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Background

The prevention and management of major public health events are crucial concerns for political, administrative, and health authorities. Epidemics such as Ebola and COVID-19 can have severe social (disability, death) and economic (loss of employment, reduced production) costs. Public fear and anxiety can be exacerbated if communities lack sufficient information, are not engaged as stakeholders, or feel their concerns are not addressed. Effective interventions require a multisectoral and multidisciplinary approach, exemplified by the One Health platform, which aims to strengthen health systems and enhance resilience against emerging infectious diseases.

The One Health concept recognizes the interdependence of animals, humans,

and their shared environment, partnering stakeholders from multiple sectors to collaborate on emergency preparedness and response. Many countries have taken steps to operationalize this approach by establishing and strengthening national One Health platforms and policies, providing coordination and guidance to support activities that enhance resilience against zoonotic and other infectious disease outbreaks.

Risk communication and community engagement (RCCE) and social and behavior change (SBC) are critical, complementary components in these interventions. RCCE involves informing and engaging communities about health risks and preventive measures to foster trust, cooperation, and informed decision making. Built on a foundation of SBC, which focuses on changing behaviors to improve health outcomes, RCCE supports



Community awareness activity to address Ebola in Senegal.

Credit: Breakthrough ACTION.

essential behavior changes for controlling outbreaks. A country's One Health platform addresses RCCE across multiple technical areas of emergency preparedness and response (e.g., surveillance, laboratories, emergency operations centers), requiring a multisectoral approach.

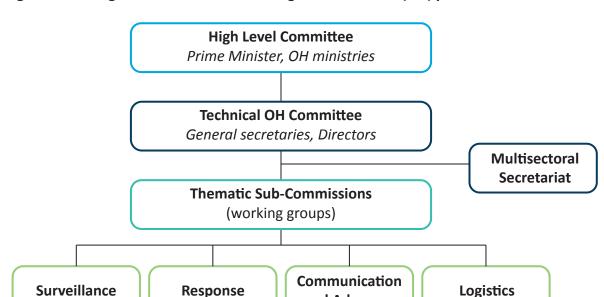
Breakthrough ACTION, supported by the U.S. Agency for International Development, works closely with countries to strengthen RCCE capacities to prepare for and respond to zoonotic diseases and other emerging health threats through a One Health approach. Since 2018, Breakthrough ACTION has expanded from three global health security country programs to 19, applying and building on the best practices from each implementation. This expansion has enabled the design of creative approaches tailored to country-specific priorities and contexts, engaging diverse stakeholders to achieve common goals.

Case Study: Niger

Niger faces high risks for zoonotic disease outbreaks due to several intersecting factors. Livestock agriculture contributes significantly to the national economy and local livelihoods in Niger. The frequent movement of both people (nomadic populations) and animals, along with environmental degradation and desertification, affect animal habitats and ecosystems, accelerating conditions that encourage disease emergence, spread, and spillover. Economic insecurity and social conditions also create barriers to disease prevention and control. Recent outbreaks of Rift Valley fever, avian influenza, yellow fever, and anthrax underscore the need for

a One Health approach in this country. In April 2018, Niger established its One Health platform (see Figure 1). In the first few years, the country faced multiple challenges in making the platform fully operational:

- **Leadership Challenges:** The platform was chaired by the Secretary General of the Ministry of Health, who did not have pre-existing authority over other sectoral ministries involved in the One Health approach, specifically the Ministry of Livestock and the Ministry of the Environment and the Fight against Desertification. This lack of inclusion and consultation around the leadership structure led to some ministries not participating in the platform's activities. These ministries expected the Ministry of Health to act unilaterally as the chair of the platform and thus lacked a sense of co-ownership.
- Organizational and Coordination
 Challenges: No functional thematic
 working groups were formed to apply
 the One Health perspective to specific
 work streams, such as surveillance,
 risk communication, community
 engagement, and laboratories.
 Although focal points were identified in
 certain ministries, no unified organizing
 body was formed to convene them.
- Sectoral Epidemic Management:
 Epidemic management was handled separately by each ministry without a cohesive One Health approach. For example, the Ministry of Livestock managed avian flu outbreaks in the animal population independently from the Ministry of Health, which identified, monitored, and managed possible human cases linked to infected animals.



and Advocacy

Figure 1. The organizational structure of Niger's One Health (OH) platform.

