“..How to work together? Or we only talk. Once the project finished, we still work in each own sector.

How to make a joint action plan?

How to bring “One Health concept” and understanding of IHR/PVS to the provincial and district level?

How to link between IHR and PVS..?”

Dr. Bounlay Phommasack, Lao PDR
28 Oct 2015
Zoonoses and Emerging Diseases

Bring us together

Food safety issues

Chemical and veterinary drug residues

Born to be friends
The concept of multi-sectoral or multi-ministerial approaches for public sector governance is an essential element through which a country acquires the authorities to jointly provide and manage public goods and services.

“ONE HEALTH” We can make changes.
Beauty of the Concept

BUT, in reality
Further challenges and opportunities

IHR and PVS

Together, we can make a difference.

‘WHO IHR’ aims to prevent, protect against, control and provide a public health response to the international spread of disease and to improve the governance of international responses to public health risks and emergencies.

The ‘OIE PVS Pathway’ is a global programme for the sustainable improvement of a country’s Veterinary Services’. This is an important foundation for improving animal and public health and enhancing compliance with SPS standards, at the national, regional and international level.
What are the WHO IHR Monitoring Framework and the OIE PVS Pathway?
Lessons Learnt from the National Workshop on IHR/PVS Assessment
Core Capacities

- Legislation and Policy
- Coordination
- Surveillance
- Response
- Preparedness
- Risk Communications
- Human Resources
- Laboratory

Potential hazards

- Infectious pathogen
- Zoonotic pathogen and food safety
- Chemical hazards
- Radio nuclear hazards

Events at Points of Entry

- Human, physical, and financial resources (14 cc)
  - Technical staffing
  - Competencies
  - Continuing education
  - Coordination
  - Structure stability
  - Resource
  - Funding etc.

- Technical authority and capability (18 cc)
  - Laboratory
  - Risk analysis
  - Border security
  - Epidemiological surveillance
  - Response
  - Food safety
  - Vet biologicals etc.

- Interaction with stakeholders (7 cc)
  - Communication
  - Consultation with stakeholders
  - Official representation
  - Accreditation/ delegation
  - Participation
  - VSB etc.

- Access to markets (8 cc)
  - Legislation
  - Implementation of legislation
  - International harmonisation and Certification
  - Transparency
  - Compartamentalisation
  - Zoning etc.
What have we learnt?

Gap and Overlap Analysis between the OIE PVS Pathway and the WHO IHR Monitoring Tool
Mechanisms for effective risk communication during a public health emergency are established and functioning

<table>
<thead>
<tr>
<th>Indicators</th>
<th>National legislation, policy &amp; financing</th>
<th>Coordination and IF communication</th>
<th>Surveillance</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Implement, sustain, and enforce national legislation, policies, and standards</td>
<td>Establish and maintain regular and effective communication mechanisms across all relevant stakeholders</td>
<td>Strengthen and maintain early warning systems</td>
<td>Public health emergency response mechanisms established and functioning</td>
</tr>
</tbody>
</table>
Indicator-base surveillance includes an early-warning function for the early detection of a public health event.

II. 5– Epid. surveillance and early detection

Mapping of overlapping OIE PVS Pathway and Tools and WHO IHR Monitoring Framework and Tools

**Objective**
- To help OIE Member Countries to sustainably and continuously improve their Veterinary Services’ compliance with international standards (OIE Codes)
- To assess the capacity of WHO Member States to promptly and effectively respond to public health risks and emergencies according to international regulations

**Use of tools**
- Third party (PVS-certified experts)
- Self-evaluation by the country

**Obligation**
- Voluntary process initiated upon a request from the country to the OIE (country-driven)
- Mandatory annual report to the World Health Assembly (Member States can choose their preferred monitoring process, including use of the WHO IHR Monitoring Framework)

