The PPR Global Control and Eradication Strategy & Related Activities

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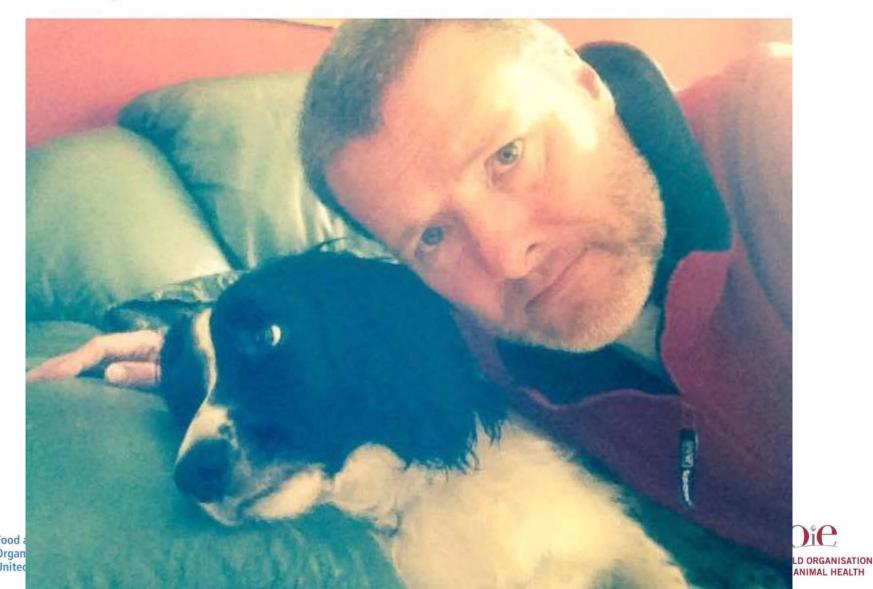
On behalf of the PPR Working Group

Brussels, 30 September, 2015



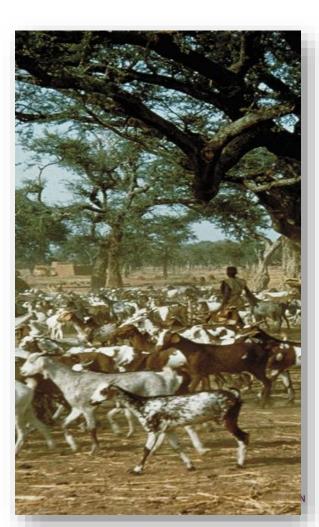


Well our worst fears have been confirmed this morning, my wife Jan is allergic to our Springer Spaniel . I know this isn't a rehoming site, but could somebody please find it in their heart to help me out? Her names Janet and she's 43!!



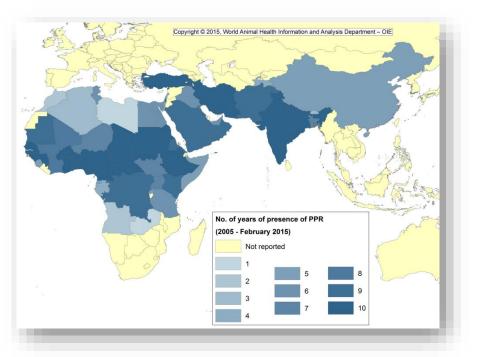
Why PPR is an excellent candidate for eradication after RP?

- Only one serotype
- No carrier state
- No reservoir outside domestic small ruminants
- Vaccine induces a long and stable immunity
- Thermo-stable vaccines are in development
- Diagnostic tests are available
- Most of other tools are available





Importance of PPR



Map of outbreaks during the period 2005 - 2015

Was acknowledged at:

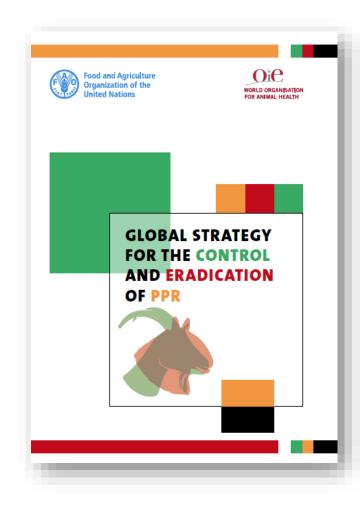
- 5^{ème} Global Steering Committee of GF TADs (Paris, Oct 2012)
- OIE 82^{ème} General Assembly (Paris, May 2014), Resolution No.24
- FAO 24^{ème} COAG and FAO 150^{ème} Conseil (Rome, 2014)

And is supported and governed by GF – TADs global.



