

Capacity of the **Veterinary Services** to leverage regional GF-TADs

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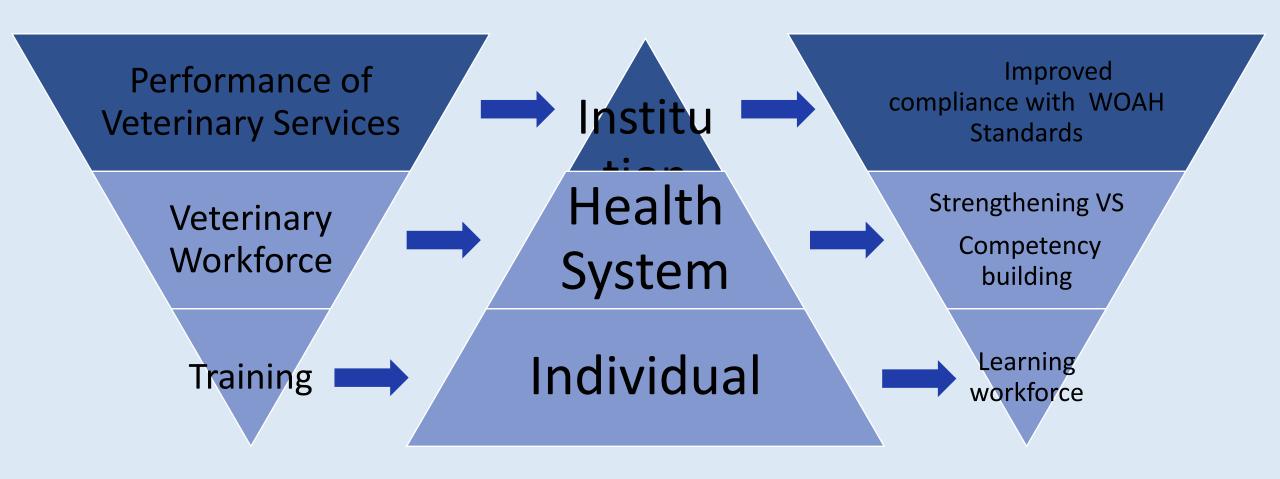
Ms. Oshin Dhand

12th Meeting of the Regional Steering Committee (RSC12) of the GF-TADs for Africa

Mbabane, Eswatini

11 – 13 March 2025

Woah supports capacity building



WOAH Training within Capacity Building

Performance of Veterinary Services (PVS)

Assessing country members and institutions

Training

Personal development and competency enhancement

Improved global health Better WOAH Standards implementation Contribute to strengthening VS critical competencies Competency building Learning workforce

- The **PVS** serves as a baseline for assessing **country members and institutions**, while the **Training** System targets learners and individuals
- The training is a relevant component of workforce development, designed to elevate **knowledge**, **skills** and **competencies**

Path



ORIENTATION

- Orientation Training Workshops
- Lessons Learnt Workshops



TARGETED SUPPORT



- One Health
 Integration (PVS/IHR)
- Veterinary Legislation
- Sustainable Laboratories
- Workforce Development
- Public-Private Partnerships





EVALUATION

- Evaluation: Terrestrial and Aquatic
- Follow-Up
- Self-Evaluation
- Specific Content:
- PPR, rabies, ASF



3 PLANNING

- Gap Analysis
- Strategic Planning
- Workforce Assessment



PVS Pathway: Tools for the good

governance of VS and AAHS



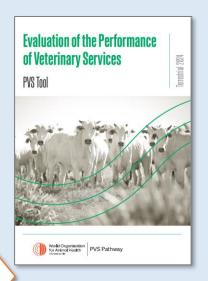


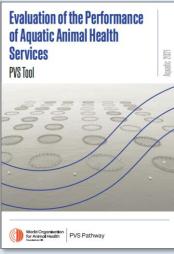
Section 3 of Codes

Quality of Veterinary Services / Aquatic Animal Health Services

Section 3 des Codes

Qualité des Services Vétérinaires / Services de Santé pour les Animaux Aquatiques





