

RAPID RESPONSE MISSIONS

October 2006 to October 2008

The Crisis Management Centre – Animal Health (CMC-AH) is a facility of the Food and Agriculture Organization of the United Nations (FAO) and World Organisation for Animal Health (OIE) for animal disease emergency response. Combining FAO's expertise with that of OIE, the World Health Organization (WHO) and other partners, the CMC-AH provides technical and operational assistance to help affected governments assess epidemiological situations on the ground, diagnose transboundary animal disease (TAD) outbreaks and set-up immediate measures to help prevent or stop disease spread.

From October 2006 to October 2008, the Centre deployed 28 rapid response missions. These missions assisted 20 member countries – newly infected or highly at risk of infection – in their efforts to rapidly respond to outbreaks or new epidemiological situations of various TADs, including: African swine fever (ASF), foot-and-mouth disease (FMD), highly pathogenic avian influenza (HPAI), peste des petits ruminants (PPR), porcine reproductive and respiratory syndrome (PRRS) and Rift Valley fever (RVF).

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Afghanistan

HPAI

14–26 March 2007



Investigators survey Afghan merchants in a backyard live bird market. Strengthening surveillance in these areas can help authorities better understand epidemiological situations.

In addition to dealing with complex food, conflict and other emergencies, Afghanistan's first confirmed outbreaks of HPAI further challenged the country in February 2006. In response, a CMC-AH mission supported government assessment and response efforts by facilitating an epidemiology training workshop for veterinary field staff in Kabul. In addition, the CMC-AH team evaluated the occurrence of HPAI and the risks of disease spread to other areas within and across country borders.

CMC-AH mission recommendations provided authorities with clear priorities for enhanced HPAI prevention and control, supporting government efforts to:

- enhance the surveillance activities of the veterinary services for better and quicker HPAI detection;
- strengthen the structure of provincial veterinary laboratories for improved sample analysis;
- increase the level of HPAI awareness among poultry producers for better disease reporting;
- train and equip provincial control teams for more effective control activities; and
- improve the effectiveness of government vaccination activities for enhanced HPAI prevention.

Armenia

ASF

10–21 September 2007



An unconfined pig roams freely between a farm and a nearby forest. Lack of barriers in many districts of Armenia can leave pigs open to infection from wild boars and/or feral pigs.

Outbreaks of ASF, a highly contagious viral disease affecting pigs, posed a serious threat to pig production in Armenia and the region in August 2007. In response to the danger placed on this important food and income source for the region's rural population, the CMC-AH deployed a joint assessment and response mission. The joint mission, composed of experts from FAO, the Commission of the European Communities and OIE, facilitated government efforts to control ASF outbreaks and prevent further disease spread.

After evaluating the immediate epidemiological situation and facilitating the transport of samples to a World Reference Laboratory, the mission carried out a detailed assessment of the government's veterinary structure and TAD response capacity. The team provided the government with technical recommendations for the effective control of the ASF epidemic in the immediate- and medium-term.

To promote public awareness and help prevent disease spread through better recognition and reporting, the CMC-AH provided the Ministry of Agriculture with printed information materials on ASF for distribution. In addition, the CMC-AH recommended the Ministry strengthen its communication strategy through more targeted messages and a wider range of media (e.g. television). Suggestions for continued coordination and resource mobilization with the international community were also presented.

Promoting the transition to longer-term assistance, mission outputs were integrated into an eighteen-month FAO project to prevent, control and eradicate ASF in Armenia and enhance TAD surveillance in the region.

Bangladesh

HPAI

13–26 April 2007



A Bangladeshi egg collector secures crates to his bicycle. Traditional egg collection systems like this represent a serious risk factor for the spread of HPAI due to low biosecurity.

Considered a high risk country for HPAI introduction since the 2006 outbreaks in India and Myanmar, Bangladesh reported its first HPAI outbreak in late March 2007. In response, the CMC-AH deployed a team to work with veterinary services, poultry producers as well as veterinary professionals and local leaders to help facilitate outbreak response efforts.

