Federal Ministry
for Economic Cooperation
and Development

Initiative area One Health in development cooperation

BMZ *Strategies*

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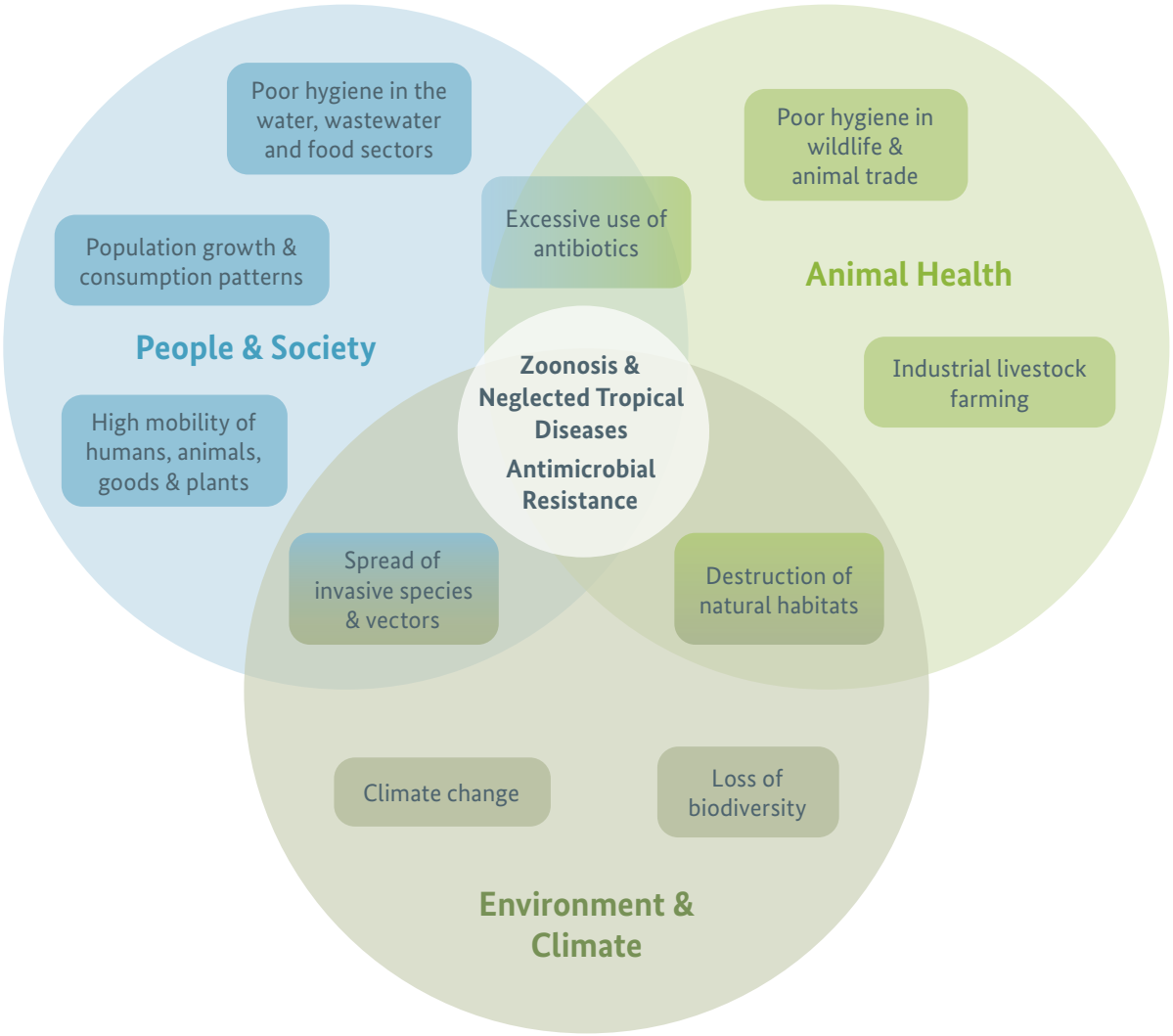
1. Brief background

