



**ONE HEALTH – SOCIAL SCIENCES (OH-SS)
ONLINE MEETING NOTES**

**Monday, June 11, 2018
10:00 AM-11:00 AM EDT**

Goals for the Meeting:

- ✓ **REVIEW** achievements to date
- ✓ **SHARE** an experience crossing disciplines
 - **Jerri Husch:**
"Action Leadership and Managing Complexity: Moving the OH Agenda Forward"
- ✓ **UPDATE** on work group activities
 - Publications
 - Research
 - Mapping Project
- ✓ **PLAN** One Health Day Activity
- ✓ **IDENTIFY** next steps

Attendees:

- Laura Streichert and Lisa Webb (facilitators)
- Aisha Nankanja, Elizabeth Painter, Helena Chapman, Jerri Husch. Robert Blew, Wendy Rib

Recording Available at:

<https://attendee.gotowebinar.com/register/6509170799696531458>

Next Meetings:

We will host 2 meetings in July:

1. Monday, July 16, 2018, 10:00 am – 11:00 am EDT AND
2. Monday, July 16, 2018, 10:00 pm - 11:00-pm EDT

We hope this makes it easier for people to attend.

Please sign up for one or both of the meetings here:

For July 16, 2018, 10 am-11 am EDT:

<https://attendee.gotowebinar.com/register/284049324852484611>

For July 16, 2018, 10 pm-11 pm EDT:

<https://attendee.gotowebinar.com/register/6457376106256662531>

For your assistance, here is a handy link to a time zone converter

<http://www.thetimezoneconverter.com/>



One Health-Social Sciences Initiative

5th Online Meeting
June 11, 2018
10:00 am EDT

→ **MEETING RECORDING:**
<https://attendee.gotowebinar.com/register/6509170799698531458>

Please note you need to register and submit and then the video will begin. (This helps us to see how many people have viewed it.)

Engaging Social Scientists in the One Health Concept through Collaborations that 'Connect, Create and Educate'

Audience Polls

Is Flock working as our communication platform?

Group Decision:
Let's keep trying it. All new technologies have learning curves!

Meeting Goals and Agenda


1. **REVIEW** achievements to date
2. **SHARE** an experience crossing disciplines

Jerri Husch:
"Action Leadership and Managing Complexity: Moving the OH Agenda Forward"

3. **UPDATE** on work group activities
 - Publications
 - Research
 - Mapping Project
4. **PLAN** One Health Day Activity
5. **IDENTIFY** next steps

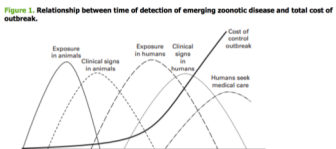
1. REVIEW achievements to date

- OH-SS 5th Meeting
- Work Groups
 - Chair coordination and planning
 - Flock groups being formed
 - Members
- If you would like to join a workgroup, please send email to: ohss@onehealthcommission.org



Achievements

- **Network building**
- **Dissemination**
- ECDC technical report: Towards One Health Preparedness
<https://ecdc.europa.eu/sites/portal/files/documents/One-Health-preparedness-24-May-2016.pdf>



Source: World Bank (14)

Communications

THE LANCET

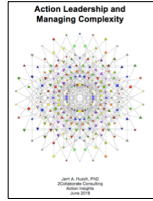


I want to call your attention to a colleague here at the University of Ibadan, Nigeria, Prof. Ayodele Samuel Jegede AYODELE JEGEDE <http://www.sciencedirect.com/science/article/pii/S0950268817300000>, whose 2017 Inaugural Lecture titled **THE FOREST THROUGH THE TREES: THEMES IN THE SOCIAL PRODUCTION OF HEALTH** contains a plethora of Medical Social Research topics that can be relevantly adopted and adapted as OH-SS Research topics.