Specifically, the CMC-AH mission:

- conducted epidemiological investigations on risk factors and linkages between outbreaks;
- assessed government capacity to control the outbreaks and disease spread within the country;
- developed recommendations for the improvement of the government's emergency action plan for HPAI response, including a suggested emergency vaccination strategy; and
- advised on resource requirements for the short- and medium-term control of HPAI in Bangladesh.

CMC-AH activities culminated in the provision of technical and operational recommendations supporting ongoing control efforts. Key aspects included suggestions for:

- improved rapid response in-country via a strengthened veterinary services structure;
- improved laboratory capacity;
- augmented communication efforts for better public and media awareness to support disease control;
- improved disease management through targeted culling, compensation and vaccination activities; and
- immediate mobilization of central government funds to enable immediate response activities in the field.

Benin

HPAI

4–19 November 2007

9–18 December 2007



Traditional poultry transportation methods, as in this example from Cotonou, can lead to virus spread when used to move birds both to and from rural areas and final markets.

Facing an increasing risk of HPAI infection due to outbreaks of the virus in Nigeria since February 2006 and in neighbouring Ghana and Togo in May and June 2007, Benin requested FAO technical assistance to assess government prevention and control capacities and help prepare for possible HPAI outbreaks.

Combining the emergency response capacity of the CMC-AH with the regional strategies and interventions of the Regional Animal Health Centre (RAHC) in Bamako, FAO provided the government with essential outbreak preparedness support. The joint CMC-AH/RAHC mission supplied technical assistance in surveillance, prevention, response and control to better prepare the government and veterinary authorities for likely outbreaks of HPAI. In addition, the CMC-AH provided the government with contingency funding to support initial response efforts in the event of an outbreak.

CMC-AH preparedness support proved timely, as Benin confirmed its first HPAI outbreak on 14 December 2007. While utilizing the previously arranged CMC-AH funding to begin immediate control activities, the government requested additional FAO assistance to help respond to the outbreak. The CMC-AH deployed an emergency response mission within 48 hours to support ongoing government control efforts.

Democratic People's Republic of Korea

FMD

16–28 March 2007



Laboratory diagnosis is needed to distinguish FMD from other vesicular diseases.

The first reported instance of the disease in 40 years, the Democratic People's Republic of Korea reported an FMD outbreak in March 2007. The CMC-AH deployed a mission to help the government evaluate the disease situation and the national laboratory response capacity. To support government control efforts, the CMC-AH recommended enhanced training on surveillance and laboratory practices as well as technical assistance on animal import procedures and emergency response planning provided.

Mission findings suggested the outbreak was limited to a single case and appeared to be under control. In order to avoid future FMD outbreaks, the CMC-AH provided inputs for an FAO project proposal to assist the country in:

- importing high quality vaccines;
- developing a contingency plan;
- improving laboratory infrastructure and training; and
- strengthening import controls by enhancing animal identification and quarantine procedures.

In addition, the CMC-AH mission assessment recommended the government strengthen passive and active surveillance along transport routes and enhance diagnostic capacities to better prevent and prepare for future TAD outbreaks.

Georgia

ASF

11–14 June 2007



Veterinary authorities take appropriate biosecurity precautions while disposing of carcasses at an infected site.

As in Armenia, ASF poses a significant challenge to the health of Georgia's swine population, estimated at 500 000 pigs kept mainly in backyards and on small farms. Following multiple outbreaks of ASF in June 2006, the CMC-AH joined with the Commission of the European Communities and OIE to deploy a rapid response mission to Georgia to assess the situation and recommend immediate control actions.

Following a rapid assessment of the disease situation, the mission made several recommendations to mitigate the ASF threat. Suggestions included the introduction of rapid and appropriate control measures such as increased pig confinement to help keep unaffected districts free from infection.

