

# West African countries One Health platforms evaluation and launch workshop report

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# Acronyms and abbreviations

AFROHUN	Africa One Health University Network
AHH	Animal and Human Health
AVSF	Agronomes et Vétérinaires Sans Frontières Farmers and Veterinarians Without Borders
CCHF	Crimean-Congo Hemorrhagic Fever
CHISU	Country Health Information Systems and Data Use
CIRAD	Centre de coopération Internationale en Recherche Agronomique pour le Développement French Agricultural Research Centre for International Development
CIRDES	Centre International de Recherche-Développement sur l'Élevage en zone Subhumide
CSRS	Centre Suisse de Recherche Scientifique (Switzerland Scientific Research Centre)
DDG	Deputy director general
DGSHP	Direction Générale de la santé et de l'Hygiène Publique
DRRAH	Direction Régionale des Ressources Animales et Halieutiques
ILRI	International Livestock Research Institute
INERA	Institut de l'Environnement et de Recherches Agricoles Institute of Environment and Agricultural Research
LMIC	Low- and middle-incomes countries
NEOH	Network for Evaluation of One Health
NGOs	Non-governmental organizations
OH	One Health
OHRECA	One Health Research, Education and Outreach Centre in Africa
POLOH	Poultry Losses and One Health
PVS	Performance of Veterinary Services
UJKZ	Université Joseph Ki-Zerbo

# 1 Executive summary

This report details a two-day workshop held from 6-7 September 2022 in Ouagadougou, Burkina Faso, organized by the One Health Research, Education and Outreach Centre in Africa (OHRECA) led by the International Livestock Research Institute (ILRI) to enhance the One Health approach in the West Africa subregion. The principal objectives of this workshop were to validate the results of the One Health (OH) platforms assessment carried out by OHRECA for Burkina Faso, Mali and Senegal with the stakeholders; present the ongoing ILRI's OH initiatives in Burkina Faso and launch upcoming ones. Another important objective of the workshop was to facilitate networking between the various OH stakeholders in West Africa to identify areas for collaboration.

The workshop brought together participants from the West African subregion (Mali, Senegal, Côte d'Ivoire, Burkina Faso) through their national OH platforms and other OH initiatives implemented in each country. The local experts and resource persons were also invited to enhance discussion and share experiences with the national platforms. In addition, Burkina Faso national institutions, ministries, non-governmental organizations (NGOs) and associations involved in the OH approach were also involved in the workshop. These include the national OH platform, the Ministry of Health, the Ministry of Environment, the coordinator of the OH committee, the Ministry of Livestock and other professional sectors and research institutes. Key regional OH initiatives such as Africa One Health University Network (AFROHUN) and the African Science Partnership for Intervention Research Excellence (Afrique One ASPIRE) were represented by their leaders.

An opening ceremony was organized and attended by representatives from the Burkina Faso Ministry of Health, the Ministry of Livestock, the Ministry of Environment and ILRI officials from West Africa and Kenya. The workshop used PowerPoint presentations, question and answer sessions, group work, plenary sessions, and discussions with moderators. A networking session was also organized to facilitate interaction among OH stakeholders in the West African subregion.

The first day was dedicated to the presentation and discussion of OH initiatives implemented in West Africa and the OH platforms of the invited countries. In addition, several OH initiatives set up by other West African institutions in countries such as Cote d'Ivoire, regional initiatives such as AFROHUN and Afrique One ASPIRE were presented with enriching discussions and interactions between the actors.

The results of the One Health platforms' evaluation in Senegal, Burkina Faso and Mali were presented on the second day. Group work was organized and recommendations were collected from the participants to improve subsequent evaluations. A presentation and discussions of the ILRI project on the epidemiology of Crimean-Congo haemorrhagic fever (CCHF) in Burkina Faso, the ILRI-led 'Urban food markets in Africa project: Incentivizing food safety using a pull-push approach (Pull Push project)' and the Poultry Losses and One Health (POLOH) project: Reducing losses and zoonotic risks along the poultry value chain through a One Health approach. These projects were chosen because of their strong use of OH approaches.

## 2 Background

ILRI has undertaken several initiatives to improve the health of humans, animals and their shared environment on the African continent. These include establishing the creation of the One Health Research, Education and Outreach Center in Africa (OHRECA) and implementing several research and capacity-building projects using a OH approach in the West African subregion. The recent initiatives include:

- An assessment of the National One Health platforms in Burkina Faso, Mali and Senegal.
- The implementation of the Pull Push project in Burkina Faso, which aims to improve food safety in informal markets through a pull-push approach.
- The implementation of the POLOH project, which aims to reduce economic losses and zoonotic disease transmission in Burkina Faso through OH interventions at the farm level and market, with a focus on poultry diseases.
- The research project on the epidemiology of CCHF to better understand transmission dynamics of the disease at the interface with animal, humans and their environment in rural households in the North and Hauts-Bassins region of Burkina Faso.

