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IGAD Regional Animal Health Bulletin



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**INTERAFRICAN BUREAU
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IGAD Regional Animal Health Bulletin

Second Edition, December 2014

An initiative of the Standard Methods and Procedures in Animal Health (SMP-AH) Project, a collaborative project spearheaded by African Union Interafrican Bureau for Animal Resources (AU-IBAR) in partnership with IGAD/IGAD Centre for Pastoral Areas and Livestock Development (ICPALD)

TABLE OF CONTENTS

Acronyms	vi
Preface	vii
Standards Methods and Procedures: From development to use	I
Surveillance and Control of Transboundary Animal Diseases in South Sudan in the recent past	4
Easing recognition of high priority diseases in Tanzania using the Syndromic Manual	9
Isolation of <i>Mycoplasma Capricolum</i> (Mccp) using <i>Mycoplasma Experience</i> medium during Meat Inspection	12
Animal health harmonization initiative along the Uganda-Kenya border in the Karamoja Cluster	15
Cross-border vaccination campaign In border areas between Ethiopia and Somaliland	18
Trends and the concept of livestock export zoning in Kenya	20
The North Eastern Africa livestock council (NEALCO): A regional body for harmonizing regional and export trade in livestock and livestock products	24
Important Events	26

ACRONYMS

Anth	Anthrax
AU-IBAR	African Union Interafrican Bureau for Animal Resources
BQ	Blackquarter
CCPP	Contagious Caprine Pleuropneumonia
CBPP	Contagious Bovine Pleuropneumonia
DVSs	Departments for Veterinary Services
ECF	East Coast Fever
FMD	Foot and Mouth Disease
GDP	Gross Domestic Product
GHoA	Greater Horn of Africa
HS	Haemorrhagic Septicaemia
ICPALD	IGAD Centre for Pastoral Areas and Livestock Development
IGAD	Intergovernmental Authority on Development
LSD	Lumpyskin Disease
MCF	Malignant Catarrhal Fever
MS	Member States
NCD	Newcastle Disease
NEALCO	North Eastern Africa Livestock Council
O	Serotype O of the FMD virus
PPR	Peste des Petits Ruminants
SAT1	Serotype Southern African Territories 1 of FMD virus
SAT2	Serotype Southern African Territories 2 of FMD virus
SAT3	Serotype Southern African Territories 3 of FMD virus
SGP	Sheep and Goat Pox
SMP-AH	Standard Methods and Procedures in Animal Health
SMPs	Standard Methods and Procedures
SOPs	Standard Operating Procedures
STSD	Improving Surveillance in trade-Sensitive Diseases
Try	Trypanosomosis
VSF	Belgium Veterinaires San Frontiers-Belgium

PREFACE

Welcome to the second edition of the IGAD Regional Animal Health Bulletin, a regional bulletin for animal health reports and related issues. This is an initiative of the Standard Methods and Procedures in Animal Health (SMP-AH) Project, a collaborative project spearheaded by African Union Interafrican Bureau for Animal Resources (AU-IBAR) in partnership with IGAD/IGAD Centre for Pastoral Areas and Livestock Development. This edition of the regional bulletin focuses mainly Standard Methods and Procedures, disease reports and livestock trade initiatives in the Greater Horn of Africa

STANDARDS METHODS AND PROCEDURES: FROM DEVELOPMENT TO USE

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Countries in the Greater Horn of Africa (GHOA) were supported to regionally harmonize the differing and sometime conflicting animal health regulations through the development and implementation of the Standard Methods and Procedures (SMPs) for the prevention and control of a number of trans-boundary animal diseases. Standard Methods and Procedures are documents designed to guide and harmonize the work of Departments of Veterinary Services (DVSs) in the Greater Horn of Africa (GHOA) in their approach to the control of trade-related Transboundary Animal Diseases. They are operational protocols to create uniformity in animal disease detection and control procedures throughout the regions. An individual SMP is a protocol for detection and control of a given disease that outlines the measures that must be undertaken. The SMP deals with subject areas of surveillance, laboratory procedures, and disease control and states minimum standards, procedures, and goals that must be met for harmonised regional control of a disease. It is supported with details as specified in Standard Operating Procedures (SOPs) for each subject area that are designed to fit the structure and capabilities of a given nation.

Standard Methods and Procedures (SMP) are intended for regional harmonization of surveillance, diagnostics and control actions against 9 Transboundary Animal Diseases (TADs) and Export Quarantine. Seven countries, namely, Djibouti, Ethiopia, Kenya, South Sudan, Somalia, Uganda and Tanzania, will subscribe to the new framework (SMPs) for surveillance and control of nine trade significant transboundary animal diseases to harmonize regional animal health procedures.



Figure 1: Members of the SMP Technical Working Group (TWG)

To date 10 SMPs have been developed, consisting of nine for trade-related transboundary animal diseases, namely, PPR, FMD, RVF, Brucellosis, CCPP, CBPP, LSD, SGP and Camelpox and one for Quarantine procedures. The SMPs for PPR, RVF, FMD and Brucellosis displayed below have been validated and adopted by Countries in the Greater Horn of Africa.

