From: William B. Karesh <karesh@ecohealthalliance.org>

To: Jonna Mazet <jkmazet@ucdavis.edu>;Alisa Pereira <apereira@usaid.gov>

CC: PREDICTMGT predictmgt@usaid.gov>;Elizabeth Leasure

<ealeasure@ucdavis.edu>;predict-outbreak@ucdavis.edu" coutbreak@ucdavis.edu>;Kirsten Gilardi <kvgilardi@ucdavis.edu>

Sent: 1/25/2017 2:33:39 PM

Subject: Re: [predict-outbreak] Re: Wrapping up Rwanda outbreak assistance

No official reports to OIE or FAO systems yet. They will end up being the 3rd country in Africa to report h5n8 so in all fariness, I'm sure everyone there wants to be really sure and inform the right people before releasing officially.

BK

William B. Karesh, D.V.M

Executive Vice President for Health and Policy

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President, OIE Working Group on Wildlife

Co-chair, IUCN Species Survival Commission - Wildlife Health Specialist Group

EPT Partners Liaison, USAID Emerging Pandemic Threats - PREDICT-2 Program

EcoHealth Alliance leads cutting-edge research into the critical connections between human and wildlife health and delicate ecosystems. With this science we develop solutions that promote conservation and prevent pandemics.

On Jan 25, 2017, at 5:24 PM, Jonna Mazet < <u>ikmazet@ucdavis.edu</u>> wrote:

Kirsten says not on the ground in Uganda, but we have heard it from other (unconfirmed) sources. Our team was told that they would receive the official subtyping today, but nothing by their bedtime. Probably worth noting that the problem and/or another disease event may have been going on for some time, possibly complicating the diagnosis. We will continue to gather information and be ready to provide assistance if requested.

J

On Wed, Jan 25, 2017 at 1:59 PM, Alisa Pereira apereira@usaid.gov> wrote: Today in the mtg I heard someone in the audience say the Uganda samples were h5n8. Do we have confirmation on that finding?

Thanks

Sent from my iPhone

On Jan 25, 2017, at 4:58 PM, Jonna Mazet < <u>ikmazet@ucdavis.edu</u>> wrote:

Please find the attached the report of the rapid assistance provided in Rwanda in response to the government request for assistance in potential avian influenza response.

Have a nice day,

Jonna

predictmgt+unsubscribe@usaid.gov

predictmgt@usaid.gov

https://groups.google.com/a/usaid.gov/d/msgid/predictmgt/

CAO5tDrFBB4-_wNfMnYbXjzjj7KAuFgDG9b0B3Ho88WqLdvTPdA%40mail.gmail.com

From: Jon Epstein <epstein@ecohealthalliance.org>

Sent: Sun, 29 Jan 2017 01:05:40 -0500
Subject: Re: Bangladesh outbreak report (1 of 2)
To: Jonna Mazet <jkmazet@ucdavis.edu>

Hi,

Yes, I realized it's the older form, too, but when I searched on EIDITH, I couldn't find a word version or editable PDF, so just for now I asked Arif to use the older form. Now that you've sent the Rwanda one, we'll use that as template and transfer the info. I've also emailed Woutrina and Brian to see if we can post the blank form onto EIDITH as a word doc.

-Jon

On Sun, Jan 29, 2017 at 12:54 AM, Jonna Mazet < <u>jkmazet@ucdavis.edu</u>> wrote:

Jon.

I'll use this but it isn't the right form!

It is a really old version. You helped create the current one, which I believe is available in EIDITH in the outbreak module that Arif should be trained on and using.

With this email, I'm forwarding you the Rwanda form, as I don't want to go onto EIDITH right now to check.

We can use these versions (I have 1 of 2) for this weekend's report to USAID, but please migrate all info onto the proper form on Monday.

I'll review the first one more thoroughly now,

Jonna

On Sat, Jan 28, 2017 at 8:44 PM, Jon Epstein <epstein@ecohealthalliance.org> wrote:

Jonna,

Attached is the first of two reports detailing PREDICT's engagement in the crow die-off investigation in Rajshahi, Bangladesh. The second report should be coming soon, and details activity in Dhaka. Please contact me if you have any questions.

Thanks,

Jon

Jonathan H. Epstein DVM, MPH

Vice President for Science and Outreach

EcoHealth Alliance 460 West 34th Street – 17th floor New York, NY 10001

1.212.380.4467 (direct) REDACTED (mobile)

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EcoHealth Alliance leads cutting-edge research into the critical connections between human and wildlife health and delicate ecosystems. With this

science we develop solutions that promote conservation and prevent pandemics.

-

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Sent: Sat, 28 Jan 2017 22:09:35 -0800
 Subject: Re: Bangladesh outbreak report (1 of 2)
 From: Jonna Mazet <jkmazet@ucdavis.edu>
 To: Jon Epstein <epstein@ecohealthalliance.org>

Cc: "William B. Karesh, D.V.M" <karesh@ecohealthalliance.org>, Mindy Rostal <rostal@ecohealthalliance.org>, Peter Daszak

<daszak@ecohealthalliance.org>, predict-outbreak@ucdavis.edu, Ariful Islam <arif@ecohealthalliance.org> OUTBREAK-REPORT-SHORT FORM -Bangladesh crow outbreak Rajshahi Jan 12-19 2017 JM.docx

Dear Jon,

This report still needs a lot of clarifying language and to be completed up until today -- so it needs 9 more days of details. Those dates will help to simplify the communications around the testing, which is what has become the contentious or at least confusing part. Our role and movement of samples and facilitation of testing, etc. is not even covered in here. I know I mentioned in a separate email to you that we could go ahead for the weekend and use this old form, fixing it on Monday. But seeing that you still have substantive work to do here, please transfer the data onto the proper form before the next draft and make sure the Dhaka version is also on the proper form. Sorry that you couldn't find a Word version, but I have sent you one now that you can modify. USAID is seeing the other form for other countries, so we don't want to confuse them further by going back to this old form.

I'll look for the Dhaka report, but please make sure to take care of the English grammar editing, etc. that I was doing on this version before submitting to me. The text must be clear to the DC audience.

Thank you,

Jonna

On Sat, Jan 28, 2017 at 8:44 PM, Jon Epstein <epstein@ecohealthalliance.org> wrote:

Jonna,

Attached is the first of two reports detailing PREDICT's engagement in the crow die-off investigation in Rajshahi, Bangladesh. The second report should be coming soon, and details activity in Dhaka. Please contact me if you have any questions.

Thanks, Jon

Jonathan H. Epstein DVM, MPH

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OUTBREAK REPORT SHORT FORM

v. 3-20-12

The information in this form should be reported to organizational leads and PREDICT Technical Management.

Summary Information to	Report below:
Report	
1. Working Name of the Outbreak (Report name if assigned or use name of region and other descriptors)	Crow die-off investigation in Rajshahi district (northwestern part of Bangladesh
2. Date of last update of this form (most often today if you are making a change)	January 28, 2017
3.Inclusive dates (from start of outbreak to end of response – use today as end date if response ongoing)	January 12, 2017 to January 19, 2017
4.Date of first notification of PREDICT	January 12, 2017
5.Date of request of support from PREDICT (Number of days from notification to request)	January 12, 2017
6.Date of initiation of response by PREDICT (Number of days from request to response)	January 12, 2017
7. Briefly describe the outbreak. Was this an outbreak in humans, in animals (what species)? How many were affected & what was the range of symptoms?	For a few days, sweepers were noticing an unusual crow die- off (Corvus splendens) in the vicinity of the Rajshahi Medical College Hospital (RMCH) and reported it to their authority. The authority of RMCH reported this to the Institute of Epidemiology, Diseases Control and Research (IEDCR). Observations included crows suddenly falling from trees, torticollis, circling movement, and inability to fly. Acute mortality was also observed.
8. What type of assistance did PREDICT provide? Who were the PREDICT personnel involved? Include inclusive dates of PREDICT's involvement in the response.	No associated human infections were reported. PREDICT initially provided technical and then logistical and field support to carry out wild bird sample collection, transport, and laboratory testing via the PREDICT lab at icddr,b. The team consisted of Dr. Ariful Islam, Country Coordinator, PREDICT-2/Bangladesh, one Veterinary research officer, one anthropologist, one field research assistant, and one field technician who has wildlife expertise. PREDICT was engaged at the start of outbreak response, initially providing technical guidance and then assistance with sample collection and testing which continued up to the end of the response (January 12, 2017 to January 19, 2017).

Samples were screened at icddr,b then confirmatory te occurred at the federal lab, BLRI. BLRI results were considered official and reported to the govt. of Banglad 9. Provide description of how first noticed & date if possible. When was the first official acknowledgement in January 12, 2017 by director of IEDCR When was the first official acknowledgement of the outbreak (by which government or other Samples were screened at icddr,b then confirmatory te occurred at the federal lab, BLRI. BLRI results were considered official and reported to the govt. of Banglad We first got notice from IEDCR in January 12, 2017 by director of IEDCR The response was initiated by a human physician at IEI	esh. I got		
9. Provide description of how first noticed & date if possible. When was the first official acknowledgement of the outbreak considered official and reported to the govt. of Banglad We first got notice from IEDCR in January 12, 2017 and first official acknowledgement in January 12, 2017 by director of IEDCR	l got		
9. Provide description of how first noticed & date if possible. When was the first official acknowledgement of the outbreak We first got notice from IEDCR in January 12, 2017 and first official acknowledgement in January 12, 2017 by director of IEDCR	l got		
noticed & date if possible. When was the first official acknowledgement in January 12, 2017 by director of IEDCR	Ü		
When was the first official director of IEDCR acknowledgement of the outbreak	OCR,		
	OCR,		
(by which government or other The response was initiated by a human physician at IEI	DCR,		
	FETPB fellow and PREDICT-2 team. In this outbreak		
response, ministry of Health & Family Welfare, Ministry When was a response initiated and Forest, and Ministry of Fisheries and Livestock was inv			
by whom? Which ministries or from government of Bangladesh. Iccdr,b was involved f			
NGOs were involved? Who was in initial outbreak sample testing with BLRI conducting of			
charge of the national response? confirmatory testing. Prof. Dr. Meerjady Sabrina Flora,			
Director, IEDCR was in charge of the national response			
10.Comments on where it started, On the basis of information from local people, it's assur	ned		
speed and extent of geographic that it started at Rajshahi Medical Hospital campus,	_		
spread Bangladesh, and it extended up to about 5km from ano	ther		
crow roost at Barakudhi (Bank of Padma river). 11. If a lab diagnosis and Partial lab result obtained. Samples were initially scree	nod at		
confirmation has been obtained icddr,b and are currently being tested at Bangladesh	neu at		
give details, including species, Livestock Research Institute (BLRI) under Ministry of			
sample type and dates. Where was Agriculture.			
the diagnosis made? Give number Samples submitted to lab: 18/01/2017			
of days between initiation of Partial report received: 22/01/2017			
response and lab confirmation of Samples tested			
diagnosis. Species Number House crow 40			
House crow 40 Environmental samples from live 40			
bird market (poultry offal, feces)			
Crow feces from under roost 23			
Environmental fecal samples from 31			
poultry farms			
Grand Total 134			
For house crow, 37 were positive for H5 genes of influence			
Two samples of roost fecal samples and 9 live bird mar			
environmental samples were positive for influenza H5	gene.		
12. Were other EPT partners FAO also visited the outbreak area after PREDICT team			
involved in the response (which completed its sampling activity.			
ones and how)?			
Summary of the Outcome:			
13. Did people die? How many? No human cases reported			
	·		
how many? splendens) in Rajshahi. 15. Was there a relationship No such evidence was found			
between animals & humans in the			
disease or its transmission (state			
suspected or confirmed)?			

Additional information:

Start and maintain an Outbreak Action Timeline. The Timeline should be attached to the Outbreak Report Short Form and look Something like the timeline table template below.

Template for Outbreak Action Timeline:

Date	Day #	Action Taken
January 12, 2017		Received official request for assistance from Government of Bangladesh
January 13, 2017	1 st day	-Contact with Director of Rajshahi Medical College Hospital (RMCH) and updated field plan -Visited the outbreak site at Rajshahi medical college hospital campus -Trained a FETP,B fellow (Veterinary) and hospital personnel on avian sampling, biosafety, zoonoses, and precautions for handling of dead crows for incineration - Trained hospital personnel on biosafety, zoonoses, and precautions for handling and incineration of dead crows -Sampling sick and dead crows in RMCH -Visited bank of Padma River, Rajshahi and found few autolyzed dead crows. No samples were collected - Visited and observed crow feeding at live bird markets in Rajshahi city
January 14, 2017	2nd	-Briefed the Deputy Director of RMCH on the situationEarly morning observation and sample collection from dead and sick crows -Collection of environmental fecal samples and poultry offal samples from live bird markets (LBM) -Collection of information about source of poultry from poultry sellers in the LBM
January 15, 2017	3rd	-Collection of samples from sick and dead crows in RMCH and bank of Padma river - Collection of environmental fecal samples and poultry offal samples from live bird markets (LBM) of Rajshahi district -Collection of crow fecal samples underneath roost in bank of Padma river - Collection of environmental fecal samples from different poultry farms in Motihar subdistrict under Rajshahi district.

