



# One Health Action Plan Inputs

By

Group 2

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# Presentation Outline

- ▶ Overview of Previously Kenyan VBD & Climate change project
- ▶ Study Area
- ▶ Study Approach
- ▶ Gaps to the study
- ▶ Inputs to the One Health action plan based on previous VBD & Climate change project

# Kenyan Previous VBD & Climate change project context

## Baringo – county

- Why Baringo
  - **Rift valley fever and Malaria Epidemic area**
- **Stakeholders involved**
  - UoN
  - Jaramogi University
  - KEMRI
  - CDC
  - County Governments \_ Dept. of Human Health & Animal Health
  - Ministry of Health involvement in awareness



## Project operationalization

- **Project Components**
  - **Integrated components**
- **Approach – Capacity Building**
  - **Studentship**
    - 4 PhD students (3 females + 1 Male students)
    - Partially masters students (10 Masters students)
    - Local departmental levels & Community
- **Dissemination**

## Gaps in the Project for building through one VBD & Climate change project

- ***Human sub-systems***
  - Limited dissemination that did not go beyond the county government – leaving national government
  - Limited community engagement/communication framework on rift valley fever
  - Lack of coordination between public health and veterinary officials
  - Limited capacity (in-service training) for local point persons on rift valley management and the project had no budget-lines for in-service training.
- **Animals sub-systems**
  - Animals going to markets for sale not screened by veterinarians

# Gaps in the Project for building through one health approach

- **Animals sub-systems**
  - inadequate inspections of meat through public health
  - Lack of protective gear for slaughter house operators
  - Indigenous knowledge was not adequately used in the project – i.e. use of indigenous knowledge on disease transmission is lacking.
- Knowledge gap on seasonality of transmissions of Rift valley fever



## Gaps in the Project for building through one health approach

- *Environment subsystems*
  - Limited knowledge on effects of climate variability on risks for transmission of VBDs

# Inputs/feedback to draft plan on one health

Diagrammatic presentation not easy to understand

- Need some clarifications & some terms definitions i.e. governance
- Interactions between compartments need clarifications
- Challenges to understand the flow

