

Appeal >

*The International 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.*

# Avian influenza preparedness, mitigation and response



International Federation  
of Red Cross and Red Crescent Societies

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*Photos: International Federation and National Societies*

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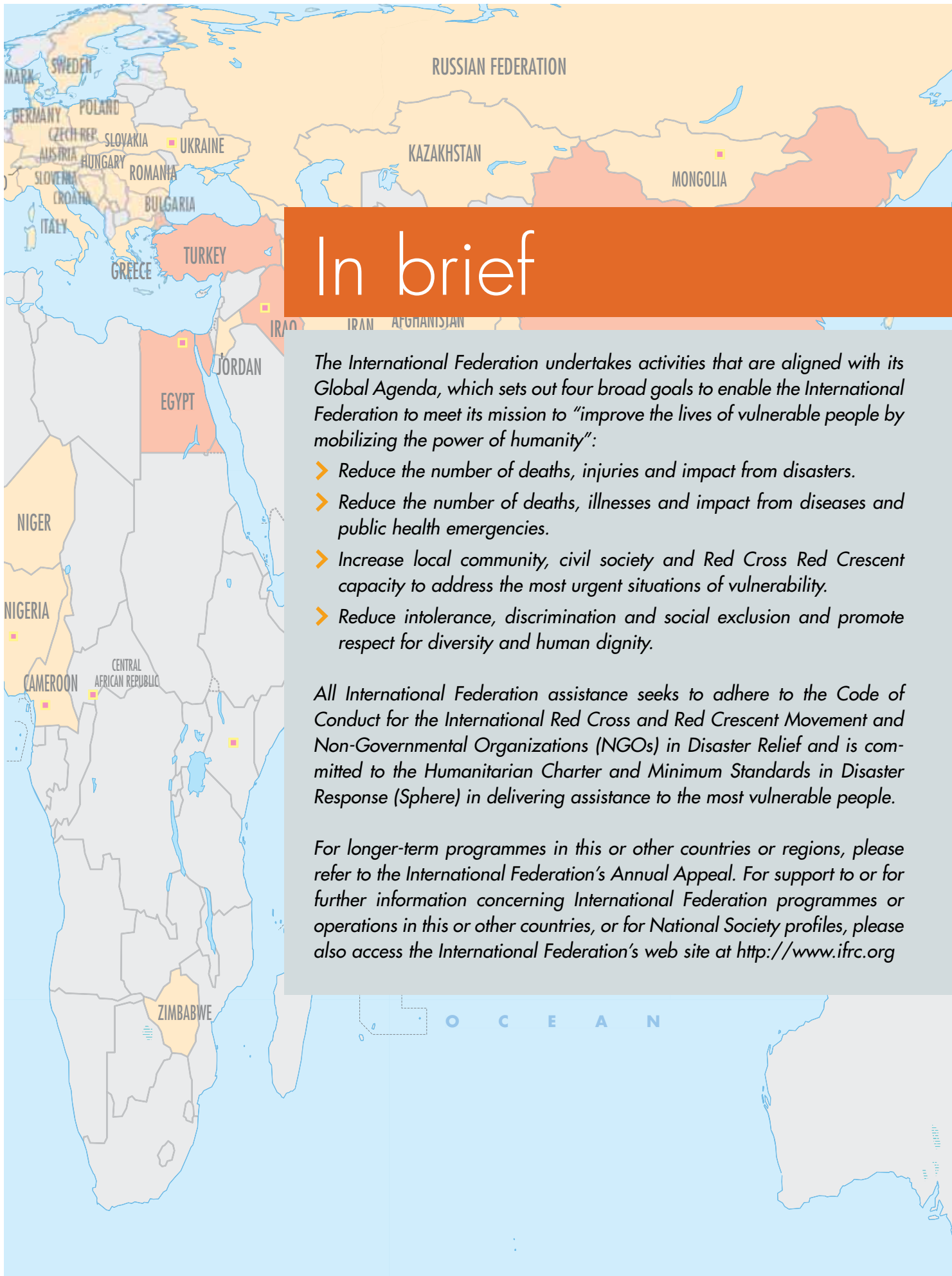
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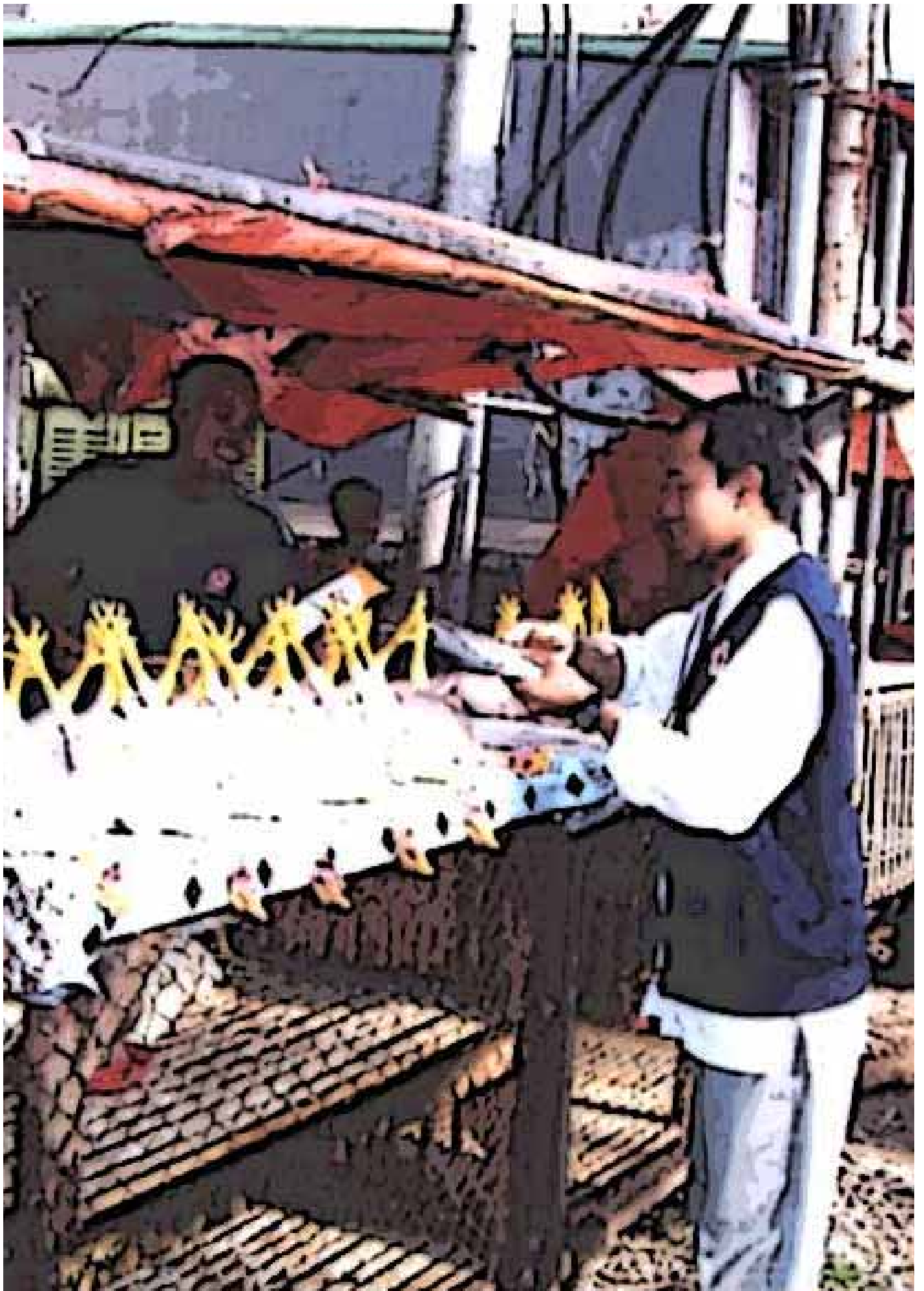
# In brief

