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AFRICA

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REGIONAL OVERVIEW

The first reported outbreak of the highly pathogenic (HPAI) H5N1 avian influenza virus in birds in Africa occurred in Nigeria in early 2006, and cases were later confirmed in Djibouti, Sudan, Niger, Burkina Faso, Ghana, Togo, Cote d'Ivoire, and Cameroon. Two confirmed human cases have occurred, the first in Djibouti in May 2006, and the second, which was fatal, in Nigeria in February 2007.* Hundreds of thousands of birds have died from direct infection or in culling for disease containment, resulting in economic and social disruption and with negative implications for nutrition and livelihoods.

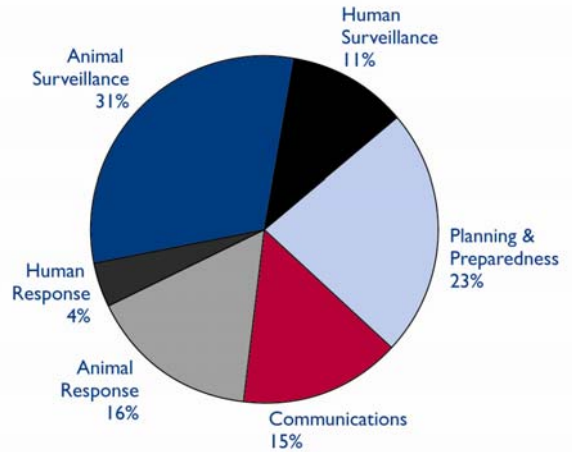
Africa faces a multitude of health and development issues, making it particularly vulnerable to the economic and human health threats posed by avian influenza. There is an emerging consensus that, unlike in Asia, where the combination of very high concentrations of poultry and human populations living in close proximity have created conditions favorable to the emergence of a virus capable of causing a global pandemic, the significantly smaller numbers of poultry and water fowl in Africa create a far less favorable environment for a pandemic virus to emerge – even though periodic human infections are likely to occur.

For this region, the immediate threat posed by avian influenza has more to do with the economic consequences of poultry infection and the possible importation of a pandemic virus. With Africa's weak health infrastructure and a population already overwhelmed by a multitude of other infectious organisms, from HIV to malaria, the spread of a pandemic virus from Asia into Africa would be devastating. This dual economic and public health threat has elevated avian influenza in Africa as a primary concern on international and national agendas.

To launch an early response in assisting Africa to respond to poultry outbreaks of HPAI and prepare for a possible pandemic, USAID has made strategic investments in Africa to build national and regional

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AFRICA:
AVIAN INFLUENZA FOCUS BY ACTIVITY



capacities to manage HPAI. With USAID support, the Government of Mali hosted an international meeting in December 2006 that highlighted Africa as a focal point for scale-up of avian influenza interventions. USAID also provides support to bilateral and regional programs and has allocated \$10.8 million for avian influenza activities in Africa to date. This includes \$1 million and \$2.1 million, respectively, to the World Health Organization (WHO) and the U.N. Food and Agriculture Organization (FAO).

USAID support in Africa to date has been primarily to strengthen planning and preparedness, communications and public awareness, disease surveillance and detection, and outbreak response and containment on national and regional levels. The chart above illustrates USAID's distribution of resources in Africa in these areas.

INTERVENTIONS AND IMPACT

Recognizing the vulnerability of West Africa, the first region in Africa impacted by outbreaks in birds, USAID has made significant investments in preparedness and response planning. Activities include:

*Total reported human cases and deaths updated September 2008.

USAID ASSISTANCE FOR AVIAN INFLUENZA PROGRAMS IN AFRICA	
Bilateral assistance	\$8.7 million
Regional assistance programs	\$2.1 million
Total USAID support of avian influenza programs in Africa	\$10.8 million

- Providing support to bring the Government of Ghana and partners together with a national task force to generate a comprehensive national preparedness plan incorporating active surveillance and communications campaigns.
- Supporting interventions in Cameroon toward outbreak preparedness in a relatively short response time following reported outbreaks and providing a wide range of technical advice in planning and preparedness interventions, which included how to limit poultry movement and the possibility of spreading the infection after the initial outbreak.

Additional investments in planning and preparedness have yielded considerable progress toward avian and pandemic influenza readiness and response capacity in Africa; governments are developing avian and pandemic influenza preparedness and response plans, and are also participating in activities geared toward testing and improving them. For example, through USAID support, key decisionmakers in Madagascar, Senegal, Uganda, and Rwanda are working through simulation exercises to determine roles, coordinate communications, and outline actions in case of animal or human outbreaks.