2. **SHARE** an experience crossing disciplines*

Jerri Husch, PhD

- If OH is to be comprehensive, aligned between actors and actions etc., there is a need for new management methods and tools. Jerri Husch will give a quick overview of "Action Insights" as a practical method that helps link across sectors--and supports the use of integrated evidence for decision making.

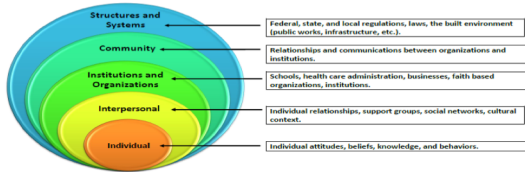


* If you have something to share at future meetings, please contact: ohss@onehealthcommission.org

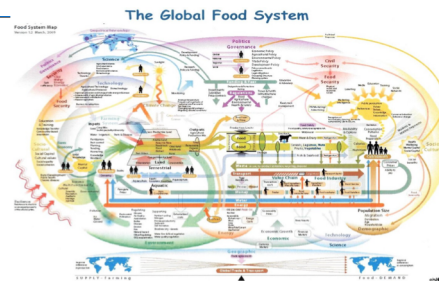
Managing Complexity



Social System Complexity



Social Complexity, Linkages and One Health



Organizational Linkages

INSTITUTIONAL COLLABORATION DIAGRAM

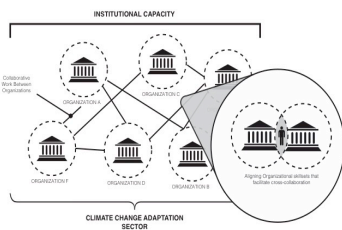


Illustration by G. Chleb Dettner

AAAPT MODEL Elements of Human Social Systems

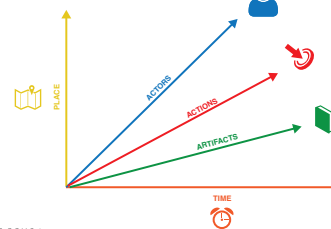
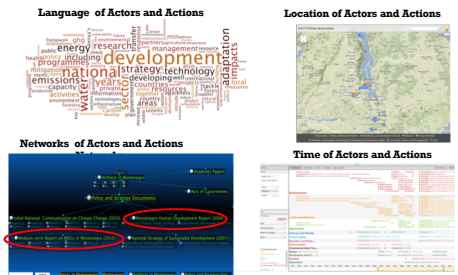
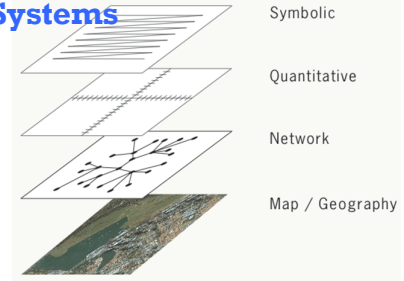


