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12th Meeting of the Global Steering Committee of the Global Framework for the Progressive Control of Transboundary Animal Diseases (GF-TADs)

*Report of the meeting
2 November and 2 December 2021*



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Committee of the Global Framework
for the Progressive Control of
Transboundary Animal Diseases
(GF-TADs)**

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Abbreviations

ASF	African swine fever	MC	Management Committee
AU-IBAR	African Union – International Bureau for Animal Resources	PPR	Peste des Petits Ruminants
CBPP	contagious bovine pleuropneumonia	RS	Regional Secretariat
EA-RAHN	Eastern Africa Regional Animal Health Network	RSC	Regional Steering Committee
EuFMD	European Commission for the control of Foot and Mouth Disease	SDG	Sustainable Development Goal
FAO	Food and Agriculture Organization of the United Nations	SGE	Standing Group of Experts
FMD	foot and mouth disease	TADs	Transboundary animal diseases
GF-TADs	Global Framework for the Progressive Control of Transboundary Animal Diseases	UMA	Arab Maghreb Union
GS	Global Secretariat	WG	Working group
GSC	Global Steering Committee	WHO	World Health Organization
		WOAH	World Organisation for Animal Health



Executive summary

SESSION 1 (2 NOVEMBER 2021)

The 12th Global Steering Committee (GSC12) meeting was opened by Deputy Director General of Food and Agriculture Organization of the United Nations (FAO) Ms Maria Helena Semedo and Director General of the World Organisation for Animal Health (WOAH, founded as OIE) Dr Monique Eloit.

The co-chairs of the Global Framework for the Progressive Control of Transboundary Animal Diseases (GF-TADs) Management Committee, Dr Jean-Philippe Dop from WOA and Dr Keith Sumption from FAO, respectively introduced the background to the [GF-TADs Strategy 2021–2025](#) and presented its strategy objectives, outputs and theory of change.

The next item was dedicated to how the GF-TADs Strategy could support access to quality vaccines against transboundary animal diseases (TADs). Members of the GF-TADs Management Committee Dr Madhur Dhingra (FAO) and Dr Montserrat Arroyo (WOAH) spoke about vaccine security, key challenges to supplying quality vaccines and access to vaccines for stakeholders. They illustrated their points with examples from global priority TADs strategies. Dr Fabrizio Rosso (European Commission for the Control of Foot-and-Mouth Disease [EuFMD]) shared initiatives to improve access to quality vaccines by a pre-qualification process and estimation of the demand for vaccines against TADs. Dr Patrick Vudriko (World Veterinary Association) invoked the veterinary profession's commitment to ensuring access to veterinary medicines. He also emphasised the need for sustainable business models so that veterinary paraprofessionals can deliver animal health services, including vaccines. Dr Carolin Schumacher (Global Alliance for Livestock Veterinary Medicines [GALVmed]) pointed out that producers can be unmotivated to invest in vaccine production, which represents a small proportion of the market for animal medicine and involves many uncertainties and complexities, especially in low- to middle-income countries. She called for consideration of why specific TADs control strategies do not reach small-scale producers. Dr Carel de Marchie Sarvaas (Health for Animals) mentioned recent work leading to 80 recommendations to improve access to quality vaccines. He emphasised the importance of public-private partnerships and a One Health approach.

Chairs of the GF-TADs Regional Steering Committees, Dr Baoxu Huang for Asia and the Pacific, Dr Bernard Van Goethem for Europe and Dr Nick Nwankpa for Africa, shared their experiences with vaccination through GF-TADs mechanisms. They highlighted the importance of access to small-scale stakeholders, public-private partnerships, coordina-

tion, solidarity and anticipation of weak points in response to emerging situations. They also stressed the need to support the structure of vaccine production in Africa. Participants recalled the importance of cold-chain and/or thermotolerant vaccines and sustainable funding. They stressed the importance of collaboration with vaccine producers and the responsibility of stakeholders during implementation.

The last item presented was an implementation and monitoring process, as described in the GF-TADs Strategy 2021–2025. It is important to pursue reachable and realistic objectives, but also to address the unknown, taking into account the One Health approach. Reactivity should be fostered so that governments and organisations are ready to respond to new situations; partners should commit to agreed-upon coordination mechanisms; countries need support to advocate for the control of TADs not only basing rationale on their trade perspectives.

SESSION 2 (2 DECEMBER 2021)

In this session, the first item was dedicated to the progress of the global priority TADs strategies and the development of a Partnerships and Financing Panel to guide the Management Committee on these aspects. Discussion included the challenges for some African countries to run foot-and-mouth disease (FMD) vaccine campaigns and the concordant need to better address the priorities of Veterinary Services. Participants considered grouping the TADs by objectives, to develop a synergistic approach targeting activities at the level of livestock species or types of production. GF-TADs should be better connected with other global challenges, particularly One Health and climate change. This will put GF-TADs forward to play a key role in assisting countries with implementing and enforcing the WOA International Standards and strengthening national Veterinary Services, leading towards improved biosecurity at the producer's level.

The second item was dedicated to highly pathogenic avian influenza (HPAI). Results from a survey about HPAI prioritisation were presented. Session participants agreed upon the need to improve GF-TADs global coordination on HPAI and to take into account the specificities of local production systems. Transparent exchange of information is needed from wild bird surveillance for rapid alert systems and from the results of monitoring low pathogenic strains.

The third item was dedicated to regional GF-TADs activities. The chairs of the Regional Steering Committees presented their priorities and main challenges. In the Americas, GF-TADs has focused on responding to

the emergence of African swine fever (ASF). In its need for rapid coordination, GF-TADs cooperated closely with regional partners. In Europe, the earlier activities of the Standing Group of Experts continued virtually. Country missions need to resume to increase impact. Another priority is to improve activity coordination and planning. In Asia and the Pacific, the different sub-regions have developed activities to combat the spread of TADs. Priorities are to strengthen cooperation with private sectors and to improve coordination between regional activities and global priority TADs groups. In the Middle East, GF-TADs has started to address regional priorities, looking

for synergies. Between regional partners and neighbouring regions, collaboration to support Veterinary Services in the region is improving. In Africa, the recently reactivated Regional Steering Committee defined its regional priority TADs and started to organise activities to implement the corresponding regional strategy. Participants responded to two polls: the first poll concerned challenges and opportunities to share priorities and activities with regional partners, and the second concerned the development of multidisciplinary approaches.

GSC12 concluded by adopting recommendations for the GF-TADs Management Committee.

