



QUARTERLY REPORT TO THE ADVISORY BOARD

For the Period January 1st through March 31st, 2011

1. Summary
2. Donor Contributions
3. Grant Approvals and Pipeline
4. Grant Disbursements
5. Implementation
 - a. Rating and Risk Changes
 - b. Highlights: July to December 2010
 - c. Closed Projects
6. Challenges
7. Patterns of Achievement

ANNEX 1 – Donor Contributions

ANNEX 2 – Tables Related to Grant Approvals

ANNEX 3 – Graph of Grant Disbursements

ANNEX 4 – Regional Funding Requirements

ANNEX 5 – Project Implementation Details

**Quarterly Report to the Advisory Board (AHIF)
For the Period January 31st through March 31st, 2011**

1. Summary

During the quarter ending on March 31, 2011:

- No new grants were approved, but one regional grant for South Asia, approved in the previous quarter, still awaits signature; three grants were signed, for Colombia, regional work in the Middle East and North Africa, and a regional project in Europe and Central Asia;
- No new grants were submitted for approval pending donor approval of an extension of the completion in the Administration Agreement;
- Six grants are being prepared for submission, for follow-up work to existing projects in China, Mongolia, Myanmar, Sri Lanka, Vietnam, and Mecosur countries of southern South America;
- Two grants closed, for Bhutan and Sri Lanka, with total approved amounts of \$2.6 million; and
- Total disbursements increased to \$59 million (57 percent of total grant approvals), from \$55 million at the end of December 2010.

2. Donor Contributions

Donor pledges and contributions remained unchanged from the previous Report. Donor contributions received to date are \$110.6 million. Table A-1, in Annex 1, shows the status of donor pledges and contributions.

3. Grant approvals, closures and pipeline

The tables in Annex 2 present the status of all approved grants, as well as the reflows realized to date from closed or canceled grants. The cumulative value of approvals equals \$102.1 million, while the cumulative reflows from closed and canceled grants total \$9.3 million; no new reflows were recorded in the first quarter of 2011. In total, 27 of the 54 approved grants have closed.

Two grants closed in the quarter. The second grant for Bhutan closed on January 31, 2011; the first Bhutan grant closed at the end of July 2010, and the two grants together disbursed \$1.9 million out of \$2.5 million approved. The grant for Sri Lanka closed on March 31, 2011, having disbursed \$0.7 million out of an initial approved amount of \$1.4 million. Three additional grants have closed since the January 2011 Quarterly Report, with a total approved value of \$4.4 million. They are for: Turkmenistan (closed December 30, 2010, \$2.0 million approved, \$1.8 million disbursed); Cameroon (closed December 31, 2010, \$1.3 million approved, \$1.2 million

disbursed); and Kyrgyz Republic (closed December 31, 2010, \$1.2 million approved, \$1.1 million disbursed).

Twenty-one grants are currently scheduled to close in the second quarter of 2011, all but two at the end of June. The closure dates of six grants were extended, as adjustments to earlier unforeseen implementation delays. The extensions were for projects in:

- Bhutan (from 11/30/10 to 1/31/11);
- China (from 11/30/10 to 11/30/11);
- Mongolia (from 11/30/10 to 11/30/11);
- South Asia, regional (from 11/30/10 to 12/31/11);
- Turkmenistan (from 12/31/10 to 6/30/11); and
- Vietnam (from 12/31/10 to 6/30/11).

No new grants were approved in the quarter. An amendment to extend the completion date in the Administration Agreement is being processed and is likely to be signed shortly.

Three grants approved in the previous quarter and grant agreements were signed subsequently. These were the grant to Colombia, the second-phase regional grant for the Middle East & North Africa region, and the One Health project grant for Central Asian countries, which were signed on January 6, February 24, and March 9, 2011, respectively. One further regional grant approved in the fourth quarter of 2010, in the South Asia region, for epidemiological training, awaits signature.

Four new grants in the East Asia/Pacific region, and one in the South Asia region, are being prepared for submission. The largest is a \$13-million grant that will form part of a \$25-million additional financing for Vietnam: Avian and Human Influenza Control and Preparedness (VAHIP) in Vietnam. The other three grants in East Asia/Pacific will be a third-phase grant of \$3 million in China, additional financing of \$0.3 million in Myanmar, and a second-phase grant of \$2.5 million in Mongolia. The grant in South Asia will be a second-phase grant of \$5 million in Sri Lanka.

A small regional grant for the Mercosur countries of southern South America, of \$0.25 million is still in preparation. The grant was originally scheduled for submission in November 2010, and it is unclear whether there would be time for approval and implementation before the expiration of the multidonor window of the grant facility.

A detailed grant pipeline is presented in Annex 4.

4. Grant Disbursements

The cumulative disbursement percentage reached 57 percent on March 31, 2011, \$58.6 million out of grant approvals (net of 5% administration fee) of \$102 million. At the end of December 2010, as reported in the January 2011 Report, the cumulative percentage was 54 percent, and disbursements were \$55 million.

Seven of the 33 signed grants still under implementation, for Colombia, Mexico, Morocco, and Nicaragua, and new sub-regional grants for projects in the Middle East & North Africa, Europe & Central Asia, and South Asia, have yet to commence disbursement.

Table 2 shows net disbursements by region in each of the last four quarters, April 1, 2009 through March 31, 2011.

Total net disbursements for the facility between January 1 and March 31, 2011, were \$3.4 million. This is the sum of gross disbursements, \$3.5 million, less the total of adjustments made to closed grant accounts, \$0.1 million. (Adjustments are made when disbursements are returned unused at grant closure, as reflows, and, less commonly, when payments are determined to be ineligible.)

In the previous quarter, gross disbursements totaled \$7.6 million. The decline in quarterly gross disbursements was largely due to reductions in disbursements from the grant to Uganda (from \$1.0 million to zero), and from a regional grant for South Asia (from \$2.7 million to zero).

Table 2
Quarterly Disbursements by Region
(\$000)

Region	Net Amount Disbursed During the Quarter			
	2010: 2nd Qtr. April 1 to June 30	2010: 3rd Qtr. July 1 to September 30	2010: 4th Qtr. October 1 to December 31	2011 1st Qtr. January 1 to March 31
Africa	564	602	1,019	0
East Asia/ Pacific	2,291	2,457	3,700	2,316
Europe/ Central Asia	168	296	94	76
Latin America/ Caribbean	227	76	86	196
Middle East/ North Africa	139	3	13	469
South Asia	518	372	2,553	313
TOTAL (net disbursed)	3,908	3,806	7,465	3,369
Adjustments (see page 3 for explanation)	21	748	181	108
TOTAL (gross disbursed)	3,929	4,554	7,645	3,477

Table 3 shows cumulative disbursements by region for the end of the first quarter of each year from 2008 through 2011. Annex 3 contains a graph of the same data, with intervening quarters added.

Table 3				
Cumulative Net Disbursements by Region				
(excluding global grants)				
(\$000)				
Region	As of March 31 of each year			
	2008	2009	2010	2011
Africa	1,138	2,089	2,947	5,131
East Asia/ Pacific	1,427	5,914	13,472	24,236
Europe/ Central Asia	1,219	4,981	11,188	11,822
Latin America/ Caribbean	50	240	603	1,188
Middle East/ North Africa	3,266	5,192	8,674	9,297
South Asia	650	2,295	3,132	6,889
TOTAL	7,750	20,712	40,016	58,562

Annex 2 gives a detailed disbursement record for approved grants. To ease analysis of current portfolio activity, Annex 2 has been split into two tables: one for currently active grants, and the second as a record of closed grants that no longer contribute to disbursement changes.

5. Implementation

Out of fifty-two national and regional grants approved, nineteen closed before July 1, 2010. The remaining thirty-three grants were under implementation in twenty-six countries and three

regions (three active grants were for projects in Lao PDR; two were for Bhutan).

Disbursement levels are an initial indicator of implementation activity. This section begins with information about disbursements to fund projects in the first half of FY11, and then reports on the projects' accomplishments.

