Operationalizing One Health:
The Stone Mountain Meeting

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Presenting on behalf of the Stone Mountain Meeting Planning Committee and the Working Group Chairpersons

1st International One Health Congress, February 16, 2011
Why Did We Need a Meeting to Operationalize One Health?

- **Progression of One Health Visionary Meetings**
  - Inter-Ministerial Conferences – New Delhi, Sharm el Sheik, Hanoi
  - Joint Technical Consultations - Verona
  - One Health: from ideas to action - Winnipeg

- Complimentary meeting to define specific action steps to further move One Health forward

- Concern that One Health may have a short shelf life
The Stone Mountain Meeting
Scientific Planning Committee

- International and Multi-sectorial

- Weekly conference calls

- Carefully selected subject matter experts from around the world, representing multiple disciplines
The Stone Mountain Meeting Participants
Operationalizing “One Health”:

A Policy Perspective –
Taking Stock and Shaping an Implementation Roadmap
Stone Mountain, Georgia
May 4-6, 2010
Goal of The Stone Mountain Meeting

Develop Sustainable Inter-sectorial Collaboration at International, Regional, National, and Sub-national Levels

- Identify concrete opportunities for implementing One Health strategies
- Recognize key barriers and possible options for overcoming these barriers
The Stone Mountain Meeting Participants:
A select group of Fifty-Four leaders

- National Ministries of Health
- National Ministries of Agriculture
- European Commission
- United Nations
- World Bank
- Academia, physicians, veterinarians
- Policy, Economic sectors
- Health Professionals
What Can We Accomplish in 3-5 Years?

- TANGIBLE
- RESULTS-ORIENTED
- OUTCOME-DRIVEN
- PRACTICAL

Short-term Changes that Move Us Closer to Our Long-Term Goals
View of 3-5 Year Successes

- Initiated Culture Change
  - Mutual respect and communication across professions

- Increased Visibility
  - Recognition of value-added for human and animal health

- Impacted Political Will and Funding
  - Demonstrate increased impact with finite funding

- Improved Coordination and Collaboration
  - Surveillance, outbreak response, data sharing
The Stone Mountain Meeting Outcomes

- Identified over 20 “critical enabling initiatives”
The Stone Mountain Meeting Outcomes

- 7 specific activities were selected and 7 separate workgroups were formed

One Health Training
Proof of Concept
Business Plan
Country Level Needs Assessment
Capacity Building
Information Clearing House
One Health Global Network
Stone Mountain Meeting Workgroups

ONE HEALTH TRAINING WORKGROUP
One Health Training Workgroup

Leaders
Joseph Annelli, USDA
Kira Christian, CDC

Members
- World Bank
- The ZSL
- Western University
- NIMR, Tanzania
- Princeton University
- CDC
- Wildlife Trust
- HHS/OGHA
- University of Minnesota
- WHO/SEARO
- Burroughs Wellcome Fund
- ILRI
- SwissTPH
- PAHO
- Public Health Foundation of India
- FAO
- Yale University
- The Ohio State University
One Health Training Workgroup

Goal

Develop and build skills, expertise, and competencies through a One Health training curriculum to define the One Health leader and worker capable of planning and implementing One Health activities

TRAINING LEVELS

Orientation  Operational  Proficient  Practitioner  Leader
## Scope of the Project

<table>
<thead>
<tr>
<th>WHO TRAINED</th>
<th>WHO DELIVERS</th>
<th>CRITICAL NEED</th>
<th>DEPTH / LENGTH</th>
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<tbody>
<tr>
<td>Current and future leaders*</td>
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<td>Existing Veterinarians</td>
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<td>Existing Physicians</td>
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<td>Students</td>
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<td>People Already in One Health Flavored Jobs in</td>
<td>University or Agency That has the Administrative Capacity</td>
<td>Upgrade Field-Derived Skills + Didactic Training Above That</td>
<td>2 Week Didactic +/-</td>
<td>People Already in One Health Flavored Jobs in Agencies</td>
</tr>
</tbody>
</table>
One Health Training Workgroup

Update

- Collect and maintain inventory of existing trainings in the US and globally
- Develop core competencies for One Health practitioner
- Network with other agencies addressing core competencies for One Health