These initiatives will be presented and disseminated to national and subregional stakeholders working in OH to encourage synergy of action. Opportunities will also be sought for better integration of these projects with ongoing initiatives led by other institutions, as well as learning from each other.

## 3 Objectives

This workshop aimed to introduce the One Health projects by ILRI in Burkina Faso and facilitate networking between stakeholders in the West African subregion.

More specifically, the event aimed to:

- Present and validate the results of the assessment of the OH platforms in Burkina Faso, Mali and Senegal to stakeholders,
- Present ILRI's new OH projects to stakeholders,
- Discuss challenges and opportunities in the effective implementation of the OH approach in Burkina Faso and the West African subregion;
- Facilitate networking between OH stakeholders in Burkina Faso and the West African subregion in joint projects.

## 4 Workshop organization and methodology

To achieve the set objectives, the workshop was organized over two days from 6–7 September 2022 in Ouagadougou. The methods used were:

- PowerPoint presentations followed by question and answer sessions
- Group work followed by moderated plenary sessions and discussions
- A networking cocktail to enhance interaction among OH stakeholders in the west African subregion.

English-French translation was provided throughout all the sessions and discussions.



# 5 Summary of activities, topics covered and key points of discussions

## Day 1: Opening ceremony and presentation of One Health (OH) initiatives in West Africa

### Opening ceremony

The official opening ceremony was attended by representatives of the three ministries directly involved in the One Health national committee: the Ministry of Health, the Ministry of Livestock, and the Ministry of Environment. An introductory speech was given by Dieter Schillinger, ILRI deputy director general (DDG) Biosciences. This was followed by the keynote address by the ILRI Regional Representative for West Africa, Abdrahmane Wane, the representative of the Minister of Health and the representative of the Minister in charge of animal resources and fisheries of Burkina Faso. The Deputy Secretary General in the Ministry in charge of Environment, Samuel Paré, delivered the opening speech on behalf of the Minister of Environment, who is the coordinator of the OH platform, which was preceded by the welcome address by the Co-leader of the ILRI Animal and Human Health program, Hung Nguyen.

### Presentation of One Health initiatives in Africa

During this session, five OH initiatives, including two from ILRI, were invited to present the OH activities they are conducting. Below is a summary of the content of these initiatives

#### One CGIAR One Health Initiative

Presented by Hung Nguyen

This initiative aims to protect human health by improving the detection, prevention, and control of zoonoses, foodborne diseases and antimicrobial resistance (AMR) in low- and middle-income countries (LMICs). Its work is carried out through five work packages: zoonoses, food safety, antimicrobial resistance, environment and economy, and governance and behaviour. In West Africa, Cote d'Ivoire has been selected for a case study which will focus on disease emergence in bush meat.

#### One Health Research, Education and Outreach Centre (OHRECA)

Presented by Bernard Bett

This project aims to significantly enhance human, animal and environmental health through applied OH, strengthening capacity in OH, supporting One Health network initiatives, and developing pathways from evidence

to policy and practice. One of this project's initiatives is to evaluate the national OH platforms of countries in West and East Africa. The participants discussed the preliminary results for West Africa during this workshop.

### The African Science Partnership for Intervention Research Excellence (Afrique One ASPIRE)

Presented by Bassirou Bonfoh

This project is a pan-African research consortium for capacity building in One Health. The project is collaborating with institutions in many African and European countries. Its research focuses on ecosystem and population health by broadening disciplinary, sectoral, linguistic, cultural and geographic boundaries. With postdoc, PhD and master's students, ASPIRE conducts interdisciplinary and transdisciplinary research on diseases at the human-animal-environment interface (zoonoses).

### Africa One Health University Network (AFROHUN) in West Africa

Presented by Sara Daniele Dieng

AFROHUN is built with a vision to drive transformational change for continuous improvement of the health and well-being of humans, animals, and the environment through OH principles and approaches to research, training and community service. The different pillars to reach this objective are education and capacity building, research innovation and community service. Others are resource mobilization, partnerships, and organizational and network strengthening. One ongoing project is STOP Spillover, which aims to work with in-country stakeholders to understand and address the threats posed by zoonotic viral diseases and reduce the risk of viral spillover and spread.

