PUBLIC AND PRIVATE FUNDING SOURCES FOR SUSTAINABLE ANIMAL RABIES CONTROL PROGRAMMES

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Funds for disease control programs are traditionally sourced from local and national governments, and international development aid. Because rabies control is often not among the disease priorities of the public health nor agriculture ministries, mobilization of resources for effective comprehensive implementation has always been a challenge. On the other hand, being a disease that crosses different sectors of society and diverse fields of discipline, a number of rabies control programs in humans and animals have sourced funds from different sectors at different levels, from the grassroots to the corporate and civil society organizations.

Actual implementation of intersectoral rabies control programs often require and depend on a regular budget allocation as mandated by law. Field implementers and partner communities may face constraints such as high operational cost, wide regions of coverage and labour intensity. Many innovative approaches have been attempted to overcome these problems.

A recent example of a successful, sustainable community-based integrated rabies control program is the Bohol Rabies Project, implemented as a partnership between the Provincial Government of Bohol, Philippines and the Global Alliance for Rabies Control (GARC). The estimated operational cost was USD 498,000 over 4 years. Cost sharing by different stakeholders was achieved through mobilization of financial and human resources. GARC contributed 33% through funds raised from socio-civic partners. The Philippine Government contributed 60% in collaborative funds. Remaining funding came from the WHO Country Office and local NGOs. Community volunteers were organized to augment the human resource requirement. Funds were generated by the communities through collection of dog registration fees, all of which were re-invested back to establish a self-sustaining funding stream. Sustainable and meaningful field operation was realized when actual acceptance and ownership of the program at the community level was achieved. Attaining the goal of rabies control and eventual freedom from disease became a shared concern.