

1. INTRODUCTION

This strategy document provides a framework, based on the PACE financing agreement, within which national programmes will be developed. It demonstrates how the national components are linked to sub-regional and regional strategies for the surveillance and control of the major epizootic diseases. The thrusts and common themes of PACE are indicated in Section 3 and the basis for regional prioritization is developed Section 4.

2. BACKGROUND

Livestock constitute an important part of the economy in Africa. Apart from 160 million cattle, there are large populations of small ruminants, pigs and poultry, in addition to camels and equines, the importance of which varies from one ecological region to another. Animal diseases represent a serious constraint on socio-economic development and major losses arise from their occurrence, particularly from the epizootic diseases whose control requires effective collaboration across international borders. The epizootics included in the "List A diseases" of the Office Internationale des Epizooties (OIE) are defined as "transmissible diseases which have the potential for very serious and rapid spread, irrespective of national borders, which are of serious socio-economic or public health consequence and which are of major importance in the international trade of animals and animal products." Some of the OIE "List B diseases" are also important epizootics.

In the 1980s, there was a widespread resurgence of rinderpest in many countries across Africa. In response, the Directors of OAU Member States called upon the OAU Secretary General to take urgent action. In 1986, the Organization of African Unity Interafrican Bureau for Animal Resources (OAU/IBAR), with financial and technical support from donors (notably the European Union), launched the Pan-African Rinderpest Campaign (PARC), which ended in 1999. Over a period of 13 years, PARC largely achieved its primary objective and removed rinderpest from all but a few countries in eastern Africa; it also produced major policy changes to improve the sustainability of veterinary services, in many countries. The policy issues that PARC addressed were:

- Cost recovery
- Liberalization of policies for drug importation and distribution
- Privatization of animal health services
- Sanitary mandates
- Strengthening associations/cooperatives
- Establishment of animal health development levy

PARC's initial strategy for the control and progressive eradication of rinderpest relied on raising national herd immunity to stop transmission of the virus, using quality-controlled vaccines. Subsequently, mass vaccinations were reduced and succeeded by active disease search, and containment of rinderpest outbreaks. PARC also emphasized a sub-regional approach and established a cordon sanitaire in Central Africa to prevent

the westerly spread of the disease. Consequently, PARC has provided PACE with a basis for its rinderpest eradication strategy and for achieving its other major objectives.

Other epizootic diseases present an increasing constraint in many sub-Saharan countries. Through several initiatives, some assisted by the Food and Agriculture Organization (FAO), national and sub-regional strategies have been developed to assist the control of such diseases as contagious bovine pleuro-pneumonia (CBPP) and African swine fever (ASF), notably in West Africa. These will be re-examined during the PACE Programme.

The PACE Programme will contribute to the goal of reducing poverty among those involved in stock farming by improving productivity, thereby improving their livelihoods and enhancing food security.

The vision is improved prevention and progressive control of the major epizootic diseases by providing a sound technical basis and enhanced national decision support for strategic animal health management, at national and regional levels.

The purpose of the PACE Programme is to revitalize animal health services through strengthening national and regional capabilities to sustain surveillance, as well as strategic control of major animal diseases, and to improve animal health care, in 32 sub-Saharan countries.

3. THE OVERALL STRATEGY

The Organization of African Unity Interafrican Bureau for Animal Resources (OAU/IBAR) will implement the PACE Programme through national, sub-regional and regional programmes. The PACE Programme Co-ordination Unit (PCU) at OAU/IBAR will be responsible for the coherence of programme implementation at all levels. The PCU will have the managerial and technical capacity to assess operations and to keep them in line with the Programme's objectives.

It is essential that the investments and achievements made during PARC be protected. The basic strategy of PACE is to build on the foundation provided by PARC, strengthen national and regional capacities for the sustainable surveillance and strategic control of priority epizootic diseases, and ensure that countries continue to follow international guidelines for the verification of freedom from rinderpest infection, thereby safeguarding animal health in Africa.

Regional co-operation will be an important feature of the PACE Programme and it is envisaged that a multiplier effect will be produced through regional and sub-regional meetings and joint actions that the Co-ordination Units will be responsible for organizing.

