Awareness & communication programmes for successful rabies control at the animal source

Global Alliance for Rabies Control

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Communication and rabies prevention and control

- Introduction
- Targeting communications
- Opportunities
- Examples
- Conclusions and recommendations
Rabies: Tenents of Prevention and Control

- Dog rabies vaccination, *en masse*
- Minimization of human exposures to infected animals
- Prompt wound care and prophylaxis with vaccine and rabies immune globulin after exposure
- Education
- Improved surveillance
- National laws in effect
Rabies: Prevention requires intersectoral support

- Human
- Animal
- Education
- Communication & Advocacy
- Financial
- Legal
- Volunteerism
- NGOs
Communicating our message

Practical approaches to rabies prevention

- Infrastructure
  WHAT DO WE NEED TO HAVE IN PLACE?

- Operational
  HOW ARE WE GOING TO DO IT?

- Roles & responsibilities of rabies control
  WHO DOES WHAT?

- Information on how to set up effective communications
  HOW CAN WE REACH THE PEOPLE AT RISK?
Challenge: Transforming research into behavior change
Transforming research into behavior change
Transforming research into behavior change

CHANGE

Communication

Information

Research
Transforming research into behavior change

CHANGE

Communication

Information

Research
Transforming research into behavior change

CHANGE

Communication

Information

Research
Instituting Change

Citizens - Professionals
- Responsible pet ownership
- Vaccinating pets/spaying & neutering etc
- Abiding by existing laws
- Knows what to do if bitten

Communities
- Reducing free-roaming dogs
- Support & INVOLVED in rabies pgms
- Increased awareness
- “Stewards of the program”

Governments
- National rabies control pgm in place
- National laws
- Intersectoral committees
- Build rabies control into budget
- Surveillance activities in place

International Health Orgs
- Animal and Human public health working together
- Include rabies in focus diseases
- Recommendations current

Funding Agencies
- Increased funding

Sustainable projects

Families, teachers, physicians, veterinarians, animal welfare, etc
Sanitation, Police, Vet services, local public health, NGOs
MoH, MoA, MoE, Legal, Financial etc
Networking

Increased funding

SUSTAINABLE projects

GLOBAL ALLIANCE FOR RABIES CONTROL

INSTITUTING CHANGE
Partners for Rabies Prevention (PRP)

- Informal group of stakeholders – established 2008
  - Public and private: Bring time, talent, treasure to table
  - GARC, CDC, FAO, OIE, WHO, WSPA, Universities, Funders etc.
  - Discuss common strategies

- Five pillars:
  1. Advocacy
  2. Communications
  3. Research
  4. Capacity building
  5. Pilot projects

- Activities
  - Road map for rabies prevention & control: 2008
  - Blueprint for Canine Rabies Control: 2009–2010
  - Currently: Evaluate the global burden of rabies
Opportunities – Communications tools
Reaching more people

- **World Rabies Day** – SEPTEMBER 28th
- Web-based educational information
  - [www.rabiesblueprint.com](http://www.rabiesblueprint.com)
  - [www.worldrabiesday.org](http://www.worldrabiesday.org)
  - [www.globalrabiescontrol.com](http://www.globalrabiescontrol.com)

- **Webinar** – SEPTEMBER 20, 21st
- School-based educational curriculum
- Empowering local communities
- GARC Repository of educational information for free downloading – please donate! [peter.costa@worldrabiesday.org](mailto:peter.costa@worldrabiesday.org)

- **Newsletter** – “Rabid bytes”
Blueprint for Canine Rabies Control
And human rabies prevention

