

Programme Update



International Federation
of Red Cross and Red Crescent Societies

Influenza

Appeal No. MAA00018

27 August 2009

This report covers the 01 January to 30 June 2009



Participants at a Humanitarian Pandemic Preparedness workshop organised by the Egyptian Red Crescent and supported by the secretariat. **International Federation**

In brief

Programme purpose: To contribute towards minimizing human morbidity and mortality, social disruption and related suffering caused by emerging influenza epizootics and/or a human influenza pandemic.

Programme summary:

The International Federation has been supporting National Societies (NS), financially and technically, to develop pandemic preparedness and response plans in their countries, along with business continuity plans. Essential to the programme's success is ongoing collaboration and coordination with multiple implementing partners, including NGOs, UN agencies, local governments and Movement components working on H2P. NS establish coordination mechanisms with civil society organisations and government authorities, as well as train first responders, focusing on the areas of public health, food security and livelihoods. The International Federation manages this coordination to standardize programme guidance and in-country activities. Together with H2P partners, the organisation has developed tools, guidelines, templates and communication messages and disseminated these to NS.

This programme update is intended to convey transition, consolidation, and revision within the following two related appeals, into one plan and budget called "Influenza", to maximize impact:

- MAA00018 - Humanitarian Pandemic Preparedness (H2P) 2009-2010 plan (previously called Avian and Human Influenza), which covered the following aspects -
 - Humanitarian Pandemic Preparedness
 - Avian and Human Influenza
- MDR00002 - Emergency Appeal for pandemic influenza: response and mitigation (2009). This was launched in response to the outbreak of the H1N1 influenza virus during the first half of 2009.

The programme will continue to be implemented in 29 countries in the Americas, Asia-Pacific, Eastern Africa, Southern Africa, West and Central Africa, Middle East and North Africa, and Europe. The International Federation is seeking further funding to expand the programme to additional countries as well, particularly in the Americas Zone, following the recent H1N1 outbreak and the increased risk of a more virulent global influenza pandemic during the coming period.

Financial situation: There has been an increase in the 2009 budget from CHF 10,412,964 (USD 9,593,930 or EUR 6,829,427) to CHF 12,805,734 (USD 11,798,496 or EUR 8,398,745), an increase of 23 per cent, due to a consolidation of the two appeals and as a response to the H1N1 crisis. Of this revised budget, CHF 10,179,836 (79 per cent) covered during the reporting period (including opening balance). Overall expenditure during the reporting period was CHF 3,306,010 (26 per cent of the budget and 33 per cent of the income). The expenditure was lower than expected in part due to the H1N1 crisis as also due to delays in project start-up at the country level. This is expected to pick up considerably during the latter part of the year as at least 30 projects should be underway by end-September.

[Click here to go directly to the revised budget and the related financial report.](#)

No. of people we help: Approximately 976,000 people worldwide benefited directly and about 48.6 million people indirectly from specific health and hygiene education activities and general information and dissemination campaigns on Avian Influenza undertaken by NS in 13 countries at maximum or high risk. Approximately 29 NS received direct technical and/or financial support to develop pandemic influenza preparedness plans that would serve their entire country.

Our partners: The International Federation worked in coordination with Movement constituents, members of the CORE Group (a membership organization of 48 US-based private voluntary organisations) Academy for Educational Development (AED), relevant United Nations (UN) agencies, USAID and relevant national public authorities.

Context

The International Federation initially launched an appeal for Avian Influenza preparedness, mitigation, and response in 2006, followed by a related USAID-funded grant programme in 2007 known as Humanitarian Pandemic Preparedness (H2P). This programme was subsequently revised in the Humanitarian Pandemic Preparedness 2009-2010 plan (issued in January 2009). Since then a new flu virus (Influenza A H1N1 of swine origin) occurred. It was first detected in April 2009, and continues to infect people and spread from person-to-person in a similar manner as regular seasonal influenza viruses. Despite the widespread concern generated since the first outbreak, the severity of this H1N1 outbreak (in terms of illnesses and deaths) compared to other influenza viruses remains unclear. There is, however, a major concern that a new virus, for which most people will not have immunity, will spread rapidly and become increasingly more severe, particularly in developing countries where poor nutrition and inadequate health infrastructure will exacerbate the impact of a new virus. In addition, currently there is no vaccine to protect against this H1N1 virus. The International Federation launched a preliminary emergency appeal (MDR00002) on 30 April 2009 to respond to the recent outbreak and meet the increased demand for pandemic preparedness from NS wanting to respond to the outbreak.