Minutes

SESSION 1 (2 NOVEMBER 2021)

Opening remarks

GF-TADs Global Secretariat coordinator Dr Henk Jan Ormel welcomed participants and invited the senior management of FAO and WOAHA to deliver opening remarks.

The Deputy Director General of FAO, Ms Semedo, welcomed participants and reminded them of the constant threat of TADs and the crucial cooperation with WOAHA under the framework of the GF-TADs. She stressed the importance of livestock and animal health for FAO. She highlighted the contribution of FAO support mechanisms, such as the Emergency Prevention System for Animal Health, the Emergency Centre for Transboundary Animal Diseases and the Emergency Management Centre for Animal Health. She drew specific attention to the new GF-TADs Strategy, challenging the meeting participants to assess whether the goals are realistic, to avoid silo-thinking and to consider GF-TADs as a coordination mechanism.

Dr Eloit welcomed participants and stressed the escalating spread of TADs, which calls for responses from Veterinary Services and multi-disciplinary coordination at all levels. She urged that all regions should by now have an active Regional Steering Committee. She acknowledged that FAO, WOAHA and representatives collaborate at global and regional levels. She recalled the three main objectives of the GF-TADs Strategy 2021–2025, indicating how they fit with the WOAHA 7th Strategic Plan and the One Health approach. She ended by appealing to participants to contribute to today's important topic of vaccines.

Item 1: The GF-TADs Strategy 2021–2025: origin and concept

FAO senior policy officer and member of the GF-TADs Management Committee Dr Berhe Tekola invited the co-chairs of the GF-TADs Management Committee to present the new GF-TADs Strategy. He mentioned the long time it took to develop.

WOAHA's Deputy Director General for Institutional Affairs and Regional Activities and co-chair of the GF-TADs Management Committee, Dr Dop, presented the background of the GF-TADs Strategy 2021–2025. He started with the governance of the GF-TADs and the close collaboration between FAO and WOAHA at global and regional levels, where a friendly relationship developed, which has been crucial for the GF-TADs. He summarised the outcomes of the third external evaluation of the GF-TADs: none of the 31 actions identified by this evaluation have been left unaddressed,

though 18 of them need further improvement. The GF-TADs Strategy 2021–2025 will continue to contribute to these goals. Dr Dop cited three additional major advances: the renewal of the Regional Steering Committee for Africa under the chairmanship of AU-IBAR, the development of standing groups of experts in several regions and the relaunch of regular Regional Steering Committee meetings. Among further improvements, he mentioned the need to increase synergies between diseases; the GSC12 technical item on access to quality vaccines will contribute to this. He also mentioned the need to further improve engagement, communication and advocacy programmes and the sourcing of the Global Secretariat, even though it is already more efficient than it used to be.

FAO's Chief Veterinary Officer and co-chair of the GF-TADs Management Committee, Dr Sumption, presented the GF-TADs Strategy 2021–2025 and its three objectives: 1) to establish strategies for priority TADs, 2) to develop and maintain capacity for preventing and controlling TADs and 3) to improve sustainability of these strategies through multidisciplinary partnerships. The development of a theory of change involved consultation at global and regional levels and regular contributions from a FAO and WOAHA task force. He described the three objectives set under a sphere of control and how the activities conducted at global and regional levels will contribute to it. The Management Committee will ensure that sufficient activities are conducted to address all objectives and outputs, connecting these at global and regional levels. Finally he stressed that global and regional partners must be involved to have a greater impact. Discussion about access to quality vaccines is a starting point to improve collaboration and partnerships.

Item 2: The GF-TADs Strategy in practice: how to support access to quality vaccines against TADs (Part 1)

This item was chaired by Head of WOAHA Status Department and member of the GF-TADs Management Committee Dr Néó Mapitse.

Dr Dhingra, a member of the GF-TADs Management Committee, and Head of the FAO Emergency Prevention System Department provided an overview of access to quality vaccines. She cited the United Nations definition of vaccine security being 'the timely, sustained, uninterrupted supply of affordable vaccines of assured quality'. Vaccines are 'quality' when production follows good manufacturing practices. This can be challenging and triggers

a cost, including long-term investments in biosecure facilities. Willingness to pay for vaccines is often limited, and those who pay for the vaccines may not be the ones who benefit from their effects (e.g. using vaccines reduces antibiotic use). Timeliness of access is also a challenge, particularly because disease outbreaks and the time needed to produce corresponding vaccines are impracticable to foresee. Additional barriers are supply and the registration and tendering processes, which often lack transparency. Manufacturers often have no access to quantified reliable information. Production costs are triggered by R&D and antigenic matching. Sometimes access to relevant biological material is complicated by the Nagoya Protocol. Manufacturers often have only limited access to surveillance data and information on virus strains and reagents, as produced by reference laboratories. Possible solutions include mutual registration recognition, multi-strain vaccines, prequalification systems, demand forecasting and active information sharing. National control policies strongly affect access to quality vaccines. From political willingness to use vaccines to human resource capacity to vaccinate animals, many aspects of vaccine distribution and use are uncontrolled and uncoordinated. Coordination between countries, particularly in emerging situations such as ASF in the Americas or SARS-CoV-2 in animals, are additional challenges. Dr Dhingra concluded by inviting participants to reflect on how the GF-TADs can help remove barriers to demand and supply, improve good practices, encourage adoption of the Nagoya Protocol, engage stakeholders, support novel technical and business approaches and encourage private investment and sustainable funding.

Dr Arroyo, a member of the GF-TADs Management Committee and WOAHA Deputy Director General for Science and Standard, presented an approach to improve access to quality vaccines, based on the GF-TADs Strategy. This approach involves engaging all stakeholders, including Veterinary Services, private veterinarians, veterinary paraprofessionals, vaccine producers, national authorities and farmers. Resources should be more readily available to address both the cost of vaccines and the chain of logistics needed for proper delivery. The design of vaccination campaigns should receive special attention and should be adapted to specific local circumstances and to proper surveillance. If any step remains unaddressed, there will remain limiting factors that contribute to animals not being properly protected. Dr Arroyo illustrated this with examples from the global priority TADs. For peste des petits ruminants (PPR), issues in the design of adapted vaccination campaigns can be improved by a more local, so-called epizone approach and expert support at national levels. Vaccine supply can be supported by donation and by processes facilitating access, such as the WOAHA vaccine bank. In addition, investments

and sustainable funding need to be further developed and supported at national levels. Solutions tailored to local conditions have been applied to such challenges as technical logistic chains, access to thermotolerant vaccines and training of veterinary paraprofessionals. However, these efforts will do little to overcome structural challenges such as insecurity or extreme poverty. Dr Arroyo presented the principles of the WOAHA vaccine bank and stressed the importance of basing vaccination campaigns on sound science and the development of joint FAO–WOAHA guidelines for the whole chain, from production to post-vaccination monitoring. She highlighted the importance of planning access to vaccines post-eradication at national and global levels, as for rinderpest. Finally, she called for coordinated actions to be undertaken when quality vaccines are unavailable, as is the case with ASF. In such cases, focus will not be on vaccination but on biosecurity and risks linked to unlicensed vaccines. Support is needed both for vaccine development and standards once a vaccine is available. Dr Arroyo concluded that the problem of access to quality vaccines affects all other priorities. The GF-TADs Strategy should address these issues and create a transversal benefit through a multidisciplinary and synergistic approach across TADs.

