Regional Steering Committee for the Middle East of the GF-TADs

Meeting Report
7 November 2006
Damascus, Syria

Members present:

Dr George Khoury (Syria): (President)
Dr Dewan Sibartie (OIE, Paris): (Vice President)
Dr Keith Sumption (FAO, Rome): (replacing Dr Jémi Domenech, Vice-President)
Dr Ghazi Yehia (OIE, Lebanon): Secretary
Dr Salman Abdelnabi (Bahrain)
Dr Ahmed Mustafa Hassan (Sudan)
Dr Mohamed Al Muhanna (Kuwait)
Dr Obeida Moudawar (FAO regional coordinator for Avian Influenza)

Observers:

Dr Mahmoud S. Orabi (USDA/APHIS)
Dr Charles Martins Ferreira (France)
Dr. Fayssal Bayoumi (KSA)

Other Observers:
Dr. Emad Mukarkar (Palestinian authorities)
Dr. Sana’a Jundi (Lebanon)
Dr. Abdul Aziz (Sudan)
Dr. F Geiger (EUFMD)

Remarks:

1. Dr Khoury welcomed all participants and explained that the GF-TADS Regional Steering Committee (RSC) for the Middle East (ME) was meeting for the first time after its creation by the FAO and OIE in April 2006 in Beirut, Lebanon.

2. The RSC expressed concern that although significant resources have been pledged in Beijing, no clear guidelines have been provided by FAO and OIE Headquarters about the funding of activities of the Regional RSC. It was agreed that until clear instructions are received, the RSC Secretariat will continue to organise activities based on a cost sharing basis with FAO and the support of bilateral and other donors as exemplified by the organisation of the 3rd foot and mouth disease (FMD) roundtable that preceded the RSC meeting.
3. The RSC endorsed the work plan proposed by the Secretary. (Appendix 1)

4. The RSC authorised the Secretary to identify a consultant to develop a strategic vision document on regional harmonised policy for the control of animal diseases and zoonoses in the ME, aimed at capacity building for Veterinary Services. The document should address an ambitious plan to eradicate FMD in the region based on the experience of Pan African Rinderpest Control (PARC). It will also include activities related to the evaluation of Veterinary Services using the OIE Performance, Vision, Strategy (PVS) tool.

5. The Secretary will invite Chief Veterinary Officers of the region to nominate National Liaison points for GF-TADs activities.

6. The RSC expressed appreciation for Agreement between the Governments of Greece and Lebanon to create at the seat of the OIE Regional Representation in Lebanon, under the aegis of the MZCP, a Centre for Food Borne Diseases and Food Safety. The Government of Greece will provide funding for the first six months after which the Centre will be handed over to the Regional Animal Health Centre to be created under the RSC.

7. The RSC welcomed the organisation by OIE and the Government of Kuwait, of a seminar on PVS for member countries of the region to be held in Kuwait in December 2006.

8. The RSC noted that the USDA/APHIS will organise in collaboration with OIE, an epidemiological surveillance workshop in Egypt in January 2007. Funding will be provided by APHIS but the OIE will be requested to sign the joint invitation letters.

9. The RSC considered the various regional issues involved in the context of GF-TADS and made the following recommendations:
   - All the recommendations made by the 3rd FMD Roundtable which preceded the RSC meeting be endorsed; (Appendix 2)
   - An annual FMD roundtable for the region be organised under the auspices of the RSC.
   - GCC be accepted as an additional observer in the RSC.
   - FAO be urged to sign the Agreement between OIE and FAO for the creation of the Regional Animal Health Centre in Beirut, Lebanon within the least possible delay. (Appendix 3).
APPENDIX 1

Regional Steering Committee for the Middle-East of the GF-TADs

Meeting on FMD surveillance and control (3rd FMD roundtable)

6-7th November 2006

Damascus, Syria

Regional GF-TADs’ Action Plan in the Middle East (HOW TO MAKE IT OPERATIONAL):

1- REGIONAL STEERING COMMITTEE FOR THE ME:

MAIN OBJECTIVES: Adapting policies and programs to the region needs with regard to epidemiology and prevalence of priority diseases

Members:

Dr George Khoury (SYRIA) (President)
Dr Joseph Domenech (FAO) (Vice President)
Dr Dewan Sibartie (OIE) (Vice President)
Dr Salman Abdelnabi (Bahrain)
Dr Ahmed Mustafa Hassan (Sudan)
Dr Obeida Moudawar (Lebanon)
Dr Aristarhos Seimenis (WHO/MZCC)
Dr Zuheir Hallaj (WHO/EMRO)
Dr Saddiq Al Awni (AOAD)

Permanent Secretary:

Dr Ghazi Yehia
OIE Regional Representative for the Middle East

Observers:

Dr Linda Logan (USDA/APHIS)
Dr René Bessin (AU-IBAR)
Dr Kiran Johar (Australia)
Dr Charles Martins Ferreira (France)

a- Role of the Regional Steering Committee:
The regional Steering Committee will determine the regional policy, adopt the budget, planning and running the activities and coordinate with the international donors, organizations, NGOs and stakeholders to support the activities and supervise their implementation.

b- Establishment of a permanent secretariat:

A permanent secretariat will be established to perform administrative, logistical, budgetary and organizational activities for the GF-TADs. The secretariat will be located at the OIE/RRME offices, Beirut (Lebanon), with close collaboration with the FAO/NENA, Cairo (Egypt).

c- Establishment of National Liaison Points (NLP):

Every country will be requested to identify a National Liaison Officer (NLO) to coordinate the activities of the GFTADS within the country, and the regional GF-TAD's secretariat.

