

*Lomé, Togo
7-8 September 2016*

1st Regional FMD West Africa Roadmap Meeting

Report



Vision for the West Africa Roadmap for FMD Control

Regional cooperation among West Africa / ECOWAS countries for the progressive control of FMD, leading towards freedom of clinical disease by 2025, for regional economic development, food security, and poverty alleviation.

Coopération régionale entre les pays de l'Afrique de l'Ouest / CEDEAO pour le contrôle progressif de la fièvre aphteuse, menant à l'élimination de la maladie clinique d'ici 2025, pour le développement économique régional, la sécurité alimentaire et la lutte contre la pauvreté.

Acknowledgements

FAO and the OIE express their sincere thanks to the Government of Togo and their Veterinary Services as well as USDA/APHIS/International Services, Dakar Office, for the important logistical and financial support which contributed to the success of the First FMD Roadmap meeting in West Africa in 2016.

FAO and the OIE also acknowledge with much gratitude the valuable and continuous technical support of EuFMD experts before, during and in-between meetings, and thereby the financial contribution of the European Commission.

Finally, FAO and the OIE would like to express their deep appreciation to all countries of the West Africa FMD Roadmap for their commitment and contributions during this meeting.

Abbreviations

ANSES	Agence Nationale de Sécurité Sanitaire de L'alimentation, de L'environnement et du Travail
ASE-RBM	Antenne Senegal du Reseau Billital Maroobe
AU-IBAR	African Union - Interafrican Bureau for Animal Resources
CTOP	Coordination Togolaise des Organisations Paysannes et de Producteurs Agricoles
CVO	Chief Veterinary Officer
ECOWAS	Economic Community of West African States
EUFMD	European Commission for the Control of Foot-And-Mouth Disease (an Inter-Governmental Commission based in the FAO)
FAO	Food And Agriculture Organisation of the United Nations
FMD	Foot and mouth disease
GF-TADs	Global Framework for the Progressive Control of Transboundary Animal Diseases
OIE	World Organisation for Animal Health
PCP	Progressive Control Pathway
PVS	Performance of Veterinary Services
RAG	Regional Advisory Group
RESEPI	Regional epidemiology network
RESOLAB	Regional laboratory network
SAT1 SAT2	Southern African Territories Type 1 or 2 Strain of FMD virus
USDA-APHIS	United States Department of Agriculture - Animal and Plant Health Inspection Service
FMD-WG	Global GF-TADs FMD Working Group
WRL-FMD	The World Reference Laboratory for Foot and Mouth Disease

Table of Contents

ACKNOWLEDGEMENTS	3
ABBREVIATIONS	4
TABLE OF CONTENTS	5
SUMMARY	6
❖ INTRODUCTION - STORYLINE	6
OUTCOMES	7
RECOMMENDATIONS OF THE MEETING	9
REPORT OF THE MEETING BY SESSION	12
❖ INTRODUCTION TO PROGRESSIVE CONTROL PATHWAY PCP-FMD	12
❖ SESSION 1: FMD SITUATION AND REGIONAL ROADMAP.....	12
❖ SESSION 2: COUNTRY REPORTS	14
❖ SESSION 3: BREAKOUT GROUPS	14
❖ SESSION 4: BREAKOUT GROUPS	15
❖ SESSION 5: REGIONAL EPI AND LAB NETWORKS.....	16
❖ SESSION 6: ROADMAP CONCLUSION	16
ANNEX 1 – MEETING AGENDA	18
ANNEX 2 - LIST OF PARTICIPANTS	22
ANNEX 3 - SUMMARY OF CONTENTS OF COUNTRY REPORTS	27
ANNEX 4 – RAG TERMS OF REFERENCE	42

Summary

❖ Introduction - storyline

1. The First FMD West Africa Roadmap Meeting was held in Lomé, Togo, on 7 – 8 September 2016. The meeting was organized under the umbrella of the FAO/OIE GF-TADs, in collaboration with USDA APHIS/IS, Dakar Office, and technical support from European Commission for Control of FMD (EuFMD).
2. The State Inspectorate on Veterinary and Phytosanitary Security under the Government of Togo hosted the meeting, co-funded by FAO and USDA/APHIS/IS, with the support from EuFMD and the Government of Togo. The GF-TADs FMD Working Group and EuFMD contributed in the technical aspects, prior to and during the meeting.
3. The meeting was attended by 39 representatives of veterinary services from the 15 countries member of the West Africa FMD Roadmap (Benin, Burkina Faso, Cape Verde, Côte d'Ivoire, The Gambia, Ghana, Guinea, Guinea Bissau, Liberia, Mali, Niger, Nigeria, Senegal, Sierra Leone and Togo), members of the FAO/OIE FMD-WG, as well as representatives from OIE Regional Representative for Africa, AU-IBAR, EuFMD. The WRL-FMD, ANSES, ASE-RBM, CTOP, ECOWAS and USDA-APHIS also attended the meeting. Representatives from Merial and BVI attended as observers. The list of participants is provided in [Annex 2](#).
4. The meeting was officially opened by the Director of Veterinary Services of Togo, followed by remarks from USDA-APHIS, FAO, and the OIE.
5. The objectives of the first West Africa roadmap meeting were to:
 - Share information on FMD virus circulation within the West African region to assist planning of control measures.
 - Provide training on PCP-FMD principles and implementation;
 - Assess the current FMD control status of West African countries;
 - Develop consensus on the vision and draft the strategy (Roadmap) for regional FMD control in West Africa between 2016 to 2025, according the principles of the PCP-FMD;
6. In preparation for the meeting, FAO, the OIE and EuFMD conducted a webinar to introduce PCP principles and assessment. In addition, the FMD-WG requested the completion of self-assessment PCP-FMD questionnaires before the meeting. Countries were assessed along the PCP Stages, taking into account data they included in the PCP-FMD questionnaires and in their presentations. The outcome of the analyses was presented by PCP experts from FAO, OIE and EuFMD to the Regional Advisory Group (RAG) of West Africa, for final recommendation on countries' PCP stages.

7. The RAG elected by the participating countries included: Dr Ibrahim Bangana, CVO of Niger (Chair); Dr Gideon M. Mshelbwala, CVO of Nigeria; Dr Yao Akpo, CVO of Benin; Dr Mbargou Lo, CVO of Senegal (Leader of the regional epidemiology network - RESEPI); Dr Kenneth M.K. Gbeddy, CVO of Ghana (Leader of the regional laboratory network - RESOLAB).

❖ **Outcomes**

8. It was agreed that the Roadmap could form the basis for a long term co-operative effort of West African countries in the region, to progressively bring FMD under control. The regional Vision was agreed as: *‘Regional cooperation among West Africa / ECOWAS countries for the progressive control of FMD, leading towards freedom of clinical disease by 2025, for regional economic development, food security, and poverty alleviation’*. The realisation of the vision requires co-ordinated national efforts, under an overall framework of progressive risk reduction, including development of national control programmes and strategies aligned with the regional goals (roadmap) and global objectives.
9. The RAG recommended the following PCP stages (0-5) for West Africa:

0	a. Four countries were assessed as Stage 0: Cape Verde, Ghana, Liberia and Sierra Leone	These countries were assessed as Stage 0, due to the absence of control measures, unknown circulating strains and epidemiological situation
1★	b. Seven countries were provisionally assessed as Stage 1: Benin, Burkina Faso, Cote d’Ivoire, Guinea, Guinea Bissau, Niger and Togo	These countries have to provide evidences of compliance with Stage 1 requirements, including development of assessment plan and identification of the circulating strains
1	c. Four countries were assessed as Stage 1: The Gambia, Nigeria,, Mali and Senegal	These countries complied with the minimum requirements for inclusion in Stage 1, according to their self-assessment questionnaire and to the information provided in the countries’ reports.

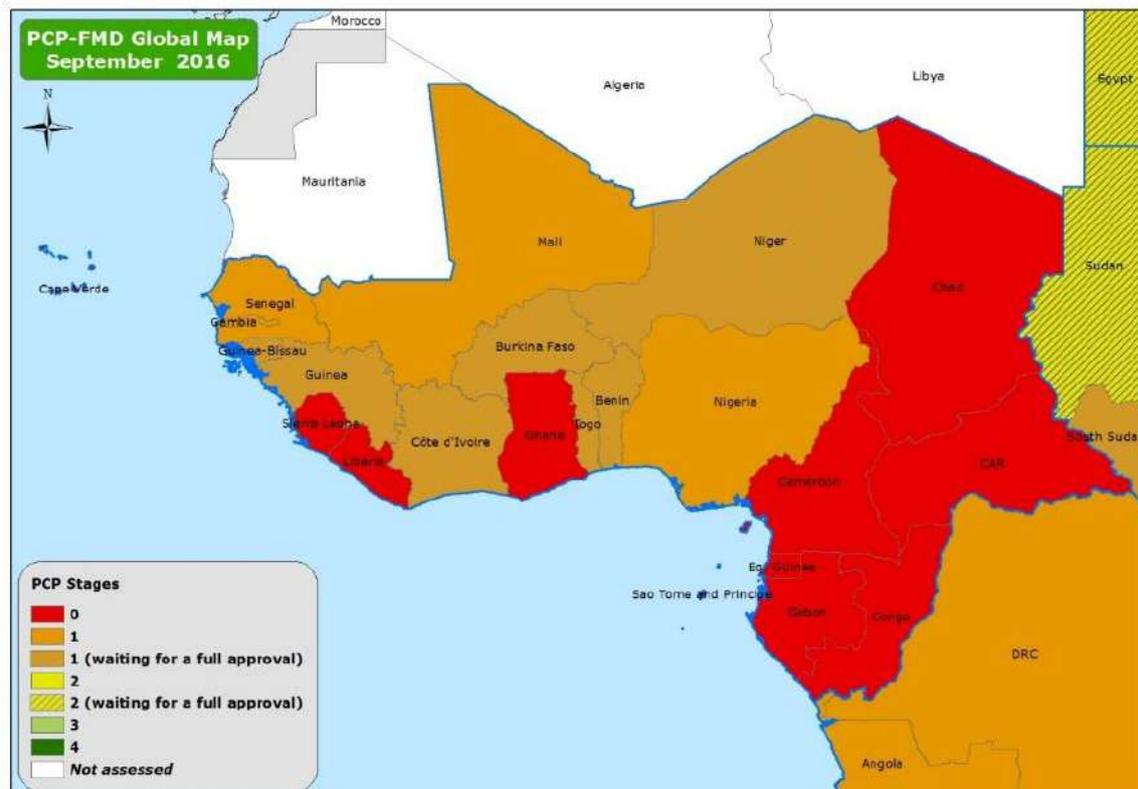


Figure 1 - PCP-FMD Stages granted during the 2016 Togo meeting

10. Countries endorsed regional priorities including the followings:

- To raise awareness on disease recognition, timely reporting and training of animal workers within the pastoralist communities;
- To establish or reinforce active surveillance activities to gain an improved understanding of the FMD virus lineages that circulate in West Africa, as well as to develop tailored tools to enable early detection of any new serotype incursions into the region;
- To enhance accurate and timely diagnosis of FMD through national and/or regional/international reference laboratories and ensure information sharing back to the appropriate stakeholders, including farmers and Veterinary Services;
- To improve cross border and regional coordination actions on surveillance, control and information sharing and strengthen cooperation between neighbouring countries;
- To consider combining the control of FMD with livestock diseases such as PPR and CBPP, which are considered as high-priority diseases in the region (component 3 of the Global Strategy for the control of FMD);
- The regional laboratory and epidemiology networks (RESEPI and RESOLAB) to formulate a 3- to 5-years workplan that should include coordination and capacity building activities;
- FAO, OIE and EuFMD to provide capacity building activities to the national Points of Contact and other relevant stakeholders through online courses and webinar series; and
- AU-IBAR and ECOWAS to approach donors to contribute to the funding of national Assessment Plan and Risk-Based Strategic Plan.