The mission advised that a national control campaign should, under the circumstances, avoid depopulating the entire swine herd. The joint mission also stressed that every effort should be made to protect virus-free areas from infection while progressively eliminating the virus in affected areas.

Ghana

HPAI

15 May — 7 June 2007



A sign in Ghana warns against entering an HPAI-infected area. FAO recommends establishing quarantine areas through the usage of appropriate communication tools to help limit involuntary disease spread by human movement.

Located in an area struggling with the reoccurrence of HPAI, Ghana experienced its first outbreaks in May 2007. Following the outbreaks in Tema, some 20 kilometres east of Accra, and in Sunyani, near the border of Côte d'Ivoire, the CMC-AH conducted a rapid response mission to Ghana.

Mission efforts helped to:

- assess the epidemiological situation;
- evaluate government capacity to respond to actual and future HPAI outbreaks;
- support efforts to design and implement appropriate HPAI control policies; and
- assess the emergency action plan already in place and make recommendations for its improvement.

In addition, the CMC-AH mission funded and facilitated an emergency cross-border meeting of the Chief Veterinary Officers of Benin, Côte d'Ivoire, Ghana and Togo, held during the course of the mission.

The meeting resulted in a joint statement from the CVOs calling for better collaboration, communication and information exchange among their countries to control outbreaks of avian influenza. The first of its kind in West Africa, the cross-border meeting facilitated the ongoing search for common solutions to the potential threat of the spread of HPAI across national borders in West Africa.

Kenya

RVF

6–15 January 2007



RVF, through its potential for rapid spread through both animals and humans, places severe constraints on livestock-dependent livelihoods and can pose a serious risk to public health.

As in rest of South and East Africa, RVF is endemic in Kenya, with increased activity of the virus usually occurring in association with extreme rainfalls related to El Niño climatic events. Kenya experienced a significant RVF flare-up in December 2006: the first in four years and not long after FAO had issued a regional RVF warning. CMC-AH experts were requested to provide support to a Nairobi-based FAO team working with the veterinary authorities from Kenya, Somalia and Ethiopia to address the outbreak in the northeastern part of the country. In addition to deploying a mission to the field, the CMC-AH supported government RVF control and prevention activities by helping protect Kenyan animal health workers through the provision of personal protection equipment kits.

Linking to longer-term efforts, CMC-AH mission results became the impetus for a subsequent FAO project to establish mechanisms for RVF control in Kenya. On the basis of investigations conducted by CMC-AH experts and the Nairobi-based team, FAO prepared and submitted to donors an emergency project proposal to strengthen its support to the efforts of the Government of the Republic of Kenya to prevent and control RVF.

Support for this initiative was announced by the United Nations Office for the Coordination of Humanitarian Affairs, which approved project funding for USD 1.2 million through the Central Emergency Response Fund (CERF) of the United Nations.

Lao People's Democratic Republic HPAI

4–13 October 2008



An FAO veterinary epidemiologist interviews farmers in an affected village.

After no reported HPAI activity since March 2008, an outbreak in ducklings was detected on 27 August.

Located in a small duck farm in the village of Nambak, Luang Prabang, the ducklings had been purchased from a neighbouring province in the northernmost part of the country. The government, in collaboration with in-country FAO expertise, commenced assessment and surveillance activities, and a surveillance zone with a five-kilometre radius was established around the suspected farm of origin. On 1 September a second outbreak with very low daily mortality was reported, raising concern of the virus circulating through the area's duck farming system.

Working jointly with FAO regional and local expertise and in support of government efforts to assess and respond to the situation, the CMC AH sent a veterinary epidemiologist from 4 to 13 October 2008 to:

- assess the rapidly evolving duck farming system in the north;
- evaluate the risk of HPAI spread by studying the main duck distribution markets; and
- provide the government with policy and technical recommendations to help manage current and future disease outbreaks.

