

Governance and Performance of Veterinary Services

Since 2006, 137 OIE Members (75%)

have engaged in the PVS Pathway and undertaken at least one activity

32%

have had a PVS Evaluation/Follow-up in the past 5 years



Findings still considered valid; and therefore, used for further analysis in the prototype.

68%

had their last Evaluation/Follow-up more than 5 years ago



Findings considered outdated, cannot be used for further analysis.
Members may be encouraged to consider a PVS Follow-up.

23%

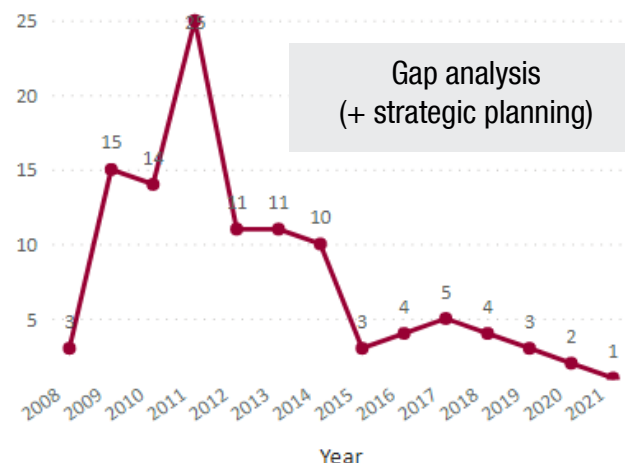
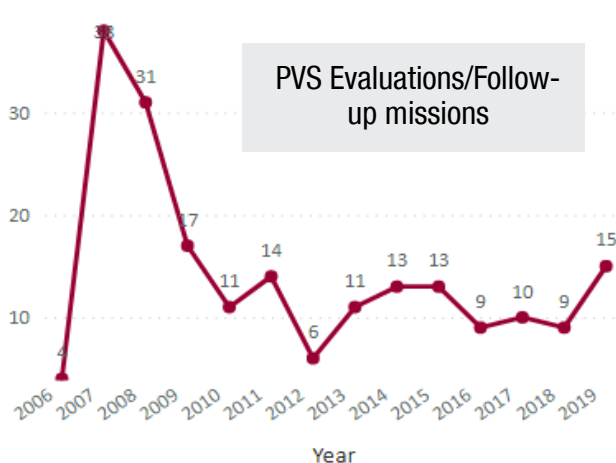
only engaged in 1 PVS activity



Understanding the reasons why these Members have stopped engaging with the PVS Pathway is critical.

Evolution of the missions conducted since 2006:

PVS Evaluation/Follow-up missions as well as PVS Gap Analysis are expected to be conducted repeatedly, due to the cyclical nature of the PVS Pathway. This does not happen in practice.



Data:

