

## Q&A

### AVIAN AND PANDEMIC INFLUENZA

#### AVIAN AND PANDEMIC INFLUENZA BASICS

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## **PROPOSED QUESTIONS IN INDIAN CONTEXT**

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- III. WHAT STEPS GOI HAS TAKEN TO PREVENT A1 TRANSMISSION IN INDIA AGAIN?
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- V. WHAT HAVE BEEN THE GOI PREVENT STRATEGY?
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- VIII. WHAT ARE THE EXPECTATIONS OF GOI FROM MEDIA FRATERNITY?
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- X. WHAT WILL BE GOI'S STRATEGY TO HANDLE ISSUE PANDEMIC WITH POPULATION AT LARGE?

## **I. WHAT IS INFLUENZA?**

Influenza is viral respiratory infection in humans that is more serious than the common cold. It is commonly called 'the flu' and occurs seasonally every year, most often in winter. Seasonal influenza causes illness in approximately 5% of adults and 20% of children each year (Note: different surveys report different numbers, and it varies from year to year). Seasonal influenza results in approximately 250,000 to 500,000 deaths globally each year, mostly in the elderly and the very young.

## **II. WHAT IS AVIAN INFLUENZA?**

Avian influenza, also known as "bird flu", is the disease that wild birds and poultry get when they are infected by an avian influenza virus (different from human influenza viruses). Since 2003, the H5N1 avian influenza virus has been causing severe infection (called highly pathogenic avian influenza) in birds and has spread from Asia to Europe and the Middle East, and now to Africa, affecting over 30 countries. The H5N1 virus spreads very rapidly through poultry flocks and has a mortality rate among infected birds of 90 to 100 percent, often within 48 hours.

Fortunately, the H5N1 is still a bird virus. It is easily transmissible among birds but currently does not have the right molecules on its surface to enable it to become a human virus. However, it has caused a few human infections, as animal viruses can do without being fully adapted to humans. The H5N1 virus has only caused human infections in a tiny fraction of those exposed to it, and usually requires intense and close exposure to sick birds or their droppings. Children appear to be at an increased risk of H5N1 infections and fatality. There is no evidence to date of sustained human-to-human transmission, which is the chain reaction spread of ordinary human seasonal flu.

## **III. HOW IS BIRD FLU SPREAD?**

Ducks and other waterfowl act as a reservoir of avian influenza virus by carrying the virus in their intestinal tract and shedding it in their feces. Bird flu viruses are spread to susceptible birds through inhalation of influenza particles in nasal and respiratory secretions and from contact with the feces of infected birds.

According to WHO, the virus is killed by heat (56 deg C for 3 hours or 60 deg C for 30 minutes) and common disinfectants, such as formalin and iodine compounds. The virus can survive, at cool temperatures, in contaminated manure for at least three months. In water, the virus can survive for up to four days at 22 deg C and

more than 30 days at 0 deg C. For the highly pathogenic form, studies have shown that a single gram of contaminated manure can contain enough viruses to infect 1 million birds.

#### **IV. WHAT ARE THE SYMPTOMS OF BIRD FLU IN BIRDS?**

The symptoms in birds vary from a mild illness barely noticed (sometimes expressed as ruffled feathers or reduced egg production) to a “highly pathogenic avian influenza”, which is extremely contagious and rapidly fatal for the birds.

#### **V. WHAT ARE THE SYMPTOMS OF BIRD FLU IN HUMAN?**

In those outbreak, patients developed symptoms of fever, sore throat, cough and, in several of the fatal cases, severe respiratory distress secondary to viral pneumonia. Previously healthy adults and children, and some with chronic medical conditions, were affected.

#### **VI. WHAT IS THE INCUBATION PERIOD?**

What incubation period is usually 3 to 7 days, depending upon the isolate, the dose of inoculum, the species, and age of the bird.

#### **VII. WHAT IS AN INFLUENZA PANDEMIC?**

A pandemic is a widespread usually global outbreak of any disease among humans. Pandemic influenza, different from seasonal and avian influenza, is a rare but recurrent event that has occurred every 11-42 years in the past few hundred years. Pandemic influenza affects all populations regardless of national boundaries or socio-economic status. Over the past 100 years there have been three pandemics: 1918 (approximately one million deaths), the 1957 (approximately two million deaths), and 1968 (approximately one million deaths). Because pandemics bring on an abrupt surge in illness and death, they can cause severe disruption and economic losses.

