



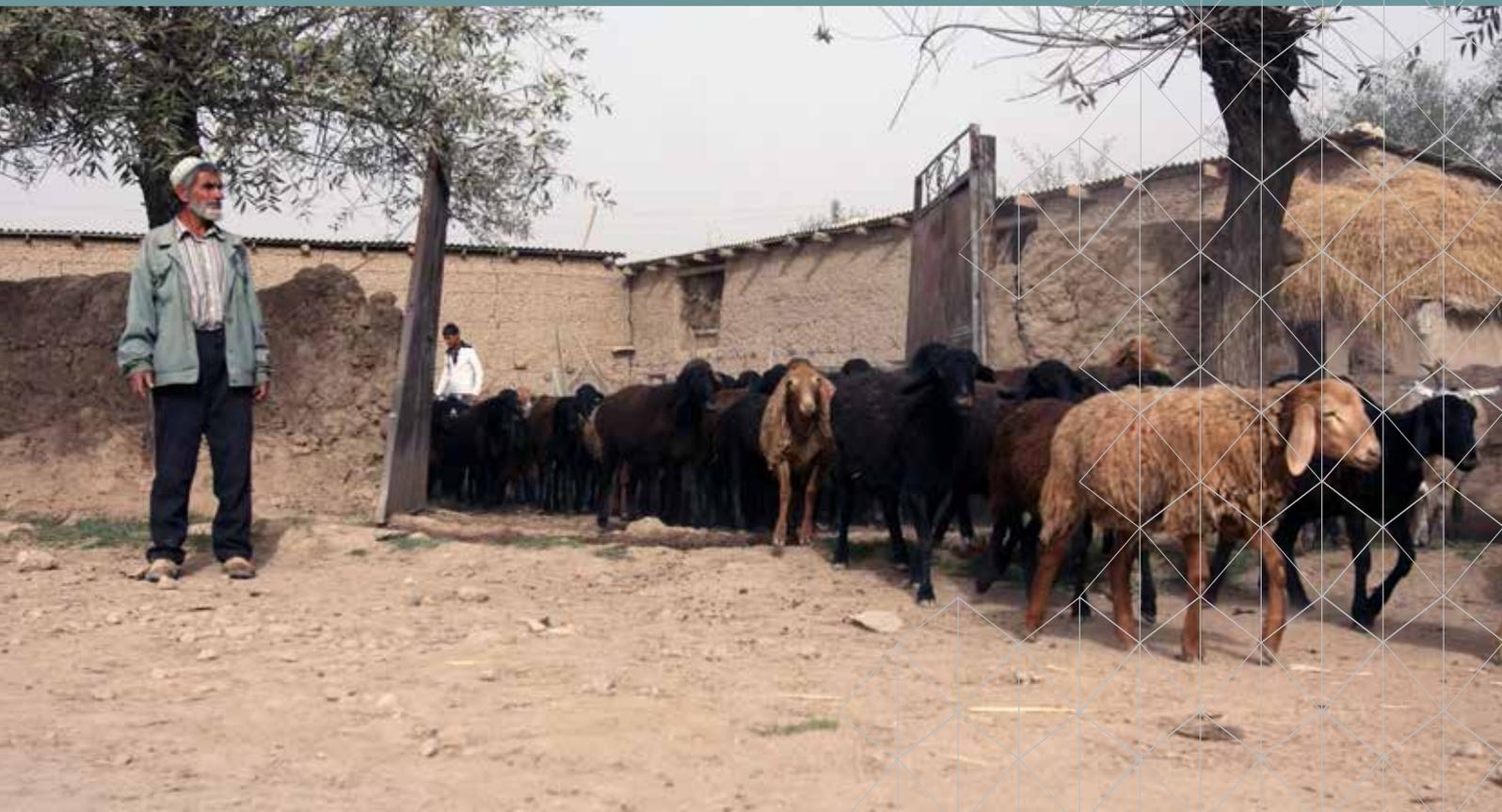
Food and Agriculture
Organization of the
United Nations



