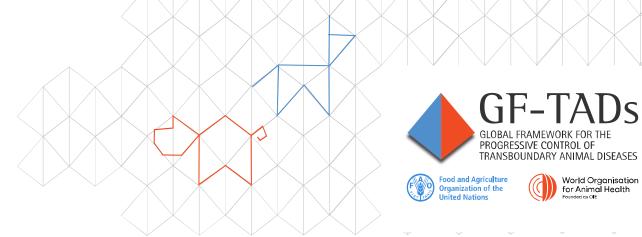




Overview of PPR situation in ECO Region

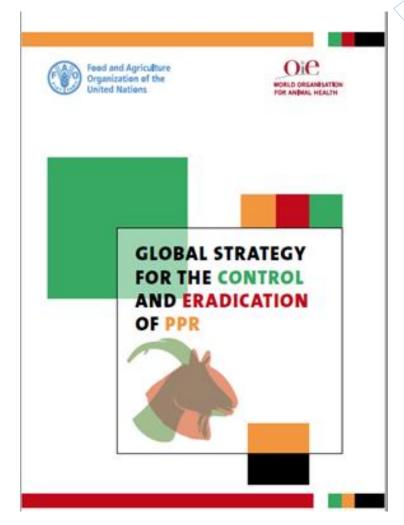
Regional Roadmap meeting, 2025

Viola Chemis, PPR Secretariat, WOAH

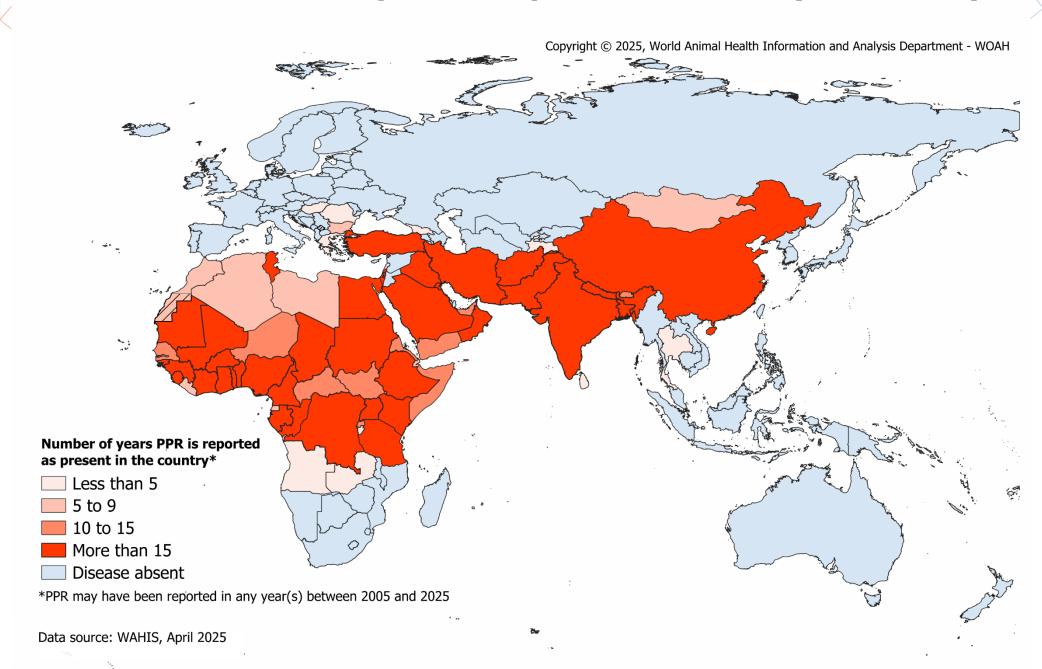


PPR GLOBAL SITUATION: INTRODUCTION

- Highly contagious viral disease affecting sheep, goats, and wild ruminants
- Up to 100% mortality in naïve populations
- Annual economic losses: USD 2.1 billion
- Threatens 330+ million people dependent on small ruminants
- 70+ countries affected
- Entrenched in endemic areas
- Links to food security, gender equity, and livelihoods
- Review meetings, capacity building and related conducted to support national Veterinary Services



Global distribution of peste des petits ruminants (2005-2025)