Nine countries, and one regional grant project, accounted for more than ninety-five percent of disbursements for project implementation from July through December 2010. The countries and disbursements are listed in Table 4 below, along with disbursements from January through March 2011. In addition, Table 4 shows each country's (or region's) cumulative disbursement over the life of the grant or grants awarded for work in the country, the original grant amount approved, the amount available for future disbursement, and the percentage of the approved amount that is still available.

	Disbursed Jun-Dec 2010 (\$000)	Disbursed Jan-Mar 2011 (\$000)	Cumulative Disbursed to Mar 2011 (\$000)	Originally Approved (\$000)	Available Apr 2011 (\$000)	Available/ Approved (%)
Vietnam	3,240	1,092	8,451	10,000	1,549	15
South Asia**	2,664	0	2,664	3,836	1,172	31
Uganda*	1,650	0	1,928	2,094	166	8
China*	1,181	647	4,829	6,150	1,321	21
Lao PDR*	994	201	3,397	4,520	1,123	25
Mongolia	676	282	3,608	4,656	1,048	23
Bhutan*	428	0	1,924	2,500	576	23
Cambodia	352	94	890	2,000	1,110	56
Myanmar	312	0	1,247	1,315	68	5
Turkmenistan	266	76	1,831	1,970	139	7
TOTAL (10 countries)	11,764	2,392	30,769	39,041	8,272	27
* Combination of two grants for China, Bhutan, Uganda; three grants for Lao PDR. ** South Asia is a regional grant.						

Rating and Risk Changes

Seven projects changed the ratings of their implementation, or progress toward development objectives, or their estimate of project activity risk, from the ratings of the six months earlier:

- Bangladesh's implementation progress improved from Moderately Unsatisfactory to Moderately Satisfactory, to reflect acceleration in implementation activity;
- China's implementation progress improved from Satisfactory to Highly Satisfactory as implementation of the new grant project got underway, and the activity risk declined from Substantial to Negligible because the period of the grant was extended, relieving fears of insufficient time for implementation;
- Honduras's implementation progress was reduced from Satisfactory to Moderately Unsatisfactory because of delays;
- Mongolia's implementation progress improved from Moderately Satisfactory to Highly Satisfactory, and Modest to Negligible;
- Myanmar's activity risk increased from Negligible to Modest, because of increased perceptions that it would be hard to recruit international expertise to work in the country;
- Uganda's progress toward development objectives improved from Unsatisfactory to Moderately Unsatisfactory, and implementation progress improved from Moderately Unsatisfactory to Moderately Satisfactory, largely as a result of overcoming earlier difficulties with disbursement (Uganda's activity risk remained Substantial); and
- Yemen's implementation progress declined from Satisfactory to Moderately Satisfactory, and the activity risk increased from Negligible to Modest, largely because of security concerns in the country.

Implementation Highlights in the Second Half of 2010

Several projects made strong implementation gains in the second half of 2010; Annex 4 gives accounts of recent progress for active projects individually. This section gives illustrations of achievements in four of the leading projects.

China: Overall project implementation was highly satisfactory, and out of eighty-one planned activities, forty-seven have been completed. The project performed careful, thorough work on operational research studies of establishment of AI-free compartment, improvement of AI Surveillance strategies, and HPAI risk reduction and bio-security improvement of small scale poultry farms. In addition, all the project counties have been assessed with the improved influenza pandemic preparedness assessment tool, and remedial recommendations, for the issues identified in the assessments, have been provided to the counties. Risk communication plans have been developed and tested in two counties. Training courses on epidemiology have been completed in Anhui and Liaoning provinces; the provincial level field epidemiology training was the first of its kind in China.

Mongolia: All activities planned under the human health component have been completed, as have most of those planned for animal health and emergency response. In the second half of 2010 the project continued to support surveillance of wild and domestic birds, and added to the project's unique contribution to the enrichment of global knowledge of the influence of the migration of wild birds on the spread of avian influenza. The project equipped two provincial veterinary laboratories, trained the staffs for bacteriological, virological, serological, and parasitological testing, and set up and trained twenty-one multisectoral rapid response teams.

Myanmar: The project completed a national database on poultry and pig farms, with data and geographical coordinates from 6,154 commercial poultry farms, and 1,859 commercial pig farms. In addition, the project confirmed the high attainment of quality standards by regional laboratories, and national and regional laboratories processed 7,934 duck serum samples, collected as part of the HPAI surveillance and outbreak investigation program. A request of \$0.3 million for additional financing to the on-going grant is currently being prepared and is likely to be submitted in May 2011.

Turkmenistan: The project has achieved all of its development objectives. It has established coordination among agencies responsible for zoonotic diseases. The project has raised public awareness of risks and mitigation measures, and has increased the surveillance, diagnostic, and containment capacity of the country's veterinary and health services. The Sanitary Epidemiology Station and the Central Veterinary Laboratory have both been renovated and equipped, and their staffs have been fully trained.

Vietnam: The project is on target to meet or exceed all its outcome targets by the closure date. In the second half of 2010 the project neared completion of construction works on a live bird market in Hanoi, and a poultry disposal site near the border with China. The project further reduced the turnaround time for laboratory confirmations, from 5.2 days to 3.0 days for animal health tests, and to 4.8 days for human health tests. Additional financing of the VAHIP, of about \$25 million (including \$13 million from an AHIF grant), will consolidate the achievements of the project in future years.

Closed Projects

Four grant projects have closed since the last report on closed projects (in the Quarterly Report for the first half of 2010). Selected accomplishments over the projects' lifetimes appear below.

Bhutan: The project made a major contribution to Bhutan's response capacity, as evidenced by the successful containment of three outbreaks in March 2010. In addition, the project has established a robust influenza-like illness (ILI) surveillance network, created in-country capacity to confirm influenza in clinical samples, trained health workers, and developed guidelines and standard operating procedures for disease surveillance, investigation, case management, and

outbreak response. As a result of the project, Bhutan can now diagnose and confirm influenza, and has passed all three tests of its response to outbreaks.

Cameroon: The project strengthened Cameroon's capacity to diagnose disease, to conduct surveillance, and to respond to outbreaks, primarily by upgrading laboratories and providing training for operational staff of the human health and veterinary departments. There is now an operating epidemiological surveillance network throughout the country, public awareness of avian influenza has been raised through effective campaigns, and coordination among departments and donors has been established.

Kyrgyz Republic: The project completed nearly all its planned activities. It has improved laboratory capacity, raised the skill levels and rapid response capacity in both human health and veterinary systems, and reduced the assessed risk of an outbreak.

A mobile group for rapid response for taking urgent actions on outbreak of dangerous infectious diseases was established. In addition, a mechanism of compensation payments was developed. The project conducted training workshops on awareness and information on avian influenza for 1,400 representatives from veterinary units, government, aiyi okmotu heads, health care workers, and private veterinarians from all regions. In addition, 45,000 posters and 120,000 booklets, dealing with topics such as zoonotic diseases, personal hygiene, and quarantine regulations, were produced for dissemination among farmers and health care facility visitors.

Three virology labs have been reconstructed, equipped, and supplied for express detection of avian influenza virus in humans. The project completed hospital operational isolation rooms, provided laboratory reagents and equipment, and trained laboratory staff in preparation of standard operating procedures.

Sri Lanka: The project has trained over 58,000 individuals in different aspects of preparedness, response, prevention and control of H5N1, including veterinarians, medical staff, technical staff, poultry farmers, school teachers and students, and selected communities near hot spots. In cooperation with the University of Peradeniya, a master's-level training program in applied epidemiology has been created, and thirty students have already completed the program. Diagnostic capacity has been improved at the Virology Research Institute, which is now equipped with a BSL3 cabinet. Fifteen veterinary investigation centers have been upgraded and equipped. A draft compensation strategy has been prepared.