*The International Federation undertakes activities that are aligned with its Global Agenda, which sets out four broad goals to enable the International Federation to meet its mission to “improve the lives of vulnerable people by mobilizing the power of humanity”:*

- Reduce the number 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.*

*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 (NGOs) in Disaster Relief and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable people.*

*For longer-term programmes in this or other countries or regions, please refer to the International Federation’s Annual Appeal. For support to or for further information concerning International Federation programmes or operations in this or other countries, or for National Society profiles, please also access the International Federation’s web site at <http://www.ifrc.org>*



## Summary

The International Federation of Red Cross and Red Crescent Societies (the International Federation) has already started responding to avian influenza (AI) or bird flu, based on an approach that AI and pandemic human influenza are two distinct, but closely related issues. Given the potential magnitude and unprecedented nature of the threat posed by avian influenza and its possible conversion into pandemic influenza (PI) with disastrous consequences, the International Federation is committed to using its comparative global advantages to support increased efforts by its member National Societies to develop and implement successful measures leading to a viable risk-reduction and relevant national and global response capacity to AI and pandemic influenza. Current ongoing and planned efforts need to be reinforced or scaled up, and given its unique position, the International Federation seeks CHF 17.4 million (USD 13.4 million/EUR 11 million) to provide vital support to National Societies for an initial period of 12 months.

## Technical facts

### The issue, the problem and the current situation

#### Avian influenza presents unprecedented and unique challenges to the global community

There is a risk that bird flu, by mutation or by recombination with the human flu virus (exchange of genome material into the human virus), could turn into a human strain with AI characteristics, transmissible from human to human. This would be a totally new virus strain of pandemic influenza (PI). While this does not yet exist, it could emerge and spread quickly if certain conditions favourable to the virus were to occur. The time frame for this process is impossible to specify, but experts at the World Health Organization (WHO) and elsewhere believe that the world is now closer to another influenza pandemic than at any time since 1968, when the last of the 20th century's three pandemics occurred, and that the risk for another Spanish flu-like epidemic is considerable.

WHO uses a series of six phases of pandemic alert to inform the world of the seriousness of the threat and of the need to launch progressively more intense preparedness activities (see table below).

Source: WHO, 2005.

Inter-pandemic phase New virus in animals, no human cases	Low risk of human cases	1
	Higher risk of human cases	2
Pandemic alert New virus causes human cases	No or very limited human-to-human transmission	3
	Evidence of increased human-to-human transmission	4
	Evidence of significant human-to-human transmission	5
Pandemic	Efficient and sustained human-to-human transmission	6

## The world is currently in phase 3

A new influenza virus subtype (H5N1) is causing disease in humans, but is not yet spreading efficiently or sustainably among them. There is currently no vaccine available against the pandemic strain because as yet such a strain simply does not exist. Pharmaceutical companies foresee that a protective vaccine of the new pandemic strain may not be available in large quantities until six months after the onset of the spread of the new influenza virus. An influenza pandemic will be impossible for health systems to manage alone. The early involvement and preparedness of communities and civil society will be crucial to reduce loss of lives and suffering. The Red Cross Red Crescent Movement is ideally placed to reach out beyond the periphery of health systems into communities and to prepare them for such an event.

In recent months, the avian influenza situation has changed dramatically with more than 30 countries having reported the deadly AI virus strain H5N1 in wild birds and domestic poultry. Bird flu has spread rapidly across Asia into Europe, the Middle East and Africa. Human cases continue to be reported, not only in Asia, but also in Europe, the Middle East and North Africa. The threat of avian influenza potentially persists and increases around the globe. The emphasis, therefore, must be the prevention of transmission from animals to humans in communities, information on poultry keeping and handling, preparedness measures related to hygiene education, early detection of human cases, case management, social mobilization, outbreak communication, security and psychological support. The Red Cross Red Crescent Movement has a comparative advantage in being able to reach out to small-scale poultry farmers in remote villages and in having a significant impact on the dissemination of key health messages and on health promotion, hygiene education and AI preparedness measures in communities.

Efforts to reduce the circulation of the AI virus and prevent its transmission from animals to humans are intended to reduce or delay the risk of PI. The International Federation's response strategy rests on this assumption, and includes plans to build on, and achieve, appropriate preparedness measures over the next 12 months.