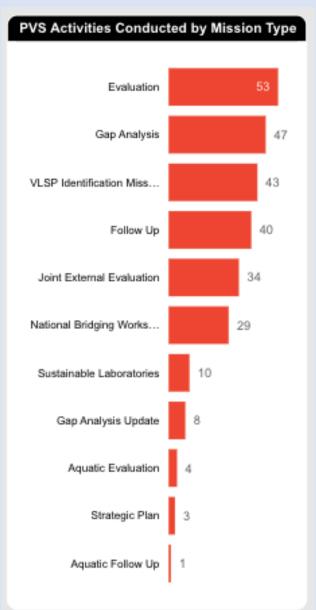


Africa Region: Leading PVS Engagement Globally

Africa leads globally in engagement and re-engagement in the PVS Pathway

- **43**% of all PVS activities occurred in the Africa Region since 2006
 - Best picture of historic and current capacity globally
 - Members optimized engagement for VS benefit
- **100**% of Members engaged in PVS Pathway
 - Wide range of contexts across continent represented
- **92**% of Members reengaged in the PVS Pathway since 2016
 - Performance over time is possible to understand
 - Evaluation and Targeted Support are most popular





insights that strong engagemen t in PVS Evaluation



Africa: PVS Achievement

PVS Achievement measures the percentage of Critical Competencies (CCs) where a country performs at Level of Advancement (LoA) 3, 4, or 5.

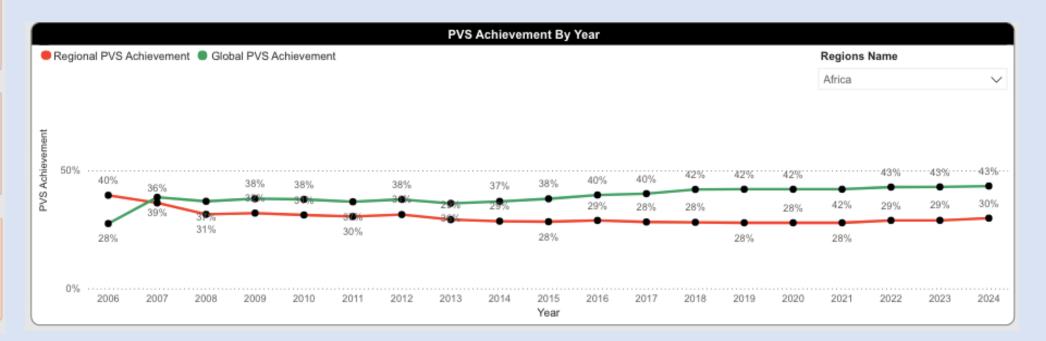


91% Maximum PVS Achievement

30%
Average PVS Achievement

0% Minimum PVS Achievement

- On average, Members in the Africa Region have demonstrated minimal capacity in 30% of PVS Critical Competences, according to their most recent PVS Evaluation, compared to 43% globally
- Since the majority of countries engaged in the PVS Pathway in 2008, the mean PVS achievement has stays stable over time (31% to 30%)
- Achievement ranged from 0% to 91% achievement in the region
- Target = to reach minimal capacity in 100% of PVS Critical Competencies
- There is work to do and investment needed to build capacity of the Veterinary Services



So, what does it mean?

II-4. SURVEILLANCE¹³ AND EARLY DETECTION

DEFINITION

The authority and capability of the VS to determine, verify and report on the sanitary status of their animal populations, including wildlife, in a timely manner.

A. Passive surveillance¹⁴, early detection and epidemiological outbreak investigation

A surveillance system based on a field animal health network capable of reliably detecting (by clinical or post mortem signs), diagnosing, reporting and investigating legally notifiable diseases (and relevant emerging diseases) in a timely manner.

LEVELS OF ADVANCEMENT

- The VS have very limited passive surveillance capacity, with no formal disease list, little training/ awareness and/or inadequate national coverage. Disease outbreaks are not reported or reporting is delayed.
- The VS have basic passive surveillance authority and capacity. There is a formal disease list with some training/awareness and some national coverage. The speed of detection and level of investigation is variable. Disease outbreak reports are available for some species and diseases.
- 3. The VS have some passive surveillance capacity with some sample collection and laboratory testing. There is a list of notifiable diseases with trained field staff covering most areas. The speed of reporting and investigation is timely in most production systems. Disease outbreak investigation reports are available for most species and diseases.
- 4. The VS have effective passive surveillance with routine laboratory confirmation and epidemiological disease investigation (including tracing and pathogen characterisation) in most animal sectors, and covering producers, markets and slaughterhouses. There are high levels of awareness and compliance with the need for prompt reporting from all animal owners/handlers and the field VS.
- 5. The VS have comprehensive passive surveillance nationwide providing high confidence in the notifiable disease status in real time. The VS routinely report surveillance information to producers, industry and other stakeholders. Full epidemiological disease investigations are undertaken in all relevant cases with tracing and active follow up of at-risk establishments.

