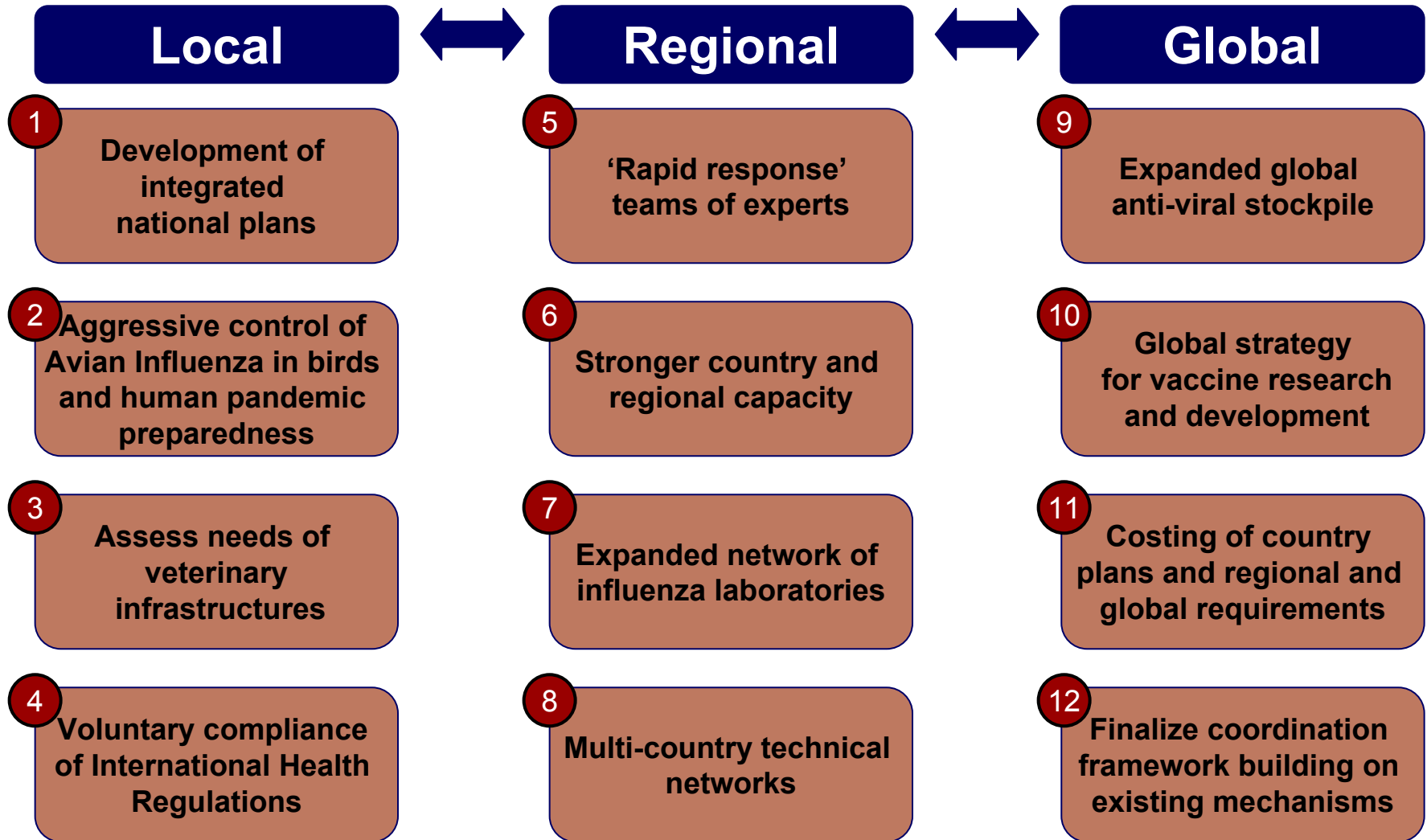


“Implementing the Almaty
Declaration:
Experiences and Future
Opportunities” –
Harbin, PR China

26 September 2007

Geneva, 7-9 Nov. 2005 (UN system)



Influenza

Regional Meeting (12-13 June 2006)

Principles:

Joint funding and planning of agencies & donors

Move towards performance-based mechanism
towards regional collaboration to fight influenza
threats

Sponsors: WHO, UNICEF, UNDP, FAO, USAID,
US-CDC, European Commission, World Bank,
ADB (contributions: \$ 7,000 - \$ 25,000)

Extra speakers: UNSIC & OiE

Central Asia Roundtable

Participating (=CAREC):

- Kazakhstan, Kyrgyz Republic, Tajikistan, Turkmenistan, Uzbekistan
- Russian Federation
- XUAR, PR China
- Afghanistan, Mongolia

Invited:

- International organizations
- Greater Mekong Sub-Region (e.g. Thailand)

Experts (human & animal health sector, coordination & communication)
& Senior officials

Institutional framework

- Intersectoral government co-ordination
(agriculture, health, emergencies/ KAZ) -> *endorsed 7 April*
- Interagency co-ordination (ADB, EC, UNSIC &
3 UN agencies [*FAO, UNICEF, WHO*], USAID, World Bank)
-> *weekly teleconference meetings (27 March, 3 & 10 April)*
- Conference Secretariat
linked with technical working group & administrative support
-> *established 29 March*

Country needs (next 2-3 yrs)

1. Coordination & communication
2. Surveillance & early warning (animal & human influenza)
3. Response capacity to handle local outbreaks
4. National health system strengthening, including surge capacity to address generalized epidemics (a.o: lab equipment, protective clothing, overtime payment for staff, etc...)

