

**DRAFT FOR DISCUSSION
24-25 July 2006, meeting at PAHO**

**Inter-Agency Communication Framework for
Avian and Human Influenza in the Americas**

I. SUMMARY

The rapid spread of a highly pathogenic avian influenza virus (H5N1) in birds and the potential for high fatality in humans raises concerns about a severe human influenza pandemic (PI). Although cases of avian influenza (AI) caused by the H5N1 virus have not yet been detected in the Americas, it is considered only a matter of time before the virus reaches this region. There is still a window of opportunity in the region to design and implement communication interventions to help mitigate the impact of AI, reduce the impact of human cases of AI and prepare for and mitigate the impact of PI.

To prevent an eventual pandemic as well as to reduce negative health and socio-economic impacts of AI, it is vital to control the disease in birds and to prevent human infections. As decided at the global meeting on avian and human influenza in Geneva, organized by FAO, OIE, World Bank and WHO in the beginning of November, 2005, the key components for a global plan of action are: control at source in birds, surveillance, rapid containment, pandemic preparedness, integrated country plans and communication.

Given the seriousness of the global threat and working in the framework of the Consolidated Action Plan for Contributions of the UN System, avian influenza and pandemic preparedness have become a permanent fixture on the UN Regional Directors' Latin America and Caribbean (LAC) Team agenda. Under the overall coordination of PAHO/WHO and the Inter-American Institute for Cooperation on Agriculture, with FAO, the UN Regional Directors are overseeing, supporting and mobilizing the country-level preparedness and response to avian and human influenza. Other international, regional and inter-American agencies are active and working at different levels in the face of this threat. In contrast to other regions, ours has an opportunity -- before the arrival of the H5N1 virus -- to jointly plan and closely coordinate strategic communication, which must play a central role in this process.

Recent public opinion research has revealed very low awareness of the risks and threats of AHI in LAC.¹ The research indicates that there is a) widespread skepticism about the likelihood of the H5N1 virus mutating into a novel human influenza virus; b) a perception that this is not a problem requiring priority attention and c) poor understanding of pandemics in general. Communication, education and advocacy efforts are therefore urgently needed to assist governments in preparing for a potential crisis, counteract misconceptions regarding AHI risks, inform and involve the public and provide response systems and networks with guidance and appropriate communication materials and tools.

II. COMMUNICATION FRAMEWORK OBJECTIVE

This framework reflects consensus between UN and other regional agencies – developed through a series of regional and sub-regional inter-agency consultations involving communication officers

¹ IPSOS International Centre for Syndicated Studies; International Reactions to Avian Flu – Public Awareness, Public Concern and Consumer Behavior; June 2006

and technical experts in human and animal health and sanitation -- regarding the appropriate communication strategies and tools for AHI. The overarching objective for communication is to enable people, governments, businesses, media and other key stakeholders to make choices that will improve personal and socio-economic outcomes in the face of risks from avian influenza and/or a human pandemic. Working under guidance of the UN System Consolidated Action Plan and taking into account regional pledges and agreements, the LAC Communication Task Force for Avian and Human Influenza (made up, initially, of Communication/Information Officers from UN and inter-American agencies working in the region) will:

- Work with the countries in the region to bolster capacity to confront AI/PI;
- Build synergy between regional agencies and relevant interest groups for a coordinated communication response;
- Provide guidance and tools for dissemination of public information, social mobilization, behavior change, external relations and advocacy activities;
- Mobilize and enhance regional communication capacity, political will, networks and partnerships to support countries, communities and families;
- Maintain public confidence in animal and public health officials, and add value to the guidance they provide, especially to avoid panic and encourage appropriate responses;
- Maintain and enhance public confidence in the UN system's support to national efforts.

