

**REGIONAL ONE HEALTH SCIENCE COMMUNICATION AND LEADERSHIP TRAINING
AND ONE HEALTH STUDY TOUR**

Date: 7th – 11th November 2022

Venue: Nairobi, Kenya



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Introduction

ISAAA AfriCenter, in collaboration with ILRI and CIRAD, organized a Regional One Health (OH) Science Communication and Leadership Training-cum-OH Study Tour in Nairobi, Kenya, from 7th - 11th November 2022. This was part of a series of trainings whose goal is to equip COHESA partners with effective communication and policy advocacy skills that will enable them to effectively communicate OH issues and solutions from research findings to non-technical audiences including the media and policy makers. The workshop also provided an opportunity for participants to enhance their project management and leadership skills as well as gain experiential learning through visiting model OH sites. More than 40 project partners drawn from key line ministries (Health, Agriculture and Environment), academia and research institutions in 10 African countries took part in the workshop. The 10 participating countries, comprising of 35 participants were: Kenya (total 6, Male=3, Female=3), Uganda (total 2, Male=2, Female=0), Tanzania (total 3, Male=2, Female=1), Ethiopia (total 6, Male=5, Female=1), Rwanda (total 3, Male=2, Female=1), Mozambique (total 3, Male=0, Female=3), Botswana (total 2, Male=0, Female=2), Namibia (total 1, Male=0, Female=1), Zimbabwe (total 5, Male=2, Female=3) and Zambia (total 4, Male=4, Female=0).

Workshop Objectives

The workshops' specific objectives were to:

- i. Familiarize OH partners with principles of effective science communication,
- ii. Enhance message development skills among OH partners for developing appropriate messages on OH to varied audiences so as to strengthen the OH approach.
- iii. Equip the participants with effective media relations skills.
- iv. Expose participants to strategies and tools for engaging policy makers for securing supportive policy environment of their research and investments.
- v. Build OH partners' skills in project management and leadership for steering OH goals.

Methodology

The training adopted a participatory approach characterized with practical sessions to enhance development of communication and policy advocacy skills using hypothetical OH challenges (scenarios) from real life experiences and existing OH projects as case studies.

Day 1 – 7th November 2022

Pre workshop evaluation– Individual Pentagons.

A pre workshop evaluation was done to gauge the participants' knowledge on various thematic areas in science communication to establish a starting point for the training. The participants used individual pentagons to self-score in the following key thematic areas covered in the training.

- Knowledge on principles of effective communication.
- Familiarity with stakeholder engagement strategies.
- Message development skills.
- Confidence in relating with the mass media.
- Understanding the role of social media in science communication.

In addition to helping the participants identify knowledge gaps in science communication to be addressed during the training, the self-scoring allowed the trainers to isolate areas of emphasis and evaluate the participants' grasp of concept at the end of training.

Introduction to principles of effective communication

The objective of this module was to arm the participants with knowledge on effective practices and techniques in science communication. To begin with, the presentation highlighted the importance of stakeholder identification and how using influence and interest criterion allows one to zero in on a key stakeholder at a specific stage of research. Upon identification, it is imperative that the stakeholder's needs be singled out and the developed messages address these needs as well as the goal that we want to achieve from these stakeholders.

The participants were presented with the key rules for effective science communication which were, planning, building trust and credibility, and understanding the gap.

The module also took the participants through seven key principles of effective communication as follows;

- i. The “rule of three principle” – according to this principle, communication is achieved optimally when a communicator presents three key messages, repeated three times and each supported by three facts.

- ii. The “3-30-30 principle” – the response should contain three key messages of total 30 words and short enough to be delivered in thirty seconds. A message map makes the first and the second principle easy to execute.
- iii. The “CCO principle” – also known as the trust theory, this principle emphasizes the need to show compassion, conviction and optimism when responding to queries from the audience.
- iv. The “I Don’t Know principle” – there exist a historic notion that scientists should be ‘all knowing’. This becomes a problem when an audience asks a question which the scientist cannot answer, attempt to tackle this question without facts almost always results in the respondent losing credibility even on issues with facts. This principle therefore provides that one doesn’t have to answer everything; it is alright to say ‘I don’t know’ as long as you provide an alternative resource for the answer and possibly bridge to what can be answered at that moment.
- v. The “Age Grade Level 4 principle” – this principle states that when people are stressed and upset, they typically process information at four grade levels below their average grade level. Therefore, it is important to always keep the responses short and the language simple.
- vi. The “1N = 3P principle” – also referred to as the negative dominance theory, this principle states that when people are upset, they tend to focus more on negative than on positive information. There’s need therefore to handle negative statements and questions carefully. The principles offer that; for every negative query, show compassion, avoid repeating the negative and provide three positive responses with conviction.
- vii. The “primacy/recency principle” – when people are stressed and upset they typically focus on that which is said first (primacy) and last (recency). It is therefore important to address concerns promptly and use the most updated information.

Developing an advocacy strategy

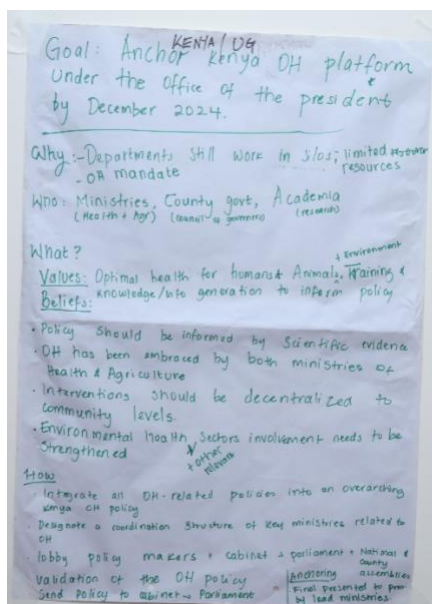
Observations

The participants observed that when it comes to communication, context is everything and that different messages can be interpreted differently by different groups of people. They appreciated the fact that decisions are made by people and not institutions and therefore, the need to ensure that the target people understand the message. It was also observed that some of the terms and phrases commonly used by scientists serve to heighten fear and anxiety among the non-technical audience. They were concerned with how to handle the media in situations where they do not know something without losing credibility and trust. They also highlighted the role of reputable institutions such as universities when planning communication strategies which should not be overlooked.

The participants noted that lots of research on one health has been done but the generated data has not been translated into policy. They acknowledged that there is need to move from issue-based to evidence-based policy development in one health. Negative images have been used for a long time and there is need to get balance through use of images that give hope for a greater influence. They acknowledged that the people who own the money and who are potential donors are not scientists and therefore communication should be developed in a way that can be easily understood. Advocacy through effective communication was also highlighted by participants to be key.

Outlines of in-country advocacy strategies

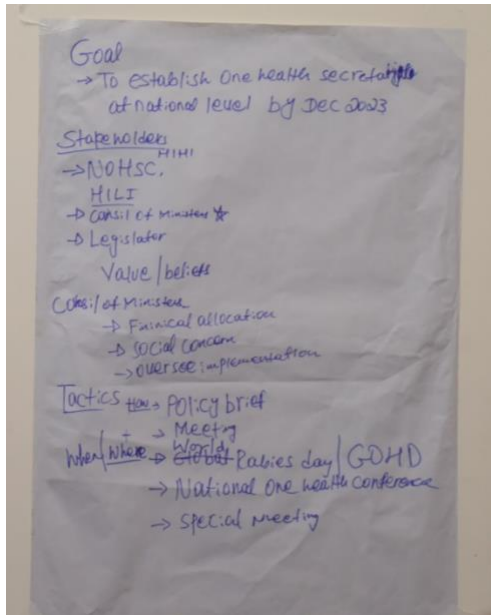
Kenya and Rwanda



There exists an OH arms within the ministry of health, but all relevant ministries work in silos. Their goal is to have the OH platform under the office of the president with representatives from all the key ministries.

There is need to have a policy to support this move.

Ethiopia and Uganda



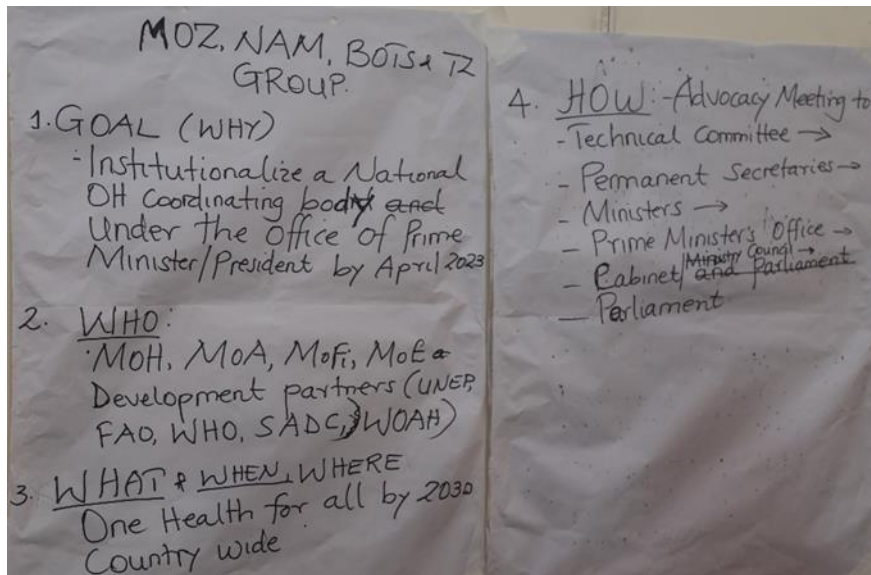
Leveraging on previous experience, legislative processes, budget allocation the goal is to have the OH secretariat in the prime minister's office.