6. Challenges

A number of projects have continued to experience implementation and disbursement delays for a variety of reasons. In Belize, for example, the grant was restructured in August 2010, in recognition of the low danger of an outbreak, to shift the project emphasis from response to

monitoring. In Honduras, the implementing agency was changed, and the new agency proved unfamiliar with Bank procedures. The initial delays are beginning to raise questions about the ability of the projects to achieve their goals before grant closure. In some cases, such as in Bhutan, China, and Uganda, the projects have flexibly reduced their output targets, to avoid last-minute unplanned adjustments later. In other cases, such as in Belize, Honduras, Mexico, and Uganda, the projects remain hopeful that they can achieve their goals, but will require high levels of effort to succeed.

Security concerns continue to hinder implementation in Yemen, but the project has made some implementation gains nonetheless. In Vietnam, despite considerable implementation achievement, there are continuing concerns about the sustainability of coordination between the Ministry of Health and the Ministry of Agriculture and Rural Development, which the project continues to work to mitigate. The Bangladesh project is rated as a high risk, because the frequency and intensity of outbreaks, though declining, is still high, and because expert consensus is that eradication of highly pathogenic avian influenza in animals in Bangladesh will take at least a decade longer. This increases the pressure on the government to pursue its comprehensive National Avian Influenza Plan aggressively.

7. Patterns of Achievement

Across the program, the preponderant weight of accomplishments has centered on training, surveillance, laboratory upgrading, and public awareness. This section notes examples of country achievements in key areas. The examples are illustrative and are not a complete listing of activities undertaken thanks to AHIF Facility support in these key areas. For instance nearly all projects support better cooperation between animal health and human health services and between the disciplines involved in the response to zoonotic disease threats.

Training: Training, to increase both capacity and awareness, has continued to be a leading activity among the AHIF grant projects. Some training has been in the form of focused instruction for small numbers of technicians, such as: specialized training, to selected professionals, in hospital infection surveillance, intensive care, operation of ventilators, and virus genetic sequencing (Mongolia); training of seventeen people on basic epidemiology for one month in Canada (China); four distance training modules offered to and completed by sixty seven students, who are expected to complete master's level training in veterinary medicine or public health (South Asia); and Master and cascade epidemiological training provided to Ministry of Health and Veterinary Union staff (Turkmenistan). Some of the training has been more widely aimed at (usually larger numbers of) veterinary and health workers, such as that given to 1,788 veterinary health workers in 194 districts (Cambodia), instruction for personnel in testing for avian flu and other diseases (Dominican Republic), and three days' field training to each of 88 fourth-year veterinary students and six professors (Myanmar).

Some of the training has not been for health professionals, such as the eighty demonstration sites on poultry bio-security farming have been established to provide training for 1,760 small poultry farmers in Vietnam. The China project has completed provincial-level field training courses on epidemiology in Anhui and Liaoning that were the first of their kind in China. Even in Yemen, where security concerns inhibited implementation activities, two technicians were trained for diagnostic services, nine other workers (including five women) were trained in diagnostic methods, and three additional technicians were trained in surveillance methods.

Surveillance: Project surveillance work ranged from theory to preparation to data collection. The project in China improved the quality of a comprehensive study, *Improvement of Surveillance Strategies in China*. In Kyrgyz Republic, a report on monitoring of autumn migratory birds was prepared. The project in Yemen finalized an evaluation of the level of biosecurity in poultry farms with detailed surveillance maps, and completed a Stage 1 HPAI survey that showed that Yemen continues to be free of H5N1. The project in Myanmar completed a national database on poultry and pig farms, with data and geographical coordinates from 6,154 commercial poultry farms, and 1,859 commercial pig farms; also in Myanmar, national and regional labs processed 7,934 duck serum samples, collected as part of the HPAI surveillance and outbreak investigation program. The projects in Dominican Republic and Mongolia monitored wild birds in migration routes. In Bhutan, the Ministry of Health, thanks to improved surveillance, quickly identified several outbreaks of H5N1.

Laboratory Upgrading: In Vietnam, all nine national and regional veterinary laboratories have received investment and training and are implementing a quality management system, moving toward ISO/10725 standards. In Lao PDR, construction has begun on the National Animal Health Center laboratory. The project in Mongolia equipped two provincial veterinary laboratories, and trained the staffs for conducting bacteriological, virological, serological, and parasitological testing. The project in Myanmar completed an activity assessment of lab functions, which confirms that domestic quality assurance schemes in regional labs have attained good standards. The Sanitary Epidemiological Station and the Central Veterinary Laboratory in Turkmenistan have both been renovated and equipped, and their staff have received training that enables them to perform all necessary diagnostic tests for HPAI.

Rapid Response: Projects continue to establish, equip, and train rapid response teams, as in Mongolia, where the project set up and trained twenty-one multi-sectoral Rapid Response Teams in five priority aimags (provinces) and one city, and all six project aimags and cities have conducted at least one drill on integrated response to a suspected outbreak of AI among poultry. In Vietnam, each project province has established and maintained at least two rapid response teams (in two districts). They have received training and equipment to conduct simulation exercises. In Kyrgyz Republic, a mobile group for rapid response for taking urgent actions on outbreak of dangerous infectious diseases has been established.

Communication and Public Awareness: In China, risk communication plans have been

developed and tested in two counties. The Mongolia project developed and distributed early warning and reporting guidelines for human infectious diseases to all aimags. The Dominican Republic project trained two hundred staffers in communication, and the Yemen project provided nine high-risk governorates with communications equipment. The project in Kyrgyz Republic conducted training workshops on awareness and information on avian influenza for 1,400 representatives from veterinary units, government, aiyl okmotu (rural administration) heads, health care workers, and private veterinarians from all regions; the project also funded production of 45,000 posters and 120,000 booklets, dealing with topics such as zoonotic diseases, personal hygiene, and quarantine regulations, for dissemination among farmers and health care facility visitors.

Biosecurity: In China, a study entitled *HPAI Risk Reduction and Bio-security Improvement of Small-Scale Poultry Farms* introduced new a methodology for analysis and generated new evidence on modes of poultry rearing and risk pathways for introducing HPAI. The project in Lao PDR has been continuously implementing biosecurity training for backyard poultry farmers in the target provinces, with good progress being made in the second half of 2010. The project in Vietnam piloted biosecurity Standards of Practice on 58 volunteer commercial farms.

Compensation: In Uganda, a draft compensation policy has been prepared. The Myanmar project drafted guidelines for compensation, and worked with the Livestock Breeding and Veterinary Department on implementation of the guidelines. In the Kyrgyz Republic, the project helped develop a mechanism for compensation payments; the compensation fund was originally planned to be \$1 million, but this was reduced to \$650 thousand, in view of the lack of evidence of HPAI in the country. Although a compensation mechanism does not yet exist in Turkmenistan, the government has agreed to allocate funds for compensation payments in the event of an AI outbreak.

Detection Capacity in Humans: The project in Mongolia conducted a valuable serological study of the presence in healthy populations of antibody to novel Influenza A (H1N1), an earlier circulating H1N1, seasonal influenza H3N2, and influenza B. In the Kyrgyz Republic, three virology labs have been reconstructed, equipped, and supplied for express detection of avian influenza virus in humans.

Intersectoral Coordination: The Chinese project found that in the development of its risk communication plans, the model of partnership between health sector and university (communication and media) was very effective. The project in Turkmenistan has established intersectoral coordination mechanisms between ministries and agencies responsible for zoonotic diseases.

Flexibility: Many projects have adjusted to the time pressures from imminent grant closures by modifying the number of their target activities, as in Bhutan, where several activities were

dropped because of implementation delays, including the upgrading and equipping of isolation rooms in five hospitals (one was upgraded, but no equipment was procured), district-level pandemic planning, and two system-wide field simulations. Similarly, the project in Uganda cut number of isolation wards planned from six to two, and the project in China change the original plan, of training ten professionals to the attainment of Master's degree in epidemiology, to training seventeen people on basic epidemiology for one month in Canada.

However, projects also showed themselves adept at adjusting to changing circumstances and information. In Bhutan, regional rapid response teams were not formed, as originally planned, because the response was envisioned as a local or national, not a regional response. In the Kyrgyz Republic, failing the report any cases of HPAI in the country, and monitoring results that showed the absence of antibodies to avian influenza, the project objectives were expanded to include preparation for pandemic emergencies from other zoonotic or infectious diseases in humans. Finally, the project in Yemen, despite deteriorating security conditions, managed to maintain two technicians at work in entering and analyzing data for disease mapping.