III. THE REGIONAL CONTEXT

Avian Influenza

- 70 – 80 per cent of poor and rural families – 200 million out of a regional total of 600 million - raise 5 billion backyard birds.²
- Backyard poultry farming is an important source of income and savings for many poor and rural families².
- Outbreaks of avian flu among domestic birds mean that families not only lose an important source of income but also an important source of protein. Rural and poor children and families in the region depend on poultry for 80 per cent of their protein intake. (The region as a whole depends on poultry consumption for 40 per cent of protein consumption.)³

IV. THE IMPORTANCE OF COMMUNICATION

While the behavior and evolution of the virus is uncertain and different planning models predict greater or lesser impacts, communication action must be proactive, including preparedness for best- and worst-case scenarios. The communication challenge is to inform, educate, mobilize and reassure societies faced with a serious threat, but also with uncertainty as to its nature and evolution. Communication plays a key role in managing an eventual crisis and mitigating its impact.

Accurate, timely, simple and consistent communication is vital for the prevention, containment and response to AI and PI. The strategic communication framework encompasses **six core strategies**:

- 1) *Outbreak communication & risk communication* to rapidly share information and build trust
- 2) *Advocacy* to raise resources and political/social leadership commitment, targeting decision and policy makers
- 3) *Proactive media relations* to promote responsible, accurate and useful information flow through international, regional and local media
- 4) *Social mobilization* to ensure wider participation and ownership through building coalitions/partnerships that facilitate community action/participation
- 5) *Behavior change communication* to bring about changes in knowledge, attitudes and practices by consulting and empowering communities and specific groups through the use

² FAO/PAHO, April 2006

³ PAHO, 2005-2006

of research, monitoring and evaluation, training, interpersonal communication, social advertising and "edutainment" programs.

6) *Media training for journalists and government officials.*

The mix of strategies to be used -- regional versus country level action, individual agency initiatives versus joint action, and the timing and sequence of communication initiatives -- will depend on the evolution of the threat and the requirements of our government and civil society partners.

V. COMMUNICATION ROLES

As per the UN Consolidated action plan, WHO/PAHO and FAO are the lead global technical agencies on human and animal health and will advise regional bodies, governments and other relevant agencies on the development of effective public awareness and behavior change activities and campaigns. Regionally, the UN Regional Director's Team agreed that PAHO/WHO and FAO/IICA/OIE will play the lead technical role. Other agencies are playing a crucial role as well. A brief description of each agency's role in AHI prevention, preparedness, containment and response is provided in [ANNEX I](#).

In broad terms however, each agency will provide communication support as per its mandate and capacity, and as described in the UN Consolidated Action Plan. Given the broad scope of our

BOX 1: Core UN Agency Roles As Outlined in the UN Consolidated Action Plan

- **FAO, in collaboration with other relevant agencies** will develop and apply guidelines on approaches to communication and information, on compensation.
- **FAO, WHO/PAHO and UNICEF** will provide materials that convey core messages on AHI prevention, as well as pandemic containment
- **WHO/PAHO, in collaboration with UNICEF**, will work with each country affected by outbreaks in poultry to develop a strategy for informing the general public of the associated risks to human health, how to avoid them; and ensure that this strategy is based on best practices for bringing about behavior change, adapted to the national social and cultural context, reaches populations at greatest risk (including children), and is tested for effectiveness and modified as needed.
- **UNICEF** will support governments and partners to develop behavior change strategies and prototype communication materials designed for the household level, with a specific focus on back-yard poultry farmers, community influencers and children. This support will (a) build resilience among communities by supporting national communication strategies that provide clear and empowering information to the general public and key groups of people, with a focus on communities and households; (b) advocate among key national decision makers for the appropriate actions to stem the spread and impact of a pandemic; (c) strengthen on-going hygiene promotion programs
- **UNHCR** will ensure that refugees and other populations of concern to UNHCR are properly informed and encouraged to adopt healthy AHI-related behaviors by translating public awareness messages into appropriate languages and format to inform and encourage refugees to reduce risks.
- The **WFP** will integrate AHI awareness components into existing or new food-assisted programs by introducing awareness materials into school-feeding programs, link with UNICEF, FAO and the government to disseminate awareness materials during monitoring visits and support partner and government community training programs through food for training if appropriate

collaboration in the Americas, it is essential that other agencies not specified above, including the UNDP, OCHA, the World Bank, the Inter-American Development Bank, the US Centers for Disease Control and Prevention, USAID, CIDA, among others, form part of the inter-agency communication task force.