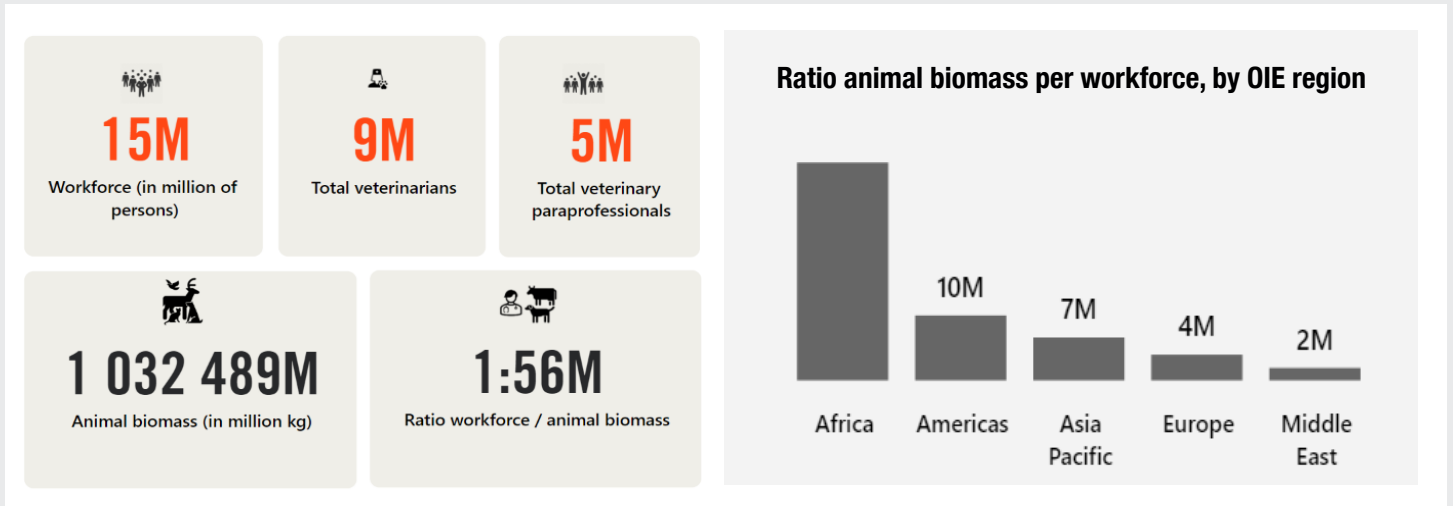
PVS dataset on the engagement of Members with PVS activities

COVID-19 has prevented mission deployment from early 2020. Adapting the PVS Tools to the global context required time and effort.

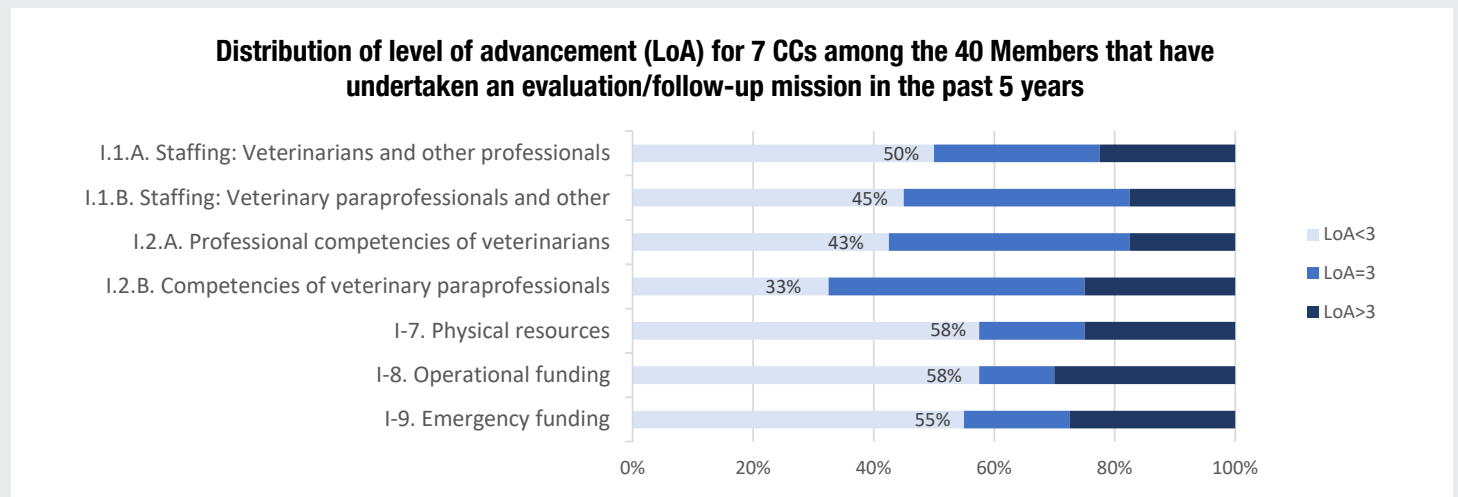
In addition to the findings and recommendations of the PVS external evaluation, reflection on the future of the PVS Pathway should include:

- continuous engagement of OIE Members
- OIE Pathway flexibility
- analysis of the potential use of data already collected by the OIE
- review of how to ensure some key data collected by PVS teams can be used by other departments

Workforce and resources



The workforce (number of veterinarians and veterinary paraprofessionals) is reported in the animal biomass figure (size of the animal population in kilograms). These input indicators can be aggregated fusing different parameters such as by OIE regions (see above) or by countries' agricultural GDP/ income level/ exporting status/ importing status (to be visualised in an interactive dashboard).



