



BASELINE SURVEY

INSTITUTIONAL PREPAREDNESS OF AFRICAN COUNTRIES TO ELIMINATE RABIES BY 2030

Preliminary Overview



Methodology

- KAP survey on Kobo collect from December 2021 and April 2022
 - 58 respondents interviewed
 - 43 CVO questionnaires/ interview done
 - Analysis on 39 (71%) CVOs and 16 (29%) from partner organisations.
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Animal Population Data

- No geo-referenced dog census (74%) and wildlife (90%)
- Lack of reliable rabies morbidity and mortality data
- No gender-disaggregated data
- 69% CVOs don't aware when national census is done.
- 16% countries do national census every 1, 5 or 10 years.
- 26% countries guesstimate dog populations

Geo-referenced wildlife census by species



Geo-referenced Livestock census by species



Geo-referenced or basic estimated census of dogs

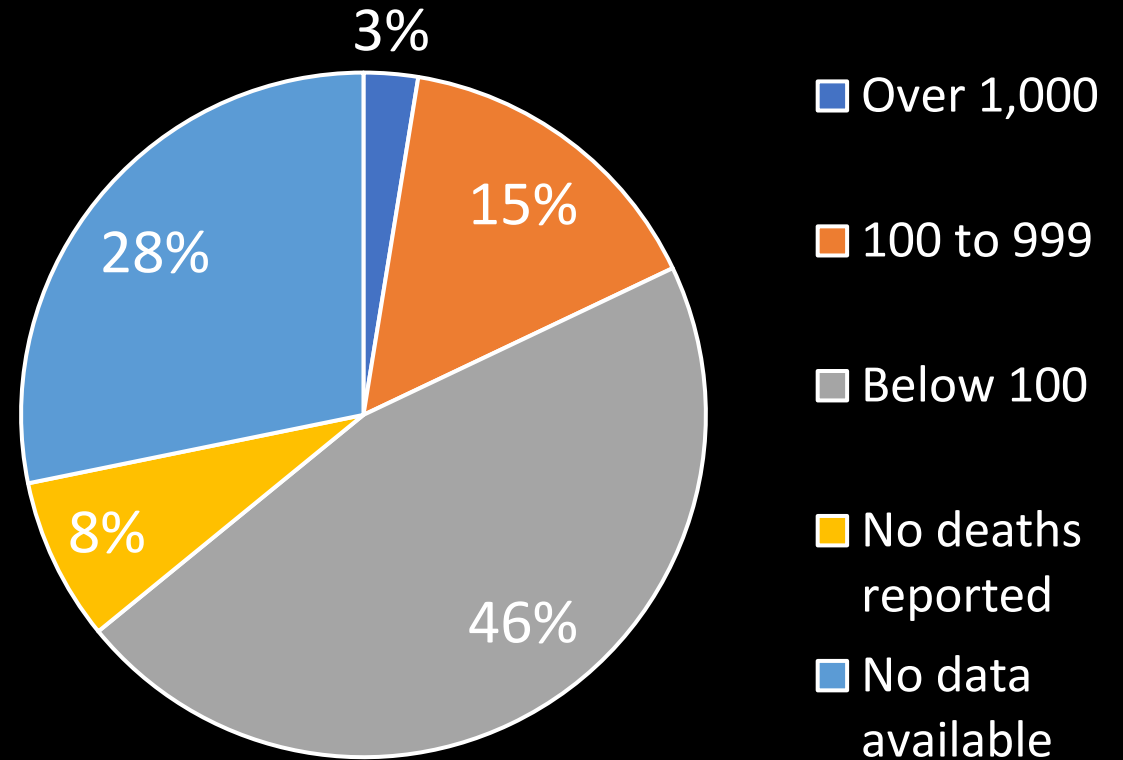


■ Yes ■ No

Dog, Livestock, Wildlife rabies numbers

- Tanzania highest dog rabies - 2,030
- 8 countries No data on rabid dogs
- 72% No data on livestock rabies deaths
- Chad and Algeria highest livestock deaths
- 5 countries with wildlife rabies deaths
- Most have no wildlife data

Number of dogs infected by rabies in 2021 (39 CVOs)

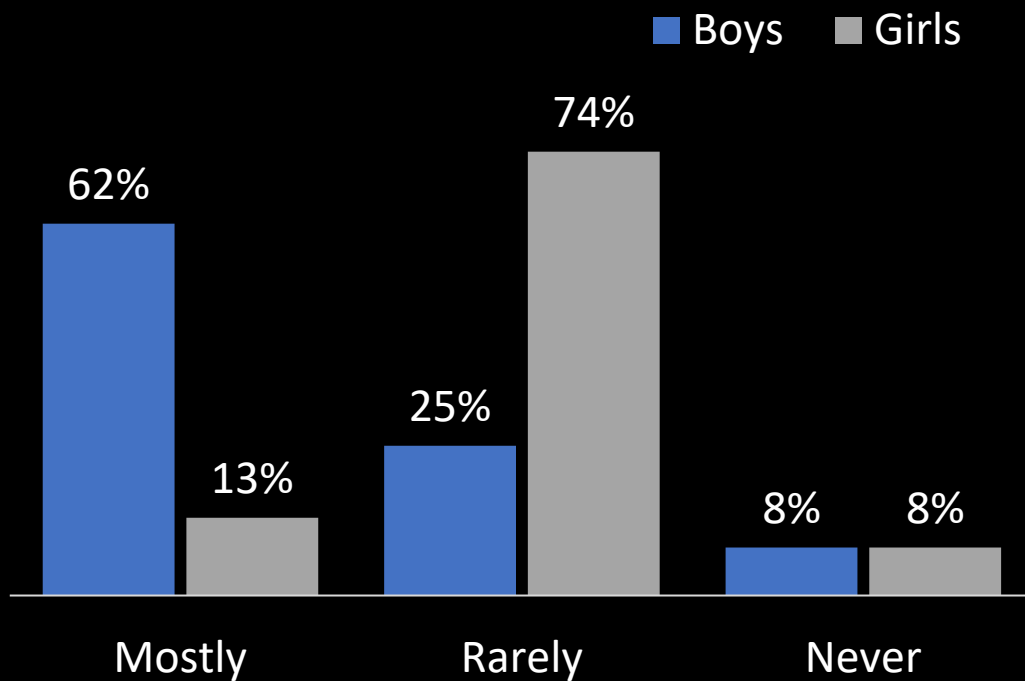


Dog Population Management

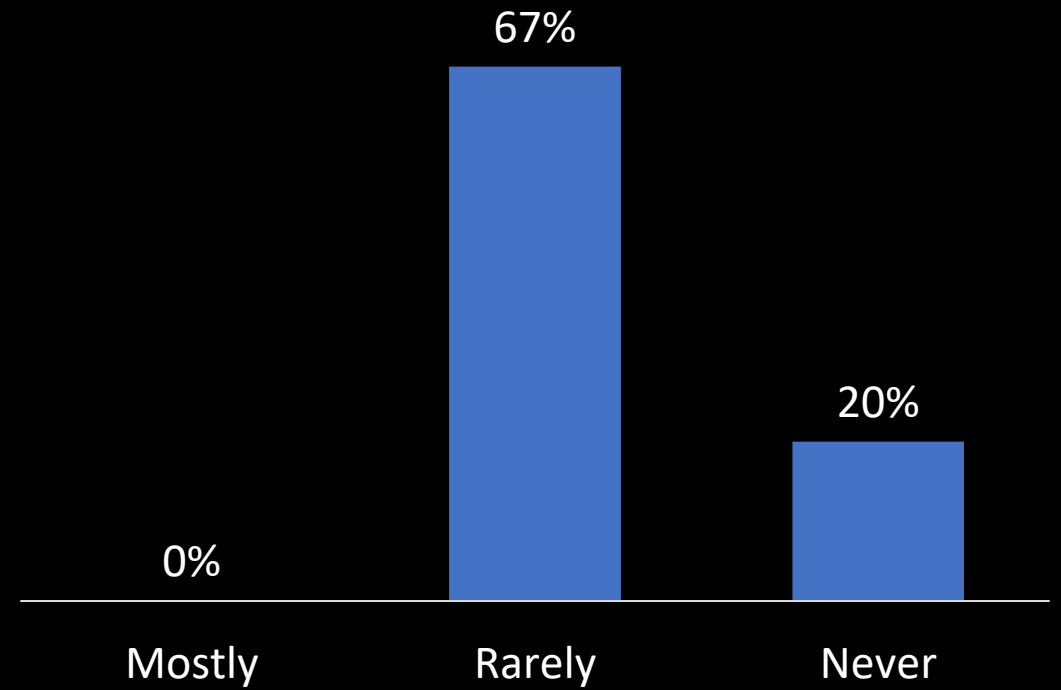
- 87% CVOs believe vaccinations and DPM is crucial **together** not vaccinations alone.
 - All 39 CVOs believed rabies and DPM needed for education, chiefs, religious, influencers.
 - 85% believe DPM for wildlife; 50% partners don't know DPM importance in wildlife.
 - 62% CVOs believe rabies has affected wildlife populations.
 - Challenges for wildlife rabies management– lack of funds, No dog census; inadequate wildlife surveillance, explosion of dog populations, hunting dogs not regulated
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Gender and vulnerability disaggregated Data who takes dogs for vaccinations?

Boy or Girls?



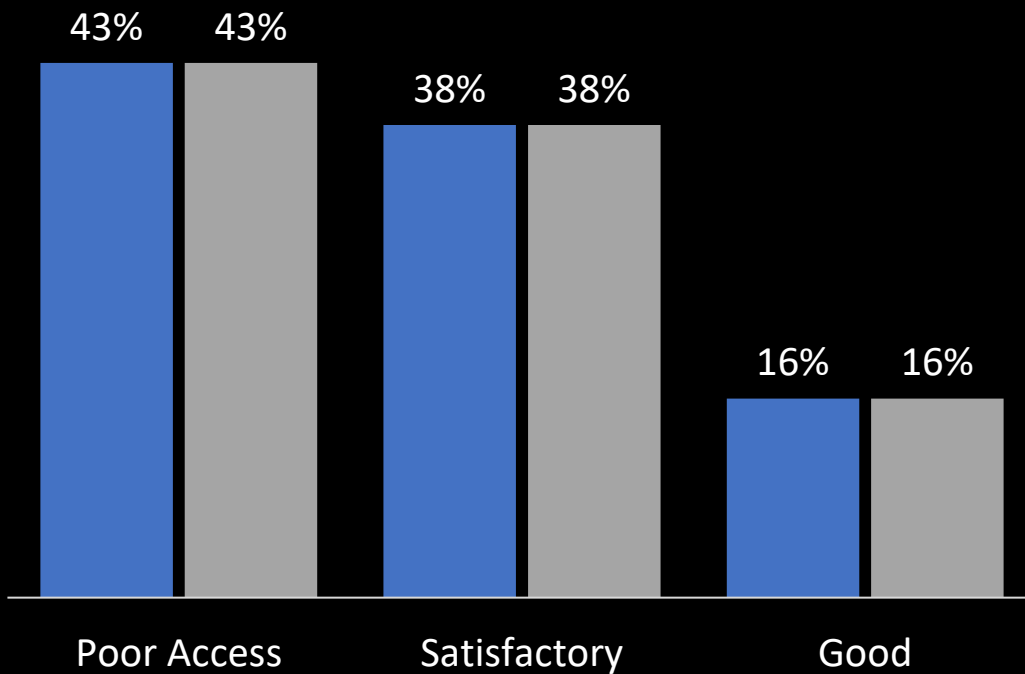
PLWDs?



