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***GF-TADs for Africa
African Swine Fever (ASF)
Standing Group of Experts (SGE)
for Africa***

Fifth Meeting Report



Topic: ASF vaccines and vaccination

14 October 2025

Lome, Togo

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1. Introduction and background to the meeting

African swine fever (ASF) continues to be a growing global concern, extending far beyond its origins in Africa. Despite ongoing prevention and control efforts, the disease remains persistent in both domestic and wild pig populations across multiple regions. As a transboundary animal disease, ASF significantly impacts pig production and productivity, with serious consequences for national economies and the social fabric of pig-producing countries.

In response to this challenge, the *Standing Group of Experts* (SGE) on ASF was formally established in March 2022, following its endorsement by the 11th *Africa Regional Steering Committee* (RSC) of the *Global Framework for the Progressive Control of Transboundary Animal Diseases* (GF-TADs) in October 2021. The SGE comprises founding Member(s) Countries/States that have reported ASF cases: *Cameroon, Côte d'Ivoire, Democratic Republic of Congo, Kenya, Nigeria, South Africa, Togo, Uganda*, and (later) *Cabo Verde*. Mali participated as an observer during the third and fourth meetings, pending formal validation by the RSC.

The inaugural meeting of the SGE ASF in March 2022 endorsed a workplan outlining key thematic areas to be addressed. The second meeting, which was the first thematic session, focused on understanding the live pig and pork value chains in Africa. The third meeting explored biosecurity measures along these value chains, as well as surveillance and diagnostic capacities. The fourth meeting, held virtually, addressed outbreak management, including national response capacities and innovative solutions tailored to regional needs. The fifth and most recent meeting, held in Lomé, Togo, centered on **ASF vaccines and vaccination**. The inclusion of this topic was previously approved during the third meeting in Abidjan.

The meeting was attended by representatives of the following SGE Members (Veterinary Services):

1. Cabo Verde
2. Cameroon
3. Congo (Dem. Rep.)
4. Kenya
5. Nigeria
6. South Africa (online)
7. Togo
8. Uganda

Overall 58 participants attended the meeting, with 50% online participation. Thirty percent of participants (online and in-person combined) were women. The other Members who attended were:

- AU-IBAR
- AU-PANVAC (online)
- ECOWAS (RAHC-WA)
- ECCAS (RAHC-CA)
- SADC Secretariat (FANR)
- FAO
- ILRI (Kenya Campus)
- LNERV (ISRA), Senegal
- NVRI, Vom, Nigeria (and GARA African Chapter)
- OVRI (ARC), South Africa
- WOAH

2. Objectives and narrative report of the meeting

The overall objective of the meeting was to facilitate an exchange on the current status of ASF vaccines and vaccination efforts.

The Specific Objectives were to:

- a. Present the WOAHA standard adopted during the 92nd General Session (GS-92, 2025) concerning ASF vaccine manufacturing, safety, and efficacy testing for authorization.
- b. Share WOAHA guidelines for field evaluation and post-vaccination monitoring of ASF vaccines.
- c. Highlight key outcomes from the previous ASF *Global Coordination Committee* (GCC), the GF-TADs *Regional Steering Committee* (RSC) and SGE meetings in Africa, including concerns related to vaccine quality, registration processes, and considerations for vaccine use in the African context.
- d. Provide an update on the global ASF vaccine landscape and offer guidance tailored to Africa.
- e. Review ASF epidemiology in Africa, including virus characterisation and progress in regional vaccine development.
- f. Facilitate a discussion on establishing a *continental* position regarding ASF vaccines, addressing policy implications, risk management, communication strategies, and public awareness.
- g. Enable presentation on the cross-cutting items related to revisions to the Terms of Reference and the list of technical items, including a review of topics for upcoming SGEs (2025–2026) and membership considerations.

The expected outcomes of the meeting were:

1. Have a clear and shared understanding of the current status of ASF vaccines and vaccination strategies.
2. Clarity on a common continental position on ASF vaccines and vaccination.
3. Strengthened support from regional partners, including FAO and WOAHA, for African Members within the framework of the *Global Framework for the Progressive Control of Transboundary Animal Diseases* (GF-TADs) initiative.
4. Agreement of the proposed amendments to the Terms of Reference and the list of technical items for future SGEs (2025–2026).

3. Programme, as delivered (including deletions and additions)

14 October 2024		
08:30 – 09:00 GMT	Opening of Zoom™ link (for online participants) and admission of participants Confirm interpretation	
Session 1. Welcoming remarks by the Bureau of the Regional Steering Committee and the host country		
09:00 – 09:20	<ul style="list-style-type: none"> African Union – IBAR Food and Agriculture Organisation World Organisation for Animal Health 	<p>Hiver Boussini on behalf of Huyam Salih, President of the GF-TADs for Africa Regional Steering Committee, AU-IBAR, Nairobi</p> <p>Mohammed Shamsuddin Karim Tounkara on behalf of Mbaroug Lô</p> <p>Vice-Presidents</p>
	<ul style="list-style-type: none"> <u>Minister for Agriculture, Fisheries, Animal Resources and Food Sovereignty of the host country (Republic of Togo)</u> 	<p><u>Konlani Dindioque, Chief of Staff, on behalf of Antoine Lekpa Gbegbeni, Minister for Agriculture, Fisheries, Animal Resources and Food Sovereignty.</u></p>
09:20 – 09:30	Adoption of the agenda Objectives and expected outputs of the meeting	Karim Tounkara, Regional Secretary of the GF-TADs for Africa, WOA, Bamako
09:30 – 09:40	MentiMeter™ session	Patrick Bastiaensen, Sub-Regional Representation for Eastern Africa, WOA, Nairobi
09:40 – 09:50	Group photo	
Session 2. Governance aspects and regional updates		
09:50 – 10:20	Current ASF situation in Africa and FAO support	Abebe Wolde, RAF, FAO, Accra
10:20 – 10:40	Outcomes of the latest ASF GCC (2025) and reflections for Africa region	Viola Chemis, Preparedness and Resilience Department, WOA, Nairobi
10.40 – 11.00	Mapped activities of GAC pertaining to ASF vaccines and vaccination, including potential funding opportunities for research on the topic	Pam Luka, GARA Africa Chapter (GAC) Executive Committee, NVRI, Vom