The activities of national PACE programmes will always fall under four headings or thrusts, although the priority accorded to each will vary within and between regions. The strategic orientation of PACE related each thrust is outlined below.

4. THE FOUR THRUSTS OF THE PACE PROGRAMME

4.1 Reinforcing animal epidemiology services and control of the major diseases by enhancing national capacities

The development of control strategies requires reliable information, which, in turn, depends upon the existence of effective disease surveillance systems. These systems encompass continuous, systematic collection, analysis and interpretation of animal health data in association with prevailing risk factors and economic considerations, for use in planning, implementation, monitoring and evaluation of disease control by veterinary personnel.

Disease surveillance is a core function of national veterinary authorities. Whereas PARC established and strengthened networks primarily for the surveillance of rinderpest, in support of its control and eradication, PACE will further strengthen them for the long-term surveillance of other priority animal diseases. PACE will provide levels of support that are consistent with the affordability and sustainability of these networks at the national level.

The major activities of this thrust include the development and strengthening of reporting systems for major animal diseases, in accordance with national, regional and international obligations. PACE will also link these systems with each other.

Strengthened, accelerated and harmonized reporting systems will feed information into the national and regional systems to provide a basic framework for understanding the major disease constraints and facilitate safe international trade in livestock and their products.

Disease surveillance to detect and investigate epidemiologically significant events will be strengthened. Passive and active disease surveillance techniques will be strengthened and developed to contribute data to clarify the determinants of disease occurrence. In this general context, PACE will promote the active participation of all stakeholders in surveillance networks. For active disease surveillance and purposive epidemiological investigations, attention will focus on specific disease syndromes of local and transboundary importance, and the capacity will be established for disease surveillance in important wildlife populations at national and sub-regional levels.

Laboratory capabilities will be strengthened to permit the differential diagnosis of the major diseases to ensure the accuracy of disease data.

In close collaboration with national experts, regional and international technical assistance will develop and strengthen national capacity particularly with regard to disease data analysis and communication. National units will be developed to manage and analyze data on disease incidence to form a basis for the development of national and regional strategies. Elements of these data management systems will include:

- disease data management to handle the flow of information
- disease mapping
- epidemiological analysis
- appraisal of economic impact

PACE will provide appropriate skills-oriented training to nationals who will manage these surveillance and decision support systems.

The Programme's Co-ordination Units will promote dialogue with national governments to increase the financial contributions to the maintenance of disease surveillance networks. This important activity will enhance the long-term sustainability of animal health in the PACE countries.

4.2 Greater privatization of veterinary services and public/private linkages in the field to improve the distribution of veterinary services and medicines

PACE will promote the rationalization of veterinary services to ensure that public goods are effectively safeguarded with appropriate involvement of the private sector.

National authorities will be supported to continue the rationalization of the delivery of veterinary services. Veterinary legislation in many countries now permits the involvement of private veterinary practitioners in state veterinary services. Where necessary, national PACE programmes will assist the refinement of legislation and regulations to provide an enabling environment for the private sector. Contractual mechanisms will be developed to engage private sector partners (appropriately qualified private veterinarians and veterinary auxiliaries) for essential disease surveillance and control. Where required this will include the use of community-based animal health workers, primarily in marginalized, extensive pastoral communities. PACE will raise the awareness of livestock owners' associations concerning diseases and regulatory requirements, in order to promote their active participation in improved disease surveillance and control.

The Programme will also promote and encourage the development and strengthening of appropriate mechanisms for the distribution of veterinary medicines, to enhance the availability of quality products (drugs and vaccines) to livestock keepers in remote areas.

4.3 Rinderpest eradication from Africa through elimination of the last reservoirs and verification of freedom

It is essential that the fight against rinderpest be sustained to safeguard the investments made to date, by achieving the goal of continental eradication of rinderpest, and contributing significantly to the global eradication of the disease.

Activities will focus on identifying, containing and eliminating the residual reservoirs of infection in eastern Africa against a background of intensified verification of rinderpest freedom in compliance with international guidelines (the OIE pathway). Wildlife surveillance will be supported as a pre-requisite for both verifying freedom and disclosing the presence of infection.

