Update on African Regional Strategy for Rabies Elimination

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United Against Rabies

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Presentation Outline

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- AU-IBAR Overview
- Context of Rabies In Africa
- Overview of the Pan African Strategy to Eliminate Rabies in Africa (PASERA) and Objectives
- Implementation Pillars
- Alignment with United Against Rabies (UAR) Forum Tools
- AU-IBAR’s Role in Regional Coordination
- Challenges and Priorities
- Call to Action

AU-IBAR Overview

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- **Who we are?**
- Specialized Technical Office of the AUC - under the Department of Agriculture, Rural Development, Blue Economy and Sustainable Environment (DARBE)
- **VISION**: An Africa in which animal resources contribute significantly to the reduction of poverty and hunger
- **MISSION**: To provide leadership in the development of animal resources for Africa through supporting and empowering AU Member States and Regional Economic Communities.
- **MANDATE**: To support and coordinate the utilization of animals (livestock, fisheries and wildlife) as a resource for human wellbeing in the Member States of the African Union and to contribute to economic development.

Context of Rabies In Africa

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- Rabies remains a preventable yet fatal zoonotic disease affecting both humans and animals.
- Statistics show that over 21,000 deaths occur annually, 80% in ru areas, and 40% among children under 15 years.
- The ongoing danger of Wildlife rabies from livestock grazing arou national parks and illegal wildlife hunting
- 80% of human cases in rural areas; >40% of rabies deaths in ch
- But Coordinated dog vaccination, paired with appropriate access PEP, delivers a high return on investment and multi-billion-dollar term societal welfare gains. A continent-wide campaign is feasibl is far more efficient than reliance on PEP alone.
- **Economic Impact**: Rabies causes an estimated US$ 280 million livestock losses annually and US$ 773 million in GDP loss, with t welfare gains of USD 9.5 billion projected through coordinated elimination over 30 years

Rabies In Africa

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- In 2025, AU-IBAR—together with Africa CDC, AU-PANVAC, WOAH (OMSA), Swiss Public Health Institute, Afrique One, FAO, WHO, the Regional Economic Communities (RECs) and AU Member States—is finalizing the Pan-African Strategy to Eliminate Rabies in Africa (PASERA).
- The 5th Conference of the Specialized Technical Committee on Agriculture, Rural Development, Water and Environment requested
- the AUC to request AU-IBAR to spearhead the development of the Africa Strategy for the Eradication of Dog-Mediated Rabies by 2030
- In June 2025 the PSERA Strategy team was launched to develop the strategy
- The team is made of AU-IBAR, Africa CDC, PANVAC, Partners and specialists
- As a continental One Health framework, the strategy aligns national and regional action with the global “Zero by 30” goal and is structured around five pillars:

Pan African Strategy to Eliminate Rabies in Africa (PASERA)

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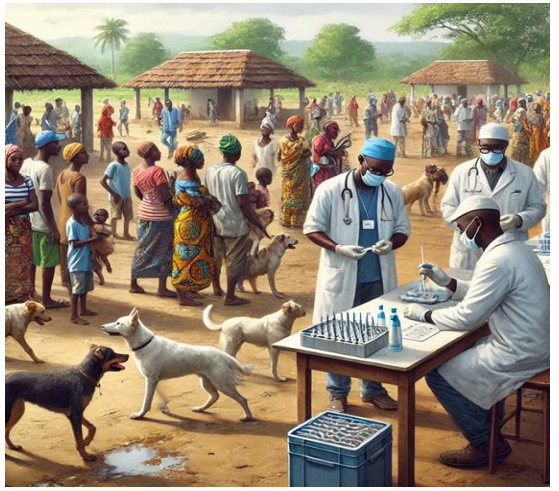
- **Vision of PASERA** : ***To eliminate rabies on the African continent within the next 20–30 years, achieved through mass dog vaccination, enhanced One Health coordination, and sustained community engagement***.
- directly contributes to the global “Zero by 30” goal to end human deaths from dog-mediated rabies by 2030,under the leadership of the tripartite (WHO, WOAH, FAO) and with AU-IBAR’s continental coordination
- PASERA also aligns directly with AU Agenda 2063: The Africa We Want, the One Health Joint Plan of Action (2022–2026), and the AU One Health Zoonotic Disease Strategy (2025–2025), situating rabies elimination as both a public health and development imperative.
- **Overall Objective:** To eliminate human deaths from dog-mediated rabies in Africa through a coordinated One Health approach that unites human, animal, and environmental health sectors, ensuring that all Member States progressively achieve and sustain freedom from rabies.