Although its main aim was to advance RCCE, Niger's One Health platform lacked functionality in areas beyond RCCE. Breakthrough ACTION has been a key partner in addressing these challenges since 2021. This partnership has been critical to overcome challenges and enhance Niger's capacities for disease preparedness and response.

The Intervention: Niger—Senegal Study Tour

Building on its previous successes in organizing direct government-to-government technical exchanges, Breakthrough ACTION explored opportunities to intensify direct peer-to-peer learning and exchange between Senegal's and Niger's One Health platforms. Recognizing the need for Niger's One Health stakeholders to draw inspiration from other countries'

experiences to overcome their challenges, Breakthrough ACTION organized a study tour to facilitate collaboration between the governments of Niger and Senegal and demonstrate the effectiveness of the One Health approach. By engaging diverse stakeholders and fostering partnerships across countries, the study tour aimed to support improvement in each participating platform's operations, ultimately overcoming shared challenges, achieving common One Health goals, and enhancing overall public health resilience.

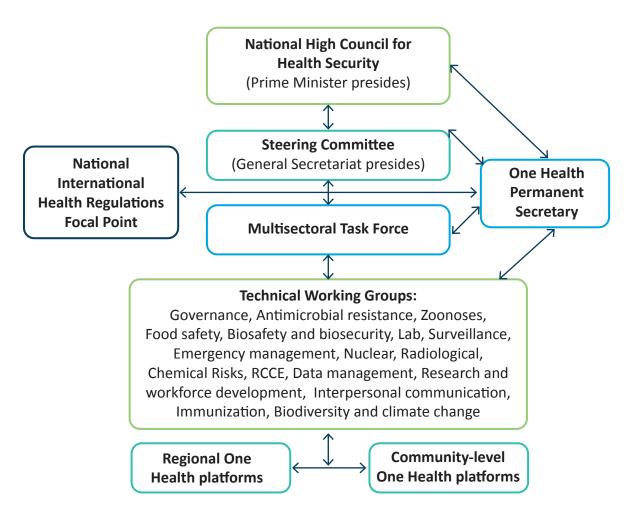
In 2022, Breakthrough ACTION with financial and technical contributions from the Food and Agriculture Organization began jointly organizing the study tour over several months. Senegal was selected as the host country for the study tour because it has a well-structured and functioning One Health platform anchored at the institutional level under the prime minister's authority. This platform includes a permanent

secretariat, steering committee, technical committee for multisectoral coordination, as well as multiple established thematic working groups and decentralized coordination committees (see Figure 2). With its well-structured organization and clearly defined roles of each entity and sub-national entity, Senegal's One Health platform is a compelling example of successful operationalization and a good site for Niger's study tour, given its specific challenges around structure and coordination.

Details of the Study Tour

From the start of planning, the Niger—Senegal joint study tour planning committee focused on establishing a shared vision around the learning objectives, emphasizing the benefits of the study tour for each country's One Health platforms and securing high-level support and buy-in to facilitate a successful exchange. From early 2022 to mid-2023, Breakthrough ACTION facilitated a process to clarify the vision, expectations, and harmonized objectives for the planned five-day event, based on the needs and requests of both Niger's and Senegal's

Figure 2. The organizational structure of Senegal's One Health platform.





Credit: Breakthrough ACTION.

Senegale female farmer holding her chicken.

One Health platforms. The project team engaged high-level authorities to secure agreement on the detailed daily agendas and to prioritize multisectoral stakeholder participation. Eleven delegates from Niger attended, including representation from various sectors and disciplines, underscoring their commitment and capacity for change.

