



CMC-AH Crisis Management Centre
Animal Health

ACTIVITY REPORT

October 2008 – September 2010



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Disinfection area checkpoint;
Bhutan.

INTRODUCTION

As of March 2009, outbreaks of Highly Pathogenic Avian Influenza (HPAI) and the pandemic threat they represent were not foremost in the minds of many. New occurrences received reduced media coverage, and assistance focused less on response and more on mitigation in many HPAI-affected countries. Meanwhile, despite their continued impacts on animal health, human health and vulnerable livelihoods, other transboundary animal diseases (TADs) lacked the media attention they deserved.

Much of this changed with the appearance of pandemic (H1N1) 2009 influenza in late April 2009. Spreading with great speed in humans, the new virus became a sudden, global concern. The need to maintain international efforts to fight influenza viruses and other threats was once again high on the international agenda.

Continuing to respond to this global need, the Crisis Management Centre – Animal Health (CMC-AH) of the Food and Agriculture Organization of the United Nations (FAO) and the World Organisation for Animal Health (OIE) has remained at the forefront of efforts to combat TADs, including HPAI and pandemic (H1N1) 2009 influenza. From October 2008 to September 2010, the Centre deployed 17 missions supporting 16 countries in their efforts to respond to TAD emergencies. The CMC-AH has worked in conjunction with donors and partners to meet evolving response needs spanning more of the globe and much of the animal disease spectrum.

In the past two years the CMC-AH has assisted governments responding to emergencies involving: African swine fever (ASF), brucellosis, Ebola Reston virus (ERV), HPAI, pandemic (H1N1) 2009 virus, porcine teschovirus (PTV) and rabies. The Centre also responded to critical situations with unknown or multiple causes.

During this period, FAO and partners have continued to strengthen the Centre's capacities with efforts focusing on:

- broadening the scope of assistance;
- expanding the range of services and tools; and
- strengthening operational capacities.

AN EVENT OF PANDEMIC PROPORTIONS

In April 2009 in Mexico, a novel influenza virus appeared in humans and spread with tremendous speed throughout the global human population. Inappropriately termed "swine flu" during the initial stages, the pandemic (H1N1) 2009 influenza virus went on to infect people in over 200 countries¹. While not as

lethal as it could have been, the pandemic reminded the world that influenza viruses still represented tangible and ongoing threats. Influenza viruses require continued vigilance due to their capacity to reassort and spread rapidly in humans and animals.

¹ http://www.who.int/csr/don/2010_07_16/en/index.html



(Above) Pigs on a commercial farm;
Mexico.
(Below) Backyard poultry can be
highly susceptible to HPAI infection;
Nepal.



Blood samples taken with CMC-AH
technical guidance; Philippines.



Balinese authorities vaccinate a dog for rabies; Indonesia.

RESPONDING TO NEEDS

BROADENING ASSISTANCE

Country requirements have evolved since 2008 along with the changing disease landscape. One such shift has been the clear increase in requests for assistance with non-HPAI emergencies. Only 35 percent of missions deployed since October 2008 focused on avian influenza. The CMC-AH deployed nearly equal that amount of missions to assist with disease emergencies involving epidemiologic patterns of complex or unknown causes.

CMC-AH AT A GLANCE (October 2008 – September 2010)

Missions deployed	17
for HPAI	6
for other TADs	11
Countries assisted	16
Phased deployments or follow ups	8

FILLING THE GAP

Recognizing animal health crises as overarching emergency events and not just isolated incidents, the CMC-AH deployed more multi-mission and phased responses than in previous years. Designing assistance as event-based response support, 50 percent of missions since October 2008 took the form of sequential or longer-term deployments to meet government requests.

REGIONAL ASSISTANCE FOR WEST AFRICA

When the Togolese authorities suspected new outbreaks of ASF in previously unaffected areas in late 2008, FAO was quick to recognize the regional threat posed by the disease. Through an initial mission in February 2009, the CMC-AH provided a rapid response plan, an emergency funding package and a roadmap toward an ASF strategy for Togo.

Building on the momentum of these activities, the CMC-AH deployed a two-month mission starting in April 2009 to Benin, Burkina Faso, Côte d'Ivoire, Ghana and Togo. The follow-up mission gathered extensive information on ASF and the livestock sector as a first step in developing a regional ASF strategy for West Africa.