Recommendations of the meeting



Recommendations of the First Regional meeting of the FMD Control Roadmap for the West Africa

Lomé, Togo, 7-8 September 2016

Considering:

- The adoption of the FAO-OIE Global Strategy for the control of FMD (Bangkok, June 2012) with its three inter-related Components, respectively on the control of FMD, the reinforcement of Veterinary Services, and the combined control of FMD with other animal diseases;
- The importance of controlling FMD at regional level and the results of previous FMD regional Roadmap meetings in other regions;
- The importance of having a Regional Advisory Group (RAG) for West Africa, composed of three CVOs and leaders of the Regional Epi and Laboratory networks (RESOLAB and RESEPI) to analyse and present the results of the assessments to the participating countries;
- That many countries of the region are in Stage 0 and 1 of the PCP-FMD and that, for moving into Stage 1, countries are required to present an Assessment Plan;
- The lack of understanding of FMDV strains currently circulating in the region;
- The need to adapt the vaccine selection to the circulating strains;
- The recent adoption of the FAO-OIE Global strategy for the control and eradication of Peste des petits ruminants (Ivory Coast, March 2015);
- The fact that countries must be assessed by one RAG only.

The 15 countries attending (Benin, Burkina Faso, Cape Verde, Cote d'Ivoire, The Gambia, Ghana, Guinea, Guinea Bissau, Liberia, Mali, Niger, Nigeria, Sierra Leone, Senegal and Togo), agree:

1. To elect the CVO/Delegates of Benin, Niger and Nigeria as voting Members of the West Africa Regional Advisory Group (RAG), for a 3-year period.
2. To elect Togo and Senegal/Ghana respectively leading RESEPI and RESOLAB, as voting Members of the West Africa RAG, for a 3-year period.
3. To include ECOWAS and AU-IBAR as non-voting members of the West Africa Regional Advisory Group.
4. To validate the conclusions of the West Africa RAG as follows:

	RAG Togo / 2016 conclusions
Benin	1*
Burkina Faso	1*

Cape Verde	0
Cote d'Ivoire	1*
The Gambia	1
Ghana	0
Guinea	1*
Guinea Bissau	1*
Liberia	0
Mali	1
Niger	1*
Nigeria	1
Senegal	1
Sierra Leone	0
Togo	1*

* Assessed as provisional PCP stage.

5. To use the assessments of the First regional FMD Roadmap Meeting (Lomé, 2016) as a basis to establish the provisional Roadmap Table for the West African countries.

The countries identified the following areas of priorities for a better implementation of the Global FMD Control Strategy at regional level:

➤ **General**

1. To continue the Roadmap process for West Africa countries to work towards the vision of absence of clinical FMD in West Africa by 2025, recognizing the key features and principles of the progressive control of FMD (PCP-FMD) and the need for competent Veterinary Services;
2. To formulate an Assessment Plan for countries in Stage 0 and Provisional Stage 1 (by March 2017 to the GF-TADs FMD Working Group) or a Risk-based Strategic Plan for countries achieving Stage 1 and willing to progress to Stage 2; countries are encouraged to make use of the GF-TADs available templates;
3. Countries to consider nominating their three FMD national Points of Contact as PCP-FMD, epidemiology and laboratory experts;

➤ **Specific**

4. To enhance passive surveillance in the whole country including in the pastoralist communities. This includes improving the awareness and capacity of all stakeholders from the private and public sectors to timely recognize and report the disease;
5. To ensure systematic investigation following FMD outbreak suspicion/confirmation;
6. To establish or reinforce active surveillance to gain a deep understanding of FMD occurrence;
7. To enhance the understanding on virus circulating in the region to allow better vaccine matching and vaccination efficacy as well as to enable early detection of new serotype incursions into the region;
8. To enhance accurate and timely diagnostic of FMD through national and/or regional/international reference laboratory and thereafter rapid information sharing back to the appropriate stakeholders including farmers and Veterinary Services;

9. To comply with their reporting obligations to the OIE for the benefit of the whole region;
10. To submit a relevant number of samples to the OIE/FAO Reference Laboratories for FMD for further characterisation;
11. For epi and lab regional networks (RESEPI and RESOLAB), to formulate a 3 to 5-year work-plan that should include coordination and capacity building activities;
12. To improve cross border and regional coordination in terms of surveillance, control and information sharing as part of RESEPI and RESOLAB work plan. Interactions between laboratory and epidemiology networks should be developed to encourage exchange of expertise and information sharing;
13. For countries to consider requesting an OIE PVS initial evaluation or OIE PVS follow up mission (if the initial PVS evaluation was carried out before 2012) to achieve an updated understanding of their Veterinary Services capacity. This will help building capacity according to the identified gaps (component 2 of the Global strategy for the control of FMD);
14. For countries to consider combining the control of FMD with livestock diseases such as PPR and CBPP which are considered as high priority diseases in the region (component 3 of the Global Strategy for the control of FMD);
15. For FAO, OIE and EuFMD, to provide capacity building activities to the national Points of Contact and other relevant stakeholders through online courses and webinar series;
16. For AU-IBAR and ECOWAS, to approach donors to contribute to the funding of national Assessment Plan and Risk-Based Strategic Plan.

Report of the Meeting by Session

❖ Introduction to Progressive Control Pathway PCP-FMD – (Chris Bartels EuFMD)

This short one-hour training consolidated the outcome of the webinar organised two weeks prior the roadmap meeting. The FAO/OIE Progressive Control Pathway for Foot-and-Mouth Disease (PCP-FMD) was presented as an important component of the Global Strategy for FMD Control. The objective was to improve awareness of all participants and increase appropriate application of the PCP-FMD tool. The main features of the PCP-FMD, and the key activities occurring at each of its stages were overviewed. The main topics covered by the training included activities related to progress along the PCP-FMD pathway, in particular from Stage 0 to Stage 1 and from Stage 1 to Stage 2. Additionally, the main characteristics for self-assessment of the PCP stage by country and the procedure for acceptance into the stage at a regional roadmap meeting were discussed. Follow-up training (online courses and webinars) are foreseen to further support countries to define and implement their FMD control plans.

❖ Session 1: FMD Situation and Regional Roadmap

➤ ***Update on the implementation of the FMD Global Strategy in the context of FAO-OIE Global Framework for Progressive Control of TADs (GF-TADs) – Dr Samia Metwally (FAO)***

Since the Global FMD Control Strategy was adopted, several initiatives have been made in order to establish an enabling environment to make FMD control a feasible option, particularly for countries that are affected the most by this disease. Out of 87 FMD-endemic countries worldwide, at least 42 nations are currently engaged, at various levels, in the implementation of PCP-FMD in the quest to reduce or eliminate FMD virus circulation by 2020-2025. There has been progress on FMD control in some regions, however, in a number of countries in, FMD remains either endemic, or shows typical sporadic patterns. Since 2012, the FMD-WG has provided on-going coordination of member countries PCP Stages evaluation, revising FMD control plans for countries moving from one PCP stage to another, and evaluating the progress on uptake and implementation of PCP-FMD by the FMD affected countries. Fifteen regional roadmap meetings with the East Africa, Middle East, SAARC and West Eurasia FMD were successfully coordinated. Training of PCP-FMD principles were delivered to FAO headquarters and field staff in Africa and the Middle East.

Technical guidelines on socio-economic studies principles, post vaccination monitoring, sero-surveillance, field investigation and risk-based control approach were developed. Profiles for the FMD global expert groups were developed and data was collected in order to produce the FMD Global report.

➤ **Overview of Global and Regional FMD Situation – Dr Donald King (The Pirbright Institute)**

Dr Donald King presented a report on behalf of the OIE/FAO FMD Reference Laboratory Network.

From a global perspective, the endemic circulation of FMD is separated into seven regional pools. Regular characterization of field samples provides vital information to define the normal range and transboundary movements of different FMD viral lineages, as well as help understand which vaccines may be most appropriate for use.

Within Pool 5 (West Africa), only a relatively small number of samples have been recently characterized by Reference Laboratories (40 in 2013, 178 in 2014 and 147 in 2015), representing only the “tip of the iceberg” of the true FMD cases that occur in the region. Based on data that has been collected, it is conjectured that FMD is endemic in all continental countries in West Africa, and that 4 different FMD virus serotypes (O, A, SAT 2 and SAT 1) circulate. **For serotype O**, two different topotypes have been detected: O/WA (West Africa) that is widely distributed across the region, and O/EA-3 (East Africa-3) that has been found in Nigeria and originates from East Africa. **For serotype A**, two genotypes (A/AFRICA/IV and A/AFRICA/VI) have been detected in West African countries and appear to be maintained within the region. **For SAT 2** (topotype VII), viruses recovered from field outbreaks in the region (and Mauritania) are closely related to sequences of viruses from East and North Africa. **For SAT 1**, no isolates (or viral sequences) have been recovered since 1981, although serological studies in a number of countries provide evidence for the circulation of this serotype.

This presentation highlighted gaps in our current knowledge regarding the epidemiology of FMD virus lineages that circulate in West Africa, as well as a lack of empirical evidence for the selection and use of vaccines in the region. It was reminded that WRL-FMD can support the submission of samples from East African FMD cases. In the first instance, please contact donald.king@pirbright.ac.uk for further information.

➤ **Pastoralist communities in West Africa and Animal Health - Sandou Assimarou Gnassingbé (CTOP)**

ROPFA is an initiative of farmers’ organizations and agricultural producers in West Africa. It includes 13 national peasant organizations (Benin, Burkina Faso, Côte d'Ivoire, The Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Niger, Senegal, Sierra Leone and Togo) and associated organizations (Cape verde, Nigeria).

