HEALTH SYSTEMS RESEARCH
INSTITUTE OF THAILAND (HSRI)

INTERNATIONAL DEVELOPMENT
RESEARCH CENTER- CANADA (IDRC)

AVIAN INFLUENZA POLICY ANALYSIS TRAINING WORKSHOP
- FINAL REPORT-

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APAIR Regional Coordinating Office

May 24 – 26, 2007
The Royal Princess Larn Luang Hotel, Bangkok, Thailand

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Abbreviations

AI	Avian Influenza
APAIR	Asian Partnership for Avian Influenza
AV	Avian Virus
CDC	Centers for Disease Control and Prevention
EU	Europian Union
FAO	Food and Agriculture Organization of the United Nations
HPAI	Highly Pathogenic Avian Influenza
NYC	New York City
OIE	World Organization for Animal Health
PA	Policy Analysis
RRT	Renal Replacement Therapy
SARS	Severe Acute Respiratory Syndrome
TB	Tuberculosis
UC	Universal Coverage
USA	United States of America
USAID	United States Agency for International Development
WHO	World Health Organization

AVIAN INFLUENZA POLICY ANALYSIS
TRAINING WORKSHOP REPORT

I. Introduction of the workshop

Asian Partnership on Avian Influenza Research is formed by building joint work among different institutions in the most severely affected Asian countries to fight avian influenza in the region. Currently a set of six research themes have been identified and three of them will be implemented shortly. The findings from these studies are crucial to supporting AI strategies in each country as well as regional joint strategies.

In addition, most of the disease control policies development needs knowledge on disease transmissions mechanism, socio-economic impact, as well as law and regulation in each country. Lack of understanding in the above issues may lead to no consensus regarding policy initiatives. To support capacity building and expose researchers in policy development, an avian influenza policy analysis training workshop was held in Bangkok, Thailand.

A HSRI-IDRC joint avian influenza policy analysis training workshop was conducted on 24-26 of May 2007 at The Royal Princess Larn Luang Hotel, Bangkok, Thailand.

The workshop was co-funded by the Health Systems Research Institute of Thailand (HSRI) and the Canada IDRC.

The objective of the workshop was to raise knowledge and skills in policy analysis for the researchers who participate in APAIR research program.

The workshop was attended by 25 participants from three countries, one from Indonesia, one from Vietnam and the rest from Thailand. The workshop covered theoretical concepts and methods of policy analysis, case studies and exercises for policy analysis related to disease control measures in order to allow the participants to put their newly learned skills into practice.

The workshop report is structured by the following sections: section 2 summarizes workshop content. All appendixes are attached in the final section, in which full workshop agenda, a list of participants, training materials provided by two key speakers, group work presentation and project briefs made by six groups can be found in Annex 1, 2, 3, 4 and Annex 5 respectively.

II. Workshop Summaries

Day 1: May 25, 2007

1. Welcome and Expectation

The workshop began with an introduction made by Dr. Chantana Padungtod, Team leader of Policy Analysis group. She welcomed participants to the workshop and introduced Dr. Suwit Wibulpolprasert, Senior Advisor of the Ministry of Publish Health of Thailand, Chairman of Steering Committee, Asian Partnership on Avian Influenza Research (APAIR) to give an opening speech. In his remarks, Dr. Suwit shared some recent international events related to Avian Influenza, especially the issues related to the distribution of disease samples among countries affected by Avian Influenza viruses and WHO collaborating centers such as CDC in USA. Dr. Suwit also gave some examples to illustrate the importance of the policy process and policy developments in order to maximize the benefits of research and ensure policy coherence.

After Dr. Suwit's opening speech, Dr. Pongpisut Jongudomsuk, Director of Health Systems Research Institute was invited to give his speech. In his remarks, Dr. Pongpisut Jongudomsuk shared his experience on the policy process, policy content of 30 Bath Universal coverage in Thailand. He also emphasized the importance of policy advocacy.

