

ROUND TABLE ON OH SURVEILLANCE AND CONTROL OF VBDS IN NA

SESSION 2. TECHNICAL/IMPLEMENTING PARTNERS

WOAH (HQ, RR Eu, SRR-NA)

activities, projects, tools and expected outcome/impact

Tunis, Tunisie

23-24 april 2026



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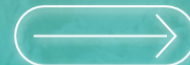
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THE EUROPEAN EXPERIENCE

WOAH RR-EU – VASIL BASILADZE



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**Activities, projects, tools, and expected
outcome/impact**

**Round table on OH Surveillance and
Control of VBDs in N. AFRICA
(23-24 April, Tunis, Tunisia)**



**WOAH Regional Seminar
Vector-Borne Diseases in the European Region
25-27 June 2025, Teramo, Italy**

Dr Vasili Basiladze

23.04.2026

**Senior Advisor, RR Europe,
WOAH**

Hosted at **IZS Teramo - CIFIV**

Organized by **WOAH**, in collaboration with the **European Commission**, **IZS Teramo**, and partners

Around **100 experts** from **40+ countries**

Purpose: strengthen a **harmonized, data-driven, One Health** approach to VBD prevention and control in Europe



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Context and Rationale

- Vector-borne diseases are an increasing threat to **animal health, public health, and trade**
- Drivers include:
 - **Climate change**
 - **Globalization and animal movement**
 - **Environmental change**
 - **Expansion of invasive vectors**
- Europe is seeing:
 - **Geographic expansion of VBDs**
 - **More frequent outbreaks**
 - **Greater need for cross-border coordination**
- The seminar was built on the 2023 WOAAH Roundtable in Tbilisi



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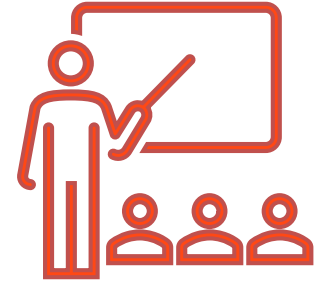
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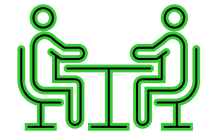


Strategic Focus of the Seminar

- Strengthening One Health surveillance and control
- Sharing epidemiological trends, country experiences, and best practices
- Improving:
 - **Integrated vector management**
 - **Early warning and forecasting**
 - **Biosecurity and outbreak response**
 - **Cross-sector collaboration**
- Launch of the PROVAC project to support risk-based surveillance in the Western Balkans and Caucasus



[WOAH Regional Seminar on Vector-Borne Diseases in Europe fosters unified regional strategy - WOA – Europe](#)



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Major Gaps Identified

- **Fragmented surveillance systems**
 - weak interoperability between animal, human, and environmental sectors
- **Limited harmonized data**
 - difficult to compare trends, assess vaccine effectiveness, or justify investment
- **Shortage of expertise**
 - especially in veterinary entomology, diagnostics, and field implementation
- **Insufficient coordination**
 - across borders, sectors, and ongoing projects
- **Gaps in tools and preparedness**
 - vaccine availability, antigen banks, practical guidance, and rapid-response capacity



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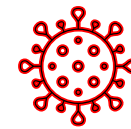
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What the Seminar Emphasized

- VBD control must be based on a **practical One Health approach**
- **WAHIS** and WOAHS standards remain central tools for surveillance, notification, and policy support
- From **2022-2025**, three diseases accounted for **98% of exceptional VBD events in Europe**:
 - Bluetongue
 - West Nile Fever
 - Epizootic Hemorrhagic Disease
- Surveillance quality varies significantly between countries and diseases
- Country experiences showed the value of:
 - targeted vaccination
 - integrated surveillance
 - rapid detection and response
 - coordinated communication



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What Participants Agreed On

- Europe needs to move from **fragmented national efforts** to a **coordinated regional strategy**
- Better control depends on:
 - **standardized and shareable data**
 - **cross-sector governance and trust**
 - **stronger workforce capacity**
 - **research aligned with practical needs**
- Data sharing should support decision-making, not exist as a goal on its own