Created in Cotonou in June 2000, ROPFA has positioned itself as a tool for the defence and promotion of family farms, which constitute the principal agro-pastoral production system in West Africa. Its mission is to “promote the development of family farms and peasant agriculture, while mastering the policies linked to the liberation of national economies and to the globalization of international exchanges”.

The vision of the network is focused on:

- promotion of the socio economic development;
- solidarity-based farming, social, sustainable and environmental;
- sustainable management of natural resources;
- decent agricultural incomes and decent and sustainable rural employment.

➤ **Introduction to the RAG role and responsibilities – Nadège Leboucq (OIE)**

The objective of this presentation was to provide the participants with the relevant information on the role and duties of the Regional Advisory Group (RAG) and on the procedure for election before processing with the election itself. The Terms of Reference, governance and modus operandi, also provided by written, were presented with emphasis on the role of the RAG as a link

between the region and the international organizations, during and in-between roadmap meetings.

The RAG is composed of five voting-members (3 elected CVOs from the region and the two leaders of the epidemiology and laboratory network) supported by non-voting members (FAO and OIE staff from the FMD-WG, regional/sub-regional representatives, PCP and PVS experts and regional organizations as appropriate.

The RAG (voting members), in charge of overseeing the implementation of the FMD Roadmap in West Africa and subsequently of the FMD Roadmap recommendations was elected.

Also Senegal and Ghana respectively representing the Epi and Laboratory Regional Networks were elected as voting members of the RAG.

It was decided to include ECOWAS and AU/IBAR as non-voting members of the West Africa RAG, together with representatives of FAO, OIE and EuFMD.

➤ **RAG partial election – (Plenary)**

The participating countries elected the members of the RAG:

- Dr Ibrahim Bangana, Chair, CVO of Niger;
- Dr Gideon M. Mshelbwala, CVO of Nigeria;
- Dr Yao Akpo, CVO of Benin;
- Dr Mbargou Lo, CVO of Senegal, was elected as Leader of the regional epidemiology network;
- Dr Kenneth M.K. Gbeddy, CVO of Ghana, was elected as Leader of the regional laboratory network.

Annex 4 describes the Terms of reference (TORs) for the RAG.

❖ **Session 2: Country reports**

In order to have an update of the regional FMD situation, the representatives of each country have been requested to present a short report describing their FMD situation, following a template provided by the FMD-WG prior the meeting. Each country was scheduled for a 10-15 minutes time slot for the presentation, followed by a 5 minutes question-and-answer session.

Country presenters included: Mbargou Lo (Senegal), Afonso Maria De Ligorio Samedo (Cape Verde), Borrie Jabang (The Gambia), Mario Marceano (Guinea Bissau), Fode Toure (Guinea), Abdul Jalloh (Sierra Leone), Joseph Anderson (Liberia), Jones Oulai (Côte d'Ivoire), Adama Maiga (Burkina Faso), Halimatou Kone Esp Traore (Mali), Joseph Awuni (Ghana), Komia Batawi (Togo), Corneille Gnanvi (Benin), Gideon Mshelbwala (Nigeria), Maikan Issoufou (Niger).

[Annex 3 includes main information from](#) the countries' presentations as well as from the self-assessment questionnaires.

❖ **Session 3: Breakout groups**

➤ **Group 1: Assess and prioritize regional needs for FMD control**

The following items were recognized as a priorities during the breakout group discussions:

- Identify (update and characterize) circulating serotypes;
- Develop a control plan;
- Strengthen the capacity of veterinary services;
- Revitalize the Networks (RESOLAB, RESEPI) and make operational the RAG;

- Develop and harmonize veterinary legislation;
- Establish a regional programme for the control of FMD;
- Assess the risk within the region;
- Develop a Risk based strategic plan;
- Re-enforce existing networks in the region : RESEPI, RESOLAB, RESCOM and Network of directors of veterinary services;
- Establish mechanism of samples shipment to reference laboratories.

➤ **Group 2: Surveillance for early detection and outbreak investigation**

For the question “what is needed to perform serosurveillance for PCP Stage 1 (understanding the disease status)”, the group proposed the following:

- Establish sampling framework and calculate sample size;
- Propose training for sampling, sample transportation and storage;
- Ensure the necessary logistics: transportation with sufficient fuel, considering the number of administrative units that will be sampled, per diem for personnel, etc.;
- Ensure the availability of sufficient sampling material, including for cold chain;
- Establish the appropriate team members, including lab expert;
- For laboratory analysis there is a need to ensure:
 - Storage facility (-20°C);
 - Training on relevant diagnostic procedures, such as ELISA;
 - Lab consumables and materials;
 - ELISA reader and washer, etc.;
- Establish a reliable reporting system from the field to laboratory and veterinary services and then information back down to the field.

❖ **Session 4: Breakout groups**

➤ **Group 1: Cross border coordination for the implementation of vaccination strategies and the movement control**

The following items were discussed and reported by the group:

- Organize cross-border meetings, including with CVOs;
- Set up road checkpoints;
- Establish quarantine centers;
- Harmonize control plans and procedures by:
 - Synchronizing vaccination campaigns against FMD;
 - Introducing vaccination’s certificates against FMD;
 - Establishing international certificates of transhumance.
- Develop Animal Identification;
- Re-enforce entry points;
- Information sharing, including vaccination strategies.

➤ **Group 2: Diagnostic capacity, networks and regional leading laboratory**

Diagnostic capabilities in the region:

- Each country has at least one national veterinary laboratory, reinforced by 3 regional laboratories:
 - Nigeria;
 - Senegal;

- Ghana;
- Current needs include:
 - Strengthening the national laboratories diagnostic capacity to conduct investigations, serological diagnosis and serotyping;
 - Encourage sample collection;
 - Facilitate shipment of samples to the OIE/FAO Reference Laboratories;

Priorities to be included in the 2016-2017 regional laboratory and epidemiology networks:

Share information at the network level;

Provide periodic training;

Implement quality assurance;

Recommend and promote the production of vaccines from serotypes isolated in the region;

Propose training of field epidemiologists.

❖ Session 5: Regional Epi and Lab Networks

Summary - Presentation RESOLAB

RESOLAB has been established in 2007 in response to the outbreaks and fast spread of HPAI (H5N1 in 2006) and to harmonize control and surveillance activities for HPAI and other TADs. The West and Central Africa Veterinary laboratories network covers 23 countries in total. Its coordination unit was FAO-ECTAD Bamako, Mali. Subnetworks were created for priority diseases (i.e. PPR, FMD and rabies) by having dedicated focal points in member states. The presentation described key activities of the RESOLAB as they relate to FMD activities in West and Central Africa as part of a sub – network leadear in the coordination efforts for FMD Session 6: Roadmap conclusion

➤ **Presentation of roadmap based on post-assessment by the Regional Advisory Group**

Table 1: Assessment of country Stage position for 2016, together with the expected progression to 2025.

Country	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
	Validated Stages	Expected Stages for the future (not validated)								
Benin	1*	1	1	1	1	2	2	2	2	3
Burkina Faso	1*	1	1	2	2	2	3	3	3	3
Cape Verde	0	0	0	1	2	3	3	4	5	5
Cote d'Ivoire	1*	1	1	1	1	2	2	2	2	3
The Gambia	1	1	1	1	1	1	1	1	1	2
Ghana	0	1	2	2	2	3	3	3	3	4
Guinea	1*	1	1	1	2	2	3	3	4	5
Guinea Bissau	1*	1	1	2	2	2	4	4	4	4
Liberia	0	1	1	2	2	3	3	4	4	4
Mali	1	1	1	1	2	2	2	3	3	3
Niger	1*	1	1	2	2	2	2	2	3	3
Nigeria	1	1	2	2	2	3	3	3	4	4
Senegal	1	1	1	2	2	2	3	3	3	4
Sierra Leone	0	1	1	1	2	2	3	3	4	4
Togo	1*	1	2	2	2	2	2	3	3	4

* Assessed as provisional PCP stage.

- A set of Recommendations ('Togo 2016 Recommendations') and a list of regional priorities was adopted at the end of the meeting.
- The regional Vision was agreed as: *'Regional cooperation among West Africa / ECOWAS countries for the progressive control of FMD, leading towards freedom of clinical disease by 2025, for regional economic development, food security, and poverty alleviation'*.

Annex 1 Areas of regional priorities for West Africa

Considering:

- The adoption of the FAO-OIE Global Strategy for the control of FMD (Bangkok, June 2012) with its 3 inter-related Components respectively on the control of FMD, the reinforcement of Veterinary Services and the combined control of FMD with other animal diseases;
- The importance of controlling FMD at regional level and the results of previous FMD regional Roadmap meetings in other regions;
- The importance of having a Regional Advisory Group (RAG) for West Africa composed of three CVOs and leaders of the Regional epidemiology and laboratory networks to evaluate and present the results of the assessments to the participating countries;
- That countries in the region are in Stages 0 and 1 of the progressive control pathway (PCP-FMD);
- The lack of information on the circulating FMD virus strains in the region;
- The need to adapt the vaccine selection to the circulating strains;
- The recent adoption of the FAO-OIE Global Strategy for the control and eradication of Peste des petits ruminants (Ivory Coast, March 2015);
- The fact that countries in the region must be assessed only by RAG of the West Africa roadmap.

The 15 countries attended: Benin, Burkina Faso, Cape Verde, Gabon, Ghana, Gambia, Guinea, Guinea Bissau, Liberia, Mali, Niger, Nigeria, Sierra Leone, Senegal and Togo agreed:

6. To elect the CVO/Delegates of Benin, Niger and Nigeria, and the regional epidemiology network leader of Togo and regional laboratory network leader of Ghana as voting Members of the West Africa RAG, for a 3-year period;
7. To include ECOWAS and AU-IBAR as non-voting members of the West Africa Regional Advisory Group;
8. To use the assessments of the First Regional FMD Roadmap Meeting (Lome, /2016) as a basis to establish the provisional Roadmap for the West African countries 2016-2025.