After the presentations of the two senior guests of the workshop, the workshop participants, including the two workshop's key speakers, were asked to introduce themselves by stating their name, organization and positions within their organizations. The participants also expressed the hope that the workshop would enhance their knowledge and skills on policy analysis. Some additional expectations are summarized below:

(i) After having completed this policy analysis training workshop, the participants were expected to be provided opportunities to learn more about methodologies by discussing case studies that addressed the policy analysis for policy and policy analysis of policy;

(ii) The participants would also learn policy analysis through group exercises;

(iii) How research can influence policy and what is the role of advocacy.

2. Presentation of 6 studies

Dr. Chantana Padungtod, from the Department of Disease Control, Ministry of Public Health of Thailand, facilitated this session. In this session, each research group[1] representative was given 5 minutes to provide a brief overview of their project to the workshop's participants and express their expectation of what their research project could offer to policy recommendations. There were representatives from the six groups from Thailand, including wild bird migratory group, socio-economic impact of AI, backyard chickens, control measure, risk behavior and policy analysis.

The brief project presentations were started by an introduction from Dr. Thanis Damrongwatnapokin, from the Faculty of Veterinary Science, Chulalongkorn University, head of Thai team participated in socio-economic impact of AI, followed by the presentations of Mr. Terdsak Yano, from Faculty of Veterinary Medicine, Chiang Mai University, team member of Control Measure group, Dr. Rattapan Pattanarangsan Ms. Sarin Suwanpakdee from Faculty of Veterinary Science, Mahidol University, member of Wild bird migratory group, Dr. Somchai Sawasdipan, from Department of Animal Science Faculty, Ubonratchathani University, team member of Backyard Poultry group, and Dr. Chantana Padungtod, from Department of Disease Control, Ministry of Public Health of Thailand presented briefs on Risk Behavior group and Policy Analysis group.

One of the presentations of project briefs was available in the written form and is attached to Annex 5.

3. AI Preparedness: European Experiences

One of the key presentations entitled "National Strategic Preparedness: Planning for Pandemic Influenza in the EU" was delivered by Dr. Richard Coker, from London School of Hygiene and Tropical Medicines of United Kingdom. The presentation introduced a general situation of plans for influenza preparedness in EU countries, which include major gaps in Europe in terms of strategic plan on AI, levels of completeness of strategic planning for the use of anti-viral and vaccines in country preparedness plans, level of completeness of provision of service in the country

[1] Under Asian Partnership on Avian Influenza Research (APAIR), a set of six research themes were identified. Six groups of researchers were formed to carry out the respective research themes.

preparedness plans to the participants. Dr. Richard Coker also highlighted the current status of the link with animal surveillance systems in EU countries, and a ranking of countries' preparedness. This analysis was followed by an update of more recent research which addressed challenges that are particularly problematic for policy makers currently, notably anti-viral drugs, vaccine and border controls.

A copy of this presentation is included in Annex 3.1.

After of the morning tea break, Dr. Richard Coker continued with presentation on the conceptual and theoretical frameworks used in analysis *of* policy making and analysis *for* policy making. In this presentation, Dr. Richard introduced basic definitions of health systems, social systems, policy and health policy. He outlined policy making processes, which include issue search, issue definitions, agenda setting, policy formulation, setting objectives, options analysis, implementation and evaluation. The presentation also highlighted three approaches applied in the policy making process, that include rational-comprehensive approach, the incremental approach and mix-scanning approach. Dr. Richard introduced the Hall model and the Kingdon model to illustrate how the issues could be manifest into a policy agenda. Dr. Richard also presented notions of policy networks with concluding statements on the key messages on the policy making process. Finally, a conceptual framework for policy analysis was presented and how to apply this framework to retrospective policy analysis and prospective policy analysis was also emphasized.

A copy of this presentation is included in Annex 3.2.

4. Introduction to Health Policy Analysis

The key speaker of this session was Dr. Siriwan Pitayarangsarit, from the Department of International Health Policy & Planning, Ministry of Public Health of Thailand.

Dr. Siriwan delivered a PowerPoint presentation that introduced the participants to the health policy analysis. She started her presentation by saying that there her presentation built upon and complemented Dr. Richard's presentation.