Core competencies:
- Epidemiology + Natural History of Disease
- Science/policy
- Risk analysis
- Leadership
- Communication
- Working on complex problems
- Building partnerships
- Culturally competent
- Understanding the multifactorial nature of disease
- Transdisciplinary approaches/fluency
- And underneath all these, expanded competencies based on local conditions
Stone Mountain Meeting Workgroups
PROOF OF CONCEPT WORKGROUP
Proof of Concept Workgroup

Leaders
Peter Rabinowitz, Yale University
Malika Kachani, Western University

Members
- Yale University
- University of Minnesota
- NIMR, Tanzania
- FAO
- PAHO
- CDC
- HHS/OGHA
- Wildlife Trust
- ILRI
- University of Oklahoma
- The ZSL
Demonstrate that the use of One Health interventions lead to better cross-species health outcomes than comparable health care systems not utilizing One Health concepts.
Proof of Concept Workgroup

Summary

- Conduct a series of retrospective and prospective studies
- Focus on high-risk communities to gather evidence-based data
- Perform demonstration project using baseline and metrics to reveal reduced disease
Proof of Concept Workgroup
Update

- Proof of Concept workshop in Atlanta, September 2010
  - Discussed study designs, potential interventions, methods for data collection/frequency, and potential study sites

- Study design currently under review by University and CDC statisticians/subject matter experts

- Exploring funding opportunities

- Updates available at www.cdc.gov/ONEHEALTH
Stone Mountain Meeting Workgroups

BUSINESS PLAN WORKGROUP
Business Plan Workgroup

Leaders
Jan Slingenbergh, FAO
Josef Schmidhuber, FAO

Members
- FAO
- World Bank
- OIE
- CDC
- Royal Veterinary College
Articulate the subject area of One Health more clearly and present it to policy-makers and donors at the global level.
Create a strategy investment document
- Define general OH concepts
- Address proof of concept
- Focus on socio-economic impact

Develop communication strategy

Ensure understanding by donors and policy makers to help garner their support
Informal One Health Workshop

- FAO Headquarters, November 4-5, 2010

Economics of Animal Health and Welfare - How will we increase the impact of economic analysis on decisions about animal and One Health?

- Royal Veterinary College, December 7-8, 2010
- [http://www.rvc.ac.uk/Meetings/AHE/Index.cfm](http://www.rvc.ac.uk/Meetings/AHE/Index.cfm)
Goals of the meeting

- Update on progress of SMM Business Workgroup
- Role of FAO and other international organizations
- Strategies to build more robust interdisciplinary systems

Next steps to develop a One Health Business Plan

- Convert ideas into concrete business plans
- Present plans to key stakeholders
- Coordinate plans across partner organizations
- Ensure national and regional plans are implemented
Topics Discussed

- Basis for applying economics to animal health decision making
- Existing economic tools for animal / One Health decision-making
- Role of economics in training, research, and policy

Meeting outcomes and future activities

- Participants developed a network focused on economics of animal health within the context of One Health
- Strong public health focus on next meeting’s agenda
- Explore how economics might help to understand drivers of risk
Country Level Needs Assessment Workgroup

Leader
Jean Kamanzi, The World Bank

Members
- ILRI
- OIE
- World Bank
- FAO
- SwissTPH
- CDC
- Public Health Foundation of India
- PAHO
- Australian Dept. of Agriculture, Fisheries and Forestry
Expand existing resources to develop country level self-assessment methods to identify programmatic areas that could benefit from a One Health approach and areas for targeting improvement.
Country Level Needs Assessment Workgroup

Summary

- At the request of the country

- Assessment will identify:
  - Level of threat and/or risk of new emerging diseases within the country at the human-animal and environment interface
  - Areas of weakness within the country’s existing systems
Encourage policy makers to incorporate a One Health approach in setting nation-wide priorities
  - Identify opportunities to share resources, personnel, programs, and practices

Complete country ownership over all results

Identify in-country team for long-term implementation
Country Level Needs Assessment Workgroup

Update

- Review existing tools (OIE’s PVS, WHO’s IHR)
- World Bank funded *One Health Operational Country Self Assessment Guide*
- 2011 implementation timeline
Country Level Needs Assessment Workgroup
2011 Timeline

- **MARCH**: Draft assessment tool completed
- **APRIL**: Workshop in Atlanta to refine tool
- **JUNE**: Field testing of tool in 3 countries
- **OCTOBER**: Modifications of tool based on field testing
- **NOVEMBER**: Offer tool for use in other countries
Stone Mountain Meeting Workgroups
CAPACITY BUILDING WORKGROUP
Capacity Building Workgroup