11:00 – 11:30	Health break	
Session 3. Vaccines and vaccination		
<u>12:10 – 12:30</u>	<u>Highlights from previous RSC, SGEs in Africa on the topic of vaccines and vaccination: concerns/quality assessment of vaccines, registration, considerations for use in Africa</u>	Charles Bodjo, Ag. Director, AU-PANVAC, Bishoftu 
11:30 – 11:50	The WOAHA standard adopted at the GS-92 (2025) on ASF vaccine manufacturing, safety and efficacy testing for authorisation	Emmanuel Couacy-Hymann, WOAHA Biological Standards Commission, LIRED, Bingerville
11:50 – 12:10	The WOAHA guidelines for field evaluation and post-vaccination monitoring of ASF vaccines	Gregorio Torres, Science Department, WOAHA, Paris
12:10 – 12:30	Highlights from previous RSC, SGEs in Africa on the topic of vaccines and vaccination: concerns/quality assessment of vaccines, registration, considerations for use in Africa	Charles Bodjo, Ag. Director, AU-PANVAC, Bishoftu
12:30 – 13:00	Interactive question and answer session	Facilitator
13:00 – 14:00	Lunch break	
14:00 – 14:20	Update on the global ASFV vaccine situation and guidance for African context 	María del Carmen Gallardo Frontaura, <i>Centro de Investigación en Sanidad Animal (CISA), Instituto Nacional de Investigación y Tecnología Agraria y Alimentaria (INIA) del Consejo Superior de Investigaciones Científicas (CSIC), Madrid</i>
14:20 – 14:30	ASF epidemiology in Africa, characterization of ASFVs and new vaccine development in Africa	Anna Lacasta, ILRI, Nairobi
14:30 – 14:50	The white paper on ASF vaccines and vaccination and highlights of discussions at GARA 2024 on the topic 	Andriy Rozstalnyy, NSAH, FAO, Rome
14:50 – 15:10	Interactive question and answer session	Facilitator: Karim Tounkara
15:10 – 15:30	Vaccine development and field deployment for safety and effectiveness 	Douglas Gladue, USDA-ARS, Beltsville, Maryland

14:20 – 14:30	<u>ASF epidemiology in Africa, characterization of ASFVs and new vaccine development in Africa</u>	<u>Anna Lacasta and Hussein Abkallo, ILRI, Nairobi</u>
15:30 – 16:00	Discussion: continental position on ASFV vaccines (policy issues, risks, communication and awareness)	Facilitator: Juanita Van Emmenes, ARC - OVRI, Onderstepoort
16:00 – 16:30	Health break	
Session 4. Final deliberations, action points, next meeting		
16:30 – 16:40	Presentation of the draft action points	Rapporteurs (represented by Viola Chemis)
16:40 – 17:10	Discussion	All
17:10 – 17:15	Proposed amendments to the Terms of Reference and to the list of technical items (<i>Review technical topics for next SGEs 2025-2026, Membership</i>)	Patrick Bastiaensen, Sub-Regional Representation for Eastern Africa, WOA, Nairobi
17:15 – 17:20	Dates and venue / format of SGE ASF nr 6	Karim Tounkara, Secretary of the GF-TADs for Africa, WOA, Bamako
17:20 – 17:30	Closing statement by the Chair	<u>Hiver Boussini on behalf of Huyam Salih, Chair of the GF-TADs for Africa Regional Steering Committee, AU-IBAR, Nairobi</u>
17:30	Closing of the broadcast by Zoom™ (for online participants) Departure of participants or transfer to AU-IBAR meeting	

Session 1. Welcoming remarks by the Bureau of the Regional Steering Committee

The session commenced with opening remarks delivered by Hiver Boussini, speaking on behalf of the Director of the *Interafrican Bureau for Animal Resources* (AU-IBAR) of the African Union. Contributions were also made by Karim Tounkara, Regional Representative of the *World Organisation for Animal Health* (WOAH) and Secretary of the Regional GF-TADs Secretariat, Mohamed Shamsuddin, Senior Regional Animal Health and Production Officer at the *Regional Bureau for Africa* (RAF) of the *Food and Agriculture Organization* of the United Nations (FAO), and the Hon. Mr. Antoine Lekpa Gbegbeni, Minister for Agriculture, Fisheries, Animal Resources and Food Sovereignty of the Republic of Togo.

The African Union, through AU-IBAR, extended its sincere appreciation to the Government of Togo for its pivotal role in hosting and facilitating the regional meeting. He noted the success of the event was attributed to Togo's commitment and hospitality, which created a conducive environment for productive dialogue among stakeholders from across the continent. The meeting convened veterinarians and pig value chain stakeholders from various regions of Africa to address the escalating threat of *African Swine Fever* (ASF). The representative of AU-IBAR highlighted the disease's profound impact on food security, economic stability, and the livelihoods of rural communities. ASF continues to challenge the pig industry in Africa, undermining national economies and exacerbating vulnerabilities in food systems.

It was broadly recognized that meaningful progress in ASF control can only be achieved through strong partnerships. AU-IBAR reaffirmed its dedication to collaborative efforts with key partners, including WOA, FAO, *Regional Economic Communities* (RECs) and other relevant stakeholders. These partnerships are essential for mobilising and optimising resources to support ASF research, stakeholder training, and the development of effective diagnostic tools and vaccines. AU-IBAR emphasised the importance of a regional strategy for ASF control, including the formulation of a vaccination plan tailored to the African context. By working together and leveraging resources, AU-IBAR, Member(s) Countries/States, *Regional Economic Communities* (RECs), and partners can enhance the continent's capacity to manage ASF and mitigate its impact on the pig industry and food security.

On his part, the representative of WOA, Karim Tounkara, noted that since the adoption of ASF as a global priority in 2020, the fight against African Swine Fever has gained significant momentum. A major milestone was the convening of a group of experts in Africa in March 2022, aimed at strengthening regional collaboration and technical capacity. This initiative has provided technical support to facilitate the development of national and regional policies, enhanced research collaboration, and promoted cross-border surveillance and diagnostics. A strong emphasis has been placed on biosecurity enhancement, recognizing its critical role in ASF prevention and control. One of the cornerstone strategies developed has been the focus on vaccine development. Recent progress in vaccination approaches has been shared widely, leading to the adaptation of regional strategies that are tailored to the African context. This marks a significant step forward in harmonizing efforts across countries and improving preparedness. He extended WOA's sincere gratitude to the Government of Togo for their warm hospitality in hosting this important meeting. He also acknowledged and thanked the United States Government for their generous funding and support, which made this gathering possible. Together, these efforts reflect a growing commitment to tackling ASF through innovation, collaboration, and shared knowledge.

The representative of FAO, Mohammed Shamsuddin, noted that vaccination against ASF is both timely and urgent. The complexity of ASF's epidemiology, particularly its transmission through human-mediated movement demands a high-quality vaccine that meets internationally recognized standards. FAO continues to support countries in their control efforts, recognizing that the evolving landscape of partnerships and donor support calls for innovative and alternative resource mobilization strategies.