Every effort will be made to avoid duplication of communication efforts and ensure that messages for key audiences are consistent and built upon the technical guidance of the lead agencies for animal and human health as well as disasters. Wherever possible, agencies will coordinate communication initiatives, share expertise and make materials available to all.

The inter-agency framework will directly contribute to the three UN objectives and six factors for success in the shared UN vision of a coordinated response as per the Consolidated Action Plan for Contributions of the UN System. ([See ANNEX II](#))

VI. AREAS OF COLLABORATION

The five core communication strategies - outbreak and risk communication, advocacy, proactive media relations, social mobilization and behavior change communication – form the basis of the inter-agency framework. Each agency will carry out its communication activities within this broad framework, primarily at the country level as part of the UNCT and in support of national action plans. The Inter-agency Communication Task Force will collaborate on an ongoing basis and undertake joint communication actions as appropriate, including the production of materials and tools.

Initially, six over-arching areas of inter-agency collaboration have been identified, proposed as follows:

1. Knowledge Management & Information Sharing

- Develop and coordinate a common web-based regional resource center
- Network regionally to share best practices and lessons learned
- Build a common calendar of events and activities
- Create a network of communicators and journalists

2. Work with the Private Sector

- Engage the private sector – especially poultry producers - in preparedness and prevention activities
- Collaborate with the tourism, transport, telecommunication & other sectors
- Engage with market research and PR agencies

3. Work with the Media

- Build outbreak and risk communication capacity
- Conduct joint briefings and trainings for timely, accurate & balanced reporting
- Strengthen media partnerships
- Monitor media
- Possible joint media campaign

4. Strengthen the Communication Components of National Plans

- Address the gaps in country strategic communication plans
- Reach key audiences in a diverse, multi-cultural region
- Support communication research and monitoring and evaluation
- Provide strategic communication support to countries

5. Work with Existing Partners and Build New Alliances

- Map and engage existing networks
- Link with others and build new partnerships

6. Develop an Inter-Agency Communication Toolkit

- Create guidelines and multi-media materials for different audiences
- Develop country-adaptable tools and products

A proposed division of labor, timeline for implementation and estimated funding requirements are further detailed in [ANNEX III](#).

VII. DIFFERENT COMMUNICATION PERIODS (CPs)

Different communication strategies will be needed for different periods. The six over-arching areas of collaboration will follow the evolution of the avian influenza and pandemic threat.

The premises, behavioral outcomes, enabling factors, monitoring indicators and methods for the time leading up to human-to-human transmission are based on the widely agreed-upon outcomes of a WHO/FAO/UNICEF Adhoc Meeting on Behavioral Interventions for Avian Influenza Risk Reduction in Geneva (14-16 March 2006). [ANNEX IV](#) describes in detail the key behavioral outcomes, enabling factors, monitoring indicators and methods needed during this period and which must be encouraged/promoted through a participatory process involving communities and stakeholders. WHO, FAO and UNICEF are continuing further work to develop consensus on behavioral outcomes for pandemic influenza.

VII. REGIONAL COMMUNICATION FUNDING

It is likely that existing agency communication budgets will need to be adjusted and gaps identified in order to implement actions under this common framework. Based on a mapping of existing resources, the Task Force will advocate with donors for further funding commitments, as may be necessary, in support of joint initiatives outlined in this document.

VIII. TASK FORCE MEMBERSHIP

The communication focal points of the following agencies make up the Task Force initially: CDC, CIDA, ECLAC, FAO, IDB, IICA, OCHA, OIE, OIRSA, PAHO, RUTA, UNDP, UNESCO, UNFPA, UNHCR, UNIC, UNICEF, UNIFEM, USAID, WFP and WORLD BANK. The intention is to be inclusive and add value to the common effort; other agencies and partners will be invited to join as appropriate.