Central Asian & Caucasus: \$ 45 million
(including \$10 to \$ 15 million self-funded)

other Asian developing countries: \$ 711 (incl. \$240- \$380)

Regional needs (next 2-3 yrs)

1. Stockpiles of drugs & medical equipment -> economies of scale
2. Exchange of information (transparent & immediate reporting) through:
 - a) Regional training of animal and health workers
 - b) Regional networking (workshops, communication system)

Animal (FAO): \$ 10 to 20 million for CAREC-countries

Human (WHO): \$ 11 million for CAREC countries

Influenza

Almaty Declaration (13 June 2006)

18. Create 3 working groups who draft plans:

- (a) Disease surveillance & response
- (b) Laboratory capacity building
- (c) Public communication, governance

17. Coordination committee with first priority:

Establish mechanism for regular exchange of information, including early-warning system.

Influenza

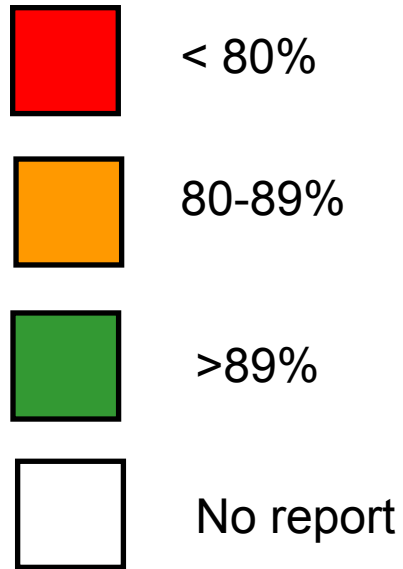
Committee of donors & technical agencies – (Tele)conference Meetings in Almaty

1. 27 March 2006 (*European Commission*)
2. 12 June 2006 (*ADB & Eur. Commission*)
3. 6 December 2006 (*USAID & US-CDC*)
4. 18 May 2007 (*ADB & US-CDC & WB*)

Burning questions:

- Joint planning for capacity building (human/ animal health)
- Common technical guidance on diagnostics

Immunization: MECACAR



1993



1999

Routine immunization coverage (OPV3 in children < 1 year old)

Immunization

MECACAR Meetings:

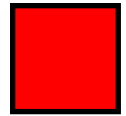
1. 29-30 January 1995 (*Ankara, Turkey*)
2. 27-28 September 1995 (*Tehran, Iran*)
3. 14-16 October 1996 (*Tashkent, Uzbekistan*)
4. 20-22 October 1997 (*Rome, Italy*)
5. 20-22 October 1998 (*Cairo, Egypt*)
6. 20-22 October 1999 (*Ankara, Turkey*)
7. 19-21 March 2001 (*Cairo, Egypt*)
8. 8-10 September 2003 (*Budapest, Hungary*)
9. 29-31 August 2006 (*Istanbul, Turkey*)
- **17 May 2007** (*Geneva, Switzerland*) /
MECACAR New Millenium

MECACAR: polio eradication & measles elimination

Immunization Days in Kyrgyz Republic, Iraq and Afghanistan (1995)



Incidence of poliomyelitis



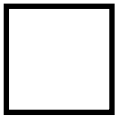
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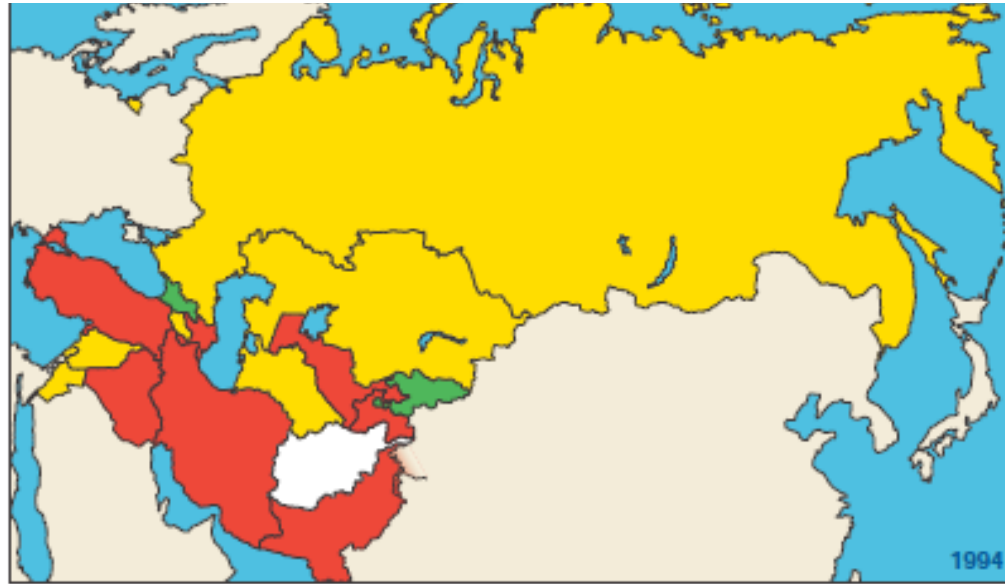
1 - 10