40 Members have undertaken a PVS Evaluation or Follow-up mission in the past 5 years

8 of them (20%)

were assessed with a **level of advancement of 3 or more for all the 7 Critical Competencies** and therefore were considered as having the minimal resources capacity.

While 33% of Members have not reached minimal capacity for the competencies of veterinary paraprofessionals (I-2.B), up to 58% have reached the competency of physical resources and operational funding (I-7 & I-8). This emphasises the need for Members, the OIE and other international organisations to focus not only on staff numbers but also their capacity and the resources available to them to deliver their work.

Data:

- Number of veterinarians/ paraprofessionals in OIE-WAHIS
- Biomass – AMU DB
- PVS CCs I-1.A&B, I-2.A&B, I-7, I-8 and I-9

Interesting indicators of the inputs of Veterinary Services.

The data collected by the OIE do not disaggregate workforce dedicated to aquatic animal diseases, production animals *versus* companion animals, etc. Today, this limitation should be taken into account when analysing these indicators; in the future, it could be an area for reflection with regard to the data that the OIE should (or should not) collect on workforce.

Tailored support could be explored for countries that have enough professionals but that have gaps in professional capacity.

World Trade Organization notifications

131 WTO ASF-related notifications from **19** members (2007-2020)

108 (83%) emergency notifications

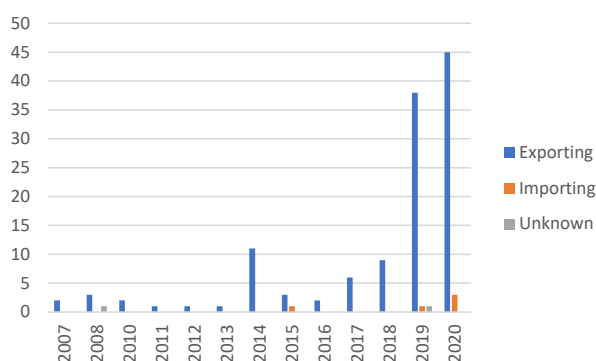
23 (17%) regular notifications

84% followed an ASF immediate notification to the OIE

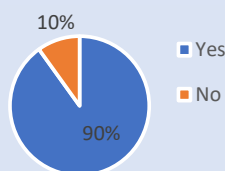
16% are not linked to an ASF immediate notification

76% of WTO notifications were filed **by just four members** with 35%, 17%, 14% and 10% respectively, which generates distortion in the analysis

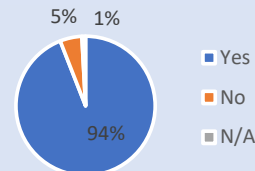
Number of notifications from WTO members



Existence of OIE standards relevant to the notification



Conformity with OIE standards



90% of the WTO notifications relate to OIE standards and 94% of them claim that the proposal in the notification is in line with that standard.

WTO ASF-related notifications increased in 2019 and 2020; these originated mainly from exporting countries, which suggests that WTO members want to protect their pork markets. Most of the notifications affect whole countries and not zones or regions.

ASF-related trade concerns

(from specific trade concerns, confirmed by findings of the Procedure to monitor the process of international harmonization*)

93% related to regionalisation

7% related to the heat treatment of products

*There are contributions from only one WTO member to the reports on the harmonisation of international standards

Data:

All the information is publicly available on the WTO website: Search in the SPSIMS applying 'African swine fever' as a key word and 'animal health' as rationale.

