

Recommendations

**of
Conferences of OIE Regional Commissions
organised since 1 June 2016**

**Endorsed by the World Assembly of Delegates of the OIE
on 25 May 2017**

**27th Conference of the
OIE Regional Commission for Europe**

Lisbon, Portugal, 19 to 23 September 2016

[Recommendation No. 1:](#) Control and elimination of rabies in Europe: challenges and strategies for a rabies-free Europe

[Recommendation No. 2:](#) Lumpy skin disease: current situation in Europe and neighbouring regions and necessary control measures to halt the spread in South-East Europe

Recommendation No. 1

**Control and elimination of rabies in Europe:
challenges and strategies for a rabies-free Europe**

CONSIDERING THAT:

1. In sharing responsibilities and coordinating global activities to address health risks at the animal-human-ecosystem interfaces, the Tripartite (FAO, OIE, and WHO) have identified rabies as a priority disease;
2. The OIE and WHO have developed the “Operational framework for good governance at the human–animal interface: Bridging WHO and OIE Tools for the assessment of national capacities”;
3. The Global Framework for the Elimination of dog-mediated Human Rabies (Global Framework) was elaborated in accordance with the consensus reached by participants at the Global Conference: Global Elimination of Dog-mediated Human Rabies held in Geneva in 2015 with the vision of achieving zero human deaths from dog-mediated rabies by 2030;
4. The Blueprint for Rabies Prevention and Control developed by the Global Alliance for Rabies Control;
5. During its 84th General Session in 2016, the OIE World Assembly of Delegates endorsed the Resolution No. 26 on the Global elimination of dog-mediated rabies;
6. The GF-TADs for Europe has established rabies as one of the 7 priority diseases in Europe and calls for regional coordinated and harmonised measures to control it;
7. The current rabies epidemiological situation indicates that rabies is endemic in either wildlife or in both dog and wildlife species in 49% of the Member Countries of the Regional Commission for Europe (hereafter referred as ‘European countries);
8. Over the last 10 years, 9 European Countries reported human cases of rabies;
9. A minority of European Countries (12) has followed the procedure for rabies freedom self-declaration described in Chapter 1.6 (Procedures for self-declaration and for official recognition by the OIE) and Chapter 8.13 (Infection with Rabies Virus) of the OIE *Terrestrial Animal Health Code*;
10. The publication, by the OIE, of rabies freedom self-declaration is the best way to document and communicate on the progress made by Member Countries towards global elimination of dog-mediated rabies;
11. Good veterinary governance and intersectoral collaboration under the “One Health” concept is a prerequisite to achieve rabies elimination;
12. Stray dog (and cat) populations are considered by European countries as a problem in rabies control and elimination efforts; and

13. Vaccination has proven to be the most cost-effective way to eliminate rabies at the animal source and sustainably prevent human rabies.

THE OIE REGIONAL COMMISSION FOR EUROPE

RECOMMENDS THAT:

1. All Member Countries make rabies a notifiable disease in humans, domestic and wild animals and fulfil their reporting obligations as WHO and OIE Member;
2. The Member Countries considering themselves as free from rabies, if not already done, apply the provisions of the OIE *Terrestrial Animal Health Code* for rabies freedom self-declaration and inform the OIE of their claimed status for publication;
3. The Member Countries having already applied the provisions of the OIE *Terrestrial Animal Health Code* for rabies freedom maintain their status by:
 - Having early disease detection system in both domestic and wild ;
 - Ensuring animal movement and border security are in compliance with international standards and in close collaboration with customs' authorities;
 - Having contingency plan for the rapid response to any suspected or confirmed rabies case in animals;
4. The Member Countries share their experience and collaborate on rabies control and elimination through bilateral or regional activities using mechanisms such as the GF-TADs;
5. The human and animal health sectors of rabies endemic Member Countries join their efforts to convince their decision makers of the cost-effective advantage of eliminating rabies at the animal source and thereby consider rabies elimination, in both dogs and wildlife, as a priority, with a view to allocating appropriate long-term public investment;
6. The rabies endemic Member Countries use the Global Framework for the Elimination of dog-mediated Human Rabies as well as the Blueprint for Rabies Prevention and Control to guide the development of their stray dog population management and national rabies control and elimination strategy;
7. The OIE continue to provide support to the Member Countries of the Region on stray dog population control through the OIE Platform on Animal Welfare in Europe and extend the use of the OIE self-assessment questionnaire on dog population management to other relevant sub-regions;
8. The OIE and WHO in collaboration with other international organisations, continue to support Veterinary Services and human health services by organising National Bridging Workshop on the International Health Regulations (IHR) and OIE PVS Pathway promoting intersectoral collaboration following the “One Health” concept ;
9. The OIE promote and support the use of rabies vaccines, in both dogs and wildlife, complying with the OIE Manual and, in collaboration with WHO, support the use of the OIE Rabies Vaccine Bank in order to ensure the timely provision of high quality vaccines for dogs to requesting Member Countries of the Region; and