Justification for the development of the Strategy

- To improve animal production in view of food security, poverty reduction and enhanced and sustainable development
- To reduce the economic impact of PPR
- To improve general animal health
- The veterinary services are at the heart of disease control programmes and will be strengthened







A SWOT Analysis was conducted

STRENGTHS	WEAKNESSES	OPPORTUNITIES	THREATS
omponent 1 – PPR control a	nd eradication		
Very effective and safe live attenuated vaccines	 Increasing mobility of live small ruminants for trade 	 Growing political support for control and eradication of PPR 	 Political instability and security problems. An Infected country under crisis
Effective diagnostic tests,	- Lack of reliable information	- Use of rinderpest eradication	constitutes a permanent
STRENGTHS	WEAKNESSES	OPPORTUNITIES	THREATS
Component 2 – Strengthenin	g Veterinary Services (VS)		
Experience gained from recent crises, e.g. highly pathogenic avian influenza (HPAI) H5N1	- Prevalence and Incidence of animal diseases	 VS are a global public good, eligible for public investment and international aid 	 Impact of governance on the delivery of VS in the development context
or FMD In Europe	- Weak VS In some countries	- Growing global demand for	Long land borders (risk of TAD
Recognition of the role of VS	 Other priorities than animal health and veterinary public 	animal protein	Incursion), particularly with
OIE standards on the quality	health in some countries'	- Important livestock	countries at risk
STRENGTHS	WEAKNESSES	OPPORTUNITIES	THREATS
	d control of other major diseas		
	 Some already mentioned 	- Some already mentioned	- Some already mentioned
Some already mentioned for PPR and VS e.g. experience	 some already mentioned for PPR and VS, e.g. VS to be 	 Some already mentioned for PPR and VS, e.g. growing 	 some already mentioned for PPR and VS, e.g. good
gained from previous crises,	Improved, lack of appropriate	global demand for animal	governance of VS,
recognition of the role of	delivery systems and PPP,	protein, livestock development	lack of border controls
VS, PVS Pathway available, GF-TADs mechanism in place	other priorities than animal health and veterinary public	potential, possible access to higher value markets, donor	(particularly with countries at risk), vulnerability of
at global and regional levels	health (VPH), weak roles of	Interest in animal production	pastoral herders
Political willingness to control	some stakeholders (producers	and Improved control of	- Some small ruminant diseases
diseases	and consumers, private	animal diseases, PPP for	 some small runnhant useases are not considered priorities
Vaccines available for certain	veterinarians, etc.)	Improvement of the efficacy of animal health systems, etc.	for control
	 lack of sufficiently effective 		- It may sometimes be
diseases	vaccines for some diseases		considered that the other
diseases Improved access to ICT	vaccines for some diseases - No multivalent vaccines		diseases to be included could
diseases Improved access to ICT	vaccines for some diseases - No multivalent vaccines available to allow combined		
diseases Improved access to ICT	vaccines for some diseases - No multivalent vaccines		diseases to be included could
Vaccines available for certain diseases Improved access to ICT OIE standards for many	vaccines for some diseases - No multivalent vaccines available to allow combined - Insufficient understanding		diseases to be included could

- **Strength** Tools are available
- Weekness- VS resources (financial, human, physical)
- Engagement of farmers
- Opportunity Interest of international community
- Threats lack of sanitary information



A consultative process was applied

- Meeting with experts and international partner organisations, Rome, October 2014
- Peer review by selected experts of the draft strategy
- Contribution by the OIE Scientific Commission
- Finalised by the PPR working group





Abidjan International Conference, 31.3. – 2.4.2015

- Presentation of the strategy to 300 participants, politicians and donors
- Adoption of the strategy
- Avialable online at: http://www.fao.org/3/a-i4460e.pdf





Objectives of the Strategy

• Eradication of PPR by 2030:

- In infected countries: reduce the incidence and spread in a progressive approach towards eradication of PPR
- In free countries: assure that free status remains
- In parallel:
 - Reinforce the capacity of VS
 - Improving health of small ruminants by reducing the impact of other SR diseases





The principles of the Strategy

National, Regional & Global level

- Combination of vertical (diseases) as well as horizontal (VS) approaches
 - Composant 1 PPR
 - Composant 2 Veterinary Services
 - Composant 3 Combination with other SR diseases

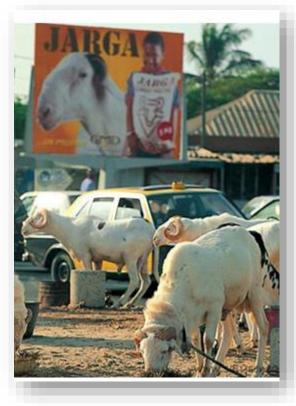


Photo credit: CIRAD





The principles of the Strategy

- Risk-based approach
- PPR control shall have a positive impact on infected as well as free countries
- The reduction of PPR incidence is therefore a common interest for infected as well as free countries
- The eradication of PPR is considered a public good!