- The information is self-declared by WTO members and is not validated.
- Multiple notifications from one member generates biases in the analysis.
- All data must be manually extracted from pdf reports.
- The number of Members contributing to WTO reports is reduced, which raises questions about the representativity of the data.

Detection, surveillance and diagnosis

85% of OIE Members (154 of 182) report ASF as notifiable at the national level.

82% of them

18% do not

apply surveillance on domestic pigs

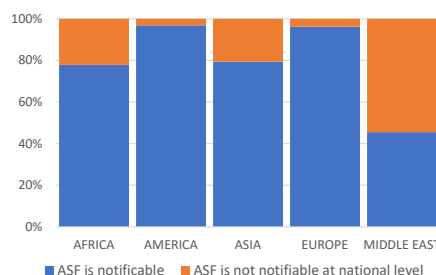
51% of them

49% do not

report having a National Reference Laboratory for ASF to help diagnose the disease.

For **15%** of the OIE Members, ASF is not yet notifiable at the national level

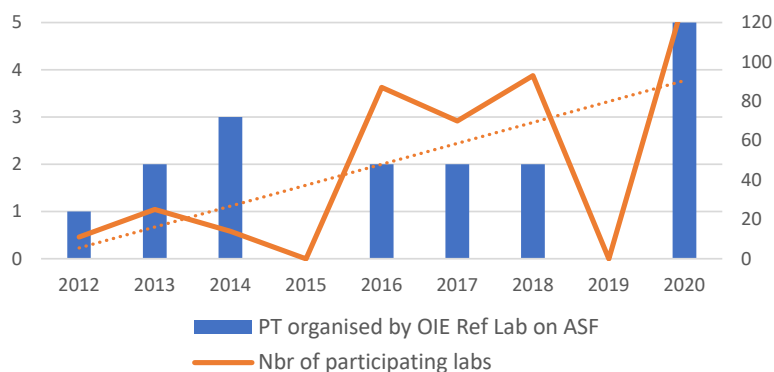
Percentage of Members that reported ASF as a notifiable disease by Region



Only 43 OIE Members

have reported ASF as a notifiable disease at the national level, have applied surveillance in domestic animals AND have a National Reference Laboratory for ASF.

Evolution of the number of proficiency tests (PTs) and laboratories that have participated in proficiency tests organised by OIE Reference Laboratories



Increase in the number of laboratories participating in the proficiency tests organised by OIE Reference Laboratories on ASF.

There is no data available at the OIE on Members participating in these international proficiency tests and on the results of these tests.

Data:

- OIE-WAHIS occurrence codes and control measures (six-monthly reports)
- National Reference Laboratories (OIE-WAHIS annual reports)
- Organisation of proficiency tests (annual reports of OIE Ref Labs)
- PVS CCs

Limited number of Members have reported all components of ASF basic surveillance.

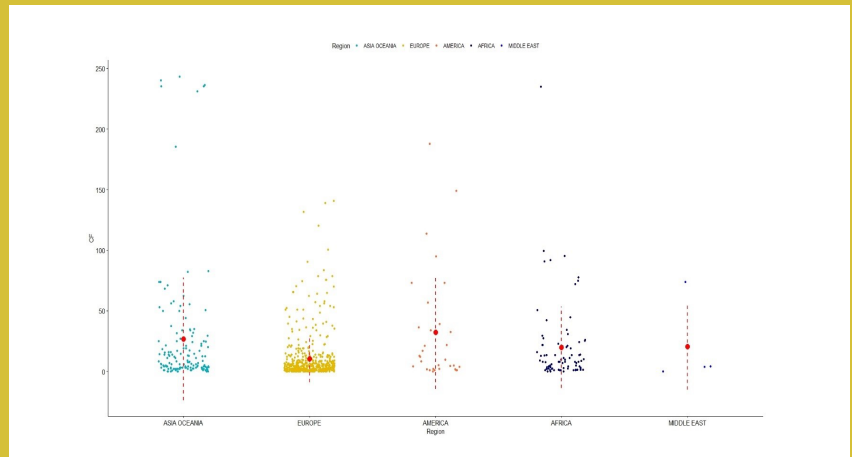
Data reported to the OIE on National Reference Laboratories is of limited quality ► reflection on the importance of advocating for Members to better report on their National Reference Laboratories and on their performance (including on the conducted proficiency tests).