Leaders
Katey Pelican, *University of Minnesota*
Purvi Mehta, *International Livestock Research Research Institute*

Members
- OIE
- CDC
- Burroughs Wellcome Fund
- Wildlife Conservation Society
- Wildlife Trust
- HHS/OGHA
- WHO/SEARO
- WHO/GOARN
- USDA
- Utrecht University
- ILRI
Capacity Building Workgroup

Goal

Raise awareness and expand engagement in the One Health concept by leveraging existing programs and capacity-building efforts.
Capacity Building Workgroup

5-Part Approach

- Develop cross-sectoral capacity building plan
- Coordinate OIE/IHR focal points that already exist
- Enhance training activities
- Engage academia in the promotion of One Health
- Incorporate One Health into 2011-2014 Asia-Pacific Strategy for Emerging Disease
Co-leader from ILRI identified

Develop inventory of existing initiatives that can be leveraged

Recognize common themes and concepts

Identify best practices of One Health

Coordinate closely with Training and Needs Assessment workgroups
Stone Mountain Meeting Workgroups
INFORMATION CLEARING HOUSE WORKGROUP
Information Clearing House Workgroup

Leaders
Tracey McNamara, Western University
Jesus Lopez-Macedo, UNICEF

Members
• CDC
• University of Minnesota
• USDA

• PAHO
• European Commission
• WHO
Information Clearing House Workgroup

Goal

Promote One Health advocacy and connectivity through a centralized system where One Health success stories are gathered and made available to a wide-ranging audience.
A centralized portal for One Health success stories

Includes past and on-going One Health information

A neutral portal where existing sites can link to share their One Health related programs and information

Potentially coordinated and managed by the One Health Global Network
Stone Mountain Meeting Workgroups

ONE HEALTH GLOBAL NETWORK
One Health Global Network Workgroup

Leaders
Alain Vandersmissen, *European External Action Service*
Chantal Symoens, *European Commission*

Members
- ILRI
- WHO
- *Columbia University*
- Ministry of Agriculture, China
- WHO-GOARN
- WHO/SEARO
- Wildlife Trust
- *Norwegian Institute of Public Health*
- USDA
- Public Health Foundation of India
- PAHO
- CDC
- FAO
- Animal Health Clubs
- Western University
- Princeton University
- Australian Dept. of Agriculture, Fisheries and Forestry
One Health Global Network Workgroup

Objectives

- Advocate and garner international support for One Health
- Be a vehicle for further global collaboration on One Health
- Provide efficient method for collection and dissemination of One Health information
One Health Global Network Workgroup

Function

- Virtual umbrella coordinating One Health activities

- Global membership criteria
  - Expertise and experience in One Health
  - Networking and coordination skills
  - Availability and willingness to participate

- Virtual Coordination Team
  - Represents all One Health sectors (up to 10 people)
One Health Global Network Workgroup

**Update**

- **Virtual Coordination Team**
  - 6 criteria agreed upon for member selection
  - 4 out of 10 positions filled
  - Recruiting physicians, plant/environment/wildlife specialists and economists

- **Currently, compiling names for network**

- **Collaborating closely with Information Clearing House workgroup**

- **Inventory of One Health programs and publications will be launched soon**
One Health Global Network Workgroup

Concept of One Health Governance

- One Health should not be “possessed” or “mastered”
- One Health should remain flexible and comprehensive
- One Health can be promoted by various institutions, but cannot be institutionalized
- One Health Global Network can facilitate this process
One Health Office Website Statistics

- 66% visiting “One Health Related Meetings”
- 40% downloading meeting content
One Flu Strategic Retreat

- Co-organized by IZSV and CDC
  - February 1-3, 2011 in Castelbrando, Italy
- Reviewed status of influenza spread and inter/intra species transmission
- Developed recommendations to enhance animal/public health collaboration using the “One Flu” approach
- Meeting presentations and summary will be available soon at [www.cdc.gov/ONEHEALTH](http://www.cdc.gov/ONEHEALTH)
Conclusion

Individuals, organizations and governments have embraced the One Health vision. It is now time to operationalize One Health by taking tangible and measurable actions that move us closer to a One Health paradigm.
For more information please contact Centers for Disease Control and Prevention
1600 Clifton Road NE, Atlanta, GA 30333
Telephone, 1-800-CDC-INFO (232-4636) / TTY: 1-888-232-6348
E-mail: cdcinfo@cdc.gov Web: www.cdc.gov
The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.