## The Red Cross Red Crescent's role

The reduction of human exposure to the avian influenza virus H5N1 is one of the five key strategic actions established by WHO.<sup>1</sup> These actions aim not only at minimizing the risk of AI in humans, but also at addressing PI. Reducing human exposure to AI by informing communities of the risks of exposure to sick or dead animals (particularly poultry or birds) and how to avoid such risks are key activities. The Red Cross Red Crescent Movement plays a key role in helping communities to achieve this by raising awareness among small-scale poultry farmers, carrying out health and hygiene education, reinforcing good practice in the management of sick or dead animals, distributing information, education and communication (IEC) materials, supporting social mobilization, case detection and referral, addressing food security issues and strengthening communication.

Building National Society capacity to scale up capacity to address the avian influenza issue worldwide is the key to reinforcing preparedness to cope with a pandemic and to dealing with the magnitude of public health challenges that might emerge during a pandemic, especially in light of overloaded and weak health systems. The response of communities and civil society in a pandemic event will be fundamental to improving compliance with public health measures. The Red Cross Red Crescent's experience with awareness campaigns and social mobilization will be crucial in reaching out to the people most affected by enforcing public health measures. Informed volunteer recruitment and training has to start early in order to be ready to face the potential evolution of AI or PI.

<sup>1</sup> WHO's five strategic actions are outlined in the section "Coordinated action for a global response" below.

National authorities have the primary responsibility for addressing bird flu. WHO has acknowledged that current guidance may effectively target preparedness and containment at the national level, but there is significant concern that national pandemic preparedness plans may not adequately take vulnerable groups into account. Sub-Saharan Africa is in a particularly vulnerable position and a special focus is needed on how to develop a response specifically geared to the challenges there. Humanitarian organizations and other actors therefore urgently need to engage in scaled-up actions in national contingency planning and preparedness programmes.

The International Federation is ideally positioned in this respect because of its unique dual role: **its independent status and the formal auxiliary relationship that National Societies have with their national authorities or government ministries, coupled with its expertise and capacity to reach the most vulnerable people in the community.** In delivering assistance or support to disaster response, the International Federation, through its member National Societies, relies on a massive worldwide network of volunteers, a presence in over 183 countries and extensive knowledge of disaster response delivery and services. Based on these existing strengths and through its response systems, the International Federation has already been operational over the previous few months, supporting and working in partnership with National Red Cross and Red Crescent Societies, national authorities, the United Nations and other key actors.

The strength of the International Federation is its capacity to deliver an effective global response with core health and care assistance to vulnerable communities and groups, enhancing their resilience and coping mechanisms, and to reinforce and complement weak national health care systems.

This is not the first time that the International Federation has undertaken a similar task of successfully responding to a global health risk. During the severe acute respiratory syndrome (SARS) epidemic in 2003, National Societies in Cambodia, People's Republic of China, Indonesia, Japan, Democratic People's Republic of Korea, Lao People's Democratic Republic, Mongolia, Myanmar, Philippines, Singapore, Thailand and Viet Nam, with International Federation support, made it possible for volunteers and members to reach out to a large number of people with preventive measures. These measures included support and training for volunteers, community-based health workshops, production and dissemination of information and education materials, distribution of hygiene kits and other supplies, and increased publicity and advocacy on public health issues.

*Please visit the SARS appeal and related reports and document on the International Federation's web site: [http://www.ifrc.org/cgi/pdf\\_appeals.pl?03/1103.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?03/1103.pdf)*

Similarly, this appeal advances a support mechanism based on the International Federation's commitment to counter the impact of AI and prepare for a possible PI, with one common goal: **to contribute to preventing or minimizing the potential for human morbidity and mortality, massive social disruption and related suffering caused by a potential influenza epidemic or pandemic.**

Given the International Federation's overall goal and the situation outlined above, this appeal seeks to deliver the following objectives:

- Support National Societies' efforts to increase their capacity, working in partnership with their governments, to tackle avian influenza at community or local level in affected countries, thereby mitigating the threat of a pandemic and the challenges it may pose and reducing the risk of human cases.
- Provide resources and structural support so that countries and communities at risk of bird flu can increase their preparations for a possible pandemic and are ready to train their people.

- Plan for and advise on service continuity at all levels of National Societies and in the International Federation's Secretariat so that essential services to communities and coordination activities are assured.
- Maximize the disaster response experience base and provide international leadership within the Red Cross Red Crescent Movement by sharing perspectives to inform global preparedness and response work.
- Maintain the capacity of the International Federation and its members to respond to simultaneous disasters by updating contingency plans, formulating critical intervention strategies and building up preparedness and risk-reduction strategies.
- Increase the preparedness of National Societies, as auxiliaries to their governments, for a potential PI pandemic.
- Share knowledge as widely as possible to support the wider humanitarian and health communities.
- Reinforce coordination among the Red Cross Red Crescent, between agencies and with the United Nations (UN) and governments.



## The Red Cross Red Crescent response so far

The International Federation has already adopted a proactive approach in supporting National Societies in their efforts to control or mitigate the effects of bird flu and is relying on the comparative advantage of its members to reach at-risk or vulnerable communities.

Through the use of disaster preparedness projects, funded through annual appeals (where available) and support provided by the International Federation's Disaster Relief Emergency Fund (DREF), National Society interventions have been increasing in scale, with technical guidance, support and advice provided by the public health in emergencies (PHE) unit of the International Federation Secretariat's health and care department, through its regional and national health network. The interventions are in line with the objectives outlined above and focus on:

- advocacy for National Societies' role in complementing their government's efforts;
- making use of the strength and effectiveness of the Red Cross Red Crescent's network for monitoring progress and sharing information and newly developed IEC materials, through the International Federation's public web site at <http://www.ifrc.org/what/health/relief/avian-flu.asp>, intranet forums such as FedNet and the Disaster Management Information System (DMIS) (see table next page), regular teleconferences and participation in key conferences and WHO/UN and Inter-Agency Steering Committee (IASC) consultation meetings;
- coordination and collaboration within the Movement, including the International Committee of the Red Cross (ICRC), and with global and local partners, including the UN (particularly WHO);
- identifying strengths and weaknesses in International Federation and National Society capacity;
- real-time mapping of National Society actions so far and identifying support requirements and actual involvement;
- actively planning a response and scaling-up;
- training and upgrading capacities;
- developing guidance and technical support guidelines and materials;

- defining roles and responsibilities and identifying capacity needs (see also mapping survey response box on page 15); and
- considering organizational and “core business continuity” measures.