Health is not only a prerequisite for being able to lead an independent life, it is also essential for social development and sustainable economic development in our partner countries. The present COVID-19 pandemic is showing us the dangers that stem from infectious diseases. The pathogen which has caused the pandemic, SARS-CoV-2, also gives us an indication of the kind of impact that zoonotic diseases, i.e. diseases transmitted from animals to humans, can be expected to have. It is likely that these kinds of pathogens will be even more prevalent in the future. A growing world population, climate change, increasing mobility, the encroachment of humans on previously untouched habitats, and industrialised agriculture and livestock farming are all factors that are causing the risk of pathogens occurring or spreading quickly to increase. Added to that, antimicrobial resistance (AMR) is increasing, too. Multi-resistant microbes can arise any time antimicrobial substances are used. They are, however, particularly likely to occur as a result of the improper use of such substances. We are already seeing more than 500,000 cases of resistant tuberculosis pathogens being reported around the world each year. If nothing is done to address AMR, there is a danger not only that tuberculosis – the deadliest infectious disease worldwide – will become much more difficult to control, but also that so-called minor infections will become untreatable. In order to put a stop to these health risks, we need to have new approaches in development cooperation as well.



The term **One Health** stands for a **holistic, interdisciplinary approach** that is concerned with the **interaction of people, animals and the environment in the field of health.** We see COVID-19 also as a symptom of a multidimensional crisis that is born of a complex combination of degraded ecosystems, lost biodiversity, polluted air, water and soil, climate change and social injustice. These linkages were first described in the **Manhattan Principles** on "One World, One Health", a comprehensive One Health strategy drawn up by the Wildlife Conservation Society (WCS) back in 2004, and were then updated in 2019 as the **Berlin Principles.**[1] The One Health approach takes into account the interplay between people, wild and domesticated animals, plants and their shared environment. One Health looks at the entire system in which diseases can develop and spread, and focuses on preventive measures in order to preserve health and reduce risks.

With the initiative area One Health, the BMZ is pursuing – in consultation with other German ministries – the goal of establishing this approach across sectors in international cooperation and within German development cooperation.

Our efforts in this regard build upon existing international processes and networks, and on experience garnered from our own development cooperation and from pertinent institutions in the fields of human and animal health, the environment and biodiversity, agricultural and food systems, and the water sector.

And we also build on our long years of international cooperation with the German scientific community in the fields of global health, biodiversity, and agricultural and climate research. We specifically support efforts to create synergies between these sectors. Working with our partner countries and with relevant international and regional institutions, we aim to increase cooperation and exchange of knowledge within the framework of initiatives and networks. Taking a holistic One Health approach, our intention is to implement concrete programmes with a view to reducing health risks, strengthening human and veterinary health systems, and improving early warning systems, thereby achieving better epidemic and pandemic prevention. Starting in 2021 we will allocate up to 150 million euros each year for this purpose.

1 Manhattan Principles (2004): http://www.wcs-ahead.org/manhattan_principles.html;
Berlin Principles (2019): https://oneworldonehealth.wcs.org/About-Us/Mission/The-2019-Berlin-Principles-on-One-Health.aspx

2. Assessment of the frame conditions and situational analysis

2.1. MAIN CHALLENGES AND DEVELOPMENT POTENTIAL

Human health is closely linked to the health of animals and the environment around them. The traditional ways of people and animals living together in close proximity – often under one roof – encourage the transmission of infectious diseases like rabies and also of diseases caused by worms.

Strong population growth, the impacts of climate change, emergency situations as a result of crises and conflicts, and the deterioration of life-supporting resources due to non-sustainable farming methods (e.g. soil degradation or felling of tropical forests) are at the root of hunger and malnutrition. In addition to that, industrialised agriculture is a major driver of changes in land use. As a result, ecosystems are being destroyed and people are encroaching on previously untouched habitats, which increases the likelihood of coming into contact with potential new pathogens.

The One Health approach looks at the mutual dependencies and interactions between humans, animals and the environment. The basis for the One Health approach is therefore tackling the challenges in connection with protecting the climate and nature, and in connection with agricultural and food systems. These challenges are taken into account in the strategies for the BMZ core areas "Protecting life on Earth – the environment and natural resources", "A world without hunger" and "Responsibility for our planet – climate and energy". With the initiative area One Health we are directing our focus towards where these challenges intersect, taking the health risks for the human population into particular consideration.

The COVID-19 pandemic has made it clear how much humankind and its development achievements can be threatened by new infectious diseases. The numbers are all the proof that is needed: more than 57 million people infected, more than 1.3 million deaths (as at: 20 November 2020), an expected slump of 4.5% in the global economy and an expected increase in 2020 of an additional 80 million starving people worldwide based on the current figure of 690 million. The pandemic has stretched health systems to their limits, worsened social inequalities and caused the number of people living in poverty to increase for the first time in years. Although, worldwide, non-communicable diseases such as cardio-vascular health problems or cancer are the main cause of illness and death (about 60% of the burden of disease), in low-income countries **infectious diseases** are still more than 60% of the burden of disease. Almost all the countries with a very high burden of disease (except for Afghanistan and Papua New Guinea) are in sub-Saharan Africa. Children are particularly severely affected by infectious diseases.