0 polio



No report

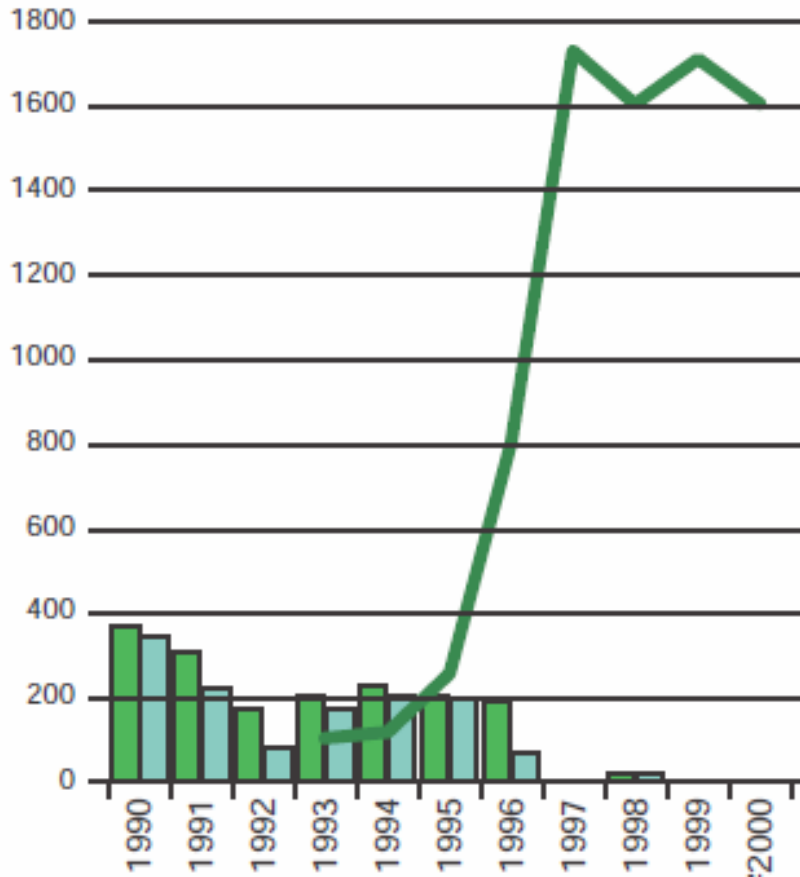


1994

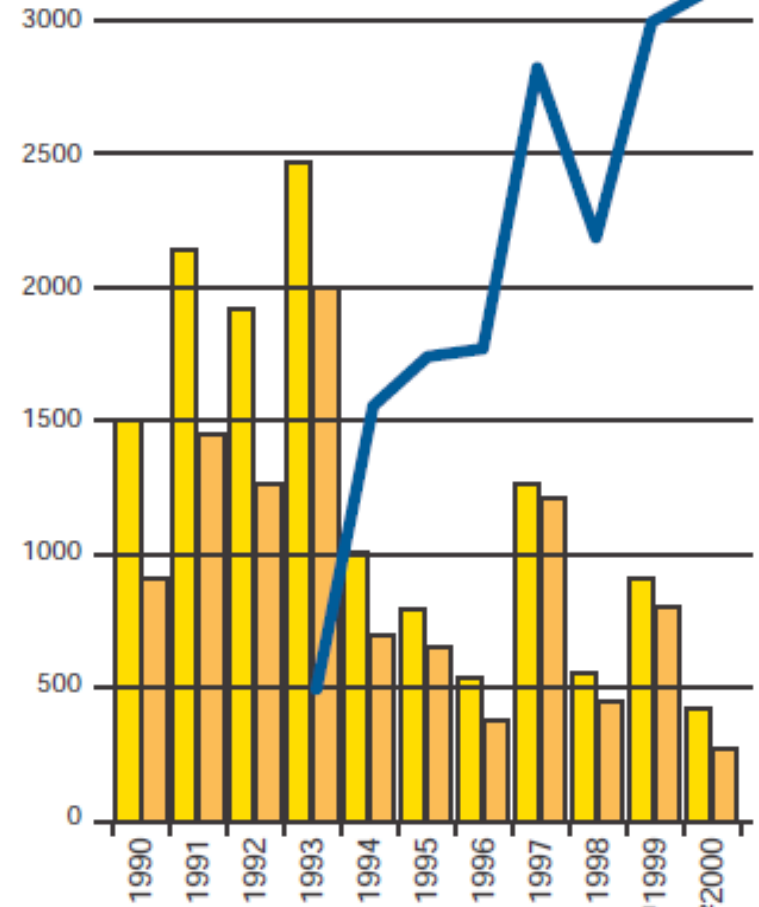


2000

Poliomyelitis & AFP reported cases

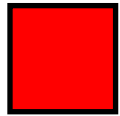


EURO (10 countries)

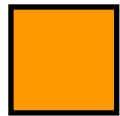


EMRO (8 countries)