### World Organization for Animal Health (WOAH) One Health activities in West Africa

Presented by Yacinthe Guigma

This presentation highlighted the One Health initiatives of the WOAH. These initiatives use the OH approach under the global tripartite agreement signed in 2010 between WOAH, World Health Organization and the Food and Agriculture Organization of the United Nations (FAO), which is now quadripartite with the inclusion of the United Nations Environment Programme (UNEP). One of the WOAH OH projects aims to enhance surveillance systems for the early detection and prevention of viral hemorrhagic fevers in Africa.

## Keys points question and answer session and discussions:

### The diversity of OH initiatives and the relationship with funders

The need for establishing a partnership among the different One Health initiatives, actors and funders was discussed to avoid duplication of activities. The participants agreed to improve their collaboration to enhance synergistic actions between the various OH initiatives.

### One Health training

All the projects presented are involved in training and capacity building activities. The participants raised concerns about the accessibility to the training activities and selection criteria for scholarships offered by OHRECA, AFROHUN and Afrique One ASPIRE. Representatives of the three projects clarified that all scholarships are offered through an open call where anyone can apply. The applications are then reviewed by a selection committee that picks the winners in a process that is transparent, equitable and responds to priorities and demands.

## OH funding and sustainability

The projects representatives answered questions on their strategies for maintaining OH funding and finding new financing. Prof. Bonfoh Bassirou from Africa One ASPIRE said effective resource mobilizations is supported by high-quality scientific evidence and research outputs. He gave the example of the Africa One ASPIRE, which was initially funded with 3 billion CFA francs, which the project used to mobilize four times the initial amount. T

It was highlighted that there is need to evaluate the funding for LMIC countries especially in Africa where health problems are complex and resources are limited. Participants called for the promotion of integrated actions between the different components of the OH.

## The role of socio-economics in the OH approach

Despite the crucial importance role of social and economic factors in implementing the OH approach, participants acknowledged the weak consideration of socio-economic aspects in most initiatives especially in the POLOH project. They said these aspects needed to be reinforced in ongoing and upcoming OH projects by among other measures, giving socio-anthropologists a central role in the OH research process.

## Research results valorization

The results of research on One Health must be valorized by considering the scientific evidence in health policies.

## Questions and answers (key points)

### *How are countries selected to be included in the One CGIAR OH initiative? (to Hung Nguyen)*

The selection of countries is based on a pre-identified criteria of priorities. For examples Cote d'Ivoire was chosen from among other west African countries because of the potential of its environment (forest) to host emerging diseases.

### *How do you better explain the joint occurrence of diseases in the geospatial study presented? (to Bernard Bett)*

The onset of a new disease can be linked to another. So, it is also to work on clinical cases to better investigate the links with other diseases. For example, the analysis presented aims to study the spatial distribution of five zoonotic diseases (Crimean-Congo haemorrhagic fever, Rift Valley fever, anthrax, Ebola and trypanosomiasis) in Africa. The data shows that outbreak of haemorrhagic fevers such as CCHF and Rift Valley fever are (RVF) which were mostly observed in the same areas. This could be explained by the shared risk factors of these zoonotic diseases. Still, we are also trying to investigate other aspects of other diseases that may be involved.

### *How do we avoid the risk of duplication of the atlas in production? (to Bernard Bett)*

It is expected that at the end of our study, we will develop an atlas of the risks of zoonotic disease emergence. Similar studies have been done in the subregion and in Africa. The atlas, which shows the spatial distribution of emerging diseases of zoonotic importance in Africa and currently in production is not a duplication of what has been produced by other institutes. Rather, its focus is on the factors contributing to disease co-occurrence to show the factors that contribute to disease emergence in Africa.

### *How can One Health be used to address disease emergence in insecure areas? (to Bernard Bett)*

The Sahel region in West Africa is facing a huge security challenge that can further weaken national health systems. Insecurity also hampers the implementation of OH activities. It is important to see how One Health approach can enhance disease surveillance and control in areas having insecurity.

*How do we improve the participation of local communities in OH in the Afrique One ASPIRE projects? (to Bassirou Bonfoh)*

Communities are involved in assessing and controlling complex health problems involving several actors. Therefore, community involvement must be considered at the start of a project. Ideally, always go back to the community, talk to them and come back with their expectations regarding all research questions. On this basis, the approach of ASPIRE consists of adopting systemic thinking by involving several profiles of researchers including, sociologists and economists, in the context of research with communities. A striking example of success in adopting this systemic approach was the control of Buruli Ulcer in Côte d'Ivoire through the synergy of mobilized actors from different backgrounds. Since then, for any study conducted at the Centre Suisse de Recherches Scientifique (CSRS), four to six students with different profiles are mobilized around the same disease by involving communities to find a lasting sustainable solution.

*How does one become a member of the OH network of AFROHUN? (to Sara Dieng)*

To be a member, one only needs to be associated with one of the three health sectors (animal, human and the environment). However, there are plans to include professional schools and to reach out beyond the universities to training institutions (e.g. those in water and forestry research) to join the network.