2 United Nations Environment Programme and International Livestock Research Institute (2020). Preventing the Next Pandemic: Zoonotic diseases and how to break the chain of transmission. Nairobi, Kenya.

3 Jones, K.E., Patel, N.G., Levy, M.A., Storeygard, A., Balk, D., Gittleman, J.L. and Daszak, P. (2008) Global trends in emerging infectious diseases. Nature 451, 7181: 990-993.

Infectious diseases, including the 20 diseases currently categorised by the World Health Organization (WHO) as neglected tropical diseases (NTDs), are still the key challenges for human health, especially in our partner countries and, within those countries, above all for disadvantaged population groups. These diseases include numerous zoonoses: these are diseases that can be passed between animals and humans via viruses, bacteria, fungi and parasites. About 75% of emerging infectious diseases (EIDs) have their origins in the animal world (HIV, Ebola, SARS-CoV-2).[2] They pose a special danger for human health, since there is currently no immunity to them among the human population and little or no knowledge about the course of these illnesses, the epidemiology and treatment options.

Zoonotic diseases can be traced back to intensive contact between humans and animals, the increasing spread of vectors due to climate change and changes in land use, and to inappropriate animal husbandry practices, deficits in food safety and hygiene, WASH (water, sanitation and hygiene) inadequacies and inadequate infrastructure in public health facilities. Domestic animals and livestock are the main reservoirs for zoonosis pathogens, but about 70% of all **new** pathogens originate in wild animals,[3] including many coronaviruses (e.g. SARS-CoV-1 & 2, MERS-CoV). Although pathogens (not just viruses) rarely jump from animals to humans, when there is more contact between animals and humans and through the trade in and consumption of wild animals, this can become a more frequent occurrence. That is why poorly regulated wildlife markets are a particular risk. In addition, livestock (especially high-density livestock populations) can be the crucial link in the infection chain and can contribute to the multiplication of pathogens originating in wild animals (e.g. pigs as hosts for the Nipah virus, which is originally found in bats). Particularly in combination with a weak public veterinary health system, people can also pass infections on to domestic animals, where the pathogens can then spread. In these circumstances, the mutation risk can be raised and animal populations can also serve as mixing vessels for new diseases, for example for influenza viruses from birds, swine and humans.

Lack of access to clean water, inadequate sanitation, insufficient knowledge about transmission pathways and hygiene behaviour patterns likewise all play a major role in the spread of infectious diseases. According to the WHO, deficits in the areas of water and sanitation, wastewater management and hygiene alone account for nearly two million avoidable deaths a year. Many pathogens are transmitted through unsafe drinking water and also via contaminated food. According to the WHO, each year there are up to 600 million instances around the world of people falling ill after consuming contaminated food and 420,000 deaths.[4] Basic hygiene at all stages of animal-based food production, i.e. primary production, processing and distribution, is therefore one of the most effective ways of preventing infectious diseases (including foodborne zoonoses). Poor population groups in densely populated peri-urban informal settlements are particularly affected by the aforementioned deficits and the illnesses they cause. They are also frequently more vulnerable to infections because of malnutrition.

4 World Health Organization (2015). WHO estimates of the global burden of foodborne diseases: foodborne disease burden epidemiology reference group 2007-2015.

5 Cassini, Alessandro, et al. (2019). Attributable deaths and disability-adjusted life-years caused by infections with antibiotic-resistant bacteria in the EU and the European Economic Area in 2015: a population-level modelling analysis. The Lancet Infectious Diseases 19.1 (2019): 56-66. https://www.thelancet.com/action/showPdf?pii=S1473-3099%2818%2930605-4

Antimicrobial resistances (AMR): As a result of (multi-)resistant microbes, the treatment of infectious diseases, including minor infections, for which effective therapies had been available up to now, is becoming jeopardised. According to a study based on data from 2015 from the European Antibiotic Resistance Surveillance Network (EARS-Net), each year more than 670,000 infections occur in the EU due to resistant bacteria and about 33,000 people die as a direct consequence of these types of infection.[5] Every use of drugs to treat infections (e.g. antibiotics, anti-parasitical drugs), especially when antibiotics are given without following the proper protocols, both in human and in veterinary medicine, as well as the huge use of antibiotics in livestock farming, contributes to antimicrobial resistance. That is why shortcomings in the living circumstances of people and animals and hygiene deficits must not be covered up with the excessive use of antimicrobial substances.

