World Organisation for Animal Health

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WOAH Collaborative Centre Reports Activities 2025

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CENTRE INFORMATION

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TOR 1 AND 2: SERVICES PROVIDED

1. Activities as a centre of research, expertise, standardisation and dissemination of techniques within the remit of the mandate given by WOAH

Category	Title of activity	Scope
		1) As part of the 2023 Consolidated Appropriations Act, Congress directed CDC to collaborate with interagency partners to lead the development a formalized multisectoral, One Health coordination mechanism for the federal government. United States One Health Coordination Unit (U.S. OHCU) was launched in January 2024. The U.S. OHCU is built on shared interagency leadership from CDC, Department of the Interior (DOI) and U.S. Department of Agriculture (USDA) and brings together 26 agencies from multiple sectors to enhance collaboration that benefits human, animal, plants, and environment health through activities such as promoting health, enhancing health-sustaining resources, emergency preparedness, and the prevention, detection, and response to zoonotic diseases. The 2023 Consolidated Appropriations act is linked here: https://www.congress.gov/bill/117th-congress/house-bill/2617/text 2) The U.S. One Health Coordination

		Unit-New World Screwworm Interagency Working Group (U.S. OHCU-NWS) was formed to enhance New World screwworm (NWS) prevention, preparedness, and response activities and enhance interagency coordination to better address NWS at the interface of animal, human, and environmental health (Established June 2025; co-led by USDA, CDC and DOI). The U.S. OHCU-NWS represents a whole-of-government response to protect U.S. livestock, wildlife, pets, and public health from NWS. The U.S. OHCU-NWS Subgroup on Companion Animals is a subgroup of the U.S. OHCU-NWS created to focus on the interagency coordination for NWS and its impact on companion animals (co-led by CDC and USDA). Outputs include New World Screwworm: Veterinary Considerations for Dogs and Cats that Travel Internationally (https://www.aphis.usda.gov/sites/default/files/nws-vet-guidance-cats-dogs.pdf). Federal Coordination for NWS: https://www.aphis.usda.gov/livestock-poultry-disease/stop-screwworm/federal-coordination. Whole-of-government NWS website: www.screwworm.gov 3) Congress directed CDC to collaborate with USDA, DOI, and other federal agencies partners to create a One Health framework to address zoonotic diseases and advance public health preparedness in the United States. CDC, DOI, and USDA with 23 federal partners published the National One Health Framework to Address Zoonotic Diseases and Advance Public Health Preparedness in the United States (NOHF-Zoonoses) January 2025. The NOHF-Zoonoses will inform One Health collaboration across the U.S. government for the next 5 years, describing a common vision, mission, and goals for key federal partners involved in implementing the One Health approach to protect people, animals, and our shared environment from zoonotic diseases and other One Health threats within the United States. The framework establishes goals and objectives to strengthen coordinated federal activities in the United States and better prepare for the next potential threat. https://www.cdc.gov/one-health/media/pdfs/2025/01/354391-A-NOHF-ZOONOSES-508_FINAL.pdf 4a) The One Health Federal Interagency Coordination Committee (OH-FICC) coordinates the federal government of the United States to collaborate across public health, agriculture, wildlife, and environment sectors and with other One Health partners to address zoonotic diseases and related One Health threats. CDC coordinates the OH-FICC call to bring together representatives from 26 key federal agencies representing multiple departments across the U.S. government to coordinate One Health collaboration related to prevention, detection, control, and response to zoonotic diseases and related One Health issues across federal agencies; Focus areas over the past year included emerging infectious and zoonotic diseases like Highly Pathogenic Avian Influenza H5N1 in dairy cattle and other animals and related One Health issues like New World Screwworm. Multiple federal agencies and departments including CDC, USDA, DOI, and others are involved. Partners

		from other WOAH collaborating centres located in the United States are invited to participate. Additional information can be found on the Federal One Health Coordination website. https://www.cdc.gov/one-health/php/about/federal-one-health-coordination-1.html 4b) CDC coordinates a monthly One Health State, Tribal, Local, Territorial (STLT), and Federal Update Call to bring together STLT partners from public health, animal health, and environment sectors on the One Health aspects of priority zoonotic diseases to share timely updates, disseminate information, and address concerns. Invitees included state, local, and territorial public health officials, animal health officials, and wildlife officials and OH-FICC members. 4c) CDC coordinates a quarterly U.S. OHCU One Health Partners Webinar to present news and key updates on the One Health aspects of emerging zoonotic diseases and other One Health issues, as well as guidance and resources and to provide a platform for non-governmental partners to ask questions. Attendees include variety of non-governmental partners including organizations, academic, industry, and others. Partners from other WOAH collaborating centres located in the United States are invited. 5) CDC has worked with the Council of State and Territorial Epidemiologists to promote a One Health collaboration between federal, state, and local public health and animal health authorities and state youth agriculture groups through a program called Influenza and Zoonoses Education Among Youth in Agriculture. This innovative program educates youth about zoonotic diseases shared between animals and people (including emerging zoonoses), delivers disease prevention messages, and strengthens One Health networks among state human and animal health departments and agricultural communities across rural America. For more information and to access globally available prevention resources, please visit https://www.cdc.gov/one-health/media/pdfs/youth-in-ag-508.pdf and https://www.cdc.gov/one-health/php/about/index.html 6) CDC manages the Healthy Pets, Healthy People website. This website provides a global resource with up-to-date information on zoonotic diseases related to people and interactions with pets, livestock, and wildlife, including U.S. outbreaks linked to animals and animal products. The website also provides resources for public health and animal health officials (domestic and wildlife), as well as veterinarians and human healthcare providers; educational materials on staying healthy around animals; guidelines for preventing zoonoses in high-risk people, and in public settings such as petting zoos; and resources for pet owners on how to prepare pets for disasters. In 2025, the website received more than 800k views. www.cdc.gov/healthy-pets 7) PulseNet is a national laboratory network that connects foodborne, waterborne, and One Health–related illness cases to detect outbreaks. PulseNet uses DNA fingerprinting of bacteria making people sick to detect thousands of local and multistate outbreaks. Since the network began in 1996, PulseNet has