The presentation defined and distinguished between policy analysis for policy and policy analysis of policy, between policy and long-term plan as well strategy. Dr. Siriwan also presented a framework for analysis of a policy, which consisted of contents, context and processes. She also explained the factors that influence policy formulation and implementation. The contextual factors were also discussed and they

fall into four groups: situational; structural; cultural and international factors. The presentation concluded with a list of literatures for further reading.

A copy of the presentations is included in Annex 3.3.

At the end of this session, the workshop's participants were asked by Dr. Siriwan to give examples of research findings which could change policies. All participants shared their experiences related to their work and the research-policy interface.

5. Experience on Policy Analysis & Case Studies: International

Dr. Richard gave presentations related to case studies on TB control in NYC and TB control in Samara, a region of Russia. The first case study addressed the research of policy making and the other was related to the research to inform policy.

The first case study was presented by giving a conceptual framework for policy analysis, which was comprised of context, contents and process. The case study was presented by this framework, initiated by giving background of TB in 1990s in USA, NYC and Harlem, including notification rates for TB and destruction of the services. The presentation continued by focusing on contents of the policy and process of policy making for fighting against TB in USA. A copy of this presentation is included in Annex 3.4.

The second case study was used to illustrate research to inform policy: TB control in Samara (Russia) which was carried out between 1998- 2004. The presentation began by emphasizing the lack of internationally coherent policy on TB in Samara, thus, this study was carried out by using different research methods (mapping policy, case control, surveys, qualitative methods such as Focus Group Discussions, stakeholder analysis, modeling, and economic analyses). The research questions were driven by local policy makers and aimed to respond to particular challenges they perceived. The findings of the study were synthesized in response to the public health challenges and formulated in a way that aimed to support the reform process. However, he reported that the research findings had little influence on policy advocacy, because high level of policy makers in Moscow, far from Samara, refused the recommendations and only lower levels accepted the results. An important conclusion, therefore, was that even when high quality research is conducted that attracts international attention, unless local policy-makers are communicated with effectively the reform process can be inefficient and ineffective. Identifying key

policy-makers is important if research is to have an impact. A copy of this presentation is included in Annex 3.5.

6. Experience on Policy Analysis & Case Studies: Thailand

Dr. Siriwan Pitayarangsarit presented two case studies from Thailand. The first one addressed the issues of Universal Coverage & Health Act as the case for analysis "of" Policy, and the second case study detailed the Renal Replacement Therapy in Thailand as the analysis "for" Policy. Focusing on the two case studies and linked with agenda setting actors, influencing factors and impact of policies. She also reiterated the conceptual framework of policy analysis at the beginning of each case study presentation.

The purpose of these presentations was to help the workshop's participants to get deeper understanding of methodologies of policy analysis in order to adopt into research practices.

Dr. Siriwan presented a case study on the Universal Coverage (UC) to the health care, in which the study dealing with contents, context, actors and process of the UC to the health care in Thailand by highlighting the major contents of the policy changes (contents), actors of the agenda setting (actors), and influencing factors (context). She also highlighted the impacts of the policy implementation. A copy of this presentation is included in Annex 3.6.

The second case study on Renal Replacement Therapy in Thailand consisted of both analysis of the policy and the analysis for the policy. The first part presented the analysis of the decision-making on the allocation of healthcare resources in the case of renal replacement therapy by looking at the content, context, actors and process. The second part illustrated the evidences that were used for the decision-making and the research procedures to produce the information for policy-making.

The case studies provided strong evidences on how research influenced the policy process during the policy formulation and implementation stages to the workshop' participants. A copy of these two case studies is included in Annex 3.7.

7. Group work

This session was designed to reinforce and build upon the skills and knowledge of the participants in the adoption of a theoretical framework gained at the workshop into the practical realities of policy analysis.

The participants were asked to complete one and half an hour policy analysis exercise by groups. Working in two groups, the participants were asked to discuss the following topics: How to apply theories on policy analysis into research. Dr. Richard was a facilitator for Group 1: Focus on Analysis "of" Policy and Dr. Siriwan was a lead of Group 2: Analysis "for" Policy.