Surveillance quality



Non-polio AFP < 1 **AND**
 $> 80\%$ adequate specimen
(2 within 14 days)



Non-polio AFP ≥ 1 **OR**
 $\geq 80\%$ adequate
specimen (2 within 14 days)



Non-polio AFP ≥ 1 **AND**
 $\geq 80\%$ adequate
specimen (2 within 14 days)



No report



MECACAR Meetings

1. 29-30 January 1995 (*Ankara, Turkey*)
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3. 14-16 October 1996 (*Tashkent, Uzbekistan*)
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MECACAR New Millenium

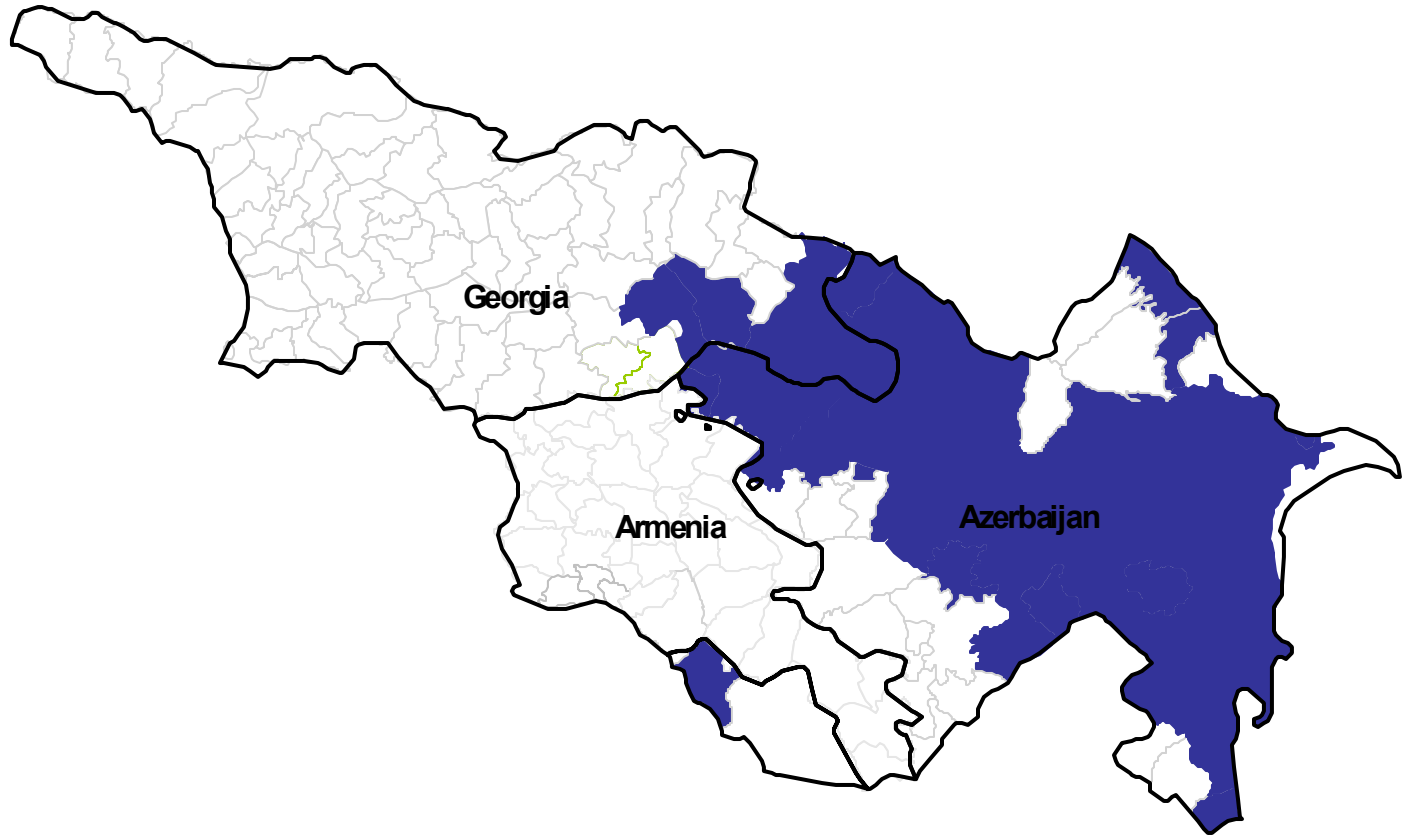
MECACAR New Millenium (17 May 2007)

Commitment for:

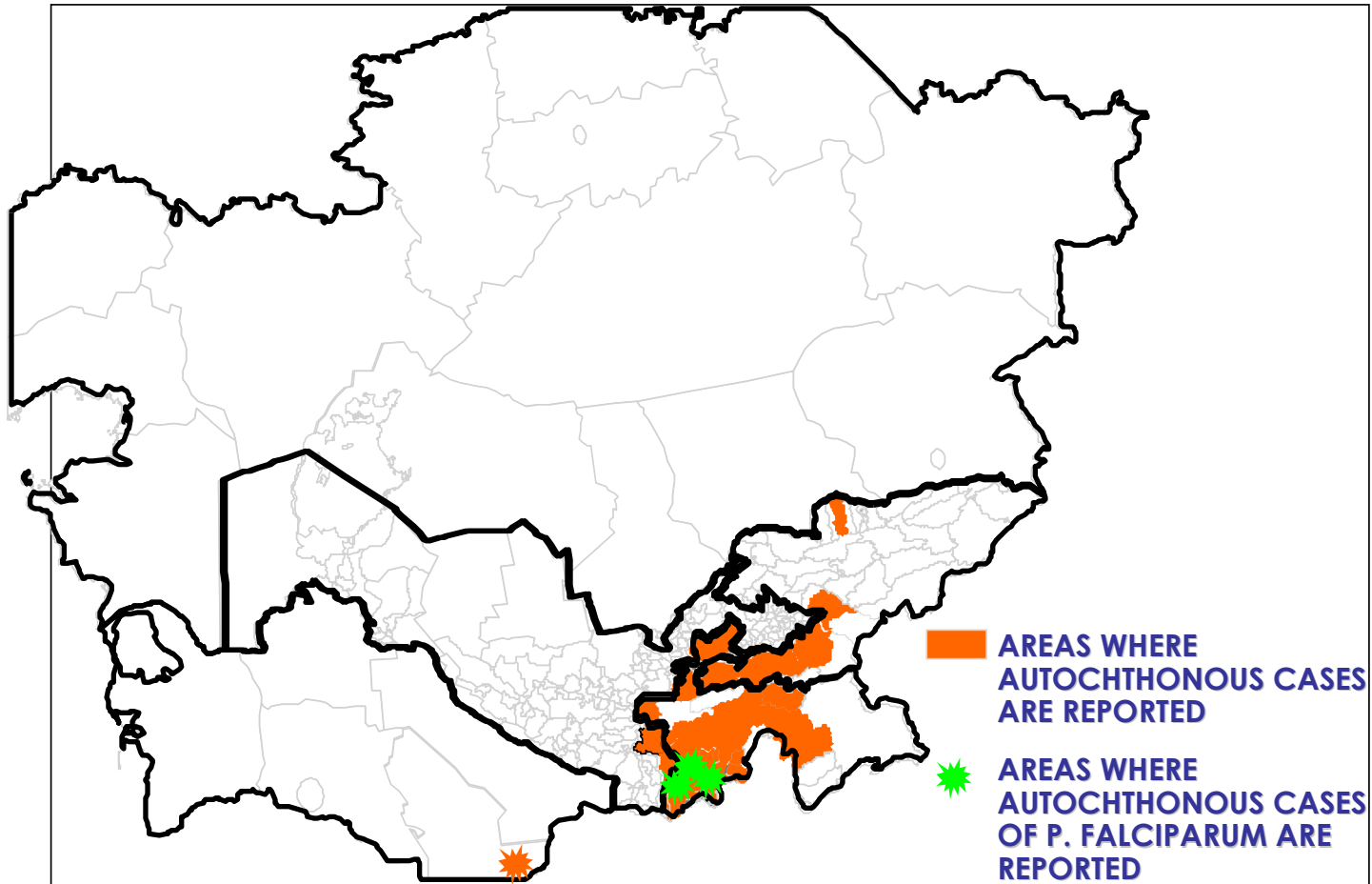


- common indicators to guide actions
- mechanism for timely exchange of information about polio, measles and other outbreaks in our countries;
- continued efforts to achieve international partnerships and support.

Areas where autochthonous malaria cases reported, Trans-Caucasian countries, 2006



