

# Report 2006-2007

 International Federation  
of Red Cross and Red Crescent Societies

## Avian Influenza Preparedness, Mitigation and Response

Appeal No. MAA00018

03/04/2008

This report covers the period of April 2006 to  
December 2007



Indonesian Red Cross (Palang Merah Indonesia) distributed hygiene promotion literature and gave health information sessions as part of a global public health awareness campaign by the International Federation. Indonesia has registered 81 of the 192 deaths from avian influenza worldwide. The organization is spending over UDS 630,000 in public health and education campaigns in the ten worst affected regions of Indonesia. **J. Lowry/International Federation**

### In brief

**Programme Summary:** The global avian influenza preparedness, mitigation and response programme supported the following activities during the reporting period:

- Red Cross/Red Crescent (RC/RC) community-based activities in avian influenza prevention and preparedness, focusing on health and hygiene education and prioritizing remote regions with backyard farming;
- National Society capacity-building activities for the detection and communication of poultry outbreaks, and for the development of avian influenza contingency and service continuity plans.
- A range of activities in support of National Societies' preparedness for a human pandemic, including the mapping of capacities, activities and needs of individual Societies; forming contingency and service continuity plans at the national and regional level; and developing communication strategies.
- The secretariat in Geneva's coordination, liaison, public information and advocacy role.

The balance of CHF 487.741 from the funds received in 2006 and 2007 from the Global Avian Flu Fund for country projects will be utilized in 2008 to continue activities in the Avian Flu programme. This excludes all earmarked carry over from donor funds.

**Goal:** To contribute to preventing or minimizing the potential for human morbidity and mortality, massive social disruption and related suffering caused by an influenza epidemic or pandemic.

**Needs:** Total 2006-2007 budget CHF 17.4 (USD 15.6 m or EUR 10.5 m) (out of which 23 per cent covered) [Click here to go to the attached financial reports:](#)

[Report 2006](#)

[Report 2007](#)

[Report 2006/2007](#)

**No. of people we help:** It is estimated that some 7.5 million people worldwide have benefited from specific health and hygiene education activities and general information campaigns on avian influenza.

**Our Partners:** The International Federation works in coordination with the relevant United Nations agencies, and a range of international and national organizations.

## Current context

Since the end of 2003, more than 60 countries have experienced outbreaks of the H5N1 avian influenza virus in domestic poultry and wild birds. Between November 2006 and the end of 2007, current avian influenza outbreaks in poultry were reported in some 21 countries. The containment measures following such outbreaks led to considerable socio-economic disruption in the affected communities. Meanwhile, although the spread of the virus to humans remains occasional, the very high case/fatality ratio remains a concern in view of a possible pandemic. By the end of the reporting period, a total of 348 confirmed human cases of avian influenza were reported by the World Health Organization (WHO), 216 of whom died from the disease. In 2006, 115 human cases resulted in 79 deaths, and in 2007, 85 cases resulted in 58 deaths.

Although governments worldwide are taking measures to address the crisis, comprehensive poultry vaccination and other bio-security measures are difficult to implement in many countries. At the end of the reporting period, viral activity around the world remained high, and experts concurred that the appearance of sustained human-to-human transmission was only a matter of time.

## Progress towards objectives

**Objective: Support National Societies' avian flu-related activities.**

At the global level, the secretariat in Geneva issued recommendations for National Societies' preparedness, including key public health messages; suggested roles of National Societies within the respective national plans; instructions on how to handle affected poultry, and how to detect symptoms in animals and in humans; advice on medicines and vaccination; and best practices on the communication of outbreaks.

At the national level, the global avian influenza preparedness, mitigation and response programme supported National Societies' activities in:

- Providing basic knowledge on preventing contamination and the spread of the infection to local farmers and poultry traders.
- Educating school children on basic prevention through simple hygiene measures, and encouraging them to transfer the knowledge to their respective households.

- Educating community health workers and National Society volunteers on caring for human cases, with emphasis on risks related to contacts with infected patients, as well as measures that need to be observed during treatment.
- Increasing awareness amongst the general population by using targeted communication in leaflets, posters, booklets, television and radio spots.