Existing systems should be **optimized and interconnected**, rather than replaced by new disconnected tools



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Path Forward for the Region

- **Strengthen intersectoral and cross-border collaboration**
 - formal networks, regular dialogue, shared tools and protocols
- **Advance data-driven surveillance**
 - harmonized data collection, interoperable platforms, risk-based tools
- **Invest in workforce and training**
 - especially veterinary entomology, diagnostics, epidemiology, and field response
- **Coordinate vaccine and research strategies**
 - agile vaccine platforms, antigen banks, multivalent vaccines
- **Promote practical One Health implementation**
 - linking intelligence, policy, and operational response

Take-home message:

The seminar confirmed that VBD control in Europe requires a unified, evidence-based, and operational One Health approach.



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Thank you for your attention!



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ENVIRONMENTAL DATA TO SUPPORT RISK ANALYSIS AND PREPAREDNESS – THE PROVNA ADDED VALUE

WOAH HQ – PAOLO TIZZANI



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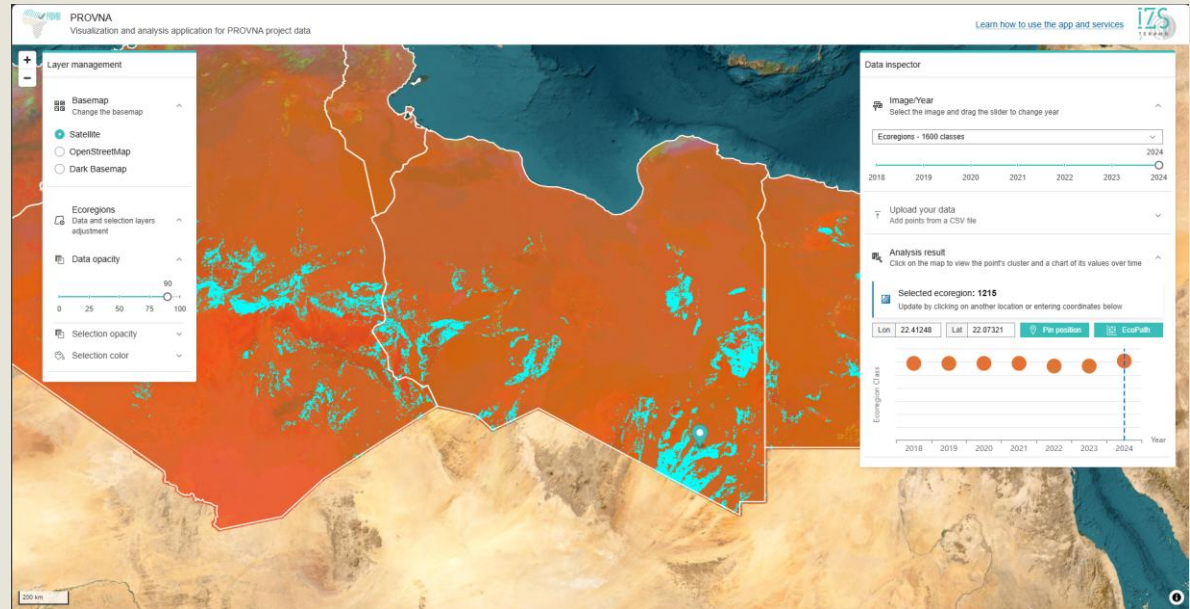
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PROVNA project

The PROVNA project has developed an approach to **identify ecoregions based on environmental and climatic conditions**, using Earth-observation data to support **risk-based surveillance** of vector-borne diseases

PROVNA data have strong potential to **support relevant WOAH functions**, including **epidemic intelligence, incident management system, risk assessment, and preparedness.**





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PROVNA added value for WOAHA

1. Supporting epidemic intelligence and event analysis

PROVNA data already used to support risk assessment when the WOAHA Incident Management System (IMS) is activated.

