Project title: Australia-OIE One Health Partnership
February 2019

1. Introduction

1.1 Background

South East Asia is widely recognised as a hotspot of emerging infectious diseases, particularly zoonoses and those with pandemic potential; both SARS and H5N1 highly pathogenic avian influenza emerged from East Asia, and research predicts that the next global pandemic is likely to arise in South East Asia. Drivers include economic growth resulting in rapid rates of urbanisation, increasing demand for animal products, and cultural norms resulting in close proximity of humans and animals. Given that more than 75% of emerging diseases originate in animals, a One Health approach to disease control is the only means for achieving global health security objectives. National Veterinary Services provide the front-line services in the control of animal diseases and thus have a critical role in addressing health risks at the source; they must also collaborate and coordinate within and across the agriculture, environment and health sectors, to effectively detect, respond and prevent the spread of zoonotic diseases and antimicrobial resistance (AMR).

The Tripartite - FAO, WHO and OIE - have been longstanding advocates of a One Health approach and have put into place the necessary frameworks for a multi-sectoral approach to managing and responding to complex health risks. In 2010, the three organizations formally outlined their strategic alignment through ‘The FAO-OIE-WHO Collaboration: Tripartite Concept Note: Sharing responsibilities and coordinating global activities to address health risks at the animal-human-ecosystems interfaces’. Further to the WHO/FAO/OIE High Level Technical Meeting to Address Health Risks at the Human-Animal-Ecosystems Interfaces, held in Mexico in 2011, three priority areas were identified (AMR, zoonotic influenza and rabies) as priorities for future collaborative action through a One Health approach. In October 2017, ‘The Tripartite’s Commitment: Providing multi-sectoral, collaborative leadership in addressing health challenges’ reaffirmed the Tripartite commitment to the three previously defined priority areas of work and expanded its One Health collaboration to also include broader health systems strengthening, among others. In May 2018, the Tripartite signed a Memorandum of Understanding (MoU) to further formalize and strengthen their cooperation to reinforce national and regional services in human health and animal health through a One Health approach.

The importance of assisting Member Countries improve their national legislation by enabling veterinary and public health authorities to carry out key functions and compliance with international obligations and standards is at the core of the Tripartite’s approach to animal and human health systems strengthening (OIE PVS Pathway, WHO International Regulations Monitoring & Evaluation Framework). This is particularly relevant and necessary considering that the animal health services in South East Asia are weak and constrained by insufficient physical, human, and financial resources.

In the framework of the Australian Government Department of Foreign Affairs and Trade’s Indo-Pacific Centre for Health Security (IPCHS) there is an opportunity to strengthen the capacity of national Veterinary Services in the region to minimize health security risks, including through improved collaboration and coordination among sectors. This concept note describes the scope, approach and preliminary activities of the Australia-OIE One Health Partnership.

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1 Emerging infectious diseases in southeast Asia: regional challenges to control, RJ Coker, BM Hunter, JW Rudge, M Liverani, P Harvoravongchay, Lancet January 25, 2011 DOI:10.1016/S0140-6736(10)62004-1
2 https://www.cdc.gov/ncidod/dvbid/zoonoses/2018
3 http://www.who.int/influenza/resources/documents/tripartite_concept_note_hanoi_042011_en.pdf?ua=1
4 http://www.fao.org/3/i3119e/i3119e.pdf
5 https://www.who.int/zoonoses/MoU-Tripartite-May-2018.pdf?ua=1
1.1.1. OIE, robust national Veterinary Services and their contribution to Health Security

Under the World Trade Organization (WTO) Agreement on the Application of Sanitary and Phytosanitary Measures (the SPS Agreement), the OIE is the international reference organisation for the development, elaboration and promotion of international standards for animal health and zoonoses. OIE standards should be used to evaluate and determine measures to protect animal and public health and as a basis to improve the quality of national Animal Health Services (includes Veterinary Services or Aquatic Animal Health Services) and national legislation. When implemented, OIE standards bring considerable economic and societal benefits; serving to harmonise sanitary measures and make national animal health services more efficient and effective in ensuring global animal health, animal production, food safety and food security; and, also concurrently facilitating safe international trade while avoiding unjustified trade barriers.

Consistent with the One Health agenda, infectious animal diseases are at the core of the OIE’s mandate and, in its Terrestrial and Aquatic Animal Health Codes (OIE Codes), the OIE sets international standards and guidelines for reporting, and ensures that Animal Health Services in 182 Member Countries are professionally prepared to prevent and control the spread of these diseases. In support of this, the OIE has long-standing international standards on the quality of national Veterinary Services. To comply with these standards, particularly Section 3 of the OIE Terrestrial Animal Health Code, national Animal Health Services must be sustainably financed, universally available, and efficiently provided without waste or duplication and in a manner that is science-based, transparent, consultative, and free of corruption. Furthermore, they must be supported by a comprehensive, clear and properly implemented regulatory and policy framework. Based on these principles and standards, the OIE has developed the Performance of Veterinary Services (PVS) Pathway, a series of proven tools and methods to evaluate and plan for improving national Animal Health Services. Additional information on the OIE PVS Pathway are provided in the OIE PVS Pathway Business Case.

By acceding to the OIE, Member Countries are legally obliged under treaty to notify to the OIE of all relevant information about animal diseases, as provided under Articles 5, 9 and 10 of the Organic Statutes. Such notifications must be performed in accordance with the international standards contained in the OIE Codes. All OIE Member Countries must report the occurrence of OIE listed animal diseases within 24 hours of their confirmation, as well as any significant epidemiological events and the emergence of new diseases. This also includes diseases transmissible to humans and the intentional introduction of pathogens. The general principles on epidemiological animal disease surveillance are described in the OIE Codes and include an official list of notifiable diseases (in 2018, 116 diseases). This list is reviewed on a regular basis and modifications must be adopted by the annual General Session of the World Assembly of National Delegates to the OIE. Since 2005, the OIE’s web-based platform, the World Animal Health Information Systems (WAHIS) – which is available worldwide and free of charge - provides a window into the state of animal health across the globe. The OIE is currently redeveloping this system, OIE-WAHIS, which will be cascaded to capture and show data at local level, enabling national animal health services to develop, manage, and measure the impact of localised animal health programmes, improve surveillance and reporting, among others. Enhanced transparency from national, regional to international level will improve the monitoring of the animal disease situation and minimise trade restrictions.

Animal Health Services are a global public good. Improving the capacity of animal health Services in South East Asia and the Pacific, where zoonoses and AMR are likely to rise, is a national, regional and global responsibility. It requires a mix of approaches effectively address these threats by increasing the capacity of the national Animal Health Services to prevent and/or rapidly detect their emergence. This not only protects the concerned country, but also neighbouring countries and the broader region from the severe socio-

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6 The OIE publishes four international standards: the Terrestrial Animal Health Code (Terrestrial Code) and the Aquatic Animal Health Code (Aquatic Code) and the Manual of Diagnostic Tests and Vaccines for Terrestrial Animals and Manual of Diagnostic Tests for Aquatic Animals. These OIE Codes and Manuals can be accessed online at: http://www.oie.int/standard-setting/overview/

7 The OIE publishes four international standards: the Terrestrial Animal Health Code (Terrestrial Code) and the Aquatic Animal Health Code (Aquatic Code) and the Manual of Diagnostic Tests and Vaccines for Terrestrial Animals and Manual of Diagnostic Tests for Aquatic Animals. These OIE Codes and Manuals can be accessed online at: http://www.oie.int/standard-setting/overview/


9 http://www.oie.int/about-us/key-texts/basic-texts/organic-statutes/
economic and public health impacts from incursions of transboundary emerging infectious diseases (EIDs) and AMR in animals.

A key problem among the least developed countries in South-East Asia and the Pacific is the lack of national commitment to support and fund Animal Health Services. This results in inadequate multi-year fiscal budget allocations and limited human resource capacity (both in number and in skills) to develop, fully implement, and sustain a robust animal health system in line with international standards and capable of effectively preventing, detecting and responding to animal diseases, including zoonoses, that threaten human health, national livelihoods as well as national resilience. Investments in animal health services that build capacity for early detection and responses to emerging zoonotic diseases at their animal source, are cost effective because once EIDs and zoonotic diseases have spread to the human population, they are more costly to control and eliminate.

Animal Health Services strengthening requires long-term investments in institutional reform, policy development, governance, sustainable systems and laboratories, workforce development, and partnerships with key stakeholders, such as professional organisations, academia, international organisations, non-governmental organisations and farmers, among others. Given the relative weakness of the animal health sector compared to its public health counterpart, strengthening Animal Health Services should be a key priority of governments and development partners aiming to achieve stronger health systems through an operational One Health approach. Engagement with human health, agriculture and environment counterparts is essential to collectively and collaboratively strengthen health systems. The OIE will work in close collaboration with FAO and WHO and other relevant partners (eg. UN Environment) at national and regional levels to enable a One Health approach.