Resistant microbes can also be transmitted via contaminated food or through contact with dirty water, for example via mucous membranes or wounds. Particular attention should be paid therefore in general to the effective management of solid waste and wastewater, but also to managing facilities for the production of antibiotics. Antibiotic stewardship, i.e. using antibiotics carefully and only as indicated, must therefore be practised worldwide not only in human medicine but also in agriculture and in veterinary medicine; and it must be linked with measures for protecting bodies of water, for waste disposal and water treatment, and for preparing safe drinking water. There are already some pathogens that can no longer be treated because of AMR and their development and spread means that therapies which are currently still effective are also in jeopardy.

Achieving the climate targets is very important for implementing One Health, since climate change is affecting the health of humans, animals, plants and the environment in a multitude of ways. In this connection, attention must be paid firstly to the impact of climate change on non-communicable diseases and secondly to the spread of disease-causing pathogens and pests, and vectors. The intentional or unintentional introduction of invasive alien species that can displace domestic animal and plant species, together with the impacts of climate change, mean that ecosystems as a whole are becoming more and more fragile. The Convention on Biological Diversity (CBD) explicitly highlights in its preamble the importance of the protection and sustainable use of biodiversity for human health. That is also enshrined in the 2010 Aichi targets for the global protection of biodiversity (especially no. 14).[6]

Beyond the problem areas already mentioned, another huge challenge is fighting ongoing dangers to human health and the environment such as air pollution, improper use of pesticides and poor hygiene. It is also important to be aware of the differences between the sexes and how persons with disabilities are affected when it comes to exposure, vulnerability and the consequences of infectious diseases. Effective protection of our ecosystems must involve local people, who have important, often traditional knowledge for managing natural resources, and who desperately need these resources to be protected. It is crucial then for women and for indigenous communities to have equitable and inclusive participation and for their voices to be heard.

6 The 20 Aichi targets were adopted at the 10th Conference of the Parties in Aichi in Japan (cf. https://www.cbd.int/sp/targets/)

2.2 EXPERIENCE GARNERED FROM GERMAN DEVELOPMENT COOPERATION IN THE FIELD OF ONE HEALTH

The One Health strategy is based on development cooperation experience in the fields of human and animal health, the environment and biodiversity, climate, agricultural and food systems, water and sanitation, and on national strategies in the aforementioned fields. Prevention measures already play an important role here. Essential aspects, in addition to generally strengthening (basic) health systems, also and in particular by implementing the international health regulations (IHR), are fighting infectious diseases via the Global Fund to Fight AIDS, Tuberculosis and Malaria and the immunisation programmes of the vaccine alliance Gavi. In line with the aim of Universal Health Coverage (UHC), the BMZ works and lobbies for all people to be able to have access to health care. This also includes developing health insurance schemes and training healthcare personnel. In response to the Ebola crisis in West Africa in 2014, more support has been directed towards prevention programmes, laboratory testing, fighting NTDs and deploying multi-disciplinary groups of health experts in the event of disease outbreaks (German Epidemic Preparedness Team - SEEG). In addition to that, the Federal Ministry of Health (BMG) has been promoting the Global Health Protection Programme (GHPP) since 2016. The aim of the GHPP is to prepare countries over the long term to be more able to deal with health threats and to improve surveillance systems and crisis response capacities. A basic prerequisite for the effectiveness of the measures is long-term investment in strong health systems that are corruption-free and accessible to all, and in developing and establishing surveillance and verification instruments involving digital options.

Another important One Health intersection is development cooperation activities aimed at protecting nature/forests and preserving biodiversity. Stable and intact ecosystems and the services they provide are a prerequisite for health and wellbeing and they help prevent infectious and environment-attributable diseases. Through the BMZ's protected areas portfolio and the promotion of rules-based trade in and consumption of wildlife and wildlife products, efforts can be made to reduce the risk of pathogens, especially new zoonotic pathogens, crossing the human-animal barrier. In order to achieve this, it is important that veterinary medicine capacities in nature reserves are improved, that wildlife markets are regulated and if necessary closed, and that poaching is tackled. The BMZ and the Federal Ministry for the Environment, Nature Conservation and Nuclear Safety (BMU) are working with the Partnership against Poaching and Illegal Wildlife Trade in Asia and Africa to achieve these goals.