The International Federation’s Geneva Secretariat has set up two technical bodies, an Influenza Steering Committee (ISC) and an Influenza Task Force (ITF), to:

- continue, expand and consolidate the work done so far;
- coordinate, support, guide and advise members on appropriate preparedness and action; and
- link with the major global and national players.

The ISC and ITF will focus their work on the following objectives:

- Establish and disseminate guidance to the Secretariat and National Societies concerning the health of staff and volunteers, and monitor progress related to this.
- Help National Societies to prepare an AI response, including aspects such as coordination, funding, communications and monitoring.
- Support National Societies on human pandemic influenza preparedness and response measures.
- Help to ensure business continuity at Secretariat level and offer guidance to National Societies on service continuity during a pandemic.

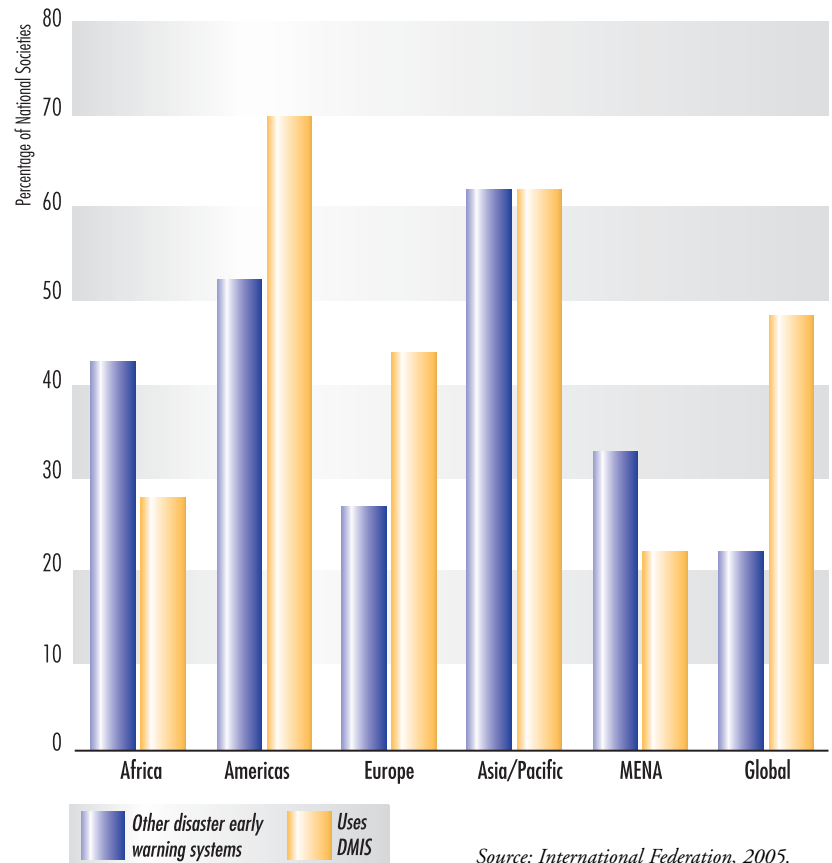
The major technical departments of the International Federation are working together closely on the ITF, which includes staff at various levels from the International Federation and selected National Societies. Each technical area connected to the ITF may form a special working group to develop strategies, operating methods and implementation and monitoring approaches in its respective field, as required.

The ICRC is focusing on minimizing the risk of pandemic influenza to staff health and welfare. The ICRC and the International Federation are following the technical protocols established by WHO and are working closely together at the task-force level to ensure a similar Movement-wide approach to preparedness activities and staff health.

## Coordinated action for a global response

The International Federation’s actions are inherently linked with, and complementary to, the UN (and other) agencies. In May 2005, WHO and the International Federation signed a global agreement outlining areas of collaboration, one of which is public health in emergencies, an important area in which the two organizations highlighted their need and willingness to cooperate more closely. The agreement has led to significant progress, useful insights and considerable advances in terms of planning and preparedness, involvement in consultations and in the development of tools and other initiatives. The core focus of humanitarian planning and preparedness initiatives is twofold:

### National Societies connected to DMIS or other technical early warning systems



Source: International Federation, 2005.

- To take action now in the current situation to address the humanitarian implications of the current avian influenza epizootic.
- To take action now that is geared to mitigating the impact of further developments.

WHO currently defines five strategic actions to address a possible pandemic influenza:

- Reduce human exposure to the H5N1 virus strain.
- Strengthen early warning systems.
- Intensify rapid containment operations.
- Build capacity to cope with a possible pandemic.
- Coordinate global science and accelerate vaccine development and expansion of production capacity.

In line with these strategic actions, the IASC Working Group, of which the International Federation is an integral member, has established the following critical issues that require immediate attention in terms of strategic development:

- Communication and behavioural change.
- Minimum level of preparedness.
- Creation and improvement of planning and preparedness tools including best practices and establishment of an information platform.
- Societal coping mechanisms.
- Humanitarian advocacy agenda.
- Poverty and livelihood implications.

Within this framework, the International Federation is already addressing key elements according to member National Society roles.



**STRATEGI PMI ATASI FLU BURUNG**

Sebagai organisasi kemanusiaan yang peduli terhadap kesehatan masyarakat, PMI turut berperan serta dalam membantu pemerintah menanggulangi flu burung. Lima hari sejak flu burung dinyatakan sebagai Kejadian Luar Biasa (KLB) di Indonesia, pada tanggal 24 September 2005 Ketua Umum PMI mencanangkan keikutsertaan PMI di bidang: Strategi Peningkatan *Public Awareness*, Strategi Pencegahan Penularan oleh Unggas dan membantu dalam strategi *surveillance*.

## Action by National Red Cross and Red Crescent Societies

At the end of January 2006, the Public Health in Emergencies Unit at the International Federation's Secretariat put together a 26-question survey to identify National Society progress in:

- defining their roles in influenza response;
- capacity needs;
- training and resource needs;
- existing capacity;
- involvement in national task forces and government plans;
- previous experience with communicable disease prevention and control; and
- cooperation with government and other players.

The survey is intended to define the magnitude and scope of National Society activities at this early stage and provides key information for the design of technical support, training and supply needs, and the possibility for scaling-up activities.

The questionnaire was distributed to 183 National Societies through the International Federation's health network and will be repeated on a regular basis to provide both follow-up and further baseline data.