In his remarks, the FAO representative stated that regional control strategies must be mobilised, with strong collaboration between governments and private sector partners. Over USD 7 million have already been invested in vaccine development, underscoring the commitment to finding sustainable solutions. Vaccines are a vital part of the solution, but they must be integrated into a broader strategy that addresses limited surveillance, informal pig trade, and other interconnected challenges. These realities must guide our approach moving forward. Our goal is to build a shared vision; one that is practical, inclusive, and tailored to local contexts. This vision aligns with the broader objective of developing a sustainable agrifood system that supports livelihoods and food security. He mentioned that FAO remains fully committed to supporting the global and regional initiatives against ASF, working hand-in-hand with all stakeholders to ensure a coordinated and effective response.



Picture 1. Group picture © Mariam Ouedraogo (AU-IBAR) 2025.

Mr. Konlani Dindioque, Chief of Staff, on behalf of Mr. Antoine Lekpa Gbegbeni, the Hon. Minister for Agriculture, Fisheries, Animal Resources and Food Sovereignty of Togo, warmly welcomed all participants to the important gathering. He observed that ASF remains one of the most pressing animal health threats on the continent. Its control is complex, and the economic losses it causes are significant. He stated that in Togo, they had experienced outbreaks that deeply impacted their livestock sector and disrupted the pig value chain. In response, the Government of Togo has implemented strategic measures to strengthen surveillance and improve biosecurity. They are also working diligently to establish legal frameworks that will enhance their capacity for disease monitoring and build resilience across the sector. Togo firmly believes that the fight against ASF can only be won through concerted and harmonized efforts. He stated that collaboration across borders and institutions is essential.

On behalf of the Government of Togo, he expressed their sincere gratitude to the group of experts who continue to support this initiative with their knowledge and dedication. He affirmed that Togo remains committed to working with their partners, including WOA, AU-IBAR, FAO, and the *Regional Economic Communities* (RECs), to advance the shared goal of ASF control and eradication. He finished by appreciating all those present, recognising their commitment to the cause.

Session 2. Governance aspects and regional updates

The session started with a presentation on the current status of ASF in Africa and the support provided by FAO. Despite ongoing efforts, the presenter from FAO-RAF recognised that several challenges persist, including: lack of effective vaccines, weak veterinary surveillance systems, limited laboratory diagnostic capacity, high-risk farming practices, including poor biosecurity compliance and free-roaming pigs and informal trade of pigs and pig products. These factors contribute to the continued risk and spread of ASF across the continent.

FAO is actively promoting regional cooperation to manage ASF and other *transboundary animal disease* (TADs). Key actions include:

- Facilitating collaboration among border countries to develop harmonised strategies aligned with regional and continental frameworks;
- Supporting countries through *Technical Cooperation Programme* (TCP) projects, focusing on:
 - a) Strengthening biosecurity;
 - b) Enhancing outbreak management;
 - c) Improving risk communication and awareness.

Some of the country-level support and activities funded by the US *Defense Threat Reduction Agency* (DTRA) are development and validation of national ASF strategies in line with the regional / continental strategies, which have been developed in Benin, Côte d'Ivoire, Ghana, and Nigeria. Additional support has been provided to Kenya and Tanzania through technical assistance including training and capacity building. In Kenya, the national ASF Strategy is to be launched by the Minister in October 2025. Some of the field experiences include the ASF outbreak in Côte d'Ivoire that occurred in 2024 and where about 10,000 pigs died and 65,000 were culled. FAO supported the response activities through the distribution of biosecurity kits, training on stamping-out, in coordination with the *Inter-profession Porcine Côte d'Ivoire* (INTERPORCI) private sector association. In Ghana and Kenya, FAO provided technical support for laboratory capacity enhancement following government requests due to recurrent outbreaks. Cross-border collaboration meetings were organised between Ghana and Côte d'Ivoire to strengthen regional coordination. Nonetheless, outbreak response continues to face challenges. An example was given of Côte d'Ivoire that has a compensation decree in place but was hindered by funding shortages and delayed payments. In Cameroon, the presenter raised concern over low disease notification, with calls for enhancing community trust-building whereas in Kenya, ASF transmission is linked to wildlife transmission, hence complicating epidemiology of managing ASF.

The presentation by the representative of WOA and the Regional Secretariat on outcomes of the latest ASF *Global Coordination Committee* (GCC, May 2025), highlighted the contributions of the SGE as a technical forum across the regions towards advancing the objectives of the Global Initiative. The SGEs promote regional coordination, technical exchange, and harmonised control efforts. She mentioned the *Global Initiative* (GI) on ASF which was established under the GF-TADs mechanism of FAO and WOA and was launched in 2020 to support global control of ASF. The initiative is guided by three major objectives which are to:

1. Improve country capacity to prevent, respond to, and eradicate ASF.
2. Establish effective global coordination and cooperation.
3. Facilitate business continuity in the pig sector.

Reflecting on the discussions of the 2024 GCC, the presenter informed the meeting that the methodology was to allow regions globally reflect on the three set strategic scenarios for ASF management in the coming 3 - 5 years, i.e.

1. *Deterioration* which implies uncontrolled spread of ASF, poor surveillance and illegal vaccine use.
2. *Living with the disease*, meaning containment strategies in place, community measures, partial but informed vaccine use.
3. *Elimination* infers existence of strong surveillance, quality vaccines, effective control measures.

The regional perspectives were gathered using interactive approaches with Africa's selected strategic scenario being "*Living with the disease*". This was also informed by the realities of ASF epidemiology. The region's aspiration is therefore clearly and univocally to improve biosecurity, surveillance, diagnostics capacity, movement control, legislation, and coordination.

The GCC of May 2025 reflected on the strengths of the GI, areas for improvement and regional priorities. The strengths of the GI can be summed up as: raising global awareness on ASF, facilitating a unified framework for action, encouraging regional cooperation and expert networks and supporting the development of regional ASF strategies and national plans. The identified areas for improvement were:

- a) Vaccine development: accelerate research and development tailored to regional profiles and share technical information.
- b) Value chain analysis: understand transmission risks, guide biosecurity and trade policies.
- c) Communication and transparency: share updates, challenges, and innovations.
- d) Capacity building: strengthen Veterinary Services, improve risk communication, and community engagement.

The regional priorities for Africa include the development and implementation of country-specific strategies, investment in control, and public awareness. The meeting was informed that the GI is currently under review and that a roadmap for its finalisation has been shared.