A healthy and adequate diet is the crucial basis for human health, especially in the case of pregnant and breastfeeding mothers and children during the first 1,000 days of life. In the long term, the production of food that is safe, i.e. free from harmful substances and pathogens, and nutritious can only be realised based on a sustainable agricultural and food sector that takes account of the way humans, animals, the environment and the climate are all tied together. Agriculture is a major driver of drastic changes to areas of land, for example through deforestation or the draining of wetlands, and hence has a large influence on biodiversity. The aim of the BMZ's special initiative One World – No Hunger is to eliminate the structural causes of hunger and malnutrition. Aspects like agro-biodiversity, soil and climate change, as key intersections between health and the environment, play an important role here. As the livelihoods of marginalised groups frequently depend on keeping livestock, since 2018 the BMZ has increased its support for the sector animal health.

Germany is one of the biggest donors in the water and sanitation sector. The BMZ is currently (as at October 2020) supporting 364 projects in the water sector with a present value of about 3.2 billion euros. Besides protecting water resources and aquatic ecosystems, infrastructure and services for safe water, sanitation and hygiene (WASH) are also elementary prerequisites for health; these are sectors in which the One Health approach needs to be implemented.

2.3 INTERNATIONAL CONTEXT AND EXPERIENCE COOPERATING WITH OTHER PARTNERS

Besides its aforementioned activities in the relevant sectors, the BMZ has also increased its financial contributions to multilateral organisations and initiatives (WHO; Gavi; Global Fund; World Organisation for Animal Health, OIE; International Livestock Research Institute, ILRI) that exercise or that can and should exercise important functions with an eye to One Health. What is more, Germany is the fourth biggest supporter after the US, the United Kingdom and the European Union of research in areas relevant to One Health.

Since 2005, the US with the programme of the United States Agency for International Development (USAID) on Emerging Pandemic Threats (EPT) has been the leading bilateral donor in the context of One Health. Within the framework of the EPT programme, the PREDICT project has been searching for unknown pathogens and supporting training for the monitoring of zoonotic pathogens. The follow-on programme STOP Spillover was commissioned and endowed with 100 million US dollars. The United Kingdom, which launched a programme for more than 220 million pounds in 2019, is one of the most important donors in the field of fighting NTDs. France has likewise announced that it is increasing its activities in the field of One Health and, together with Germany, is lobbying for an international One Health body. Canada, Sweden, Norway and Switzerland, too, are actively engaged in this field. Partner countries that have already drawn up national One Health strategies are, for example, Kenya, Uganda, Tanzania, Côte d'Ivoire, Nigeria and Viet Nam.

The tripartite collaboration of WHO, FAO and OIE on One Health set up back in 2010 is a good foundation on which to further strengthen the One Health approach. By including environmental organisations like the United Nations Environment Programme (UNEP) in the tripartite collaboration it is intended that the comprehensive One Health approach will be further strengthened.

The One Health approach is already integrated in the framework programme of the German government on health research and in the government support given to research networks for health innovations in sub-Saharan Africa. Since 2006, there has been a common agreement on zoonosis research between the Federal Ministries of Education and Research (BMBF), Food and Agriculture (BMEL) and Health (BMG), and (since 2016) the Federal Ministry of Defence (BMVg) as well. The BMBF supports the National Research Platform for Zoonoses. Within the framework of the round table Internationalisation – creating prospects in Africa, One Health aspects will also be taken into account in the future. In 2008, the first German antibiotic resistance strategy "DART" was published by the BMG, BMEL and BMBF; it is currently being updated as "DART 2030". An inter-ministerial working group on AMR (IMAG AMR) is responsible for coordination.

In Germany, besides the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), the Kreditanstalt für Wiederaufbau (KfW) and non-governmental organisations, there are also specialised institutions working internationally at the highest level which can support development cooperation projects in the field of One Health. They include public sector bodies like the Robert Koch Institute (RKI), the Friedrich Loeffler Federal Research Institute for Animal Health (FLI), the Federal Institute for Risk Assessment (BfR), the German Environment Agency (UBA), the Federal Agency for Nature Conservation (BfN) and the Federal Centre for Health Education (BZgA), and also university-based and non-university research institutes (including the Leibniz and Helmholtz Associations). The BMZ's cooperation with the FLI and BfR (which come under the portfolio of the BMEL) is strengthened by the cooperation agreement between the BMZ and the BMEL on involving public sector

research institutes. Apart from that, within the framework of the SEEG, there is cooperation with the RKI, the Bernhard Nocht Institute for Tropical Medicine (BNITM) and Charité – Universitätsmedizin Berlin, with plans to include the FLI in this cooperation in the future. Furthermore, the GHPP of the Federal Ministry of Health brings together the knowledge and expertise of various institutions (including the RKI, FLI and BNITM) in the field of health safety. The focus is on supporting partner countries and the WHO in connection with epidemic prevention measures.