Argentina

Australia

Austria

Azerbaijan

Belgium

Bolivia

Bosnia and Herzegovina

Botswana

Brazil

Canada

Chile

Chinese Taipei

Colombia

Croatia

Cyprus

Czech Republic

Denmark

Ecuador

Estonia Eswatini

Finland¹

France²

Germany Iceland

Ireland

Italy

Korea (Rep. of)

Latvia

Lesotho

Liechtenstein

Lithuania

Luxembourg Madagascar

Malta

Mauritius

Mexico

New Caledonia

New Zealand

North Macedonia (Rep. of)

Norway

Paraguay

Peru

Philippines

Poland

Portugal³

Russia

Singapore

Slovakia

Slovenia

South Africa

Spain⁴

Sweden

Switzerland

The Netherlands

United Kingdom⁵

United States of America⁶

Uruguay

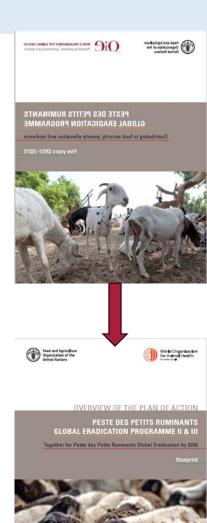
Namibia: one zone located south of the Veterinary Cordon Fence, designated by the

Delegate of Namibia in documents addressed to the Director General in November

2014;

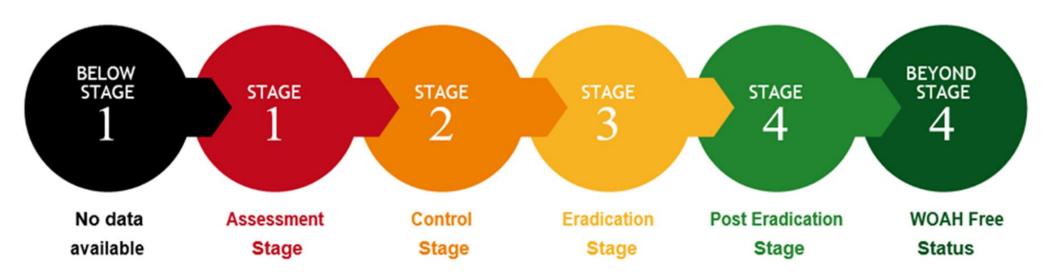
BACKGROUND: PPR ERADICATION

- The PPR GCES guiding eradication efforts through GEP 1 (2017-2021) => GEP II & III (also known as the Blueprint).
- GCES specific objectives: eradication of PPR by 2030; reinforcing Veterinary Services and Reducing the impact of other major infectious diseases of small ruminants
- ❖ Regional consultative meetings, regional roadmaps and technical support for integration of the episystem approach been conducted across affected regions – Africa, Middle east and Asia Pacific – emphasis proper understanding of the local disease risk in various geographical areas and production systems and the dynamics of animal movement
- PPR Monitoring & Assessment Tool (PMAT) has been revised, available for countries



PPR Monitoring & Assessment Tool - PMAT

- Due to its transboundary nature, the PPR GCES recognises the need for harmonising PPR disease control and eradication efforts at the national, regional, and global levels.
- This should be guided by a proper **understanding** of the **local disease risk** in various geographical areas and production systems and the dynamics of animal movement.
- The global strategy's Strategic approach is based on four different Stages, each corresponding to a combination of decreasing levels of epidemiological risk and increasing levels of prevention and control efforts.