Under the facilitation of Dr. Richard, the participants in Group reiterated the policy analysis conceptual framework. Apart from that, two models of Kingdon and Hall were also developed and explored.. Generally, these tools presented of policy analysis were used successfully by the participants. The group's participants agreed to use as a theoretical case study the Vietnamese policy of poultry vaccination for their discussion on the adoption of these theories into reality. The discussion started by asking the participants why this policy was formulated. A copy of this group works is included in Annex 4.1.

Under the guideline lead by Dr Siriwan, the participants of group 2 prepared and presented their group work 'What can be applied for the Analysis for Policy'. The group discussed how actors are important in shaping the policy and what are the gaps of knowledge that require more information in order to make a good policy to combat AI. A copy of this group works is included in Annex 4.2.

Day 2: May 26, 2007

1. Presentation of Group work

1.1 Morning sessions

This session was chaired by Ms. Pornpit Silkavute, Research Manager, Health Systems Research Institute. Under the time guideline made by Ms. Pornpit, the two group representatives presented their group work in plenum. Dr. Le Minh Sat, from Vietnam presented his group work based on Vietnam policy on Universal Vaccination. Dr. Thanis, from Chulalongkorn University, Thailand presented his group work prepared in the previous day.

The group presentations can be found in Annex 4.1 and 4.2.

After the presentations of the two group representatives, the second group work was assigned to the workshop participants. The first group was assigned to formulate the

study framework for an analysis of the AI policy which could be applied in Vietnam, Indonesia and Thailand under the Policy Analysis Project. The second group was assigned to formulate the conceptual framework for an analysis for AI policy. The procedure for the group work was similar to the first group work assignment, the same participants, the same facilitators, the same topics, but the topics were be discussed in further detail.

1.2 Afternoon sessions

The afternoon session was started by Dr. Thanis's presentation. He focused on the list of topics needed to be studied for policy making by grouping the required information for 4 purposes; situation analysis, priority setting, option appraisal, and eveluation.

Dr. Wiku Adisasmito, from University of Indonesia presented the assignment of group 1. He used the conceptual framework of policy analysis to start his presentation and ended his presentation by giving a concrete work plan, activities, and timesline for future work of the policy analysis group.

The group presentations can be found in Annex 4.1 and 4.2.

2. Comments & Conclusions

Dr. Richard provided some comments on the group work. According to him, the workshop's participants did excellent job, their groups' presentations had demonstrated that the knowledge on policy analysis as well as skill the workshop participants gained at the workshop were improved.

The workshop was closed by Ms. Pornpit by expressing her thanks to all participants, especially the two key speakers, Dr. Richard and Dr. Siriwan for their contributions to the workshop's success.

III. Annex:

Annex 1: Workshop Agenda

Tentative Schedule for Policy Analysis Training Workshop
May 24 – 26, 2007
The Royal Princess Larn Luang Hotel, Bangkok, Thailand
Supported by IDRC and Health System Research Institute (Thailand)

Thursday May 24, 2007

Afternoon	Instructors and participants check in at hotel
6.30 – 8.30 pm	Welcome Dinner (at the hotel)

Friday May 25, 2007

9.00 – 9.15 am	Introduction of the Workshop - Expectation - Anticipated outputs
9.15 – 9.45 am	Presentation of 6 studies (in brief – 5 minutes each) - Objectives - What do you expect the project to impact policy?
9.45 – 10.30 am	AI Preparedness : European Experience (in brief) by Dr. Richard Coker, MD, PhD London School of Hygiene & Tropical Medicine, UK
10.30 – 10.45 am	Coffee break
10.45 – 12.00 pm	Introduction to Policy Analysis by Dr.Siriwan Pitayarangsarit, DDS, PhD International Health Policy & Planning, Ministry of Public Health, Thailand
12.00 – 1.00 pm	Lunch break
1.00 – 2.30 pm	Experience on Policy Analysis & Case Studies - Analysis "of" Policy (TB) - Analysis "for" Policy (TB) by Dr. Richard Coker, MD, PhD London School of Hygiene & Tropical Medicine, UK