Although early investment has resulted in progress toward preparedness, the avian influenza threat is still grave. Lack of infrastructure poses a challenge in generating the human capacity needed to manage outbreaks, and unregulated trade underscores the crucial nature of effective disease surveillance and reporting. To date, USAID actions include:

- Providing recommendations for government engagement in human health surveillance and capacity to strengthen animal surveillance. Additional investments and increased international scrutiny on Nigeria, which has continued to experience outbreaks in birds, put

pressure on the government to improve monitoring and reporting. Nigeria reported its first human case in February 2007.

- Launching the Global Avian Influenza Network for Surveillance (GAINS) in partnership with the Centers for Disease Control and Prevention to monitor avian influenza in wild birds, track genetic changes in virus isolates, and share information. The project is international in scope and leverages resources and scientific information shared by others such as FAO.
 - GAINS is active in Botswana, Cameroon, Gabon, Mozambique, Nigeria, Republic of Congo, South Africa, Tanzania, and Zimbabwe, and has significant access to surveillance data throughout West and Southern Africa through the French Center for International Cooperation in Agronomy Research for Development, the Percy Fitzpatrick Institute of African Ornithology in Southern Africa, the Bird Atlas, the Global Registry of Migratory Species, and Wetlands International.
- Strengthening avian influenza surveillance training for member countries of the South African Development Community, including Angola, the Democratic Republic of the Congo, Tanzania, Malawi, Zambia, Zimbabwe, South Africa, Botswana, Madagascar, Mozambique, Lesotho, Mauritius, Namibia, and Swaziland.
- Building surveillance and laboratory capacity and emergency operations centers in Ethiopia, resulting in rapid response to suspected outbreaks.
- Supporting rapid response team training for human and animal health experts in Malawi and strengthening rapid response teams in Uganda in nine districts bordering Sudan, which experienced poultry outbreaks.
- Providing technical assistance in Nigeria, Sudan, Cote d'Ivoire, Burkina Faso, and other countries as needed for HPAI avian influenza response containment efforts.
- Sent over 32,000 sets of personal protective equipment (PPE) for outbreak response and surveillance efforts in addition to sending decontamination kits and outbreak investigation kits.
 - USAID also provided training of 36 trainers in the safe and effective use of these commodities in Burkina Faso, Cote d'Ivoire, and Niger, with additional trainings planned in 2007 for Nigeria, Mali, Ghana, Ethiopia, Uganda, and Cameroon.

Essential to preparedness, planning, and surveillance are improved communications and awareness about avian influenza, its risks, and healthy behaviors. Communications activities are also important in reversing the impact of misinformation and reducing public panic.

USAID is conducting communications and public outreach activities in Burkina Faso, Burundi, Central African Republic, Comoros, the Democratic Republic of the Congo, Djibouti, Ethiopia, Ghana, Kenya, Malawi, Mali, Mozambique, Rwanda, Senegal, South Africa, and Uganda. Activities include:

- In Ghana, launching a campaign to dispel rumors, provide basic avian influenza facts, and highlight safe poultry handling practices in order to reverse severe negative impact on the poultry industry resulting from public nervousness after outbreaks were reported in surrounding West African countries.
- Training 2,800 media personnel in Uganda to bolster capacity to report accurately about avian influenza.
- Reporting on avian influenza through Voice of America in Burundi, Central African Republic, Sudan, Djibouti, and Comoros:
 - Languages included Arabic, French, Swahili, and Kirundi.
- Conducting communications assessments in Burkina Faso, the Democratic Republic of the Congo, Niger, Cote d'Ivoire, Sudan, Somalia, and Nigeria to increase capacity for effective outreach.
- Developing a regional strategy and coordination with partners for communications, research, and outreach approaches in West Africa.



Communications materials were developed to help inform the public in Ghana about avian influenza risks, to promote preparedness and healthy behaviors, and to dispel rumors. Following fears about avian influenza in surrounding countries, poultry consumption in Ghana dropped sharply, significantly impacting the poultry industry.

In addition to supporting the activities outlined here, USAID has also positioned a regional avian influenza advisor in Southern Africa and plans to place additional advisors in West and East Africa to ensure effective interventions and coordination of efforts.