Validation for the remaining SMPs is in the pipeline, slated for the first quarter of 2015. The 4th Meeting of the Steering Committee for SMP-AH Project held on 4th December 2014 at Fish Eagle Inn, Naivasha, Kenya recommended that Member States mainstream the SMPs into their national animal health programs. To effect this, Chief Veterinary Officers are supposed to issue the necessary instrument (circular) to all stakeholders dealing with animal health. In addition, to facilitate the operationalization and ensure a sustainable uptake of SMPs, the meeting also recommended that costs for implementation of SMPs be estimated

to allow budgetary allocation for member states for sustainability of SMP implementation in the aftermath of the SMP-AH project. The IGAD Centre for Pastoral Areas and Livestock Development is mandated to coordinate the regional implementation of SMPs through an appropriate mechanism that regularly brings together Chief Veterinary Officers to monitor and update the status of implementation of SMPs.

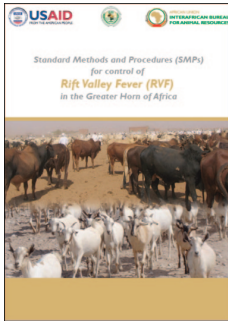


Figure 2: SMP for PPR

Components

- A. Introduction
- B. Definitions
- C. Surveillance and epidemiology
- D. PPR Laboratory Detection, Diagnosis
- E. Disease Control
- F. Reporting and Information management
- G. PPR and Trade
- H. Risk Analysis and Risk mapping

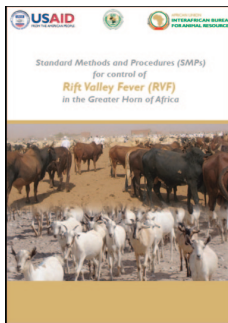


Figure 3: SMP for RVF

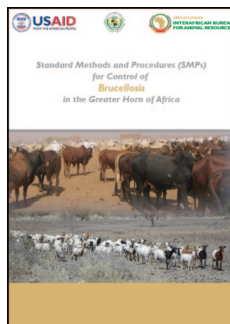


Figure 4: SMP for brucellosis

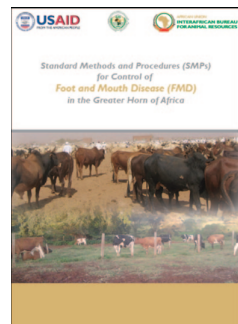


Figure 3: SMP for FMD

SURVEILLANCE AND CONTROL OF TRANSBOUNDARY ANIMAL DISEASES IN SOUTH SUDAN IN THE RECENT PAST

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South Sudan has a land area of 648,000 sq. km and an estimated human population of 8.26 million people. It has an estimated national livestock population of 11.7 million cattle, 12.4 million goats and 12.1 million sheep with an estimated asset value of South Sudanese Pounds of 7.0 billion. Livestock is estimated to contribute 15% of the GDP. The country has a diversity of livestock breeds as depicted in Figures 6 and 7. The main diseases affecting livestock in South Sudan, include, Rift Valley fever (RVF), Peste Des Petits Ruminants (PPR), Foot-and-Mouth Disease (FMD), Lumpyskin Disease (LSD), Sheep and Goat Pox (SGP), Contagious Bovine Pleuropneumonia (CBPP), Brucellosis and East Coast fever (ECF).

Rift Valley Fever outbreak was last reported in 2007/2008 in the Greater Kapoeta area in South Sudan. Since then the disease has not been reported again. Surveillance has continued to generate zero report for RVF.

PPR is an endemic disease in South Sudan. In March 2012, 488 sera were collected from small ruminants from Eastern Equatoria State. Laboratory analysis revealed 153 (31%) out 488 sera to be positive. The Veterinary Department has continued to report suspected cases of PPR, and to conduct investigation, and vaccination based on state request. South Sudan has developed a PPR Control Strategy.

FMD is an endemic disease in South Sudan. A survey was conducted in 2011/2012 under the Livestock Epidemio-Surveillance Program of

VSF – Belgium in seven States in South Sudan. SAT 1, 2 and O were the serotypes found. However, no vaccination against FMD has been carried out. Disease reporting, outbreak investigation and surveillance continue to be conducted. In addition, there is need to develop an FMD Control Strategy for South Sudan.

Lumpyskin disease is an endemic disease in South Sudan. However, little has been done on it regarding surveillance, vaccination or development of a Control Strategy.

Sheep and Goat Pox is an endemic disease in South Sudan. Continuous surveillance is carried out at State-level and vaccination of sheep and goats is based on State request.

Contagious Bovine Pleuropneumonia (CBPP) is endemic in South Sudan. Surveillance is conducted at State-level. In addition, vaccination is based on State request. Treatment of sick animals with long acting antibiotics is a common practice in the States within South Sudan.

Brucellosis is endemic in South Sudan. Surveillance is carried out regularly at State-level. However, no vaccination is carried out and no Control Strategy has been developed for South Sudan.

East Coast fever is endemic in three States, namely, Central Equatoria, Eastern Equatoria and Western Equatoria. However, the disease has recently spread to Jonglei and Lakes States, where serious outbreaks currently occur. Serological testing carried out in 2010 revealed that *Theileria parva* and *Theileria mutans* are the causative agents. Control currently relies on treatment of clinical cases and tick control.