An initial review of the results received so far indicates that approximately 84 per cent of governments have developed country plans, and 71 per cent of National Societies have discussed and/or identified a role vis-à-vis their government in avian and/or human influenza preparedness and response. The survey also indicates that while some National Societies are already actively involved in AI prevention and preparedness activities, many are in the process of determining and assessing the scale of involvement and specific activities to be carried out. Despite the indications that National Societies are actively building capacity and addressing areas to be strengthened, the International Federation remains very concerned about the overall response capacity and the potential impact a pandemic could have. If a pandemic does occur, National Societies, along with all other civil organizations, will be under enormous pressure.

Many National Societies have started activities using disaster preparedness funding where available. At the request of a number of National Societies that are responding to avian influenza, a total of CHF 691,000 (USD 531,000/EUR 438,000) has been allocated for activities from the International Federation's DREF. Below are several examples of National Society actions to date, most of which have been supported by DREF.

## East, South-East and South Asia

### Avian influenza information bulletin issued on 30 March 2006

Please visit the information bulletin:  
[http://www.ifrc.org/cgi/pdf\\_appeals.pl?rpts05/EACi01040604.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?rpts05/EACi01040604.pdf)

## China

### CHF 280,000 (USD 215,000/EUR 178,000) from DREF, allocated 14 March 2006

The Red Cross Society of China started a nationwide hygiene promotion and prevention campaign on avian influenza. This very first step in a larger process of ensuring changes in behaviour aimed at distributing 170,000 leaflets and 17,000 posters in 17 provinces, including Beijing. Through its network of nearly 3,000 branches, the Chinese Red Cross is in a very good position to disseminate prevention messages and awareness materials.



## Viet Nam

**CHF 250,000 (USD 190,000/EUR 160,000) from DREF, allocated 10 March 2006**

*Please visit the DREF bulletin:*

[http://www.ifrc.org/cgi/pdf\\_appeals.pl?06/MDRVN001.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?06/MDRVN001.pdf)

Responding to the bird flu outbreak in Viet Nam in December 2004, the Red Cross of Viet Nam supported efforts undertaken by the authorities aimed at eradicating the H5N1 virus responsible for the disease. The Red Cross scaled up its activities by conducting a host of AI awareness campaigns to minimize the risk of a pandemic. The International Federation's country delegation and other donors are supporting these initiatives. The National Society is also part of a national forum to educate and provide the public with simple and clear messages on how they can protect themselves, their families, neighbours and friends. So far, the efforts seem to be effective, as no new human case had been detected since late December 2005. However, given the country's high vulnerability to a pandemic, further financial support is needed to allow the Viet Nam Red Cross to implement, among other activities, further avian influenza awareness campaigns. With the support of the International Federation, the Red Cross of Viet Nam prepared a plan of action and provisional emergency appeal for AI activities in November 2005. The programme was eventually incorporated into the Viet Nam annual appeal 2006–2007. The National Society is well positioned to carry out its planned activities effectively. It has considerable experience on outbreak control, such as malaria and SARS, and its large base of volunteers has access to remote and vulnerable communities country-wide. Below are some of the activities undertaken by the Red Cross of Viet Nam:

- Assessment of public awareness at the grass-roots level.
- Further development and production of materials for distribution by Red Cross of Viet Nam's volunteers along with supplies of soap in selected districts and communes.
- Trained Red Cross staff and volunteers have taken part in "training-of-trainers" and avian influenza education and prevention sessions.
- Community outreach activities were carried out.
- Campaigns to spread messages to the public about AI through the media and the loudspeaker system, which was already in existence, were undertaken throughout the country.
- Intensive training on AI prevention and public education for key Red Cross health staff was provided.
- The National Society facilitated and provided technical support to provincial chapters in developing AI preparedness plans.
- Protective items (masks and gloves) were distributed to all Red Cross staff members at central and provincial levels and trained Red Cross volunteers in the target locations.



## Africa

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### Benin

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#### **Avian Influenza Preparedness, information bulletin issued on 6 April 2006**

Please visit the information bulletin:

[http://www.ifrc.org/cgi/pdf\\_appeals.pl?rpts06/bj060406.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?rpts06/bj060406.pdf)

### Egypt

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#### **CHF 40,000 (USD 31,000/EUR 26,000) from DREF allocated on 23 February 2006**

Please visit the DREF bulletin:

[http://www.ifrc.org/cgi/pdf\\_appeals.pl?06/mdreg002.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?06/mdreg002.pdf)

In mid-February 2006, eight cases of bird flu were confirmed by Egyptian officials in three governorates and as of 22 February, further cases were reported in another five areas. Egypt is the second country in the Middle East North Africa region (after Iraq) to be affected by AI. As an auxiliary to the government, the Egyptian Red Crescent Society supported the Ministry of Health in its awareness and preparedness activities in an effort to prevent the spread of the disease. The Egyptian Red Crescent Society, which has a large nationwide network of young people and volunteers with access to vulnerable communities, is well positioned to help local authorities with prevention and control measures. The National Society gained experience in social mobilization through its actions in large awareness campaigns, such as polio and measles vaccination campaigns, conducted in coordination with the Ministry of Health. Red Crescent volunteers and staff are playing an important role in preventing the further spread of AI virus in five key areas:

- Public health education about the dangers of sick birds and signs and symptoms of the illness in humans.
- Public health education on hygiene and proper handling of birds and poultry.
- Coordination with local authorities and other organizations to assist in environmental protection.
- Monitoring and reporting on outbreaks.
- Support and assistance to households affected by the epidemic.

### Nigeria

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#### **CHF 100,000 (USD 78,000/EUR 64,000) from DREF allocated on 24 February 2006**

Please visit the DREF bulletin:

[http://www.ifrc.org/cgi/pdf\\_appeals.pl?06/MDRNG001.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?06/MDRNG001.pdf)

Bird flu was suspected in Nigeria and officially declared on 8 February 2006 in northern Kaduna state. The outbreak, the first of its kind in Africa, was confirmed by international authorities. On 8 February 2006, Nigeria's Minister of Agriculture announced that all suspect birds throughout the country would be killed and buried in order to contain the outbreak and that the federal government had set the sum of 1.5 billion naira (CHF 15 million/USD 11.5 million/EUR 9.5 million) for compensation at a rate of 250 naira (CHF 2.6/USD 2/EUR 1.7) per bird killed. The Nigerian Red Cross Society developed a plan of action to carry out interventions to help eradicate the spread of bird flu. This plan focuses on training volunteers and deploying them to affected communities to conduct community mobilization and sensitization at household level. The National Society will also distribute information materials to farmers and the general population to inform them of the danger of AI, its mode of contamination and how to avoid its spread. The International Federation plans to provide the following support to the Nigerian Red Cross:

- Carry out a rapid assessment and help the National Society to implement its plan of action, outlining a time frame, roles and responsibilities, and resource needs.