PACE will provide rinderpest vaccine where necessary, and will promote the involvement of private veterinarians in vaccination campaigns. However, it is

envisaged that the levels of vaccination in the control of rinderpest will be progressively reduced, as the intensity of surveillance increases and the disease is contained in smaller focuses. This will apply particularly to the fight against lineage 1 in the cordon sanitaire, during or after the second year of implementation. PACE will adopt a flexible approach to strategy formulation that will be based on the availability of sufficient reliable epidemiological data.

With regard to lineage 2, the epidemiological approach of the PACE Programme will be based on the eco-system of Somalia-Kenya-northern Tanzania. Here, pastoral husbandry systems are a prominent feature that result in widespread movement of livestock across international borders, through areas that have abundant wild ungulate populations.

The detailed strategies that the Programme will adopt in the fight against rinderpest will be continuously revised and updated in the light of the results of epidemio-surveillance, and the changing situation at field level. The PACE approach will be based on halting vaccinations as soon as possible and on giving aid to countries to fulfil the OIE procedure for being declared free from rinderpest. PACE will align its blueprint for rinderpest eradication (under review) with that of the Global Rinderpest Eradication Programme (GREP), which currently, is based on the OIE pathway. Both blueprints will be reviewed and updated to reflect the changing situation in the field, as revealed by the results of surveillance conducted under the national PACE programmes.

In all countries, PACE will promote and strengthen emergency preparedness planning to limit the impact of disease emergencies. This will ensure an improved capacity, first, to recognize rapidly evolving disease emergencies and, second, to mount an appropriate rapid reaction to them, both at national and regional levels.

OAU/IBAR will establish a centrally managed emergency fund to assist national authorities to contain outbreaks of rinderpest, and will continue to pay the storage charges for a bank of 1.5 million doses of thermo-stable rinderpest vaccine. These measures will ensure that the PACE Programme could respond rapidly to emergencies. The Programme will not establish individual national emergency funds.

4.4 Control of major epizootic diseases

PACE will assist the development of national, sub-regional and regional strategies for the control of major epizootics. The comparative economic advantages of various strategy options will be highlighted by the results of specific studies but PACE will not fund the implementation of such strategies. Epidemiological and economic data will be collected in standard formats to enable their analysis, comparison and mapping at regional level. These activities will be inextricably linked to those outlined in 3.1, above. Based on the analysis of these data, strategies for the control of priority diseases will be developed in a regional context and will facilitate the elaboration of co-ordinated plans for their exclusion or progressive control.

IBAR will, through the PACE Programme, promote the timely reporting by all countries of the occurrence of OIE List A diseases. This will reinforce the links

between the epidemio-surveillance networks and the refinement of strategies for the control of epizootics.

At the pan-African level, OAU/IBAR will strengthen its capacity to co-ordinate national programmes for the control of epizootics. This will include the strengthening of management capabilities, the development of information management systems and emergency preparedness plans.

PACE will re-examine the strategies developed in the regions to control priority epizootics, including rinderpest (see 3.3 above). The FAO assisted the development of a regional strategy in West Africa for the control of contagious bovine pleuropneumonia (CBPP) (Nouakchott, 1998), and has assisted several West African coastal countries through technical cooperation programmes (TCPs) to develop their strategies for the control of African swine fever (ASF).

PACE will continue to fund the Pan-African Veterinary Vaccines Centre (PANVAC), to promote the use of quality assured vaccines in control operations in PACE countries. In view of the anticipated long-term decline in the need for rinderpest vaccine, PACE will encourage the expansion of PANVAC's mandate to enable it to diversify its activities and enhance its sustainability. In addition to providing vaccine quality services, PANVAC could produce and market diagnostic reagents. PACE will provide vaccines in special circumstances, and only if functional cost recovery is in place, principally involving private veterinary practitioners.

The outputs of research commissioned under the PACE Programme, notably on diagnostic tools and vaccines, will be assimilated into control operations, as appropriate.

5. REGIONAL STRATEGIES

To attain the objectives outlined above and facilitate the delivery of support by the PACE Common Services, a regional strategy has been developed for PACE that takes into account geopolitics, husbandry systems, disease status and trade.