The council of ministers have social influence and would assist in pushing the agenda

There is need to have permanent secretaries on their side to achieve the goal set

Concern: How will they be able to move the stakeholders in the high influence low interest category who are needed to actualize the goal to have high interest.

Mozambique, Namibia, Botswana & Tanzania



Mozambique was used as the case study and similarity in structure of the countries in the group will allow adoption in the other countries

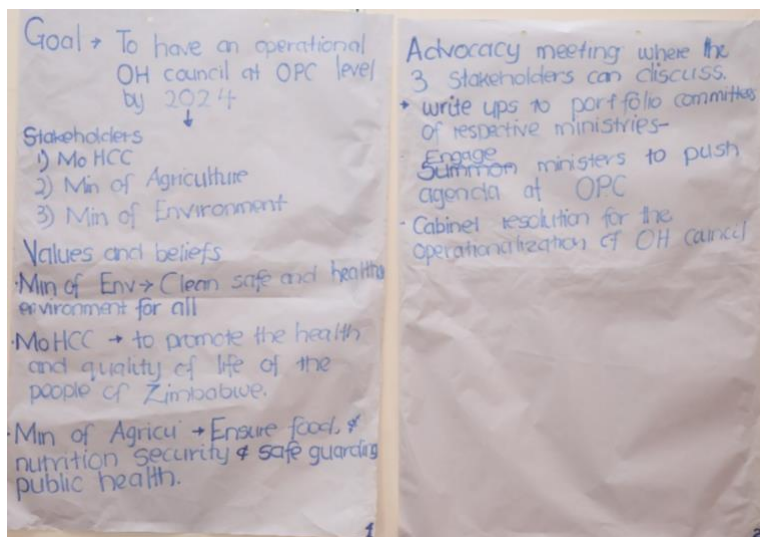
The two main goals are to establish an OH coordination group and thereafter anchor it to the prime minister's/ president's office depending on the country

There is need to identify the stakeholder/ individual who will initiate the process.

They will also need to develop the tactic that they will use to achieve the goal

Lobbying is key, there is need to ensure there is internal lobbying to ensure that all ministries are involved and do not feel like they are losing

Zimbabwe and Zambia



Zimbabwe has a lot of silo groups working independently

The current OH work being done is on antimicrobial resistance.

The participants noted that as much as they would like to have an OH office, in terms of obtaining money it is easier to get funding for programs rather than institutions

There is currently a Fleming fund supporting AMR work and the OH agenda. They currently have labs and are now looking to have an information system established.

For the OH offices, the ministry of agriculture and health are providing that

The independent ministries are the ones responsible for paying the staff from their ministries who are working in the OH office

Introduction to Message Mapping

The objective of this session was to equip the participants with skills of developing key messages (prior to communicating them to identified stakeholders) to increase their chances of being heard, understood, remembered, and correctly quoted.

The presenter defined a message map as a roadmap for displaying detailed, hierarchically organized responses to anticipated questions or concerns. This visual aid provides at a glance the key messages in response to a concern. The module outlined seven steps in developing a message map as follows:

- i. Identify the stakeholders
- ii. Isolate the interests of each stakeholder group
- iii. Analyze specific concerns to identify common sets of underlying general concerns/interests
- iv. Develop key messages for each stakeholder concern/interest based on what you believe the stakeholder should know about the subject at hand
- v. Develop supporting facts and proofs for each key message with figures and statistics from credible sources
- vi. Test the message by asking subject matter experts to validate the accuracy of technical information in message map
- vii. Deliver the prepared message maps via a trained spokesperson and an appropriate communication channel

The module closed with emphasizing the need to crosscheck the developed message map to confirm accuracy, transparency, and recency before delivering messages.

Day 1 Reflections

- Context is everything. one cannot communicate effectively without a proper context

- When communicating with non-scientists start with the conclusion. Leave out jargon
- Trust and credibility are key to effective communication
- Tailor communication in a way that can be easily understood by the intended audience'
- Messages should be kept simple and clear
- Messages should be developed in line with the needs of the society
- Information sharing does not necessarily mean communication
- You communicate better when you are passionate about the message

Day 2 – 8th November 2022

Introduction to effective media engagement

The main objective of this module was to equip the participants with knowledge and skills on strategies of boosting relations with the media to have increased and balanced reporting of one health in the media.

The following were key highlights from the presentation

- Know your audience.
- Identify the goals of communication.
- Start with the most important information
- Avoid jargon
- Be relatable
- Provide visuals (high resolution photos, editable videos)
- Focus on impact: the bigger the better
- Demonstrate interest in Media/News
- Manifest good grasp of your specialty
- Promote your objectivity
- Earn your trust as a credible resource person
- Know a little bit of other/current news
- Work on your narrative skills
- Be available even on short notice

Handling Challenging Situations during media interviews

The module objective was to acquaint the participants with requisite skills in handling interviews. The following were highlighted

- Preparing key messages prior to an interview is an important consideration. Knowing the reporter and anticipating for interview questions beforehand are among important factors to consider while preparing for an interview.
- A good interviewee starts with his/her key messages and backs them up with examples, statistics and stories while keeping the answers short and focused.
- It is crucially important to avoid jargon and negative words or phrases during an interview.
- A good interviewee appears engaging, does not put down the journalist, or become angry or defensive, and only remains focus to influencing the audience with his/her answers.
- Dressing code and body language can impact the interview either positively or negatively. One should wear clothes that are neat, comfortable, and decent.
- Make eye contact with the interviewer, sit up straight, use your natural voice, and avoid exaggerated gestures and unnecessary body movements.
- Mastering the block and bridge technique during interviews in order not to lose focus from the main topic

Mock media expert interviews and mock press conferences – TV and Radio

The objectives of this session were to equip the participants with practical aspects of media engagement, make them have a feel of communicating one health stories via the media and instill confidence when dealing with the media. The session required that participants communicate their key messages succinctly to the public with an overriding goal of winning them over and influencing their attitudes and behavior towards a desired impact.

To enact a real-life situation from the interviews and pressers, the trainers developed scenarios and accordingly grouped the participants to fit into the scenarios. Mentioned hereunder are the scenarios:

Scenarios of one health thematic issues

Climate change/disaster management (team Zimbabwe, Zambia and Malawi)

You are part of the One Health (OH) secretariat in charge of disaster management. A flood (from a nearby river) has occurred in a district near an area that previously experienced seasonal flooding. Because the community were not prepared/had not anticipated this flooding, several families have been displaced, crops swept and animals drowned. 20 people have been admitted to a local temporary dispensary set up to serve the displaced people in their camping station with suspected food poisoning. You are called to address the displaced people and guide them on how they can manage the situation through a *press conference*.

Food safety/food security (team Kenya and Rwanda)

You are a team of a technical OH team that advises government on food safety and food security. There is a rising case in cancer being attributed to government approval of various crop protection products in recent years. You have been called to an *interview with a local tv station*. Your discussion will be moderated by a journalist. A member of a civil society group (Right to food!), that is calling for an overall crop protection products' ban, has also been invited to the panel. Prepare **TWO** of your experts to participate in this Tv discussion

Conservation/ecosystem balance (team Mozambique, Namibia, Botswana and Tanzania)

Your team of OH experts advises the Ministry of Wildlife on land-use for wildlife conservation. There is a conservancy managed by a foreign entity that borders a pastoral community. The conservancy runs an annual rabies vaccination campaign with this years' campaign conducted a few weeks ago. You are called to hold a *press conference* to address community concerns over increased deaths in their domestic dog population that is being linked to the vaccination campaign

Zoonoses/AMR (team Ethiopia and Uganda)

An investigative journalist has invited **THREE** experts in Animal Health, Human health and environment management to address increased deaths among pastoral community members from multidrug resistance TB through a *local radio station*.

Day 2 reflections

1. Audibility is key during interviews to ensure that the message is delivered and understood by the audience.
2. Team dynamics are very important. Working together as a team during media interviews will ensure that the message developed is clear and is delivered accurately.
3. The participants showed a clear understanding of the topic, but they were not able to bring out the message clearly during the interviews.
4. Participants acknowledged that they had previously been involved in media interviews, but they had not been handling them correctly.
5. When journalists are asking too many questions at a go there is a need to ensure that one does not get distracted.
6. One should always prepare for all types of questions prior to an interview and not only focus on the topic of interest.
7. The block and bridge technique are very important, and one does not have to answer all the questions. You can choose not to respond.