World Organisation
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Third Meeting of the Global Coordination Committee on Foot-and-Mouth Disease (GCC-FMD)

*Report of the virtual meeting
25 January 2023*



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**Global Coordination Committee on
Foot-and-Mouth Disease (GCC-FMD)**

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Recommended Citation

World Organisation for Animal Health and FAO. 2024. *Third Meeting of the Global Coordination Committee on Foot-and-Mouth Disease (GCC-FMD) – Report of the virtual meeting, 25 January 2023*. Paris. <https://doi.org/10.4060/cc9259en>

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Acknowledgements

The Food and Agriculture Organization of the United Nations (FAO) and the World Organisation for Animal Health (WOAH) express their deep appreciation to the representatives of global and regional organizations and FAO and WOAH regional offices for their active participation and contributions to achieving the objectives of the third meeting of the Global Coordination Committee on Foot-and-Mouth Disease (GCC-FMD). This meeting was organized under the umbrella of the Global

Framework for the Progressive Control of Transboundary Animal Diseases (GF-TADs) by its FMD Working Group (FMD-WG).

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Abbreviations

CVO	Chief Veterinary Officer
DTRA	United States Department of Defense, Defense Threat Reduction Agency
EuFMD	European Commission for the Control of Foot-and-Mouth Disease (an intergovernmental commission based at FAO)
FAO	Food and Agriculture Organization of the United Nations
FMD	Foot-and-mouth disease
FMD-WG	GF-TADs FMD Working Group
GCC-FMD	Global Coordination Committee on Foot-and-Mouth Disease
GF-TADs	Global Framework for the Progressive Control of Transboundary Animal Diseases
GS	Global FMD Control Strategy
WOAH	World Organisation for Animal Health
PCP-FMD	Progressive Control Pathway for Foot-and-Mouth Disease
PPP	Public-Private Partnership
PVM	Post-vaccination monitoring
REC	Regional Economic Community
TADs	Transboundary animal diseases
UN	United Nations
WRLFMD	World Reference Laboratory for Foot-and-Mouth Disease, The Pirbright Institute, UK

Meeting report

BACKGROUND

The Global Foot-and-Mouth Disease Control Strategy (FMD-GS) was developed in 2012 under the FAO/WOAH Global Framework for the Progressive Control of Transboundary Animal Diseases (GF-TADs) to support FMD-endemic countries to reduce the burden and impact of FMD. This strategy emphasizes the importance of a regional approach to exchange information and experiences, coordinate efforts, develop regional roadmaps showing the country's ambitions, and allow regular progress assessment.

As the FMD-GS advances its implementation to benefit from and coordinate with the ongoing regional programmes, FAO and WOAHA established a Global Coordination Committee on FMD (GCC-FMD) in 2021. The committee comprises representatives of international and regional organizations, institutions, technical entities, development partners and other relevant stakeholders involved in implementing FMD control initiatives. Further information about the GCC-FMD, including the objectives and expected outcomes, can be found in the report of the first meeting ([see link](#)).

Two previous meetings of the GCC-FMD have been convened (see Table 1). The purpose of the third meeting was for the Standing Members to review recommendations developed around the four thematic areas and endorse an action plan. The meeting was held in English with simultaneous French interpretation.

MINUTES OF THE THIRD MEETING

Néo Mapiitse and Madhur Dhingra opened the meeting on behalf of WOAHA and FAO, respectively. They emphasized the importance of the GCC-FMD in bringing together recognized stakeholders in FMD control from all endemic regions to share information, lessons learnt and good practices.