Gender and vulnerability disaggregated Data who has access to treatment?

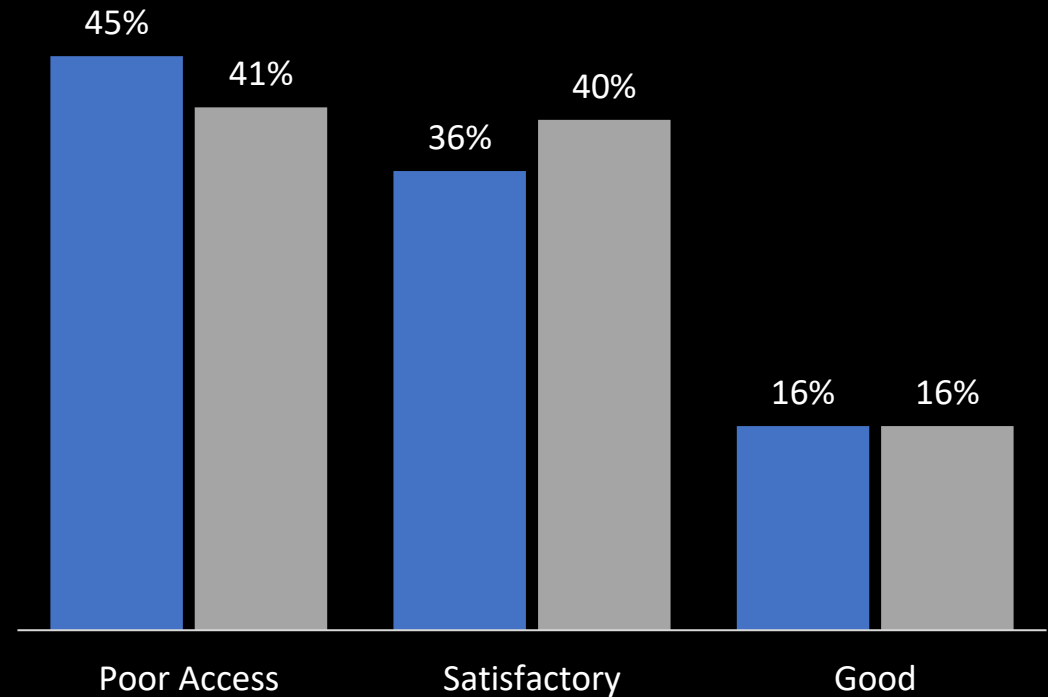
Access to Treatment (reported by CVOs)

Boys Girls



Access to Treatment (reported by CVOs)

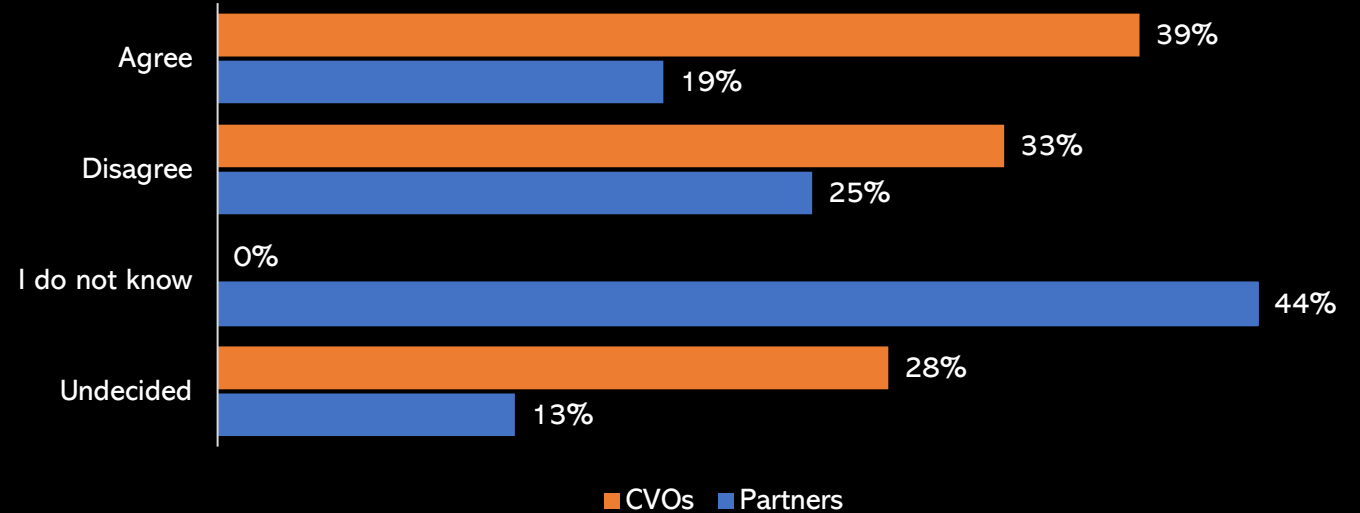
Men Women



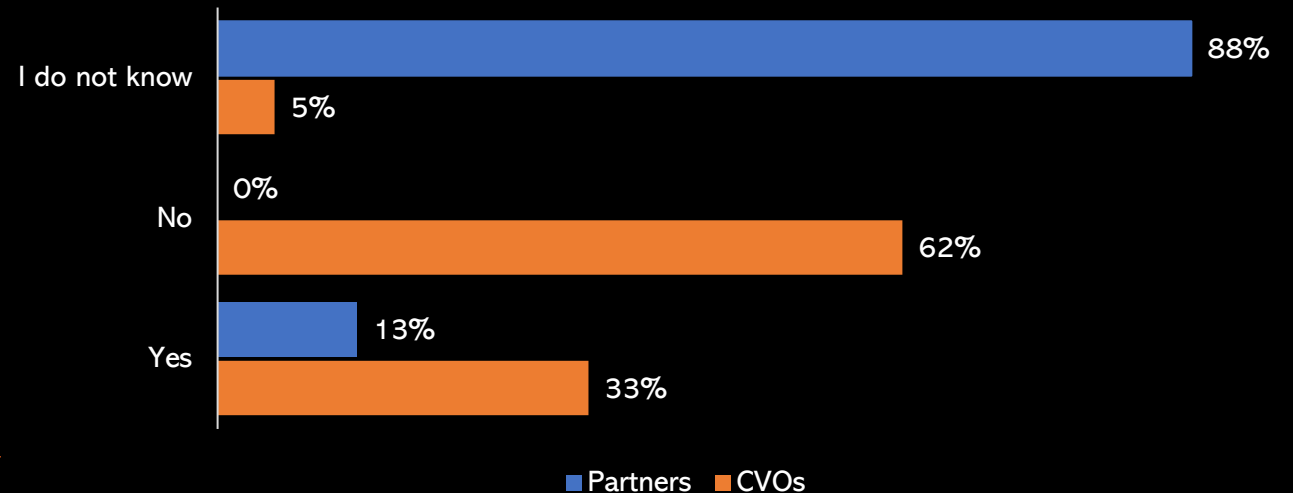
Politics and Governance

Political Support not translating to multisectoral guidelines, regulations or budget allocation

Parliamentarians attention to legal instruments that support zoonotic control and rabies eradication (39 CVOs and 16 partners)

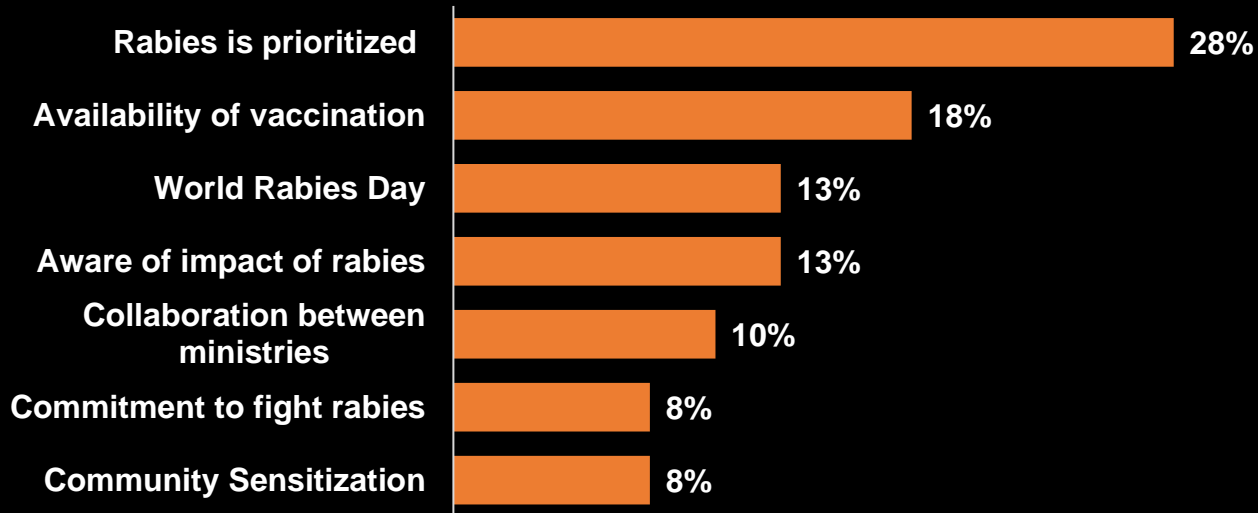


Legal instruments that support rabies control in place (39 CVOs and 16 partners)