*How does the One Health student club work? (to Sara Dieng)*

The OH student club membership is drawn from several disciplines. Their role is to embed OH approach to critically develop their thinking and apply to solve complex issues in public health. Students work on identified themes; gain new skills and join various associations.

*What is being done to support each country's wildlife surveillance? (to Yacinthe Guigma)*

Following the outbreak of Lassa fever, Cote d'Ivoire has developed its roadmap. The wildlife surveillance aspects are part of it. In addition, the Performance of Veterinary Services (PVS) wildlife tool has been designed to assess countries' capacity to monitor and evaluate wildlife surveillance. However, the country needs to adopt more flexible laws (legislation) to achieve wildlife monitoring in countries such as Burkina Faso. In addition, there should be complementarity between existing laws, and they should be better examined and adapted to each country's context.

## Presentation of the national OH platforms and projects evaluated by OHRECA

The summary of the presentations of the platforms and projects evaluated by OHRECA is given in Table 1.

Table 1: Summary of presentations of OH platforms of Burkina Faso, Mali, Senegal and Côte d'Ivoire

Country / structures	Context	Structure/ organization	Major achievements	Challenges/ perspectives
Burkina Faso National OH Platform  <i>Presented by Nadège Minougou</i>	The global health security agenda has led to the establishment of One Health Burkina	<b>Organization (top to down):</b> 1. One Health National Council (1st Ministry) 2. Technical Steering Committee (rotating chairmanship) 3. SFOne Health-Technical Secretary, Technical Agent, Experts - (One Health focal points-Technical Commissions-Thematic Commissions)	Formalization of the platform-drafting of thematic orders-drafting and validation of standard operating procedures (SOPs)-list of priority zoonoses-One Health electronic platform- Training of about 50 field agents, carrying out joint investigations, joint risk assessment for three zoonoses	Finalization of draft thematic orders: A model order for the deconcentrated committees
Senegal  National One Health Platform  <i>Presented by Abdoulaye Samb, One Health Coordination team</i>	Creation of the Haut Conseil National de la Sécurité Sanitaire Mondiale (HCNSSM) 2017 adoption of the order preventing health emergencies	1. Permanent secretariat 2. The multisectoral steering and coordination committee 3. Technical coordination task force 4. Intra-sectoral committees-technical and thematic groups 5. International Health Regulations (IHR) focal point, deconcentrated coordination committees  <i>Monitoring/evaluation mechanisms: annual evaluation</i>  <i>Implementing actors public sector-national agencies-labs-universities</i>  <i>Themes: coordination -detection- prevention</i>  <i>Funding: Internal (state, local authorities, private sector) and external</i>	Regionalization of the One Health approach; simulation exercises for nuclear, radiological, chemical and biological risks; training/awareness-raising kits for schools	Strengthening the institutional framework of the Hight National Council for Health Security – One Health, community ownership, operational research  Recommendations:  Strengthen the capacities of actors in the areas of health, environment and animal health

Country / structures	Context	Structure/ organization	Major achievements	Challenges/ perspectives
<p>Mali</p> <p>National One Health Platform</p> <p><i>Presented by Boubacar Bass</i></p>	<p>Organization adopted by decree in 2018 attached to the 1st ministry</p>	<p>1. Steering committee - multisectoral technical coordination committee</p> <p>2. Permanent secretariat (4 thematic groups and 33 focal points)</p>	<p>-The platform has a national strategic plan</p> <p>- Multisectoral activities and implementation: holding 22 monthly meetings, holding the preparatory workshop for the steering committee</p> <p>-Training module validation activity:</p> <p>National workshop to prioritize zoonoses (five priority zoonoses in Mali)</p> <p>-33 focal points and deputies</p> <p>-Establishment of regional platforms</p> <p>National strategic plan to fight against antimicrobial resistance</p> <p>-Training of trainers</p>	<p>Insufficient funding for the formalization of the platform</p>
<p>Côte d'Ivoire</p> <p>National One Health Platform</p> <p><i>Presented by Ouattara Djakaria</i></p>	<p>Decree on the One Health platform from 2019; revised in 2020</p>	<p>1. Monitoring committee (Prime Minister, 19 ministries, organizations and diplomatic missions) 2. Technical coordination committee</p> <p>3. Technical secretariat: 6 thematic groups (3 already in place, 3 to be set up and departmental platforms)</p>	<p>Development of national reference documents: Drafting of regulatory texts</p> <p>Capacity building/ existence of student club in universities/ transdisciplinary research/multi-sectoral collaboration/ prioritization of zoonoses/joint investigations</p>	<p>Advocating for the engagement of all stakeholders</p> <p>Operationalization of the platform/mobilization of resources</p> <p><a href="http://www.pluss-ci.org">www.pluss-ci.org</a></p>

## Key points of discussion

### *Structure of the platforms*

Considering that most OH platforms are institutionally linked to high-level institutions, the administrative burden of operationalizing activities was raised as a concern. Participants acknowledged that platforms face organizational complexity due to this problem. Still, it is necessary that the anchoring and coordination of the platforms is assigned to administrative entities beyond the ministers directly involved to facilitate decision-making.