ANNEX 1: DONOR CONTRIBUTIONS

Donor contributions have remained unchanged for a year. Table A-1 shows amounts pledged and received as of March 31, 2011.

Table 1			
Donor Pledges and Contribution Receipts to Date			
(as of March 31, 2011)			
<u>Country/ Organization</u>	<u>Amount Pledged</u>	<u>Received to Date (US\$)*</u>	<u>Percent Received**</u>
European Commission	€70,930,000	80,731,224	83.1
United Kingdom	£ 7,000,000	13,491,450	100.0
Australia	AUD 10,500,000	8,488,250	100.0
Russian Federation	USD 3,000,000	3,000,000	100.0
China	USD 2,000,000	2,000,000	100.0
India	USD 1,670,000	1,668,157	99.9
Korea	USD 1,000,000	1,000,000	100.0
Iceland	USD 200,000	200,000	100.0
Slovenia	€30,000	38,373	100.0
Estonia	€21,344	27,645	100.0
Total Contributions Received		110,645,099	87.1
*After conversion to US Dollars and before deduction of administration fee.			
**As computed in the pledging currencies.			

ANNEX 2 – TABLES RELATED TO GRANT APPROVALS

CHRONOLOGICAL LIST OF FACILITY GRANTS APPROVED								
In US\$ Millions, As of March 31, 2011								
AHI Facility Envelope	Approval Dates	European Commission						TOTAL FACILITY
		East & South Asia (TF070533)	East & South Asia (TF070934)	Central Asia (TF070540)	Eastern Europe (TF070541)	Mediterranean Littoral (TF070542)	Multi Donor (TF070515)	
Expected Funds Available*		35.7	31.4	5.9	6.3	13.0	28.4	120.7
Lao PDR - 1	8-Aug-06	(2.0)						(2.0)
Djibouti	7-Sep-06						(2.1)	(2.1)
Georgia	18-Sep-06				(1.6)			(1.6)
West Bank and Gaza	22-Sep-06					(3.0)		(3.0)
Zambia	26-Sep-06						(1.0)	(1.0)
China-1	18-Oct-06						(2.7)	(2.7)
Liberia	28-Nov-06						(0.1)	(0.1)
Sierra Leone	29-Nov-06						(0.1)	(0.1)
Vietnam	15-Dec-06	(10.0)						(10.0)
Indonesia	15-Dec-06	(10.0)						(10.0)
Regional - MNA	19-Dec-06					(1.0)		(1.0)
Afghanistan	22-Dec-06	(5.0)						(5.0)
Regional - LCR	22-Dec-06						(0.5)	(0.5)
Tajikistan	22-Dec-06			(1.5)				(1.5)
Yemen-1	5-Feb-07						(0.1)	(0.1)
Armenia	12-Feb-07				(2.0)			(2.0)
Mauritania	20-Feb-07						(0.0)	(0.0)
Uganda - 1	26-Feb-07						(0.1)	(0.1)
Cambodia	5-Mar-07	(2.0)						(2.0)
Moldova	26-Mar-07				(1.0)			(1.0)
Malawi	16-Apr-07						(1.0)	(1.0)
Egypt	18-Apr-07					(7.1)		(7.1)
Uzbekistan	2-May-07			(3.0)				(3.0)
Myanmar	16-May-07						(1.3)	(1.3)
Mozambique	7-Jun-07						(0.1)	(0.1)
Bangladesh	16-Jul-07	(2.0)						(2.0)
Bhutan - 1	19-Jul-07	(1.3)						(1.3)
Lao PDR - 2	6-Aug-07						(2.4)	(2.4)
Sri Lanka	15-Oct-07	(1.4)						(1.4)
Cameroon	18-Oct-07						(1.3)	(1.3)
Turkmenistan	16-Nov-07			(1.1)			(0.9)	(2.0)
Congo	27-Feb-08						(1.0)	(1.0)
Tunisia	9-Apr-08					(0.7)		(0.7)
Kyrgyz Republic	14-Apr-08			(0.4)			(0.8)	(1.2)
Mongolia	21-Apr-08		(4.7)					(4.7)
Honduras	19-May-08						(0.3)	(0.3)
Yemen -2	11-Aug-08						(1.1)	(1.1)
Dominican Republic	12-Aug-08						(1.0)	(1.0)
Uganda - 2	10-Sep-08						(2.0)	(2.0)
Bhutan - 2	9-Dec-08		(1.2)					(1.2)
Lao PDR-3	18-Jan-09		(0.1)					(0.1)
Global - 1	2-Mar-09						(0.1)	(0.1)
Syria	23-Mar-09						(1.3)	(1.3)
Mexico	24-Aug-09						(1.7)	(1.7)
Belize	9-Nov-09						(0.5)	(0.5)
Morocco	10-Nov-09					(0.9)		(0.9)
China-2	22-Dec-09		(3.5)					(3.5)
Regional - SAR	11-Jan-10		(3.8)					(3.8)
Global - 2	2-Mar-10		(0.1)					(0.1)
Nicaragua	18-Apr-10						(0.3)	(0.3)
Subregional - Middle East	7-Oct-10					(0.3)		(0.3)
Regional - ECA	15-Nov-10						(3.0)	(3.0)
Colombia	2-Dec-10						(0.9)	(0.9)
Regional - SAR	9-Dec-10	(3.9)						(3.9)
Total Approved:		(37.6)	(13.4)	(5.9)	(4.6)	(13.0)	(27.6)	(102.1)
Confirmed Closed Grant Reflows		12.8		0.0	0.1		1.4	14.3
Percent of Expected Funds		69.5%	42.7%	99.6%	71.1%	100.0%	92.1%	72.7%
Projected Balance Available**		10.9	18.0	0.0	1.8	(0.0)	2.2	33.0

* Funds contributed or pledged, net of 5% administration fee.

**Includes reflows received to date from closed grants.

Implementation Status of Active Grants as of 3/31/2011

(Excluded: Cancelled grants, and grants with a Closing Date of March 31, 2010 or earlier)