The Programme's broad thrusts, outlined in section 3 above, are common to the 32 countries and are the basis for all actions. An indication of how emphasis is to be apportioned and specific elements which national projects are expected to encompass is given in a table for each regional grouping. Within and across these groupings there are common themes and national PACE programmes will address national priorities within the regional requirements identified by PACE.

Table 1

Regional grouping of PACE Member Countries

Region	Characteristics	Countries in the region
Region I	The countries in this region have been free of rinderpest for over 10 years and most of them have declared provisional freedom from disease.	
	a) Sahelian sub-group	Burkina Faso, Gambia, Mali, Mauritania, Niger, Senegal
	b) Coastal sub-group	Benin, Cote d'Ivoire, Ghana, Guinea Bissau, Guinea Conakry, [Liberia], Nigeria, [Sierra Leone], [Togo]
Region II	Central African countries:	
	a) providing protection against the movement of rinderpest westwards from eastern Africa	Chad, Central African Republic, Cameroon ¹ , western Sudan*,
	b) others that did not all participate in the PARC (where limited progress was made in addressing policy issues – PARC's dialogue points)	[Burundi], Congo Brazzaville, Congo Democratic Republic, Gabon, Guinea Equatoriale, Rwanda
Region III	Eastern African countries:	
	a) harbouring rinderpest/ at immediate risk:	
	- Lineage 1	• Southern Sudan*, Ethiopia, north-western Kenya*, Uganda, Northern Sudan*
	- Lineage 2	• Southern Somalia*, Kenya, Tanzania
b) Red Sea coastal countries through which livestock transit en route to Middle east markets	Djibouti, Eritrea, Northern Somalia* (Somaliland and Puntland)	

Notes:

The European Commission will not fund activities at this stage in countries listed in [brackets].
1. As a direct beneficiary of the cordon sanitaire, Cameroon (with its large cattle population) is grouped here.

* For operational and epidemiological reasons, Kenya, Somalia and Sudan are considered on a zonal basis.

Table 2: Context of activities of the national PACE programmes in Western Africa

	Enhanced national capacities for disease surveillance and control	Improved delivery of veterinary services/animal health care	Fight against rinderpest	Control of other epizootics
<p>s of ca, been free rest</p>	<p>In most countries of this region, disease-reporting systems are in place and diagnostic laboratories function within a national system for epidemiological surveillance. PACE will support these surveillance systems and promote the appropriate development of national diagnostic laboratories, for which increased government financial contributions will be required.</p> <p>Skills-oriented training will be provided to enhance disease surveillance, diagnosis, information management and strategy formulation.</p>	<p>Veterinary legislation in the countries of this region now permits the involvement of private veterinary practitioners in the delivery of state veterinary services. Where necessary, national PACE programmes will assist its refinement. PACE will encourage appropriately qualified private veterinarians, veterinary auxiliaries and community-based animal health workers to participate in disease surveillance duties. The participation of livestock owners' associations in surveillance will also be promoted, primarily by increasing their awareness of diseases and regulatory requirements.</p>	<p>Rinderpest has been absent from the region for over 10 years and vaccination ceased by 1999. PACE will ensure that countries continue to verify their freedom from rinderpest; this will entail intensified serological surveillance of domestic livestock and wildlife. Emergency preparedness plans will be developed. At the regional level, PACE will promote the joint declaration of regional freedom from rinderpest, in line with recent proposals made by the Global Rinderpest Eradication Programme (GREP). In 2002, the countries in this region should apply to the OIE for recognition of freedom from infection. PACE will support this process.</p> <p>Under the GREP blueprint, most countries in this region were expected to apply to the OIE for recognition of freedom from rinderpest in 2000. PACE will review their status before the end of 2000 and revise the blueprint accordingly.</p>	<p>The absence of rinderpest in the region permits the surveillance of other priority epizootics. In the Sahelian sub-region, the highest priority has been accorded to CBPP, at national and regional levels. A control strategy was formulated for western and central Africa in 1998. It includes regionally co-ordinated; repeated mass vaccinations; national surveillance programmes; participation of private veterinarians; and, sensitization of livestock owners. PACE will re-examine this strategy but will not purchase vaccines, unless a country has an effective cost recovery system in place. National surveillance systems will support the control of other priority diseases including foot-and-mouth disease, peste de petits ruminants (PPR) and Rift Valley fever (RVF).</p> <p>In coastal countries, where small livestock species are important, PACE may address priority diseases including African swine fever (ASF), PPR, RVF and Newcastle disease.</p>

