



World Organisation
for Animal Health
Founded as OIE

Country Presentation

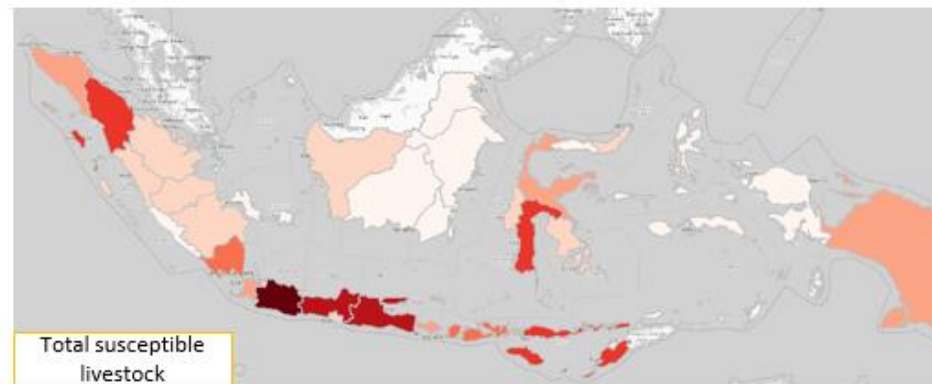
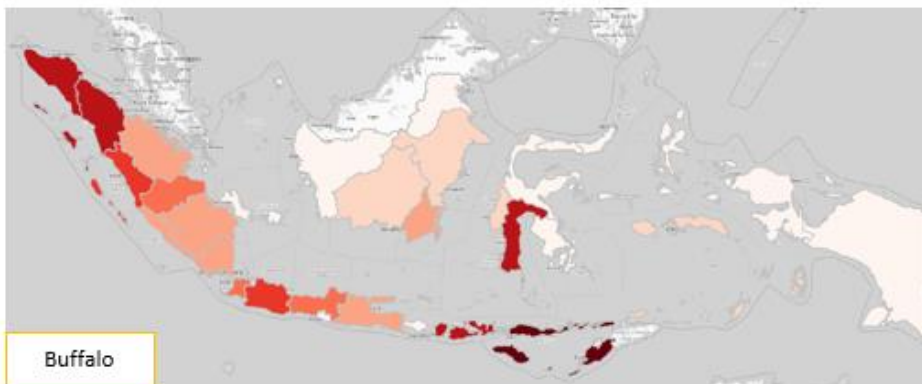
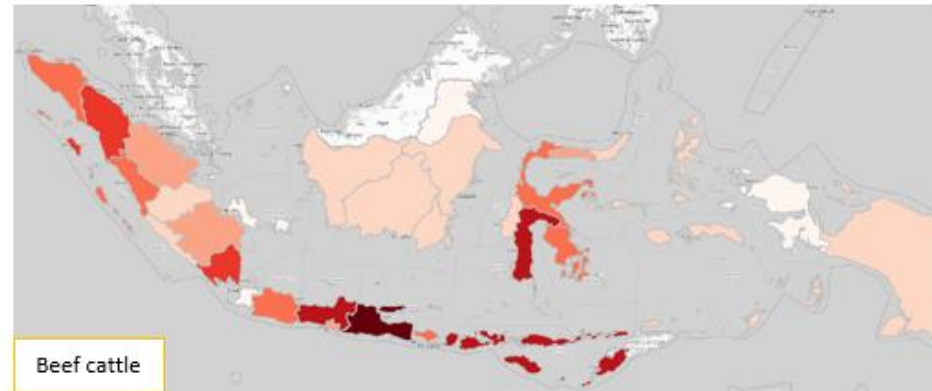
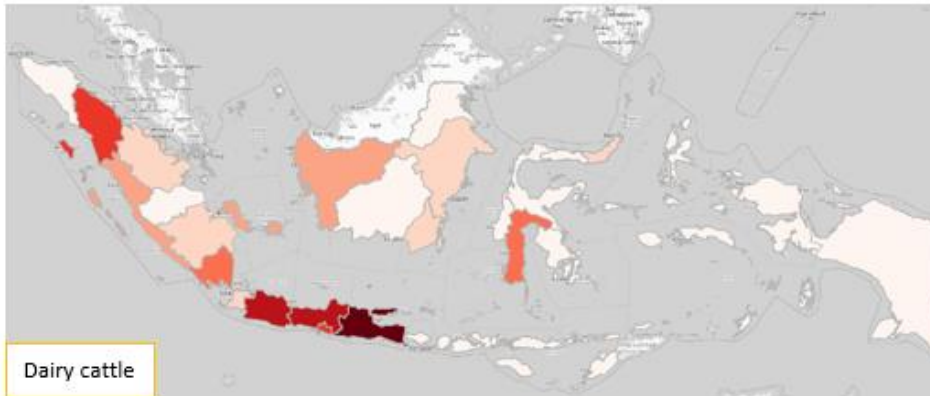
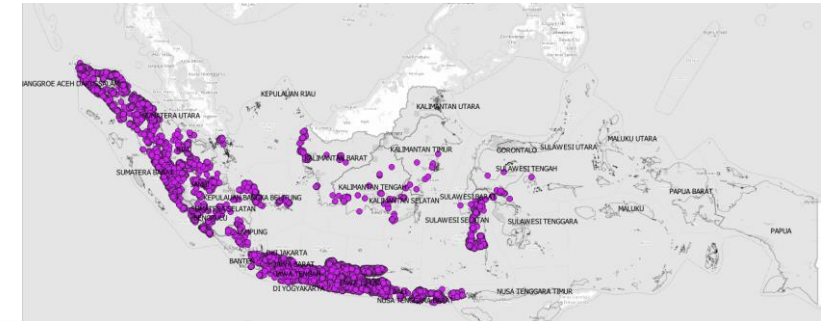
LESSON FROM FMD INCURSION IN FMD FREE COUNTRY