2.30 – 2.45 pm Coffee break

2.45 – 4.30 pm Experience on Policy Analysis & Case Studies : Thailand
- Analysis "of" Policy (UC & Health Act)
- Analysis "for" Policy (Renal Replacement Therapy)
by Dr.Siriwan Pitayarangsarit, DDS, PhD
International Health Policy & Planning, Ministry of Public Health, Thailand

4.30 – 6.00 pm Group work
Question : What can be applied to AI policy analysis ?
- Methodology, aspect etc.

- Group I : Analysis "of" Policy
  [Policy Analysis team (n=3) + representative from the other 5 projects (n=5)]
- Group II : Analysis "for" Policy
  [Policy Analysis team (n=1) + members of the other 5 projects (n=5)]

6.30 – 8.30 pm Dinner (at the hotel)

Saturday May 26, 2007

9.00 – 9.30 am Presentation of Group work (5 minutes each & not more than 5 slides)

9.30 – 12.00 pm Exercise : Conceptual Framework for Policy Study
- Group I : Analysis "of" Policy facilitated by Dr.Richard
- Group II : Analysis "for" Policy facilitated by Dr.Siriwan

12.00 – 1.00 pm Lunch break

1.00 – 2.00 pm Presentation by Group I

2.00 – 3.00 pm Presentation by Group II

3.00 – 3.15 pm Coffee break

3.15 – 4.00 pm Comments & Conclusions
by Dr. Richard Coker, MD, PhD
London School of Hygiene & Tropical Medicine, UK

6.30 – 8.30 pm Dinner (at hotel)

Annex 2: A list of Workshop's Participants

Participants List: HSRI-IDRC Joint Avian Influenza Policy Analysis Workshop, May 24 – 26, 2007
The Royal Princess Larn Luang Hotel, Bangkok, Thailand

Country	Name	Title/Organization	Contact Address
Resource Persons	Dr. Richard Coker	London School of Hygiene & Tropical Medicine, UK	Tel : +44(0) 207 927 2926, Fax : +44(0) 207 612 7812 Email: richard.coker@lshtm.ac.uk
	Dr. Siriwan Pitayarangsarit	International Health Policy Program Ministry of Public Health, Thailand	Tel: +66 (0) 2590-2374, Fax: +66 (0) 2590-2385 Email: siriwan@ihpp.thaigov.net
International Participants	Dr. Wiku Adisasmito	Faculty of Public Health, University of Indonesia	Tel : +62-816-870101 (cell), Email :wiku@cbn.net.id
	Dr. Le Minh Sat	Ministry of Science and Technology, Vietnam	Tel: 844 9439663, +84-913364297 (cell), Fax: 844 9439733, 84-49439987, Email: lmsat@most.gov.vn
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	Dr.Pongpisut Jongudomsuk	Director, Health Systems Research Institute	Tel: +66 (0) 2951-1286#131 Fax: +66 (0) 2951-1295, Email: pongpisut@hsri.or.th
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	Dr.Chantana Padungtod	Bureau of Occupation and Environmental Disease,Department of Disease Control, MOPH	Tel: +66 (0) 2590-4161, Fax: +66 (0) 2590-4161, Mobile: +66 (0) 81823-6517Email: cpadungt@gmail.com
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	Ms.Sarin Suwanpakdee	Faculty of Veteriny Science Mahidol University,	Tel : +66 (0) 4415238, Fax : +66 (0) 4415238 Email : gam_gena@yahoo.com
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	Mr. Dinh Xuan Tung	Coordinating Office, Asian Partnership on Avian Influenza Research (APAIR), based in Health Systems Research Institute, Thailand	Tel: +66 (0) 2951-1286 # 125 Fax: +66 (0) 2951-1295; Email: xuantung168@yahoo.com
	Ms. Nongnuch Thongsri	Technical coordinator Health Systems Research Institute, Thailand	Tel: +66 (0) 2951-1286 # 137;Fax: +66 (0) 2951-1295 Email: nongnuch@hsri.or.th