Dr Rosso, Deputy Executive Secretary of EuFMD, presented that approach, as developed under the FMD programme and other similar TADs programmes. He recalled the background work for conferences organised in 2018 and 2020 regarding the training of veterinary paraprofessionals. He also referenced the conclusions of a 2020 meeting that led to a prequalification (PQ) process and estimation of vaccine demand. He elaborated on the PQ system, inspired by WHO prequalification, to accelerate the procurement of quality vaccines and to provide more visibility and predictability. The system is intended to assist manufacturers and users. He then presented the initiative to quantify the market demand for FMD vaccine, to inform the manufacturer's investment decisions, based on the *Vademos* analytical model.

Dr Vudriko, an expert from the World Veterinary Association (WVA) Pharmaceutical Stewardship Strategic Focus Group, reminded the Global Steering Committee that among the different missions of the WVA, pharmaceutical stewardship, and thus increased access to vaccines, is one of the strategic objectives. To support that goal, the WVA, in partnership with EuFMD and Health for Animals, contributes to veterinary education. They wish to develop sustainable animal health services through training veterinary paraprofessionals in cold-chain management and vaccination. The WVA partners with Brooke to support access to veterinary medicines, including vaccines for working equine animals. The WVA also contributes to advocacy programmes for control of rabies in a One Health approach; it

issued recently a joint statement with the World Medicine Association to reach 70% vaccination coverage for dogs.

Dr Schumacher, Chief Executive Officer of GALVmed, cited the mission of GALVmed to facilitate access to quality vaccines in low- to middle-income countries particularly among small-scale producers, which account for 70% of farmers in these countries. She compared the list of GF-TADs priority diseases with a list of diseases identified as putting major constraints on livestock producers in East Africa, West Africa and South Asia based on an expert survey published in 2019. She noted that for livestock keepers TADs are a priority, but many other disease symptoms are also of concern (including nutrition, diarrhoea, abortion, parasites). Many small-scale farmers have insufficient access to animal health services, and single TAD control programs do not match their reality. The distribution and availability of veterinary resources has strong influence on the vaccination status of animals. Although many global, national or regional coordination strategies are developed in the southern hemisphere, their effect is not seen on the ground. Dr Schumacher briefly presented a study on the availability of veterinary medicines in West African countries; the results show a good availability of antibiotics and anti-parasitics, with a risk of misuse leading to resistance, while availability of vaccines was poor. For producers, the TAD vaccine market represents less than 2% of the US\$ 34 billion animal health industry market, and it has a complex business model with intermittent demand, a lack of cold chains, government restrictions and payment problems. She pointed out that single TAD control programmes that provide free vaccines erode farmers' willingness to pay for quality investments and reduce the attractiveness of the market for producers. In addition, the cost limitation of government tenders also affects the quality of vaccines. She concluded that TAD vaccines, as part of affordable farm inputs, should be financed from productivity improvements as a result of disease prevention and functional regulatory and pharmacovigilance systems. The need to simplify vaccine supply chains and to create commercial incentives for the sector to invest sustainably, calls for public–private partnerships. These partnerships can address the scarcity of veterinary resources and develop sustainable animal health systems.

Dr du Marchie Sarvaas, Executive Director of Health for Animals, welcomed the GF-TADs Strategy. Regarding vaccination, he pointed out that in many parts of the world 80% of the animals in large operating systems are vaccinated. It is possible to reach high vaccination rates and to increase vaccination in small-scale farms. He recalled that in 2019, Health for Animals published a report on [How to Increase Animal Vaccination: 80 Recommendations to Overcome Existing Barriers](#). He stressed the increased time and cost to develop

vaccines and to introduce them on the market. Regulations are too slowly adapted to new technologies. He welcomed the PQ approach. He considered that the COVID-19 crisis may be linked with an increased acceptance for vaccination and more investment in public–private partnerships to improve farmers' access to quality vaccines. He pointed out the need to anchor investments in animal vaccinations in the framework of the One Health approach.

Item 2: The GF-TADs Strategy in practice: how to support access to quality vaccines against TADs (Part 2)

Dr Sumption chaired the item. He stressed the importance of the topic and the key roles of the private sector (in vaccine production) and of Veterinary Services, who should plan vaccination campaigns together where there is no public campaign aimed at farmers. He commented that, given the highly contagious nature of TADs, vaccination coverage needs to be very high to reach eradication. He invited participants to intervene.

Dr Huang, Chair of the GF-TADs Regional Steering Committee for Asia and the Pacific and Delegate of China to WOA, referred to FMD in China and reported that vaccination campaigns can work well to improve the situation with TADs. He named priority challenges for access to quality vaccines, including the surveillance of strains and the adequate match of vaccine, the maintenance of cold chain, government engagement with small-scale farmers and, above all, public–private partnerships.

Dr Van Goethem, Chair of the GF-TADs Regional Steering Committee for Europe and Director of crisis management in food, animals and plants of the European Commission Directorate-General SANTE, stressed the importance of preparedness in peace time. He illustrated his statement with the EU vaccine and antigen banks, which include reagents and have been made available in the past for non-EU member countries in Europe, Asia and Africa. He recalled the successful vaccination campaign against lumpy skin disease (LSD) in Europe, not limited to EU member countries. He agreed about the role of the private sector, in particular from the operator's point of view. He cited the successful eradication of rabies in Europe, which began 40 years ago thanks to vaccination and which continues on the fringes of infected and free zones. He also mentioned the regional coordination of an LSD vaccination campaign in Southeast Europe, where it has been important to identify the weakest link and focus effort on it.

