

**Southeast Asia Regional Inter-agency Information Sharing/Coordination  
Meeting on Avian & Human Influenza (AHI)**  
*Hosted by the Asian Disaster Preparedness Center  
Southeast Asia Regional Delegation, Bangkok*

On behalf of



**Strengthening Community Based Approaches  
to Management of Avian and Human  
Influenza (AHI) in Asia**

**4 Dec 2008 (Thurs), 2 - 5 PM**  
Imperial Queen's Park Hotel, Sukhumvit Soi 22, Bangkok

**Theme: International and National Planning for the Management and Mitigation of  
Avian and Human Influenza**

These minutes, presentations, handouts, and information about future and past meetings can be found on the **AHI-NGO-RC/RC Asia Partnership on Strengthening Community Based Approaches to Management of Avian and Human Influenza in Asia**, comprised of the Asian Disaster Preparedness Center (ADPC), CARE, the International Federation of Red Cross and Red Crescent Societies (Federation) and the International Rescue Committee (IRC) and funding partnership by the ADB, project website: <http://www.adpc.net/communityAHI-Asia/MEETING/Default-MEETING.asp>

Full project details can be found here: <http://www.adpc.net/communityAHI-Asia/>

Chair: **Boon Tiong Tay, ADPC**

1412-14 hrs

Welcome Address

Organizations Present:

1. ADPC
2. Embassy of Japan
3. IFRC
4. IOM
5. IRC
6. LSHTM
7. Nestle (Thai)
8. OIE RCU
9. UNSIC
10. WFP
11. WHO

**Information sharing:**

- IOM is currently wrapping up their KAP studies and surveys of the migrant areas – in Lao PDR and Thailand; these will be available to other organisations
- US CDC, Thailand MoPH and the WHO are currently working on developing an Influenza Laboratory Information Sharing System

- IRC has finished KAP survey in the 9 refugee camps on the Thai-Burma border – will send to ADPC, who will share to all
- IOM Lao PDR can share report on KAP/IEC with migrants in Lao PDR
- The AHI-NGO-RC/RC-Asia Partnership has postponed the second training workshop for community-based AHI management; the new dates are 26-31 January 2009 (the workshop was delayed due to the political situation in Thailand in early December 2008); this workshop is one of the final activities for ADB funding project; although the Partnership has submitted a proposal for a Phase Two, this does not include a request for funding for the Forum, which will be funded by Nestle Thailand as of January 2009

## **EXPERIENCE SHARING 1**

**ANU LEHTINEN UNSIC, Regional Influenza Coordinator.**

**Presentation on the 6<sup>th</sup> International ministerial Conference on Avian Pandemic Influenza: Sharm El-Sheikh Egypt 25-26 October.**

(NB the full PowerPoint presentation is available for download @ <http://www.adpc.net/communityAHI-Asia/MEETING/Default-MEETING.asp>)

- At the previous AHI Forum, Wayne Ulrich (CARE International – chair of meeting) requested UNSIC that UNSIC make a presentation on the recent Inter-Ministerial Conference, hosted by the government of Egypt, in collaboration with the International Partnership on AHI – itself comprising governments and UN organisations (including WHO, UNSIC, etc.)
- This presentation was developed by Simon Gapling (NY, UNSIC)
- 530 government officials (ministers and senior officials) attended the conference
- The conference followed meetings in Washington, Beijing, New Delhi; builds on meetings in 2005 org by technical agencies (WHO, FAO, OIE and WB)
- These conferences are part of a global evolution, providing a platform where national governments can discuss, share, and move towards greater cooperation in HPAI and pandemic preparedness.
- **Washington DC, 2005** (first meeting): have seen progress on how different countries are preparing and articulation of the threat that we are dealing with
- **Beijing January, 2006:** conference designed to coordinate global work; saw the beginning of PPPs national level; vision that provided pillars for joint global response to pandemic threat; reduce risk of disease in poultry, and in humans exposed to poultry; improve surveillance and prepare for containment; mitigation of possible pandemic risks (on different aspects of society)
- **Vienna, June 2006:** the principles of the previous meetings were sustained, but emphasis began to shift towards more multi-sectoral dimensions of pandemic preparedness => beyond just health issue; emphasis on public communication (+ UNICEF came on board);
- **Bamako, December 2006:** new dimension to the thinking: need to look shift from emergency response to more long-term focus and sustainable preventative action => sustain AI control and Pandemic preparedness; shift to focus on Africa
- **Delhi, December 2008:** vision and road map proposed by the government of India; emphasis to One World One Health concept; focused on continuing to prepare, surveillance, coordination.
- **Sharm al Sheikh, October 2008:** the 4<sup>th</sup> global progress report was prepared and presented (UNSIC + World Bank) with input from different technical agencies; this report focused on June 2007-June 2008 but also addressed changes/progress/evolution over the past 3 years
- **Conclusions of the 4<sup>th</sup> Global Progress Report:**
  - PPP happening in countries across the globe but not sufficiently tested or operational or tested or multi-sectoral; still focus on operational and multi-sectoral contingency planning
  - Animal and human health services remain sub-standard.
  - Need to focus on multi-sectoral action
  - Obvious that animal and human health systems have improved but still need a lot of support to reach standards; very patchy and a lot of differences and inconsistencies between countries and region