	1) United States One Health Coordination Unite (U.S. OHCU) 2) U.S. OHCU-New World Screwworm Interagency Working Group (U.S. OHCU-NWS) 3) National One Health Framework to Address Zoonotic Diseases and Advance Public Health Preparedness in the United States (NOHF-Zoonoses), 2025-2029 4) Communication Platforms of the U.S. One Health Coordination Unit to reach federal, State, Tribal, Local, and Territorial (STLT), and non-governmental partners 5) Influenza and Zoonoses Education for Youth in Agriculture in the United States 6) Healthy Pets, Healthy People 7) PulseNet 8) National Antimicrobial Resistance Monitoring System (NARMS) 9) Animal Contact Outbreak	improved our food safety systems through identifying outbreaks early. This allows investigators to find the source, alert the public sooner, and identify gaps in our food safety systems that would not otherwise be recognized. PulseNet International performs a similar role for foodborne illnesses globally. 8) NARMS is a collaboration among state and local public health departments, CDC, the U.S. Food and Drug Administration (FDA), and the U.S. Department of Agriculture (USDA). This national public health surveillance system tracks changes in antimicrobial susceptibility of certain enteric (intestinal) bacteria found in ill people (CDC), retail meats (FDA), and food animals (USDA) in the United States. The NARMS program at CDC helps protect public health by providing information about emerging bacterial resistance, the ways in which resistance is spread, and how resistant infections differ from susceptible infections. https://www.cdc.gov/narms/index.html 9) CDC's Animal Contact Outbreak Surveillance System (ACOSS) collects information from state, local, and territorial health departments about outbreaks of human enteric illness linked to contact with animals or their environments. Animal contact outbreaks provide important insights into the way pathogens spread from animals to people. They also help us understand which pathogens are linked commonly to which animals, and how we might prevent illnesses. https://www.cdc.gov/nors/about/acoss.html 10) Providing safe food for consumers is a common goal shared by partners in public and animal health, food animal production, and meat, poultry, egg, and dairy food industries. Recent food safety challenges prompted representatives of industry associations, veterinary associations, state and federal agencies, and other allied entities to form a private-public workgroup to develop a veterinary training module for the USDA-APHIS National Veterinary Accreditation Program (NVAP). The goals of the module are to increase awareness among accredited veterinarians that preharvest factors can affect food safety and to promote on-farm strategies to reduce pathogens causing human foodborne illness, thereby protecting the national food supply. This module will provide valuable resources and education for accredited veterinarians to help producers continue to raise healthy animals. Improving the health of food animals leads to safer food and protects public health. The private-public partnerships developed in this effort can be leveraged for future collaborative projects to promote One Health. 11) In 2025, CDC provided technical assistance for VHF outbreak response and preparedness and laboratory diagnostic support to a number of countries globally, including Ebola in the Democratic Republic of the Congo, Marburg virus in Ethiopia and Tanzania, Sudan virus in Uganda, , Crimean-Congo hemorrhagic fever (CCHF) in Uganda, Rift Valley fever in Uganda, Senegal and Morrocco, Hantavirus in Paraguay (including imported cases to the US), and Nipah virus in Bangladesh. 12) CDC continues to work closely with partners in Cameroon, Democratic Republic of Congo, and Nigeria to support

Disease control (true)	Surveillance System (ACOSS) 10) Collaborative Development of a National Veterinary Accreditation Program Module on "The Veterinarian's Role in Microbial Preharvest Food Safety" 11) Technical assistance for Viral Hemorrhagic Fever (VHF) outbreak response and preparedness, multiple countries 12) Monkeypox outbreak response & surveillance capacity 13) Zoonotic monkeypox transmission and the human-animal interface 14) Anthrax outbreak response and preparedness in Thailand and Uganda 15) U.S. Government Combating Antibiotic Resistance Bacteria Task Force 16) 2024 Influenza A/H5N1 Coordinated Response 17) Influenza A/H5N1 Prevention Strategies and Guidance 18) Dissemination of Influenza A/H5N1 related Information 19) Leptospirosis outbreaks following severe weather, Jamaica and the Philippines 20) Audience research on harmful algal blooms (HABs) 21) NWS Resurgence in the Americas	laboratory-based surveillance of disease and technical input on outbreak investigations of monkeypox. 13) CDC continues to work closely with in-country colleagues to better understand and characterize the interactions between humans and wild animals in monkeypox endemic areas, which would contribute to improve the ability to detect and control infections closer to their source: · CDC trained teams in Nigeria, Cameroon, and DRC, to capture, sample, and test animals for monkeypox virus infections. These efforts are focused on identifying animals that could be naturally infected with monkeypox virus and potentially transmitting the virus to human populations. · CDC is working with in-country partners to use mixed methods (qualitative and quantitative) interviews to examine human behaviors toward wild game that could be considered as risk factors for zoonotic transmission of the virus at the human-animal interface. These studies will provide missing data about how people in Nigeria and DRC interact with exposed to potentially infected animals. · CDC is collaborating with in-country partners to assess activity patterns and relative abundances of suspected monkeypox reservoirs in disturbed and undisturbed environments in rural DRC, which will provide information on how the ecological aspects of these animals may increase the risk of human monkeypox infections at the human-animal-environment interface. 14) In May 2025, an anthrax outbreak including one fatality was reported in an area of Thailand with no previous records of anthrax outbreaks. CDC's Division of High-Consequence Pathogens and Pathology (DHCPP) held trainings with the Thailand Ministry of Health, Thai National Institute for Animal Health, and CDC Country Office in Thailand less than a year earlier, and following a widespread investigation, Thai officials identified possible sources for exposure and identified over 600 people potentially at risk for anthrax from slaughtering animals or consuming raw meat. Recognizing the need for further prevention and control, over 1000 animals were subsequently vaccinated in the area. Following the outbreak, CDC supported a 7-1-7 timeliness analysis of the outbreak response among the Thai Ministry of Health and Department of Livestock Development, evaluating factors that affected early response actions both within and across sectors. CDC continued to provide guidance during the outbreak response and additional refresher trainings for Thai FETP fellows. 15) The United States Combating Antibiotic-Resistant Bacteria (CARB) Task Force addresses combatting antimicrobial resistance across One Health through multisectoral collaboration with U.S. Government departments and agencies and other partners and leads the implementation of the U.S. National Action Plan. The next U.S. National Action Plan is currently in development . https://aspe.hhs.gov/reports/national-action-plan-combating-antibiotic-resistant-bacteria-2020-2025 16) CDC, along with federal partners, including the U.S. Department of Agriculture (USDA), Food and Drug Administration (FDA), National Institute of Health

		(NIH), and Administration for Strategic Preparedness and Response (ASPR), as well as partners at the state, tribal, local, and territorial (STLT) levels, has been responding to the current H5N1 bird flu outbreak in the United States since the first detection in dairy cattle in March 2024. Capitalizing on existing epidemiological, clinical and wastewater surveillance, laboratory, and other capabilities the agency has built over decades of influenza preparedness work, CDC's efforts have focused on: • Supporting STLT health departments with over $200M in funding to support their efforts to implement a One Health-approach to targeted surveillance on farms and to rapidly investigate suspected human cases. • Characterizing viruses in the laboratory and expeditiously sharing these data publicly. • Updating guidance for clinicians and at-risk populations (e.g., dairy cow and poultry farm workers) on prevention and mitigation strategies including use of personal protective equipment (PPE), clinical testing, and post-exposure prophylaxis (PEP) with antiviral medication. • Conducting special laboratory studies to better understand virus characteristics. • Laying the groundwork for an H5 vaccination program, should one be needed. • Communicating with the public and coordinating with state and local health departments, industry associations, and worker groups. During the response, CDC and its federal, STLT, and other partners have made significant strides toward better understanding the outbreak and implementing measures to prevent the spread of H5N1 bird flu, including from animals to humans. Highlighted below are several areas of significant progress. Additional information: https://www.cdc.gov/bird-flu/spotlights/h5n1-response-01172025.html 17) At the height of the response, CDC increased outreach and education with farmworkers, employers, and advocacy groups to magnify message and strategies. CDC coordinated with several trusted partners who reached farmworkers and their employers, including CDC's rural health group, the Health Resources and Services Administration (HRSA), Occupational Safety and Health Administration (OSHA), USDA, the National Center for Farmworker Health, and foundations and associations working with local agricultural extensions. In addition, CDC has a wide range of guidance emphasizing strategies people can take to help protect themselves from H5N1 bird flu. CDC focused its guidance on groups at increased risk for H5N1 bird flu, especially those who work with infected animals or animal products (e.g., raw milk) and their employers. https://www.cdc.gov/niosh/avian-flu/about/index.html Additional resources for HPAI prevention strategies: Public Health Resources for Veterinarians and Veterinary Staff Handling Animals with HPAI A(H5N1) Virus Infection on Dairy Farms: https://www.cdc.gov/bird-flu/hcp/animals/resources-veterinarians-dairy.html Considerations and Information for Fair Exhibitors to Help Prevent Influenza | Influenza in Animals | CDC: https://www.cdc.gov/flu-in-animals/about/fair-exhibitors-information.html Considerations and

