



FAO/OIE  
**GF-TADs**  
GLOBAL FRAMEWORK FOR THE  
PROGRESSIVE CONTROL OF  
TRANSBOUNDARY ANIMAL DISEASES  
For Africa



## Report of the 4th GF-TADs for Africa steering committee, held in IBAR HQs, Nairobi, 9-10 March 2009

### Background

The Global Framework for Progressive Control of Transboundary Animal Diseases (GF-TADs) is a joint FAO/OIE initiative, which combines the strengths and utilizes the synergies of both organizations to prevent and control transboundary animal diseases (TADs). WHO is also associated with the initiative for zoonotic TADs. The African branch of the GF-TADs initiative (GF-TADs for Africa) was set up in March 2006 in Bamako. Fifteen members from FAO, OIE, regional organizations and donors were appointed in the Steering Committee, with the FAO-CVO as President. In compliance with the general agreement, the Secretariat is hosted by the OIE Regional Representation for Africa in Bamako. In Africa, the GF-TADs Regional Support Units (RSUs) are the Regional Animal Health Centres (RAHCs) located in Bamako (2006), Nairobi (2007), Gaborone (2007) and Tunis (2007). The second GF-TADs for Africa Steering Committee meeting took place in Djibouti in March 2007. During this meeting, it was decided that the GF-TADs for Africa be officially integrated as the animal health component of the ALive platform. This had the following consequences: (i) the GF-TADs for Africa Action Plan is an integral part of the ALive Action Plan and (ii) recommendations made under the GF-TADs are recommendations to the ALive Steering Committee for Africa and have to be translated into resolutions of the ALive Executive Committee meeting.

### THE FOURTH GF-TADs for AFRICA Meeting, 9-10 March, 2009, Nairobi

The fourth GF-TADs for Africa meeting took place in a transitional period for ALive (between the end of the first three-year Action Plan 2004-2008 (TAP1), and the launching of the second three-year action plan recommended 2010-2012 (TAP2)), and the transfer of the ALive Secretariat from World Bank in Washington to AU-IBAR in Nairobi.

1. The meeting was chaired by Dr. Joseph Domenech, President of the GF-TADs for Africa, with sessional co-chairing by Drs Daniel Bourzat, A. Niang, D. Bangoura, F. Le Gall from WB and A. El Sawalhy from AU-IBAR. Thirty six persons, representing regional and international organizations including donors, attended the meeting (see [list of participants](#) in [Annex 1](#)). The full Steering Committee members (see [Doc 1](#) in Annex 3), except three (IGAD, AfDB and the President of the OIE Regional Commission for Africa) participated.
2. For the first time, the meeting took place over 1.5 day, to accommodate the request made by the GF-TADs members during the SC3, which was officially endorsed in the EC11 Resolution, decision # 23.
3. The meeting started with opening remarks from the institutions comprising GF-TADs. Dr Domenech emphasized the opportunity and the necessity to work towards the One World One Health concept (OWOH), which goes beyond the HPAI issue. Dr Domenech highlighted key animal health events of the past year since the last GF-TADs steering committee (SC) meeting, namely the last stages of the eradication of Rinderpest and the emergence of several disease events such as RVF and PPR. He also reminded the audience that HPAI still remained a threat and that there is an increasing need to focus on cross cutting issues such as epidemiology, surveillance, support to laboratories, biosecurity and support to public-private partnership. Dr Domenech announced that he will retire from FAO at the end of September 2009 and that this meeting was his last as President of GF-TADs.

4. Dr Ahmed El Sawalhy-Ag. Director of AU-IBAR discussed the major transboundary animal diseases affecting Africa and stated that it was imperative to prevent and control these diseases so as to ensure food security and improve peoples' livelihoods. He also enumerated the challenges facing the achievement of set goals of GF-TADs - weak veterinary services and inadequate manpower to underpin animal disease control actions.
5. Dr Daniel Bourzat conveyed the greetings and best wishes of the OIE Director General Dr Bernard Vallat who was unavoidably absent. He acknowledged the presence of Dr Bouna Niang who is the OIE Africa Representative. He acknowledged the fact that for the GF-TADs to have operated over the years clearly demonstrated the willingness for inter-institutional collaboration, although these institutions adhered to their core mandates.
6. Dr François Le Gall of the WB said that it was important to have ALive as the main framework for GF-TADs implementation. He expressed his satisfaction to see the transfer of the ALive Secretariat to Nairobi taking place.
7. The [agenda of the SC4](#) is available in [Annex 2](#).
8. All the documentation of the meeting is provided in [Annex 3](#) and references to specific documents are embedded in each section of the Report.

