IMPLEMENTING ONE HEALTH INTERSECTORAL COLLABORATION AT COUNTRY LEVEL

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BIOGRAPHY
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SUMMARY
Background
A ‘One Health’ approach that integrates human, animal and environmental approaches to the management of zoonotic diseases has gained momentum globally in the last decade as part of a strategy to prevent and control emerging infectious diseases. However, there are limited examples of institutionalised ‘One Health’ approaches. We describe Kenya’s roadmap and implementation of a sustainable ‘One Health’ system.

Methods
In 2006, the Government of Kenya created a multisectoral working group to manage zoonotic outbreaks and to deliberate on mechanisms of maintaining ‘One Health’ practices. The multisectoral National Influenza Taskforce (NIT) was established in response to the global threat of H5N1 avian influenza epidemics. In 2010, the NIT was renamed the Zoonotic Disease Technical Working Group (ZTWG) to reflect an expanding mandate. In 2010, the ZTWG established an ‘One Health’ coordinating unit referred to as the Zoonotic Disease Unit (ZDU). The ZDU bridges between the ministries of livestock and human health, with an epidemiologist deployed from each ministry.

Results
The country has developed a five-year strategic plan to guide implementation of the ‘One Health’ approach.

With the ‘One Health’ approach, outbreaks of zoonotic diseases, including Rift Valley fever (RVF), rabies and anthrax, were detected more rapidly, effectively responded to, probably resulting in fewer deaths, better documented, and the understanding of animal–human linkage of the diseases improved. Risk maps have been developed for RVF to guide targeted surveillance and interventions.

A prioritised list of zoonotic diseases has been developed using a semi-quantitative approach.

The ZDU has coordinated the development of a national strategy for the elimination of dog-mediated human rabies that incorporates the ‘One Health’ approach and the implementation of which is based on the Stepwise Approach to Rabies Elimination. Implementation of synchronised activities has started in a pilot county to demonstrate success before extending to the rest of the country.
Conclusion
A ‘One Health’ approach entails having better coordination between human and animal health sectors (and environment) in responding to outbreaks of zoonotic disease, routinely sharing surveillance and outbreak data on zoonotic and unknown diseases between the sectors and developing integrated (human–animal) plans for preventing and controlling priority zoonotic diseases.

Keywords: Collaboration – Kenya – One Health.