Project Names	Signing Dates	Approved Amounts	Disbursed Dec 31 2010	Movement since Dec	Disbursed Mar 31 2011	Reflow at Closure
Armenia**	8-Jun-07	\$2,000,000	\$1,960,462	\$0	\$1,960,462	\$39,538
Bangladesh**	8-Oct-07	\$2,000,000	\$887,094	\$75,075	\$962,170	
Belize	22-Jan-10	\$501,744	\$100,000	\$0	\$100,000	
Bhutan-1	2-Oct-07	\$1,300,000	\$1,300,000	\$0	\$1,300,000	\$0
Bhutan-2	28-May-09	\$1,200,000	\$623,961	\$0	\$623,961	
Cambodia**	8-May-08	\$2,000,000	\$796,189	\$93,913	\$890,102	
Cameroon	26-Mar-08	\$1,270,000	\$1,183,781	\$0	\$1,183,781	
China-1	16-Apr-07	\$2,650,000	\$2,650,000	\$0	\$2,650,000	\$0
China-2	25-Feb-10	\$3,500,000	\$1,531,448	\$647,110	\$2,178,558	
Colombia	6-Jan-11	\$890,000	\$0	\$0	\$0	
Dominican Republic	8-Nov-08	\$1,000,000	\$342,100	\$136,812	\$478,912	
Egypt	29-Oct-07	\$7,141,842	\$3,825,476	\$12,425	\$3,837,901	
Global-2***	N/A	\$90,000	\$44,985	\$2,625	\$47,610	
Honduras	1-Aug-08	\$300,000	\$50,000	\$0	\$50,000	
Kyrgyz Republic**a/	11-Jul-08	\$1,150,000	\$1,057,118	\$0	\$1,057,118	
Lao PDR - 1**	11-Dec-06	\$2,000,000	\$1,355,834	\$0	\$1,355,834	
Lao PDR - 2**	7-Dec-07	\$2,400,000	\$1,808,859	\$201,143	\$2,010,002	
Lao PDR - 3***	N/A	\$120,000	\$31,207	\$0	\$31,207	
Malawi	31-Jul-07	\$1,000,000	\$200,000	\$0	\$200,000	\$800,000
Mexico	24-Feb-10	\$1,700,000	\$0	\$0	\$0	
Mongolia	5-Jun-08	\$4,656,463	\$3,326,333	\$281,760	\$3,608,092	
Morocco	6-Oct-10	\$888,490	\$0	\$0	\$0	
Myanmar	7-Mar-08	\$1,315,353	\$1,247,054	\$0	\$1,247,054	
Nicaragua	22-Jul-10	\$300,000	\$0	\$59,113	\$59,113	
Regional LCR	22-Jun-07	\$500,000	\$500,000	\$0	\$500,000	\$0
Regional SAR	11-May-10	\$3,835,629	\$2,664,195	\$0	\$2,664,195	
Regional MNA	24-Feb-11	\$310,900	\$0	\$0	\$0	
Sri Lanka	26-Mar-08	\$1,433,000	\$705,064	\$237,699	\$942,763	
Syria	22-Oct-09	\$1,316,070	\$0	\$100,000	\$100,000	
Turkmenistan a/	28-Feb-08	\$1,970,000	\$1,754,625	\$76,258	\$1,830,883	
Tunisia	14-Feb-09	\$653,105	\$100,000	\$224,938	\$324,938	
Uganda-2**	10-Oct-08	\$2,000,000	\$1,835,000	\$0	\$1,835,000	
Vietnam	12-Apr-07	\$10,000,000	\$7,359,559	\$1,091,700	\$8,451,258	
West Bank & Gaza	3-Oct-06	\$3,000,000	\$2,571,420	\$146,861	\$2,718,281	
Yemen-2	5-Nov-08	\$1,080,100	\$128,728	\$92,336	\$221,064	
Total Financially Active		\$67,472,696	\$41,940,493	\$3,479,767	\$45,420,260	\$839,538
Total Financially Non-Active		\$27,716,472	\$13,306,724	-\$108,017	\$13,198,707	\$13,470,329
GRAND TOTAL		\$95,189,168	\$55,247,216	\$3,371,750	\$58,618,966	\$14,309,867

*Rapid Assessment Grants

**Co-financing Grants

***Bank-Executed Grant

a/ The sum of two separate child accounts reported as they refer to the same project

Non-Active Grants as of 3/31/2011

(Cancelled grants, and grants with a Closing Date of March 31, 2010 or earlier)

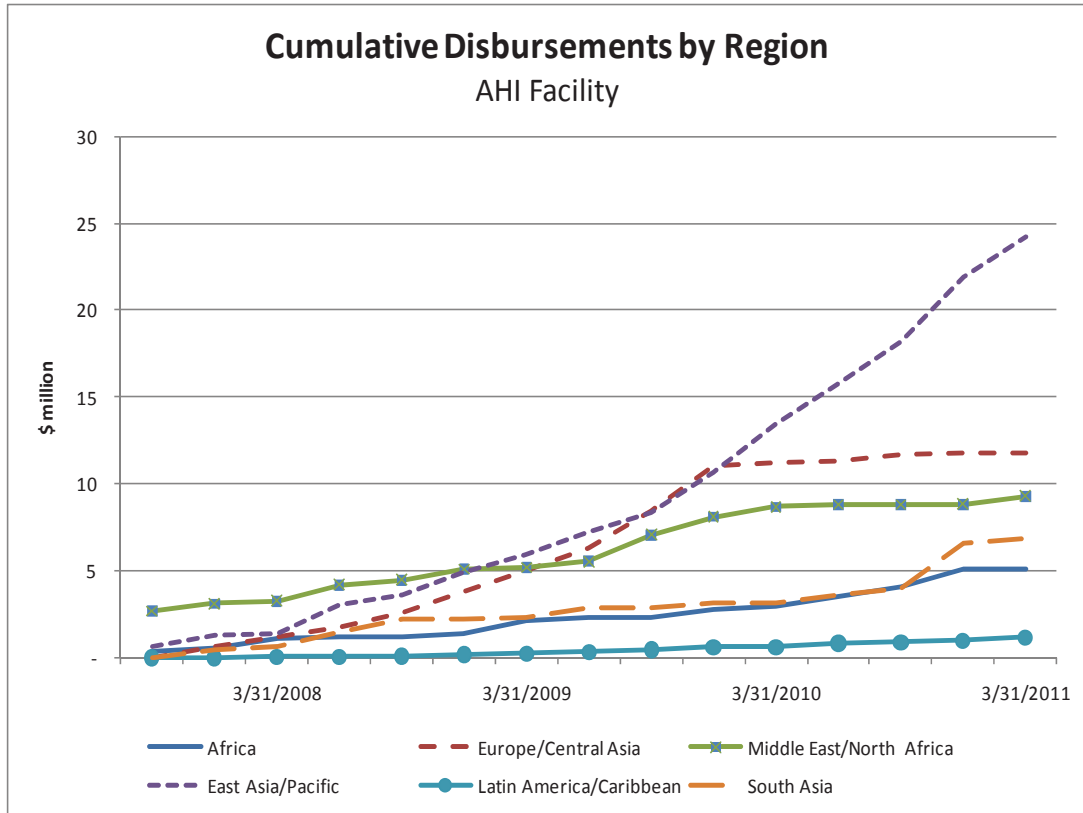
Project Names	Signing Dates	Approved Amounts	Disbursed Dec 31 2010	Movement since Dec	Disbursed Mar 31 2011	Reflow at Closure
Afghanistan**	30-May-07	\$5,000,000	\$395,547	\$0	\$395,547	\$4,604,453
Congo	2-Jul-08	\$1,000,000	\$678,795	\$0	\$678,795	\$321,205
Djibouti	21-Oct-06	\$2,111,236	\$1,171,817	-\$108,017	\$1,063,800	\$0
Georgia**	23-Jan-07	\$1,600,000	\$1,536,915	\$0	\$1,536,915	\$63,085
Global-1***	N/A	\$100,000	\$8,969	\$0	\$8,969	\$91,031
Haiti	26-Mar-08	Cancelled	\$0	\$0	\$0	\$0
Indonesia	13-Jun-07	\$10,000,000	\$1,813,685	\$0	\$1,813,685	\$8,186,315
Liberia-1*	19-Dec-06	\$94,300	\$89,130	\$0	\$89,130	\$5,170
Mauritania*	22-Mar-07	\$29,500	\$29,500	\$0	\$29,500	\$0
Moldova**	20-Jun-07	\$1,000,000	\$1,000,000	\$0	\$1,000,000	\$0
Mozambique*	10-Sep-07	\$98,850	\$95,341	\$0	\$95,341	\$3,509
Regional MNA	1-Mar-07	\$976,899	\$976,899	\$0	\$976,899	\$0
Sierra Leone*	20-Dec-06	\$94,300	\$84,772	\$0	\$84,772	\$9,528
Tajikistan**	22-Feb-07	\$1,500,000	\$1,494,131	\$0	\$1,494,131	\$5,869
Uganda-1*	21-May-07	\$94,300	\$93,321	\$0	\$93,321	\$979
Uzbekistan	18-May-07	\$2,960,275	\$2,942,854	\$0	\$2,942,854	\$17,421
Yemen-1*	10-Feb-07	\$57,260	\$53,881	\$0	\$53,881	\$3,379
Zambia	22-Dec-06	\$999,552	\$841,168	\$0	\$841,168	\$158,384
TOTALS		\$27,716,472	\$13,306,724	-\$108,017	\$13,198,707	\$13,470,329