Dr Nwankpa, Chair of the GF-TADs Regional Steering Committee for Africa and Acting Director of AU-IBAR, brought forward challenges related to access to veterinary vaccines in Africa. First, the current supply capacity is focused on internal country markets and there is a lack of large-scale

production. The bulk of the production, intended for national consumption, is not submitted to quality control. The COVID-19 crisis impacted supply chains, access to raw materials, equipment and capacity-building activities. Producers are hesitant to share information on vaccination production. In some countries, cumbersome registration processes limit access to vaccines. Partners and stakeholders that coordinate control programmes are not being accountable at the time of implementation; they should be called upon to uphold their responsibility towards veterinary vaccines as a public good. Under the GF-TADs umbrella, there is a need to support vaccine production capacity, to develop facilities and to establish and operationalise vaccine initiatives that address emergency TADs situations. There is also urgent need to develop the capacity of Veterinary Services to organise vaccination campaigns. Stakeholders should be involved not only in planning but also in implementation. There is a need to provide data on vaccine availability over the continent. Regional coordination of vaccine use is also very important. Coordination needs to include vaccine purchasers and suppliers so that suppliers can respond to use in the field. Legislation for registration should be harmonised, as has been done in East Africa. It is imperative to increase the capacity of African vaccine production laboratories and to increase the provision of training, equipment and assessment material. A platform could be created for that purpose. A robust mechanism needs to be eventually set up to facilitate access to quality vaccines in sufficient quantities and to increase the acceptance of vaccines by small-scale holders. Vaccine funds must be built up and ready to be used in case of emergency.

Dr Adama Diallo, Chair of the PPR Global Research and Expertise Network, reacted to the earlier presentation by Dr Schumacher by pointing out that the availability of PPR vaccines makes the eradication of PPR feasible. To increase the availability of these vaccines, the development of thermostolerant vaccines needs priority, given the hot climate in countries where PPR is endemic and the difficulties to maintain a cold chain in these countries. Sustainable funding is necessary to obtain PPR vaccines in sufficient quantities.

Dr Manuel Sanchez, Chair of the FMD Global Coordination Committee, stated that the supply of quality vaccines is strongly related to public–private partnerships. The public places the order, and private companies produce the vaccines. In that context, estimates of what the demand will be over several years are very important for producers. The quality control check is also important and needs to be unbiased. Relevant aspects include the vaccination campaign in terms of responsibility, supervision and training of vaccinators. Post-vaccination monitoring can go beyond population coverage. Monitoring may improve understanding of the factors that contribute to the successes and weaknesses of vaccination programmes.

Participants on this panel noted the importance of matching the proper vaccine to the strain of FMD and the problems of the short duration of immunity, the high cost of vaccines when there are monopolies, the fact that costs being driven by the number of intermediaries in the supply chain and the significant delay between the time a need arises and the time vaccines are supplied. Targeted vaccine banks (such as for PPR or rabies) were suggested to compensate for the limited laboratory supplying capacity in Africa. Main challenges to quality vaccine accessibility are insecurity and hard-to-reach animal populations.

Dr Sumption thanked the participants and invited them to reflect on how the GF-TADs mechanism can help to break down the identified barriers, inform producers about identified needs, support the use of vaccines in policy making and ensure that legislation does not prevent small stakeholders from accessing vaccines.

Item 3: The GF-TADs Strategy: implementation and monitoring

Dr Dop chaired the item. Dr Alexandre Fediaevsky, GF-TADs regional coordinator and member of the GF-TADs Global Secretariat, presented the approach for monitoring the implementation of the GF-TADs Strategy. He indicated that the key performance indicators that are included in the strategy document combine quantitative and qualitative information. They are designed to better reflect the GF-TADs as a coordination mechanism and to support annual reporting on these indicators. In terms of evaluation, an internal review of progress is expected in the middle of the 2021–2025 period, and an external evaluation is expected after that period. The strategy includes a timeline. For each objective, key milestones have been identified. Dr Fediaevsky highlighted a need to establish joint workplans for the different TADs strategies at global and regional levels by the end of 2022, as well as to develop corresponding key performance indicators. He presented the future workplan for the implementation of the GF-TADs Strategy as a mosaic of activities that will contribute to the strategy outputs. Key performance indicators are collected in the framework of specific global and regional TADs strategies as well as from other support activities conducted by FAO, WOA and their partners. The contributions of the selected activities will be mapped and followed and the role of the Management Committee will be to ensure that these activities are supported and to identify why some outputs are insufficiently supported and need specific attention.

Dr Mark Rweyemamu, Chair of the PPR Advisory Committee, urged precision about which priority is covered by which objective – such as, for example, eradication, control or prevention – and realism about these objectives. He emphasised that the strategy must cover unpredicted events.

Referring to the vaccine manual recently launched by FAO, he recalled the importance of public–private partnerships to get vaccines delivered to animals. He also recommended the One Health approach.

Dr Huang called for the design and implementation of simple indicators. He indicated that his region would support this development and be part of a pilot.

Dr Jaspinder Komal, Chair of the GF-TADs Regional Steering Committee for the Americas and Vice President of the Science Branch of the Canadian Food Inspection Agency, urged timely reactions and strong coordination at the regional level among the different partners, from the initial planning stage to the implementation stage. These partners should commit to the agreed-upon arrangements. He called for creating a sense of urgency among the countries and their Veterinary Services, even in countries for which access to international markets is less important.

Conclusions

Dr Sumption concluded the session by pointing out the various roles of regional levels, country levels and public–private partnerships. He acknowledged the necessity to stress urgency, and he reaffirmed commitment to openness to the unknown. Regarding the engagement of non-trading countries, Dr Sumption responded that the strategy should be made to demonstrate the benefits of addressing TADs to improve national production and livelihoods. He recognised the importance of coordinated efforts and recalled the importance to welcome initiatives.

Dr Dop advised participants to seek for reasonable and achievable commitments. He pointed out the importance of synergies across TADs, such as in vaccination, with a One Health approach. Improving Veterinary Services' capacity to control TADs also contributes to One Health.

Participants were invited to join the second session of the GSC12 on 2 December 2021.

SESSION 2 (2 DECEMBER 2021)

Item 1: Progress on global priority TADs strategy and upcoming challenges and priorities

This item was chaired by Dr Monserrat Arroyo, who introduced the main topics of Item 1 and summarised 1) the advances made by GF-TADs on global TADs strategies and 2) the challenges and priorities facing GF-TADs this year. She called upon participants to watch the short videos produced by the four working groups on FMD, PPR, rinderpest and ASF.