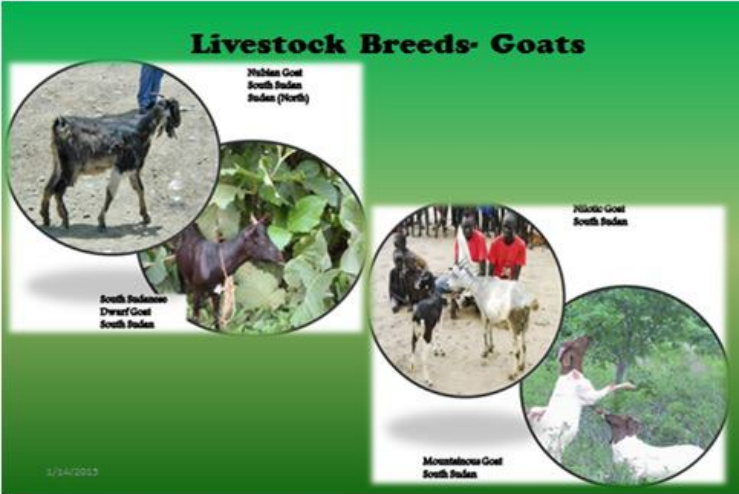


Figure 6: Breeds of Goats-Nubian, Dwarf, Nilotic and mountainous Goat breeds of South Sudan

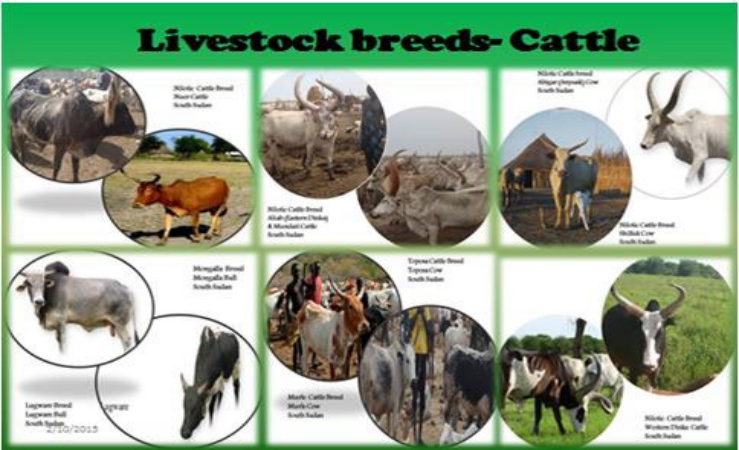


Figure 7: cattle breeds-Nilotic, Nuer, Dinka, Abigar, Lugware and Toposa cattle breeds

Active and passive disease surveillance is carried out in South Sudan, mainly targeting cattle camps, livestock markets and border points. Disease reporting in the field is mainly in form of monthly state reports, outbreak investigation reports and reports from laboratory testing of samples. Several states experience major disease outbreaks affecting

cattle Figure 8 and in small ruminants as depicted in Figure 9. Regular sampling of wild life in parks is carried out in collaboration with relevant authorities.

The annual scale of vaccinations is showed in Table I. Up to 182,592 doses of CBPP, 55,018 doses of CCPP, 282,900 doses of Anthrax, 30,259 doses of haemorrhagic Septicaemia, 153,208 doses of Blackquarter, 206,789 doses of PPR, 135,465 doses of SGP, 31,000 doses of NCD and 3530 doses of Rabies are dispensed annually in South Sudan.

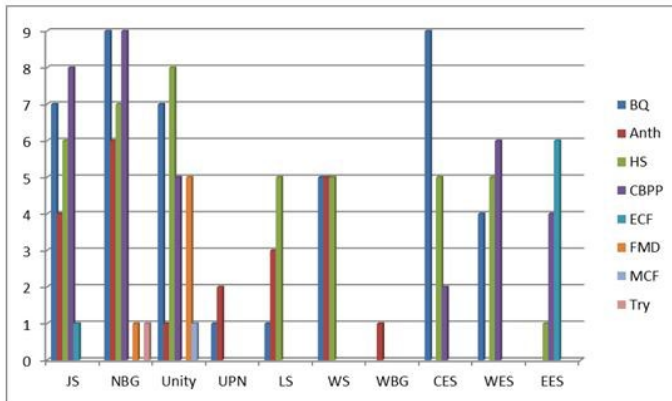


Figure 8: Disease outbreaks in cattle in South Sudan, 2012 distributed by States

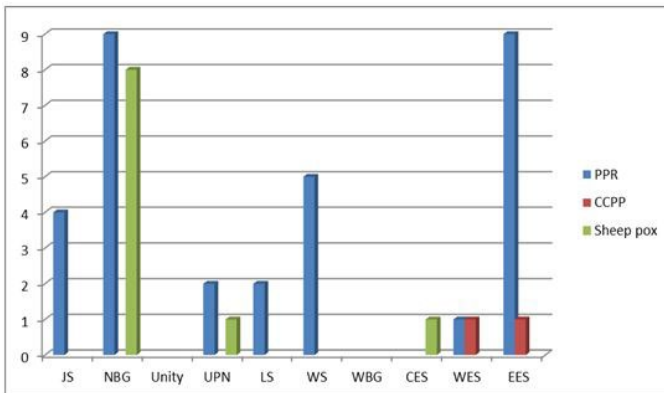


Figure 9: Disease outbreaks in Small ruminants in South Sudan, 2012 distributed by States

Table 1: Vaccination coverage in South Sudan, 2012 distributed by States

State	CBPP	CCPP	Anthrax	HS	BQ	PPR	SGP	NCD	Rabies	Total
WS	30000	10000	105000	38285	37500	30000	0	5000	200	255985
WBG	10000	0	15200	7500	7500	0	10000	0	300	50500
NBG	15000	15000	12200	22500	18500	20000	0	11000	200	114400
Lakes	0	5000	82000	42500	34500	20000	0	11000	230	195230
WES	0	0	0	0	0	0	0	0	0	0
CES	10000	5200	0	3000	15500	5200	0	3000	1800	43700
EES	0	0	0	0	0	0	0	0	0	0
JS	65693	14718	23500	69564	22000	17200	10200	0	600	223475
US	35399	5100	5000	40000	6008	21580	21391	1000	200	135678
UpNS	16500	0	40000	79200	12200	92800	93874	0	0	334574
Total in doses	182592	55018	282900	30259	153708	206780	135465	31000	3530	1353542

