



USAID
FROM THE AMERICAN PEOPLE

RESPOND YEAR THREE QUARTERLY REPORT

EMERGING PANDEMIC THREATS PROGRAM

1 OCTOBER 2011 – 30 DECEMBER 2011

This publication was produced for review by the United States Agency for International Development. It was prepared by the RESPOND team.

RESPOND

YEAR THREE QUARTERLY

REPORT

EMERGING PANDEMIC THREATS PROGRAM

Project Title: RESPOND

Sponsoring USAID Office: GH/HIDN/API

Award number: GHN-A-00-09-00015-00

Award recipient: DAI

Date of Publication: February 8, 2012

The authors' views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

TABLE OF CONTENTS

TABLE OF CONTENTS	3
ACRONYMS	5
I. EXECUTIVE SUMMARY	10
GLOBAL ACTIVITIES	10
EAST CONGO BASIN.....	11
WEST CONGO BASIN.....	11
SOUTHEAST ASIA.....	12
MONITORING AND EVALUATION	13
II. GLOBAL ACTIVITIES	14
MANAGEMENT REPORT	14
PROGRESS REPORT: GLOBAL ACTIVITIES.....	17
III. EAST CONGO BASIN ACTIVITIES.....	22
MANAGEMENT REPORT	22
PROGRESS REPORT: EAST CONGO BASIN REGIONAL ACTIVITIES.....	27
COUNTRY ACTIVITIES – UGANDA	30
COUNTRY ACTIVITIES – KENYA.....	37
COUNTRY ACTIVITIES – ETHIOPIA	37
COUNTRY ACTIVITIES – RWANDA.....	38
COUNTRY ACTIVITIES – TANZANIA	38
COUNTRY ACTIVITIES – DEMOCRATIC REPUBLIC OF CONGO.....	38
IV. WEST CONGO BASIN ACTIVITIES.....	39
MANAGEMENT REPORT	39
PROGRESS REPORT – WEST CONGO BASIN REGIONAL ACTIVITIES	42
COUNTRY ACTIVITIES – DEMOCRATIC REPUBLIC OF CONGO.....	46
COUNTRY ACTIVITIES – GABON	49
COUNTRY ACTIVITIES – REPUBLIC OF CONGO.....	49
COUNTRY ACTIVITIES – CAMEROON.....	49
V. SOUTHEAST ASIA ACTIVITIES	50
MANAGEMENT REPORT	50
PROGRESS REPORT – SOUTHEAST ASIA REGIONAL ACTIVITIES	53
COUNTRY ACTIVITIES - THAILAND	55
COUNTRY ACTIVITIES - VIETNAM.....	58
COUNTRY ACTIVITIES – LAO PDR.....	59

COUNTRY ACTIVITIES - INDONESIA	61
COUNTRY ACTIVITIES - CAMBODIA.....	62
COUNTRY ACTIVITIES - MALAYSIA	62
VI. MONITORING & EVALUATION	63
Q1 HIGHLIGHTS	63
EVENT OVERVIEW	65
EVENT PARTICIPANT PROFILE	68
OTHER RESULTS.....	71
PROJECT TO DATE.....	72
VIETNAM BASELINE ASSESSMENT	75
EXTERNAL EVENT EVALUATION	77
ENVIRONMENTAL MITIGATION & MONITORING	79
INDICATORS	81
SUB-ACTIVITY PROGRESS	85
VII. APPENDICES:	126
APPENDIX I: CONCEPT PAPERS	126
APPENDIX II: SUCCESS STORIES AND REGION HIGHLIGHTS	145
APPENDIX III: PUBLICATIONS AND ABSTRACTS.....	151
APPENDIX IV: ONLINE COMMUNICATIO S AND PRESS COVERAGE	153
APPENDIX VI – OTHER MATERIALS	161