The OIE Sixth Strategic Plan 2016-2020, adopted by the OIE’s membership in May 2015, also supports this approach. The foundations for this five-year work programme are based around the following three strategic objectives: (i) improving animal health and welfare by appropriate risk management; (ii) establishing trust and transparency between national stakeholders and trading partners; and, (iii) enhancing the capacity and sustainability of national Veterinary Services. The forthcoming OIE Seventh Strategic Plan 2021-2025 currently under development is likely to prioritise the good governance of Animal Health Services and their relationship with other national, regional and global counterparts to contribute towards global health security.

1.1.2. The OIE’s Comparative Advantage on Animal Health Services Strengthening

The OIE is a long and trusted partner of both DFAT (then AusAID) and the Australian Department of Agriculture and Water Resources (DAWR). Independent reviews of OIE’s programme implementation, most recently in 2014 for the Stop Transboundary Animal Diseases and Zoonoses STANDZ Initiative, underscored the following OIE Sub Regional Representation for South-East Asia’s (SRR-SEA) comparative advantage as a project implementer:
- direct access to countries’ Chief Veterinary Officers (CVOs); technical objectivity and expertise closely linked to its role in setting global animal health standards;
- strong relationships with regional institutions such as the Association of South East Asian Nations (ASEAN) and other international technical agencies such as the World Health Organisation (WHO) and FAO;
- cost efficient (including ability to leverage multi-donor contributions) and highly responsive technical assistance to countries; and
- capacity development approach of working with partner government systems in recognition of governments’ primary responsibility in managing their respective national Veterinary Services.

1.1.3. The Australian Government’s Indo-Pacific Centre for Health Security

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10 Available at: [http://www.oie.int/fileadmin/Home/eng/About_us/docs/pdf/6thSP_ANG.pdf](http://www.oie.int/fileadmin/Home/eng/About_us/docs/pdf/6thSP_ANG.pdf)
11 This was confirmed by countries’ views gathered in 2014 by an Australian Government-commissioned independent mid-term review of the OIE-implemented Stop Transboundary Animal Diseases and Zoonoses (STANDZ) Initiative.
The Indo-Pacific Centre for Health Security (IPCHS) is an initiative launched by the Australian Government in October 2017. With a five-year investment of AU$300 million, the IPCHS aims to contribute to the avoidance and containment of infectious disease threats in the Indo-Pacific with the potential to cause social and economic harms on a national, regional or global scale.\textsuperscript{12} The IPCHS has categorised its regional health security support across the following three strategic objectives:

- Anticipate: To help countries assess their infectious disease threats and capacity deficits, and equip themselves with appropriate policy and regulatory arrangements, particularly with respect to access to medicines and vector control technologies;
- Avert: To mitigate infectious disease threats through support for improved infection prevention and control; vector control; and surveillance with respect to infectious diseases, immunisation coverage and treatment-resistance in pathogens
- Arrest: To build capacity to detect and respond to infectious disease outbreaks through laboratory strengthening; targeted public health workforce development; and support for improved outbreak detection and management.

Through the ‘Australia-OIE One Health Partnership’, the OIE will be enabled by IPCHS to provide expertise, financing and support to the above objectives in IPCHS’s target region.

In alignment with the One Health approach, animal health will constitute a significant component of the IPCHS work programme. Staff with veterinary or other relevant qualifications and seconded from partner Australian government agencies (DAWR and the CSIRO Australian Animal Health Laboratory) have been recruited to manage this aspect of the work programme.

1.1.4. Lessons Learnt from Australian Supported OIE Programmes in the Region

The OIE and Australia have a long history of successfully working together on animal and veterinary public health issues in the region. The South East Asia and China Foot-and-Mouth Disease (SEACFMD) Campaign began as an OIE programme in 1994 and has been instrumental since then in providing a forum for regional coordination, risk based planning, and technical capacity building in South East Asia. Predominantly focused on FMD control but applicable to all other priority animal diseases, technical systems components of risk analysis, epidemiology, surveillance, vaccination strategies and laboratory capacity have been strengthened. Membership of the SEACFMD Campaign includes the following countries Cambodia, Lao PDR, Malaysia, Myanmar, the Philippines, Thailand and Vietnam (founding members) Brunei Darussalam, the People’s Republic of China, Singapore and Mongolia.

The most recent iteration supported by Australia, SEACFMD under the STANDZ Initiative, which commenced in 2011 and concluded in December 2017, saw an additional focus on field vaccination trials in Cambodia, Lao PDR and Myanmar. STANDZ also targeted rabies control and had a significant role in influencing the development of the ASEAN Rabies Elimination Strategy, initial rabies plans in Cambodia and Myanmar, and accompanying mass dog vaccination activities in Myanmar and the Philippines, using the OIE Regional Rabies Vaccine Bank; this approach and investment enabled a reduction of rabies in dogs and contributed to a 22 per cent decrease in human deaths caused by rabies in STANDZ pilot areas in the Philippines for the one-year period from 2015 to 2016. Most recently and through support from the New Zealand Ministry of Foreign Affairs and Trade, SEACFMD has targeted FMD vaccination in Myanmar and Laos, establishing a trading zone, active surveillance, understanding challenges in passive surveillance, and the formal use of the FAO-OIE FMD Progressive Control Pathway (FMD-PCP) to assess the capacities of SEACFMD Members.

Lessons learnt from SEACFMD include: the need to move sustainably from regional coordination to national implementation, particularly in Cambodia, Laos and Myanmar; the importance of ongoing high level political support; engagement with the private sector; a clearer understanding of the actual FMD field situation via integrated passive and active surveillance; and the value of adopting and using global frameworks such as the FMD-PCP to ensure progress is measured in a robust way in the global context. Given its focus on technical capacity building for (non-zoonotic) transboundary animal diseases (TADs), the new DAWR support to the OIE

will start with a focus on further eliciting and refining lessons learnt over the SEACFMD history, to optimize and adapt the valuable regional platform it provides. It will adopt a generic systems approach to control TADs and focus on their prevention and preparedness in the region, as a key way to address “risk-at-source” for TAD threats to Australia. The recent spread of devastating African swine fever into China and the current regional situation of high alert given risks of further spread into South East Asia, starkly demonstrate the urgency and need for such systems approaches and support.

A gender assessment of Veterinary Services in South East Asia undertaken as part of STANDZ, has highlighted several challenges for gender equality in the region. Lessons learned included that, although there are more female than male veterinary students in selected universities in the sub-region, women still face considerable discrimination limiting their opportunities for professional growth. Framework conditions for the workforce continue to remain unfavourable for women as a result of: security in rural areas, irregular work hours, opportunities for more financially lucrative field-based work, and professional advancement to leadership roles.

The OIE SRR-SEA has undertaken considerable efforts to assure gender mainstreaming in its work and therefore contributes to gender equality and gender mainstreaming. The corner stone of these efforts is the OIE SRR-SEA Gender Policy, which is founded on the following four underlining policy principles:

- Human Resources: OIE SRR SEA gives equal opportunities to both men and women both in terms of recruitment and ongoing work. Staff policies reflect gender sensitivity and include gender mainstreaming as a competency for all staff. The OIE SRR SEA has mechanisms to prevent and/or manage sexual harassment situations.
- Capacity development: OIE SRR SEA provides training on gender and social mainstreaming for staff and encourages inclusion of gender analysis in the design of projects and the promotion of gender equity in their implementation.
- Research: The SEA SRR seeks to include, where relevant, gender and social analysis in its scientific activities.
- Knowledge management, communication and advocacy: Socio-economic including gender-related information relevant to the management of TADs and zoonoses is collected, processed and used to inform the OIE SRR SEA communication and advocacy strategy.

The introduction of this Gender Policy at the SRR-SEA has also led to increased awareness of OIE staff of the different incentives and abilities for women and men to participate in and benefit from Veterinary Services. The OIE will continue to progressively build its internal capacity to adopt a gender-responsive approach in planning, decision making, and in interacting with key project stakeholders.

In terms of strengthening Animal Health Services and the OIE PVS Pathway, Australian support has spanned two programmes over the last decade. The Programme to Strengthen Veterinary Services in South East Asia (PSVS) ran from 2008-2011. Although this programme initially delivered regional and national capacity building workshops in isolation, a mid-term review by AusAID in 2009, recognised the effectiveness of integrating this regional programme with the OIE PVS Pathway, then in its early stages of development. In this way, regional support could be neatly aligned with a new OIE strategic priority at global level. Significantly, for OIE Members, OIE workshops were no longer provided in isolation. Regional and/or national workshops could link to the opportunity of PVS Pathway missions. Particularly powerful was follow up integrating external assessments with national planning within countries, creating a sustainable partnership with government. Consequently, PSVS directly fed into the OIE’s conception and refinement of the staged PVS Pathway mechanism at global level; with its evaluation, planning (gap analysis) and targeted support phases. Successful pilots in Vietnam and the Philippines succeeded in integrating PVS Pathway report findings into nationally owned Veterinary Services strategic plans, and national advocacy based on this robust framework resulted in increased and better-prioritised Veterinary Services resourcing. Dr Do Huu Dung, the Head of Planning Division at the Department of Animal Health in Vietnam confirmed this through a presentation given on occasion of the 3rd Coordination Conference for ZDAP held in August 2018 in Danang (Vietnam). His presentation reported on how the outcomes and recommendations of the PVS Pathway mission conducted in 2010 directly feed into the national Veterinary Services Strategic Plan 2012-2020. This process resulted in a boost in resourcing for the national Veterinary Services targeting governance and technical priorities such as: strengthening the chain of command, improving veterinary competencies, improving stakeholder consultation, improving the field animal health network and improving slaughterhouse inspection.
Following the success of PSVS, the next iteration of Veterinary Services support in 2011 was the Strengthening Initiatives for Veterinary Services (STRIVES) programme under the STANDZ Initiative. STRIVES focused on providing demand-driven targeted assistance to OIE Members. It focused on two clear and common gaps fundamental to the quality of Veterinary Services, strengthening Veterinary Education Establishments (VEEs) and Veterinary Statutory Bodies (VSBs). STRIVES supported new veterinary courses in each of Cambodia, Laos and Myanmar with curricula more consistent with OIE guidelines. STRIVES also supported Cambodia, Laos and Vietnam to develop veterinary legislation supporting the establishment of VSBs and fostered the development of a regional ASEAN VSB network.

