

**EFFECTIVE CBPP CONTROL PROGRAMMES
FOR WOAHS SUBMISSION**

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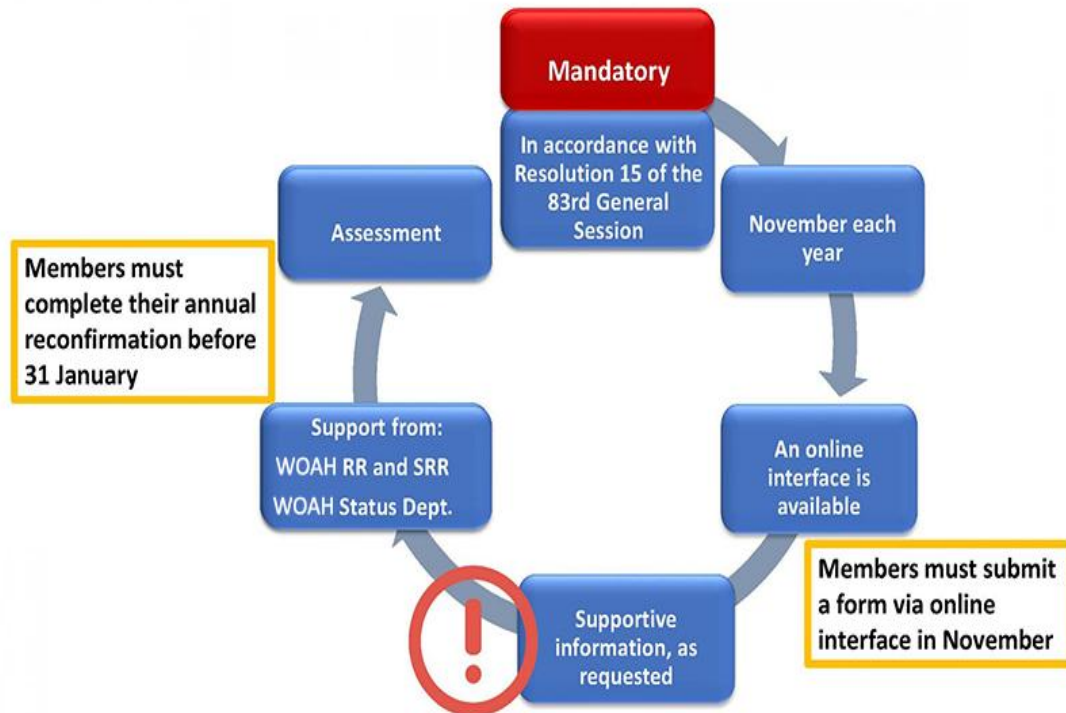
(NOT A FOOL'S DAY PRESENTATION)

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WOAH STANDARDS AND DISEASE NOTIFICATION REQUIREMENTS

- TRANSPARENCY
- BASED ON SCIENCE
- SANITARY SAFETY
- FOOD SAFETY AND ANIMAL WELFARE
- PROMOTING VETERINARY SERVICES
- INTERNATIONAL SOLIDARITY



EXECUTIVE SUMMARY

- ❖ State country/region you are seeking Control programme/disease status for
- ❖ State clearly what applying for: endorsement of official control programme, or disease freedom status; zonal or national etc
- ❖ The programme scope i.e national, high risk zone only, crossborder programme only etc
- ❖ State the disease status (endemic, sporadic outbreaks, clean areas)
- ❖ Control programme is usually sort for 5 year period
- ❖ State the key objective i.e progressive control leading to eradication (NB you cannot have a control programme in perpetuality)
- ❖ **Important:**
 - ❖ We want to hear from you the approach especially with regard to **Surveillance, vaccination, movement control, stamping out** (when the disease spreads to clean areas) etc



EXECUTIVE SUMMARY (cont.)

DISEASE FREEDOM STATUS DOSSIER

➤ TELL US

- Country/zone applying for disease freedom
 - Type of recognition requested
 - ✓ Country freedom
 - ✓ Zonal freedom
 - Summary of epidemiological situation
 - Duration of freedom from disease (minimum required period: usually \geq **24 months without outbreaks**, depending on pathway)
 - Key control measures implemented
- ❖ Animal health legislation
 - ❖ Notifiable disease status of CBPP
 - ❖ Enforcement powers (movement control, quarantine, stamping out if necessary)



NATIONAL CONTEXT

Epidemiological situation

- Status of the disease throughout the country, pointing out areas where it is **endemic**, where you **experience sporadic outbreaks** and **clean areas**.
- Also state the control/eradication approach in each of these areas
- What are the drivers? Eg
 - Transhumance grazing systems
 - Pastoralism
 - Cross border illegal animal movements
 - Low/incomplete vaccination coverage
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STRATEGIC APPROACH

At the very minimum we want to know what the strategy is anchored on i.e.

- ❖ Mass vaccination in endemic areas with clear timeframe to cessation of vaccinations
 - ❖ Zonation/compartmentalization of the country with respect to CBPP
 - ❖ Movement controls
 - ❖ Description of the traceability system in place
 - ❖ Abattoir surveillance system and its integration into the national animal disease surveillance system
- ❖ The time lines for the CBPP progressive eradication pathway

SURVEILLANCE

- ❑ We pay particular attention to the surveillance strategy you employ in CBPP
- ❑ Passive surveillance (farmer reporting)
- ❑ Active surveillance (field inspections, abattoir monitoring, sero surveillance)
- ❑ We know that serological surveillance is not very useful in endemic situations
- ❑ Abattoir surveillance and demonstration of the pathogen are key in those situations
 - ❖ Mass vaccination in endemic areas with clear timeframe to cessation of vaccinations
 - ❖ Zonation/compartmentalization of the country with respect to CBPP
 - ❖ Movement controls
 - ❖ Description of the traceability system in place
 - ❖ Abattoir surveillance system and its integration into the national animal disease surveillance system
 - ❖ The time lines for the CBPP progressive eradication pathway

FIGURES!

Tell us about the numbers!

- The national plus regional cattle populations
- Target vaccination coverage (must be at least 70-80% of population in question)
- Annual vaccinations and their coverage
- Vaccine cost per dose vs the estimated population to be vaccinated (for effective planning purposes)
- The delivery cost per animal (In Africa cost per animal may be low but because of distance unit cost per animal becomes high)

FUNDING STRATEGY

- Is the most common problem encountered. Sufficient funding is available in one year and missing in the next (causes? Discussion)
- Underscores importance of thorough planning and budgeting for the programme, otherwise all the gains made in one year might get erased in the year when funding is not available to sustain the programme
- Will government provide bulk of the funding? How much are cooperating partners going to take on?
- Has the NGO sector's contribution been included in the budget?

IMPLEMENTATION ROADMAP

Year 1

- National/regionwide vaccine rollout
- Baseline surveillance

Year 2-3

- Strengthen zoning
- Reduce outbreak hotspots

Year 4-5

- Transition to eradication phase
- Prepare WOAHP submission

- **NB:** it is important to show progress in your annual reconfirmations

QUESTIONS?