Employed within the WOAHA IMS during Rift Valley fever outbreaks in Mauritania and Senegal to identify areas that are ecologically similar and potentially at risk, supporting the situational awareness and preparedness of Members.

This demonstrates PROVNA's potential to strengthen early detection and epidemic intelligence.

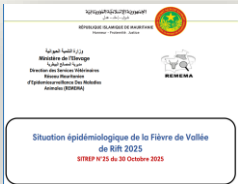
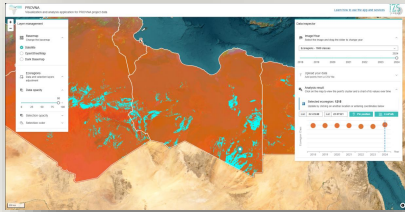
What is an IMS?

Structured, coordinated,
organised responses to incidents

The WOAHA IMS takes an **all-hazards approach**, **builds on past experiences** and **supports WOAHA, its Members and Partners** during international emergencies

PROVNA added value for WOAH

Data integration from multiple sources



AI use:
 -Summary of news from different sources
 -News title translation



Rstudio
 Integrate information and produce report

IMS Report

RIFT VALLEY FEVER (RVF) IN GABON, MALI, MAURITANIA, SENEGAL

Epidemic intelligence report 4
 WHOIS
 World Organisation for Animal Health (WOAH) - Data Integration Department

Contents

- General Overview
- Outbreak Summary
- Quantitative Data
- [Rift Valley Fever \(RVF\) Surveillance Report – data provided by Mauritania \(as of 25 October 2025\)](#)
- [Media attention \(number of news in blue and red\) in red](#)
- [Summary of the epidemic intelligence update](#)
- [Epidemiological Update](#)
- [Official data and other sources](#)
- [Outbreak Summary](#)
- [Media scanning](#)

Official data and other sources

Outbreak Summary

The figure below illustrates the distribution of outbreaks reported for RVF among events in the area. Currently, **three areas** are ongoing in the concerned countries.

Senegal

- One event reported on 21 September 2025 (1 immediate notification and 2 follow-up report - last update 17/10) for disease recurrence with 28 outbreaks reported

Mali

- One event reported on 3 October 2025 for Unanticipated change in disease epidemiology (1 immediate notification and 1 follow-up report - last update 24/10) with 25 outbreaks reported

Senegal - One event reported on 25 October 2025 for the first occurrence in a zone (1 immediate notification) with 1 outbreak reported

The map shows outbreaks reported to WOAH (in red) and additional outbreaks appearing in FAO's EMPRES-i-Database (in blue).



PROVNA data



National reports

Rift Valley Fever (RVF) Surveillance Report – data provided by Mauritania (as of 25 October 2025)

Animal Health Situation

Confirmed Outbreaks

- 21 suspected outbreaks reported via Kaboulabou.
- 18 confirmed positive by ONARSD/21 labs, including 8 asymptomatic viral circulation cases (from active surveillance).
- 25 outbreaks tested negative.

Epidemiological Observations

Geographic Concentration: Southern and southeastern Wagha (Dakhla, France, Makh Charat, Assafat, Gorgol) are highlighted for:

- High pastoral density, Cross-border livestock movement.
- Seasonal Transhumance Movement between wet and dry steppe facilitates virus spread.
- Climate Conditions: Excess rainfall has created stagnant water bodies, favouring mosquito vector proliferation.

Actions taken

- Activation of One Health and surveillance committees.
- Daily Salings and vigilance circulars to meat inspectors and private vets.
- Strict meat inspection protocols in slaughter areas.

Media scanning

media attention (number of news in blue and red) in red



Summary of the epidemic intelligence update

Epidemiological Update

Senegal

Animals

- The World Organisation for Animal Health (WOAH) reports rising RVF cases in Senegal and Mauritania, linked to recent floods. It calls for strengthened cooperation and One Health strategies to manage the transboundary zoonotic threat.