ACRONYMS

ADPC	Asian Disaster Preparedness Center
AET	Applied Epidemiology Training
AFENET	Africa Field Epidemiology Network
AFRO	WHO – Regional Office for Africa
ANIC	National Nurses Association of DRC
ANPN	Agence Nationale des Parcs Nationaux
ASEAN	Association of Southeast Asian Nations
ATVCO	L'Association des Techniciens Veterinaires au Congo (Association of Veterinary Technicians of Congo)
AU	African Union
AU-IBAR	African Union Interagency Bureau for Animal Resources
AVET	Applied Veterinary Epidemiology Training Program
BMP	Best Management Practices
CAHFS	Center for Animal Health and Food Safety
CAHNET	Community Animal Health Network
CARPE	Central African Regional Program for the Environment
CCC	Country Coordinating Committee
CCN	Cooperating Country National
CDC	Centers for Disease Control and Prevention
CE	Continuing Education
CIRAD	Agricultural Research for Development
CMOA	Ministry of Agriculture (DRC)
CMOE	Ministry of Environment (DRC)
CMOH	Ministry of Health (DRC)
CODESA	Comité de Développement Sanitaire (Health Development Committee)
CTPH	Conservation Through Public Health
DA	Direct Assistance
DDAF	Deputy Director for Administration and Finance
DGLAHS	Directorate General for Livestock and Animal Health Services
DNP	Department of National Parks, Wildlife and Plant Conservation (Thailand)
DoA	Department of Agriculture
DoF	Department of Forestry

DoH	Department of Health
DRC	Democratic Republic of Congo
DRD	Deputy Regional Director
DVO	District Veterinarian Officer
E&E	Ecology & Environment, Inc.
EACIDS	Eastern African Centre for Infectious Disease Surveillance
ECB	East Congo Basin Regional Office
ECTAD	Emergency Center for Transboundary Animal Diseases
EID	Emerging Infectious Disease
EMPRES	Emergency Prevention Systems
EPT	Emerging Pandemic Threats Program
EIWG	Ecosystems Interagency Working Group
EZD	Emergency Zoonotic Diseases
FAO	Food and Agriculture Organization of the United Nations
FAS	Field Accounting System
FEAT	Field Epidemiology Association of Thailand
FE(L)TP	Field Epidemiology (Laboratory) Training Program
FETP-V	Field Epidemiology Training Program – Veterinary Component
FOREST	Forest Ecology and Stewardship Training
FUE	Federation of Ugandan Employees
FUS	Fédération Une Santé
GEMP	Good Service Management Practice
GHI	Global Health Institute
GIGOM	Gabon International Gas, Oil, and Mining
GIS	Geographic Information System
GPHIN	Global Public Health Intelligence Network
GVFI	Global Viral Forecasting Initiative
HIPS	Health Initiative for the Private Sector Program
IBAR	Inter-African Bureau for Animal Resources
ICT	Information Communication and Technology
IDSR	Integrated Disease Surveillance and Response
IEM	Institut d’Enseignement Médicale
ILRI	International Livestock Research Institute
INDOHUN	Indonesia One Health University Network
INRB	National Institute for Biomedical Research (DRC)

INCEF	International Conservation and Education Fund
IRCM	Integrated Regional Coordination Mechanism
ISP	Institut Supérieur Pédagogique
ISTM	Institut Supérieur des Techniques Médicales
ITM	Institut Techniques Médicale
KMS	Knowledge Management System
KKU	Khon Kaen University
KKUVMS	KKU School of Veterinary Medicine
LTTA	Long-term Technical Assistance
LOW	Line of Work
M&E	Monitoring and Evaluation
M&IE	Meals & Incidental Expenses
MAAIF	Ministry of Agriculture, Animal Industries and Fisheries (Uganda)
MAFF	Ministry of Agriculture, Forestry and Fisheries
MENTOR	Mentoring for Environmental Training in Outreach and Resource Conservation
MOA	Ministry of Agriculture
MOF	Ministry of Forestry
MOH	Ministry of Health (Uganda)
MOPH	Ministry of Public Health (Thailand)
MOU	Memorandum of Understanding
MPH	Master of Public Health
MS	Master of Science
MUSPH	Makerere University School of Public Health
NAC	Nabong Agricultural College
NEIDCO	National Emerging Infectious Diseases Coordination Office
NUOL	National University of Laos
NTF	Netherlands Trust Fund
OHCEA	One Health Central and East Africa Network
OIE	World Organization for Animal Health
PAT	Protected Areas Team
PDSR	Participatory Disease Surveillance and Response
PE	Participatory Epidemiology
PHQ	Project Headquarters
PIA	Participatory Impact Assessment
PIO	Public International Organization