3. German cooperation – Strategic goals and direction for the period 2020-2023

3.1. APPROACH AND INTERESTS PURSUED WITHIN GERMAN DEVELOPMENT COOPERATION

Significant portfolios are being implemented under German development cooperation in all the sectors that are relevant for One Health. As the third-biggest donor in the field of global health (including planned contributions to the Global Fund in the period 2020-2022 amounting to approximately 1.15 billion euros and contributions to the vaccine alliance Gavi for the period 2016-2020 amounting to 600 million euros), Germany can use this important position in order to advance the One Health approach in these institutions that are responsible for making key contributions to fighting infectious diseases. In the field of rural development, agriculture and food the BMZ with its special initiative One World – No Hunger has a prominent role among governmental and non-governmental donors. Numerous One Health projects have already been launched on the back of this initiative, for example the One Health Research, Education and Outreach Centre in Africa (OHRECA). OHRECA supports research on One Health, the training of personnel in the field of One Health and network-building in Africa and around the world. Moreover, German development cooperation offers comparative advantages in the case of climate, environmental and resource protection. In the context of managing protected areas, Germany is one of the biggest donors and, in the water sector, Germany is the second-biggest bilateral donor and is often seen by international partners as a trailblazer.

The **measures pursued under the One Health approach are geared towards implementing the 2030 Agenda.** Our first line of approach here is reducing health risks through measures aimed at prevention. The costs for carrying out these measures are, relatively speaking, substantially lower than the cost of fighting epidemics and pandemics and dealing with their aftermath. Impacts can in some cases be achieved very quickly, e.g. lowering the infection risk by means of hygiene measures. By implementing effective, human-rights-based nature protection, by regulating and reducing the trade in wildlife, by using improved methods in animal husbandry and food safety, and by following proper procedures for using antibiotics, it is possible to have a medium- and long-term impact in terms of reducing the zoonosis and the AMR risk and beyond. Crucial for sustainability are efforts to strengthen and network international institutions, South-South exchange and also the integration of One Health measures into the development strategies of our partner countries. Monitoring, training and prevention strategies must be developed and implemented in a participatory way involving the local people.

3.2. DEVELOPMENT POLICY GOALS

With the **One Health initiative area the BMZ is pursuing the goal of anchoring the One Health approach across all sectors and thereby integrating research carried out within the context of German development cooperation and in the context of international (development) cooperation.** The aim is to deepen and share knowledge about the complex links and interdependencies between the health of people, animals and the environment, and to strengthen both national and international institutions and cooperation mechanisms in the field of One Health. Furthermore, concrete projects in cooperation with selected partner countries are to be developed and implemented. The aim is that these projects will engage at the points where human, animal and environmental health, food security and agricultural and forestry production and fisheries, water resource management and domestic water supplies, WASH and protecting nature and preserving biodiversity intersect with one another.

With its One Health strategy, the BMZ wants to contribute directly towards improving the options and capacities that developing countries and emerging economies have with regard to the prevention, early diagnosis and containment of infectious diseases. Our aim is to strengthen health systems (human and animal health) in terms of risk assessment and management, diagnostic capacities, and their cooperation with each other and with relevant actors in the environment, climate, agricultural and food sectors. Through this cooperation, a change will be achieved as well in current practices in other sectors, practices that are not sustainable and that increase the potential risks.

It is also intended that heightened awareness, increased knowledge, behaviour changes and new approaches involving multi-sectoral cooperation for the benefit of an intact environment and for sustainable agricultural and food systems will contribute towards protecting and improving human and animal health. In particular, the intention is that the risks of spillover events with subsequent epidemic spread of infectious diseases and the emergence and spread of AMR will be reduced.

4. Strategic guidelines for the future direction of German development cooperation in four fields of action

With the initiative area One Health the BMZ is tackling the following four **areas of action:**

(1) **Anchoring the One Health approach in German development cooperation:** supporting our partner countries within the framework of bilateral development cooperation.

(2) **Strengthening cooperation:** strengthening cooperation with international, regional, national and civil society institutions that want to implement the One Health approach, and supporting cooperation and networking among those institutions.

