The FAO-OIE-WHO collaboration – A tripartite concept

On sharing responsibilities and coordinating global activities to address health risks at the animal-human-ecosystem interfaces

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The Tripartite and the Human-Animal-Ecosystem Interface (HAEI)

- FAO, OIE and WHO: Long history of working together at the Human-Animal-Ecosystem Interface (HAEI)
- Rabies, TB, Brucellosis and other known zoonosis the initial common interest
- SARS, BSE, HPAI, H1N1, H7N9 became important common considerations - triggered the need for closer inter-sectorial cooperation
- Areas of work overlap where the interaction between animals, humans, and ecosystems impacts Public Health, Animal Health, and global health security
- Collaborative and complementary efforts to support Member States (OFFLU, GLEWS, CMC-AH)
OIE-FAO Network of Expertise on Animal Influenza

Experts working to protect health and livelihoods through global cooperation

www.offlu.net
Zoonotic potential of animal pathogens

- 60% of human pathogens are zoonotic
- 80% of animal pathogens are multi-host
- 75% of emerging diseases are zoonotic
- 80% of agents having a potential bioterrorist use are zoonotic pathogens
- Nearly all new human diseases originate from animal reservoirs
- Diseases can now spread faster across the world than the average incubation period of most diseases
Animal-Human-Ecosystem-Environment Interfaces

Traditional way of looking at epidemiological triad -

but in the HAEI not necessary all of the environment or all of pathogens involved
Public health threats at the human-animal-ecosystems interface – the challenge of the unknown

• HAEI = public health threats emerging from or existing in animal hosts
• Pathogens nor source of initial outbreaks often not known -> emerging disease?
• Pose continual risks to global health security
  – pandemics, new agents, bio-threats
  – day to day challenges (Rabies, HPAI, CCHF, VHF, BTV, Schmallenberg virus, AMR, food safety)
  – Food security
Health systems strengthening

- Addressing health threats at the HAEI has been:
  - Disease by disease
  - In response to events
  - Often donor-driven (not based on national priorities)
- WHO, OIE and FAO is shifting focus towards health systems strengthening and ability of countries to respond to challenges and emerging challenges:
- IHR, PVS, TCP projects of FAO, Crisis management assistance
- Strong public health systems need to be coordinated and aligned with strong animal health systems
  - tools and mechanisms to work together
Avian Influenza and the Pandemic Threat

An example of quick combined response

Inter-ministerial Conferences on avian and pandemic influenza (IMCAPI):

• Beijing, 2006
• Bamako, 2006
• New Delhi, 2007
• Sharm El-Sheikh, 2008
• Hanoi, 2010
• Donor funding
• Involvement of the disciplines in Wild life surveillance
Key Recommendations for moving forward:

- Foster political will
- Support partnership and collaboration
- Encourage data sharing
- Build capacity
- Develop communication strategies
- Provide incentives for reporting adverse events
- Encourage stakeholders and community engagement
- Develop supra-country approaches
Action Plan on Food Price Volatility and Agriculture

(25.) …, we stress the importance of strengthening …, good governance and official services, since they ensure an early detection and a rapid response to biological threats, facilitate trade flows and contribute to global food security.

(...) We encourage international organizations, especially FAO, WHO, OIE, the Codex Alimentarius Commission (Codex), the IPPC and WTO to continue their efforts towards enhancing interagency cooperation.
High Level Technical Meeting to Address Health Risks at the Human-Animal-Ecosystem Interface

- Tripartite & 3 ministries in Mexico, support from UNSIC
- Nov 2011, Mexico City
- Participants:
  - ministerial representatives from national public health, agriculture, and environmental sectors
  - technical, regional, and donor organizations
- Discussed mutual priority health issues at the human–animal–ecosystem interface
  - stakeholders contributed perspectives and expertise
  - technical and policy aspects
• Strong governance structures and aligned legal frameworks, building on existing mechanisms, are essential to achieving effective disease surveillance and response
• Importance of working with countries to help them establishing more functional cross-sectorial collaboration at ministerial level
• Rabies, zoonotic influenza and antimicrobial resistance are models where the benefits of inter-sectorial approaches are evident
The FAO-OIE-WHO Collaboration

Vision

A world capable of preventing, detecting, containing, eliminating, and responding to animal and public health risks attributable to zoonoses and animal diseases with an impact on food security through multi-sectoral cooperation and strong partnerships.