		Information for Fair Organizers to Help Prevent Influenza | Influenza in Animals | CDC: https://www.cdc.gov/flu-in-animals/about/fair-organizers-information.html Considerations for Veterinarians: Evaluating and Handling of Cats Potentially Exposed to Highly Pathogenic Avian Influenza A(H5N1) Virus | Bird Flu | CDC: https://www.cdc.gov/bird-flu/hcp/animals/index.html 18) CDC coordinated with USDA to participate in multiple WOAH organized webinars to provide updates and share information with WOAH technical staff and WOAH member states. 19) CDC has been supporting Jamaica Ministry of Health and PAHO regional staff during a widespread leptospirosis outbreak following Hurricane Melissa that has included 6 fatalities. Molecular diagnostics have been established in Kingston at the National Public Health Laboratory using CDC published protocols, and CDC supported Jamaica MOH and regional PAHO staff by sharing communication and clinical resources and by presenting at a webinar attended by >700 healthcare professionals. CDC has also supported the Philippines Ministry of Health and the Philippines CDC Country Office after two typhoons caused significant rain and widespread flooding, increasing concerns for leptospirosis and melioidosis. To increase awareness of these diseases after flooding, CDC provided messaging materials for the public and resources for clinicians about signs and symptoms, prevention, and diagnostic testing. CDC has also supported the review of MOH diagnostic testing algorithms for leptospirosis. 20) Recreational shellfish harvesters can be at high risk of severe illnesses caused by eating shellfish contaminated with algal toxins. To better understand this audience's awareness, behaviors, perceptions, and communication preferences related to shellfish safety and harmful algal blooms, CDC conducted four focus groups in 2025 with U.S. adults who recreationally harvest shellfish to eat. CDC presented key insights from the focus groups to more than 50 state and federal public health partners and is using the results to improve health communications with recreational harvesters. 21) • Since 2024, CDC has monitored the progression of NWS infections in the Americas in collaboration with the Ministries of Health in affected and at-risk countries in the region. While the United States Department of Agriculture (USDA) leads on animal agriculture, CDC provides support for public health needs including human case surveillance, clinical management of human cases, education of healthcare providers and public health partners, diagnosis and laboratory confirmation (including telediagnosis for rapid identification), and multisectoral coordination with One Health partners. CDC participates in the Permanent Group of Experts on Screwworm of the Global Framework for Transboundary Animal Diseases of the Americas. CDC has overseas staff in Mexico, Guatemala, Panama, Honduras, and El Salvador that engage with Ministries of Health to provide additional support for surveillance strengthening, education, implementation of control measures, and

		strengthening One Health interagency engagement. • NWS is a One Health issue as it can have significant economic impacts for agriculture and livestock. It is a One Health threat that also impacts wild animals, pets, and people. People can act as reservoirs for NWS and can transport the flesh-eating parasitic maggots farther, faster, and outside of the control points established by USDA. • Domestically, CDC plays a key role in helping states manage human infestations and identifying, investigating, and reporting human infestations detected outside of the sterile fly release zones. CDC, in collaboration with state and local health partners, shares this information with USDA so that USDA can use the information to target sterile fly releases in the most effective way to protect the health of Americans and the productivity of our agricultural industry. CDC collaborated with Department of Homeland Security (DHS) and other federal partners in a DHS-led, whole-of-government NWS exercise with multiple states. CDC continues to educate healthcare providers, entomologists, public health practitioners, and other stakeholders through webinars, presentations, and Continuing Medical Education (CME) products.
		1) The One Health Surveillance Visualization Tool (OH-SurViz) is an interactive, online tool for evaluating and improving coordinated surveillance across One Health sectors including public health, agriculture, and wildlife. OH-SurViz leverages best practices for coordinated, multisectoral surveillance and information sharing and is an innovative resource. This tool was initially developed for visualizing rabies and zoonotic influenza, and a generic disease version is currently underway that can be applied for other diseases. OH-SurViz has been used in Pakistan, Vietnam, and Peru. OH-SurViz can be accessed through CDC's One Health Portal, which also hosts the One Health Zoonotic Disease Prioritization tool. 2) CVV is a mosquito-borne disease that can cause reproductive losses in sheep and other ruminants, and rarely severe neurological disease in humans. CDC collaborated with the AR Department of Health, AR Department of Agriculture, AR Game and Fish Commission, USDA, and University of Arkansas Medical Sciences, to (1) assess and characterize animal data and archived sera from an impacted sheep flock; (2) investigate the presence of CVV circulation in Arkansas; and (3) evaluate the impact of CVV on human health by assessing encephalitis and meningitis cases with unknown etiology. Results of this work were published in 2025. 3) CDC and public health officials in multiple states investigated outbreaks of Salmonella infections linked to contact with a variety of animals including backyard poultry, geckos, and bearded dragons. More details at: • Salmonella Outbreaks Linked to Backyard Poultry • Salmonella Outbreaks Linked to Geckos • Salmonella Outbreaks Linked to Pet Bearded Dragons 4) Some enteric bacterial strains cause acute outbreaks linked to specific sources. Other strains, referred to as

