



FAO/WOAH Consultative Seminar on progress made in FMD and PPR Regional Roadmap for East Mediterranean Countries
Beirut Lebanon 11th – 13th September 2022
FINAL REPORT

Background:

Peste des petits ruminants (PPR) and foot and mouth disease (FMD) are two major transboundary animal diseases for which global strategies were developed and endorsed by the international community in 2012 and 2015, respectively. The specific objective of the global FMD control strategy is to improve FMD control in regions where the disease is still endemic, thereby protecting the advanced animal disease control status in other regions of the world. The goal of the PPR global strategy is to eradicate PPR by 2030. These two Strategies require a globally concerted effort to support both national and regional actions to control and subsequently eradicate these diseases.

The two diseases are present in the Middle East countries where they affect the livelihoods of populations, particularly in rural areas. The FAO/WOAH GF-TADs regional steering committee organised, a consultative seminar for countries in the East Mediterranean, that are at stage 2 of the FMD-PCP and infected with PPR, to discuss the progress made and identify suitable solutions with the support of partner organisations.

Summary:

The meeting was attended by representatives from Egypt, Sudan, Syria, Jordan, Iraq, Lebanon, WOA, partners from AOAD, FAO, EU-FMD, ARRIAH and JOVAC. Opening remarks were made by the Minister in charge of Agriculture Lebanon, GF-TADs RSC chair of middle east Dr. Ibrahim Qassim Bukheiri, and Dr. Neo Mapiitse from WOA.

Dr. Qassim reiterated the importance of the meeting to provide support to countries implement their control plans and strengthen their level of preparedness.

Dr. Mapiitse emphasized the need to strengthen control measures and push for progress in controlling FMD virus circulation in the region. He mentioned that all countries had been assessed except Syria.

Dr. Qassim updated that for the FMD situation, Jordan, Saudi Arabia and Egypt had been validated at FMD-PCP stage 2, whereas Lebanon was expected to submit an updated Risk-based Strategic Plan (RBSP). In addition, Iraq has requested PVS assessment.

Dr. Mapiitse referenced the objectives of the past meeting held in December 2021 and called for progress amongst affected countries. To concertize the support, countries were encouraged to document and submit their plans, stating their priorities to tap technical assistance from Development partners.

The next two and half days of the meeting mainly discussed FMD and PPR situation in each of the targeted countries, and the proposals to address challenges. Partners present also discussed their related activities.

In implementing FMD control, **Iraq** expressed challenges with uncontrolled animal movement, lack of animal identification and traceability systems, few fields veterinary staff, shortage in FMD vaccine supply due to procurement challenges with Russia and lack of a database for livestock vaccinations. Similar weaknesses were mentioned in PPR control, in addition to low cooperation by livestock owners for vaccination, lack of DIVA test, inability to access thermostable vaccines, inefficient cooperation with private sector, prolonged dry weather that causes farmers to migrate and crowd in favourable areas, limited diagnostic capacity, lack of rapid diagnostic kits and non-existence of quarantine measures, smuggling and weak government actions.

Among the challenges raised by **Jordan** in FMD control were low biosecurity, uncontrolled livestock movement, weak organizational structure within the Ministry of Agriculture, lack of epidemiologists, limited workforce, having no sustainable budget and lack of a system for continuous training. Similar challenges were discussed under PPR control and eradication, in addition to irregular vaccination and post vaccination monitoring, lack of a national strategic plan, no specific regulation for PPR control, the need for value chain and socio-economic study and engagement of stakeholders through the national PPR committee.

Considering the political and economic situation in **Syria**, the team listed a number of challenges affecting FMD control, among them uncontrolled livestock movement in certain borders, lack of collaboration with neighbouring and regional countries, lack of vets and vet assistants, inaccessibility of quality vaccine in crisis prone areas, limited epidemiological capacity, low awareness and communication with farmers and stakeholders' participation, limited knowledge on disease modelling, weak reporting system, difficulty to conduct livestock census, participate in proficiency testing, no supportive legislation and delay in the evaluation of the PVS and gap analysis. The same issues are a challenge in control and eradication of PPR, in addition to halted supply of PPR vaccines by international organizations and absence of identifications of small ruminants. The meeting was updated that Syrian insurance supervisory commission would issue a new decision concerning livestock insurance in October 2022.

In **Lebanon**, the political and economic situation was reported to be affecting veterinary service provision. Among the challenges mentioned were shortage of veterinary staff, limited finances and delay in facilitation for surveillance, vaccination and diagnosis, insufficient laboratories for FMD testing, low awareness contributing to under reporting. The team requested support to conduct epidemiological assessments, value chain and socio-economic studies, support to establish an epidemiology unit, to conduct countrywide awareness campaigns to increase participation of livestock keepers and mechanisms to share epidemiological information within the region.