The presentation by the Chair of the *GARA Africa Chapter (GAC)* of the *Global ASF Research Alliance (GARA)*, based at NVRI, Nigeria, informed the meeting that GAC was launched in February 2023 to contextualize and domesticate research activities related to ASF across Africa. The initiative brings together researchers from 16 countries and serves as a collaborative platform for ASF researchers to share knowledge, align strategies, and strengthen regional capacities. An analysis of **Scopus** data reveals a low volume of ASF-related research outputs originating from African institutions. This highlights a critical gap in regional scientific contributions to ASF control and underscores the need for increased investment in research and capacity building. The key objectives of GAC include:

- a. Contextualizing GARA (*Global ASF Research Alliance*) goals for the African context.
- b. Promoting collaboration among African researchers and institutions.
- c. Leveraging expertise from regions with advanced ASF control experience.
- d. Supporting vaccine research and development, surveillance, and laboratory capacity.

GAC has undertaken the following core activities:

- Scientific seminars and general assemblies to foster knowledge exchange;
- Stakeholder engagement to align national and regional priorities;
- Collaborative research focused on surveillance and training of national laboratories and
- Capacity building and training, in collaboration with the *Onderstepoort Veterinary Research Institute (OVRI)*, a WOAHA Reference Laboratory for ASF.

The initiative is keen on partnerships and collaboration and aims to coordinate closely with AU-PANVAC for vaccine evaluation and harmonization of standards.

The presenter mentioned that in the region, the *International Livestock Research Institute* (ILRI) is actively engaged in ASF vaccine development. However, current efforts are primarily focused on genotypes I and II, with limited understanding of the broader genotype landscape across Africa.

To strengthen vaccine development and ASF control, the following areas require urgent attention:

- Genotype circulation mapping and surveillance,
- Standardization of vaccine evaluation protocols,
- Capacity building and training of national laboratories,
- Harmonization of safety and efficacy assessments,
- Support for evidence-based policy development, and
- Promotion of open data sharing, particularly genomic data, to enhance transparency and collaboration.

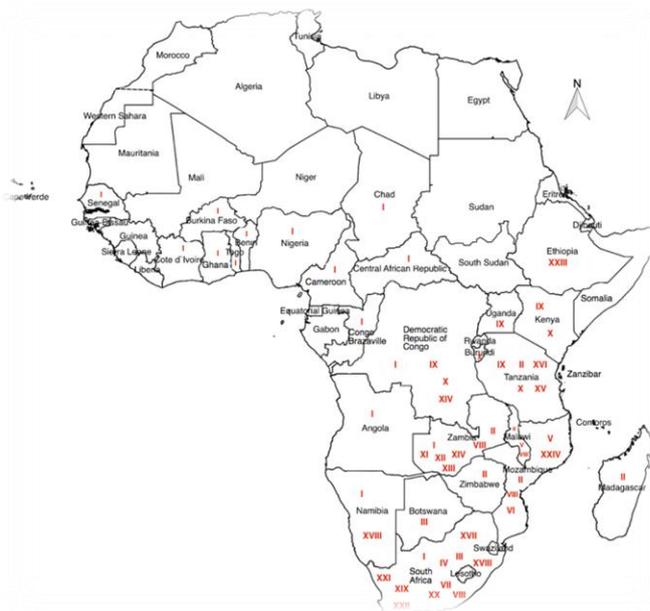
The GAC Chair further recommend the need to encourage regional participation in ASF vaccine trials to ensure relevance and effectiveness across diverse contexts, enhance information sharing with national and international bodies to align efforts and avoid duplication, engage young researchers through targeted programmes and mentorship to build a sustainable research pipeline and promote open access to ASFV sequence data, in coordination with the WOAHA Reference Laboratory Network for ASF. He noted the need for funding and technical assistance to advance in ASF research.

The discussion that followed both presentations emphasised that current vaccine development efforts are primarily focused on ASFV genotypes I and II. However, there is limited knowledge regarding the efficacy of these vaccines against other circulating genotypes across Africa. This presents a significant gap in ensuring broad-spectrum protection and effective disease control. There is an urgent need to establish a comprehensive repository and catalogue of ASFV genotypes present across all African regions. This would support targeted vaccine development, enable harmonised surveillance and monitoring and facilitate regional and international data sharing. The meeting recognised that effective control of ASF in Africa requires regionally tailored strategies, including cross-border surveillance as a core component of ASF control frameworks, strengthened coordination among neighbouring countries to detect and respond to outbreaks swiftly and integration of genotype data into national and regional response plans. The meeting further stressed the need to foster deeper partnerships across countries, institutions, and research networks to enhance coordination and knowledge exchange on ASF control. In addition, the audience discussed the need to invest in research initiatives that improve understanding of ASF epidemiology, genotype distribution, and surveillance systems, particularly in underrepresented regions. It was also suggested to explore innovative and sustainable approaches to involve private sector stakeholders in ASF-related compensation schemes, especially in resource-limited settings.

The details of compensation are further discussed in the [Report of the Fourth SGE on ASF on Outbreak Management](#).

Session 3. Vaccines and vaccination

The Director of the *Pan-African Veterinary Vaccines Centre* of the African Union (AU-PANVAC) delivered a presentation highlighting key discussions from previous *Regional Steering Committee (RSC)* and *Standing Group of Experts (SGEs)* meetings in Africa on vaccines and vaccination. The presentation focused on concerns related to vaccine quality assessment, registration processes, and considerations for their use within the African context. He recalled the recommendation from the 2022 Nairobi meeting, which emphasized the need for appropriate evaluation of any new ASF vaccines with AU-PANVAC support, in alignment with WOAHA standards, a recommendation that remains relevant in 2025. The presenter provided scientific context, noting that ASF virus strains are currently classified into 24 genotypes (I to XXIV), all associated with the disease. While most genotypes have been linked to ASF outbreaks across Sub-Saharan Africa, Genotype I continues to dominate in Central and West Africa. He outlined key challenges, including potential recombination events, difficulties in matching field strains with vaccine strains, genetic instability of vaccines leading to changes, and the risk of reversion to virulence.



Map 1. Circulation of various genotypes in ASF affected African countries. Courtesy of AU-PANVAC.

Regarding vaccination effectiveness, he stressed the importance of evaluating vaccine performance under field conditions through an independent advisory committee, free from conflicts of interest in vaccine production or distribution. He further highlighted AU-PANVAC's ongoing efforts to support harmonization of vaccine registration and regulation across Africa and urged *Chief Veterinary Officers (CVOs)* to inform AU-PANVAC of any existing vaccines already in use to ensure proper registration and regulatory oversight.