Transparency

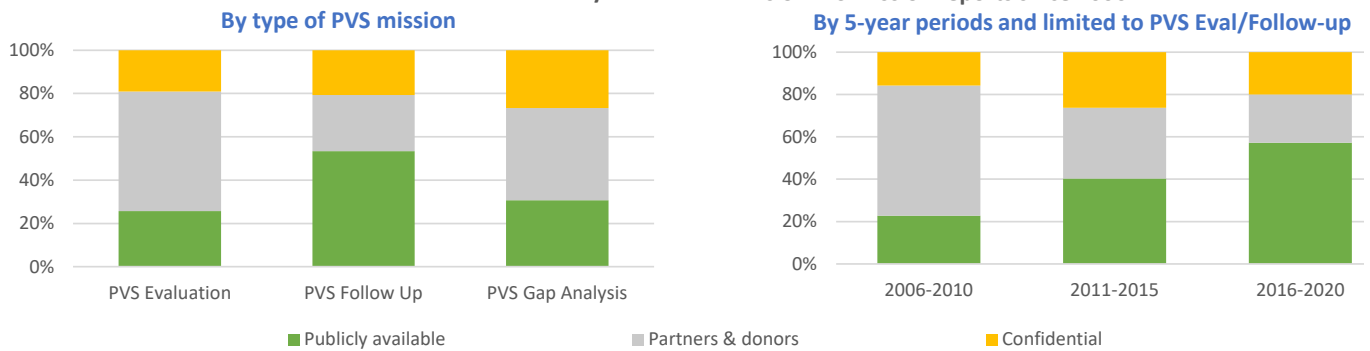
	For ASF since 2005	For all diseases in 2020 and 2021
Average time between confirmation and reporting of the disease to the OIE	15.5 days	15.5 days
Minimum	0 day	0 day
Maximum	96 days	243 days

Huge country and regional variability in the time between confirmation of a disease and the submission of an immediate notification to the OIE.

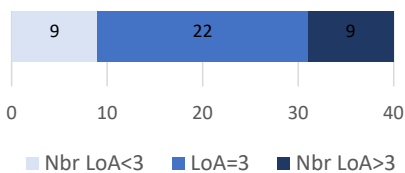
Significant increase in the proportion of PVS reports that are made publicly available. Small increase as well in the proportion of reports that are kept confidential that need to be followed up.



Evolution of the confidentiality status of PVS mission reports since 2006



Distribution of the number of Members by level of advancement (LoA) for the Transparency CC



Most of the Members that have undertaken a PVS Evaluation/Follow-up mission in the past 5 years have been assessed as reaching an LoA for transparency of at least 3.

Data:

- OIE-WAHIS immediate notifications
- Confidentiality status of PVS reports
- PVS Critical Competency (CC) IV-5 transparency

The annual implementation review report will consider these indicators for aquatic vs terrestrial animal diseases and for specific diseases (to be defined in line with global strategies, official status, etc.).

Consider adding indicators on active searching of unofficial information (rumour tracking).

Consider potential additional indicators to be able to develop a transparency index.