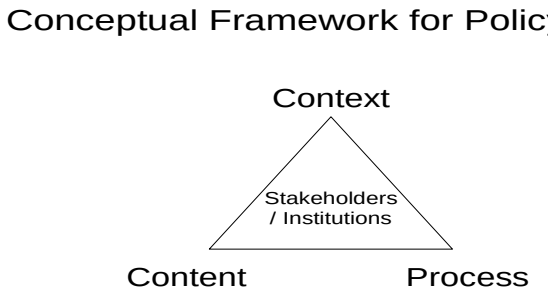
Annex 3: Training materials

Notes: Due to the weight of these documents (PowerPoint), for those of you who want to have these files, please contact: co-office@apairesearch.net, or you can download from http://www.APAIResearch.net/document

Annex 3.1
Annex 3.2
Annex 3.3
Annex 3.4
Annex 3.5
Annex 3.6
Annex 3.7
Annex 3.8

Annex 4: Group presentations

Group 1: Analysis of Policy



Vietnam AI vaccination

2003 2004 2005
=====→ Outbreak==========”Policy”========Implementation====➔

Define Content:
Eg Vietnam 2004, to formally and explicitly implement universal poultry vaccination (reference)

Context:
External Actors:

- WHO
- OIC
- FAO
- CDC
- CHINA (Trade/vaccine)
- RUSSIA (Poultry export)
- JAPAN

Internal

- Vet.
- PM.
- Farmers
- Civil servants
- Technical experts, scientists
- Commercial interest
- Reputation following SARS
- Structural Health Systems
- Public

- Media

Data
- Documents (Newspapers, communications, meeting minutes, Political advice, Expert advice, briefings)
- Interviews (Stakeholders, report by laws)

In conclusions:
- Scientific arguments
- Social arguments
- Economic argument

Next steps

Documents
Publication
Medline
Veterinary science search engines
Social science search engines

'Grey' literature (to be expanded iteratively)
- Outbreak reports
- Minutes of committee meetings
- Handouts
- Workshop reports
- Reviews
- Newspapers
- Formal technical advices
- Press newsletters
- Fact sheets
- International agencies releases
- etc

Interviews (to be expanded iteratively):

- Technical advisors
- Members of National Committee for AI
- Politicians
- Donors
- Multilateral agenicies (UN, WB etc)
- NGO
- Trade organizations
- etc

Mind mapping software – consider use

Matrix:

Themes	Ref.	Interview	Notes
Cultural eg fresh blood from birds ingested	Documents	1,2,3	Context…>Policy

Retrospective: define time period to 2004 policy formally adopted.
'Prospective': evaluate modifications to policy (formal policy, informal eg through modifications to implementation). Given dynamic nature of policy making and reform process need a tracking system for policy change/change in implementation eg vaccination coverage in aggregate and by geography, dynamic supervision of meeting minutes, reports etc