In summary, the International Federation has been implementing the following three separate but linked influenza-related programmes or plans:

- Humanitarian Pandemic Preparedness
- Avian Influenza
- Emergency Appeal for pandemic influenza: response and mitigation.

This programme update articulates a plan to consolidate the three programmes into one plan and budget called "Influenza". Given the potential magnitude and unprecedented threat posed by this

influenza outbreak and the possible catastrophic consequences, the International Federation took a calculated risk in developing this response strategy to maximize its' impact. This was based on the International Federation's comparative global advantages (network, experience and preparedness tools) to support scaled-up efforts by its member NS to develop and implement measures leading to viable risk reduction and relevant national and global response capacity.

Revised programme

This revised programme approach was considered appropriate for the following reasons:

- The need to streamline the International Federation's health programming into one comprehensive and coherent approach, building on the clear programme and human resource synergies. A single management point within the Federation responsible and accountable for these inter-related activities.
- For more effective fundraising, as this will allow the International Federation to provide prospective donors with a single opportunity to support "influenza". Anticipated funding for the emergency appeal had not materialized, perhaps compromised by including non-influenza activities, such as business continuity planning for the secretariat, in the appeal. The business continuity plan components of the appeal are being separated from the influenza plan to ensure the proper attention and funding is provided to this integral component of a well-functioning secretariat. Business continuity plan activities will be implemented separately and led by the support services director, in cooperation with other divisions.

The revised programme will build on the success of the H2P programme and its' innovative partnerships, led by the International Federation, with support from partners and funding from USAID. This programme has been recognized within the international aid community for its contribution to pandemic preparedness in 29 countries. A well-functioning partnership has been built at the global level, a comprehensive set of tools and guidelines have been published, global staff has been hired and trained and activities have been initiated in these countries. Development of a second H2P project design, to help NS prepare for a pandemic before the end of 2009, has been started. The H2P projects in the different countries are at varying stages in the process of adaptation of material and development of plans. The Egyptian Red Crescent and the Red Cross Societies of Uganda, Nepal and Ethiopia have progressed the furthest in this process. They have formal relationships with NGOs in their countries and have adapted and tested much of the material. The Egyptian Red Crescent plan has been formally acknowledged by the national government. Similar activities are underway in all other countries. During the past 10 months, the International Federation has been approached by a growing number of NS seeking financial and technical support to prepare their communities for a pandemic.

However, there are two financial constraints that currently restrict the Federation's opportunity to respond to an urgent need and growing demand for pandemic preparedness:

- Insufficient financial resources to reach even a half the NS asking for immediate support.
- Until now, H2P had a single donor, USAID, which restricted project activity to certain countries. As a matter of the Movement's Fundamental Principles, particularly neutrality, and in order to work with more countries that are important to global health and can have a meaningful impact on pandemic preparedness, the International Federation needs to ensure funding to non-USAID funded countries and diverse NS. It is essential that it attracts additional donors to support projects in these countries that would otherwise be excluded. This would help to ultimately ensure greater preparedness at both the local and global levels.