PPE	Personal Protective Equipment
PPF	Pandemic Preparedness Forum
Pro-MED	Program for Monitoring Emerging Diseases
RAT	Risk Assessment Tool
RFA	Request for Applicants
RFP	Request for Proposal
RD	Regional Director
RO	Regional Office
ROC	Republic of Congo
RPA	Regional Program Administrators
RUFORUM	Regional University Forum
SACIDS	Southern African Centre for Infectious Disease Surveillance
SAFETYNET	South Asia Field Epidemiology and Technology Network
SANRU	Santé Rurale (Rural Health)
SEA	Southeast Asia Regional Office
SEAOHUN	Southeast Asia One Health University Network
STOP AI	Stamp out Pandemic and Avian Influenza
STTA	Short Term Technical Assistance
TADS	Transboundary Animal Diseases
TAMIS	Technical and Management Information Systems
TEPHINET	Training Programs in Epidemiology and Public Health Interventions Network
TOR	Terms of Reference
TOT	Training of Trainers
TRG	Training Resources Group, Inc.
TUSK	Tufts University Science Knowledgebase
UFP	University Focal Person
UMA	Uganda Manufacturers Association
UMN	University of Minnesota
UNICEF	United Nations International Children's Emergency Fund
UNIKIN	University of Kinshasa
UNILU	University of Lubumbashi
UNSIK	UN System Influenza Coordination
UPDF	Uganda People's Defense Force
UPN	Université Pédagogique Nationale
USDA	U.S. Department of Agriculture

USFS	U.S. Forest Service
USFWS	U.S. Fish and Wildlife Service
USG	U.S. Government
UVRI	Uganda Virus Research Institute
UWA	Uganda Wildlife Authority
VMS	Veterinary Medical School
WCB	West Congo Basin Regional Office
WCS	Wildlife Conservation Society
WWF-DRC	World Wildlife Fund-Democratic Republic of the Congo
WHO	World Health Organization
WILD	Wildlife Investigation and Livestock Disease
WTO	World Trade Organization

I. EXECUTIVE SUMMARY

GLOBAL ACTIVITIES

The Global team continued to focus on some of the activities from Year 2, which are well under way and progressing towards results, especially the EPT program-wide definition of One Health competencies (***Sub-activity 1.1.4 GL: Develop EPT program-wide definition of One Health core competencies***). The working group of this activity, consisting of animal, human and environmental professionals reviewed more than 1800 individual competencies for One Health-related disciplines, and reported key themes that emerged on collaborative knowledge and skills as well as technical skills. The working group agreed on a set of major competency domains that were considered core for One Health.

In Year 3, Quarter 1, RESPOND started a new activity (***Sub-activity 1.2.4 GL: Global Network Organizational Development***) where a framework for strengthening both One Health networks development and activities (OHCEA and SEAOHUN) was developed. This will ensure common vision for the networks across their members, ensure that governance mechanisms are in place to support and strengthen collaboration within the network and sustain the link with the US-based partner universities.