PMAT & OTHER TOOLS

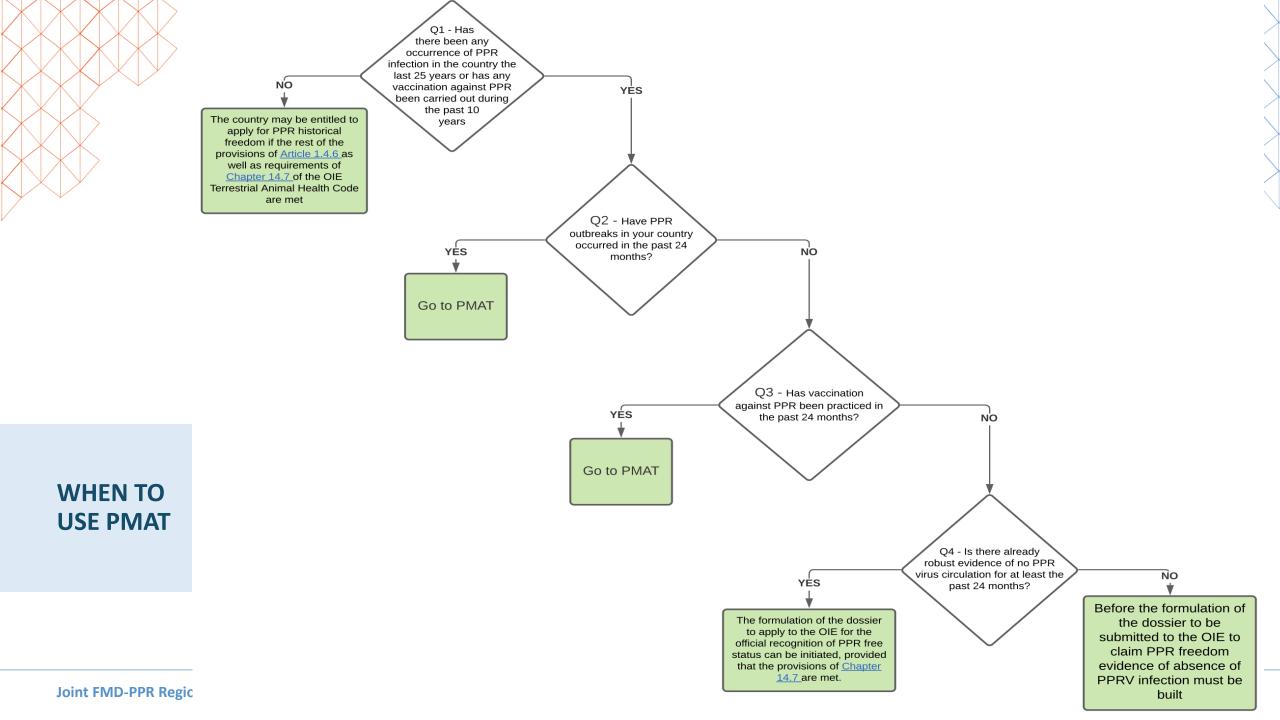
The Post-Vaccination Evaluation (PVE) tool guides countries in assessing vaccine effectiveness, encompassing the vaccine attributes and delivery, vaccination coverage, and immune response to vaccination.

Capacity building:

- Reference Laboratories and the network
- PVS with PPR specific content, lab twinning

Request for WOAH Request for endorsement of WOAH official control recognition of programme (14.7.34.) official free status **Below** Stage Stage Stage stage Control in Control and **Epidemiological** Evidence of identified areas eradication in information and No information absence of PPRor husbandry the entire disease virus systems territory distribution Vaccination Vaccination

Surveillance and vaccination guidelines; also refer to horizontal chapters of the code (1.4-surveillance, 1.1-disease notification, 2.1-risk analysis, 3.2-evaluation of VS, 3.4-Vet Legislation, 5–Import/export procedures, 5.1-Obligations related to certification; PPR specific chapter 14.7)