The study tour was held May 22–26, 2023, during which the delegation conducted eight site visits across different sectors, facilitating in-depth experience exchange and continuous participant connection. These site visits included the following key structures within Senegal's One Health platform:

Health Emergency Operations Center:
 Provided insights into its creation, units (operational, planning, administration, and finance), and modes of operation (watch, alert, and response).

- National Health Education and Information Service: Showcased its digital communication media, health broadcasts, and toll-free number operations.
- Ministry of Livestock and Animal Production: Explained its role in zoonotic disease management and support for poultry farmers during epidemics.
- Regional One Health Platform in Saint Louis: Highlighted its effective response to epidemics like avian flu and Crimean Congo hemorrhagic fever through a collaborative approach; showcased how sub-national platforms play a critical role in helping local stakeholders work together and in localizing appropriation of national strategies to curtail zoonotic outbreaks.

Additionally, national and subnational perspectives were emphasized through site



Stakeholders in a co-creation workshop.

visits to the St. Louis Regional One Health Committee, St. Louis Mixed Outreach Coordination Unit, and Guembeul Reserve (site of a 2022 avian influenza outbreak). These visits provided opportunities for study tour participants to discuss common challenges related to decentralizing response efforts and engaging One Health stakeholders at the sub-national level. This structured and collaborative approach encouraged systemic knowledge exchange across many areas of platform operations, motivating Niger's One Health platform stakeholders to more effectively manage multisectoral public health emergencies.

In addition to site visits, core participants from both Niger and Senegal also participated in reflection sessions, taking time to debrief on core challenges and reflect on key takeaways as a group. During the many activities scheduled for the relatively short study tour, this dedicated time for reflection at the end of the visit helped synthesize understanding and promote ideas to apply learnings.

Importantly, the Niger delegation participated in the planning from the early stages, which created a sense of ownership among its delegates and underscored the reciprocity of the knowledge sharing. For example, on the first day of the tour, both Nigerien and Senegalese delegates presented detailed insights from their respective platforms and shared their country's experiences. As a result of this dynamic learning and exchange, both Niger and Senegal were inspired to make changes in their One Health platforms.

Nagoundaye Harouna, the One Health

Focal Point from Niger's Ministry of Environment, noted the value of such exchanges: "Les voyages d'étude sont des partages d'expérience qui permettent de corriger des lacunes pour aller de l'avant." (Study tours are an opportunity to share experiences and correct shortcomings in order to move forward.) He emphasized that study tours provide a critical opportunity to identify and address one's own shortcomings.

Benefits of the Study Tour: Strengthening One Health Capacity

The study tour significantly contributed to strengthening the capacity of Niger's One Health platform in several ways:

Enhanced Detection and Surveillance: Exposure to Senegal's advanced health monitoring systems, such as the Health Emergency Operations Center, equipped Niger's delegates with knowledge on setting up robust surveillance systems. These systems are crucial for early detection of health threats, allowing for timely interventions.

Improved Prevention Strategies:

Learning about Senegal's integrated approach to zoonotic disease management provided valuable insights into preventive measures. For example, understanding the role of Ministry of Livestock and Animal Production in managing avian flu outbreaks helped Niger's officials see the importance of coordinated efforts across human. animal, and environmental health sectors.

Strengthened Response Mechanisms:

Observing the operational structure of Senegal's One Health platform, with its permanent secretariat and designated incident managers, demonstrated effective models for crisis management, helped Niger develop clear protocols and response strategies tailored to specific types of health emergencies.

Community Engagement and Communication: The tour highlighted the importance of involving community organizations and media channels in health communication. The functional call center in Senegal served as a model for enhancing public awareness and

Niger's Key Achievements Following the Study Tour to Senegal

Reflecting on Breakthrough ACTION's journey unveils insights crucial for future endeavors. Lessons learned included the following:

- Development and validation of a national action plan and eight regional action plans.
- Provision of a permanent secretariat of the One Health platform with dedicated working space and functional equipment.
- Acceleration of official installation of the coordination structures and thematic groups.
- Revision of planned structure and progressive establishment of regional One Health committees.