The presentation by the President of the WOAHA Biological Standards Commission (based at LIRED, Bingerville, Côte d'Ivoire) focused on the WOAHA standards adopted at the 92nd General Session (GS-92) in May 2025, which established comprehensive guidelines for ASF vaccine manufacturing, safety, and efficacy testing as prerequisites for (market) authorisation. These standards aim to ensure that any ASF vaccine used globally meets rigorous requirements for quality, purity, and stability, while addressing critical concerns such as strain matching and risk mitigation. By setting these benchmarks, WOAHA provides a framework for countries to evaluate vaccines consistently and transparently, safeguarding animal health and supporting effective disease control strategies.

The presenter emphasised that modified live vaccines, while useful, are not perfect. These vaccines can shed virus, leading to some transmission to in-contact pigs and the environment, and they do not provide complete protection against field strains. Nevertheless, they have demonstrated the ability to reduce clinical signs and prolong protection, making them suitable for use in endemic areas to lower disease incidence and as an emergency response in newly infected regions. The expert reiterated the standing recommendation that African countries should not import ASF vaccines unless they meet WOAHA standards. He outlined minimum requirements, including absence of cross-protection, prohibition of

continuous cell lines for virus growth, and proven immunogenicity. Key complications such as chronic signs, shedding, and horizontal transmission were noted. The WOAHA guidelines unanimously approved in May 2025 cover safety, purity, and quality, including vaccine stability and strain matching. Safety testing requires no local or systemic reactions in young pigs, no increase in virulence, and no anomalies in newborns from vaccinated pregnant sows. Vaccinated piglets should also remain free of fever during trials.

The WOAHA presentation by the Head of the WOAHA Science Department, complemented earlier discussions by introducing detailed guidelines for field evaluation and post-vaccination monitoring of ASF vaccines. It was emphasized that vaccination without robust surveillance will not achieve effective disease control and that only high-quality vaccines complying with international standards should be deployed. The guidelines provide practical tools, including decision trees, to assist countries in designing studies, adapting protocols to local contexts, and promoting transparency and data sharing. These measures are essential for generating evidence to confirm vaccine quality and effectiveness. Post-vaccination monitoring remains critical to ensure that vaccines perform as intended under real-field conditions. WOAHA standards advise generating strong evidence for vaccine approval and maintaining continuous monitoring after deployment. Ultimately, countries globally must use only registered vaccines that meet WOAHA standards, conduct thorough field evaluations, and share data to strengthen both regional and global ASF control strategies.

The presentation by another WOAHA Reference Laboratory for ASF, i.e. the *Centro de Investigación en Sanidad Animal (CISA), Instituto Nacional de Investigación y Tecnología Agraria y Alimentaria (INIA)* in Madrid, Spain, provided an update on the global ASF vaccine situation and offered guidance for its application in the African context. ASF currently affects 68 countries worldwide, with the pandemic driven primarily by Genotype II strains and a tendency toward endemicity in several regions. The uncontrolled spread of ASF is largely attributed to low biosecurity measures, and the virus's complex biology presents significant challenges for vaccine development. ASFV has a large and complex genome, lacks neutralizing antibodies, evades immune responses, and infects immune cells, making effective vaccination difficult. Historical approaches such as inactivated vaccines have failed to provide adequate protection, while subunit and DNA vaccines remain promising but with incomplete solutions requiring further research. *Live attenuated vaccines (LAVs)* have emerged as the most effective candidates since 2018, offering strong protection through genetic modification of virulent strains. However, achieving an optimal balance between safety and efficacy remains a challenge, and the development of stable DIVA-compatible (*differentiating infected from vaccinated animals*) prototypes is a priority. Field experience from Vietnam, where LAVs such as NAVET-ASFVAC™ and AVAC's ASF-LIVE™ have been deployed, shows protection rates of 93 – 95% under official supervision, but uptake remains limited due to cost, logistics, and confidence issues.

The Designated Expert highlighted critical constraints and risks associated with ASF vaccination, particularly for Africa. Current vaccines are live attenuated and may cause virus shedding, adverse reactions, and reversion to virulence, while the absence of validated DIVA tests complicates differentiation between vaccinated and infected pigs. In Africa, where ASF is endemic and multiple genotypes coexist, these challenges are amplified by limited diagnostic capacity, overlapping diseases (co-infections), and low farm biosecurity. Cross-protection is limited, and vaccines are generally strain-specific, increasing the risk of recombination between vaccine and field strains. Effective vaccination strategies (if and when adopted) in Africa must therefore include strict veterinary supervision, clear case definitions, and laboratory confirmation through PCR or sequencing. Vaccination campaigns should ideally use DIVA-compatible vaccines supported by validated molecular and serological tests to enable monitoring and traceability. Practical indicators of success would include reduced mortality, faster farm recovery, and decreased virus detection in tissues or contacts. The expert concluded that vaccination should be considered a complementary tool, not a substitute for basic prevention measures, and should

be accompanied by robust biosecurity, surveillance, and regulatory oversight to ensure safety and effectiveness.

The representative of the NSAH, FAO (in Rome) presented and discussed the “White Paper on ASF Vaccines and Vaccination” and informed the meeting that the paper does not recommend *for* or *against* vaccination but provides guidance for evidence-based decision-making and strategic considerations for African countries.

While some countries have developed standards for ASF vaccination, it is advised to wait for broader global validation of vaccines before implementation. Vaccination should only occur under official control programmes and not as voluntary measures. A critical component of decision-making is genomic surveillance and epidemiological data. Case studies, such as those from Vietnam, have revealed significant risks, including recombinant viruses—up to 90% in some analyses—underscoring the need for robust monitoring systems. Training stakeholders across the value chain to recognize clinical signs and report cases remains essential. Vaccination strategies must be informed by surveillance data, strain matching, and epidemiological investigations. Importantly, vaccination cannot replace good biosecurity practices, which remain the cornerstone of ASF prevention.

For endemic countries, vaccination may support preservation of animal resources where movement control and resources are limited. However, DIVA capability is critical. If unavailable, intensive surveillance must be maintained. High-risk countries should adopt similar evaluation frameworks and consider barrier or ring vaccination strategies alongside vaccination within control zones. For ASF-free countries, risk assessment should guide any vaccination decision, ensuring that preventive measures do not compromise disease-free status.