		reoccurring, emerging, or persisting (REP) strains, can reoccur and periodically cause acute outbreaks. They can also emerge and increase in frequency or persist and cause illnesses over periods of months or years, despite investigation and prevention efforts. Learn about these strains and CDC's efforts to control them • Persistent Strain of Salmonella Hadar (REPTDK01) Linked to Backyard Poultry and Ground Turkey • Persistent Strain of E. coli O157:H7 (REPEXH01) Linked to Multiple Sources • Persistent Strain of Salmonella Newport (REPJJP01) Linked to Travel to Mexico, Beef, and Soft Cheese • Persistent Strain of Salmonella Infantis (REPJFX01) Linked to Chicken | CDC • Persistent Strain of Campylobacter jejuni (REPDBR01) Linked to Pet Store Puppies 5) CDC supported three investigations in 2025 of histoplasmosis outbreaks linked to bat-inhabited caves in Costa Rica, Belize, and Puerto Rico. The outbreaks involved residents from GA, TX, WA, MN, NE, FL, CA, and PR. Histoplasmosis, a fungal disease that can cause severe illness and death, affected 21 people who were exposed to bat droppings while visiting caves. An investigation in Puerto Rico is ongoing and involved a film crew that accessed a remote research cave to film bat-eating snakes. An investigation led by Costa Rican government officials alerted travelers and resulted in revised tourism waivers that included the risk of contracting histoplasmosis from adventure tourism. 6) CDC provided consultation discussing the risk of histoplasmosis and potential methods for risk minimization for workers and community members associated with potential exposures to bat guano, barn swallow guano, and chicken farms. Cave-Associated Histoplasmosis Outbreak Among Travelers Returning from Costa Rica — Georgia, Texas, and Washington, December 2024–January 2025 | MMWR 7) CDC collaborated with the Environmental Protection Agency, United States Department of Agriculture, and industry partners to investigate potential role of Purpureocillium lilacinum biopesticide in recent outbreaks and pseudo-outbreaks in humans and increases of culture rates of this fungus nationally. CDC conducted environmental sampling of Aspergillus fumigatus and found resistant isolates with three different variants of mutations from Southeastern U.S. soil samples collected over three time periods. These findings demonstrate that resistant strains can persist in the environment for at least 12 months, suggesting that established environmental hotspots can serve as ongoing reservoirs for resistant strains. 8) In 2025, CDC supported the Washington Food Safety Center of Excellence in advancing One Health antimicrobial resistance surveillance through enhancements to the Washington Integrated Surveillance for Antibiotic Resistance (WISAR) database. Efforts focused on long-term acquisition of environmental data, including development of a protocol to support broader and more sustainable environmental sampling. Work also progressed toward combining samples across human, animal, and environmental data streams for future trend analyses and exploring epidemiological cutoff

Epidemiology, surveillance, risk assessment, (true)	1) New Tool Developed: One Health Surveillance Visualization (OH-SurViz) 2) Investigation of Cache Valley virus (CVV) distribution and health risk among humans and animals in Arkansas 3) Multistate investigations of Salmonella Illnesses linked to backyard poultry, geckos, and bearded dragons 4) Reoccurring, Emerging, and Persisting Enteric Bacterial Strains 5) Support for Fungal Disease Outbreaks associated with animals 6) Examining associations between fungal biopesticides and human fungal infections 7) Environmental testing of resistant Aspergillus fumigatus 8) Integrated One Health AMR Surveillance and Environmental Data Expansion (Washington) 9) Advancing Veterinary Antimicrobial Stewardship in Equine Reproduction (New York) 10) One Health Surveillance of Carbapenem-Resistant Enterobacterales in Households (Colorado) 11) Genomic Analysis of Carbapenemase-producing Carbapenem Resistant Enterobacterales from Companion Animals and Humans 12) Analysis of Antimicrobial Resistance in Multi-State Outbreaks of Salmonella Linked to Backyard Poultry 13) The Antibiotic Resistance in	values (ECOFFs) across sectors. Additional activities included improving metadata collection from sample submitters to strengthen interpretation of resistance patterns and disseminating antimicrobial stewardship resources for veterinarians. 9) In 2025, CDC supported the New York Food Safety Center of Excellence in advancing antimicrobial stewardship and resistance surveillance with particular emphasis on equine reproduction, an important but historically understudied aspect of veterinary antimicrobial resistance, and where antimicrobial use and resistance dynamics are poorly characterized. Findings from these activities are expected to inform targeted stewardship strategies in equine reproduction and contribute to enhanced evidence-based antimicrobial use in broader practice settings. 10) In 2025, CDC supported the Colorado Food Safety Center of Excellence in the completion of a two-year pilot study to evaluate potential transmission of carbapenem-resistant Enterobacterales (CRE) between humans and companion animals within the same household. The study identified community-acquired CRE cases in humans with household contact with dogs and collected fecal specimens from enrolled companion animals for CRE testing. This work advances understanding of CRE transmission dynamics at the human–animal interface and is being shared as a template to inform and support similar One Health surveillance initiatives in other states. 11) CDC and collaborators at the University of Pennsylvania completed a study to evaluate whether carbapenemase-producing carbapenem-resistant Enterobacterales (CP-CRE) strains isolated from companion animals (dogs and cats) in the United States are genetically similar to CP-CRE isolated from humans. Sequencing analyses from this study found that strains of CP-CRE isolated from companion animals were genetically closely related to human isolates and companion animal-source isolates were dispersed among clusters with human-source isolates. These results suggest that exchange of CP-CRE between humans and companion animals is possible and already occurring in the United States either through direct contact or common reservoirs. A manuscript describing these results is in preparation. 12) CDC is examining data from CDC's System for Enteric Disease Response, Investigation, and Coordination (SEDRIC) and the National Antimicrobial Resistance Monitoring System (NARMS) databases to describe patterns of antimicrobial resistance among human backyard poultry associated salmonellosis isolates included in multistate outbreaks during 2018–2023. A manuscript describing these results is in preparation. 13) The Antibiotic Resistance in Communities and Hospitals (ARCH) consortium is a part of CDC's Global Antimicrobial Resistance Laboratory and Response Network. ARCH is a network of research partners tracking the amount and spread of AR colonization in humans, hospitals, and communities in six countries and studying predictors and outcomes of colonization. The data from the ARCH studies will help us understand the source of

	Communities and Hospitals (ARCH) consortium 14) Evaluating the risk of colonization with antimicrobial-resistant gut bacteria in Guatemala 15) Emerging/re-emerging zoonotic Viral Hemorrhagic Fever (VHF) surveillance activities in Uganda 16) Nipah virus surveillance and modeling in Bangladesh 17) Brucellosis Workshops, Hungary and Türkiye 18) Influenza A/H5N1 Surveillance and Case Identification 19) One Health Harmful Algal Bloom System insights	new resistance threats, how widespread the threats are, and how we can tailor prevention strategies to lessen the impact. 14) CDC is collaborating with Washington State University and Universidad del Valle de Guatemala on a One Health surveillance study in Guatemala through CDC's Global AR Lab and Response Network. The project aims to increase understanding of transmission and characterize risk factors for extended-spectrum cephalosporin resistant Enterobacterales (ESCrE) and carbapenem-resistant Enterobacterales (CRE) colonization in humans related to consumption of certain foods, drinking water, and contact with livestock and companion animals. The project is complementary to a simultaneous Antibiotic Resistance in Communities and Healthcare (ARCH) project that is evaluating risk factors for colonization in humans related to healthcare exposure. Together, the projects will enhance understanding of the molecular epidemiology and community transmission dynamics of these antimicrobial-resistant organisms. Whole genome sequencing and comparative analysis is ongoing in 2026. 15) Since 2010, CDC has supported the Uganda Ministry of Health (MOH) and Uganda Virus Research Institute (UVRI) with Uganda's National Viral Hemorrhagic Fever Surveillance Program. This program includes routine surveillance of ebolaviruses, Marburg viruses, CCHF, and RVF in humans and animals in Uganda. Of note, in September 2022, Uganda MOH declared an outbreak of Ebola (Sudan virus) that began in Mubende District in Central Uganda. CDC provided technical support to Uganda MOH with surveillance, laboratory, experimental and ecological investigations, among other areas of post-outbreak response. Additionally, in 2024, CDC, in collaboration with the Uganda MOH and UVRI, continued longitudinal surveillance for RVF and CCHF in livestock and humans associated with livestock in multiple districts in Uganda. This data is used to validate a prediction model and determine environmental factors associated with high seropositivity and transmission. In 2024, following a long-term collaborative effort between UVRI and CDC, UVRI was granted SANAS accreditation. They were also awarded CDC Africa's high containment laboratory certification, the first in the region. This is a significant achievement as it confirms the quality of the laboratory testing for VHFs and other high-consequence pathogens for both human and animal suspect case testing and will serve as regional resource in the future. CDC continued work with Uganda Wildlife Authority (since 2007) performing surveillance for filoviruses in bats and tracking nightly and seasonal movements of known filovirus reservoir animals. CDC continues to support a survivor monitoring program implemented by Baylor University in Uganda after the latest Sudan ebolavirus outbreak. CDC provides technical assistance and funding. 16) Nipah virus is a CDC priority pathogen due to its epidemic potential. Bangladesh has faced repeated outbreaks of Nipah. CDC has collaborated with local partners to build laboratory and surveillance capacity for Nipah virus. CDC conducts serological