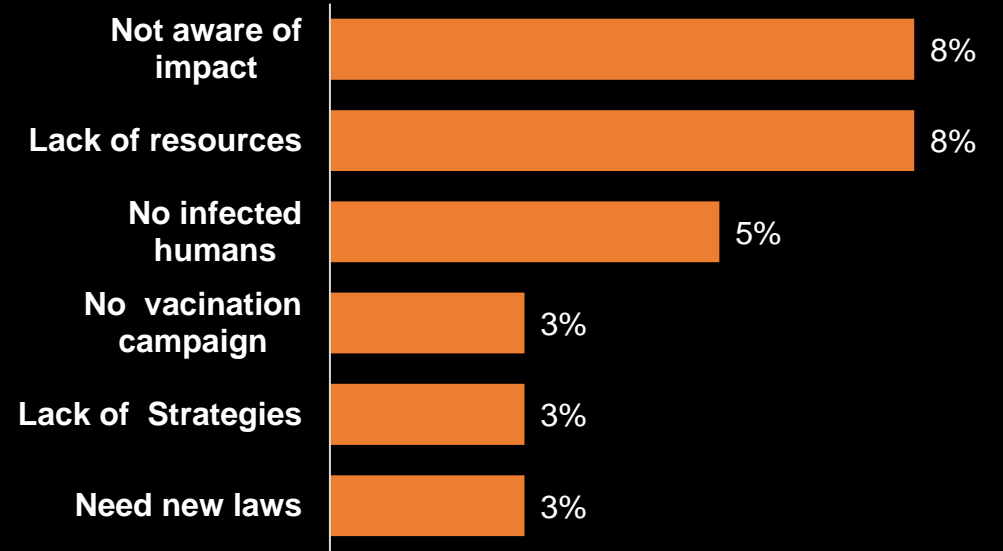


Reasons for high and low priority on rabies from politicians

Main Reasons CVOs perceived high priority from political structures



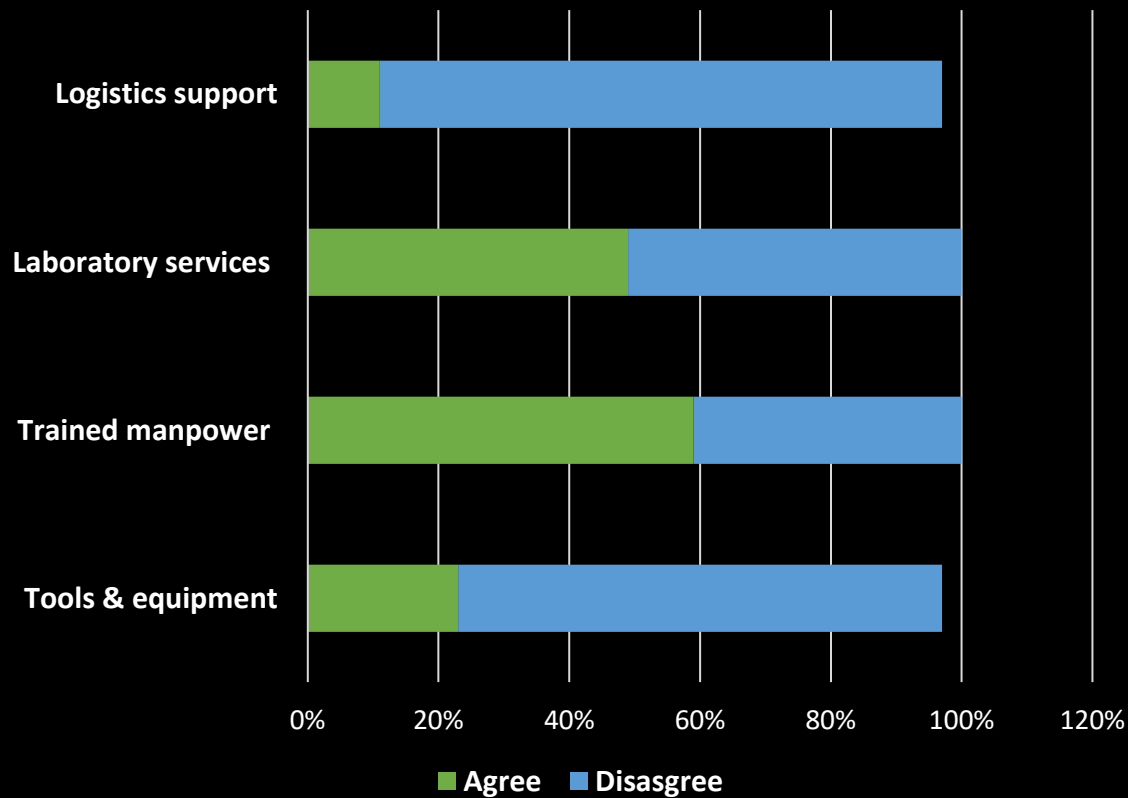
Main Reasons CVOs perceived low priority from political structures



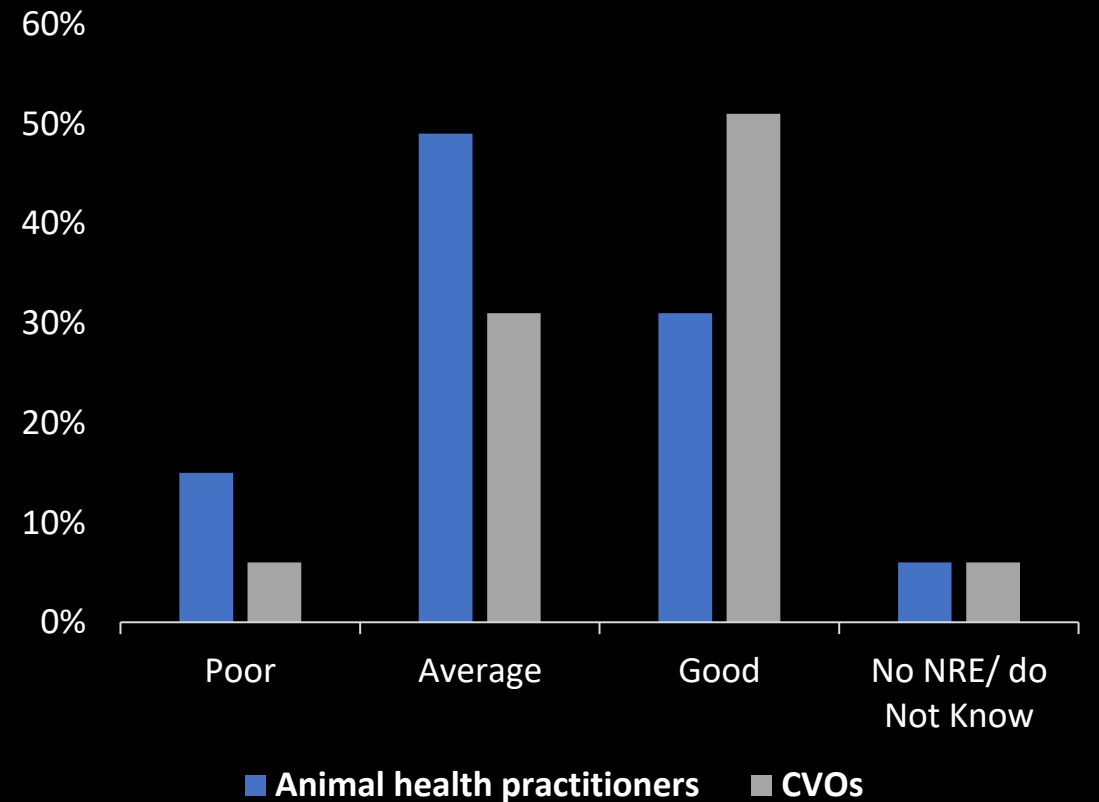
Institutional Capacity

logistics, equipment, knowledge

Logistics, tools and equipment to deliver NRE



Technical knowledge to run the NRE program

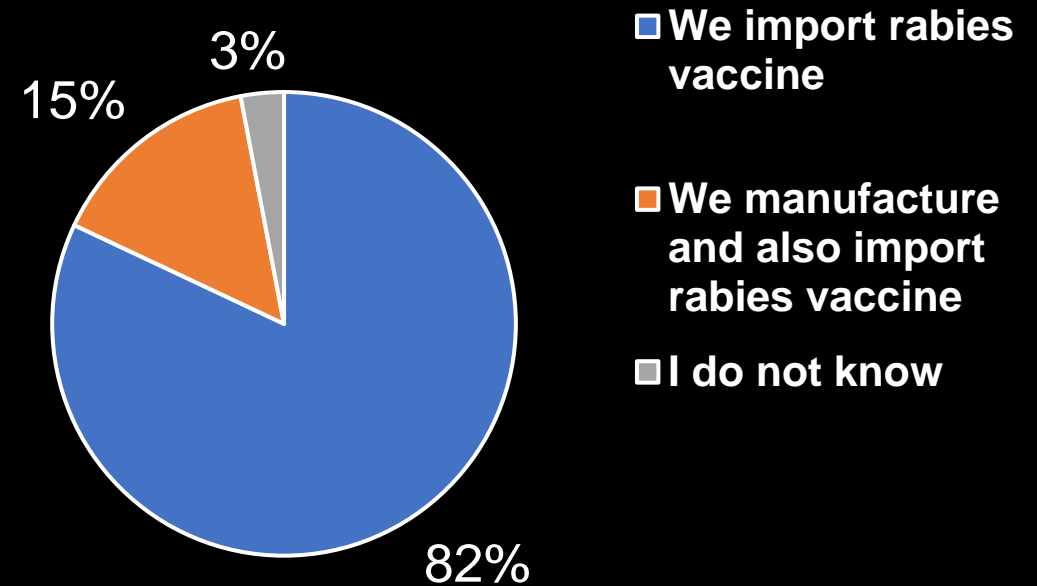


Institutional Capacity Training

Type of training undertaken	No. of Countries	% of assessed Countries (39)
Epidemiological diseases surveillance	32	82%
Dog Bite Prevention and Management	25	64%
Sensitisation and Awareness for Rabies	24	62%
Animal Rabies diagnosis & Reporting protocols	18	46%
Disease Control Drills	18	46%
Animal First Aid	18	46%
Human Rabies treatment protocols	17	44%
A veterinary disaster response team	17	44%
Human First Aid	17	44%

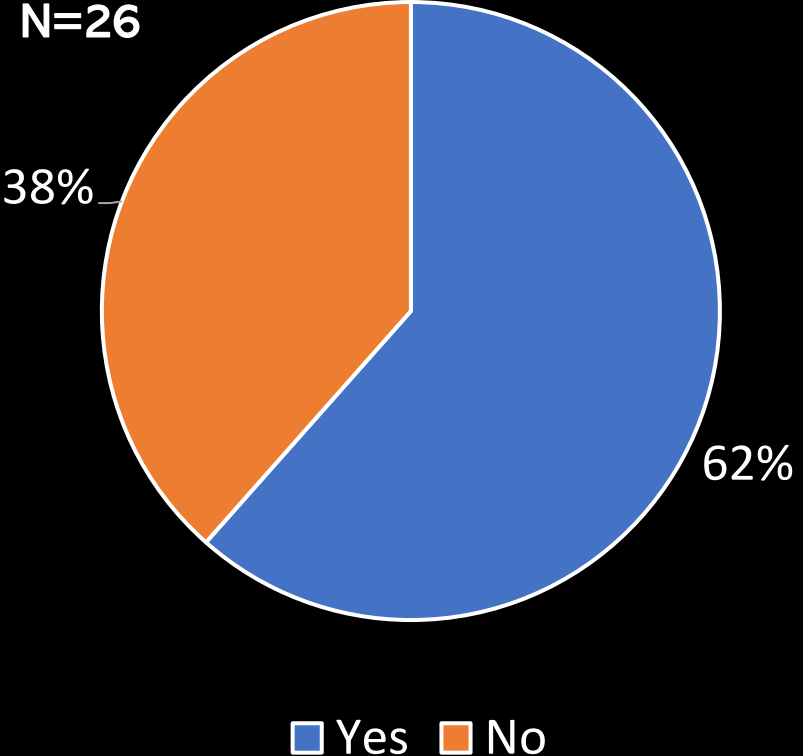
Institutional Capacity Vaccines

- 62% CVOs and 38% partners No PrEP and PEP for veterinary, human and wildlife teams in the rabies process.
- 74% have national cold chain system for animal vaccines.
- 15% purchase through WOAHA vaccine bank.
- Most countries have >50% vaccine deficit against planned.



