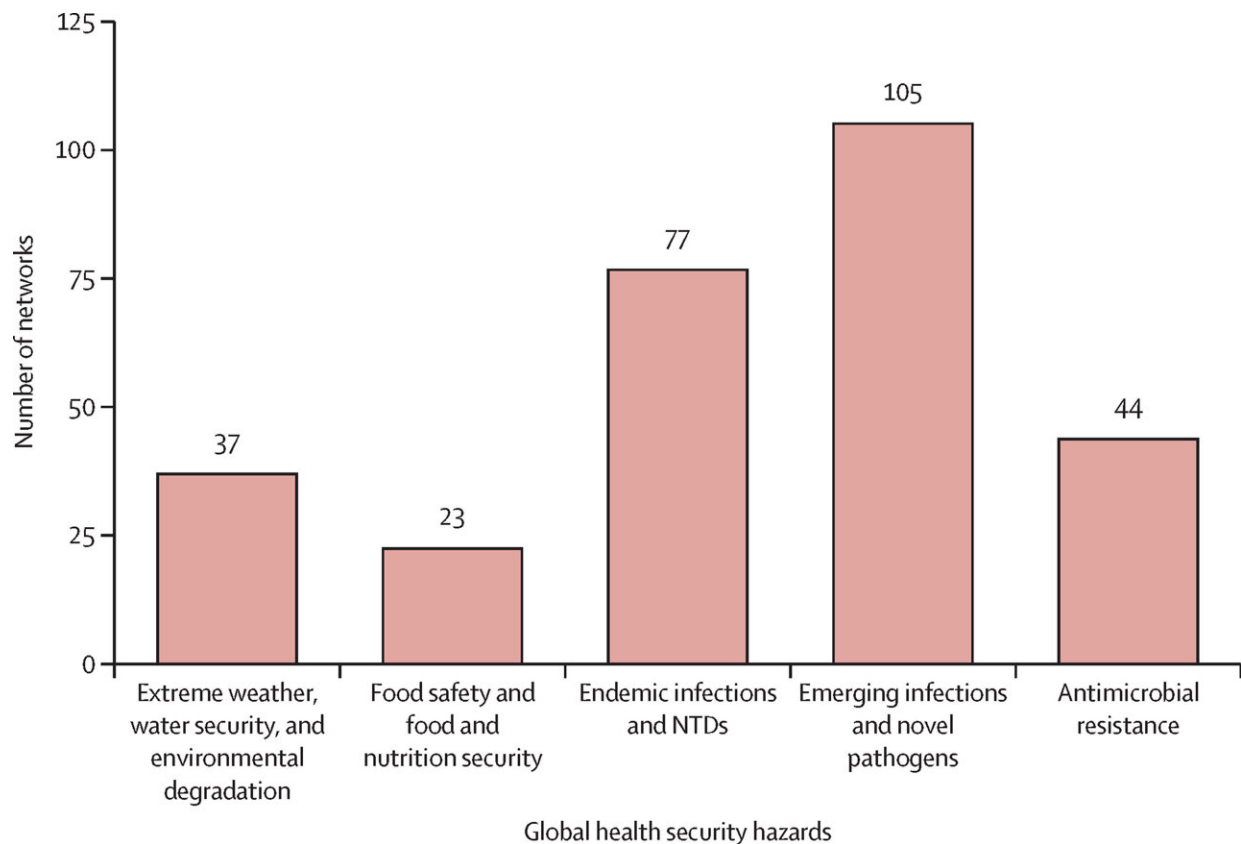


Holes in 'One Health Network' coverage leave vulnerable communities in Global South

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Global health security hazard focuses of OHNs. Most OHNs focus on more than one hazard category. NTDs=neglected tropical diseases. OHN=One Health Network. Credit: *The Lancet* (2023). DOI: 10.1016/S0140-6736(22)01596-3

A new research paper assessing the characteristics of One Health

Networks (OHNs) globally reveals that investment in OHNs has not been equitably distributed around the world and that engagement across sectors and with a diverse array of stakeholders is sorely lacking.

The study, recently published in *The Lancet* as part of a landmark four-paper series on One Health and Global Health Security, was written by ILRI graduate fellow Athman Mwatondo and co-authors Afifah Rahman-Shepherd and Osman Dar, among others. Moving forward, the glaring gaps in existing OHNs leave the world vulnerable to global [health](#) threats and serve as a stark reminder of the urgent need to establish more egalitarian OHNs that help vulnerable communities worldwide address their most pressing health challenges.

The COVID-19 pandemic has seen an increased focus on the threat of emerging diseases at the human-animal-environment interface. One outcome of this is likely to be increased investment in OHNs, which the study's authors defined as "an engagement between two or more discrete organizations or entities, with representation from at least two of the three broadly categorized One Health sectors ([animal health](#), [human health](#), and environmental and ecosystem health)".

Unfortunately, prior investment in OHNs has not been equitably distributed. Based on a global identification and analysis of OHNs, the recent *Lancet* study reveals that more global-level OHNs are formed and headquartered in Europe than in any other region. This means that the governance and decision-making of global OHNs are done predominantly in [high-income countries](#).

The study also found low diversity in stakeholder and sector representation when it comes to OHN collaborations and partnership structures. Most OHNs are primarily focused on emerging infections with pandemic potential and novel pathogens. Other pressing, more locally relevant issues like endemic and neglected diseases often do not

receive the same level of attention or investment.

Many OHNs also have little involvement with stakeholders in the environment and ecosystem sectors, thereby limiting their ability to respond to health threats in diverse contexts. Moreover, OHNs are less likely to engage local community members in the design and agenda-setting phases of implementation than other types of stakeholders such as academic institutions and government bodies.

The study's findings highlight that many global OHNs are based on high-income hegemony and a global health framework built from colonial structures. This limits the effectiveness and sustainability of their efforts to address a wider range of global health threats that most of the world's population confronts. Moving forward, it is imperative that OHNs, particularly those with a global focus, establish governance structures that ensure inclusive and equitable partnerships and agenda-setting.

Fortunately, the current One Health landscape presents a significant opportunity to focus efforts and resources on areas that need them most. "With COVID-19, there is a lot of focus on this kind of work right now, so there will be many more partnerships on One Health going forward," said Mwatondo. "The focus then should be on bringing more equity and creating better partnerships."

To accomplish that goal, Mwatondo et al's study should be used as a baseline to establish databases and repositories of OHNs worldwide. Then, by identifying deficits in their mandates and activities, we can improve One Health equity by targeting investments and creating new One Health partnerships in areas currently underserved by global OHNs. Doing so will benefit not just those in low-income countries, but people worldwide, as the next major global health threat could emerge from anywhere.

More information: Athman Mwatondo et al, A global analysis of One Health Networks and the proliferation of One Health collaborations, *The Lancet* (2023). [DOI: 10.1016/S0140-6736\(22\)01596-3](https://doi.org/10.1016/S0140-6736(22)01596-3)

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