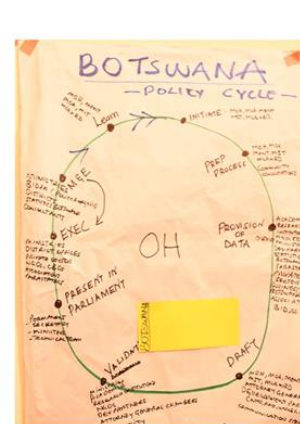
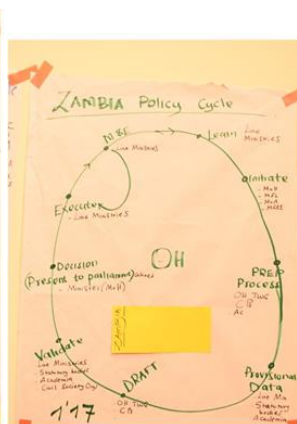
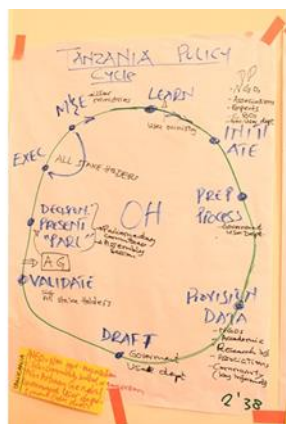
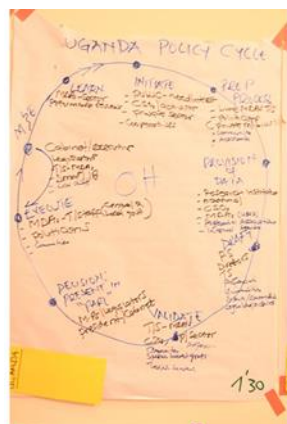
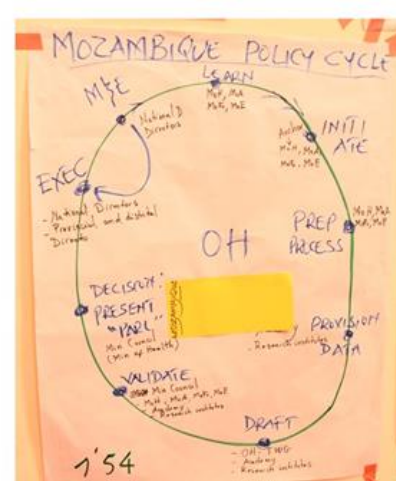
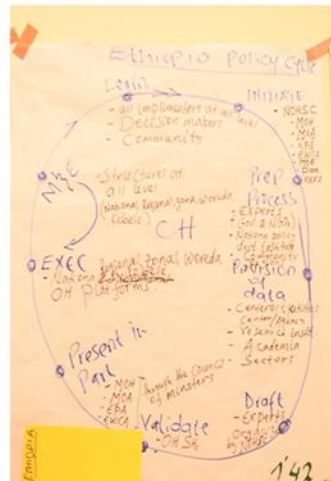
8. When answering the questions, one should always remember that the answers are to the public and not journalists
9. It is very important to take control of interviews, especially press conferences. Do not let the media run the show
10. Always use simple language ensuring that the message is always relevant and factual. The community is looking for solutions and not science.
11. The need to maintain a good relationship with the local media is very important, always be confident with the message you are passing.
12. Empathy is key when delivering the message to the public.
13. Always listen to the questions asked do as to be able to give credible answers
14. Understand your audience and the ecosystem, their religious views, and be up to date with current issues.
15. Interview should be brief and simple avoid making them lecturers as you will lose your audience
16. Systems thinking was evident from all the interviews, but the participants focused on processes than solutions, something that may stem from them being scientists.
17. The participants did not form a relationship with the journalists, they should therefore work on forming relationships with the media in future interviews
18. Confidence and body language needs to be considered in future interviews

Day 3 – 9th November 2022

Communicating OH for policy and political buy-in

Participants were introduced to the policy cycle process and how different actors in the policy environment fall in different areas on the policy cycle. The participants also identified where they fall within the policy cycle. The key areas of the policy cycle are Initiation of policy process, preparation process, acquisition of provisional data, draft policy brief development, validation, decision making (presentation to parliament), execution and monitoring evaluation and learning.

Outlines of in country policy cycle



Drafting a policy brief

A policy brief is short document that presents the findings and recommendations of a research project and can be used as a medium for exploring an issue and distilling lessons learned from the research. Participants learned that a policy brief can be used as a means of engaging policy makers and translating their research findings into policies.

To effectively demonstrate how policy briefs are developed, the participants from each of the countries worked together to develop policy briefs that would help push the goals they had formed at the beginning of the training.

Exercise

Draft a policy brief on country net-mapping goal or One Health focal topic of interest

- Craft a key message
- What are the issues?
- What are the Causes of the current scenario?
- What are the effects of the current situation?
- What are the Expected outcomes/impacts?
- Recommendations

Ethiopia policy brief outline

Ethiopia
Establishing OH Sec @ National Level

*Key message
Prevention + control of health threats in the interfaces of H-A-E requires accountable coordinating structure

*Key issues
→ ~~Health~~ Health threats shared between H-A + E - Causes major losses
→ Increasing threats of emerging + re-emerging infections

~~Course of~~
*Current Scenario
→ Ad-Hoc coordination
→ Poor data/info exchange
→ Inadequate response to zoonotic disease
→ Partner motivated budget support

*Effect of current Scenario
→ More life lost (A-H)
→ Economic lost
→ AMR prevalence (growing)
→ Food safety concerns

*Expected outcomes
→ Accountability
→ Early detection + rapid response
→ Coordinated resources (efficient)
→ Risk mitigated/averted

*Recommendation
→ Establish multi-disciplinary coordination office

Uganda policy brief outline

UGANDA 2.22

CAUSES:

LAND AND POP PRESSURE
PUSHING PEOPLE TO ENCROACH
ON WILDLIFE PROTECTED AREAS/BIOMES
(CLOSEST TO DISEASE-CARRYING ANIMALS)

- PEOPLE LIVING WITH ANIMALS
(RAISING ANIMALS IN THEIR HOMES)

ISSUES:

- 1- INCREASED SPACES BETWEEN HUMANS
AND ANIMALS (ZOO & WILDLIFE) BRING
THE INCREASE
- 2- WIDESPREAD MISUSE / MISDIAGNOSIS
LINA OF DISEASE IS THE MAIN
AVAILABLE TREATMENT OPTIONS
IN BOTH HUMANS AND ANIMALS
- 3- SECTOR SPECIAL INTERVENTIONS
HAVE PROVED FUTURE HENCE
STRONG CALL FOR A MULTI-
SECTORAL APPROACH

EFFECTS

- SICK AND LESS PRODUCTIVE PEOPLE
- INCREASED POVERTY
- LOSS OF LIVES
- LOSS OF LIVELIHOODS
- LESS REVENUE COLLECTED
- LOSS OF JOBS
- SOCIO-ECONOMIC DISRUPTION
(LOCKDOWNS)
- RESEARCH RESOURCES NOT EFFICIENT
AND APPROPRIATELY UTILIZED

**IMPROVED QUALITY
OF LIFE AND INCREASED
INCOMES
RESOURCES WILL BE
SAVED**

**ESTABLISHMENT OF A FULLY
FUNCTIONAL TRANS-NATIONAL
LINK TO CO-ORDINATE
PREPAREDNESS AND RESPONSE
TO PUBLIC HEALTH THREATS**

Rwanda policy brief outline

3.02

Rwanda

1. Key Message

Establishing an integrated OH surveillance System is crucial to Strengthening Rwanda's early warning Surveillance and response Systems.

2. Issues

- Integration of Surveillance Systems has not been achieved. Surveillance is done in silos
- There is no effective exchange of Surveillance data between OH triads
- 70% of emerging & re-emerging infectious diseases are from the Congo basin, where Rwanda is located
- Country faces threats of Ebola, RVF, Marburg, Covid-19

3. Causes

- Not all laboratories are decentralised
- No clear channel of communication
- Lack of accountability within key ministries
- Rwanda does not have a national OH Surveillance ^{strategy} system
- No interdisciplinary laboratories
- ^{lack of} Professionals don't feel need to champion OH within their own disciplines

4. Effects

- Delay in response to outbreaks
- Inaccurate data - missing, diff. reporting systems
- Poor planning
- Ineffective disaster Management
- Duplication of resources
- Delay to report threats & outbreaks

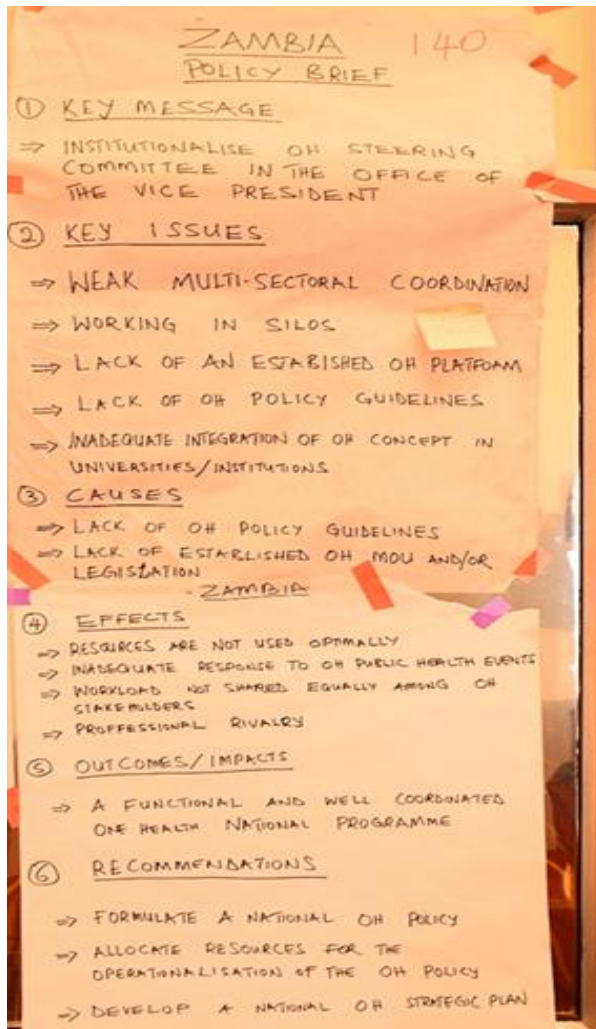
5. Outcomes / Impact

- Rapid & collaborative response to outbreaks + threats
- Availability of accurate + real time data
- Early planning & coordination of response mechanisms
- Evidence-based interventions, strategies, policies
- Leveraging financial resources from all OH stakeholders
- Increase in human resources + infrastructure
- Reducing case fatalities & economic burden associated with OH threats

6. Recommendations

1. Digitalize all surveillance systems
2. Harmonize all systems into one
 training for professionals and

Zambia policy brief outline



Zimbabwe policy brief outline

1.24 ZIM
Key message & Advocacy for a One Health Policy to eliminate dog^{mediated} transmitted human rabies.

Issue: Significantly high dog^{mediated} human rabies.