### **Session 1: Follow up/implementation of the recommendations of the SC3 (Rome, April 08)**

9. Dr Bouna Niang presented the implementation status of SC3 recommendations (see [Doc 2](#) in Annex 3 and [Doc 8](#) in Annex 3). He pointed out that out of the 25 recommendations adopted during the SC3:
  - Eleven recommendations have been fully addressed: Rec 3 on the finalization and implementation of the first program of activities (2008-2009); Rec 5 on the consolidation of GF-TADs for Africa governance and ToRS of the Regional Steering Committee and Secretariat endorsed; Rec 14 on the use of GF-TADs tools to support surveillance, prevention and control of TADs in Africa; Rec 17 on information of RECs in country's or regional's missions and workshops; Rec 18 on synergies between INAPS, SPINAP, OIE-PVS and FAO-NMTPF<sup>1</sup> tools; Rec 19 on compensation of HPAI outbreaks; Rec 20 on the progressive eradication of Rinderpest; Rec 21 on implementation of the global FMD strategy in Africa; Rec 22 on AU support to Tsetse and Trypanomiasis; Rec 23 on the establishment of a task force for RVF; Rec 25 on the dates of coming events for GF-TADs Africa, ALive and SPINAP;
  - Nine recommendations have been partially addressed and are currently being completed: Rec 6 on RAHCs to be completed for OIE representation in Nairobi; Rec 7 on the institutional aspects of RAHCs; Rec 9 on neglected diseases and climate change that still need funds; Rec 10 on strengthening of Veterinary Services where public private partnership aspects have not been addressed yet; Rec 11 on national sanitary legislations, that still need to go beyond HPAI issues; Rec 12 on veterinary curricula, research institutes that have been addressed only in Bamako and Tunis RAHCs; Rec 13 on Trade of animals where the importance of illegal trade has not been assessed yet; Rec 15 on networks where financial resources have not yet been secured; and Rec 24 on CBPP prioritization by countries, only fully addressed in Guinea;
  - Five recommendations have not been addressed: Rec 1, 2, and 4, respectively on TAP2 action plan, frame work and funding; Rev 8 on GF-TADs website; and Rec 16 on information and portfolio sharing in animal health. Discussions on the SC3 recommendations introduced the necessity of a new time frame for GF-TADs TAP2 from 2010 to 2012.
    - A question was asked relating to the role of vet schools in the manpower development for enhanced capacity to prevent and control TADs. The question was referred to the OIE which will organize an International Conference on Veterinary Education soon.

### **Session 2: Reporting on TADs situation in Africa** (see support documentation in [Doc 3](#) in Annex 3)

10. Dr Domenech presented the current world status of HPAI and stated that the disease has significantly decreased during the last year globally and that the virus seems contained in specific areas of East and South East Asia and most of Africa including Nigeria and Togo. Egypt still reports many outbreaks.

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<sup>1</sup> NMTPF : National Medium Term Priority Framework

Epidemiological surveillance activities have been implemented in several countries in Africa. In Nigeria, a live bird market survey detected some cases in none declared infected areas. A decrease in public awareness of the disease and donor fatigue is noticeable. The situation in Egypt, presented by Yilma Jobre, is more worrying since 53 confirmed outbreaks occurred in the country in 17 governorates out of 29 since March 2008. Nine human cases have been detected among which four casualties were recorded. However the number of outbreaks in poultry has decreased compared to last year. Nevertheless the outbreaks occurred in the same areas of the country and in both farm and household sectors. Absence of appropriate enforcement of a national control strategy remains a major problem [Rec 8].

11. Rinderpest: an overview report of the global activities of the GREP was presented. Focusing on Africa, most countries are classified free of infection, except 14 in Central, Eastern and Western Africa. FAO and IBAR are supporting countries to implement the OIE pathway through FAO TCP/RAF/3202 and IBAR/EU SERECU projects [Rec 9].
  - Discussions underlined the necessity of an international agreement for the destruction of RP biological samples. OIE and FAO will prepare such an agreement.
12. FMD is still a disease of concern for Africa, despite its relative lack of consideration by farmers and sometimes VS in many countries except SADC countries. The lack of implemented control strategies, the low level of efficacy of vaccines not well adapted to the circulating virus serotypes and wild buffaloes reservoir, are major constraints to effective control of the disease. Poor traceability in pastoral cattle is also a salient problem. During the GF-TADs for Africa FMD workshop organized in Nairobi in January 2009, a regional roadmap for sub-Saharan countries was designed. The outputs of the meeting will contribute to build the African component of the under development Global Strategy for the control of FMD, to be officially presented and discussed during the Paraguay conference (Asunción, June 24-26 2009).
  - Discussions highlighted the necessity of a regional approach that could follow the example of RP eradication programme (GREP) taking into account regional, country and farming system specificities and more awareness on the economic importance of the disease. Deployment of methods such as zoning and containment of wildlife in national parks are to be supported. For many countries, trade issues are the main drivers for control and the commodity approaches are considered to be a possible method for export (deboned and matured beef for example). All these methods could be developed but there is a need to base any new norm on scientific evidence regarding risk of spread. This approach should not in any way hide the final objective of sanitary improvement at the live animal level [Rec 10].
13. The situation of PPR continues to evolve with continuous geographical expansion. PPR is becoming a disease of major concern which spread out of Africa between 1982 and 1987 and has spread to the Middle East and Asian countries since the 90s. Its recent spread to North Africa is threatening countries of southern Europe. PPR is also becoming an increasing problem in Eastern Africa such as in Tanzania which was recently infected.
  - During the discussions, the geographic progress of the contaminated areas was highlighted as an example of the consequences of lack of preparedness and control strategy. The need for a continental strategy to combat PPR was advocated and donors could be alerted. A control strategy based on the very effective available vaccine should be promoted [Rec 11].
14. The Tsetse and Trypanosomiasis situation was presented. Trypanosomiasis prevalence has decreased in Ethiopia, Kenya, Uganda, Burkina Faso, Senegal, Ghana and Mali, where tsetse fly pressure has been mitigated through active control or development of agriculture. Projects are; *quality control of trypanocides implemented* FAO, IAEA, Strathclyde University and UNIDO; *Site Specific Animal-health Package* and *Pro-Poor Integrated Packages to Enhance Policy and Decision*-all targeted on sub-Saharan Africa, with funds from FAO/PATT partners and IFAD.
  - Discussions stressed the fact that permanent control is still needed with quality certified drugs, support to specialized institutions such as ITC in Gambia and CIRDES in Burkina Faso and capitalization of experience from relevant projects (FITCA). In this regard, the PAAT scientific and technical expertise should be better mobilized in support to the PATTEC [Rec 12].
15. The extension of Rift Valley Fever (RVF) was of specific concern. Following the 10 outbreaks in South Africa until June 2008, Madagascar has experienced 42 human cases in 2008-2009. FAO and WHO supported Madagascar through a CMC-AH emergency mission and two specific projects.