*Rapid Assessment Grants

**Co-financing Grants

***Bank-Executed Grants

ANNEX 3 – GRAPH OF GRANT DISBURSEMENTS



ANNEX 4 – REGIONAL FUNDING REQUIREMENTS

Africa Region											
Country	AHI Grant Proposal		Funding Source (in US\$ million)							Staff Contacts	
	Name	Grant Type	Bank Financing		PHRD		AHI Facility				
			IBRD	IDA Credit	IDA Grant	Grant Amount	Grant Amount	Status	Date		
Benin	Strengthening Epidemiological Surveillance for an Effective Influenza Prevention and Control	Stand Alone						Nil	Withdrawn	30-Sep-10	Ayite-Fily D'Almeida
Cameroon	Avian and Human Influenza Prevention and Control Project	Stand Alone						1.270	Approved	18-Oct-07	Manievel Sene
Republic of Congo	Avian Influenza Emergency Preparedness Response	Stand Alone						1.000	Legally Closed	1-Nov-10	Mahamat Goadi Louani
Liberia-1	Rapid Assessment	Stand Alone						0.094	Legally Closed	31-Jul-08	Yves Jantzem
Liberia-2	Avian Influenza Preparedness	Stand Alone						Nil	Withdrawn	28-Jun-10	Yi-Kyoung Lee
Malawi	Avian Influenza Prevention & Control	Stand Alone						1.000	Legally Closed	25-Mar-10	Sheila Dutta
Mauritania	Rapid Assessment	Stand Alone						0.030	Legally Closed	16-Jun-08	Cherif Diallo
Mozambique	Rapid Assessment	Stand Alone						0.099	Legally Closed	30-Nov-09	Daniel Sousa
Sierra Leone	Rapid Assessment	Stand Alone						0.094	Legally Closed	29-May-09	Yves Jantzem
Uganda-1	Rapid Assessment	Stand Alone						0.095	Legally Closed	1-Dec-08	Wilson Onyango Odwongo
Uganda-2	Avian and Human Influenza Preparedness & Response Project	Co-financing		10.000				2.000	Approved	10-Sep-08	Wilson Onyango Odwongo
Zambia	Avian Influenza Prevention & Control	Stand Alone						1.000	Legally Closed	29-Sep-09	Alex Mwanakasale
Totals by Source			-	10.000	-	-	-	6.682			

Europe and Central Asia Region											
Country	AHI Grant Proposal		Funding Source (in US\$ million)							Staff Contacts	
	Name	Grant Type	Bank Financing		PHRD		AHI Facility				
			IBRD	IDA Credit	IDA Grant	Grant Amount	Grant Amount	Status	Date		
Armenia	Avian Influenza Preparedness Project	Cofinance		6.250		0.804		2.000	Legally Closed	20-Jan-11	Brian Bedard
Georgia	Avian Influenza Control and Human Pandemic	Cofinance		3.500	3.500	1.400		1.600	Legally Closed	22-Feb-10	Doina Petrescu
Kyrgyz Republic	Avian Influenza Control and Human Pandemic Preparedness & Control	Cofinance			4.000	1.000		1.150	Approved	14-Apr-08	Brian Bedard
Moldova	HPAI Preparedness and Response Project	Cofinance		4.000	4.000	0.500		1.000	Legally Closed	8-Jan-10	Anatol Gobjila
Regional ECA	Regional Training in Animal and Human Health Epidemiology	Stand Alone						3.000	Approved	15-Nov-10	Brian Bedard & Nedim Jaganjac
Tajikistan	Avian Influenza Control and Human Pandemic Preparedness & Response	Cofinance			5.000			1.500	Legally Closed	16-Apr-10	Bobojon Yatimov
Turkmenistan-1	Avian Influenza Control and Human Preparedness & Response Project	Stand Alone						1.077	Legally Closed	9-Nov-10	Tamer Samah Rabie
Turkmenistan-2	Avian Influenza Control and Human Preparedness & Response Project	Stand Alone						0.893	Approved	16-Nov-07	Tamer Samah Rabie
Uzbekistan	Avian Influenza Control and Human Preparedness & Response Project	Stand Alone						2.960	Legally Closed	1-Apr-10	Dilshod Khidirov
Regional ECA	Regional Epidemiology Training							1.830	Pipeline		Brian Bedard

East Asia and Pacific Region										
Country	AHI Grant Proposal		Funding Source (in US\$ million)						Staff Contacts	
	Name	Grant Type	Bank Financing		PHRD		AHI Facility			
			IBRD	IDA Credit	IDA Grant	Grant Amount	Grant Amount	Status		Date
Cambodia	Avian and Human Influenza Control & Preparedness Emergency Project	Cofinance			6.000	3.000	2.000	Approved	5-Mar-07	Mudita Chamroeun
China-1	Capacity Building for HPAI Prevention & HI Pandemic Preparedness	Stand Alone					2.650	Legally Closed	27-Dec-10	Shiyong Wang
China-2	Capacity Building for HPAI Prevention & HI Pandemic Preparedness	Stand Alone					3.500	Approved	22-Dec-09	Shiyong Wang
Indonesia	Avian and Human Influenza Control & Preparedness Project	Stand Alone				5.000	10.000	Legally Closed	4-Aug-10	Shobha Shetty
Lao PDR	Avian and Human Influenza Control & Preparedness Project	Cofinance			4.000	2.000	2.000	Approved	8-Aug-06	Hope C. Phillips
							2.400	Approved	6-Aug-07	
							0.120	Approved	18-Jan-09	
Mongolia	Avian Influenza Control and Human Influenza Preparedness & Response	Stand Alone					4.656	Approved	21-Apr-08	Shiyong Wang
Myanmar	Support for Control of Highly Pathogenic Aian Influenza	Stand Alone					1.315	Approved	16-May-07	Paavo Eliste
Vietnam	Second Avian and Human Influenza Control & Prevention Project	Cofinance		20.000		5.000	10.000	Approved	15-Dec-06	Binh Thang Cao
Vietnam	Avian and Human Influenza Control & Preparedness Project	Cofinance			10.000		13.000	Pipeline		
China	Avian and Human Influenza Control & Preparedness Project	Stand Alone					3.000	Pipeline		
Mongolia	Avian Influenza Control and Human Influenza Preparedness & Response	Stand Alone					2.500	Pipeline		
Myanmar-2	Supplemental Grant – Support for Control of Highly Pathogenic Aian Influenza						0.300	Pipeline		
Totals by Source			-	20.000	20.000	15.000	57.441			

Latin America & Caribbean Region										
Country	AHI Grant Proposal		Funding Source (in US\$ million)						Staff Contacts	
	Name	Grant Type	Bank Financing		PHRD		AHI Facility			
			IBRD	IDA Credit	IDA Grant	Grant Amount	Grant Amount	Status		Date
Belize	Influenza Detection and Response	Stand Alone					0.502	Approved	9-Nov-09	Carmen Carpio
Colombia	Avian Influenza Prevention and Control Project	Stand Alone					0.890	Approved	2-Dec-10	Diego Arias Carballo
Dominican Republic	Avian Influenza Pandemic Preparedness Project	Stand Alone					1.000	Approved	12-Aug-08	Diego Arias Carballo
Haiti	Avian Influenza Pandemic Preparedness Project	Cofinance			1.557		Nil	Cancelled	23-Apr-09	Diego Arias Carballo
Honduras	Highly Pathogenic Avian Influenza Prevention and Control Project	Stand Alone					0.300	Approved	19-May-08	Marie-Helene Collion
México	Influenza A/H1N1N Prevention	Cofinance	25.000				1.700	Approved	24-Aug-09	Claudia Macias
Nicaragua	Strengthening Surveillance and Evaluation for an Effective Response to Epidemiological Emergencies	Stand Alone					0.300	Approved	18-Apr-10	Marcelo Bortman
Regional LCR-1	Strengthening of CAS for Avian Flu Preparedness	Stand Alone					0.500	Legally Closed	14-Sep-10	Michael G. Carroll
Regional LCR-2	Strengthening Regional Surveillance and Response to Transboundary Diseases	Stand Alone					0.200	Pipeline		
Totals by Source			25.000	-	1.557	-	5.392			