Lessons learnt from PSVS and STRIVES include: that the PVS Pathway provided countries with the technical means to progress identified priorities and ensured that countries’ Veterinary Services’ actions were guided by OIE international standards; the PVS has had strong impacts in contributing to improved resourcing, legislation, education and other core elements of national animal health; the importance of creating linkages between assessment and planning; sustainability via national integration; use of PVS in advocacy for additional resourcing of Veterinary Systems; the identification of gaps for targeted support (such as in VEEs and VSBs to foster and encourage a professional culture that applies a One Health approach, including through the responsible and prudent use of antimicrobials, and in the exploration of new synergies and opportunities when possible); and, that animal system strengthening requires long-term investments in institutional reform, policy development, veterinary governance, human resource development, and partnerships with stakeholders. These programmes have strongly contributed to the OIE’s thinking on the PVS Pathway, including its current directions with PVS Pathway evolution. As in the past, this new Project will provide a timely opportunity for both Australia and the OIE to further partner in defining and trialling its Animal Health Services’ capacity building activity through practical application in a priority region, with a One Health focus. For the OIE, the outcomes of this Project will input to the development of the OIE 7th Strategic Plan, which will enter into force in 2021.

1.2 Problem Statement

Health security is increasingly challenged by the frequent emergence of infectious pathogens. If health systems (human and animal health) are ill equipped to prevent, detect and respond to emerging infectious pathogens, the affected populations and the entire global community can be extremely vulnerable. The recent Ebola virus outbreak in western Africa has clearly demonstrated how rapidly an epidemic can proliferate in the absence of a strong health systems.

In South East Asia and the Pacific, the persistent threat of avian influenza, other novel influenza and other novel viruses, such as the 2003 SARS coronavirus outbreak, have underscored the need for strengthening national animal health surveillance and response systems and to ensure coordination across different government sectors. This contention is reiterated in the outcomes of the recent scoping missions commissioned by the IPCHS.

Countries must have the core capacities to protect their populations’ health and develop strong disaster preparedness to better address future health emergencies. In order to do so, OIE Members must comply with the OIE international standards, including those on the Quality of Veterinary Services and the Quality of Aquatic Animal Health Services; they must also fulfil their obligations for timely reporting of official disease event information and put into place the required mechanisms and contingency plans to control animal diseases including zoonoses.

2. Target Countries, Outcome and Objectives, Scope, Approach and Activities

2.1 Target Countries

The target countries of this Project shall include Animal Health Services in ODA-eligible countries in South East Asia and the Pacific region.

2.2 Expected Outcome
The expected outcome of this Project is to contribute to improved regional health security by strengthening target countries' veterinary services capabilities using a One Health approach to anticipate, avert and arrest infectious disease threats as defined in the IPCHS provisional strategic framework.13

2.3 Objectives

The project objectives are to:

1. Assist target countries’ Veterinary Services strengthen priority critical competencies identified in PVS Pathway missions, including the establishment of appropriate national legislative, institutional and regulatory frameworks, and the improvement of inter-sectoral collaboration, consistent with OIE standards and the One Health approach.

2. Develop target countries’ veterinary and veterinary para-professionals workforce by supporting the use of international standards for their education and training, including for AMR and Rabies surveillance and control in support of a One Health approach; and

3. Improve regional animal disease (including zoonoses) outbreak reporting using OIE WAHIS to inform decision-making by national Animal and Human Health Services.

2.4 Project Scope

The scope of this Project shall cover assistance to Animal Health Services, focusing on activities related to zoonosis control and collaboration with Public Health Services. This assistance may include training, regional coordination activities, and implementation of activities identified by target countries. Assistance may also use the OIE’s PVS Pathway to identify capacity gaps in the Animal Health Services for specific capacity building interventions, using a One Health approach, including:

- Emergency preparedness
- Early detection and response for zoonoses and public health threats using rabies and AMR as examples of regional priorities
- Coordination with human health counterparts, particularly through IHR/PVS national bridging workshops and supporting implementation of relevant parts of National Action Plans for Health Security
- Governance of veterinary education and statutory boards
- Legislation
- Veterinary and Paraveterinary education and training
- OIE-listed disease reporting
- Other activities as agreed

Although disease-specific programmes (including disease control programmes) are not the intended scope of this project, activities identified may support or consider existing regional and global strategies and priorities such as:

- The IPCHS’ priority fields of action (see section 2.2).
- OIE international standards, guidelines and tools,
- Country priorities and needs as identified through PVS Pathway reports,
- WHO International Health Regulations (2005)14 and corresponding Monitoring and Evaluation Framework.15

14 Consultable at: http://www.who.int/ihr/publications/9789241580496/en/
- the WHO-OIE Operational Framework for Good Governance at the Human-Animal Interface: Bridging WHO and OIE tools for the assessment of national capacities (October 2014),
- Available target countries' National Action Plans for Health Security,
- the list of regional priority diseases identified by the Regional Steering Committee for Asia and the Pacific of the OIE/FAO Global Framework for the Progressive Control of Transboundary Animal Diseases (GF-TADs), which for Asia and Pacific include Highly Pathogenic Avian Influenza (HPAI) and Rabies;
- The Global Strategic Plan to end human deaths from dog-mediated rabies by 2030, and the ASEAN Eliminate Rabies Strategy,
- The Global Action Plan on AMR and the OIE Strategy on AMR and the Prudent and Responsible Use of Antimicrobials,
- The Tripartite Memorandum of Understanding between the OIE, FAO and WHO regarding cooperation to combat health risks at the animal-human-ecosystems interface in the context of the One Health approach and including AMR,
- The FAO-OIE-WHO Collaboration Sharing responsibilities and coordinating global activities to address health risks at the animal-human-ecosystems interfaces,
- The Tripartite's Commitment providing multi-sectoral, collaborative leadership in addressing health challenges.

The threat posed by the recent introduction into Asia of ASF and risks of a further spread in South East Asia is also an issue that was taken into consideration in the drafting of this proposal.

The Project will not directly support non Australian ODA-eligible countries.

2.5 Project Approach and focus areas

This Project recognises the intersection between IPCHS principal strategic objectives of work in ODA-eligible countries of South East Asia and the Pacific and the OIE’s mandate. The Project has three priority fields of work, which are essential for strengthening health security through capacity building in the animal health sector:

1. Good governance of animal health services and intersectoral partnerships for health security;
2. Veterinary and veterinary paraprofessional workforce development for improved capacities to prevent, detect and control zoonotic diseases and AMR in collaboration with the human health sector through a One Health approach; and
3. Reporting to modern and efficient animal health information systems for enhanced decision making.

The OIE’s work in these priority fields includes close and daily coordination of actions within the Tripartite (at regional and international level) and the ASEAN to ensure efficient use of funds and to avoid duplication of activities.

The OIE’s flagship programme to strengthen capacities of Animal Health Services - the PVS Pathway - will be applied throughout the below defined priority fields of work. The project will build on what already exists, but also provide national health services with updated information on their strengths and weaknesses, based on international standards and a globally consistent methodology.

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16 Refer to: http://www.who.int/hr/ihr/publications/WHO-OIE_Operational_Framework/en/
18 The GF-TADs list of global and regional diseases is available at: https://www.gf-tads.org/about/priority-diseases/en/
21 Available at: http://www.wpro.who.int/entity/drug_resistance/resources/global_action_plan_eng.pdf
22 Please refer to: http://www.oie.int/fileadmin/Home/eng/Media_Center/docs/pdf/Rabies_portal/Zero_by_30_Final_130618.pdf
25 Available at: http://www.oie.int/fileadmin/Home/eng/Media_Center/docs/pdf/Tripartite_2017.pdf
Using the PVS Tool, countries will receive clear guidance in which areas strategic and sustainable investments can be made to increase return on investment and move closer towards compliance with OIE standards. The Project will also support intersectoral partnerships for improved capacity at the animal-human interface, and special consideration will be given to two key One Health priorities, AMR and rabies, in multiple activities across the three fields of work. The project will integrate results from the PVS Pathway as well as the WHO Joint External Evaluations (JEE) to identify activities that will promote effective collaboration between health sectors. IHR-PVS National Bridging Workshops are a joint OIE-WHO activity and thus will be implemented in close collaboration with WHO.