#### **VIII. WHEN DOES AN INFLUENZA PANDEMIC OCCUR?**

A pandemic results when a new human influenza virus emerges and starts spreading as easily as the regular seasonal influenza. The 1918 influenza pandemic was originally an avian influenza virus that underwent a series of mutations that enabled it become a human virus. The H5N1 virus has undergone some of the same mutations as the 1918 virus. 1957 and 1968 influenza pandemics emerged from mixing of avian human influenza viruses rather than mutation.

Because H5N1 virus has caused some human infections, it has shown that it has the potential to become a human virus. If it evolves into a human virus (i.e. one that passes easily from person to person), it is likely to cause a human influenza pandemic. Birds will no longer be a concern; people will spread the virus. How the virus will evolve is uncertain: it could happen suddenly; it could take years, or it might never happen.

#### **IX. IS THERE A VACCINE FOR THE PANDEMIC?**

No, because the pandemic strain has not emerged, there is no such vaccine currently available. As a pandemic vaccine needs to be a close match to the actual pandemic virus, commercial production for the actual pandemic virus cannot begin prior to the emergence and characterization of the pandemic virus.

Several companies have developed but not yet licensed vaccines for H5N1 virus. These vaccines H5N1 would only give partial or no protection against the pandemic strain, as it will differ from the H5N1 that is currently causing the bird outbreaks and the few human cases.

With technology available today, it would likely take at least six months to produce substantial quantities. Even then, there would not be enough for more than a fraction of the world's population. Two doses, by injection, are likely to be needed, separated by a 2-4 week interval.

#### **X. IS THERE TREATMENT?**

A class anti-influenza drugs has been shown to be effective against H5N1: oseltamivir (marketed as Tamiflu), and zanamivir (marketed as Relenza). In the event of a pandemic that is caused by a version of H5N1 that has become well adapted to human, Tamiflu could potentially help slow its spread. Relenza unlike Tamiflu, must be inhaled and is more difficult to store and take.

Since: a) it is still not proven that anti-influenza drugs are effective as a preventative medicine and b) supplies are very limited; it is recommended that beyond treatment of human cases of H5N1, only frontline workers such as poultry cullers and health workers be given anti-influenza drugs as preventative medicine.

**XI. WHAT IS THE IMPACT OF AVIAN INFLUENZA TO DATE?**

The virus and culling to stem its spread has destroyed over 140 million domestic poultry in over 20 countries. The economic impact from the loss of poultry is substantial, estimated at over US \$ 10 billion globally. [End January-FAO data]

It is feared that the H5N1 virus will continue to spread in birds, affecting new countries. Limited veterinary services, economic constraints, and lack of understanding about the virus are contributing to its spread.

In addition to the toll on birds, WHO has confirmed 169 human cases and 91 deaths in seven countries (Vietnam, Cambodia, Thailand, China, Indonesia, Turkey, Iraq) as of 13 February 2006.

**XII. X. WHY ARE PEOPLE WORRIED ABOUT AVIAN INFLUENZA?**

The fact that H5N1 is still a bird virus does not allow complacency. People are very concerned that H5N1 could adapt to, and become easily transmitted among, humans. Once this adaptation occurs, it will no longer be a bird virus- it will become a human influenza virus, which could cause a pandemic.

The virus that caused the 1918 pandemic (the most catastrophic health event since the 14<sup>th</sup> century 'black death') may have been circulating in birds for several years before it became a human virus.

The greater concern is the possibility that the present situation could give rise to another influenza pandemic in humans. Avian and human influenza viruses can exchange genes when a person is simultaneously infected with viruses from both species. This process of gene swapping inside the human body can give rise to a completely new subtype of the influenza virus to which few, if any, humans would have natural immunity.