13 Recommended mading: WOAH Guide to terrestrial animal health surveillance (2014).

14 Other terms for passive surveillance include general surveillance.

Level 1

No capacity

Level 2

Some capacity

Level 3

Minimal capacity

Level 4

Good capacity

Level 5

Excellent capacity



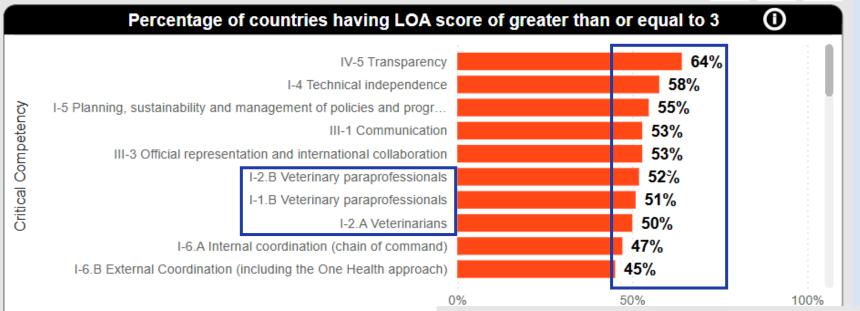
So, what does it mean?

If minimal capacity (LOA=3) is not achieved

- No to little capacity exists in the VS for that CC
- If a critical mass of CC are not achieving minimal capacity, VS may not be able to meet its mission
- Investment in priority areas is needed to boost performance and capacity

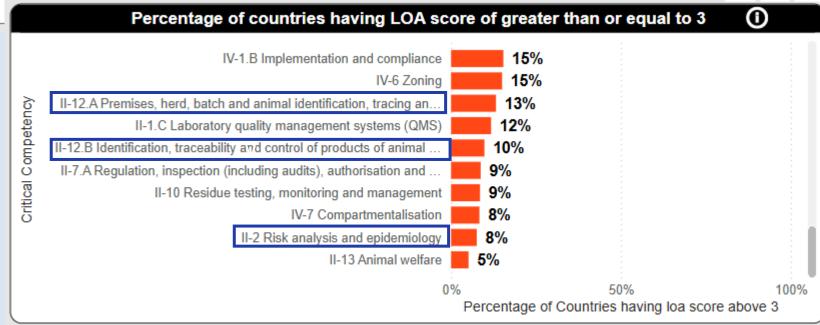


Africa: Levels of Advancement (LOA) Analysis



Critical Competencies with highest percentage of countries with LOA scores ≥3

Critical Competencies with lowest percentage of countries with LOA scores ≥3





So, what does it mean?

If minimal capacity (LOA=3) is not maintained

- Chronic lack of capacity exists in the VS for that CC
- Critical competencies are established from the WOAH International Standards
- If a critical mass of CC are chronically underachieving (never reached minimal capacity) or not maintained (decreasing or fluctuating over time), VS may not be able to meet its mission
- Services for citizens are not met
- Trade and livelihoods suffer