- Inconsistent levels of HPAI management and pandemic preparedness between countries The world as a whole has not realised the ambitious pillars that have come out of the conferences listed above – we are on the way but in need of continuous support, partnerships and collaboration
- Conclusion: focus of efforts today: ensure the world is prepared to mitigate the impact of an influenza pandemic; sustain efforts; support multi-sectoral HPAI management and pandemic preparedness
- Conference pledges: NB not designed to be a pledging conference but a session was reserved for pledging; new pledges in Sharm totally 350 million (countries) => over 3 billion since Beijing. *See the report for more information*
- Conference emphasised continuous vigilance + work with private sector + transparency and fairness
- Government of Vietnam has offered to host the next intergovernmental meeting – maybe in March or early months of 2010; between Sharm and that meeting, a lot of work needs to take place
- Vision for the future: government of Egypt did not come up with roadmap but more of a vision for the future => broaden the scope and support for OWOH; participants expressed they wish to build on long-term approaches; they welcomed a strategic framework on implementing OWOH (FAO etc); national authorities felt they need more time to consider this approach and that required more technical assistance and political debate
- Emphasis was placed on the importance of continuing to prepare despite uncertainties and difficulties: pandemic threats are with us; challenging times also offer opportunities for reflection learning and action.
- More info [www.un-influenza.org](http://www.un-influenza.org); [www.influenza.undg.org](http://www.influenza.undg.org)
- UNSIC can send CD to interested people.
- 2009 Canada will host the first technical meeting and political debate on this
- There are in this region other meetings to assess this framework; Vietnam ASEAN + 3 meeting was scheduled for next week but cancelled due to Thai airport closure; intended to be discussion on this framework, concept, etc.
- More into available (see slides and websites)

#### Questions:

- Canada meeting: the meeting will take place in early 2009; discussion on holding it in early Feb; the OWOH concept and framework doc will be the main focus; need to have thorough consultation process so have robust document for Hanoi meeting in 2010.
- The OWOH notion will be taken on; the framework and focus (FAO etc) would have been taken forward at the Hanoi meeting but now cannot since cancelled; wanted to involve the national counterparts in discussion => by 2010 have a much more solid plan
- ASEAN: objective is to come up with a doc that would be endorsed by MoH and MoA of ASEAN countries; build on outcomes of Sharm and need input from others that can help them
- After Sharm el Sheikh, different countries are already trying to take OWOH concept on board; e.g. Indonesia, there has been meeting where the doc shared and discussed in terms of developing different programmatic approaches
- Philippines will be establishing council for Zoonosis – old and new problems of the animal-human interface

*The chair thanked Dr Lehtinen for her presentation.*

## **EXPERIENCE SHARING 2**

**Dr Yasuyuki Misawa (WFP): Humanitarian Pandemic Logistics and Learning Exercise (P2LK), Malaysia**

*NB there was no PowerPoint presentation for this information sharing session; the speaker brought some photos to share WFP's programme with the Forum participants*