If the new virus contains sufficient human genes, transmission directly from one person to another (instead of from birds to humans only) can occur. When this happens, the conditions for the start of a new influenza pandemic will have been met. Most alarming would be a situation in which person-to-person transmission resulted in successive generations of severe disease with high mortality.

**XIII. WHY IS IT IMPORTANT TO PREVENT THE SPREAD OF INFECTION IN BIRD AND FROM BIRDS TO HUMANS?**

The more the virus spreads in birds, the more humans are exposed. The more humans exposed to the virus, the greater the chances the avian virus will become a human virus.

**XIV. WILL THERE BE A PANDEMIC, AND IF SO WHEN?**

XV. There is no doubt that there will be an influenza pandemic. What we don't know is when the next pandemic will occur and if the H5N1 virus that is currently circulating among birds will cause it. The three pandemics of the last century were caused by avian viruses that mutated into a human virus.

**XVI. WHY IS THE WORLD INVESTING SO MUCH IN PANDEMIC PREPARATION?**

Avian influenza and the threat of human influenza pandemic spotlight how diseases threaten the entire world if public health systems and other core infrastructures have been weakened by underinvestment and neglect because countries are too poor, too debt-burdened or simply unwilling to invest in basic services for people.

Everything UNICEF and other UN partners are currently doing as part of the UN System response strengthens public health capacity and infrastructure. Public education, community mobilization, cooperation across sectors of government and among UN agencies, partnerships with community-based organizations NGOs, the private sector etc are all features of the avian influenza response.

This situation causes the world to focus collectively on the basics of development: health, education, water and sanitation, agriculture and food production as well as the relationship between humans and their environment. It brings home to everyone in a very real way the fact that we live in a very inter-dependent world.

**XVII. WHAT IS THE POTENTIAL IMPACT OF AN INFLUENZA PANDEMIC?**

The impact of a pandemic is hard to predict, but there will be increased illness because humans will have no immunity to the new virus. Mortality rates are likely to be increased and there may be social and economic disruptions. Children will be directly impacted by infections as well as by the potentially

**catastrophic social and economic dislocations of a pandemic. Everybody needs to prepare for a possible pandemic.**

**The most immediate economic impacts of a pandemic might arise not from actual death or sickness but from the uncoordinated efforts people will take to avoid becoming infected. This at least was the experience during SARS, when people tried to avoid infection by minimizing face-to-face interactions, resulting in greatly reduced demand for services sectors such as tourism, mass transportation, retail sales, hotels and restaurants, as well as a shortage of essential services and products due to workplace absenteeism, disruption of production processes and shifts to more costly procedures. Additional economic disruption and costs may be caused by emergency public policy measures such as quarantines and restrictions on domestic and international travel and trade.**

#### **XVIII. WHY IS COMMUNICATION IMPORTANT TO STOP THE SPREAD OF AVIAN FLU AND PREVENT A PANDEMIC?**

- **Accurate, timely, simple and consistent communication is vital for the prevention, containment and response of avian and pandemic influenza. To best convey information and achieve the desired behaviours, two types of communication are needed:**
- **Outbreak communication- Interactive flow of information between leading technical agencies, key decision makers and opinion leaders (i.e. MOH, media) as the virus moves or changes.**
- **Social mobilization and behaviour change communication- Range of strategies that include communication and capacity building within communities that enable people to take the necessary actions to prevent, contain and respond to avian and pandemic influenza.**

**Strong communication strategies and tools can play a vital role in the two immediate priorities- preventing and preparing for pandemic flu. Giving people the right information will reduce the likelihood of pandemic flu, prevent unnecessary panic and mitigate the economic and social impacts of a pandemic.**

## **XIX. WITHIN THE UN, HOW DO WHO, FAO AND UNICEF TACKLE THE COMMUNICAITON CHALLENGE?**

**WHO and FAO are the leading UN technical agencies for outbreak communication and are producing essential technical messages. This technical guidance serves as the foundation on which to work with UNICEF as well as other UN agencies, NGOs civil Society, media organizations and government to ensure the messages are communicated to those who need to receive and act on them.**

