Pathway missions (i.e. FMD, PPR, and CBPP),
8. The GF-TADs Working Group on FMD continue to promote the use of the Progressive Control Pathway and the OIE PVS Pathway as monitoring tools (Action led by FAO and OIE),
9. Ongoing activities related to the assessment of economic impact of high impact diseases be strengthened (Action led by FAO, AU-IBAR and OIE),
10. The Regional PPR control strategy for Africa be enhanced taking into consideration latest scientific knowledge, regional and country programmes, and the Global PPR Control Strategy when available (AU-IBAR, FAO, OIE, relevant partner's institutions),
11. The Global PPR Control Strategy, currently developed by the FAO-OIE GF-TADs PPR Working Group, consider regional experiences gained by the different partners,
12. AU-PANVAC continue to provide required quality certification services for vaccines including PPR, ND and other priority TADs,
13. AU-IBAR, FAO and OIE continue to pursue the finalization of CBPP progressive control program and appropriate regional strategies and related funds mobilization (FAO lead),
14. AU-IBAR, FAO and OIE continue ongoing efforts in finalizing the development of the ASF control strategy including project formulation and resource mobilization by engaging other relevant partners,
15. The implementation of the recommendations of the first Global Conference on Rabies, with increased commitment of RECs and national Veterinary Services, trigger greater collaboration with public health authorities to ensure that funding be directed at controlling the disease at its animal source and especially in dog population,
16. African countries be encouraged to continue undertaking the PVS Pathway and taking ownership of its outcomes in order to improve the good governance of their Veterinary Services and to ease access to funding both internally and externally using round tables with donors (OIE lead, AU-IBAR, FAO),
17. Regional GF-TADs partners ensure synergy when assisting countries to develop appropriate projects or proposals for resources mobilization and particularly to improve ownership of the outcomes of the OIE PVS Pathway.
18. The labeling mechanism of activities by GF TADS for Africa be more systematically implemented in order to ensure a better coordination, harmonization and advocacy of the GF-TADs mechanism,
19. IRCM activities continued to be reported at GF-TADs Africa in support of GF-TADs efforts in Africa and serve as a mechanism for linkage with RECs and MS and the coordination of interventions,
20. MS and RECs implement the recommendation on RAHCs of the AU-IBAR 4<sup>th</sup> Consultative Committee Meeting in Abidjan, 19 April, 2013,
21. As being the animal health component of the ALive platform, the GF-TADs for Africa recommendations be strongly advocated within ALive in order to ensure advocacy at higher political level, and



22. The Recommendations of the FAO-OIE Inter-Regional Conference on RVF that took place on 12-15 November 2012 in Mombasa (Kenya) be implemented and appreciate the establishment of the OIE Ad Hoc Group to review the RVF Terrestrial Code Chapter.

The Steering Committee thanks the Government of Ghana and the FAO Regional Office for Africa based in Accra for supporting and hosting the GF-TADs 8<sup>th</sup> Steering Committee meeting.

## ANNEX 4:

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