



**PERMANENT MISSION OF SINGAPORE
TO THE UNITED NATIONS**

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**UNITED NATIONS GENERAL ASSEMBLY
60TH SESSION**

STATEMENT BY

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PERMANENT REPRESENTATIVE OF SINGAPORE
TO THE UNITED NATIONS**

AT THE

**ECONOMIC AND SOCIAL COUNCIL
SPECIAL EVENT ON THE THEME OF "AVIAN FLU"**

3 NOVEMBER 2005

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1 I would like to express my appreciation to you for taking this timely initiative to organise a debate on the Avian Flu crisis.

2 Singapore supports this initiative and others which would allow us to increase the level of regional and international cooperation and attention towards combating avian flu, by building on the work already being undertaken by groupings and organisations such as ASEAN, APEC, WHO, FAO and the OIE.

3 Experts and the WHO agree that the risk of an influenza pandemic occurring is increasing with every new human case of avian influenza infection. There is still time to prevent a pandemic and if it occurs, to try to contain or delay its spread. This will need strong international collaboration. International collaboration works – this was seen in the successful containment of the SARS epidemic, which could easily have become a pandemic.

4 The FAO and OIE are to be commended for developing a strategy to progressively control Highly Pathogenic Avian Influenza (HPAI). The strategy provides a systematic and scientific approach to the phased control of HPAI in Asia. Separately, WHO has published a document outlining a phase-wise approach to intervene during a pre-pandemic stage, when a pandemic virus has emerged and when a pandemic is declared and spreading internationally. We thank FAO, OIE and WHO for charting out clearly what needs to be done.

5 I would like to list four areas in which there could be "Calls to Action".

Call to Action I – Support by the Global Community

6 First, we call on individual countries and the global community to immediately and urgently support affected and at-risk countries to build up their capabilities and capacities, and implement action plans according to FAO, OIE and WHO recommendations.

7 Many affected and at-risk countries require technical and financial support to implement control strategies at the national and local level. Veterinary, public health, and laboratory capabilities and capacities in many of these countries are under-developed. Surveillance systems and resources are lacking. It is critical for countries to strengthen early warning systems, to detect both animal (poultry) and human H5N1 infections as early as possible. Farmers need to be given incentives to

report infections in poultry. A rapid and robust response system is also required to quickly cull infected birds and isolate human cases and quarantine contacts immediately. The contacts should also be given anti-viral drugs, preferably within 2 days of exposure.

8 International assistance to affected and at-risk countries such as Indonesia and Vietnam can be seen as forward defence for the entire world against an influenza pandemic. The FAO and OIE have estimated in their Global Strategy document that it would take some US\$100 million to implement the strategy in the next 3 years. This pales in comparison with the millions of lives and billions of dollars that could be lost in a pandemic. This is a worthwhile investment for the world to make together.

Call to Action II - Reforming farming and wet market practices

9 Secondly, for long-term prevention and control of HPAI, we must tackle the challenges upstream, head-on at the source, through reforming high-risk farming and wet market practices. Farmers must learn to “bio-secure” their farms as soon as possible: simple sanitation measures and the importance of separating livestock by different species. In cities which posed the highest risk of a major cluster occurring, city governments should look into cessation of back-yard farming and slaughtering in the city wet markets. Appropriate financial incentives will have to be provided to the market and farm owners. This reform strategy is our main defence in reducing human-animal interaction and preventing a human influenza pandemic from occurring.

Call to Action III - Vaccine and Antiviral Development and Access

10 Thirdly, the world must further build up capacity to produce anti-viral drugs and vaccines. Governments must seriously look at how it can pro-actively engage drug and vaccine companies in these efforts.

11 We are encouraged that WHO is building a stockpile of anti-viral drugs that could be used either to stop a pandemic virus from spreading, or to slow a pandemic. There have also been discussions to build up regional stockpiles of antiviral drugs. We look forward to the WHO working out the protocol to trigger the usage of the global stockpile and giving guidance on the use of regional stockpiles.

Call to Action IV - Risk Communications and Assessment

12 Fourth, trust is the foundation of outbreak communication. Singapore's experience with the SARS outbreak in 2003 had shown that effective public communications is key to building trust with its citizens and other nations during the outbreak.

13 To build trust, there must be real-time transparency and respect for public concerns. Effective communications will lead to a better-informed population that is more ready and able to cooperate with national governments and the international community as they respond to a pandemic. Well-planned communications will be the most effective intervention at the start of an influenza pandemic.

Conclusion

14 All these require intensive international co-operation. Issues of border control and cross border case management will test the patience and resources of affected and neighbouring countries, when an outbreak occurs. Experts have said that it is a question of when, not whether a pandemic will occur. We still have time to avert a pandemic. To do this, the global community must act now.

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