(3) **Capacity development:** fostering know-how and joint, transdisciplinary production of knowledge and exchange of knowledge on One Health, and strengthening capacities through targeted training.

(4) **Political agenda setting:** anchoring One Health as a holistic, trans-sectoral approach in international development cooperation together with other partners and developing it further.

Area of action no. 1: Anchoring the One Health approach in German development cooperation

→ Setting up the BMZ advisory council on One Health to provide the BMZ with scientific advice on what direction and position to take within the framework of the One Health strategy;

→ Incorporating the One Health approach into the fields of action of the relevant BMZ core area strategies “Protecting life on Earth – the environment and natural resources”, “A world without hunger” and “Responsibility for our planet – climate and energy”, and at the intersections with the initiative area “Population development and family planning”;

→ Joint planning and steering of One Health topics with a view to strategically anchoring and integrating the One Health approach in our bilateral portfolio;

→ Supporting the efforts of our partners to draw up national strategies and develop emergency plans for preventing epidemics and pandemics, and including and supporting civil society organisations in the implementation of One Health;

→ Capacity development in the fields of risk assessment and risk management, and food safety and animal health, including through the BfR, the Federal Office of Consumer Protection and Food Safety (BVL) and the FLI;

→ Improving capacities by means of joint laboratories for human/veterinary medicine, and mobile laboratories; developing interdisciplinary early warning and monitoring systems;

→ Strengthening the implementation of the WHO’s IHR, the recommendations from the OIE with regard to One Health (Performance of Veterinary Services, PVS) and the recommendations from the FAO Action Plan on AMR;

→ Strengthening awareness of the importance of sustainable animal husbandry systems and awareness of nature conservation and species protection – aligned with needs and in co-operation with local people – as a measure to prevent zoonoses and avoid AMR.

Area of action no. 2: Strengthening organisations and their cooperation with regard to One Health

→ Strengthening the role of the WHO with regard to its comprehensive mandate as the central institution for global health. In particular strengthening the tripartite collaboration (FAO, OIE, WHO), also with regard to adding other UN organisations (UNEP, poss. UNDP) and possibly other institutions like the World Bank and the regional development banks;

→ Supporting research alliances and networks in the field of One Health, in particular research into zoonoses and neglected tropical diseases, as well as supporting interdisciplinary research with a One Health connection, including South-South exchange;

→ Building, supporting and networking early warning systems (zoonoses, AMR) and monitoring (including diagnostic capacities), taking into account existing structures like the WHO Global Outbreak Alert and Response Network (GOARN), the World Animal Health Information System (WAHIS) of the OIE, the Joint FAO-OIE-WHO Global Early Warning System (GLEWS), the WHO's Global Antimicrobial Resistance Surveillance System (GLASS) and existing linkages with regional organisations like those in West, East and Central Africa (ECOWAS, EAC and CEMAC);

→ Improving early warning systems also through networking with local stakeholders through digital applications, taking into account innovative formats for uploading information, also in the media and in social networks (horizon scanning and media monitoring, including social networks) and setting up sentinel studies, especially in biodiversity and zoonosis hotspots in cooperation with research facilities and civil society;

→ Strengthening networking in the context of the approval of medicines and plant protection products and risk assessment within the framework of the WTO agreement on Sanitary and Phytosanitary Systems (SPS). The idea being that the institutions in the field of animal health (OIE), plant health (International Plant Protection Convention - IPPC) and food safety (Codex Alimentarius Commission - CAC) will work together to this end;

→ Supporting One Health networks (e.g. the Lancet One Health Commission) and institutions (e.g. ILRI-OHRECA) and linking up with networks that take a similar holistic approach (e.g. Eco-Health, Planetary Health);

→ Continuing to support the Global Fund and examining the options for anchoring the One Health approach in the measures of the Global Fund;

→ Expanding WASH and handwashing initiatives by the WHO, UNICEF and Sanitation and Water for All (SWA); exchange of knowledge on infectious diseases and other points of intersection within the framework of the Sustainable Sanitation Alliance, the WASH network and vis-à-vis water utility networks.

