Regional Animal Health Centres

A regional hub to safeguard food security and public health
H5N1 highly pathogenic avian influenza first emerged in 1997 and re-emerged with pandemic force in 2003, quickly spreading to more than 60 countries worldwide by 2006. In early 2006, the first outbreaks in Africa occurred in Nigeria and Egypt, and eventually 11 countries on the continent had outbreaks of H5N1 HPAI in poultry. Humans were infected in three countries: Djibouti, Egypt and Nigeria.

To date, more than 300 people have died from avian influenza, which can pass between infected poultry and humans. A major fear is that a lethal strain could emerge and begin to pass quickly from person to person, leading to a global pandemic. In the meantime, however, the infection has taken a great toll in poultry production, affecting the livelihoods of millions of smallholder farmers as well as commercial farms.

The H5N1 global pandemic was brought swiftly under control, thanks to concerted international efforts and FAO-led programmes in more than 170 countries that amounted to US$ 350 million to raise defenses against the disease.

Nevertheless, the global economy had been dealt more than US$ 20 billion in economic damage, with some 260 million birds dead from the disease or killed by culling to rein in H5N1 HPAI. The most vulnerable people – poor farmers dependent on poultry for food and their income – sometimes lost everything they had.
A major weakness exposed

When H5N1 HPAI began to spread in Africa, glaring weaknesses were exposed in the various national authorities’ capacities to successfully mount a campaign to prevent or halt the spread of disease and eliminate the H5N1 virus from poultry populations. The scenarios of economic devastation and added threats to food security in Africa became just as alarming as the risk to global human health.

The FAO, the World Organisation for Animal Health (OIE) and the African Union’s Interafrican Bureau for Animal Resources (AU-IBAR) accelerated plans to launch regional coordination hubs to defend against avian influenza and strengthen veterinary systems to address a whole host of animal diseases that continue to decimate flocks and herds across the continent, such as foot-and-mouth disease, Rift Valley fever, peste des petits ruminants and African swine fever.

Just two months after the outbreak in Nigeria, FAO, OIE and AU-IBAR officially established the first Regional Animal Health Centre in Bamako, Mali, in April 2006. The FAO urgently released funds to do so via its emergency Technical Cooperation Programme, so the Africa region could swiftly bring avian influenza under control. Today, only Egypt is affected by H5N1 HPAI, but the imminent disease threat continues to simmer with the risk of spillover to other countries. And human cases continue to occur with fatalities.

Meanwhile, the number of new and emerging diseases among animals is on an exponential upsurge. So the experience with H5N1 HPAI should be taken as a warning sign as to just how serious a threat exists on multiple fronts.
The UN’s Food and Agriculture Organization brings to the table a network of international experts in the field, at country level, regionally and globally who can guide policymakers and implement on-the-ground programmes to strengthen animal production and health systems and their linkages across sectors, such as with human health, outreach communications, socio-economics, wildlife, and conservation and natural resources management. FAO keeps a focus on the grassroots farmers in remote villages as it develops sound policies with national decision makers.

FAO puts countries in need in contact with those countries that can help.

Together with the OIE and AU-IBAR, FAO establishes linkages with regional economic institutions, and leverages these links to engage on the need for investment in strengthening veterinary services and the whole spectrum of disciplines that interplay to determine animal health, human health, food security and economic security, for women selling goat milk to support their families to global international trade in meat or animal products.

In Bamako, the RAHC partners with the Economic Community Of West African States (ECOWAS), the regional umbrella organization that coordinates and integrates its members’ economic policies; In Gaborone with the Southern African Development Community (SADC); and in eastern Africa with the Eastern African Community and the Intergovernmental Authority on Development (IGAD).

FAO leverages its international expertise shared among the RAHCs and its regional and decentralized offices to reinforce its global disease control programmes.
Western and Central Africa: Bamako, Mali. April 2006. Regional Economic Community: Economic Community Of West African States (ECOWAS) and the Economic Community of Central African States (ECCAS).


FAO’s contributions to the RAHC include:

- Consolidating and honing networks of laboratories and expert epidemiologists
- Building trust across nations and sharing information with the outside world;
- Strengthening veterinary capacities for disease surveillance, reporting, and control;
- Fully integrating wildlife expertise to understand drivers of wildlife disease and disease transmission to domestic animals or humans;
- Providing expert socio-economic analysis to understand cultural and economic factors that contribute to disease emergence and spread;
- Ensuring the socio-economic impacts and feasibility are accounted for via compensation when disease control measures mean added costs or economic loss;
- Scaling up communications at all levels to raise awareness among farmers about biosecurity, hygiene, good production practices and disease;
- Supporting the development of national and regional policies and strategies to control transboundary animal diseases and priority zoonoses that can infect humans;
- Aiding national authorities in developing national and regional emergency plans in case of a major disease emergency;
- Mainstreaming gender into policies to guarantee the voices of women – the vast majority of the world’s poor farmers – are heard.

The Regional Health Centres in sub-Saharan Africa are three, but they’d have greater strength as four. The FAO and the OIE aim to open a fourth RAHC in Central Africa, where disease information gathering and sharing is extremely weak. In Central Africa there are many unknowns about the diseases circulating in animals and wildlife and newly emerging diseases, all of which pose risks to food security, livelihoods and animal and human health.
Putting Pen to Paper in a Digital World

An FAO-led project in Southern Africa bridges the digital divide

Until recently, veterinary authorities in countries of the Southern Africa Development Community (SADC) were constantly faced with having to make major decisions based on sketchy and slow disease information from the field. But one day, an FAO livestock officer and an IT colleague came together to apply wireless technology to the old-school pen and paper. The delay in receiving information from the field was cut from weeks and even months to a matter of seconds, as the digital pens scan written information and transmit disease report forms via Bluetooth wireless technology to a cell phone and onward on a voyage to the central servers. “The pens revolutionized making timely decisions, especially when a quarantine needs to be imposed. Delays can mean massive losses among livestock and severe implications for those who depend on livestock for their food and livelihoods,” explained Mokganedi Mokopasetso, FAO livestock officer.

In the SADC region, 60 percent of people depend on livestock. According to SADC estimates, consumption of meat and meat products will double within 15 years.

Beneficiary countries: Angola, Malawi, Mozambique, Namibia, Tanzania, Zambia and Zimbabwe.
For more information:

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