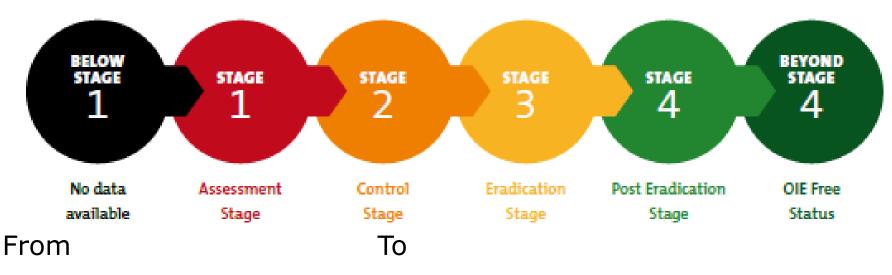
Anticipated timeline to achieve eradication

	2015	2020	2025	2030
"Stade 0"	25 %	0%	0%	0%
Stade1	30 %	0%	0%	0%
Stade 2	30 %	50%	20%	0%
Stade 3	10 %	25 %	30%	0%
Stade 4	5 %	25 %	50 %	100%

Reduction in % of infected countries over time



Step-wise approach towards eradication



<u>Stage 1</u> – assessment of the epidemiological situation

<u>Stage 4</u> – absence of circulating virus - countries are ready to submit their dossier for official recognition of country freedom to OIE



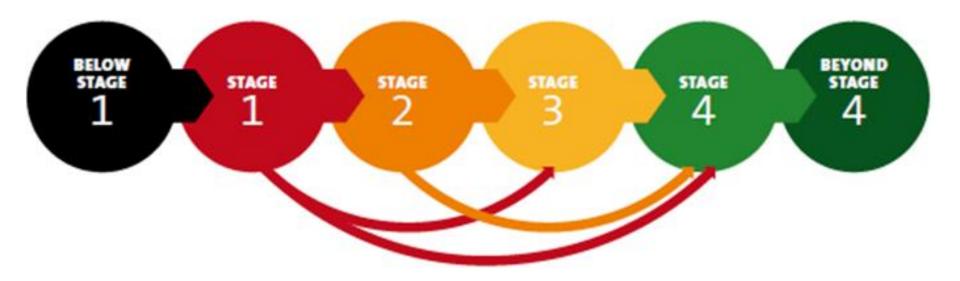


The different stages

	STAGE 1	STAGE 2	STAGE 3	STAGE 4
	Assessment Stage	Control Stage	Eradiction Stage	Post- eradiction
				Stage
FOCUS	Improved knowledge about PPR situation	Disease control in part of or the entire country	Achieve the eradication of the disease in the entire country	Demonstrate that there is no more virus circulation



Fast track in the stepwise approach









Characteristic elements per Stage

Five technical elements characterise each Stage

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Legal framework

Surveillance

Diagnostic

Prevention and Control

Stakeholders





Progressivity of each technical element along the stages

E	Stage 1 (Assessment)	Stage 2 (Control)	Stage 3 (Eradication)	Stage 4 (Post- eradication)
ti c	To establish laboratory diagnostic capacity mainly based	To strengthen the laboratory capacity through the	laboratory capacity to	To maintain laboratory capacity as in the previous Stage
Diagnostic	on ELISA methods	introduction of bio-	through the introduction of a laboratory quality assurance system	and strengthen the differential diagnostic pathways. To start implementing PPRV sequestration activities

	Stage 1 (Assessment)	Stage 2 (Control)	Stage 3 (Eradication)	Stage 4 (Post-eradication)
Surveillance	To implement monitoring activities and evaluate socio-economic impacts		surveillance incorporating	To shift the goal of surveillance to proving the absence of PPR
A Food and	Agriculture ion of the tions	17		WORLD ORGANISATION

Progressivity of each specific objective along the succession of the stages

%	Stage 1 (Assessment)	Stage 2 (Control)	Stage 3 (Eradication)	Stage 4 (Post- eradication)								
Prevention & Control	No vaccination	Targeted vaccination	Either mass vaccination or vaccination of the remaining non vaccinated zone (depend on the result of Stage 2 and monitoring system in place)	No vaccination (or emergency vaccination with back in Stage 3)								
	Focus on vaccination											



Generic tools to be used

Generic tools:

- Diagnostics laboratories
- Epidemiology Centers/teams,
- GLEWS, and their Regional and International Networks,
- OIE standards,
- OIE PVS Pathway (voluntary),









Specific PPR tools:

- PPR Monitoring & Assessment Tool (PMAT)
- Post Vaccination Evaluation (PVE)
- Regional vaccine banks
- PPR-GREN







Research and knowledge development

- Socio economics
- Epidemiology

- Vaccine delivery systems
- Vaccines and vaccination
- Diagnostic tests





Anticipated timeline to eradication for Africa

Table 1

Timeline of expected results: Global

Global	2015					2020					2025					2030				
Stage	0•	1	2	3	4/5	0*	1	2	3	4/5	0*	1	2	3	4/5	0*	1	2	3	4/5**
No of countries	3	36	32	12	13	0	4	40	25	27	0	0	8	39	49	0	0	0	0	96
%	3	37	33	12	15	0	4	42	26	28	0	0	8	41	51	0	0	0	0	100

Table 2

Timeline of expected results: Africa

Region	2015						2020				2025					2030				
Stage	0*	1	2	3	4/5	0*	1	2	3	4/5	0*	1	2	3	4/5	0"	1	2	3	4/5**
No of countries	3	19	19	3	11	0	4	25	12	14	0	0	8	24	23	0	0	0	0	55
%	5	35	35	5	20	0	7	46	22	25	0	0	15	44	43	0	0	0	0	100

Stage 1	minimum 12 months and up to 3 years
Stage 2	3 years (from 2 to 5 years)
Stage 3	3 years (from 2 to 5 years)
Stage 4	24 months and up to 3 years

WORLD ORGANISATION

FOR ANIMAL HEALTH



Governance

GF-TADs principles and governing bodies

- PPR Working Group
- Role of Regional Organizations, e.g.:
 - AU-IBAR in Africa
 - SADC, ECOWAS, ASEAN, SAARC...

A Global Control and Eradication Programme (GCEP)

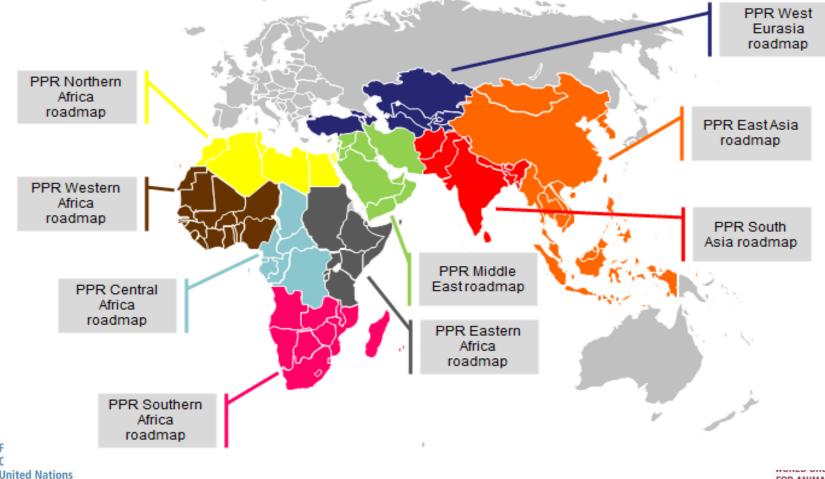
to be implemented by the Joint FAO-OIE Secretariat and a Global Steering Committee





The regional roadmaps





The 1st Roadmap Meeting for Central Africa Yaoundé, Cameroon August 2015

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030
Cameroun	1			2			3			4		Status free				
Rep Centre Africaine	1			2				3			4		Status free			
RD Congo	1															
Rep Congo	1			2					3					4		Status free
Gabon	1			2					3				4		Status free	
Guinée Equatoriale	0		1			2				3					4	Status free
Sao Tome	0	1		2			3		4		Status free					
Tchad	1				2			3			4		Status free			



The 1st Roadmap Meeting for Eastern Africa (IGAD countries), Kampala, Uganda September 2015.





Countries	GCES	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030
Burundi	1	1				2				3				4		Free	
Djibouti	1	1	2			3					4	Free					
DR Congo					2			3			4			Free			
Eritrea	1	1 (2)					2			3			4		Free		
Ethiopia	2	2				3			4			Free					
Kenya	2	2		3			4					Free					
Rwanda																	
South Sudan	1	1					2					3			4		Free
Sudan	2	2					3								4		Free
Somalia	2	2					3					4		Free			
Tanzania	2	2					3			4		Free					
Uganda	2	2			3				4			Free					



Future Roadmap Meetings

- ECOWAS- West Africa
 November 2015
- Middle East and Gulf countries
 - December 2015
- Central Asia- Early 2016



Expert meeting on the GCES costing Rome 7-9 October









The Global Strategy

http://www.fao.org/3/a-i4460e.pdf











Thank you for your attention





Photo credit: Iran Vet Organisation



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