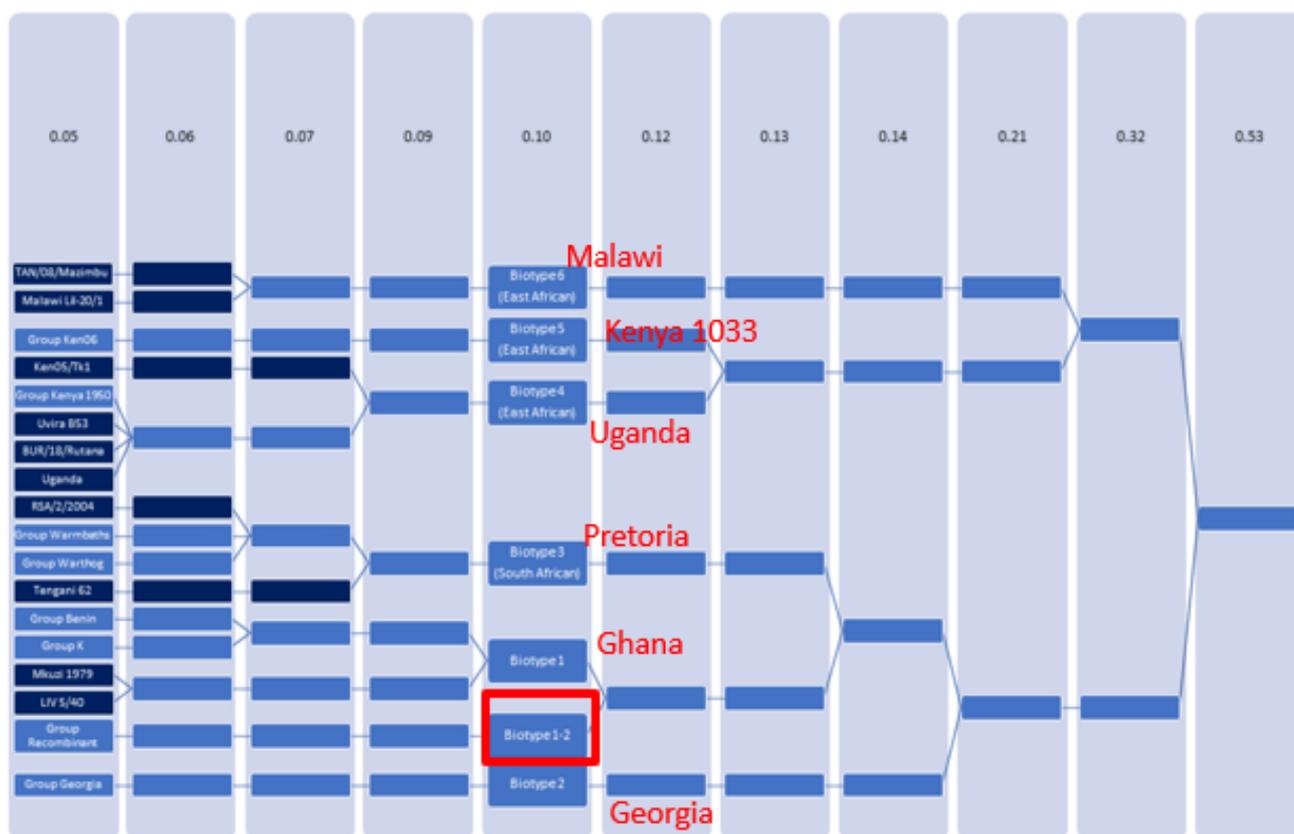


Fig. 2. Cross-Protection of NAVETCO I177L using biotype as a predictive model.
 Courtesy of Douglas Gladue, Genomics and Vaccines, LLC

The former Senior Research Scientist of the *US Department of Agriculture – Agricultural Research Service (USDA-ARS)*, currently Vice President of Veterinary Pharmaceutical Development at Seek Labs, Founder of Genomics and Vaccines, LLC, and Director of the Global Alliance for African swine fever Genomics Center, shared insights on vaccine development and field deployment for assessing safety and efficacy, focusing on live attenuated ASFV vaccines for widespread use. A key concern highlighted was the absence of standardized guidelines, which has raised questions about vaccine implementation. Through biotyping, seven distinct ASFV biotypes have been identified, and biotyping tools, publicly available are now being used as predictive models for vaccine evaluation and cross-protection potential. Field trial results were presented, showing that fatalities observed were primarily linked to mycotoxin syndrome rather than vaccination, and no virus shedding occurred when strict biosecurity measures were applied. The study demonstrated no significant difference between vaccinated and control groups, reinforcing that live attenuated vaccines can be safe when matched to outbreak strains and combined with strong biosecurity. Additionally, in vitro validation of gene knockout (SL_1.52) was successfully conducted at Seek Labs, supporting ongoing efforts to optimize vaccine safety and performance.

The joint presentation by the International Livestock Research Institute (ILRI) focused on the ASF epidemiology in Africa, characterisation of ASF viruses, and progress in new vaccine development within the region, comparing the vaccine efficacy of candidates based on genotype II, developed by the Pirbright Institute and USDA, against African circulating strains belonging to different genotypes/biotypes. The ILRI team emphasised the concept of homologous protection and the need to consider regional vaccines tailored to local ASFV genotypes. Surveillance was highlighted as a critical tool for determining which vaccines should be deployed, ensuring alignment with circulating strains and epidemiological patterns. The presentation also addressed the safety and efficacy of ASFV-Ke-delta, a single-gene deletion vaccine candidate based on genotype IX. Experimental results demonstrated 100% attenuation and complete protection against challenge with the wild-type virus, marking a significant milestone in ASF vaccine research in Africa. These findings underscore the importance of continued genomic characterization, regional vaccine development, and robust surveillance systems to guide effective vaccination strategies.



Genotype I



Genotype II, III, IV, V, VI, VII, XIX, XX, XIII



Genotype VIII, XI, XII, XIII, XV, XVI, XIV



Genotype IX, X

Map(s) 2. Distribution of (clusters of) ASF genotypes in Africa, by region. Maps courtesy of ILRI.

The plenary bit of the meeting ended with a facilitated discussion, moderated by the representative of the WOAHA Reference Laboratory at the ARC - OVRI, Onderstepoort, South Africa, and focused on defining a continental position on ASF vaccines, highlighting associated risks, policy considerations, and the importance of communication and awareness. The moderator emphasised the need for harmonised regional approaches to vaccine implementation and the development of region-specific policies within Africa's *Regional Economic Communities* (REC). Participants noted that while ongoing research on ASF vaccination continues, socio-economic factors such as affordability and awareness do not always guarantee adoption. The African Union reiterated its commitment to strategic partnerships with ILRI and the Reference Laboratory at OVRI to support the development of high-quality vaccines for disease control.

The key discussion points included vaccine availability and adoption, stressing the need to influence research agendas so that vaccine prototypes reflect Africa's epidemiological context and integrate vaccination into comprehensive disease control plans. Policy priorities identified were harmonised regional implementation, integration within existing prevention strategies, compliance with WOAHA standards, and the development of DIVA diagnostics. Risks associated with ASF vaccination include partial protection, unforeseen complications, and socio-economic impacts. Communication and awareness strategies must ensure transparency, timely and accurate information, multi-stakeholder engagement, and the establishment of community-based surveillance networks. The role of the private sector was also highlighted as critical in supporting vaccine access, awareness, and implementation.