Causes:

- 1) Dog^{life} over population
- 2) Low vaccination coverage
- 3) Poor regulatory framework

Effects:

- a) Loss of human life
- b) Psychosocial trauma.
- c) Costly - post exposure treatment is expensive

Expected outcomes:

- 1) Improved quality of life. (psychosocial impact)
- 2) Reduced treatment costs (post exposure anti rabies)

Recommendations

- 1) Dog^{life} population control.
- 2) Dog^{life} vaccination (>70% coverage)
- 3) Heavy penalties for non compliant dog owners.

Tanzania policy brief outline

1.35 TANZANIA

POLICY BRIEF ON ANTHRAX

1. Key message: Frequent outbreak of Anthrax

- Anthrax is a public health concern.
- Cause death of livestock every year (economic loss)
- People's deaths every year

2. Issues: - Law enforcement

3. CAUSES

- No Vaccination of livestock
- Low enforcement of law
- Low community awareness and compliance

Annual Vaccination Calendar Anthrax Vaccination not adhered to (should be adhered to).
Inadequate awareness and compliance
No compliance

4. Effect: Loss of economy (close of markets, loss of government revenue, cattle death, time and money for treatment)

5. Expected outcomes

- Healthy animals, more production
- Save people's lives
- Increase the economy by protecting the loss

6. Recommendations

- Annual vaccination
- Promote community awareness
- Strengthen Law reinforcement.

Kenya policy brief outline

POLICY BRIEF: KENTA

[KEY MESSAGE]: Better Health Outcomes for Humans, animals & environment through anchoring of OneHealth platform at the Office of the President

Issues:

1. Inadequate co-ordination of OneHealth activities
2. Thematic Areas [zoonoses, AMR, food security] working in silos
3. Minimal involvement/participation of Environmental sector within the OneHealth

Causes:

1. Different sectors under OneHealth have different mandates
2. Lack of Centralized system to co-ordinate One Health activities

Effects:

1. Increased Mortality & Morbidity in humans & Animals
2. Nutrition & Food security ↓
3. Loss of Livelihood. esp for women.
4. Environmental degradation & pollution/contamination
5. Increased financial burden: - duplication of resources & efforts by diff. sectors

Expected Outcome:

1. Improved/strengthened co-ordination of OH activities
2. Improved public health
 - mortality & morbidity reduction.
 - Enhanced quality of life.
 - Child Education.
3. Improved Animal health
 - Increased productivity, improved food security & income.
 - mortality & morbidity reduction.
 - International Trade (livestock)

Recommendation: Develop OH acceptable secretariat (Holistic) organization
Develop a OH policy that captures OH Thematic areas.

2.13

Mozambique policy brief outline

Mozambique

TOPIC: Drug resistance national work plan.

1. Craft message: Drug resistance can be the next epidemic in human and animal in Moz.
2. Issues: Collaborative work between the main stakeholders can reduce and/or prevent the occurrence of drug resistance in public health sector, animal health and environment.
3. What are the causes of the worst scenario?
The one health platform is not yet established or institutionalized in country.
4. Effects of worst situation:
 - Misuse of drugs in agriculture, fisheries and livestock is still occurring and may lead to drug resistance in human.
 - Drug resistance has been reported to occur in human (TB, salmonella) but the origin is yet to be detected.
5. Expected outcome
Sustainable use of drugs will contribute to reduce deaths and hospitalization due to drug resistance.
Costs of treatment will reduce.
6. Recommendation
To establish O.H. platform to allow better management of resources as all sectors are working together.

2:30

Botswana policy brief outline

BOTSWANA

1. KEY MESSAGE

TO CREATE A NATIONAL OH PLATFORM IN THE OFFICE OF THE PRESIDENT

SF1: A BALANCED ECOSYSTEM LEADS TO IMPROVED HUMAN HEALTH AND BETTER PREPAREDNESS FOR DISEASE OUTBREAKS

SF2: COORDINATED COLLABORATIONS LEAD TO ENHANCED EFFICIENCIES AND COMPETENCIES

2. ISSUES

1. WORKING IN SILOS LEADS TO DISJOINTED EFFORTS ON OH DECISIONS
2. LACK OF OVER-ARCHING OH POLICY RESULTS IN INDECISIVENESS (NO LEADER)

3. CAUSES

1. LACK OF OVER-ARCHING OH POLICY
2. LIMITED AWARENESS ON OH

4. EFFECTS OF CURRENT SITUATION

1. NO POLICY DIRECTION
2. NO ACTION DUE TO LACK OF APPROPRIATE LEADERSHIP
3. INADEQUATE PREPAREDNESS FOR FUTURE PANDEMICS

BOTSWANA

5. EXPECTED OUTCOMES/IMPACT

1. NATIONAL OH PLATFORM ESTABLISHED UNDER OFFICE OF THE PRESIDENT
2. BETTER COORDINATION OF LINE MINISTRIES
3. REDUCTION IN PREVALENCE OF ZOONOTIC DISEASES IN BOTSWANA

6. RECOMMENDATIONS

1. TO ESTABLISH NATIONAL OH OFFICE WITH RELEVANT STRUCTURES & COMPETENCIES IN THE OFFICE OF THE PRESIDENT
2. CREATE A BUDGET LINE FOR THE OFFICE

Observations

- There was mixing of the key message and title.
- Some of the key issues should be supported with data
- The recommendations should have aspects that touch on community welfare
- Use of “sweet” words instead of harsh terms such as penalty.
- There is need for a human face when giving recommendations
- Case studies are a good tool to drive the key message home.
- At the inception of research all competent stakeholders should be involved to ensure that the results and findings can be translated into research.

DAY 4 – NOVEMBER 10, 2022

Organizational Pattern – Check-in and Discussion

Gerard den Ouden

Organizational pattern is a model for analysing people’s character in an organization or system in order to understand them and effectively engage with them towards achieving a goal. Since this model is deemed useful towards attainment of COHESA goal, the project partners identified, discussed and analyzed different types of characters and stakeholders that can influence OH in their respective countries. The following table summarizes the what was discussed:

Character Categorization	Character Analysis
Team workers	<ul style="list-style-type: none">○ Appreciate each one’s contribution○ Empathizing
Networkers	<ul style="list-style-type: none">○ Prefer to build and widen their networks for results
Bureaucrats	<ul style="list-style-type: none">○ Emphasize on strict adherence to rules, regulation and protocols for results to be achieved
Boss	<ul style="list-style-type: none">○ Loves to take control

Take-home message:

- Collaborations across all the above listed groups is key in achieving COHESA goal

Brief Introduction to Organograms

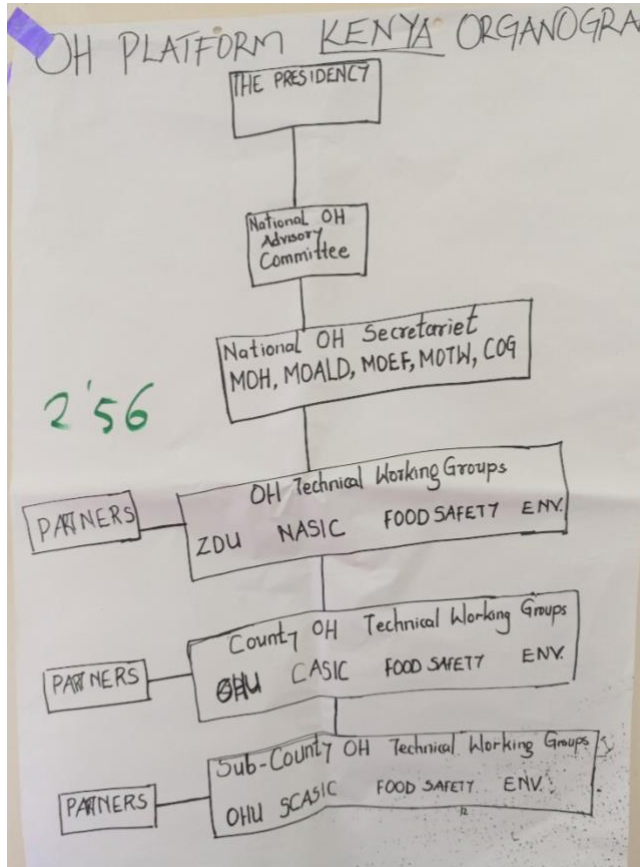
An organogram is a diagrammatic representation of an organization structure. It is a diagram that illustrates how different departments or organization cadres are divided, organized and coordinated. An organogram shows the correlation among organizational units and concisely paints a vivid image of how an organization in hierarchically coordinated.