PMAT TOOL: Five main technical elements assessed for stepwise progression



Presence of a Legal framework supporting PPR Eradication



Capacity to develop surveillance plans and carry out surveillance in the field



Diagnostic capacity available, staff and infrastructure

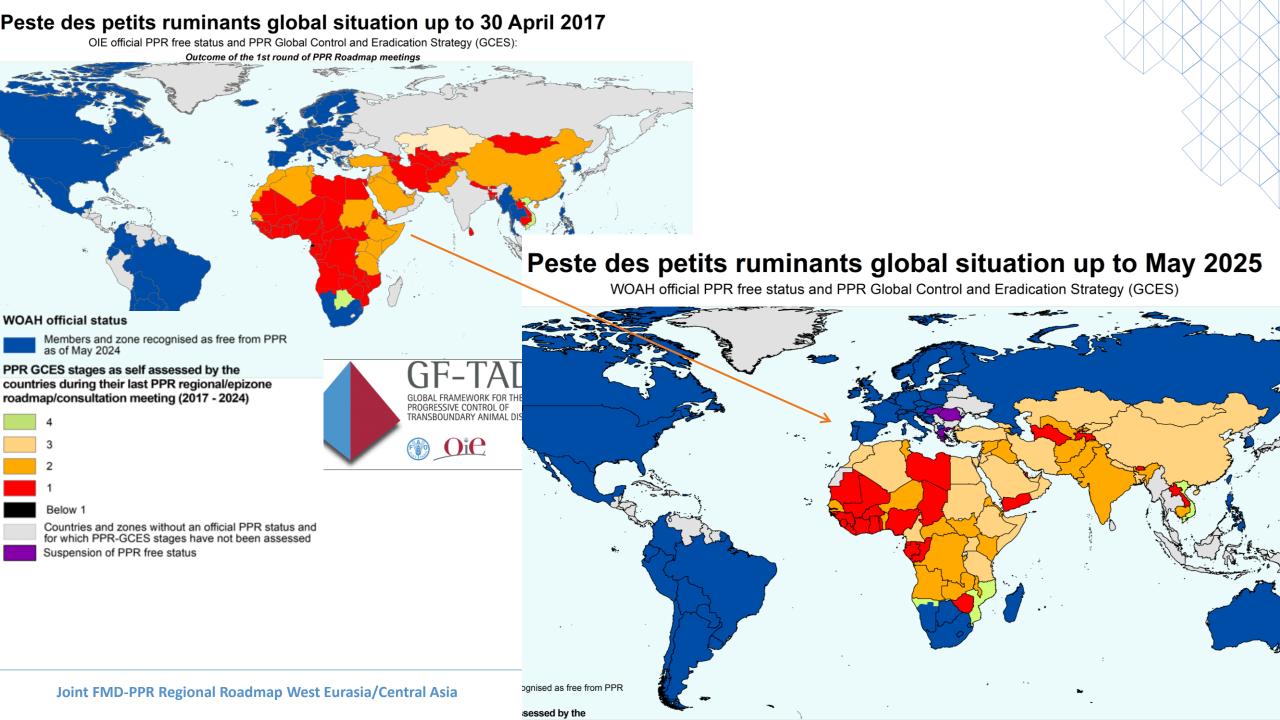


Capacity to carry out disease prevention and control i.e., vaccination & livestock movement control



Willingness to involve the small ruminant stakeholders; traders, farmers &

- At the national level, the country's progression on the stepwise approach depends on implementing activities set out in each stage and related to country capacities in five main technical elements.
- Activities in each Stage are appropriate to mitigate the risk in accordance with the evidence provided
- Implementing all relevant activities should enable countries to achieve a progressive decrease in the incidence of PPR
- For each stage, activities and their impacts are measurable using a self-assessment tool, the PPR Monitoring and Assessment Tool (PMAT), which was developed to categorise countries according to the four stages.
- Links between PMAT and PVS critical competencies



Middle east RMM

- Countries at different stages of the PMAT
- Varying levels of capacities surveillance, vaccination, diagnostics, and stakeholder engagement
- Challenges:
 - Illegal animal movement,
 - Funding gap, and
 - Gaps in biosecurity and surveillance.

Middle East [13]	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030
Bahrain*	3	3	3	3	4	4	4	Free	Free	Free	Free
Egypt	2	3	3	3	3	3	3	3	4		
Iraq	Pending PMAT submission										
Jordan	1	1	1	1	1	2	3	3	3		
Kuwait	2	2	2	2	2	2	2	2	2		
Lebanon	Pending PMAT submission										
[Oman]	Pending PMAT submission										
Palestine	1	1	1	1	1	2	2	3	3		
[Qatar]*	1	1	1	1	1	3	3	3	3		
Saudi Arabia	2	2	3	3	3	4	4	4	4	Free	Free
Syria	2	2	2	2	2	3	3	3	3		
United Arab Emirates	3	3	3	3	3	3	3				
Yemen*	1	1	2	2	2						



- PPR endemic in most countries
- Sub-regional
 meetings support
 identification of
 common challenges
 - interventions
 ongoing, resource
 mobilisation and
 discussion towards
 eradication continue
- Coordination & collaboration critical