Sudan was categorized as provisionally in FMD-PCP stage 2, though RBSP was yet to be finalized and updated. FMD-WG acknowledged they would provide their feedback to further guide the process. The issues affecting PPR control and eradication included: limited financial resources, inadequate supply of vaccines, uncontrolled livestock movement, weak livestock identification and traceability system, insufficient capacity to enforce biosecurity, lab safety and quality assurance. Sudan also requested technical assistance to conduct a value chain analysis study, socio-economic study, support to establish laboratory quality assurance, to conduct risk mapping, establish livestock identification and traceability system, support to develop a livestock database, build VS capacity on zoning and compartmentalization in order to expand vaccination coverage to the categorized zone A and design a sero-monitoring program for the same zone, and support for training on diagnostics, survey design, monitoring and evaluation.

Egypt updated the meeting that their epidemiological reports show a decline in confirmed outbreaks of FMD from 91% in 2015 to 66.3% in 2021. They also showed progress with PPR vaccination coverage over the years, albeit below 35%. Some of the challenges they still face include low vaccination coverage, financial constraints to target more training for field veterinarians, weak engagement of private sector vets in reporting, low awareness and communication with farmers, identification and registration of sheep and goats specifically in nomadic husbandry systems. Egypt also expressed the need for technical assistance to conduct risk assessments at borders, conduct FMD post vaccination monitoring and to access NSP kits, awareness campaigns to increase livestock owners' participation in post vaccination monitoring, support for staff training and technical support to produce vaccine with long duration. As a side note, Egypt updated the meeting that they had submitted a request to WOAHP to have their lab considered as a reference lab for brucellosis and influenza.

EU-FMD presented their work promoting of public-private partnerships (PPP) for Foot-and-mouth and Similar Transboundary animal Diseases (FAST) monitoring and control and development of new partnerships. The presentation included WOAHP PPP initiatives from 2016 to 2021. EU-FMD activities are in Iran, Algeria and Sudan. The process is highly consultative and relevant courses are available online. Sudan indicated they were considering a PPP initiative for other TADs. Other countries were encouraged to consider PPP approach to increase their reach and as a solution to some of the listed challenges.

PPR in the wildlife was further discussed in this consultative seminar. Professor Ahmad Almajali (FAO subregional office of GCC and Yemen) gave a presentation on the epidemiology of PPR in the wildlife and discussed wildlife role in spillover and maintenance of the PPRV in the environment. Integration of the PPR wildlife control in the GEPII strategy was also discussed and recommendation was made on establishing a special network for wildlife health problem in the region.

The global GF-TADs secretariat made a presentation about the Partnership and Financing Panel (PFP) whose objectives were: a) Financing the prevention and control of TADs, b) Developing partnerships for Member countries to increase the sustainability of their TADs control strategies and c) Connecting the funding and financing capacities of specific TADs strategies and identify concrete relevant targets and linkages with financial institutes. Countries were advised to map current and missing partners to achieve control programmes against FMD and PPR, to cost the national programme against FMD and PPR for the next 5 years (or until eradication) and identify the available resources.

Comments:

To address some of the challenges, it was discussed the need for cross border or regional harmonization and coordination in control through an animal health network, stakeholder awareness and communication programs, including suggestion to disseminate informative videos through social media especially targeting women and youth farmers in Iraq and the need to pilot PPP initiatives. It was also discussed the need to strengthen VS institutions with high-level advocacy required to implement the global plans. Jordan, Lebanon and Syria specifically identified the need for support to strengthen their epidemiological capacity, support to conduct value chain and socio-economic studies, strengthen veterinary services and veterinary legislation. FMD WG assured the countries that the FMD reference lab was ready to support sample shipment and vaccine matching.

In addition, the countries acknowledged that the progress made had not been as initially anticipated in the roadmaps. Therefore, to stay on course with PPR control and eradication, Jordan, Iraq and Lebanon should prioritize development and validation of their PPR national strategic and investment plans whereas Syria, Egypt and Sudan to prioritize updating and having their plans validated. Upon validation, the countries should be supported with high level advocacy material to ensure countries (and partners) commit resources to facilitate implementation.

The discussion recognized there is no DIVA test commercially available currently. However, there is need to increase awareness on how to access thermostable vaccines with support from PPR secretariat and WOAHP vaccine bank.

Syria expressed concern with delay in the evaluation of the PVS and gap analysis. Due to the crisis, the governance structures and financial capacity was weak and therefore would require more support to strengthen their veterinary capacity, diagnostic capacity and access inputs required. As was the case in most of the countries, PPP initiatives are yet to be implemented and worth being piloted or strengthened especially for regions that aren't easily accessible and to solve some of the mentioned challenges.

For countries having difficulty to access vaccines such as Iraq, Sudan, Syria and Lebanon, WOAHP vaccine bank awareness can be provided to the respective delegates and focal points. However, for the latter two countries, the issue is attributed to financial constraints with Syria heavily dependent on partners for vaccine supply (from JOVAC Jordan) and delivery.

Conclusion:

All countries were encouraged to document their specific disease control plans and prioritize their needs so that development partners could consider.

Regional coordination and the need for harmonization of disease control programs, information sharing and synchronisation in implementation was suggested by all countries. [AOAD](#) indicated their coverage to include middle east and some African countries, supporting agricultural development activities. There is need to explore collaboration with such regional partners to support part of the coordination activities that FAO/WOAH are not able to facilitate.