Illustration by G. Chleb Dettner

Visualizing Elements of Social Systems



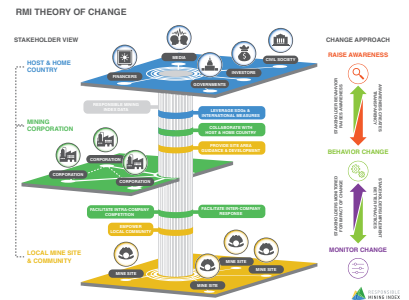
Linking Elements of Social Systems



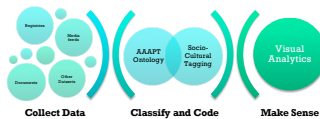
Linked Elements = Realistic Contexts



Organizing and Managing Complexity

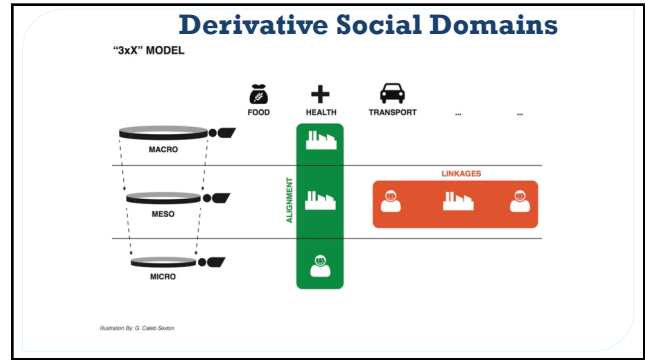
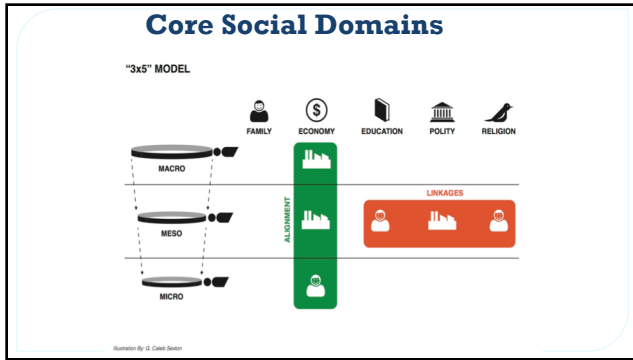


ACTION INSIGHTS



Data Collection: Multiple Sources

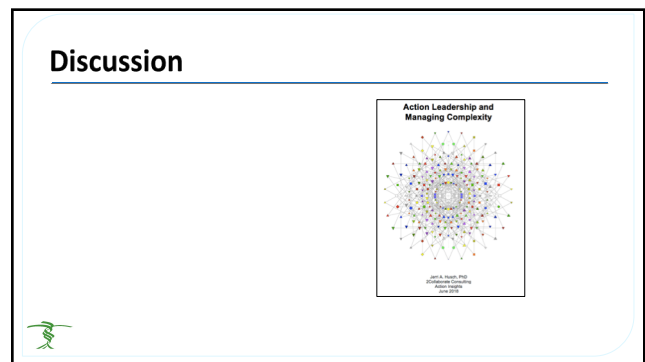




Classification and Coding

description	id	date	type	status	location	year	code
de produits Services	CCM	activité	projet	plan	Congo	2011	2017
de produits Services	CCM	activité	projet	plan	Congo	2011	2017
de produits Services	CCP	activité	projet	departement	Department du Katanga	2010	2012
de produits Services	CCP	activité	projet	departement	Department du Kivu	2011	2013
de produits Services	CCP	activité	projet	departement	Department du Pool	2012	2014
de produits Services	CCP	activité	projet	departement	Commune de Brouville	2011	
de produits Services	CC	activité	programme	plan	Congo	2011	2012

Illustration By: G. Camb Saxon



3. UPDATE on work group activities

OH-SS WORK GROUP	Co-chairs
1 Global OH Ambassador Program	Nicolas Antoine-Moussiaux, Krpasha Govindasamy
2 Map OH-SS Actors	Bernardo Moreno Peniche, Helena Chapman
3 OH-SS Publications	Helena Chapman, Victor del Rio Vilas
4 Conference sessions	Séverine Thys, Hans Keune, and Aurélie Binot
5 Research survey	Aisha Nankanja, Tayo Babalobi, Wendy Rib
6 RICOHA project in India	Sandul Yasobant
7 TEDx type talks	Noore Alam
8 Gender and OH	Brigitte Bagnol, Janetrix Amuguni

Illustration By: G. Camb Saxon

OH-SS Publications:

Goal: To communicate the relevance of integrating social sciences and OH, and to disseminate good practices, benchmarks, and success stories

Actions Completed

- Formed PWG, based on scientific interests and diverse specialties and geographies, that can prepare targeted papers
- Compiled an initial list of potential peer- and non-peer-reviewed publications and conferences that would support multidisciplinary collaborative papers

Illustration By: G. Camb Saxon

OH-SS Publications:

Goal: To communicate the relevance of integrating social sciences and OH, and to disseminate good practices, benchmarks, and success stories

Timeline

- May-Jun 2018
 - Compile initial list of OH-SS journals and conferences
- Jun 2018
 - Confirm initial list of OH-SS journals and conferences
 - Coordinate PWG members to collaborate on topics
- Jul-Aug 2018
 - Prepare first drafts of publications

Publications Table

OH-SS Publications Working Group
June 8, 2018

Discipline	Journal/Conference	Article Type
Medical Education	Journal of Graduate Medical Education	Original Research (1,500 words), Review article (1,500 words), Case Report (1,500 words), Reflections on a Case (1,500 words), Short Report (1,500 words), Letters (1,500 words), Editorials (1,500 words), Clinical Case Reports (1,500 words), Medical Education (1,500 words), A Qualitative Study (1,500 words), Letters (1,500 words), Systematic Review (1,500 words)
		Original Research (1,500 words), Review (1,500 words), Short Communication (1,500 words), Systemic Review (1,500 words), Editorial (1,500 words)
One Health	Journal of One Health	Original Research (1,500 words), Review (1,500 words), Short Communication (1,500 words), Systemic Review (1,500 words), Editorial (1,500 words)
		Original Research (1,500 words), Review (1,500 words), Short Communication (1,500 words), Systemic Review (1,500 words), Editorial (1,500 words)
Public Health	Frontiers in Public Health	Original Research (1,500 words), Review (1,500 words), Short Communication (1,500 words), Systemic Review (1,500 words), Editorial (1,500 words)
		Original Research (1,500 words), Review (1,500 words), Short Communication (1,500 words), Systemic Review (1,500 words), Editorial (1,500 words)
Public Health	Public Health	Original Research (1,500 words), Review (1,500 words), Short Communication (1,500 words), Systemic Review (1,500 words), Editorial (1,500 words)
		Original Research (1,500 words), Review (1,500 words), Short Communication (1,500 words), Systemic Review (1,500 words), Editorial (1,500 words)
Social Science and Public Health	Public Health	Original Research (1,500 words), Review (1,500 words), Short Communication (1,500 words), Systemic Review (1,500 words), Editorial (1,500 words)
		Original Research (1,500 words), Review (1,500 words), Short Communication (1,500 words), Systemic Review (1,500 words), Editorial (1,500 words)

OH-SS Publications:

Goal: To communicate the relevance of integrating social sciences and OH, and to disseminate good practices, benchmarks, and success stories

Table Summary

- Peer-Reviewed Publications
 - Medical Education (N=1), One Health (N=3), Public Health (N=3), Social Sciences (N=2)
- Non-Peer-Reviewed Publications
 - One Health (N=1)
- Conferences
 - One Health (N=1)
 - Public Health (N=1)

OH-SS Publications:

Goal: To communicate the relevance of integrating social sciences and OH, and to disseminate good practices, benchmarks, and success stories

Next Steps


- Continue to identify local, national, and international blogs, journals and conferences that are appropriate for future submissions
- Form teams to prepare first drafts of publication types
 - Letter to Editor, Editorial or Commentary, Review article, Research

OH-SS Mapping Actors (MWG):

Goal: To establish a formal list of active social science stakeholders in OH education, community practice and research, which can expand the current scope and increase the audience size of the OH community

Actions Completed

- Formed MAWG, based on disciplines and geographies, that can explore OH actors (N=16)
- Compiled a list of OH-SS actors
- Prepared a timeline for data collection



OH-SS Mapping Actors (MWG):

Goal: To establish a formal list of active social science stakeholders in OH education, community practice and research, which can expand the current scope and increase the audience size of the OH community

Timeline


- May 2018 Compile initial list of OH-SS stakeholders
- June 2018 Confirm initial list of OH-SS stakeholders
Initiate "Pin Mapping" (OH Day / Who's Who)
- July 2018 Finalize "Pin Mapping"