January 16, 2017	4 th	-Early morning observation and sample collection from dead and sick crows from RMCH and bank of Padma river - Collection of environmental fecal samples and poultry offal samples from LBMs of Rajshahi district -Collection of environmental fecal samples from poultry farms in Raj para and Goda gari subdistrict under Rajshahi districtActively participated in the meeting organized by Rajshahi City Corporation concerning biosecurity and biosafety
January 17, 2017	5 th	-Collection of samples from sick and dead crows from RMCH and Bank of Padma river - Collection of environmental fecal samples and poultry offal samples from Live bird markets (LBM) of Rajshahi district - Collection of environmental fecal samples from poultry farms in Boalia sub-district under Rajshahi district
January 18, 2017	6 th	-Early morning observation of crow roost for sick and dying crows and samples collected -Observed crow feeding at LBMs in Rajshahi city -Collection of environmental fecal samples and poultry offal samples from LBM in Rajshahi district - Sampled stray dogs in Rajshahi city -Visited pig raising communities of Rajshahi city and asked about unusual death in backyard poultry in recent past in these communities
January 19, 2017	7 th	Activities concluded; returned to Dhaka

From: Brian Bird <bhbird@ucdavis.edu>

To: Tracey Goldstein <tgoldstein@ucdavis.edu>;Jonna Mazet <jkmazet@ucdavis.edu>;Anthony,

Simon J. <sja2127@cumc.columbia.edu>

Sent: 3/29/2017 10:47:55 AM

Subject: Marburg like PCR hits in bats China

Just FYI- Towner sent this along to me this morning.

There's some odd things in this one that don't add up too much in my book. 1 bat with 4 positive for 4 different Filos by nested RT-PCR ... etc. But interesting none the less, and quite a few positives from lung tissues. Different tissue tropism than what we've seen with Marburg in the Rousettus from Uganda or the experimentally infected animals.

-b

Genetically Diverse Filoviruses in Rousettus and Eonycteris spp. Bats, China, 2009 and 2015

Xing-Lou Yang,¹ Yun-Zhi Zhang,¹ Ren-Di Jiang,¹ Hua Guo, Wei Zhang, Bei Li, Ning Wang, Li Wang, Cecilia Waruhiu, Ji-Hua Zhou, Shi-Yue Li, Peter Daszak, Lin-Fa Wang, Zheng-Li Shi

Genetically divergent filoviruses detected in *Rousettus* and *Eonycteris* spp. bats in China exhibited 61%–99% nt identity with reported filoviruses, based on partial replicase sequences, and they demonstrated lung tropism. Co-infection with 4 different filoviruses was found in 1 bat. These results demonstrate that fruit bats are key reservoirs of filoviruses.

Filoviruses (family Filoviridae) are nonsegmented, negative-strand RNA viruses belonging to 3 genera: Marburgvirus, Ebolavirus, and Cuevavirus. Marburgvirus comprises 1 species, Marburg marburgvirus, which includes Marburg virus (MARV) and Ravn virus. Ebolavirus comprises 5 species, Zaire ebolavirus (ZEBOV), Sudan ebolavirus, Bundibugyo ebolavirus, Taï Forest ebolavirus, and Reston virus (RESTV). Cuevavirus comprises 1 species, Lloviu cuevavirus (1). Filovirus-associated diseases, especially those caused by ZEBOV and MARV, are recognized as a major threat to public health, causing high rates of death among humans and nonhuman primates.

Bats have been implicated as natural reservoirs for filoviruses (2,3) on the basis of serologic evidence from 19 bat species in 8 countries across Asia, Africa, and Europe (2,4–9). In addition, filovirus RNA has been detected in 8 bat species from 7 countries in the same regions (2–4,10–13). Outbreaks of Marburg hemorrhagic fever among miners in Uganda in 2007 were traced to bat MARV (11). In addition, we previously discovered filovirus antibodies in several bat species in China (14). This finding was further confirmed by He et al., who detected filovirus RNA in brown fruit bats (Rousettus leschenaultii) in China (10). Considering the diversity of bat species in

Author affiliations: Chinese Academy of Sciences, Wuhan, China (X.-L. Yang, R.-D. Jiang, H. Guo, W. Zhang, B. Li, N. Wang, L. Wang, C. Waruhiu, Z.-L. Shi); Dali University, Dali, China (Y.-Z. Zhang); University of Chinese Academy of Sciences, Beijing, China (R.-D Jiang, H. Guo, N. Wang); Yunnan Institute of Endemic Diseases Control and Prevention, Dali (Y.-Z. Zhang, J.-H. Zhou); Wuhan University, Wuhan (S.-Y. Li); EcoHealth Alliance, New York, New York, USA (P. Daszak); Duke–NUS Graduate Medical School, Singapore (L.-F. Wang)

DOI: http://dx.doi.org/10.3201/eid2303.161119

the world, long-term surveillance of bat filoviruses is essential for better understanding of distribution, diversity, and ecology of these viruses. We conducted a study to determine the diversity of filoviruses among bats in Yunnan Province, China.

The Study

We captured 150 apparently healthy adult bats from 2 caves in Yunnan Province, China: 1 in Jinghong City in November 2009, and 1 in Mengla County in December 2015 (Table 1; Figure 1). The bat species we collected were Hipposideros armiger, Aselliscus stoliczkanus, Myotis ricketti, Rhinolophus Monoceros, Miniopterus fuscus, Ia io, Eonycteris spelaea, and Rousettus sp. We humanely killed all bats and collected their hearts, intestines, lungs, spleens, kidneys, livers, brains, and blood for testing. We used 2 methods to analyze bat lung tissues for presence of filovirus RNA: first, we used nested PCR with the primers FV F1/R1 and FV F2/R2 (10), and next, we used quantitative PCR (qPCR) with 3 groups of qPCR with primers and probes designed from viral sequences obtained in this study (online Technical Appendix Table, https://wwwnc. cdc.gov/EID/article/23/3/16-1119-Techapp1.pdf).

Using degenerate nested PCR, we detected filovirus RNA in 15 fruit bat specimens (E. spelaea and Rousettus sp.); the specimens comprised 10 (23.3%) of 43 E. spelaea and Rousettus sp. collected in 2009 and 5 (11.9%) of 42 collected in 2015. Using qPCR, we detected filovirus RNA in 20 specimens from E. spelaea (n = 4) and Rousettus sp. (n = 16) bats: 10 (23.3%) of the bats were collected in 2009 and 10 (23.8%) in 2015. No filovirus was detected in other bat species studied (Table 1). The 310-bp L gene sequences (GenBank accession nos. KX371873-KX371890) exhibited 65%–99% nt identity among themselves and 61%–99% nt identity with known filoviruses. Phylogenetic analysis showed that the sequences from the bats formed 3 independent groups, groups 1-3. Groups 1 and 2 comprised 6 and 11 sequences, respectively, all of which were obtained in this study (Figure 2). Group 3 comprised 2 sequences, 1 from this study and 1 previously published (10). Pairwise distance analysis indicated that sequences in group 1 share the highest nucleotide identity (75%-78%) with MARV and those in group 2 share the highest identity (69%-74%) with Ravn virus. The 2 sequences in group 3 are highly similar and share 66%-70% nt identity with other filovirus species. Of note, 1 bat specimen (no. 9447) was co-infected

¹These authors contributed equally to this article.

Table 1. Filovirus infection detected in bat samples by PCR, ELISA, and Western blot, Yunnan Province, China, 2009 and 2015*

	No. positive/no. tested (%)					
Bat species, by year and month of		Quantitative	ELI	SA†	Wester	n blot†
collection/location	RT-PCR	PCR	ZEBOV	RESTV	ZEBOV	RESTV
2009 Nov/Jinghong City						· · · · · · · · · · · · · · · · · · ·
Hipposideros armiger	0/15	0/15	0/15	0/15	0/15	0/15
Rhinolophus monoceros	0/4	0/4	0/4	0/4	0/4	0/4
la io	0/3	0/3	0/3	0/3	0/3	0/3
Miniopterus fuscus	0/1	0/1	0/1	0/1	0/1	0/1
Myotis ricketti	0/27	0/27	1/27 (3.7)	1/27 (3.7)	1/27 (3.7)	1/27 (3.7)
Eonycteris spelaea and Rousettus sp.	10/43 (23.3)	10/43 (23.3)	5/43 (11.6)	6/43 (13.9)	2/43 (4.6)	2/43 (4.6)
2015 Dec/Mengla County						
Aselliscus stoliczkanus	0/15	0/15	0/15	0/15	0/15	0/15
E. spelaea and Rousettus sp.	5/42 (11.9)	10/42 (23.8)	14/25 (56)	7/25 (28)	11/25 (44)	4/25 (16)

*EBOV, Zaire ebolavirus; RESTV, Reston virus.

†ELISA and Western blot results for samples collected in 2009 were from a previous study (14).

with 4 different filovirus strains (BtFiloYN9447–1 to 9447–4) with high divergence (Figure 2; online Technical Appendix Figure 1). To further determine the phylogenetic relationship of these viruses with known filoviruses, we amplified more L gene sequence (1,475 bp) for strains BtFiloYN2162 and BtFiloYN9447–1. Similar to the 310-bp sequences, the 1,475-bp sequence of the BtfiloYN2162 shared 99% identity with BtDH04 at the nucleotide level, the 1,475-bp sequence of BtFiloYN9447–1 shared 62%–71% with known filoviruses.

To determine the tissue tropism of these viruses, we performed qPCR with primers and probes designed for

each of the 3 different groups (online Technical Appendix Table). Results showed that filoviruses were mainly located in the lung and that genome copy numbers ranged from 29 to 523,582/mg of tissue (Table 2). Only 2 bat blood samples (nos. 2202 and 9447) were positive for filovirus RNA; 5 samples (nos. 2202, 2188, 9434, 9442, and 9447) contained filoviruses with more widespread tissue tropism. We were unable to isolate virus from PCR-positive samples by using Vero-E6 cells.

To detect filovirus IgG and IgM, we expressed Histagged truncated nucleoproteins from RESTV or ZEBOV in *Escherichia coli* and used them as antigens (online

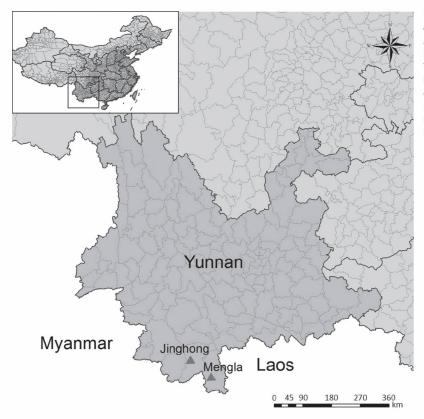


Figure 1. Bat collection sites for a study on genetically diverse filoviruses in *Rousettus* and *Eonycteris* spp. bats in China. Triangles indicate Jinghong City and Mengla County, Yunnan Province, where 150 apparently healthy adult bats were collected from 2 caves in November 2009 (Jinghong City) and December 2015 (Mengla County). Inset map shows the location of Yunnan Province in China.

Table 2. Virus tropism and quantification in different tissues of Eonycteris spelaea and Rousettus sp. bats, China, 2009 and 2015

				Positive organs (viral genome copies/mg		
Sample no.	Species	Sex	Primer group*	tissue or viral genome copies/µL blood)		
2162	E. spelaea	М	3	Lung (119)		
2176	Rousettus sp.	М	2	Lung (2,103)		
2180	Rousettus sp.	F	2	Lung (42)		
2181	Rousettus sp.	M	2	Lung (202)		
2187	Rousettus sp.	F	1	Lung (46)		
2188	Rousettus sp.	F	1	Lung (43), liver (400), kidney (42)		
2190	Rousettus sp.	M	2	Lung (195)		
2196	Rousettus sp.	F	1	Lung (123)		
2199	Rousettus sp.	F	1	Lung (74)		
2202	Rousettus sp.	F	1	Lung (864), liver (368), kidney (342), intestine		
				(254), heart (807), blood (1)		
9428	Rousettus sp.	F	2	Lung (156)		
9434	Rousettus sp.	F	1	Lung (554), spleen (3,014), kidney (380),		
				heart (320), intestine (2751)		
9435	Rousettus sp.	F	2	Lung (127)		
9442	E. spelaea	M	2	Lung (180), spleen (88)		
9445	Rousettus sp.	M	1	Lung (143)		
9447	Rousettus sp.	F	2	Lung (132), liver (154), spleen (661)		
9447	Rousettus sp.	F	1	Lung (106,606), liver (220,051), spleen		
				(523,582), kidney (41,653), brain (4,885),		
				heart (17,982), intestine (11,788), blood (485)		
9454	Rousettus sp.	M	1	Lung (448)		
9457	E. spelaea	M	1	Lung (52)		
9459	Rousettus sp.	F	2	Lung (182)		
9463	E. spelaea	M	2	Lung (114)		

*These represent primers and probes designed based on partial sequences of the virus L gene obtained in this study. Sequence information is provided in the online Technical Appendix (https://wwwnc.cdc.gov/EID/article/23/3/16-1119-Techapp1.pdf).

Technical Appendix). In this experiment, we used 25 bat samples from 2015 that had enough serum volume for testing; 14 samples showed a strong cross-reaction with the ZEBOV nucleoprotein, and among them, 7 showed a weak cross-reaction with RESTV nucleoprotein. We used Western blotting to confirm these results; 11 of the 25 samples were positive for ZEBOV nucleoprotein and 4 for RESTV nucleoprotein (Table 1; online Technical Appendix Figure 2). No samples overlapped between those identified as positive by PCR and those identified as positive by serologic testing. Results of a serum neutralization assay with HIV pseudovirus carrying the ZEBOV glycoprotein showed that the ELISA-positive samples had no cross-neutralization activity to the pseudovirus (14).

Conclusions

We detected novel filovirus sequences with high divergence in *E. spelaea* and *Rousettus* sp. bats in China. Phylogenetic analysis of partial sequences suggested that at least 3 distinct groups of filovirus are circulating in fruit bats in China. The distances between these sequences indicates that the 3 groups may represent 3 novel species or genera. Of interest, we detected antibodies reacting more strongly to ZEBOV than RESTV nucleoprotein in some filovirus RNA–negative samples, suggesting that the bats were infected with another/other filovirus(es) cross-reactive with ZEBOV nucleoprotein or that nucleoproteins of the novel filoviruses were cross-reactive with ZEBOV and RESTV nucleoproteins.