- Together with the Nigerian Red Cross Society, exchange information with Ministry of Health, WHO, Médecins sans Frontières (MSF) and other organizations concerned about the epidemiological situation.
- Assist in liaising between the National Society, the Ministry of Health, Centers for Disease Control (CDC) and others.
- Provide advice and support, based on the International Federation's long-standing experience in working with volunteers and communities.
- Coordinate with and help other health and care delegates and officers in West and Central Africa in order to work towards a regional response strategy to the AI outbreak.
- Help to keep the International Federation's regional delegation in Dakar (Senegal) and the Secretariat in Geneva informed of developments and activities in the field.

## Cameroon and Central African Republic

### Information bulletin issued 23 February 2006

*Please visit the information bulletin:*

[http://www.ifrc.org/cgi/pdf\\_appeals.pl?rpts06/cm060223.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?rpts06/cm060223.pdf)

Responding to the fear that the bird flu outbreak in Nigeria could cross borders and extend to Cameroon, and then possibly to Central African Republic and Chad, steps were taken to scale up action in those countries. In Cameroon, the government immediately set up a crisis committee composed of officials from the Ministry of Public Health, the Ministry of Livestock and Animal Husbandry, WHO, UN Children's Fund (UNICEF), UN Food and Agriculture Organization (FAO), Centre Pasteur of Cameroon and the Cameroon Red Cross Society. Arrangements were made to organize assessment missions to the North and Far North provinces, and a system of checks was implemented along the borders. In Central African Republic, an inter-ministerial committee was established to submit proposals to the country's government. The committee, which is presided over by the Ministry of Rural Development, meets every Friday to consider further action. The Central African Red Cross Society was designated as the resource organization to conduct community-based mobilization and sensitization.

## The needs

While 70 per cent of National Societies are already considering or have started influenza preparedness actions, the results of the mapping survey show that, for the majority, the level of preparedness is still at an early stage. Needs therefore relate primarily to capacity building, scaling-up of capacity and management, contingency planning for concomitant disasters, communications and service continuity planning.

Based on the mapping survey, it is clear that the resources to train up to 50,000 volunteers and National Society staff are needed. Such resources would cover recruitment, field supervision and the follow-up of new volunteers and retraining of existing volunteers and staff. A high degree of technical support will be required to:

- improve people's knowledge about disease prevention and control;
- improve communications;
- give guidance on staff and volunteer health insurance;
- provide logistical support for procurement and stockpiling of emergency medical and non-medical items (an estimated 1 million masks, gloves, aprons, pairs of rubber boots, and hygiene supplies such as soap and disinfectants would be necessary to cover the needs of 50,000 volunteers, staff and general population for six months);
- develop, print and translate information and education materials materials and communication messages;

- increase partnerships at the local level; and
- improve performance in community-based surveillance, social mobilization and community outreach activities.

The International Federation intends to maximize and streamline the use of existing structures and systems, and cross-train its staff. No parallel systems are envisaged except for the creation of temporary support structures in some instances and for technical and management support (e.g. setting up activities such as orientation, plans of action, training and guidance to National Societies).

Staff influenza kits have been designed in line with the ICRC's kits and security and medevac procedures are in the process of being streamlined.

## The proposal: negotiated partnerships

The current appeal seeks funds to support work in connection with avian influenza. This includes activities related to:

- assessments and start-up of National Society programmes;
- medical and non-medical materials for protection, dissemination and health education;
- communications;
- support for National Society training, capacity building and coordination, and for training National Society staff and volunteers;
- National Society information hotlines for health information;
- the creation of guidance tools for National Societies in line with best practices and WHO and FAO standards; and
- beginning pandemic preparedness work such as service continuity and contingency planning in coordination with forthcoming UN, government and inter-agency plans.

### Programme proposals

Contributions are demand driven and will be allocated to selected National Societies to support proposals for avian influenza programmes for prevention and scaling-up of activities. National Societies will be selected according to the following criteria and on the decision of the ISC and/or a group of International Federation technical advisers:

- A clear role for the National Society has been identified.
- Activities have been designed taking government action into account, to ensure that duplication of efforts is limited and a planned response is in line with that of the government.
- The National Society:
  - demonstrates commitment;
  - is able to deliver services on time;
  - has financial management systems and staff or human resource procedures in place.
- The National Society is able to implement proposals according to agreed technical standards and guidelines.
- No other funding is available or available funding is insufficient.
- The programme has been submitted through an International Federation country or regional delegation.
- The International Federation's monitoring role is assured.

## Programme-level support

The International Federation aims to provide assistance for projects related to technical and structural support for National Society capacity building and scaling-up, service continuity planning and development, and planning for response to simultaneous disasters. Such assistance could include:

- management, technical guidance and technical support to National Societies (in the fields of, for example, health, human resources and security procedures, finance and logistics);
- support for training of new volunteers and staff or re-training existing personnel, and supply of materials;
- help with communications strategies, information technology (IT) and telecommunications;
- logistical support for procurement and initial pre-positioning at key locations around the world of specialized protective equipment and supplies;
- support in re-mapping, monitoring and reporting;
- impact analysis studies in five selected locations;
- supply of information and education materials materials: translation into local languages and printing;
- coordination and global influenza management team support; and
- global Red Cross Red Crescent Movement coordination and cooperation.

After the initial period of 12 months and depending on the situation, a follow-up appeal may be made.