Cross cutting development issues including Gender Equality, Climate Change and Disability-Inclusive Development, will be considered throughout the lifespan of the Project at focus areas level and through activity implementation. The OIE recognises the importance of gender mainstreaming in the delivery of its capacity building programmes; hence, the OIE SRR SEA will apply its Gender Policy principles in the implementation of this Project, which were developed with the support of previous Australian Government investments, and will contribute to gender equality. The Project will contribute to Veterinary Services’ capacity to adapt to adverse effects of climate change, building on the results and recommendations emerging from the 87th OIE General Session’s technical item on “How external factors (e.g. climate change) will impact Veterinary Services and the adaptations required”, to foster more resilient health systems equipped for the challenges of emerging infectious diseases. Regarding inclusive development, the OIE aims to be participatory and inclusive in its approaches and makes all efforts to be sensitive to any language, technological or infrastructural limitations that might present challenges for people with different levels of ability and will encourage equitable access for all beneficiaries of the Project’s activities.

1) **Good Governance of Animal Health Services and Intersectoral Partnerships for Health Security**

Animal Health Services, which comply with international standards and which function under good governance principles, will better contribute to national, regional and global health security.

The PVS Pathway is a comprehensive, multi-staged continuous process using a set of complementary tools designed to assist Veterinary Services to improve their governance mechanisms. The PVS Pathway missions and corresponding tools strengthen the capacities of Veterinary Services by helping them understand and better align with the OIE intergovernmental standards. This process focuses on building capacities of systems using a horizontal approach, giving national Veterinary Services tools to identify weaknesses and develop strategies to address these gaps. The PVS Pathway encourages the constructive engagement and participation of all stakeholders, including the Veterinary Authority, the private sector, consumer groups and other competent authorities with shared interest in public and animal health. Strong animal health systems play a fundamental role in limiting the spread of zoonoses and securing a healthy and productive food source, thus providing an important contribution to improving human health and livelihoods. The fundamental links between human and animal health sectors warrant a coordinated approach to efficiently tackle complex epidemics in a context where resources are often limited. Similar to the PVS Pathway, the WHO has developed the WHO International Health Regulations Monitoring and Evaluation Framework (IHR MEF) to support its Members to assess and strengthen their capacities. Well-established linkages exist between the OIE’s PVS Pathway and the WHO’s MEF to promote the integration of their respective assessment frameworks’ results. A mechanism is in place to raise awareness among OIE Delegates with respect to JEEs and promote the involvement of Veterinary Services in JEE missions conducted in their country. The OIE also supports the participation of a PVS Pathway expert in JEEs (if a PVS Evaluation has taken place in the country), enabling the integration of PVS Evaluation results into this WHO assessment.

The IHR/PVS National Bridging Workshop (IHR/PVS NBW) was jointly developed in 2014 by the OIE and WHO to increase Member Countries’ capacities to address priority diseases and build synergies among the animal and human health sectors. NBWs do not assess the capacities of either health sector, but rather focus on determining the level of intersectoral collaboration among the human and animal health sector. These workshops start with a series of case studies (usually zoonoses) to express an appreciation of the level of intersectoral collaboration for 14 technical areas; these include laboratory diagnosis, surveillance, national/local coordination, communication, risk analysis and outbreak response. This interactive and tested exercise then shifts from a disease-level assessment to pinpoint more systemic gaps in the collaboration
between the two sectors. NBW participants are then invited to identify gaps and recommendations pertaining to intersectoral collaboration as reported in the JEE and PVS Evaluation reports; this extracted data serves as a baseline to develop a joint road map for improved intersectoral collaboration.26

This project will support the implementation of PVS Pathway activities, including participation of PVS Pathway experts in JEEs and the implementation of NBWs, to foster improved good governance of Animal Health Services and intersectoral partnerships for Health Security. A review of PVS/JEE reports and NBW Roadmaps will be completed during the project to understand One Health gaps and needs in the region, and identify key areas requiring further support or targeted interventions.27

Veterinary Leadership and Management is also an area of weakness for Veterinary Services and this project will pilot methods to strengthen Animal Health Services’ capacities in these non-technical areas, which are vital to good governance. Lessons may be drawn from the Australia-Indonesia Partnership for Emerging Infectious Diseases, which implemented leadership training for eight years over two project phases.

2) **Veterinary and Veterinary Para-Professionals Workforce Development for improved capacity to prevent, detect and control zoonotic diseases and AMR**

The shortage of veterinary professionals and paraprofessionals coupled with divergences in technical capacity due to unstandardized curricula severely hampers animal disease control and perpetuates the vicious circle of disease, loss of productivity, financial loss, and poverty. Quality veterinary education is instrumental to ensure a long term and sustainable solution for a competent and effective animal health workforce, capable of fulfilling responsibilities and operating under the tenets of good governance. Complying with the latter, has wide spreading benefits including stronger interactions with public health counterparts and integrated approaches to reducing the threats emanating from zoonoses. Quality veterinary education ensures a broad understanding of public health, includes environmental health and safety, food inspection and safety, and biological waste management. It ensures that students understand and appreciate the value and importance of applying a One Health concept.

Reinforcing and expanding partnerships with national and regional stakeholders, such as Veterinary Statutory Bodies (VSBs) and Veterinary Education Establishments (including those training veterinary paraprofessionals), will ensure the development of a skilled workforce and a professional culture which applies a One Health approach, supported through an institutional framework.

3) **Reporting to Modern and Efficient Animal Health Information Systems for enhanced decision making**

An efficient, reliable, and relevant global animal health surveillance, monitoring and alert system is the linchpin of all efforts to guide and measure the prevention or management of animal diseases and protect the security and economic and social wellbeing of the millions of communities which depend on livestock for their livelihoods. To make country reporting and disease information access easier, the OIE is updating its web-based disease information system, OIE WAHIS. The updated system will facilitate the interconnectedness of national and regional information systems and ensure user friendly reporting by Veterinary Services worldwide. The system upgrade will be funded separately, but the Project will provide user training and change management activities for countries in the region.

2.6 **Activities**

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26 IHR/PVS NBWs are jointly organised by the OIE and the WHO, and involve facilitators from both organisations’ regional offices. The on-site logistics are largely handled by WHO’s country offices.

27 In 2018, WHO invited the OIE to take part in the review process of its National Actional Plan for Health Security (NAPHS) framework and costing approach. As such, the PVS Gap Analytic Tool is being incorporated in WHO guidance documents as a key reference for the prioritisation and costing of veterinary public health activities. While the new NAPHS approach promotes “Intersectorality”, its scope goes beyond One Health-relevant activities (e.g., focus on child mortality, disaster management, strictly human diseases, etc); in view of this, the remits of future joint work are being explored.
Activities are presented below for each priority field. Many of the proposed activities fall within the OIE PVS Pathway cycle, making their timing dependent on each country’s progression in the cycle.

2.6.1 Governance of Veterinary Services and Intersectoral Partnerships for Health Security

As witnessed during many public health crises following outbreaks of zoonotic diseases, poor governance and weak capacities of national Veterinary Services to comply with international animal health standards pose major threats for health security. All seven of WHO’s priority diseases in WHO’s 2018 “Blueprint” are zoonotic which stresses the importance of targeting “risk at source” and strengthening the governance of Animal Health Services to prevent zoonotic health emergencies, AMR and food safety and therefore improve health security in the region.

The PVS Pathway provides a robust and constantly evolving mechanism for the continuous improvement of national Veterinary Services and their capacity to prevent, detect and control zoonotic diseases. The PVS Pathway is based on OIE International standards and monitors Veterinary Service’s capacity to comply to such standards. Aligned with the cyclical PVS Pathway, the Project activities will include:

- **PVS Sub-Regional Orientation Training**: A PVS Pathway Orientation Training (initial step of the PVS Pathway cycle), will be used to launch the project in the region. The training dedicates a full day to One Health activities. PVS Sub-Regional Orientation Trainings have proven successful in developing a stronger re-engagement and commitment of countries to aligning their systems with international standards via the PVS Pathway. Partner countries gain enhanced understanding and ownership of the process to be undertaken. This phase will support countries in planning or requesting various PVS Pathway missions and/or PVS/IHR National Bridging Workshops (NBWs), depending on their national priorities and where they are in the PVS Pathway cycle. This training will also allow an initial consultation with the countries on the integrated project activities, including activities directly related to One Health.

- **PVS Evaluation Follow-Up and PVS Gap Analysis missions**: The implementation of PVS Evaluation Follow-Up and PVS Gap Analysis (PVS Costing Tool) missions will update Animal Health Services assessment and planning in countries across the region. The PVS Gap Analysis is used to identify priority fields for investments to improve Veterinary Services’ contribution to the control of zoonotic diseases and AMR, including through enhanced coordination with other ministries and national actors. This facilitates an efficient use of funds when targeting the improvement of health security in the region. The Seventh Edition of the OIE PVS Tool (2019) integrates additional Critical Competencies targeting AMR, veterinary clinical services, bio-threat reduction, and laboratory biosecurity and biosafety. As of September 2018, the OIE has received requests for a PVS Evaluation Follow-Up missions from Vietnam and Indonesia, as well as a request for a PVS Gap Analysis from Papua New Guinea. Other countries would be encouraged to request PVS missions according to their staging within the PVS Pathway, with targeted delivery during 2019-2020.