EASING RECOGNITION OF HIGH PRIORITY DISEASES IN TANZANIA USING THE SYNDROMIC MANUAL

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Livestock represent on average 13% of the Agriculture Gross Domestic Product (GDP) and about 4.6% of the national GDP in Tanzania. Up to 70% of the poor rural population depends on livestock for their daily income and livelihoods. Statistics for 2013 from the Ministry of Livestock and Fisheries Development indicate that Tanzania has about 22.8 million cattle, 15.6 million goats and 7.0 million sheep. Despite its great potential, the sector is seriously constrained by animal diseases and inadequate investments to enhance its contribution to the development of the country. Effective control of animal diseases dictates thorough knowledge of the disease and appropriate allocation of human and material resources. Managing and eventual allocation of meagre resources requires proper identification and prioritization of animal diseases. Often, prioritization of animal diseases is subjective and highly correlated with the type of livestock husbandry practices, existing disease diagnostic and control capacities and country-specific needs. However effective prioritization of diseases has not been adequately addressed to guide mitigation and control measures for the high incidence of diseases in Tanzania. Against this background, a prioritization exercise was designed recently and employed to address the issue of animal disease prioritization. The criteria used took into consideration the economic impact, control cost impact, public health threats, impact on production, trade restriction, animal welfare and environmental welfare. Others included ethics, moral issues, magnitude of the problem and availability of control materials.

During prioritization, each of the afore-mentioned areas was given weights derived in line with the prioritization objectives, uniformity to

ease computing and country perception on the impact of each disease. Scores were then assigned on the scale of low (1), moderate (2) or high (3) and multiplied with each criteria weight. All scores were summed up to compute the country priority for selected diseases with the highest score value being considered the most important disease.

The prioritization exercise was conducted using a panel of 6 experts. The results revealed 38 diseases were considered to be of paramount significance in Tanzania. Top on the list were: New castle disease(ND), Contagious bovine pleuropneumonia (CBPP), African Swine fever (ASF), Rift Valley fever (RVF), Peste des Petits Ruminants (PPR), Contagious caprine pleuropneumonia (CCPP), Foot and Mouth Disease (FMD), Tick borne diseases (TBDs) and Lumpy skin disease (LSD) (see Table 2).

Interestingly, the prioritization exercise clearly demonstrated transboundary animal diseases to rank among the 8 topmost priority diseases. Correspondingly, most of the diseases of high priority are trade sensitive. This calls for joint efforts between nations and a regional approach in their control and eventual eradication.

Table 2: Ranking of animal diseases as per priorities in Tanzania

Disease name	Total score	Rank
Newcastle Disease	71	1
Contagious Bovine Pleuropneumia	68	2
Africa Swine Fever	67.5	3
Rift Valley Fever	67.5	4
Peste des Petits Ruminants	65.5	4
Contagious Caprine pleuropneumonia	65	5
Foot-and-Mouth Disease	58.5	6
Tick-borne diseases	58	7
Lumpyskin disease	58	7
Trypanosomosis	58	7

Standard procedures and guidelines are necessary for effective management and control of the identified priority diseases in Tanzania. Accordingly, the Standard Method and Procedures in Animal Health (SMP-AH) Project, coordinated by African Union-Interbureau for Animal Resources (AU-IBAR) in partnership with the Intergovernmental Authority on Development (IGAD) with financial support from USAID has developed a manual called 'A field Manual of Animal Diseases by Syndrome'(Figure 10). The manual serves a quick field reference for livestock keepers and field veterinary personnel for reporting animal diseases. The field syndromic Manuals were distributed to all Zonal Veterinary Investigation Centers (ZVIC) in Tanzania to guide disease recognition at the grassroot level by Veterinary Officers (VOs), Animal health assistants, Private veterinary Practitioners and Livestock keepers. The Veterinary Department in Tanzania would like to register appreciation to all farmers who regularly and promptly report diseases and urges other farmers and traders to report any unusual disease event in their herds.

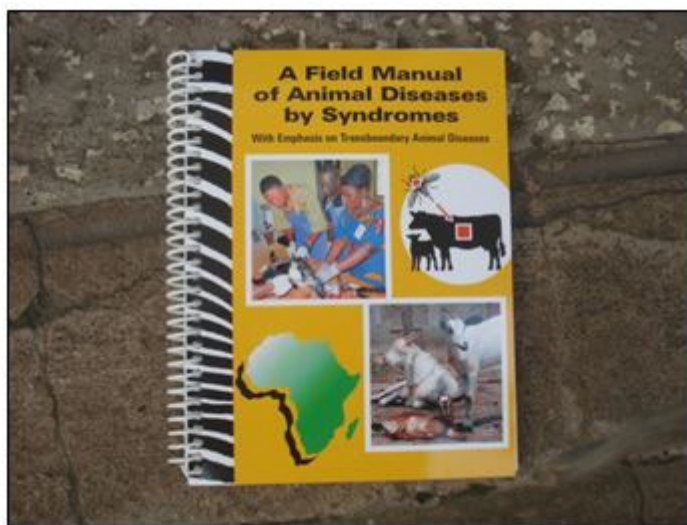


Figure 10: A Field Manual of Animal Diseases by Syndrome

ISOLATION OF MYCOPLASMA CAPRICOLUM (MCCP) USING MYCOPLASMA EXPERIENCE MEDIUM DURING MEAT INSPECTION

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Ministry of Livestock & Fisheries Development, Dar- es-Salaam, Tanzania