The H2P programme concept was designed to result in a comprehensive country-wide preparedness and response plan for multiple civil society actors, to be tested in pilot areas and managed by trained personnel at the district level. In response to the recent H1N1 outbreak and the increased risk of a lethal global influenza pandemic over the next six months, the International Federation is working with partners to design an "Accelerated H2P project." This project, described in detail below, would have the same goal as the "long" project, i.e. "community preparedness that will mitigate the impact of a pandemic on excess morbidity and mortality from risks related to health, food security and livelihood," but would be simplified so that it can be completed in a shorter

time frame. Specifically, H2P supports NS to build a comprehensive pandemic preparedness and response plan for civil society that is inclusive of many actors. Using its auxiliary status to governments, NS advocate for this plan to be adapted and adopted by host governments into their national pandemic-related plans. Currently, the International Federation and its partners are working together to modify and define the measures of success for the accelerated project.

The content of these plans, including key messages, tools and strategies are derived from global standards developed by the H2P partnership. The International Federation and its partners assist local NS and government leaders to modify these approaches so they are appropriate for the local community. Once the material has been adapted, a training of trainers is conducted to ensure this content reaches key staff and volunteers in every branch or district throughout each country. District or provincial Red Cross Red Crescent branches develop plans to train community members on life-saving practices during a pandemic and to disseminate the most essential information about the pandemic response plan. H2P partnerships are replicated at the country and provincial level to support this work and to ensure plans are well known and integrated as much as possible. While the overall goal of both the H2P long-term and H2P accelerated projects are the same, there are slight but important differences in their outcomes.

H2P long-term project	H2P accelerated project
12 to 18 months	3 to 6 months
Outcomes: 1. Adapted messages and tools 2. A functioning network of NGO partners 3. Trained trainers in all branches or districts 4. A detailed, comprehensive pandemic preparedness and response plan for the entire country.	Outcomes: 1. Adapted messages 2. Trained trainers in all branches or districts 3. Trained volunteers and community members 4. A plan of action and interventions for communities shared publically

Applications for funds to implement an H2P accelerated project will be accepted in two phases:

- The first phase will address existing requests submitted to the Emergency Appeal for pandemic influenza: response and mitigation (MDR00002) in response to the H1N1 flu. These applications will be processed in coordination with the Americas Zone office (include applications from NS within the Americas Zone) and can begin immediately.
- The second phase will include applications from NS outside the Americas and will be deferred until additional funding is secured. The Avian and Human Influenza unit in Geneva, through zone offices, will inform NS when applications for an H2P accelerated project should be submitted to the H2P coordinator in their zone. A deadline for submitting an application will be communicated through zones and applications will be assessed based on fund availability and need. NS that are already receiving funds from USAID to implement an H2P project will not eligible for more funds from USAID.

Capacity of the Federation: As noted above, with the generous support of the above-mentioned donors, the Federation has been working on influenza since 2006. We have completed over 13 projects related to avian influenza and there is now a trained H2P Federation staff member in the Zones. There are three technical and administrative support staff based in Geneva. There is a comprehensive set of program guidelines published on a dedicated H2P partnership website (pandemicpreparedness.org). An inter-agency group known as the H2P Operations Committee meets face-to-face every four to six weeks to review progress, monitor use of tools, identify gaps in the program and the 29 projects. This committee has also established numerous inter-agency working groups to develop technical guidelines on such topics as communication strategies, community based health issues, and country planning. The Federation has established strong partnerships with US-based NGOs, UNPIC, WFP and US Military Commands in Africa and the Pacific, who have all used the H2P list of countries to inform their own funding and planning decisions. H2P is a member of Humanitarians in Pandemic (HiP), a UN agency group that collaborates on pandemic work, and has been acknowledged by the most senior management of WHO and WFP.

Progress towards outcomes

Outcomes: (given in the table above)

Achievements

The International Federation successfully accelerated the pace of planning at the global and country level for pandemic preparedness and response. Accelerated activity was mostly due to a more efficient and effective management strategy, including the publication of a “Request for proposals”, regular face-to-face meetings and transparent communication with partners, as well as greater involvement of zone offices around the world.

A total of 12 sub-agreements were signed in the Africas, Asia-Pacific and Europe zones, during the last six months. The majority of the staff has been recruited and properly briefed. Technical working groups’ tools and guidelines were developed and published for use. All H2P staff in the zones participated in training on these materials with partners. NS were provided with the tools and technical support to complete detailed proposals for their full allocation of funds for projects.