Madagascar RVF

29 April – 15 May 2008

2–19 June 2008



A farmer attends to his cattle as they feed in the Lake Alaotra region of Madagascar. Due to their high susceptibility to RVF infection, humans must take the proper precautions (i.e. personal protection equipment) before handling suspect cases.

Two years since RVF was last reported, Madagascar signalled a new outbreak of the disease to OIE in early April 2008. Subsequently, the CMC-AH deployed an initial rapid response mission to Madagascar to help the government assess the situation and design a short-term, emergency action plan for immediate implementation. The CMC-AH then dispatched a second mission to help government authorities begin implementing this plan.

Through these two CMC-AH missions and follow-up activities, FAO worked with WHO and the United Nations Resident Coordinator in Madagascar to develop a coordinated response strategy proposal. These efforts helped secure USD 376 000 from CERF (USD 226 000 for FAO and 150 000 for WHO) and technical laboratory support from United State Department of Agriculture (USDA) to initiate the second phase of the coordinated response to RVF in Madagascar. This second phase focuses on investigation, early detection, laboratory capacity, reporting, biosecurity, disease control, human case management and public awareness.

Morocco PPR

12–21 August 2008



Veterinary service personnel inspect a goat at an outbreak farm for signs of PPR. Causing mortality rates as high as 80 percent in suspect populations, PPR needs to be identified quickly to prevent its spread.

The first instances of PPR in Morocco were detected in June 2008. The disease expanded rapidly across the country, and by 4 August the Moroccan Veterinary Services had declared 92 outbreaks.

PPR is a highly contagious and pathogenic viral disease that can lead to important economic losses. Historically, PPR was endemic in many sub-Saharan countries, but it has recently spread to Central and Eastern Africa, the Middle East and numerous countries in Asia. Its presence in Morocco could have serious repercussions, not only on the Moroccan economy, but also for other countries in the Maghreb and southern Europe should the disease spread further.

In response to the request for assistance from the Ministry of Agriculture, Rural Development and Fisheries of the Government of the Kingdom of Morocco, the CMC-AH sent a team of experts to help the government implement emergency measures in order to limit the spread of the disease.

Nepal HPAI

19 February – 3 March 2008

4 April – 10 June 2008



Traditional methods of moving and marketing poultry in Nepal can add to the risk of HPAI introduction and spread.

Poultry is an important resource for Nepal. The commercial sector accounts for approximately half of the country's estimated 23 million domesticated fowl. The remaining population lies within the hands of smallholder and backyard farmers. To help protect these resources, the CMC-AH fielded a rapid mission to help the government strengthen preparedness and response planning.

Mission findings indicated that medium- and longer-term support was needed, especially when noting the threat posed by poultry transport across the Nepalese-Indian border. The CMC-AH fielded a second mission of two months to help cover needs while longer-term efforts funded by the World Bank were being formulated. The resulting CMC-AH follow-up mission dealt systematically with key findings from the previous deployment in support of the government's needs to:

- review surveillance activities;
- revise preparedness and operational plans; and
- develop public awareness messages in collaboration with the United Nations Children's Fund (UNICEF) that promote adequate reporting of poultry deaths to help prevent disease spread.

Nigeria HPAI

3–12 February 2007



A customer in Lagos inspects a live bird before purchasing. Limited biosecurity and disease management in markets increases both the risk of disease spread among poultry and the potential for animal to human transmission.

Although having dealt with HPAI in birds since February 2006, Nigeria did not experience its first human case until February 2007. Following this first HPAI-attributed human death, the CMC-AH deployed a rapid response mission to Nigeria to support FAO technical staff already carrying out assessment and communication activities on the ground.

In coordination with the Ministry of Agriculture, the Ministry of Health and WHO, the CMC-AH helped investigate and establish the source of the human case of H5N1 infection and human risk exposure factors in markets. Upon mission conclusion, the CMC-AH team provided technical recommendations for the improved control of HPAI and the enhanced impact of public communication initiatives.