In conclusion, Member(s) Countries/States were strongly encouraged to ensure that any new ASF vaccine undergoes proper evaluation through AU-PANVAC, aligned with WOAHA standards, before authorisation or distribution. Countries are advised not to import the currently available commercial ASF vaccines, as these are not effective for the region. Vaccination should only be implemented under well-defined official control programmes and must *complement*, not *replace* existing biosecurity and ASF control measures. Each country should clearly define its needs regarding vaccination, use only registered vaccines when available, and implement strict veterinary oversight. This includes mandatory field evaluation, continuous monitoring, and laboratory confirmation through PCR and sequencing to verify vaccine effectiveness and detect potential risks such as shedding, reversion to virulence, or recombination. DIVA-compatible vaccines and diagnostics are essential for traceability and long-term safety, while strengthening veterinary services through training and maintaining robust surveillance remain critical components of disease control.

Furthermore, Member(s) Countries/States should share experiences transparently, engage WOAHA reference laboratories for technical support, and ensure that vaccination strategies are integrated into comprehensive disease control plans. Communication and awareness efforts must involve all stakeholders, including the private sector, to promote clarity, trust, and compliance. Demand for vaccines should originate from countries based on evidence and risk assessment, and vaccine manufacturers must be actively involved in policy discussions. Ultimately, any future use of ASF vaccines should be guided by harmonised regional policies, socio-economic considerations, and a thorough risk-benefit analysis to ensure safety, efficacy, compliance, and sustainability.

Session 4. Final deliberations, action points, next meeting

A key outcome of the meeting was the recognition of the urgent need to secure sustainable funding for ASF-related research and capacity building. This includes investment in the development of effective vaccines, improved diagnostic tools, and comprehensive training for stakeholders across the value chain. Participants also emphasized the necessity of a harmonized regional strategy for ASF control, including the formulation of a robust vaccination plan. AU-IBAR, in collaboration with its Member(s) Countries/States, *Regional Economic Communities* (RECs), and international partners, reaffirmed its commitment to supporting the implementation of the regional strategy.

In addition, Members of the ASF SGE deliberated and agreed the following:

Recognising that :

- a) There are currently no ASF vaccines that fully meet the WOAHA international standards for safety, efficacy, purity, and prior licensing;
- b) DIVA (*Differentiating Infected from Vaccinated Animals*) compatible and next-generation vaccines are essential for traceability, safety and long-term protection. DIVA capability is not available in any of the currently licensed vaccines, complicating disease surveillance and control post-vaccination.
- c) Any future use of the vaccine candidate should be based on a thorough risk benefit assessment considering all safety and efficacy features as well as the vaccination scenarios envisaged
- d) Vaccination effectiveness should be evaluated based on performance in real-field settings and preferably with involvement of independent technical institutions
- e) *Live attenuated vaccines* (LAVs) are currently the most promising ASF vaccine candidates, offering strong protection against homologous strains, but exhibiting very limited cross-protection against genetically distinct variants.
- f) All currently licensed vaccines are based on genotype II, whereas the Africa region hosts 24 distinct genotypes.
- g) Reversion to virulence and recombination risks are real and documented and may have a continental and global impact. Field monitoring and genomic surveillance in line with international standards are critical to detect and mitigate these risks.

The Members of the ASF SGE strongly encourage :

a) Member(s) Countries/States in Africa

- **as of now (October 2025):**
 - to ensure appropriate evaluation of any new vaccine through AU-PANVAC, based on WOAHA standards before granting any (marketing) authorization for its use or distribution.
 - to be vigilant and not to import ASF vaccines, not conduct vaccinations as currently available commercial vaccines are not safe and not effective against the genotypes circulating in the region.

▪ **as and when ASF vaccines are made available:**

- Member(s) Countries/States should monitor for, and ensure that only vaccines registered for use, and that meet WOAHA standards are used within their territories.
- Member(s) Countries/States to ensure mechanisms in place for field evaluation and vaccination monitoring based on guidance provided by AU-IBAR, AU-PANVAC, FAO and WOAHA and should refrain from such evaluations until such regional and international guidance is available.
- Member(s) Countries/States note that vaccination can be counterproductive in settings with poor biosecurity (which increases the risk of virus circulation and hampers data reliability) and in lack of untraceable pig populations
- Member(s) Countries/States should recognise that vaccination strategies complement, and must not replace, strong biosecurity and other complementary ASF control measures. Implementation requires controlled vaccination areas and strict Veterinary Authority supervision.
- Veterinary authorities of Member(s) Countries/States should oversee vaccinations, based on knowledge of ASF disease spread and ASFV sequencing.
- Member(s) Countries/States implement well defined official control programmes rather than voluntary vaccinations without monitoring by the authorities.

b) AU-PANVAC

- to work with Member(s) Countries/States to confirm there is not fraudulently or unauthorized ASF vaccines circulating within countries

c) AU-IBAR, AU-PANVAC, FAO, and WOAHA

- to continue supporting research on ASF vaccine development and or validation in Africa.
- to continue sensitizing African Member(s) Countries/States on risks with importation of untested vaccines of unknown quality into Africa.

d) GARA Africa Chapter (GAC)

- to catalogue ASF genotypes across Africa to guide vaccine development and selection.

e) ILRI

- to continue research on their genotype IX ASF vaccine candidate and conduct cross-protection studies against other genotypes.

It was also agreed that the regional GF-TADs secretariat contact Ethiopia and Mali, which did not participate in several meetings, to encourage their reconsideration and involvement.

The next ASF SGE meeting (SGE-6) will focus on **socio-economic aspects and compensation** and is scheduled for 2026.

In closing, the leadership of the Regional GF-TADs Steering Committee and Secretariat, represented by Dr Karim Tounkara (WOAH), Dr Mohamed Shamsuddin (FAO) and Dr Hiver Boussini (AU-IBAR) extended their sincere appreciation to all participants for their commitment to advancing ASF control efforts. They emphasised the need for continued research and development which must be strongly encouraged, particularly in the areas of vaccine innovation and improved diagnostic methods. These efforts, combined with robust surveillance and biosecurity measures, will be critical in safeguarding animal health and supporting sustainable livestock production across the continent.