10. Member Countries, in collaboration with the OIE, increase rabies public awareness by conducting communication campaign adapted to their socio-cultural context, in particular by taking advantage of the annual World Rabies Day.
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(Adopted by the OIE Regional Commission for Europe on 23 September 2016 and endorsed by the World Assembly of Delegates of the OIE on 25 May 2017)

Recommendation No. 2

Lumpy skin disease: current situation in Europe and neighbouring regions and necessary control measures to halt the spread in South-East Europe

CONSIDERING THAT:

1. Despite control and eradication measures taken by some OIE Member Countries, the spread of Lumpy Skin Disease (LSD) is continuing, mainly in unvaccinated animals, within the Middle and Near East, South-East Europe and Northern Caucasus;
2. The current knowledge on LSD indicates the following:
 - a. LSD is mainly transmitted mechanically by a variety of blood-feeding vectors present in cattle populations' environment;
 - b. LSD virus has the potential to survive for prolonged periods in the environment, and the disease appears to be of seasonal nature, with reappearance after cold season;
 - c. Effective vaccines against LSD are commercially available;
 - d. Large-scale vaccination combined with stamping-out and strict biosecurity measures have proven to be effective at controlling the disease; and
 - e. The transport of viraemic cattle with sub-clinical or unnoticed infection is one of the main risk factors for LSD spread.
3. There are still many gaps in knowledge that need to be filled by research, among others;
 - a. To better understand the disease transmission;
 - b. To improve the understanding on the protection provided by different vaccines and vaccination protocol; and
 - c. To improve diagnostic technique and capacity.
4. During its 6th Regional Steering Committee meeting, the GF-TADs for Europe has identified LSD as an emerging priority and since then a Standing Group of Experts on Lumpy Skin Disease in South-East Europe (SGE LSD) has been established under GF-TADs umbrella;
5. The High Level Ministerial Conference on Lumpy Skin Disease held in Sofia (Bulgaria) on 8 and 9 September 2016 provided a series of technically-sound conclusions to best assist countries in their efforts to combat this disease ; and
6. The OIE *Terrestrial Manual* Chapter 2.4.13 on Lumpy Skin Disease has been updated in May 2016 and the *Terrestrial Animal Health Code* Chapter 11.11 on Lumpy Skin Disease (caused by Group III virus, type Neethling) is currently under revision.

THE OIE REGIONAL COMMISSION FOR EUROPE

RECOMMENDS THAT:

1. Member Countries increase their preparedness for LSD by ensuring proper legislation, surveillance and early detection, contingency planning, diagnostic capacity, provisions for vaccination, and awareness campaigns for relevant stakeholders, according to their assessment of the risk of disease incursion;
2. Member Countries affected by LSD implement, without delay, strict cattle movement control, consider the application of a stamping-out policy, and the vaccination of cattle in an area large enough to prevent vector-borne spread, using vaccines complying with the OIE *Terrestrial Manual*, to prevent the spread of the disease to the other parts of the country and to neighbouring countries;
3. Member Countries at risk of LSD consider preventive vaccination in the regions at risk in a timely manner using vaccines complying with the standards of the OIE *Terrestrial Manual* to prevent the introduction or spread of the disease;
4. Member Countries notify the OIE in accordance with the deadlines set out in Chapter 1.1 of the OIE *Terrestrial Code* and apply the recommendations of the Chapter 11.11 on LSD;
5. Member Countries affected with or at-risk of LSD be actively involved in the activities of the Standing Group of Experts on Lumpy Skin Disease in South-East Europe under GF-TADs umbrella (SGE) and implement the recommendations of this Group, including those under discussion, related to the establishment, implementation, and monitoring of a regional action plan on LSD;
6. According to their assessment of the risk of disease incursion, Member Countries increase their capability and capacity to properly diagnose LSD by participating in annual ring-trials and proficiency testing organised by OIE Reference Laboratories and other appropriate laboratories such as the EU reference laboratory for LSD;
7. Member Countries, in collaboration with the OIE and relevant international and regional organisations, set up international research collaborations and networks and initiate research projects addressing the current knowledge gaps on LSD;
8. Member Countries better communicate to interested parties the following messages: (i) LSD represents no risk for human health as it is not a zoonosis; (ii) meat and milk for human consumption are not considered to be significant risk factors for transmission and the risk posed by milk destined for animal consumption can be mitigated by pasteurisation; and (iii) hides are more likely to be contaminated with virus than meat or milk and require specific risk mitigating measures;
9. Member Countries be fully involved in commenting the revised Chapter 11.11 on Lumpy Skin Disease (caused by Group III virus, type Neethling) of the OIE *Terrestrial Code*, especially by reviving the relevant Task Force of the Regional Commission for Europe, and urge for the adoption of the revised Chapter in May 2017;
10. The OIE, in collaboration with OIE LSD Reference Laboratories and providing funding be available, undertake Twinning Projects on LSD in order to increase the technical capability and capacity in affected or at-risk Member Countries;
11. The OIE, the FAO, and the European Commission continue to show leadership by maintaining and developing the activities of the SGE on Lumpy Skin Disease in South-East Europe;

12. The OIE continue to update and publish the Technical Disease Card on Lumpy Skin Disease taking into account the most current scientific knowledge; and
 13. The OIE and the FAO, in collaboration with other international and regional organisations, and preferably under the GF-TADs umbrella, promote and stimulate inter-regional cooperation and coordination on LSD, especially with the Member Countries of the Middle East region.
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(Adopted by the OIE Regional Commission for Europe on 23 September 2016 and endorsed by the World Assembly of Delegates of the OIE on 25 May 2017)

**23rd Conference of the
OIE Regional Commission for the Americas**

Santa Cruz de la Sierra, Bolivia, 14 to 18 November 2016

[Recommendation No. 1:](#) Implementation and maintenance of animal traceability in the Americas: overview of current status and impact for international trade

[Recommendation No. 2:](#) Highly pathogenic avian influenza: Challenges encountered and measures for preventing its spread

Recommendation No. 1

Implementation and maintenance of animal traceability in the Americas: overview of current status and impact for international trade

CONSIDERING THAT:

1. Based on the response to the questionnaire, the level of development and performance of animal traceability system varies greatly among Member Countries of the Americas;
2. Many Member Countries of the Americas have not yet adopted national legislation on animal traceability;
3. The vast majority of Member Countries of the Americas believe that animal traceability is a priority and this topic will remain a worldwide priority in the coming years;
4. Across the Americas, the levels of development, interest and readiness for animal traceability amongst species are, in order from highest to lowest: bovine, porcine, poultry, equine, ovine, and caprine;
5. In the Americas, of the three important components of animal traceability, the lowest level of performance is in domestic movements registration, whereas performance for animal identification/registration, the quality of import/export information, and establishment registration is generally stronger;
6. The vast majority of Member Countries of the Americas consider that a very important outcome of animal traceability is to support disease control and surveillance activities;
7. The main impediments in the development of an animal traceability system identified by the Member Countries of the Americas are, in decreasing order, the lack of: financial resources to support implementation, interest from industry, infrastructure to read, report and collect animal traceability information, legislative support, technical support and willingness to modify current practices;
8. The OIE *Terrestrial Code's* chapters 4.1 on “General principles on identification and traceability of live animals” and 4.2 on “Design and implementation of identification systems to achieve animal traceability” provide key elements for the development and implementation of an animal traceability system;
9. The OIE PVS Tool identifies “Identification and Traceability” as a Critical Competency and an essential component in the quality of Veterinary Services; and
10. The International Organization for Standardization (ISO) provides complimentary standards relevant to the development and implementation of animal traceability systems.

