SOUTHEAST ASIA: AVIAN INFLUENZA

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The Federation’s mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world’s largest humanitarian organization and its millions of volunteers are active in over 181 countries.

In Brief

This Bulletin (no. 02/2005) is being issued for information only, and reflects the status of the situation and information available at this time. The Federation is not seeking funding or other assistance from donors for this operation at this time.

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All International Federation assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

For longer-term programmes in this or other countries or regions, please refer to the Federation’s Annual Appeal. For support to or for further information concerning Federation programmes or operations in this or other countries, or for national society profiles, please also access the Federation’s website at http://www.ifrc.org

The Situation

Since December 2003, the increasing incidence of avian influenza (virus subtype H5N1 AIV) has claimed 60 human lives in Asia. As of October 2005, outbreaks of the disease in bird populations have been confirmed in the Philippines, Vietnam, Thailand, South Korea, Japan, Cambodia, Laos, Indonesia, Pakistan, the Democratic People’s Republic of Korea and China. More recently, outbreaks in birds have been identified in Russia, Kazakhstan, Mongolia, Turkey, Colombia and Romania. The disease has also been reported in pigs and tigers.

Human infections have been confirmed in Indonesia, Thailand, Vietnam and Cambodia. Transmission of the disease was initially limited to animals, after which most of the cases in humans could be traced to contact with infected animals. More recently, however, there have been human cases in which the mode of transmission has been more difficult to trace as the patients had not been in direct contact with infected animals. In a few of these cases there are strong indicators that human-to-human transmission may have occurred. These involved extended...
close personal contact with an infected individual (for example, while providing bedside care to an infected relative). In September, the World Health Organization (WHO) warned that the avian influenza virus was altering itself into a form that could be passed between humans.

Governments around the world are responding to avian influenza by working with WHO on contingency planning in the event that the disease evolves into a pandemic and are stockpiling anti-viral medications. With the cost of treatments running at up to USD 100 per person there are concerns over the capacity of less developed countries which may not have the available financial resources to sufficiently stockpile medication. At the same time, during the first week of October, the US government pledged USD 20 million to Cambodia, Laos and Indonesia to assist these countries with coping with the disease.

Although identifying how the disease will evolve is complex, many of the key steps towards disease prevention are relatively basic and similar to common hygiene practices. Effective community-based education, where the general public is informed about modes of transmission and what high-risk practices should be avoided, and attention to personal hygiene can have a significant impact on controlling the disease.

Nonetheless, questions remain on the disease and response in the event of a pandemic amongst humans. Particular issues include the disease’s impact on vulnerable communities in Southeast Asia, such as those left homeless by the tsunami of 26 December 2004, the elderly, children, people with chronic illnesses, people living with HIV/AIDS and those affected by the series of serious floods and typhoons which struck Southeast Asian countries in September and October 2005. At the same time, legal issues concerning quarantines, rights to travel and patent limitations on anti-viral medications will have to be addressed as part of the planning process.

**Red Cross and Red Crescent action**

**Geneva Secretariat**
The Federation public health in emergencies unit has worked with WHO since September 2004 on influenza preparedness, and more specifically was part of the WHO consultation meeting in December 2004 held with governments and agencies. The result of this consultation was the document “WHO global influenza preparedness plan highlighting national response recommendations in the various phases of outbreak”. Based on this document, the Secretariat has advised regional focal points on discussions with national societies for outbreak preparedness. The Federation’s public health in emergencies unit in Geneva has identified health focal points around the world, has drawn up guidelines and distributed a comprehensive fact sheet on the disease to Federation delegations. The unit is mapping national society preparedness plans in Southeast Asia and other regions and is coordinating with WHO initiatives at a global level. The Federation is also taking measures to protect staff and volunteers working in areas where there is a high prevalence of the disease.

**Southeast Asia regional delegation**
Since the large-scale emergence of the disease two years ago, the International Federation’s regional health delegate in Southeast Asia has been tracking the latest developments regarding the disease, updating the region’s national societies with information on avian influenza. Over the past year, the Federation’s Southeast Asia regional health unit has supported Red Cross societies in Cambodia, Philippines and Vietnam with project development in response to the disease, based on experiences from the SARS outbreak.