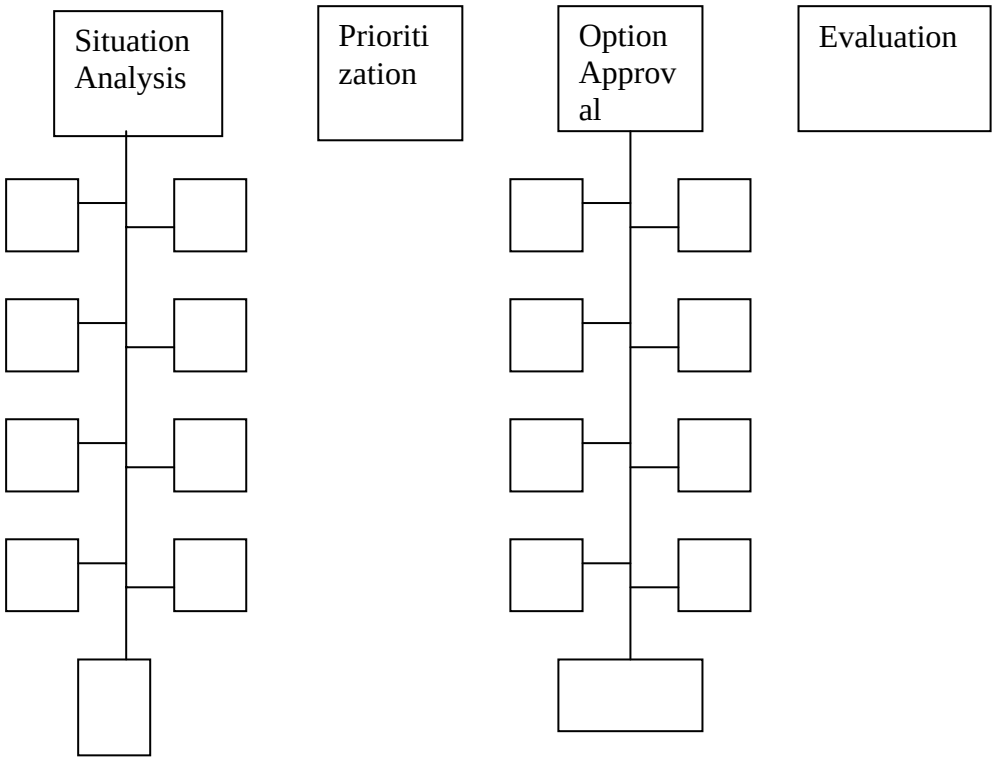
Need to ensure consistent application of same analytical framework across countries and ensure ongoing communication.

Workplan

Workplan 2007-2009

	Activities	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8
1	Country workshop	X							
2	Framework/situation analysis	X							
3	List of interviewees	X							
4	Ethical clearance 'interviewees confidentiality	X				X			
5	Initial documents	X				X			
6	List of questions 'Preliminary draft'	X							
7	Inceptional workshop	X				X			
8	Listing emerging themes		X	X			X	X	
9	Analyzing documents		X	X			X	X	
10	Extending doc search		X	X			X	X	
11	Interviews		X	X			X	X	
12	Workshop 'Results for Retro.- and plan for prospective study			X			X	X	
13	Drafting the structure of report			X					
	,-'Vietnam			X					
	,- Indonesia			X					
	,-Thailand			X					
	,- Comparative								
14	Write report				X				X
15	Publication				X				X

Group 2: Analysis for Policy



Situation

Epidemiology<……. ……..>Socio-Economic

- Sources of outbreaks
- Transmission
- Path of transmission
- Pandemic
- Prevalence of AI in human
- Antibody response to H5N1 in specific group or in general population

Infrastructure & disease control and surveillance in animal and human

- Financial system
- Human resource
- Workload

Priority setting

Socio-Economic Impact<……. ……..>Geographical mapping

- Industrial-commercial sectors
- Backyard sector
- Consumer (KAP)
- General population?
- Officers
- Other industries?

Options

Surveillance (KAP)t<…….	……..>Model development of sentinel surveillance
- Cock fighting owners	- Model development Media cooperation for pandemic
Cost-Effectiveness Analysis of AI control measures	
- Stamping out	..> Consequence of measures
- Movement management	..> Attitudes of stakeholders
- Disinfection	Level of implementation (effectiveness)
- Vaccination	
- Zoning and Compartmentalization	

Evaluation

Compensation of poultry owners

Control measures
- Process
- Reporting systems
  - -Animal
  - - Human

Annex 5: Brief presentations of the six research proposals

CHARACTERISTICS AND DYNAMICS OF BACKYARD POULTRY RAISING SYSTEMS IN FIVE ASIAN COUNTRIES IN RELATION TO THE REDUCTION AND MANAGEMENT OF AVIAN INFLUENZA RISK

Objectives

General Objective

To characterize backyard poultry rearing systems, the variations among them, their roles in rural livelihood systems, and to work with stakeholders in this sector to devise practical, equitable and sustainable options to reduce the likelihood of a human AI pandemic in 5 Asian Countries.