OH-SS Mapping Actors (MWG):

Goal: To establish a formal list of active social science stakeholders in OH education, community practice and research, which can expand the current scope and increase the audience size of the OH community

Table Summary

- ☐ Geography:
 - ☐ France=2, Germany=2, Kenya=1, UK=5, USA=2
- ☐ Disciplines:
 - ☐ Anthropology, Geography, Global Health, Medicine, Nursing, Philosophy, Public Health, Social Justice, Veterinary Medicine
- ☐ Institution Type:
 - ☐ Academic=9, Private=1, Research institute=2




OH-SS Mapping Actors (MWG):

Goal: To establish a formal list of active social science stakeholders in OH education, community practice and research, which can expand the current scope and increase the audience size of the OH community

Next Steps


- ☐ Continue to expand the original document in Google Docs: https://docs.google.com/document/d/1qcsGUVnKUtnXsj3_YNB3yp90f4c2ZFd-4UefkdeE93c/edit?ts=5ae39a6b
- ☐ Initiate "Pin Mapping" (OH Day/Who's Who)



Research Work Group

- **Aisha Nankanja**
- **Wendy Rib**

- Strategies on how to engage members who expressed interest in the RWG
- Designing an internal research method with Questions and Probes to find out how we can use research to achieve the vision of the OH-SS initiative.





4. PLAN One Health Day Activity

<http://myemail.constantcontact.com/One-Health-Day-2018-Promotional-Launch.html?oid=1121110887318&aid=wZRknxYjMUk>

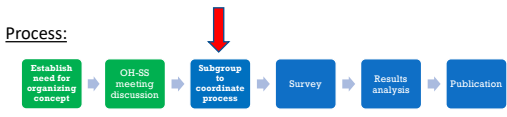
November 3, 2018

Let's do something!





A. Mission Next Steps

Process:




If you would like to join group to create the OH-SS Initiative Mission Statement, please email lcstreichert@gmail.com



CREATE a Mission Statement

All mission statements have CAUSE, ACTION, IMPACT

<p>Our Cause Who? What? Where?</p> <hr/> <p>Our Actions What we do</p> <hr/> <p>Our Impact Changes for the better</p>	<p>Stories: "What would it look like when we're doing our best OH-SS work?"</p> <p>"In Rwanda, we got to help Bagina's family easily get clean water which allowed the four children to focus on school work instead of spending days sick from bad water and nights walking hours to carry back water from the dirty river."</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------



5. IDENTIFY next steps

Next meeting:

- **JULY 16, 2018, 10:00 am-11:00 am EDT (UTC-4)**
- **JULY 16, 2018, 10:00 pm-11:00 pm EDT (UTC-4)**
- Look for message from work group chair(s)
- Look for information about Mission and OH Day Work Group
- Keep talking on Flock! Or by email to ohss@onehealthcommission.org



Lassa fever in Nigeria: the tale of a reactive health system

The World Report by Talha Burki (Feb 24, p 728)¹ described an unprecedented astronomical rise in Lassa fever cases in Nigeria, for which the first case was reported in 1969 and the epidemiology and endemicity are well understood. Failure of the Nigerian health system to prioritise preparedness activities has been detrimental for prompt control of Lassa fever, which requires robust laboratory facilities, trained health personnel, and coordinated epidemiological surveillance.² Therefore, we propose a four-pronged plan to ensure consistent and proactive preventive activities that could ameliorate the high proportion of fatalities and long-term debilitation observed in outbreaks of Lassa fever.

First, communities should be encouraged to take ownership of environmental protection and hygienic practices to control rodent invasion into urban dwellings and reduce rodent breeding areas,³ and to promptly refer cases with concerning symptoms to health facilities. Second, health authorities should prioritise annual training of health workers in the application of universal safety precautions for infection control and regular epidemic response drills, with periodic evaluations. Third, policy makers should provide a description of disease signs and symptoms in local languages, promote culturally appropriate health improvement practices, and publicise toll-free telephone lines for systematic reporting and surveillance. Fourth, the One Health approach⁴ should be applied to minimise human health risks by advocating for environmental sustainability, reduced bush burning practices, and preservation of vector habitats.