“…recent efforts … have underscored the fact that successful and sustained results are possible when functional collaborations are established”
Realising the unique mandate and areas of competency of each of the 3 organisations

Not an amalgamated ‘one’ organisation

Each exercise it’s mandate within the HAEI environment

In collaboration with each other = One Health

Critical importance of carrying this concept through on Regional and National level
Areas for Intersectoral Collaboration

• Disease or health related topics
  – Brucellosis
  – Rabies, zoonotic influenza, antimicrobial resistance
  – Rift Valley Fever
  – Food safety/foodborne diseases, emerging diseases
  – Diseases affecting food security and farmer revenues (e.g; FMD, PPR…) are included
  – Livestock-wildlife-human interface

• Governance (WHO International Health Regulations, OIE International standards for animal health, Codex)

• Carry-through effect on Regional and National level

• Global Issues – Food security, livelihoods, biodiversity
Veterinary services are global public goods

poverty alleviation
food security
market access
food safety
protecting animal health
protecting public health
protecting animal welfare
biological threat reduction
OIE - One Health at a glance

- **Not** a new concept, **not** a new project
- OIE endorses the “One Health” approach -
  - as a collaborative and all-encompassing way to address, when relevant, animal and public health globally
- And, promotes a collaborative “One Health” approach at national levels
  - should not be limited to only the international level, but must be translated as a new and fundamental paradigm at national levels.
  - will result in a deeper and sustainable political support for the coordinated prevention of high public health and animal impact diseases at the human-animal interface.
OIE-WHO-FAO Tripartite meeting: High Level Technical Meeting to Address Health Risks at the Human-Animal-Ecosystem Interface

• Zoonotic influenza, rabies and antimicrobial resistance (AMR) used as “entry points” for discussions
• Cross-sectoral approaches in Risk Assessment and Risk management
• Facilitated working groups identified
  • Components of successful cross sectoral approaches
  • Challenges and constraints and possible solutions
  • “Key elements” for successful cross sectoral collaboration
  • Priority actions and concrete, actionable next steps
Need for common actions

- A stronger collaboration between WHO, FAO and OIE through the Tripartite agreement
- Sharing responsibilities and coordinating global activities to address health risks at the animal-human-ecosystems interfaces
- Three ‘flagship’ topics:
  - Zoonotic influenza
  - Rabies
  - Antimicrobial resistance (AMR)
Why is antimicrobial resistance (AMR) a global concern?

Antimicrobial agents are essential to ensure human health, animal health and welfare, and food security.

- AMR challenges control of infectious diseases
- AMR increases care costs
- AMR compromises health security and damages economies
- There is a lack of coherent global approaches to prevention and containment

The human, animal and plant sectors have a shared responsibility to prevent or minimise the development of antimicrobial resistance by both human and non-human pathogens.
Rabies: OIE 5th Strategic Plan 2011-2015
New actions

The One Health Concept

- A worldwide strategy for managing risks at the animal-human interface ecosystems
- OIE, FAO and WHO renewed their commitment with the Tripartite Concept Note created in 2010
- Rabies control is a priority model to apply the ‘One Health’ concept by countries and intergovernmental organisations as seen at the OIE Global Conference on Rabies Control in September 2011 (Republic of Korea)
- Rabies control as a model for inter-sectoral control approaches (Mexico, HLTM, 2011)
- Resolution 27/2012 (80 GS)
- Emphasis on dog rabies, stray dog control
## Key elements of effective cross-sectoral collaboration: OIE, WHO, FAO

