



ADVOCACY BRIEF

A CALL FOR ONE HEALTH ACTION IN NIGERIA

Introduction and Background

Nigeria, the most populous African nation with over 220 million people is also a country with highly diverse climatic conditions, heterogenous socio-geo-political zones, and more than a billion livestock population. While there have been substantial gains in human, animal, and environmental health systems strengthening, sub-optimal capacities remain especially at the primary level which provides health services to over 70% of the population. Aggravating these are the high poverty level (NBS, 2022), humanitarian emergencies, and natural disasters.

Zoonotic diseases, antimicrobial resistance (AMR), food safety, and other One Health threats are transmitted between animals, people, and the environment, and they impact health, livelihoods, economy, development, and national and global health security. Nigeria has been faced with many re-emerging zoonotic, food-borne, and environmental-borne disease outbreaks such as Lassa fever, rabies, cholera, highly pathogenic avian influenza (HPAI), mpox, diphtheria, anthrax, bovine TB and yellow fever. Furthermore, Nigeria contributes greatly to AMR in Africa which is exacerbated by gross misuse in animal agriculture and spread to humans through the consumption of antibiotic-contaminated animal products and contaminated wastewater in the environment. WHO has declared AMR as one of the top 10 global public health threats facing humanity with nearly 5 million human deaths estimated to be associated with bacterial AMR worldwide in 2019. In Nigeria alone, in 2019, there were 64,500 deaths attributable and 263,400 deaths associated with AMR from pathogens such as *S.pneumoniae*, *K.pneumoniae*, *E.coli*, *Staph aureus*, etc. This is the top-most cause of mortality in the country more than tuberculosis, Human Immunodeficiency Virus (HIV), or other infectious diseases. The One Health threats can be attributed to the increasing human-wildlife interactions and inadequate surveillance at that interface, high population density, increasing urbanization, intensive animal agriculture practices, antibiotics misuse, deforestation, and wildlife trade. The continuous incidence, prevalence, and spread of these One Health issues greatly threaten public and global health security.

The 'One Health' Approach

A multisectoral, One Health approach is necessary to address the aforementioned complex health threats at the human-animal-environment interface. The One Health High-Level Expert Panel (OHHLEP) defines One Health as an integrated, unifying approach that aims to sustainably balance and optimize the health of people, animals, and ecosystems. It recognizes the health of humans, domestic and wild animals, plants, and the wider environment (including ecosystems) are closely linked and interdependent.

The approach mobilizes multiple sectors, disciplines, and communities at varying levels of society to work together and leverage each other's resources, skills, expertise, and information to foster well-being and tackle threats to health and ecosystems while addressing the collective need for clean water, energy and air, safe and nutritious food, taking action on climate change, and contributing to sustainable development. Key benefits of One Health include:



By linking humans, animals, and the environment, One Health can help to address the full spectrum of disease control – from prevention to detection, preparedness, response, and management – and contribute to global health security. The approach can be applied at the community, subnational, national, regional, and global levels, and relies on shared and effective governance, communication, collaboration, and coordination. Having the One Health approach in place makes it easier for all stakeholders to better understand the co-benefits, risks, trade-offs, and opportunities to advance equitable and holistic solutions.



Governance Frameworks for 'One Health' in Nigeria

Activities and policies to identify, assess, manage, and reduce risks from zoonotic diseases and One Health threats benefit from functional communication, coordination, and collaboration among the responsible One Health ministries, departments, agencies (MDAs), and all other relevant stakeholders in local communities, academia, and the private sector. Nigeria has established One Health coordination & governance mechanisms guided by the National One Health Strategic Plan (NOHSP) which aligns with the National Action Plan for Health Security (NAPHS), implementation of the International Health Regulations (IHR), Performance of Veterinary Services (PVS) and other important One Health/multi-hazard national and international legal frameworks. However, while this is functional at the national level, gaps exist in high-level national and subnational levels. Established governance structures include the following:

1 The National One Health Ministerial Steering Committee (NOHSC), led by the **Honorable Coordinating Minister of Health and Social Welfare, the Honorable Minister of Agriculture and Food Security, and the Honorable Minister of Environment**. The steering committee will play an advisory role to support evidence-based scientific and policy advice to address the full scope of the challenges related to One Health in Nigeria.

2

The National One Health Technical Committee (NOHTC), led by the **Director-General, the Nigerian Centre for Disease Control and Prevention (NCDC), the Chief Veterinary Officer of Nigeria (CVON), and the Director, Pollution Control and Environmental Health**. The technical committee provides guidance on One Health-related matters, activity implementation, and improved cooperation among government ministries and entities.

3

The National One Health Coordinating Unit (NOHCU) domiciled at the Nigeria Centre for Disease Control and Prevention (NCDC) comprises multisectoral technical officers from the ministries of health, agriculture, and environment and other relevant MDAs. The secretariat is well established and supports the coordination of technical activities and alignment across existing governmental structures to implement the NOHSP and address zoonotic diseases, AMR, food safety, and other One Health threats.

4

Technical Working Groups (TWGs) and Coordinating Committees (CCs) for different zoonoses or One Health issues such as rabies, HPAI, Lassa fever, AMR, food safety, etc. These TWGs/CCs are also multisectoral and members work together to implement preparedness and response activities as required.