The bat samples in this study were collected from 2 caves in 2009 and 2015, respectively; the caves are ≈200 km metric apart. Across the 2 different years and locations, we detected closely related viruses and found 1 bat that was acutely co-infected by 4 different filoviruses; this finding suggests that these viruses have been circulating in the 2 bat species and that densely populated bat caves provide opportunity for cross-infection with different viruses. However, considering the migration ability of the fruit bat, we cannot exclude the possibility that there are exchanges of virus between the bats in these two caves. Longitudinal surveillance with tracking tags may help to better understand the spatial—temporal distribution of these viruses in bat populations.

In previous reports, filoviruses were primarily detected in liver and spleen tissues (4,15). In our study, we primarily detected filoviruses in the lung. We suspect that lung tissues are the major target for these bat filoviruses. Thus, these filoviruses may have the potential to be transmitted through the respiratory tract.

These results will be helpful in providing a better understanding of the distribution and diversity of filoviruses, which may have implications for public health. Considering their feeding habitats, fruit bats are often in close contact with domestic animals and human populations. It is therefore necessary to establish long-term and proactive surveillance of these viruses and related diseases.

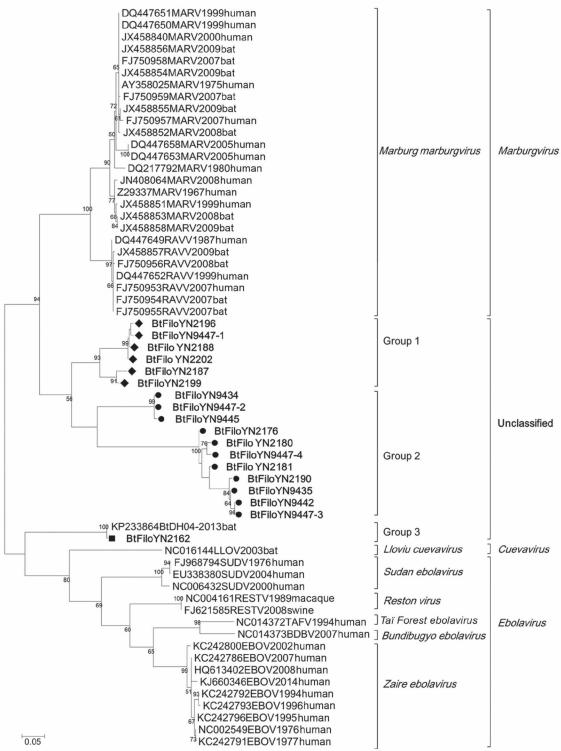


Figure 2. Phylogenetic analysis of filovirus isolates collected in study of genetically diverse filoviruses in *Rousettus* and *Eonycteris* spp. bats in China, compared with reference isolates. Analysis was based on a 310-bp segment of the filovirus L gene. Bootstrap values lower than 50 are not shown. The maximum-likelihood tree was constructed based on the 310-bp segment with 1,000 bootstrap replicates. The sequences obtained in this study are marked with a triangle (group 1), black dot (group 2), or rectangle [group 3). Sequences from GenBank are listed by their accession numbers, followed by the virus name, collection year, and host. Scale bar indicates nucleotide substitutions per site.

DISPATCHES

This work was funded by a joint National Natural Science Foundation of China grant (81290341) and the China Mega-Project for Infectious Disease grant (2014ZX10004001-003) from the Minister of Science and Technology of the People's Republic of China (to Z-L.S.); a Scientific and Technological Basis Special Project grant (2013FY113500; to Z-L.S. and Y-Z.Z.); a National Natural Science Foundation of China grant (81260437) and State Key Laboratory for Infectious Diseases Prevention and Control grant (2013SKLID302) (to Y-Z.Z.); and a United States Agency for International Development Emerging Pandemic Threats PREDICT project grant (cooperative agreement AID-OAA-A-14-00102; to P.D.D.).

Dr. Yang is as a research assistant at Wuhan Institute of Virology, Chinese Academy of Sciences. His primary research interests include viral epidemiology and viral characterization of small mammals.

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Address for correspondence: Zheng-Li Shi, Key Laboratory of Special Pathogens and Biosafety, Wuhan Institute of Virology, Chinese Academy of Sciences, Wuhan 430071, China; email: zlshi@wh.iov.cn

EID Podcast:Quiet Moment around the Campfire



Frederic Remington was an American painter, sculptor, illustrator, and writer whose works frequently featured cowboys, Native Americans, soldiers, horses, bison, and other iconic features of the rapidly vanishing American West. The EID June, 2014 cover painting, commonly known as *The Cigarette*, was discovered in Remington's studio after his death. In this painting, four cowboys relax around a small outside a cabin. A plume of smoke rises toward the clear blue-green night sky flecked with a few stars, past a large skin hanging on the side of the cabin. The cabin does not overwhelm the painting but details such as the shadow under the roofline, the seams between logs, the softened edges of the structure, and the tautly stretched skin reveal Remington's deftness at rendering textures. His use of subdued colors punctuated by the reflected firelight underscores the quiet of the evening's respite following a long day's work.

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EMERGING
INFECTIOUS DISEASES

Article DOI: http://dx.doi.org/10.3201/eid2303.161119

Genetically Diverse Filoviruses in Rousettus and Eonycteris spp. Bats, China, 2009 and 2015

Technical Appendix

Sample Collection

Bats were trapped by mist net in Jinghong (N21°46′17," E101°30′22," H882 m) and Mengla (N22°26′16," E100°41′10," H1300 m) in Yunnan Province, China, in November 2009 and December 2015. All bats were humanely sacrificed with isoflurane and their blood and tissue samples (hearts, intestines, spleens, lungs, kidneys, livers, and brains) were immediately collected. To minimize the influence to bat colony, juvenile bats were not included in the sampling. All the samples were transported to the laboratory and stored at –80°C until use. All sampling processes were performed by veterinarians with approval from the Animal Ethics Committee of the Wuhan Institute of Virology (Animal ethics approval number: WIVA05201202) and Yunnan Institute of Endemic Diseases Control and Prevention (Animal ethics approval number: 200801 and 201302).

RNA Extraction, Filovirus Detection, and Sequencing

Bat tissue samples (\approx 0.1 g) were cut into small pieces and homogenized in 1 mL of Minimum Essential Medium (MEM, GIBCO) using two steel beads and shaking on a Tissue Lyser II (Qiagen). RNA was extracted from 200 μ L of supernatant of ground tissues with a High Pure Viral RNA Kit (Roche) following the manufacturer's instructions. RNA was eluted in 50 μ L elution buffer and then aliquoted and stored at -80° C. Nested RT-PCR using degenerate

primers (FV-F1/R1 and FV-F2/R2) for filovirus L gene was performed to detect filovirus sequences (1). A first round of PCR was performed in a 25-μL reaction mix containing 12.5 μL PCR 2× reaction mix buffer, 10 pmol of each primer, 2.5 mmol/L MgSO4, 20 U RNase inhibitor, 1 μL SuperScript III/ Platinum Taq Enzyme Mix, and 5 μL RNA. The PCR program was performed as follows: 50°C for 30 min and 94°C for 4 min; 36 cycles at 94°C for 30 sec, 52°C for 30 sec, and 68°C for 40 sec; and a final extension at 68°C for 5 min. The second round of PCR was done in a 25-μL reaction mix containing 2.5 μL PCR 10× reaction buffer, 10 pmol of each primer, 50 mmol/L MgCl₂, 0.5 mmol/L dNTPs, 0.1 μL Platinum Taq Enzyme (Invitrogen), and 1 μL first-round PCR product. The amplification procedure was performed as follows: 94°C for 5 min; 36 cycles at 94°C for 30 sec, 52°C for 30 sec, and 72°C for 40 sec; and a final extension at 72°C for 5 min. The amplicons were gel purified and sequenced directly using the ABI prism sequencer or cloned using pGEM-T Easy Vector System for sequencing if the direct sequencing failed (Technical Appendix Figure 1).

In vitro RNA Transcription and Establishment of Standard Curve

Based on the sequences obtained in this study, we designed 3 sets of primers and probes that specifically target the three groups of filovirus detected in China (Technical Appendix Table). Probes were labeled at the 5' end with 6-carboxyfluorescein (6-FAM) and at the 3' end with Black Hole Quencher 1 (BHQ1). Primers targeting fragments of templates from each of the 3 groups were synthesized (Technical Appendix Table). The forward primer contained a 5'-T7 RNA polymerase promoter sequence (TAATACGACTCACTATAGGG) to facilitate in vitro transcription. The template DNA was amplified from positive samples and transcribed into RNA with a MAXIscript Kit (Applied Biosystems), according to the manufacturer's instructions. The RNA transcripts were diluted with a 10-fold serial dilution and used as standards to calculate viral genome copy number.

Viral RNA Quantification

We performed qRT-PCRs with AgPath-ID One-Step RT-PCR Kit (Applied Biosystems) according to the manufacturer's instructions. Each 25- μ L reaction mixture contained 12.5 μ L of 2× RT-PCR buffer, 1 μ L RT-PCR buffer enzyme mix, 400 nmol/L each primer, 120 nmol/L probe, and 3 μ L of RNA extract. Amplification was carried out in 96-well plates with Step One PCR instructions (Applied Biosystems). Thermocycling conditions were as follows: 10 min at 45°C for reverse transcription; 10 min at 95°C for activation of Taq DNA polymerase; and 40 cycles at 95°C for 15 sec, 54°C for 20 sec, and 68°C for 20 sec. Each run included 3 viral positive template controls and 2 negative controls to monitor performance. Positive samples were characterized by a well-defined exponential fluorescence curve that crossed the cycle threshold (C_t) within 36 cycles. Specimens with a C_t >36 were repeated to exclude operational faults. Viral genome copy number was calculated in each sample using the standard curves of the template RNA.

Antibody Detection by ELISA

The nucleocapsid (NP) gene of RESTV and EBOV were synthesized based on reference sequences with reference numbers FJ621583 and L11365, respectively. Predicted epitope of NP were cloned to pPET28a (Sequence will be provided upon request). The His-tagged truncated NP of RESTV (Reston-NP) or EBOV (Zaire-NP) were expressed in *Escherichia coli* BL21 and purified with a His.Bind Kit (Novagen) following the manufacturer's instructions. The purified proteins strongly reacted to hyperimmune rabbit sera raised against the full-length NP protein of RESTV or EBOV by ELISA (2), and no cross reactive with each other. Purified truncated NPs from EBOV or RESTV were coated on ELISA plates at ≈ 100 ng/well, and bat sera were tested in triplicate at a dilution of 1:100, followed by detection with horseradish peroxidase (HRP)-conjugated protein A/G (Pierce) at a dilution of 1:20,000. Samples with a mean optical density at least 3-fold higher than that of the negative control were considered positive. A positive sample

and a negative sample from our previous results were used as a positive and negative control, respectively (2).

Antibody Detection by Western Blotting

Truncated EBOV or RESTV NPs (500 ng) were separated through sodium dodecyl sulfate polyacrylamide gel electrophoresis (SDS-PAGE). Proteins were transferred onto a membrane made of polyvinylidene difluoride, which was activated with methanol. The membrane was then blocked with 3% bovine serum albumin in phosphate buffered saline for 1 h at 37°C. After blocking, the membrane was incubated with bat serum at a dilution of 1:100 overnight at 4°C. Rabbit serum immunized with truncated EBOV or RESTV NP was used as the positive control. The membrane was incubated with HRP-conjugated protein A/G (Pierce) at 1:40,000. The HRP substrate (Millipore) was added onto the blot and detected under chemiluminescent camera (Technical Appendix Figure 2). The positive serum samples were further confirmed by neutralization assay with pseudovirus with EBOV glycoprotein (GP) as previously reported (2).

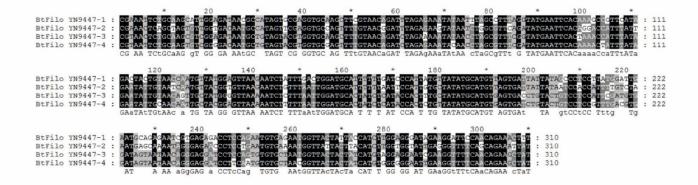
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- 2. Yuan J, Zhang Y, Li J, Zhang Y, Wang LF, Shi Z. Serological evidence of ebolavirus infection in bats, China. Virol J. 2012;9:236. PubMed http://dx.doi.org/10.1186/1743-422X-9-236

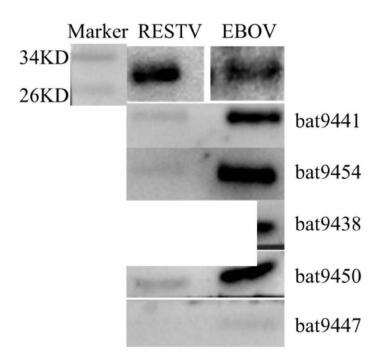
Technical Appendix Table. Primer sequences used for template preparation and viral quantification

Primer	Sequence*		
Group1-Te-F	TAATACGACTCACTATAGGG ATCAAGCGTCGTGGCATCG		
Group1-Te-R	ACAGGAGATGCAGGTCCAAAG		
Group2-Te-F	TAATACGACTCACTATAGG ATGCAGGTCCATAGCTTC		
Group2-Te-R	TCATCAAGCGTCGTGGCAT		
Group3-Te-F	TAATACGACTCACTATAGG GCATCAAGCGTCATGGCA		
Group3-Te-R	CTCTACTCCTCCTAAGTGAC		
Group1-Q-F	TGATCCCATTATGTTATATGCAT		
Group1-Q-R	TCCTTCTATCCCTCCAAGATG		
Group1-Q-Probe	Fam-TAGTGATTATTATAGCCCTCCTT-BHQ1		
Group2-Q-F	CCCACATGATAGTAGCC		
Group2-Q-R	TGAGTGACCTGTACTGTCCTC		
Group2-Q-Probe	Fam-TTAGCACACATTGGAGGATC-BHQ1		
Group3-Q-F	ACAATCCACCTCACTGTCTAA		
Group3-Q-R	CTCTACTCCTCAAGTGAC		
Group3-Q-Probe	Fam-AAGCCAAAATCGAGAACATCCA-BHQ1		

^{*}The T7 promoter sequence is italicized.



