



# GF-TADs

GLOBAL FRAMEWORK FOR THE  
PROGRESSIVE CONTROL OF  
TRANSBOUNDARY ANIMAL DISEASES



Food and Agriculture  
Organization of the  
United Nations



## ***Peste des petits ruminants* Regional Roadmap Meeting for the SADC region Harare, Zimbabwe, 12-13 October 2016**

### **BACKGROUND**

Small ruminants, sheep and goats, represent a significant part of the world livestock sector, particularly among developing countries where they have an essential role in livelihood and food security. Thus, in these countries small ruminants have a direct impact on the country economy and wellbeing of the entire population.

One of the main factors limiting sustainable and flourishing small ruminant industry is the presence of infectious diseases such as *Peste des petits ruminants* (PPR), a disease that causes high morbidity and mortality among susceptible animals. In many countries in Africa, Middle East and Asia, PPR is a serious threat to small ruminants production and the development of the whole livestock value chain, and therefore affect livelihoods and food security far beyond the people who own and raise sheep and goats. It is therefore why the disease must be controlled and eventually eradicated.

A PPR Global Control and Eradication Strategy (PPR GCES) developed by FAO and OIE was endorsed during the international conference held in Abidjan, Côte d'Ivoire (31 March – 2 April 2015). As a follow up of the Abidjan's conference, FAO and OIE, in collaboration with AU-IBAR and the different Regional Economic Communities (RECs) organized Regional Roadmap Meetings to engage RECs to take ownership of the GCES and countries to work in a harmonized and synchronized way in their fight against the disease.

Following the adoption of the PPR GCES, FAO and OIE established a joint Secretariat in charge to develop and implement the PPR Global Eradication Programme (PPR-GEP). The first five-year programme (2017 – 2021) finalized in September 2016 was presented during the meeting.

**Southern African Development Community (SADC)** countries represent 4,25 % of the global 2,1 billion small ruminants population. The distribution of PPR differs significantly in the region where countries that never reported PPR and some with the PPR free status from the OIE exist together with countries reporting the disease.

In collaboration with the **SADC** Secretariat, the government of Zimbabwe, FAO and OIE organised the first PPR Roadmap Meeting for the region, in Harare from 12 – 13 October 2016.

The meeting was officially opened by Honourable Paddy Zhanda, Deputy Minister for Agriculture, Mechanisation and Irrigation Development (MAMID) following remarks from David Phiri, FAO Sub-regional Coordinator for Southern Africa and FAO Representative in Zimbabwe, Dr Moetapele Letshwenyo, OIE Subregional representative for Southern Africa, AU-IBAR and SADC Secretariat.

The SADC PPR Roadmap meeting brought together CVOs, laboratory and epidemiologists from Angola, Botswana, the Democratic Republic of the Congo, Eswatini, Malawi, Mozambique, Namibia, Seychelles, the United Republic of Tanzania, Zambia and Zimbabwe as well as representatives from the SAARC Secretariat, AU-IBAR, AU-PANVAC, USDA APHIS, CIRAD, FAO and OIE. List of participants is attached in Annex 2.

The objectives for the PPR Roadmap Meeting aim to:

1. Present the GCES and its tools in a detailed manner;
2. Carry out a first assessment of countries' situation regarding PPR and the capacity of Veterinary Services to control it in this region;
3. Identify countries and region vision toward PPR eradication;
4. Identify other small ruminant diseases that could be controlled together with PPR;
5. Set up the Regional Advisory Group (RAG) to oversee the implementation of PPR control activities in the region;
6. Develop the regional Roadmap for the SADC region and obtain countries engagement for its implementation;
7. Present the PPR Global Eradication Programme recently developed.

Following fruitful discussions, the participants in the Roadmap Meeting agreed on the following:

### **1. Alignment of national/regional strategies to the continental and global eradication Strategy**

Considering that PPR eradication requires harmonised approach and framework at country and regional levels, and that SADC Secretariat had already developed a Regional PPR Strategy and that several countries within the region have developed their national strategies.

The meeting recommends to:

- The SADC Secretariat to ensure consistency and alignment of the existing regional strategy with the PPR-GCES<sup>1</sup> as well as the Pan-African Strategy for Control and Eradication of PPR already aligned with the global one;

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<sup>1</sup> Global Control and Eradication Strategy

- Countries with national strategic plan (NSP) to take necessary action to align their plans to the PPR-GCES, as necessary;
- Countries without NSP to develop their plan taking into consideration the template already agreed between the FAO/OIE PPR Secretariat and AU-IBAR.