Courtesy of Dr Stéphane de La Rocque
OIE PVS Pathway and Tools | WHO IHR Monitoring Framework and Tools
---|---
**Time frame** |  |  
- Step-based and continuous process  
- PVS Pathway is country-driven | - With agreed specific deadline in the WHO IHR (2005)

**Scope** |  |  
- Improve competencies and performance of Veterinary Services in compliance with the international standards | - Countries’ capability to address an international public health emergency of international concern, including zoonosis

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<table>
<thead>
<tr>
<th>OIE PVS Pathway and Tools</th>
<th>WHO IHR Monitoring Framework and Tools</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outcome</strong></td>
<td>Provide sustainable foundations for the integrated protection of human health and animal health at national, national, regional and international level</td>
</tr>
<tr>
<td><strong>Confidentiality</strong></td>
<td>The reports and outputs are the property of the country and are kept confidential by WHO and the OIE unless otherwise agreed by the individual OIE Member Country</td>
</tr>
</tbody>
</table>
Our similarities
- Sharing the same goals,
- Having the same competencies and capacities to be improved,
- Being friends (IHR/PVS) for sometime,
- Talking the same language

We can make CHANGES

CRISIS is an opportunity

Together, we can bring more trusts and better collaboration.
Some initiatives to tackle main health issues:
Together, we have learnt many lessons: Rabies, HPAI, SARS, MERS, Antimicrobial resistance, etc.

Rabies, HPAI, SARS, MERS, Antimicrobial resistance, etc.
Understanding of the ecology and nature of a disease occurrence

Hypothetical pathways of HPAI H5N1 transmission within and between subdistricts

Animal-human-ecosystem interface

Small-scale farming and market chain

- How to trace backward to the source of poultry
- How to maintain herd immunity/ vaccination program in backyard operations

Tiensin et al., Journal of Infectious Diseases, 2009

LBVD, Myanmar and Tiensin, 2011
SURVEILLANCE NETWORK (One Health)

**Database for daily suspected case report**

Sharing information between animal and public health services
Working together: Village Animal Health and Public Health Volunteers

Further steps – beyond zoonoses

PVS and IHR

Together, we can make a difference.
How to achieve synergy between PVS and IHR
Tools for better intersectoral communication, coordination and collaboration between the animal and human health sectors?
Animal Health and Food Chain Safety

"From Farm to Fork"

Primary Production (animal farm) | Primary Processing (slaughterhouse) | Secondary Processing (processing plant) | Domestic Sale and export

- Food Act B.E. 2522 (1997)
One health: A Comprehensive, Integrated Programme

- Implementing the Strategy: We cannot deliver the actions alone.

- Contributions secured across several sectors:
  - Human Health and Social Care;
  - Livestock, food retail and veterinary;
  - Research councils, academics institutions;
  - The pharmaceutical industry.

Emerging zoonoses and AMR, 15 May 2015
‘One Health Approach’ at provincial level

Joint investigation for Brucellosis and Streptococcus suis infection, etc

- ‘One Health Committee’ at provincial level established
- Regular meeting organized
- ‘One Health’ Coordinating Center at provincial level
- Clear roles and responsibilities identified
- Chain of command and coordination mechanism (Clear flow chart) for public health emergency response
- Joint Surveillance and Rapid Response Team (SRRT) between animal and public health sectors
‘One Health’ across borders in Ubonratchathani province

- Emergency preparedness meeting and exercise between Lao PDR and Thailand / Cambodia and Thailand at border areas
- Maekong Basin Disease Surveillance (MBDS)
From Recommendations to Actions: to achieve the quality of PHS and VS

Tripartite collaboration meetings
• 16-18 December 2010: Sapporo, Japan
• 16-18 July 2010
• 26-28 March 2010
• 27-29 March 2010
• 24-26 March 2010

Main Points from the Recommendations
• Creation of a functional coordination mechanism between animal and human health sectors by 2011
• A One Health advocacy to implement activities
• Support from partners

Act locally, impact globally
Better quality and safety of lives
Challenging, transforming and empowering.

Thank you...