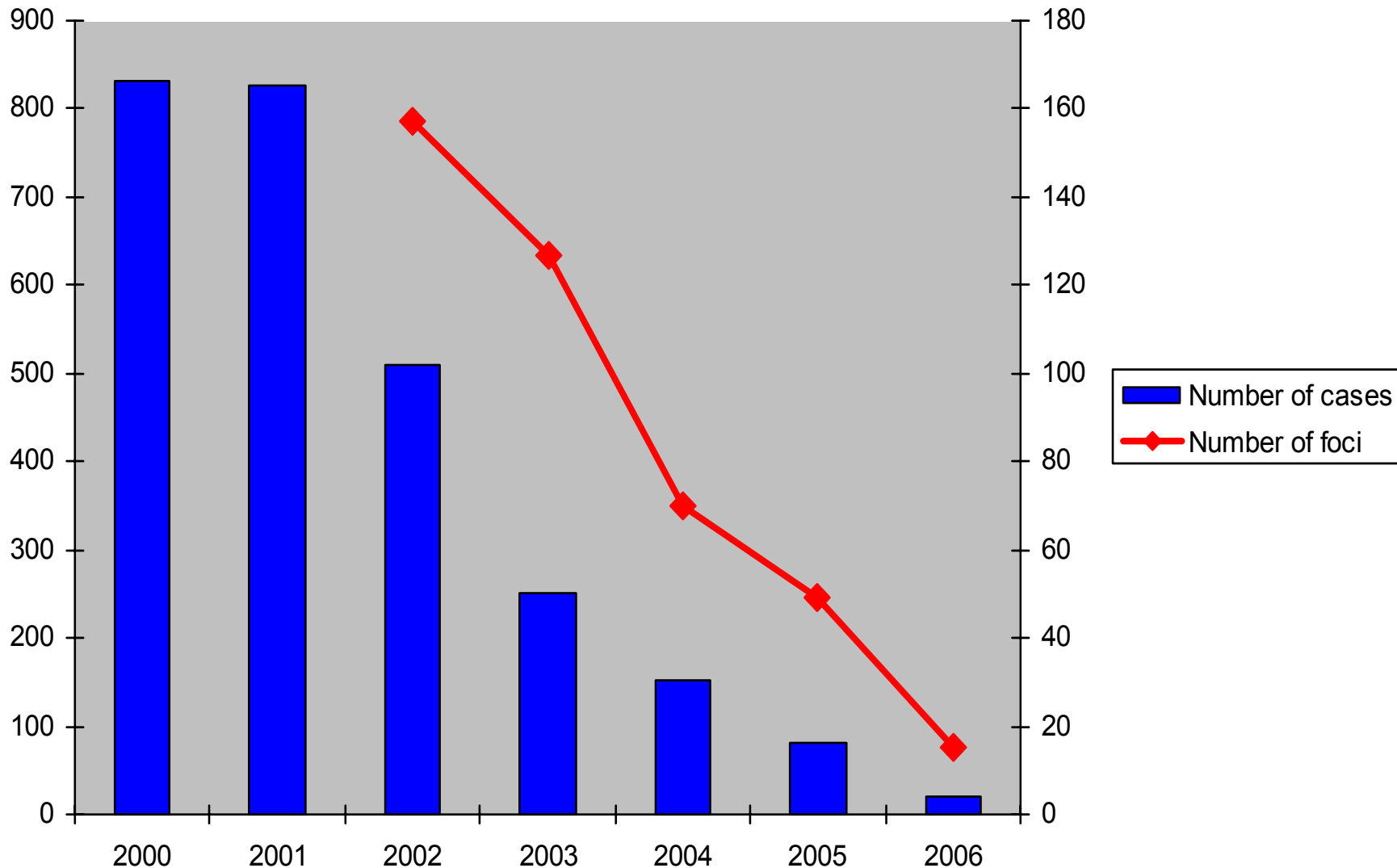
Areas with reported autochthonous cases of malaria, Central Asia, 2006