Avian flu-related activities were carried out in:

- Some 50 districts of five provinces in Java and Bali, Indonesia, where 60 per cent of the country's poultry population and 50 per cent of the human population is located.
- Ten provinces of Viet Nam, all with recurrent avian flu outbreaks, reaching a total of 1.2 million people and training over 2,000 volunteers.
- All the 27 Governorates in Egypt, reaching an estimated 400,000 people who are in daily contact with birds, and training more than 8,000 volunteers.
- Five provinces in Mongolia, where communities have been identified as being at high risk to contracting avian influenza from the migratory birds.
- Thirteen provinces in China, where the Chinese Red Cross produced and disseminated a series of avian influenza prevention materials, including 117,000 posters, 670,000 leaflets, 3,000 CD-ROMs, 80,000 wall calendars and 15,000 operational manuals in avian flu prevention.
- Fourteen areas of eastern European countries most prone to avian influenza outbreaks (six in Russia, four in Ukraine, two in Belarus and two in Moldova).
- Five regions in Armenia, reaching an estimated 50,000 people, and 16 in Georgia, with the production of 126,000 leaflets on avian influenza.
- Six regions in Algeria, where the National Society carried out training of trainers.
- Cameroon, Central African Republic and Chad, where a regional strategy was adopted, some 200 volunteers trained, and social mobilization campaigns carried out.

It is important to stress that those National Societies involved in avian influenza prevention and containment have integrated these activities into their existing capacities and ongoing activities, including disaster management, water and sanitation, emergency health, first aid networks, HIV programmes, as well as other existing programmes.

In relation to these activities, the Secretariat provided programme coordination, technical and financial management support, and facilitated National Societies' access to funds available globally. Regional health officers also provided technical advice and facilitated partnerships with other organizations, such as CARE International and World Vision International, at the regional and country level.

**Objective: To support pandemic preparedness.**

At the global level, the Secretariat in Geneva issued a checklist to Red Cross and Red Crescent Societies to be used in WHO pandemic alert (phases four to five), and during pandemic period (phase six). The checklist, in line with WHO recommendations, provides basic epidemiological information on the disease, an overview of pandemic phases, as well as outlines the public health

goals specific to each phase. It provides advice on the role of Red Cross and Red Crescent Societies in human pandemic preparedness and mitigation in each phase; guidelines for prevention, early case detection, case management in communities and at home; early warning, community-based surveillance and response; social mobilization; volunteer and staff protection; guidelines for preparedness, including on stocks, medicines, and protective clothing with specifications of equipment and materials; and reference material on avian flu.

At the country level, a major achievement during the reporting period was a mapping exercise looking at the state of preparedness of all National Societies. This exercise looked at the various dimensions of preparedness vis-à-vis the role Societies would play in the case of a pandemic, identifying gaps, and providing indications on where support would be needed. This mapping exercise also provided a useful baseline against which future progress could be measured.

Workshops aimed at designing comprehensive preparedness and response to avian influenza and human influenza pandemic were held in West Africa, East Africa, South-East Asia and the Americas. The outcomes of such exercises extended beyond avian flu/human pandemic, as the approaches and strategies agreed were applicable to any public health emergency or in response to other epidemics. Furthermore, such approaches and strategies were designed to be integrated into the broader regional disaster management and health strategies.

**Objective: To provide service continuity for National Societies and the Secretariat.**

The Secretariat in Geneva produced a draft Avian Flu Pandemic Service Continuity Plan. This draft outlined the organizational steps and measures required in order to continue providing the minimum level of services and defining the corresponding minimum structures that need to be operational, as part of the planning to maintain the International Federation's minimum service delivery capacity. The draft plan was shared with representations in the field as a template to utilize when preparing their respective pandemic preparedness plans.

Similar support was provided to member National Societies outlining the concrete recommendations on measures that needed to be put in place to enable the continuation of their services during pandemic outbreaks. At the end of the reporting period, the French Red Cross, the Norwegian Red Cross, the German Red Cross, and the Hong Kong Red Cross had completed their plans.

**Objective: Improve coordination amongst different partners.**

At the global level, the International Federation established close working relationships with the UN System Influenza Coordination (UNSIC), playing an active inter-agency coordination role in avian and human influenza activities, along with WHO, the United Nations Children's Fund (UNICEF), the Office for the Coordination of Humanitarian Affairs (OCHA) and other organizations. The International Federation is a member of the UN system inter-agency technical working group on influenza, which discusses key strategic and operational issues linked to preparedness and response to avian influenza and pandemic preparedness.