- Discussions highlighted the risk for RVF geographical range expansion due to climate change and evolution of ecosystems more favorable to vector proliferation. This was what happened with Blue Tongue which spread progressively to the Mediterranean basin and Northern countries. The importance of operational surveillance and early warning systems in East Africa, alerted by climatic records was highlighted in order to implement early targeted response strategies. Vaccination is considered to be an expensive tool. Good and effective vaccines are not always available. The use of the RVF Decision Support tool produced by FAO/ILRI was pointed out. This tool was used by Kenya in its prevention strategies against RVF in 2008. The existence of an on-going surveillance system for RVF in the Senegal River delta region was mentioned [Rec 13].
16. CBPP should still be considered as a disease of socioeconomic importance despite the drop in countries reporting the disease. Field activities have decreased, research outputs are disappointing and vaccination is still not effectively applied. Few countries such as Guinea in West Africa, DRC and other countries in Southern Africa implement control programs.
- Discussions that followed wondered why CBPP importance, perception and reporting have decreased so dramatically. Many countries ranked CBPP high, but control actions have been minimal. Public and private good considerations when it comes to the management of CBPP are still debated [Rec 14].

**Session 3: Animal health transversal issues** (see support documentation in [Doc 4](#) in Annex 3)

17. The OIE-PVS tool was again presented as a qualitative tool to assess the level of compliance of VS with OIE international standards. It is the first step in a cascade of processes leading to final reinforcement of VS, followed by (i) PVS Gap Analysis, (ii) investment programs, and (iii) PVS follow-up evaluations. PVS-Gap analysis is a quantitative tool to assess, after PVS qualitative evaluation, the needs and priorities for national VS upgrading. In Africa, several missions have already been performed and eleven requests for missions have been received by the OIE.
- Discussions underlined the fact that OIE-PVS is performed following a demand from countries to OIE and remains the mandate of OIE. Gap-analysis missions shall be performed in association with FAO and possibly with other institutions [Rec 15].
18. Trade activities have been conducted through various projects such as Standard Trade Development Facility (STDF) 13 in ECOWAS and IGAD areas which were designed to identify potential livestock markets between African producers and foreign importers, detect the sanitary constraints for international trade and propose regional strategies and tool kits that could be put in practice in one pilot country of each REC. The last activities of STDF 13 were completed by July 2008 through two regional workshops. The two pilot country projects have been designed respectively for Mali and Djibouti. Other projects are implemented such as PPLPI project (FAO) OR SOLICEPS (IBAR) both for the IGAD region.
- Discussions stressed on the necessity to publish (on ALive website) as soon as possible STDF 13 studies, regional strategies and to solicit for funds to implement the pilot projects. It was recalled that the national VS are the only structures recognized by OIE to perform veterinary certification and that the existing private certification systems have no value for official sanitary certification, if not accredited by official VS. Support to VS to better implement certification is necessary [Rec 16].
19. FAO has created networks for Veterinary Public Health that have been set up in various regions of the world including Africa, Latin America, Europe and Asia with global coordination in FAO Headquarters to exchange information, engage in thematic discussions and establish collaboration with the slogan "*Healthy people through healthy animals and safe products*" [Rec 17].
20. Communication strategy for Africa is being developed through various activities such as planning workshops for North, West and East Africa. Regional strategic communication workshops for North, West and East Africa have been organized by FAO. Specific component of the INAP missions, ALive funded initiative to develop a regional strategy for communication for Africa, have likewise been implemented. The encountered constraints are at field level, such as the lack of communication awareness and specialists, insufficient capacity building and un-coordinated efforts among many actors [Rec 18].

21. Biosecurity is defined as the implementation of measures that reduce the risk of introduction and spread of disease agents. It encompasses bio-exclusion and bio-containment and uses methods such as among others segregation, cleaning, disinfection and rest period. It should be applicable, affordable and effective. FAO is developing pilot projects focusing on small scale commercial farms, live-bird markets and village scavenging systems [Rec 19].