Dr Bouda Ahmadi, a member of the GF-TADs Global Secretariat, summarised the advances over the last year by the various disease working groups, as presented in these videos. He highlighted key activities on the global and regional FMD control strategies, the PPR eradication strategies, the global

initiative to control ASF and the rinderpest post-eradication programme. For more information on the key activities of the disease working groups, please refer to ([LINK to videos](#)).

Dr Sumption, Co-chair of the GF-TADs Management Committee and Chief Veterinary Officer of FAO, briefly presented the Management Committee's efforts to establish the Partnering and Financing Panel (PFP). The goal of the PFP is to achieve the outcomes of the GF-TADs Strategy by 1) increasing cooperation of the GF-TADs with other key entities (e.g. financing institutions) and 2) improving countries' access to necessary financing support for sustainable control of major TADs through their national Veterinary Services. By establishing the PFP, the GF-TADs governing body (which consists of the Management Committee, GSC and Regional Steering Committees) will seek guidance and advice from experts to identify and sustain key partnership and financing mechanisms to better influence and impact the management (i.e. prevention and control) of TADs at every level, from headquarters to regional and national. Dr Sumption emphasised that the financing component of the panel will not only identify funding resources to manage the cost of TADs, but will above all explore solutions, processes and capacities required to finance the entire system and its range of processes for managing a TAD at country level (e.g. use of local resources, loans or international financial institutions).

On 22 November 2021, ten experts were invited to form an interim panel to begin planning the formation of a PFP for the GF-TADs. During this first meeting, participants discussed the possible ways the PFP could improve the engagement of the GF-TADs with partners that share similar interest for major livestock TADs control. Participants explored a range of players that could also be part of the PFP. They debated how the PFP could improve impact of the GF-TADs at the global, national and regional levels. They examined the role of their corresponding institutions in the PFP and discussed their concerns and possible solutions.

This first interim panel concluded that

1. Associations that represent medium to large producer organisations should set the tone because they have larger capacity to initiate changes.
2. The business case should be presented by using developing economic models that help countries and partners understand the benefits and the burden of controlling TADs. Initiatives such as the Global Burden of Animal Diseases could provide more information.
3. TADs control should be linked to higher outcomes (e.g. disease as an indicator of food loss and waste, One Health, climate change, biodiversity, trade and economy).
4. Livestock investment and development should be safer as risk for TADs is reduced or eliminated (e.g. through investing in prevention of TADs).

5. GF-TADs must recognise that certain partners in the panel could bring other agendas that might not fit with the purpose of the panel and the GF-TADs, which is to address the TAD challenges as faced by the countries served. These countries should always receive the proper financing guidance and partnership support needed to control TADs.
6. The interim panel has a reservation about the single-disease approach and focus of GF-TADs because livestock producers need to manage multiple diseases simultaneously.
7. Better data are needed to invest in TADs and the GF-TADs.
8. For TADs control, communication is vital and advocacy is needed at every level.

The report and recommendations of the interim panel should be used to

1. Revise and update the terms of reference for the PFP.
2. Draft an expression of interest in January 2022.
3. Invite interested organisations and experts to be part of the PFP.

The goal is to organise the first PFP meeting with the permanent panel in February 2022. The guidance provided by the panel will be communicated to the GF-TADs governing bodies.

During Item 1, participants also discussed recommendations on priority outputs from the GF-TADs Strategy to support disease-specific strategies. Dr Charles Bebay (Vice-chair of the Regional Steering Committee for Africa) on behalf of Dr Nwankpa (Chair of the same committee) mentioned a lack of regional and national support to run efficient FMD vaccine campaigns, as recently observed in Western Africa. To conduct vaccine campaigns effectively, local constraints need to be overcome. One constraint is a fear that the existing limited resources will be further fragmented. The national Veterinary Services need to be better prepared to properly address current local conditions and carry out specific activities related to the management of animal diseases. These needs should be addressed by priority order. For some countries, FMD control may come after establishment of basic capacities.

Dr Rweyemamu suggested that GF-TADs actions could be optimised according to the following categories: 1) unknown and emerging diseases (e.g. ASF emergence in Americas) and globally eradicated diseases (e.g. rinderpest), 2) diseases approved for global eradication (e.g. PPR) and 3) diseases on global or regional progressive control programmes (e.g. FMD, HPAI and LSD). Dr Huang supposed that the GF-TADs with a new strategy could support disease prevention and control against groups of diseases that affect a single livestock species (e.g. swine diseases with ASF, classical swine fever, porcine reproductive and respiratory syndrome) in a holistic approach.

Dr Van Goethem mentioned the need to define how the GF-TADs framework will relate to the One Health concept and how the various GF-TADs disease working groups (e.g. PPR and FMD) could synergise to better address countries' needs. He also suggested that the GF-TADs should assist countries with implementing and enforcing the WOAHI International Standards.

Dr Sumption added that achieving WOAHI standards will require commitment and financing at the national level; therefore, national investment planning for livestock as well as zoonotic and public health is critical. Those involved in investment need guidance. New financing options associated with climate-change mitigation (methane reduction through health) could be useful.

Dr Komal mentioned the need to strengthen the national Veterinary Services and biosecurity at the producer's level.

Item 2: Updating the level of activity of GF-TADs regarding HPAI as a global priority TAD

Item 2 was chaired by Dr Dhingra, who introduced the main topics and provided 1) an overview of the current epidemiological situation of HPAI and 2) recent survey results on inclusion of HPAI as an active global priority TAD. Two presentations followed.

First, Dr Sophie von Dobschuetz (FAO Animal Health Officer) indicated that HPAI has been present in Asia and Europe since 1 October 2020. Africa reported 3,600 cases of H5 HPAI events in about 60 countries. A huge geographic expansion has been observed. Both WOAHI and FAO have warned countries situated on migratory pathways of wild birds about their high-risk periods for HPAI (re)introduction. Significant diversifications of HPAI genetic characterisation have been observed; some of these have zoonotic potential. Of the goals, pursued from the 2008 joint FAO–WOAHI Global Strategy vision, Dr von Dobschuetz mentioned early warning, emergency management, capacity building and technical guidance. She continued her presentation by naming challenges of HPAI prevention control, such as continuous emergence of new strains, diversity of production systems across regions, sharing of genetic data and live virus, lack of low pathogenicity avian influenza (LPAI) monitoring and tracking and, finally, insufficient use of vaccination for prevention and control. As next steps, she suggested a number of items, including revision of the 2008 global strategy, taking into account recent diversifications and geographical expansion, improved global and regional coordination by sharing lessons learned, enhanced knowledge of epidemiological trends and virological characteristics, timely sharing of genetic data and virus isolates, progressive poultry biosecurity strengthening, enhanced use of OFFLU, better advocacy of disease control options and faster vaccination without raising trade barriers.

