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In 1990 he served as Chief Health and Population Adviser in UK Overseas Development Administration (ODA) then in 1997 he became Director for Human Development in the UK Government's Department for International Development (DFID).

In 1999 joined the World Health Organization (WHO) to lead Roll Back Malaria: he moved to Health Action in Crises in 2002.

In September 2005 he joined the UN Secretary-General as Senior Coordinator for Avian and Pandemic Influenza. In January 2009 he also became Coordinator of the UN system's High Level Task Force on Global Food Security; in October 2009 he was nominated as the Secretary General's Special Representative for Food Security and Nutrition and – in December 2011 – he was appointed Coordinator of the Scale Up Nutrition (SUN) Movement.

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HEALTH, FOOD AND NUTRITION SECURITY:

Reinforcing Resilience at Interfaces

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INTERFACE WORKING IN PRACTICE

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Collaborative work on the health of humans, animals and ecosystems reinforces the resilience of societies in the face of disease risk, reduced access to food or the threat of malnutrition. It means focusing on the interfaces between disciplines and systems in ways that give greater priority to people's needs than to professional boundaries or organizational simplicity. Descriptions of this work often use terms like One Health or Food and Nutrition Security. The multi-disciplinary approach is supported by many visionaries from community organizations, Governments, the UN system, development banks and academic institutions. It has been described for nearly 10 years and is proving increasingly popular with policymakers. Implementation – in relation to the prevention and control of zoonotic diseases, the promotion of food safety and enabling people to realize their rights to food and nutrition - has gained momentum in the past four years.

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The one health approach builds on work done on avian and pandemic influenza preparedness and response, forging strong linkages between non-traditional partners from different sectors— agriculture, animal health, public health, military,

and the humanitarian community— increased “whole-of-society” capacity for pandemic preparedness and response. It called for (a) building trust amongst the diverse community of actors that is needed in a major crisis; (b) bringing stakeholders together to agree on their roles and responsibilities; (c) building constructive relationships through collaborative planning; (d) testing the effectiveness of collaboration through immersion in simulations.

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The one health approach was proposed by representatives of communities and governments at a range of events within nations, in regions (eg in the Mekong delta) and at the global level. Important milestones include the development of the “Manhattan Principles” for “One World One Health” in 2004, and the succession of International Ministerial Conferences on Avian and Pandemic Influenza between 2005 and 2011.

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The meeting series and their output declarations and road maps have served as the platform for the start of broader One Health discussions. In 2007, the concept of “One World, One Health ” was highlighted as contributing to pandemic preparedness and human health security. In 2008, an Interagency Strategic Framework “Contributing

to One World, One Health – A strategic framework for reducing risks of infectious diseases at the animal–human–ecosystems interface” was developed and officially released. The 2010 Hanoi meeting was a key landmark for One Health, as it represented a more global shift toward, and acceptance of, cross-sectorial policy and coordination to deal with serious threats at the human–animal–ecosystem interface.

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The Hanoi conference was also the venue for the release of both the FAO–OIE–WHO Tripartite Concept Note on “ Collaboration – Sharing responsibilities and coordinating global activities to address health risks at the animal–human–ecosystems interfaces” and the Global Progress Report Framework for Sustaining Momentum on Animal and Pandemic Influenza.

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In the following year, an international High Level Technical Meeting on the One Health approach took place in Mexico City. Participants in the meeting identified both “supporting” elements that enable collaborative work on One Health approaches and “operational” elements that reflect the attributes of successful collaborations. Participants also identified impediments to success and considered how they can best be overcome.

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Priority actions for advancing the One Health agenda were proposed: 1) policy and technical messages of relevance to Ministers 2) actions that can usefully be implemented at national and regional levels, 3) clear plans for building cross-sectorial approaches into existing protocols, and 4) systems that are both efficient and effective in delivering vital services.

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Working Groups, One Health Commissions, academic programmes and training activities were established to accelerate the positive international momentum of the One Health vision.

INTERFACE BETWEEN ONE HEALTH AND FOOD SECURITY

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The demand for food, and especially for meat products, grows at nearly 2% per year. Livestock production is increasing rapidly (poultry in all continents, bovines in South and East Asia, and pigs in sub-Saharan Africa).

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Livestock production systems benefit many of the world’s poorest people, with at least 1 billion of them (75% of rural people, and 25% of urban people) depending either directly or indirectly on livestock for their nourishment, their income and their livelihoods.

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Sustainable livestock systems play a major role in alleviating food insecurity and poverty. Livestock contribute up to 33% of household income and up to 36% of dietary protein intake. In many developing countries, especially in sub-Saharan Africa, livestock contribute almost 40% of agricultural GDP. The livestock sector is a critical element of food and nutrition security.

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Concerns about the increasing levels of livestock production are linked to the potential for movement of pathogens between wildlife

and domestic animals, concerns about the lack of biosecurity and antimicrobial resistance as livestock production is intensified, the potential adverse environmental impact of livestock production, consumer demand for livestock products produced in a humane way and continued threats posed by human consumption of unsafe food.

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The potential threat posed by livestock to public health – via agriculture-associated diseases – is played out at the intersection between human health, animal health and agro-ecosystems. It includes neglected zoonoses (like TB, brucellosis), emerging infectious diseases (like SARS and Avian Influenza), and food-borne diseases. They are all best addressed through the One Health (OH) approach.

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The one-health approach is particularly relevant when efforts are made to reduce threats in settings where resources are limited. Applying the approach depends on people being able to access and apply relevant information in ways that enable them to reinforce their resilience in the face of multiple threats. They can only do this effectively when empowered through incentives and a positive regulatory environment. Hence the increasing interest at policy level in options for improved livestock sector governance, together with appropriate investment in veterinary and other services appropriate for securing livelihood and environmental well-being.