**Session 4: GF-TADs 'tools' and achievements in Africa** (see support documentation in [Doc 5](#) in Annex 3)

22. Up to March 2009, 22 Integrated National Action Plans (INAPs) on AHI have been performed out of the 30 expected to be finalized by June 2009. 15 INAPs have been fully cleared by technical partners, 11 endorsed by Governments and 7 donors-workshops have been held. During 5 of these workshops, funds have been pledged. It has to be noted that the delivery of the final reports have notably improved since last year. The donor round-tables need to be implemented in 16 countries, pending Government approvals.
- During the discussions, the difficulty to go beyond the usual approach by sectors (Human health vs. Animal health) has been underlined. Regional approaches could also be continued as recommended by ECOWAS. INAPs for HPAI have often been rather complex exercises but they proved to be very valuable for countries. This approach should be followed and extended beyond HPAI bearing in mind that many of the solutions proposed remain relevant to other TADs as well [Rec 20].
23. Epidemiosurveillance and Laboratory are considered to be key tools to be used for disease prevention and control. The sustainability of these networks is a major issue considering the past experience of other networks such as PACE which collapsed at the end of the donor's funded projects. Ownership by member countries, political and financial commitment of Governments, major role of regional organizations, coordination role by IBAR and technical support by FAO and OIE were considered to be indispensable as well as collaboration with research and academic institutions. Political anchorage in RECs represents major assets for their durability. Socio-economic networks are support tools for decision making. ALive has undertaken feasibility studies for epidemiology, laboratory and socio-economics (ALive SC 13) and the RAHC-Bamako has already developed an informal Network on Socioeconomics of Production and Animal Health. The OIE Twinning initiative is supporting leading regional laboratories to become reference laboratories. FAO has supported network activities during the past 4 years and it also directs bilateral supporting projects to improve laboratory and surveillance capacities at each country level [Rec 21, 22 and 23].
- The issue of cost of buildings, equipment and maintenance of BSL4 laboratories were discussed.
24. The FAO-OIE Crisis Management Centre-Animal Health (CMC-AH) based in FAO aims at providing rapid response to transboundary animal disease outbreaks. Emergency missions have been deployed in Africa in 2008 (Côte d'Ivoire, Madagascar, Morocco Togo, Benin, Tanzania and Sudan) on HPAI, RVF, PPR and ASF respectively. Two missions have also been undertaken to support cross border meetings. Government requests for CMC-AH deployment remains a difficult issue since these requests can take time [Rec 24].
25. GLEWS (Early Warning and Response System for Major Animal Diseases including Zoonoses) was officially launched in 2006. GLEWS collects sanitary information from various sources, analyses these data and issues disease alerts and warning messages. The operational outbreak response is under the responsibility CMC-AH and ARO (WHO) when it is a zoonosis. The GLEWS platform website will be launched in March 2009 [Rec 25].
26. OFFLU is the OIE/FAO Network of International Reference Laboratories and Centres for Avian Influenza created in 2005. OFFLU has several objectives among which are the monitoring and characterization of circulating HPAI virus strains and the sharing of gene sequence information between the human and veterinary sectors [Rec 26].
27. FAO, OIE and IBAR have joined their expertise in four Regional Animal Health Centres established in Bamako (April 2006), Nairobi (July 2007), Gaborone (June 2007), and Tunis (Sept 2007). The 3 organizations are now present in Bamako and Gaborone. OIE is not represented in Nairobi but will be very soon in Tunis. IBAR is not in Tunis. The objectives of the RAHCs are to create a multidisciplinary team of experts with critical mass, to augment concerted activities, promote synergies and to avoid

duplication of activities. The official bilateral FAO-OIE agreements have been signed recently and discussions with IBAR are going on in order to make them tripartite.

- Discussions underlined the necessity to strengthen the collaboration between the institutions, the hosting Governments and the respective RECs. The possibility of creating a new centre for Central Africa has been introduced several times, but it has to be evaluated with regard to the supporting financial possibilities [Rec 27].

**Session 5: New Approach for Animal Health: the One-World-One-Health strategy** (see support documentation in [Doc 6](#) in Annex 3)

28. The concept of One World, One Health (OWOH) was presented. It is a strategic framework for reducing risks of Infectious diseases at the Animal-Human-Ecosystems Interface. The evolution beyond HPAI towards a wider concept of preventing and controlling emerging and re-emerging diseases was one of the strong recommendations of the Ministerial conference on HPAI which took place in New Delhi, India in December 2007. The goal is to diminish the threat and minimize the global impact of epidemics and pandemics due to highly infectious and pathogenic diseases of humans and animals, with a broader vision on public health and food safety as well as food security and livelihoods of poor and vulnerable people. The strategy presented in Sharm El Sheikh was supported.
29. Here, appropriation by beneficiary countries and regional organizations is needed as well as more details on how to operationalize strategy. A technical meeting with a wider expert attendance was decided to be held in Winnipeg mid-March 2009.
  - Discussion: The participants supported OWOH as a basis for GF-TADs and ALive programs in the field of animal health. A suggestion was made for IBAR to bring the OWOH concept to the next Ministerial meeting of AU to prepare an African advocacy for the pledging meeting in Viet Nam [Rec 6].

**Session 6: GF-TADS for Africa functioning and Action Plan** (see support documentation in [Doc 7](#) in Annex 3)

30. The Terms of Reference of the GF-TADs for Africa Steering Committee and Secretariat discussed during the SC3 in Rome were endorsed [Rec 2].
31. The triennial action plan (TAP) prepared by the ALive Secretariat was commented with regards to animal health component. GF-TADs Africa being the animal health part of ALive, the TAP2 2008-2010 should be proposed by GF-TADs. The consolidated version presented by ALive was built on the proposals sent by FAO2 and OIE3 after being regrouped and simplified. This presentation is valid globally speaking but FAO has expressed concerns regarding the absence of some themes such as diseases of wildlife and the decision on the choice of champions. It has been agreed that FAO, OIE and IBAR will finalize the TAP 2/animal health component and will send it to the ALive Secretariat shortly. The period covered by TAP 2 will be 2010-2012. Besides the activities considered to be implemented through or with the support of ALive, core activities and specific donor funded field activities will continue under the responsibility of the implementing Organizations [Rec 3, 4 and 5].

**Recommendations and conclusions**

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<sup>2</sup> Prevention and control of animal diseases of economic and public health importance in SSA; Public- Private Partnerships in animal health ; TADs epidemiosurveillance strengthening and networking in SSA; Strengthening and networking of animal health national, regional and reference laboratories in SSA; Transboundary Animal Diseases At the Livestock-Wildlife Interface

<sup>3</sup> Gap analysis<sup>3</sup> for Veterinary Services (VS) in comparison to the quality world standards of VS (criteria and levels); Setting up of Regional Vaccines Banks; Assistance for the preparation of OIE twinning projects for laboratories; Capacity building - Rights and Obligations of OIE Member Countries

32. During Session 7, the members expressed their congratulations to the FAO and OIE team who prepared the meeting and notably for the timely delivery of quality support documents. They also confirmed the need to maintain the new format of the meeting over 1.5 day with balanced sessions on diseases, cross-cutting issues linked to animal health and GF-TADs tools [Rec 7].
33. The recommendations were drafted, discussed and adopted by the GF-TADs members (see [SC4 Recommendations](#) in [Annex 4](#)). During the ALive EC13, the GF-TADs SC4 Recommendations were officially endorsed, as stated in the ALive EC13 Resolutions (see EC13 Resolutions, decision #3).
34. Dr Domenech as retiring President received the congratulations of participants for his commitment as President of the GF-TADs Steering Committee for Africa since its establishment.
35. The next GF-TADs Steering Committee (SC5) will be held back to back with the ALive EC15. A one-hour GF-TADs session will be included to the ALive EC14 agenda to be held in October 2009 (date and location to be confirmed).