Second, Dr Dhingra presented the results of a survey on considering HPAI as an active global priority. This survey was conducted in 2021. The objectives were to get feedback on whether the GF-TADs could address HPAI-related issues adequately at regional and global levels and whether HPAI should be added as an active global priority TAD. The questionnaire consisting of 11 questions was distributed to the members of the GF-TADs Regional Steering Committees and the WOAHA delegates, who are members of the GF-TADs Regional Secretariats. In total, 40 replies were received between 30 September 2021 and 13 October 2021. Responses came from Africa (5), the Americas (6), Asia and the Pacific (10), Europe (8), the Middle East (5) and 6 were not specified. The majority of the respondents believe that GF-TADs is addressing HPAI adequately in their region (particularly in Asia and the Pacific and Europe). Close to 70% (24 replies) indicated that the FAO–WOAHA Global Strategy for the Progressive Control of HPAI was used for planning prevention and control activities in their region; 30% (11 replies) replied negative to this question. Laboratories, surveillance, regional networking and capacity building were among areas that respondents said need more support and coordination in their regions. Most respondents believed that the objective of a HPAI global strategy must be to ‘support in prevention control activities to progressively reduce the prevalence and improve implementation of international standards’. Most respondents stated that the focus should not be on a single disease: the strategy should include other diseases as well. About 80% of the respondents thought that a global strategy on highly infectious respiratory poultry diseases should be developed, including not only HPAI but also Newcastle disease; 10% were of the opinion that infectious bronchitis should also be added; 10% mentioned adding other diseases as well. Dr Dhingra concluded that the GF-TADs has a role in addressing regional and interregional dimensions of HPAI. Due to the role of wild bird migration in the epidemiology of HPAI, there is a need for a global risk monitoring and alert system. HPAI has similarities to other TADs such as ASF and FMD. Lessons learned from other TADs in areas such as producer biosecurity, resilience of value chains, public–private partnerships, incentives in global supply chains, as well as developing compensation and vaccination schemes, should be included in an updated global HPAI strategy.

Dr Van Goethem stated that HPAI should be included as a global priority TAD, as it already is at several regional levels. Global coordination is needed for surveillance activities and for better preparedness. Targeted surveillance and sharing of knowledge and information should also focus on wild birds for early warning purposes. We should be discussing vaccination as well as the existing WOAHA standards.

Dr Huang emphasised that the poultry industry in Asia is significant and has a complex supply chain that makes the fight against HPAI very important. Asia welcomes inclusion of the HPAI as an active global priority TAD. The relationship between OFFLU and GF-TADs needs clarification to avoid duplication. Prevention and control in duck and geese production is also very important. Biosecurity is essential in these production systems. The work done so far is insufficient. Strategies must be adapted to local production systems in Asia and the Pacific.

Dr Sanchez agreed that HPAI should be a global priority TAD. He suggested collecting surveillance data on LPAI in link with the surveillance of zoonotic strains.

Dr Rweyemamu suggested that HPAI should be added to the category of diseases for which progressive control plans exist at regional and global levels, like FMD and ASF.

Dr Komal mentioned that enhanced biosecurity should make use of available vaccines as well as cost-benefit analysis of wastage of protein loss. Trade restriction must be included in risk scenarios.

Dr Dhingra concluded that there is agreement that HPAI should be considered as a global priority TAD. Regional approaches are important, and they should be the basis of a global strategy. Special attention should be given to early warning, information sharing, clarification of role of OFFLU and GF-TADs, biosecurity in different production systems and LPAI monitoring.

Item 3: Progress and support in regional activities

This item was chaired by Dr Sumption, who welcomed the chairs of the GF-TADs Regional Steering Committees. He emphasised the importance of hearing their assessments of the new strategy, their plans on how it will be implemented within their regions and what kind of support they expect from the global level.

Dr Komal described the emergence of ASF in the Dominican Republic and Haiti and the immediate responses, including a field mission on the island, awareness raising among the countries in the region and updating capacity assessment. Given the region’s vulnerability to further spread of ASF, a strategy has been updated and efforts are targeted to fundraising and coordination between the two affected countries. These activities are necessary to manage the outbreaks but also for prevention, preparedness and detection in other countries in the region. The risk situation in neighbouring countries varies widely depending on their pork product export profile. Regional and international organisations and countries with higher capacities strongly support the strategy. Dr Komal illustrated how the regional strategy is contributing to the global GF-TADs Strategy, in particular with a strong commitment to public–private partnerships. The region will focus protecting the swine industry through

strengthening Veterinary Services, detecting and responding to ASF outbreaks early and stopping further dissemination of ASF. The exchange of information and experience from other regions has been highly appreciated. Some participants recalled the financial support from organisations such as FAO and the InterAmerican Development Bank.

Dr Van Goethem, Chair of the Regional Steering Committee for Europe, presented the region's main activities since the GSC11 meeting. The terms of reference for the Regional Steering Committee and the chairmanship have been updated, and the list of priority diseases has been discussed. Standing groups of experts have virtually conducted activities on ASF, LSD (to coordinate vaccination campaigns) and rabies. The region will develop its strategy for the period 2022–2026, linked to the objectives of the GF-TADs Strategy. This strategy will be 1) to establish action plans addressing priority TADs in Europe and improving operational cooperation between FAO and WOAHA in Europe, 2) to resume field missions to address capacity gaps and to engage stakeholders and decision makers at the national level and 3) to improve sustainability of priority TADs strategies through multi-disciplinary partnerships. For the future, Dr Van Goethem warned against duplicating actions, guidelines and tools already performed and created at the global level. He is willing to share with other regions the experience gained in Europe. He also highlighted the need to plan ahead to best distribute roles and help with proper labelling of actions.

Dr Huang presented the main advancements since the GSC11 meeting. He recalled the importance of regularly exchanging information despite restrictions on travel. He mentioned a strong commitment from the members of the Regional Steering Committee and advancements made in involving private sectors and wildlife sectors, including better inclusion of regional-level experts in global-level discussions. Next year the Asia and the Pacific region expects to continue in that direction and to maintain efforts towards control of ASF, on-farm biosecurity and a domestic–wildlife interface. The region will update strategies for priority TADs at sub-regional levels. In terms of challenges, activities between global, disease-specific groups and regions need to be better coordinated. Events could be better organised and the relationship between OFFLU and GF-TADs better clarified. Better event planning and coordination between global and regional mechanisms will be sought in the future, along with guidance for developing public–private partnerships and engagement from private sectors in addition to the usual GF-TADs partners.