This enables alignment between regions and with the FMD-GS. Challenges to achieving FMD control are similar across the regions and include access to quality vaccines matched with circulating FMD strains, surveillance to properly monitor the risks, and assessing the impact of control strategies. Strengthening capacities within endemic countries is central, as well as using those capacities to develop evidence that can be used for political advocacy and funding support. The need to align and promote FMD control with other transboundary animal disease (TAD) strategies and the GF-TADs Strategy was stressed (per component 3 of the FMD-GS). Finally, the need for effective PPP is recognized, and

TABLE 1. GCC-FMD meetings

	Key outcomes	
First meeting: September 2021	Common themes critical to FMD control across all endemic regions identified, including: <ul style="list-style-type: none"> • access to quality vaccines; • maintaining and sharing up-to-date surveillance information; • veterinary services' capacity; and • the importance of political will for a long-term commitment to FMD control. Tools and mechanisms are available to improve FMD control; however, their uptake has not been optimal in all regions.	Link to report
Second meeting: April 2022	Focus on four thematic areas, namely: <ol style="list-style-type: none"> regional governance; Public-Private Partnership (PPP); advocacy; and technical issues (diagnostic, epidemiology, vaccines and vaccination resources). A Padlet board was used for interactive participation and to record inputs.	Link to report

the GF-TADs has established the Partnering and Financing Panel (PFP) to help mobilize the necessary partnerships and resources needed for effective disease control.

Melissa McLaws summarized the two previous meetings and stressed that this third meeting aims to review the draft outputs and activities developed around the four thematic areas identified in previous meetings and, if time allows, endorse the action plan.

Néo Mapiitse provided a presentation of the Thirteenth GF-TADs Global Steering Committee meeting (GSC13) held in January 2023, highlighting the main challenges and gaps identified for the effective prevention and control of FMD. He presented the vision to address the following issues: (i) lack of financial resources and competing priorities, (ii) gaps in surveillance, (iii) challenges to promote effective and affordable vaccines, and the support needed specific to FMD. The GSC13 recognized the work done by FAO and WOAHA and the strengthened collaborations, with recommendations for the governing bodies of the GF TADs and disease groups to focus on collaborations, coordination, communications, advocacy and synergies.

Manuel Sanchez presented the proposed action plan of the GCC-FMD, composed of six main blocks (see Table 2). Inputs from participants were collated through a Padlet board and discussion.

TABLE 2. GCC-FMD proposed action plan

	Block	Objective
Strategic	1. Strengthening of regional governance mechanisms	Enable coordination of the regional FMD control strategy, including the public and private sectors.
	2. Promotion of the creation of a network of public-private associations	Establish strategic PPPs that support the different components of an FMD control programme.
	3. Ensure effective advocacy for FMD control	Advocacy at national and regional levels ensures political commitment and the provision of resources for FMD control. There is a unified inter-institutional message on the importance of FMD control, including resource partners.
Technical	4. Facilitate knowledge and access to laboratory diagnostic tools	Identify gaps in access to diagnostic tools and strengthen their use.
	5. Facilitate knowledge and access to epidemiological tools	Identify gaps in knowledge and access to epidemiological tools and strengthen their use.
	6. Promote the use of quality vaccines and adequate vaccination strategies	Promote the mechanisms to achieve adequate selection and approval of the vaccines and the design and implementation of robust vaccination plans.

Manuel Sanchez moderated the discussions for the first three blocks:

Block 1: Strengthening of regional governance mechanisms

Block 2: Promotion of the creation of a network of public-private associations

Block 3: Ensure effective advocacy for FMD control at the national and regional levels

The discussion focused on the need for more robust advocacy to strengthen the political commitment to TADs control and FMD control. Some resource partners support a multi-disease approach; however, concrete activities from such approaches might be hard to identify. Following the Good Emergency Management Practices (GEMP) provides a strong foundation for multi-TADs preparedness. For example, the Arab Organization for Agricultural Development (AOAD) has adopted a TADs strategy. Some specific discussion points included:

- It is recommended to share success stories of PPPs (e.g. the collaborative PPP in the South Americas) and to develop slogans/simple messages specific to the epidemiological situation (or PCP-FMD stage) that could be shared with stakeholders.
- The benefits to the private sector for engaging in PPP need to be clearly defined.
- In some countries, the legislation may not support PPP initiatives.
- Inter-regional exchange of governance successes and best practices is essential.
- Dashboards (similar to those currently developed by EuFMD and the Southeast Asia, China and Mongolia Foot-and-Mouth Disease (SEACFMD) Campaign) may be impactful in displaying valuable and straightforward information to policymakers (e.g. policy briefs).