THE OIE REGIONAL COMMISSION FOR THE AMERICAS

RECOMMENDS THAT:

1. The Member Countries include in the development of their animal traceability systems, including related national legislation, the principles of animal traceability found in Chapter 4.1 and 4.2 of the OIE *Terrestrial Code* with the purpose of supporting disease control and surveillance activities;
2. Member Countries use the OIE standards and cooperate in ensuring that traceability requirements for both imports and exports are appropriate in ensuring safe trade;
3. Member Countries improve their capacity for the traceability of terrestrial and aquatic animals as well as for beehives prioritising aspects providing more obviously favourable benefit-cost and/or industry support, including initial lower cost options such as export market, species/production system, vaccination, zoning or 'book-end' (origin, death, import, export) only traceability systems;
4. Member Countries assess and share lessons learned and best practices on traceability for terrestrial and aquatic animals as well as for beehives;
5. Member Countries take advantage of the OIE PVS Pathway and request missions of this programme in order to assess their compliance with OIE standards and get support on their animal health strategies, including for animal traceability;
6. Member Countries encourage the establishment of a Collaborating Center on animal identification and traceability which could provide and coordinate capacity building activities on animal traceability to Member Countries, including at regional level;
7. Member Countries consider the implementation of other relevant international standards such as those of ISO in their animal traceability systems, noting that the adoption of such standards is free and can support the interoperability of traceability systems at regional and international levels;
8. The OIE work with OIE Delegates to advocate the importance of animal traceability systems to high level decision-makers so to trigger proper resourcing; and
9. The OIE continue to provide proper resourcing of the PVS Pathway in order to provide Member Countries with missions to improve their Veterinary Services, including for identification and traceability, in a timely manner.

(Adopted by the OIE Regional Commission for the Americas on 18 November 2016 and endorsed by the World Assembly of Delegates of the OIE on 25 May 2017)

Recommendation No. 2

**Highly pathogenic avian influenza
Challenges encountered and measures for preventing its spread**

CONSIDERING THAT:

1. The global human population continues to grow and become wealthier, and the demand for animal protein, particularly for poultry meat and eggs, is correspondingly increasing;
2. Highly pathogenic influenza (HPAI) continues to have a significant impact on poultry health and production across the globe;
3. Many countries worldwide are experiencing or have experienced unprecedented HPAI events which threaten animal health, public health, food security, agricultural productivity, farming community livelihoods and global trade;
4. While geographical barriers may still help in preventing the spread of avian influenza, strains of the virus have now been shown to spread intercontinentally by wild waterfowl and other wild birds;
5. The understanding of how avian influenza viruses can spread within continents is critical to the development of successful strategies to reduce the impact of influenza outbreaks in commercial poultry;
6. The proximity to the aquatic wild bird flyways and the presence of wetlands as aggregation areas for aquatic birds, increases the risk of epidemiological contacts and introduction of avian influenza in domestic poultry, such as evidenced during the 2014/2015 outbreak of HPAI in the United States of America;
7. The implementation of effective biosecurity measures prevents and reduces the risk of introduction and subsequent spread and amplification of the avian influenza virus in domestic poultry;
8. Early detection of HPAI virus is key to rapid control and eradication of the virus;
9. During the 2014/2015 outbreak of HPAI in the United States of America, depopulation of commercial poultry premises and disposal of carcasses were the most demanding disease control response activities in terms of human resources;
10. The OIE has adopted numerous standards for the prevention, detection, and control of avian influenza, including those related to zoning and compartmentalization.

THE OIE REGIONAL COMMISSION FOR THE AMERICAS

RECOMMENDS THAT:

1. Member Countries conduct active wild bird surveillance to track and monitor avian influenza viruses in the wild bird population, in particular in aquatic wild birds, and the poultry producers be informed of meaningful results, on a timely manner, to strengthen their biosecurity;