Technical Appendix Figure 1. Alignment of different strains of filovirus YN9447.



Technical Appendix figure 2. Confirmation of positive serum samples by Western blotting. Truncated EBOV- or RESTV-NPs (500 ng) were transferred onto a polyvinylidene fluoride membrane. The membrane was incubated with bat serum at a dilution of 1:100 and detected with HRP-conjugated protein A/G (Pierce) at 1:40,000. Polyclonal antibodies against the full-length NP of RESTV or EBOV were used as positive controls.

From: Andrew Clements <aclements@usaid.gov>

Sent: Tue, 11 Jul 2017 21:39:35 +0200

Subject: Re: PREDICT International Travel Request - P. Dawson, A. Sayed, M. Rizk to Jordan

To: Cassandra Louis Duthil <clouisduthil@usaid.gov>

Cc: Katherine Leasure <kaleasure@ucdavis.edu>, PREDICTMGT predictmgt@usaid.gov>, Predict inbox

continue</pr

Approved subject to mission concurrence.

Andrew P. Clements, Ph.D. Senior Scientific Adviser

Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health

U.S. Agency for International Development

Mobile phone: 1-571-345-4253 Email: <u>aclements@usaid.gov</u>

On Jul 11, 2017, at 3:52 PM, Cassandra Louis Duthil <<u>clouisduthil@usaid.gov</u>> wrote:

Andrew,

please approve.

Best,

Cassandra Louis Duthil
Program Assistant
Emerging Threats Division

U.S. Agency for International Development (USAID)

Telephone: 202-712-5583 Cell: REDACTED | clouisduthil@usaid.gov

On Mon, Jul 10, 2017 at 7:52 PM, Katherine Leasure < kaleasure@ucdavis.edu > wrote:

Hi Andrew. Please find below international travel requests for Patrick Dawson, Amira Sayed and Moktar Rizk. Our apologies for the late submission of this request. The USAID Jordan Mission has been working closely with the PREDICT Country Liaison for Jordan and Egypt, Patrick Dawson, to plan a cross-country training and new-hire onboarding. Dates provided by the USAID mission have only now been finalized and are as follows: Partick Dawson to visit July 20th and Egyptian Colleges to join July 23-27. Although this request was not submitted in the time frame requested for ITAs, the Country Liaison has been involved in extensive coordination and back-and-forth with the Jordanian mission, and they have expressed these dates as desirable and necessary for this important training opportunity. Please let me know if you have any questions. Thank you!

- 1. Dawson (Jordan): \$1500 airfare/\$390 (Amman) max daily per diem
- 2. Sayed, Rizk (Jordan): \$450 airfare/\$390 (Amman) max daily per diem

Travel Requests -

1. <u>EcoHealth Alliance</u> would like to request travel approval for <u>Patrick Dawson</u> to travel from <u>New York</u>, <u>NY, USA</u> to <u>Amman, Jordan</u> from <u>July 19-27, 2017</u> to <u>train and prepare staff for and to implement human community surveillance for PREDICT Jordan</u>.

<u>Trip purpose</u>: The purpose of this trip is for Patrick to on-board new PREDICT hires for the human community surveillance work (PREDICT quizzes, CITI training, IACUC training, fit testing, and ensuring vaccine compliance); train all staff in the IRB protocol and study procedures; train EIDITH data entry staff in the human questionnaire and modules; practice administering the questionnaires and other study procedures; and lead the field team in its first two site visits for the human community surveillance. The goal is to fully train and prepare the field team for human community surveillance, make a minimum of two field trips, enroll 25-40 participants, enter the data into EIDITH, and plan for all future human surveillance trips through the end of Y3.

2. <u>EcoHealth Alliance</u> would like to request travel approval for <u>Amira Sayed and Mokhtar Rizk</u> to travel from <u>Cairo</u>, <u>Egypt</u> to <u>Amman</u>, <u>Jordan</u> from <u>July 23-27</u>, <u>2017</u> to <u>cross-train staff for human community surveillance for PREDICT Jordan</u>.

<u>Trip purpose</u>: The purpose of this trip is for members of the PREDICT Egypt human surveillance field team to cross-train their Jordanian colleagues in human community surveillance. The Egypt team has been successfully conducting human community surveillance since PREDICT Year 2 and will be able to offer the Jordanian team firsthand experience and knowledge about conducting this work in similar settings in Egypt. Because these team members are also fluent in Arabic, they will be able to clarify aspects of the surveillance work to the Jordanian team in their local language. They will also be able to demonstrate how to best communicate the study information and procedures to potential participants in the field. This cross-training will be helpful in getting the Jordan team started and comfortable with all aspects of implementing the human surveillance, as well as helpful for discussing region-specific challenges that were faced in Egypt and how they were resolved.

Katherine Leasure

HR/Payroll/Financial Assistant

One Health Institute

University of California, Davis

530-752-7526

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kaleasure@ucdavis.edu

-

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From: KEDACTED

To: Jonna Mazet <jkmazet@ucdavis.edu>, Elizabeth Leasure <ealeasure@UCDAVIS.EDU>
Cc: David John Wolking <djwolking@ucdavis.edu>, Woutrina A Smith <wasmith@ucdavis.edu>

Subject: RE: Action Required: Please Submit VCS/TraiNet Training Requests - CY 2018

Sent: Wed, 17 Jan 2018 22:11:55 +0000

Added to MT agenda.

Thanks,

From: On Behalf Of Jonna Mazet

Sent: Wednesday, January 17, 2018 2:08 PM **To:** Elizabeth Leasure <ealeasure@UCDAVIS.EDU>

Cc: David John Wolking <djwolking@ucdavis.edu>; Woutrina A Smith <wasmith@ucdavis.edu>;

Subject: Fwd: Action Required: Please Submit VCS/TraiNet Training Requests - CY 2018

Hi Liz,

I know we decided that most of our trainings are not covered by TraiNet. Do we have the justification for that decision written down, at least for me to be able to verbally explain to Andrew?

, please add to MT agenda.

Thanks, J

----- Forwarded message -----

From: Andrew Clements < aclements@usaid.gov >

Date: Wed, Jan 17, 2018 at 6:47 AM

Subject: Fwd: Action Required: Please Submit VCS/TraiNet Training Requests - CY 2018 To: djwolking@ucdavis.edu, wasmith@ucdavis.edu, Jonna Mazet jkmazet@ucdavis.edu>

Cc: Alisa Pereira apereira@usaid.gov>

See below.

Andrew P. Clements, Ph.D. Senior Scientific Advisor

Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health

U.S. Agency for International Development

Mobile phone: <u>1-571-345-4253</u> Email: <u>aclements@usaid.gov</u> Begin forwarded message:

From: Lisa Kramer < lkramer@usaid.gov Date: January 17, 2018 at 12:09:10 PM GMT+1

To: Marilyn Crane < <u>mcrane@usaid.gov</u>>, Andrew Clements < <u>aclements@usaid.gov</u>>, Lindsay Parish < <u>lparish@usaid.gov</u>>, Ricardo Echalar < <u>rechalar@usaid.gov</u>>, Nadira Kabir < <u>nkabir@usaid.gov</u>>

Cc: Ashna Kibria akibria@usaid.gov">akibria@usaid.gov>, Andrew Thaiyah athaiyah@usaid.gov>

Subject: Fwd: Action Required: Please Submit VCS/TraiNet Training Requests - CY 2018

Dear Marilyn, Andrew, Lindsay, and Ricardo,

Please let me know if any of your project staff based in Kenya need to be trained to use the TraiNet system.

The USAID/KEA Mission just sent around a request to ensure that projects are compliant with TraiNet, the online system used by IPs to document trainings. The KEA Mission will be conducting a TraiNet training for IP staff in Kenya. I assume that our IPs are managing TraiNet from the project headquarters teams and that Kenya-based staff are not in need of the TraiNet training. Please confirm.

Thanks, Lisa

Lisa Kramer

Regional Emerging Pandemic Threats Advisor USAID/Kenya and East Africa



----- Forwarded message -----

From: Ashna Kibria akibria@usaid.gov> Date: Tue, Jan 16, 2018 at 12:06 PM

Subject: Re: Action Required: Please Submit VCS/TraiNet Training Requests - CY 2018

To: Lisa Kramer lkramer@usaid.gov>

Cc: Sarah Paige < spaige@usaid.gov >, Amalhin Shek < ashek@usaid.gov >, Andrew Thaiyah < athaiyah@usaid.gov >

Lisa,

I haven't heard of this training before. I think the AORs would be in the best position to respond to this, so please feel free to reach out to them.

Thanks, Ashna

On Tue, Jan 16, 2018 at 4:00 AM, Lisa Kramer < lkramer@usaid.gov> wrote: Hello Ashna, Sarah, and Amalhin,

The USAID/KEA Mission just sent around a request to ensure that projects are compliant with TraiNet and have the necessary training. I assume that the AORs are managing this with the project headquarters teams and that Kenya-based staff are not in need of the TraiNet training. Can you confirm this information, or should I ask the AORs directly.

Thanks, Lisa

Lisa Kramer

Regional Emerging Pandemic Threats Advisor USAID/Kenya and East Africa



----- Forwarded message -----

From: **Dinah Kihara** <dkihara@usaid.gov>

Date: Tue, Jan 16, 2018 at 11:31 AM

Subject: Action Required: Please Submit VCS/TraiNet Training Requests - CY 2018 To: Chip Bury <cbury@usaid.gov>, Lisa Walker liwalker@usaid.gov>, Tracy McCracken

<tmccracken@usaid.gov>, Richard Mugo <ri>mugo@usaid.gov>, Nzuki Mwania </ri>nmwania@usaid.gov>,

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        <ekanyanya@usaid.gov>, Mikala Lauridsen <mlauridsen@usaid.gov>, Brian Otiende
        <botiende@usaid.gov>. Ben Wandago <buandago@usaid.gov>, Wairimu Gakuo <wgakuo@usaid.gov>,
       Peter Arimi < parimi@usaid.gov >, Stanley Bii < sbii@usaid.gov >, "S. Katherine Farnsworth"
        <sfarnsworth@usaid.gov>, Maria Francisco <mfrancisco@usaid.gov>, Sila Kimanzi <skimanzi@usaid.gov>,
       Lisa Kramer <a href="mailto:kramer@usaid.gov">kramer@usaid.gov</a>, Sheila Macharia <a href="mailto:kramer@usaid.gov">kramer@usaid.gov</a>, Maurice Maina
        <mmaina@usaid.gov>, Alice Micheni <amicheni@usaid.gov>, Grace Miheso <gmiheso@usaid.gov>,
        "Mokaya, Rose" <rmokaya@usaid.gov>, Subroto Mukherjee <smukherjee@usaid.gov>, Lilian Mutea
        <|mutea@usaid.gov>, Kelvin Munguti 
kemunguti@usaid.gov>, Agiso Odhuno <aodhuno@usaid.gov>,
        Vincent Ojiambo <vojiambo@usaid.gov>, Salome Okutoyi <sokutoyi@usaid.gov>, Washington Omwomo
        <womwomo@usaid.gov>, Osborn Otieno <ootieno@usaid.gov>, Mildred Shieshia <mshieshia@usaid.gov>,
        Teresa Simiyu <tsimiyu@usaid.gov>, Ruth Tiampati <tiampati@usaid.gov>, Daniel Wacira
        Isabella Yonga < iyonga@usaid.gov >, Stephen Orr < sorr@usaid.gov >, Patrick Maingi < pmaingi@usaid.gov >
Cc: Randolph Augustin < raugustin @usaid.gov >, Mark Carrato < mcarrato@usaid.gov >, Juniper Neill
        <ineill@usaid.gov>, Robert Powers <rpowers@usaid.gov>, Stephen Brager <sbrager@usaid.gov>, Scott
       Cameron < scameron@usaid.gov >, Joyce Kim < jkim@usaid.gov >, Warren Harrity < wharrity@usaid.gov >,
        Stephen Fitzpatrick <sfitzpatrick@usaid.gov>, Mildred Steward <msteward@usaid.gov>, "Mukira, Loise
        (Nairobi/EA/PDI)" < lmukira@usaid.gov>, Elphas Obiero < eobiero@usaid.gov>, Francis Kahihu
        <fkahihu@usaid.gov>
```

Dear colleagues:

According ADS 252 and ADS 253, USAID funded projects that have Participant Training (PT)/TraiNet component should adhere to policy directives and required procedures for the design, implementation, documentation and reporting of Participant Training programs, including Exchanges, for foreign national that are financed, in whole or in part, directly or indirectly, by USAID. Training support should be reported for in-country; third country and U.S. based training through TraiNet (USAID web-based training resource management system).

As such, we request you to provide us with names of representatives from implementing partners to be trained on TraiNet/VCS in CY 2018.

```
We are targeting all partners in a specific geographic area.

We note that some of you have already provided names of their potential participants but we would like to ensure we have a
C
Y 2018 comprehensive PT plan for all our implementing partners
.
We shall then schedule trainings as appropriate.
Please fill out this google sheet by February 9, 2018.