- **Working together with government, the private sector, NGOs and all UN partners, countries are developing communication plans that include five core strategies.**
- **Outbreak communication to rapidly share information and build trust.**
- **Advocacy to raise resources and political/social leadership commitment targeting decision and policy makers.**
- **Proactive media relations to promote responsible accurate and useful information flow through international, regional and local media.**
- **Social mobilization to ensure wider participation and ownership though building coalitions / partnerships that facilitate community action/participation.**
- **Behaviour change communication to bring about changes in knowledge attitudes and practices among specific groups through the use of research, monitoring and evaluation., training, interpersonal communication, social advertising and “edutainment” programmes.**
- **UNICEF has strategic advantages in:**
- **Developing and refining communication strategic messages, and tools for social mobilization and behaviour change.**
- **Leveraging its uniquely large on the ground global network of communication staff and alliances.**
- **Working behind the scenes to support trusted spokespersons on these issues.**
- **Preparing essential and far-reaching communication networks such as religious associations, NGOs and the media to disseminate accurate and helpful messages.**
- **Undertaking community based research to develop effective and evidence-based communication strategies that will achieve desired behaviours.**
- **Monitoring and evaluating the impact of communication strategies on the desired behaviours.**

**xx. Who are we trying to reach with prevention information and how will we reach them?.**

- People in contact with poultry (families and children that own and care for poultry, butchers, cock fighters etc.) need to understand the risks to themselves and their families (as well as the global community) and take actions to minimize exposure (especially for children) to infected birds and their droppings.
- The general public needs a clear understanding of the potential risks associated with a pandemic (and its relation to avian influenza) and should adopt the basic hygiene practices and simple actions to prepare and protect their families in the event of a pandemic. The information needs to be framed to ensure that cases and their families are not stigmatized.
- Decision makers and trusted spokespersons need up to date, accurate and consistent information on avian influenza and pandemic influenza that will motivate them to address myths effectively, disseminate concise and correct information about risks that will earn public trust and encourage the appropriate behaviours in their communities of interest.
- Essential communication networks need to be made aware of the importance of their role in helping to prevent, contain and respond to pandemic influenza and explore how they can serve public health goals while also meeting their own needs. They need support to deliver key messages at the appropriate time.
- Businesses and community organizations, especially those providing essential service, need to understand that risks and possible scenarios of pandemic influenza and develop contingency plans that would enable them keep functioning during a pandemic.
- Health/frontline workers need clear clinical guidelines and training in identifying reporting and treating human cases of avian influenza, how to protect themselves and care for those who are sick in a pandemic, and what information they need to pass on the public.

**xxi. Some ideas on how to reach people with prevention messages**

- Official government communication channels
- Big media networks
- Local media networks
- Religious Affiliations and Community Groups (Organization of the Islamic Conference, Traditional Leaders, Religious Universities, Conference of Churches, Buddhist and Hindu equivalents etc.)
- Regional bodies (ASEAN etc)
- Cell phone networks
- Professional bodies such as unions, medical associations etc.

- Polio Eradication Initiative networks
- NGOs (Red Cross, World Vision)
- Opinion leaders & celebrities such as models, special ambassadors, sports figures etc.
- Traditional healers & village chiefs
- Schools

## **xxii. How can we reduce the impact of a pandemic?**

- By thinking ahead to prepare for various possible scenarios.
- Preparedness means having systems, procedures, and supplies in place to minimize the consequences of pandemic.
- Everyday has a role to play in planning for pandemic preparedness.

## **xxiii. What can people do to protect them selves and prevent a pandemic starting from H5N1?**

- Report sick or dead birds to the local authorities. To stop the virus spreading, it is critical that all sudden and unexplained deaths in poultry or wild birds are reported to the authorities so they safely deal with it.
- Keep birds away from children and living area; keep poultry away from wild birds and separate species. Close contact can put you and your family at risk. Separating species helps prevent transmission, especially from wild birds.
- Wash your hands often to kill and remove the virus – especially after handling birds, cooking or preparing poultry products, and before eating.
- Eat well cooked poultry products
- Seek immediate treatment from your local clinic if you have fever after being in contact with sick or dead poultry.