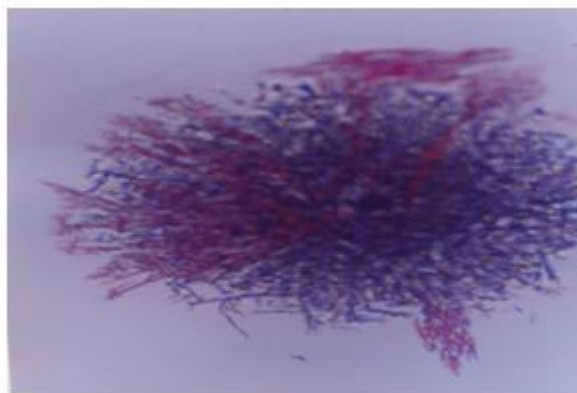


Figure 11: Mccp colonies as observed under stereo microscope

Contagious Caprine Pleuropneumonia (CCPP) is a severe disease affecting goats in Africa, Asia and the Middle East, often leading to major socio-economic losses. CCPP is caused by the bacterium *Mycoplasma capricolum* sub species *capripneumoniae* (Mccp). Since its outbreak in Tanzania in 1998, it has spread widely in many parts of the country. Outbreaks of CCPP often lead to high morbidity and mortality leading to heavy economic losses to livestock owners. Most losses are as a result of animal deaths, treatment costs and condemnation of organs during meat inspection. Proper management of CCPP requires clear identification of risk factors associated with introduction and spread of the disease. CCPP sero-surveillance conducted in Tabora region prior to 2012 revealed exposure of goats to Mccp infection. Subsequent studies through active and passive CCPP surveillance at abattoirs and slaughter slabs in livestock markets followed by examination of organs for pathological

lesions further confirmed the existence of the disease. Field surveillance was complimented by laboratory isolation of Mccp pathogens.

Meat inspection was performed on 531 goat carcasses at abattoirs and slaughter slabs in Nzega, Igunga and Tabora districts between December 2010 and February 2011. A total of 109 tissue specimens, consisting of pneumonic lungs and lymph nodes were aseptically collected for detailed laboratory analysis (Table 3). Collected specimens were submitted to the Central Veterinary laboratory (CVL) in Temeke Dar-es-Salaam for bacteriological culture and isolation of Mccp organisms to confirm presence of the disease. Mccp infection was propagated on tissue culture plates containing mycoplasma experienced medium that was incubated at 37°C for 24-48 hrs and observed for bacteria growth.

The culture results are shown in Table 4. Of the pneumonic lungs that were inoculated onto Mycoplasma experience medium, 21 (19%) of the cultures developed red with dark grains of pigmentation and red crystalline colonies after day 6 of incubation, confirming presence of MccP. The colony morphology and pathological lesions were highly suggestive of Mccp infection as demonstrated in Figure 11.

Table 3: Tissue samples analysed for MCCP infection in Tanzania between December 2010 and February 2011

District	Livestock market slabs	abattoir	Number of Goat Carcasses Inspected	Number of affected lungs collected
Nzega	Ndala	-	81	11
Nzega	Ushirika	-	60	19
Igunga	Igunga	-	75	15
Urambo	-	Urambo	24	10
Tabora	Ipuli	Tabora U	291	45
Total			531	109

Table 4: Isolation result of MCCP infection from Pneumonic lung cultures in Tanzania

District	Specimen origin	No. tested	Specimen used	Mccp isolated specimen
Tabora U	Ipuli L Market	23	Pneumonic lungs	6
Igunga	Igunga market	28	Pneumonic lungs	5
Nzega	Ndala Market	27	Pneumonic lungs	4
Nzega	Ushirika market	20	Pneumonic Lungs	4
Urambo	Urambo abattoir	11	Pneumonic Lungs	2
Total		109		21

A relatively high point prevalence of CCPP has been observed in several parts of Western Tanzania. CCPP control policy in Tanzania relies on the use of long-acting antibiotics mainly Tylosin. Other drugs that are used include Oxytetracycline and Streptomycin. Tylosin is quite effective during the early stages of the disease but is expensive. Given the epidemic nature of the disease outbreaks, the persistent use of antibiotics is not economically viable. Effective control of the disease requires vaccination. However, the current available vaccine-(inactivated CAPRIVAX in the region requires validation through formal field trials before it is officially registered for public use.

In conclusion, the study revealed that Mycoplasma experience medium was an effective means of field isolation of Mycoplasma capricolum sub species capripneumoniae organisms. In addition, CCPP was found to be widespread in Tanzania. Abattoir surveys proved to be an effective approach for surveillance of CCPP.