One Health Activities and Achievements

1. Launch and implementation of the One Health Strategic Plan (2019- 2023). This jointly developed plan allows for humans, animals (including wildlife), the environment, and other sectors to work collaboratively to prevent, detect, and respond to emerging and re-emerging diseases from this interface.
2. Multi-sectoral zoonotic disease prioritization was carried out in 2017 (2017 – 2022) and One Health Zoonotic Diseases Re-prioritization was done in 2022 using the United States Center for Disease Control and Prevention (CDC) tool.
3. Implementation of several relevant assessments, including International Health Regulation (IHR) Joint External Evaluation (JEE) in 2017 and 2023, as well as the Performance of Veterinary Services (PVS) and the National Bridging Workshop (NBW) for JEE & PVS in 2019. In particular, the National Bridging Workshop explored overlapping areas between the Animal and Human health sectors, identified synergies and gaps in coordination, and recommended a road map for developing opportunities for improved One Health (OH) coordination.
4. Implementation of the Multi-sectoral Coordination Mechanism (MCM) workshop, using the MCM operational tool of the Tripartite Zoonoses Guide (TZG). This provided guidance and technical support to improve both leadership and technical functions, and strengthen collaboration, communication, and coordination for addressing zoonotic diseases, AMR, food safety and other shared health concerns across the human-animal-environment interface to achieve better health outcomes.
5. Extensive training of relevant multisectoral stakeholders on the use of the Joint Risk Assessment (JRA) tripartite tool for risk assessment of zoonotic diseases in 2021 and 2022. This has improved the capacity to guide policy communication, develop risk mitigation strategies, and improve planning and preparedness for zoonotic diseases at the national level and in one state.
6. Following the conclusion of the first phase of the National Action Plan (NAP) on AMR – 1.0 (2017 – 2022), the NAP-2.0 is currently being developed and will be launched in December 2023. The development of the NAP-2.0 is guided by the one health, multidimensional, and multisectoral approach and the adaptation of the WHO six steps manual and handbook which aligns with NAP-1.0 strategies, Global Action Plan on AMR, and the recently launched People-Centric AMR Framework, in line with member state's regional and global commitments.
7. Development and launch of strategic plans for prioritized zoonotic diseases such as rabies, Lassa fever, mpox, yellow fever, cholera, and brucellosis.
8. Implementation of the REDISSE project was conducted with a One Health approach which includes building capacity on key stakeholders at the subnational level on one health risk communication for priority zoonotic diseases.
9. Establishment of One Health unit in relevant tripartite MDAs and appointment of dedicated focal persons to support the implementation of activities.

10. Development and implementation of the NAPHS using the One Health approach has supported the development of IHR core capacities across multiple technical areas and resulted in marked improvement in the country's 2023 JEE scores.
11. Response and preparedness activities to zoonotic diseases, AMR, and food safety are hinged on the One Health approach and ensure regular coordination, collaboration, communication, and capacity building that is requisite for successful implementation.
12. The establishment of a multi-sectoral National One Health Risk Communication TWG and the development of a multi-hazard multi-sectoral risk communication guideline have continued to foster the use of social science nodes and rumor control to communicate and effectively engage with the target population.
13. Development of a One Health Risk Communication and Community Engagement Training Package to foster collaboration and coordination between One Health professionals and the media.
14. Establishment and joint activities of the National One Health Risk Surveillance and Information Sharing Group for scanning emerging and re-emerging threats and hazards to animal and human health that may impact or come from the environment.



Challenges in One Health operationalization

- Inadequate public awareness and high-level stakeholder engagement on the One Health approach.
- Most of the progress in One Health coordination in Nigeria is at the Federal level with little coordination and activities in some states, and none at the LGA levels
- There is no dedicated budget line at the Federal, State, and LGA levels for the implementation of One Health activities, hampering effective coordination for control and elimination of prioritized zoonotic diseases, AMR, food safety, and other One Health threats.
- Inadequate or inconsistent surveillance and information sharing across One Health sectors. There are gaps in information-sharing and interoperable mechanisms for surveillance of zoonotic and food-borne diseases, and AMR across sectors, which lead to inefficient preparedness and ineffective response, as well as a lack of evidence-based data to advocate for strengthening health systems.
- There is inadequate knowledge and capacity of the workforce in One Health implementation particularly at the subnational/community levels, which hampers the use and application of quadripartite tools, cohesive preparedness and response mechanisms, and effective engagement with the target population.

Advocacy Asks from One Health Ministerial Steering Committee

- To strengthen the high-level One Health mechanism at the federal level through the implementation of scheduled Ministerial Steering Committee meetings (as agreed)
- To guide and support the institutionalization and operationalization of One Health at all administrative levels including the states and LGAs for established sub-national One Health mechanisms
- To oversee and approve joint recommendations by the NOHTC from established/ reviewed legal frameworks for One Health coordination including laws, policies and regulations, guidelines, Standard Operating Procedures (SOPs), governance manual, National Action Plans, etc
- To support and guide advocacy for resource mobilization and budget line for One Health operationalization
- To support optimal harmonization and inter-operability of preparedness and response systems including joint surveillance, risk assessment, response to One Health threats





A One Health approach makes public health sense, economic sense and common sense. It's obvious that we can only protect and promote the health of humans by protecting and promoting the health of animals, and the planet on which all life depends.

Dr Tedros Adhanom Ghebreyesus, WHO Director-General



Check out

<https://onehealthbehaviors.org>
for behavioural research on zoonotic diseases

Designed by Breakthrough ACTION-Nigeria