- **Joint External Evaluations**: JEE missions includes the evaluation of technical areas at the human-animal interface. The OIE is strongly supporting the involvement of Veterinary Services in these missions and is advocating for the results of PVS Pathway missions to be considered in JEEs. This project will support the participation of a PVS Pathway expert in the mission to ensure that an intersectoral approach is applied in the ODA-eligible countries which have yet to benefit from a JEE.

- **IHR/PVS NBWs, One Health Planning and NBWs with AMR or Rabies focus**: To increase Members’ capacity to address priority diseases and build synergies among the animal and human health sectors, the WHO and the OIE are rolling-out IHR/PVS National Bridging Workshops (NBWs). While National Action Plans for Health Security (NAPHS) are primarily Public Health plans, with some intersectoral components, NBWs are dedicated to the improvement of intersectoral planning. NBWs’ participants use disease-specific scenarios (mainly zoonoses) to identify key gaps in collaboration between the human and animal health sectors. They extract relevant recommendations from PVS Evaluations and JEEs and develop a joint road map to improve collaboration and coordination between both sectors. Countries for

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28 Please refer to the State of play in Annex 2 for more information on target countries’ progress in the PVS Pathway.
which a NAPHS has already been drafted are invited on the last day of the NBW to consider ways to integrate the plan and the NBW road map, where applicable. Where no NAPHS exists, the NBW road map will feed into the development of the NAPHS activities at the human-animal interface and facilitate the implementation of such country roadmaps. The OIE and WHO are exploring ways to support the implementation of the road maps produced during the NBWs. The option of NBWs with a focus on rabies and AMR as national priorities is also undergoing preliminary discussions, with great interest expressed by OIE and WHO rabies and AMR experts. Except for Thailand (pilot workshop in 2014) and Indonesia (2017), all other countries have yet to receive an IHR/PVS National Bridging Workshop, and thus can benefit from requesting such activity.

A detailed analysis of all PVS Pathway reports and IHR/PVS NBW roadmaps in targeted countries is planned for the second semester of 2020. Cross referencing with and consideration of information contained in JEE reports will also be incorporated into the analysis to better address Health Security needs. The outcome of this analysis will provide a comprehensive understanding of the major and common gaps and weaknesses to target countries and the OIE. The results will support countries in selecting targeted PVS Pathway support activities and enable the OIE to adjust the support provided through this Project and other OIE programmes. The analysis will specifically focus on gaps hindering the implementation of OIE standards, as well as those that could negatively affect the success or sustainability of specific activities, programmes or strategies. The outcomes of this analysis will be shared with Member Countries and key partners to ensure the collective adaptation of OIE strategies into implementable national action plans, when required. Such partners would include, among others, the WHO, the Food and Agriculture Organization of the United Nations (FAO), the Association of South East Asian Nations (ASEAN), the South Pacific Commission (SPC), and the Global Alliance for Rabies Control (GARC).

Throughout the Project’s duration and based on the outcomes of analysis, countries can select the targeted support activities most relevant to their needs. This Project will lay particular focus on targeted support measures in countries within the scope of this Project. As target countries are at different stages of the PVS Pathway (see Annex 2), some (those already with an updated PVS Evaluation or Gap Analysis) may be suitable for targeted support during the early phases of the project. Some of the following forms of targeted support are established, others are in various stages of development. Country situations will change during the life of this project as OIE veterinary and health security priorities shift with an evolving context and experience:

- **PVS Specific Content Missions**: At the moment, these missions can focus on rabies and PPR. The usual PVS Evaluation Follow-up approach is used (all Critical Competencies are evaluated), with an additional document appended to the report outlining gaps and weaknesses of the Veterinary Services with specific application to a priority issue such as rabies elimination.

- **PVS Strategic Planning Workshops**: During these workshops, the results of a recent PVS Gap Analysis are used to input into a national Animal Health Services strategic planning template developed by countries with OIE facilitation. PVS Strategic Planning support is seen as especially valuable for those countries with lesser capacity, which require assistance to maximise their use of the PVS Gap Analysis, as an input to national planning.

- **PVS Self-Evaluation**: The OIE may provide national PVS Pathway training specifically targeted to supporting countries in piloting PVS self-evaluation, of particular interest at the decentralised level in larger countries. The OIE would not be involved in conducting the mission or developing the report, but would be interested in countries sharing their experiences to inform other countries in the region as well as the OIE on how this is best progressed. Australia recently conducted a PVS self-evaluation of all its states and territories.

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29 For example: the South East Asia and China Foot and Mouth Disease Campaign, Global Strategic Plan to end human deaths from dog-mediated rabies by 2030, OIE Global Strategy on AMR and the Prudent Use of Antimicrobials, and the Australian DAWR regional programme ‘Enhanced capacity of countries in South-East Asia to detect, control and prevent the spread of priority transboundary animal diseases’.
- **Veterinary Legislation**: To effectively control transboundary zoonotic animal diseases, ensure food safety, control AMR and mitigate the risk of bioterrorism, Veterinary Services must be able to act quickly and decisively through the power of clearly written and enforceable laws. The Veterinary Legislation Support Programme provides an assessment of the status of a country’s veterinary legislation relative to Chapter 3.4 of the Terrestrial Animal Health Code. In addition, content specific veterinary legislation missions are available to assess the national legislation relative to the mitigation of biological threats and antimicrobial resistance. Additional content specific assessments could include the legal basis for effective health security using a One Health approach.

- **AMR Improved Awareness and Understanding**: Under this broad activity, the project will support developing a regional risk communication plan for human, animal, agricultural and environmental sectors. The distribution of OIE communication tools and advocacy materials on AMR and antimicrobial use in countries for outreach at multiple levels and with different stakeholders will be facilitated. This will include translating OIE communication tools and advocacy materials into local languages and organising their dissemination.

- **Veterinary Leadership and Management**: This is an identified area of weakness and the OIE is exploring how it could be involved via the PVS Pathway in strengthening Veterinary Services capacities in these non-technical areas, vital to good governance and advocacy. Lessons can be learnt from the Australia-Indonesia Partnership for Emerging Infectious Diseases which implemented leadership training for 8 years over both its project phases in Indonesia.

- **Public-Private-Partnerships**: Currently, the OIE is well advanced in the production of ‘The OIE Public-Private Partnership Handbook- Guidelines for Public-Private-Partnerships in the veterinary domain.’ This Handbook features guidelines and principles for both the public and private sectors to develop impactful and sustainable PPPs in the veterinary domain. It is illustrated with several examples showcasing diverse models for PPP from all over the world, including the different roles and inputs public and private stakeholders can provide when engaging in PPPs as well as the benefits arising from such PPPs for both spheres. The dissemination of the Guidelines will occur through a PPP e-learning course and via regional workshops scheduled to take place in 2019 and 2020. This and other mechanisms to promote and support PPPs in OIE Member Countries will be explored (including through comments received from countries during such workshops) and could be included as part of this Project.

### 2.6.2 Veterinary and Veterinary Para-professionals Workforce Development

The benefits of a highly qualified Veterinary workforce are undisputed and essential to any functioning Veterinary System. Veterinary and Veterinary Para-professionals provide the fundamental management system for animal health and veterinary public health. The development of a professional veterinary workforce is fundamental to control zoonotic diseases at the animal-human-environment interface and therefore strengthens health security in partner countries. Furthermore, a professional Veterinary Workforce contributes to health security in areas such as food security, food safety and responses to natural disasters and bioterrorism. A well-qualified Veterinary Workforce is a prerequisite to ensure the prudent use of antimicrobial agents in veterinary medicine, with the aim of ensuring health security in the future. To help developing Veterinary Services move towards the international workforce standard, the OIE implements a set of manifold activities:

- **Veterinary Education Support, including Twinning**: Since 2010 the OIE has collaborated with the South-East Asia Veterinary School Association (SEAVSA) to improve the quality of veterinary education in the region. Cooperation included reviews of existing curricula to incorporate OIE Day One Competencies of Graduating Veterinarians and OIE Guidelines on Veterinary Education Core Curricula in order to lead Veterinary Education Establishments (VEEs) in the region towards greater compliance with international recommendations. The *OIE Day One Competencies of Graduation Veterinarians* prominently feature the identification of clinical signs, clinical course, transmission potential, and pathogen associated with

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30 Please see: [http://www.oie.int/for-the-media/oie-public-private-partnerships/](http://www.oie.int/for-the-media/oie-public-private-partnerships/)
31 Available at: [http://www.oie.int/fileadmin/Home/eng/Support_to_OIE_Members/Vet_Edu_AHG/DAY_1/DAYONE_B-ang_vC.pdf](http://www.oie.int/fileadmin/Home/eng/Support_to_OIE_Members/Vet_Edu_AHG/DAY_1/DAYONE_B-ang_vC.pdf)
32 Available at: [http://www.oie.int/Veterinary_Education_Core_Curriculum.pdf](http://www.oie.int/Veterinary_Education_Core_Curriculum.pdf)
common zoonotic and food borne diseases, the explanation of current diagnostic and therapeutic tools for zoonotic diseases, the implications of common zoonotic and food borne diseases for human health and the regulatory implications of common zoonotic and food borne diseases. The project will review previous activities and thereby identify areas where additional support will lead to further qualitative improvement of the veterinary workforce. Additionally, the OIE envisages prioritising implementation of VEE Twinning Projects in countries which have one VEE within the country (for example, Lao PDR and Myanmar) to strengthen national capacities in delivering high-quality veterinary education.