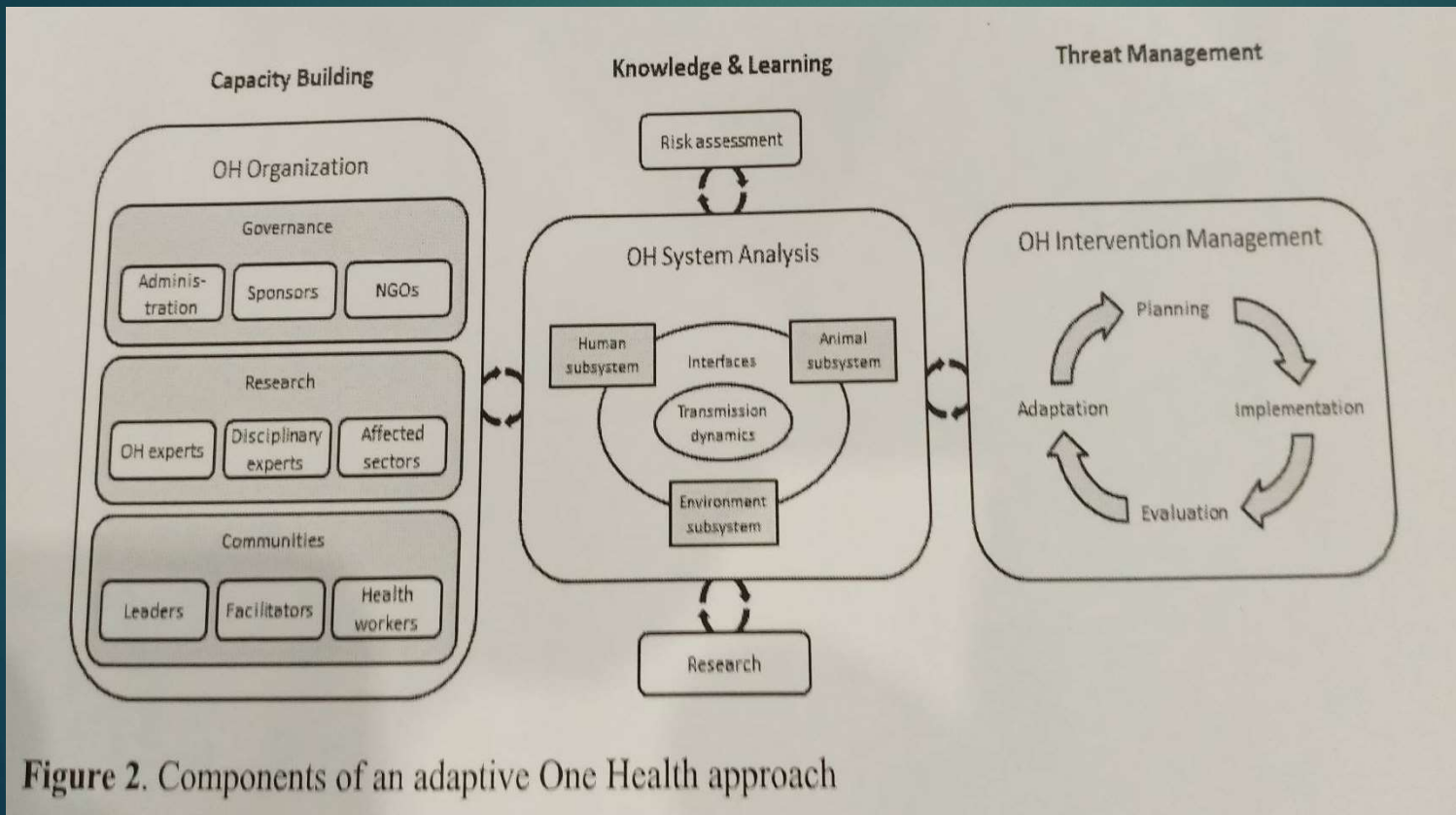


Figure 2. Components of an adaptive One Health approach





## List of Research Priorities and Capacity building priority needs for operationalizing one health approach to VBDs and climate change

- **Capacities (Resources)**
  - Professional staff on in-service training
  - Involvement of policy makers from top to bottom in the project implementation
  - Mainstream one health in country policies and practices in the affected sectors
  - Train one health experts
  - Train vector taxonomist and ecologists



# List of Research Priorities and Capacity building priority needs for operationalizing one health approach to VBDs and climate change

- **Research priorities**
  - Vectors and disease risk mapping
  - Vector ecology
  - Medical anthropology
  - Climate variability and diseases burden
  - Community engagement frameworks
  - Virology

# Comments on the one health logical model

- **Strategy for Kenya on One Health**
  - Draw a national strategy for the country comprising of
    - Vision
    - Mission
    - Action Plan
  - Organization culture (Core Values)
  - Management – Standards, Policies. Processes, Tools & Technologies
- Competencies
  - Trans-disciplinary competencies
- Activities -
  - Operational management, systems analysis, adaptive management and implementation research
- Long-term: Ecosystem, Animals and Human Wellbeing, Low risk, Resource Efficiency, New Knowledge & Community Development

# Comments on the one health logical model

## One Health Score card

What to Do	What to Measure
<b>Capacity</b>	
Governance	Levels of involvement of sectors, communities and disciplines
Organization	Status of organizational cultures and knowledge, management
Resources	Levels of Funding and infrastructure
<b>Intervention Science</b>	
Intervention Management	Status of the plans
Implementation Research	Efficiency and effectiveness of the research
System Analysis	Human, animals and ecosystem status

# Comments on the one health logical model

## One Health Score card

What to Do	What to Measure
<b>Risk Management</b>	
Social system	Resilience, Risk mitigation & Risk control
Animals system	Resilience, Risk mitigation & Risk control
Ecosystem	Resilience, integrity
<b>Impact and Risk</b>	
Impact and Risk	Severity, Frequency, Risk Potential



**End**

**Thank you**