- For advocacy purposes, there should be further development and/or communication of metrics on the cost/benefits of FMD control strategies and the value of investment in veterinary services capacity building.
- There is value in multi-stakeholder platforms on issues such as vaccine security, capacity building and diagnostics, with interest from the private sector.
- The GF-TADs PFP and the GCC-FMD have similar interests, so collaboration may be appropriate, particularly in mapping stakeholders and identifying financial resources to support FMD control.

Alejandra Capozzo moderated the discussions for the three following blocks:

Block 4: Facilitate knowledge and access to laboratory diagnostic tools

There are gaps in surveillance in many endemic regions believed to be associated with under-reporting and challenges in sample collection and shipment, and insufficient laboratory capacity. However, the exact nature of the challenges in each region is not fully understood globally.

Sample collection and submission:

- Shipment of samples to international reference laboratories is costly and logistically challenging. In some regions, it is difficult to find dry ice for international sample shipment for FMD virus characterization.
- The African Union – Interafrican Bureau for Animal Resources (AU-IBAR) and the African Union – Pan African Veterinary Vaccine Centre (AU-PANVAC) seek to establish a mechanism to assist countries with sample shipment to AU-PANVAC or regional support laboratories.
- AU-IBAR, with FAO, supports some African islands (Cabo Verde, Comoros and Sao Tome and Principe) to provide evidence for FMD freedom to WOH through training and sample collection.

- There is a need to raise awareness of the importance of sampling for FMD diagnosis.

Diagnostic tools:

- A wide range of laboratory tools are available for FMD, but cost hampers their deployment, raising concerns about sustainability. Many tools are developed in well-equipped Western laboratories and are perhaps unfit for the needs of endemic and poorly resourced settings.
- A review of diagnostic tools, priorities in endemic settings and the feasibility of deployment could be led by the FAO/WOAH Reference Laboratory Network.
- The effectiveness of laboratory training delivered to date should be evaluated to determine how well capacities are strengthened sustainably in endemic settings.
- Complete technical protocols for validating and implementing diagnostic methods should be made available.
- Pen-side tests can overcome the challenges of sample submission.
- A series of “How-to” technical recordings/video tutorials could enrich an open-access diagnostic toolbox. Existing eLearning/online material could be reviewed by a focus group or junior technicians.

Block 5: Facilitate knowledge and access to epidemiological tools

- Surveillance data for FMD is patchy, biased, and there is a lot of missing data. There is an opportunity for international organizations, academia and laboratories to bring together the available data to estimate how much FMD is present (estimate the global burden of the disease). The GCC could provide some advocacy in that space.
- The dashboards that WRLFMD is developing with funding from EuFMD will address surveillance data and, later, may include vaccine-matching data and virus sequence data. Donald King invited any

Standing Members to collaborate in this broader project.

- It was suggested to conduct a survey targeting experts working in FMD-applied epidemiology at regional and national levels to understand what models/study designs are being implemented for FMD surveillance and post-vaccination monitoring. This work would help explore to what extent data generated through various surveillance activities are comparable.

Block 6: Promote the use of quality vaccines

- There are difficulties with FMD vaccine registration; cumbersome procedures exist in some countries.
- Customers (countries) may prioritize vaccine price over quality.
- Education of vaccine customers and decision-makers should be a priority, as they can directly influence the vaccine producers to improve the quality of the product.
- A list of key questions should be developed when a customer (country) is willing to approach an FMD vaccine manufacturer to ensure the vaccine purchased is suitable for use.
- EuFMD is leading regional groups for vaccination advice, contributing to transparency and information-sharing on vaccination strategies and encouraging post-vaccination monitoring (PVM) studies.
- It was suggested that a sub-group of the GCC-FMD could focus on vaccines and vaccination.