VIV. A COORDINATION MECHANISM

Coordination of the Task Force will be on a rotating basis, with one agency assuming the coordination role over a six-month period.

The coordinating agency will maintain an email list of all task force participants and coordinate information flow among participants. In addition, the coordinator will organize video or teleconferences on a monthly basis and convene a bi-annual face-to-face meeting. The coordinating agency will coordinate, monitor and report on joint Task Force activities.

UNICEF offers play this role through end-2006, and host the next face-to-face meeting in Panama City before the end of the year (unless an AI outbreak or a pandemic occurs requiring an emergency meeting).

ANNEX 1: ROLES & RESPONSIBILITIES OF AGENCIES (to be completed by agencies)

Agency	Technical and Communication Focal Points	Wider Role & Mandate	Communication Role
FAO/OIE		<ul style="list-style-type: none"> •The authorities on all animal health issues associated with avian influenza •Mandate to work with national and regional entities to strengthen capacity for improving veterinary services, livestock raising practices and risk analysis & mitigation •Central UN System contributors to coordinated action for animal health •Provide technical and surveillance support, •Assist countries in developing appropriate compensation schemes 	<ul style="list-style-type: none"> •Primary responsibility for communication on the avian panzootic; its impact on poultry and other food industries; steps to be taken by farmers and veterinarians, such as culling and vaccination; strengthened veterinary services and, in collaboration with the WHO, on food safety. •Development and application of guidelines on approaches to communication and information on compensation •In collaboration with WHO and UNICEF, provide technical advice and materials on actions that that different groups/communities/people need to take to prevent the spread of avian influenza
PAHO/WHO	<p>Bryna Brennan; Special Advisor, Social and Media Communication</p> <p>Otavio P. de Oliva, Regional Advisor on Viral Disease Prevention and Control Communicable Diseases Unit</p>	<ul style="list-style-type: none"> • The authority on all human health issues associated with avian influenza and human pandemic influenza, including human health risk assessments, surveillance, changes in pandemic alert levels, travel as related to international health regulations, containment activities and rapid assessment of new developments. • Ensure that all countries have formulated and tested pandemic response plans • Lead agency in rapid containment plan effort • Assist countries and international community to better develop, manufacture and deliver effective vaccines, anti-virals and influenza diagnostics 	<ul style="list-style-type: none"> • Lead agency for outbreak communication on avian/human health (WHO guidelines) • Increase countries' capacity in risk communication • In collaboration with FAO and UNICEF, develop behavioral outcomes and measurement indicators to guide communication for behavior change for all pandemic phases • In collaboration with UN partners, build communication capacity at country level to reduce human exposure to H5N1 • Increase government capacity by ensuring countries have communication strategies within their national plans
UNICEF	<p>Robert Cohen; Regional Communication Advisor</p> <p>Dr. Paulo Froes, Regional</p>	<ul style="list-style-type: none"> • Ensure the needs of children are adequately addressed and that a protective environment for children is sustained at all stages of preparedness for containment and pandemic response • Ensure that adequate provision is made for the care of sick children; for analyzing & 	<ul style="list-style-type: none"> • Support governments and partners to develop behavior change strategies and prototype communication materials for communication at a household level, with a specific focus on back-yard poultry farmers, community influencers and children. • Build resilience among communities by supporting