Table 3a: Context of activities of the national PACE programmes in Central Africa

	Enhanced national capacities for disease surveillance and control	Improved delivery of veterinary services/animal health care	Fight against rinderpest	Control of other epizootics
i) can of from ica	<p>In the countries of the cordon sanitaire, disease-reporting systems and diagnostic veterinary laboratories will be improved as part of the national epidemio-surveillance systems. PACE will support these surveillance networks, for which increased government financial contributions will be required.</p>	<p>Relatively strong private veterinary services have emerged in the countries of the cordon sanitaire. National PACE programmes will promote their engagement to inspect and vaccinate animals within the cordon sanitaire. PACE will encourage private veterinarians, veterinary auxiliaries and community-based animal health workers to participate in other disease surveillance duties. The participation of livestock owners' associations in surveillance will also be promoted.</p>	<p>In Chad, Central African Republic and western Sudan PACE will ensure the freedom from rinderpest by maintaining vigilance and an effective cordon sanitaire to protect against its movement westwards; emergency preparedness plans will be developed. There will be similar surveillance in Cameroon and emergency preparedness will be developed.</p> <p>In the countries of the "cordon sanitaire", rinderpest has been limited by mass vaccination, which will continue, albeit on a reducing scale. Countries will continue to follow the OIE pathway; this will entail intensified serological surveillance of domestic livestock and wildlife. The progressive reduction of the area where rinderpest may be present would enable Cameroon, Tchad and RCA to apply to the OIE for recognition of freedom from rinderpest by 2004. PACE will support this process.</p>	<p>The surveillance of other epizootics in the countries of the cordon sanitaire will be undertaken in conjunction with rinderpest surveillance as appropriate. National PACE programmes will encourage the timely reporting of OIE List A diseases and will promote strategy development for the control of priority epizootics, such as CBPP and transboundary diseases of other species, including camels.</p>

Table 3b: Context of activities of the national PACE programmes in Central Africa

	Enhanced national capacities for disease surveillance and control	Improved delivery of veterinary services/animal health care	Fight against rinderpest	Control of other epizootics
<p>ries il the e ass olicy RC's nts)</p>	<p>In these countries of Central Africa, where veterinary services lack capacity, PACE will promote the concept of animal disease surveillance; engage in dialogue to promote policy changes that will underpin the strengthening of veterinary services; establish animal disease surveillance systems and diagnostic capacities required to achieve the objectives of the PACE programme.</p> <p>Rwanda represents a special case where PACE will assist in the re-establishment of a national capacity for animal disease surveillance.</p>	<p>PACE will engage in dialogue to promote policy changes that will enable the review of the legislative framework to support the involvement private veterinarians in state veterinary services. National PACE programmes will assist the development and promulgation of supportive legislation and regulations.</p>	<p>The absence of rinderpest in these countries will be confirmed through surveillance of domestic livestock and wildlife, where appropriate.</p> <p>The milestones for declarations of freedom from rinderpest are under review.</p>	<p>The development of national disease surveillance capacities in the other countries of this region will be closely linked to the surveillance of rinderpest, as was the case in other PACE member countries several years ago. Initially, this may limit the level of surveillance of other epizootics but, later in the programme, PACE may extend its support to the surveillance of diseases such as CBPP, ASF and PPR.</p> <p>In Rwanda, PACE will offer specific assistance to assess the extent of CBPP, which spread extensively after the recent civil war.</p>

Table 4a: Context of activities of the national PACE programmes in Eastern Africa