I
```

- Name of Participant/s
- Email address
- Position held in the organization
- Name of Implementing Partner
- Activity/Project Name
- Geographic Ar

USAID A/COR

Many Thanks,

Dinah

Dinah Kihara Strategic Planning & Analysis Office
USAID | KENYA & EAST AFRICA

Tel: REDACTED E-mail: dkihara@usaid.gov

Ashna Kibria, MPH

Public Health Advisor **Emerging Threats Division**

USAID/Washington, Bureau for Global Health Phone: REDACTED (office) REDACTED (cell)

Email: akibria@usaid.gov

From: Andrew Clements <aclements@usaid.gov>
To: Katherine Leasure <kaleasure@ucdavis.edu>

CC: PREDICTMGT predictmgt@usaid.gov>;predict@ucdavis.edu predict@ucdavis.edu>;Prof.

Jonna Mazet <jkmazet@ucdavis.edu>

Sent: 5/3/2018 9:43:10 AM

Subject: [predict] Re: Change to Approved ITA - J. Belkhiria to Guinea/Senegal

Thanks. No reconcurrence needed for Guinea.

Senegal travel approved subject to mission concurrence.

Andrew P. Clements, Ph.D. Senior Scientific Advisor

Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health

U.S. Agency for International Development

Mobile phone: 1-571-345-4253 Email: aclements@usaid.gov

On May 3, 2018, at 6:34 PM, Katherine Leasure < kaleasure@ucdavis.edu> wrote:

Hi Andrew. UC Davis would like to amend the previously approved ITA for Jaber Belkhiria travel to Guinea. He will need to extend his time in Guinea in order to participate in the Kindia field visit, after which he will travel on to Senegal to review laboratory and field activities. A copy of the previously approved ITA is below, with changes highlighted in yellow. Please let me know if you have any questions. Thank you!

<u>UC Davis</u> would like to request travel approval for <u>Jaber Belkhiria</u> to travel from <u>Tunis, Tunisia</u> to <u>Conakry, Guinea</u> from <u>May 12-15, 2018</u> May 12-18, 2018 for <u>planning and coordination meetings with PREDICT implementing and host country partners. From <u>Conakry, Guinea</u> he will travel to <u>Dakar, Senegal</u> from <u>May 18-26, 2018</u> to <u>review laboratory and field activities</u>.</u>

<u>Trip purpose</u>: Guinea – Dr. Belkhiria will travel to Conakry, Guinea for meetings with in-country staff, US Mission, and USAID-W delegation. <u>Senegal</u> – Dr. Belkhiria will travel to Dakar, Senegal to meet with in-country staff and review laboratory and field activities. [\$1600 airfare/\$327 (Conakry), \$288 (Dakar) max daily per diems].

Katherine Leasure

HR/Payroll/Financial Assistant One Health Institute University of California, Davis 530-752-7526 530-752-3318 FAX kaleasure@ucdavis.edu

__

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To post to this group, send email to predictmgt@usaid.gov.

To view this discussion on the web visit https://groups.google.com/a/usaid.gov/d/msgid/predictmgt/00e001d3e2fc%248dafa1d0%24a90ee570%24%40ucdavis.edu.

From: "William B. Karesh" <karesh@ecohealthalliance.org>

To: Jonna Mazet < jkmazet@ucdavis.edu>

Cc: Andrew Clements <aclements@usaid.gov>, Chris Johnson <ckjohnson@ucdavis.edu>,

Tracey Goldstein <tgoldstein@ucdavis.edu>, "Woutrina Smith" <wasmith@ucdavis.edu>,

"sja2127@cumc.columbia.edu" <sja2127@cumc.columbia.edu>, Peter Daszak

<daszak@ecohealthalliance.org>, Leilani Francisco <francisco@ecohealthalliance.org>, David Wolking

<djwolking@ucdavis.edu>, Brian Bird <bhbird@ucdavis.edu>, Elizabeth Leasure

<ealeasure@ucdavis.edu>, Karen Saylors <ksaylors@metabiota.com>, Suzan Murray

<MurrayS@si.edu>, Amanda Fine < REDACTED \, Predict inbox <predict@ucdavis.edu>, Brooke

Genovese

Subject: Re: ABSTRACTS: 2019 GHS Conference, Sydney, Australia, June 18-20, 2019

Wed, 7 Nov 2018 22:04:10 +0000 Sent: MAZET PREDICT GHSA 2019 Abstract BK.docx

Very nice, honored to be involved.

A few suggested edits on the attached to link to GHS theme, same for suggested title: Enabling EID Risk Reduction, Detection and Reporting

BK

Introduction

The GHSA prioritizes the need for integrated animal and public health sector capacity strengthening to combat zoonotic diseases.

Context and Aim

PREDICT, a transdisciplinary team supported by USAID, developed a targeted viral surveillance approach aimed at preventing or reducing pathogen spillover, amplification, and spread.

Method/Findings

By collecting environmental, host, and behavioral data and analyzing biological samples, the team detected more than 200 known viral gene segments and discovered approximately 1,000 more, enabling risk assessments to inform mitigation strategies and advancing One Health capacity in more than 30 countries.

Innovative Contribution

Focusing our work where environments, human activities, and market systems are changing in ways that are conducive to viral spillover, we enabled partner countries to locate highest-risk exposure interfaces; detect and better characterize pathogens of epidemic and pandemic potential; identify significant animal reservoirs and amplification hosts of viruses; ascertain the potential of virus-spillover into amplification hosts, such as livestock and companion animals; gain a greater understanding of high-risk human behavioral activities; improve disease surveillance and laboratory capacities through workforce development in line with Global Health Security Agenda priorities; and efficiently design intervention strategies that target zoonotic disease emergence, amplification, and spread while also promoting wildlife and natural resource conservation.

From: Jonna Mazet <jkmazet@ucdavis.edu>
To: Thomas Quinn <tquinn2@jhmi.edu>

CC: Matt Blake <mblake@ucdavis.edu>;Woutrina Smith <wasmith@ucdavis.edu>;Meghan Davis

<mdavis65@jhu.edu>;David Peters <dpeters@jhu.edu>;Thomas Inglesby
<tinglesby@jhu.edu>;Jennifer Nuzzo <jnuzzo1@jhu.edu>;Marc Lennon
<mlennon1@jhu.edu>;Audrey Lindahl <alindah1@jhu.edu>;Anna Kalbarczyk

<akalbarc@jhu.edu>

Sent: 12/20/2018 8:13:25 PM

Subject: Re: USAID ONE HEALTH WORKFORCE NEXT GENERATION

Wonderful, Tom, sounds like things are progressing well. It is certainly our honor! Happy Holidays, Jonna

Jonna AK Mazet, DVM, MPVM, PhD Professor of Epidemiology & Disease Ecology Executive Director, One Health Institute Global Director, PREDICT Project of USAID Emerging Pandemic Threats Program

School of Veterinary Medicine University of California 1089 Veterinary Medicine Drive Davis, CA 95616, USA +1-530-752-3630 onehealthinstitute.net

For scheduling and logistical issues, please contact:
Ms. Brooke Genovese
bgenovese@ucdavis.edu
+1-530-752-3630

On Thu, Dec 13, 2018 at 7:52 AM Thomas Quinn < tquinn2@jhmi.edu > wrote:

Hi Jonna,

Thanks so much for getting back to me. I now know that Matt and Woutrina are in touch with the JHU team and I am very pleased with the possibility of having a strong collaboration between our institutions. It would be such a honor working with you and your colleagues at UC Davis. If I can be of any help let me know.

Best.

Tom

From: Jonna Mazet < jkmazet@ucdavis.edu>
Date: Friday, December 7, 2018 at 1:59 PM
To: Thomas Quinn < tquinn2@jhmi.edu>

Cc: Matt Blake <<u>mblake@ucdavis.edu</u>>, Woutrina Smith <<u>wasmith@ucdavis.edu</u>> Subject: Re: USAID ONE HEALTH WORKFORCE NEXT GENERATION Dear Tom.

Thanks very much for reaching out. We are exploring our desire and capacities to bid. Matt Blake and Woutrina Smith are leading our explorations, so I've copied them here. Would be good to discuss with them, but I'm happy to fill in blanks if needed.

Have a nice weekend,

Jonna

Jonna AK Mazet, DVM, MPVM, PhD

Professor of Epidemiology & Disease Ecology

Executive Director, One Health Institute

Global Director, PREDICT Project of USAID Emerging Pandemic Threats Program

School of Veterinary Medicine

University of California

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+1-530-752-3630

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For scheduling and logistical issues, please contact:

Ms. Brooke Genovese

bgenovese@ucdavis.edu

+1-530-752-3630

On Tue, Dec 4, 2018 at 12:28 PM Thomas Quinn <tquinn2@jhmi.edu> wrote:

Hi Jonna,

You and I met several years ago at the CUGH conference when I moderated a panel on Global Health Security. We have also met on other occasions like at the National Academy of Medicine when I chaired the Global Health Committee.

In any event, I hope you are well and don't mind me reaching out to you regarding this new RFA from USAID. I know you are quite busy with PREDICT 2 but I wanted to inquire to see if you and/or colleagues at UC Davis had interest in partnering with Johns Hopkins University if we were to apply.

I believe several of my colleagues met Matt Blake from UC Davis at the pre-planning meeting hosted by USAID and so we thought you were definitely interested in this project. I am also close friends with Pat Conrad, a colleague of yours that I work with at CUGH, and I think she thought your institution might be

interested in this project.

Would you mind letting me know if UCD is interested and whether we could chat by phone in the near future to discuss potential possibilities. I should mention that we at Hopkins also direct an educational component of a \$97 million USAID funded project with PHI to support a global health fellowship program called STAR which is analogous to this planned project for building a workforce in One Health. We can describe details much more and what we would like to do in this planned RFA if you are at all interested in working with us.

All the best,

Tom

Thomas C. Quinn, MD, MSc

Director, Johns Hopkins Center for Global Health

Professor of Medicine, Pathology, International Health, Epidemiology and Molecular Microbiology and Immunology

NIH Distinguished Investigator and Head, Section on International HIV/STD Research

Laboratory of Immunoregulation,

Associate Director of International Research,

Division of Intramural Research, NIAID, NIH

Office: 410-955-7635

From: Andrew Clements <aclements@usaid.gov>
To: Katherine Leasure <kaleasure@ucdavis.edu>

CC: PREDICTMGT predictmgt@usaid.gov>;Predict inbox <predict@ucdavis.edu>;Jonna Mazet

<Jkmazet@ucdavis.edu>;tbah@usaid.gov <tbah@usaid.gov>

Sent: 5/1/2019 1:53:29 PM

Subject: Re: Change to Approved ITA - Monagin/Belkhiria (Guinea) Date Change

Thanks, Katie.

Copying Tamar at the Mission for visibility.

Andrew P. Clements, Ph.D. Senior Scientific Advisor

Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health

U.S. Agency for International Development

Mobile phone: 1-571-345-4253 Email: <u>aclements@usaid.gov</u>

On May 1, 2019, at 1:34 PM, Katherine Leasure < kaleasure@ucdavis.edu > wrote:

Hi Andrew. The dates for Corina Monagin and Jaber Belkhiria's travel to Guinea have changed due to in-country partner availability. Jaber will now depart May 10, and Corina will depart May 11; their return date will remain the same. A copy of the previously approved ITAs are below for reference, with changes highlighted in yellow. Please let me know if you have any questions. Thanks!

1. <u>UC Davis</u> would like to request travel approval for <u>Dr. Corina Monagin</u> to travel from <u>Los Angeles, USA</u> to <u>Conakry, Guinea</u> from <u>May 6 11-18</u> for team meetings regarding sample data and project close-out.

<u>Trip Purpose:</u> Dr. Monagin will be traveling to Conakry to meet with PREDICT team members, including Dr. Jaber Belkhiria to review procedures related to surveillance and behavior data entry and analysis. Dr. Monagin will also be meeting with the team to discuss 6-month staff plan and end of project workplan to ensure capacity development of the team and proper transition timeline. Dr. Monagin also plans to meet with project stakeholders to discuss these work plans and the ongoing community engagement strategy that focuses on risk communication.

2. <u>UC Davis</u> would like to request travel approval for <u>Dr. Jaber Belkhiria</u> to travel from <u>Tunis, Tunisia</u> to <u>Conakry, Guinea</u> from <u>May 4 10–18, 2019</u> for <u>team meetings about sample data and closeout plans</u>.

<u>Trip purpose:</u> Dr. Belkhiria will be traveling to Conakry to meet with PREDICT team members, including Dr. Corina Monagin to review procedures related to surveillance and behavior data entry and analysis. While he is there, he plans to meet with project stakeholders to discuss project close out plans and the ongoing community engagement strategy that focuses on risk communication. He will also be meeting with the PREDICT Country Coordinator to review data analysis techniques in preparation for his attendance at the upcoming data conference that will be held in June 2019 at UC Davis.

--

Katherine Leasure HR/Pavroll/Financial

HR/Payroll/Financial Assistant One Health Institute 530-752-7526

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From: William B. Karesh karesh@ECOHEALTHALLIANCE.ORG

To: USAID-EID@LISTSERV.UGA.EDU <USAID-EID@LISTSERV.UGA.EDU>

Sent: 1/2/2020 6:02:52 AM

Subject: Draft Concept note for USAID Private Sector Partnership

Hi Jake, Susan, et al.

Happy New Year's to all.

The draft concept note planned to be sent on the 23rd for our review must have gotten lost in my email system over the holidays. Could someone send me a copy and I will try to get comments back later today.

Thanks,

Billy

William B. Karesh, D.V.M

Executive Vice President for Health and Policy

EcoHealth Alliance 460 West 34th Street - 17th Floor New York, NY 10001 USA

+1.212.380.4463 (direct) +1.212.380.4465 (fax) www.ecohealthalliance.org

President, OIE Working Group on Wildlife