## **A JOURNALIST'S GUIDE TO AVIAN PANDEMIC FLU**

### **THE SITUATION**

**Avian influenza (“bird flu”)** is a serious disease affecting poultry and wild birds. Since 2003, there has been an increasing number of avian influenza outbreaks in many countries in Asia and Eastern Europe caused by a new influenza A (H5N1) virus. There is significantly greater risk of infection in birds than in humans but on rare occasions, the H5N1 virus has infected humans in close contact with infected birds or their droppings.

H5N1 is easily transmissible among birds but has only caused human infections in a tiny fraction of those exposed to it. There is no evidence to date of sustained human to human transmission the chain reaction spread of ordinary flu.

The world is very concerned that H5N1 could adapt to, and become easily transmitted among, humans. Once this adaptation occurs, it will no longer be a bird virus - it will become a human influenza virus, which could cause a pandemic.

### **PANDEMIC BASICS**

**Pandemic Influenza (different from avian influenza)** is a rare but recurrent event that has typically occurred every 10–50 years. It occurs when a new human influenza virus emerges and starts spreading as easily and normally as the regular seasonal influenza (regular flu).

The last pandemic in 1968 was equivalent to a bad seasonal flu season, killing approximately one million people. However, the 1918 pandemic was very severe, killing approximately 40 million people. It is impossible to predict the severity of the next pandemic, or the efficacy of treatments, as the virus does not yet exist.

There are simple but important steps such as keeping children away from birds, improving hygiene, reporting of sick or dead birds and cooking with care that everyone can take to reduce the likelihood of infection as well as prepare for, the eventuality of pandemic flu.

### **PANDEMIC PREVENTION, CONTAINMENT AND RESPONSE**

**Prevention-** Actions that are taken to reduce that chance of the H5N1 virus adapting to humans. Prevention involves control of the virus in birds populations, protecting poultry from infections, and preventing exposure of people (especially children) to infected

birds and their droppings. It includes actions that government, backyard poultry farmers and the general population must take.

**Containment** – Rapid deployment of anti-viral drugs in the area of possible transmission, limitation of people’s movements and actions people can take to minimize close contact with others and report symptoms early. If the virus starts to become adapted to humans and starts passing from person-to-person, actions to contain this spread may prevent the emergence of pandemic influenza (or at least delay its appearance.).

**Response** – Preparatory actions that people can take to respond to and mitigate the impact of pandemic influenza. Contingency planning needs to happen at every level from governments and large corporations (especially those providing essential infrastructural services) down to small businesses and households. A pandemic is likely to cause major disruptions due to the large number of people who will become ill over a short period of time and overwhelm health services. In addition, if the virus is severe, there may be many deaths.

## **A PANDEMIC VACCINE?**

Because the pandemic strain has not emerged, there is no such vaccine currently available. As a pandemic vaccine needs to be a close match to the actual pandemic virus, commercial production cannot begin prior to the emergence and characterization of the pandemic virus. Several companies have begun work on a potential vaccine for H5N1, but this vaccine would only be effective if it is the H5N1 strain that leads to a pandemic, and if the strain has not significantly changed from that used to develop the vaccine.

It is highly unlikely that there will be any large quantities of a pandemic vaccine available before the start of a pandemic as once the particular virus strain was identified it would likely take at least six months to produce any significant quantities.

## **ANTIVIRALS**

There is currently only one class of antiviral that has been shown to be effective against human cases of H5N1: oseltamivir, also known as Tamiflu, and zanamivir, known as Relenza. In the event of a pandemic that is caused by a version of H5N1 that has become well adapted to human, tamiflu could potentially help slow its spread. Relenza unlike tamiflu, must be inhaled and is more difficult to store and take.

Since supplies of antivirals are very limited, it is recommended that beyond treatment of human cases of H5N1, frontline workers such as cullers and health workers be given priority as a preventative medicine.

### **AN IMPORTANT ROLE FOR THE MEDIA**

Of course health, veterinary and government officials need sound information with which to plan their responses and make sensible decisions about size and allocation of resources, but it is just as important for the public to be informed.

As prospects of a global pandemic grow, the media can play a vital role in the two immediate priorities-preventing and preparing for pandemic flu. Giving people accurate, consistent and timely information that they can act on will reduce the likelihood of pandemic influenza, will help contain an outbreak and prevent unnecessary panic and mitigate the economic and social impacts of a pandemic.