## Proposed next steps

Over the next 12 months, the International Federation also intends to develop a more effective response to a possible pandemic by:

- continuing to share and monitor information, in coordination with the WHO's Global Outbreak Alert and Response Network (GOARN) and Influenza Network, and FAO;
- further upgrading FedNet's avian influenza sections and the International Federation's Disaster Management and Information System (DMIS), and continued, regular teleconferences;
- establishing and consolidating the ISC and ITF Secretariat and their links with the regions and setting up a global network of International Federation focal points for influenza;
- continual mapping of National Society activities and capacities, and identifying areas of need and solutions for support (see National Society mapping questionnaire results below);
- planning global responses based on projected pandemic scenarios, including:
  - strategy or plan of action – cooperation with other sectors;
  - ensuring National Societies' preparation and capacity are adequate or reinforced;
  - providing IT support to National Societies;
  - preparing communications strategies (outbreak communications and health promotion);
  - ensuring security by building on Red Cross Red Crescent experience since 1918 of controlling outbreaks in communities, and through established disaster response mechanisms;
- identifying needs for national and international staff;
- ensuring staff health and security by developing and refining guidance before and during a pandemic;
- informing governments (through Permanent Missions in Geneva) of International Federation and National Society actions;
- working to improve inter-agency coordination and cooperation; scaling-up international coordination;

- developing a generic Red Cross Red Crescent epidemic-control guidance document, and updating it regularly;
- maintaining global operational capacity (business continuity plan), including dealing with other emergencies during a pandemic;
- contributing to selected international and local strategic meetings on influenza preparedness;
- strengthening capacities to rebuild and rapid reaction capabilities; and
- putting in place strong logistics preparedness measures in order to provide a rapid and secure delivery network, capable of transporting large volumes of materials nationally and internationally. The logistics network will work in close coordination with governments, WHO and non-governmental organizations in transport, security and distribution of supplies.

## Challenges

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The International Federation anticipates the following immediate to medium-term challenges in pandemic outbreak management:

### Health

- Sanitation, particularly at the level of health institutions in developing countries.
- Capacity of health systems in developed countries with safety regulations that are too stringent.
- Hospitals will be closed for non-pandemic influenza patients (for example SARS experience, Canada, 2003).
- Potential use of the Red Cross Red Crescent Movement's health and water and sanitation emergency response units (ERUs) in national response has to be further explored.
- Capacity of health systems facing severe staff shortages due to disease, together with overloaded health institutions.
- Taking care of cases that cannot be repatriated or are in quarantine and of healthy expatriates who cannot return home (because travel to their country of origin or from their current country of residence or work is impossible).
- Psychological support to sufferers, survivors and their families.
- Tracing of family members and survivors.
- Care of orphans and vulnerable children.
- Lack of water and possibility of emerging water-borne disease problem.

### Socio-economic

- Problems in transferring money.
- Breakdown of supply chains for all commodities.
- Return to cash, barter or other traditional payment practices.
- Fear or xenophobia.
- Payment of salaries, which may be discontinued, delayed, etc.
- Socio-economical breakdown of small-scale husbandry and farming.
- Lack of experience of governments with outbreak management.
- Problems with sanitation and waste management, and water – possibility of increase of related diseases.
- Management of dead bodies (guidelines, stock of body bags, etc.).
- Significant psychosocial impact.

### Communications, transportation and infrastructure

- Public transport problems (fuel, human resources, breakdown of planning and timelines).
- Air transport problems, travel restrictions.
- Public institutions closed (schools, airports, train stations, mosques/churches/synagogues/temples, etc.).

- Media and reporting – information flow problems.
- Lack of human resources.
- Extreme overload and/or breakdown of all telecommunications (mobile, satellite, land-lines, fax, etc.). Need to plan ahead with resilient networks and communication tools.
- Lack of electricity for heating and cooking.
- Lack of fuel for transport, heating, generators, etc.
- Security management.

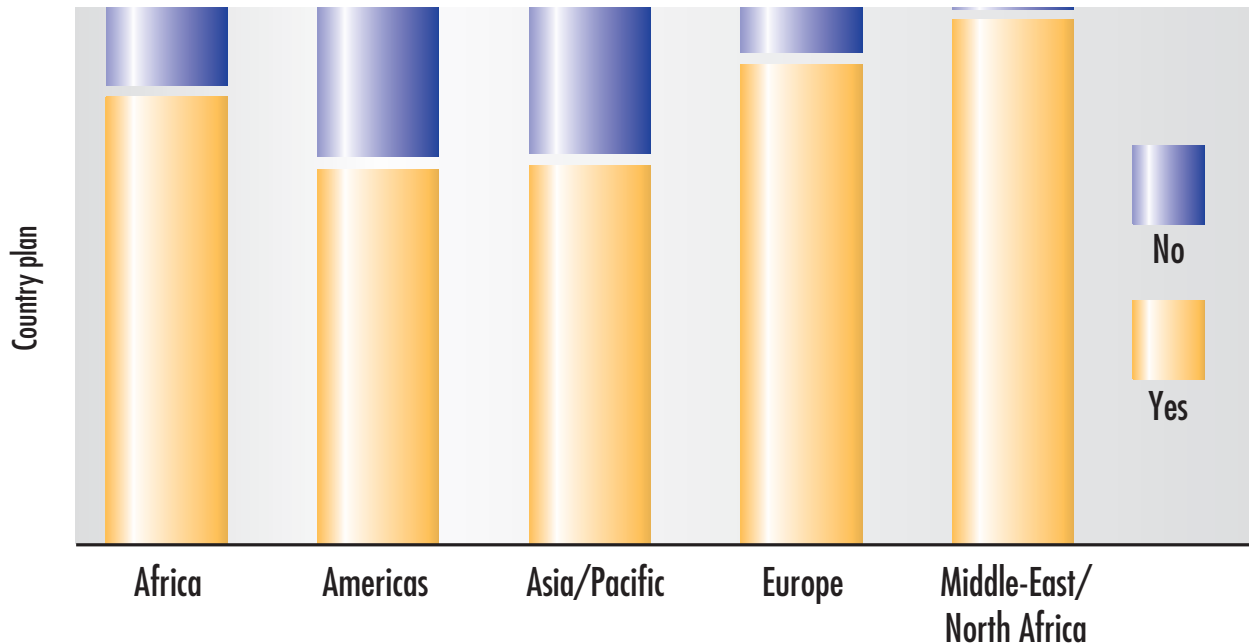
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Susan Johnson  
Director  
National Society and Field Support Division