Without a governance document and resources, the operation will not be effective. It is the lack of legal basis that prevents the progress of platforms.

### *Platform funding and sustainability*

Discussions also focused on sharing experiences on the sources of funding for national platforms and the sustainability of these resources. It was noted that the platforms are globally underfunded and that there is a need to continue to advocate for the autonomous funding of the platforms. Also, the pooling of resources of the ministries involved in the framework of One Health activities was recommended. This pooling does not mean a systematic pooling in a kitty but a clear definition of activities/actions in each ministry. The pool should be distributed in proportion to the costs/benefits. Nevertheless, it emerged that the various platforms had a short- or medium-term plan for financing the activities of their respective platforms.

## Day 2: Results of One Health project evaluations and presentation of ILRI One Health projects in Burkina Faso

### Presentation of the One Health platforms evaluations results

Presentation of the evaluation tool: Network for Evaluation of One Health (NEOH) by Bernard Bett

The Network for Evaluation of One Health (NEOH) is a tool that highlights evidence and gaps in the OH platforms and programs. The tool consists of six assessment areas or competencies: Three operational areas (one thinking, one planning, one working) and three infrastructures (one sharing, one learning, one systemic organization). The method used for the evaluation was the administration of a questionnaire followed by an online validation (of scores) by the stakeholders and feedback and prioritization of interventions. Specific elements were identified in each area where the scores were very low. Finally, scores were used to develop a OH index. The outcomes obtained after evaluating the platforms were: draft reports (expected feedback from teams); publication of country reports with OH team members as key authors. The final outlook will be to identify priority areas for intervention/ gaps to fill (e.g. training).

### Presentation of the One Health platforms and projects evaluation results

The evaluators presented the evaluation results of the different platforms using the NEOH tool.

The following were presented in turn:

- The national platform of Burkina Faso
- The project Country Health Information Systems and Data Use (CHISU) (Burkina Faso)
- The national platform of Mali
- The project Tiellal from Farmers and Veterinarians Without Borders
- Agronomes & Vétérinaires Sans Frontières (AVSF) Senegal
- (Details of the results in the evaluation report associated)

## Key points of group work

A group work session followed the presentations. The participants were organized by country to discuss the results of their evaluation. The guidelines for discussions were:

- Are the gaps identified in the evaluation reflecting the actual situation in the platforms?
- What are the priority gaps?
- What are your recommendations for interventions?
- What should be the research priorities in One Health?

The results of the group discussions are summarized in Table 2.

Table 2: Summary of the group discussions

	Burkina Faso	Mali	Senegal
Validation of the evaluation	Agree with the general conclusion but advise adapting to the current situation of the One Health platform by considering improvements	Mali stakeholders disagree with the scoring of some items (P2, P6, P7, S01). They advised that all the platform stakeholders should be present for the assessment and they recommended the evaluation be repeated and involve all platform members.	They are broadly in agreement with the assessment made
Priorities gaps	Sustainability/socio-ecological considerations  Skills development through distance learning  Data and information sharing	Self-assessment and revision of the plan  Information and communication technologies  Sharing general information for awareness  Institutional memory and resilience  Team structures	System characteristics and targets  Stakeholder engagement  Biosafety improvement and quality management  Improved information and communication technologies  Methods and sharing of results
	Capacity building through training, supervision, equipment  Introducing the One Health approach at all levels  Operationalization of the One Health platform at the decentralized level  Inform and raise awareness and train actors  Improve governance at the decentralized level	Self-assessment and plan revision: provide the platform with self-assessment tools  Capacity building of Platform members on self-evaluation.  Capacity building of Platform members on Information and Communication Technologies.  Establishment of a data collection system in the departments of agriculture and environment  Setting up an electronic platform supported by the National Agency for Telehealth and Medical Informatics (ANTIM).  Set up a data-sharing system (website)	Involving other actors and seeking additional resources  Setting up data management systems  Training and equipment



	Burkina Faso	Mali	Senegal
Research priorities in OH	Develop a monitoring and evaluation tool for activities  Determination of added value in One Health interventions to address common issues/problems		Identification of factors influencing the appropriation of the One Health approach through community platforms