The countries identified the following areas of priorities for a better implementation of the Global FMD Control Strategy at the regional level:

➤ **General**

17. To continue progressing along the Roadmap for West African countries towards the vision of 'Absence of Clinical FMD' by 2025, based on the guidelines and principles PCP-FMD and the need for competent Veterinary Services;
18. To develop an Assessment Plan for countries in Stage 0 and Provisional Stage 1 by March 2017 to advance to Stage 1, or a risk-based strategic plan for countries in Stage 1 to advance to Stage 2. Countries are encouraged to use of the GF-TADs Templates and submit to the GF-TADs FMD Working Group for consideration;
19. Countries to consider nominating their three FMD national Points of Contact; PCP-FMD, epidemiology and laboratory experts;

➤ **Specific**

20. To enhance national passive surveillance (FMD recognition and timely reporting), involving all stockholders including pastoralist communities;
21. To raise awareness on disease recognition and timely reporting and to support training of Community Animal Health Workers among pastoralist communities;
22. To ensure systematic and timely investigation on FMD suspect outbreaks for confirmation and response;
23. To establish or reinforce active surveillance to gain information on the FMD virus lineages that circulate in West Africa as well as to develop tailored tools to enable early detection of new serotype/strain incursions into the region;
24. To enhance the understanding of the performance of vaccines that might be deployed by countries in West Africa to control the prevailing viral serotypes/lineages circulating in the region, via the use of nucleotide sequencing, vaccine-matching and post vaccination monitoring studies;
25. To enhance accurate and timely diagnosis of FMD through national and/or regional/international reference laboratories and rapid results and information sharing back to the appropriate stakeholders, including farmers and Veterinary Services;
26. To comply with the reporting obligations to the OIE for the benefit of the whole region;
27. To submit representative and quality samples to the world reference laboratory at Pirbright (WRL) for full characterisation;
28. For regional epidemiology and laboratory networks to formulate a 3- to 5-year work plan that should include coordination and capacity building activities;
29. To improve cross border and regional coordination and harmonization on surveillance, control and information sharing;
30. For countries to consider requesting an OIE-PVS initial evaluation or OIE-PVS follow up mission (if the initial PVS evaluation was conducted before 2012) to have an updated understanding of their Veterinary Services capacity to prepare subsequent capacity-building activities according to the identified gaps (component 2 of the Global strategy for the control of FMD);
31. For countries to consider combining the control of FMD with other high impact livestock priority diseases of the country/region, including but not limited to PPR, sheep and goat pox and CBPP (component 3 of the Global Strategy for the control of FMD);
32. For FAO, OIE and EuFMD to provide capacity building activities to the national Points of Contact and other relevant stakeholders using online tools;
33. For AU-IBAR and ECOWAS to approach donors to contribute to the funding of national Assessment Plan and Risk-Based Strategic Plan.

Annex 1 – Meeting Agenda



1st Regional FMD West Africa Roadmap Meeting

7-8 September 2016

Lomé, Togo

Meeting Venue: IBIS Lomé Center

Day 1 – 7 September 2016

Schedule	Topic	Chair/Facilitators/Speaker
08:00 – 09:00	Registration	All
09:00 – 09:30	<ul style="list-style-type: none"> ▪ Opening/Welcoming Remarks - USDA APHIS - OIE - FAO Representative to Togo - Ministère de l'Agriculture, de l'Elevage et de l'Hydraulique de la République Togolaise - Group photo 	USDA APHIS OIE FAO Minister
09:30 – 09:45	<ul style="list-style-type: none"> ▪ Objectives and Adoption of the meeting Agenda 	FAO
09:45 – 10:40	PCP-FMD training: Principles and Implementation	EuFMD/FAO/OIE
10:40 – 11:00	<i>Coffee-break</i>	
11:00 – 12:30	PCP-FMD training: Principles and Implementation (cont'd)	EuFMD/FAO/OIE
12:30 – 13:30	<i>Lunch</i>	
13:30 – 14:30	<ul style="list-style-type: none"> ▪ Session 1: FMD situation and regional roadmap - Update on the implementation of the global strategy [15 minutes] - Overview of global and regional FMD situation [15 minutes] - Pastoralist communities in West Africa and animal health [20 minutes] - Establishment of the RAG: role and responsibilities [10 minutes] - RAG election 	Chair: Togo FAO WRL Roppa OIE All
14:30 – 16:00	<ul style="list-style-type: none"> ▪ Session 2: Country reports 15 minutes presentation per country followed by 15 minutes discussion <ul style="list-style-type: none"> ○ Senegal, Cabo Verde, The Gambia, Guinea Bissau, Guinea 	Chair: Mali
16:00 – 16:30	<i>Coffee-Break</i>	
16:30 – 18:10	<ul style="list-style-type: none"> ▪ Session 2: Country reports (cont'd) ○ Sierra Leone, Liberia, Côte d'Ivoire, Burkina Faso, Mali 	Chair: Nigeria
19:00	Social event	

Day 2 – 8 September 2016

Schedule	Topic	Chair/Facilitators/Speaker
09:00 – 10:45	<ul style="list-style-type: none"> ▪ Session 2: Country reports (<i>cont'd</i>) 15 minutes presentation per country followed by 15 minutes discussion <ul style="list-style-type: none"> ○ Ghana, Togo, Benin, Nigeria, Niger 	Chair: Senegal
10:45 – 11:00	<i>Coffee-break</i>	
11:00 – 12:10	<ul style="list-style-type: none"> ▪ Session 3: Breakout groups [50 minutes] <ul style="list-style-type: none"> ○ Group 1: Priority of the region to control FMD ○ Group 2: Surveillance for early detection and outbreak investigation - Group reports (10 min per group) [20 minutes] 	Chair: Côte d'Ivoire Rapporteurs
12:10 – 13:40	<i>Lunch (closed meeting WG-RAG)</i>	
13:40 – 15:00	<ul style="list-style-type: none"> ▪ Session 4: Breakout groups [60 minutes] <ul style="list-style-type: none"> ○ Group 1: Cross border coordination for the implementation of vaccination strategies and the movement control ○ Group 2: Diagnostic capacity, Networks and Regional Leading laboratory - Group reports (10 min per group) [20 minutes] 	Chair: Ghana Rapporteurs
15:00 – 16:00	<ul style="list-style-type: none"> ▪ Session 5: RESOLAB and RESEPI regional networks: FMD subnetwork <ul style="list-style-type: none"> - Report Coordinator of RESOLAB/RESEPI FMD subnetwork [25 minutes] - Round table discussion 	Chair: Niger Network Leaders / ECOWAS Secretariat All participants
16:00 – 16:20	<i>Coffee-break</i>	
16:20 – 17:30	<ul style="list-style-type: none"> ▪ Session 6: Roadmap conclusion <ul style="list-style-type: none"> - Presentation of roadmap based on assessment by RAG - List of regional priorities as defined by countries - Regional vision for the FMD control - Round table discussion 	Chair: OIE/FAO RAG FAO/OIE/AU- IBAR/USDA/ECOWAS All participants All participants
17:30	Closure of meeting	

Annex 2 - List of Participants

BENIN

Dr Yao AKPO

Directeur de l'Elevage
Ministère de l'Agriculture, de l'Elevage et de
la Pêche
yao.akpo@gmail.com

Dr Corneille GNANVI

Chef Service Santé Animale
Direction de l'Elevage
Ministère de l'Agriculture, de l'Elevage et de
la Pêche
gnancor2000@yahoo.fr

BURKINA FASO

Dr Adama MAIGA

Directeur de la Santé Publique Vétérinaire et
de la Législation
Direction Générale des Services Vétérinaires
Ministère des Ressources Animales et
Halieutiques
ada67mg@gmail.com

Dr SIDI MOCTAR

Chef de service virologie du Laboratoire
National d'Elevage
Direction générale des services vétérinaires
Ministère des Ressources Animales et
Halieutiques
diallo.moctarsidi@gmail.com

CAPE VERDE

Dr Afonso Maria de Ligorio MONTEIRO SEMEDO

Directeur du l'Elevage/Service Vétérinaire
Direction de Service de l'Elevage
Ministère de l'Agriculture et Environnement
afonso.semEDO@maap.gov.cv

Dr Jose Luís de BARROS

Expert en Epidémiologie - Point Focal
Surveillance Épidémiologique
Direction Générale de l'Agriculture et
Développement Rural/Direction du Service de
l'Elevage
Ministère de l'Agriculture et Environnement
jose.barros@mdr.gov.cv

COTE D'IVOIRE

Dr Jonas OULAI

Sous-Directeur, Santé animale
Direction des Services Vétérinaires
Ministère des Ressources Animales et
Halieutiques
jonasoulai@gmail.com

Dr Yao Mathurin KOFFI

Responsable Technique Adjoint
Laboratoire de Virologie
Laboratoire Central Vétérinaire de Bingerville
dougbe_yao@yahoo.fr

THE GAMBIA

Dr Duto Sainy FOFANA

Director General
Department of Livestock Services
Ministry of Agriculture
dsfofana1@gmail.com

Mr Borrie JABANG

Laboratoire Manager
National/Central Veterinary Laboratory
Department of Livestock Services
Ministry of Agriculture
borriejabane@yahoo.com

GHANA

Dr Kenneth M.K. GBEDDY

CVO
Veterinary Services Directorate
kkgbeddy@yahoo.com

Dr Joseph AWUNI

Deputy Director of Veterinary Services
and Head of Accra Veterinary Laboratory
Veterinary Services Directorate
josephawuni@hotmail.com

GUINEA**Dr Fodé Mamoudou TOURE**

Chef de Section Lutte contre les maladies
Animales
Direction Nationale des Services Vétérinaires
Ministère de l'Elevage et des Productions
Animales
fodemtoure15@gmail.com

Dr Karim CONTE

Directeur de Laboratoire
Ministère de l'Elevage et des Productions
Animales
abdoukarim57@gmail.com

GUINEA BISSAU**Dr Bernardo CASSAMÁ**

Directeur Générale de l'Elevage
CVO
Direction Générale de l'Elevage
bernardocassama@yahoo.com.br

Mr Mario Marceano GOMES

Epidémiologiste
Département de la Santé Animale
Direction Générale de l'Elevage
Ministère du Développement Rural et de
l'Agriculture
amarogomes59@yahoo.com.br

LIBERIA**Dr Joseph R.N. ANDERSON**

Director of Veterinary Service
Ministry of Agriculture
joelson2007@gmail.com

Mr Abraham KAMARA

Livestock Officer
Ministry of Agriculture
abrahimkamara600@yahoo.com

MALI**Dre Halimatou KONE eps TRAORE**

Directrice Nationale des Services Vétérinaires
Direction Nationale des Services Vétérinaires
halimatoutraore@yahoo.fr

Dr Cheick Oumar FOMBA

Chef, Division Surveillance et Protection
Sanitaire
Direction Nationale des Services Vétérinaires
f.cheickoumar@yahoo.fr

NIGER**Dr Ibrahim BANGANA**

Directeur Général des Services Vétérinaires
Délégué OIE pour le Niger
Ministère de l'Agriculture et de l'Elevage
ibangana@yahoo.fr

Dr Maikano ISSOUFOU

Chef, Division Enquêtes et Statistiques
Sanitaires
Direction de la Santé Animale
Direction des Services Vétérinaires
Ministère de l'Agriculture et de l'Elevage
maikanoissoufou@yahoo.fr