Co-chair, IUCN Species Survival Commission - Wildlife Health Specialist Group

EPT Partners Liaison, USAID Emerging Pandemic Threats - PREDICT-2 Program

EcoHealth Alliance leads cutting-edge research into the critical connections between human and wildlife health and delicate ecosystems. With this science we develop solutions that promote conservation and prevent pandemics.

On Dec 17, 2019, at 9:51 AM, Jacob N Maas < inmaas@uga.edu> wrote:

Hi all,

See attached for a rough agenda for today's call in 10 minutes.

The timeline is a very early draft and came directly from my inexpert brain to paper – it is intended to be a starting point for discussion.

See some of you soon! Jake

Jake Maas, M.A.

Director of Proposal Enhancement

Office of Research | University of Georgia 419 Tucker Hall, 310 East Campus Road, Athens, GA 30602-1589

Office: 706.542.2090 | jnmaas@uga.edu http://research.uga.edu/proposal-enhancement/ From: Andrew Clements <aclements@usaid.gov>
To: Katherine Leasure <kaleasure@ucdavis.edu>

CC: PREDICTMGT predictmgt@usaid.gov>;Predict inbox <predict@ucdavis.edu>;Jonna Mazet

<Jkmazet@ucdavis.edu>

Sent: 1/23/2020 7:43:10 AM

Subject: Re: PREDICT International Travel Requests

Hi Katie,

Any chance the date is a typo and is supposed to be March instead of April?

Otherwise, approving something after the project ends on 3/31/20 is problematic.

Andrew

Andrew P. Clements, Ph.D.
Senior Scientific Advisor
Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health
U.S. Agency for International Development
Mobile phone: 1-571-345-4253
Email: aclements@usaid.gov

On Jan 22, 2020, at 6:00 PM, Katherine Leasure kaleasure@ucdavis.edu wrote:

Hi Andrew. Please find below a travel request for your review and approval Please let me know if you have any questions. Thanks!

1. Grange (USA): \$1,000 airfare/\$600 conference fees *lodging and per diem will be covered on non-PREDICT funds

Travel Request -

1. <u>UC Davis</u> would like to request approval for <u>Dr. Zoe Grange</u> to travel from <u>Dunblane</u>, <u>Scotland</u> to <u>Washington</u>, <u>DC</u>, <u>USA</u> from <u>April 16-26</u>, <u>2020</u> for the <u>meetings with Dr. Jonna Mazet and the present on PREDICT</u> work at the 2020 CUGH Conference.

<u>Trip purpose</u>: Dr. Grange will meet with Dr. Jonna Mazet to work on integration of PREDICT-2 data into the SpillOver tool and finalization of the P-2 comprehensive report. She will also present the risk ranking application for PREDICT viruses at the 2020 CUGH Conference: Global Health in a time of Worldwide Political Change.

--

Katherine Leasure

HR/Payroll/Financial Assistant One Health Institute 530-752-7526

--

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From: Andrew Clements <aclements@usaid.gov>
To: Katherine Leasure <kaleasure@ucdavis.edu>

CC: PREDICTMGT predictmgt@usaid.gov>;Predict inbox <predict@ucdavis.edu>;Jonna Mazet

<Jkmazet@ucdavis.edu>

Sent: 1/29/2020 1:47:26 PM

Subject: Re: PREDICT International Travel Requests

Hi Katie,

I've been informed that only closeout related activities are allowable after the award ends. So I think work on the final report is fine, but her per diem for the days she is working on other non-closeout activities would have to come from another source.

Andrew

Andrew P. Clements, Ph.D.
Senior Scientific Advisor
Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health
U.S. Agency for International Development
Mobile phone: 1-571-345-4253
Email: aclements@usaid.gov

On Jan 22, 2020, at 6:00 PM, Katherine Leasure < kaleasure@ucdavis.edu> wrote:

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Travel Request -

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<u>Trip purpose</u>: Dr. Grange will meet with Dr. Jonna Mazet to work on integration of PREDICT-2 data into the SpillOver tool and finalization of the P-2 comprehensive report. She will also present the risk ranking application for PREDICT viruses at the 2020 CUGH Conference: Global Health in a time of Worldwide Political Change.

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Katherine Leasure

HR/Payroll/Financial Assistant One Health Institute 530-752-7526

--

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From: Andrew Clements <aclements@usaid.gov>

To: djwolking@ucdavis.edu <djwolking@ucdavis.edu>;Jonna Mazet

<jkmazet@ucdavis.edu>;Christine Kreuder Johnson <ckjohnson@ucdavis.edu>

CC: predictmgt@usaid.gov predictmgt@usaid.gov>

Sent: 2/18/2020 8:03:22 AM **Subject:** Request for 3/20/20

Hi all,

I am requesting that PREDICT-2 prepare a summary of main findings that can be shared publicly. To be determined what this will be and how it will look, but we need to put something out and waiting until the final report is done is not possible.

You already have publications and will be presenting in DC on March 17 so those pieces can definitely form the basis. Let's discuss the main themes and how detailed you can make it in terms of viruses found, interfaces prioritized, etc. I'm guessing it would be easiest to align with how you will organizing the final report.

Will there be public access to the data in EIDITH by 3/20/20?

Thanks. Happy to discuss by phone if helpful.

Andrew

Andrew P. Clements, Ph.D. Senior Scientific Advisor

Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health

U.S. Agency for International Development

Mobile phone: 1-571-345-4253 Email: aclements@usaid.gov From: Andrew Clements <aclements@usaid.gov>

To: David J Wolking <djwolking@ucdavis.edu>;Elizabeth Leasure

<ealeasure@ucdavis.edu>;Christine Kreuder Johnson <ckjohnson@ucdavis.edu>;Jonna

Mazet <jkmazet@ucdavis.edu>

Sent: 5/1/2020 8:56:02 AM
Subject: remaining extension funds

seems to be some movement within the budget office for the \$742,562 for Cambodia, Egypt and Myanmar.

will keep you updated.

Andrew Clements, Ph.D.
Senior Scientific Advisor
Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health
U.S. Agency for International Development
Mobile phone: 1-571-345-4253
E-mail: aclements@usaid.gov

For more information on USAID's Emerging Pandemic Threats program, see: http://www.usaid.gov/ept2

"Dr. Melinda Rostal" <rostal@ecohealthalliance.org> From:

Sent: Thu, 7 May 2020 15:41:02 -0400

David J Wolking davis.edu, Christine Kreuder Johnson ckjohnson@ucdavis.edu, Tracey Goldstein Cc:

<tgoldstein@ucdavis.edu>, Amanda Fine { REDACTED }, Sarah Olson REDACTED }, Carolina Chrurchill REDACTED >, Karen Saylors < REDACTED >, "Dr. Kevin Olival" <Olival@ecohealthalliance.org>, Nicole Gardner <nrgardner@ucdavis.edu>, Alexandra Shaffer <aashaffer@ucdavis.edu>, "predict@ucdavis.edu" predict@ucdavis.edu

Peter Daszak daszak@ecohealthalliance.org, Aleksei Chmura chmura@ecohealth.net>

Jon Epstein <epstein@ecohealthalliance.org>

Subject: [predict] Re: Scheduling a call re: P2 Extension - SARS COV-2 reservoir investigation

Hi David,

I'm free at 12PM EST, 2PM EST or 3PM EST on Wednesday next week.

Best, Mindy

Melinda Rostal DVM, MPH, PhD

Principal Scientist, Vector-Borne Diseases

Rift Valley Fever Virus Project Manager

EcoHealth Alliance 460 West 34th Street, Suite 1701 New York, NY 10001

1.212.380.4489 (direct) www.ecohealthalliance.org

EcoHealth Alliance leads cutting-edge scientific research into the critical connections between human and wildlife health and delicate ecosystems. With this science, we develop solutions that prevent pandemics and promote conservation.

EcoHealth Alliance 460 West 34th Street - 17th floor New York, NY 10001

On May 7, 2020, at 3:38 PM, Jon Epstein <epstein@ecohealthalliance.org</pre> wrote:

David.

I'm free at 2pm or 5pm next Wednesday.

On Thu, May 7, 2020 at 1:56 PM David J Wolking djwolking@ucdavis.edu wrote:

Hey there,

Chris, Tracey and I want to connect on plans for the P2 extension Objective 2 (SARS COV-2 reservoir investigations in the Asia region).

Would next week Wednesday April 13th at 9AM or 12PM work for you all?

Let me know the best time and I'll follow-up with an invite with calendar and Zoom info.

Best,

David

David J. Wolking Senior Manager, Global Programs, One Health Institute Global Operations Officer, PREDICT Project of USAID Emerging Threats Division Senior Manager, PREEMPT Project School of Veterinary Medicine University of California, Davis

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Jonathan H. Epstein DVM, MPH, PhD

VicePresident for Science and Outreach

EcoHealth Alliance 460 West 34th Street, Ste. 1701 New York, NY 10001 1.212.380.4467 (direct)

REDACTED (mobile)

web: ecohealthalliance.org

Twitter: @epsteinjon

EcoHealth Alliance develops science-based solutions to prevent pandemics and promote conservation

From: Andrew Clements <aclements@usaid.gov>
To: Katherine Leasure <kaleasure@ucdavis.edu>

CC: PREDICTMGT predictmgt@usaid.gov>;predict@ucdavis.edu

Sent: 6/10/2017 12:30:14 AM

Subject: Re: Change to ITA: A. Latinne Indonesia/Thailand

Received. Thanks!

Andrew P. Clements, Ph.D.
Senior Scientific Adviser
Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health

Mobile phone: 1-571-345-4253 Email: <u>aclements@usaid.gov</u>

U.S. Agency for International Development

On Jun 10, 2017, at 12:21 AM, Katherine Leasure < <u>kaleasure@ucdavis.edu</u>> wrote:

Hi Andrew. The Thailand portion of the previously submitted ITA is being put on hold for the time being, following further discussion with the team and Sudarat. They will continue to assess the needs of the team in-country, and may submit a new travel request later in the year. Alice is no longer seeking concurrence for the PREDICT Thailand portion of her travel; she will be taking personal travel in Thailand, following approved PREDICT travel to Indonesia. Please let me know if you have any questions. Thanks!

EcoHealth Alliance would like to request travel approval for <u>Dr. Alice Latinne</u> to travel from <u>New York, NY, USA</u> to <u>Bogor, Indonesia</u> from <u>May 22-31, 2017</u> for <u>meetings with in-country partners</u>. From <u>Bogor, Indonesia</u>, she will travel to <u>Bangkok, Thailand</u> from <u>June 1-30, 2017</u> for <u>field work in Loei province</u>.

<u>Trip purpose: Indonesia</u> – Dr. Latinne will meet with PREDICT team at IPB to train new staff members. <u>Thailand</u> – Dr. Latinne will join the PREDICT field trip in Loei and assist the PREDICT team for rodent sampling (June 16-28). *Meals & lodging costs for June 1-15 will be paid for by the traveler; she will be working remotely, and it is more cost effective for her to stay in-country.

Katherine Leasure

HR/Payroll/Financial Assistant One Health Institute University of California, Davis 530-752-7526 530-752-3318 FAX kaleasure@ucdavis.edu

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You received this message because you are subscribed to the Google Groups "PREDICTMGT" group. To unsubscribe from this group and stop receiving emails from it, send an email to predictmgt+unsubscribe@usaid.gov.

To post to this group, send email to predictmgt@usaid.gov.

To view this discussion on the web visit https://groups.google.com/a/usaid.gov/d/msgid/predictmgt/042301d2e16e%249919c220%24cb4d4660%24%40ucdavis.edu.

From: Andrew Clements <aclements@usaid.gov>

To: djwolking@ucdavis.edu <djwolking@ucdavis.edu>;Jonna Mazet

<jkmazet@ucdavis.edu>;Tracey Goldstein <tgoldstein@ucdavis.edu>

CC: predictmgt@usaid.gov predictmgt@usaid.gov>;Dennis Carroll <dcarroll@usaid.gov>

Sent: 6/6/2018 8:35:13 AM

Subject: Request for Predict 1 and 2 data on viruses detected

Hi all,

I was asked to give a presentation this upcoming Monday at a WHO meeting on facilitating access and benefit sharing for pathogens to support public health. They would like me to "highlight the multilateral partnership of the Global Virome Project as well as its innovative approach."

To give the audience some background and perspective, would it be relatively easy for you to provide me (by COB Friday) with the total number of new and known viruses detected under both Predict 1 and 2 broken out by viral family? I'd like to give a sense of how Predict is changing what is known and that GVP will build on that.

If you already have some slides on GVP and sample sharing, please send those along.

Happy to discuss by phone if you have any questions.

Thanks!

Andrew

Email: aclements@usaid.gov

Andrew P. Clements, Ph.D.
Senior Scientific Advisor
Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health
U.S. Agency for International Development
Mobile phone: 1-571-345-4253

From: Peter Daszak <daszak@ecohealthalliance.org> Dennis Carroll <dcarroll@usaid.gov>, Jonna Mazet <jkmazet@ucdavis.edu>, To: Chrisman <cchrisman@usaid.gov>, Nathan Wolfe <nwolfe@metabiota.com>, Eddy Rubin <erubin@metabiota.com> RE: Kaiser Daily Global Health Policy Report - Tuesday, June 19, 2018 Thu, 21 Jun 2018 01:05:05 +0000 Sent: I've got comments back from everyone now. I've been at WHO for 2 days, now at Inst Pasteur, then off to Canada for One Health mtg Friday. I'm planning to submit at some point during this travel. Cheers, Peter Peter Daszak President EcoHealth Alliance 460 West 34th Street - 17th Floor New York, NY 10001 Tel. +1 212-380-4474 www.ecohealthalliance.org @PeterDaszak @EcoHealthNYC EcoHealth Alliance leads cutting-edge research into the critical connections between human and wildlife health and delicate ecosystems. With this science we develop solutions that prevent pandemics and promote conservation. **From:** Dennis Carroll [mailto:dcarroll@usaid.gov] **Sent:** Tuesday, June 19, 2018 3:06 PM To: Peter Daszak; Jonna Mazet; REDACTED Cara Chrisman; Nathan Wolfe; Eddy Rubin