Strategic objectives/ Pillars of the PASERA

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- **Continental & regional coordination** led by the AU and the RECs (ECOWAS, ECCAS, EAC, SADC, AMU) for synchronized cross-border operations, ensuring no Member State is left behind.
- **Surveillance & laboratories** strengthened through harmonized systems, regional networks, and field-appropriate diagnostics.
- **Community engagement & dog population management** emphasizing responsible ownership, education, and targeted sterilization—replacing ineffective culling.
- **Mass dog vaccination (MDV)** to reach and sustain ≥70% coverage (integrated with other veterinary services and synchronized in border corridors).
- **Equitable PEP & Integrated Bite Case Management** linking bite notification, veterinary investigation, and rapid access to lifesaving care.

Targeted Areas of The Strategy

1. REGIONAL AND CONTINENTAL COORDINATION

Objective: Strengthen the harmonization of efforts and the effectiveness of interventions

- Creation of a continental technical group on rabies (under the leadership of the African Union, WHO, WOAH, FAO, GARC)
- Creation of a One Health coordination platform for rabies at the level of Regional Economic Communities (RECs) (human health, animal health, wildlife)
- Support for national and subregional rabies control plans (drafting, revising, validating, and endorsing national strategic plans) and development of regional roadmaps
- Standardization of regional guidelines and SOPs (vaccination campaigns, surveillance, human and animal case management, development of harmonized indicators)

Targeted Areas of The Strategy

2.TRAINING AND CAPACITY BUILDING

Objective: Strengthen the skills of human and animal health professionals

- Regional Training of Trainers (ToT) (RESEPI, RESELAB)

3. ADVOCACY AND POLITICAL MOBILIZATION

Objective: Strengthen political commitment and prioritize rabies control

- High-level advocacy briefings for ministers of health and agriculture/animal health (AU,)
- Development of advocacy briefs for parliamentarians, decision-makers, and donors
- Integration of rabies into national One Health programs and priority zoonotic disease action plans

4. SURVEILLANCE AND DIAGNOSTICS

Objective: Improve detection, reporting, and response to cases

- Strengthening of regional rabies diagnostic laboratory networks (reference labs)