Stakeholders in a co-creation workshop.

providing timely information during crises, which Niger aims to replicate.

Capacity Building and Resource
 Mobilization: Interacting with Senegal's
 experts provided Niger's officials
 with practical skills and strategies
 for building capacity within their
 own institutions to train staff, secure
 funding, and ensure sustainable
 operations.

Reflecting on these changes, a participant noted, "Nous avons copié certaines choses que nous avons mises en œuvre au Niger et nous avons constaté que nous sommes en train d'aller de l'avant." (We've copied some of the things we've implemented in Niger, and we've found that we're moving forward.) This statement highlights the tangible progress Niger has made

by adopting and adapting the practices observed in Senegal.

Senegal also benefited greatly from hosting the study tour, which fostered a dynamic exchange of knowledge and strategies that have significantly influenced its One Health platform. This collaborative dialogue led to the modernization and improvement of Senegal's 2019 decree establishing the organization and operation of the national One Health platform. Inspired by Niger's streamlined approach to the platform's structure, Senegal subsequently initiated discussions to form a more efficient number of technical working groups, enhancing focus and effectiveness. Additionally, the study tour catalyzed the launch of an integrated planning process for regional One Health platforms, ensuring a cohesive and comprehensive strategy across different regions. This bidirectional exchange has refined Senegal's One Health framework and exemplified the power of international collaboration in driving health innovations.

Lessons Learned

Several key lessons emerged from the study tour:

- A high-level committee and permanent secretariat within the prime minister's office ensures effective coordination.
- One Health focal points serving in key ministries ensures better resource mobilization.

- A joint advanced coordination unit aids in emergency responses.
- Civil societies, press associations, and community organizations can be influential partners in health promotion.
- Functional call centers and university
 One Health clubs facilitate public awareness.

Aside from these specific learnings related to the implementation of the One Health approach in Senegal and Niger, the study tour demonstrated the overall value of and need for opportunities for rich, focused, peer-to-peer exchange to facilitate individual, organizational, and systemic capacity building around the One Health approach. Although technology

Organizing a Successful Study Tour: Tips and Tricks

- Identify participating countries by matching their strengths and challenges.
- Arrange an early planning committee, and spend 9–12 months planning a successful implementation.
- Conduct a situational analysis, and identify learning objectives for participating countries.
- Prepare an official request addressed to the appropriate decision-making authority at the highest level possible for buy-in and action, and allow sufficient time for a response.
- Select appropriate participants well-positioned to act on recommendations after the tour.
- Avoid delays by facilitating continuous communication between all stakeholders.
- Plan and jointly develop a budget, detailed daily agendas, and visit objectives for each delegation, donor, and stakeholder.
- Arrange travel and accommodations, ensuring compliance with immigration regulations.
- Ensure dedicated support for documentation of key learning throughout the study tour.

can facilitate virtual exchanges and has been employed to facilitate cross-country learning in a complementary manner, the in-person approach described here contributed to the success of the study tour. A remote collaboration likely would not have achieved the same level of participant connection and in-depth exchange.

Nagoundaye Harouna added, "Le voyage d'étude c'est un moyen d'identifier ses propres lacunes afin de pouvoir trouver des solutions pour remédier et aller de l'avant." (The study tour is a way of identifying your own shortcomings so that you can find solutions to remedy them and move forward.) This insight reinforces the idea that study tours are not only about learning best practices but also about understanding and improving one's own systems.

Conclusion

The study tour was pivotal in revitalizing Niger's One Health platform and providing opportunities to reflect on refinements to Senegal's platform. The tour underscored the importance of learning exchange and the careful selection of participants. Successful implementation of lessons learned will determine the platform's effectiveness in Niger. Future exchanges should involve comprehensive planning and active involvement from both visiting and host countries. By fostering such international collaborations, countries can significantly enhance their capacity to detect, prevent, and respond to health emergencies, ultimately leading to stronger, more resilient health systems.



Exchanging experiences.