## Keys points of plenary session discussion (group work)

The discussions focused on three main topics:

- 1• The non-inclusion of some stakeholders from the One Health platform, particularly in Mali: the Mali team felt that the administration of the evaluation questionnaire did not consider all the platform's stakeholders, leading to a bias in the results obtained. The group suggested that the questionnaire be administered again, considering all the stakeholders of the One Health platform in Mali.
- 2• The suitability of the NEOH tool for the contexts of the countries evaluated was discussed. It was suggested to adapt it according to whether a project or a national platform is being evaluated. Also, this tool should be dynamic according to the actors involved.
- 3• The lack of prior communication about the evaluation through the NEOH tool and the interpretation of the results did not allow for better adhesion and validation of the review results. Nevertheless, most participants welcomed the organization of this workshop which allowed them to understand the evaluation better and to interact and share experiences between countries.

## Presentation of ILRI projects in Burkina Faso

### Epidemiology of CCHF in Burkina Faso using a One Health Approach

*Presented by Abdoul Ilboudo*

The project's objective is to produce scientific evidence to understand the role of interactions between domestic animals, humans, the environment, and vectors in maintaining the transmission of Crimean-Congo haemorrhagic fever (CCHF) in Burkina Faso using a One Health approach. Its other objectives are to (i) determine the seroprevalence of CCHF in Burkina Faso and the risk factors in humans and common domestic animals (cattle and small ruminants), (ii) determine species and subspecies of ticks involved in the transmission of the disease, and (iii) develop a mathematical model that could be used to predict the occurrence of CCHF under varied environmental and geographical conditions. The study's outcome will be to provide scientific evidence on CCHF presence among humans and animals to strengthen disease surveillance and control strategies.

### Poultry Losses and One Health (POLOH): Reducing losses and zoonotic risks along the poultry value chain through a One Health approach

*Presented by Michel Dione*

The overarching goal of this project is to enhance household food security and safety, and improve the livelihoods of smallholder poultry producers by reducing economic losses and zoonotic risks along the value chain using a One Health approach. The project is implemented in the central-west region of Burkina Faso in the commune of Boussouma using a gendered mixed method to gain insights into smallholder households' food security and safety. The study aims to:

- i•. Take stock of the knowledge, attitudes and practices (KAP) of small-scale chicken producers and other value chain actors.
- ii•. Determine the distribution and characterization of the main zoonotic pathogens associated with chicken (campylobacter and *Salmonella*).
- iii•. Develop and test innovative integrated education and training (IET) modules using a One Health approach (hygiene, biosecurity, flock management, animal welfare) to support the production of high-quality (healthy and nutritious) poultry products.
- iv•. Identify and test gender-sensitive business models that improve access to veterinary inputs and advisory services through public-private partnership.
- v•. Build the capacity of the next generation of national researchers and academics in poultry health and food safety using a One Health approach and to improve networking and collaboration between stakeholders.

## The Urban food markets in Africa – Incentivizing food safety using the pull push method (Pull Push project)

*Presented by Theodore Knight-Jones*

This project is improving food safety in urban informal markets in Burkina Faso and Ethiopia. The hypothesis is that both 'pull' and 'push' approaches must be co-implemented in African urban food markets to lead to sustainably improved food safety. The different work packages of the project are:

- i•. Estimating the burden and cost of key foodborne illnesses in Burkina Faso and Ethiopia.
- ii•. Understanding the poultry and vegetable value chains in urban markets in Burkina Faso and Ethiopia.
- iii•. Quantitative microbial risk assessment and cost-effectiveness analysis of candidate market-based interventions.
- iv•. Build capacity and motivation of regulators to manage food safety (intervention 1, push approach).
- v•. (Empower market-level value chain actors to manage food safety (intervention 2, push approach).
- vi•. Design and implementation of a consumer campaign (intervention 3, pull approach).
- vii•. Impact assessment of the pull-push intervention.

The presentation also insisted on the synergistic aspects between the Pull Push and POLOH projects to achieve common objectives.

## Key points of the question-and-answer session

### Inclusion of social aspects the CCHF project

Social aspects were initially included in the first draft of the project. However, given the amount of work for the research fellow, these aspects were removed. However, the KAP surveys could highlight these social sciences and humanities aspects. Comments were also made on the need for synergy of action with other projects already underway, notably the CCHF surveillance project implemented by the WOAHA in the West and Central Africa.

### Sensitization and advocacy aspects of the POLOH project

Raising awareness is a key aspect of the project, but it should be combined with other sources of motivation for livestock keepers such as training and exchange visits. The discussion also focused on strategies to enhance

sensitization during the study implementation. It was suggested to be careful not to panic farmers by too much sensitization but rather to give them well-founded reasons to pay attention to zoonotic diseases. In other words, awareness-raising sessions should have more positive than negative messages.