****** PLEASE FIND AN APPROPRIATE PHOTO

Targeted Areas of The Strategy

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5. MASS VACCINATION AND DOG POPULATION CONTROL

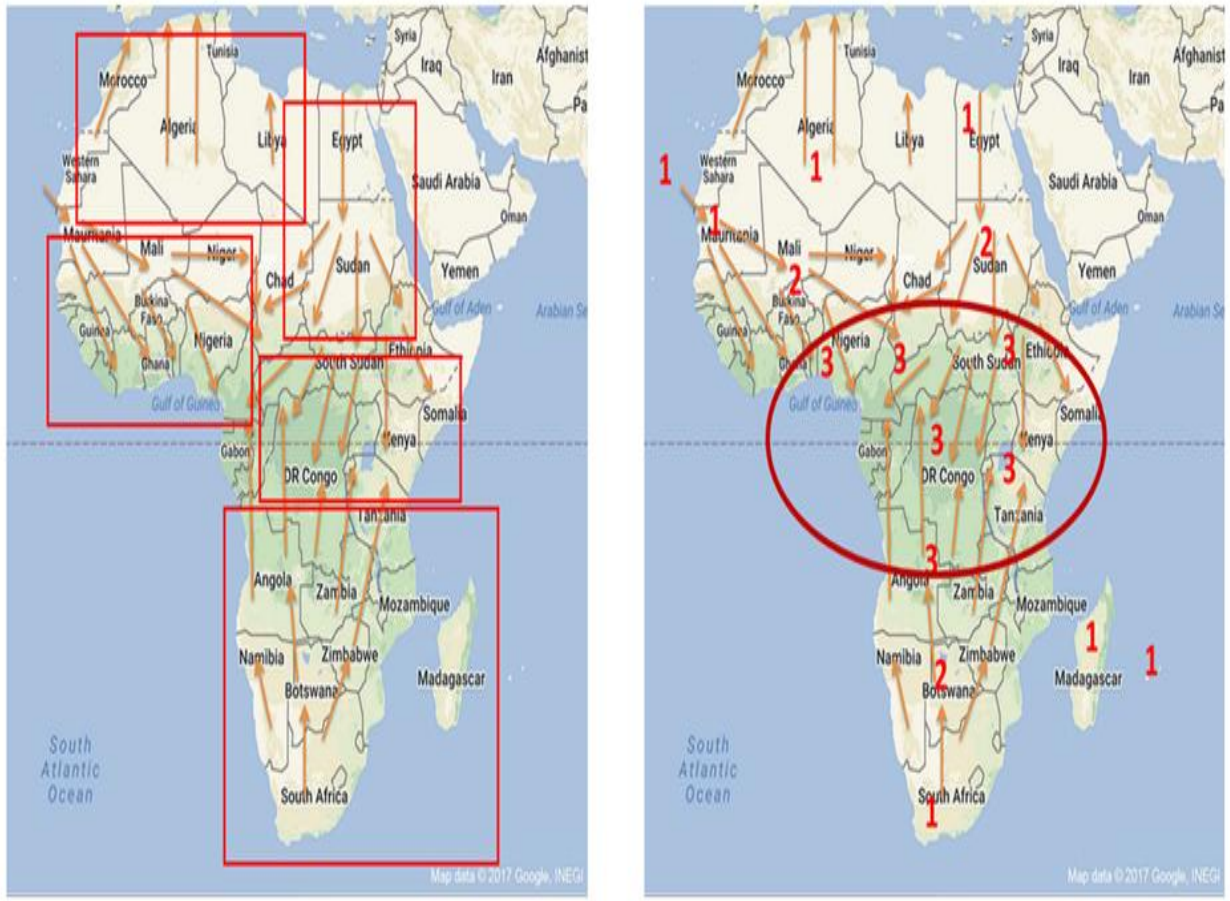
Objective: Achieve 70% vaccination coverage in dogs

- Synchronized cross-border vaccination campaigns in Zones 1, 2, and 3
- Development of shared databases (national, regional, continental; traceability, GPS tracking)
- Acquisition of vaccines (public-private partnership for distribution and local administration)
- Strengthening vaccination logistics
- Regional training on ethical management of dogs

6. INTEGRATED BITE CASE MANAGEMENT

Objective: Improve the management of people exposed to rabies

- Continental advocacy for human rabies vaccine availability in rural areas (GAVI initiative)
- Simplified bite case management protocols for primary health centers



Targeted Areas of The Strategy

7. RESEARCH, INNOVATION AND DATA

Objective: Support evidence-based decision-making

- Cost-effectiveness evaluations of vaccination strategies to guide donor investment
- Dynamic mapping of outbreaks at regional and continental levels
- Regional rabies data platform (integrated into DHIS2 or WAHIS/EMPRES/ARIS)

