

# Co-creating One Health Workforce through Health System Strengthening in Western India (OHSSIN)

# **Project Report**

**Report by** Indian Institute of Public Health Gandhinagar, India & Section Global Health, Institute for Hygiene & Public Health, Germany, on 18-01-2024, E-Mail: yasobant@iiphg.org

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**LMIC Partner:** Center for One Health Education, Research & Development (COHERD), Indian Institute of Public Health Gandhinagar (IIPHG), Gujarat, India

**Countries:** India & Germany

# 1. Background of the project

Over the last two to three decades, there has been a constant rise in the surge of emerging and reemerging infectious diseases, including pandemics, most of which have animal origins and pose a tremendous public health concern. This continuous surge has made health system strengthening (HSS) an even more important task. However, the lack of convergence between the (health) workforce of the human, animal, and environmental sectors was highlighted in one of our earlier studies, "Research to explore Intersectoral Collaborations for One Health Approach" (RICOHA). Due to the workforce's low awareness level and differences in responsiveness within the health system One Health collaborations are not institutionalized. Thus, One Health System Strengthening in India (OHSSIN) was initiated to strengthen the local health systems through capacity building of the (potential) One Health workforce; the project exemplarily targeted three Western Indian states, Gujarat, Rajasthan, and Maharashtra, by examining, defining and increasing the required knowledge of the One Health workforce.

# 2. Project Summary

The two main objectives of the project were (1.) to investigate, document, and prioritize the threats and risks for emerging diseases at the human-animal interface in Western India and (2.) to increase the capacity of the existing clinical and community health workforce for early detection of threats and risks for emerging diseases. The following two work packages (WP) were implemented to achieve the above-mentioned objectives:

1. Co-creation research workshops for prioritization of emerging threats and risks

The main aim of conducting state-level co-creation workshops was to prioritize risks and epidemicprone and emerging diseases considering the local context. The following activities were involved for the co-creation workshops: review of the existing tools for prioritization, tool development, identification of the stakeholders, and lastly, planning and conducting the workshops.



## 2. Implementation of strengthening and capacity building for the healthcare workforce

The main aim of capacity building was to enhance the knowledge of clinical and community-level workers from different departments on the early detection of emerging threats and risks. The following activities were conducted: review of existing training material, training content development, identification of existing workforce and planning and conducting training sessions.

# 3. Findings

The following are the major achievements of the project:

- 1. One Health Risk and Disease (OHRAD) prioritization tool developed
- 2. 03 state-level co-creation One Health Workshop conducted
- 3. Top 10 risk factors and epidemic-prone or emerging diseases prioritized for the selected states
- 4. One Health Guidebook and other training materials were developed
- 5. 15+ training sessions were conducted in three states
- 6. 1000+ One Health workforce trained

## 4. Lessons learned for the wider global health community

It is vital to conduct training of the workforce at the interface of human-animal-environment for risk detection from the One Health perspective. Specific training sessions for the existing workforce from the human, animal, and environmental sectors are helpful for the implementation of the One Health approach, as most of them did not receive formal training on One Health. Training the community-level workers is crucial and of utmost importance, as they are the backbone of the system and the prime implementors. The One Health implementation looks challenging but fascinating, too, to work collaboratively with academia, researchers, government stakeholders, and private bodies. Future projects aiming to implement the one health approach need to understand the local context and should closely work with the concerned stakeholders. Cooperation between academia and government at the state level requires additional efforts but is a promising way to disseminate research results and secure impact on health challenges.

# 5. List of materials and publications produced

#### List of Materials

- 1) One Health Guidebook
- 2) One Health Wheel
- 3) One Health Posters
- 4) Case Studies



Figure 1 Materials developed for capacity building (One Health Guidebook, One Health Wheel and One Health Poster)



#### List of Publications

#### Published:

1. Yasobant S, Saxena D, Bhardwaj P, Quazi ZS. One Health system strengthening in India: Co-creating one health workforce to combat future pandemics. Indian J Community Med 2023;48:814-6. DOI: 10.4103/ijcm.ijcm\_100\_23

#### **Under Review:**

- 1. Yasobant S, Bhavsar P, Lekha K S, Patil S, Falkenberg T, Bruchhausen W, Saxena D. One Health Risk and Disease (OHRAD) prioritization tool: A tool to prioritize the risks for emerging and epidemic-prone diseases from One Health perspective. Global Health Research and Policy. (Manuscript Number: GHRP-D-23-00165)
- 2. Yasobant S, Patil S, Bhavsar P, Saxena D. Prioritisation tool to prioritize the risks for emerging and epidemic-prone diseases: A scoping review. International Journal of One Health. (Manuscript Number: IJOH-2023-11-075)
- 3. Yasobant S, Lekha K S, Patil S, Bhavsar P, Tadvi R, Patel K, Falkenberg T, Bruchhausen W, Saxena D. Prioritisation of Risks for emerging and epidemic-prone diseases in western India. Journal of Epidemiology and Global Health (Submission ID cb90485c-4092-4a82-ae54-b5ee64e3fd2d)

## **Under Preparation:**

- 4. Impact of capacity building training on the knowledge of One Health workforce for disease control and pandemic prevention: Reflection from three western states of India.
- 5. One Health System Strengthening in India (OHSSIN): A One Helath Initiative in Three Western States of India. (Target Journal: CABI One Health Cases)

## 6. Pictures

### Media Outreach:









## Glimpses of co-creation workshop:





## Glimpses of capacity building:





















# 7. Contact

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