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<th>Key Supporting Elements</th>
<th>Key Operational Elements</th>
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<td>1. Political will and high-level commitment</td>
<td>A. Joint cross-sectoral coordination mechanisms</td>
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<td>2. Trust</td>
<td>B. Routine communication</td>
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<td>3. Common objectives and priorities</td>
<td>C. Joint simulation exercises</td>
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<td>4. Shared benefits</td>
<td>D. Data sharing</td>
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<td>5. Strong governance structures, aligned legal frameworks, and recognition of existing international standards</td>
<td>E. Joint risk assessment</td>
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<td>6. Adequate and equitably distributed resources</td>
<td>F. Active cooperation on disease control programmes</td>
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<td>7. Identification and involvement of all relevant partners</td>
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<td>8. Coordinated planning of activities</td>
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<td>9. Guidance on implementation of cross-sectoral collaborations</td>
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<td>10. Capacity development</td>
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<td>11. Strong and effective health systems within the individual sectors</td>
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Trust
Four-way linking project: Concept

Effective support for management of national health risks

Effective communication of risks to national decision makers

A joint assessment of the risk

The information is linked

Epi and virological information on AH situation is available

&

Epi and virological information on PH situation is available
Toward a more coherent approach in national capacity assessment for zoonotic disease management using the IHR and PVS frameworks
"The purpose and scope of this Regulation are to prevent, protect against, control and provide a PH response to the international spread of disease in ways that are commensurate with and restricted to PH risks, and which avoid unnecessary interference with international traffic and trade" (art 2, IHR 2005)

and

"The OIE PVS Pathway is a continuous process aiming to sustainably improve the compliance of veterinary Services with international standards. This is a crucial basis for improving animal and public health and for enhancing compliance with WTO SPS at national, regional and international level"
IHR (2005) - Country Profile 2010:

In accordance with IHR Article 54 and WHA resolution 51.1, all IHR States Parties and WHO are required to report to the WHA on an annual basis on their implementation of the Regulations. The country profile provides an overview of the progress achieved as reported by the State Party in achieving selected elements of the core public health capacities required by the International Health Regulations (2005) in the context of the International Health Regulations (2005) Annex 1.

Useful Contacts and further information

National Capacity Assessment

All IHR States Parties are required to develop or maintain core public health capacities for surveillance and response as specified in the IHR. To achieve this objective, they must develop and implement a plan of action designed to ensure that these capacities will be present and functioning throughout their territories by 2012.

The International Health Regulations monitoring framework for these core capacities involves the assessment of eight core capacities through a checklist of 20 indicators:

- of the eight core capacities,
- at Points of Entry, and
- of the four IHR-related hazards (biological including infectious, zoonotic and food safety), radiological, and chemical events.

EIGHT CORE CAPACITIES IMPLEMENTATION STATUS

Coordination

Indicator 1: A mechanism is established for the coordination of relevant sectors in the implementation of IHR.

Indicator 2: IRF functions and operations units in place as defined by the IHR (2005).

Surveillance

Indicator 3: Indicator based (proactive).

Indicator 4: Event Based Surveillance has been established.

Response

Indicator 5: Public health emergency response mechanisms are established.

Indicator 6: Effective generation and control (IPC) is established at national and hospital level.

2012

PVS Evaluation Report

Organisation Mondiale de la Santé Animaux

World Organization for Animal Health

Organisation Mondiale de la Santé Animaux

Tool for the evaluation of Performance of Veterinary Services

OIE PVS Tool

Human, Physical and Financial Resources

Technical Authority and Capability

Interaction with Stakeholders

Access to Markets
Identification of synergies and opportunities:

- via outcomes of OIE PVS & WHO IHR
- via implementation of joint workshops in countries at regional level (OIE & WHO)

Increased awareness of existing tools (observers in missions as well as specific trainings)
Take home messages (1)

- Cross-sectoral collaboration required for reducing public health threats at the human-animal-ecosystems interface
- Focus on building strong national health systems based on priority national diseases
  - can respond to endemic, epidemic, emerging and new threats, including bio-threats
  - to meet national requirements under IHR, OIE International health standards, Codex….
Take home messages (2)

• Establish practical mechanisms for collaboration between existing **Animal health** and **Public health** systems
  – Maybe based on key elements
  – Based on needs and with concrete useful outcomes
  – Within national systems
• Risk assessment  valid risk management and communication:
  – Collecting epidemiological and virological information, AH and PH
  – Linking of data
  – Communication to policy makers
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Organisation Mondiale de la Santé Animale

World Organisation for Animal Health

Organización Mundial de Sanidad Animal