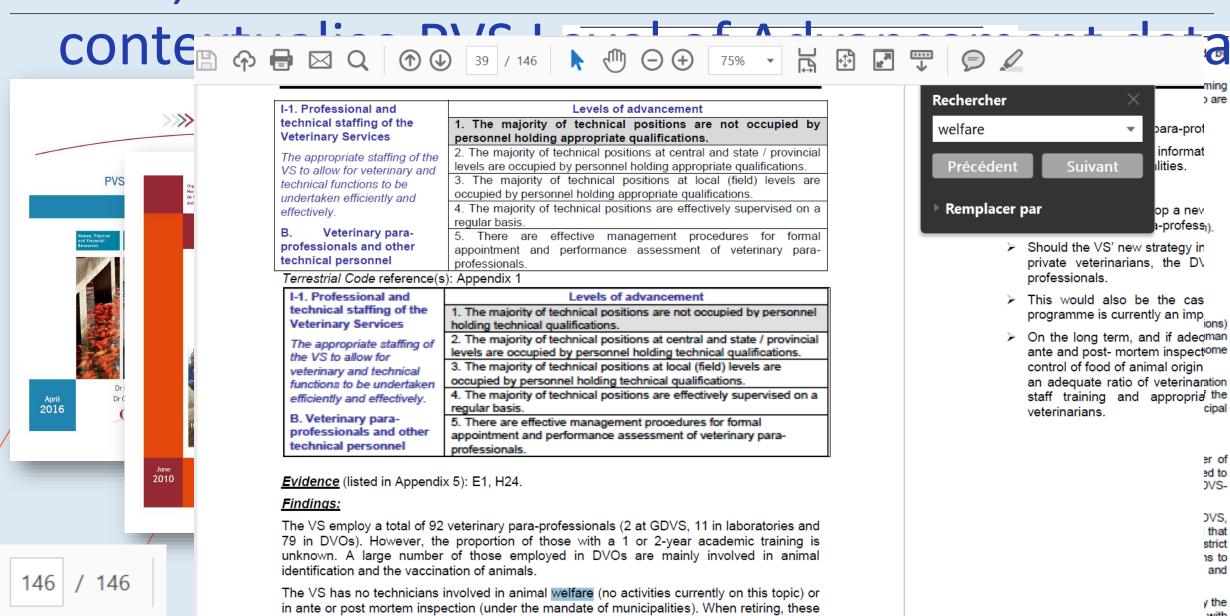
Lack of action can lead to long-term challenges

Disease control and prevention at risk

Animal health at risk

WOAH
International
Standards hard
to implement

Now, a wealth of new data is available to



Veterinarians are fairly well distribut

positions are replaced by veterinary ones.

Methods

Positions occupied by veterinary para-professionals are being gradually replaced by veterinary positions in DVOs.

The number of veterinarians working in the West Bank is likely to increase over the coming years because of the creation of a veterinary college, in addition to the veterinarians who are returning after studying abroad.

Changes:

- Job descriptions are now issued for the VS staff.
- GDVS has no administrative and finance division anymore.
- GDVS personnel have reduced from 11 to 8 veterinarians only.
- Gradual replacement of veterinary para-professionals by veterinarians.
- GDVS started involving private veterinarians in official activities (rabies vaccipal

Strengths:

- Veterinarians hold the key positions.
- Job descriptions exist.

Weaknesses:

- Insufficient number of veterinarians (or universal staff in management functions) at GDVS for Palestine's VS in transition of the voter has to spend additional human resources to reform the VS in additional human resources to reform the VS in additional human resources to reform the VS.
- A large proportion of the control veterinarians are conducting animal vaccination (which could be officient gated to private veterinarians) at the expense of the conduct of other control of views disease surveillance, supervision of municipal slaughterhouse could of VMPs etc.

Recommendations

- While waiting for a new definition of the missions of the VS, a small number of veterinarians should be recruited to fill the gaps between what the VS are supposed to do and what the activities currently are, i.e. without a change in the mandate of GDVS-DVOs.
- In the longer-term, a slightly larger number of veterinarians will be needed at GDVS, while the number of veterinarians employed in DVOs could be sufficient providing that animal vaccination be officially delegated to private veterinarians (under strict supervision from the DVOs) in order to free more time for the DVO veterinarians to better organise animal disease control plans, control the retailing, prescription and usage of VMPs etc.
- The GDVS would also benefit in upgrading the technical management capacity by the addition of one or more non-technical positions to assist the technical staff with operational management, information management etc.

Recommendations Key Recommendations Umbrella Recommendations

Unique raw text narrative written by PVS Experts

Summary of the raw text with an action verb and a main idea

Grouped similar recommendations that can be quantified and prioritised



Africa: Top Recommendations using

- Out of the 1700+ recommendations made to Members in the Africa Region, the most common recommendations are
 - Improve infrastructure & resources of VS
 - Improve access to vet medicines
 - **Training VPP**
 - **Support Vet training & education**
 - Increase veterinarian numbers
 - **Strengthen VS technical & institutional capacities**





So, what does it mean?

