UNITED AGAINST RABIES
COLLABORATION

Zero Human Deaths from Dog Transmitted Rabies by 2030

Gregorio Torres
Chargé de mission
World Organisation for Animal Health
WHAT HAPPENED SINCE 2015

- Global Conference (Geneva Dec’15) - *rabies elimination is feasible ‘Zero by 30’*

- Joint collaboration by the *Tripartite* (WHO, OIE, FAO) and GARC

- Outcomes:
  - *Global Framework* for the elimination of dog-mediated human rabies
  - Participants call for a *Global Plan (business)*

- External pro-bono advice for *the Global Plan*

http://www.oie.int/eng/RABIES2015/index.html link
A country centric initiative that puts the Accra agenda at the heart of our work

A platform to facilitate Regional knowledge exchange and promote ‘one health’ approach

A global catalytic initiative to achieve a global goal that we all agree on

Uniting platform for academics, researchers, policy makers, donors, and communities

A vertical programme that dictates the needs and allocates resources to a country

A new donor agency!

A research group

A global financing facility

A talk shop for idealists

WHO

OIE

FAO

GARC
THE APPROACH

• We came together to discuss *the approach* and *build upon* what has been done

• We want to change the *status quo*, and create a *coalition for success*

• Leverage the *unique position of the four partner organisations*, put *countries in the centre* to reach zero human deaths by 2030

• Define our *goal, objectives*, and the *way we will work together*

• Define a *Global Plan* that outlines our *value proposition*
  • How will we get there? – *Theory of Change, Logical Framework*
  • Put a value to our ask – *budget*

• Engage with our stakeholders to *define what success looks like*
United Against Rabies

ZERO HUMAN DEATHS FROM DOG-TRANSMITTED RABIES 2030

THEORY OF CHANGE

Friday, September 22, 2017

OBJECTIVE 1
ELIMINATION DRIVEN BY EFFECTIVE UTILISATION OF VACCINES, MEDICINES, TOOLS AND TECHNOLOGIES

- Vaccination coverage > 70% in dogs in at risk areas
- Dog vaccination programmes are effective and comprehensive
- Increased access to and uptake of vaccines for humans & dogs & RIG
- Efficient supply chains strengthen response

OBJECTIVE 3
SUSTAINED COMMITMENT DRIVES PROGRESS

- PEP is available to and affordable for all bite victims
- Vaccines, medicines & information reach populations with high rabies risk
- Communities & health systems are equipped to prevent and respond to rabies
- Widespread implementation of dog bite prevention strategies
- Trained professionals in human & animal health, & education sectors are available
- Capacity building promotes effective use of vaccines, medicines, tools & technology

OBJECTIVE 2
POLICIES, GUIDANCE, & GOVERNANCE PROVIDE SUPPORT

- Accurate demand forecasts are generated
- Adequate & reliable information facilitate effective responses
- Rabies surveillance & programme monitoring is accurate and comprehensive
- Rabies indicators are captured by National Health Information Systems

OBJECTIVE 2
RELIABLE DATA ENABLES EFFECTIVE DECISION-MAKING

“UNITED AGAINST RABIES” was formed by four partners: FAO, OIE, WHO, GARIC*

PROBLEM STATEMENT
Although 100% preventable, over 59,000 people, in over 150 countries, die of rabies every year. Rabies is nearly always fatal once symptoms appear.
THE THREE OBJECTIVES WITHIN THE GLOBAL PLAN

• **Objective 1.** To efficiently prevent and respond
  “Elimination is driven by effective utilization of vaccines, medicines, tools and technologies”

• **Objective 2.** To generate, innovate and measure impact
  “Policies, guidance, and governance provide support”

• **Objective 3.** To sustain commitment and resources
  “Stakeholders engagement and strength supply chain”
United Against Rabies

THE EXPECTED TREND

No of cases

- N° of rabies cases in dogs
- N° of human deaths (current est 59,000 annually)
- Break rabies transmission in dogs

0 human deaths

2018

2030

Beyond 2030

Rabies: Zero by 30

No of human deaths

Friday, September 22, 2017 8
## OUR PROGRESS SO FAR

<table>
<thead>
<tr>
<th>Completed</th>
<th>In Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theory of Change</td>
<td>Global Plan</td>
</tr>
<tr>
<td>Logical Framework</td>
<td>Communications plan</td>
</tr>
<tr>
<td>Broad Budget till 2030</td>
<td>Resource Mobilisation Strategy</td>
</tr>
<tr>
<td>Development partner / investor landscape</td>
<td>Annual work plan for 2018</td>
</tr>
</tbody>
</table>
YOUR CONTRIBUTION