CMC-AH efforts proved the catalyst for subsequent public awareness campaigns by the government. Designed to help limit disease spread through active community participation and awareness, these public communication initiatives aimed at striking a balance between increasing awareness of the dangers of unsafe practices and minimizing the potential for consumer rejection of poultry and poultry products.

Republic of Korea HPAI

13–21 December 2006



Team members collect faeces from wild geese for HPAI testing at the laboratory.

The Republic of Korea experienced four HPAI outbreaks in domestic poultry from November to December 2006. As the country represents a key wintering habitat and refuelling station for significant populations of wild birds, wildlife represented a possible introduction point. Following the third HPAI outbreak, the CMC-AH deployed a mission to help determine the potential role of wild birds in the epidemiology of the outbreaks as well as the risk of further disease spread. Working in direct cooperation with the country CVO, the CMC-AH team collected and analysed epidemiological data from affected rural areas to help shed light on the wildlife factor. Well versed in many areas of HPAI response, the government's veterinary services were responsible for implementing all control and containment activities related to the outbreaks.

The CMC-AH team was joined in the field by government personnel, which included veterinary epidemiologists, wildlife veterinarians, biologists and poultry specialists concerned with the relationships between poultry production, marketing and wildlife sectors. As part of their mission recommendations, the CMC-AH team suggested the government increase wildlife surveillance for more comprehensive prevention and strengthen farm biosecurity to limit disease spread, particularly in relation to the movement of birds, equipment and supplies.

Through the deployment of a multidisciplinary team of experts, the CMC-AH carried out the in-depth epidemiological search to provide the government with a technical assessment of the situation and to help promote the improvement of disease investigation efforts.

Saudi Arabia HPAI

25 April – 17 May 2007
8–16 December 2007



Soft-shelled eggs, like these from an HPAI-infected layer farm in Saudi Arabia, can be indicators of HPAI infection.

The first official reported outbreaks of HPAI occurred in March 2007. In response, the CMC-AH deployed a rapid mission to assess the government response capacity and strengthen laboratory diagnosis efforts through training.

CMC-AH training focused on helping build government capacities in highly pathogenic and low pathogenic avian influenza diagnostics to enhance prevention and control initiatives. A CMC-AH expert trained laboratory personnel in central and provincial veterinary laboratories to better diagnose avian influenza and other viral avian diseases.

The mission also assessed the biosafety standards of the laboratory units responsible for viral poultry disease diagnosis and suggested appropriate, corrective measures. The CMC-AH expert provided the government with technical recommendations for expanded surveillance activities encompassing all avian species through a nationwide network and enhanced laboratory management and biosafety guidelines.

While the above-mentioned HPAI outbreaks occurred in backyard poultry and falconry sectors, Saudi Arabia reported its first commercial farm outbreak in November 2007. Additional outbreaks followed, and the CMC-AH quickly deployed its second rapid response mission in support of government efforts to assess the situation and control the new outbreaks.

In addition to identifying the need for a more centrally coordinated outbreak response, the CMC-AH mission recommended:

- intensifying biosecurity measures to limit disease spread;
- implementing targeted with appropriate compensation;
- considering vaccination in commercial and falconry sectors as an additional control tool; and
- setting up a central epidemiology unit for improved disease analysis and appropriate policy decision making.

Sudan HPAI

6–25 November 2006



Mixing species, as in this backyard poultry farm, may lead to expanding the host range of HPAI and increasing the risks for the recombination of influenza viruses.

While the Republic of the Sudan experienced its first incidences of HPAI in April 2006, Southern Sudan's first official outbreak of HPAI did not occur until September 2006. As an initial response to this outbreak near Juba, the Government of Southern Sudan had at first planned to carry out a mass depopulation strategy. However, this policy was delayed due to insufficient technical and operational capacities, a lack of resources and other challenges.