Stage 1

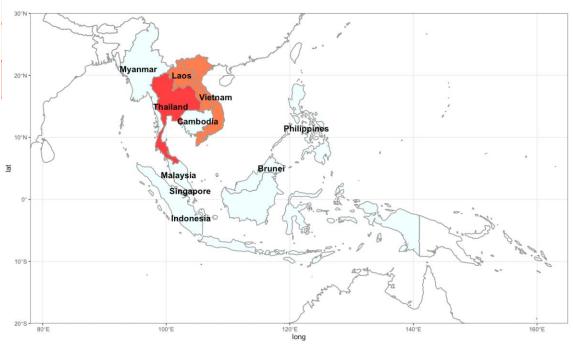
Stage 2

Stage 3

Stage 4

Official free

ASIA & THE PACIFIC REGION



The ASEAN region has been historically free from PPR except for serological evidence of the disease in Laos and Vietnam and an outbreak in imported goats in Thailand

Theory of Change - ASEAN PPR Preparedness Strategy

Vision

The ASEAN Member States are officially recognised as PPR-free by WOAH and maintain PPR freedom

To strengthen capacity in the ASEAN region to prepare, prevent, detect, respond to, and recover from outbreaks of PPR and other priority small ruminant diseases.

- Absence of incursion of PPR in the region*
- · Prompt detection and containment of a future PPR
- Achievement and maintenance of the official recognition of Members' PPR-free status*

Problem statement

PPR remains a significant concern for the ASEAN region because, if introduced, it can significantly impact small ruminant health and production and negatively impact farmers' livelihoods, the rural economy and food security.

Objectives

Objective 1

Establish effective coordination and cooperation framework for PPR preparedness (early warning and rapid response)

Objective 2

Improve capability of ASEAN Member States to prepare and respond to PPR

Objective 3

Strengthen capacity of veterinary workforce for early warning and rapid response

Outputs

- 1.1 Enhanced coordination among AMS
- 1.2 Enhanced communication 2.2 Strengthened laboratory and stakeholder engagement
- 1.3 A sustainable funding mechanism
- 1.4 A harmonised legal and regulatory framework

- 2.1 Strengthened surveillance systems in AMS
- diagnostic systems in AMS
- 2.3 Strengthened pre-border, border and post-border biosecurity.
- 2.4 Official WOAH recognition of PPR-free status by 2030

- 3.1 The capacity of the veterinary workforce in the ASEAN region
- 3.2 Training materials sourced and developed to strengthen workforce capacity.

evaluated.

3.3 Training programmes delivered to strengthen workforce capacity.

Outcomes

Outcome 1

The ASEAN region has enhanced coordination, legal and regulatory frameworks and resources for PPR early warning and rapid response

Outcome 2

The ASEAN region has enhanced The animal health workforce in capacity for early detection and rapid response to PPR incursions and other priority small ruminant diseases.

Outcome 3

the ASEAN region has enhanced capabilities for risk assessment, surveillance, PPR detection and emergency response

Joint FMD-PPR Regional Roadmap West Eurasia/Central Asia

^{*} The achievement of the goal will be indicated by meeting the three criteria.







CENTRAL ASIA - COUNTRY SUBMISSIONS







OVERVIEW OF THE PPR REGIONAL SITUATION – ECO REGION

Regional PPR Status

The ECO/West Eurasia region has mixed PPR status with some countries PPR-free and others managing ongoing endemic outbreaks.

Eradication Strategy and Tools

The goal is to eradicate PPR by 2030 using the Global Control and Eradication Strategy supported by the PPR Monitoring and Assessment Tool.

Presentation reflects on:

- An overview of the PPR situation & country achievements,
- Challenges
- Strategic priorities toward eradication



OVERVIEW OF COUNTRY PPR STATUS

Azerbaijan is the only country in region with WOAH free status recognition/officially recognized as PPR-free

Countries that have not reported PPR:

Armenia, Kazakhstan, Kyrgyzstan, Turkmenistan, and Uzbekistan

Kazakhstan:

- PPR has never been reported.
- Conducts preventive vaccination and riskbased surveillance, especially in buffer zones and high-density areas of small ruminants.
- There is also active monitoring of wild susceptible species like saiga antelope.