surveys (human surveys) in close proximity to Pteropus (bats) roosts to identify new areas of spillover in Bangladesh – areas not previously identified as human outbreak locations. CDC also conducts ecological niche modeling using human outbreak data, environmental and remote sensing data to develop risk maps based on environmental drivers (i.e., rainfall, humidity, habitat perturbation/deforestation, land use changes, etc.). These risk models could be extended to other countries (i.e., Cambodia, Thailand, broader South and SE Asia) where the home range of Pteropus exists (there is some evidence of Nipah/henipah positive bat samples but no known/identified human cases) to help inform surveillance. In addition, CDC is now assisting partners in Bangladesh develop monthly predictive risk models and maps to identify potential high-risk locations for possible Nipah virus spillover. These maps are generated on the first of each month and are used to focus surveillance efforts. 17) CDC updated and finalized the Staged Tool for the Elimination of Brucellosis, which was used by eight Eastern Europe/Central Asia countries (Armenia, Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan, Uzbekistan) in a FAO-led workshop held in Hungary in early 2025. Participants were from multiple sectors, including human and animal health. Participants used the tool during the workshop to evaluate their country's capacity to prevent and control brucellosis in both animals and humans, self-assess their existing capacity and identify short-, medium- and long-term priorities for their countries. A similar workshop was conducted for Türkiye in late 2025 by FAO. Although CDC was not able to be present in-person, we provided technical assistance in creating the tools used for the workshops. 18) Since early Spring 2024, CDC has used several approaches to track the progression of the H5 bird flu outbreak, including ongoing national flu surveillance for seasonal and novel viruses, efforts targeted toward H5 bird flu specifically, wastewater surveillance, and information from hospital emergency departments. As of November 26, 2025, there have been 71 national cases of H5 bird flu. As of November 21, 2025, CDC and STLT partners have: • Monitored over 22,000 people following exposure to infected animals, testing over 9,600 of those and identifying 64 out of the 71 reported H5 bird flu cases through targeted H5 surveillance. • Tested more than 240,900 specimens for influenza A, detecting 7 cases through national flu surveillance • Worked with private, academic, and STLT health department partners to detect and report avian influenza A(H5) viruses in wastewater, to guide public health planning and response efforts. Leveraged syndromic surveillance systems to monitor unusual trends, improve situational awareness, and inform decision making based on electronic data from multiple health care settings, including emergency departments (ED)—including influenza diagnoses and reported symptoms potentially related to influenza virus infections. 19) CDC launched the One Health Harmful Algal Bloom System (OHHABS) in 2016,

		which is the only national public health system in the United States. that collects information about harmful algal blooms and the illnesses they can cause in humans and animals to inform public health prevention efforts. Harmful algal blooms (HABs) result from the rapid growth of algae or cyanobacteria (also called blue-green algae) in natural waterbodies and can harm people, animals, or the environment. HAB events of public health concern are primarily caused by microalgae called diatoms and dinoflagellates; cyanobacteria; and the toxins these organisms produce. HAB events, which can be intensified by nutrient pollution and warmer water temperature, can have public health, environmental, and socio-economic impacts. In 2025 CDC released a report noting that in 2022, the most recent year for which data were available, 15 states voluntarily reported 372 HAB events, 95 human illnesses, and at least 102,071 animal illnesses. Nearly half (45%) of human illnesses were among children and teens younger than 18 years old. The data also highlighted that HABs can have major impacts on wildlife and ecosystems.
		1) CDC's One Health Office has developed an online, modernized platform for the One Health Zoonotic Disease Prioritization (OHZDP). CDC's OHZDP Portal was developed to support facilitators and organizers before, during, and after the OHZDP workshop through a secure system for workshop and data management. The OHZDP Portal features interactive workshop planning checklists, templates and materials, calculations and data exports, automatic report generation, and monitoring and evaluation. The OHZDP portal also allows for the flexibility for the OHZDP methods to be used for other types of prioritizations (i.e. infectious disease prioritizations, animal disease prioritizations, etc.). 2) In 2025, CDC finalized and published a revised Field Epidemiology Training Program (FETP) Frontline 3.0 curriculum, with a focus on One Health. This 3-month program continues to support the development of a global network of disease detectives who work to prevent and control outbreaks. Version 3.0 includes a focus on multidisciplinary recruitment of trainees; diverse examples to emphasize the interconnectedness of human, animal, and ecosystem health; and field activities that encourage multisectoral collaboration. CDC also facilitated Mentor Workshops to train >65 countries on the implementation of FETP Frontline 3.0 and provided technical support to countries implementing their first cohorts. By February 2026, 14 countries have completed at least one multisectoral FETP Frontline 3.0 cohorts, and many others are in process. These FETP cohorts advance One Health workforce development and public health capacity through informal multisectoral network-building achieved during the training, strengthened surveillance systems via participant-led evaluations, and faster, more efficient responses to public health emergencies. 3) CDC is developing a framework for One Health Rapid Response Teams (OHRRTs) to support countries in enhancing One Health