Finally, to enhance the focus on the role of government and international health agencies in the area of outbreak response and emergency preparedness, at the request of WHO-AFRO officials at USAID, RESPOND received authorization to hire a Regional Epidemic Preparedness and Response Technical Officer under a new sub-activity (***Sub-activity 3.1.2 GL: Government innovations supporting integrated disease surveillance and response in human and animal health***). In late October 2011, an epidemiologist previously working with U.S. CDC, Jenny Tegelvik, was seconded to WHO-AFRO headquarters in Brazzaville, Republic of Congo, and assigned to the Emergency Preparedness and Response office.

EAST CONGO BASIN

The East Congo Basin regional office focused most of Quarter 1 on OHCEA's development and related activities. A Master Plan to detail all OHCEA activities for the period of October 2011 to September 2012 was proposed in a meeting held in Kampala and attended by USAID/Washington representatives, OHCEA's Secretariat, Co-Chair and two focal persons, and RESPOND leadership, including the Project Director, East Congo Basin Regional Director, UMN Principal Investigator and Liaison, and UMN's School of Public Health Dean.

A great number of RESPOND activities took place, including two major events funded by RESPOND: the first **OHCEA Regional Country Coordinating Committee Leadership Training**, which has an audience of 56 delegates from the six OHCEA member countries; and **AFENET's Fourth Scientific Conference**, in Dar Es Salaam, Tanzania, which was partially funded by RESPOND. The project sponsored 48 participants (34 Field Epidemiology and Laboratory Training Program (FELTP) trainees and 14 mentors). A One Health workshop was organized by RESPOND, with an attendance of 80 conference participants interested in incorporating One Health concepts and approaches.

A large number of activities in Uganda during this quarter resulted in intense travel to and within the region to attend program-related events.

WEST CONGO BASIN

National Elections in the DRC were held during the first quarter of Year 3. In anticipation of security concerns, the U.S. Embassy issued a travel ban from mid-November through to December 31st. The West Congo Regional Office operated under reduced schedule following guidance from the Embassy throughout the election period. This has significantly affected program implementation. In addition, there was a marked slowdown in public institutions' operations contributing to the lag in progress and implementation.

DRC's Country Coordinating Committee (CCUS in French) was established by government decree, signed by the Minister of Higher Education on November 18, 2011. Representatives of seven (7) government ministries, two (2) OHCEA Focal Points, and civil society (represented by Federation Une Santé) are now part of the committee in the DRC.

While there was a slow-down in activities in the DRC, Cameroon had a productive quarter with the launch of the national ad hoc committee in charge of elaborating the national program for

prevention and control of emerging and re-emerging zoonotic disease and the organization of a national workshop on One Health, also attended by the U.S. Ambassador. RESPOND is currently supporting the committee in developing its national program on zoonotic disease.

A second round of training on financial management and grant management was held for UNIKIN (University of Kinshasa) and FUS (Federation Une Santé) during this quarter. The three-day exercise brought together program management and finance, in order to ensure shared understanding of the rules and regulations. The exercise was also aimed at providing a preliminary insight into grant management and ensuring important elements are taken into consideration, as FUS prepares to submit its grant application.

SOUTHEAST ASIA

Even though the Southeast Asia Regional Office suffered with the severe flooding in Thailand, which forced the delay and/or postponement of previously planned activities (i.e. Thailand National One Health University Network Workshop – October 31 to November 2, 2011 - and the 4th VET Training Workshop – November 13-19, 2011), the region still saw a large number of activities in progress.

The regional office staff was heavily engaged in the preparation and coordination for the GHI (Global Health Institute), which will be conducted in Chiang Mai, Thailand from January 30 to February 9, 2012. The intensive program of study offered at this GHI will focus on developing One Health leadership and technical capacity, which are both critical elements in transforming the current and future workforce to ensure preparedness for new and emerging public health challenges. Seven scholarships are available for participants from each SEAOHUN member faculty. Any unclaimed scholarships will be offered to participants of affiliated faculties from universities within the SEAOHUN region.

