

DREF operation final report



Egypt: Avian Influenza

DREF operation n° MDREG002
2 January 2008

The International Federation's Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross Red Crescent response to emergencies. The DREF is a vital part of the International Federation's disaster response system and increases the ability of national societies to respond to disasters.

Summary: CHF 40,000 (USD 30,606 or EUR 25,642) was allocated from the Federation's Disaster Relief Emergency Fund (DREF) on 23 February 2006 to support the national society in delivering assistance to beneficiaries.

This DREF operation aimed to assist the Egyptian Red Crescent Society (Egyptian RCS) in its efforts to raise awareness of the communities on the Avian Influenza virus. With trainings and workshops provided and communication materials widely disseminated, the staff and volunteers of the National Society as well as the general public were successfully reached.

The auxiliary role of the Egyptian RCS to the Egyptian government in combating Avian Influenza was maintained thanks to a large, nationwide network of youth/volunteers and their access to vulnerable communities, as well as to the experience of the National Society in social mobilisation gained through previous vaccination awareness campaigns.



Egyptian Red Crescent Society volunteers distributed Avian Influenza flyers in classrooms

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The situation

On 17 February, some foci of Avian Influenza were reported in three governorates of Egypt. Eight cases were confirmed by Egyptian officials in the Governorates of Cairo (4), Giza (2) and Minya (2). As of 22 February, further cases were reported in five additional governorates - Dakahleya, Kalyubeya, Beni Suef, Qina and Beheira. Egypt was the second country in Middle East North Africa Region to be affected by Avian Influenza, after Iraq.

Since February 2006, up to 30 million birds have been culled, causing an estimated loss to the poultry industry of USD 1 billion. The poultry sector had been producing over 2.5 million birds per day, offering a cheap source of protein to the population. Most of the approximately 40,000 commercial poultry farms had not introduced bio secure production systems.

Backyard farmed poultry is a very important source of income for the poor, as well as the main source of protein intake. Before the outbreaks, 29.4 percent of the population were engaged in backyard poultry farming, with average income representing 13 percent of their total income.

Indeed, these outbreaks in poultry (chicken) have occurred both in commercial and backyard farms. The government had undertaken the following first steps:

1. Culling all domestic poultry within a radius of approximately 3-4 km followed by thorough disinfection of premises.
2. Vaccinating all poultry within a zone of approximately 6-7 km² around the zone of culling/stamping out.
3. Controlling movements within the infected zone.
4. Declaring quarantine.
5. Putting in place rapid response teams, from both veterinary and public health.
6. Intensifying surveillance around the infected area as well as in the entire country.

Coordination

A supreme national committee was established by the Minister of Health (Chair), Minister of Agriculture and Minister of Environment, representatives from relevant ministries, and United Nations agencies such as World Health Organization (WHO) and Food and Agriculture Organization (FAO). A disaster management team made up of representatives from UN Agencies, the government, non-governmental organisations (NGOs) and donors has been a regular forum for updates, information exchange and action planning to support government efforts.

The Egyptian Red Crescent Society (Egyptian RCS) headquarters and its branches worked in cooperation with the governmental authorities at different levels. The Egyptian RCS was represented in the intersectional committees for combating Avian Influenza and participated in the consultative meetings. WHO Regional Office for the Eastern Mediterranean (EMRO) representatives were involved in conducting the training sessions for trainers.

Since the beginning, Egyptian RCS has benefited from a clearly defined auxiliary role to the Egyptian government in combating Avian Influenza carried out through its nationwide network of youth volunteers. Indeed, the National Society is an active member of the national interagency coordination committee and has been involved in the prevention, preparedness and response plan to combat Avian Influenza.

Red Cross and Red Crescent action

In January 2006, the International Federation's North Africa regional office based in Tunis sent information material in Arabic and English, as well as the "Avian Influenza: Facts and Recommendations for National Society" document. On 11 February, a briefing workshop was organized at Egyptian RCS headquarters by the regional office with the support of the International Federation's Avian Influenza health coordinator, Dr. Adelheid Marshang, and a senior health officer/representative from the EMRO-WHO.

