

# Inter-agency information sharing/coordination Meeting on avian influenza

4 May, 2006 (Thu), 2 - 5 PM

Imperial Queen's Park Hotel, Bangkok

Hosted by the International Federation of Red Cross & Red Crescent Societies, Southeast Asia  
Regional Delegation

## Minutes (DRAFT)

### Key theme: Preparedness Planning for Influenza Pandemic

#### Introductions and news sharing by organizations:

- **ADPC:**
  - Is integrating AI issues in its training programs: for ex, this week ADPC is organizing a regional pilot course on epidemic preparedness for health facilities based on the model of pandemic human influenza. The course will be designed for health care facility managers, infection control focal points, hospital service managers, and clinical service managers. ADPC is also presenting other courses such as the course on public health in complex emergencies (next week) and the course on community based psychological support (June).
  - ADPC is collaborating with US Centers for Disease Control and Prevention on adapting an emergency planning tool from CDC called ADEPT for pandemic preparedness, this is a technological platform for governments and organizations to enhance their planning.
  - There is an upcoming visit of risk communication specialist from Canada who is interested in conducting research on risk communication for epidemic and pandemic preparedness. If anyone is interested in planning or evaluating their risk communication strategies, please contact ADPC.
  - Is interested to know experiences from others on their AI risk and capacity assessments and response plans.
- **Oxfam GB**
- **European Commission**
- **IOM:** runs health programs for migrants. Currently is working with local governments to address AI issues in migrant population.
- **International Rescue Committee**
- **Plan International:** has a shortage of communication materials. The Plan has a range of radio and TV programs in the communities they work with and is considering how best to integrate AI into these programs. Is interested to know if there is any organization that is willing to support and partner with Plan International on this.
- **WHO Thailand**
- **UN Resident Coordinator's Office**

WFP: Are preparing to minimize the impact of staff and dependants health, safety and security in order to maintain essential functions and infrastructures so that WFP Lao can assist in strengthening national resilience before, during and after a possible pandemic influenza. One part of this is looking at HR functions related to AHI, how to maintain critical operations with minimal staff capacity
- **Thai Red Cross**
- **Save the Children Sweden:** is planning to do more internal awareness on avian influenza.
- **German Red Cross:** Does not have direct operational role in avian influenza, however, has supported the funding for AI projects in Cambodia and Vietnam. Currently, is considering support for Timor Leste.
- **CARE:** recently had an internal meeting in Timor Leste. The best strategy to raise awareness in countries on AI has been to link the best case countries with other countries, facilitate learning from each other. Has a range of communication materials in different languages.
- **International Federation of Red Cross**

#### Experience Sharing:

1) Presentation by WFP, Per Engstrom, Avian and Human Influenza Focal Point, UN World Food Programme (*see attached slides*)

#### Q&A

In what planning stage is UN?

- It is a complex process. We are facing a very complex threat with a number of uncertainties that can't be fully predicted to date, UN system has done stock piling of personal protective items and medical

procurements. There is difficulty in engaging people in pandemic preparedness in some places because of competing humanitarian priorities.

### **Experience Sharing:**

2) Presentation by CARE, Wayne Ulrich, Regional Coordinator, Disaster Risk Management and Emergency Response, CARE (*see attached slides*)

### **Q&A**

- There is a range of livelihood, poverty alleviation projects within CARE system in Asian countries. The reality is that poultry production (backyard farming) is highly profitable production as compared to many other income-generating activities like traditional handicraft making and others (*See CARE website for more information*).
- Need to define better the role of NGOs in avian influenza: a large NGO group based in US is looking specifically at the NGO role in avian influenza and pandemic at different levels (local and national) and coordination issues. Roles for the NGO community includes advocacy at local, national and international levels.
- There is a need to integrate AHI activities into existing projects/programs; this also helps to address the funding gap issue.
- Save the Children Sweden: 30-40% of population is children. There is a lack of discussion and recognition about reaching children and young people, especially using schools and places where children meet as a space to disseminate information. We need to have emergency preparedness planning in schools; posters do not work on their own.
- Care: is interested to see how we can work together with Save the Children on this. UNICEF has done a good work on this.