NIGERIA**Dr Gideon M. MSHELBWALA**

Director, Veterinary and Pest Control Services
Federal Ministry of Agriculture and Rural
Development
gidmm@yahoo.com

Dr Hussaini Gulak ULARAMU

Principal Veterinary Research Officer
National Veterinary Research Institute (NVRI)
ularamuhussaini@yahoo.co.uk

SENEGAL**Dr Mbargou LO**

Directeur des Services Vétérinaires
Ministère de l'Elevage et des Productions
Animales
drmbargoulo@gmail.com

Dr Modou Moustapha LO

Coordonnateur du Programme Santé Animale
ISRA

moustaphlo@yahoo.fr

SIERRA LEONE

Dr Abdul G. JALLOH

Assistant Director
Animal Health, Livestock and Veterinary
Services Division
Ministry of Agriculture Forestry and Food
Security

steriliseit@yahoo.com

Dr Amara LENO

Veterinary Officer, Livestock and Veterinary
Services Division
Ministry of Agriculture Forestry and Food
Security

lenoamara87@yahoo.fr

TOGO

Dr Komia Batassé BATAWUI

Président de la Commission Régionale de l'OIE
pour l'Afrique, Directeur de l'Élevage
Ministère de l'Agriculture, de l'Élevage et de
l'Hydraulique

dbatawui@yahoo.fr

Dr Kinam KOMBIAGOU

Direction de l'élevage
Coordinatrice nationale du projet de
lutte contre le charbon bactérien au Togo

llumire@yahoo.fr

Dr Bataskom M'BAO

Chargé d'Etude
Direction de l'Élevage

mbataskom@gmail.com ,

Dr Ibrahim D. BARRY

Chef section des Établissements
Direction de l'Élevage

dantibarry@yahoo.fr

Dr Tanah MODJOSSO - DJANKLA

Chef Division hygiène alimentaire et contrôle
des denrées alimentaires d'origine animale
Direction de l'élevage

modjotamah@yahoo.fr

Madame Emile W. GO-MARO

Direction de l'élevage, Responsable qualité au
laboratoire centrale de Lomé

emilygomaro@yahoo.fr

Dr Pidemnewé PATO

Chef section production animale et
halieutique à la Direction régionale de
l'agriculture de l'élevage et de l'hydraulique
(DRAEH) de la région maritime, avec chef-lieu,
Tsévié

patosteed@yahoo.fr;

Dr BouKaya GADO

Chef section production animale et
halieutique à la DRAEH de la région des
savanes, chef-lieu, Dapaong

gboukaya@yahoo.fr

Dr Simféilé ADOM

Chef section production animale et
halieutique à la DRAEH de la région de la
Kara, chef-lieu, Kozah

adomsimmelon@hotmail.com

Dr Yao AKPELI

Direction de l'élevage,
Chef, Division santé animale et laboratoire

akpeliyao@yahoo.fr

Dr Appere LATTAH

Chef section production animale et
halieutique à la DRAEH de la région centrale,
chef-lieu, Sokodé

lattahapere@yahoo.fr

**FOOD AND AGRICULTURE
ORGANIZATION OF THE UNITED
NATIONS (FAO)**

Dr Samia METWALLY

Animal Health Officer (Virologist),
Animal Production and Health Division
samia.metwally@fao.org

Dr Eran RAIZMAN

Senior Animal Health Officer (Infectious
Diseases),
Animal Production and Health Division
eran.raizman@fao.org

Dr Silvia KREINDEL

Veterinary Medical Officer
(Epidemiologist/Risk Analyst)
Animal Production and Health Division
silvia.kreindel@fao.org

EuFMD

Dr Christianus BARTELS

EuFMD Consultant
Animal Production and Health Division
christianus.bartels@fao.org

**WORLD ORGANISATION FOR ANIMAL
HEALTH (OIE)**

Dr Nadège LÉBOUCQ

OIE Sub-Regional Representative in Brussels
n.leboucq@oie.int

Dr Karim TOUNKARA

OIE Regional Representative for Africa
k.toukara@oie.int

**UNITED STATES DEPARTMENT OF
AGRICULTURE – ANIMAL AND PLANT
HEALTH INSPECTION SERVICE (USDA-
APHIS)**

Dr Cynthia DUERR

USDA-APHIS.IS Attaché
Area Director for West and Central Africa
Cynthia.K.Duerr@aphis.usda.gov

Dr Cheikh Sadibou FALL

Agriculture Specialist
USDA-APHIS.IS Dakar
Cheikh.S.Fall@aphis.usda.gov

Dr Macdonald W. FARNHAM

Agriculturalist
USDA-APHIS.IS Washington
Macdonald.W.Farnham@aphis.usda.gov

ORGANIZATIONS

**AFRICAN UNION INTERAFRICAN
BUREAU FOR ANIMAL RESOURCES
(AU-IBAR)**

Dr Henri KABORE

AU-IBAR VET-GOV Regional Coordinator for
ECOWAS
henrikabore@hotmail.com

MERIAL

Mr Nicolas DENORMANDIE-BOURSE

Director, Scientific Service & Africa/Middle
East Support Veterinary Public Health
nicolas.denormandie@merial.com

Mr Stéphane IMBERT

VPH Regional Director EMEA
stephane.imbert@merial.com

THE PIRBRIGHT INSTITUTE

Dr Donald KING

Head: WRLFMD and OIE Reference Laboratory
for FMDs
donald.king@pirbright.ac.uk

**AGENCE NATIONALE DE SECURITE
SANITAIRE DE L'ALIMENTATION, DE
L'ENVIRONNEMENT ET DU TRAVAIL
(ANSES)**

Dr Labib BAKKALI KASSIMI

Adjoint au Directeur UMR1161 Virologie
Expert auprès de l'OIE pour la fièvre aphteuse
labib.bakkali-kassimi@anses.fr

**ANTENNE SENEGAL DU RESEAU
BILLITAL MAROOBE (ASE-RBM)**

Mr Moustapha DIA
Point-Focal
rbm.sen@gmail.com

**COORDINATION TOGOLAISE DES
ORGANISATIONS PAYSANNES ET DE
PRODUCTEURS AGRICOLES (CTOP)**

M. Sandou Assimarou GNASSINGBE
Président du Conseil d'administration
ctop03@yahoo.fr

ECOWAS
H. Kabore
AU-IBAR VET-GOV Programme Coordinator
for ECOWAS
henrikabore@hotmail.com

Annex 3 - Summary of contents of country reports

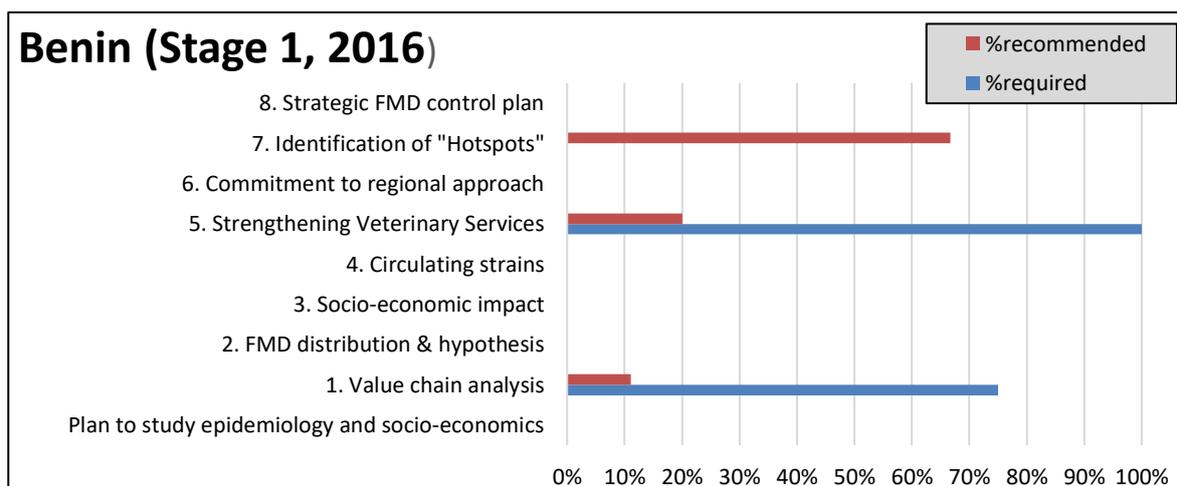
Benin



PCP-FMD Stage	
2016	1*
OIE PVS evaluation	2013

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)								
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Benin	1*	1	1	1	1	2	2	2	2	3	



Overview:

Sat1, A and O identified. No research plan (partnership with Merial/Botswana). 2016 had the higher number of cases and outbreaks since 1966.

Other notes:

- Develop an Assessment plan within 6 months
- Start implementing Stage 1 activities

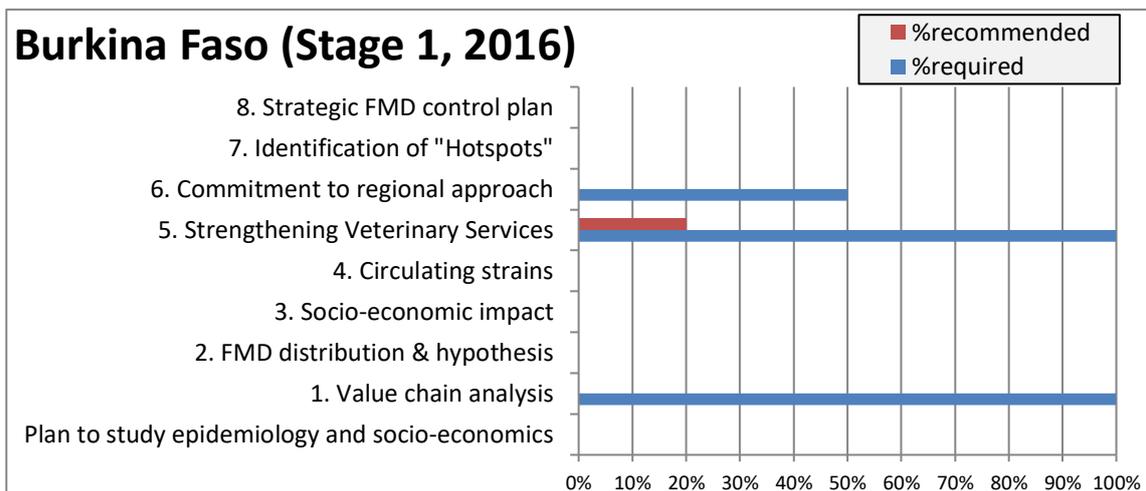
Burkina Faso



PCP-FMD Stage	
2016	1*
OIE PVS evaluation	2008

Provisional Roadmap 2016

Country	Validated Stages			Provisional Stages (not validated)							
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Burkina Faso	1*	1	1	2	2	2	3	3	3	3	



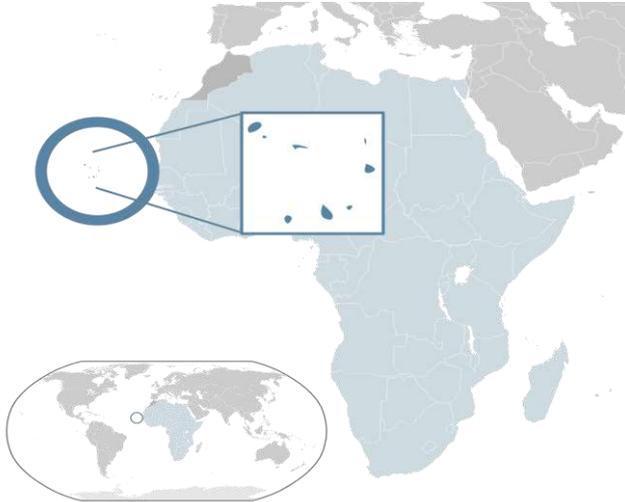
Overview:

FMD control program in place. No subtyping performed in outbreaks (2014-2016) detected in 4 regions. No impact assessment conducted.