Enhanced national capacities for disease surveillance and control	Improved delivery of veterinary services/animal health care	Fight against rinderpest	Control of other epizootics
<p>In Ethiopia, Kenya, Tanzania and Uganda, basic disease-reporting systems are in place and diagnostic laboratories support epidemiological surveillance for rinderpest. PACE will enhance the efficacy of these surveillance systems and promote the appropriate development of national diagnostic laboratories, for which increased government financial contributions will be required.</p>	<p>The wider promotion of private veterinary practice has commenced in Kenya; support will continue, combined with the training of community-based animal health workers (CAHWs). In other countries of this sub-group, PACE will focus on the development of the private veterinarians and CAHWs. Loan schemes, managed by commercial banks, may be developed and legislation will be reviewed to provide an enabling environment for such private sector stakeholders. In southern Sudan, the contacts between CAHWs and their supervisors will be intensified, and their subsequent training will be provided and their numbers increased. In Somalia, the interface between Somali veterinary personnel and livestock owners will be improved and the distribution of veterinary medicines will be monitored.</p>	<p>In southern Sudan, infected areas will be defined, reservoirs will be contained and eliminated, and freedom from rinderpest will be verified. In northern Sudan, the focus will be on verification of freedom and emergency preparedness. Ethiopia will also focus on verification of freedom and emergency preparedness. Uganda will maintain surveillance to verify freedom from disease and will improve emergency preparedness.</p> <p>In the Somalia-Kenya-Tanzania ecosystem, infected areas (centred in southern Somalia) will be defined, the reservoirs will be contained and eliminated, and freedom from rinderpest will be verified.</p> <p>In all countries, emergency preparedness plans will be improved and control strategies will be revised. By 2004, all countries should be provisionally free from rinderpest (under review).</p>	<p>For Ethiopia, Kenya, Tanzania and Uganda, the priority during PACE will be to maintain intense surveillance of the rinderpest situation. However, the same surveillance systems will be used to monitor the situation regarding other transboundary diseases, including CBPP.</p>

Table 4b: Context of activities of the national PACE programmes in Eastern Africa

	Enhanced national capacities for disease surveillance and control	Improved delivery of veterinary services/animal health care	Fight against rinderpest	Control of other epizootics
) <p>istal ough ck ite to</p>	<p>In these countries, infrastructure for veterinary communications will be improved, and surveillance systems will be established. Governments will be encouraged to provide levels of recurrent funding to maintain appropriate surveillance systems.</p> <p>Training will be provided to improve the necessary skills for surveillance, diagnosis and strategy formulation, on the basis of an analysis of the countries needs.</p>	<p>Because of limited capacities in these countries, PACE will not focus on privatization, but will promote the greater participation of livestock owners in disease surveillance.</p>	<p>Rinderpest has not occurred in Djibouti, Eritrea and Northern Somalia for many years. These countries will establish and maintain surveillance to verify freedom from rinderpest and develop emergency preparedness plans.</p>	<p>In the other countries in this sub-region, the surveillance systems will be used to monitor the major animal diseases of which rinderpest will be one.</p>

6. OTHER STRATEGIC CONSIDERATIONS

6.1 Implementing agents

OAU/IBAR will co-ordinate the implementation of the PACE Programme. The implementation of national PACE programmes will be the responsibility of the national veterinary authorities in each member country. Wherever possible, PACE will encourage and promote the active participation of private veterinarians, veterinary auxiliaries, community-based animal health workers, and farmers' associations in the programme's implementation and in disease surveillance and control.

6.2 Factors to ensure sustainability of the PACE Programme's impacts

Each member country of the PACE Programme will sign a memorandum of understanding with the Regional Authorizing Officer of the European Development Fund (EDF). The memorandum includes prerequisites that are aimed at enhancing the sustainability of the Programme's outputs. The governments of PACE member countries shall respect the following requirements:

- the commitment to enter and follow the OIE pathway for the declaration of freedom from rinderpest infection;
- progressively increase government financial commitments to meet the full recurrent costs of a functional and effective epidemio-surveillance network at national level, which shall be linked effectively to regional and continental networks;
- continue the process of privatization of veterinary services and full cost recovery (including vaccinations, except tactical rinderpest vaccination); and,
- undertake continuous environmental impact of stockbreeding management and its impact on rangeland conditions.