Mali

Animals

- Public awareness networks have identified 277 RVF cases and 22 deaths. The Ministry of Health emphasises the need for improved communication and preventive measures, especially in urban areas.

Mauritania

Animals

- In Mauritania, livestock express concerns over delayed vaccine delivery for RVF. The disease poses serious risks to livestock and humans, especially during the rainy season. Authorities have committed to supplying vaccines, but no livestock has been produced.

Mali

- As of October 26, Senegal has recorded 228 confirmed cases of Rift Valley Fever (RVF), including 28





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PROVNA added value for WOA



The Challenge

The absence of validated, analysis-ready datasets continues to hinder rapid risk characterization and evidence-based response during animal health emergencies.



Our Answer

- Create an “**All Hazard Approach Dataset Categorization Framework**” that includes a category called: “**Environmental and Climate Data**”
- Design a Dataset Assessment, Scoring Approach and dataset prioritization
- Identify and map relevant datasets and geographic data gaps
- Create a Rapid Analysis and Data Integration Tool for RRA
- Support and provide recommendations and guidelines on Early Warning and Emergency Response Capacities





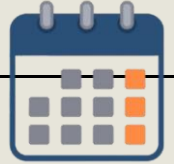
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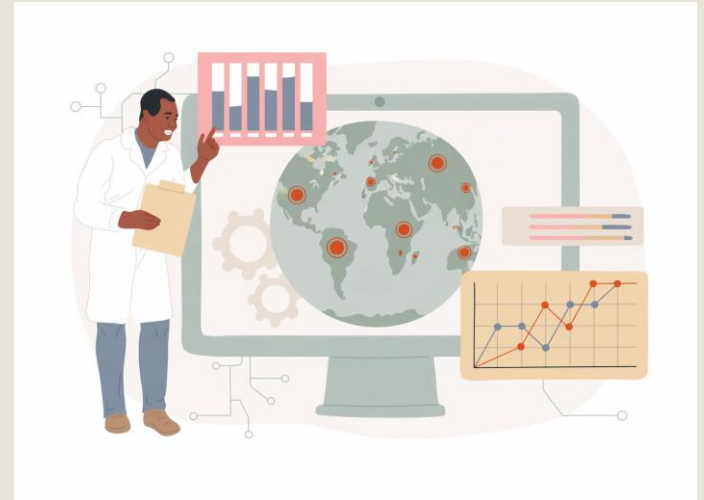
PROVNA added value for WOAHA

4. Supporting proactive risk communication

The PROVNA deliverables could also contribute to risk communication and preparedness efforts.

When an event occurs in a specific ecological context, the system could help identify areas where the disease could potentially spread.

This information could be used to send real time alerts and targeted communications to Members with similar risk profiles, encouraging them to take preparedness actions.



WOAH VISION FOR THE OH SURVEILLANCE AND CONTROL OF VBDS

WOAH HQ – CHADIA WANNOUS



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VBDs Global Trends

2,400+ outbreaks reported globally (2023–2024)

~1/3 of WOAH-listed diseases are vector-borne

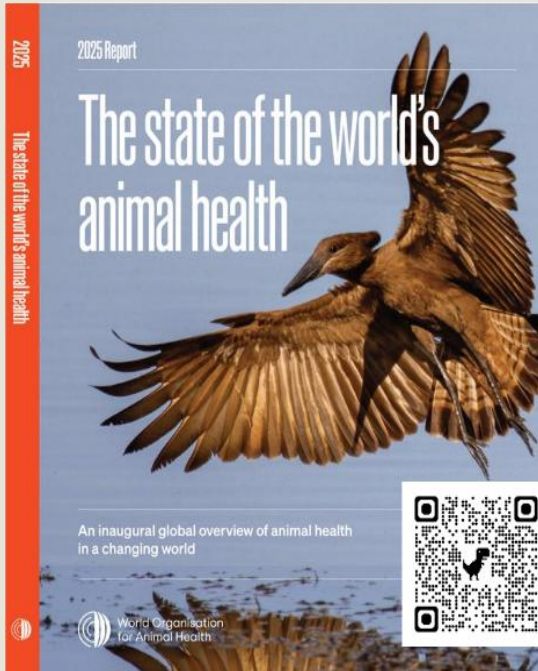
Expansion into new and temperate regions → **major shift**