Country name: INDONESIA

Affiliation: DIRECTORATE OF ANIMAL HEALTH, DIRECTORATE GENERAL
OF LIVESTOCK AND ANIMAL HEALTH SERVICES, MINISTRY OF
AGRICULTURE

Distribution of Livestock Population (livestock statistic 2021)

Goats	Sheep	Pigs	Beef cattle	Dairy cattle	Buffalo
19.177061	17.771145	9.071731	18.219885	578591	1.209129



LESSON FROM FMD INCURSION IN INDONESIA

1

Predict

2

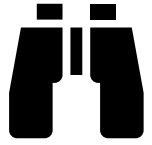
Prevention

3

Early
detection

4

Early
response



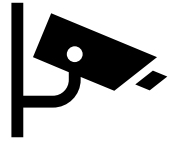
PREDICT

- Risk analysis team only on ad hoc basis: need to establish a risk analysis team that involve relevant sector within animal health sectors and related institutions from other sectors
- Trainings for risk assessment are conducted irregularly and only for importation risk analysis: need to have a scheduled training and refresher training that involve multisector relevant to the risk of FMD incursion



PREVENTION

- Movement control can only be enforced at the official entry points due to limited resources: need to map the risk of animal disease introduction so the resources can be allocated efficiently
- Lack of movement control between administrative areas on the same land: check points between areas have not been efficient to limit the spread of FMD
- Initiation for individual ID system for livestock: eartag, cable ties linked to iSIKHNAS have been implemented.



EARLY DETECTION

- Limited activities on public awareness and training: difficulties to recognize the clinical signs of FMD (clinical signs were mistakenly diagnosed BEF (non-priority disease) increasing report of BEF in iSIKHNAS was observed)
- Limited laboratories that were capable of performing diagnostic test for FMD: currently 8 DIC's, Pusvetma and NVDAL are able to conduct PCR and serological test for FMD



EARLY RESPONSE

- Simulation exercises for FMD introduction preparedness is irregularly conducted (last simulation was in 2014 followed up by improving the simulation exercise guideline): lack of rapid response in general
- Limited access to emergency funding: delay in deploying rapid response team to affected areas
- Difficulties to access vaccines: need to discuss effective mechanism for countries to access effective vaccine
- Improved coordination and collaboration among relevant sectors under National Agency for Disaster Management (BNPB) at central level and Local Agency for Disaster Management (BPBD) for at provincial and district level
- Limited human resources to implement vaccination: involve vet students, police officers and army to support



Thank You