- Continuing engagement with us to reach out the Goal
- Help us to spread the message and to identify potential investors
- Identify your responsibility
- Design, implement, evaluate and amend your national strategy
- Do not leave anybody behind (One Health)

Remain united against rabies
STAY-TUNED

The *Global Plan* will be launched on World Rabies Day (28 Sep)
Update on FAO involvement on Rabies control in Africa

Angélique Angot, Laboratory Unit - Emergency Prevention System (EMPRES) – FAO-HQ
Charles Bebay, Sub-regional One Health Coordinator, FAO Congo
OUTLINE

✓ Laboratory networking and key achievements

✓ Lab diagnostic strengthening

✓ FAO support to reach the global goal
Rabies is a priority disease in the region

<table>
<thead>
<tr>
<th>Disease</th>
<th>Percent of Countries that Prioritized</th>
<th># of Countries (n=13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rabies</td>
<td>100%</td>
<td>13</td>
</tr>
<tr>
<td>Zoonotic Influenza (including Avian Influenza)</td>
<td>85%</td>
<td>11</td>
</tr>
<tr>
<td>Viral Hemorrhagic Fevers (incl. Ebola/ Marburg, CCHF, RVF)</td>
<td>62%</td>
<td>8</td>
</tr>
<tr>
<td>Anthrax</td>
<td>62%</td>
<td>8</td>
</tr>
<tr>
<td>Brucellosis</td>
<td>54%</td>
<td>7</td>
</tr>
</tbody>
</table>
Western and Central African Veterinary Laboratory Network for Avian Influenza and other transboundary disease (RESOLAB): Launched in 2007 thanks to FAO and its partners (USDA-APHIS, OIE, AU-IBAR)

- 23 National Veterinary laboratories
- December 2010: the Rabies Subnetwork was created
- Since 2012, split into RESOLAB/AO and RESOLAB/AC
RESOLAB rabies subnetwork main objectives

1. To identify priority gaps in rabies diagnosis/surveillance
2. To build diagnostic capacity and networking
3. To improve interaction between the veterinary and public health counterparts
4. To promote awareness and education
RESOLAB Rabies subnetwork

Sharing:
- Quartely reports
- Protocols (OIE)
- Meeting outcomes

PARACON Meeting
Effective rabies diagnostic capacity in Central Africa
Effective rabies diagnostic capacity in West Africa
No existing rabies diagnostic capacity
Strengthening lab diagnostic capacity

- Procurement of lab reagents and equipments
- On-site **training** on rabies diagnosis (FAT, PCR and ELISA) and back-to-back stakeholders meetings in DRC, Cameroon, Congo and Gabon
Rabies diagnostic capacity in CVL - 2014

Improvement is needed
- Sampling and diagnosis
- Data sharing (OIE)

- Green: Effective rabies diagnostic capacity in Central Africa
- Light Brown: Effective rabies diagnostic capacity in West Africa
- Blue: Newly improved rabies diagnostic capacity
- Red: No existing rabies diagnostic capacity
Republic of Congo 2013: A lab success story

Rabies outbreak in Pointe-Noire

1 Death

2 Deaths

1° sample received in LNVB = Positive

2° sample received in LNVB = Positive

3° sample received in LNVB = Positive

Sequencing of the N gene (547 bp)

Hands-on Training + Back-to-back Seminars

LNVB: Laboratoire National vétérinaire de Brazzaville
FAO in country support to reach the global goal
Objective 1: To efficiently prevent and respond

- Support massive dog vaccination campaigns
- Promote responsible dog ownership
- Support response to rabies outbreaks (ex. Congo in 2014)
- Awareness
- Etc...
Objective 2: To generate, innovate and measure impact

- Promote the use of existing tools (SARE, DGREP) and OIE vaccine bank
- Contribute to designing and implementing M&E activities
- Support capacity building on rabies surveillance
Lab activities under objective 2

- Procurement of reagents and equipment
- Proficiency Test on rabies
- On-site training on rabies diagnosis
- Networking including public health labs
Objective 3: To sustain commitment and resources

- Support the preparation and implementation of vaccine pilot plans in “FAO GHSA countries” as a follow up of national stakeholder meetings
- Support governments (esp. non FAO GHSA countries) for resource mobilization
- Sensitize donors and the private sector
- Participate in M&E activities
- Etc...
Thank you
UPDATE WHO GUIDANCE FOR COUNTRIES TO MOVE RABIES PROGRAMMES FORWARD