Federal commitment to empower collaborative participation of communities and leaders, develop policies

that support health workers' safety, and promote health authorities' leadership in epidemiological surveillance could help establish robust preparedness activities that mitigate the burden of Lassa fever. Such action will inevitably transition the health system from reactive to proactive.

We declare no competing interests.

*Victor J Animasahun,
Helena J Chapman
drvictorani@gmail.com

Derriford Hospital, Plymouth Hospitals NHS Trust, Plymouth PL6 8DH, UK (VJA); and College of Medicine, University of Florida, Gainesville, FL, USA (HJC)

- 1 Burki T. Lassa fever in Nigeria: the great unknown. *Lancet* 2018; **391**: 728.
- 2 Nicholson A, Reeve Snair M, Herrmann J, The National Academies of Sciences, Engineering, and Medicine. Global health risk framework: resilient and sustainable health systems to respond to global infectious disease outbreaks—workshop summary. Washington, DC: The National Academies Press, 2016.
- 3 WHO. Lassa fever—Nigeria. March 23, 2018. <http://www.who.int/csr/don/23-march-2018-lassa-fever-nigeria/en/> (accessed April 12, 2018).
- 4 Rabinowitz P, Kock R, Kachani M, et al. Toward proof of concept of a One Health approach to disease prediction and control. *Emerg Infect Dis* 2013; **19**: e130265.

Dengue vaccination: a more ethical approach is needed

Since 2016, we have discussed the risks behind the recommendation and use in mass vaccination programmes of Dengvaxia—a dengue vaccine produced by Sanofi Pasteur (Lyon, France)—without immunological pretesting.^{1,2} By using differential equation models and statistical methods, my colleagues and I re-assessed publicly available data from vaccine trials, and found a substantial reduction in the number of hospital admissions when Dengvaxia was given only to seropositive individuals (ie, those with a history of a previous infection from dengue virus), and a substantial increase in the number of hospital admissions over 5 years

when administered without a previous population screening.³ More recently, we have found that an individual's serostatus before vaccination is the determinant of vaccine efficacy and its possible benefits.^{4,5} These findings eventually led the manufacturer to do a new analysis of the available trial data, resulting in WHO changing its recommendations on this vaccine in December, 2017.⁶ Our efforts were recently acknowledged in an Editorial in *The Lancet Infectious Diseases*.⁷ I therefore wish to respond to a recent Correspondence in *The Lancet* by Tikki Pang and colleagues (Feb 17, p 654),⁸ written on behalf of the Asia Dengue Vaccine Advocacy Group (which has received unrestricted educational grants from Sanofi Pasteur).

Pang and colleagues agree that the risk of severe disease in vaccinated children naive to dengue virus is real,⁸ as confirmed by Sanofi Pasteur on Nov 29, 2017.⁶ However, the authors also propose continuation of the mass vaccination programme, with physicians informing parents that “the potential benefits of vaccination far outweigh the potential risks for their child on the basis of factors such as the endemicity level where they live and the age of the individual”.⁸ This approach is disturbing and unacceptable, especially after the latest public advice from WHO that “until a full review has been conducted, WHO recommends vaccination only in individuals with a documented past dengue infection”.⁹

Pang and colleagues have also, fortunately, mentioned that a reliable laboratory testing method to detect previous exposure is needed, and suggested that it could be discussed and implemented. I agree with the authors that a reliable laboratory test is urgently needed to identify seropositive individuals; however, this vaccine should only be used after finding seropositivity, and it is definitely not suitable for a mass immunisation programme



Getty Images/Dondi Tawanao/Contributor

Submissions should be made via our electronic submission system at <http://ees.elsevier.com/thelancet/>