Training, capacity building (true)	1) One Health Zoonotic Disease Prioritization (OHZDP) Portal 2) Field Epidemiology Training Program (FETP) Frontline 3.0, with a One Health Focus 3) One Health Rapid Response Teams (OHRRTs) 4) Evaluating Veterinary Antimicrobial Stewardship Education Strategies (Minnesota) 5) Training and capacity building in infectious disease pathology 6) Anthrax Surveillance and Lab Training	emergency response capacity. OHRRTs are teams made of experts from multiple sectors and disciplines representing public health, agriculture, wildlife, and the environment. These teams are trained and equipped to rapidly deploy and respond to One Health issues such as zoonotic disease events and emerging infectious diseases. CDC's OHRRT Framework utilizes a comprehensive, multi-phased approach designed to assist countries in establishing and managing their OHRRT programs. This includes supporting countries in designing, developing, implementing, and evaluating a OHRRT program. Using an assessment of the current One Health emergency response readiness and capacity, the process includes a series of trainings, workshops, and mentorship to develop critical OHRRT components. This includes the creation of sustainable peacetime and emergency operations to ensure a trained, ready, efficient, and effective OHRRT response system and workforce. CDC has completed piloting the OHRRT Framework with the Government of Cambodia and is utilizing the outcomes from this pilot to inform future improvements and updates to the materials for use in other locations 4) In 2025, CDC supported the Minnesota Food Safety Center of Excellence in advancing veterinary antimicrobial stewardship through the creation and evaluation of educational videos on antimicrobial resistance. Findings demonstrated that veterinarians were more engaged and more likely to trust and share stewardship messages when content referenced credible sources, underscoring the importance of source transparency in effective antimicrobial stewardship communication. 5) CDC provides training opportunities for visiting human pathology and veterinary pathology trainees and practitioners (e.g. pathology residents and fellows). These include in-person and virtual training through use of glass or digitally scanned slides, for identification of pathologic lesions associated with infectious etiologies, including zoonotic, emerging, and reemerging pathogens. CDC also provides monthly virtual educational training sessions on infectious disease pathology to partners who are human pathologists associated with the Binford Dammin Society of Infectious Disease Pathologists. CDC also provides in-person and telepathology support for infectious disease capacity building efforts in under resourced countries in South America, Africa, and Asia. CDC has provided training in anatomic pathology laboratory quality assurance to 71 pathologists in under resourced settings in Latin America in coordination with the non-governmental organization, Pathologist Overseas. Participants were from multiple Latin American countries including Argentina, Paraguay, Bolivia, Dominican Republic, Panama, Guatemala, Uruguay, Peru, and Venezuela. Lastly, CDC provided virtual didactics on infectious disease pathology and the pathology of emerging/reemerging pathogens to over 400 pathologists working in under resourced settings during the "International Course on Immunohistochemistry Molecular Pathology, and

		Histopathology for the Diagnosis of Infectious Diseases," co-hosed with the Evandro Chagas National Institute of Infectious Diseases in Brazil. Participants attended from over 13 countries. 6) CDC's DHCPP partnered with the Thailand Field Epidemiology Training Program to hold a virtual training on anthrax investigations, covering both human and animal disease presentation, sampling, testing, surveillance, prevention, and control for 10 advanced Thai and international FETP residents.
Zoonoses (true)	1) Preventing, Detecting, and Responding to Emerging and Reemerging Zoonotic Diseases in Multiple Countries 2) VHF surveillance activities in Sierra Leone 3) Capnocytophaga species in the oral microbiota of pet dogs 4) One Health Response Timeliness Analysis (OH-7-1-7)	1) Details on multiple zoonotic disease activities around the globe are cross reported in other sections of this document. 2) Since 2016, CDC has collaborated with Njala University to conduct routine surveillance in small mammal populations for VHFs. This work continued in 2024 through a cooperative agreement with CDC's Viral Special Pathogens Branch. 3) CDC is collaborating with U.S. veterinary schools to assess the prevalence of zoonotic Capnocytophaga species, a gram-negative bacterium commonly found in the normal oral microbiota of mammals that can cause rare but potentially severe infections in humans, among client-owned dogs. 4) CDC is collaborating with Resolve to Save Lives, the 7-1-7 Alliance, and global partners on how the 7-1-7 framework can be applied to domestic animal, wildlife, and environment sectors and across One Health sectors. Metrics to capture cross-sector interactions that influence the speed and effectiveness of One Health responses have been incorporated. CDC and partners in Cambodia, Peru, and Thailand conducted One Health Timeliness Analysis to review recent zoonotic disease outbreaks. Sector-specific assessments, combined with joint One Health analyses, provided a comprehensive view of interdependencies and highlighted where multisectoral actions diverged or stalled.
		1) Through the Environmental Protection Agency's disinfectant framework, MDB is testing multiple disinfectants against Sporothrix schenckii and Sporothrix brasiliensis to determine their effectiveness. 2) Through the Antimicrobial Resistance Laboratory Network (AR Lab Network), CDC supports all 50 states, several large cities and territories to expand or implement new AR testing for improved detection of AR threats across One Health, including those linked to animals, their environment, and the food supply. Since 2016, the AR Lab Network has performed more than 1,500,000 different tests overall, including more than 450,000 isolate characterizations, 450,000 colonization screenings, and 600,000 whole genome sequences. CDC launched a pilot project to establish capacity within the existing CDC Antimicrobial Resistance Laboratory Network (AR Lab Network) for testing specimens obtained from dogs and cats for carbapenemase-producing carbapenem resistant Enterobacterales and carbapenemase-producing carbapenem resistant Pseudomonas aeruginosa. Two CDC AR Lab Network regional labs were selected for funding to work with CDC to develop the framework for testing and response activities. Testing of companion animal specimens began in late 2025. 3)

Diagnosis, biotechnology and laboratory (true)	1) Disinfectant Study on Sporothrix spp. 2) Antimicrobial Resistance Laboratory Network 3) CDC's BEAM (Bacteria, Enterics, Amoeba, and Mycotics) Dashboard 4) Global Antimicrobial Resistance Laboratory and Response Network 5) CDC and FDA Antimicrobial Resistance (AR) Isolate Bank 6) Tissue-based diagnosis of zoonotic and high-consequence pathogens 7) Diagnostic Capacity for Poxviruses in West Africa, DRC, and Cameroon 8) Influenza A/H5 Laboratory Analysis and Tools 9) Global Laboratory Leadership Programme (GLLP)	CDC's BEAM Dashboard is an interactive tool to access and visualize data from SEDRIC (System for Enteric Disease Response, Investigation, and Coordination), a secure, cloud-based platform for foodborne and animal contact outbreak investigations in the United States, and NORS (National Outbreak Reporting System). It provides timely data on pathogen trends and serotype details to inform work to prevent illnesses from food, water, and animal contact. It was updated in 2024 with NORS data that characterizes outbreaks associated with food, water, and enteric disease transmission routes, including animal contact. 4) CDC's Global Antimicrobial Resistance Lab and Response Network uses a broad-reaching, One Health approach to improve the detection of antimicrobial-resistant threats and prevent their spread globally. Now in its fifth year, the Global AR Lab and Response Network spans over 50 countries and works with more than 20 organizations to identify risk factors driving the emergence and spread of AR threats across One Health and responds to threats on the ground, including those found in health care, the community, food, animals, and the environment (e.g., water and soil). 5) CDC and U.S. Food and Drug Administration (FDA) collaborate on the CDC & FDA Antimicrobial Resistance (AR) Isolate Bank to increase the number of and information available on antimicrobial-resistant pathogen isolates, including whole genome sequencing data. Founded in 2015, the CDC and FDA Antimicrobial Resistance Isolate Bank (AR Isolate Bank) is one of the largest collections of drug-resistant bacterial and fungal isolates gathered from specimens in healthcare, food, and community settings. The AR Isolate Bank recently reached two major milestones: 10 years of service and 500,000 isolates shipped - half a million opportunities for labs and researchers to strengthen detection, improve patient care, and support solutions to AR threats. The more than 1,075 unique AR Isolate Bank samples are available to researchers', clinical laboratories and diagnostic device and drug manufacturers to strengthen research and development of new diagnostics and therapeutics for antimicrobial-resistant pathogens from across One Health, support studies for regulatory submissions to FDA, help labs detect new and unusual AR threats that require swift intervention, and evaluate new antibiotics and antifungals. As of January 2026, the CDC & FDA AR Isolate Bank has filled more than 6,495 orders. 6) CDC provides pathologic evaluation and laboratory testing of human and animal biopsy and autopsy specimens for zoonotic, emerging, and high-consequence pathogens, including Category A, B, and C bioterrorism agents. 7) CDC strengthens laboratory diagnostic capacity throughout West Africa, DRC, and Cameroon to test for orthopoxviruses, including the virus that causes monkeypox, to improve surveillance of the disease in country. Additionally, CDC supports epidemiologic and One Health investigations to inform the burden of monkeypox disease and its epidemiology in countries where monkeypox is endemic which contribute to preparedness, response, and mitigations efforts for this disease in Nigeria,