Other notes:

- Develop an Assessment plan within 6 months
- Start implementing Stage 1 activities

Cape Verde

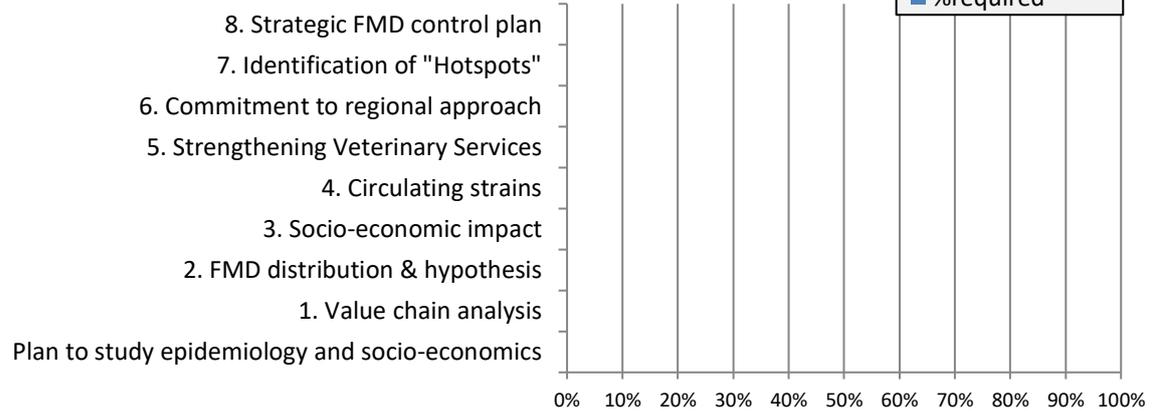


PCP-FMD Stage	
2016	0
OIE PVS evaluation	
	2014

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)								
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Cape Verde	0	0	0	1	2	3	3	4	5	5	

Cape Verde (Stage 0, 2016)



Overview:

No report or investigation regarding FMD. No envisioned surveillance or control plans Protective measures at borders (Ports and airports).

Other notes:

- Conduct surveillance
- Provide evidence of no virus circulation
- Reinforce VS (PVS Critical competences)
-

Cote d'Ivoire

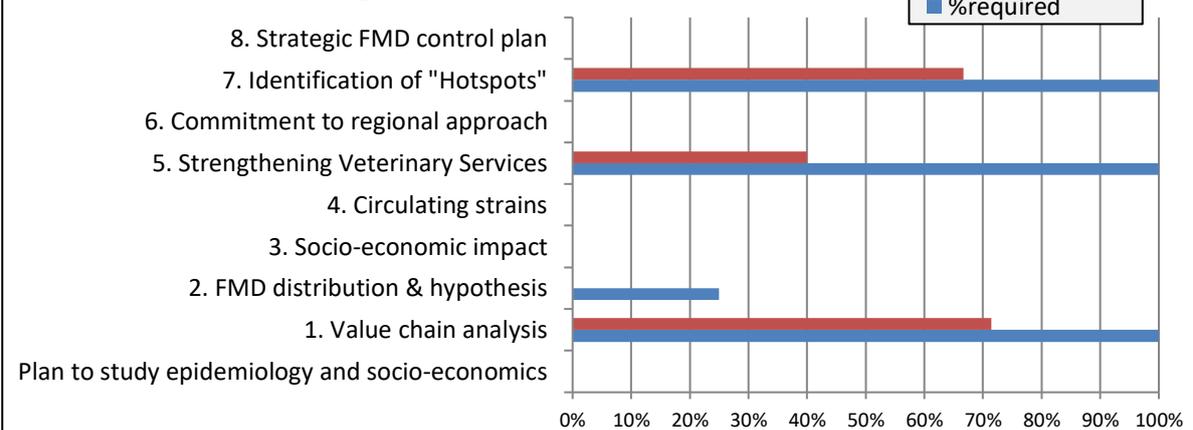


PCP-FMD Stage	
2016	1*
OIE PVS evaluation	
2011	

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)							
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Cote d'Ivoire	1*	1	1	1	1	2	2	2	2	3

Cote d'Ivoire (Stage 1, 2016)



Overview:

Identification of O and A subtypes in 5 districts (2014-2015). Impact assessment showed production decrease and control measures put in place. No FMD program.

Other notes:

- Develop an Assessment plan within 6 months
- Start implementing Stage 1 activities

The Gambia

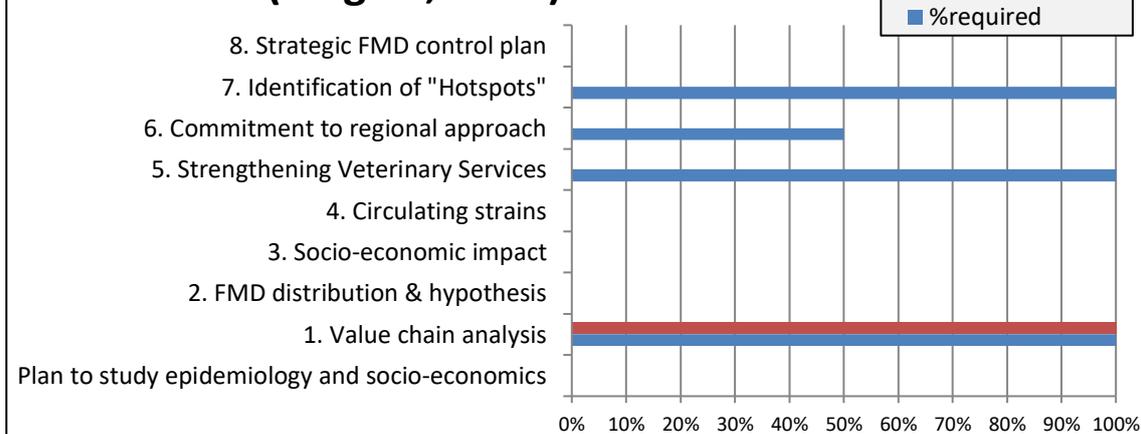


PCP-FMD Stage	
2016	1
OIE PVS evaluation	
	2009

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)								
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
The Gambia	1	1	1	1	1	1	1	1	1	2	

The Gambia (Stage 1, 2016)



Overview:

Endemic situation for FMD, with Sat1 and Sat2 identified since the 80's. Possible natural immunity in cattle (no data to support) has been suggested as a research topic. No socio-economic impact assessment realized to date. Control and surveillance plan in place (passive surveillance). Limited current control measures to avoid spread of sporadic outbreaks.

Other notes:

- Continue implementing Stage 1 activities to gain a full understanding of FMD
- Develop a RBSP on the basis of the Stage 1 activities results

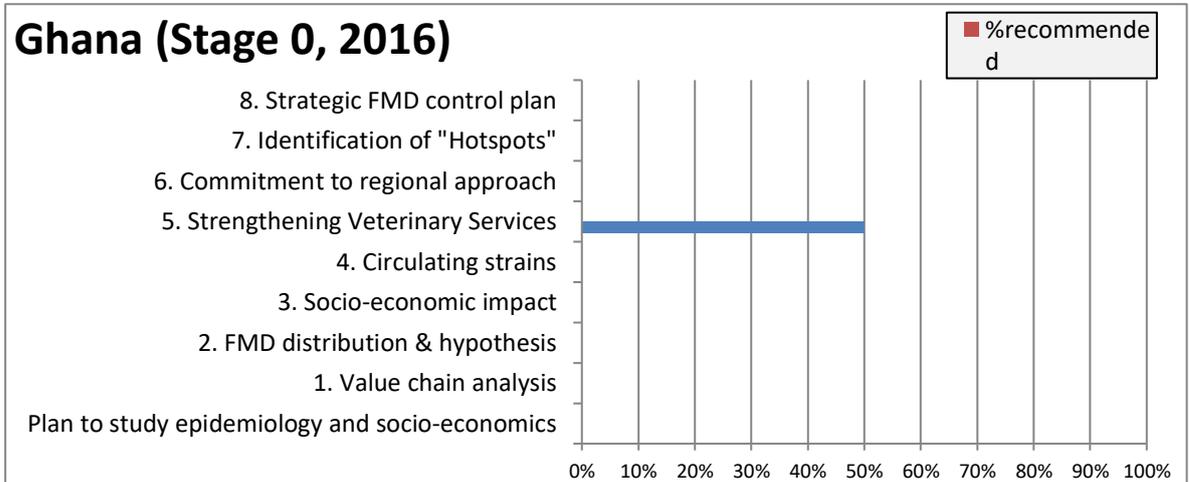
Ghana



PCP-FMD Stage	
2016	0
OIE PVS evaluation	
	2016

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)								
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Ghana	0	1	2	2	2	3	3	3	3	4	



Overview:

Subtypes O, A, Sat1 and Sat2. No FMD program, no research regarding the disease, no control measures in place and no impact assessment. Long standing realized PVS assessment (2007) and gaps analysis (2009). Surveillance included in other TAD program.