PART 1: ELIMINATION OF CANINE RABIES

An initiative of the Partners for Rabies Prevention
Overview of Rabies blueprint

- Global partnerships and efforts for rabies prevention
- From blueprint to local implementation

www.rabiesblueprint.com
- Free access on line
- Examples of ongoing programs
- Links to documents
- Information on
  - Cost
  - Planning
  - Funding

www.rabiesblueprint.com
Blueprint: The Concept

- Aimed at assisting and guiding individual countries on implementation of canine rabies control programs
  - If rabies is present
  - If rabies is reintroduced after a period of absence
- New concept – not meant to replace existing documents

www.rabiesblueprint.com
Overview

- Global partnerships and efforts for rabies prevention
- From blueprint to local implementation
- Utilization:
  - Africa, America & Asia: International workshops on development and implementation of the communications plan delineated in the Blueprint
  - Translated into Russian, Spanish, Arabic, French, Portuguese – EU
  - Currently developing next version including oral rabies control – using fox rabies as an example – PRP

www.rabiesblueprint.com
Principles of Blueprint

- Simple format, user-friendly – Q & A
- Widely available – web-based
- Updated regularly and additional info added easily
- Understandable by a wide range of users – all those concerned with implementing the programme (from government officials to people in the field)
- Concise, clear key messages, but comprehensive (hyperlinked)
- Addresses common misperceptions
- Examples: countries that have done it – case-studies
- Should provide optimism that it is possible!

www.rabiesblueprint.com
Components of the Blueprint and of the rabies control programme

Introduction

Roles and Responsibilities

Infrastructure, legislative framework, costs and funding
- Infrastructure
- Legislation
- Costs and funding

Communications plan

Operational activities
- What do we need to know beforehand?
- What do we need to buy?
- Who do we need to train and in what?
- What are we going to do – dog component?
- What are we going to do – human component?
- Evaluation
- Mechanisms for sustainability

1. Find out about the occurrence of rabies in your target area
2. Identify responsible agencies that can help you
3. Make sure the infrastructure is adequate
4. Identify relevant laws and by-laws
5. Be creative about fund raising
6. Make sure appropriate surveillance measures are in place
7. Estimate the number/type of dogs in your target area
8. Train personnel
9. Raise awareness
10. Get the supplies you need
11. Ensure sufficient provision of human biologicals, but prevent their overuse
12. Think about mechanisms for sustainability
13. Implement strategies to maintain freedom from rabies
14. Implement dog mass vaccination and, if necessary, dog population management measures
15. Evaluate if the programme has been successful
Introduction

- Introduces the users to the Blueprint and how it works
- Defines the target audience
- Basic information about rabies
- Measures available for rabies control with emphasis on cost-effectiveness of dog vaccination vs human rabies prophylaxis
Section 3 – Communications plan

- Importance of communication planning to raise awareness
- Communication planning framework
- Guidelines for development of country-specific communications plans for rabies
Section 4 – Operational activities

- Epidemiological information needed
- Supplies (field, labs, clinics)
- Training
- Dog ecology surveys, surveillance, dog rabies control (vaccination, population management etc.), outbreak management
- Basics of human rabies prophylaxis
- Evaluation
- Mechanisms for sustainability
Examples from the Blueprint
From the supplies needed in the field...

**Items for registration/certification:**
- Tables and chairs – either portable ones or alternatively these can be borrowed from local schools or similar.
- Dog registration books - these should be pre-printed with columns including the name of the owner, registration number, ‘address’ or village/subvillage, animal species (i.e. dog or cat), dog/cat name, age, sex and previous vaccination history and a place for indicating the date and location of the campaign.
- Pens – at least 2 per brigade.
- Vaccination certificates - 110. The certificate should include the name of the owner and address, animal species (i.e. dog or cat), dog/cat name, age, sex, manufacturer, serial number and type of vaccine used, dates of vaccination, and signature of vaccinator [link 51]. Additional information can be included on the back of the certificate.

**Items for vaccination:**
- Vaccines: 110 doses assuming there will be some wastage. Animal vaccines can be injected or administered orally:
  - WHO/OIE recommended parenteral vaccines are cell-culture vaccines which have proved to be safe, effective and relatively inexpensive. If vaccines are produced locally published guidelines must be followed. Click [here][link 52] for more information on animal vaccines.
  - Click [here][link 53] for information on vaccines for oral vaccination programmes (for dogs that cannot be accessed easily).
...to the strategies available for dog vaccination

- In communities where a substantial proportion of the total dog population is accessible for vaccination (i.e. many communities in Africa, Latin America and Asia) **parenteral immunization** should be adopted. Click here to learn about restraining [link 55] and inoculation [link 61] techniques for parenteral immunization. If dogs are less accessible (e.g. in communities with many free-roaming and poorly supervised dogs), **oral vaccination** [link 53] can be used exclusively or in conjunction with parenteral vaccination [CASE STUDY 6]. Be aware of the fact that depending on the region dogs may prefer locally made baits instead of those provided by the supplier.