**Annex 1 - List of participants**

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GF-TADs Members



### FOURTH STEERING COMMITTEE OF THE GF-TADs FOR AFRICA (SC4)

March 9 and 10 2009 – AU-IBAR Headquarters, Nairobi, Kenya

## Agenda

General Chairman: President of the GF-TADs for Africa Steering Committee (J. Domenech)

#### → Day 1 – Monday March 9 2009 (9am – 7pm)

SCHEDULE	TOPICS	SPEAKERS
9 – 10am	<b>Welcome to the ALive – GF-TADs – SPINAP week (tbc with the ALive Secretariat)</b>	Personalities ALive President FAO OIE World Bank
10 – 10:15am	<b>Welcome - Opening remarks – presentation of the Agenda – nomination of co-chairs</b>	President (J. Domenech)
10:15 – 10:45am	<b>SESSION 1 – Follow up / implementation of the Recommendations of the SC3 (Rome, April 08)</b>	Secretariat (A. Niang)
<i>10:45 – 11:15am Coffee-break</i>		
11:15 - 12:30pm	<b>SESSION 2 (W. Amanfu) - Reporting on TADs situation in Africa</b> <i>For all listed diseases, this session will (i) present the epidemiological situation in Africa and its evolution since the SC3, (ii) present the related GF-TADs activities, events and perspectives, (iii) allow the international and regional organizations as well as the donors to share their portfolios on the TADs</i>	(FAO / OIE team + Members)
	<ul style="list-style-type: none"> <li>▪ HPAI: Report on global, Egypt and Nigeria situations</li> <li>▪ Report on Sharm El Sheikh conference</li> <li>▪ FMD; Report on the FMD Nairobi workshop;</li> </ul>	J. Domenech; Y. Jobre / OIE J. Domenech W. Amanfu; / OIE

	<ul style="list-style-type: none"> <li>▪ Report on FMD Global Initiative</li> <li>▪ Rinderpest / PPR</li> <li>▪ T&amp;T / RVF</li> <li>▪ CBPP</li> </ul>	<p>J. Domenech F. Njeumi / OIE W. Amanfu / OIE W. Amanfu / OIE</p>
<i>12:30 – 2pm Lunch</i>		
2 – 2:45 pm	<p><b>SESSION 2 (con't)</b></p> <ul style="list-style-type: none"> <li>▪ Discussion (45mn)</li> </ul>	All
2:45 – 4:30pm	<p><b>SESSION 3 (A. Niang) – Reporting on animal health transversal topics</b></p> <p><i>For all listed topics, this session will (i) present the collaborative activities implemented within the GF-TADs framework (FAO, OIE and IBAR), and (ii) allow the international and regional organizations as well as the donors to share their portfolio and experiences</i></p> <ul style="list-style-type: none"> <li>▪ ALive INAPs</li> <li>▪ Veterinary Services strengthening (PVS / Gap Analysis)</li> <li>▪ Trade: STDF 13 final outcomes</li> <li>▪ Trade (con't): Report on 1<sup>st</sup> Technical Topic of the 18<sup>th</sup> OIE Regional Commission Conference for Africa (access to trade)</li> <li>▪ Veterinary Public Health: VPH networks in Africa;</li> <li>▪ Veterinary Public Health (con't): Report on 2<sup>nd</sup> Technical Topic of the 18<sup>th</sup> OIE Regional Commission Conference for Africa (brucellosis)</li> <li>▪ Biosecurity</li> <li>▪ Discussion (45mn)</li> </ul>	<p>(OIE / FAO team + Members)</p> <p>B. Diop / ALive secretariat OIE Y. Lebrun OIE J. Domenech OIE J. Domenech All</p>
<i>4:30 - 5pm Coffee-break</i>		
5 – 7pm	<p><b>SESSION 4 (A. El Sawalhy) – Reporting on GF-TADs 'tools' achievements in Africa</b></p> <p><i>For all listed 'tools', this session will (i) present the collaborative activities implemented within the GF-TADs framework (FAO, OIE and IBAR), and (ii) allow the international and regional organizations as well as the donors to share their experiences</i></p> <ul style="list-style-type: none"> <li>▪ Epidemiosurveillance networks / ALive ES networks feasibility study</li> <li>▪ Laboratories networks / ALive labs networks feasibility study</li> <li>▪ OIE laboratory Twinning Program</li> <li>▪ Socio-economic networks / ALive socio-eco networks feasibility study</li> <li>▪ CMC-AH / GLEWS / OFFLU</li> <li>▪ RAHCs</li> <li>▪ Discussion (30mn)</li> </ul>	<p>(FAO / OIE team + Members)</p> <p>Y. Lebrun J. Domenech OIE J. Conforti J. Domenech / OIE J. Domenech (Overall; Tunis) ; W. Amanfu (Nbo; Gab); J. Conforti (Bko)</p>

All

→ Day 2 – Tuesday March 10 2009 (9am – 12:30pm)