	Immunization Officer	mitigating the nutritional consequences of a potential pandemic and for strengthening hygiene and sanitation strategies at the local level	<p>national communication strategies that provide clear and empowering information to the general public and key groups of people, with a focus on communities and households</p> <ul style="list-style-type: none"> • Advocate among key national decision makers for the appropriate actions to stem the spread and impact of a pandemic • In collaboration with Governments and with FAO and WHO as technical lead agencies, develop communication strategies for advocacy and behavioral change to prevent bird-to-bird, bird-to-human and human-to-human transmission • Establish a virtual resource center for easy access to communication materials and guidelines • In collaboration with partners, conduct media trainings and journalist workshops for timely, accurate and balanced reporting
UNDP		<ul style="list-style-type: none"> • In conjunction with OCHA, establish a platform from which the UN System works to support national pandemic preparedness, pandemic containment and pandemic mitigation. • Assist governments to bring together ministries and other stakeholders to formulate national inter-ministerial preparedness plans and multi-sectoral programs • Undertake analysis and provides technical assistance on livelihood, governance, micro-economic & macro-economic consequences of avian and human influenza 	<ul style="list-style-type: none"> • Reinforce and where appropriate coordinate the unified UNCT communication structures on the national level, including supplying needed guidance and information to the RCs
WFP	Alejandro Lopez-Chicheri, Regional Information Officer	<ul style="list-style-type: none"> • Assess and analyze the impact of avian influenza on vulnerable populations, particularly focusing on the impact of the epizootic on livelihood and food security • Provide program support (upon request) to vulnerable populations whose food security is compromised by avian influenza and containment efforts 	<p>Communicate on the impact on livelihood, potential nutritional impact and adequacy of food aid intervention</p> <p>Integrate avian and human influenza awareness components into existing or new food-assisted programs where appropriate</p>
OCHA		<ul style="list-style-type: none"> • In conjunction with UNDP, establish a 	Manage information about pandemic preparedness

		<p>platform from which the UN System works to support national pandemic preparedness, pandemic containment and pandemic mitigation.</p> <ul style="list-style-type: none"> • Establish dedicated capacity at OCHA regional offices to support UNCTs and partner NGOs • Ensure that plans and strategies are built upon existing mechanisms for disaster and public health emergencies • Assist in development of standard operating procedures and the provision of surge capacity 	and crisis response.
UNHCR		<ul style="list-style-type: none"> • In collaboration with FAO, provide animal health & bio-security advice to refugee populations • Ensure that refugees have equivalent compensation for culling • Strengthen health services for refugees to include hygiene education and surveillance & detection 	Ensure key messages are communicated to refugees
UNSIC	Erwin Northoff, Communication Officer	<ul style="list-style-type: none"> • In collaboration with UNDG, improve regional coordination through harmonizing and aligning 	Communicate on global preparedness efforts
IICA	Sofia Castresana Montero, Public Information and Institutional Image		
OIRSA			
UNESCO			
UNFPA			
UNIFEM			
ECLAC			
RUTA	Patrizia Cocca		
UNIC	Paul Hoeffel, Regional Director		
IDB			
World Bank	Mario Bravo,	In collaboration with UNSIC and regional	Communicate on progress and funding requirements

	Senior Communication Officer Mark Cackler, Manager, Agriculture and Rural Development	development banks and economic commissions to help ensure sustainable livelihoods in settings where there is a risk of avian influenza, monitor progress within countries, obtain detailed breakdowns of donor pledges, and information on resources needed – and gaps – at country, regional and global levels	
CIDA			
CDC	Dr. Galen Cole		
USAID			

ANNEX II: SUMMARY OF UN CONSOLIDATED ACTION PLAN

Shared vision of a coordinated global response:

- a) Control highly pathogenic avian influenza in poultry, and reduce the risks that this disease poses for members of the human population that are exposed to it;
- b) Watch out for sustained human to human transmission of highly pathogenic influenza through vastly improved surveillance, be ready to contain it, and, should containment not be successful,
- c) Mitigate the impact of a pandemic on human health, society, economic systems and governance.

Six factors for success:

1. Consistent high level political engagement and direction,
2. Procedures and systems for rapidly scaling up implementation of priority actions,
3. Strong risk analysis, information dissemination and communication systems to encourage compliance with reporting and social mobilization,
4. Mechanisms to sustain vulnerable livelihoods and relieve distress,
5. Strategic alliances across all levels of government, that engage private and voluntary sectors, and
6. Management systems that engage all stakeholders, encourage synergy, analyze progress review results and shift program emphasis when necessary.