4. Annexes

Annex 1. List of participants (in person)

Title	First name	SURNAME	Position	Department	Institution	City	COUNTRY
Dra	Ana Lina	PEREIRA DE BARROS OLENDE	Directrice	Direction des Services D` Elevage et Santé Animale	Ministère de l'Agriculture et de l'Environnement	Praia	CABO VERDE
Dr	Bertrand	Léopold DONBOU	Directeur des Services Vétérinaires <i>p.interim</i>	Direction des services Vétérinaires	MINEPIA	Yaounde	CAMEROUN
Dr	Roger	MADIAMBA	Chef de Division de Santé Animale et Point focal OMSA en charge de notification des maladies animales	Direction des Services Vétérinaires	Ministère de Pêche et Elevage	Kinshasa	CONGO (REP. DEM.)
Dr	Honoré	Mabela N'LEMBA	Délégué de l'OMSA	Direction des Services Vétérinaires	Ministère de Pêche et Elevage	Kinshasa	CONGO (REP. DEM.)
Prof.	Emmanuel	COUACY - HYMANN	President of the Biological Standards Commission	WOAH	LIREDA	Bingerville	COTE D'IVOIRE
Dr	Gregorio	TORRES PENALVER	Head of Department	Science Department	WOAH	Paris	FRANCE
Dr	Abebe	WOLDE		ECTAD	FAO	Accra	GHANA
Dr	Mohammed	SHAMSUDDIN			FAO	Accra	GHANA
Dr	Sabenzia N.	WEKESA	Senior Deputy Director	Directorate of Veterinary Services	Ministry of Agriculture	Nairobi	KENYA
Dr	Patrick	BASTIAENSEN	Programme Officer	Sub-Regional Representation	WOAH	Nairobi	KENYA
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Title	First name	SURNAME	Position	Department	Institution	City	COUNTRY
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Dr	Karim	TOUNKARA	Représentant Régional pour l'Afrique	Représentation Régionale OMSA pour l'Afrique	WOAH	Bamako	MALI
Dr	Yakubu Y.	AGO	Assistant Chief Veterinary Officer	Department of Animal Health and Reproductive Services	Federal Ministry of Livestock Development	Abuja	NIGERIA
Dr	Pam	LUKA	Chairman, <i>GARA Africa Chapter (GAC)</i>	Biotechnology Division	National Veterinary Research Institute (NVRI)	Jos	NIGERIA
Dr	Mohammed	FOUAD	Programme Officer Veterinary Governance	Regional Animal Health Center for West Africa (RAHC-WA)	Economic Community of West African States (ECOWAS)	Abuja	NIGERIA
Dre	Fatou TALL	épouse LO	Maitre de recherches	Laboratoire National de l'Élevage et des Recherches Vétérinaires (LNERV)	Institut Sénégalais de la Recherche Agricole (ISRA)	Dakar	SENEGAL
Dr	Juanita	VAN EMMENES	Senior Researcher	Onderstepoort Veterinary Research	Agricultural Research Council	Pretoria	SOUTH AFRICA
Dr	Patchili	BOUZABO	Coordonnateur de la Cellule Technique	Centre Régionale de Santé Animale pour l'Afrique centrale (CRSA-AC)	Commission Economique des Etats de l'Afrique centrale (CEEAC)	N'Djaména	TCHAD

Title	First name	SURNAME	Position	Department	Institution	City	COUNTRY
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Dr	Anna Rose	ADEMUN	Commissioner Animal Health	Department of Animal Production and Health	Ministry of Agriculture, Animal Industry and Fisheries (MAAIF)	Kampala	UGANDA

Annex 2. List of participants (online)

First name	SURNAME	Position	Institution	City	Country
Ebanja Joseph	EBWANGA	Director for communication	Gara African Chapter	Avelgem	BELGIUM
Okri Fréjus Hans	OHOUKO	Chercheur	University of Abomey-Calavi	Abomey	BENIN
Viviene	LOPES GONCALVES	Veterinary Doctor	Ministère de l'Agriculture et de l'Environnement	Praia	CABO VERDE
Ganih Saidu	JOEL	Researcher	Kunming Institute of zoology Chinese Academy of Science	Kunming	CHINA
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Artem	METLIN	Animal Health Officer	USDA - ARS	Rome	ITALY
Andriy	ROZSTALNYY	Animal Health Officer	FAO	Rome	ITALY
Neo	MAPITSE	Representative	WOAH	Nairobi	KENYA
Elsa	LAMEIRA	Researcher	ISPM	Chimoio	MOZAMBIQUE
Olusoji John	ABIOLA	Lecturer	University of Ibadan	Ibadan	NIGERIA
Bitrus	INUWA	Researcher	NVRI, FAO	Jos, Plateau	NIGERIA
Anvou	JAMBOL	Research Scientist	NVRI	Jos	NIGERIA
Alicia	CLOETE	State Veterinarian		Pretoria	SOUTH AFRICA
Anthony	CRAIG	Researcher	ARC-OVR	Pretoria	SOUTH AFRICA
Mary-Louise	PENRITH	Extraordinary Professor	University of Pretoria	Pretoria	SOUTH AFRICA
Oonagh	PRETORIUS	PhD Candidate	University of California, Davis	Skukuza	SOUTH AFRICA
Leana	JANSE - VAN RENSBURG	State Veterinarian (Western Cape)	Western Cape Dep. of Agriculture	George	SOUTH AFRICA
Carmina	GALLARDO	ASF Reference Laboratories for WOA, FAO and EU	INIA - CISA	Madrid	SPAIN
Jean	HAKIZIMANA	Postdoctoral Research Fellow	Sokoine University of Agriculture	Morogoro	TANZANIA
Pie	NTAMPAKA	PhD student	Sokoine University of Agriculture	Morogoro	TANZANIA
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Annex 3. Resources : international reference laboratories (WOAH) for African swine fever

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Annex 5. Resources : selected national reference laboratories for African swine fever (SGE Members)

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Annex 6. Resources : latest immediate notifications submitted to WAHIS
(since 2018, in reverse chronological order) as of 31 December 2025.

01/09/2025 Mali

04/03/2025 Cabo Verde

18/04/2024 Cote d'Ivoire

18/08/2023 Cote d'Ivoire

02/08/2023 South Africa

04/11/2022 Zambia

12/08/2022 South Africa

31/03/2022 Zambia

17/05/2021 Côte d'Ivoire

25/02/2021 South Africa

03/02/2021 Tanzania

21/01/2021 South Africa

05/08/2020 Zambia

17/06/2020 Nigeria

12/05/2020 Namibia

11/05/2020 South Africa

12/02/2020 Sierra Leone

02/10/2019 Kenya

01/10/2019 Cote D'Ivoire

11/09/2019 South Africa

23/08/2019 Zimbabwe

18/04/2019 South Africa

09/04/2019 South Africa

14/02/2019 Zimbabwe

14/09/2018 Chad

30/05/2018 South Africa

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