2. Member Countries continue to provide detailed spatial and temporal information on avian influenza occurrence in both domestic poultry and wildlife through WAHIS;
3. Member Countries develop contingency plans for disease control activities and ensure adequate material and sufficient human resources are available for HPAI disease control activities, notably for depopulation of commercial farms and disposal of carcasses;
4. Member Countries assess and share lessons learned and best practices on the application of the relevant OIE standards in the management of HPAI outbreaks;
5. Member Countries promote the implementation, by the poultry sector, of appropriate biosecurity measures in line with the *OIE Terrestrial Code's* Chapter 6.4 on “Biosecurity procedures in poultry production”, by the development of specific biosecurity plans jointly with the industry;
6. Member Countries submit avian influenza samples to Reference Laboratories for sequencing and strain collation in support to the joint OIE and FAO worldwide scientific network for the control of animal influenza (OFFLU);
7. The OIE encourage the identification of the multifactorial determinants of animal health risk needed to support risk analysis, surveillance and intervention strategies, including updated evaluations on the risk associated with migratory flyways and that the enhancement of this capacity be considered in the upgrade of WAHIS;
8. The OIE undertake joint capacity building seminars dedicated to Wildlife, Animal Disease Notification, and Laboratory National Focal Points in order to favour synergy at national level in terms of notification of wildlife diseases such as avian influenza; and
9. The Member Countries strongly consider the establishment of bilateral and multilateral agreement on the recognition of zones and compartments to facilitate trade during outbreaks implementing the principles defined in Chapter 4.3 of the *Terrestrial Animal Health Code* on “zoning and compartmentalisation”.

(Adopted by the OIE Regional Commission for the Americas on 18 November 2016 and endorsed by the World Assembly of Delegates of the OIE on 25 May 2017)

**22nd Conference of the
OIE Regional Commission for Africa**

Swakopmund, Namibia, 20 to 24 February 2017

[Recommendation No. 1:](#) Pastoralism: opportunities for livestock and challenges for Veterinary Services

[Recommendation No. 2:](#) Unfolding the Global Strategy for the Control and Eradication of peste des petits ruminants (PPR) in Africa

Recommendation No. 1

**Pastoralism: opportunities for livestock and
challenges for Veterinary Services**

CONSIDERING THAT:

1. Pastoralism in Africa remains a fundamentally important cultural and socio-economic activity for the continent, particularly in terms of survival of communities, creation of livelihoods, diversification of income, and cultural integrity of socio-ecosystems, but also in terms of food security and sovereignty;
2. Pastoral livestock systems present major strengths and potential benefits in giving governments and their people very real prospects for sustainable development and elaborating sound land use planning policies;
3. These production systems are faced with increasingly greater challenges, including from climate change, which will have to be addressed if we are to avoid that pastoralism and all its potential benefits disappear in the very near future;
4. Access to basic public services, notably targeting public health and animal health (Veterinary Services), is one of the main priorities for pastoralist communities;
5. Movements of animals are one of the essential components of pastoral livestock management practices to ensure resilience to drought, among others;
6. The animal health situation in Africa is characterised by the persistence of major infectious transboundary animal diseases such as Peste des petits ruminants (PPR) and Contagious Bovine Pleuropneumonia (CBPP), and this is having significant repercussions on livestock productivity and, consequently, on the living conditions of human populations;
7. There is a very great disparity in African countries between the contribution that the livestock sector in general, and pastoralism in particular, makes to national Gross Domestic Product (GDP), and the share of the national budget that is allocated to it;
8. The Veterinary Services in African countries have for some thirty years been suffering from chronic and virtually generalised underinvestment, resulting in a very significant reduction in the capacity of these Services;
9. Border controls and the establishment of disease surveillance and control systems have a crucial role to play in limiting the spread of animal diseases; and
10. The demand for animal protein in Africa is set to grow at least as fast as the population, which is expected to double by 2050.

THE OIE REGIONAL COMMISSION FOR AFRICA

RECOMMENDS THAT:

1. Member Countries' Delegates advocate at the highest level for livestock production and animal health in general, and especially for pastoralism in arid and semi-arid zones, to redress the imbalance between the budget allocated to the livestock sector, including Veterinary Services, and the sector's socio-economic importance;
2. Member Countries be committed to strengthening the capacity and accessibility of Veterinary Services to all livestock populations, including those involved in pastoral systems, as a national priority, including by taking advantage of the OIE PVS Pathway as an independent mechanism based on international standards to prioritise and advocate for improving Veterinary Services with national decision-makers and donors;
3. Member Countries, with the support of the African Union Inter-African Bureau for Animal Resources (AU-IBAR) and the Food and Agriculture Organization of the United Nations (FAO), and in collaboration with the Regional Economic Communities, mobilise resources to increase the effectiveness of national border animal health controls and epidemiological surveillance systems and explore regional approaches that would make a significant contribution to controlling the major transboundary animal diseases in Africa, including zoonoses;
4. Member Countries' Veterinary Services sensitise and directly engage their pastoralist communities in the implementation of the Global Strategy for the Control and Eradication of Peste des Petits Ruminants (PPR-GCES) and its Peste des Petits Ruminants Global Eradication Programme (PPR GEP) (2017-2021), developed jointly by the Food and Agriculture Organization of the United Nations (FAO) and the World Organisation for Animal Health (OIE);
5. Member Countries strengthen relevant stakeholders' knowledge and awareness of the "One Health" concept and explore ways to develop synergies between animal health and human health systems to improve both human and animal health in pastoralist communities;
6. Member Countries encourage the identification of a centre of excellence in understanding and managing pastoralism, particularly its intersection with animal and veterinary public health, that could eventually be proposed as an OIE Collaborating Centre on Pastoralism in Africa;
7. The Regional Steering Committee of the Global Framework for the Progressive Control of Transboundary Animal Diseases (GF-TADs) for Africa, once reactivated, consider the inclusion of pastoralism as a priority topic in its Five-Year Action Plan;
8. The OIE organise a multiregional conference on pastoralism in Africa in 2019 in order for countries to share their experiences and explore solutions to address animal health issues of pastoral livestock systems;
9. The OIE consider convening an *ad hoc* group on pastoralism to explore the possibility to develop guidelines on animal and veterinary public health in pastoral systems;
10. The OIE improve the understanding of its Member Countries of the "One Health" approach, including its operational aspects, by providing, to requesting countries, workshops on bridging the World Health Organization (WHO) International Health Regulations (IHR) and the OIE PVS Pathway ; and

11. The OIE continue to secure proper resourcing of the PVS Pathway in order to provide Member Countries with missions to guide and advocate for strengthening their Veterinary Services in a timely manner.
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(Adopted by the OIE Regional Commission for Africa on 24 February 2017 and endorsed by the World Assembly of Delegates of the OIE on 25 May 2017)

Recommendation No. 2

**Unfolding the Global Strategy for the Control and Eradication of
peste des petits ruminants (PPR) in Africa**

CONSIDERING THAT:

1. The region of Africa accounts for 32% of the global population of small ruminants (sheep and goats);
2. The transboundary spread of peste des petits ruminants (PPR) in Africa over the past decade continues to cause a severe animal health impact and heavy economic losses in infected countries, and poses a threat to countries historically free from PPR and potentially to wild ruminant populations;
3. The Global Strategy for the Control and Eradication of Peste des Petits Ruminants (PPR-GCES) and its Peste des Petits Ruminants Global Eradication Programme (PPR-GEP) (2017-2021), developed jointly by the Food and Agriculture Organization of the United Nations (FAO) and the World Organisation for Animal Health (OIE), in collaboration with key partners, provide the framework, approach, tools and provisions for investment needed to meet the challenge of global PPR eradication;
4. The eradication of PPR by 2030 will contribute significantly to food security, poverty reduction, enhanced resilience of smallholder farmers and herders especially, the creation of animal production opportunities and the economic development of countries where the small ruminant sector is important;
5. The PPR-GCES and PPR-GEP combine three core synergistic components:
 - a progressive, step-wise approach to PPR control leading to eradication;
 - strengthening of Veterinary Services;
 - control of other priority small ruminant diseases.
6. The FAO and the OIE, under the auspices of the Global Framework for the Progressive Control of Transboundary Animal Diseases (GF-TADs), have established the PPR Global Secretariat which is responsible for the overall coordination of the PPR-GCES and PPR-GEP's implementation;
7. The successful implementation of the PPR-GCES and PPR-GEP, particularly in Africa, requires:
 - political will and ongoing commitment at continental, regional and national levels;
 - a coordinated and harmonised regional and sub-regional approach that takes into consideration all national and regional specificities;
 - strengthening of the activities of regional laboratory networks and regional epidemiology networks, which are considered to be key fora for information exchange, the transfer of knowledge, technology and skills at regional and national level, and the harmonisation of national strategic plans;