PARACON
Pretoria, 13-15 September, 2017

L.Knopf, B.Abela-Ridder
Neglected Zoonotic Diseases
Department of the Control of Neglected Tropical Diseases WHO
Rabies is a neglected, vaccine-preventable disease
An indicator for impact on inequity

- 100% fatal
- ~60,000 deaths per year
- Dog bites cause ~ 95-99% of human cases
- Weak data and under-reported
- Mostly children
- Vaccine is a key component of the global plan and triggers national programmes
Reaching Zero Rabies deaths by 2030

**PREVENT**

Awareness, responsible dog ownership, bite prevention and dog vaccination

**RESPOND**

Bite management and when necessary, post-exposure treatment
Reaching Zero Rabies deaths by 2030

GUIDANCE & STANDARDS

RESEARCH & TECHNOLOGY
Innovation in tools and delivery

MONITOR & EVALUATE
The evidence for reaching 0/30

**PROGRESS TOWARDS ELIMINATION**

- **Endemic**
  - Endemic incidence & outbreak frequency
- **Control**
- **Zero Human Deaths**
- **Elimination**
- **Maintenance**

**Confirmed dog rabies cases**

**Confirmed human rabies cases**

**HUMAN VACCINE REQUIREMENTS**
- Increased Awareness
- Decreased Rabies
- Judicious use with risk assessment

**DOG VACCINE REQUIREMENTS**
- Annual mass vaccination
- Scale back vaccination

**Time till control**

**Time till elimination**

**World Health Organization**
Rabies data @ WHO – present and future
Integrated Platform on surveillance and control of NTDs

District Health Information Software 2 (DHIS2):

- Rabies module included, harmonization
- Display of official key data in the GHO
- Linking rabies data between organizations
- Trainings in DHIS2
Revision WHO policy on rabies immunization

1. Assess evidence and country practices in the use of human rabies vaccine and RIG

2. PrEP booster doses and the cost-effectiveness of the interventions;

3. Shortening of PEP & PrEP schedules;

4. Prudent use of RIG and monoclonal antibody use to improve access to care /public health impact;

5. Implementation and evidence of the current recommendation on ID use of vaccines;

6. Cost-effectiveness of vaccination (modelling data);

7. Potential of new vaccines to improve delivery.
4th WHO Rabies Expert Consultation Meeting
Chulalongkorn University Hospital, Bangkok - 26-28 April 2017

- Practical approaches to improve surveillance in animals and humans including updates for the laboratory techniques
- Safe and feasible human and animal immunization policies
- Strategies to reduce over-use of scarce human biologicals
- Potential of new rabies biologics to improve delivery to (rural) communities
- Guidelines for palliative care of rabies patients
- Oral vaccination in dog vaccination campaigns
- Processes for countries to declare rabies freedom
Collecting programmatic experiences
Potential Gavi VIS 2018

• Gavi supported country studies (2016-17): building the case for investment through gathering data and experience

• 10 large country baseline studies (community, hospital, evidence review and modelling)

• Over 24 countries participating in vaccine logistics and delivery survey
Modelling Consortium - Work Streams

Global plan zero rabies deaths by 2030
  • estimate needs, resources and socio-economic benefits of the comprehensive plan to reach 0 rabies deaths by 2030

SAGE Working Group on rabies
  • Improve programmatic feasibility and clinical practice
  • Update of the WHO position paper on rabies immunization by exploring cost-effectiveness of practices

Programmatic aspects, potential GAVI investment
  • forecast biologic needs & operational scenarios for countries
  • to quantify the potential impact of expanding access to human rabies vaccination
Thank you!

http://www.who.int/rabies/en/
Patrick Bastiaensen
Programme Officer
Sub-Regional Representation for Eastern Africa
World Organisation for Animal Health

OIE Vaccine Banks
RABIES
Africa

2nd sub-regional PARACON Meeting
Irene, South Africa 13 – 15 September 2017
Strengthening Veterinary Services in Developing Countries

Rabies Pilot
Beneficiaries at continental level (vaccine bank)

Beneficiaries at regional level (northern Africa)

Beneficiaries at national level (government of Kenya)
OIE Rabies Vaccine Bank (dog vaccines)

- To source quality vaccines for mass-vaccination campaigns, in large quantities, at the best possible rate, avoiding tendering procedures (sole supplier, through the OIE);

- To benefit from a stock of vaccines on short notice, to kick-start mass vaccination campaigns, whilst waiting for the national tendering procedures to be completed;

- To manage outbreaks of rabies (emergency response measures, limited quantities).
CANINE RABIES VACCINES TO SAVE HUMAN LIVES

RABIES kills nearly 60,000 PERSONS PER YEAR with more than 95% of cases originating from INFECTED DOG bites. By providing high-quality dog vaccines, the OIE Vaccine Bank helps countries implement vaccination campaigns and eliminate canine-mediated human rabies.