From January to March 2009, work was particularly intense with senior officers of the International Federation making 18 visits to NS, often with partner representation, to provide training and orientation on materials for NS and zone staff. Follow-up work after these visits is being carried out by zone staff.

While there will continue to be refinement of the tools and strategies, the International Federation is entering a new phase in the life of the programme. The past 18 months were spent largely cultivating partnerships, deepening understanding of the pandemic influenza, developing and testing generic tools and guidelines and identifying partner NS. A move is now being made into a more intense phase of implementation of meaningful pandemic preparedness plans on a global scale. During the next few months, it is expected to maintain effective partnerships, develop and implement H2P accelerated projects and sign more than 30 additional sub-agreements.

Constraints or Challenges

1. Financial reporting from NS:
This continued to be a challenge as most NS expenditures are incurred in their field offices. The International Federation has taken a few steps to address this -
 - Each NS is required to hire a dedicated accountant for the H2P project
 - Zone staff have been or will shortly be trained on the Federation’s obligations to donors
2. Guidelines and training materials:
Delays were encountered in testing and revising working group material and subsequent delays faced in finalizing that material. Furthermore, portions of the material were perceived to be complicated and not very comprehensive. The International Federation funded pilot tests of material requested by partner agencies to accelerate this process. Efforts were made by working groups to revise and publish material for immediate use by zones. There will be opportunities for further revisions towards the end of 2009.
3. Completing detailed proposals:
While many NS made an effort to complete detailed proposals on time, and nearly all NS submitted a first draft by 31st March, a comprehensive review with high standards for approval slowed down the process. Training and technical support was required to support NS on the components and outcomes of their projects. Some NS needed more time as compared to others to integrate feedback from different sources, over several stages of proposal writing. Therefore, the process for the H2P accelerated project has been streamlined and simplified.
4. Unexpected events:
These included political instability, leadership changes and unsuccessful hires within NS that

slowed down programme implementation in several countries. These issues were addressed on a case-by-case basis and activity has resumed in each of the concerned locations.

5. Uncertainty or unavailability of partners:

H2P partners, on several occasions, expressed uncertainty about their availability. This occasionally resulted in the absence of partners at critical meetings or start-up visits, which could undermine the confidence and the message that the International Federation has been giving to the NS and zones that partner participation is essential for H2P funding and for pandemic preparedness.

Working in partnership

- The primary partners for the Avian Influenza and H2P components of the programme are the NS in countries identified as priority (at maximum, high or moderate risk of epizootic).
- The International Federation accepted a three-year-grant from USAID in 2007. This grant involves collaboration with the CORE Group, the American Red Cross and two international organizations focussing on education and training, viz. AED and InterAction.

Contributing to longer-term impact

Since many of the messages of the Avian Influenza and H2P components are related to activities found in other programmes, such as community based health and first aid (CBHFA) and community based disaster preparedness (CBDP), the country-level coordination of an influenza programme should, ideally, be incorporated into existing CBHFA/CBDP programmes of the NS. A similar development could, eventually, take place at regional or zonal levels. Such incorporation would not only be logical but also ensure that the “message” continues, in a sustained manner, long after the initial programme phase has been completed.

Looking ahead

Building on the success of the H2P and its’ innovative partnerships, additional financial resources will allow the International Federation to reach more NS requesting response and mitigation, without restriction to certain countries. By October 2009, at least 25 H2P “long-term” countries will have signed a letter of agreement and received financial and technical support to prepare communities for a pandemic.

From July 2009, in response to the H1N1 pandemic, the International Federation will coordinate with WHO and partners to develop a joint “Call to Action”, a global communication campaign and a ready-to-use package for all 186 NS to enable them to respond.

Additionally, an H2P accelerated project will be proposed to NS in about 40 countries, to be completed in 6 months maximum.

- The first phase will address existing requests from NS in the Americas and can begin immediately.
- The second phase will consider applications from other NS and will be deferred until additional funding is secured.

How we work

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

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