Armenia:

- No cases detected or reported.
- The epidemiological situation is currently stable
- No vaccination against PPR is conducted
- Surveillance in place, including inspection and document control at border checkpoint
- Sero-monitoring is planned but not yet implemented due to **lack of funding**

OVERVIEW OF COUNTRY PPR STATUS CONT....

Kyrgyzstan

- No cases have been registered. Historically free from PPR.
- Maintains active and passive surveillance, including clinical monitoring and serological testing.
- **Vaccination** is conducted **annually**, targeting young animals. In 2024, over 2.4 million animals were vaccinated across all regions.
- Post-vaccination monitoring shows an average immunity level of 86%.
- Vaccines are procured regularly and distributed with cold chain management

Uzbekistan

- Has **never** registered PPR outbreaks = historically PPR-free, Conduct preventive vaccination
- Recognizes PPR as a high-risk disease (legislation) and includes it in its national control plans.

 Joint FMD-PPR Regional Roadmap West Eurasia/Central Asia



Turkmenistan

- No cases reported for PPR, no historical outbreaks.
- Conducts annual vaccination campaigns in 'buffer zones' and 'high-risk' regions
- Part of the proactive control strategy

OVERVIEW OF COUNTRY PPR STATUS CONT....

- Iran, Iraq, and Syria are still managing endemic situations with mass vaccination and episystem mapping.
- Türkiye and Georgia have controlled outbreaks and are progressing toward eradication stages

- Challenges:
 - ✓ Limited funding
 - ✓ Inadequate coordination
 - ✓ Incomplete coverage

Tajikistan

- Epidemiological stability PPR outbreaks were reported historically, with the first in 2004 and last clinical cases registered until 2013.
- No recent outbreaks, but passive surveillance continues
- Passive surveillance conducted with electronic tracking of animal movements
- ELISA and PCR available
- Vaccination conducted on annual basis
 - ✓ In 2023 500,000 doses procured by government, and 200,000 doses imported by private entities
 - ✓ In 2024, about 35.2% of target population vaccinated 242,573 animals
 - ✓ Vaccination focuses on young animals (from 3 months), with revaccination after 6 months.
- National PPR strategy developed for 2025–2028.

OVERVIEW OF COUNTRY PPR STATUS CONT....

Georgia:

- First outbreak: 2016 (Tbilisi region)
- Second outbreak: 2024 (Kvemo Kartli region)
- Molecular analysis links virus to Lineage IV strains from China, Mongolia, Pakistan, Iran, and Kurdistan
- Have a good understanding of the animal movement patterns, risk maps (FAST disease), live animal –
 export and imports
- Mass vaccination resumed in 2024 (870,000 animals) and 2025 (900,000 animals).
- No wildlife surveillance system
- Plans to enhance active surveillance post-vaccination
- Use EIDSS for disease reporting.
- No legal basis for farmer compensation
- Coordination is led by National Food Agency (NFA) with multi-level stakeholder involvement
- Challenges:
 - ✓ Gaps in vaccine quality control and contingency planning
 - ✓ Weak enforcement of movement control; Incomplete animal ID and traceability system
 - ✓ Limited NGO/private vet participation
 - Low farmer awareness and weak communication

OVERVIEW OF COUNTRY PPR STATUS CONT...

Iran

- PPR first reported in 1995, endemic with outbreaks between 2005–2011, recent control efforts significantly reduced cases
- Mass vaccination campaigns are conducted annually; Estimated 2024 vaccination coverage: ~71 million small ruminants
- Future vaccine need estimated at ~150 million doses.
- Diagnostics: ELISA and PCR available; genome sequencing ongoing
- Surveillance: Active and passive, but gaps remain
- Legal framework: PPR is notifiable; vaccination is compulsory.
- Challenges:
 - ✓ No endorsed NSP yet
 - ✓ Limited molecular capacity
 - ✓ Inadequate cross-border enforcement.

Iraq

- PPR first outbreak in 1997, endemic, especially in northern and northeastern governorates (Nineveh, Erbil, Dahuk, Sulaymaniyah).
- Vaccination campaigns conducted annually; 2023 coverage: ~85% (mass vaccination).
- Diagnostics: PCR and serology available
- Surveillance: Active and passive; improvements underway.
- Legal framework: Weak enforcement and laws need updating
- Coordination: National PPR Task Force and crossborder collaboration with Syria, Turkey, and Iran
- Challenges:
 - ✓ Incomplete coverage
 - ✓ Resource constraints
 - Security issues
 - Inadequate stakeholder engagement.