Rabies Testing reagents, tools & equipment

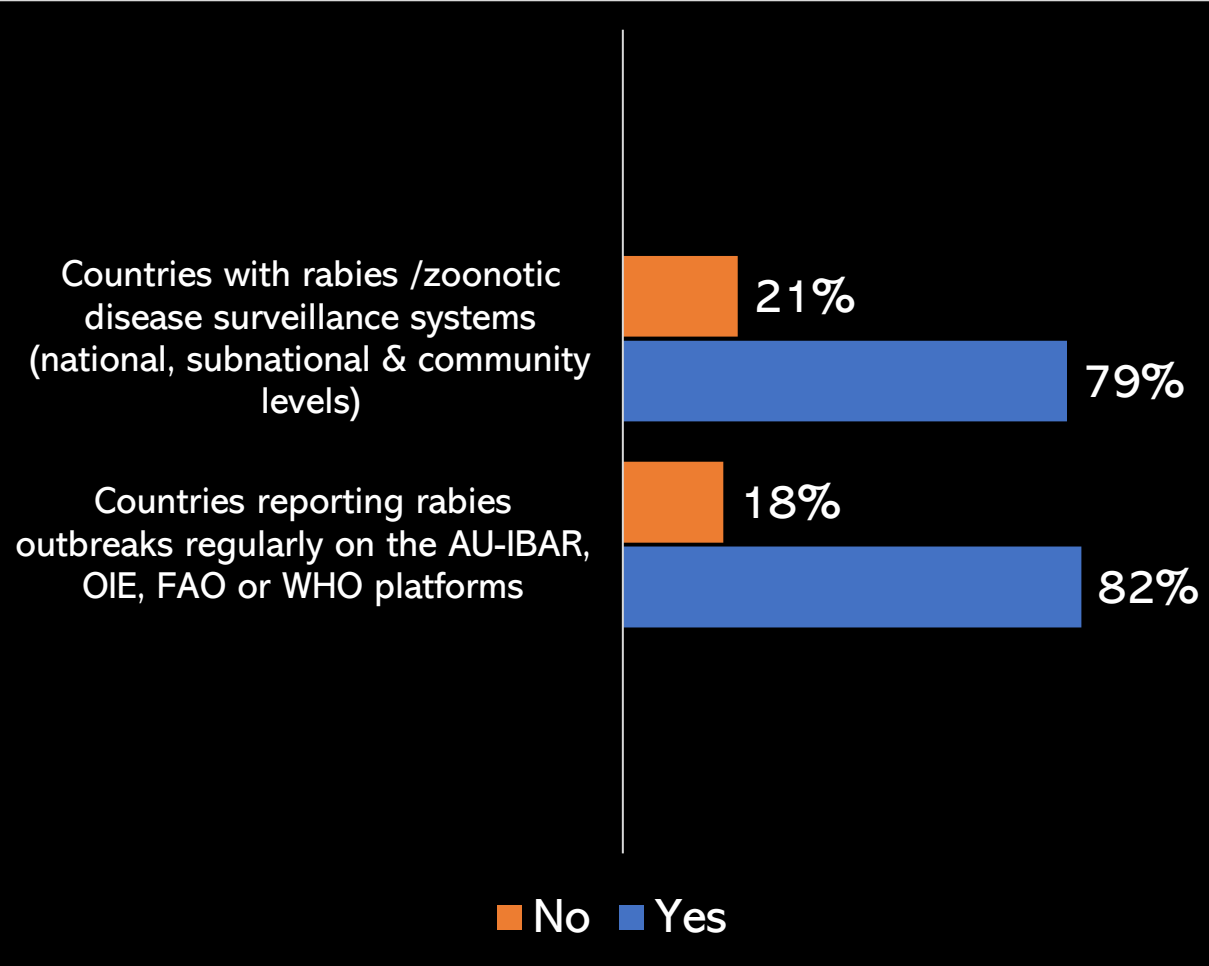
**Availability of reagents and equipment
N=26**



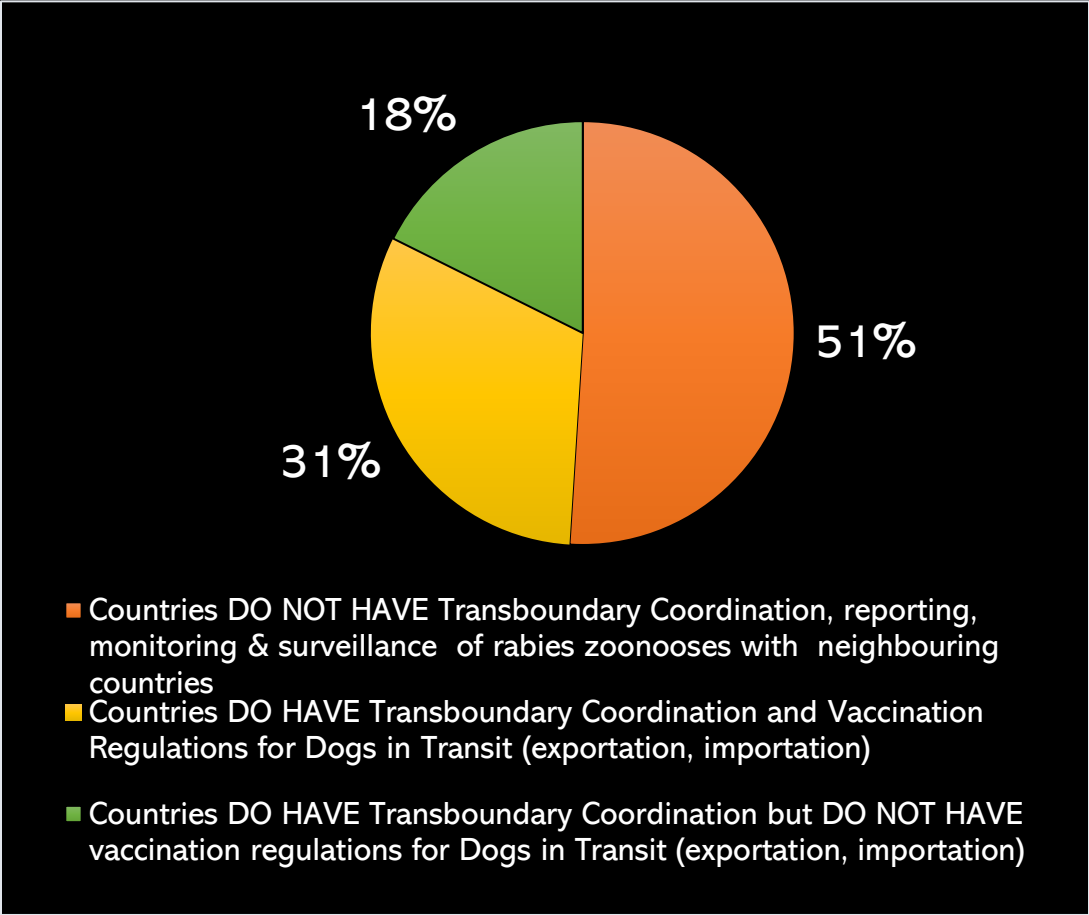
Abbreviation (Test)	Full Name	Countries using test (n=16)
DFAT	Direct Fluorescent Antibody Test	12
DRIT	Direct, Rapid Immunohistochemical Test	1
ELISA	Enzyme-linked immunosorbent assay	1
FAT	Fluorescent Antibody Technique	3
FAVN	Fluorescent Antibody Virus Neutralization Test	1
FITC	Fluorescein isothiocyanate labelled antibody	1
IVCC	Viral Isolation on Cell Culture	1
MIT	Mouse Inoculation Test	2
RFFIT	Rapid Fluorescent Foci Inhibition Test	1
RT-PCR	Reverse transcription polymerase chain reaction	6

Monitoring & Surveillance

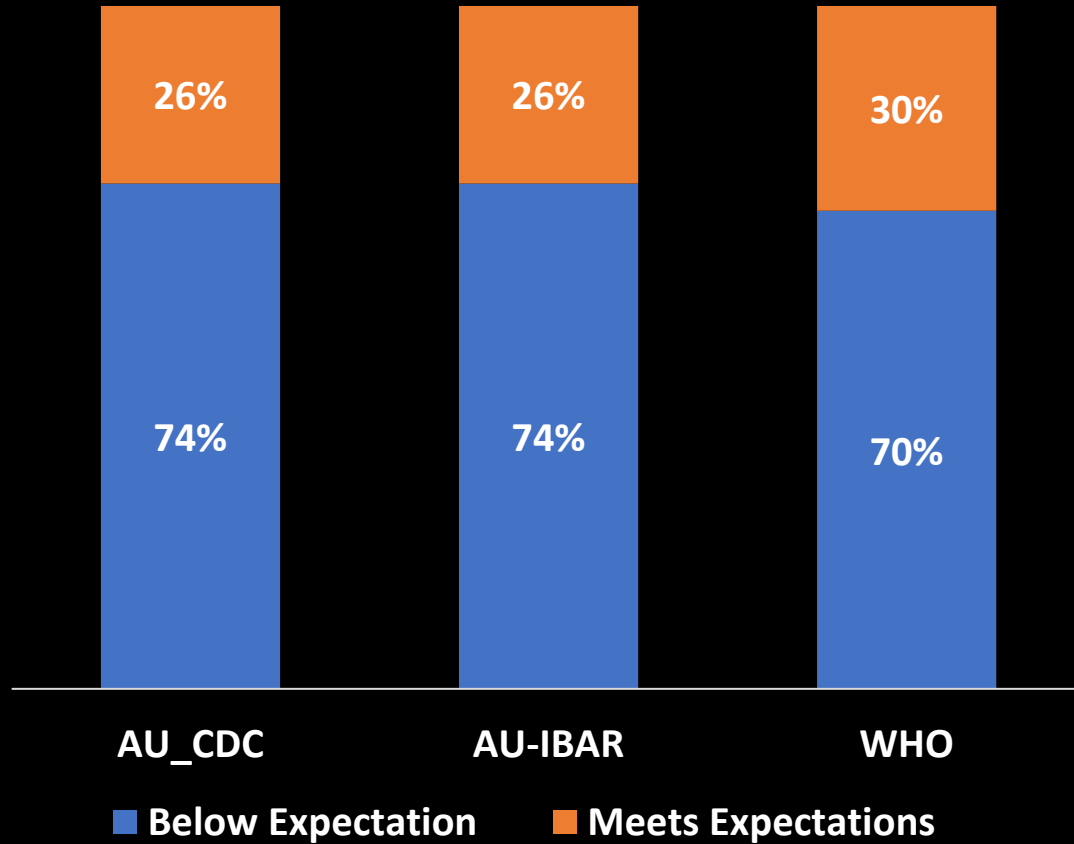
Countries with in-country rabies/zoonoses surveillance and reporting to WOAAH (OIE), FAO, AU-IBAR, or WHO



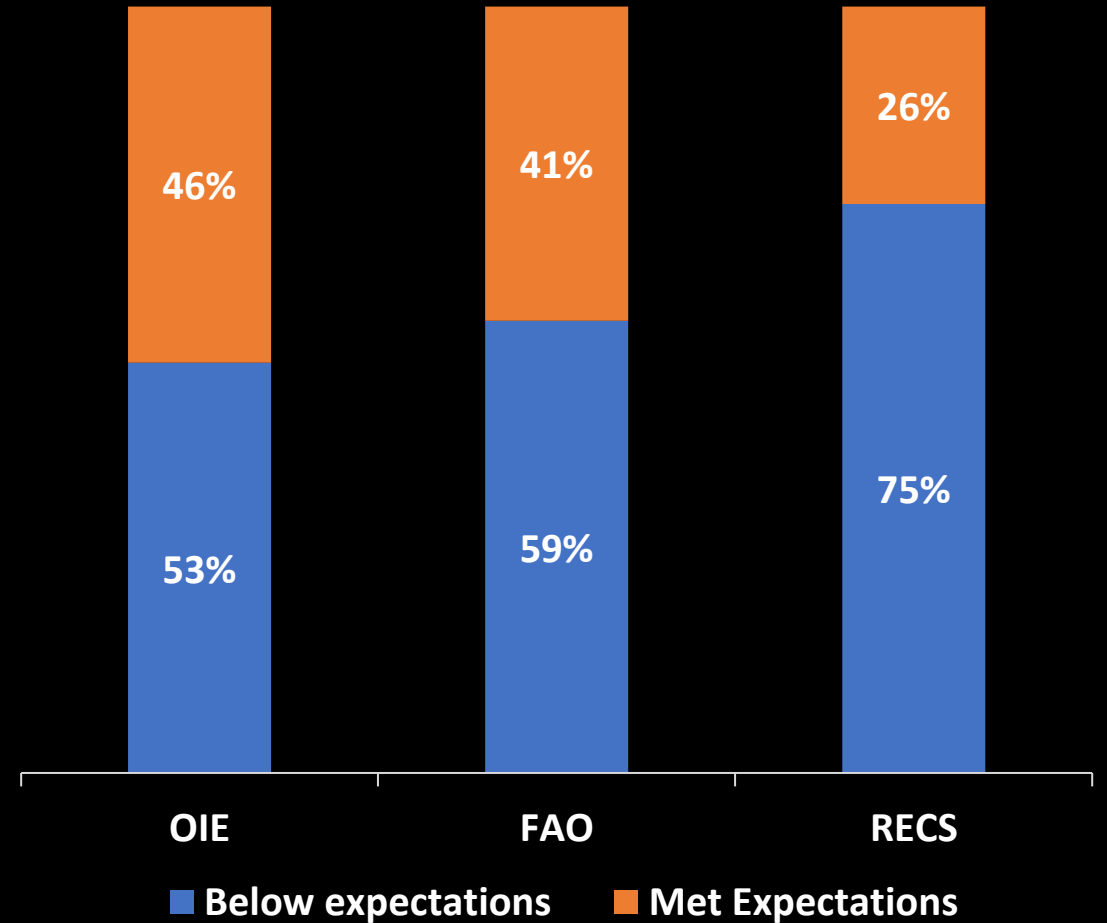
Monitoring & Surveillance of Dog rabies for transboundary and dogs-in-transit