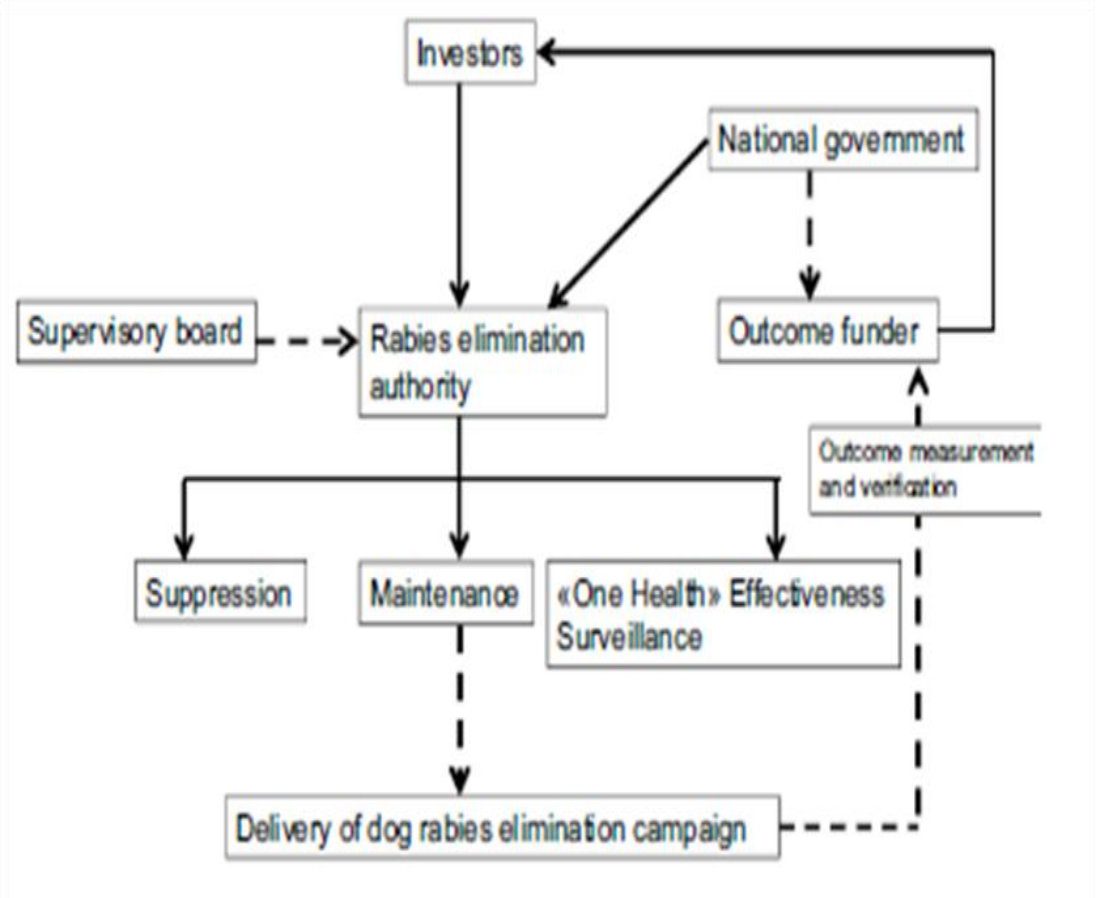
8. MONITORING, EVALUATION AND ALIGNMENT WITH GLOBAL INITIATIVE

Objective: Ensure progress towards “Zero Human Deaths from Dog-Mediated Rabies by 2030”

9. FINANCING & BUDGETING

Objective: establish and maintain sustainable rotational funding for strategy

- Standardised policy brief for advocacy to donors
- Establish a minimum funding base from targeted international donors and philatropic organization
- Increase national governments budgets towards Rabies elimination