As poultry deaths continued, the government requested FAO technical support in drawing up a depopulation strategy. The CMC-AH rapidly deployed a mission to assess the situation and assist in the formulation of an adequate government response to the disease. Working closely with the government, the CMC-AH team helped design and implement a participatory disease search (PDS) exercise to identify appropriate culling measures and implementation methods. PDS results revealed that HPAI was not circulating in Juba, which helped the authorities decide not to embark on a programme of mass depopulation. CMC-AH efforts in PDS facilitation helped avoid a large-scale depopulation strategy, the implementation of which would have placed additional strain on the livelihoods of the vulnerable, poultry-rearing families in that area.

Sudan

RVF

10–19 November 2007



One of many bodies of standing water bordering a cattle pasture, these irrigation canals increase the potential for vector-borne disease spread by placing animals close to mosquito breeding areas.

In addition to HPAI assistance in the south, the CMC-AH provided technical support for the assessment of RVF outbreaks in the north in 2007. As in Kenya and in the United Republic of Tanzania, RVF has placed at risk the animal and human populations of the Sudan and the greater South and East Africa region for decades.

In October 2007, the Ministry of Health requested WHO assistance to investigate hemorrhagic fever outbreaks. Testing confirmed human cases of RVF; moreover, the presence of RVF in humans is typically preceded by infection in livestock. Through the Centre's close coordination activities with WHO and OIE as well as the Government of the Republic of Sudan, the CMC-AH was able to propose urgent FAO assistance to the Ministry of Animal Resources and Fisheries in the form of a CMC-AH rapid response mission. The government officially notified OIE of an RVF outbreak in livestock on 12 November.

Upon government acceptance of the CMC-AH mission, the Centre fielded a veterinary epidemiologist and RVF expert to assess the situation and recommend appropriate measures for RVF control in animals. Working in close collaboration with the government, OIE and WHO, the CMC-AH expert provided key suggestions toward the adaptation of the existing emergency action plan to best respond to the current RVF emergency through a comprehensive approach addressing both the animal and human health sectors.

Togo

HPAI

23 June — 29 June 2007

31 July — 8 August 2007

17 July — 21 July 2007

4–18 August 2007



Rapid antigen detection kits as shown here allow for quick testing in the field when outbreaks are suspected, especially when laboratory facilities are not available.

With HPAI circulating in the subregion, the West African nation of Togo experienced its first HPAI outbreaks in late June 2007. Since those first reported outbreaks, the CMC-AH has supported the Government of the Togolese Republic and its veterinary services through a series of rapid deployment missions.

The CMC-AH rapidly deployed two separate technical response missions following the HPAI outbreaks in June and July. Subsequently, a third mission to support government compensation activities was fielded, followed by a fourth mission to enhance outbreak communication capacities and medium-term awareness-raising activities.

The first CMC-AH mission, which also included one OIE team member, provided a variety of assistance, including the:

- development of a six-month emergency action plan for HPAI control, surveillance, prevention and compensation in Togo;
- mobilization of the donor community (i.e. the Commission of the European Communities, the German Technical Cooperation, the United States Agency for International Development and the World Bank) for increased support to TADs control, diagnostics and prevention activities in Togo and worldwide;
- coordination with WHO to initiate dialogue between animal health and human health counterparts; and
- deployment of an international HPAI expert for two months to help facilitate the transition from emergency to medium-term support.

In addition, CMC-AH efforts in Togo provided the impetus for a second cross-border meeting to follow up on recommendations from the first Regional Meeting of CVOs held in Ghana in June 2007. This second meeting, held in Togo in November 2007, provided the opportunity for the top veterinary officials of Benin, Burkina Faso, Côte d'Ivoire, Ghana, Nigeria and Togo to consolidate recommendations and build solid communication links for information sharing amongst themselves and with the RAHC in Bamako.

Turkey

HPAI

3–12 February 2008



A team member takes samples from a wild bird near an outbreak site as part of efforts to better understand HPAI introduction in Turkey.