- Different strategies can be used for domestic dog vaccination. A single strategy or a combination of strategies should be selected on the basis of the setting or known socio-cultural factors. Vaccination strategies available for parenteral and oral immunization are as follows:

  - **Continual vaccination at fixed vaccination posts** in well-recognized sites to which dog owners take their dogs/cats (including private or government veterinary clinics) – Although this technique requires little government effort, it may fail to reach many owned and all unowned dogs resulting in poor population coverage or coverage that is difficult to measure.

  - **Mobile teams** that set up temporary vaccination points at a central location within individual villages or cities conveniently located for dog owners (central-point vaccination strategy). This strategy is relatively inexpensive and can achieve the recommended level of coverage if vaccination is provided free-of-charge [CASE STUDY 7]. It may be indicated to make a judgement on the size of catchment areas of temporary clinics and decide on their spacing accordingly.
**CASE STUDY 7 – An example of central-point vaccination programmes.**

Mobile teams vaccinate free of charge over 30,000 dogs each year in agro-pastoralist villages adjacent to the Serengeti National Park (north-western Tanzania). The vaccination date is communicated to dog owners a week in advance through letters to village authorities and by posting posters at popular places (Fig. 1). An advertising team delivers a reminder one day before the vaccination (Fig. 1). On the vaccination day a temporary vaccination station is set up at a central village location. Dogs brought by owners are registered (Fig. 2), vaccinated by injection (Fig. 3), and certificates for each dog vaccinated are given to owners (Fig. 4). This strategy has repeatedly achieved the recommended level of at least 70% needed to prevent rabies outbreaks.

**Fig. 1 – Advertising using posters and megaphones**

**Fig. 3 – Vaccination by injection**

**Fig. 2 – Registration**

**Fig. 4 – Certification**
Many links to specific SOPs...

Injecting the dog

The skin needs to be held in preparation for penetration of the needle, and although this will depend on the individual preferences of the vaccinator, the following might be helpful:

**TECHNIQUES FOR RESTRAINING DOGS**

Restraint of the patient is a very important, and needs to be carefully and humanely to ensure the safety of handlers and vaccinators.

1. **Small Dogs:**
   a. It is seldom possible to find a raised surface on which to put the dogs for vaccinations in a rural campaign and bending down has its drawbacks as the dog could have traction on the ground which will allow it to move. The best is for the owner to pick the dog up for vaccination (see below). Dog is secure and cannot turn and bite the vaccinator.

   **Correct Method**
   1. Lift skin on neck
   2. Inject as shown parallel to the skin fold.

   ![Correct Method Image]

   There are different opinions on the exact area where the vaccine must be placed on the neck, whether it should be along the midline above the vertebra or to the left or right, generally it is accepted doing it to either side of the mid line.

   ![Incorrect Method Image]

   **Incorrect Method**
   1. If the needle is inserted at right angles to the skin fold it is easy to push the needle through both sides.

   ![Incorrect Method Image]

2. **Restraint of large Dogs:**
   1. Not ideal but common
   2. Can work with calm dogs
   3. Often dogs react to being touched by someone they cannot see

   ![Restraint of large Dogs Image]
...and to published guidelines, studies, etc.
Dr Tiziana Lembo

Blueprint Project Coordinator
World Rabies Day – September 28

- World Rabies Day – SEPTEMBER 28th
- Logos available in 40 languages
- GARC Repository of educational information for free downloading – please donate! peter.costa@worldrabiesday.org

- www.worldrabiesday.org
- www.globalrabiescontrol.com
Expand the current scope and impact of WRD

- a single ‘Day of action’ - a year-round initiative to mobilize governments to support national rabies prevention programs
World Rabies Day
September 28

- Since September 2007...
  - 135 participating countries
  - 150+ participating schools of public health, veterinary and medical colleges have hosted one or more ‘rabies-awareness events
  - ~300K Web visitors, 214 countries/territories

www.worldrabiesday.org
Global Impact of World Rabies Days

Since September 2007...