Other notes:

- Develop an Assessment plan

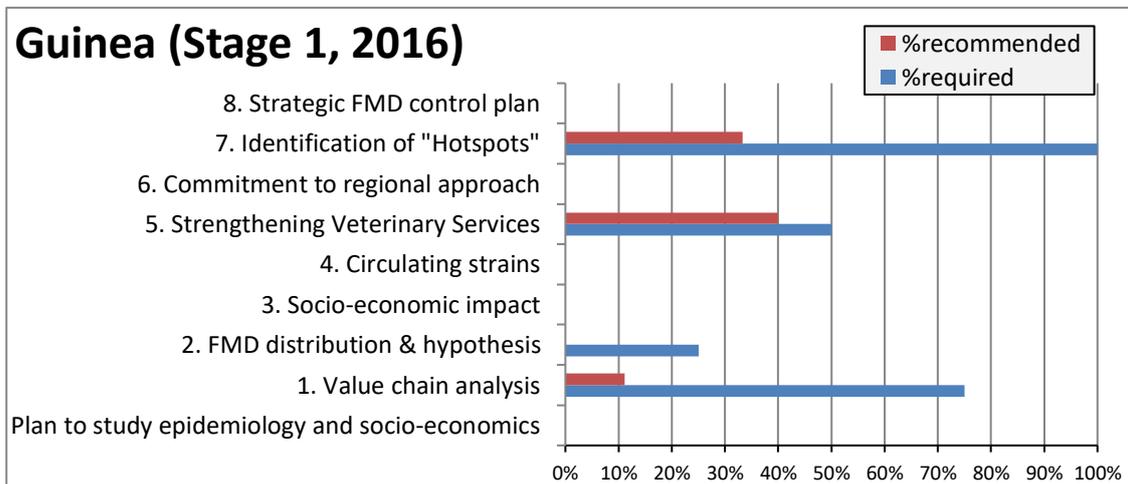
Guinea



PCP-FMD Stage	
2016	1*
OIE PVS evaluation	2007

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)								
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Guinea	1*	1	1	1	2	2	3	3	4	5	



Overview:

No outbreak notification to OIE (1999-2014). No socio-economic assessment realized, as FMD is not a priority disease for the country. Urgent need to improve VS, establish data collection system and laboratory capacities. No FMD control program.

Other notes:

- Develop an Assessment plan within 6 months
- Start implementing Stage 1 activities

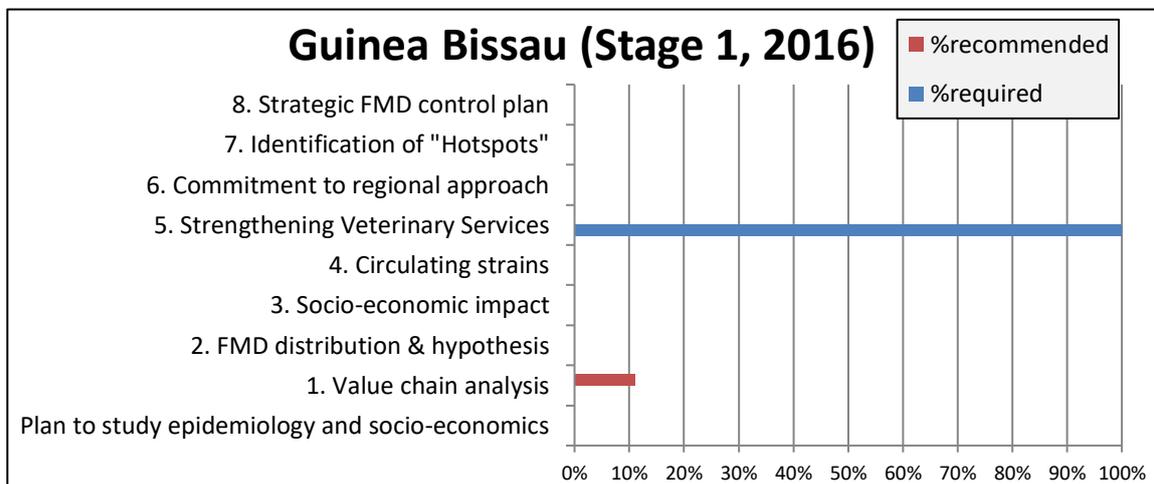
Guinea Bissau



PCP-FMD Stage	
2016	1*
OIE PVS evaluation	
2015	

Provisional Roadmap 2016

Country	Validated Stages			Provisional Stages (not validated)							
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Guinea Bissau	1*	1	1	2	2	2	4	4	4	4	



Overview:

Information regarding 2014 and 2015 outbreaks. No subtyping done in either outbreak (not possible to re-sample the herd). No socio-economic assessment realized and no vaccination plan in place. Emphasis the need of improve VS.

Other notes:

- Develop an Assessment plan within 6 months
- Start implementing Stage 1 activities

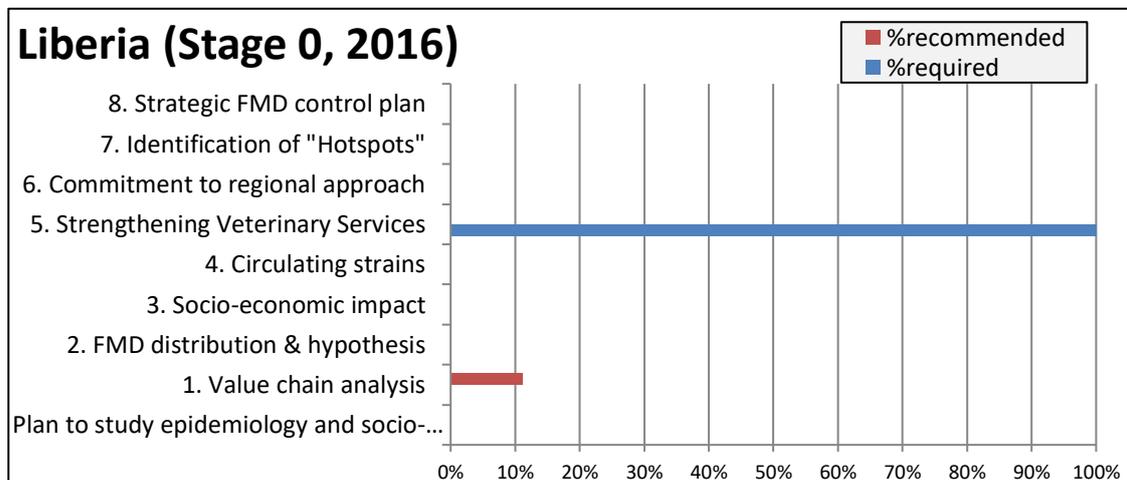
Liberia



PCP-FMD Stage	
2016	0
OIE PVS evaluation	
	2013

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)							
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Liberia	0	1	1	2	2	3	3	4	4	4



Overview:

No FMD reported cases. Improvement to be done on the VS. Potential funding coming from EPT-2 and The World Bank.

Other notes:

- Develop an Assessment plan
- Ensure adequate HR (training: recruiting; etc)

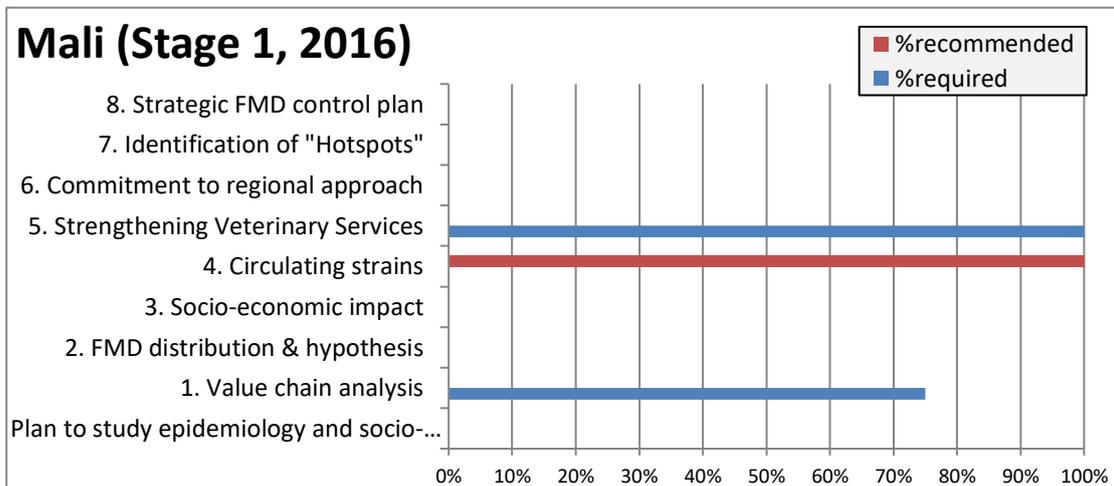
Mali



PCP-FMD Stage	
2016	1
OIE PVS evaluation	
	2007

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)								
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Mali	1	1	1	1	2	2	2	3	3	3	



Overview:

Subtypes Sat2, O and A identified. No FMD control program in place. Control measures put in place. Problems to send samples to laboratories. Impact assessment conducted but not evaluated.

Other notes:

- Continue implementing Stage 1 activities to gain a full understanding of FMD
- Develop a RBSP on the basis of the Stage 1 activities results

Niger

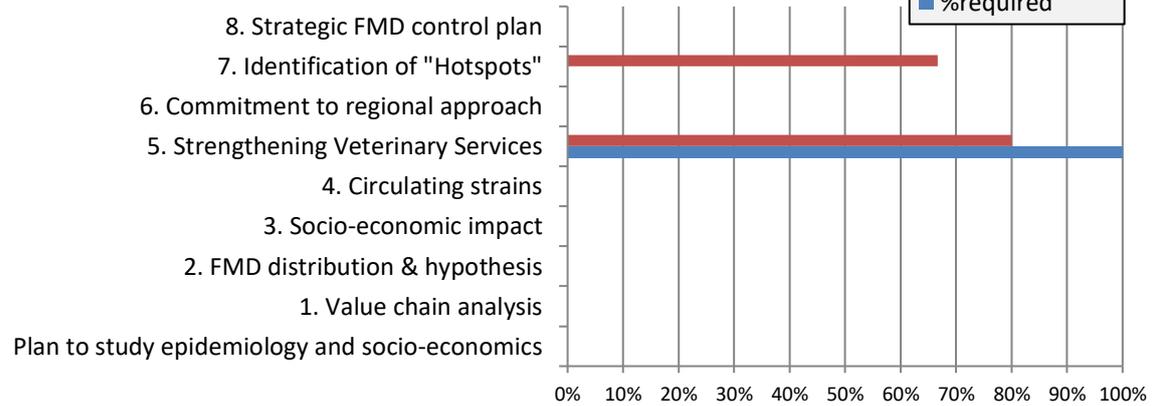


PCP-FMD Stage	
2016	1*
OIE PVS evaluation	2008

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)								
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Niger	1*	1	1	2	2	2	2	2	3	3	

Niger (Stage 1, 2016)



Overview:

Suspicion of FMD but no confirmation (2007-2014). Sat1, Sat2, O and A identified. Control measures put in place. No impact assessment. FMD is not a priority disease in the country, but included in other TAD's program. Need to reinforce VS and help is requested to create an FMD plan.