Subject: Fwd: Kaiser Daily Global Health Policy Report - Tuesday, June 19, 2018

ote that the KFF has picked up the Nature commentary, see #9.

What is the status of the reply?

----- Forwarded message -----

From: Kaiser Family Foundation <emails@kff.org>

Date: Tue, Jun 19, 2018 at 12:19 PM

Subject: Kaiser Daily Global Health Policy Report - Tuesday, June 19, 2018

To: pmahanna@usaid.gov

Daily Global Health Policy Report



Tuesday, Jun 19, 2018

In The News

- 1. Diplomacy, Development Investments More Cost Effective Than Defense Spending For U.S. Security, U.S. Military Official Says
- 2. Growth In Humanitarian Aid Funding Slowed For 2nd Year In 2017, Report Shows
- 3. WHO Releases 11th Edition Of International Classification Of Diseases
- 4. WHO Formerly Recognizes 'Gaming Disorder' As Mental Health Problem
- 5. New York Times Examines Efforts To Eliminate Guinea Worm Among Humans, Dogs In Chad
- 6. DRC Ebola Outbreak Holds Steady, As Health Workers Track, Contain Cases
- 7. More News In Global Health

Editorials and Opinions

- 8. World Should Not 'Shy Away' From Discussing Ethical Steps To Stabilize Population Growth, Including Improving Access To Contraceptives
- 9. Disease Outbreak Prevention Funding Should Go Toward Human Surveillance Not Broad Genomic Surveys To Mitigate Outbreaks

From the Global Health Policy Community

- 10. Oxfam Adviser Highlights 6 Findings Of 2018 Global Humanitarian Assistance Report
- 11. 'Science Speaks' Highlights Recent Pieces On TB, Death Data, AMR
- 12. New Issue Of NIH Fogarty International Center's 'Global Health Matters' Newsletter Available Online

From the U.S. Government

In The News

1. Diplomacy, Development Investments More Cost Effective Than Defense Spending For U.S. Security, U.S. Military Official Says

<u>Devex</u>: Investment in diplomacy, development more effective than defense, says senior U.S. military official

"One of the United States' top military officials spoke out Monday about the importance of diplomacy and development alongside defense in keeping the country safe. 'Dollar for dollar, every dollar spent on diplomacy and development -- the growth of democratic institutions or at least civil institutions in countries that allow their leadership to be sensitive to the needs of their citizens -- are immensely more effective ... than having to deploy soldiers, sailors, airmen, or marines to a crisis where we have to fix a problem. We're an immensely expensive enterprise,' said General Paul Selva, the vice chairman of the Joint Chiefs of Staff..." (Saldinger, 6/19).

2. Growth In Humanitarian Aid Funding Slowed For 2nd Year In 2017, Report Shows

Thomson Reuters Foundation: Growth in aid funding slows for second year "Growth in humanitarian aid slowed for the second year running in 2017 as government spending virtually stagnated, according to a <u>report</u> published on Tuesday that said the industry needed to find new ways of funding its work. Overall aid increased by three percent year on year, with private donors accounting for almost all that growth, the annual Global Humanitarian Assistance Report showed..." (Beresford, 6/19).

3. WHO Releases 11th Edition Of International Classification Of Diseases

Xinhua News: WHO releases new int'l classification of diseases

"The World Health Organization (WHO) on Monday released the latest 11th version of the

International Classification of Diseases (ICD-11), which provides a common language that allows
health professionals to share health information across the globe. For the first time the ICD is
completely electronic and has a much more user-friendly format, thanks to unprecedented
involvement of health care workers who have joined collaborative meetings and submitted
proposals..." (6/18).

4. WHO Formerly Recognizes 'Gaming Disorder' As Mental Health Problem

Associated Press: Compulsive video-game playing could be mental health problem "Obsessive video gamers know how to anticipate dangers in virtual worlds. The World Health Organization says they now should be on guard for a danger in the real world: spending too much time playing. In its latest revision to a disease classification manual, the U.N. health agency said Monday that compulsively playing video games now qualifies as a mental health condition..."

(Keaten/Cheng, 6/18).

<u>U.N. News</u>: For video game addiction, now read official 'gaming disorder': World Health Organization "...While some media reports welcomed the formal designation of 'gaming disorder' within WHO's International Statistical Classification of Diseases and Related Health Problems (ICD) as helpful to sufferers, others saw it as causing needless concern among parents..." (6/18).

Additional coverage of this story is available from CNN, The Hill, and Reuters.

5. New York Times Examines Efforts To Eliminate Guinea Worm Among Humans, Dogs In Chad

New York Times: The Man Who (Almost) Wiped Out the Guinea Worms
"Dr. Ernesto Ruiz-Tiben's days on the front lines of the guinea-worm wars often end with a dinner of what he calls 'poulet à la bicyclette' -- chicken so lean and muscular that it could ride in the Tour de France. But before anyone on his team eats, one tradition must be honored. Dr. Ruiz-Tiben raises a beer: 'To the demise of the worm!' 'To the demise of the worm!' cry all in attendance, clinking glasses. It is a ritual he has followed for decades, ever since becoming the chief strategist in the war against the Guinea worm run by the Carter Center, the global health philanthropy established in Atlanta by former President Jimmy Carter..." (McNeil, 6/18).

New York Times: Nearly Eradicated in Humans, the Guinea Worm Finds New Victims: Dogs "...In [Chad, an] arid central African country, the long global struggle to eliminate a horrifying human parasite has encountered a serious setback: dogs. They are being infected with Guinea worms, and no one knows how. Scientists are desperate to solve the puzzle. If the answer isn't found soon, or if the worms begin to spread widely into other species -- a handful already have been found in cats and even baboons -- then 32 years of work to end the scourge may crumble, said Mark L. Eberhard, a parasitologist at the Centers for Disease Control and Prevention..."

(McNeil, 6/18).

6. DRC Ebola Outbreak Holds Steady, As Health Workers Track, Contain Cases

CIDRAP News: More suspected Ebola cases noted, but total holds steady
"The Democratic Republic of the Congo (DRC) announced 11 new suspected cases of Ebola over
the weekend in Bikoro and Iboko, the remote health zones where the current outbreak began in the
middle of May, but the outbreak total has not risen. The case count now stands at 64 cases (38
confirmed, 14 probable, and 12 suspected). The total is actually two cases lower than the DRC's
previous count of 66 because officials have ruled out several cases previously listed as
suspected..." (Soucheray, 6/18).

VOA News: How DRC's Ebola outbreak has been contained

"...Despite difficult-to-traverse terrain and local communities' skepticism of health care workers, from the start of the outbreak, officials got in front of the disease and kept it in check. Several factors made the DRC response markedly different than previous outbreaks, saving countless lives..." (Solomon, 6/18).

7. More News In Global Health

Intellectual Property Watch: The Myth Behind Health And Trade Agreements -- Q&A With Othoman Mellouk (6/18).

News Deeply: Doctors Without Borders: Undernutrition Is a Community Health Issue (Green, 6/18).

Newsweek: What is Disease X? Deadly bird flu virus could be next pandemic (Andrew, 6/15).

NPR: As Carbon Dioxide Levels Rise, Major Crops Are Losing Nutrients (Kennedy, 6/19).

Reuters: Saudi MERS outbreaks killed 23 over four months: WHO (Miles, 6/18).

<u>Thomson Reuters Foundation</u>: As Venezuela's health system crumbles, pregnant women flee to Colombia (Moloney, 6/18).

<u>U.N. News</u>: 'Worst devastation I have seen,' says U.N. refugee envoy Angelina Jolie, as she visits West Mosul (6/18).

Editorials and Opinions

8. World Should Not 'Shy Away' From Discussing Ethical Steps To Stabilize Population Growth, Including Improving Access To Contraceptives

<u>Washington Post</u>: Talking about overpopulation is still taboo. That has to change.

Frances Kissling, president of the Center for Health, Ethics and Social Policy; Jotham Musinguzi, director general of Uganda's National Population Council; and Peter Singer, Ira W. DeCamp professor of bioethics at Princeton University

"...Both feminists and population stabilization advocates now agree that providing reproductive health services to women is first and foremost a right in itself, as well as the best and most ethical way to slow population growth. ... Yet population remains an unmentionable topic in international policy circles. ... That should not be the case. ... Today we should be able to safely broach the potential problems of population growth and ethical ways to respond to it. Melinda Gates has shown one way of doing this, by focusing on making contraceptives more readily available to the 214 million women who do not want to become pregnant over the next two years but do not have effective preventive methods. Equally important is providing women with access to emergency contraception following unprotected sex and making safe abortion available to women who need it. ... Finally, a central part of every discussion about population must be educating girls and women and ensuring opportunities for their participation in work and political life. ... We should not shy away from discussing what actions are ethically permissible to facilitate a stable level of population growth, nor should we leave this discussion in the hands of the affluent. The conversation about ethics, population, and reproduction needs to shift from the perspective of white donor countries to the places and -people most affected by poverty, climate change, and environmental degradation" (6/18).

9. Disease Outbreak Prevention Funding Should Go Toward Human Surveillance Not Broad Genomic Surveys To Mitigate Outbreaks

Nature: Pandemics: spend on surveillance, not prediction

Edward C. Holmes, professor of biology at the University of Sydney; Andrew Rambaut, professor of molecular evolution at the University of Edinburgh; and Kristian G. Andersen, assistant professor of immunology and microbiology at the Scripps Research Institute

"The resurgence of Ebola virus in the Democratic Republic of the Congo this May is a stark reminder that no amount of DNA sequencing can tell us when or where the next virus outbreak will appear. ... Broad genomic surveys of animal viruses will almost certainly advance our understanding of virus diversity and evolution. In our view, they will be of little practical value when it comes to understanding and mitigating the emergence of disease. We urge those working on infectious disease to focus funds and efforts on a much simpler and more cost-effective way to mitigate outbreaks -- proactive, real-time surveillance of human populations. ... Rapid identification of viruses can be achieved only if [genomic] technologies -- and the people trained to use them --

are globally available, including in resource-limited regions where the risk of outbreaks might be higher. ... Ultimately, the challenge is to link genomic, clinical, and epidemiological data within days of an outbreak being detected, including information about how people in an affected community are interacting. Such an open, collaborative approach to tackling the emergence of infectious disease is now possible..." (6/7).

From the Global Health Policy Community

10. Oxfam Adviser Highlights 6 Findings Of 2018 Global Humanitarian Assistance Report

Oxfam's "From Poverty To Power": The Global Humanitarian Assistance 2018 report is out today -here are six top findings

Duncan Green, strategic adviser for Oxfam GB, outlines six top findings from the Global Humanitarian Assistance Report 2018: "1. Humanitarian Assistance (HA) mainly goes to a small number of countries; ... 2. HA is growing in absolute terms and as a percentage of overall aid budgets; ... 3. HA still mainly flows via the big aid organizations; ... 4. Local NGOs are still living off scraps -- localization ain't happening; ... 5. Emergencies aren't emergencies any more -- they are long-term crises; ... [and] 6. Cash Transfers are on a roll" (6/19).

11. 'Science Speaks' Highlights Recent Pieces On TB, Death Data, AMR

IDSA's "Science Speaks": What we're reading: Realities to keep in mind when planning to eliminate TB and other diseases

Antigone Barton, senior editor and writer of "Science Speaks," discusses several global health-related articles addressing various topics, including an open letter on TB written by a U.N. special rapporteur in preparation for the upcoming U.N. High-Level Meeting on Tuberculosis; an editorial on the importance of collecting death data; and an opinion piece on the threat of antimicrobial resistance (6/18).

12. New Issue Of NIH Fogarty International Center's 'Global Health Matters' Newsletter Available Online

NIH Fogarty International Center: Global Health Matters

The most recent issue of the Fogarty International Center's newsletter contains various articles addressing global health issues, including several pieces marking the center's 50 year anniversary; a Q&A with Mark Kaddumukasa, a former Fogarty trainee and current grantee studying epilepsy in Uganda; and a profile of Vivek Naranbhai, a former Fogarty fellow and HIV researcher working in South Africa (May/June 2018).