- >1200 reported events
- 5 million animals vaccinated
- 150 million people educated

Children bringing pets to be vaccinated in Napak, Uganda during WRD 2010
Photo: Dr Inangolet Francis Olaki

WRD parade in Indian village
Photo: Dr Ashwath Naryana
Impact of World Rabies Days

- New animal vaccination programs in endemic countries
- New and invigorated educational programs
- Global community networks
- Listed on UN website of globally observed health days

Classroom education in Iraq

Vaccination clinic in Mozambique
Mozambique

- **Prior to World Rabies Day 2007**
  - Dogs unvaccinated due to local superstition
  - Lack of support from government
  - Basic educational materials not available

- **As of World Rabies Day 2010**
  - Partnership between veterinary clinics and Veterinary University in Maputo
  - Multiple vaccination clinics held throughout Mozambique
  - National government funding rabies vaccinations on WRD
  - Education of locals; construction of animal record database
The World Rabies Days: Evaluation of the Impact

- Continuous evaluation of global programs
- Annual evaluation of World Rabies Day campaign
- In 2010, questions about the effort as a whole were included
  - 213 surveys returned: English, French, Portuguese, and Spanish
  - 96.3%: “Rabies Education Programs Are Saving Lives”
  - 89.6%: “World Rabies Day Is Making a Difference”
  - 95.0%: “Will Host a World Rabies Day Event in 2011”
Webinar – September 20, 21 2011

- First Webinar – 2010 – 34 countries were involved; >2000 participants interacted across the web

- Second Webinar – September 21, 22, 2012
  - Currently have 70 countries signed up
  - Room for a few more presentations
  - Click onto www.worldrabiesday.org for more information
  - **FOCUS:** canine rabies elimination; human rabies surveillance; prevention and intervention; wildlife rabies control; information and education campaigns; and building sustainable programs
Save the Date! WRD Webinar 2011

The Global Alliance for Rabies Control, in cooperation with the U.S. Centers for Disease Control and Prevention, is pleased to announce the second annual World Rabies Day Webinar to be held September 21-22, 2011. This Webinar brings together noted leaders in rabies research, One-Health advocates, professionals, students and World Rabies Day event planners in real-time to discuss the important public health issue of rabies while providing a forum for dialogue within and across disciplines.

- Frequently Asked Questions about the WRD Webinar
- Abstract Submission Form
- WRD Webinar Announcement

Registration

There is no cost to attend the live webinars but attendance is limited to the first 1000 registrants/logins. Space is limited - register early!

- Day 1 (Sep 21, 2011) Focus: Asia, Middle East, Europe and Africa. [Click here to Register]
- Day 2 (Sep 22, 2011) Focus: North America and South America. [Click here to Register]

Abstracts

You can now submit abstracts for the 2011 Webinar. The planning committee invites abstracts for
School-based curricula

- Philippines – Bohol as an example
  - Rabies education built into school subjects: English, math, local language class and science
- Have educated over 182,000 children on the island and enhanced sustainability
Innovative examples

• Adopt a village program as an example
Empowering communities

- Adopt a village program as an example
- Empowered the women of the village as the contact for dog bites

“I also take the responsibility of ensuring the completion of vaccination as per schedule. I feel proud that, I am involved in saving the life of my villagers from the most dangerous disease of rabies”

...Mrs. Kalavathi, 45 year old housewife from Tagachakuppe
Mapping neglected diseases in Latin America

In Latin America and the Caribbean, around 595 million people live in poverty. As neglected diseases often cause chronic long term disease, they can be considered both a cause and a consequence of poverty. In 2009, the Pan American Health Organization (PAHO) received a mandate to support the countries in the Region in eliminating neglected diseases and other poverty-related infectious diseases.

Schneider and colleagues from the Pan American Health Organization, Washington, USA have just published a study mapping the presence of selected diseases. This is the first time that several diseases have been mapped together across the whole region.