<u>Seven Objectives</u>	Emphases pursued by National Authorities with the support of the UN System and its partners	Lead(s) and UN agencies' involvement
1. Animal Health and Bio-security	Ensuring that animal health is safeguarded, bio-security is brought up to standard, and that there is capacity, when needed, for scaling up veterinary services to detect and stamp out new avian infections through prompt movement restrictions and culling, and to sustain vaccination of poultry and other interventions when they are indicated. Clarifying how emergence of pandemic agents, food and agricultural practices, land use and ecosystem management related.	FAO Collaboration with UNHCR for refugee camps
2. Sustaining Livelihoods	Ensuring that the economic and poverty impact of avian influenza as well as control measures are monitored and rectified, limiting any adverse repercussion on the Millennium Development Goals, seeking fair and equitable compensation for those whose livelihoods are endangered by avian influenza and control measures	UNDP and FAO Collaboration with WFP(food), UNICEF (child focus), WHO (health system focus) and UNHCR (refugee)
3. Human Health	Strengthen public health infrastructure, including surveillance systems, to (i) reduce human exposure to the H5N1 virus, (ii) strengthen early warning systems, including early detection and rapid response to human cases of avian influenza; (iii) intensify rapid containment	WHO Collaboration with UNICEF (child focus)

	operations and responses for a newly emerging human influenza virus; (iv) build capacity to cope with a pandemic, including surge capacity for a pandemic, and (v) coordinate global science and research, particularly as this pertains to the availability of a pandemic vaccine and antiviral drugs. Strengthen community based treatment of acute respiratory infections, including propositioning of medical supplies in peripheral areas to enhance capacity to respond; enhance nutrition security and access to micronutrients to minimise the impact of infection on susceptible populations	and UNHCR (refugees)
4. Coordination of National, regional and International Stakeholders	Ensuring that national government ministries work together in a focused way, bringing in civil society and private sector groups, in pursuit of sound strategies for avian influenza control and pandemic preparedness	UNDP Collaboration with WFP (food security), WHO (MoHs and partners), FAO (MoA), UNDG and UNSIC
5. Public Information and communication to support behaviour change	Strategic communication to provide clear and unambiguous risk and outbreak information to the general public and key groups of people with the highest potential for stemming the spread and impact of the disease. This will include communicating with the public, households and communities to involve and mobilize them to adopt appropriate behaviours to reduce risks and mitigate the impact of any outbreaks or pandemic	FAO and WHO for outbreak communication, UNICEF in collaboration with FAO, WHO, WFP and UNHCR (refugees) for behavioral change communication
6. Continuity under Pandemic Conditions	Ensuring the continuity of essential social, economic and governance services, and effective implementation of humanitarian relief, under pandemic conditions	OCHA and UNDP Collaboration with all UN agencies
7. Common Services Support	Ensuring that - in the event that national capacity is overwhelmed by pandemic conditions – agreed emergency operating procedures are invoked and benefit from information technology and logistics capacity set up and made operational beforehand	All UN agencies working within the inter-agency process

ANNEX III: INTER-AGENCY AREAS OF COLLABORATION

To be completed at Washington meeting

Work Plan Area of Collaboration	Specific Activity	Implementing Agencies	Timeline	Comment	Funding Estimates
<i>1. Knowledge Management & Information Sharing</i>	Develop & coordinate a common web-based regional resource center	<i>UNICEF/PAHO</i>			
	Regional networking to share best practices & lessons learned	<i>World Bank/GDLN</i>			
	Build and maintain a common calendar of events and activities				
<i>2. Work with the Private Sector</i>	Engage the private sector – especially poultry producers - in preparedness & prevention activities	<i>World Bank/IDB</i>			
	Collaborate with the tourism, transport, telecommunication & other sectors				
	Engage with market research and PR agencies	<i>PAHO</i>			
<i>3. Work With the Media</i>	Build outbreak & risk communication capacity	<i>PAHO</i>			
	Conduct joint briefings & trainings for timely, accurate & balanced reporting	<i>PAHO/UNICEF/GDLN</i>			
	Strengthen media partnerships	<i>all</i>			
	Monitor media				
	A joint media campaign				
<i>4. Strengthen the Communication Components of</i>					
	Address the gaps in country strategic communication plans	<i>PAHO, others</i>			