Workforce development through improving Veterinary Paraprofessional Education: Using the OIE Competencies Guidelines for Veterinary Paraprofessionals and the OIE Curricula Guidelines for Veterinary Paraprofessionals, the OIE will scope the possibility of implementing a train-the-trainer model or other mechanism to cascade harmonised and improved training of veterinary paraprofessionals in collaboration with relevant stakeholders operating at national level. The OIE Competencies Guidelines for Veterinary Paraprofessionals include the capacity of veterinary paraprofessionals to identify common non-infectious and infectious diseases, including zoonoses and the competency of Veterinary Para-Professionals to observe and apply principles to minimise the risk of spread of zoonotic diseases and protecting food safety.

- Strengthening Veterinary Statutory Bodies (VSB): VSBs play a critical role to provide quality veterinary professionals working in both the public and private components of veterinary services. Proper regulation of the veterinary profession will ensure the effective performance of Veterinary Services in the control of zoonotic animal diseases through standards in qualification, training, professional conduct licensing and continued education of the veterinary workforce. Many countries in SE Asia and the Pacific such as Cambodia, Lao PDR, Papua New Guinea and Timor Leste have no formal VSB. The project will explore how to support countries establishing a sustainable VSB. In addition, the project will also support the ASEAN VSB Network to harmonise the rules and procedures in the regulation of veterinary professionals in the region. The project will support activities to ensure that the ASEAN VSB Network will apply OIE standards in the development of their regional guidelines on VSB. This activity will also complement the ongoing twinning project of Australasian Veterinary Boards Council Inc. (AVBC) and Thailand VSB, which aim to elevate the capacity of the Thailand VSB to comply with international standards. With Thailand VSB serving as the lead in the ASEAN VSB Network, such twinning will not only benefit Thailand VSB but also the VSB of the other ASEAN Members States.

- Regional Seminars for National Focal Points: These trainings target workforce development across seven key topics, of critical importance to the Veterinary Services and their efforts to control zoonotic diseases: animal disease notification, wildlife, veterinary products and AMR, animal welfare, aquatic animals, communication, and laboratories. The trainings are ongoing, but a new approach to modernise their delivery is being explored involving five OIE Collaborating Centres for the training of official veterinarians, including one present in the region in Chiang Mai, Thailand. The review of the current OIE Focal Point System might result in different topics for Focal Point seminars. This Project will support regional seminars with relevance to ‘One Health’.

The implementation of the below-activities will enable Member Countries to better implement effective AMR and disease surveillance and control as per the OIE international standards, in order to improve health security.

- Strengthening AMR knowledge through Surveillance and Research: The OIE will support ongoing activities to map the antimicrobial supply chain in animals and develop recommendations for relevant stakeholders. This will directly contribute to the collection of meaningful data at country level, for input into the OIE database on the intended use of antimicrobial agents in animals. This will contribute to an important OIE objective as well as a priority task in the Global Action Plan for AMR. Sub-activities will also target building capacities for improved AMR surveillance through participation in hands-on trainings on AMR surveillance, in collaboration with OIE Collaborating Centres. The OIE will ensure close coordination with other stakeholders and investors in the dynamic AMR environment.
Control and eradication of rabies in South East Asia: The ASEAN Rabies Elimination Strategy (ARES) was developed in 2014 with the support of the OIE through the Australian Government DFAT-funded STANDZ Project. This Strategy comprises a three-phased approach: Phase 1 from 2014 to 2017, Phase 2 from 2018 to 2020 and Phase 3 from 2020 to 2023. An ASEAN-Tripartite (FAO /OIE/WHO) meeting was conducted in December 2018 in Vietnam (with funding from the Australian Government DAWR) to monitor the implementation of the ARES. This meeting provided a valuable opportunity to measure progress made and pinpoint critical areas for improvement in ASEAN Member States. The launch of the Project should coincide with the adjustment phase of the ARES to reach elimination of dog-mediated rabies in the region. In collaboration with the Tripartite, the OIE has been requested to support ASEAN in the implementation of ARES. Through this Project, the OIE will provide direct support to ASEAN and its Member States in the below described activities. ARES is also currently undergoing an evaluation. The final ARES monitoring report will be available in March 2019 and results will consequently be considered in the design of targeted support activities. Considering preliminary results of the evaluation ASEAN Member Countries recommended actions in four priority areas:

- Increase mass dog vaccination rates in the region through advocacy for mass dog vaccination and dog population management,
- Develop a regional preparedness plan on rabies for human and animals focusing on capacity building activities and human rabies vaccine advocacy and stockpiling,
- Promote integrated bite case management,
- Develop a regional platform for regular information sharing and regular M&E for rabies in the ASEAN region.

This evaluation should be integrated in the overall evaluation of the regional situation with regard to rabies. The benchmark document developed in 2014, identified significant gaps in terms of country capacity to implement OIE standards and should be updated to take stock and reflect the current situation. Analysis of relevant information available at national and regional levels will enable the OIE to identify what activities and tools are needed to more effectively support the control and eradication of rabies in South East Asia. Activities will be developed with relevant partners and could include:

- Build capacity to develop/review national and regional preparedness plans: this would include support in the maintenance of the rabies-free status by supporting the development or revision of national preparedness plans; this activity will be managed in coordination with the concurrent OIE proposal to DAWR.
- Enhanced cross border coordination: by expanding the risk assessments performed in early 2019 through previous funding from the Australian Government, to the remaining countries, and by promoting coordination activities (i.e. harmonisation of disease interventions, including vaccination and animal movement surveillance) between bordering countries or those sharing risk-pathways;
- Support countries to update/develop their national strategies plans in line with ARES (Global framework), the Global Strategic Plan, the OIE international standards and WHO guidelines;
- Build capacity for stray dog population control, including: mapping stray dog populations and improved understanding of dog ecology to inform the development of national control programmes;
- Engage members to update policies/strategies on rabies control, sharing best practices, advocacy and stakeholder engagement to support rabies control and promote responsible ownership;
- Provide support to develop harmonised and appropriate procedures for bite management;
- Promotion and support through the development of integrated surveillance systems for human health and Veterinary Authorities.
- Strengthen the laboratory capacity in rabies diagnostics through the implementation of Laboratory Twinning projects and the organisation of regional proficiency tests.

2.6.3 Reporting to Modern and efficient Animal health information systems

Funds for such work will not transfer through the OIE, but directly from the IPCHS and FAO to AAHL.
At a time of rapid change and ever-growing demand for speedy data delivery, the OIE has received strong demand from its membership to create a global animal health information system that is efficient and relevant for tomorrow. Following 18 months of consultation, planning and design, the OIE has defined a vision for a modernized WAHIS. OIE WAHIS is envisioned as a technologically advanced yet nimble and user-friendly form with many previously unavailable, but much needed and requested features.

A global animal health information system serves a wide array of stakeholders when pursuing health security. In addition to users from national governments, regional and other international organisations use OIE WAHIS data to develop interventions to mitigate the threats of animal diseases including zoonoses. An obvious example of data cross-fertilisation is with the WHO: animal disease notification serves as a sentinel to inform it of potential risks and infections in humans and thus the WHO alerts national public health entities to inform communities and take the necessary preventative measures to mitigate the impact of relevant zoonoses. Regional institutions, such as the European Union, FAO and ASEAN, also depend on WAHIS data because it provides them with the necessary global overview and potential spread of zoonotic animal diseases which could enter into the region and compromise the sanitary status of the animal populations impacting animal production and food security. OIE WAHIS is of high impact and will prevent imminent animal disease threats and public health emergencies of international concern. Building bridges between OIE WAHIS and national/regional/international databases will support cross-fertilisation of data and its maximised use.

The core of the system will be completed by December 2019, however OIE WAHIS will continue to evolve, allowing users to take advantage of a modern and dynamic platform to comply with international standards, share important disease information, make appropriate decisions and take action to prevent and/or control the spread of zoonotic and other animal disease risks. OIE WAHIS will enable more rapid transmission and dissemination of animal disease data in real time from countries, regional and international organisations. It will rationalise and digitally connect the databases managed by relevant third parties and will enhance the accessibility and utility of the data for an even-wider group of stakeholders, responding to their specific needs.

In addition to providing Member Countries with a tool that will enable them to comply with their legal obligations in terms of immediate notifications, six-monthly and annual disease reports, OIE WAHIS will enable countries to develop local reports. Local reports will enable the OIE Delegate to crowd source data from local veterinarians to input into the local report and to have a more comprehensive and real-time understanding of the national epidemiological context. In addition to submitting such information to the global community through the OIE, national Delegates will be equipped with the necessary data to make informed decisions and take appropriate actions.