- ongoing support to countries for the implementation of planned activities;
 - the engagement and involvement of all stakeholders and all actors in the small ruminant sector at all levels – national, regional and continental.
8. The OIE provides Member Countries with international standards, support programmes for strengthening Veterinary Services including the OIE PVS Pathway, procedures for the endorsement of official national PPR control programmes and for official recognition of PPR free status, and the voluntary supply of high quality vaccine via OIE global and regional vaccine bank arrangements;
 9. The PPR Monitoring and Assessment Tool (PMAT) is the established process to formally identify a country's PPR stage and plan for its progression towards PPR eradication, and it has clear provision for OIE PVS Evaluation report results to be formally integrated into every PMAT process;
 10. The OIE is developing and piloting OIE PVS Pathway missions which, while continuing to evaluate the whole national animal health system and veterinary domain, will also be supplemented by a specific focus and content on national PPR eradication, with pilot missions taking place in the Europe and Asia, the Far East and Oceania in the first half of 2017; and
 11. Early official notification of animal health events to the OIE through the World Animal Health Information System (WAHIS) is essential to improve the transparency, efficiency and speed with which global animal health information is disseminated.

THE OIE REGIONAL COMMISSION FOR AFRICA

RECOMMENDS THAT:

1. Member Countries take full ownership of the PPR-GCES and PPR-GEP by ensuring that their Veterinary Services have the required authority, capacity and resources to implement the related activities;
2. Member Countries, that are not free of the disease, appoint a dedicated PPR national coordinator, establish a PPR national committee, develop a PPR national strategic plan specifying the required resources , and actively participate to all the activities supporting the implementation of the PPR-GCES and PPR-GEP;
3. Member Countries agree that their existing OIE PVS Pathway reports, where available and not outdated, should be utilised to assist in national PPR eradication evaluation and planning, as aligned with the PPR-GEP component relating to strengthening Veterinary Services, and as formally linked to the PPR Monitoring and Assessment Tool (PMAT);
4. Member Countries take advantage of the OIE PVS Pathway for strengthening their Veterinary Services by requesting OIE PVS Pathway missions, including considering the new availability of PVS Pathway missions with specific PPR content, which will continue to be developed and refined subsequent to initial piloting in the first half of 2017;
5. Member Countries submit their dossier for endorsement of official control programme and free status as relevant to their stage of progression;

6. The African Union- through the African Union Inter-African Bureau for Animal Resources (AU-IBAR)- and Regional Economic Communities continue their work to align their existing strategies and/or programmes for the control and eradication of PPR with the PPR-GCES approach and with PPR-GEP activities, particularly the use of PMAT and the OIE PVS Pathway;
7. The AU-IBAR, the African Union Pan African Veterinary Vaccine Centre (AU-PANVAC), Regional Economic Communities, and development partners:
 - support the performance of regional roadmap activities and the implementation of regional strategies;
 - support countries in adopting a harmonised and coordinated regional vision when preparing national PPR plans and implementing national activities planned to achieve PPR eradication;
 - continue to strengthen regional epidemiology networks and regional laboratory networks and their role in the exchange of information and expertise on the surveillance, diagnosis and control of transboundary animal diseases, including in wildlife;
 - assist countries and regions in developing communication and awareness strategies to consolidate an effective public-private partnership and secure the effective involvement of all livestock sector actors in the implementation of national and regional strategies to control and eradicate PPR;
 - support countries in the production and/or use of PPR vaccines that meet OIE standards.
8. The OIE and FAO reactivate the GF-TADs for Africa by proposing a new governance leading to an active participation of all interested parties to be adopted during the 10th meeting of the Regional Steering Committee to be held in 2017;
9. The OIE continue to support Member Countries in strengthening their Veterinary Services through the OIE PVS Pathway and develop, refine and offer PPR dedicated content as part of PVS Pathway missions in Africa;
10. The OIE continue to maintain the OIE Regional PPR Vaccine Bank for interested countries with an ongoing or sudden demand for external sources of readily available high quality PPR vaccine;
11. The OIE staff its Representations in Africa with PPR dedicated officers; and
12. The OIE organise training seminars to support Member Countries to:
 - prepare their application for endorsement of their official control programme for PPR or for official recognition of PPR free status;
 - comply with their obligation to submit quality animal disease notifications and information.

(Adopted by the OIE Regional Commission for Africa on 24 February 2017 and endorsed by the World Assembly of Delegates of the OIE on 25 May 2017)