Control movement within the country/territory and precautions at borders

Control measures reported in the OIE-WAHIS six-monthly reports

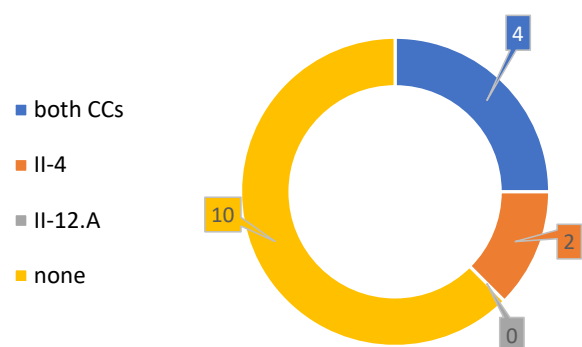
	Among all countries/territories reporting to OIE-WAHIS	Among the 40 Members that have undertaken an Evaluation/Follow-up in the past 5 years
Average time between confirmation and reporting of the disease to the OIE	52	16
Minimum	48	8
Maximum	10	3

Even though ASF is spreading in across the globe: in 2019, only **52 OIE Members** reported implementing both precautions at borders and movement control inside the country for ASF.

16 of the Members that report the implementation of both measures, have also undertaken an Evaluation/Follow-up in the past 5 years.

Only 4 of them reached minimal compliance for both relevant Critical Competencies (CCs).

Compliance with PVS minimal requirements of countries applying both control measures for ASF



Lack of link between the reporting of the application of control measures in OIE-WAHIS and Members' capacity to implement them in accordance with OIE standards (as assessed by the PVS Tool).

Since most Members are not compliant with the minimal requirements for these measures, the declaration of 'border protection' and 'movement control within a country' in OIE-WAHIS six-monthly reports should be considered and interpreted carefully.

A broader discussion to identify how to improve the notification of control measures may be needed, potentially involving the OIE-WAHIS Key Users Group.

Data:

- Control measures as reported in the OIE-WAHIS six-monthly reports
- PVS CCs II-4 and II-12.A

Self-declarations

98 Jul-Dec 2019: territories reported the absence of ASF (domestic/wild) in OIE-WAHIS

Members that have an active self-declaration of ASF freedom:

22

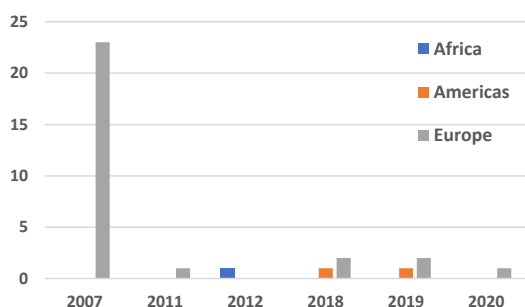
Members that have self-declared freedom from ASF in a zone:

1

Members that have declared a compartment free from ASF:

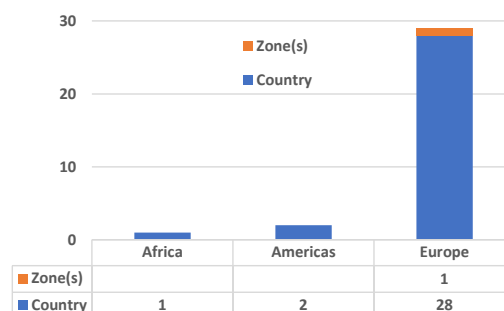
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Number of OIE Members submitting self-declarations per region and year



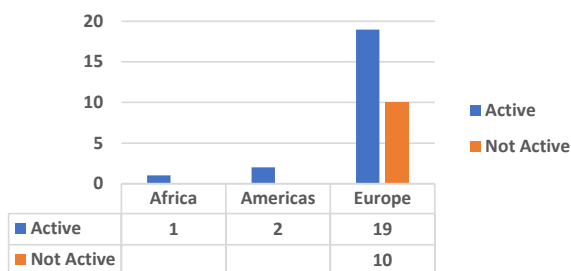
Between 2007-2020, 32 OIE Members self-declared freedom from ASF, 91% of them being from the European region. The highest number of self-declarations occurred in 2007, when ASF made its way into Europe. This reaction was not observed when ASF spread into Asia or the Americas.