At October’s regional health team meeting in Bangkok, health officers from Red Cross and Red Crescent societies in Southeast Asia, supported by the Federation’s regional health unit, engaged in a group planning process to identify possible actions by their respective national societies to control the spread of the disease, and determine response activities in the event of a pandemic. Health officers from the national societies focused on action to be taken in regards to prevention, preparedness and responding to avian influenza. Meeting attendees have now returned to their respective national societies with draft plans of action which will be developed at the national level. The national society health officers also addressed appropriate methods for disseminating information on the disease to the general public and appropriate measures which can be taken by the national societies to protect Red Cross and Red Crescent staff and volunteers.
At the same time, in addition to working with all 11 national societies on developing national plans of action, the Federation’s Southeast Asia regional health unit, which has recently been expanded to include a health-in-emergencies delegate, is developing a programme proposal on avian influenza which incorporates national society draft plans and addresses the measures of support which will be provided at the regional level. Weekly telephone conferences are now taking place in conjunction with this ongoing process, with participation from the Federation Secretariat’s health department.

Red Cross and Red Crescent leaders of this region expressed serious concern in their annual meeting that took place in Manila in September. They have committed to do everything possible to strengthen the capacities of their respective societies to play an important role, especially in public education.

The regional delegation has circulated a letter informing them of steps being taken by the Federation so far. Strong health recommendations have also been issued to all Federation staff and delegates in the region, including preventive measures against avian influenza. The regional delegation has led this response by conducting a full staff briefing on the disease, with plans in the coming week for human influenza vaccinations for its delegates and staff, including their families.

Cambodian Red Cross
Since December 2003, four people have died in Cambodia from the disease. The Cambodian ministry of health approached the Cambodian Red Cross Society to develop a health, information and education programme for the prevention of avian influenza. The national society, with technical input from the Federation’s regional health delegate, is in the process of finalizing planned activities which include the creation of health education and information activities targeting risk communities such as those living in areas with large numbers of poultry.

Thai Red Cross
Thailand has reported 17 cases in humans and 12 deaths from the disease with the last casualty reported in October 2004. Thai Red Cross medical clinics throughout the country support the Thai ministry of health with the dissemination of information, and are taking part in disease surveillance and case identification. The national society clinics have received instructions on clinical presentations and procedures for addressing the needs of patients with avian influenza.

Vietnam Red Cross
There have been 91 reported cases of avian influenza with 41 resulting in deaths in Vietnam. Following the development by the national society and the Federation of a proposal in early 2005 which addresses measures to prevent the disease, the New Zealand Red Cross is supporting the Vietnam Red Cross with prevention activities. Since February, the national society, in cooperation with the Vietnam ministry of health, has developed public information materials based on materials created by the ministry. Vietnam Red Cross has conducted training for health staff from its provincial branches in over 64 provinces. The trained provincial branch staff members are responsible for initiating health education activities throughout the country.

Indonesian Red Cross (Palang Merah Indonesia)
With the support from the Federation delegation in Indonesia, Palang Merah Indonesia began a communication campaign to educate the public on avian influenza prevention in September. The national society produced and distributed hundreds of thousands of information, education and communication (IEC) material with prevention messages to small-size poultry farm owners, in public areas with poor hygiene and sanitation conditions such as traditional markets and bus stations.

Malaysian Red Crescent Society
The Malaysian Red Crescent Society has formed a special task force to plan activities for avian influenza prevention and preparedness. High on the national society’s agenda are mass awareness and the identification of risk groups.

Philippine National Red Cross
The Philippine National Red Cross was actively involved in developing the Philippine National Preparedness Plan for Avian Flu and was invited to become a member of the national coordinating body for avian influenza. The national society is planning to launch a large public campaign to educate people on risks of the disease.
a pool of over 2,000 volunteer health educators trained under the current public health emergencies programme, covering 67 branches and it plans to mobilize these volunteers for this new initiative.

**Timor-Leste Red Cross (Cruz Vermelha de Timor-Leste)**
The Timor-Leste Red Cross health coordinator has taken part in the subgroup meetings of the ministry of health concerning avian flu preparedness. The national society plans to initiate a public education campaign and integrate it with its ongoing community-based first aid activities. It is planning to produce an educational drama or theatre for schools and other audiences.

**Myanmar Red Cross**
The Myanmar Red Cross Society has developed and distributed public education materials on avian influenza, and has trained and mobilized Red Cross volunteers to work together with local health authorities in case detection and referral for health services.

**Singapore Red Cross**
Currently, Singapore Red Cross health officers are looking for opportunities to coordinate and prepare for potential shortage of blood in case of pandemic. The national society is working in close contact with the Singapore ministry of health.

**Lao Red Cross**
The Lao Red Cross plans to start public education and social mobilization activities to support existing government initiatives.