Communication materials have been prepared and widely disseminated. In the immediate aftermath of the outbreak in Egypt in February, the government was able to quickly widespread awareness on risks, means of transmission, and basic prevention measures. Within hours of the confirmation of cases of the Avian Influenza virus, all the major state-owned television channels were broadcasting the news to the public as well as airing an informative TV spot showing families how to protect themselves. The TV spots reached 82 per cent coverage within one day, and a research in May showed that the message recall of the TV spots stood at 68 per cent.

In addition, 24-hour call centres with 40 toll-free lines were established, with 120 staff answering questions and concerns of the public. A practical Avian Influenza communication strategy was developed by the United States Agency for International Development (USAID) Communication for Healthy Living (CHL) prior to the outbreak, under the auspices of the national Avian Influenza committee chaired by the Ministry of Health

including representatives from all the concerned national bodies (the Ministry of Information and Ministry of Agriculture), and international partners (USAID/Naval Medical Research Unit and WHO).

The government has closely coordinated its work with the UN system, as well as other international organisations and partners such as:

- Human Health: WHO, USAID, United Nations Children’s Fund (UNICEF), African Development Bank (ADB), European Union (EU), World Bank.
- Animal Health: FAO, Netherlands government, ADB, EU, French government, World Bank.
- Livelihood: FAO, United Nations Development Programme (UNDP), World Food Programme (WFP), Canadian International Development Agency (CIDA)
- Communication: UNICEF, WHO, FAO, World Bank, USAID.

A circular was issued to all Egyptian RCS branches highlighting the main elements of the plan. This included 24 hours availability, mobilization of volunteers giving priority to those with medical or paramedical background, arranging training courses and workshops, contacting the local health authorities and providing basic protective supplies and materials if needed. In addition, based on the advices of the health authorities, instructions were given to volunteers to assist the concerned authorities in convincing citizens who raised poultry at home or backyards to get rid of the poultry.

A training course for 50 Egyptian RCS volunteers of the Greater Cairo area took place in February, with the support of the Ministry of Health and EMRO. Meanwhile, a training course for 50 participants from the National Society branches in 10 governorates was held in order to disseminate the information at that level. At the beginning of the operation, 20 workshops were planned targeting 600 participants who can themselves continue the dissemination process in the country. The final statistics has shown that the target population of these workshops went from 600 to almost 1,000 and included students, Egyptian RCS volunteers, trainers and senior officers of the regional and local branches.

The Egyptian RCS has used all its structures to reach communities and provide the necessary information. This was achieved thanks to a large, nationwide network of youth/volunteers and their access to vulnerable communities, as well as to the experience of the National Society in social mobilisation gained through previous vaccination awareness campaigns conducted in coordination with the Ministry of Health. Drawing on these connections and experience, the volunteers and staff of the Egyptian RCS have undertaken the following steps:

1. Conducting public health education about the dangers of sick birds and signs and symptoms of the illness in humans.
2. Conducting public health education on hygiene and proper handling of the birds and poultry.
3. Coordinating with local authorities and other organisations to assist in environmental protection.
4. Monitoring and reporting on outbreaks.
5. Supporting and assisting households affected by the epidemic.

The volunteers were involved in face-to-face training sessions within the public awareness campaign. In addition, 267 people were reached with the Avian Influenza awareness workshops that took place in 30 governorates since the DREF allocation until August 2006. These governorates were Qaloubia, Marsa Matrouh, Gharbia, Kafr Cheikh, Cairo, South Sinai, Ismailia, Suisse, Al Al Aqsr, Qina, Al Manoufiya, Red Sea, Alexandria, Souhaj, Charqia, Beni Swiffe, Bour Said, Demiat, Fayyoun, Bouhaira, Assiout, North Sinai, Assouan, Giza, Menia, Ennahda, Halwan, Zeinhom, Dekheliya, and Wadi Jadi.

Printed materials were used to share basic Avian Influenza prevention information. An awareness brochure was developed and flyers were printed for distribution to communities and schools. This type of material also helped to shape the initiative's development.