**Participants watched a short clip from the film “Super Flu: Race against a killer”.**

### **Plenary on preparedness planning:**

- Different organizations have been developing preparedness plans, with a lot of concepts. But these plans are not sufficiently operationalized, for ex, there is a lack of operational plans, response plans and standard operating procedures.
- Challenges:
  - The plans usually have standard operating procedures for each part of the plan and it has been challenging for planners to keep all SOPs together in one comprehensive way.
  - Need to work with governments. The hardest part in this planning process is to follow government plans, as they keep changing constantly. For ex, NZ plan has recently issued its 14<sup>th</sup> version. Some issues in government plans - like quarantine imposition - have implications on organizational plans.
  - Dissemination of plans is poor. Disseminating and development of these plans is done in small groups, however and often government persons themselves don't even know what their own government's plan is.
  - Need for more collaboration between organizations. At this time a lot of energy is being spent on figuring out on how to deal with staff once a pandemic occurs.
- Who is doing what in terms of planning?
  - International Federation of Red Cross: Southeast and East Asian national societies have developed a regional plan. This plan also defines what will be the roles of individual national societies in response phase. Some national societies started to develop SOPs and identified gaps in preparedness; they are now working on strengthening those elements.
  - WFP: There are many concept of operations, planning guidelines etc available, what each agency needs is a management plan, not more than 5 pages. UNSIC released **Pandemic Planning and Preparedness Guidelines for the United Nations System**
  - On 17 March the UN S-G asked each UN agency to have draft operational plan by the end of this month.
  - CARE is looking at partnership how we can continue to work and care for staff in the field.
  - European Commission: has recently started to do preparedness planning worldwide.

### **Other issues:**

#### Funding gap:

- There is difficulty for many organizations in accessing funds for organizational preparedness. How other organizations are addressing this? What are the best strategies?

- Beijing conference pledge was 1.9 billion USD; a big part of this money will be channeled through governments, on bilateral arrangements. The World Bank has not established the procedure yet for disbursements. Any idea when this is going to happen?
- UN agencies are using their emergency funds and doing internal borrowing to fund avian influenza activities.
- EU: soon (May 2006?) a separate grant fund will be available for international agencies and NGOs, to support their multi-national, regional activities.
- USAID has pledged 6 million USD. Unicef has accessed 49 million USD from Japanese gov't to develop communication materials.
- Care: the most realistic way to access funds by annexing the new activities to the existing programs, similar to lobbying for hazard mitigation.

#### **Discussion on meeting structure:**

1. Overall Structure: Based on the comments and discussions from the last meeting, 3 options for meeting structure were proposed (*see annexes*). The members present decided to keep the present structure for the time being (presentations by organizations on key theme followed by the plenary). This is related with: (a) the plenary gives an opportunity for the people to learn what others are doing and get updates; (b) technical groups may not have sufficient number of people or substance to discuss each time, given that many participants are generalists; (c) given the small number of participants at this meeting possibly due to holidays and summer leave, it has been recommended to postpone the decision on overall meeting structure until the September meeting.
2. Frequency of this meeting: upcoming holiday season may affect attendance to these meetings, but the meeting decided that we should continue to have monthly meetings for now. The frequency of coordination meetings will be open for discussion during the September meeting.
3. Hosting of this meeting: UN-OCHA/UNSIC have kindly offered to collaborate in the future meetings more closely with the IFRC.
4. Next meeting: Give organizations an opportunity to make presentations for 5-10 min.

#### **Upcoming Coordination Meeting: Thursday June 1, 2-5 pm at Imperial Queen's Park Hotel.**

#### **Communication session:**

*Chaired by WHO Thailand, Khun Chadin Tephaval.*

Chadin made a short briefing on Thai government pandemic preparedness plans, especially focusing on communication preparedness.

#### **Thai government actions so far and plans:**

- Planning exercise: is being carried out nation-wide, at different levels. At this stage, does not involve public.
- Thai gov't adopted shorter version to identify what is pandemic: 25 human cases within 2 weeks (WHO standard definition), 5 human cases in 10 weeks (Thai gov't).
- Thai gov't is going take AI pandemic planning to OPEC level, offering its assistance to other countries.
- Thai gov't is setting up a working committee to explore possibility of importing vaccines.
- Is working to secure Tamiflu stockpiles. Has already stockpiled 1.5 million capsules (= treatment dose for 150,000 people).
- Doing hospital upgrade for pandemic preparedness (for ex, setting up a quarantine section).
- Plans are set up for public education campaign: the plan is divided into different branches of media: story plans for TV, radio, newspaper and lifestyle magazines. Target group: general public. In terms of consistency of messages, most of messages will come from MOPH, together with Min of agriculture. IEC materials and messages have been developed based on other organizations messages, esp. UN recommended standard messages.
- Regional cooperation: Thailand sent medical and veterinary officers to Myanmar when first AI cases were found in Myanmar.
- The government does not have a specific plan at this stage on public risk communication in pandemic situation.
- WHO Thailand and MOPH issues daily reports for the public. Early release of information is important. There is recognition of this by Thai gov't. In the past there have been cases of covering up. We see improvements in the speed of reporting of cases.

#### **Issues raised:**

- Migrant population: there is a need for IEC materials for migrants. There are a large number of migrants in Thailand and we need to have planning for that.