Continental Coordination



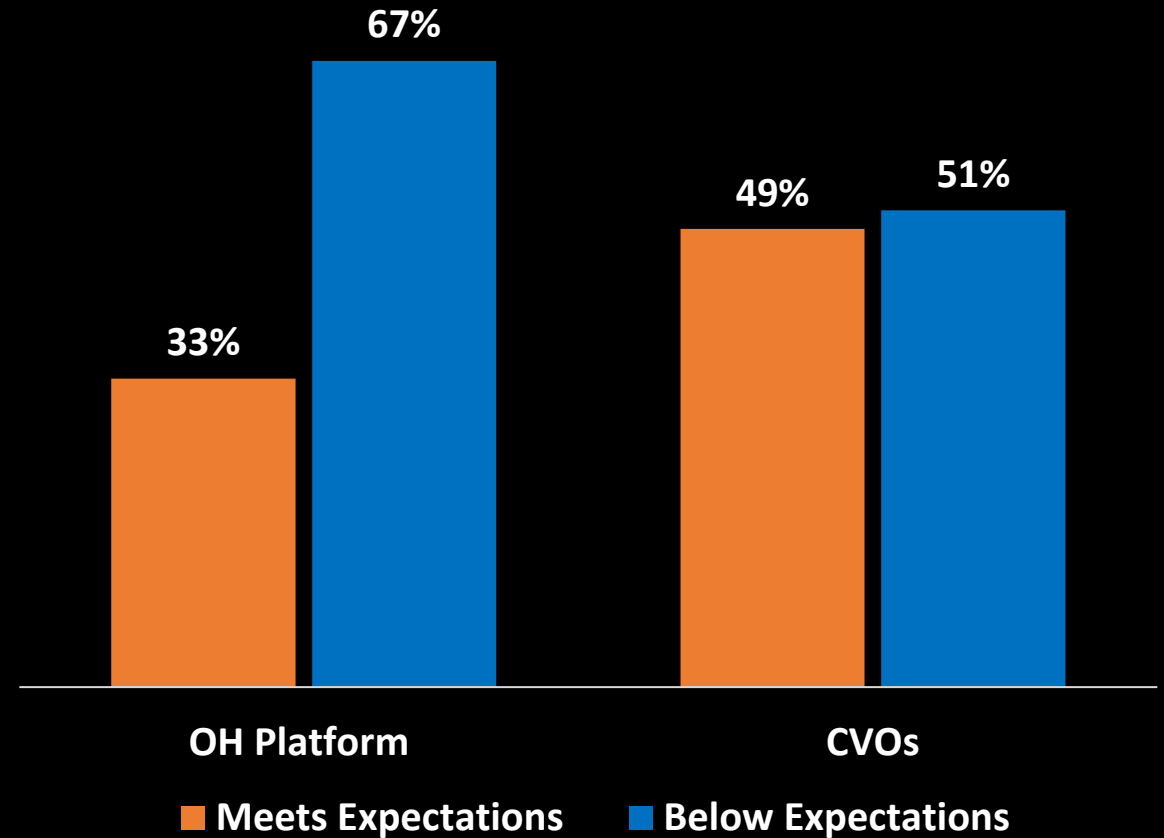
Regional Coordination



National Coordination

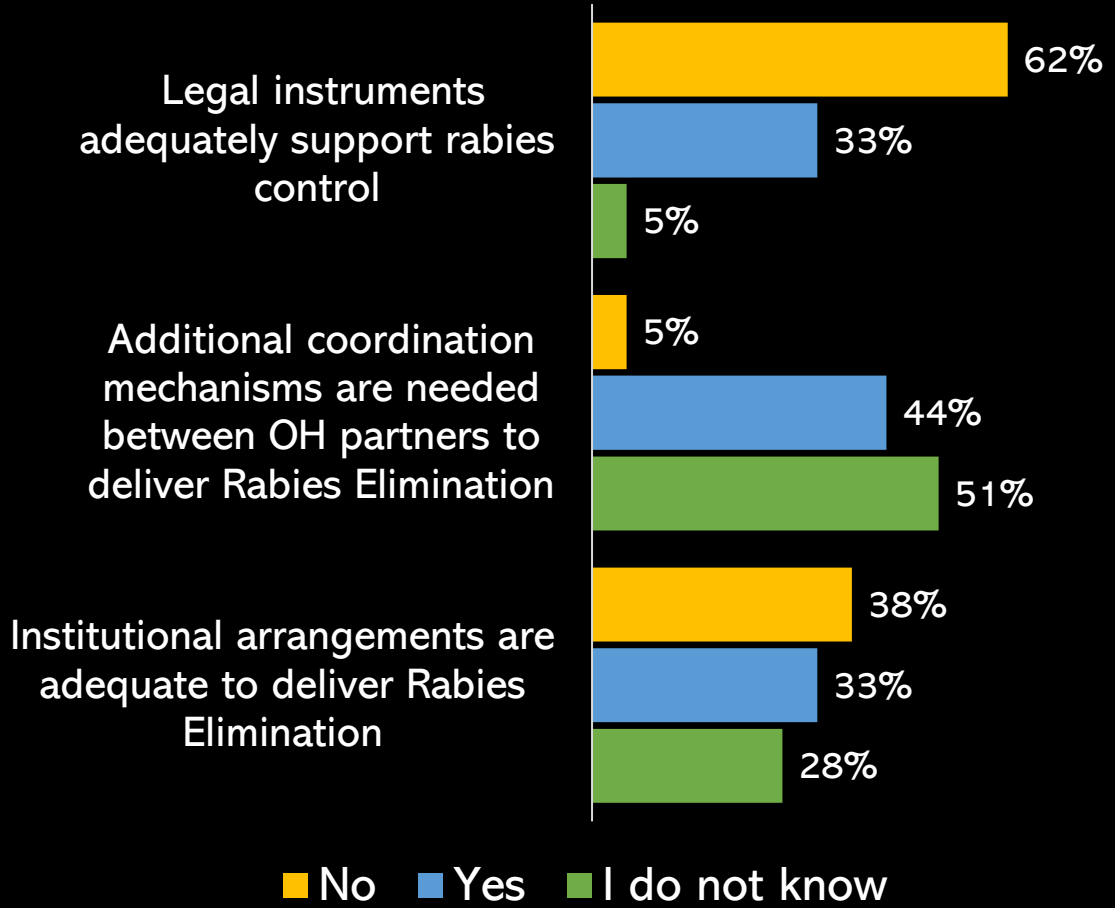
CVOs attributed the poor coordination

- lack of good leadership
- few rabies programs
- inadequate rabies vaccines
- inadequate support from RECs,
- lack of a regional rabies elimination strategy.
- inadequate resources,
- technical support not readily available
- lack of geo-referenced population data on dogs, livestock and wildlife

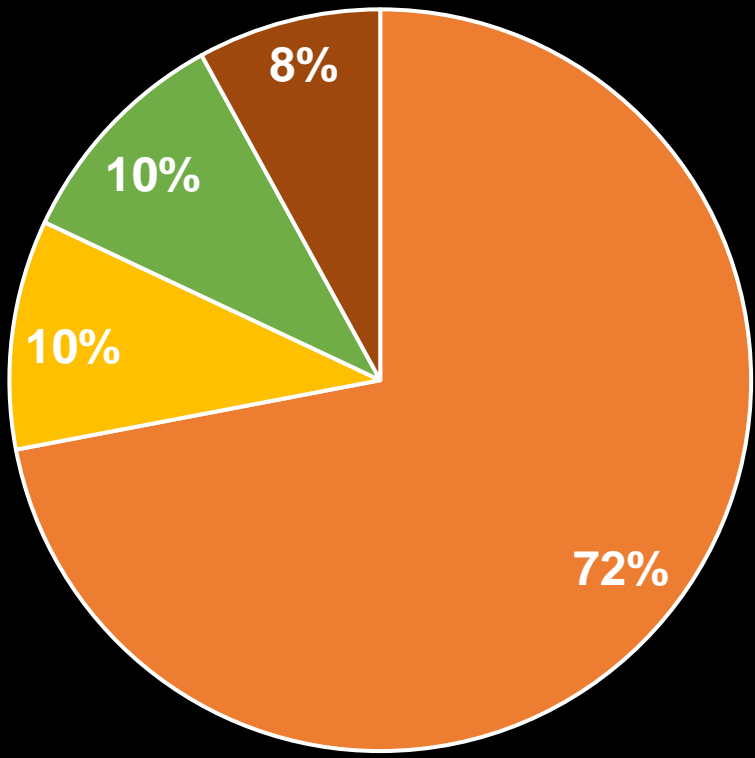


National Coordination

Coordination mechanisms, legal and institutional arrangements to support rabies in place (39 CVOs)