Climate change is reshaping vector distribution and risks **Health threats**

increasingly originate at the human–animal–environment interface

~75% of emerging diseases are zoonotic

Animal diseases cost ~\$300B annually — prevention is highly cost-effective



The One Health Challenge

Fragmented surveillance systems

Limited cross-sector coordination

Uneven capacities across
countries

Data gaps (entomology,
epidemiology, lab)

Confirmed by country discussions
and needs assessments in
PROVNA project





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WOAH Vision Overview

- WOAHA's vision is to move toward: **Integrated, risk-based, and coordinated One Health surveillance systems**
- Built on:
 - Science-based tools
 - Regional cooperation
 - Sustainable capacity





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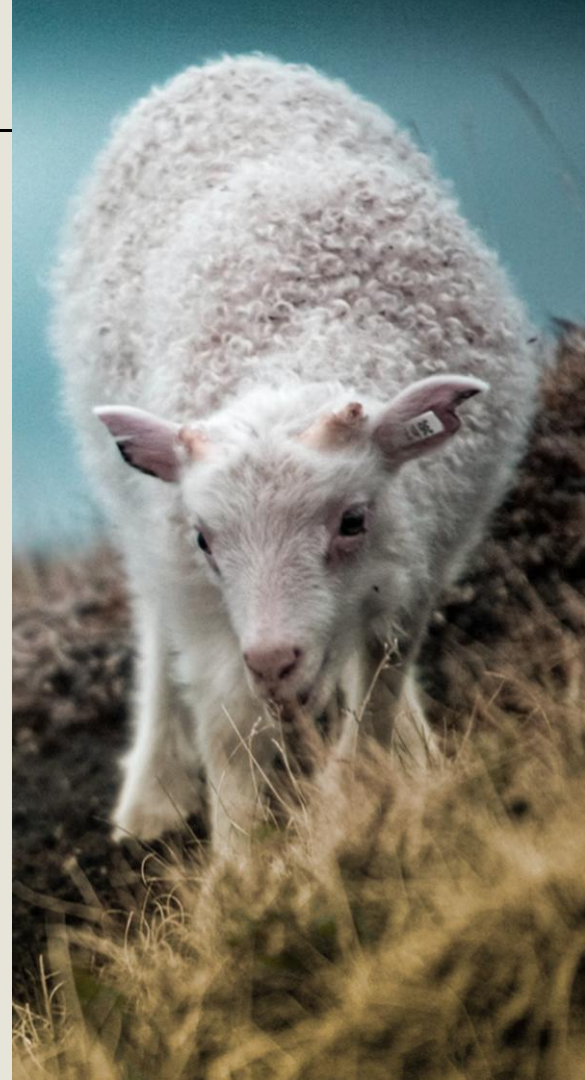
Pillar 1: Risk-Based Surveillance