### What are the vulnerable groups and microbiological risks? (Pull-Push)

Children under five years of age are more likely to be contaminated by poultry droppings released on the ground by households individuals infected with pathogenic bacteria, including salmonella and campylobacter. This faecal-oral contamination limits the absorption of nutrients in the gut and leads to undernourishment.

### General comments and experience sharing

The big question is where to invest in reducing the health risk in the consumption of animal products: control or community-based behaviour change. Both approaches must be conducted to change behaviour to reduce the health risks associated with the consumption of animal products. The participants shared their experiences on the key issues to be addressed: the burden of ticks on livestock production and the misuse of chemicals in the environment on livestock.

## 6 General recommendations

OH initiative in Africa	<p>Enhance collaboration between the different OH initiatives in the West Africa region</p> <p>Implement a communication platform for OH initiatives to improve synergistic actions and data sharing</p> <p>Facilitate the accessibility of training and capacity-building initiatives to the professionals, students and stakeholders</p> <p>Improve the role of socio-economic sciences in OH projects</p>
OH platforms	<p>Improve the governance in the national OH projects platforms</p> <p>Formalize texts and laws for the OH platform functioning</p> <p>Ensure enough funding and sustainability through contributions of each department and institution involved in the platform (pooling)</p>
Research in OH	<p>Ensure data and information sharing between the different projects</p> <p>Develop an adapted monitoring and evaluation tool for OH platforms and activities</p> <p>Determination of added value in OH interventions to address common issues/problems</p> <p>Consider involving communities in the early stages of the OH projects to understand and incorporate their expectations</p>

# 7 Annexes

## List of participants

<b>No.</b>	<b>Name</b>	<b>Institution</b>
1	Bonfoh Bassirou	CSRS/Abidjan
2	Ilboudo Maxime	BFI TV
3	Sow Ahmadou N	ILRI Mali
4	Yameogo Helene	CHISU
5	Nana S Desire	CIRAD
6	Ilboudo S Guy	ILRI
7	Ilboudo Abdoul kader	ILRI
8	Minoungou Nadege	ST-OH
9	Geoffrey Njenga	ILRI
10	Savadogo Madi	IRSS
11	Ouoba Ima Sidonie	INERA KDG
12	Koura Dofinita	DRRAH-HBS
13	Combary Evariste Thierry	DPRAH Bobo
14	Bikinga\Guigma Haoua	AOH
15	Lallogo NR Valerie	ILRI
16	Sorgho Georges	DGEF
17	Abdrahmane Wane	ILRI
18	Boubacar Bass	SP-OH
19	Mahamoudou Keita	MDR
20	Abel Biguezoton	CIRDES
21	Mande Charles	ONV-BF
22	Yougbaré Bernadette	INERA OUAGA
23	Koala Lassane	IRSS-BOBO
24	Bayala Jules	CIFOR-ICRAF
25	Gouba/Ouedraogo Natacha	worldveg
26	Badji Seydou	AVSF
27	Ouattara Djakaria	OH-CI
28	Yao Kouadio Alain Marc	DSV-CI
29	Guigma Yacinthe	OMSA-MALI
30	Zangre Hamidou	AMVET-BF
31	Bernard Bett	ILRI
32	Maiga Adama	DGSV

<b>No.</b>	<b>Name</b>	<b>Institution</b>
33	Bougma/Kagambega Asseta	UJKZ
34	Diao Watton Rodrigue	DRSHP HBS/BOBO
35	Fatou Ndiaye	HCSSNOH/Senegal
36	Yameogo T Justin	DRRAH/NORD
37	Sibone Abdoul Aziz	DPRAH Passore
38	Abdoulaye Samb	HCNSSM-OH Senegal
39	Isidore Bonkougou	INSP
40	Sara Daniele Dieng	AFROHUN
41	Siri Baperman	DGSHP/sante
42	Tialla Dieudonne	IRSS/OUAGA
43	Tapsoba WW Bertrand	APEE/OUAGA
44	Yameogo Issaka	DGSP
45	Yameogo Eulalie	IRSS
46	Toe B Alida N	ILRI/CIFOR
47	Michel Dione	ILRI
48	Hung Nguyen	ILRI
49	Bangre Victor	DRSHP NORD
50	Theodore Knight-Jones	ILRI
51	Souli Zacharia	CIBF
52	Claudia Ganser	Floride