ANIMAL HEALTH HARMONIZATION INITIATIVE ALONG THE UGANDA-KENYA BORDER IN THE KARAMOJA CLUSTER

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The Uganda-Kenya border within the Karamoja Cluster is a long stretch of porous border with few established border posts. Pastoralists and their livestock (Figure 12) freely move across the border to either Karamoja on the Uganda side or West Pokot and Turkana on the Kenya side in search of pasture and water. Trade in live animals and animal products along the border is very vibrant. Given this state of livelihood, regional cooperation between Uganda and Kenya is imperative for effective disease control. Technical and institutional challenges affecting effective disease control, include, complex disease epidemiology in terms of rapid spread, multiple hosts, insufficient knowledge on epidemiology, and unpredictable outbreaks, making total eradication of diseases difficult to achieve. Furthermore, open international boundaries; poor and non-existent disease control strategies within countries; inadequate human and financial resources; large wildlife-livestock interface; prevalence of vectors such as tsetse flies and ticks; and feed and water scarcity due to frequent droughts leading to frequent livestock migration and sharing of watering points with ‘external’ animals; cultural practices; illegal animal movements; and a devolved government are other challenges.

Embracing of a regional or ecosystem-based approach within the Karamojong ecosystem is the most ideal approach for strengthening harmonization of surveillance and control programs at the border interface and at national level. Accordingly, a cross-border animal health



Figure. 12: pastoralist cattle

harmonization programme was launched in Karamoja, Uganda under the existing Memorandum of Understanding between Uganda and Kenya. Through such a cross-border animal health programme, Turkana County in Kenya procured vaccines and a substantial amount of anthelmintics and acaricides, while Uganda provided logistics and staff to conduct the vaccination of livestock (Table 5). Such a programme ensured livestock on either side of the border were kept safe from diseases. This operationalized the existing MOU between Uganda and Kenya. However, other facilities such as quarantines or holding grounds are required along the border in order to strengthen cross border controls. Other challenges still impeding harmonization of cross-border animal health programmes, include, poor infrastructure, low awareness among livestock keepers and animal health service providers on importance of disease reporting, failure to effectively enforce legal animal health framework due to obsolete laws, lack of harmonized regional animal health policies and disease control strategies; and lack of animal health information sharing within the region.

Table 5: Contribution towards the cross-border animal health programme implemented in the Karamoja Cluster under the MoU between Uganda and Kenya

Turkana County (Kenya)	Karamoja (Uganda)
65,000 doses of CBPP vaccine	Logistics and staff allowances
40,000 doses of PPR vaccine	
40,000 doses of CCPP vaccine	
15,000 doses of FMD vaccine	
Assorted Anthelmintics	
Assorted Acaricide	

CROSS-BORDER VACCINATION CAMPAIGN IN BORDER AREAS BETWEEN ETHIOPIA AND SOMALILAND

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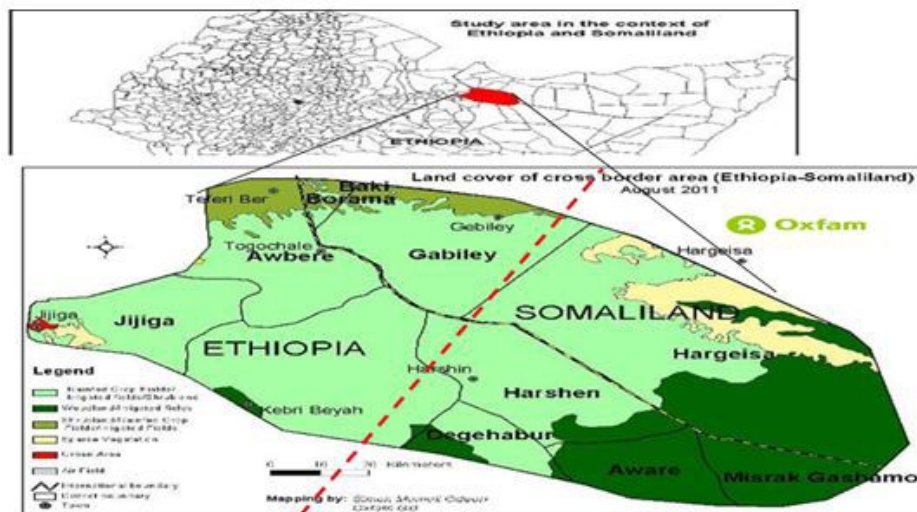


Figure 13: Project area of the OXFAM cross-border livestock project along the Ethiopia-Somaliland border, 2012-2014

OXFAM implements cross-border thematic interventions along the border between Ethiopia and Somaliland (Figure 13) with special emphasis on the control of transboundary animal diseases in areas of Somali Region of Ethiopia and Somaliland. The programme implemented between 2012 and 2014 was geared towards (i) enhancing cross-border trade and increasing market access for livestock producers, (ii) facilitating cross-border mobility of livestock and livestock products, (iii) supporting strategic rehabilitation of water and pasture land, and (iv) diversifying livelihoods of agro-pastoralists in order to reduce risk of recurrent drought hazards. Figures 14 and 15 shows photos of field officers in action during implementation of the vaccination campaign.



Figure 14: Preparation for the Vaccination campaign



Figure 15: Vaccination in progress in Libahful community of Awbare Woreda

Major achievements included the following:

- Annual vaccination campaigns implemented in 2012, 2013 and 2014
- 1,488,897 sheep and goats vaccinated against PPR
- 1,269,726 sheep and goats vaccinated against sheep and goat pox
- 11,965 heads of cattle vaccinated against anthrax
- 186,593 different species of animals treated with antibiotic and anthelmintics and sprayed with acaricides
- 80,816 households directly benefited from the interventions

TRENDS AND THE CONCEPT OF LIVESTOCK EXPORT ZONING IN KENYA

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Disease free zoning was originally conceptualized in 2005 in Kenya, following the Botswana approach. The project concentrated along the Coastal areas, Isiolo, Laikipia, Kajiado, Tana River and Central Kenya regions (Figure 16). According to the OIE Terrestrial Code, a disease free zone constitutes a subpopulation with a distinct health status with respect to a specific disease within a country for which required surveillance, control and biosecurity measures have been applied for the purpose of international trade. Subpopulations may be separated by natural or artificial geographical barriers or, in certain situations, by the application of appropriate management practices.

