
COUNTRY EXPERIENCE: ONE HEALTH IN BANGLADESH

Interview with Dr. Nitish Chandra Debnath, One Health Coordinator
Emergency Center for Transboundary Animal Disease, FAO
Dr Abul Kalam Azad, One Health Technical Advisor
Bangladesh USAID Preparedness and Response Project

Full video link: <https://goo.gl/r4iHOY>

Questions	
Capacity building work on One Health Bangladesh	02:30
How One Health should be approached	06:40
Key messages	08:17
The role of civil society	09:20
One Health Bangladesh Initiative funds	12:17

Description: In this interview Dr. Debnath and Dr. Azad shared their experiences with One Health in Bangladesh. They discussed the capacity building initiatives on One Health that have been undertaken in Bangladesh, especially training programs involving different institutions and disciplines. Dr. Debnath and Dr. Azad also discussed the importance of the role played by civil society to support government.

Dr. Nitish Chandra Debnath, One Health Coordinator for the Emergency Center for Transboundary Animal Disease at the Food and Agriculture Organization (FAO) and Dr Abul Kalam Azad, One Health Technical Advisor at the Bangladesh USAID Preparedness and Response Project.

Interview transcript:

YVB: Importance of One Health approach for Bangladesh

AKA: When it comes to the down level then we have, for example, other problems, like Nipah. Nowadays, people are talking about AMR. When we talk about AMR then we clearly understand that if you want to address the issues, beyond infectious diseases, you really need strong collaboration among the partners, among animal health, human health, and wildlife as well. As people are facing more and more problems we have to work together. We need not work in silos. For example for Rabies cases, since 1948, WHO and FAO are doing some independent activities. But nowadays people understand that the disease should be stopped at the source. For example the anthrax cases in Bangladesh, as Professor Rahman mentioned, if you cannot stop that disease at the source how can you protect the public health? That's very critical. Another example is if there is some infectious disease in a domestic animal that can even threaten endangered species very quickly, which is a treasure for the globe. So we

need very good advocacy and that should be continued as well. We have to create examples as well, such as for anthrax cases, if vaccinations are done against anthrax and people are protected that would create example that One Health works well and will be convincing for using One Health Approach for controlling other diseases.

YVB: Can you say more about capacity building work on One Health Bangladesh?

NCD: Let me start with the activities of advocacy. To date we organized 8 conferences on One Health, starting from 2008 to 2015. The last conference we organized was in Dhaka on March 2015. So we have been doing these things regularly and a new conference we will be organized in September this year. This is about One Health conferences. In 2012, we organized One Health training program with the support of FAO and that involved people from other disciplines: from animal health, one life health and from public health. It was a two-week intensive training program, including human health and animal health. Following that, we had a very good support from the Massey University to develop and collaborate with people training on One Health. It was a master's degree course supported by European Union and also by the World Bank. So this is about Massey University initiative. Another initiative, from the CDC that has been mentioned by Professor Rahman is the FETP, which is not only a training program for public health, but also has recently started to include veterinary as well. And the latest one is that Chittagong Veterinary and Animal Sciences University has created One Health Institute, and they are now preparing themselves to organize formal training courses: short-term, long-term courses on One Health. So this is about capacity building. We are also encouraging donation for One Health research, for example, at the moment, we have a very multi-institutional research project supported by DFID and by the British Biotechnology and Biological Science Research Council, which we call zoonotic disease margin life system, and this is a broad approach. How the approach is playing a role in terms of visibility of zoonotic diseases? This involves Chittagong Veterinary and Animal Sciences University, IDRC, FAO, Department for Livestock Services, Bangladesh Life Services Institute, and London School of Hygiene and Tropical Medicine. This is a very multi-sectorial research approach. Similar research programs have also been supported by the government and by other organizations. Training programs, conferences, seminars, One Health talk that One Health Bangladesh regularly organize in order to share any experiences, training programs from government agencies as well as from Massey University, from IDRC and CDC, so all together this is the focus of our approach.

YVB: How would you approach capacity building for One Health: having a One Health master program or should it be different disciplines coming together to learn how to collaborate?

NCD: Yes, I would support the latter one, with different disciplines we bring people from different background to work in One Health, to learn how to collaborate, to know

what common skills we can use in collaboration, what are the special skills that we need to work in harmony with different people. These are the special focuses on One Health training program, particularly how you work at the interface.

YVB: Your program on One Health is actually different disciplines having opportunities to work together?

AKA: Yes. This is the work that we are also thinking of. If we look into the One Health Secretariat supported from three sectors, this brings people from three disciplines together. If you look into it, so in that case we are also supporting people to know how to coordinate, how to collaborate among themselves, how to help institutional capacity. The last point is that only when we start our work on Avian Influenza that was a single-disease focused. Nowadays we have to deal with multi-hazards; we have to train people in the way so that they can deal with multi-hazards or something like that. That is critically important.

YVB: Can you say something about the role of civil society to support government? Is this something that you think is useful to impact the audience?

NCD: Yes. To make One Health approach successful I think you have three different approaches, this is our experience. One, you need champions and they should come from the government. Champion institutions, let's say for example. In Bangladesh we have those champions and the government must be actively involved in these activities. The second message is very clear: a civil society movement is very important. For example, we have One Health in Bangladesh and I think it helps society to build social awareness; it helps to increase any class that should have a stronger voice, which sometimes cannot be possible within the government system. And third one, we also need strong advocacy within intergovernmental agencies, like WHO, FAO, other organizations, UN agencies, because they are the partners for many activities in our condition. So, when they work individually sometimes one get the benefit, but when they work together, under one umbrella in One Health approach, we get the maximum benefit. And that's why it is a government approach, a society approach and also a global health approach. This three teams should go together to make One Health successful.

YVB: Can I ask where does One Health Bangladesh Initiative get their funds from?

NCD: For our small meetings and other things, we have founding members and we get some money from them and we use this money. For big events, like conferences, we get money from our partners, partners that come from governments, non-governments, intergovernmental agencies and global alliances. We put this money together and we always make a partnership for conferences, One Health conferences for all

departments. And when we take a training program, for example a UN given or a government given training program, the funding that we get we are just working to catalyze that, supporting them, mobilizing resource people from different partners. We do not handle much money. Our money is basically very limited, only for day to day small meetings and they are based on membership fees.

YVB: What could be your key message to share with our RRT?

NCD: Well, from Bangladesh, our message is very clear: Bangladesh desperately needs One Health practices. Why? It is a very densely populated country, it has a huge animal population, it is recognized to be a hot spot for EIDs (emerging infectious diseases), and its environment is very vulnerable. So we recognized that it is One Health approach that can keep our population healthy. It can also contribute to keep our environment and our animal health better. So our message is: working together is the best way to have better health for all species.

YVB: Additional key message from Dr Azad

AKA: From Bangladesh perspective the message is: civil society in One Health is complementary to government efforts to protect the people of Bangladesh and beyond, to protect global health, environmental health, animal health and public health. And if you want to achieve and sustain it, we have to develop the culture of working together. If you can develop the culture of working together that is the most important thing. As we are working in silos, there is mistrust of others, so if you can work together then trust will be built and we can complement each other, protect the people, protect human health and the environment.