The OIE WAHIS also has capability to develop a Regional WAHIS Core to support groups of countries in South-East Asia and the Pacific to have a common platform for disease reporting of specific priority diseases of common concern and to monitor regionally coordinated disease control programmes. Funding from this grant will support regional training seminars for National Focal Points to use the new OIE WAHIS system.

Similarly, objective information on animal health systems and their performance provides an important guide to national, regional and international Veterinary Services capacity building and trade decision making. An efficient and user-friendly database that can manage the hundreds of OIE PVS reports and the wealth of data they contain will smoothly facilitate analysis by country, region and/or topic area. Such a database will be an important information source to guide strategies, activities and support for member countries, the OIE and its partners in improving animal and human health in this region, and around the world. The OIE has initiated the development of an OIE PVS Pathway Reports Operational Database. At this stage, the technical specifications are being drafted, and pending an international call for tender, development will commence for a database. This database will facilitate the data management, collation and analysis of reports. The Database is expected to be ready for testing by the end of 2019.34

2.6.4 Lessons Learned Workshop

The Lessons Learned workshop, held at the conclusion of the Project, will focus on key results, accomplishments and progress made in terms of sub-regional planning. Relevant Regional Economic

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34 This database is not funded through the project
Community (REO) and/or OIE resource partner(s) will be invited to engage to support information-sharing and efficient resource planning for the next capacity-building steps in the region.

3. Implementation Arrangements

3.1 Management and governance arrangements and structure

Project implementation will be managed by the OIE on behalf of IPCHS, which will provide funding for the project. The OIE Sub-Regional Representation for South East Asia will be supervised by the OIE Headquarters.

A Project Steering Committee (PSC) (Annex 2) will be established to specifically review, evaluate and report on progress. This Committee will meet at least bi-annually and will comprise representatives from DFAT/IPCHS, a representative from OIE Headquarters, the Sub-Regional Representative for South-East Asia and the Project Coordinator. The PSC will direct the Activity and ensure it is consistent with the OIE strategies and approaches and in line with the IPCHS funding strategy.

A Reference Group (Annex 3) will meet on an annual basis and will bring together representatives from the OIE-Australia One Health partnership, as well as representatives from WHO, FAO as well as other implementers or resource partners operating in South East Asia and the Pacific. The purpose of this Group will be to: coordinate activities and investments; capitalise on synergies and avoid duplication; identify failures, lessons learned and successes; and, jointly advocate for the importance of health security in the region.

A full-time staff will be appointed in the PVS Secretariat within the OIE Regional Activities Department in Paris to support the rolling out of the PVS Pathway activities. In addition, two full-time technical staff will be appointed to the OIE Sub-Regional Representation for South East Asia to support delivery of activities at regional level. One of these technical staff will be jointly selected by the OIE and IPCHS and seconded by IPCHS to the OIE for a two-year renewable contract; the other will be an OIE staff. Short-term Consultants may also be hired to provide specific expertise depending on the needs identified.

3.2 Results measurement, and monitoring and evaluation

During the first phase of the project, a Results Framework and Theory of Change will be developed to align with relevant objectives of the IPCHS and will be discussed and validated during the first meeting of the PSC. This results framework will be developed in consultation with the project stakeholders, and will serve to monitor activity implementation, how they're meeting project objectives, disbursement rate and will inform reporting and the development of necessary documentation. The Results Framework will include SMART indicators at output and outcome levels including for cross-cutting development issues to monitor project progress. An independent mid-term review of the project will inform the second half of project implementation and should be reported in the second annual report, to allow for any necessary changes. This should include input from partner countries on the value of the Project. An independent evaluation of the investment will be undertaken four months before its completion to take stock of its relevance, effectiveness, efficiency, impact and sustainability. The evaluation shall make recommendations to inform organisational learning and for future implementation of similar investments in the region.

A draft Theory of Change is at Annex 4 and an initial Risk Management Matrix is at Annex 5.

3.3 Procurement and reporting arrangements

OIE procurement rules and procedures will be followed as the delivery mechanism for procurement.

Detailed technical and financial reports will be provided to IPCHS with copy to DAWR to ensure transparency on actions implemented and the use of funds. This reporting will be annual. A detailed overview of the OIE World Animal Health and Welfare Fund financial information is also provided to donors during the annual Advisory Committee meeting (in December each year). The annual report of the External Auditor on the OIE Accounts for each financial year (1 January to 31 December) will become available at the end of May of the
following year each year (at the end of the General Session of the World Assembly of National Delegates to the OIE each year).

4. Resourcing

In addition to the full-time Project Coordinator (Manager) and the full-time Project Officer paid through the Project as well as the IPCHS seconded Project Officer, the OIE will provide the necessary technical and administrative support to the Project (staff at both regional and headquarters level).

The responsibilities of the Project Coordinator based at the SRR-SEA in Bangkok include but are not limited to:

- The successful implementation of the Australia-OIE One Health Partnership, including supervision of the Project Officer based in the SRR-SEA;
- The coordination of the implementation of the Project, with the support of two Project Officers;
- Operational planning under consideration of recommendations of the Project Steering Committee and other activities of other relevant stakeholders of the Project;
- Maintaining close working relations with Veterinary and Public Health Services in the target countries, with IPCHS, and other key stakeholders including WHO and ASEAN;
- Develop a Results Framework and Theory of Change for the Project and assure implementation, monitoring and steering of the Project along the agreed upon objectives in these documents;
- Reporting to IPCHS, according to the Grant Agreements and detailing Project progress along agreed upon objectives;
- Functioning as liaison to the OIE Science Department, AMR and Veterinary Products Department, and World Animal Health Information and Analysis Department at OIE HQ for the implementation of activities relevant to Rabies, AMR and OIE WAHIS;

The responsibilities of the Project Officer based in the PVS Secretariat within the OIE Regional Activities Department (RAD) in Paris include but are not limited to:

- Planning and implementation of PVS Pathway activities, including: the PVS Sub-Regional Orientation Training to launch the project; planning and implementation of PVS Evaluation, PVS Evaluation Follow-Up and PVS Gap Analysis missions in target countries;
- Facilitating the collaboration with WHO and other relevant public health partners to support the intersectoral components of the project;
- Supporting the WHO JEE Secretariat in organising JEE missions in target countries, in engaging the Veterinary Services in the JEE process, and in facilitating the participation of OIE PVS Pathway experts in JEE missions;
- Planning and implementing IHR-PVS National Bridging Workshops (NBW) in collaboration with the WHO One Health team. This involves ensuring appropriate engagement of the Veterinary Services, supervising/training the regional OIE facilitators, identifying PVS Pathway experts to take part in the NBWs, and promoting the use of NBW results in National Action Plans for Health Security (NAPHS);
- The review of the NBW methodology jointly with WHO to include a Rabies and/or AMR focus;
- Proposing and implementing relevant PVS targeted support activities to target countries. The Officer will coordinate the planning and implementation of these targeted support activities in collaboration with the relevant OIE departments.

The responsibilities of the Project Officer based in the SRR-SEA (seconded to the OIE by IPCHS) include but are not limited to:
- Implementation of activities in the target countries and in coordination with RAD and other relevant stakeholders;
- Support the Project Coordinator in operational planning, implementation, reporting and other core project functions;
- Implementing activities relevant to the development of the Veterinary and Veterinary paraprofessional workforce, including: Veterinary Education Support, including Twinning; harmonised VPP education; strengthening VSBs;
- Organising regional training seminars for National Focal Points with relevance to One Health and OIE WAHIS;
- Assure the conceptual integration of cross-cutting development issues, including Gender, Climate Change and Inclusive Development;
- In close collaboration with the relevant OIE departments and OIE Reference Centres:
  - assist in developing and implementing pilot methods to strengthen Animal Health Services’ capacities in Veterinary Leadership and Management;
  - reinforce and expand partnerships with national and regional stakeholders, such as Veterinary Statutory Bodies (VSBs) and Veterinary Education Establishments (including those training veterinary paraprofessionals);
  - review previous activities related to veterinary education support and identify areas where additional support would lead to further qualitative improvement of the veterinary workforce;
  - support countries establishing a sustainable VSB; assist the ASEAN VSB Network to harmonise the rules and procedures in the regulation of veterinary professionals in the region;
  - contribute to the OIE activities related to antimicrobial resistance and rabies, in close coordination with relevant regional and international institutions.
## Annex 1: PVS Pathway State of Play in Target Countries

The state of play of South East Asia and Pacific countries with respect to PVS Evaluation, JEE and NBWs only is provided in the table below. Given the OIE recommendation that consideration should be given to requesting PVS Evaluation Follow Up missions five years or after the original mission, the countries underlined are due to request and receive PVS Evaluation Follow Up missions, and those in italics are due PVS Gap Analysis missions, having undertaken a recent PVS Evaluation.