ESTIMATED COST FOR ELIMINATION

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	Vaccination cost (USD, 2025)		
Country	**Lower bound**	**Mean**	**Upper bound**
Algeria	11'332'875	21'605'734	40'039'302
Angola	6'950'720	12'731'477	22'685'041
Benin	2'574'520	4'475'793	7'514'967
Botswana	1'197'360	2'285'580	4'255'612
Burkina_Faso	4'210'273	7'047'130	11'333'448
Burundi	1'841'895	3'010'642	4'677'902
Cameroon	5'239'011	9'324'154	16'066'522
Central_African_Republic	743'587	1'262'605	2'052'902
Chad	3'176'691	5'241'382	8'280'717
Democratic_Republic_of_the_C	13'352'868	22'816'811	37'431'764
Congo	1'153'277	2'124'939	3'809'272
Cote_dIvoire	7'505'044	13'299'704	22'947'603
Djibouti	241'705	466'551	875'540
Egypt	43'110'806	75'908'555	129'959'964
Equatorial_Guinea	844'705	1'627'579	3'063'505
Eritrea	518'433	881'786	1'433'718
Eswatini	589'376	1'009'823	1'679'151
Ethiopia	25'192'706	41'692'578	66'116'421
Gabon	827'436	1'732'592	3'496'487
Gambia	335'190	596'562	1'022'195
Ghana	7'906'160	14'223'984	24'833'122
Guinea	2'711'502	4'606'429	7'518'848
Guinea_Bissau	320'858	547'704	897'568
Kenya	15'477'074	26'267'766	43'060'178
Lesotho	473'118	793'883	1'279'258
Liberia	685'144	1'185'667	1'971'310
Libya	2'192'628	4'350'740	8'355'452
Malawi	3'687'604	6'057'897	9'482'446
Mali	3'704'012	6'330'036	10'429'767
Mauritania	936'329	1'658'603	2'845'658
Morocco	10'327'733	19'005'653	33'999'053
Mozambique	4'579'039	7'721'851	12'421'171
Namibia	1'044'513	1'882'535	3'308'604
Niger	4'766'299	7'793'158	12'185'124
Nigeria	50'359'788	88'944'263	152'500'406
Rwanda	2'745'635	4'522'855	7'121'401
Senegal	3'585'547	6'223'769	10'495'147
Sierra_Leone	1'121'081	1'905'866	3'103'304
Somalia	2'156'373	3'687'658	6'039'378
South_Africa	27'198'172	51'315'802	94'566'545
South_Sudan	1'589'281	2'613'496	4'089'663
Sudan	7'723'907	12'967'364	20'935'975
United_Republic_of_Tanzania	12'971'185	21'936'752	35'735'071
Togo	1'499'114	2'560'453	4'209'869
Tunisia	3'385'249	6'373'197	11'654'194
Uganda	9'030'229	14'991'828	23'847'067
Zambia	3'546'734	6'101'902	10'096'798
Zimbabwe	4'133'637	7'014'735	11'505'481
Total estimates	**320'796'426**	**562'727'822**	**957'229'891**

IMPLEMENTATION PILLARS

- PASERA emphasizes a coordinated One Health approach that integrates:
- **Vaccination Strategy**: Mass dog vaccination (≥70% coverage threshold) for at least three consecutive years, using parenteral and oral vaccines.
- AU-PANVAC certification ensures vaccine quality across the supply chain.
- **Human Health and PEP**: Access to post-exposure prophylaxis (PEP)
- integrated bite case management. with veterinary surveillance to enhance response.
- Responsible dog population management, and
- Community education and political advocacy.

- **Stepwise Approach Towards Rabies Elimination (SARE)Approach**:for both monitoring and planning, enabling countries to move systematically from endemic to free status
- . Implementation is phased through REC-driven regional frameworks (ECOWAS, EAC, SADC, ECCAS, AMU), ensuring harmonized surveillance, synchronized vaccination along borders, and shared data platforms

Alignment with United Against Rabies (UAR) Forum Tools

- PASERA is structurally aligned with ***Zero by 30*** across four levels:
- **Goal Alignment**: Zero human deaths from dog-mediated rabies by 2030.
- **Operational Alignment**: Focus on 70% dog vaccination, community awareness, and PEP access.
- **M&E Alignment**: Uses UAR's global indicators and MDE framework for consistent monitoring.
- **Validation Alignment**: Supports WOAH endorsement of national control programmes and WHO validation of elimination as a public health problem

- **National Strategic Plan (NSP) Template**:The Template provides a One Health blueprint for Member States to design nationally endorsed rabies plans, bipartite between Ministries of Agriculture and Health
- AU-IBAR promotes its use through REC-facilitated technical support and ministerial commitments
- **Minimum Data Elements (MDE):**The framework defines 22 core data points across human cases, exposures, animal cases, dog vaccination, and PEP.
- These indicators standardize surveillance addressing Africa's biggest gap: comparable, evidence-based rabies data.
- Countries using the MDE now generate structured, high-quality data for policy and global reporting