Dr Ibrahim Qassim, Chair of the Regional Steering Committee for the Middle East, presented GF-TADs activities in his region. He recalled the overall objectives for the control of TADs, including to strengthen the capacity of Veterinary Services so they can operate in accordance with WOAHA standards, to foster cooperation between international and regional organisa-

tions and to increase exchange of information and awareness among stakeholders so that they take action and evaluate situation and impact of TADs. Activities in that perspective include technical guidance and improvement of diagnostic laboratory capacity. Dr Qassim recalled the priority TADs for the region: FMD, PPR, Rift Valley fever, rabies, brucellosis and emerging diseases. Improvement of information exchange on TADs is pursued in the region, as well as reinforcement of Veterinary Services capacities. Reinforcement of Veterinary Services is important to enhance the capacity of regional stakeholders to coordinate, avoid overlapping and develop synergies. In that view, the collaboration will be strengthened with FAO Regional Office for Near East and North Africa, the Arab Organization for Agricultural Development, EuFMD, the WHO Regional Office for the Eastern Mediterranean and public–private partnerships. Technical guidance will be provided, and adequate governance of Veterinary Services will be promoted. Access to a virtual learning centre will be promoted. The region will increase coordination within the region and with neighbouring regions. The disease specific objectives and activities conducted in 2021 were recalled (see the global and regional report for more details). The region will consider involving partners from the private sector and from the economic sectors such as the United Nations Economic and Social Commission for West Asia and the Arab Maghreb Union for North Africa. Innovative approaches will be developed to improve and facilitate the sharing of risk information between countries in the region. Tackling diseases at the animal source is the most efficient and cost-effective way of dealing with zoonotic threats and high impact diseases. GF-TADs can support for capacity development, advocate regional needs and connect the One Health approach and the benefits of controlling TADs.

Dr Bebay, Vice-chair of the Regional Steering Committee for Africa, on behalf of Dr Nwankpa, Chair of the same committee, presented the GF-TADs activities for the region and the outcomes of the GF-TADs Regional Steering Committee meeting in October 2021. The committee updated the terms of reference and chairmanship of the Regional Steering Committee and reviewed the list of priority TADs. Main regional priority TADs are FMD, PPR and ASF. Secondary priority TADs are contagious bovine pleuropneumonia (CBPP) and Rift Valley fever. The region will continue to contribute to the rinderpest post-eradication programme. The new regional strategy and the terms of reference for a Standing Group of Experts for ASF were adopted and discussed. The Standing Group of Experts for ASF, scheduled for 18 November 2021, was postponed due to insufficient registration and will be rescheduled for 2022. For a Standing Group of Experts for CBPP, a call for expression of interest has been launched. Other activities concerned import risk analysis for ASF, a consultation on PPR Global Eradication Programme and the Eastern Africa Regional Animal Health Network (EA-RAHN), now linked with GF-TADs.

During the general discussion, participants considered the challenge of having TADs strategies that engage countries that have very different interests at stake depending on their participation in international livestock trade. At the same time, all countries likely have livestock keepers interested in controlling TADs.

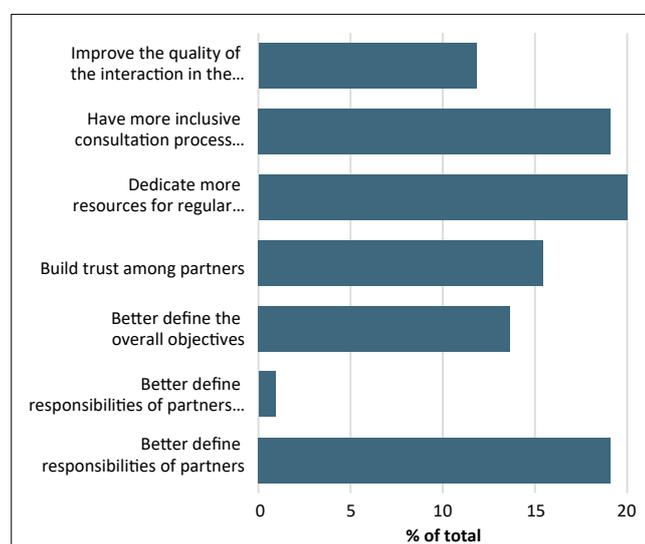
Participants recalled the necessity for regional strategies to prepare Veterinary Services to control TADs and underpin general disease surveillance and emergency animal disease response.

Two polls were given to participants.

The first poll asked, 'What challenge(s) and opportunities have you identified to define strategies addressing common priorities, related to TADs at regional or sub-regional level but also to share corresponding action plans between partners?'

A total of 48 participants answered as presented below (multiple answers were possible).

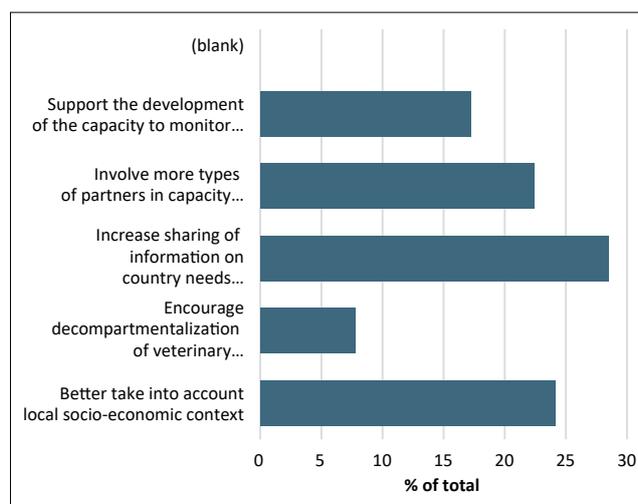
Possible answers	% of total
Better define responsibilities of partners	19.09
Better define responsibilities of partners / Dedicate more resources for regular coordinating/sharing information on action plans	0.91
Better define the overall objectives	13.64
Build trust among partners	15.45
Dedicate more resources for regular coordinating/sharing information on action plans	20.00
Have more inclusive consultation process (adding private partners, financing, academia, civil society)	19.09
Improve the quality of the interaction in the consultation process	11.82
Total	100.00



The second poll asked, 'What should be changed to better develop and maintain capacities to prevent and control TADs given the necessity for multidisciplinary approach?'