## **2. PPR current status within the region**

Considering that country reports on PPR epidemiological status showed the following:

- Three countries are officially free of PPR (eSwatini, Mauritius, South Africa);
- One country with an official PPR free zone (Namibia);
- Nine countries never reported PPR outbreak. Two among those countries detected positive PPR antibodies in the small ruminants population during their field surveillance (Mozambique and Zambia);
- Three countries are reporting PPR outbreaks (Angola, the Democratic Republic of the Congo and the United Republic of Tanzania).

The meeting recommends to:

2.1 All these countries, to organise refresher training of veterinary staff to review clinical recognition of PPR and its differential diagnosis and to extend the training also to sample collection, shipping and laboratory diagnosis;

2.2 Countries that never reported PPR outbreak formulate and implement their Assessment Plan including surveillance to be carried out for 1 or 2 years and prepare their dossier for freedom status recognition by the OIE. Each country should also prepare a contingency plan to be endorsed by the relevant authorities prior to submission of the OIE dossier;

2.3 Countries that never reported PPR but with antibodies detected in the population to test the sera with two ELISA serology tests for results comparison. All positive samples should be confirmed by VNT (Gold Standard PPR serology test) and seek technical assistance from more advanced laboratories in the continent (such AU-PANVAC) or the PPR World Reference Laboratories;

2.5 Countries currently PPR infected to update their assessment and control plan taking into consideration the PPR GCES principles;

## **3. Strengthening of veterinary services**

Considering the key role of the Veterinary Services in PPR eradication in line with the PPR-GCES and the PPR-GEP<sup>2</sup>, the meeting recommends that countries make use of their OIE PVS reports and update them where necessary.

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<sup>2</sup> Global Eradication Programme

#### 4. Coordination

Considering that PPR is a transboundary animal disease that need coordination and harmonisation at all levels, the meeting recommends:

##### **To AU-IBAR and SADC to**

- support strengthening the laboratory and epidemiological networks
- support the regional harmonisation/coordination approach and collaboration for the control and eradication of PPR;
- ensure the proper commitment and financial resource mobilisation.

##### **To countries**

- to use only quality certified PPR vaccines by AU-PANVAC for any vaccination campaigns.

##### **To FAO and OIE**

- Together, with regional partners and countries, to support the resource mobilisation necessary for the implementation of the PPR GEP at national, regional and global levels;
- To contribute to the necessary training support to countries on PMAT, PVE; disease recognition, laboratory diagnostic methodologies and other relevant areas as requested by the countries;
- To facilitate access to PPR vaccines in sufficient quantity, certified quality, at the best quality/price ratio and in due time, including through OIE vaccine banks and with the support of AU-PANVAC, as necessary.

#### 5. Involvement of other partners

Considering that several partners (AU-IBAR, AU-PANVAC, CIRAD, USDA-APHIS, BVI<sup>3</sup>, FAO, OIE, small ruminant value chain personnel, CAHWs among others) are currently contributing to animal disease management in the region; the meeting recommends:

##### **To SADC Secretariat**

- to map existing farmers organizations, NGOs and partners at national and regional levels that have the potential to engage in some parts of the PPR-GEP;
- to support the development of a regional advocacy and communication strategy to facilitate the proper involvement of all actors in PPR eradication;

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<sup>3</sup> Botswana Vaccine Institute

### **To technical and financial partners**

- To support the implementation of the PPR GEP through capacity building and funding.

### **6. PPR Roadmap meeting**

The participants agree on the attached provisional PPR Stage Progression 2016 – 2030 as the Regional Roadmap of SADC to achieve eradication of PPR by 2030 (see Annex). The PPR Stages agreed in 2016 shall serve as the provisional baseline situation. Each country is expected to conduct further consultation at national level in order to update its roadmap. This information will be communicated to the PPR Secretariat no later than end of 2016.

The meeting participants also agree to elect the followings as members of the Regional Advisory Group (RAG):

Voting members:

- **Chair: CVO Tanzania**
- **Vice-Chairs: CVOs Zambia & Namibia**
- **Members: Representative of the Regional Epi Network: Eswatini - Representative of the Regional Lab Networks: Zimbabwe**

Non-Voting members:

Representatives from regional organizations: SADC Secretariat, AU-IBAR, OIE & FAO.

The meeting recommends that SADC Secretariat presents the RAG to the LTC for endorsement.

### **Acknowledgement**

The participants of the SADC PPR Roadmap meeting are grateful to the Government and People of Zimbabwe, SADC Secretariat, FAO and OIE for the support extended to them during the preparation and the conduct of the meeting.

## Annexes

### Annex 1. List of participants

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