		throughout West Africa, Cameroon, and Central Africa particularly the DRC. Within the DRC, CDC continues to support two national reference laboratories, and 4 additional de-centralized laboratories that can perform testing of different orthopoxviruses, including monkeypox. 8) A vital element of CDC's multipronged testing and analytic strategy to address the current H5 bird flu outbreak are its laboratory and epidemiologic resources, which support STLT public health laboratories by providing test kits and other resources and performing confirmatory testing and characterization of viruses. Its laboratory assets allow CDC to: • Enable early detection of H5 bird flu in humans and ensure wide availability of accurate testing tools, including through commercial laboratories • Bolster public health laboratory capacity and enable a subset with demonstrated proficiency to test for H5 without the need for CDC confirmation • Build on information revealed through the use of CDC specialized testing towards new and enhanced approaches. • Conduct genetic and virologic characterization of viruses for public health risk assessment and to ensure diagnostic tests, antivirals, and candidate vaccines remain effective. Alongside these goals, CDC has worked with partners to develop laboratory guidance and resources, including: • Guidance on specimen collection and testing of patients with suspected H5 bird flu infection • Guidelines for laboratory biosafety in handling and processing of specimens associated with novel influenza viruses including avian influenza A(H5N1) Because influenza viruses are constantly changing, CDC performs routine analyses such as sequencing of A(H5) viruses to identify genetic changes that might allow for spread more easily to and between people or cause serious illness in people. Sequence analysis and other laboratory tests allow CDC to assess the susceptibility of the virus to antivirals, accuracy of diagnostic assays, and neutralization of the virus by vaccine induced antibodies. To date, no concerning changes have been identified in avian influenza A(H5) circulating in wild birds and poultry in the United States. 9) In 2025, CDC GLLP team in collaboration with WOAH and the other GLLP Founding Partners, revised and updated the GLLP Learning Package materials and tools based on feedback from GLLP implementations. The GLLP Founding Partners developed a GLLP survey to be completed by GLLP focal points from 18 countries that have completed their first cohort. The data collected will be used to analyze GLLP implementation trends and gaps, inform improvements of the GLLP Learning Package and support mechanisms, and to contribute to a summary report.

TOR 3: HARMONISATION OF STANDARDS

2. Proposal or development of any procedure that will facilitate harmonisation of international regulations applicable to the main fucus area for which you were

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designated

Proposal title	Scope/Content	Applicable Area

3. In exercising your activities, have you identified any regulatory research needs* relevant for WOAH?

No

4. Did your Collaborating Centre maintain a network with other WOAH Collaborating Centres (CC), Reference Laboratories (RL), or organisations designated for the same specialty, to coordinate scientific and technical studies?

Yes

Name of WOAH CC/RL/other organisation(s)	Location	Region of networking Centre	Purpose
Multiple WOAH CCs/RLs/other organizations	Global	África América Asia y el Pacífico Europa Oriente Medio	CDC is in communication with multiple collaborating centres, reference laboratories, and other organizations from multiple countries and regions to maintain a network and share information on One Health activities related to emerging and re-emerging zoonoses.
Africa CDC	Ethiopia	África	Coordinating opportunities for workforce capacity training
Multiple diagnostic laboratories across West and Central Africa	Multiple countries in West and Central Africa	África	Establishing a network of partners in West and Central Africa to coordinate diagnostic capabilities and research for monkeypox
WOAH Subject Matter Experts (SMEs)	Global	África América Asia y el Pacífico Europa Oriente Medio	Training initiative to create strong leaders in health security. The Programme provides laboratory professionals with the tools to develop their laboratory leadership competencies and advance effective national laboratory systems for improved health security using a One Health approach.

TOR 4 AND 5: NETWORKING AND COLLABORATION

5. Did your Collaborating Centre maintain a network with other WOAH Collaborating Centres, Reference laboratories, or organisations in other disciplines, to coordinate

scientific and technical studies?

Yes

Name of WOAH CC/RL/other organisation(s)	Location	Region of networking Centre	Purpose
WOAH RLs affiliated with the U.S. Centers for Disease Control and Prevention; Department of Agriculture; National Institutes of Health; Food and Drug Administration; Environment Protection Agency; U.S. Department of the Interior: National Park Service, U.S. Fish and Wildlife Service, U.S. Geological Survey; U.S. Department of Homeland Security; U.S. Department of War; Defense Threat Reduction Agency; U.S. Department of Labor, and others	United States of America	Americas	To communicate, coordinate, and collaborate on projects related to One Health; Approaches to prevention and control of emerging and re-emerging zoonotic diseases; To identify and pursue opportunities to improve efficiency outcomes for human, animal, and environmental health across the U.S. government and with One Health partners.
WOAH Wildnet: National Wildlife Health Center, USGS, DOI; Canadian Wildlife Health Cooperative, Western College of Veterinary Medicine, University of Saskatchewan; Wildlife Health Australia; Department of Veterinary Tropical Diseases, University of Pretoria; University of Las Palmas de Gran Canaria, University Research Institute of Animal Health and Food Safety; Istituto Zooprofilattico Sperimentale del Piemonte Liguria e Valle d'Aosta (IZSPLVA), Italian National Reference Centre for Diagnostic Activities in Stranded Marine Mammals; Onderstepoort Veterinary Institute; Centre for Environment, Fisheries and Aquaculture Sciences; Federal Research Institute for Animal health, Friedrich-Loeffler-Institute; EpiCentre and mEpiLab Institute of Veterinary and Biomedical Sciences, Massey University; International Centre of	Global	Africa Americas Asia and Pacific Europe Middle East	WOAH Collaborating Centre Network on Wildlife Health: Hybrid Workshop Deliverables: 1. Wildlife Outbreak Investigation SOPs (high-level) 2. Revision of Chapter 1.1.2 of the Terrestrial Manual, titled "Collection, submission, and storage of diagnostic specimens. Addressed gaps in wildlife disease diagnosis and specimen handling, as previous revisions focused primarily on domestic animal health. 3. Contributions to the upcoming Wildlife Health Programme Strategy for the second 5-year period 4. Expansion of the network by

Insect Physiology and Ecology; China Animal Health and Epidemiology Center, Ministry of Agriculture; Australian Centre for Disease Preparedness, CISRO; Harbin Veterinary Research Institute, Chinese Academy of Agricultural Sciences; Institut Pasteur; Swedish Centre for Animal Welfare; Centre International en Recherche Agronomique pour le Developpement; Wildlife Trade Collaborating Centre, Singapore; Mahidol University; Wildlife Conservation Society			completing the ongoing phases, while making plans to include or/and find synergies with the wildlife trade alliance
The GLLP was founded and developed by six partners: • Food and Agriculture Organization of the United Nations (FAO) • World Health Organization (WHO) • World Organization for Animal Health (WOAH) • European Centre for Disease Prevention and Control (ECDC) • Centers for Disease Control and Prevention (CDC) • Association of Public Health Laboratories (APHL)	Global	Africa Americas Asia and Pacific Europe Middle East	The Global Laboratory Leadership Programme (GLLP), which aims to enhance laboratory leadership and management skills for effective health security. WOAH collaborates with other organizations to promote international collaboration on animal health and welfare, ensuring that laboratories play a critical role in disease prevention and control.