At the national level, most governments have created task forces with the responsibility of coordinating national action on dealing with animal-related disease outbreaks, including the response to avian influenza outbreaks. In most cases, the task forces include the respective Ministries of Health, Ministries of Agriculture, and other relevant structures. Their responsibility is to coordinate national avian influenza and pandemic preparedness plans, as well as to incorporate health and veterinary precautionary and response mechanisms. In three quarters of the countries, National Societies are either formally part of the coordinating body or have a defined role in influenza prevention, pandemic response and outbreak preparedness.

A Special Envoy position reporting to the Secretary General was created in Spring 2006 to represent,

liaise, strategically advise and participate in technical meetings as an expert. This part-time position became full time in June 2007, and allowed the International Federation to make major inroads in the non-governmental organization's (NGOs) collaboration and coordination, as well as with the United Nations (UN) and international organizations. A declaration of cooperation and collaboration involving the International Federation and 21 NGOs, UN and international organizations was signed in Autumn 2007. Statements on the humanitarian sector involvement in Avian Influenza and Human Pandemic Preparedness were made at the Senior Officials Meeting in Vienna (2006), at the International Ministerial Conference in Bamako (2006) and the Ministerial Conference on Avian and Pandemic Influenza in New Delhi (2007). Lastly, assistance was provided in securing a USD 30 million grant from the United States Agency for International Development (USAID) for humanitarian pandemic preparedness involving the International Federation as the grant recipient, along with other NGOs (CORE group, InterAction and Academy for Educational Development).

## Working in partnership

On top of the ongoing coordination and partnership development activities mentioned above, the International Federation signed a letter of intent with CARE International, Save the Children US, World Vision International and OXFAM, with the purpose of bringing together key organizations that have operational field presence, experience and interest in avian influenza risk reduction and prevention, as well as in human influenza programme activities. The organizations will cooperate on the development of policies, standards and guidelines, carry out joint advocacy campaigns, and adopt a coherent approach to resource mobilization.

## Contributing to longer-term impact

The global avian influenza preparedness, mitigation and response programme is consistent with the International Federation's Global Agenda Goal to reduce the number of deaths, illnesses and impact from diseases and public health emergencies. This is a truly disaster risk reduction-oriented programme, whose impact is well beyond avian influenza and the risk of human pandemic. As a result of the activities carried out at the community level, communities will be more resilient and better prepared for a number of health and non-health related emergencies. The same is true for the capacity-building activities in support of National Societies: a pandemic preparedness plan, for example, is not very different from a contingency, preparedness and service continuity plan. Volunteers trained in this programme will also be a valuable resource for the National Society in a range of other activities. Societies will also benefit from a better defined role as auxiliaries of their governments and for more systematic inclusion in national disaster management plans. Finally, the vast network of partnerships built around this programme will deliver benefits well beyond the scope of the programme itself.

## Looking Ahead

There is still an inadequate recognition by some governments of the serious threat to humanity posed by avian influenza. This is particularly relevant in Africa, where many of the country task forces no longer meet, and there is no longer the urgency/enthusiasm to address the problem, as there was in early 2006. Such response to avian influenza has hindered the National Societies' progress to implement preparedness and intervention measures.

A number of countries are reluctant to provide a lot of information on avian influenza prevention, in fear of spreading fear and panic amongst the population, which could result in a decrease in poultry production, as well as pose further pressure on certain communities' livelihoods. In addition, due to unresolved compensation issues in many countries, prevention cannot be effectively conducted due to the communities' hesitation and fear of loss of livelihood, as a result of providing information on

outbreaks.

The main challenges are keeping the public aware of the risk of avian influenza and the risk of a human pandemic, as well as mobilizing the appropriate resources. Communication during outbreaks remains a crucial issue to be addressed, as well as the scaling up of pandemic preparedness at the community level. Coordinated effort is essential across the UN system, regional systems, governments, civil society organizations, communities and the private sector.

<b>How we work</b>	
All International Federation assistance seeks to adhere to the <a href="#">Code of Conduct</a> and is committed to the <a href="#">Humanitarian Charter and Minimum Standards in Disaster Response (Sphere)</a> in delivering quality and accountable assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at <a href="http://www.ifrc.org">http://www.ifrc.org</a>	
The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".	<b>Global Agenda Goals:</b> <ul style="list-style-type: none"><li>• Reduce the numbers of deaths, injuries and impact from disasters.</li><li>• Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.</li><li>• Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.</li><li>• Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.</li></ul>
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