Number of OIE Members that include zone/compartment/country in the self-declaration

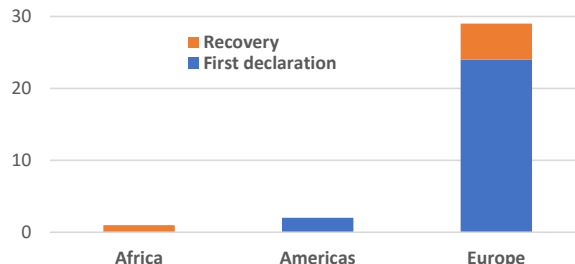


One Member took advantage of self-declaring ASF freedom in a zone; none in a compartment. This is also valid for Members that reported the presence of the disease limited to one or more zones of their territory.

Number of OIE Members whose self-declaration is still active or which have had an outbreak since their submission (not active)



OIE Members claiming disease freedom for the first time and claiming freedom recovery after outbreaks



Most of the self-declarations are first-time submissions (above right). As shown on the left, ten Members lost their ASF-free status, but only three of these territories claimed the recovery of their previously lost free status. None of them claimed zonal freedom.

Data:

- Self-declarations published by the OIE.
- World Bank data (e.g. agricultural GDP, exporting/importing country of agri-products).

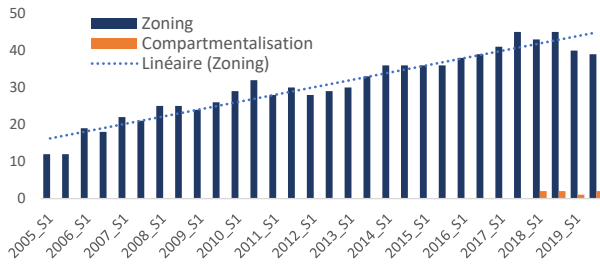
Further scrutiny is recommended to find out why the submission of self-declarations for ASF is so reduced.

Given the potential economic impact of import restrictions, it is essential to elucidate why Members are not self-reporting disease freedom for zones or compartments.

These indicators may not be helpful to demonstrate Members' compliance with standards as such, but they are valuable in monitoring how Members make use of this OIE service.

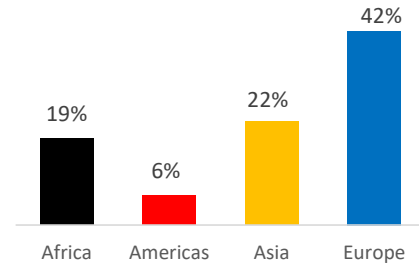
Zoning and compartmentalisation

Evolution of the number of OIE Members reporting zoning (in blue) and compartmentalisation (in orange), as part of their control measures in the OIE-WAHIS six-monthly reports

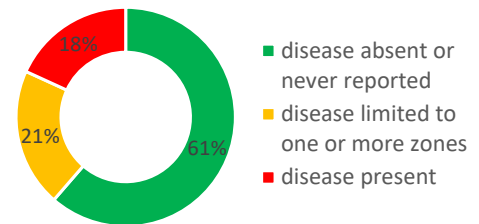


Increasing reports on zoning as a control measure for ASF (in blue). Still limited for compartmentalisation (in orange). Increase mainly driven by Europe (42% of the Members reported zoning); and by Members where the disease is absent (61%) – which suggests they refer to zoning as contemplated in contingency plans rather than zoning having actually been applied.

Percentage of countries reporting zoning in 2019, by region



and by disease occurrence

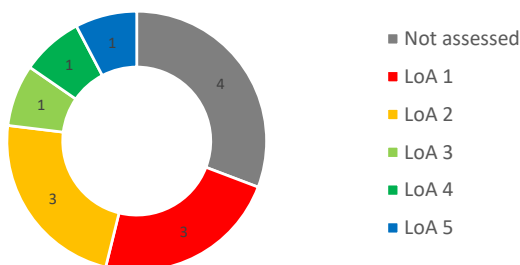


20 countries reported the presence of ASF limited to one or more zones of their territory in their WAHIS 2019 reports

8 of them reported implementing both movement control and zoning and only 1 has a published self-declaration as an ASF free zone

1 country mentioned compartmentalisation as a control measure (but has not self-declared it on the OIE website)

Distribution of the PVS level of advancement (LoA) for zoning for the 13 Members that reported zoning and had a recent PVS mission



More generally, relatively few Members reporting zoning as a control measures have the minimal capacity to implement it (only 3 out of 13 Members have an LoA that scores 3 or higher for zoning).