Public information on ASF displayed by FAO and veterinary services; Togo.



(Above) Diseases in wild game can pose human health risks; Togo.
(Below) A vaccination team prepares to receive domestic animals; Indonesia.



A sampling and diagnostic team with multiple partner members; Philippines.

BUILDING PARTNERSHIPS

THE ANIMAL-HUMAN INTERFACE

Missions have engaged increasingly in coordinated efforts to respond to crises emerging at the animal-human interface. FAO, OIE and WHO – along with partners like the Centers for Disease Control and Prevention (CDC), the United States Department of Agriculture (USDA) and others – have contributed to coordinated efforts to respond to disease crises with potential impacts on animals, humans and the environment.

DRAWING EXPERTISE FROM ADDITIONAL SOURCES

Over these past two years the CMC-AH has strengthened established relationships and developed additional allies in the fight against TADs. Working with institutes, universities, regional bureaus and national governments, the CMC-AH has enriched its capacity to bring the most up-to-date, international assistance to bear when helping countries manage critical events.

If left unchecked in milk-producing cows, brucellosis can pose significant public health risks; Fiji.



ADDRESSING RISKS TO THE FOOD CHAIN

In November 2008, the first known occurrence of ERV in pigs was confirmed in the Philippines. Found for the first time in a production species, ERV was known previously to kill monkeys but only to cause antibody production in humans. The authorities recognized the potential ramifications for both humans and animals and called on FAO for assistance.

Putting together a diverse team of 12 experts from FAO, CDC, OIE, WHO and USDA, the CMC-AH coordinated an international effort focused on understanding the situation and its possible implications for the food chain. In April and May 2009, the CMC-AH followed up with a second mission to enhance national surveillance and control capacities.

ADDITIONAL PARTNER EXPERTISE

In addition to collaborating closely with each host government, since October 2008 the CMC-AH has augmented its capacities by partnering with the: CDC; *Centre Ivoirien de Recherches Economiques et Sociales*; Foreign Animal Disease Diagnostic Laboratory of USDA; *Friedrich-Loeffler-Institut (FLI)*; Inter-American

Institute for Cooperation on Agriculture; *Organismo Internacional Regional de Sanidad Agropecuaria*; Pan-American Health Organization; University of Ljubljana; USDA; WHO; and *Istituto Superiore di Sanità*.

Specialized breathing equipment; Italy.





Pig slaughterhouse; Philippines.

SERVICES AND TOOLS

EXTERNAL SERVICES

Providing countries the services needed to implement recommendations has been a major focus of work this biennium. Specifically, the CMC-AH has been engaged in two ongoing initiatives: developing a contingency stock of critical reagents; and revising and expanding FAO's Good Emergency Management Practices. The latter has incorporated field-tested guidelines on outbreak communication and disease response procedures.

INTERNAL TOOLS

Focusing on how to better support coordinated operations for improved impact, the CMC-AH has created tools and mechanisms that help the Centre better fulfil its mandate. These tools have ranged from improved procedures to innovative after-action review processes for better efficiency and improved event management.

DEVELOPING REAGENT CONTINGENCY STOCKS

Quick and reliable testing of suspect samples on the ground and in national laboratories is a key part of effective outbreak management and response. The CMC-AH has been developing an accessible stock of reagents to facilitate rapid laboratory confirmation in countries experiencing outbreaks. In partnership with the United Nations Humanitarian Resource Depot,

the CMC-AH established stocks of key HPAI reagents for storage and shipment under appropriate cold-chain conditions. In addition, the Centre identified reagents for other critical, non-HPAI TADs and made arrangements for their procurement should current funding limitations change.

TRACKING EVENTS AND MANAGING RESPONSES

The CMC-AH has fine-tuned its ability to track critical events and manage possible responses through the creation of the Event Tracking and Management System (ETMS). While other established databases track diseases, the CMC-AH employs ETMS for its own event management purposes. Supported in

particular by the Canadian International Development Agency, ETMS has improved the Centre's capacity to plan, manage and follow-up on emergency response activities as well as strengthen post-mission analysis and reporting.

CMC-AH experts use reagents to test for HPAI; Nepal.



CMC-AH Operations Room; Italy.