9 – 9:15am	<b>Opening – presentation of the Agenda Day 2</b>	President (J. Domenech)
9:15 – 10:15am	<b>SESSION 5 (F. Le Gall): New Approach for Animal Health : the One-World-One-Health Strategy</b> <ul style="list-style-type: none"><li>▪ Presentation of the Strategy</li><li>▪ Winnipeg meeting (march 09)</li><li>▪ Next AHl international Conference (Viet-Nam, 2010)</li><li>▪ Discussion</li></ul>	J. Domenech OIE OIE All
<i>10:15 – 10:45am Coffee-break</i>		
10:45 – 11:15am	<b>SESSION 6 (D. Bangoura): GF-TADs for Africa functioning and Action Plan</b> <ul style="list-style-type: none"><li>▪ Presentation of the GF-TADs for Africa Terms of Reference</li><li>▪ Presentation of the consolidated GF-TADs for Africa Action Plan for 2008-2010 / presentation of the GF-TADs for Africa Program of Activity (2009)</li><li>▪ Discussion</li></ul>	J. Domenech J. Domenech Members
11:15 – 11:30am	<b>SESSION 7 (V. Iwar): Round Table of the SC3, general synthesis</b> <i>What works, what to improve.</i>	Members
11:30 – 12:15pm	<b>SESSION 8: SC4 Recommendations</b>	Members
12:15 – 12:30pm	<b>Closing remarks</b>	President (J. Domenech)

→ Day 3 (ALive EC13) – Wednesday March 11 2009

5:30 – 6pm	<b>Endorsement of SC4 Recommendations</b>	President (J. Domenech)
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### Annex 3 - Documents of the Meeting

- List of GF-TADs members
  
- **Doc 1 - Introduction**
  - A note from the President
  
  - GF-TADs for Africa - General Recall
  
- **Doc 2 - Implementation status of SC3 recommendations**
  
- **Doc 3 - Disease Report**
  
- **Doc 4 - Cross-cutting issue Report**
  
- **Doc 5 - Tool Report**
  
- **Doc 6 - OWOH**
  
- **Doc 7 - GF-TADs for Africa functioning and Action Plan**
  
- **Doc 8 -Annexes**

**All the above mentioned documents are available on the FTP site:**  
<ftp://ext-ftp.fao.org/AG/Data/agah/GF-TADs for Africa/>

Please note that on the same FTP site, you will also find all the documentation related to the GF-TADs for Africa FMD workshop.



#### FOURTH STEERING COMMITTEE OF THE GF-TADs FOR AFRICA (SC4)

March 9 and 10 2009 - AU-IBAR Headquarters, Nairobi, Kenya

#### Support to Animal Health Activities in Africa under the GF-TADs Mechanism

Draft Recommendations to the Executive Committee of ALive (African Livestock)

#### CONSIDERING

The impact of transboundary animal disease crises on public health, the agricultural sector, trade and livelihoods of small and poor livestock and poultry producers in Africa;

The importance of animal health on food safety and food security;

- - -

The setting up of the GF-TADs for Africa in March 2006 in Bamako;

The outcomes of the third GF-TADs for Africa Steering Committee which took place on April 7 2008 (Rome), the subsequent recommendations and the encouraging progress made in their implementation over the past year;

The excellent organization of the fourth steering committee of the GF-TADs for Africa by AU-IBAR and GF-TADs SC teams;

- - -

The last International Conference on Avian and Human Influenza (Sharm-El-Sheikh, October 2008), and its statement is on the needs to go beyond the current epizootic of HPAI and extend the international community endeavors and collaboration towards the prevention and control of emerging and re-emerging animal diseases within the 'One World - One Health' concept;

The next International Ministerial Conference on avian and human influenza, to be held in Vietnam in 2010;

- - -

The necessity for animal disease control, including zoonoses control to be supported by Veterinary Services that comply with OIE international standards and in a broader sense by effective systems of animal health;

The necessity to develop public-private partnerships in the prevention and control of animal diseases;

The importance of climate change and globalization on the emergence, re-emergence and spread of diseases;

The role of livestock trade notably which is uncontrolled and the importance of small village farms in the epidemiology of important transboundary animal diseases;

The increased importance of biosecurity measures in the prevention and control of animal diseases;

- - -

The now well established global tools such as the FAO-OIE-WHO GLEWS, FAO-OIE CMC-AH and OIE-FAO OFFLU to tackle animal diseases worldwide and on the long term;

The Regional Animal Health Centres in Bamako, Gaborone, Tunis and Nairobi, and the recently signed agreement between FAO and OIE for their official establishment (for the first 3 listed above);

The Regional Networks of laboratories, epidemiosurveillance and socio-economics in Africa to improve surveillance, diagnosis, reporting of animal disease events, rapid response as well as the potential use of this network approach in studies related to socio-economic surveys and applicable to livestock systems; the ALive feasibility studies on laboratory, epidemiosurveillance and socio-economic networks carried out in 2008 and 2009, and their results;

The existence of several initiatives on the prevention and control of animal diseases in Africa, for which coordination remains a key factor for success;

The need for long term institutional and financial support to provide sustainability to such initiatives;

The existence of the Programme Against African Trypanosomosis (PAAT) and of the Pan African Programme PATTEC (Pan African Tsetse and Trypanosomiasis Eradication Campaign), and the need for them to collaborate;

- - -

The evolution of the avian influenza crisis in the world, particularly in Africa;

The necessity to complete the global eradication of Rinderpest (GREP), which will be a success story for the Veterinary Profession;

FMD causes direct and indirect losses to livestock keepers across most of sub-Saharan Africa, and that control is constrained by lack of technical guidance on vaccine suitability and cost-effective use, and because of limited access to vaccine and other services for FMD prevention; The FMD FAO-OIE-IBAR workshop held in Nairobi, January 2009 to develop a long term action plan/road map for improved surveillance of FMD in Africa stressed again the relevance of applying some essential principles as key pillars when implementing FMD control such as vaccination, segregation between domestic animal population and wildlife reservoirs, movement control between zones, regions and countries. This can be monitored with appropriate animal identification and traceability system (AITS), epidemiosurveillance and risk analysis, managed by efficient veterinary services and strategic research;