Manuel Sánchez concluded the third meeting of the GCC-FMD. The main six blocks and objectives were agreed upon by the participants. However, more discussions are needed to identify good practices in some regions that could be adapted to other regions and focused discussions on each block.



List of participants

1. THE STANDING MEMBERS OF THE GCC-FMD:

- Chair: Pan American Foot-and-Mouth Disease Center (PANAFTOSA)
- Co-chair: Global FMD Research Alliance (GFRA)
- Standing Members:
 - African Union – Interafrican Bureau for Animal Resources (AU-IBAR)
 - Arab Organization for Agricultural Development (AOAD)
 - Association of Southeast Asian Nations (ASEAN) Secretariat
 - Economic Community of Central African States (ECCAS)
 - ECOWAS Regional Animal Health Centre (RAHC)
 - Eurasian Economic Commission
 - Intergovernmental Authority on Development (IGAD)
 - South Asian Association for Regional Cooperation (SAARC) Secretariat
 - Southeast Asia, China and Mongolia Foot-and-Mouth Disease (SEACFMD) Campaign
 - Southern African Development Community (SADC) Secretariat
 - The European Commission for the Control of FMD (EuFMD)
 - The Pirbright Institute, World Reference Laboratory (WRL) for FMD

2. THE FMD-WG:

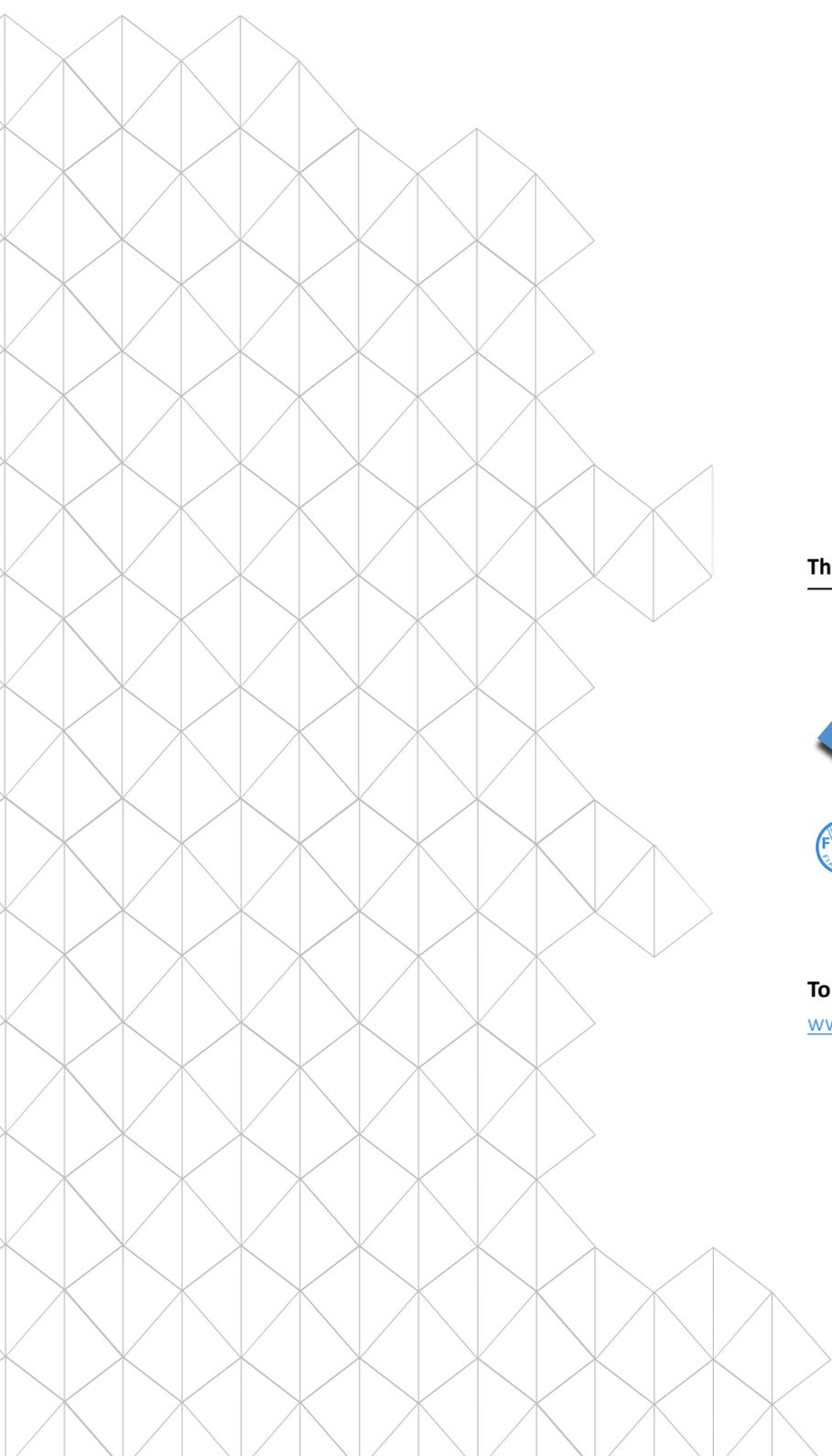
- FAO: Melissa McLaws, Madhur Dhingra, Muhammad Javed Arshed
- WOA: Néo Mapitse, Bolortuya Purevsuren, Mohamed Sirdar
- EuFMD: Fabrizio Rosso

