Progress and Impact of Efforts to Control Avian Influenza
and Prepare for the Next Pandemic

Peter C. Harrold, Director, Operations Services, World Bank

NEW DELHI INTERNATIONAL MINISTERIAL CONFERENCE ON
AVIAN AND PANDEMIC INFLUENZA
4 December 2007

Two years ago the international community came together to face the threat of avian influenza, amidst concern that this emerging zoonotic disease had the potential to cause an influenza pandemic as severe –potentially more severe – than that of 1918. Estimates by the World Bank Development Economics Research Department have shown that the economic costs of such a pandemic could be on the order of $1.5 trillion - 2 trillion globally. About three-quarters of these costs would fall on high-income countries, although, as a percentage of GDP, the decline would be greatest in developing countries, with potentially huge long term socio-economic impacts. In the face of such a high-impact, but uncertain, devastating prospect, all countries, rich and poor, acted upon a common threat.
The efforts mounted in the last two years by the international community as a whole have been impressive to say the least. As shown by the joint UN – World Bank Third Global Progress Report, the conclusions of which David Nabarro has just highlighted in his presentation, much has been achieved in this relatively short timeframe. Guided by the specialists of the FAO, WHO, OIE, and a wide range of technical and development partners, many developing countries have drawn up, and are in the process of implementing, integrated national plans. In addition, recognizing that a threat to one country is a threat to all, donors have pledged more than $2.3 billion to assist developing countries. Furthermore, the high level of donor commitment to preventing and controlling avian influenza, and preparing for a possible pandemic, is evident from the rapid commitment and disbursement of the pledged funds. As of end-June 2007, of total funds available, $1.7 billion or 72 percent had already been committed; of this over 1 billion or 43 percent had been disbursed.

However, as David Nabarro has just mentioned, many challenges lie ahead and there is no time for complacency. While we have learned and achieved a great deal, the threat that first emerged in 2003 is now better understood, but remains fundamentally undiminished. The task in front of us here in New Delhi is thus clear - to guide our efforts into the medium- and long-term. Two years ago we came together to respond to an unfolding emergency. And while our emphasis on prevention, rapid containment and control of avian influenza must remain at the core of the global response, we recognize that results cannot be sustained if responses only address these immediate needs. There is a need to strengthen the capacity of animal and human health systems to face the H5N1 virus and other potential human health emergencies. Indeed, the resources invested to control avian influenza and for pandemic preparedness will yield wide-ranging benefits in terms of our ability to tackle other zoonotic diseases and emergencies at the national, regional and global levels. (This has already been shown, for example,
in the recent response to African Swine Fever in Armenia and Georgia.) The strong commitment -- at the political, technical and financial levels -- we have seen to date therefore has to be sustained in order to ensure a lasting impact.

The need for a firm commitment by countries, donors, regional, and international technical and financial agencies, to medium- and long-term capacity building is evident from the continued spread and re-emergence of the disease. Some of the countries first affected by avian influenza are now preparing to respond to a third or fourth flu season. The challenges they face no longer relate to strategic planning or mobilizing a rapid response: those lessons – hard won – have largely been learned and are beginning to be widely shared. To highlight these experiences, country case studies have been incorporated in the Third Global Progress Report. In addition, we will hear from countries such as Nigeria, Thailand, Egypt, and Vietnam tomorrow. They and a growing number of countries are now contemplating new problems – concerned less about how to respond and more about how to sustain their response over the years to come.

For instance, Vietnam, one of the first countries to seek international support for its national AI plan, remains at the forefront of the response and its experience continues to guide international practice. Vietnam’s ability to respond to regular outbreaks in poultry has been refined to such a degree it approaches a science. And its approach has demonstrated results: no human cases were reported in an 18 month period; no cases in poultry were recorded from December 2005-December 2006. However, at the end of 2006 and again in May 2007, there was a resurgence of infection that is still ongoing. A country that has already experienced 100 human cases and 46 deaths; that has had to cull close to 15% of the national poultry flock and is estimated to have suffered losses approaching 1.5% of GDP, is suffering further AI outbreaks in poultry and, it appears, losses from the viral Marek disease.
Vietnam’s experience is a reminder – if one were needed – that combating AI will be neither quick nor easy. In identifying and acting upon the principles of a coordinated response, in making available the resources to head off the immediate threat of a human influenza pandemic, we must all have hoped that in controlling the risk in one country, we could quickly eliminate the threat that AI poses to all countries.

Instead, our challenge is to detail the next phase in the global response. Experience of the past two years shows that we can be confident that this task is possible. We can be confident that the investments we make in strengthening animal and human health systems -- investments in developing human, institutional and technical capacity – will increase our ability to address avian influenza and more broadly the infections from other zoonotic diseases that we will have to face in the future.

Our efforts to date show that the international community can come together to address a global health threat, and that, together, we can structure and support a response that is integrated across institutional, sectoral, and territorial boundaries. Our challenge now is to demonstrate that we can build on and sustain these successes, committing ourselves to the patient business of supporting long-term, systemic change. I and my colleagues at the World Bank look forward to working with you all over the coming days, and to charting the next stage of the response.

****