The permanent existence of other major transboundary animal diseases such as Contagious Bovine Pleuropneumonia (CBPP) or PPR and other indicator diseases of the list established in the regional GF-TADs for Africa;

The re-emergence of Rift Valley Fever (RVF) in certain African regions and the negative impact of this disease on human and animal health as well as on regional trade of livestock and livestock products;

The impact of the Tsetse fly (Glossina) and Trypanosomosis (T&T) on poverty and food security in Africa, as well as their medical, veterinary, agricultural and socio-economic implications and the need to ensure support from donors so as to benefit from a strong scientific and technical support from PAAT to PATTEC;

The impact of neglected zoonoses and animal diseases such as tuberculosis, brucellosis, rabies and ticks, tick-borne diseases, arthropod-borne diseases, macro-parasitic diseases in Africa;

#### **THE GF-TADS FOR AFRICA STEERING COMMITTEE EXPRESSES:**

- Its sincere thanks to Dr. Ahmed. El Sawalhy for providing the necessary facilities which allowed very smooth and effective work throughout all the SC4 sessions;
- Its warm and profound gratitude to Dr Jemi Domenech, GF-TADs Africa President, for his commitment to his responsibilities as President of GF-TADs and the results achieved throughout his Presidency of GF-TADs for the benefit of livestock development in Africa.

#### **THE GF-TADS FOR AFRICA STEERING COMMITTEE RECOMMENDS THAT:**

##### **A. General**

1. The next President of the GF-TADs could be the next FAO CVO after retirement of the current one;
2. The Terms of Reference for the GF-TADs for Africa Steering Committee and Secretariat be officially endorsed;
3. The 5 activities initially proposed during the GF-TADs SC3 (Rome, April 2008) be finalized at GF-TADs level and integrated into the ALive Second Three-Year Action Plan (TAP2) under the scope of intervention: Prevention and Control of Sanitary Hazards in SSA. These 5 activities complement and support the GF-TADs 'regular program of activity' implemented through the Global (GLEWS, OFFLU, CMC-AH) and Regional (Networks, Regional Animal Health Centres) GF-TADs Tools;
4. Urges the finalization of the ALive TAP2 - including the GF-TADs activities - and advocate for its full funding through the organization of a strategic fund-raising before 2010;
5. The GF-TADs for Africa logical framework and chronogram be developed in the context of the ALive TAP2 finalization and funding;
6. Regarding the One World One Health Strategy (OWOH),
  - the OWOH strategy be supported and advocacy for more appropriation at the country and regional levels be done through the organization of a specific session during the next Inter-ministerial conference of the AU Ministers in charge of livestock and through all possible tribunes and meetings organized by IBAR, RECs and International Organizations;
  - The OWOH strategy includes emerging and re-emerging zoonotic disease and also animal health diseases which have severe impact on livestock productions and trade, livelihoods of small farmers, food security and development;
7. The format of the Steering Committee meetings (1,5 day, balanced session on major diseases, cross-cutting issues, tools and strategies) be used when organizing the next GF-TADs SC-5.

##### **B. Vertical approaches to diseases prevention and control**

###### **8. HPAI Africa**

- The efforts for the prevention and control be pursued and strong awareness be maintained; for this purposed, ALive will prepare a complete update of the Needs and Gaps for Africa Paper in the perspective of the next International Conference on AHI scheduled in Vietnam in 2010;
- In Nigeria, surveillance programs in live bird markets and in the wild life areas - as implemented in 2007 and 2008 - be pursued; that areas of intervention during Cross Border meetings with the support from the

Bamako RAHC be expanded and ECOWAS' involvement in taking leadership of the Cross Border meetings be secured;

- The control programs in Egypt, implemented during the past 3 years, be continued and policy enforcement and coordination be strengthened;

#### **9. Rinderpest**

- FAO and OIE should be accelerating the declarations of freedom at all country levels and organizing themselves to proceed towards a global declaration in 2010 and the role of AU-IBAR and major donors in Africa be acknowledged;

- All pending non-free countries (being OIE members or not) in Africa be assisted in order to apply for the official recognition by the OIE through the updated OIE pathway;

#### **10. Foot and Mouth disease**

- The 2020 Africa Roadmap developed during the Nairobi FMD Workshop (January 2009) and the SADC roadmap by endorsed by ALIVE and be presented at the OIE-FAO Global Conference on FMD in Paraguay, with the support of the EC, in June 2009;

- The role of wildlife reservoirs and the choice of vaccination protocols adapted to various farming systems as well as the economical cost and benefits of FMD and control programs continue to be investigated;

- Donors support the minimum actions required;

- Within the ALive / GF-TADs for Africa framework, an annual follow-up workshop be organized to measure the progress made by the countries towards the progressive control of the disease, as stated in the Recommendation # 7 of the Nairobi FMD Workshop;

#### **11. Peste des Petits Ruminants**

- The governments and stakeholders be sensitized to the importance of PPR and the risks of spread to new countries and region and the model of Rinderpest eradication programme be taken into account;

- Global and regional strategies and road maps be developed and monitored (notably regional approaches for epidemiosurveillance and vaccination), following a similar approach currently being developed for FMD;

- Understanding of disease epidemiology/ecology in the context of the socio-economic and farming systems dimensions (holistic approach and optimized intervention) be improved;

- Preventive measures such as vaccination be supported;

#### **12. Tsetse and Trypanomosis**

- Increased support and attention to the T&T problem and related Sustainable Agriculture and Rural Development (SARD) be sought from Governments and be supported by donors;

- Trypanocide drug quality used in Africa be better controlled;

- Full scientific and technical support of PAAT to PATTEC be ensured;

- The ITC (Banjul) and CIRDES (Bobo-Dioulasso) programs be supported and their synergies strengthened;

#### **13. Rift Valley Fever**

- Specific surveillance systems be implemented and regional control prevention and strategies be developed;

- Prediction and awareness work be continued and be conducted with the technical support of the GLEWS (already connected with the data providers);

- Specific funds be made available to support these sets of activities for RVF;

#### **14. Contagious Bovine Pleuro-pneumonia**

- Affected countries be encouraged to report the incidence of CBPP with relevant data;
- Information and prevention and control activities currently implemented in Africa be collected and analyzed;
- The conclusions and recommendations of the Fifth Consultative group meeting on CBPP (to be held in October 2009, FAO, Rome - Italy) be made available to the GF-TADs members.