The office continues the search for some key staff members and expects to be fully staffed by Quarter 2 of Year 3. During Quarter 1, a number of STTA support was offered from the headquarters office in Bethesda, MD, both to cover for personnel affected by the floods, and also to support activities planned for the quarter while the search to fill positions continues.

MONITORING AND EVALUATION

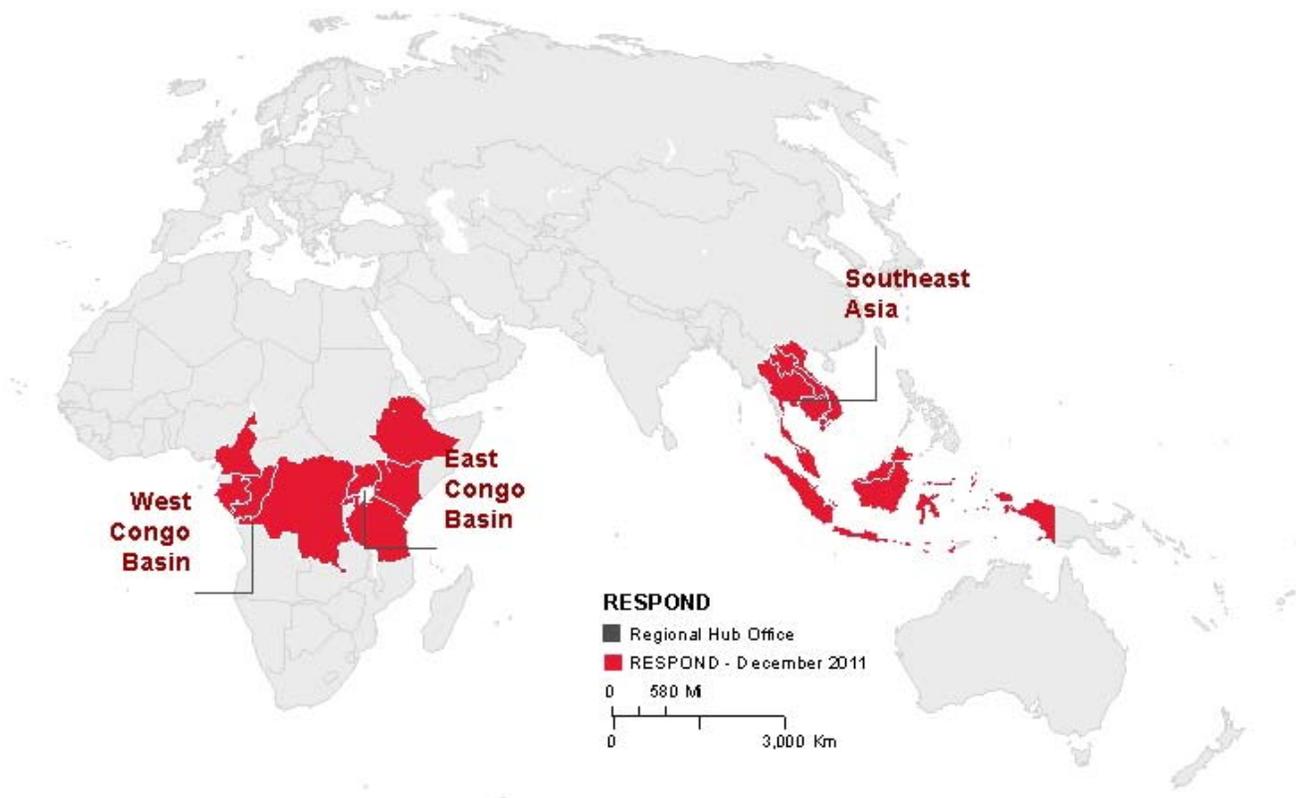
Eighteen sub-activity events occurred in Quarter 1, which was the most productive RESPOND quarter to date. This happened in spite of external forces (flooding, national elections) hindering activities in Thailand and the Democratic Republic of Congo. Workshops accounted for 66% of the participation, followed by stakeholder meetings (16%), press conference/public lecture/presentations (11%), and training (8%).