Data:

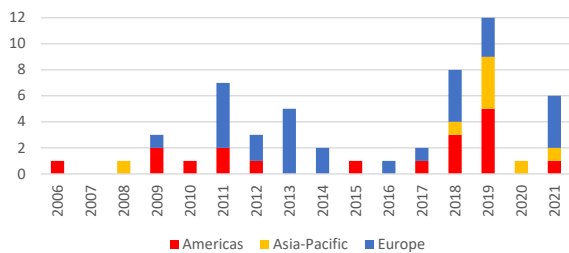
- Disease occurrence and control measures as reported in the OIE-WAHIS six-monthly reports (OIE-WAHIS 2019 reports)
- Self-declarations
- PVS CC IV-6 and IV-7

There is a continuous need to strengthen capacity and understanding of zoning & compartmentalisation. Different activities targeting different groups of stakeholders should be considered.

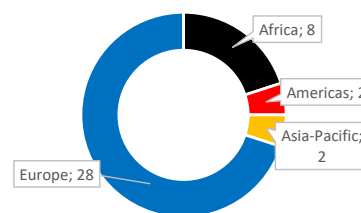
Clarification and better linkages between the zoning/ compartmentalisation reported in OIE-WAHIS and in OIE standards as defined in the *Codes* would probably help.

Emergency preparedness

Number of simulation exercises on ASF per year and per region since 2006



Number of countries having a contingency plan for ASF per region, as declared in 2018



There is an increasing trend in the number of simulation exercises conducted for ASF and reported on a voluntary basis to the OIE. At the peak in 2019, 12 Members (6.6% of the OIE Members) conducted simulation exercises for ASF. 40 Members (22% of OIE Members) reported having a contingency plan for ASF in 2018. However, it is likely that more plans have been developed over the past 3 years, especially in Asia and the Americas following the introduction of the disease in 2018 and 2021, respectively.

40 Members had a contingency/ emergency plan for ASF in 2018

20 have reported a simulation exercise on ASF since 2006

12 have reported a simulation exercise but did not inform the OIE of a contingency plan

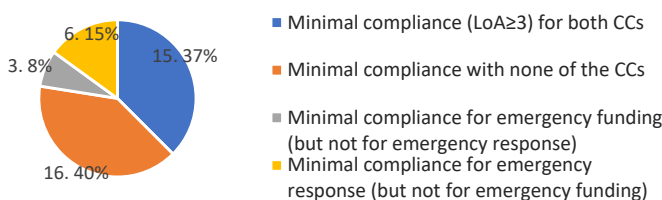
Half of the OIE Members that reported having a contingency plan for ASF in 2018, had reported a simulation exercise on ASF in the past 15 years.

Of the **28** Members who have published self-declarations for ASF freedom

11 (39%) have indicated having a contingency plan **and** reported a simulation exercise on ASF since 2006

While it could be expected that Members that have a self-declaration of ASF freedom would also report on their measures to prevent the introduction of the pathogen, only 39% of them have reported both a contingency plan and a simulation exercise for ASF.

From PVS CC II-P on emergency funding and II-5 on emergency response



Only 37% of the Members that undertook a PVS Evaluation/ Follow-up in the past 5 years reached the minimal level of compliance for the two CCs directly relevant to emergency preparedness.

Data:

- Voluntary reporting of simulation exercises
- Information on existence of contingency plans
- PVS CCs I-9 & II-5
- Self-declaration of ASF freedom

Need to have appropriate datasets within the OIE to analyse information more effectively.

Reflection is needed on data related to emergency preparedness that the OIE should (or should not) collect, as well as and on the best way to collect/store them.