3. FAO/WOAH REGIONAL REPRESENTATIONS:

FAO	Charles Bebay	Africa
FAO	Muhammed Shamsuddin	Africa
FAO	Friederike Mayen	Near East and North Africa
FAO	Eran Raizman	Europe and Central Asia
FAO	Scott Newman	Asia and the Pacific
FAO	Andrés González Serrano	Americas
WOAH	Karim Tounkara	Africa
WOAH	Mereke Taitubayev	West Eurasia
WOAH	Ghazi Yehia	Near East and West Eurasia
WOAH	Karma Rinzin	Asia
WOAH	Luis Barcos	America
WOAH	Mohamed Ali Alhosani	Near East and West Eurasia
WOAH	Moetapele Letshwenyo	Africa
WOAH	Viola Chemis	Africa/HQ
WOAH	Rachid Bouguedour	Africa

Agenda

Time (CEST)	Topics	Speaker	Moderator
12:00–12:10	Opening and meeting agenda <ul style="list-style-type: none"> • Opening remarks • Meeting objectives and adoption of the agenda 	FAO and WOAH FMD-WG	Chair: M. Sánchez Vazquez GCC-FMD Chair
12:10–12:20	Summary from the previous meeting: priority areas of work for each theme	M. McLaws (FAO) FMD-WG Co-chair	Facilitator: M. McLaws (FAO) FMD-WG Co-chair
12:20–12:40	Key outcomes of the GSC13 on FMD	N. Mapiitse (GF-TADs MC)	
12:45–13:30	Action plan Present proposed strategic action plan – Themes: regional governance and PPP Discussion	M. Sánchez Vazquez GCC-FMD Chair Standing Members of the GCC-FMD	
13:30–13:40	Virtual coffee break		
13:40–14:40	Action plan Present proposed strategic action plan – Themes: advocacy and technical issues Discussion	A. Capozzo FMD-WG Co-chair Standing Members of the GCC-FMD	Chair: A. Capozzo GCC-FMD Co-chair
14:40–15:00	Wrap-up (summary) and next steps for the GCC-FMD	M. Sánchez Vazquez GCC-FMD Chair	Facilitator: N. Mapiitse (WOAH) FMD-WG Co-chair



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