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Ms Odugleh-Kolev qualified as a Registered General Nurse from the Sheffield School of Nursing; she has a BA (Hons) in Third World Studies with Anthropology from the University of East London; a Postgraduate Diploma in Print Journalism from the University of Westminster, London; and a Masters in Public Health from the London School of Hygiene and Tropical Medicine. Her professional training and experience covers, adult learning, community development, health communication, journalism, risk communication and social mobilization.

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# THE SIGNIFICANCE OF COHERENCE IN COMPLEX SYSTEMS:

an Example from WHO's Experiences in Building Risk  
Communication Capacity to Prepare for  
and Respond to Infectious Diseases

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**T**his presentation will explore how recent scientific advances and research, as described by co-panelists, are suggesting shifts in the way we design and implement public health interventions to take into account relational and systemic approaches. This shift has major implications for any interventions that require some adaptation (whether temporary or long term) of individual, organizational, social, and cultural practices and norms.

Prevention, preparedness and response strategies targeting endemic and emerging infectious diseases that cross environmental, animal and human health require multilevel and trans-sectoral actions over time. Mitigating endemic infectious diseases and preventing and managing emerging infectious diseases is therefore highly complex. Human behavior is a common denominator that underlies the factors that contribute to the problems associated with infectious diseases, in turn; it also contributes to finding necessary solutions. However, human behaviour has also been the most challenging to influence.

Drawing upon experiences and lessons learnt from WHO in applying systemic and relational approaches to building risk communication capacity under the International Health Regulations (IHR 2005), the presentation will offer new ways of thinking about "behaviour change" that can significantly contribute to better and faster results and which move beyond typical information dissemination, messaging and community mobilization approaches. That, in fact, sustainable and appropriate behavioral outcomes are an inevitable and natural consequence when we pay attention to structuring a substantive transformative process that promotes meaningful conversation and dialogue within and between connected systems that contribute to a common goal.

It will conclude that most challenging part about behaviour change programmes is not about changing the behaviours of communities and populations – but are about changing the behaviours of public health practitioners, policy makers and institutions to bridge their knowledge-practice gap and design effective and meaningful policies and programmes.