From the U.S. Government

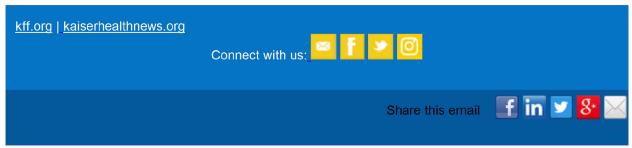
13. USAID Releases Report Examining Countries' 'Self Reliance' In Preventing Maternal, Child Deaths

<u>USAID</u>: Acting on the Call 2018: A Focus on the Journey to Self-Reliance for Preventing Child and Maternal Deaths

"...The 2018 Acting on the Call report focuses on 25 countries' journeys to self-reliance for preventing child and maternal deaths. Self-reliance is a country's ability to finance and implement solutions to its own development challenges. ... In the report, we recount progress since the 2012 Call to Action as well as identify gaps in order to inform future programming and areas that need strengthening during the journey to self-reliance. For the first time ever, we've calculated the return

on our investment to eliminate bottlenecks to improving health services. As in past years, this analysis builds on previous efforts and continues to refine how USAID works with governments to meet their health goals..." (6/19).

Filling the need for trusted information on national health issues, the Kaiser Family Foundation is a nonprofit organization based in San Francisco, California. Get the latest information and analysis on U.S. global health policy on kff.org. Contact the report editors with submission suggestions.



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If you need help or have questions, please send an email to subscriptions@kff.org.

Please do not reply to this email as this address is not monitored.

Kaiser Family Foundation & Kaiser Health News 185 Berry Street | San Francisco, CA 94107 From: Andrew Clements <aclements@usaid.gov>

To: William B. Karesh karesh@ecohealthalliance.org

CC: Tracey Goldstein <tgoldstein@ucdavis.edu>;Peter Daszak

<daszak@ecohealthalliance.org>;Amalhin Shek <ashek@usaid.gov>;Alisa Pereira
<apereira@usaid.gov>;Jonna Mazet <jkmazet@ucdavis.edu>;Predict inbox

Anne Laudisoit

<laudisoit@ecohealthalliance.org>;cchrisman@usaid.gov <cchrisman@usaid.gov>

Sent: 7/27/2018 5:42:24 AM
Subject: Re: New ebolavirus update

Thanks, Billy.

Andrew P. Clements, Ph.D. Senior Scientific Advisor

Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health

U.S. Agency for International Development

Mobile phone: 1-571-345-4253 Email: <u>aclements@usaid.gov</u>

On Jul 27, 2018, at 6:54 AM, William B. Karesh karesh@ecohealthalliance.org wrote:

Anne and I met with the US Ambassador in RoC first thing this morning to go over PREDICT-2 work and other related programs in the country.

I briefed him on the Ebola finding and his deputy had already read the media reports from SL but had not yet briefed the Ambassador. He was very appreciative of the work and the heads up.

BK

William B. Karesh, D.V.M

Executive Vice President for Health and Policy

EcoHealth Alliance 460 West 34th Street - 17th Floor New York, NY 10001 USA

+1.212.380.4463 (direct) +1.212.380.4465 (fax) www.ecohealthalliance.org

President, OIE Working Group on Wildlife

Co-chair, IUCN Species Survival Commission - Wildlife Health Specialist Group

EPT Partners Liaison, USAID Emerging Pandemic Threats - PREDICT-2 Program

EcoHealth Alliance leads cutting-edge research into the critical connections between human and wildlife health and delicate ecosystems. With this science we develop solutions that promote conservation and prevent pandemics.

From: "Dr VAN KERKHOVE, Maria" REDACTED

To: Andrew Clements <aclements@usaid.gov>

Cc: "Wantanee (FAORAP) Kalpravidh" The DACT DED, Jonna Mazet <jkmazet@ucdavis.edu>, Christine

Kreuder Johnson <ckjohnson@ucdavis.edu>, "ZHANG, Wenqing" < REDACTED +, "MOEN, Ann" < REDACTED +, "CHADWICK, Christopher" | REDACTED >,

"cchrisman@usaid.gov" <cchrisman@usaid.gov>, "Filip Claes (AGAH)" < REDACTED >, "SHINDO, Nahoko" < REDACTED >, William Karesh <Karesh@ecohealthalliance.org>, "daszak@ecohealthalliance.org"

<daszak@ecohealthalliance.org>, "predictmgt@usaid.gov" cdaszak@ecohealthalliance.org>, "faomgt@usaid.gov" <faomgt@usaid.gov>, "faomgt@usaid.gov" <faomgt@usaid.gov>
"whomgt@usaid.gov" <whomgt@usaid.gov>

Subject: Re: EPT-2 data sharing meeting, March/April 2020?

Sent: Wed, 23 Oct 2019 03:17:08 +0000

Hi Andrew,

I'd be interested in these discussions.

Thanks for the suggestion.

Best, Maria

On 22 Oct 2019, at 18:53, Andrew Clements <aclements@usaid.gov> wrote:

Hi everyone,

With the Predict-2 project ending March 31, 2020, I wanted to get your thoughts on the utility of having a final EPT-2 data sharing meeting sometime around then. This could include not only EPT-2 partners, but others (e.g. CDC, NIH, DTRA, etc.) who would likely be interested in the findings.

Besides making sure the results get shared among the emerging threats community, this gathering could also serve to allow a bunch of smart people to talk about how these findings can be used going forward and identify/highlight/prioritize remaining gaps.

With that background in mind, two questions for you:

1. Do you think this would be useful?

And

2) would your organization be available to participate in a 2-day discussion around March/April of 2020? (For now, let's assume the location would be Washington, DC.)

Thanks!

Andrew

Andrew P. Clements, Ph.D. Senior Scientific Advisor

Emerging Threats Division/Office of Infectious Diseases/Bureau for Global Health

U.S. Agency for International Development

Mobile phone: 1-571-345-4253 Email: <u>aclements@usaid.gov</u> From: Corina Grigorescu Monagin <cgmonagin@UCDAVIS.EDU>

To: Woutrina A Smith <wasmith@ucdavis.edu>, Oladele Ogunseitan <oladele.ogunseitan@uci.edu>, Peter Daszak <daszak@ecohealthalliance.org>, "William B. Karesh" <Karesh@ecohealthalliance.org>, "mr84@columbia.edu" <mr84@columbia.edu>, alexandra zuber <alexandrazuber@atahealthstrategies.com>, Matthew Blake <mblake@ucdavis.edu>, Tracey Goldstein <tgoldstein@ucdavis.edu>, David John Wolking <djwolking@ucdavis.edu>, Terra Kelly <trkelly@ucdavis.edu>, Jaber Amine Belkhiria <jabelkhiria@ucdavis.edu>, Elizabeth Leasure <ealeasure@UCDAVIS.EDU>, Jonna Mazet <jkmazet@ucdavis.edu>, "McNeil, Carrie S." <csmcnei@sandia.gov>, Jutta Lehmer <JLehmer@salud.unm.edu>, Omar Romero-hernandez <oromero@haas.berkeley.edu>, Bruce Baird Struminger <BStruminger@salud.unm.edu>, Federico Castillo <f.castillo@berkeley.edu>, Ndola PRATA <ndola@berkeley.edu>, "Tiffany Harris, PhD, MS" <th2604@columbia.edu>, "Costa, Cristiane" <co123@cumc.columbia.edu>, "Amaya, Idalia M." <ima2107@cumc.columbia.edu>, Sam Halabi <sfh9@georgetown.edu>

Cc: onehealthnextgen Sympa List <onehealthnextgen@ucdavis.edu>
Subiect: Reminder: OHW-NG Executive Board Call May 6th. 11am PST/2pm EST

Sent: Tue, 5 May 2020 20:12:13 +0000
ECHO session May6-7 2020 SEAOHUN.pdf
ECHO session May7 AFROHUN fR.pdf
ECHO session May7 AFROHUN.pdf
OHW-NG EB Call Agenda 5.6.20.docx

Dear all,

Please see attached and below for this week's OHW-NG EB call agenda. I have also attached the flyers for the ECHO sessions happening Wednesday/Thursday with SEAOHUN and AFROHUN (English and French).

Regards, Corina

OHW-NG EB Zoom Meeting May 6, 2020 11-12 AM US/Pacific

Join Zoom Meeting

https://onehealth.zoom.us/j REDACTED

Meeting ID: REDACTED

1. Administrative items

- UCD updates from USAID
- UCD Admin updates
- Supplemental funding opportunities

2. COVID-19 updates

- Plan for tracking COVID-19 activities
- ECHO Sessions Future scheduling and topics for AFROHUN/SEAOHUN:
 - May 7: "Gender and psychosocial aspects of COVID-19"
 - May 21: "Diagnostic testing approaches for COVID-19"
 - June 4: "Immunity issues and interventions for COVID-19"
 - June 18: "One Health approaches addressing COVID-19 origins and spillover"

3. Objective Team/Network Updates

- Objective 1: Content curation exercise, OH Academy and SOHIC digital competition
- Objective 2: KM assessment and Competency assessment toolkits; Alumni tracking best practices
- Objective 3: Remote business retreat sessions SWOT, NUPAS and OCA
- AFROHUN work from home format and Secretariat held technical meetings with country managers, planning ECHO Immersion Training

• SEAOHUN - work from home format, working on SWOT, OCA and NUPAS

4. Conference updates

5. AOB

Join Zoom Meeting https://onehealth.zoom.us/ REDACTED

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Dial by your location

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MISE À JOUR ONE HEALTH SUR COVID-19

THÈME DE LA SESSION: PERSPECTIVES SUR LE GENRE ET LES ASPECTS PSYCHO-SOCIAUX DURANT LES ÉPIDÉMIES

7 MAI 2020

ORDRE DU JOUR

MOT DE BIENVENUE

- UC Davis: Jonna Mazet
- AFROHUN Secretariat: William Bazeyo

MISES À JOUR SUR LA SITUATION MONDIALE

UC Davis: Brian Bird

TABLE RONDE

- Sabra Klein Professeur, École Bloomberg de santé publique, Université Johns Hopkins
- Brigitte Bagnol Maître de conférences, Département d'anthropologie, Université du Witwatersrand
- Florence Kyoheirwe Muhanguzi Maître de conférences, École des études sur les femmes et le genre, Makerere University
- Georgette Ngweme École de santé publique, Université de Kinshasa

MODÉRATEUR

UC Berkeley: Ndola Prata

CLÔTURE

- UC Davis: Jonna Mazet
- AFROHUN Secretariat: William Bazeyo

FACILITATEURS

- ECHO: Bruce Struminger
- UC Davis: Woutrina Smith

*Traduction en Français disponible



SESSIONS À VENIR

- 6/7 MAI: Perspectives sur le genre et les facteurs psychosociaux durant les épidémies
- 20/21 MAI: Stratégies des tests de dépistage du COVID-19
- 3/4 JUIN: Immunité et interventions lors du COVID-19
- 17/18 JUIN: Approches One Health abordant le spillover et les origines du COVID-19

SESSION AFRIQUE

JEUDI 7 MAI

États-Unis: 9h30 EDT | 7h30 MDT | 6h30 PDT Afrique: 13h30 GMT | 14h30 WAT | 15h30 CAT Visitez notre site Web pour plus d'informations sur la pré-inscription gratuites: ohwng.org

INSCRIVEZ-VOUS ICI

Questions? Contact onehealthnextgen@ucdavis.edu



L' École de médecine de l' Université du Nouveau-Mexique, Office de la formation médicale continue, est accréditée par le Conseil d'accréditation pour la formation médicale continue pour dispenser une formation médicale continue aux médecins. L'Office de la formation médicale continue désigne cette activité en direct pour un maximum de 1,5 crédit (s) de catégorie 1 AMA PRA TM. Les médecins doivent réclamer le crédit proportionnellement à l'étendue de leur participation à l'activité

















OHW-NG EB Zoom Meeting May 6, 2020 11-12 AM US/Pacific

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- Objective 3: Remote business retreat sessions SWOT, NUPAS and OCA
- AFROHUN work from home format and Secretariat held technical meetings with country managers, planning ECHO Immersion Training
- SEAOHUN work from home format, working on SWOT, OCA and NUPAS

4. Conference updates

5. AOB

Join Zoom Meeting

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COVID-19 ONE HEALTH UPDATES

SESSION TOPIC: PERSPECTIVES ON GENDER & PSYCHOSOCIAL ASPECTS IN OUTBREAKS

MAY 7, 2020

AGENDA

WELCOME

- UC Davis: Jonna Mazet
- AFROHUN Secretariat: William Bazeyo

GLOBAL UPDATES

UC Davis: Brian Bird

PANEL DISCUSSION

- Sabra Klein Professor, Bloomberg School of Public Health, Johns Hopkins University
- Brigitte Bagnol Senior Lecturer, Dept. of Anthropology, University of the Witwatersrand
- Florence Kyoheirwe Muhangazi Senior Lecturer, School of Women & Gender Studies, Makerere University
- Georgette Ngweme School of Public Health, University of Kinshasa

PANEL MODERATOR

UC Berkeley: Ndola Prata

CLOSING

- UC Davis: Jonna Mazet
- AFROHUN Secretariat: William Bazeyo

FACILITATORS

- ECHO: Bruce Struminger
- UC Davis: Woutrina Smith

*French translation of the session also available



UPCOMING SESSIONS

- May 6/7: Perspectives on gender & psychosocial factors in oubreaks
- May 20/21: Diagnostic testing approaches for COVID-19
- June 3/4: Immunity issues & interventions for COVID-19
- June 17/18: One Health approaches addressing COVID-19 origins and spillover

AFRICA SESSION

THURSDAY, MAY 7

US: 9:30 am EDT | 7:30 am MDT | 6:30 am PDT Africa: 1:30 pm GMT | 2:30 pm WAT | 3:30 pm CAT Visit our website for free pre-registration and connection information: ohwng.org

REGISTER HERE

Questions? Contact onehealthnextgen@ucdavis.edu



The University of New Mexico School of Medicine, Office of Continuing Medical Education is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. The Office of Continuing Medical Education designates this live activity for a maximum of $1.5 \text{ AMA PRA Category 1 Credit(s)}^{TM}$. Physicians should claim only the credit commensurate with the extent of their participation in the activity.





















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- Brigitte Bagnol Senior Lecturer, Dept. of Anthropology, University of the Witwatersrand
- Ludgate Nargiza Program Development Specialist, University of Florida
- Michael Tee Vice Chancellor, University of the Philippines, Manila

Closing

- UC Davis: Jonna Mazet
- SEAOHUN Secretariat: Vipat Kuruchittham

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SOUTHEAST ASIA SESSION

WEDNESDAY, MAY 6 (USA) THURSDAY, MAY 7 (SE ASIA)

US: 9 pm EDT | 7 pm MDT | 6 pm PDT SE Asia: 8 am ICT | 9 am MYT | 9 am PHT Visit our website for free pre-registration and connection information: ohwng.org

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