Stage of strategies for National Rabies Elimination & DPM

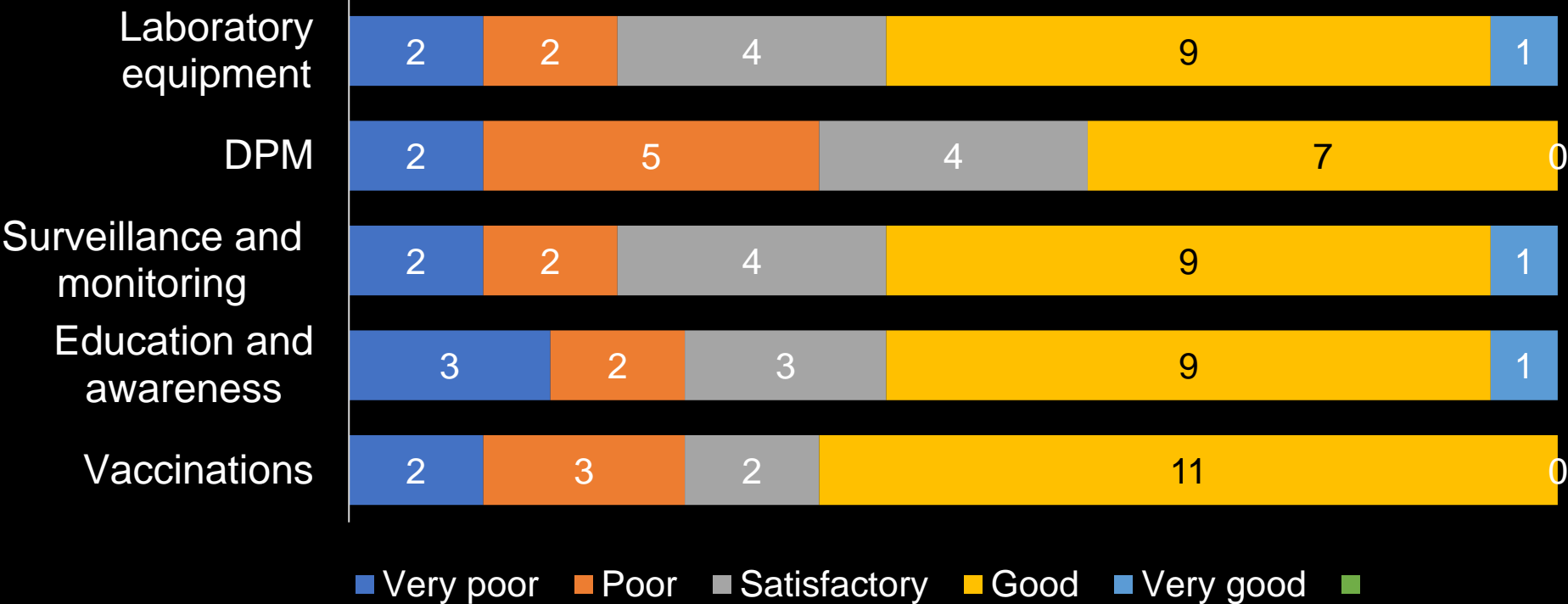


■ Beginning ■ Developed ■ Advanced ■ Complete

National Coordination

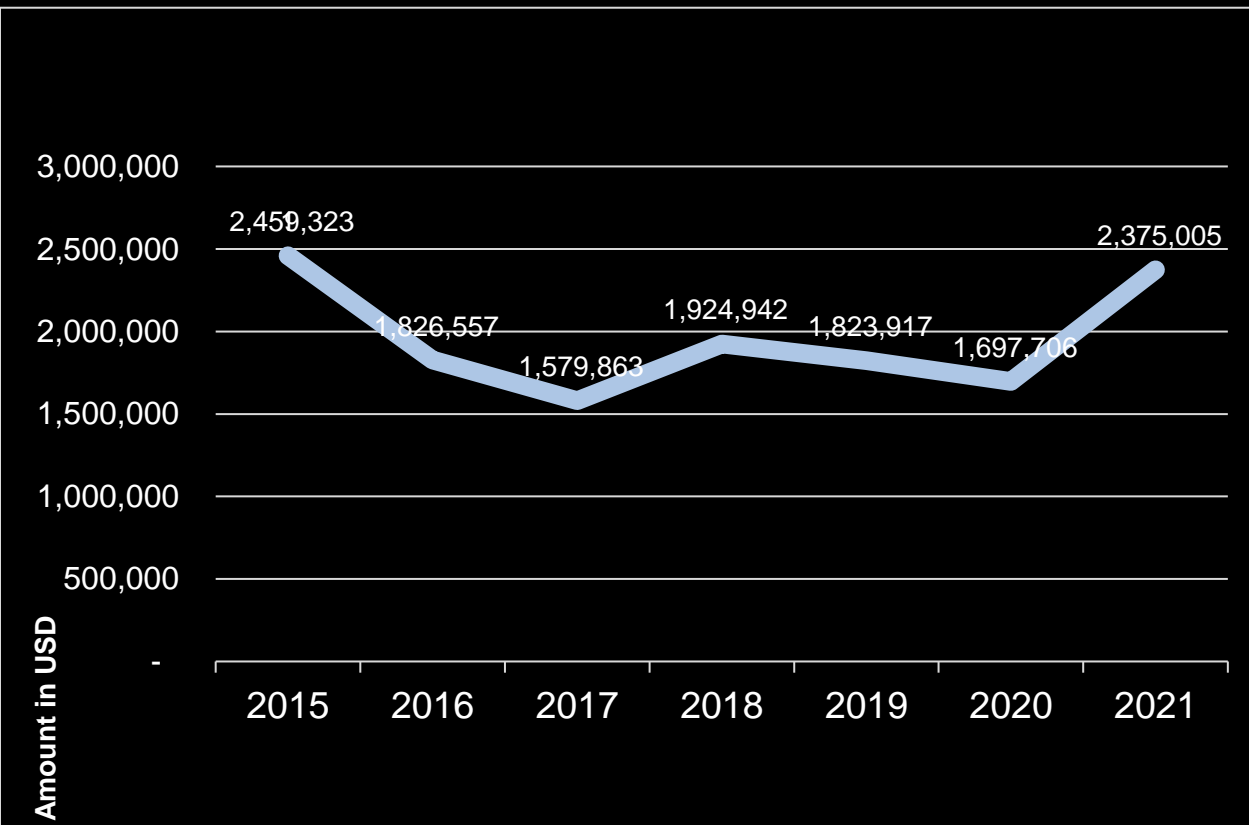
- Inadequate inter-sectoral coordination between livestock and wildlife authorities
- Poor technical and institutional coordination between the organisations, networks, private partners and government stakeholders
- Limited Cross-boundary linkages and collaborations.
- 38% CVOs said YES and 62% said NO to country's laws providing a robust institutional framework for NRE and DPM
- 72% NRE is at formative stages; NRE advanced (Uganda, Kenya, Algeria, Morocco); NRE developed (Eritrea, Tanzania, Rwanda, Tunisia)
- 54% CVOs country's rabies control laws and animal welfare laws (namely, dog ownership regulations, breeding, owning, selling, disposal, and registration) LACK strong institutional integration for OH rabies coordination.
- 18% countries have specific rabies laws and regulations providing legal basis for rabies activities (Morocco, Zimbabwe, Uganda, Mali, Algeria, Kenya and Tanzania).
- Most Countries have Zoonotic Contingency plans as building block. BUT Togo, Libya, and Djibouti NO zoonotic contingency plans.
- 11 countries have rabies plans

Quality of the SARE planning, 18 CVOs done SARE

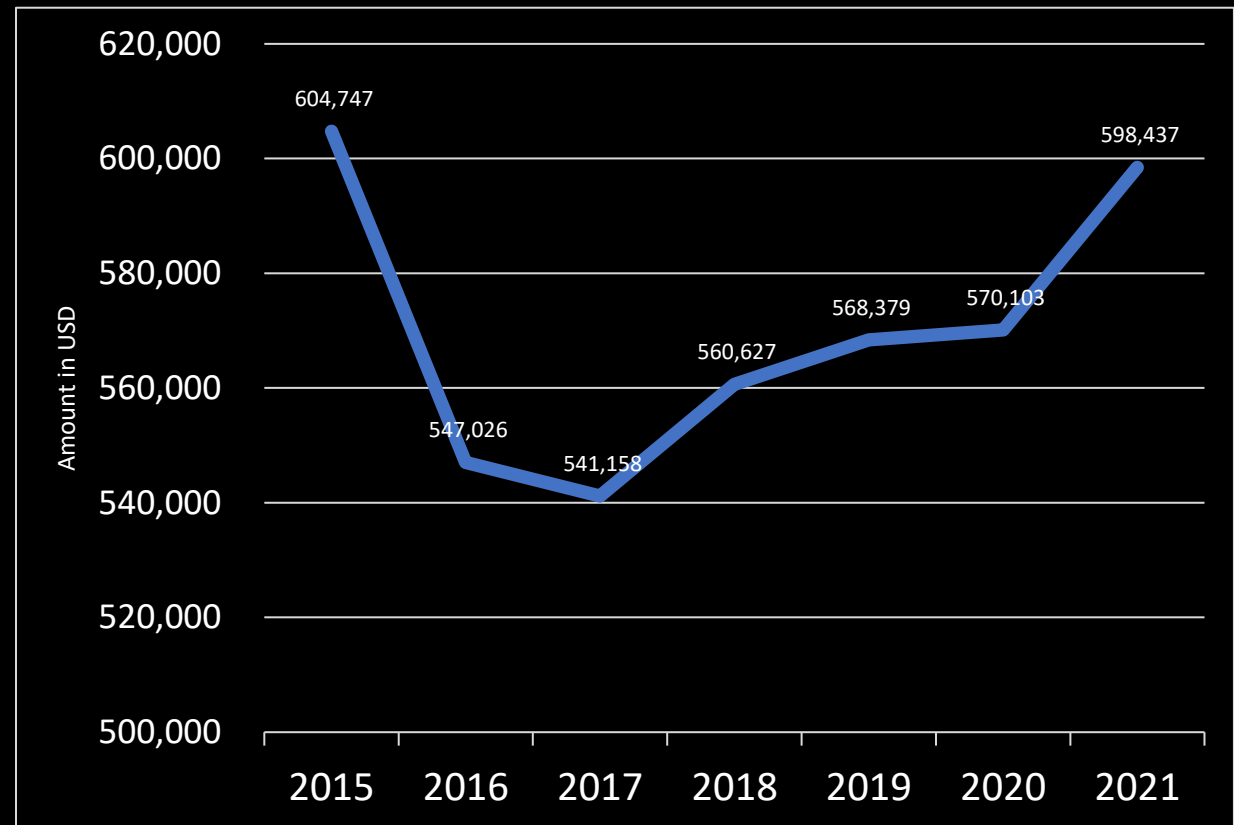


Funding trends

Trend in annual livestock budget between 2015 and 2021 (n=13)