If these recommendations are not addressed or acted upon

- Chronic gaps and weaknesses remain
- Chronic lack of capacity exists in the VS for that CC
- If a critical mass of CC are chronically underachieving (never reached minimal capacity) or not maintained over time (decreasing or fluctuating), VS may not be able to meet its commitments

Regional and Global disease eradication, post-eradication, and control efforts are weakened



What is WOAH doing to address these

Chausens Support Targeted Support

- 2. Offering regular Evaluation to check progress
- 3. Structuring PVS Recommendations and other PVS text data to allow for performance monitoring
- 4. Lauching the PVS Recommendations Impact Evaluation in 2025 to understand actions taken
- 5. Leveraging new technologies like AI to better understand trends and link actions taken to larger global and regional frameworks
- 6. Crosswalking PVS data to GF-TADs recommendations to leverage and link efforts at national level to GF-TADs strategic actions
- 7. Measuring strengths and gaps to inform strategic actions
- 8. Advocating for Members to mobilise resources
- 9. Mobilising Members to take action and to address risks

PVS Pathway Programme

THEORY OF CHANGE

The PVS Pathway Programme provides voluntary, tailored supports to Members to externally assess the alignment of their Veterinary Services (VS) with the international standards for animal health and welfare. In doing this, it helps Members identify goals for improvement and provides tools for supporting and monitoring progress.

December 2020 **Impact Activities Outcomes** Inputs Outputs stage Transparency of national VS is increased by Members sharing information Zone of influence **Zone of control** ✓ Information is accessible, objective, accurate, credible, complete (holistic) ✓ VS acknowledged as a global public good
 ✓ Members are willing to change
 ✓ PVS report travels to higher levels than the √ Voluntary, country-led approach √ Funding available Conditions ✓ Credibility of OIE and its standards ✓ Experts available

of success

- ✓ Credibility of the PVS Pathway
- (For some Members) Option of keeping report confidential
- √ VS staff participate
- ✓ Support of OIE regional office
- √ Reports are audience-appropriate
- Stakeholders read/understand the reports Stakeholders know how to use the info
- ✓ OIE communicates success stories
- ✓ PVS Database*

- Delegate
 May require proceeding beyond Evaluation phase (e.g. to Targeted Supports)



WOAH's CAHW initiative

Health Workers

Better understanding and defining the role of community animal health workers as part of strengthening frontline Veterinary Services

Guidelines for Community Animal

ealth Workers

Advancing Community Animal

A new frontier for the WOAH Workforce Development Programme

Health Workers (CAHWs) will be available to all Members, as well as veterinary and continuing education establishments. These guidelines will aid the development of mpetency-based training for CAHWs







Competency and Curricula Guidelines for Community al Health Workers (CAHWs): updates, launch webinars and th



- Strengthening the enabling environment for community animal health workers (CAHWs) through development of competency and curricula guidelines
- Complements work previously done at WOAH in the development of competency and curricula guidelines for both veterinarians and veterinary paraprofessionals
- Partners: Vétérinaires sans Frontières International (Phase 1 and Phase 2) and Ohio State University (Phase 2)
- Competency-based curriculum







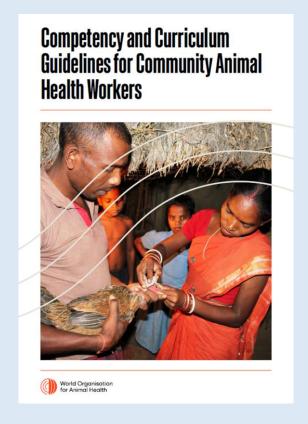


Why CAHWs guidelines?







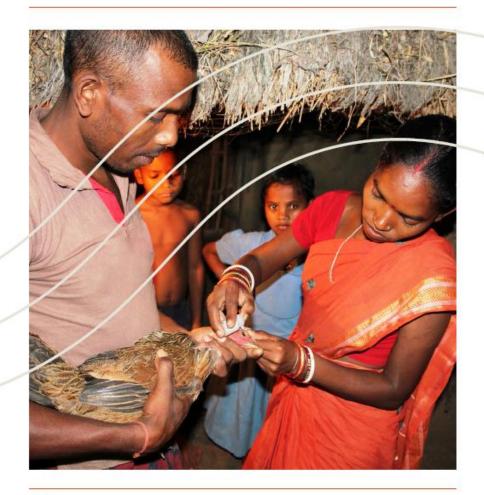


Objectives

- To promote a consistent level of training for CAHWs through the delivery of core competencies.
- To create a basis for VSBs to establish criteria for the qualification and registration of CAHWs to better integrate them into national Veterinary Services

2013 2019

Competency and Curriculum Guidelines for Community Animal Health Workers





The English and French versions of the CAHWs guidelines are now online!



English



French

Thank you

Flickr



www.woah.org

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