2- REGIONAL AND SUB-REGIONAL STRATEGIES:

• Developing a strategic vision document on the regional harmonized policies for the control of animal diseases and zoonoses in the Middle East, aimed at capacity building of Veterinary Services infrastructures and animal disease control. This document will include an activity plan and a provisional budget.

• Strengthening the VS infrastructures through applying the PVS (Performance, vision and strategy) tool for evaluation of veterinary service

• Disease Surveillance and identification of the main TAD’s in the region

• Developing / strengthening of laboratory diagnosis capabilities.

• Developing strategies for the eradication of TAD’s based on the regional experiences and the lessons learned from GREP.

3- FUND raising including the establishment of GF-TADs’ Regional Fund to support the GF-TADs activities:

A regional Trust Fund (RTF) will be created to manage all fund activities in the region relevant to the GF-TADs. Funding activities will not only include direct payments by different donors but will also include training opportunities, equipment and material contributions and even emergency technical support.

4- Creation of a regional center for animal health activities:

This will include the establishment of the Regional Animal Health Center as agreed on which will be the technical tool for the GF-TADS in the region where all animal health activities including planning, training and all other technical and daily activities will be performed. The center will act as a central point for consultancy and animal health expertise for the region. It will also act as the base for networking the expertise delivery to different countries as well as
a Regional Crisis Management Unit (RCM) to provide the necessary technical support to any part of the region in case of a TAD event.

The regional center will support all capacity building activities in the region.

5- Establishment of a regional GF-TADs website:

The website will have a regional database for technical expertise, regional basic documents and agreements and all data entries will be available through a log on code for all partners. All parties will be allowed to make public all available information related to the activities at this website.

V-Preparatory activities to be performed:

1- GF-TAD’s Steering Committee Meeting on 8 Nov 06 in Damascus-Syria to discuss the program and operational procedures.

2- A major TAD’s Roundtable Meeting (FMD) on 6-7 Nov 06.

APPENDIX 2

Regional Steering Committee for the Middle-East of the GF-TADS

Meeting on FMD surveillance and control (3rd FMD roundtable)

6-7th November 2006

Damascus, Syria

Specific recommendations related to the GF-TAD’s Regional Steering committee and the activities of the Regional Animal Health Centre:

The participants in the 3rd FMD roundtable recommend that:

Relating to control of FMD in MENA region;

1. The whole of the Middle East and North Africa areas should be considered as one FMD epidemiological region, but with possible sub-regions reflecting different ecosystems for circulation of FMDV strains, requiring a set of co-ordinated prevention, control and eradication programs to be elaborated covering the entire region at risk;
2. A strategy to achieve international recognized disease free zones or FMD free country status must be developed in the region, within the framework of the progressive control of transboundary animal disease program (GF-TADs);

3. in support of the above, each country is encouraged to “map” their ruminant livestock population in the country, and consideration should be given to developing a standard format for livestock population mapping that is applicable across the region, and which will assist each country in planning disease control measures;

4. The countries of the region establish an FMDV network, co-coordinated by the Regional Animal Health Center (RAHC), to facilitate exchange of information and to respond rapidly to a emergence of any new serotype in the region;

5. Member Countries of the Middle East region are urged to develop, test and keep a regularly updated a national foot and mouth disease preparedness plan that will assist them to ensure a rapid and effective response to new epidemic events;

**Relating to early warning of FMD risk in the MENA region;**

6. when threatening events of regional significance are identified, emergency meetings be rapidly convened by the RSC to assess the risk and necessary international response;

7. the Regional Steering Committee of GF-TADS organise regular roundtable meetings on FMD prevention and control, at least at yearly basis;

**Relating to improved control of epidemic FMD;**

8. That each country develops and formalises a contingency plan for FMD that addresses the particular problem of entry of an exotic type of FMD virus to which the regular vaccination programs do not protect.

**Relating to priorities for inclusion in vaccination programs and in antigen banks;**

9. that the WRL, through the OIE and FAO, is requested to produce a list of priority antigens for inclusion in vaccination schedules in the MENA countries on a regular basis; the list should be reviewed by the RSC or a task force nominated by this group, before being made publically available;

10. that the RSC or a nominated task force develops guidance on the subjects
1. harmonisation of vaccination in the MENA region to ensure coverage against the most prevalent (priority) viruses;
2. vaccination of small ruminants;

**Improving laboratory capacity and harmonisation of FMD laboratory test performance in the region**

11. that member countries ensure that their national laboratories re-assess their methods and reagents to ensure that diagnostic tests are appropriate for detection of the current A (including A Iran 05, A Egypt 06), O, Asia-1 and SAT types expected in the MENA region;

12. that participants in the Roundtable encourage or organise assessment missions to their NRLs for evaluation, and which will guide the potential establishment of a regional reference laboratory (RRL);
13. the RSC develop guidelines for biosecurity of laboratories that will assist compliance with OIE and are feasible throughout the region;

**Epidemiological support for planning of FMD preventive and control measures;**

14. that the RSC establish an epidemiology advisory group to assist in response to request from countries for technical support, for example
   1. in the design of surveillance programs for establishment of export zones in the MENA region
   2. in the design of sero-monitoring programs post-vaccination

15. that the RSC consider nominating one or more centres of expertise in the region to promote the application of modern epidemiological tools and methods to improve planning of FMD control measures; one such centre could be in Iran, making use of epidemiological capacity of the Iranian Veterinary Organisation and the support received from the FAO/EC and another one elsewhere in the MENA region, with the help of the international organisations.