Developing Organograms for National OH Platforms

The type of OH organizational structure in a country positively or negatively affects delivery of OH interventions in that country. It is therefore critical to understand how national OH units are organized. Understanding a country’s OH organogram is crucial in developing strategies that can effectively address OH issues in that country.

It is for this reason that COHESA partners from the 10 participating countries critically discussed and interrogated their OH organograms. Partners from the same country were placed in the same group to discuss and draw their country's current or prospective national OH organogram.

Kenya OH Platform Organogram



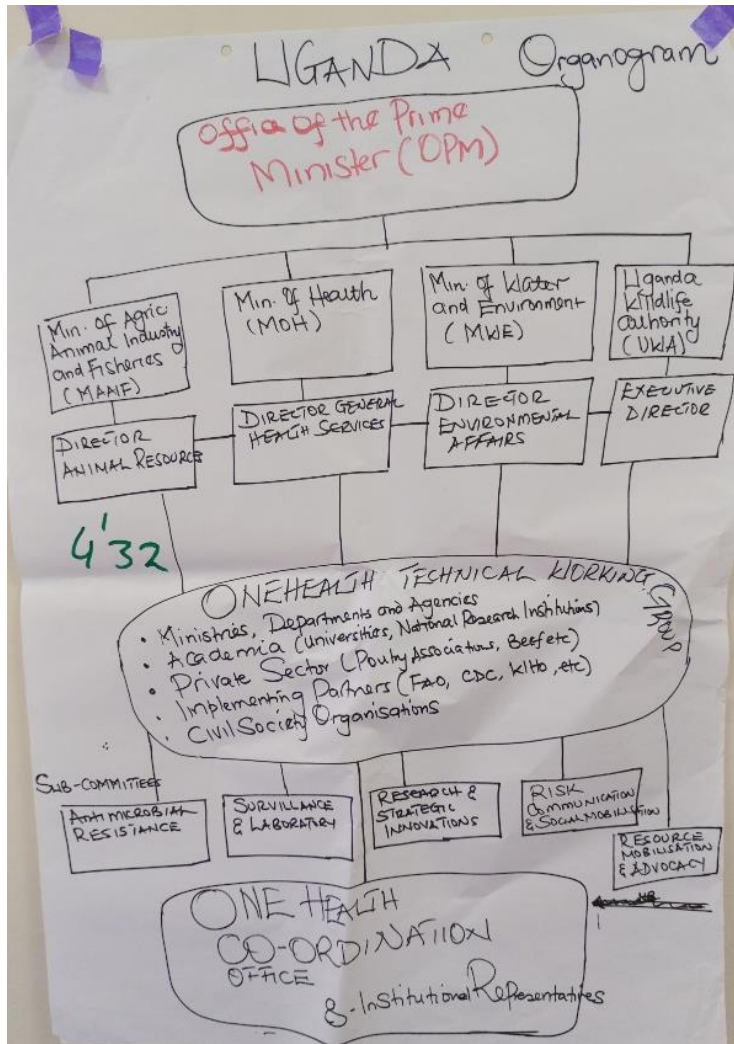
The National OH Advisory Committee provides guidance on OH issues in the country.

The National OH Secretariat provides cohesive, multi-disciplinary, multi-sectoral coordination. The Secretariat also provides information to the Advisory Committee.

OH Technical Working Groups provide technical support at different governance levels. They also provide monitoring and evaluation.

Partners include line ministries at national and county levels, academia, research institutions, regulatory agencies, professional bodies, international agencies (FAO, WHO, UNEP etc), special interest groups, private sector, media and communities.

Uganda OH Platform Organogram



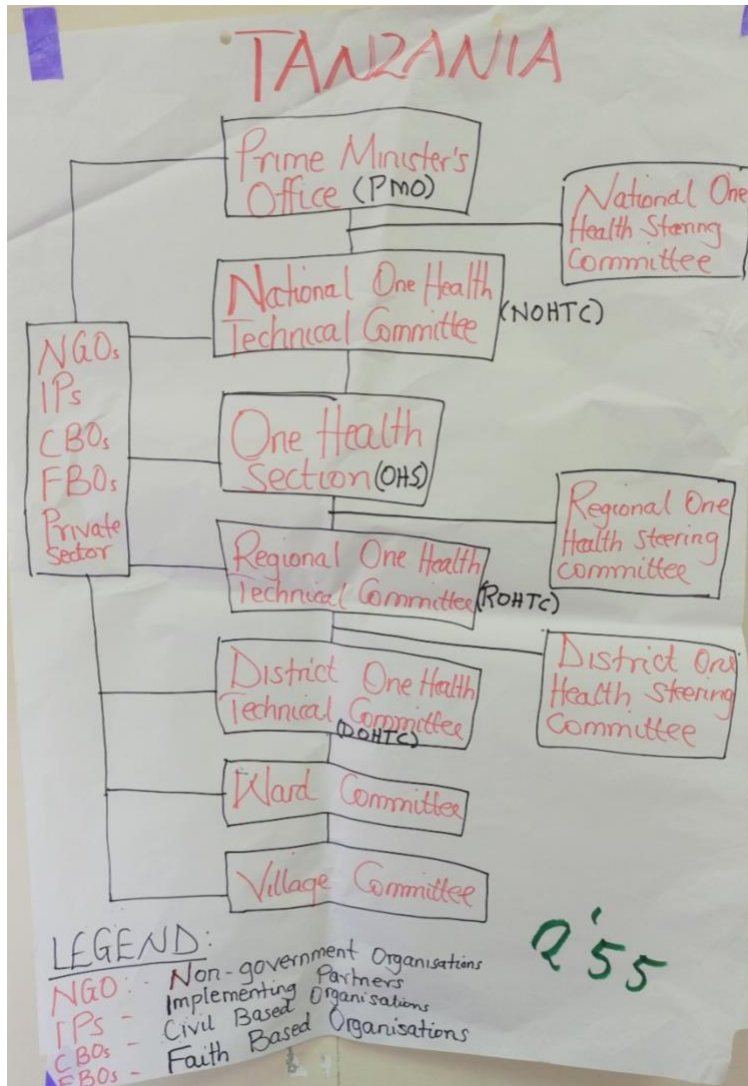
The Office of the PM provides coordination to OH programs/activities. It coordinates (brings together) three line-ministries – MAAIF, MoH and MWE – and Uganda Wildlife Authority in implementing OH in Uganda.

The OH Technical Working Group comprises key line ministries, departments and agencies as well as universities, national research institutions, the private sector, international partners (FAO, WHO etc) and civil society organizations. This group provides technical support and leads implementation of OH programs in the country.

Below the Technical Working Group are Sub-Committees. The Sub-Committees take charge of AMR, surveillance and laboratory operations, research and strategic innovations, risk communication and social mobilization and resource mobilization and advocacy.

Uganda also has OH Coordination Office which has three institutional representatives.

Tanzania OH Platform Organogram



The Office of the PM coordinates OH institutions and mobilizes resources

The National OH Technical Committee proposes measures on OH activities to the Steering Committee and ensures OH activities are integrated into relevant government entities and policies.

The National OH Steering Committee directs and sets priorities for OH management in the country. It also advocates for resources and makes decisions on key OH activities

OH Section carries out technical analysis to all OH issues in collaboration with ministries and other stakeholders

ROHTC coordinates OH activities and supports resource mobilization at the regional level.

Regional OH Steering Committees direct and set priorities for OH management in the region. They also mobilize resources and make decisions at the regional level.

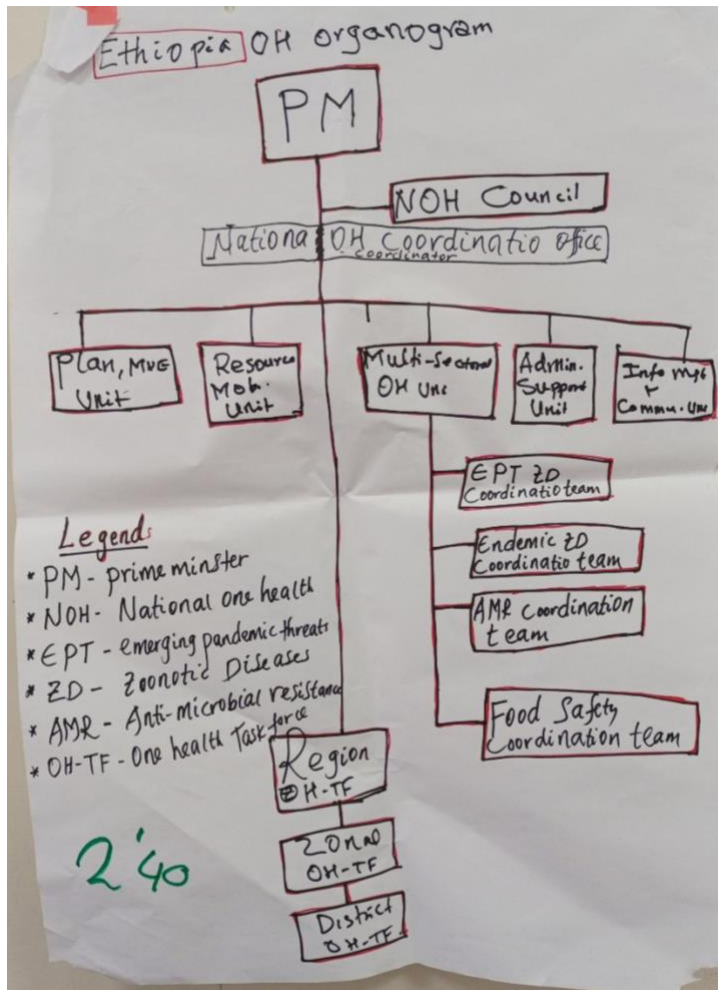
DOHTC coordinates OH activities and supports resource mobilization at the district level.

