

INFORMATION BULLETIN



International Federation of Red Cross and Red Crescent Societies
Fédération Internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

CAMEROON AND CENTRAL AFRICAN REPUBLIC: AVIAN FLU PREPAREDNESS

23 February 2006

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 183 countries.

In Brief

This Information Bulletin no. 01/2006 is being issued based on the needs described below reflecting the information available at this time. Based on further updates and details from the assessment reports, or should the situation deteriorate, the Cameroon and Central African Republic (CAR) national societies may seek for Federation or international support.

For further information specifically related to this operation please contact:

- ***In Cameroon:*** Daniel Sayi, Federation Acting Head of Central Africa Sub-Regional Office, Yaoundé; Email: daniel.sayi@ifrc.org; Phone: +237.221.74.37; Fax: + 237.221.74.39
- ***In Senegal:*** Alasan Senghore, Federation Head of West and Central Africa Regional Delegation, Dakar; Email: alasan.senghore@ifrc.org; Phone: +221.869.36.41; Fax +221. 860.20.02.
- ***In Geneva:*** Helene Ruud, Federation Regional Officer for Central Africa, Africa Dept.; Email: helene.ruud@ifrc.org; Phone +41.22.730.49.14; Fax +41.22.733.03.95

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The situation

On 8 February 2006, Nigerian authorities officially declared an outbreak of bird influenza following the first occurrence of the highly pathogenic avian influenza virus, H5N1, in a poultry farm in the village of Jaji located in the Northern State Kaduna, Nigeria. Nigeria, which is the most populous country in Africa (with 128,706,000 inhabitants), shares boundaries it's with Cameroon in the west and with Chad in the south west. It is feared that the Avian flu will spread to these neighboring countries as there is significant population movement and commercial exchange along the boundaries, especially with Cameroon's North West and Far North provinces where populations from Cameroon, Nigeria, Chad and CAR meet for commercial purposes. Cameroon its turn, shares its boundaries with the Central African Republic (CAR).

Several carcasses of bird flu-infected chickens have been discovered in the Nigerian States of Kano and Kaduna. The epidemic, which was confirmed on 8 February 2006, spread rapidly in the country. Approximately 2,000 birds from Eastern Europe would presently be in the northern part of Cameroon (Lake Chad, the Lagdo dam, and the Waza Park) and in the south-west as well as in the cereal farms of Yagoua or Ndop. The Far North Province is the most populated province of Cameroon, and one of the poorest parts of the country. Health infrastructure is not reliable there because civil servants appointed in those zones rarely join their posts.

Presently, the fear is that focus on the Kaduna State, Nigeria, may extend to Cameroon, then to the Central African Republic and to Chad. There is a possibility that the outbreak may appear in Cameroon as a result of the presence of the migrating birds that are currently in Cameroon. In both cases, population movements might accelerate the spread of the epidemic to an uncontrollable extent. There is therefore an urgent need to intervene.

Government and partners' action

Cameroon

Following official confirmation of the outbreak in Nigeria, the government of Cameroon immediately set up a crisis committee composed of officials from the Ministry of Public Health, the Ministry of Livestock and Animal Husbandry, the World Health Organization (WHO), the United Nations Children's Fund (UNICEF), the UN's Food and Agriculture Organization (FAO), Centre Pasteur of Cameroon and the Cameroon Red Cross Society. Several contributions have been announced from UNICEF, FAO and WHO. A joint team, comprising of officials of the ministries of health and livestock, is currently in the field in the North and Far North provinces. A systematic check has been imposed along the borders and it is strictly forbidden to import poultry from Nigeria.

Central African Republic

An Inter-Ministerial Committee has been set up to make proposals to the government of the Central African Republic. The committee, which is presided over by the Ministry of Rural Development, meets every Friday in view of adopting a national document to be submitted to donors. A systematic control has been imposed along the borders and it is forbidden to import poultry from Nigeria.

Red Cross and Red Crescent action

Cameroon

In September 2005, the Central Africa Sub-Regional Office (BRAC¹) received documents on avian flu and measures to be taken by the Federation offices in support of the 8 national societies in Central Africa. Within the framework of a training session on the ARCHI 2010 approach. The Cameroon Red Cross Society trained its relief and health directors from the ten provinces on avian flu. The training focused on:

- How to identify the symptoms of the disease;
- Preventive and control measures to be taken;
- What to do in the event of bird flu.

The trained officers are currently holding sensitization sessions in their respective localities.

Central African Republic

Within the Inter-Ministerial Committee, the Central African Red Cross Society has been designated as the resource organization to conduct community-based mobilization and sensitization. A staff member of the national society travelled, together with officials from the Ministry of Rural Development, to a village where 30 chickens had been found dead. However, after further investigations, it was realized that there were no cases of bird flu.

Needs

Short term

In order to assist the national societies and the communities to be better prepared and to avoid rapid spread in case of outbreak, there is a need to organize and build on the sensitization activities that have been launched. More information and education materials are therefore required (leaflets, posters, mega phones, etc). Sensitization should be carried out following the door-to-door approach in order to ensure a considerable change of behaviour.

Medium and long term

¹ In French: Bureau Regional pour l'Afrique Centrale

Cameroon and Central African Republic: Avian Flu Preparedness; Information Bulletin no. 1/2006

In line with the ARCHI 2010 approach, there will be a need to set up a community-based surveillance system through the divisional committees in the North and Far North provinces of Cameroon, which is the triangle between Nigeria, Chad and CAR. This will ensure that populations in the high risk zones are protected.

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