Government representation (45%) at RESPOND events continued the lead over university participation (35%) in the first quarter. While nationality of event participants is largely dependent on event location, for the events conducted during the first quarter of Year 3, participants were primarily from DRC (27%), Vietnam (14%), Uganda (11%), Thailand (9%), and Cameroon (7%). Overall, event participants have rated RESPOND events as good (3.2 out of 4) across regions. From participants' perspective, RESPOND events have continued to help expand/clarify their understanding of "One Health" (3.2 out of 4).

The Vietnam Knowledge and Utilization baseline assessment on the USAID-supported One Health university networks was completed by the Monitoring and Evaluation team, which focused on data collection from RESPOND university and government stakeholders. An external event evaluation survey was developed and used for RESPOND supported participants attending events hosted by other organizations (e.g., conferences, seminars), in order to understand the value of these events for RESPOND.

The Environmental Mitigation and Monitoring Plan (EMMP) and Environmental Mitigation and Monitoring Annual Report were both delivered to USAID. RESPOND has implemented a consistent environmental mitigation/monitoring approach in all hub offices.

II. GLOBAL ACTIVITIES



The global map above displays where RESPOND currently works (in red). The Congo River is represented by the white line that runs in the West Congo Basin and the Mekong River is represented by the white line that runs through Southeast Asia. The cities indicated in black reflect the locations of the RESPOND Regional Hub Offices

MANAGEMENT REPORT

PROJECT ADMINISTRATION:

- West Congo Basin Regional Program Administrator Lindsay Nelson supported the West Congo Basin Office with contracting a new security company, ensuring contract terms were appropriate.
- Lindsay Nelson also coordinated the opening of an additional bank account at Ecobank for security reasons due to inconsistent operations with current bank, BIAC. She identified alternative banks, supported the selection of a new bank and compliant

account set up, defined new procedures for wire requests and provided guidance for integration and reconciliation of old and new accounts.

- Southeast Asia Regional Program Administrator Peter Telaroli worked with DAI Human Resources to provide support to staff members in the Southeast Asia office affected by floods that covered parts of Bangkok in October 2011. The office needed support with grants management and operations and Peter was able to supply those needs with the support of Lauren Triplet, who joined him from headquarters in November, 2011.
- East Congo Basin Regional Program Administrator JC McCahill supported the East Congo Office in the organization of the OHCEA CCC meeting in Kampala, in December 2011.
- JC McCahill also coordinated with DAI Office of Information and Management Technology (OIMT) for the procurement of 20 laptops to be distributed to local partners in the East Congo Basin region for use with sub activity 3.2.0.4 EC.

STAFFING:

- The new Grants Officer for the West Congo Basin Office, Philippe Luanghy has started in his position. Lindsay Nelson, WCB Regional Project Administrator, is assisting the regional office in recruiting for a new administrative assistant.
- The new Senior Technical Officer in the Southeast Asia regional office has started in his position in that regional office.
- JC McCahill reviewed background documents and processed paperwork for the mobilization of OHCEA Conference Facilitator Marie-Therese Denny and OHCEA Operations Specialist Dorothee Stangle.
- JC McCahill and Global Program Administrator Lauren Triplett coordinated the recruitment process for the position of Regional Epidemic Preparedness and Response Technical Officer. Jenny Tegelvik has been seconded to WHO/AFRO in the Republic of Congo and mobilized to the post in Brazzaville in October 2011.
- Peter Telaroli traveled to the Southeast Asia Regional Office to provide direct operations support from November 14 to December 2, 2011, and December 8-21, 2011. Peter also supported the organization of the Second SEAOHUN Dean's Meeting in Hanoi from December 3-7, 2011.