Syria

- PPR outbreaks reported near Turkish border in 2016.
 - First sero-surveillance in 2019.
- Vaccination started 2020 and continues annually, provided figures for 2024 vaccination
- 2024 vaccination figures provided:
 Aleppo: 222,465, Hama: 190,078,
 Homse: 179,686, Draa: 80,000, Alswidaa: 34,425, Tartous: 25,100 (% coverage?)
- Diagnostics: Plans for central lab reactivation
- Surveillance: Passive; needs reactivation and expansion
- Legal framework: Gaps with enforcement; vaccination is voluntary
- Challenges:
 - ✓ Financial constraints
 - ✓ Inadequate lab capacity
 - ✓ Lack of coordination with neighbors

Türkiye

- PPR Reports First inclusion as notifiable disease: 1997.
- Subsequent outbreaks 2020: 53 outbreaks, 2021: 44 outbreaks, 2022: no outbreaks, 2023: 3 outbreaks, 2024: 19 outbreaks, 2025: 3 outbreaks
- Last outbreak in Thrace: 2013.
- Vaccination ceased in Thrace in 2021 to pursue PPR-free status.
- Available diagnostic capacity: National and regional labs perform ELISA and RT-PCR. Sanger sequencing and full genome sequencing available.
 All labs operate under ISO 17025 standards. Participation in WOAH proficiency testing.
- Surveillance: Passive surveillance nationwide
- Active surveillance in Thrace since 2016. Sero-surveys in Thrace (2022–2024): No seropositivity found.
- Wildlife surveillance
- Movement control enforced via 5 operational road control stations.
- Mass vaccination in Anatolia: 2022: ~18.8 million SR, 2023: ~15.6 million SR, 2024: ~21.8 million SR; Risk-based vaccination implemented since 2022 (% coverage?)
- Post-vaccination monitoring conducted annually
- Legal basis for: Compulsory vaccination, Movement control, Animal identification and traceability, Emergency response and funding
- Joint surveillance with Greece and Bulgaria in Thrace

Challenges Identified

Surveillance and Diagnostic

Inadequate surveillance, weak detection of subclinical/asymptomatic cases

Inadequate post-vaccination monitoring

Wildlife surveillance

Limited molecular capacity & absence of quality assurance systems affect accurate diagnosis in some countries

Low lab capacity and facilitation for sample submission

Legislation

Vaccination no compulsory

Insufficient enforcement

Vaccination Logistics

Cold chain issues and incomplete remote vaccination coverage disrupt effective immunization efforts.

Post vaccination monitoring – less reported

Legal and Stakeholder Constraints

Limited stakeholder engagement impede disease eradication strategies

Regional Collaboration

Cross-border cooperation

STRATEGIC REGIONAL PRIORITIES

Strengthening Surveillance

- Effective surveillance to detect subclinical PPR cases early
- Scale digital tracking
- Integrate wildlife monitoring

Enhancing Diagnostics

- Expand molecular diagnostic capacity
- Promote regional lab networks with proficiency testing participation.

Optimizing Vaccination

- Utilize episystem mapping, hotspots
- Improve vaccination planning & cold chain logistics
- Ensure vaccine traceability
- Monitor effectiveness of vaccination campaigns
- Rationalize use of vaccines

Legal Framework Reforms

 Support compulsory vaccination, movement control, and fair compensation through updated legal policies.

Boosting Stakeholder Engagement

- Tailored communication and multi-channel outreach to address anti-vaccine sentiment effectively
- More participation of value chain actors, resource sharing

Harmonizing Cross-Border Efforts

 Regional cooperation harmonizes surveillance, vaccination, and outbreak responses across borders effectively



RAG Composition – Voting members

Chairperson CVO/Delegate of Uzbekistan Dr Abrar Akbarov

Member CVO Georgia Dr Lasha Avaliani

Member CVO Kyrgyzstan Dr Adllet Sotovaldiyev

Regional Organisation ECO Secretariat Dr Can Aygul

Regional Advisory Group Meeting on FMD and PPR for West Eurasia/ECO held in Baku, Azerbaijan, 2-4 July 2024