- The objective of this exercise was to test readiness and response to pandemic; enhance coordination and preparedness; intended to act as a learning tool for officers to apply skills and knowledge
- participants included CDC, CARE, Oxfam, Save the Children, MSF, IFRC, UNICEF, ICRC, etc; organised by WFP and WHO
- The exercise involved: 21 participants, 25 facilitators (learning team) + 150 actors from Malaysia.
- The exercise was conducted in real airport/port; airport and port authorities as well as military and police support the exercise
- The Malaysian government provided large amount of support
- Training divided into 2 days theory, 5 days practical (4 day ex, one debrief)
- Day 1: personal hygiene, protective health measures; how to use PPE? All participants learned to use PPE in exercise; all wore masks during workshop
- Day 2: in the morning did decontamination and disinfection exercise; USAID equipment from states and showed how to do disinfection; afterwards moved to training center for table-top exercise; tabletop
- Exercise in country called Anok and need to prepare for pandemic
- Learned that if wear full PPE is very hot and cannot work more than 30 mins; if wear goggles in hot temp, cant see well since foggy
- Military involved in manning the checkpoint; on the first day the military were too kind and polite so asked them to be more brutal
- Unexpected event happened; one of the drivers got sick – had symptoms like influenza so had to call ambulance and send to hospital
- Use real airport and did screening; MoH screened WFP staff
- Buffer zone around contamination zone for food delivery etc. WFP cannot deliver food or items to containment zone; so asked the government to establish buffer zones, before entrance of buffer zones; they delivered food there.
- Food distribution exercise; gave also ropes etc so before food distribution, they set up distribution site
- Spent 5 days in the field – 4 days exercise and 1 day debriefing
- 2<sup>nd</sup> exercise: will invite more-program staff medical staff. Next year in Malaysia again.

#### Question and Answer:

- LSHTP: Situation was based in Anuka; to what extent did procedures and equipment used reflect Malaysia situation or was it more ideal situation
- Answer: the context was Malaysia in terms of climate etc but not in terms of example; Malaysia government support very much so select this country; they were testing WFP logistics abilities, not the national systems; but got the assistance of the government (customs, immigration, etc); expectation is that port and airport capacity would be very busy in a real context (therefore they told the staff to be more aggressive etc)
- IOM (Nenette Motus): why clinic there are people with PPE and some with just masks
- Answer: because they are inside containment zone so don't wear full PPE; those coming from outside were wearing PPE
- Nestle (Jean-Yves Gagnepain): different organisations involved and would have different procedures and knowledge of how to do decontamination etc
- Answer: WFP developed a standardised checklist; team leader has strong power; had many discussions in terms of what was the right procedures
- Nestle: army etc will all have own procedure?
- Answer: yes so they all follow their own procedure; port and airport used own procedures
- IRC (Dr Naing): are you really testing Malaysia level PPP? Because different departments will have own plans?

- In fact every country we need to follow own regulation; we have to follow own regulation and rules; but in fact testing WFP logistics but followed Malaysia regulation and rules; we just asked them to give us their regulations
- IRC: in the hotel, use of PPE – use of the boot cover; working in camp and that boot cover is not practical in the real farm and village setting,; this is our experience that it is not working well; we got PPE from USAID and the gloves (2 layers) and length of both are same layers so the top one does not cover the under one; do you have the same difficulty?
- Answer: tip from USAID: make a hole in the glove and that way it doesn't come off
- IRC: people wear sarongs in the camp and cannot wear the trouser PPE

**Announcement:**

WFP will organise workshop in Feb; 3 day workshop and have 1 day on session on preventive health measures; so get more PPE and mask and all and invite NGOs etc to participate in this session; send the info later and can try on PPE

**15:30: COFFEE BREAK**

**EXPERIENCE SHARING 3:** Khun Montree Chanachaiviboonwat Director of Department of Disaster Prevention and Mitigation (DDPM)

Thailand's Master plan in avian and pandemic influenza Covering Thailand's action plan

- More than 10 international agencies are going to support this issue to reduce risk in the whole region and around the country
- DDPM work closely with ADPC and will have project in the future
- Thailand faces problem with political issues which are not very good for the people
- This afternoon is a good opportunity for us to share experience and knowledge

**1. Disaster situation in Thailand**

- Big flood in south of the country: ½ billion people are affected; 600 million THB;
- Cold spell in the North of the country: 2.55 million people affected; need to get them blankets and shelter; may expect earthquake
- Table of rank order of risks of disasters in Thailand: epidemic is judged as a fairly low risk; high risk of flood, major accidents, explosions, typhoon, drought, fire landslide, earthquake, civil unrest, refugee influx
- Main driver in the country is the MoPH and the DDPM supports the MoPH
- API record in Thailand (loss of life is 17 people in 3 years) – see slide
- AHI death: no loss of life since 2006