Specific Objectives:

1. To describe and analyze characteristics and dynamics of backyard poultry systems and how these influence AI-related risks;
2. To specifically describe the networks through which poultry from backyard flocks move from their yards of origin to consumers and how this relates to AI risks;
3. Together with the stakeholders, to identify and promote changes in backyard poultry systems at various scales that can minimize AI risk to animals and people while maintaining key advantages (economic, gender, ecological) of backyard systems;
4. To facilitate conversation and feedbacks between backyard farming stakeholders and policy makers at several scales (eg village, district, national) who determine the context within which they must define their options.

Expectation:

"Policy makers' understanding of how to reduce AI risk in BY system"

Discussions will be held with policy makers throughout the research project, beginning with selection of the sites, through to the various implementation activities; reports and briefings will be prepared when important results are identified. It is expected that a considerable amount of learning and exchange involving stakeholders in the policy processes (including local government staff responsible for implementation, provincial-level officials and national-level "decision makers") will take place through the involvement of these people in project activities. Local government staff can be part of the research team, national and provincial officials will be invited to provide inputs to site selection, choice of options for field experimentation in the second phase, etc. Finally, documentation will be prepared for and shared with stakeholders who are not directly involved in the project activities.

Table of project activities

Activities	Tools and methods	Expected output	Who	Input
Inception workshop, Indonesia	Planning, training	Detailed work plan, consolidation	Coordinator and several country team members with different skill sets (social, biomedical, etc)	5 days workshop
Site selection	Desk study, field visit	6-10 sites selected	Team member and local staffs	3 person months
Field work				
Team formation	Recruiting, training	Field work teams	Team leader, trainers	2 to 3 person months
Village work	PRA tools, such as interview of key persons and focus groups in the village, surveys,	Characteristics of the village including raising systems for BY poultry, planting seasons, maps	Team member, local staffs, village workers	6 person months per village
Household survey	Questionnaires design, pretest, interview	Questionnaires, household raw data sets	Team member, local staffs, village workers	
Network description	Interview of middle men, consumers, visiting collection sites, accompany,	Diagrams of networks, maps, logistic and transportation system	Team member, local staffs, village workers	1 person month per site
Analysis				
Village level	Qualitative analysis, GIS	Understanding of how and why differences and similarities among systems for BY poultry exist	Team member	5 person month
Household level	Qualitative and quantitative analysis	Understanding of how and why differences and similarities among the households' BK practices	Team member	
Network	Qualitative analysis, network analysis, GIS	Understanding of the implication of marketing network to AI risk	Team member	
Summarizing data	Data integration, country team discussion	Report of the first step (understanding characteristics and dynamics of BY systems)	Team member	2 person month
Mid term workshop, Cambodia	Data integration across 5 countries, review, field trip	Synthesis of 5 country reports, plan of next steps, publications	Coordinator and country team leaders	6 days workshop
Feedbacks to stakeholders	Back to the villages, Open and round table discussions, presentations	Validation of the findings, stakeholders' understanding of the problems, setting of priority of changes in BK systems, plan for solutions	Team members, local staffs, village workers	1 person months per site
Facilitating stakeholders to plan and implement possible solutions in 4 villages	Follow-up discussions, villager meetings,	Stakeholders' more understanding of how to plan and implement solutions to AI risk reduction	Team member, local staffs, village workers	1 person month per village
Implementation, and evaluation in 4 villages	Interview, group discussion, observation	Understanding effectiveness of the solutions, priority of effective methods to reduce AI risk	Team member, local staffs, village workers	2 person month per village
Analyzing and Summarizing	Data integration, team discussion within country	Draft evaluation report	Team members	1 person month
Final workshop in Thailand	Information integration across 5 countries, review,	Final synthesis of 5 country reports, publications	Coordinator and country team leaders	5 days workshop
Preparation of final report	Discussion within country team	Final reports of countries	Team members	2 person month
Policy feedback	Discussion with policy makers, briefing papers	Policy makers' understanding of how to reduce AI risk in BY system	Team members	1 person month

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