Alignment with United Against Rabies (UAR) Forum Tools

UAR tool	Application Within PASERA	Impact
NSP template	Used to align national plans within RECs and Member States	Ensures One Health, multi-sectoral alignment
MDE Framework	Adopted in surveillance design and data harmonization	Standardized reporting; improved comparability
M&E Indicators	Integrated into PASERA monitoring matrix	Enables consistent progress tracking
SARE Tool	Used for self-assessment and action planning	Guides national stepwise improvements
ORV Guidance (2023)	In pilot projects for free-roaming dogs	Complements parenteral vaccination

AU-IBAR's Role in Continental and Regional Coordination

- AU-IBAR serves as the continental coordination hub through;
- Anchoring PASERA under the African Union One Health Platform, aligning with existing frameworks.
- Working with RECs and Member States to harmonize surveillance and vaccination with special focus on joint cross border vaccination.
- The PASERA will be submitted to the upcoming STC-ARDWE of AUC for endorsement from 20-24 October 2025 in Addis Ababa, Ethiopia
- Ministerial meeting STC-2025 will submit the PASERA for adoption by the Heads of Sates and Governments of Africa Union during the AU Heads of States Summit in February 2026.
- Partnering with AU-PANVAC for vaccine quality assurance.
- Advocating for integration of rabies into health security and climate-resilient livestock systems.
- Mobilizing political and financial commitment at ministerial and continental levels.
- This regional coordination ensures that no Member State acts in isolation, No MSs should be left Behind mitigating reintroduction risks and strengthening collective progress toward Zero by 30.
- Broader coalition ….

Challenges and Priorities

- Persistent challenges include:
- Inconsistent vaccine availability and funding cycles,
- Fragmented data submission to WHO/WOAH,
- Limited cross-border coordination,
- PEP affordability and cold chain gaps,
- Weak integration of rabies into national health security budgets.
- PASERA's next phase prioritizes sustainability, national funding integration, and operational research for Africa-specific innovations (ORV feasibility, local vaccine production, digital One Health systems).
- . **How the UAR Forum Can Further Support Priority areas**
- Joint M&E Support Missions: Align national indicators with the Zero by 30 framework.
- Training on MDE and SARE Tools: For REC focal points and country teams.
- Technical Backstopping: On ORV rollout and One Health coordination.
- Facilitation of GAVI and donor linkages for sustainable PEP access.Continued data harmonization under UAR's digital submission architecture

AU-IBAR priorities for 2025–2026

Priorities at continental, regional and AU Member State levels:

1. **Operational governance:** establish AU-level One Health coordination; support regional platforms and national rabies committees.
2. **Scale-up vaccination:** support planning/financing of **Mass Dog Vaccination to reach ≥70%**, using central-point and door-to-door models, with oral vaccination where appropriate.
3. **Equitable access to human PEP & IBCM to save lives:** link bite case management to veterinary services; leverage the **Gavi** window to reduce delays and costs.
4. **Laboratories & surveillance:** expand rapid diagnostic tests, data-sharing and digital reporting across national, regional and continental networks.
5. **Monitoring & accountability:** deploy a continental **M&E** framework (indicators, dashboards, annual reports, independent audits).
6. **Sustainable financing:** combine mobilization of **national budgets**, **pooled procurement** (e.g., vaccine banks), **innovative and adaptive financing mechanisms**, and **co-financing**.

Call To Action

- Eliminating rabies in Africa is achievable, shared responsibility that demands united, sustained action. Through AU-IBAR's coordination, UAR's tools, and global solidarity, we can secure a rabies-free Africa and realize the vision of "Zero by 30.""One Continent, One Health, Zero Deaths."
- There is need to strengthen our collaboration, across governments, RECs, and partners, to align national, regional, and global efforts under the PASERA framework.
- Together, through collective commitment and resource mobilization, we can deliver a rabies-free Africa in our lifetime.
- Advocate for investments, coordination, collaboration and partnerships, for the Continental Rabies Elimination program
- Continentally coordinated program for Rabies Elimination and resource mobilization for its implementation

Thank you | Merci | شكراً لك | Obrigado | Gracias | Asante

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