The flyers with the theme “Avian Influenza Awareness” were printed for distribution to communities and schools

The Egyptian RCS also purchased protective material from the local market to equip 200 volunteers with 100 protective suits, 100 masks, 200 packs of special gloves and tents in order to host several workshops and simulation activities.

Conclusion

At the beginning, it was difficult for the Egyptian RCS to predict the evolution of the virus, but thanks to the experience gained in social mobilization from the previous awareness campaigns conducted in coordination with the Ministry of Health (Polio, Measles vaccination campaigns), it has been able to implement the activities that were planned. Indeed, the Egyptian RCS is highly experienced in programming around health education, hygiene promotion, dissemination of information and education material, publicity and advocacy on health issues. The North Africa regional office of the International Federation has been supporting the Egyptian RCS over the past four years in producing educational material, training tools for their health and community based projects.

With this operation, the Egyptian RCS has established a network of Avian Influenza volunteer teams in 30 governorates of Egypt. These volunteers have been present since the outbreak of the pandemic and they have worked on 24 hour shifts. Thanks to this large nationwide network of youth/volunteers and through their access to vulnerable communities, the National Society has been well positioned to assist local authorities with undertaking prevention and control measures.

In the meantime, the National Society has disseminated information on Avian Influenza preparedness and response to the target population such as communities' leaders, students, youth, farmers, etc. Increased awareness was also provided to thousands of volunteers in charge of disseminating health education messages to the communities. Through the cascading training, the National Society was able to observe a de-multiplying factor, and volunteers observed changes in some behaviour about hygiene, breeding poultry, better hygiene conditions and nutritional behaviour at home. The families that have been approached by the National Society staff have shown an interest and a good will to follow the recommendations. In addition, the Egyptian RCS has made available protective material to people in need and is better prepared and equipped to plan for a longer term preparedness programme.

Throughout the process, the North Africa regional office has supported the efforts of the Egyptian RCS to increase their capacity, working in partnership with their government, in order to tackle Avian Influenza at community and local level. It has provided resources and structural support to let the communities at risk of bird flu increase their preparations for a possible pandemic. Thanks to these efforts, those communities benefited from a network of trained people that can also train the other members of their communities. In addition, the disaster preparedness and response base was maximised, along with coordination between the Red Cross and Red Crescent Societies, the UN agencies and the government.

The unspent amount of CHF 64 was returned to DREF.

How we work

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.

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".

Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

Contact information

For further information specifically related to this operation please contact:

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Selected Parameters	
Reporting Timeframe	2006/02-2006/09
Budget Timeframe	2006/02-2006/08
Appeal	MDREG002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
A. Budget		40,000				40,000
B. Opening Balance		0				0
Income						
<u>Reallocations (within appeal or from/to another appeal)</u>						
<i>DREF</i>		39,936				39,936
<i>C3. Reallocations (within appeal or</i>		39,936				39,936
C. Total Income = SUM(C1..C6)		39,936				39,936
D. Total Funding = B + C		39,936				39,936

II. Balance of Funds

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
B. Opening Balance		0				0
C. Income		39,936				39,936
E. Expenditure		-39,936				-39,936
F. Closing Balance = (B + C + E)		0				0

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A		B					A - B	
BUDGET (C)		40,000					40,000	
Supplies								
Shelter - Relief			2,865			2,865	-2,865	
Medical & First Aid	831		6,336			6,336	-5,505	
Total Supplies	831		9,201			9,201	-8,370	
Personnel								
National Staff			395			395	-395	
Total Personnel			395			395	-395	
Workshops & Training								
Workshops & Training	29,134		20,593			20,593	8,541	
Total Workshops & Training	29,134		20,593			20,593	8,541	
General Expenditure								
Information & Public Relation	7,435		7,151			7,151	284	
Total General Expenditure	7,435		7,151			7,151	284	
Programme Support								
Program Support	2,600		2,596			2,596	4	
Total Programme Support	2,600		2,596			2,596	4	
TOTAL EXPENDITURE (D)	40,000		39,936			39,936	64	
VARIANCE (C - D)			64			64		