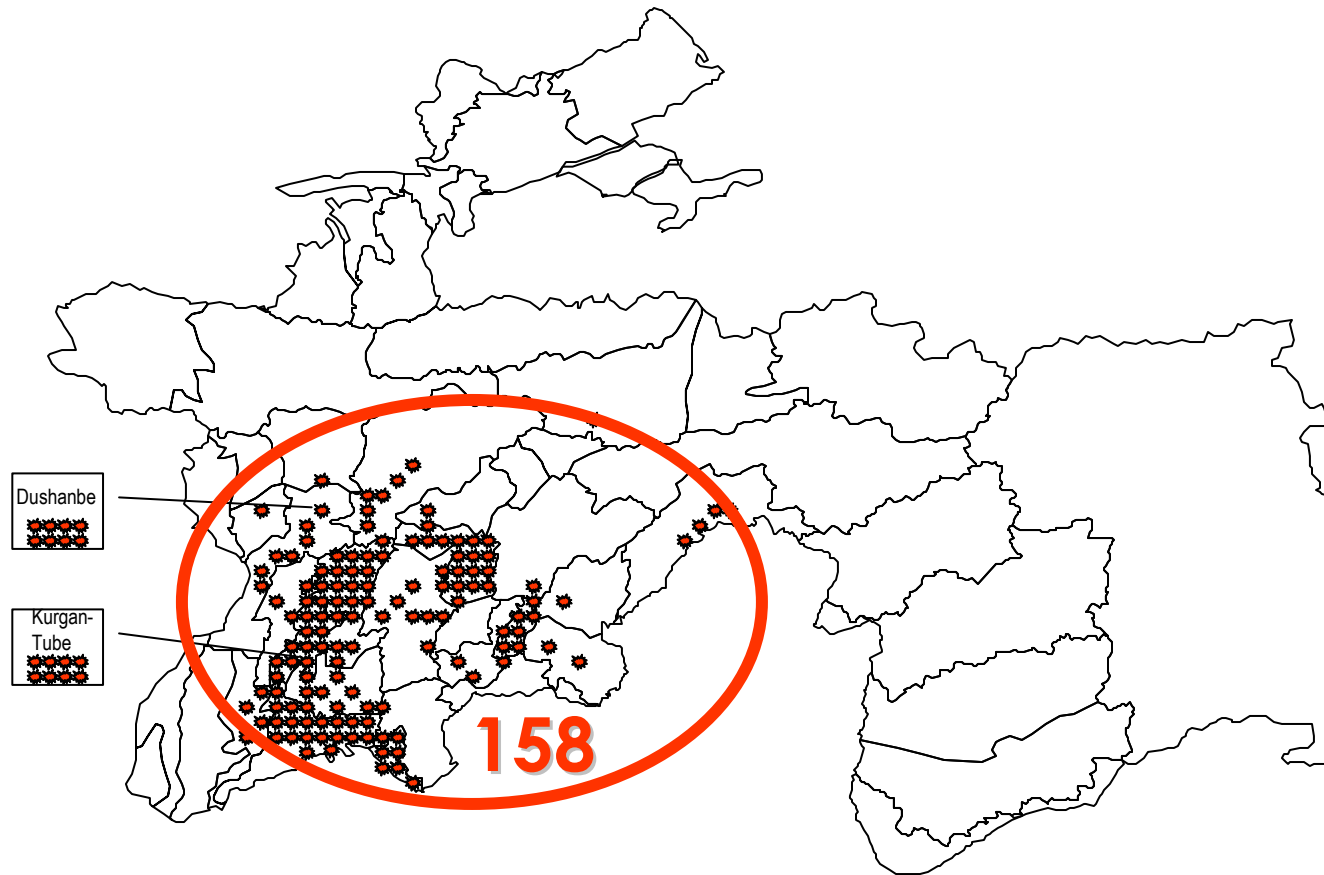
Malaria Strata in Central Asia



Number of *P. falciparum* cases and their active foci in Tajikistan, 2000-2006



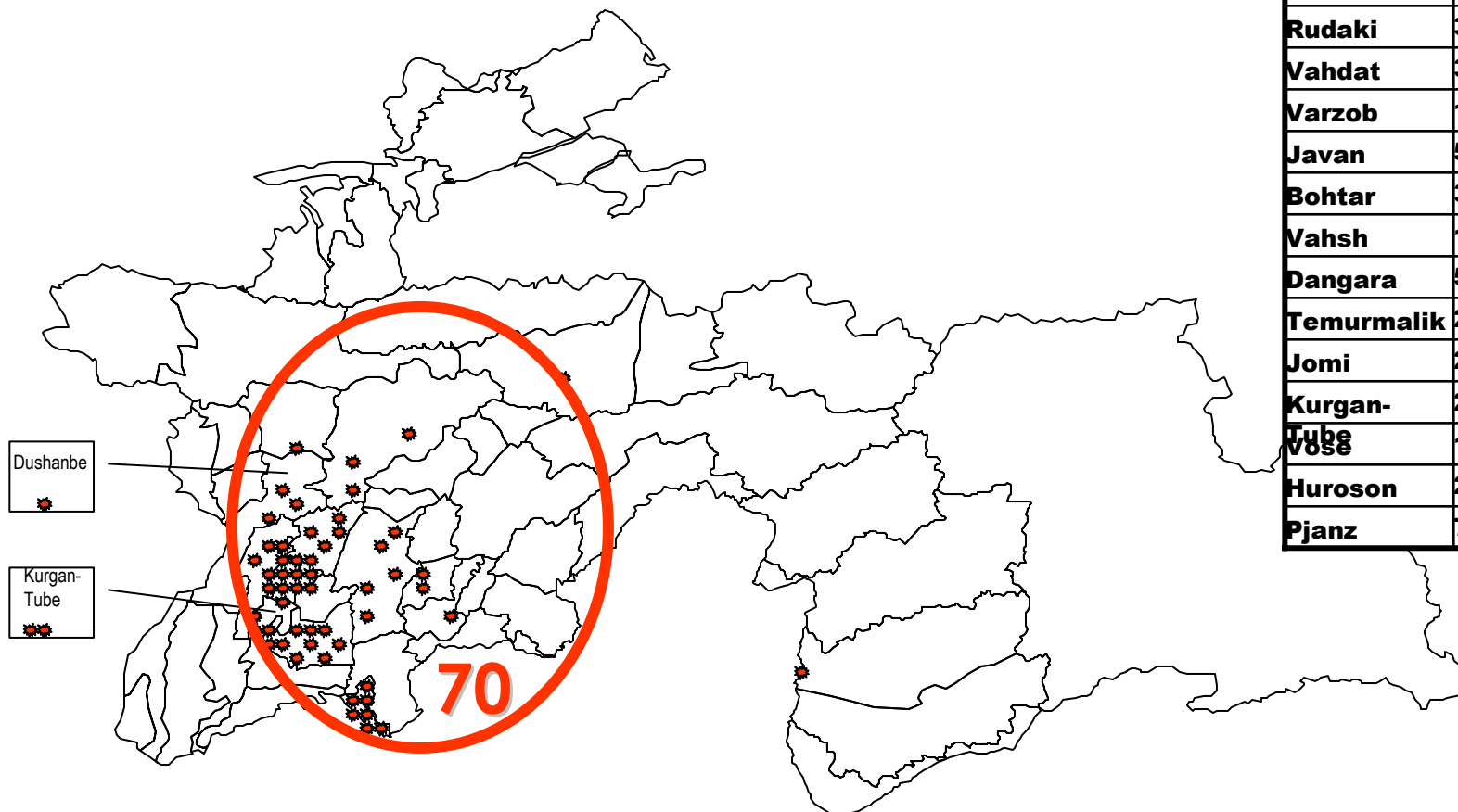
FOCI OF *P. FALCIPARUM* MALARIA IN TAJIKISTAN 2002



DISTRICTS	NUMBER OF FOCI
Darvoz	4
Dushanbe	8
Rudaki	7
Rasht	1
Vahdat	6
Varzob	1
Faizabad	1
Shahrinav	1
Javan	16
Bohtar	7
Nurek	5
Vahsh	5
Kumsangir	1
Sarband	3
Dangara	7
Muminobod	1
Hovaling	1
Baldjuvan	13
Kolhozabad	23
Jilikul	4
Jomi	15
Kurgan-Tube	8
Vose	2
Shurobad	2
Huroson	2
Pjanz	6
Kuljab	8