OIE VACCINE BANK FOR RABIES
Vaccinating dogs today to save human lives tomorrow

HOW DOES IT WORK?

- Rabies takes one life every 15 minutes, most often a child.
- Over 70% of cases originate in bites from infected dogs.
- The best way to eliminate the disease is to stop it at the animal source: dogs.
- By vaccinating 75% of dog populations in at-risk areas, we can decrease the number of human cases to nearly zero.

By providing high-quality vaccines, the OIE Vaccine Bank helps countries implement vaccination campaigns and contribute to the elimination of dog-mediated human rabies.

OIE MEMBER COUNTRIES

VACCINE DELIVERY
- Timely dispatch
- Flexible quantities

SUCCESSFUL NATIONAL STRATEGY TO ELIMINATE DOG-MEDIATED RABIES

- Human vaccination and post-exposure treatments
- Mass dog vaccination campaigns in at-risk areas
- Dog population management

DONORS
Responsive financial mechanisms

- Multi-donor approach
- Regional earmarking
- International organisations (WHO, J)
- Other partners

VACCINE SUPPLIERS

- OIE member
- OIE Rabies Vaccine Bank
- Direct purchase

Multi-suppliers approach

OIE
WORLD ORGANISATION FOR ANIMAL HEALTH
Protecting animals, preserving our future

www.oie.int/rabies
OIE Rabies Vaccine Bank (dog vaccines)

- 20 ml (doses)
- 10 ml (doses)
- 1 ml (dose)
- 2 suppliers on stand-by
- min. 5,000 doses
- English
- French
- Spanish
- Arabic
- 10 days to 12 months
Burkina Faso
Gambia
Ghana
Namibia
Senegal
Togo
Tunisia

Through the Swiss Trop. / PH Institute:

Chad
Mali

Through the WHO:

South Africa
Tanzania
Beneficiary countries of the rabies vaccine bank since 2014 (including Kenya, SVSDC+R : 200,000)

Burkina Faso
Gambia
Ghana
Namibia
Senegal
Togo
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Through the Swiss Trop. / PH Institute:

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South Africa
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Beneficiary countries of the rabies vaccine bank since 2014 (including Kenya, SVSDC+R: 200,000)

- Burkina (purchase)
- Gambia
- Ghana (purchase)
- Namibia
- Senegal
- Togo
- Tunisia

Through the Swiss Trop. / PH Institute:

- Chad
- Mali

Through the WHO:

- South Africa
- Tanzania
Worldwide deliveries

19.1 million doses in 61 consignments to 27 countries
The OIE Rabies Vaccine Bank
Guiding Principles

Countries embarking on eliminating dog-mediated human rabies require easy access to quality-assured dog vaccines for planned campaigns and outbreak management

- The OIE Vaccine Bank provides:
  - Quality-related benefits
  - Fluid logistics
  - Cost-related benefits
  - Better coordination

- It is by no means exclusive or mandatory

- Trigger: Official Request from OIE Delegate (with numbers, justification and cold chain confirmation)
The OIE Rabies Vaccine Bank in the context of the 2030 Dog-Mediated Human Rabies Deaths Elimination

Currently:
A proven mechanism to initiate, stimulate, encourage, or contribute to regional or national vaccination campaigns at a low fixed cost at global level, while promoting a true One Health approach with a better collaboration between animal health and public health services at global, regional and national levels.