The main aim of the disease free zoning was to facilitate access of livestock and livestock products to local, regional and international markets in an endemic disease situation. The undertaking was envisaged to (i) increase trade in live animals and animal products to international markets, (ii) to generate additional revenue to the national economy from the livestock sector, (iii) to produce additional quality meat for local and export market, and iv) to create employment. The export zones are located in Coastal areas, Isiolo, Laikipia, Kajiado, Tana River and Central Kenya.

The original idea initiated in 2005 could not take off because of several challenges, including, 1) insufficient funding from government, 2) Donor reservation or preconditions, 3) poor buy-in by stakeholders i.e. farmers, ranchers, conservancies, 4) poor buy-in by veterinary fencing by wildlife authorities, 5) operational challenges during planning entry-exit gates

especially along the highways i.e. Nairobi-Mombasa, Lunga-lunga and Mwatate and 6) Change in the governance structure following devolution.

Given the afore-mentioned challenges, the idea was modified into livestock export zones. This involves identified areas cordoned off with secure and acceptable fencing to form a standard quarantine station for holding animals for requisite period required before export or processing for products. Such livestock export zones are to be initiated at Bachuma, Kurawa and Miritini. The concept is based on a phased approach in disease management where animals are cleaned and certified as being free of identified diseases through an agreed plan between Kenya and the importing country. The livestock export zones have 1) an animal health improvement component, 2) an animal productivity improvement component and 3) a marketing improvement component.

The livestock export zone as illustrated in Figure 17 is composed of an area where appropriate numbers of mature animals are assembled for batch processing; either in the Feedlots and Fattening Center, Slaughterhouse or Quarantine. Then animals are individually identified pre-screened for clinical evidence of disease and thereafter subjected to specific laboratory tests as per the importing country. This is to ensure that they meet required customer specifications (Species, Breed, Age, Sex, weight and finishing quality).

Setting up and management of livestock export zones is a Public-Private Partnership initiative. The national government will set standards and ensure compliance before certifying animals/products. County governments will operate the livestock export zones together with the private sector.