District OH Steering Committee directs and sets priorities for OH management at the district level.

Ward Committees facilitate implementation of OH activities and early information sharing.

NGOs, IPs, CBOs, FBOs and the private sector support implementation of all OH activities. They also collaborate with Government in implantation of such activities.

Ethiopia OH Platform Organogram



The National OH Council Office advises the Government on OH policy strategy development and implementation. It also oversees policy implementation and advocates for resource mobilization.

The Multi-Sectoral OH Unit facilitates routine technical collaboration across OH sector.

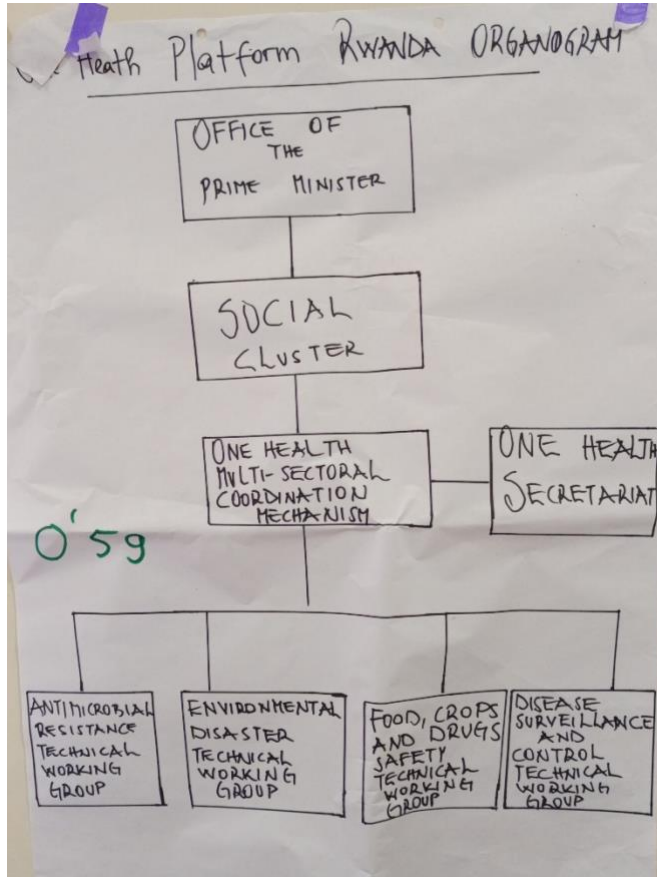
The Planning and M&E Unit coordinates and facilitates work plan development in line ministries. It also develops M&E framework.

The Resource Mobilization Unit carries out resource mapping to identify donors that support OH. It also facilitates partnership with stakeholders.

The Admin and Support Unit is charged with management of human resources, finances and logistics.

Information and Communication Unit gathers information and works on data repository.

Rwanda OH Platform Organogram



The Office of the PM oversees implementation of all activities in the OH platform. It also approves OH policies.

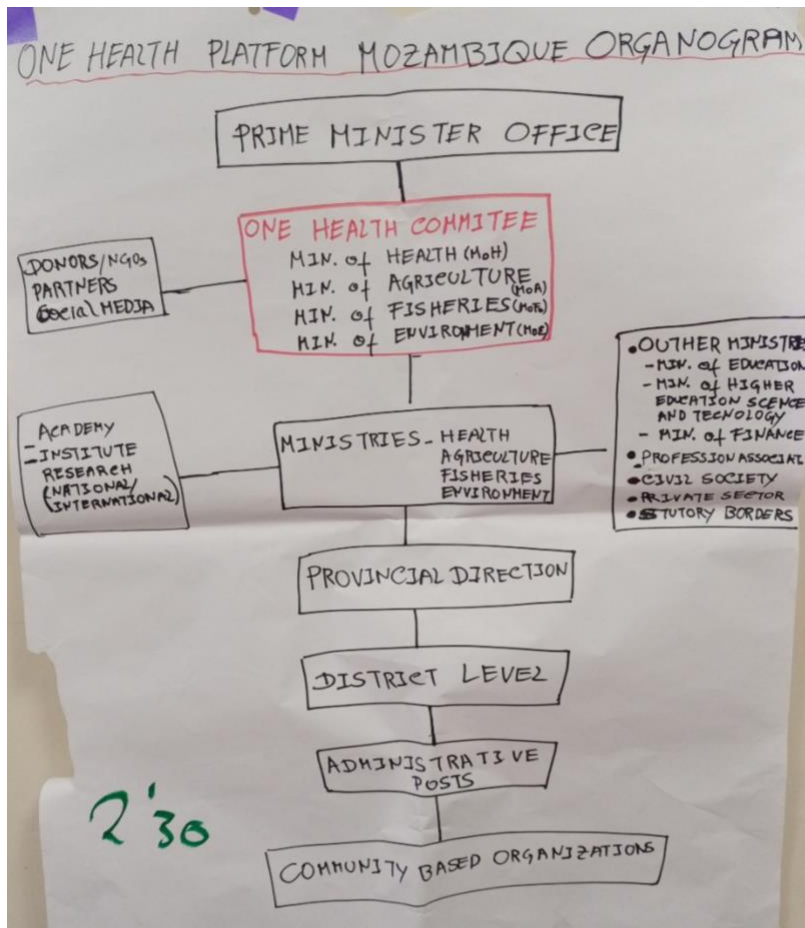
The Social Cluster offers strategic leadership. It has nine ministries – Ministries of Health, Education, Agriculture and Animal Resources, Emergency Management, Environment, Finance and Economic Planning, and Local Governance. This team approves action plans and reports.

OH Multi-sectoral Coordination Mechanism carries out management and governance of OH strategies. It facilitates collaborations across sectors and disciplines. It also leads prevention and control of zoonotic diseases. It also develops OH strategic plans and policies and prioritizes funding mobilization and allocation.

OH Secretariat is in charge of administration. It comprises a program manager, three OH specialists and one administrator. It assists OH Multi-sectoral Coordination Mechanism in daily management of OH strategic plan.

The Technical Working Group is tasked with implementation of OH activities. It provides expertise in OH issues. It also manages implementation of thematic and technical activities in OH Strategic Plan. Additionally, it carries out community engagement and sensitization and does monitoring, evaluation and reporting of OH issues.

Mozambique OH Platform Organogram



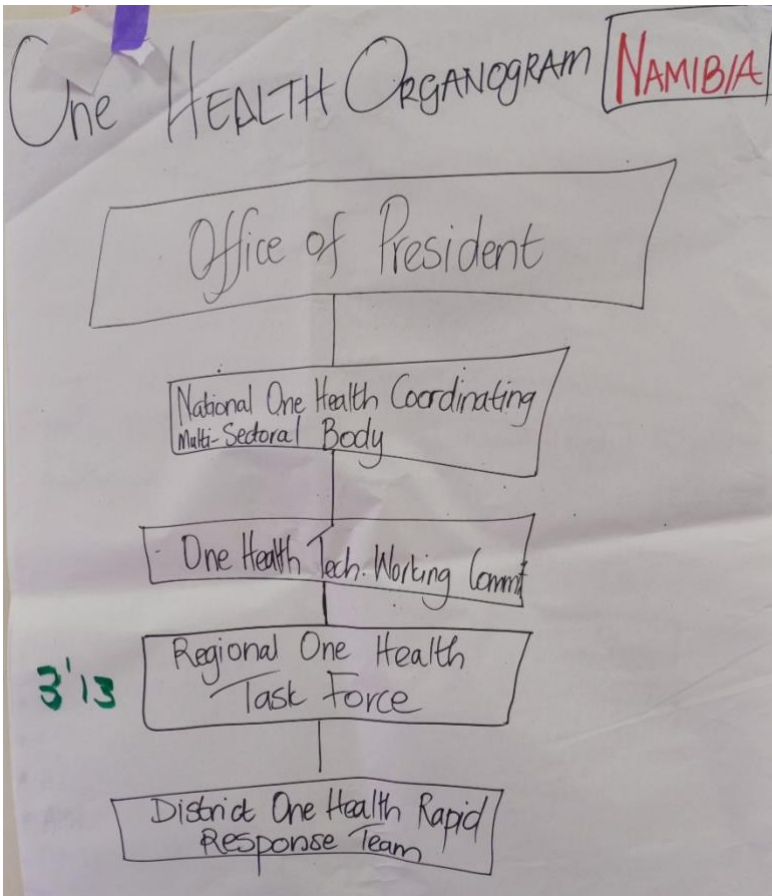
In Mozambique, OH platform is coordinated from the Office of the PM.