As we move forward in support of the goal to eliminate dog-mediated human rabies deaths by 2030
It may need to be scaled up in line with OIE policy on vaccine banks (currently being reviewed), and subject to public and/or private investments in resourcing national or regional rabies elimination plans.
Don’t let Rabies kill this picture
Vaccinate dogs now

OIE rabies portal
www.oie.int/rabies
Thank you for your attention

Patrick Bastiaensen, with contributions from
Stéphane Renaudin,
Isabelle Dieuzy,
and Gregorio Torres (OIE)

www.rr-africa.oie.int    m.africa.oie.int
Overview of how tools combine to support a country elimination strategy

Kim Doyle, GARC

2017 PARACON Meeting
Tools to support countries

Technical tools:
- OIE standards, WHO guidance
- Canine Rabies Blueprint, SARE
- Zoonosis prioritization tool
- Rabies Epidemiological Bulletin
- Vaccine usage modelling tools
- Educational training platforms
- Rabies Data Collector (RDC)
- Costing tool (GDREP)

And other support mechanisms:
- Vaccine banks
- In-country trainings / Lab twinning projects

Here want to discuss what a whole package of support to countries might look like.
Supporting countries towards elimination of rabies

**Prioritization Phase**
- Awareness of the feasibility of rabies control
  - REGIONAL NETWORKS
  - ADVOCACY EFFORTS
- Prioritization exercises
  - ZOONOSES PRIORITIZATION TOOL
  - RABIES BURDEN MODEL
  - EPIDEMIOLOGICAL BULLETIN
- Not a Priority
- Rabies is a Priority
- Promotion of outcomes
  - ERN CAMPAIGN

**Assessment Phase**
- Establish One Health Rabies Working Group
- Compile data on Rabies Control Activities:
  - vaccination campaigns
  - lab capacity
  - surveillance
  - dog bite prevention
  - public awareness levels
  - medical and veterinary knowledge and capacity
  - Access to vaccine
  - REGIONAL NETWORKS
  - EPIDEMIOLOGICAL BULLETIN
- Assess overall rabies control capacity
  - SARE ASSESSMENT TOOL
- Set Priorities for capacity building
  - SARE ASSESSMENT REPORT
- Advocate for government support and finances
- Secure funds for implementation of costed national plan
  - WORLD RABIES DAY

**Program Development**
- Design most effective vaccination campaign and determine vaccine and capacity needs
  - BLUEPRINT
  - CDC GDREP TOOL
  - CDC VACCINATION CALCULATOR TOOL
- Create/Revise and cost a national rabies plan.
  - SARE ASSESSMENT
  - BLUEPRINT
  - CDC GDREP TOOL OUTPUTS
- Secure funds for implementation of costed national plan
  - CDC GDREP TOOL OUTPUTS

**Capacity Building and Program Delivery**
- Phased rollout of integrated plan.
  - Establish / Strengthen Surveillance
    - EPIDEMIOLOGICAL BULLETIN
    - RABIES DATA COLLECTOR
  - Establish Community Awareness and education programs
    - RABIES EDUCATOR CERTIFICATE
    - GARC EDUCATIONAL MATERIALS
    - WORLD RABIES DAY
  - Establish / Strengthen One Health Collaboration
    - REGIONAL MEETINGS
    - EPIDEMIOLOGICAL BULLETIN
  - Build laboratory capacity
    - LABORATORY TRAININGS
  - Increase access to PEP
    - BLUEPRINT
    - GARC EDUCATION PLATFORM
    - VACCINE STOCKPILES
  - Implement animal rabies vaccination
    - GARC EDUCATION PLATFORM
    - BLUEPRINT
    - VACCINE BANKS
  - Establish Integrated Bite Case Management Plan
    - INTEGRATED BITE CASE MANAGEMENT TOOL

**Monitoring and Evaluation**
- Evaluation of plan delivery and program needs
  - EPIDEMIOLOGICAL BULLETIN
  - SARE ASSESSMENT TOOL
  - PROGRESSIVE ZONING TOOL
  - FEEDBACK AND REPRIORITIZATION
- Feedback and reprioritization
  - SARE ASSESSMENT REPORT

**Programme Promotion**
- Promotion and Communication of progress
  - GARC OUTREACH
  - WORLD RABIES DAY
  - END RABIES NOW CAMPAIGN
  - DESIGNATION OF RABIES-FREE AREAS
- Designation of Rabies-free areas
  - EPIDEMIOLOGICAL BULLETIN
  - VALIDATION AND VERIFICATION

**Outcomes**
- Awareness of the feasibility of rabies control
- Establish One Health Rabies Working Group
- Compile data on Rabies Control Activities
- Assess overall rabies control capacity
- Set Priorities for capacity building
- Advocate for government support and finances
- Secure funds for implementation of costed national plan
- Phased rollout of integrated plan
- Evaluation of plan delivery and program needs
- Establishment of surveillance systems
- Establishment of community awareness and education programs
- Establishment of laboratory capacity
- Increase access to post-exposure prophylaxis (PEP)
- Implementation of rabies vaccination programs
- Establishment of integrated bite case management plan
- Programme promotion activities
Prioritisation Phase