Mass of five diseases where information was available at the State level were mapped: lymphatic filariasis; onchocerciasis; schistosomiasis; trachoma and human rabies transmitted by dogs. Over the 49 countries/territories of the Region there are approximately 270 states. None of the mapped diseases are present in more than 39 states (rabies is present in 21), indicating that the majority of the states did not present evidence of the selected diseases during the period of the study. This suggests that these neglected diseases are not widespread and that elimination should be achievable.

Cases of human and canine rabies have been reduced by nearly 90% over the past 20 years since the inception of a Regional elimination program, but despite these achievements, the diseases still persist and even though human cases are low (54 cases in 2007), the number of people who live in risk areas is still high. In Bolivia and Haiti, rabies is present in almost half of the states. Even with good surveillance systems in place and rapid responses to enact rabies cases, the achievement of the elimination goal will require continued support of vaccination and surveillance strategies.

Although the diseases vary in their specific requirements, intensified efforts are required to achieve full control and elimination in the Region. With an estimated 9.5% of the population at risk, these diseases need to be tackled to bring about improved health and well-being to the Region.

The International Dog Bite Prevention Challenge

Did you know that half of all kids are bitten by a dog and most often by their own dog? This information is reported in published studies and is easily verified. Just ask around and you will find that half the people you talk to will have been bitten as a child. Dog bites can leave children frightened of dogs and sometimes scared physically and emotionally. The dog may lose his home, his family or even his life. However, experts agree that dog bites are preventable through education.

Non-profit Doggone Safe provides education to help children learn to act safely around dogs, and recently announced the International Dog Bite Prevention Challenge with a goal of educating 50,000 children during Dog Bite Prevention Week (May 11-18).

Happy dogs are much less likely to bite than are anxious dogs. Dogs need to learn to recognize the difference and to interact only with happy dogs. A happy dog wags his tail loosely and pants. He shows interest in interacting with the child. An anxious dog may freeze, his lips, ears, turn his head away or show a hair mouth of white in his eye. By learning to read dog body language and understanding that dogs have feelings, children will develop empathy for dogs. Children must know what to do if they meet a strange dog or if any dog is bothering them. We need to empower them.

Continued on page 2...
Striving to free people and animals from the threat of rabies

GLOBAL ALLIANCE
FOR RABIES CONTROL

Home   About Rabies   What we do   About us   News   Resources   Support us

Stop rabies
Donate now

Vaccinate a child for $8 a month
Vaccinate a dog for $2 a month
Make a one-off donation
Send us your rabies research
See other ways to help

A rabies dilemma. What would you do?

Fighting rabies worldwide

Raise money. Have fun. Stop rabies.

Latest News

Could we eradicate rabies for just 10% of current spend?
02.09.11
Head of OIE, Dr. Vallat, releases video calling for global collaboration in the fight against rabies more...
See all news

Bernard Vallat
Director General of the OIE

Featured Video

Dr. Praveen Kulkarni

Latest Tweets

Subscribe to the GARC newsletter

Why World Rabies Day matters

Join the conversation

www.globalrabiescontrol.org
Lessons Learned

- Rabies prevention is possible
  - Need support from multiple sectors
  - Public/private partnerships are critical – pooling of resources

- Communication networks are powerful
  - World Rabies Day
  - Global webinars can connect thousands for a small investment
  - Communities can be empowered to educate their own citizens

- Many tools are already in place
  - Vaccines, reduced regimens, dRIT, websites & comms. etc.

- New tools are needed
  - Dog population management
Recommendations

- Support the expansion of surveillance tools, notifiability, to increase information on global burden
- Encourage rabies endemic countries to participate in WRD
- Release timed coordinated press releases about rabies prevention and control to increase global awareness
- Support the reassessment of global burden to fully understand burden of rabies and to have a ‘starting point’ to establish cost-effective models that assess strategic interventions
- Support novel strategies and methods to ensure sustainability to prevent reintroduction – no “One size fits all”
Thank You!

For more information...

• Global Alliance for Rabies Control
  – www.globalrabiescontrol.org

• World Rabies Day Campaign
  – www.worldrabiesday.org

• Rabies blueprint
  – www.rabiesblueprint.com