OH Committee comprises four ministries – Health, Agriculture, Fisheries and Environment.

Development partners, NGOs and the media support OH programs in Mozambique.

OH activities are cascaded down from the Office of the PM to grassroots communities.

Namibia OH Platform Organogram



The Office of the President is mandated with institutionalization of OH; it is the coordinating body. It also provides for OH budget and formulates OH Plan of Action.

The multi-sectoral National OH Coordinating Body coordinates OH agenda and serves as the national OH secretariat. It also oversees the execution and operationalization of OH activities by the Technical Working Group. It also advocates for OH resources.

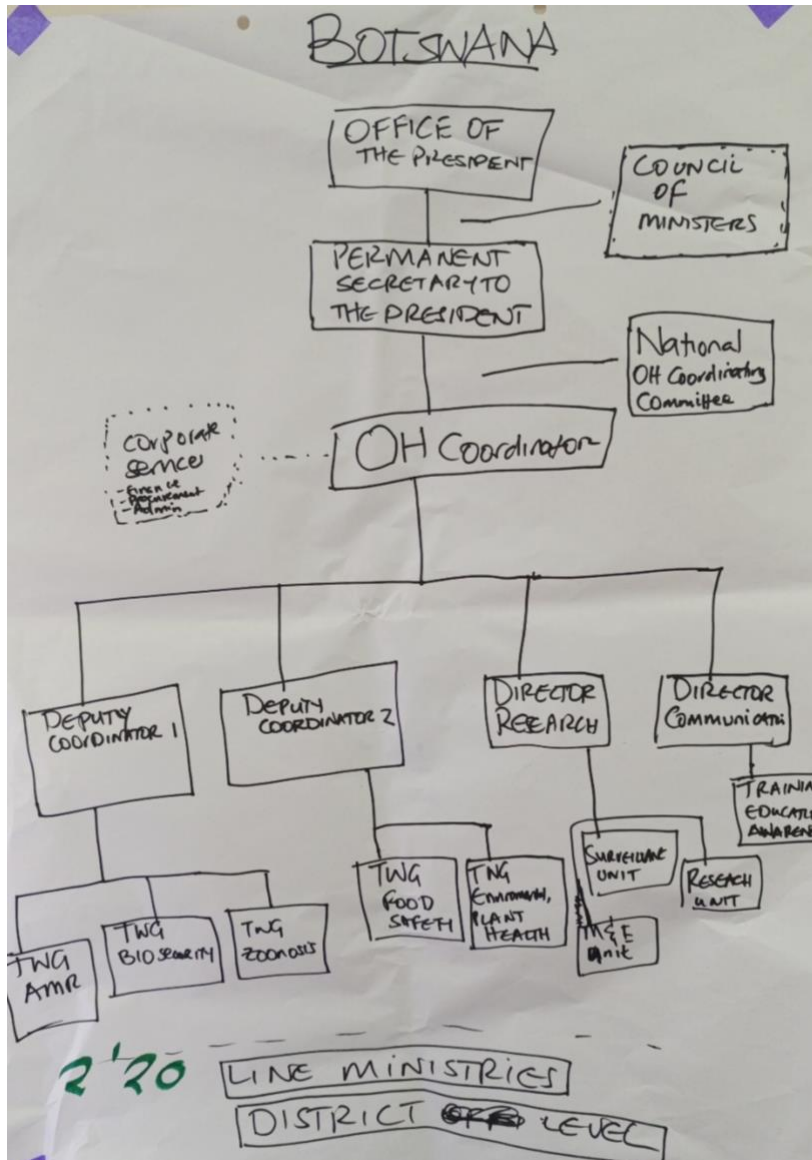
The OH Technical Working Group comprises multi-sectoral technocrats and line ministries. It takes lead in development and

implementation of OH policy and Plan of Action.

Regional Multi-Sectoral OH Taskforce serves as the coordinator of all OH regional programs. It initiates drafting of OH advocacy and policy draft in close collaboration with line ministries. It also reports OH cases of concern to OH technical working team. The Taskforce also promotes OH through different media platforms.

District OH Multi-sectoral Rapid Response Team conducts public sensitization and education on OH in collaboration with multi-sectoral stakeholders. It also provides rapid response on any zoonotic AMR cases. It documents, reports, traces and treats zoonotic diseases. It reports to the Regional Multi-Sectoral OH Taskforce.

Botswana OH Platform Organogram



The Office of the President coordinates national OH activities.

The permanent Secretary to the President is the secretariat to the Council of Ministers.

OH Coordinator acts as the secretariat to National OH Committee. The coordinator also oversees OH operations.

Deputy Coordinator 1 coordinates technical working group on AMR, biosecurity and zoonosis.

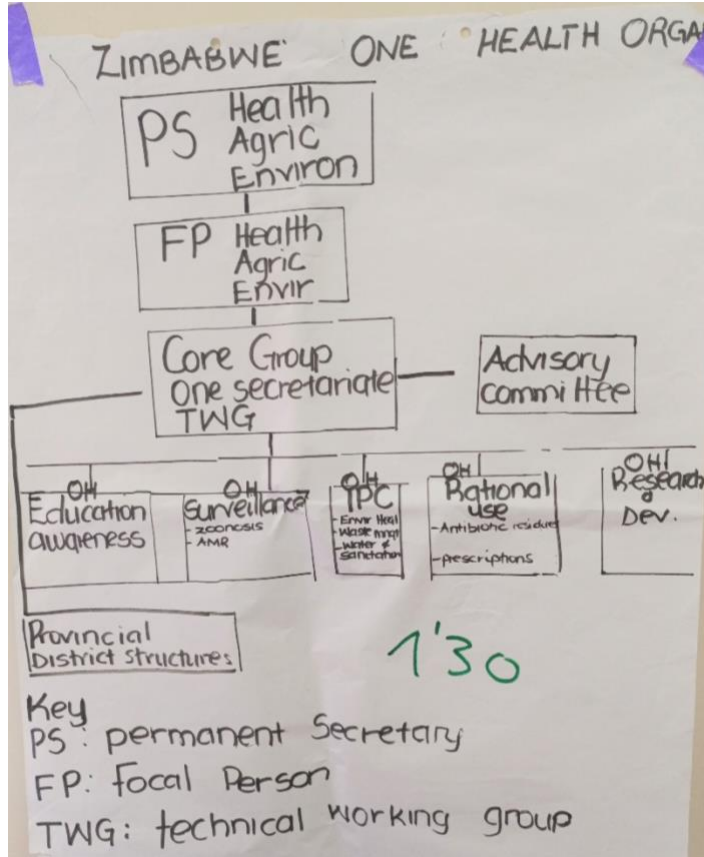
Deputy Coordinator 2 coordinates technical working group on food safety and environment and plant health.

The Director of Communication coordinates education, training and awareness on OH, and develops OH guidelines and protocols.

The Director Research coordinates surveillance and research on OH. He/she also monitors and evaluates OH policy.

Line ministries provide technical expertise to technical working groups and respond to disease outbreaks. OH policy is implemented at district and community levels.

Zimbabwe OH Platform Organogram

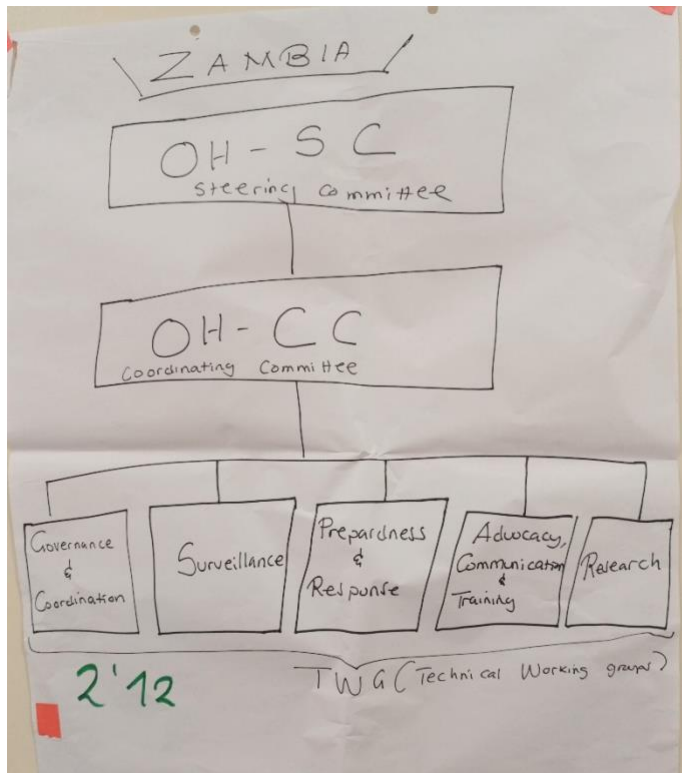


Permanent Secretaries (PS) of Health, Agriculture and Environment push OH agenda to their respective ministers and to the Cabinet.

The Focal Person (FP) coordinates OH activities.