- Awareness of the feasibility of rabies control

Prioritization of Rabies Control

- Not a Priority
- Rabies is a Priority

Promotion of outcomes

- REGIONAL NETWORKS
- ADVOCACY EFFORTS
- ZOONOSIS PRIORITIZATION TOOL
- RABIES BURDEN MODEL
- EPIDEMIOLOGICAL BULLETIN
- ERN CAMPAIGN
Assessment Phase

Establish One Health Rabies Working Group

Compile data on Rabies Control:
- vaccination campaigns
- lab capacity
- surveillance
- dog bite prevention
- public awareness levels
- medical and veterinary knowledge and capacity
- Access to vaccine

Set Priorities for capacity building

Advocate for government support and finances
Secure funds for planning phase

- REGIONAL NETWORK MEETINGS
- EPIDEMIOLOGICAL BULLETIN
- SARE ASSESSMENT TOOL
- WORLD RABIES DAY
Programme development

- Design most effective vaccination campaign and determine vaccine and capacity needs
- Create/Revise and cost a national rabies plan.
- Secure funds for implementation of costed national plan

- BLUEPRINT ( = GUIDELINES)
- CDC GDREP TOOL
- CDC VACCINATION CALCULATOR TOOL
- SARE ASSESSMENT
- BLUEPRINT
- CDC GDREP TOOL OUTPUTS
- CDC GDREP TOOL OUTPUTS
- UNITED AGAINST RABIES STRATEGY
Capacity Building and Program Delivery

- **Phased rollout of integrated plan.**
  - Establish / Strengthen Surveillance
  - Establish Community Awareness and education programs
  - Establish / Strengthen One Health Collaboration
  - Build laboratory capacity
  - Increase access to PEP
  - Implement animal rabies vaccination
  - Establish Integrated Bite Case Management Plan

- **RABIES DATA COLLECTOR**
- **EPIDEMIOLOGICAL BULLETIN**
- **RABIES EDUCATOR CERTIFICATE**
- **GARC EDUCATIONAL MATERIALS**
- **WORLD RABIES DAY**
- **REGIONAL MEETINGS**
- **EPIDEMIOLOGICAL BULLETIN**
- **LABORATORY TRAINING**
- **BLUEPRINT**
- **GARC EDUCATION PLATFORM**
- **VACCINE BANKS**
- **BLUEPRINT**
- **GARC EDUCATION PLATFORM**
- **VACCINE BANKS**
- **INTEGRATED BITE CASE MANAGEMENT TOOL**
Monitoring and Evaluation

- Evaluation of plan delivery and program needs

- Feedback and reprioritization of resources

- EPIDEMIOLOGICAL BULLETIN
- SARE ASSESSMENT TOOL
- PROGRESSIVE ZONING TOOL

- SARE ASSESSMENT REPORT
Programme Success / Promotion

- GARC OUTREACH
- WORLD RABIES DAY
- END RABIES NOW CAMPAIGN

Promotion and Communication of progress

Designation of Rabies-free areas

- EPIDEMIOLOGICAL BULLETIN
- VALIDATION AND VERIFICATION
Supporting countries towards elimination

Prioritization Phase

- Awareness of the feasibility of rabies control
  - REGIONAL NETWORKS
  - ADVOCACY EFFORTS

Assessment Phase

- Prioritization exercises
  - ZOONOSES PRIORITIZATION TOOL
  - RABIES BURDEN MODEL
  - EPIDEMIOLOGICAL BULLETIN

- Not a Priority
- Rabies is a Priority

Program Development

- Set Priorities for capacity building
  - SARE ASSESSMENT REPORT

- Secure funds for implementation of costed national plan
  - CDC GDREP TOOL OUTPUTS

- Create/Revise and cost a national rabies plan
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Capacity Building and Program Delivery

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- Establish Community Awareness and education programs
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- Establish / Strengthen One Health Collaboration
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  - EPIDEMIOLOGICAL BULLETIN

- Build laboratory capacity
  - LABORATORY TRAININGS

Monitoring and Evaluation

- Evaluation of plan delivery and program needs
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- Feedback and reprioritization
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Programme Promotion

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- Designation of Rabies-free areas
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  - VALIDATION AND VERIFICATION

- Support countries towards elimination
Thanks