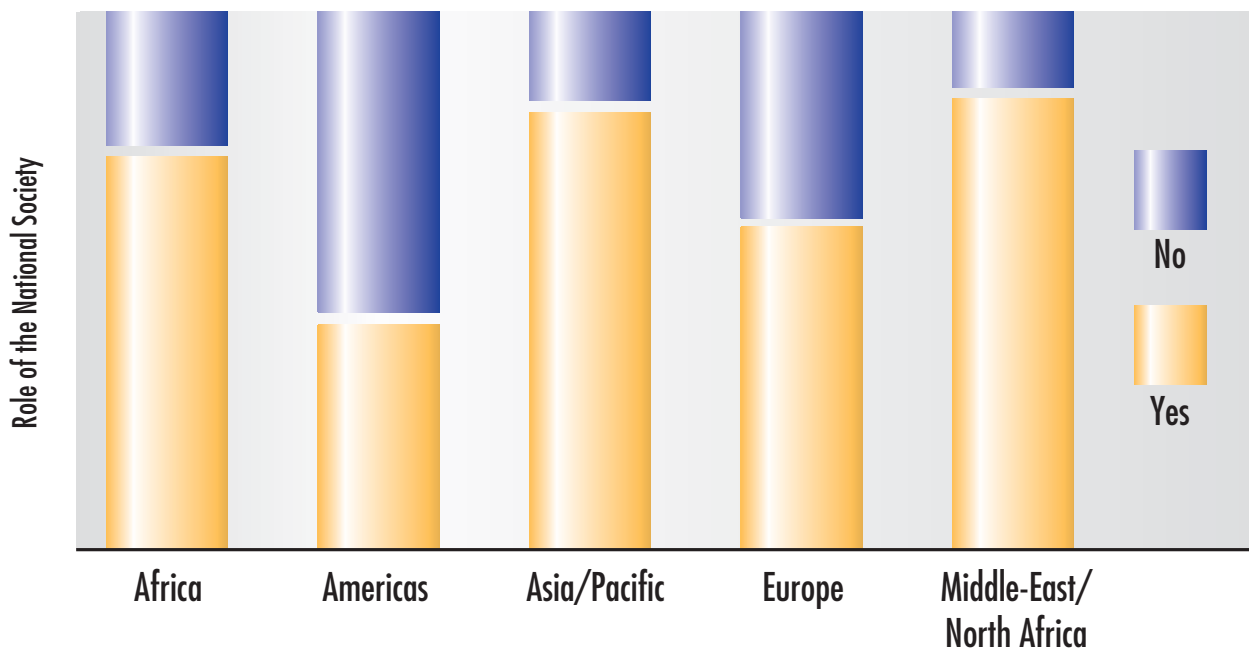
Markku Niskala  
Secretary General

## Feedback from National Societies: influenza activity mapping

### Existence of a country plan by the government



### Role foreseen for the National Society in country plan



Source: International Federation, 2006.

# Annex 1: Appeal budget summary budget figures

<b>Avian Influenza - MAA00000</b>	
<b>Budget line</b>	<b>CHF</b>
<b>Supplies</b>	
Medical and first aid	2,280,000
Other supplies	2,750,000
<b>National Society programmes</b>	
National Society programmes proposals (excluding supplies)	7,250,000
<b>Capital equipment</b>	
Computers and telecoms equipment	380,250
Other equipment and machinery	445,000
<b>Transport, storage and vehicle costs</b>	
Distribution and monitoring	10,000
<b>Personnel</b>	
International staff	1,626,043
National staff	58,000
Consultants	400,000
<b>Workshop and seminars</b>	
External workshops and seminars	207,300
<b>Administratives and general services</b>	
Travel and related expenses	168,000
Information expenses	220,800
Office running costs	367,720
Communication costs	112,840
<b>Programme support</b>	
Programme support (6.5% of total appeal)	1,131,483
<b>Total appeal</b>	<b>17,407,436</b>

## Annex 2 : Feedback evaluation of National Society global influenza activities

National Societies that have:	Yes	No	No response
Received the International Federation's avian influenza (AI) facts and recommendations	87%	13%	0%
Received strategic WHO documents	69%	28%	3%
Considered these useful for preparedness activities	73%	27%	0%
Confirmed that a government AI country plan exists	84%	16%	0%
Indicated that the government's country plan foresees a role for the National Society	71%	29%	0%
Had discussions with the national/government AI task force regarding role of National Society	67%	28%	5%
Had previous experience with outbreak control	53%	47%	0%
National Society has a preparedness plan (at this stage)	45%	55%	0%
Produced information, education and communication materials	24%	76%	0%
Considered recruiting and training new volunteers	66%	34%	0%
Indicated that cross-border activities are planned to support neighbouring National Societies	11%	89%	0%
Received the international health regulations	51%	49%	0%
Participated in inter-agency coordination	64%	34%	0%
Worked in collaboration with other UN/WHO/intergovernmental organization donors in AI preparedness planning	41%	47%	12%
Planned provisions of antiviral drugs for its staff and volunteers	13%	87%	0%
Confirmed access to government antiviral stocks	10%	88%	2%
Indicated a need for logistics support in the procurement of antivirals	54%	44%	2%
Considered stockpiling medical and non-medical items	73%	27%	0%
Confirmed prevalence of small-scale poultry farming in the country	90%	10%	0%
Existing resources for influenza in National Societies (human, equipment, funds, partnerships, etc.)	53%	36%	11%

# Map of countries affected by avian influenza



	Confirmed animal cases reported to OIE (51)
	Confirmed human cases reported to WHO (9)
■	National Societies with programmes

Source: International Federation, WHO, OIE, April 2006.

# The Fundamental Principles of the International Red Cross and Red Crescent Movement

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## **Humanity**

The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

## **Impartiality**

It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

## **Neutrality**

In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage in controversies of a political, racial, religious or ideological nature.

## **Independence**

The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

## **Voluntary Service**

It is a voluntary relief movement not prompted in any manner by desire for gain.

## **Unity**

There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

## **Universality**

The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.



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The *International Federation of Red Cross and Red Crescent Societies* promotes the humanitarian activities of National Societies among vulnerable people.

By coordinating international disaster relief and encouraging development support it seeks to prevent and alleviate human suffering.

The International Federation, the National Societies and the International Committee of the Red Cross together constitute the International Red Cross and Red Crescent Movement.