**2. Laws and Policy that relate to AHI**

- a. Disaster Prevention and Mitigation Act (2007): DDPM has authority to work with many sectors; this is very important; in Article 4 specify that epidemics are one type of disaster that need to be controlled/mitigated; article 11 DDPM is the central government agency to operate activities on national disaster prevention and mitigation; need to work with sectors and international agencies
  - b. Disease Act
  - c. Animals epidemic Act: very old act
- Policy on API is very important since the country exports many poultry to the world => establishment of the Directing Committee in Prevention/Control/Preparedness for API => integrate concerned agencies
  - National policies and strategies for prevention/control/mitigation etc set up
  - Government has established directing committee in prevention/control/preparedness for API since December 6 2005; Directing Committee for API: organisation bridges between DLD and DDC

**3. Strategic Plan on API (2008-2010): (second one)**

- Approved by National Thai Cabinet on July 10<sup>th</sup> 2007
- 4 strategies (see slide) – to be carried out during the 3-year plan

#### 4. Participation of DDPM in the Second Strategic Plan

- S1: Systemising poultry production and nurturing; DDPM will take care of poultry in case of a pandemic; human and Animal surveillance, prevention and control
- S2: DDPM to announce official disaster area (in Bangkok – because in province it is provincial government) and conduct sub-committee meeting to help victims
- S3: DDPM to support 75 provinces in preparation and to conduct a simulation exercise  
Work closely with the provincial health office and conduct 5 exercises; but maybe 5 is not enough; in this fiscal year, will conduct exercises in every province of the country (DDPM provides simulation exercise budget); for each exercise, conduct an evaluation with all stakeholders after the exercise
- S4: Strategies to support for projects in capacity development for civil defense volunteers; one Tambon one Search and Rescue team; provide equipment  
Volunteers – have 1 million volunteers; have basic training course (1 week) for initial volunteers and then will extend and try to give them some incentives and try to give them more communication equipment  
OTOS: already have about 5000 teams; trying to give them more equipment  
Have basic training course for volunteers at risk communities; have 5000+ ‘Mr and Mrs Disaster Warning’; provide them with simple disaster warning equipment e.g. rain gage, manual siren => can send warning to the communities in the risk area  
Community Based Disaster Risk Management (CBDRM) – conduct 250 community trainings each year (over 300 are conducted if count those conducted with partner organizations) DDPM to support some basic projects in disaster management

#### 5. Roles of DDPM in API

- NB new fiscal year = 3 months ago
- At the moment each province can only get 50,000 THB to work with agencies in the area
- Provincial office have strong network with private sector and local authorities etc and so can get money to conduct very good exercise; so need to follow-up how they will do this year => Khun Montree’s task is to support role in API for this fiscal year
- Need to strengthen preparedness for effective response
- Need to use volunteers and the volunteers of the MoPH (there are about more than 600,000) but some of our civil defence volunteers are also health volunteers
- Regional simulation exercise to be set up with neighbouring countries and in the ASEAN framework; very soon is possible; if leave too long then big risk

#### Questions:

- Nestle (Jean-Yves Gagnepain): big thanks for the presentation and it confirms that Thailand is really showing the way in terms of preparedness and national strategic plan  
First observation: first thing I see and feel very strongly is that a lot of companies in Thailand totally rely on the government; believe that if you need the help of the government one day, we also have duties and private companies have duties  
Do you have a strategy to encourage the small and medium enterprise to develop their own preparedness so that less pressure on the government in that the private enterprises learn to take care of themselves?
- K. Montree: Strategic Plan is open for all sectors to play a role; MoPH have good linkage with public sector to work on API; before had strategic plan, one part of the committee is people from the private firm; DDPM and MoPH have common conception of awareness as being very important; some big private firm in the country try to support the government and the farmer to set up a closed system for the poultry industry; they have variety of skills/scales for farmers to choose what was important for

them; this was supported by financial bank; the government was a back-scene supporter and medium for the farmer and the big private firm to work together