Middle East & North Africa Region										
Country	AHI Grant Proposal		Funding Source (in US\$ million)						Staff Contacts	
	Name	Grant Type	Bank Financing		PHRD	AHI Facility				
			IBRD	IDA Credit	IDA Grant	Grant Amount	Grant Amount	Status		Date
Djibouti	Avian Influenza Prevention and Control Project	Stand Alone					2.111	Approved	7-Sep-06	Jean-Philippe Tré
Egypt	Avian and Human Influenza Control & Prevention Project	Stand Alone					7.142	Approved	18-Apr-07	Maurice Saade
Morocco	Avian Influenza Preparedness Project	Stand Alone					0.888	Approved	10-Nov-09	Pierre Rondot
Regional MNA - 1	Sub-regional Avian and Pandemic Influenza Preparedness (MECIDS-1)	Stand Alone					0.977	Legally Closed	1-Jun-10	Colin Scott
Regional MNA - 2	Sub-regional Avian and Pandemic Influenza Preparedness (MECIDS-2)	Stand Alone					0.311	Approved	7-Oct-10	Eileen Brainne Sullivan
Syria	Avian Influenza Preparedness Project	Stand Alone					1.316	Approved	23-Mar-09	Maurice Saade
Tunisia	Avian Influenza Preparedness Project	Stand Alone					0.653	Approved	9-Apr-08	Maurice Saade
West Bank & Gaza	Avian Influenza Prevention & Control Project	Cofinance	10.000 (Cancelled)				3.000	Approved	22-Sep-06	Maurice Saade
Yemen - 1	Strengthening the Integrated National Action Plan for Svlvan and Human Influenza	Stand Alone					0.057	Legally Closed	31-Aug-09	Jean-Philippe Tré
Yemen - 2	Avian Influenza Prevention and Control Project	Stand Alone					1.080	Approved	11-Aug-08	Pierre Rondot
Totals by Source			-	-	-	-	17.535			

South Asia Region										
Country	AHI Grant Proposal		Funding Source (in US\$ million)						Staff Contacts	
	Name	Grant Type	Bank Financing		PHRD	AHI Facility				
			IBRD	IDA Credit	IDA Grant	Grant Amount	Grant Amount	Status		Date
Afghanistan	AHI Preparedness and Control Project	Cofinance			4.000		5.000	Legally Closed	29-Dec-10	Usman Qamar
Bangladesh	Avian Influenza Preparedness and Response Project	Cofinance		13.000			2.000	Approved	16-Jul-07	Ousmane Seck
Bhutan - 1	National Influenza Preparedness and Response Project Phase I	Stand Alone					1.300	Legally Closed	16-Dec-10	Sandra Rosenhouse
Bhutan - 2	National Influenza Preparedness and Response Project Phase II	Stand Alone					1.200	Approved	9-Dec-08	Sandra Rosenhouse
Regional SAR - 1	Epidemiological Training (Phase 1)	Stand Alone					3.836	Approved	11-Jan-10	Norman Piccioni
Regional SAR - 2	Epidemiological Training (Phase 2)	Stand Alone					3.866	Approved	9-Dec-10	Norman Piccioni
Sri Lanka-1	Avian Influenza Preparedness and Response Project	Stand Alone					1.433	Approved	15-Oct-07	Vichitrani Gunawardene
Sri Lanka-2	Avian Influenza Preparedness and Response Project	Stand Alone					5.000	Pipeline		
Totals by Source			-	13.000	4.000	-	23.635			

ANNEX 5: PROJECT IMPLEMENTATION DETAILS

This section reports on activity among grants that disbursed positive amounts showed implementation gains in the second half of 2010. Five projects (in Egypt, Nicaragua, Syria, Tunisia, and West Bank & Gaza) had little activity in the second half of 2010, but disbursed funds in the first quarter of 2011. The Quarterly Report for the third quarter of 2011 will include implementation notes for these projects. In addition, the projects in Belize, Honduras, Mexico, and Nicaragua have not disbursed any funds for at least three quarters. Future reports will contain information about any revival of activity in these projects.

Bangladesh

\$2.0 million original grant; \$1.04 million available, April 2011;

Grant closure date: June 30, 2011

After considerable delay, the government and FAO were able to resolve differences, and the FAO technical support team was mobilized in October 2010. In the second half of 2010, the project trained over 4,000 farmers, poultry traders, community leaders, representatives of non-governmental organizations, and staff of the Livestock Department, on preventive measures and biosecurity. This brings the total number of recipients of this training under the project to more than 22,000. In addition, the project assumed responsibility for surveillance using the short messaging services Gateway, initiated by USAID. Under the project, surveillance coverage will be expanded from 260 upazillas (sub districts) to over 300 upazillas.

Bhutan

\$2.5 million original two grants (total); \$0.58 million available, April 2011;

Grant closure date (final grant): January 31, 2011

The closure date for the grant was extended, from November 30, 2010 at the time of the last Report, to allow completion of work under ongoing contracts.

Ministry of Health, thanks to improved surveillance, quickly identified several outbreaks of H1N1. The major planned activity completed in the second half of 2010 was the Knowledge, Attitudes, and Practices (KAP) survey, fielded in October.

Several activities were dropped because of implementation delays, including the upgrading and equipping of isolation rooms in five hospitals (one was upgraded, but no equipment was procured), district-level pandemic planning, and two system-wide field simulations. However, overall the project made a major contribution to Bhutan's response capacity, as evidenced by the successful containment of three outbreaks in March 2010. In addition, the project has established a robust influenza-like illness (ILI) surveillance network, created in-country capacity to confirm influenza in clinical samples, trained health workers, and developed guidelines and standard operating procedures for disease surveillance, investigation, case management, and

outbreak response. As a result of the project, Bhutan can now diagnose and confirm influenza, and has passed all three tests of its response to outbreaks.

Cambodia

\$2.0 million original grant; \$1.11 million available, April 2011;
Grant closure date: June 30, 2011

Twelve provincial meeting sessions were conducted to disseminate knowledge about pandemic preparedness tools. 1,788 veterinary health workers were trained in 194 districts.

China

\$6.2 million original two grants (total); \$1.32 million available, April 2011;
Grant closure date (second grant): November 30, 2011

The closure date for the grant has been extended, from November 30, 2010 at the time of the last Report. Despite the additional time this allows for implementation and the consequent downward revision of the activity risk rating from Substantial to Negligible, the project still feels time pressure. For example, because of concern over limited time, the original plan of training ten professionals to the attainment of Master's degree in epidemiology has been changed to training seventeen people on basic epidemiology for one month in Canada. The training has been completed.

However, overall project implementation was highly satisfactory, and out of eighty-one planned activities, forty-seven have been completed and the remaining activities are under implementation. Highlights of implementation in the second half of 2011 included careful and thorough work on operational research studies of establishment of AI-free compartment, improvement of AI surveillance strategies, and HPAI risk reduction and bio-security improvement of small scale poultry farms. In addition, all the project counties have been assessed with the improved influenza pandemic preparedness assessment tool, and remedial recommendations, for the issues identified in the assessments, have been provided to the counties. Risk communication plans have been developed and tested in two counties. Training courses on epidemiology have been completed in Anhui and Liaoning provinces; the provincial level field epidemiology training was the first of its kind in China.

Dominican Republic

\$1.0 million original grant; \$0.52 million available, April 2011;
Grant closure date: May 30, 2011

In the second half of 2010 the project purchased laboratory equipment and trained personnel to test for avian flu and other diseases, monitored wild birds in migration routes, and supported a constant bilateral dialogue with Haiti on transborder issues with avian flu. In addition, the

project trained two hundred staffers in communication, and forty-one other ministry staff in bird health.

Kyrgyz Republic

\$1.2 million original grant; \$0.09 million available, April 2011;

Grant closure date: December 31, 2010

At the midterm evaluation, failing report of any cases of HPAI in the country, and monitoring results that showed the absence of antibodies to avian influenza, the project objectives were expanded to include preparation for pandemic emergencies from other zoonotic or infectious diseases in humans. A mechanism of compensation payments was developed. The compensation fund was originally planned to be \$1 million, but this was reduced to \$650 thousand, in view of the lack of evidence of HPAI in the country.