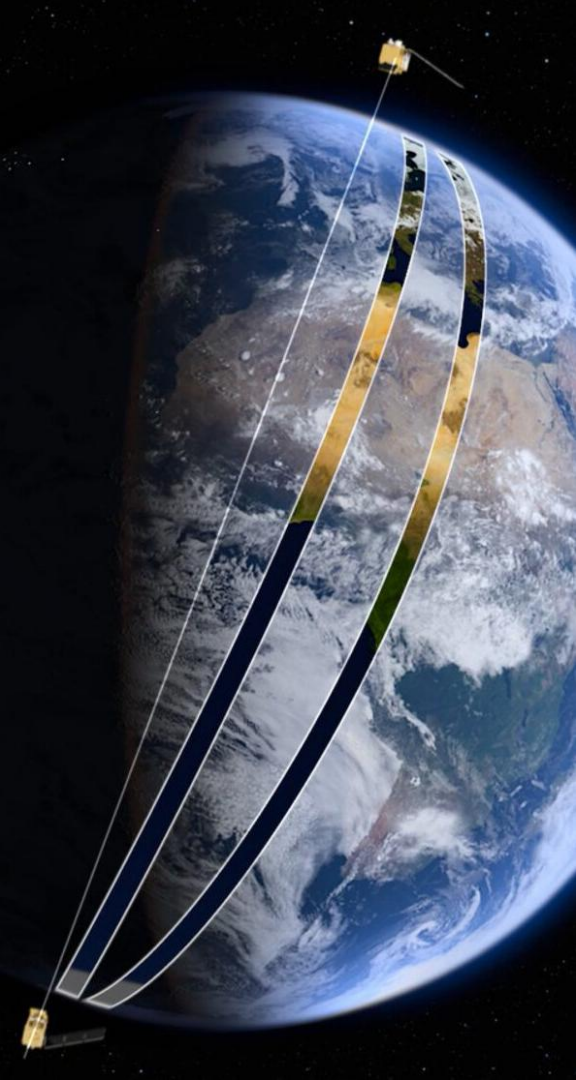
Shift from passive → **risk-based surveillance**

Use:

- Ecoregionalization
- Satellite data
- Environmental indicators

Target high-risk areas more efficiently





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Pillar 2: Strengthening Capacities and Systems

(PROVNA Phase 2 core component)

- Laboratory strengthening
- Standardized protocols
- Training: Entomology, Epidemiology (GIS), Genomics
- Aim: **harmonized surveillance systems across countries**



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Pillar 3: Integration Across Sectors (One Health)

- Veterinary services
- Public health
- Environmental monitoring
- Move toward:
 - Shared data
 - Joint risk assessment
 - Coordinated response

*“No single sector or country can
manage VBD risks alone”*



PROVNA = Proof of Concept



“PROVNA operationalizes the vision”

➡ “From concept → to operational tool”

- Applies:
 - Ecoregionalization
 - Satellite data
 - Platform
 - Application

HOW IT WORKS

“Enabling anticipatory action”

- Data → Risk mapping → Targeted surveillance → Action
- Include:
 - environmental data
 - vector data
 - epidemiology

FUTURE PERSPECTIVES



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T E R A M O


WOAH's vision – part 1

Internal use


- Epidemic intelligence,
- Rapid Risk Assessment
- Proactive risk communication

External use

i. SCALING-UP THE ECOREGIONALISATION APPROACH



1. Promotion of the ecoregion data use



2. Expansion to new geographic areas



3. Expansion to new Vector-Borne Diseases



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ii. FIELD ACTIVITIES

Implementation of PROVNA 2 Action Plans

- **Pilot** activities in selected zones
- Follow-up on **priorities** identified during the closing workshop
- **Operational use** of tools, equipment and capacities developed under Phase 2

Coordination & Sustainability

- Planning aligned with national **human** and **financial resources**
- **Coordination** with other national-based initiatives (e.g., Pandemic Fund)
- Strengthening long-term **regional collaboration**



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Expected Outcomes of WOAAH Vision



Earlier detection



Better targeting



Cost-effective
surveillance



Efficient resource
allocation



Stronger One
Health governance



**Shift to prevention
at source** reduces
global risk and cost

Key Messages

VBDs are no longer localized risks — they are global and expanding



Surveillance must be:

Predictive

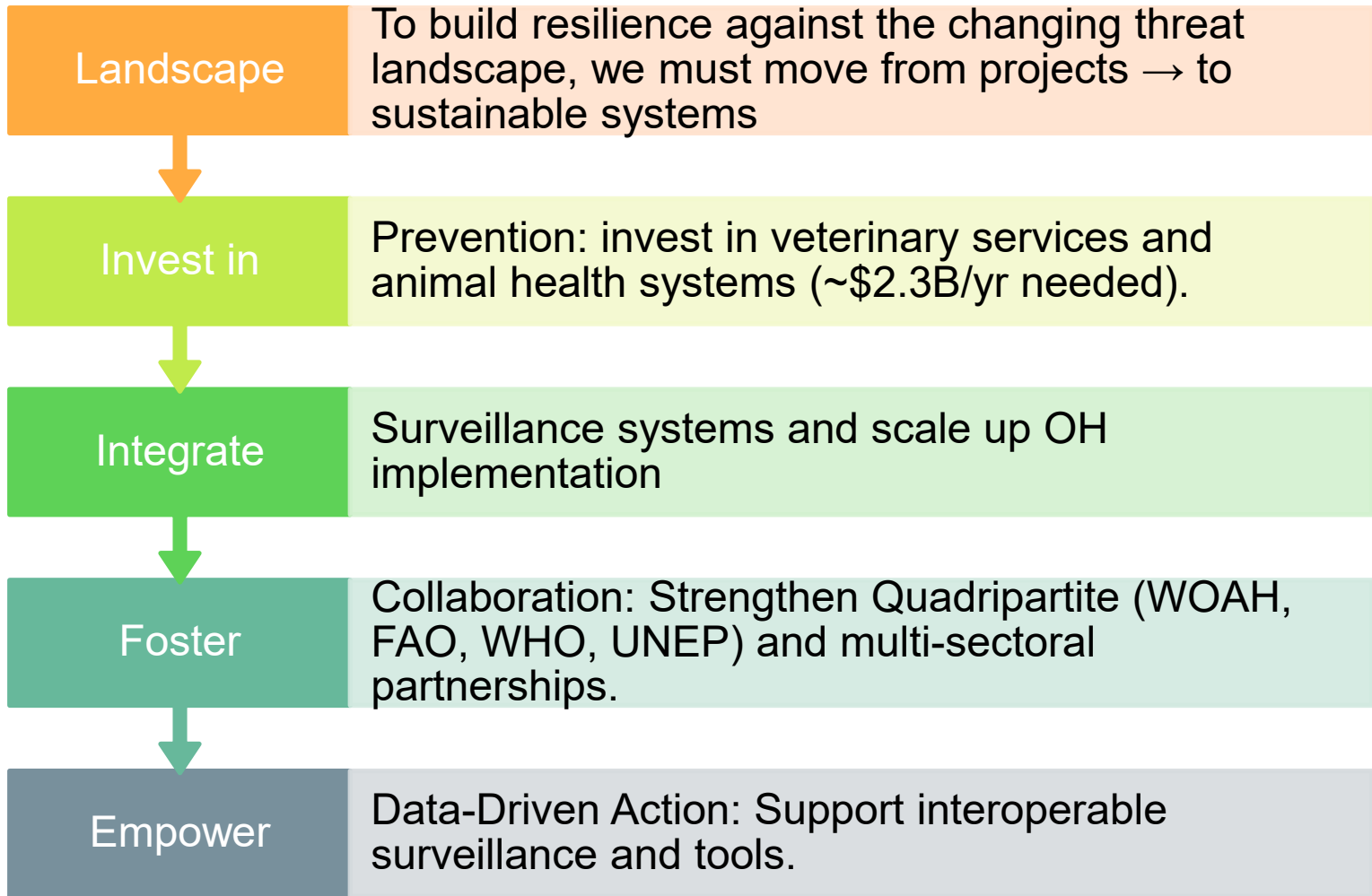
Integrated

Climate-informed



One Health is not optional — it is essential for prevention

Call to Action



Thank you

شكرا

Merci beaucoup

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www.woah.org



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Resources

- [*The One Health Joint Plan of Action*](#)
- [*A Guide to implementing the One Health Joint Plan of Action at national level*](#)
- [*The Quadripartite Joint Offer: A call for targeted One Health investment*](#)
- <https://www.woah.org/en/what-we-do/global-initiatives/one-health/>