- Nestle: we see that supply of raw material is worldwide; we use local raw material but also a lot of important raw material; if we can to supply the Thai market during an epidemic, we need to produce and hence import; there are several partners and organisations involved: port, customs, etc. If these people stop their jobs, we cannot produce. For these aspects, do you have already some action? Do customs have own BCPs? Have you conducted simulation exercises with them?
- K. Montree: this plan was included in the action plan; the country should have specification of the goods and the items that want to import (some can be imported locally, others no; some more essential); MoPH has more information.
- Nestle: Very important services like city water; if this stops running, we face severe situation; what about municipal services?
- K. Montree: each province has plan; drinking water would be the first priority; DDPM has drinking water producing mobile unit to supply some areas when have hazard or disaster; this can produce by ourselves; we have training and mandate to produce this. This should reduce the need. We have regional centres around the country (18) and each one has water tank to support risky areas => water pumps can be used
- ADPC (Boon Tiong Tay): Following along the lines of Jean-Yves' question, if companies working in Thailand want to find out what kind of plans and mechanisms are in place, where can they go?
- K. Montree: Website of MoPH; MoPH is the main player and DDPM plays supporting role.
- LSHTM: have been meeting with people in Thailand; Bureau of Emerging Infectious Disease (Dr Supamit) have started engaging with big business and will start engaging with middle and smaller... We have two questions for you:
  - Is epidemic still low down on scale of emergencies?
  - What is working relationship with the military and police?
- K. Montree: In Thailand we have seasonal calendar; the more serious events tend to be floods and landslides; we have bushfires in the dry season and drought (March to April); North and West of the country often have small an medium earthquakes; the ways of coping with hazards depends on the intensity and scale but need all-hazard preparation; we use Thai domestic budget and depend on outside if not necessary; our department has training academy in Bangkok; have 22 standard training course for our people and network (includes NGO and private sector although most customers is local authorities).

We just received the policy from the past government that said that DDPM should set up search and rescue team (ERT – emergency response team) at national level; at the moment have about 12 ERT (2 for BKK and the rest for regional); 10-15 people in each team; this year 3 month training period; they need to know all kinds of hazards.

In exercises, all should join, including military and private companies
- ADPC (Boon Tiong Tay): Recently, I was in a workshop where looking at role of the military and it's easy to do response but need to involve military in preparedness; in a country like Singapore where all police, fire etc are under one body, then response and preparedness is easier....
- Nestle (Jean-Yves Gagnepain): If phase 5/6 now.... who in Thailand would take control of response?
- K. Montree: In the new Act, there is a very clear line of command from national down to local. Military regime was the one who pushed through this act; whenever training or meeting, invite military along; Thailand is going to have a new National Disaster Preparedness Plan – should include SNAP etc and all master plan for each individual hazard; the new national plan should be finished by November next year; DDPM will be the architect for this new plan (ME)
- Nestle: If you have a major crisis now, will the Minister of Interior take control?
- K Montree:
- It would be the PM as the top commander; military will send resources according to the plan; last year we tested the integrated plan (shared by national security council) and conducted ASEAN simulation exercise in Rayong (chemical leak caused by typhoon hitting seaboard and big estate)
- Janette Lauza-Ugsang (ADPC): The documents that you have circulated (SNAP) – are they also available in English?

- WHO: the English version may be available on MoPH website
  - K. Montree: not sure if they have all the details
  - WHO: If people are interested WHO has CD copy of it and will send to UNSIC and ADPC.
- 
- ADPC (Boon Tiong Tay): If the private sector wants to talk to the government in terms of business continuity, and BDP, who should they talk to?
  - K. Montree: DDPM.

**1630-1700 hrs.**

The Chair thanked the speakers and suggested to take the topic forward by inviting further speakers specializing on the different issues discussed.

**Other businesses:**

- ADPC will be hosting/organizing the monthly AI meeting for 2009 with the help of a special core group. Core Group will prepare for the year in January; Boon Ting Tay (ADPC) will send out an e-mail asking all people on the list to send in ideas to be developed; can people send emails etc with ideas?
- These Minutes, and all future regional forum meeting minutes & presentations & handouts, will be posted on the AHI NGO/RC Partnership on Strengthening Community-Based AI project webpage, hosted by ADPC at: <http://www.adpc.net/communityAHI-Asia>. Also, notice of future meetings and the monthly topics will be posted in advance on the website.
- The next meeting will be held on the Thursday, 5 February 2009. The agenda will be circulated shortly.