# Meeting agenda

## Agenda: OHRECA regional workshop

6–7 September 2022, Hotel Sopatel Silmande, Ouagadougou, Burkina Faso

Time	Activity	Leaders
<b>Day 1 (6/9/2022): Opening ceremony and presentation of One Health (OH) initiatives in West Africa</b>		
0830-0900 hrs	Welcome and installation	ILRI
<b>Moderator: Master of ceremony; Note taker: Ahmadou Sow</b>		
0900-1000 hrs	Address by ILRI's deputy director general (DDG) Biosciences	Dieter Schillinger
	Address by the ILRI representative in West Africa	Abdrahmane Wane
	Address by the representative Ministry in charge of health	Representative
	Address by the representative of the Minister of Animal Resources	Representative
	Presentation of ILRI Human and Animal Health Program co-leader	Hung Nguyen
	Speech by the Ministry of Environment	Ministry of Environment
<b>1000-1030 hrs</b>	<b>Coffee break (+ family photo + interviews)</b>	<b>ILRI</b>
<b>Moderator: Michel Dione; Note taker: Sow Ahmadou</b>		
1030-1040 hrs	One CGIAR One Health initiatives	Hung Nguyen
1040-1100 hrs	One Health Research, Education and Outreach Centre (OHRECA)	Bernard Bett
1100-1115 hrs	The African Science Partnership for Intervention Research Excellence (ASPIRE)	Bassirou Bonfoh
1115-1130 hrs	Presentation of Africa One Health University Network (AFROHUN) in West Africa	Sara Daniele DIENG
1130-1145 hrs	Presentation of World Organization for Animal Health (WOAH) One Health activities in West Africa	Guigma Yacinthe
1145-1230 hrs	Plenary discussions Q & A	ILRI
<b>1230-1330 hrs</b>	<b>Lunch break</b>	
<b>Moderator: Guy Ilboudo; Note taker: Valerie Lallogo</b>		
1330-1345 hrs	Burkina Faso National One Health Platform	Representative
1345-1400 hrs	Senegal National One Health Platform	Representative
1400-1415 hrs	Mali National One Health Platform	Representative
1415-1430 hrs	Côte d'Ivoire One Health Platform	Representative
1430-1500 hrs	Plenary session: questions and answers	ILRI
1500-1600 hrs	Group work (by country) Successes and challenges in One Health platform implementation Recommendations for the operationalization of One Health platforms	ILRI
1600-1630 hrs	Plenary-feedback	ILRI
1630-1645 hrs	Wrap up of the day	Abdrahmane Wane
<b>1645-1800 hrs</b>	<b>Cocktail</b>	<b>ILRI</b>

Day 2 (7/9/2022): Results of OH project evaluations and presentation of ILRI OH projects in Burkina Faso		
Moderator: Kader Ilboudo; Note taker: Valerie Lallogo		
0830-900 hrs	Presentation of the OH platform assessment tool (Network for Evaluation of One Health - NEOH)	Bernard Bett
0900-0915 hrs	OH Evaluation report for the national OH platform of Burkina Faso (STOH)	Guy Ilboudo
0915-0930 hrs	OH evaluation report of the Country Health Information Systems and data Use project (CHISU) of CHISU/USAID program – Burkina Faso	Guy Ilboudo
0930-045 hrs	OH evaluation report of the THIELAL project of Agronomes et Veterinaire Sans Frontières (AVSF) - Senegal	Michel Dione
<b>0945-1015 hrs</b>	<b>Coffee break</b>	<b>ILRI</b>
Moderator: Michel Dione; Note taker: Valerie Lallogo		
1015-1030 hrs	OH Evaluation report for the national One Health platform of Mali (SPPOH)	Sow Ahmadou
1030-1200 hrs	Discussions - group work per country:  Are the gaps identified in the evaluation reflecting the reel situation in the platforms?  What are the priority gaps?  Recommendations for interventions  Research priorities in One Health	Participants
1200-1300 hrs	Plenary session - Feedback from group work	Participants
<b>1300-1400 hrs</b>	<b>Lunch break</b>	
Moderator: Bernard Bett (Guy Ilboudo); Note taker: Sow Ahmadou		
1400-1420 hrs	Presentation (and discussion) of the <i>Epidemiology of CCHF au Burkina Faso using a One Health Approach</i>	Abdoul Ilboudo
1420-1440 hrs	Presentation (and discussion) <i>Poultry Losses and One Health (POLOH): Reducing losses and zoonotic risks along the poultry value chain through a One Health approach</i>	Michel Dione
1440-1500 hrs	Presentation of the Urban food markets in Africa - Incentivizing food safety using the Pull Push Method (PULL PUSH project)	Theodore Knight-Jones
1500-1545 hrs	Plenary session: research priorities in One Health in West Africa	Participants
1545-1600 hrs	Closing	Hung Nguyen and Abdrahmane Wane  Representative of the environment ministry