At the regional level, the OAU will find the means to maintain essential personnel for epidemiology and socio-economics to ensure the sustainability of IBAR as a centre of excellence to co-ordinate strategic control of major animal diseases

PACE will focus on building the capacity to develop appropriate strategies for animal disease control that will contribute to sustainable socio-economic development.

7. MONITORING AND EVALUATION OF PACE

The financing agreement of the PACE Programme states: "Monitoring and regular internal evaluations will be the key tasks of the Regional and Sub-regional Co-ordination Units. The approach adopted will be based on participatory monitoring and evaluation in each country. The overall effectiveness of PACE will be measured in terms of the development of epizootic diseases, documented by the OIE, the number and results of samples and also the improved effectiveness of husbandry services."

The active participation of planners and implementing agents is essential for meaningful monitoring. The tables (above) provide an orientation for logical frameworks that the PACE Common Services and Co-ordination Units will develop. The outcome will guide national programmes. Detailed milestones and baseline data for indicators will be finalized in the course of implementation the first year's work programmes; their scope is shown in Table 6.

Table 5

The PACE blueprint for the eradication of rinderpest [to be updated]
(based on the GREP blueprint for Africa)

Expected status at end of year and action to be taken

Country	PARC				PACE						
	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Region III - Eastern Africa											
<i>Group a</i>											
Ethiopia - Zone A			PD			FD		FI			
Ethiopia - Zone B1					PD			FD		FI	
Ethiopia - Zone C & B2					PD			FD		FI	
Kenya - Zone I			PD			FD			FI		
Kenya - Zone II					PD			FD		FI	
Kenya - Zone III					PD			FD		FI	
Somalia - South Somalia								PD			FD
Sudan - Zone A (north)	(PD)						FD		FI		
Sudan - Zone B (buffer)				PD			FD		FI		
Sudan - Zone C (transition)						PD			FD		FI
Sudan - Zone D (equatorial) ~							PD			FD	
Tanzania - Zone A		PD			FD		FI				
Tanzania - Zone B* ~		PD			FD		FI				
Uganda - Zone A (immune barrier)			PD			FD		FI			
Uganda - Zone B1 (surveillance)			PD			FD		FI			
Uganda - Zone B2		PD			FD		FI				
<i>Group b</i>											
Djibouti						PD			FD		FI
Eritrea			PD			FD		FI			
Somalia - Somaliland											
Somalia - Puntland											
<i>Egypt *</i>			FD		FI						

Legend

^ Not members of OIE

* Provisional freedom declared

** accelerated pathway

~ presence/suspicion of lineage 1

~ presence suspicion of lineage 2

	Assumed infected
	No declaration and/or vaccinating
	Provisional freedom from disease and no vaccination
	Free from disease
	Free from infection

ACTION

PD Declare provisional freedom from disease

FD Apply to OIE for recognition of freedom from disease

FI Apply to OIE for recognition of freedom from infection

Table 6

**Scope of indicators to be used in the evaluation of the PACE Programme
at national level**

PACE Objectives/Themes	Scope of indicators
1. Enhanced national capacities	<p>Policies related to disease surveillance Government budgetary contributions to surveillance networks Human resources & skills in laboratory diagnostics; data management; project management; communications; Economic analysis; strategy formulation; etc Standardized systems for information exchange in place</p>
2. Improved veterinary services/ animal health care	<p>Policy to support privatised veterinary services Review of legislative framework for veterinary practice Regulatory framework for veterinary services Professional and farmers' associations Contractual relationships: public-private sector Contract performance criteria</p>
3. Fight against rinderpest	<p>Improved diagnostic tools in use Surveillance coverage in each country Compliance with technical performance indicators Performance of reporting systems Compliance with milestones on the OIE pathway Data management system standards in place Epidemiological analyses & follow-up actions Emergency preparedness plans updated</p>
4. Control of other epizootics	<p>Appropriate diagnostic tools in use Surveillance coverage in priority areas Outbreaks and declarations of OIE List A diseases Strategies in place at national and regional levels Allocation of national budgets to implement strategies Regular reports received by OAU/IBAR</p>