<table>
<thead>
<tr>
<th>Country</th>
<th>PVS Evaluation</th>
<th>PVS Evaluation Follow-Up</th>
<th>WHO JEE</th>
<th>IHR/PVS NBW</th>
<th>WHO NAPHS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BRUNEI</strong></td>
<td>June 2008</td>
<td>/</td>
<td>In the pipeline for 2019</td>
<td>/</td>
<td>/</td>
</tr>
<tr>
<td><strong>CAMBODIA</strong></td>
<td>June 2007</td>
<td>May 2018</td>
<td>September 2016</td>
<td>/</td>
<td>2017</td>
</tr>
<tr>
<td><strong>INDONESIA</strong></td>
<td>April 2007</td>
<td>Requested, to be progressed after PVS training</td>
<td>November 2017</td>
<td>August 2017</td>
<td>2018</td>
</tr>
<tr>
<td><strong>LAOS</strong></td>
<td>March 2007</td>
<td>August 2011</td>
<td>February 2017</td>
<td>Target dates: Jan-Feb. 2019</td>
<td>2017</td>
</tr>
<tr>
<td><strong>MALAYSIA</strong></td>
<td>February 2016</td>
<td>/</td>
<td>In the pipeline for 2019</td>
<td>/</td>
<td>2018</td>
</tr>
<tr>
<td><strong>MYANMAR</strong></td>
<td>October 2009</td>
<td>November 2018</td>
<td>May 2017</td>
<td>In the pipeline for 2019</td>
<td>2017</td>
</tr>
<tr>
<td><strong>PAPUA NEW GUINEA</strong></td>
<td>February 2015</td>
<td>/</td>
<td>In the pipeline for 2019</td>
<td>/</td>
<td>In pipeline</td>
</tr>
<tr>
<td><strong>PHILIPPINES</strong></td>
<td>May 2008</td>
<td>November 2016</td>
<td>September 2018</td>
<td>Target dates: Jan-Feb. 2019</td>
<td>/</td>
</tr>
<tr>
<td><strong>THAILAND</strong></td>
<td>March 2012</td>
<td>/</td>
<td>June 2017</td>
<td>March 2014 (pilot)</td>
<td>/</td>
</tr>
<tr>
<td><strong>TIMOR LESTE</strong></td>
<td>August 2011</td>
<td>/</td>
<td>November 2018</td>
<td>/</td>
<td>/</td>
</tr>
<tr>
<td><strong>VIETNAM</strong></td>
<td>March 2010</td>
<td>Requested, to be progressed after PVS training</td>
<td>November 2016</td>
<td>/</td>
<td>In pipeline</td>
</tr>
</tbody>
</table>
Annex 2: Terms of Reference: Project Steering Committee Australia-OIE One Health Partnership

The Project Steering Committee (PSC) shall provide key governance support and advice to the Australia-OIE One Health Partnership (hereafter called ‘the Project’). The PSC meets at least bi-annually or more often if key issues or problems arise. Members of the PSC comprise two representatives from OIE, one representative from the Australian DFAT and one representative from the IPCHS. Observers may be invited to attend PSC meetings and engage fully in discussions.

Role of the Project Steering Committee

The Project Steering Committee (PSC) will provide governance support and advice to the Project. In particular the PSC will:

- Ensure the Project is progressing along agreed objectives as laid out in the Project proposal and Results Framework;
- Provide strategic and governance advice and suggest changes to the overall direction and management of the Project including stakeholder engagement;
- Endorse, review, and as appropriate recommend modifications to the annual workplan of the Project;
- Provide inputs and satisfy itself that financial management, administrative and reporting obligations are being met;
- Ensure that the project activities are consistent, complementary, and synergistic with the OIE-Australian DAWR Project and with overarching policies including the OIE Strategic Plan;
- The Project Steering Committee suggest participants for the Project Reference Group

Composition of the Project Steering Committee

- IPCHS representative - Chair
- OIE HQ representative - Co-chair
- DFAT representative
- OIE Sub-Regional Representative

Modus operandi and arrangement of meetings

- The Secretariat shall be provided by the Sub-Regional Representation for SE Asia
- The Secretariat shall provide agendas for meetings and prepare concise records of meetings with recommendations for the consideration of the Project.
- The PSC meets at least bi-annually (physical or virtual) or more often if key issues or problems arise;
- The bi-annual meetings will be done back to back with the annual meetings of the PSC of the OIE-Australian DAWR project;
- Between bi-annual meetings, business shall be conducted by correspondence, telephone or under exceptional circumstances face-to-face if agreed by the Members;
- Subject to obtaining the prior agreement of the Chair, the OIE Project Coordinator may invite observers or advisors to meetings. Such observers and advisors shall have no voting rights;
- The costs of the Steering Committee will be met from provisions in the budget of the Project.
Annex 3: Terms of Reference: Project Reference Group Australia-OIE One Health Partnership

The Project Reference Group (PRG) will meet on an annual basis and will bring together representatives from the OIE-Australia One Health Partnership, as well as other implementers or resource partners operating in South East Asia and the Pacific.

**Role of the Project Reference Group**

- Coordinate activities between key stakeholders of the Project;
- Capitalise on synergies and avoid duplication of activities;
- Identify failures, lessons learned and successes;
- Jointly advocate for the importance of health security in the region.

**Composition of the Project Reference Group**

The PRG is composed of the members of the PSC and other members, it will be chaired by a representative of IPCHS and co-chaired by a representative of the OIE HQ. The composition of the PRG shall be determined by the PSC during its first meeting and may include WHO, FAO and other implementing agencies in the target region.

**Modus operandi and arrangement of meetings**

- The Secretariat shall be provided by the Sub-Regional Representation for SEA;
- The Secretariat shall provide agendas for meetings and prepare concise records of meetings with recommendations as appropriate for the consideration of the Project;
- The PRG meets annually (physical or virtual) or more often if key issues or problems arise;
- The annual meetings will be done back to back with the annual meetings of the PSC of the Project;
- Between annual meetings, business shall be conducted by correspondence, telephone or under exceptional circumstances face-to-face if agreed by the Members;
- Subject to obtaining the prior agreement of the Chair, the OIE Project Coordinator may invite observers or advisors to meetings. Such observers and advisors shall have no voting rights;
- The costs of the Steering Committee will be met from provisions in the budget of the Project.
### Annex 5: Risk Management Matrix

<table>
<thead>
<tr>
<th>Risk</th>
<th>Likelihood</th>
<th>Impact</th>
<th>Mitigation measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Given the PVS Pathway is country driven, difficulties in eliciting Member Countries’ PVS engagement and mission requests can delay implementation.</td>
<td>Low</td>
<td>High</td>
<td>PVS Communications Strategy (including on improving resourcing via the PVS Pathway), PVS Sub-regional orientation training workshops improving engagement and ownership (including a final day on forward planning for PVS engagement), self-evaluations, and awareness raising (advocacy with Delegates and key staff) regarding the various types of support the PVS Pathway can provide.</td>
</tr>
<tr>
<td>Given the PVS Pathway is country driven, lack of use and follow up by the country in response to PVS mission findings/recommendations</td>
<td>Medium</td>
<td>Medium</td>
<td>Efficient communication with OIE Regional and Sub-regional representations (RR/SRR). Intervention of RR/SRR with the Delegate to stimulate progress with recommendations. PVS Orientation training describing how PVS reports can be interpreted, used, and benefited from. Gap analysis and Strategic planning stages, as well as a series of targeted support options to help countries build-on the PVS Evaluation recommendations.</td>
</tr>
<tr>
<td>Slow validation of the PVS/PVS Follow-Up mission reports and lack of transparency in sharing reports with other partners.</td>
<td>Low</td>
<td>Medium</td>
<td>Raise awareness with countries about the One Health objectives of this Project and the importance of sharing knowledge and collaborating with other health sectors.</td>
</tr>
<tr>
<td>Difficulty of scheduling sequential PVS activities (e.g. PVS Follow-Up and NBW) or multisectoral activities (NBW) due to the limited availability of health services causing delay in the completion of activities.</td>
<td>High</td>
<td>Medium</td>
<td>Flexibility in planning of activities between different target countries. Broaden pool of PVS experts to assure capacity in times of peak demand.</td>
</tr>
<tr>
<td>Delay in gathering sufficient data for the completion of the analysis of PVS/JEE/NBW reports, thus delaying the identification of some of the targeted support activities.</td>
<td>High</td>
<td>Medium</td>
<td>Flexibility in the planning of activities between different target countries. Some of the targeted support activities can be identified based on PVS missions or can be identified for countries already more advanced in their PVS Pathway activities.</td>
</tr>
<tr>
<td>Regional and national animal and public health emergencies bind country resources and delay project implementation</td>
<td>Medium</td>
<td>High</td>
<td>Flexibility in planning of operations between different target countries.</td>
</tr>
<tr>
<td>Issue</td>
<td>Low</td>
<td>Medium</td>
<td>High</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-----</td>
<td>--------</td>
<td>------</td>
</tr>
<tr>
<td>Insufficient resources in target countries allocated to project activities.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delay of project implementation due to staff fluctuation resulting in know-how loss and limited project capacities.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Limited partner prioritisation for cross-cutting development issues.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target countries do not have the capacity to report to OIE WAHIS.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OIE Member Countries do not adopt a ‘One Health’ approach for the control of zoonotic diseases and AMR.</td>
<td>Medium</td>
<td>Medium</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