In the second half of 2010, 45,000 posters and 120,000 booklets, dealing with topics such as zoonotic diseases, personal hygiene, and quarantine regulations, were produced for dissemination among farmers and health care facility visitors. In addition, a report on monitoring of autumn migratory birds was prepared.

Lao PDR

\$4.5 million original three grants (total); \$1.12 million available, April 2011;

Grant closure date: June 30, 2011

The project closure date is expected to be extended by at least six months. In the second half of 2011, “the project has been, as recommended, utilizing the AHIF2 funds by charging all expenses under the IDA & AHIF1 and PHRD to AHIF2.” So, as with Uganda, the high disbursement levels in this period do not indicate high implementation levels for activities funded under the grant.

Biosecurity training for backyard poultry farmers is being implemented continuously in the target provinces, with good progress being made in the second half of 2010. Construction has begun on the National Animal Health Center laboratory. In addition, the project financed secure transportation and operating costs for the vehicles for five hospitals, and studies on and provision of health care waste management equipment at seven hospitals.

Mongolia

\$4.7 million original grant; \$1.05 million available, April 2011;

Grant closure date: November 30, 2011

The closure date for the grant has been extended, from November 30, 2010 at the time of the last Report.

All activities planned under the human health component have been completed. All activities under the animal health component are near completion, and most of the activities planned under the emergency management component have been completed. The activities implemented under the project have contributed to national policy development, and have made a unique contribution to the enrichment of the global knowledge base concerning the influence of migration of wild birds on the spread of avian influenza, and the ecology of avian influenza among wild birds.

In the second half of 2010, the project completed a pandemic risk modeling and vulnerability assessment, and all six project aimags (provinces) and cities have conducted at least one drill on integrated response to a suspected outbreak of AI among poultry. In addition, the project developed and distributed early warning and reporting guidelines for human infectious diseases to all aimags. The project conducted a valuable serological study of the presence in healthy populations of antibody to novel Influenza A (H1N1), an earlier circulating H1N1, seasonal influenza H3N2, and influenza B. The project continued to support surveillance among wild and domestic birds. The project gave specialized training, to selected professionals, in hospital infection surveillance, intensive care, operation of ventilators, and virus genetic sequencing. The project equipped two provincial veterinary laboratories, and trained the staffs for conducting bacteriological, virological, serological, and parasitological testing. Finally, the project set up and trained twenty-one multi-sectoral Rapid Response Teams in five priority aimags and one city.

Myanmar

\$1.3 million original grant; \$0.07 million available, April 2011;

Grant closure date: December 31, 2011

In July, the project completed a national database on poultry and pig farms, with data and geographical coordinates from 6,154 commercial poultry farms, and 1,859 commercial pig farms. In addition, in the second half of 2010, the project completed an activity assessment of lab functions, which confirms that domestic quality assurance schemes in regional labs have attained good standards; national and regional labs processed 7,934 duck serum samples, collected as part of the HPAI surveillance and outbreak investigation program. The project drafted guidelines for compensation, and worked with the Livestock Breeding and Veterinary Department on implementation of the guidelines. In December, the project completed draft guidelines for outbreak containment in backyard situations. In addition, the project completed and delivered a risk assessment for Mandalay/Yangon, and for Irrewaddays/Inle Lake. Finally, the project provided three days' field training to each of 88 fourth-year veterinary students and six professors.

South Asia Regional I

\$3.8 million original grant; \$1.17 million available, April 2011;

Grant closure date: December 31, 2011

The closure date for the grant has been extended, from November 30, 2010 at the time of the last Report.

The grant is for training experts, to increase capacity in epidemiology and biosecurity in seven countries in South Asia. In the second half of 2010, the project completed the first half of distance training for sixty-seven veterinarians and doctors, almost all of whom are expected to complete master's degree programs before the project ends.

Turkmenistan

\$2.0 million original grant; \$0.14 million available, April 2011;

Grant closure date: June 30, 2011

The closure date for the grant has been extended, from December 31, 2010 at the time of the last Report.

The project has achieved all its development objectives. It has established intersectoral coordination mechanisms between ministries and agencies responsible for zoonotic diseases, increased public awareness of avian influenza risks and mitigation measures, and increased the surveillance, diagnostic, and containment capacity of the country's veterinary and health sectors. Standard operating procedures related to HPAI were developed under the project, and staff have been trained in their use. Master and cascade epidemiological training has been provided to Ministry of Health and Veterinary Union staff. Finally, the Sanitary Epidemiological Station and the Central Veterinary Laboratory have both been renovated and equipped, and their staff have received training that enables them to perform all necessary diagnostic tests for HPAI.

Although a compensation mechanism does not yet exist in Turkmenistan, the government has agreed to allocate funds for compensation payments in the event of an AI outbreak.

Uganda

\$2.1 million original two grants (total); \$0.17 million available, April 2011;

Grant closure date: June 30, 2011

The grant disbursed over eighty percent of its original amount in the second half of 2010. The grant and the associated IDA credit have been slow to start, and, as the deadline approached for grant closure, the grant was restructured to finance the procurement of vehicles and office supplies for the combined project, and to hire experts. Implementation is expected to accelerate in the first half of 2011.

There has been some modest progress towards implementation, in the resolution of the issue of separate accounts for the grant and the credit, in the initial provision of funds to all

implementing agencies, and in the start of procurement for and staffing of the implementation support teams. However, there is apparent continued weakness of coordination within and between the implementing agencies, and because of slow implementation, and consequent slow disbursement, the project has been placed on the watch list of the current Bank portfolio. The progress to date includes: (i) cut number of isolation wards planned from six to two; (ii) three technicians underwent training in diagnostic techniques in Austria in Oct/Nov 2010; (iii) site for BSL-Level 3 lab selected; (iv) field visits conducted in a number of districts; and (v) draft compensation policy has been prepared.

Vietnam

\$10.0 million original grant; \$1.55 million available, April 2011;

Grant closure date: June 30, 2011

The closure date for the grant has been extended, from December 31, 2010 at the time of the last Report.

In the second half of 2010 the Vietnam Avian and Human Influenza Control and Prevention Project (VAHIP) neared completion of construction works to upgrade the largest wholesale live bird market in Hanoi and to build a poultry destruction and disposal site in the border province of Lang Son, to control smuggled poultry from China. To improve biosecurity on farms, the project implemented 80 demonstration sites to provide training for 1,760 small poultry farmers, and piloted biosecurity Standards of Practice on 58 volunteer commercial farms. In addition, the project is introducing an improved surveillance system to all project provinces, based on results of pilots implemented in Thai Binh and Long An in 2009.

The project outcome measures, and intermediate outcome measures, confirm the successful progress of this project. In the past six months, the project has reduced the turnaround time for laboratory confirmation of reported outbreaks to affected communes, from 5.2 days to 3 days for animal health tests, and to 4.75 days for human health tests. In addition, the project has reduced the fatality rate of human H5N1 cases to 28 percent, below the target rated of 35 percent; the absolute number of cases and fatalities has also declined. The project is on target to meet or exceed all its outcome targets by the closure date. This date has been extended to June 30, 2011. Additional Financing for the VAHIP, of about \$25 million (including \$13 million from the AHI Grant), will consolidate the achievements of the project and scale up the successful operations between 2011 and 2014.

Yemen

\$1.1 million original two grants (total); \$0.86 million available, April 2011;

Grant closure date: June 30, 2011

Despite difficulties with security, the project has made some modest gains. A Stage 1 HPAI survey showed that Yemen continues to be free of H5N1. Nine high-risk governorates have

received communications equipment. The project has maintained two technicians' work in entering and analyzing data for disease mapping. Three additional technicians were trained in surveillance methods. Evaluation for level of biosecurity in poultry farms in Yemen was finalized, complete with detailed surveillance maps. Two technicians were trained for diagnostic services, and nine other workers (including five women) were trained in diagnostic methods.

Since its inception, the project has contributed to the production of a new vaccine to protect poultry, to the publication of a paper on livestock policy, to the training of 49 community animal health workers, and to the rehabilitation and equipment of the Central Veterinary Laboratory in Sana'a, as well as three regional laboratories.