The Technical Working Group develops standard operating procedures (SOP) and protocols. It also implements action plans and develops IEC materials and handbooks.

Zambia OH Platform Organogram



OH Steering Committee provides overall oversight to coordination of OH approach in Zambia.

OH Coordinating Committee coordinates different sectors in OH.

Technical Working Groups comprise technical representation from various ministries, NGOs and partners based on the following thematic areas: Governance and Coordination; Surveillance; Preparedness and Response; Advocacy, Communication and Training; and Research.

Observations on OH Platform Country Organograms

- Some organograms are heavy-bottom (crowded at the bottom). Does this work better?
- Some OH organizational structures are heavy/crowded at the top (e.g. Uganda OH platform) since they focus on decisions trickling down from the top.
- OH platforms are either anchored in the PM's Office or the Office of the President.
- Rwanda OH structure is very bureaucratic.

Recommendations on OH Platform Organograms

- National OH platforms should be institutionalized rather than making them committee-based.
- Organograms should be simple not complex; simplicity is king.
- There is need for OH interventions at all structural levels.

- Effective organograms need to be bottom-heave since grassroots communities are consumers of OH.
- Use horizontal and vertical lines as well as legends (to explain abbreviations) and never use arrows in organograms.

Open Space: A Problem Solving Method

‘Open Space’ is a problem-solving technique where participants sit in a round-table session to discuss a problem and propose solutions. The workshop employed these techniques to brainstorm and propose solutions to OH problems/challenges in their respective countries. ‘Open Space’ provides a snapshot of OH problems and interventions, and provides vivid understanding of OH issue in a glimpse. The table below summarizes the problems identified and solutions suggested.

Problem	Why the Problem?	Solution	Action Plan
1. Difficulty in acquiring ethical approval of COHESA project	<ul style="list-style-type: none"> ○ Lack of clarity on requirements ○ Vague feedback ○ Lack of communication platform ○ The Bard may not have understood OH concept 	<ul style="list-style-type: none"> ○ One-on- One engagement with the Board ○ Reaching out to committee members ○ Seeking advice from applicants who have gone through the process 	<ul style="list-style-type: none"> ○ Present the proposal to the Board ○ Prepare supportive documents
2. Difficulty in deploying multi-sectoral Zoonotic Disease Outbreak Investigation Team	<ul style="list-style-type: none"> ○ Members of the team are scattered in different sectors ○ Experts in sectors consider this team secondary ○ No legal mandate 	<ul style="list-style-type: none"> ○ Need to institutionalize the deployment ○ Put in place incentives (e.g. over-time payment) 	<ul style="list-style-type: none"> ○ Develop policy briefs ○ Establish secretariat ○ Conduct training ○ Develop legal framework ○ Assign focal point

	<ul style="list-style-type: none"> ○ Limited capacity and experience ○ Systems leadership gap (silos) 	<ul style="list-style-type: none"> ○ Enhance capacity building and advocacy ○ Intensify resource mobilization ○ Need for sectoral focal point 	
<p>3. Inadequate budget to support OH activities due to competing national issues</p>	<ul style="list-style-type: none"> ○ Lack of sustainable budget for OH activities ○ OH is not a priority ○ Limited awareness on OH among policy makers ○ Limited knowledge on grant writing ○ No income generating activities at institutional level ○ Ineffective marketing of research activities and services. ○ Limited/lack of political buy-in ○ OH not included in institution action plans ○ Limited understanding on 	<ul style="list-style-type: none"> ○ Awareness creation on OH policy ○ Benchmarking in countries that have success stories on OH funding ○ Soliciting grants through networking ○ Capacity building in writing grants ○ Marketing research to attract partners that can bring funds ○ Holding sectors accountable to contribute to OH activities ○ Streamline OH activities into 	<ul style="list-style-type: none"> ○ Develop policy briefs ○ Create OH structures for budget allocation ○ Conduct grant writing training ○ Develop a marketing strategy ○ Conduct a fundraising campaign ○ Develop OH strategic plan

	budget planning process	national programs	
<p>4. Unwillingness by OH sectors to collaborate equally in OH activities (planning, implementation and M&E)</p>	<ul style="list-style-type: none"> ○ Some sectors feel it is not within their responsibility to implement some OH activities ○ Limited knowledge on OH approach ○ Unequal budgetary allocations among sectors ○ Weak M&E plans ○ Ministries not planning for OH activities ○ Heavy workload 	<ul style="list-style-type: none"> ○ Have peer-to-peer talks to resolve inequalities ○ Call an ad hoc senior level consultative meeting and ensure relationships are built and maintained ○ Strengthen M&E plans/frameworks ○ Review implementation of OH plans ○ Employment of more staff to support OH agenda implementation 	<ul style="list-style-type: none"> ○ Carry out annual performance appraisals ○ Conduct capacity building on continuous basis ○ Conduct advocacy to enhance buy-in by senior management ○ Identify OH champions within sectors ○ Develop short course on collaboration ○ Appoint OH focal points

REFLECTIONS FROM PARTNERS



“I am grateful for this training opportunity. As a team from Zimbabwe, we have learnt a lot on key messaging and media relations, areas which most of us have had problems. I appeal to my colleagues to translate what we have learnt into action so that we can effectively tell our OH story.”

Ms. Thobekile Ndlovu, Health Promotion Officer, Zimbabwe



“It has been a great honor and pleasure to be part of this meeting. Among the things we are taking away as team Zambia are lessons from different OH setups in different countries. We are borrowing the best practices from these setups to guide us in establishing an OH platform in Zambia. We will prioritize development of an OH-related policy brief.”

Dr. Kal Kalangwa, Ministry of Health, Zambia



“For the Ugandan team, our takeaway is the great value of the training. The workshop has enhanced our media relations and this gives us a good opportunity to work with the media in my country. This workshop has positioned us well to put a strong ask that OH platform be domiciled in the Office of the Prime Minister for strong political anchorage and coordination of OH issue.”

Prof. Clovice Kankya, COHESA Country Multiplier, Uganda.



“We are not only limited by the silos we live in as experts but also by our nature to gate-keep information and knowledge sharing. The workshop has provided us with illuminating experience and opportunity to share ideas and best practices towards improving OH. Additionally, learning how to effectively engage the media has been a standout for me. We have to remember that the media are the representative of the people, and thus when we engage, we are directly engaging the public.”

Dr. Gloria Igihozo, University of Global Health Equity, Rwanda.



“Enhancing skills on how to effectively and confidently communicate is key in engaging top leadership and policy makers on issues of OH. This is an asset for us as Team Ethiopia.”

Dr. Feyesa Regassa, National One Health Steering Committee Chairperson, Ethiopia



I am confident I have gained three sets of skills: One, skills on effective engagement with policy makers. Two, enhanced confidence and tactics for effective media engagement. I could not sit with media practitioners since I view them as intimidating. I have now realized that the media is a key stakeholder in advocating for OH. Lastly, I have gained valuable skills in developing OH strategies for my country.

Prof. Gabriel Shirima, COHESA country multiplier, Tanzania



It was a wonderful pleasure to meet my brothers and sisters from 10 COHESA countries. The workshop was very enriching. I have learned a lot especially at my capacity as a social scientist. My knowledge, skills and attitudes have been enhanced in respect to OH. I feel confident and armed to go back to my country as an advocate of OH and using my position in the Office of the VC to transfer the knowledge I have gained. I have understood a holistic picture of OH, and realized that it is not just about zoonotic diseases.

Dr. Rachael Freeman, COHESA country multiplier lead-representative, Namibia



As the Mozambican team, we are grateful to be part of this training. We have learnt a lot in communication OH. We assure you that we will present the workshop recommendations to our government in order to boost OH approach in our country. The communication and advocacy skills learnt will go a long way in convincing our policy makers to prioritize issues of OH.

Dr. Ilda Chilengue, Ministry of Agriculture and Rural Development, National Directorate of Livestock Development, Mozambique



Our take-home message as the Kenyan team is that as professionals, we should break out from the ivory tower mentality and avoid talking among ourselves. We need to communicate and reach out not just to technocrats but to non-technical actors in OH. We need to package our communication well. Another take-home is the need to bridge the gap between research and policy. We will not relent in our quest to anchor OH in the Office of the President. The workshop has equipped us with better tactics in pursuit of this goal.

Dr. Khadija Chepkorir, Zoonotic Disease Unit, Kenya

WAY FORWARD

- 1 **Develop policy advocacy strategies** that address the gaps identified from the policy cycle exercises.
- 2 **Start building relations with stakeholders in the policy cycle:** With the skills learned, ensure you start forming relations with the media and politicians.
- 3 **Establish resource centers and databases:** Keep updating resource centres for efficient access of OH information by the Executive (legislators, cabinet ministers etc.)
- 4 **Multipliers to build synergy for efficiency:** Multipliers are advised to utilize the lessons learnt and recommendations suggested to build synergy with colleagues and strengthen operationalization of OH in their countries.
- 5 **Start building media relations:** Look for opportunities for media interviews and talk shows to enhance relations with the media and sensitize communities on OH issues

- 6 **Develop message maps and policy briefs** from the baseline survey once it is concluded. Share the messages with COHESA Secretariat. Qualities of a good message: *believable, memorable, positive, relevant, simple, context-specific*
- 7 Each country leader should **coordinate development of a draft OH advocacy brief** to be shared with COHESA Secretariat.