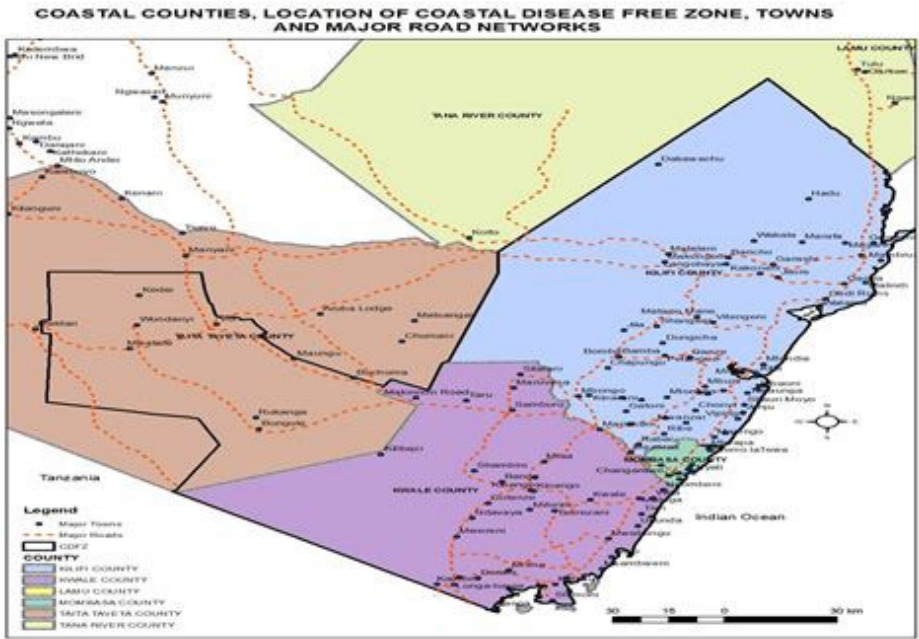


Figure 16: Targeted areas for Livestock export zones in Kenya

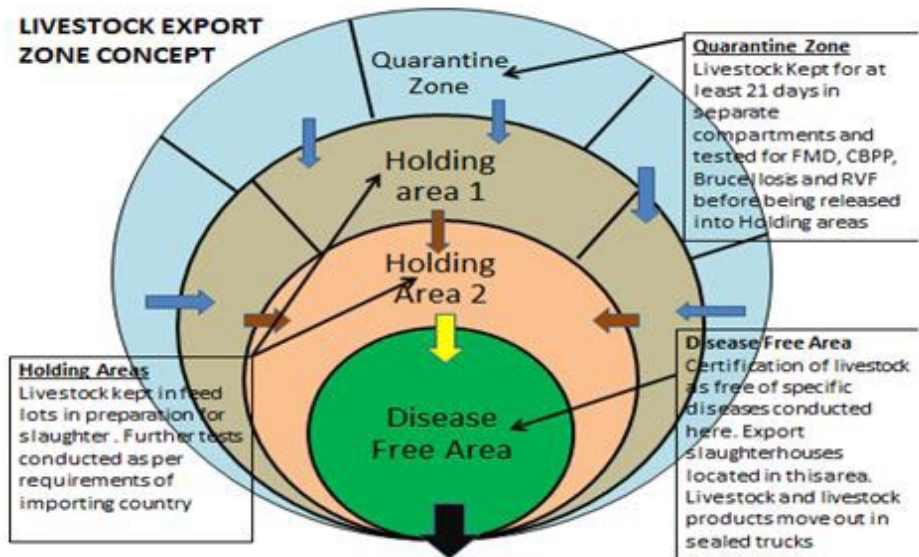


Figure 17: Livestock Export Zone Concept

The whole livestock export zone will be surrounded by a protection zone at least 100 to 200 kms wide (Figures 18) where intensive surveillance and disease control activities are carried out by the respective counties, including, vaccinations, movement control and wildlife relocation.

Planned Infrastructure surrounding the Livestock export zones

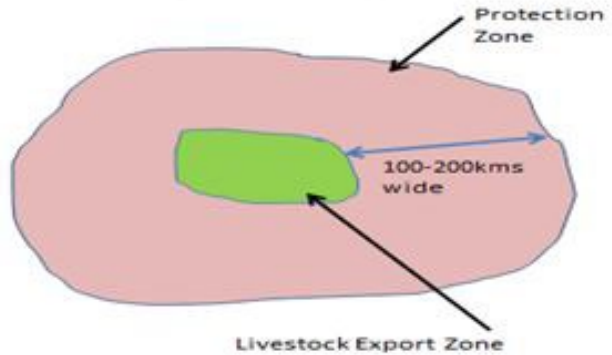


Figure 18: A protection zone surrounding the livestock export zone

THE NORTH EASTERN AFRICA LIVESTOCK COUNCIL (NEALCO): A REGIONAL BODY FOR HARMONIZING REGIONAL AND EXPORT TRADE IN LIVESTOCK AND LIVESTOCK PRODUCTS

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North Eastern Africa Livestock Council is a regional livestock association constituted by national livestock traders' associations drawn from 13 countries, namely: Burundi, Djibouti, Democratic Republic of Congo, Eritrea, Ethiopia, Egypt, Kenya, Rwanda, Somalia, South Sudan, Sudan, Uganda and Tanzania.

In the majority of countries subscribing to NEALCO economic growth is highly dependent on the performance of the livestock sector. NEALCO has a membership in COMESA, EAC and IGAD whose overall human population is estimated at 457,157,124 and covers an area of 9,553,151 square kilometres. The region is estimated to have 157,256,242 cattle, 134,493,940 sheep, 153,901,070 goats, 16,460,571 camels 5,210,000 pigs and 132,206,000 poultry. Despite its great potential, and the fact that livestock production and trade contributes significantly to the national and agricultural GDP of the above-mentioned region, the livestock sector is seriously constrained by inadequate public and private sector investments. Worse still, the performance of the sector is constrained by numerous challenges that prevent the unlocking of the full potential of the sector for improving the livelihood of all value-chain actors. Such challenges affect production, processing, trade and marketing.

Against this background, NEALCO was conceived with its main objective of promoting, coordinating, sharing information and advocating for enhanced trade in livestock and livestock products within the North and Eastern Africa and outside the region.

The council is registered in Kenya as a regional association whose membership is drawn from national apex organizations. Generally, it is open to anyone working within the livestock sector.

NEALCO has had the following milestones in its development:

- First meeting of NEALCO to initiate preparation of its Strategic Plan organized by ICPALD and AU-IBAR, 29th -30th August 2013 in Kampala, Uganda
- ICPALD and AU-IBAR discussed with EAC and COMESA and both RECs recognize NEALCO as multi Rec association and to jointly empowered NEALCO to deliver its mandate
- Consultant hired to draft the strategic document and action plan
- Stakeholders workshop for validation of the NEALCO strategic plan held in Naivasha, 6th -7th March 2014
- Finalized NEALCO's Registration in May 2014
- Finalized the strategic document and action plan for NEALCO
- A desk provided for the NEALCO Secretariat at ICPALD/IGAD Nairobi commencing June 2014
- A meeting for the NEALCO executive committee and relevant partners to discuss the implementation status of the strategic plan, concretize the action plan and enrich the concept note held in Naivasha, 4th July 2014
- Revised concept note on strengthening the institutional capacity of NEALCO to enhance its support for livestock value-chain actors in July 2014
- IGAD/AU-IBAR initiated support for NEALCO to participate in number regional meetings representing livestock stakeholders since July 2014
- Advisory Committee for NEALCO established in July 2014
- Terms of Reference for the Advisory Committee drafted
- Members of the Advisory Committee, including, AU-IBAR, IGAD/ICPALD, FAO, OIE, COMESA/ACTESA, EAC, Chairperson of

NEALCO and Secretary of NEALCO

- NEALCO strategic plan endorsed
- Action plan for 2014 updated with activities up to December 2014
- NEALCO implementation plan for 2015 to 2018 incorporated into strategic plan
- NEALCO logframe (indicators for Monitoring and Evaluation) incorporated into the Strategic Plan
- A Promotion workshop for NEALCO held on 6th to 7th October 2014 (Figure 19)



Figure22: Participants of the NEALCO promotion workshop held on 6th to 7th October 2014

IMPORTANT EVENTS

5th Project Steering Meeting for SMP-AH and 3rd Meeting for STSD, June 2015



ICPALD



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