### **RESPONSIBLE REPORTING IN PUBLIC HEALTH**

Panic usually arises from a poor understanding of a risk and inadequate information on how to cope with it. Panic measures also seldom influence good policy decisions and can have potentially disastrous effects, ranging from excessive and inappropriate use of scarce resources, to ineffectiveness if aimed at the wrong targets.

The key responsibility of journalists in this situation is to ensure that they are conveying accurate information, not only about the diseases itself, but also about the way in which it is spreading. This does not necessarily mean outright trust of a scientist. What it does mean however, is that in order to cover stories such as avian influenza effectively, journalists must be able to probe beneath the surface of what they are being told to judge the robustness of the information they are being given.

### **UNICEF Messaging Guidelines on Avian Influenza**

The objective of UN communications is to provide relevant information at various stages of the avian influenza and pandemic preparedness response that will : minimize the spread of avian influenza in birds, prevent its transmission to humans, avoid a pandemic, or limit its spread should a pandemic develop. Communication must be part of a broader strategy for prevention and containment.

UNICEF's role in UN actions to meet these objectives is to lead the programme communication effort in countries. This role for UNICEF recognizes UNICEF's established networks and extensive experience working with communities and leaders to influence knowledge, attitudes and practices that facilitate development.

FAO and WHO are the UN's leading technical agencies for animal and human health and as such have the lead roles in communicating technical information about the progression of the virus. However, because children account for nearly half of all reported human cases and the impact of avian influenza goes well beyond the immediate risk to their health, UNICEF has an obligation to advocate for the specific needs of children.

Below are message guidelines to facilitate communication on avian influenza and a possible human pandemic. The purpose of these guidelines is to help offices share information about the impact on children and the need to for affected families and children to have access to important messages, while respecting our role as a partner within the greater UN response. These guidelines are subject to constant review and may change as the situation evolves (i.e.: the need for global fundraising campaigns, increasing impact on children, etc.).

## **Guidelines**

All visual aids-photos, video footage and news features must show UNICEF working with other partners. Give prominence to national and community partnerships and to technical partners as appropriate. This includes any visible branding.

All press releases must be done in partnership with at least one other lead UN Agency-FAO, WHO and UN System Influenza Coordinator (UNSIC). At country level the UN Resident Coordinator is the UN System Coordinator.

Press materials (releases, video and web features) should explain UNICEF's role by emphasizing the messages that are distributed and the people for whom they are intended. UNICEF involvement should be characterized in context with its work with partners; government, NGOs, WHO and FAO, etc.

The website will provide actual tools being used by UNICEF to execute programme communication. (i.e. KAP survey tools, how to develop effective communication strategies, sample materials such as posters, leaflets, scripts, PSA's etc.). Accompanying photos, video and text will be designed to provide the context in which communication materials are used. For example, a story written or produced about how avian influenza being distributed in Nigeria would focus on the key messages, and how are used to engage the target audience rather than what UNICEF's role in that campaign might be.

The UNICEF website should link when appropriate to information on other UN Websites, rather than recreate documents under UNICEF Branding.

### **The roles of other UN Agencies:-**

- System-wide Coordinator (UNSIC) is responsible for communication on the overall UN response and the potential overall pandemic impact and social, economic, governance and public security concerns. UNSIC should ensure a focus on the twin-track response to the dual animal/human crisis, and alert the international community to problems with the flow of pledged funds or need for new resources. At country level the person leading the UN Country Team in the counterpart of the UN System-wide Coordinator.
  
- FAO (along with the OIE) holds primary responsibility for communication on the avian epidemic; its impact on poultry and other food industries; steps to be taken by farmers and veterinarians, such as culling and vaccination; and, in collaboration with WHO, on food safety. It will communicate the impact of the bird influenza on trade and food security, and the need for effective compensation.
  
- WHO is the authority on all human health issues associated with avian influenza and human pandemic influenza, including human health risk assessments, changes in pandemic alert levels, travel, rapid response and containment activities, surveillance and rapid assessment of new developments?

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