HPAI control is a continuing concern in Turkey, which has experienced HPAI outbreaks in domestic poultry every year since October 2005. When the initial outbreak in January 2008 was linked to wild water birds, FAO offered to assist with rapid sampling near the outbreaks. The government accepted, and FAO fielded a CMC-AH rapid mission of two wildlife experts and one epidemiologist to investigate the possible connection between wild birds and domestic outbreaks of HPAI. Never before had this level of wildlife sampling in live birds been targeted around a recent, confirmed outbreak in domestic poultry.

Working in close collaboration with the government and the Avian Influenza Preparedness and Response project team of the European Union, the mission team carried out simultaneous poultry outbreak investigations and wild bird census, capture and sampling activities.

In total, the team counted more than 3 200 birds from over 80 species at the outbreak sites. Finding no credible domestic poultry source for any of the six outbreaks, the team linked four of the outbreaks to wild bird introductions via hunting. For three of these four outbreaks, the team found evidence of domestic poultry coming into direct contact with carcass materials brought back by hunters to their homes. At one other site where wild birds were determined to be the source, domestic poultry had come into direct contact with wild water birds.

Based on mission findings, the team recommended collaborative efforts to:

- improve best practices for hunters;
- increase national HPAI technical capacities;
- revise the national contingency plan;
- facilitate longer-term monitoring and surveillance; and
- conduct regional studies to better understand the livestock-wildlife relationship.

United Republic of Tanzania

RVF

26 March — 6 April 2007



Marking animals with an RVF brand as part of a vaccination strategy can be an effective way of distinguishing vaccinated herds from the unvaccinated population.

The United Republic of Tanzania, along with Kenya, the Sudan and many other African neighbours, has long suffered the animal and human health threat of RVF. When this endemic TAD surfaced again in the United Republic of Tanzania, spreading from the northern provinces to the centre of the country in February and March 2007, the CMC-AH linked up with ongoing WHO efforts on the ground to provide emergency response support. CMC-AH efforts worked to ensure that the significant animal health aspect of RVF was taken into account in addition to human health aspects.

The United Nations Resident Coordinator (UNRCO) in Dar Es Salaam and the FAO Representative reacted promptly to CMC-AH initiatives by supporting awareness activities, surveillance measures, and outbreak investigations as well as providing support to the Central Veterinary Laboratory.

The various agencies responding to this crisis [i.e. FAO, WHO, UNICEF and the United Nations Development Programme] provided expertise and active support in drafting the comprehensive Emergency Response Plan through the interagency Emergency Coordination Group.

FAO, WHO and UNICEF submitted a project document to the CERF. The USD 1.2 million project proposal, including an FAO component for USD 703 000, was approved in April 2007. The project was immediately moved to the implementation phase through the UNRCO in Dar Es Salaam.

Viet Nam

PRRS

8–22 August 2007



CREDIT: FAO/J. Anelli

Veterinary authorities sample a suspect pig on a smallholder farm for laboratory diagnosis.

Pig production is a major economic contributor to food security in Viet Nam. When a series of unusual pig deaths were reported in August 2007, the CMC-AH fielded a team of animal health experts, including a veterinary specialist from the United States Department of Agriculture and a diagnostician from the University of Montreal to rapidly investigate the situation.

Mission findings indicated that signs and mortality rates witnessed had resulted from an interaction between multiple swine diseases, including a recent PRRS outbreak. The team concluded that initial steps taken by the government to control the outbreak had been successful in the short term. However, the CMC-AH experts strongly suggested overall disease management in Viet Nam be improved to help bring many of the suspected and future disease outbreaks under control.

Following up on CMC-AH efforts, FAO and the Government of the Socialist Republic of Viet Nam called on the international community to support future disease investigation and laboratory work. Recommendations included a communication campaign for farmers, para-veterinarians and the general public to help control disease through increased awareness, communication and capacity building initiatives.

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