<i>National Plans</i>	Reach key audiences in a multi-cultural region	<i>all</i>			
	Conduct communication research and monitoring & evaluation				
	Improve strategic communication support to countries				
<i>5. Work with Existing Partners and Building New Alliances</i>	Map & engage existing networks				
	Link with others & building new partnerships				
<i>6. Build an Inter-Agency Communication Toolkit</i>	Create multi-media tools and guidelines for different audiences	<i>UNICEF/PAHO/FAO/IICA</i>			
	Develop country-adaptable tools & products				

ANNEX IV: KEY BEHAVIORAL OUTCOMES FOR AVIAN INFLUENZA RISK REDUCTION

WHO/FAO/UNICEF Adhoc Meeting on Behavioral Interventions for Avian Influenza Risk Reduction, 14-16 March 2006, Geneva

Background

The unprecedented spread of a highly pathogenic avian influenza virus (H5N1) in birds and other animals, including humans raises the spectre of a severe human influenza pandemic. There is a global consensus that to reduce the risk of the H5N1 virus becoming adapted to humans and thus causing a pandemic, it is vital to control the outbreak in animals and prevent human infections.

Various messages addressing specific behaviors have already been developed and disseminated in different settings. Building on the work to date at country and regional level, this meeting aimed to define the priority behaviors, with indicators to monitor the effectiveness of communication strategies that contribute to reducing the risk of H5N1 transmission.

Method

The meeting recommended a focused approach to communication, emphasizing the four highest priority behaviors (see figures in panel), as the highest priority key behaviors.

These were developed from seven behaviors that had been selected from the range of Behaviors previously recommended by FAO and WHO. Selection was based on discussion around the impact and behavioral feasibility. For each of these seven behaviors the outcomes, enabling factors, indicators (including method of data collection) were proposed to guide the development of behavioral strategies at country level.

Three important premises are:

- At present the extended spread of the H5N1 virus among animals is of great concern and therefore human behavior reduce the further dissemination of the virus needs to be addressed as an entry point for reducing the risk of human infection
- Information about the spread of the virus in birds and the specific risk factors that have led to human infection is limited - therefore there will be a need to adjust the behavioral interventions as more evidence becomes available; and
- Behavior change requires addressing important socio-cultural and economic factors, such as compensation for reporting sick/dead birds at the community level.

Priority behaviors:

- Report unusual sickness/death among poultry, wild birds and other animals immediately to the authorities
- Seek treatment immediately if you have fever after contact with sick birds
- Wash hands frequently with soap and water
- Clean clothes, footwear, vehicles and cages with soap or disinfectant
- Separate your poultry species, and from wild birds, new birds and living areas
- Handle, prepare and consume poultry safely
- Burn and bury dead birds safely

Key behavioural interventions for reducing animal to animal and animal to human transmission (H5N1)

1 REPORT



Report unusual sickness/death among poultry, wild birds and other animals immediately to the authorities

Report and seek treatment immediately if you have fever after contact with sick birds

Rationale

- Rapid response in animal and human cases ensures transmission is minimized by containing at source
- Prevents further transmission

Enabling factors

- Public trust in authorities is high
- Public aware of risks and recognize symptoms
- Rapid and appropriate response guaranteed
- Surveillance systems in place and monitored effectively
- Compensation ensured and system in place
- Diagnosis and treatment for human cases available and accessible

2 SEPARATE



Separate poultry: (i) new stock kept apart for 2 weeks; (ii) from wild birds; (iii) from each other by species; (iv) from living areas; (v) from children