A total of 54 participants answered as presented below (multiple answers were possible).

Possible answers	% of total
Better take into account local socio-economic context	24.14
Encourage decompartmentalisation of Veterinary Services	7.76
Increase sharing of information on country needs identified	28.45
Involve more types of partners in capacity assessment gaps and capacity building activities	22.41
Support the development of the capacity to monitor progresses from national to global level	17.24
(Blank)	0.00
Total	100.00



Item 4: Recommendations

This item was chaired by Dr Dop, who explained the process of adopting recommendations. The possible recommendations issued from the two sessions of the GSC12 (2 November and 2 December) would be discussed during this item. Based on this discussion, the Global Secretariat would circulate draft recommendations within a couple of days, inviting participants to provide their feedback in the following two weeks. In January 2022, the Global Secretariat would present the received feedback to the Management Committee. The final recommendations, as consolidated by the Management Committee, would be published on the GF-TADs website.

The Global Secretariat presented the 11 recommendations from the first session, many related to more advocacy, and first set of recommendations from the second session.

Participants improved the wording of some recommendations related to priorities for Veterinary Services depending on their local context, and on synergistic approaches for diseases affecting the same species, leading to a more species-oriented approach. In support of that specific recommendation, participants mentioned that synergies across species and diseases can include areas such as surveillance (data analysis and communication), Veterinary Services, legislation, strategic developments, on-farm biosecurity and reducing risks of animal movement.

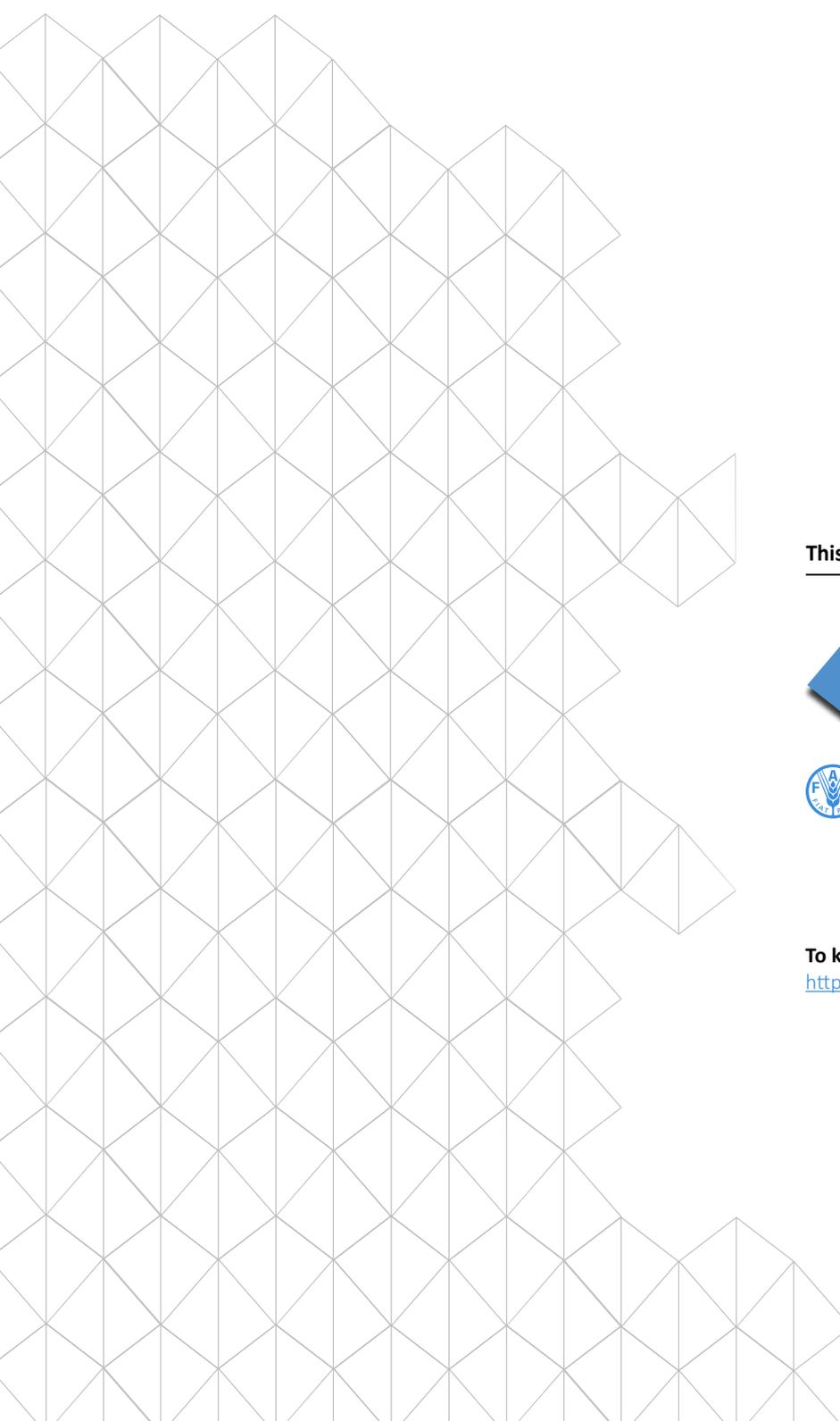
Attendants discussed grouping priority TADs by intended outcomes, such as 1) new diseases or eradicated diseases, 2) disease for global eradication and 3) disease for progressive control.

Potential synergies between GF-TADs and One Health were discussed. The link between infectious diseases and antimicrobial use, leading to risks of resistance, was recalled as an argument for controlling TADs. Participants further emphasised the need to connect TADs control and One Health. It was also suggested that the presentations at the next Global Steering Committee meeting include relevant initiatives of TADs–One Health cross-fertilisation.

Conclusions

The GF-TADs GSC12 was concluded by the two co-chairs of the Management Committee. Dr Dop highlighted the call for synergies between TADs, within species and with a One Health dimension. He recalled the strengthening of Veterinary Services as a core priority for the GF-TADs. Finally, he stressed the need to advocate for controlling TADs in a broader context, linked with other global challenges, including but not limited to One Health.

Dr Sumption emphasised the need to focus on achieving impact through the GF-TADs Strategy for 2021–2025. Participation of different stakeholders is an absolute necessity. For that goal, he stressed the importance of a Partnership and Financing Panel for GF-TADs. On behalf of the Management Committee, he thanked the participants for their contributions to this GSC12 and welcomed their further suggestions. He thanked the Global Secretariat for their efforts and closed GSC12.



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