### **C. Transversal topics**

#### **15. Evaluation of Veterinary Services**

- The OIE PVS evaluations continue being implemented in Africa, and that the following stage - the PVS Gap Analysis - be implemented by OIE with FAO and other Partners;

#### **16. Trade / STDF follow up**

- The regional strategy developed under the STDF 13 project be finalized by FAO (under delegation from the OIE) and circulated;
- Funds be raised to implement the regional strategy and the pilot country projects;

#### **17. Veterinary Public Health**

- The VPH networks be more known across Africa and discussion among the members be encouraged;

#### **18. Communication on animal health**

- The on-going FAO and OIE initiatives for the establishment of an international program for competency and leadership-building in animal health communication for Ministries of Agriculture/Livestock (especially among the national Veterinary Services) be developed in partnership with IBAR and RECs and be supported;
- The on-going initiative for creation of a critical mass of networked animal health communication specialists focused on Strategic Communication and Advocacy for Risk Reduction (SCARR) be supported;

#### **19. Biosecurity**

- More work be made to assess the perception of the efficacy and feasibility of biosecurity measures by the farmers, traders;
- The type of biosecurity measures be tailored for the stakeholders involved in each production and marketing chains;
- The ongoing biosecurity programme of FAO should be continued.

### **D. Support to the GF-TADs tools**

#### **20. INAPs**

- The World Bank as champion continue to coordinate the implementation of the INAPs until 30 June 2009, at the time of the closing of the ALive Multi-Donor Trust Fund and provide a regular update to the partners via the ALive web site;
- Integrated Regional Actions Programs (within the RECs) be considered;
- On this basis, Rapid Assessment guidelines, experience and lessons learnt be adapted and developed for other TADs and zoonotic diseases and be considered for possible implementation;

#### **21. Epidemiosurveillance networks**

- The financial sustainability of the regional networking initiative be set as a priority;

- International Organizations and IBAR continue to fully support the networks, until they can be fully anchored and supported by the RECs;
- Inter-linkages between regional epidemiosurveillance networks be ensured;
- The Recommendations provided in the ALive feasibility study for regional epidemiosurveillance networks be supported and be presented and discussed during the RECs forthcoming meetings;

## **22. Laboratory networks**

- Under the overall supervision of OFFLU, the selection of regional laboratories for HPAI in all regions be pursued;
- The International Organizations and IBAR continue to fully support the laboratory networks;
- Inter-linkages between regional lab networks be ensured;
- The RECs commit to support the laboratory networks;
- The Recommendations provided in the ALive feasibility study for regional laboratory networks be supported and be presented and discussed during the RECs forthcoming meetings;
- The direct support to national laboratories be strengthened through the FAO and OIE initiatives (bilateral project implementation, OIE twinning programme for candidate laboratories to become reference laboratories);

## **23. Socioeconomic networks**

- Subjects of interest for several categories of actors with achievable objectives within on year time be identified;
- The Recommendations provided in the ALive feasibility study for regional socio-economic networks be supported and be presented and discussed during the forthcoming meetings of the RECs;
- A working group representing leading institutions (RECs, AU-IBAR, FAO, OIE and others) be established to develop an operational plan (including fund raising) to bring forward the recommendation of the ALive study, while taking into account outcomes of existing networking activities;
- Encourages the information and involvement of NGOs and other groups active in the livestock sector for the purpose of advocacy at the national level with the support of the RECs;

## **24. CMC-AH**

- Efforts be increased to mobilize accessible emergency funding and to prioritize/mainstream transition-supporting initiatives;
- RAHCs should prioritize their activities and solicit for funds to have the capacity to take on animal health initiatives as a follow-up to CMC-AH missions;

## **25. GLEWS**

- A Regional GLEWS platform be established to facilitate communication and verification of disease events between countries, regional and global level;
- Disease reporting be stimulated from field projects, officers, regional organizations and those that have benefits from training activities;

## **26. OFFLU**

- More African experts be involved in OFFLU;

## **27. RAHCs**

- The RAHCs be assessed during the 2<sup>nd</sup> evaluation of the GF-TADs initiative, scheduled first semester of 2009; that the recommendations provided be rapidly made available to the GF-TADs for Africa;

- The RAHCs political and financial sustainability be ensured on the long term; that IBAR progressively officially join FAO and OIE in the RAHCs (tripartite agreements); that strategic anchorage within the RECs be planned for each RECs;
- A detailed roadmap be determined for each RAHC, based on the new agreement;
- Coordination among the 4 African RAHCs be pursued and reinforced;
- Field information be collected by the RAHCs and serve as technical sound basis to build bottom-up approaches and animal health strategies, so as to interact with donors with legitimacy;
- An Agreement for RAHC-Nairobi be prepared;
- The Euro-Maghreb network based in Tunis RAHC receive the support from all concerned countries and all necessary steps be followed for its institutionalization;
- The establishment of a RAHC for Central Africa be considered and discussions between actors involved be started shortly;
- ALIVE continue to play its role as a continental platform to provide guidance for the coordination of the activities of all RAHCs.

Nairobi, March 10 2009