TOR 6: EXPERT CONSULTANTS

6. Did your Collaborating Centre place expert consultants at the disposal of WOAH?

Yes

Name of expert	Kind of consultancy	Subject
Casey Barton Behravesh, MS, DVM, DrPH, DACVPM	Technical Assistance, Attendance at WOAH Meetings, 19th Meeting of the Regional Steering Committee of the GF-TADs of the Americas, 1st Meeting of the GF-TADs Standing Group of Experts on New World Screwworm of the Americas, WOAH Collaborating Centre Network on Wildlife Health, and consulted on Zoonosis day webinar at request of WOAH; support WOAH on guidance development and updates for emerging and reemerging zoonoses at the human-animal interface, member One Health High-Level Expert Panel (Term 2); Member of the WOAH Emerging Diseases in Animals Ad Hoc Group to advise the WOAH Director General on issues related to emerging and zoonotic infectious diseases and One Health; Reviewed WOAH FAQ on Rift Valley fever and supported coordination for HPAI	One Health, COVID-19, New World screwworm, monkeypox, emerging and reemerging zoonoses, surveillance, outbreak investigation and response, public health, Tripartite Zoonoses Guide, global health security, and World Animal Health Information System+ Steering Committee, also a member of OHHLEP which supports the Quadripartite organizations
	CDC One Health Liaison to WOAH Technical Assistance,	

Colin Basler, DVM, MPH, DACVPM	Attendance at WOAH virtual meetings including 1st Meeting of the GF-TADs Standing Group of Experts on New World Screwworm of the Americas, the WOAH Regional Commission Meeting for the Americas, the WOAH Regional Commission meeting for Africa, the WOAH Regional Commission meeting for Asia and the Pacific, the WOAH Regional Commission meeting for Europe, and the WOAH Regional Commission meeting for the Middle East.	One Health, emerging and reemerging zoonoses, surveillance, outbreak investigation and response, public health, Tripartite Zoonoses Guide, antimicrobial resistance, global health security, food safety, World Animal Health Information System, laboratory capacity, multisectoral workforce development, and joint risk assessment
Barbara Knust, DVM, MPH	Technical assistance to WOAH Emerging Diseases Group, including Rift Valley Fever and emerging diseases	One Health, emerging and reemerging zoonoses, surveillance, outbreak investigation and response, public health, global health security
Grace Goryoka, MPH	Technical assistance to WOAH on Emerging Diseases, served as a panel presenter for WOAH's One Health in Action: Zoonotic Disease Control in the Americas World Zoonosis Day Webinar	One Health, zoonotic disease, prioritization, surveillance, outbreak investigation and response, public health, global health security
Amanda Balish, MPH	Technical assistance to WOAH as a Global Laboratory Leadership Program (GLLP) consultant	Global Laboratory Leadership Program (GLLP)

TOR 7: SCIENTIFIC AND TECHNICAL TRAINING

7. Did your Collaborating Centre provide advice/services to requests from Members in your main focus area?

Yes

Details on CDC services and advice provided at the request of Members are cross reported in other sections of this document.

8. Did your Collaborating Centre provide scientific and technical training, within the remit of the mandate given by WOAH, to personnel from WOAH Members?

Yes

a) Technical visit : 0

b) Seminars : 700

c) Hands-on training courses: 0

d) Internships (>1 month) : 10

Type of technical training provided (a, b, c or d)	Content	Country of origin of the expert(s) provided with training	No. participants from the corresponding country
B	CDC's One Health Office hosts the Zoonoses and One Health Updates (ZOHU Call), typically a monthly webinar to provide the latest news and resources on zoonoses and other One Health issues, including public health and animal health professionals (domestic and wildlife) and environment experts working in government, non-governmental organizations, industry, and academia. ZOHU calls offers continuing education for a variety of health professionals. For more information on the ZOHU Calls or to access webinar recordings or to subscribe to the monthly ZOHU Newsletter, visit: www.cdc.gov/one-health/php/zohu	United States of America	700

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D	CDC hosted Epidemiology Elective Students and graduate student interns to provide public health training; students supported work on WOAH projects	United States of America	10

TOR 8: SCIENTIFIC MEETINGS

9. Did your Collaborating Centre organise or participate in the organisation of scientific meetings related to your main focus area on behalf of WOAH?

No

TOR 9: DATA AND INFORMATION DISSEMINATION

10. Publication and dissemination of any information within the remit of the mandate given by WOAH that may be useful to Members of WOAH

a) Articles published in peer-reviewed journals:

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b) International conferences:
Each year, CDC technical and program staff attend and present at numerous international conferences.

c) National conferences:
Each year, CDC technical and program staff attend and present at numerous national conferences.

d) Other (Provide website address or link to appropriate information):

11. What have you done in the past year to advance your area of focus, e.g. updated technology?

12. Additional comments regarding your report:
In 2025, CDC's One Health Office advanced CDC efforts to protect the health of people, animals, and our shared environment using the One Health approach. Throughout the year, we engaged with partners and shared our expertise on One Health science and coordination across the federal government, in the United States and globally. CDC's One Health Office also supported other CDC centers, institutes and offices, and multisectoral partners on responses to public health emergencies like the H5 bird flu outbreak and public health events like New World screwworm. CDC continued to focus on maintaining, streamlining, and distributing H5 bird flu guidance for key One Health audiences outlining the risks and how to keep pets and people safe.

Emerging Infectious Diseases (EID) Journal – Published monthly by CDC, EID was established to promote the recognition of new and re-emerging infectious diseases around the world and improve the understanding of factors involved in disease emergence, prevention, and elimination. EID Journal Website: wwwnc.cdc.gov/eid
The National Center for Emerging and Zoonotic Infectious Diseases (NCEZID) website maintains updated information on current outbreaks, recent work, and publications. https://www.cdc.gov/ncezid/

CDC's One Health Office maintains two websites (One Health website [https://www.cdc.gov/one-health/] and Healthy Pets, Healthy People website [https://www.cdc.gov/healthy-pets/]), which provide up-to-date information on One Health activities and zoonoses-related prevention for the general public, public health professionals, human and animal health professionals, partners, and other stakeholders. CDC led efforts for or participated in numerous One Health-related communication campaigns, including One Health Day, National Pet Week, National Preparedness Month, and U.S. Antibiotic Awareness Week. Promotional activities included social media, graphic development, feature articles, newsletters, ZOHU Call presentations, and partner outreach, resulting in global awareness. CDC promotes programs supporting One Health-related activities, publications, and events.