Active foci of *P. falciparum* malaria (residual & new)

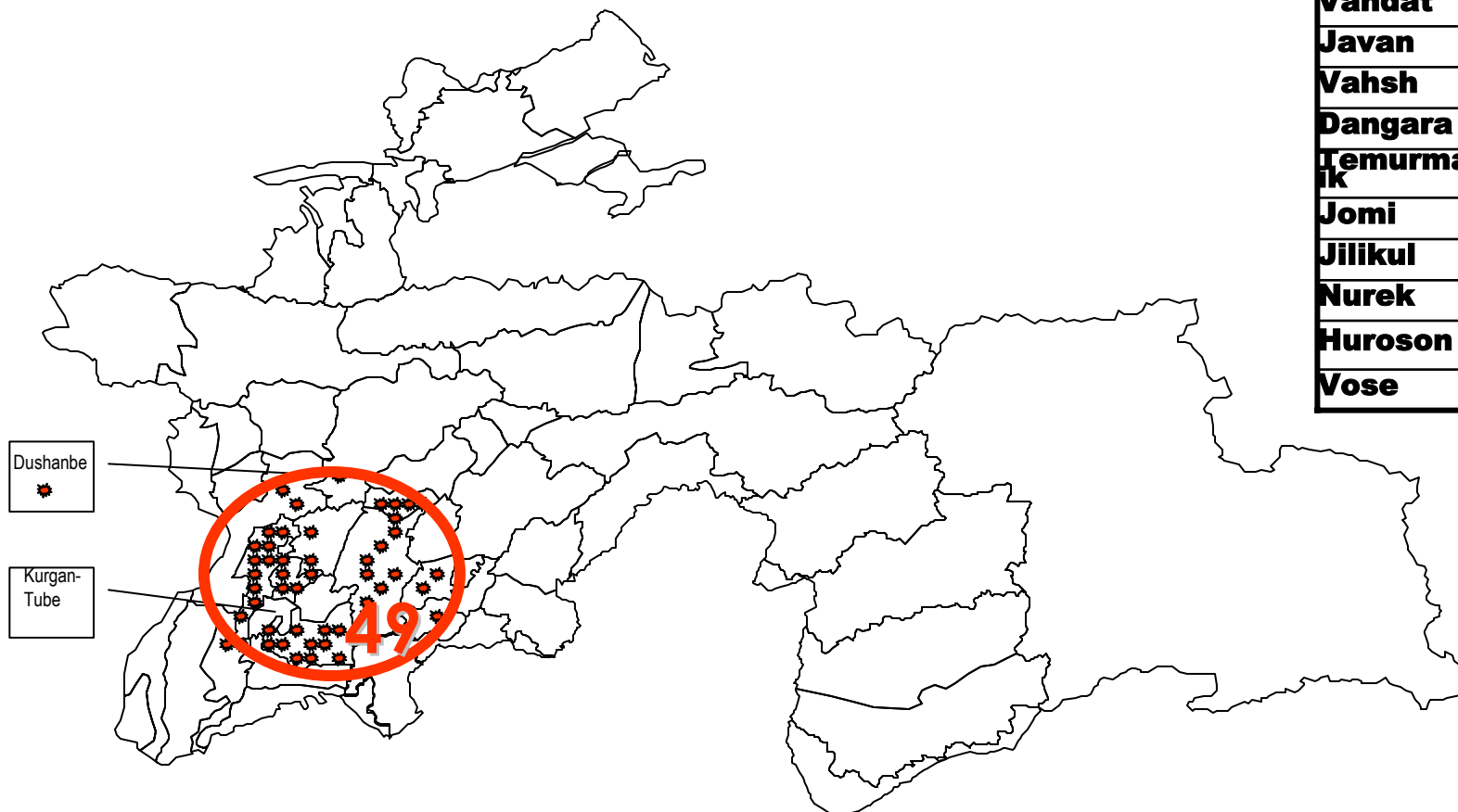
FOCI OF *P. FALCIPARUM* MALARIA IN TAJIKISTAN 2004



★ Active foci of *P. falciparum* malaria (residual & new)

FOCI OF *P. FALCIPARUM* MALARIA IN TAJIKISTAN 2005

DISTRICTS	NUMBER OF FOCI
Dushanbe	1
Rudaki	2
Vahdat	1
Javan	2
Vahsh	11
Dangara	8
Temurmalik	2
Jomi	5
Jilikul	1
Nurek	5
Huroson	10
Vose	1



* Active foci of *P. falciparum* malaria (residual & new)

FOCI OF *P. FALCIPARUM* MALARIA IN TAJIKISTAN 2006

DISTRICT	NUMBER OF FOCI
Dushanbe	2
Vakhdat	4
Nurobod	1
Vahsh	3
Lemurmalik	1
Jomi	3
Nurek	1



* Active foci of *P. falciparum* malaria (residual & new)

Re-emergence of malaria, PR China (2003)