Burn and/or bury dead birds safely

- Prevents cross-contamination and further transmission

- Public trust in efficacy of separation
- Accessibility and affordability of materials
- Feasibility of separation e.g. seasonality, space, feeding
- Community-based problem-solving may find novel solutions
- Regulation and enforcement of local authorities e.g. markets, commercial sector

3 WASH



Wash hands with running water and soap (or ash if soap not available) often, especially after touching birds and before and after food preparation

Clean clothes, footwear, vehicles and cages with soap or disinfectant

- Good hygiene measures prevents cross-contamination

- Availability and accessibility of clean, running water and soap in households, schools, work, and public places such as markets
- Availability and accessibility of cleaning materials such as disinfectant
- Regulation and enforcement of local authorities in public places such as markets and poultry producer

4 COOK



Handle, prepare and consume poultry safely

- Greatest risk of exposure is in handling and slaughter of live infected poultry
- No evidence that eating well-cooked meat and poultry products (flesh is no longer pink and eggs are not runny) can lead to infection with H5N1 virus

- Understanding of cultural practices related to food handling, preparation and consumption
- Availability of pre-packaged poultry and poultry products
- Regulation and enforcement of local authorities such as markets, butchers and commercial food vendors

Proposed outcomes and indicators

Behavioural Outcomes	Enabling Factors	Indicator	Method
Report unusual sickness/death among poultry, wild birds and other animals immediately to the local authorities	Compensation provided for loss of poultry resulting from reporting Local authorities respond promptly and appropriately* Community feedback mechanisms	% of reports within XX hours % who find dead bird who report them % who know who to report to, where, and when % who know how to access compensation	Local authority report cards Rapid survey
Seek treatment immediately if you have fever after contact with sick birds	Free and accessible health care for suspect cases Trained health care workers and traditional healers to identify/manage cases	% of suspect cases (with fever within 7 days after contact with sick birds) seeking treatment within 48h of fever onset % of suspect cases seeking treatment	Health facility data / investigation forms Rapid survey
Wash hands with running water and soap (or ash if soap not available) often, especially after touching birds and before and after food preparation	Access to water and soap	% who wash hands appropriately* after touching birds and before and after food preparation	Rapid survey (with demonstration to check accuracy and appropriateness)
Clean clothes, footwear, vehicles and cages with soap or disinfectant	Local authorities regulate and enforce safe* market practices	% washing cages on entry or exit of markets and farms % washing vehicles on entry or exit to markets through troughs % washing clothes/footwear, vehicles and cages % cleaning and washing area appropriately % markets with regular market closure for intensive cleaning	Self-report and observation samples
Separate poultry: (i) new stock kept apart for 2 weeks; (ii) from wild birds, (iii) from each other by species, (iii) from living areas, (iv) from children	Household/community resources to build coops	% farms reporting separation of new and unsold birds and their faeces by physical barriers from any contact with flocks for 14 days % farms with domestic birds separated by physical barriers from any contact with wild birds and their faeces % farms with poultry separated from living areas % farms where children do not have contact with poultry	Self-report and observation samples
Handle, prepare, and consume poultry safely*	Local authorities regulate and enforce healthy market settings Understanding of cultural practices	% of people who report/ are observed to/ and demonstrate that poultry is handled, prepared, and consumed safely*	Self-report and observation samples
Burn and/or bury dead birds safely	Food security assured (so no need to eat sick birds) Disposal facilities and fuel	% of people who report safely* disposing sick/dead birds % of visited sites where there is physical evidence of safe disposal practice	Self-report and observation samples

XX = parameter that needs to be determined locally

* 'safely' and 'appropriately' needs local definition

The objectives and indicators will provide the basis for communication strategies to be developed at community level, through a participatory process. The objectives and indicators are not prescriptive, but provide a starting point to help country activities. (Many countries have already developed communication strategies, and should only use these recommendations to the extent that they are helpful.)

The community consultation process needs to include discussions of actions for pandemic preparedness and how a community would cope with containment of a newly emergent pandemic virus.