Other notes:

- Develop an Assessment plan within 6 months
- Start implementing Stage 1 activities

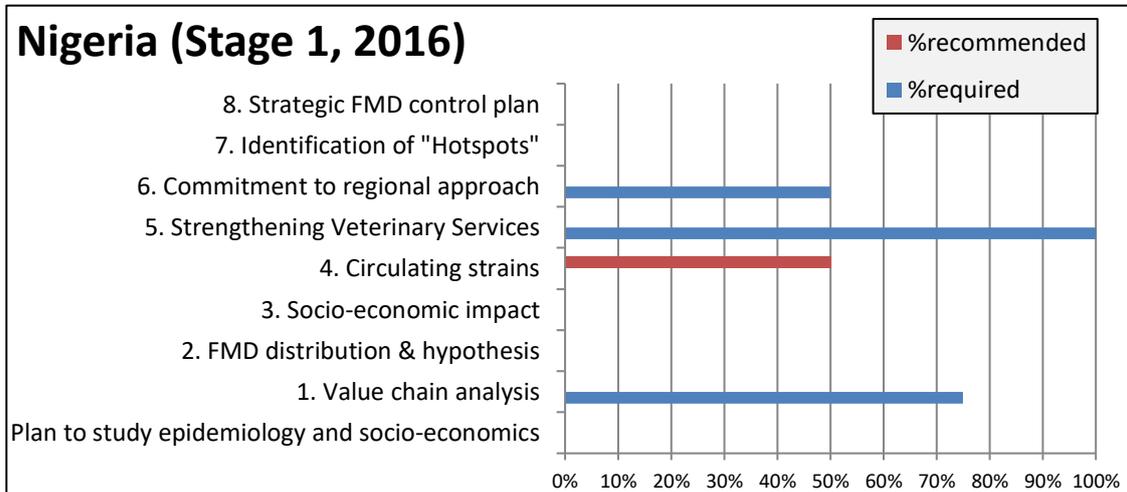
Nigeria



PCP-FMD Stage	
2016	1
OIE PVS evaluation	
	2007

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)							
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Nigeria	1	1	2	2	2	3	3	3	4	4



Overview:

Sat2, O and A identified. Endemic FMD situation. Gaps identification and vaccination program in place (high costs). No impact assessment.

Other notes:

- Continue implementing Stage 1 activities to gain a full understanding of FMD
- Develop a RBSP on the basis of the Stage 1 activities results

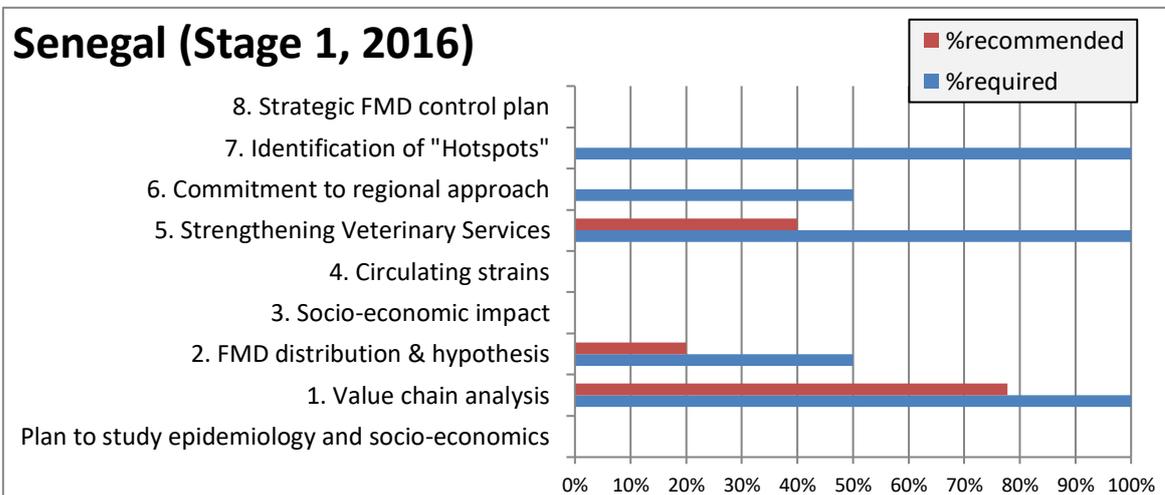
Senegal



PCP-FMD Stage	
2016	1
OIE PVS evaluation	
	2016

Provisional Roadmap 2016

Country	Validated Stages			Provisional Stages (not validated)							
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Senegal	1	1	1	2	2	2	3	3	3	4	



Overview:

Subtypes O, A and Sat2 identified in the past 5 years (outbreaks and infected regions). Specification of control measures and the limited use of passive surveillance. The presence of FMD is identified in 13 out of 14 regions in Senegal (absence in Kedougou) with a national seroprevalence rate of 27.26%; No control program established, as it is not a priority disease for the country.

Other notes:

- Continue implementing Stage 1 activities to gain a full understanding of FMD
- Develop a RBSP on the basis of the Stage 1 activities results

Sierra Leone

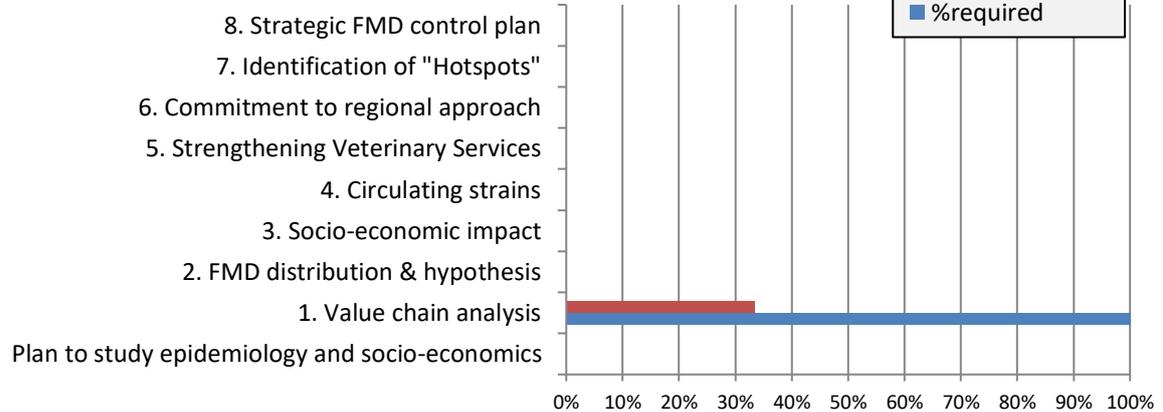


PCP-FMD Stage	
2016	0
OIE PVS evaluation	
	2010

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)								
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Sierra Leone	0	1	1	1	2	2	3	3	4	4	

Sierra Leone (Stage 0, 2016)



Overview:

Strengthening border inspection where diseases of interest are PPR, LSD and Rabies. Ebola surveillance in place (government level).

Other notes:

- Develop an assessment plan

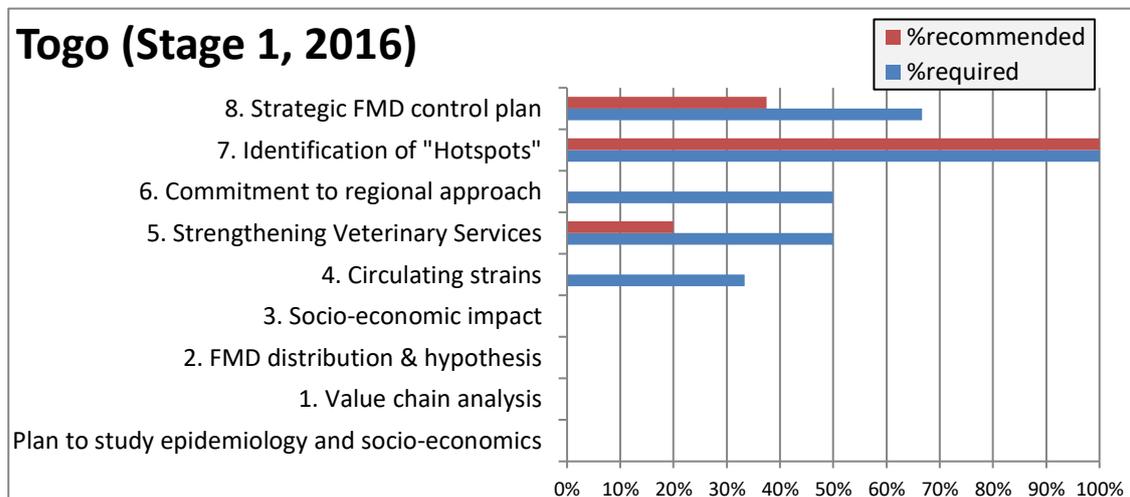
Togo



PCP-FMD Stage	
2016	1*
OIE PVS evaluation	2007

Provisional Roadmap 2016

Country	Validated Stages		Provisional Stages (not validated)								
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Togo	1*	1	2	2	2	2	2	3	3	4	



Overview:

Subtypes Sat1, O and A identified. No specific control measures implemented against FMD. Vaccination applied under farmer request. FMD on the top 10 priority diseases. Long standing realized PVS assessment (2007) and gaps analysis (2009). No FMD control plan and no surveillance.

Other notes:

- Develop an assessment plan within 6 months
- Start implementing Stage 1 activities

Annex 4 – RAG Terms of Reference

The Members of the RAG are elected *personae intuitae* for a 3-year mandate, renewable. The Terms of Reference of the RAG are recalled in the text box below; the new RAG Members will be trained to their responsibilities as RAG Members within the next 12 months by the GF-TADs FMD Working group, if time and budget permits

- To review the progressive control pathway (PCP)- FMD stage assessments of countries during the PCP-FMD regional roadmap meetings (Component 1)
- To guide FMD training and capacity development activities in countries to support FMD regional /national strategies and their alignment with the principles of the FAO-OIE Global FMD Control Strategy(June 2012)
- To provide an advice on the status of PCP assessments including the analysis of Performance of Veterinary Services (PVS) evaluations for relevant Critical Competences as identified in Component 2 of the FAO-OIE Global FMD Control Strategy
- To support technical review and implementation of national risk-based strategic control plans and other national and regional control plans
- To advise on issues or factors preventing effective progress of the FMD roadmap
- To support countries, if requested , in the preparation of applications to OIE for endorsement of their FMD national control strategy and for status official recognition
- To assist resolving problems and issues related to the implementation of regional activities and national strategies for the progressive control of FMD
- To promote ownership and enhance establishing enabling environment for implementation of control programs at national and regional levels To advocate at regional level with countries, private sector and donors the importance to invest in FMD control and prevention