REINFORCING RESILIENCE THROUGH COMPREHENSIVE APPROACHES

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Societies affected by recurring crises have established resilient systems for ensuring livelihood and food security. Governments increasingly appreciate the particular challenges associated with supporting people's resilience in the face of recurrent and often unpredictable risks: indeed, it is emerging as an important element of development strategy.

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In practice resilient societies are able to anticipate threats, adjust local and national strategies to mitigate them and act to put both immediate and longer term programs in place to build resilience to repeated shocks. They respond quickly when the lives of individuals are threatened, provide a range of viable livelihood options, and maintain the functioning of essential services, and the capacity of institutions. They enable rapid recovery after periods of insecurity and make medium- and long term investments in more robust systems.

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Governments and development partners are exploring options for flexible and imaginative support to the new narrative. They respond to the growing perception - at community and national level, among governments and civil society - that early responses to crisis are vital to prevent catastrophic decline in assets, agricultural output, food availability and livelihood security. This is essential when peoples' capacity to cope has been weakened by repeated crisis. It is vital in societies challenged by the combination of a potential doubling of their population in less than 30 years and increasing frequency of adverse climatic events. This is especially true

in arid lands, as pressure on range land increases and more marginal land is taken for agricultural production.

ONE HEALTH AS AN INVESTMENT IN RESILIENCE

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The One Health approach is an example of investing in resilience: it combines a focus on the long term security of our planet's natural resources, the security of people's access to nutritious food at all times, human security in the face of threats to their health, and the links between them that define people's resilience in the face of stresses or shocks. Such novel approaches are best pursued as multi-actor movements - by youth groups, business leaders, government leaders, civil society at local regional and global levels.

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The focus on Risk Reduction is an essential element of all these areas of work: It is about reducing underlying risk factors and strengthening response capacity through preparedness.

The emphasis on open and self-perpetuating movements is key when multiple actors from different disciplines are working together on an issue. The Movements achieve direction and impact through an emphasis on common goals, shared skills among key practitioners and on mutual accountability.

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Inter-sectorial thinking leads to a growing consensus that what happens at interfaces -- between people, species, systems, professions and cultures - does matter. This means that work which cuts across boundaries and focuses on interfaces

needs more attention despite the continuing pressure for greater emphasis and prioritization on the "core activities" of different groups. Given the constraints on organizations, interface working is often NOT prioritized. Movements are most useful as a means to address interfaces between species, cultures, livelihood groups, ethnicities, and geographical areas, sectors of government, professional groups and nations.

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Such working calls for systems that make the vision come to life and the careful investment of time to make the systems work. The time must be used well – to build trust, to innovate and learn lessons and establish sustainable ways of working. It will require collective commitment to building trust with agreed ways to react at times of difficulty as well as retaining the ability to respond when crisis strikes and people's lives are endangered.

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Adequate resources are needed to make this happen: if the funds needed for close working together are not available, there won't be collaboration. Funding should be efficient and flexible. Cross-sectorial work is not easy to sustain within institutions but individuals committed to such working are increasingly linked in Movements or Networks of practitioners: the One Health Approach and Towards a Safer World are examples of action that has been sustained through individuals working within movements.

ADVANCING THE ONE HEALTH APPROACH

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The One Health approach is an example of a

vibrant movement with soft governance - no new institutions or new laws are needed to make it happen. Instead, it relies on existing institutions and capacities to create new ways of dealing with threats at the interfaces. The direction provided by governments for One Health issues is critical to the success of prevention, management and preparedness strategies for diseases at the animal-human-ecosystem interface.

The heart of this effort is professional training – ensuring that practitioners are skilled in the One Health approach and their skills are tested within their professional examinations.

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Here are ten practical lessons of experience in the One Health approach to risk management and reinforcing resilience:

1. Start with experience of both rural and urban communities: listen, absorb, respond: seek concurrence of communities if new ideas are to be introduced; avoid divisive involvement and coercion; build on local practice and strengthen institutions: be extremely wary of “external takeover”.
2. Bring livestock, food security and nutrition into all policies related to poverty and equity, climate change, value chains and risk management.
3. Focus on resilience in face of risks to health and livelihoods at Interfaces between species, cultures, livelihood groups, ethnicities, geographical areas, sectors of government, professional groups and nations as – given the way in which organizations work the interfaces are often NOT prioritized and may be a source of risk.
4. Engage the Whole of Society in work on risk management – analysis, preparedness, threat response, lesson-learning: more likely to cover the interfaces.
5. Nurture practitioner networks that span interfaces: people, through their interpersonal relationships, may be better able to do this than institutions, government sectors or even political leaders: select the extraordinary people who have demonstrated inter-sectoral and whole-of-society working.
6. Back up this work with evidence ensuring that this is converted into normative guidance and standard setting.
7. Stimulate innovative actions through alliances that link people (civil society, youth groups and consumers), businesses (entrepreneurs, farmers and processors), and government (legislators, sectors, institutions, research bodies) in principled and mutually accountable relationships.
8. Establish and maintain frameworks for action as a basis for investment [frameworks that cover livelihood resilience, healthy livestock rearing, long-term food security, and optimal nutrition] ensuring that they have a strong legislative and regulatory basis.
9. Seek innovative financing that reflects the benefits of interface working as an individual, commercial and public good.
10. Encourage countries to be in the lead on work for One Health and Livelihood Resilience; that the international system offers responsive guidance and backing; that the business sector, international NGOs and research community offer consistent support within the context of this national leadership.