Area of action no. 3: Strengthening capacities

- → Strengthening official and institutional health infrastructure in the field of human and veterinary medicine, especially with regard to food safety (including Veterinary Public Health (VPH), hygiene), regulating the sale and disposal of drugs for treating infectious diseases, and monitoring the use of antibiotics and hygiene in the health system;

- → Training (interdisciplinary) personnel in the One Health approach and coaching civil society players so they can, for example, provide multiplier training for relevant professional groups;

- → Establishing, expanding and fostering, in collaboration with the International Livestock Research Institute (ILRI), university-level training programmes, laboratory training programmes and exchanges between scientists, including via the OHRECA; strengthening One Health capacities for sustainable, smallholder livestock farming systems in developing countries;

- → In consultation with other ministries, directing support for research more towards the links between environmental and climate changes, loss of biodiversity and its influence on health, strengthening research into prevention, adaptation and protection measures, and international agricultural research (CGIAR) in keeping with the One Health approach;

- → Improving the foundations for risk communication and information campaigns on avoiding infectious diseases or AMR in various countries;

- → Supporting training initiatives for staff working in protected areas so as to raise awareness of zoonoses and pass knowledge on to the people living in those areas;

- → Strengthening the requisite capacities and frame conditions of institutions (ministries, regulators, operators) in the field of water and sanitation, and at the point of intersection with the health and the school/education sector;

- → Improving knowledge in our partner countries with regard to the implementation of (national) information and communication campaigns (raising awareness for the dangers of infection and for changing behaviours – including in the agricultural sector);

- → Using digital technologies to improve the data base for and early recognition of potential outbreak scenarios; interlinking human and veterinary medicine data with climate and satellite data, and capacity building and the use of digital technologies for risk analysis.

Area of action no. 4: Political agenda setting – One Health in international development cooperation

→ With the World Bank, under the framework of the newly founded Food Systems 2030 multi-donor trust fund for the sustainable improvement and transformation of agricultural and food systems, a focus will be placed on One Health;

→ Establishing the One Health approach in the development policy debate; including programming of the EU Neighbourhood, Development and International Cooperation Instrument (NDICI); shaping EU strategies and legislation;

→ Raising awareness among decision-makers and people living in the Global North and the Global South with regard to the health risks from zoonoses and AMR, and the necessity of minimising risks, also by means of sustainable forms of animal husbandry and by preserving untouched habitats and the natural resources on which livelihoods are based;

→ Reducing health risks in connection with the trade in wildlife and wildlife products within the framework of an international alliance with the BMU and international partners.

5. Measuring progress

The following indicators can be used to measure impacts in the initiative area of One Health. A portfolio analysis will have the aim of enabling a baseline to be established at the start. The success of the One Health strategy will be examined after four years have passed in a review process.

Indicators:

1. The number of instances where German development cooperation has supported the development or implementation of One Health strategies and One Health programmes in partner countries.

2. The number of instances where German development cooperation has been used to support institutions in partner countries that have contributed to the implementation of the International Health Regulations (IHR) in the field of One Health.

3. The number of staff members and multipliers trained in partner institutions (with at least 30% of them being women) who are using and disseminating the knowledge and skills they have acquired to implement the One Health approach.

4. The number of people who are being reached by measures that create indispensable preconditions for human health in the sense of the One Health strategy.

6. Looking ahead

The goal being pursued with this initiative area is to systematically anchor One Health as a holistic and trans-sectoral approach in international cooperation, and in relevant core areas and fields of action of German development cooperation. The measures launched in pursuit of this goal are being designed from the start to be continued in the medium to long term as an integral part of our bilateral development cooperation in various core areas that have been agreed with our partners, and in our cooperation with international organisations, without any need for a dedicated strategy for the One Health approach in the long term.

The phasing-out of this strategy therefore does not mean the end of BMZ engagement in the field of One Health. In fact, it is intended that the principles of the One Health approach will be permanently anchored in the relevant BMZ portfolios. Cooperation with international organisations (tripartite collaboration: WHO, FAO and OIE, plus UNEP) and networks like the International Alliance against Health Risks in Wildlife Trade will be managed moving forward by one or more BMZ divisions that are responsible for these topics and will be dovetailed with bilateral German development cooperation within the framework of the core areas agreed with our bilateral partners. The national ministries responsible for these matters, including the BMG, BMEL, BMU, BMVg and BMBF, will be included in these processes. Sustainable funding for strengthened and, where needed, newly established secretariats is to be achieved via multilateral mechanisms, with the secretariats being firmly integrated in existing structures.

Because of the strong position of German development cooperation in the fields of agriculture and food, climate, the environment and biodiversity, and Germany's special development policy expertise in relation to preventing and fighting infections, demand from partner countries and international organisations for this cooperation to continue is likely to remain high. Therefore, in addition to capacity development in our partner countries, and strengthening and networking national and international organisations and structures in a sustainable way, it is likely that the One Health approach will continue to be accorded a special role.

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