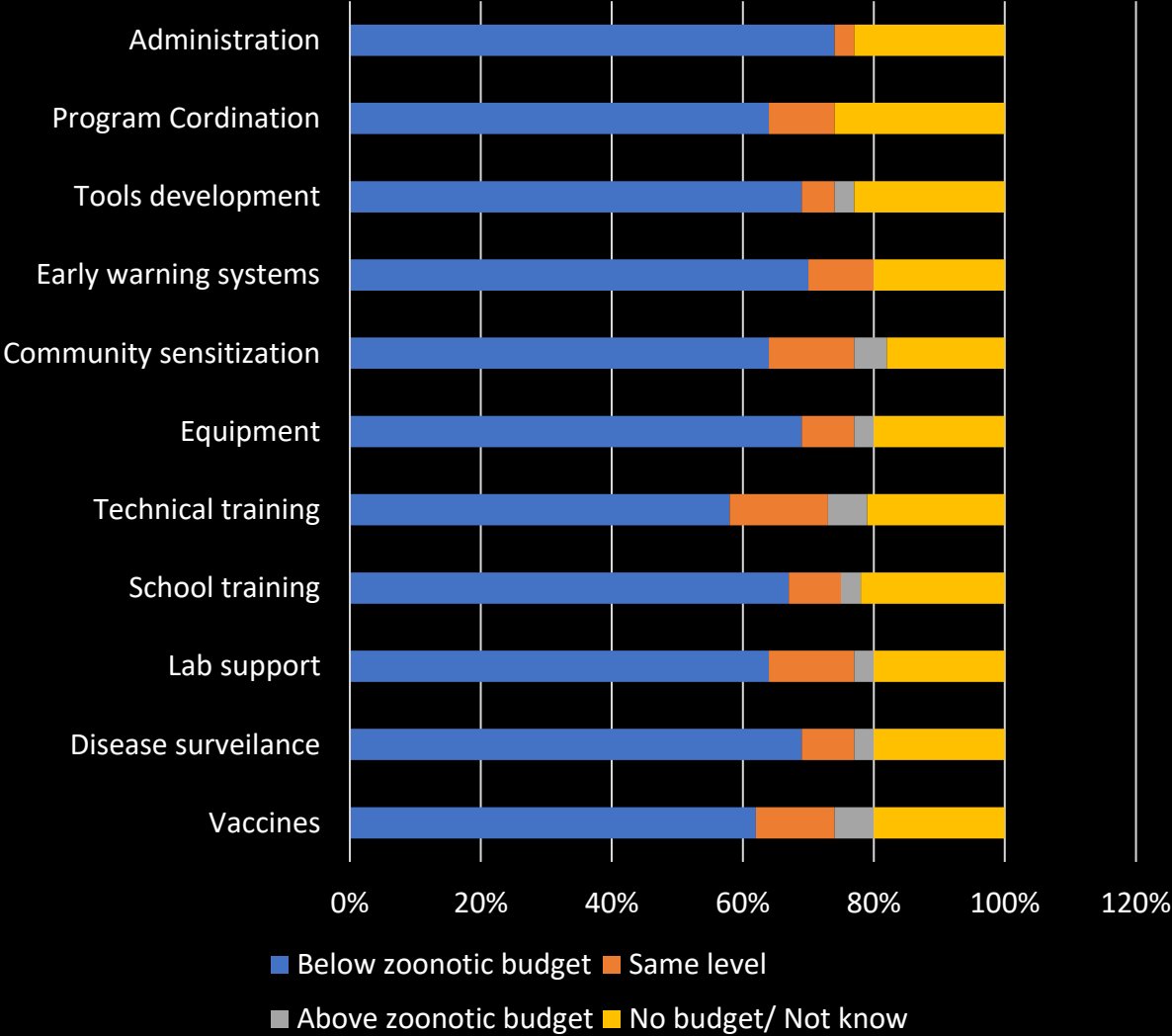
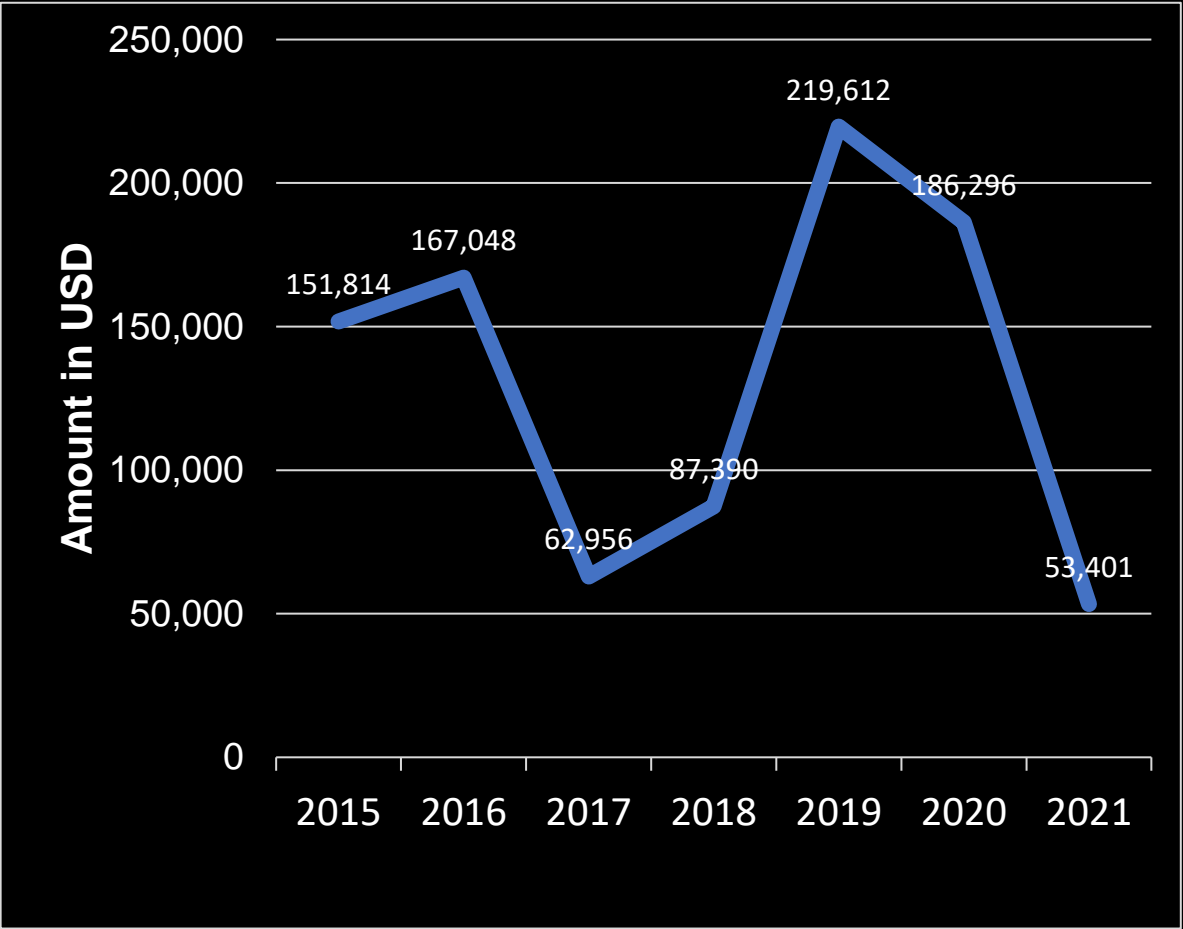


Trend in annual animal disease budget (including zoonotic diseases) between 2015 and 2021 (n=13)

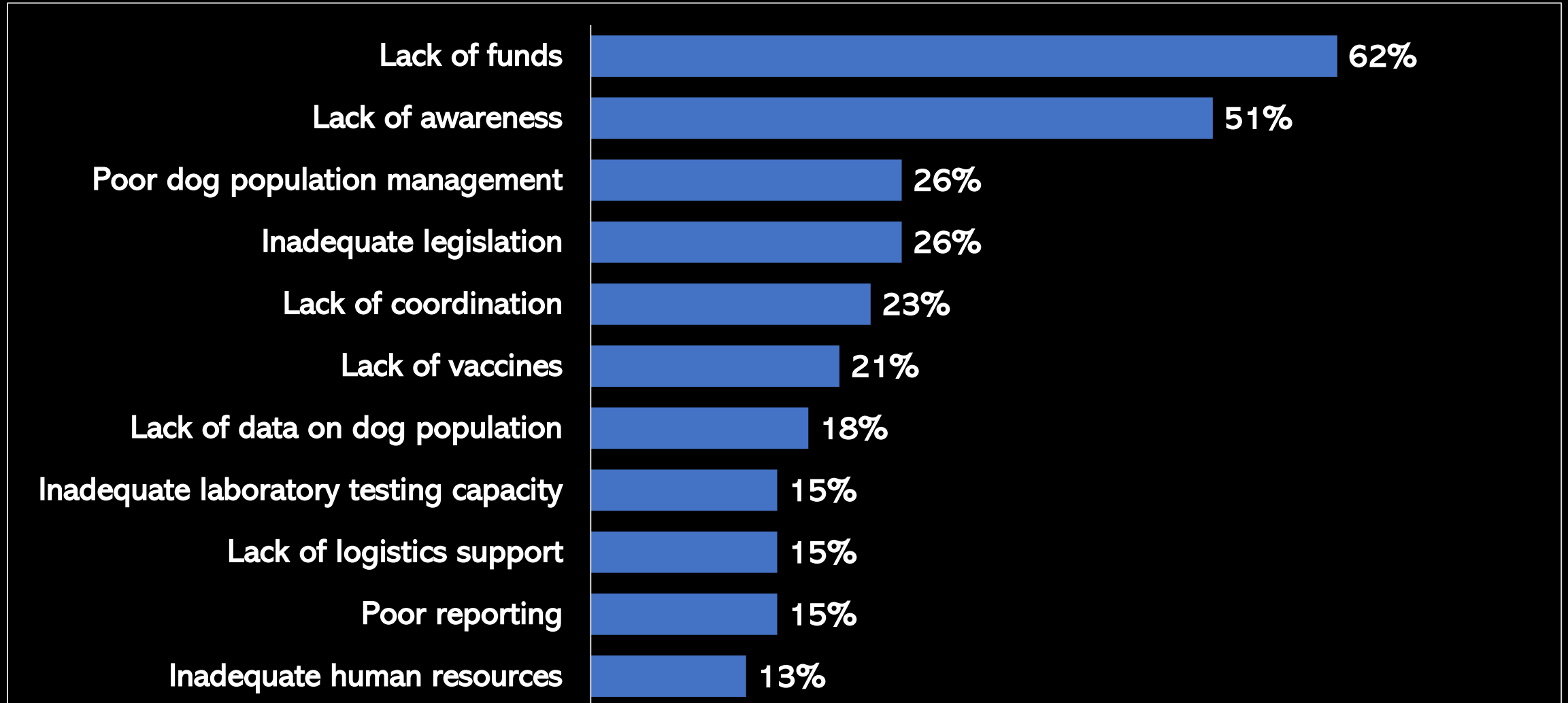


Rabies budges compared to zoonotic diseases

Trend in annual rabies budget between 2015 and 2021, (n=13)