- There is a need for better coordination of regional-level training events for media on public risk communication for avian influenza. This could be UNSIC role. At the moment, different organizations (WHO, UNICEF, ABC, IFRC and others) have plans to organize such events.
- From UN side: Who Thailand has staff capacity constraints in case of pandemic. WHO Thailand has one communication officer. When 2003 SARS occurred, WHO did not have comm. officer in Thailand and had to bring in resource person from outside. In human influenza pandemic situation, this may not be feasible. UNSIC still does not have communication officer in the region. Hence, OCHA has been supporting UNSIC on emergency communication planning.

**Other issues:**

- We should ask MOPH from Thailand to come and share with us their plans at one of next meetings.
- Also, we should have a session with private sector in some of the next meetings.
- Amanda, UN-OCHA: as a follow-up from the last communication session, OCHA has developed a matrix to map IEC materials from other organizations. IFRC will send out this matrix template, to the meeting participants.

## PROPOSAL TO ALTER MEETING STRUCTURE – 3 OPTIONS

Option	Format Style	Structure	Overview	Details
1	Plenary & Subgroups	<ul style="list-style-type: none"> <li>2 hr coordination mtg broken into 2 parts:               <ol style="list-style-type: none"> <li>plenary discussion &amp; update</li> <li>technical subgroups:                   <ol style="list-style-type: none"> <li>Animal Health</li> <li>Human Health</li> <li>Communication strategies</li> <li>Pandemic Preparedness</li> <li>Community participation, poverty reduction</li> </ol> </li> </ol> </li> </ul>	<ul style="list-style-type: none"> <li>recap</li> <li>presentation (30 min)</li> <li>plenary (30 min)</li> <li>coffee break</li> <li>technical subgroups (1 hr)</li> </ul>	<ul style="list-style-type: none"> <li>plenary - new developments of common interest &amp; concern for entire group during past month</li> <li>technical subgroups – intensive &amp; specific small group discussion</li> <li>participants choose one technical subgroup each month</li> <li>can choose different subgroup next month if wish</li> <li>each subgroup will nominate 1 organization to chair subgroup</li> <li>chair will take minutes &amp; forward group’s recommendation(s) to be included in overall minutes</li> </ul>
2	Thematic	<ul style="list-style-type: none"> <li>2 hr coordination mtg focused around 1 theme / pre-determined topic</li> <li>group decides next month’s theme during meeting closure</li> <li>2 presentations on chosen theme</li> </ul>	<ul style="list-style-type: none"> <li>recap</li> <li>presentation 1</li> <li>coffee break</li> <li>presentation 2</li> </ul>	<ul style="list-style-type: none"> <li>current structure</li> <li>during meeting closure, group nominates next month’s theme</li> <li>2 organizations are chosen/nominated to make presentation on theme</li> <li>organizations may be called in to BKK from the region to make these presentations</li> <li>group discussion following each presentation</li> </ul>
3	Combination: Two separate meetings.  a) Monthly meetings on specific topics (5 technical subgroups)  b) Plenary meetings on chosen (1 or 2) themes every 6 <sup>th</sup> week.	a) Subgroups: 2 hr meetings on: <ol style="list-style-type: none"> <li>Animal Health</li> <li>Human Health</li> <li>Communication strategies</li> <li>Pandemic Preparedness</li> <li>Community participation, poverty reduction</li> </ol> b) Plenary: 2 hr (depending on theme) meeting: <ul style="list-style-type: none"> <li>2 hr coordination mtg focused on pre-determined theme(s), with presentation(s).</li> <li>Discussion and Q&amp;A</li> <li>The group nominates next meetings theme(s)</li> </ul>	a) <ol style="list-style-type: none"> <li>Recap and presentation of the agenda</li> <li>Discussion according to the agenda (1 hr)</li> <li>Coffee Break</li> <li>Discussion continues</li> <li>Agree on theme for the next meeting</li> </ol> b) Same as above	<b>SUBGROUPS</b> <ul style="list-style-type: none"> <li>technical subgroups – intensive &amp; specific small group discussion</li> <li>Agenda/theme to be pre-determined</li> <li>participants choose one technical subgroup each month</li> <li>can choose different subgroup next month if wish</li> <li>each subgroup will nominate 1 organization to chair subgroup</li> <li>chair will take minutes &amp; forward group’s recommendation(s) to be included in overall minutes</li> </ul> <b>PLENARY</b> <ul style="list-style-type: none"> <li>1/2 organizations are nominated to make presentation on theme which are relevant for all organizations</li> <li>organizations may be called in to BKK from the region to make these presentations</li> <li>group discussion following each presentation</li> </ul>