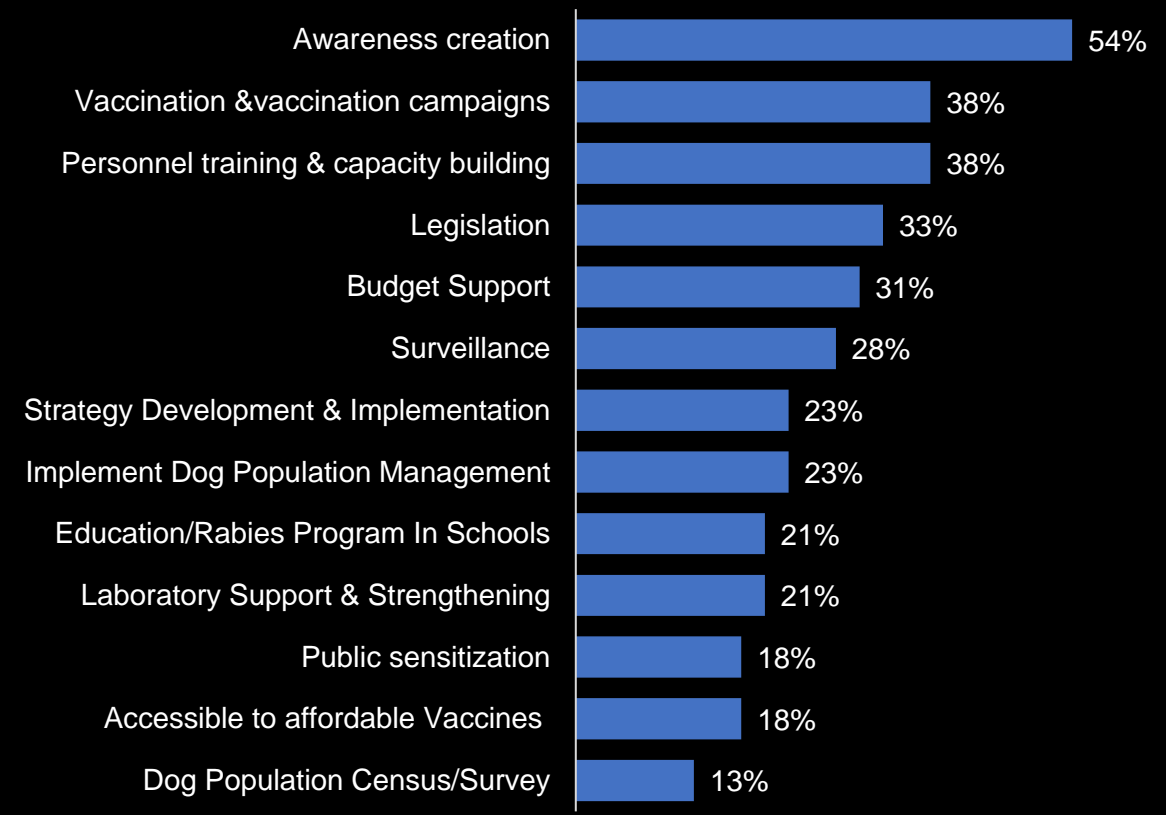


Gaps in current Rabies Elimination Activities

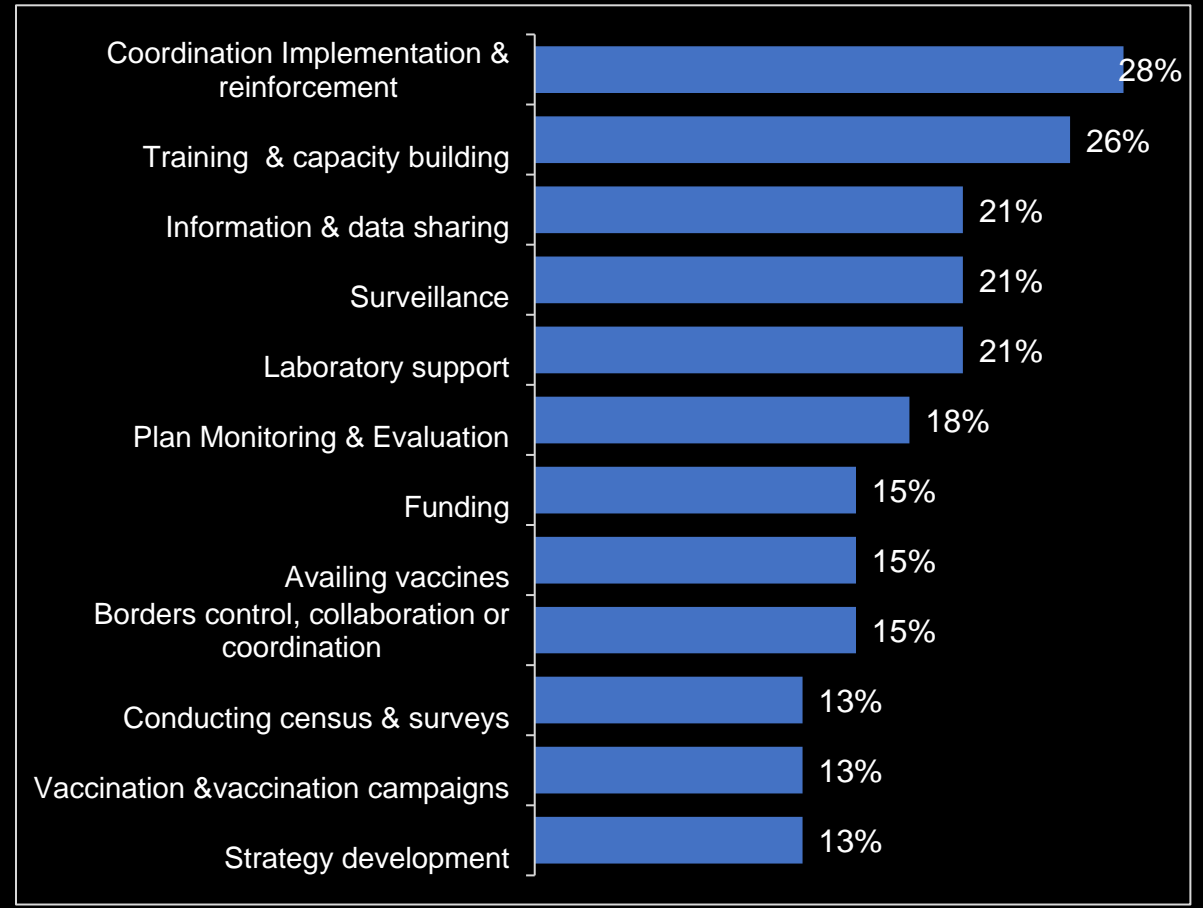


CVOs ranked recommendation

National Levels

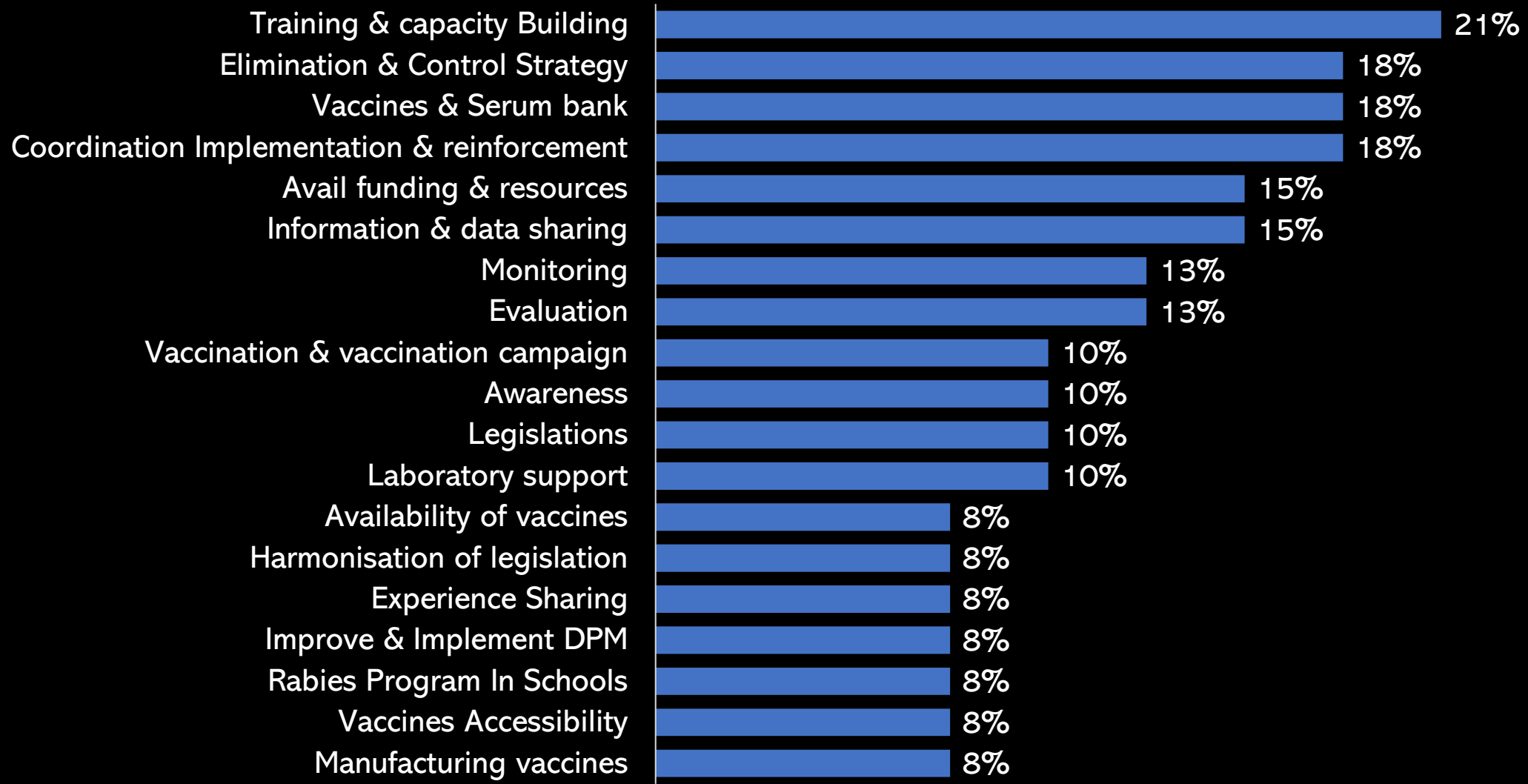


Regional level



CVOs ranked recommendations

Continental level



Study Recommendations

**Political
Advocacy**

Increase
Zoonotic Budgets

Continental &
National Rabies
Elimination
Strategies.

Rabies specific Regulations
to clarify roles &
responsibilities between
OH actors

**Ring Fence funding
for rabies
elimination**

Training &
Education

Gender disaggregated
and vulnerability data

Monitoring &
Surveillance

**Geo-
referenced;
Species- specific
Animal Census**

Research

Coordination

Vaccination

Dogs in Transit
Hunting Dogs

Cross-border
surveillance &
coordination

PrEP & PEP

Dog
Population
Management

Wildlife

Laboratory
mapping &
reagents

Rabies
Awareness

Institutional Policy

1. Develop a continental rabies elimination strategy.
 2. Support national rabies control and elimination strategies
 3. Regional and continental bodies provides technical expertise, enhance coordination, improve leadership for NRE strategies.
 4. Rabies protocols included in transnational boundary disease management at the national, regional and continental levels NOT lumped with other zoonotic diseases.
 5. National level, the relevant public bodies should develop regulations that assign specific roles and responsibilities especially inter-ministerial and inter-departmental coordination in the reporting, information sharing, monitoring and surveillance of rabies elimination strategies.
 6. Improve coordination of national One Health platforms by clarifying the roles and responsibilities of non-state actors.
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• Awareness Creation

1. Create awareness among the relevant parliamentary committees to provide budgetary support for the NRE.
 2. Lobby governments and development partners to increase funding for sufficient supply of rabies vaccine for both dogs and front-line workers.
 3. Create community awareness on dog population management - improving dog welfare, first aid to victims of dog bites, dog registration, fertility control and vaccination compliance.
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Capacity Building

1. Strengthen the lobbying capacity of communities to demand that governments increase funding for rabies elimination.
 2. Strengthen the capacity of border public health and security personnel to effectively undertake rabies cross-border monitoring and enforcement for dogs-in-transit.
 3. Training of veterinary technicians in mass dog vaccinations, dog population management surveillance and reporting within the One Health system.
 4. Training of human health technicians in dog bites management, monitoring, surveillance and reporting within the One Health system.
 5. Map out the national laboratories, select some laboratories as the main rabies diagnostic and testing centres, equip them with cost effective diagnostic tools and train laboratory technicians in rabies diagnostics.
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6. Studies on dog ecology and epidemiology to guide evidence-based rabies elimination programming, monitoring and surveillance.
7. Undertake geo-referenced and species-specific census for livestock, dogs and wildlife for CRE and NRE.
8. Incorporate gender-based programming to achieve over 70% coverage and that no dogs are left behind. *Example: during mass vaccinations, dogs of vulnerable people may be missed out because they are unable to access the service. Furthermore, the interaction between gender and rabies is not taken into account when planning rabies elimination programs.*

Mobilize Resources

1. Governments should increase animal health vote to livestock budget - zoonotic disease ring fence rabies elimination budget.
 2. Development partners to mobilize resources to support the Continental, Regional and National Rabies Elimination Strategy.
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