- Lauren Triplett traveled to the Southeast Asia regional office to provide operations support from November 7 to December 16, 2011 due to an increased need for operations support caused by the floods.
- Information/Database Office Neil Enet resigned from the project on December 16, 2011. Recruitment for the position is currently underway.
- Leslie Zucker, Training Manager, ended her tenure with the project in October 2011.
- Sally Lahm, Outbreak Response Advisor, ended her tenure with the project in October 2011, but continues to support outbreak response as needed.
- Project Director David Elkins resigned from the project in late December 2011. DAI has submitted a new candidate for USAID approval.

LESSONS LEARNED AND PROPOSED SOLUTIONS:

In order to nurture the university networks, it is important to attend to all four components of the network strengthening approach—governance, strategy, quick-start activities to engage faculties, and monitoring network development. There is also the significant challenge of allowing each network to develop, find its own voice and settle into its governance mechanisms in the face of considerable pressure to take action and achieve measurable results in relatively short time-frames.

RESPOND's global office is in constant collaboration with each regional office to help coordinate the various sectors involved in organizing these university networks, so that activities within the regions can start and continue as fast and seamless as possible.

PROGRESS REPORT: GLOBAL ACTIVITIES

LOW 3: OUTBREAK RESPONSE CAPACITY BUILDING

LOW 3.1 STRENGTHEN HUMAN AND ORGANIZATIONAL CAPACITY TO IMPROVE OUTBREAK RESPONSE

Sub-activity 1.1.4 GL: Develop EPT program-wide definition of One Health core competencies

RESPOND continued developing a set of core competencies for use by animal, human and environmental health professionals who wish to take a One Health approach to provide effective disease prevention, surveillance and outbreak response.

The EPT One Health Core Competencies working group came together on November 9, 2011, with participants from RESPOND (DAI: Anahit Gevorgyan; TRG: Nancy Claxton, Lisa Howard-Grabman, Margaret Morehouse; Tufts University: Ray Hyatt, Associate Provost Mary Lee, Felicia Nutter; UMN: Karin Hamilton, Linda Olson-Keller, Katey Pelican), PREVENT (Richardo Echelar), CDC (Michelle Everling-Watley), and USDA (Pat Klein).

- Hamilton and Gevorgyan presented results of the review of more than 80 sources and more than 1800 individual competencies for One Health-related disciplines, and reported key themes that emerged on collaborative knowledge and skills, as well as technical skills. The working group agreed on a set of major competency domains that were considered core for One Health.
- Hyatt presented preliminary results from more than 20 subject matter interviews conducted to date by TRG. The interviews are being transcribed and analyzed to allow the working group to develop a consensus of knowledge, opinions and attitudes about One Health in relevant professions.

On November 10, a working subgroup (Claxton, Gevorgyan, Hamilton, Lee) reviewed the results from November 9 and compiled an initial One Health Core Competencies draft, pending input from additional literature reviews and the SME interviews.

Planned activities:

- Drafting of One Health Core Competencies will be based on work from November 9-10 meetings in Washington DC, additional literature review results, and interview analyses. Draft to be developed by Mary Y. Lee and the Tufts team, including Ray Hyatt and Donna Qualters, with assistance from Margaret Morehouse, and other experts as needed; projected time frame February-April 2012.
- A survey for more than 250 Subject Matter Experts to rate and rank the draft One Health Core Competencies will be developed by the Tufts team and implemented with assistance from Margaret Morehouse. A pilot survey will first be sent to a small group of experts to test the instrument before sending to the entire list. Projected timeframe is April-June 2012.
- Analysis of survey results and refinement of One Health Core Competencies. Survey results will be analyzed by Tufts team, and used to refine the One Health Core Competencies. SEAOHUN faculty at regional meetings will also be engaged to provide feedback and refinement; projected timeframe July-November 2012 (this will allow time to incorporate feedback from regional One Health meetings described in Southeast Asia work planning documents).
- Posting of One Health Competencies. “Working” One Health Competencies will be posted on appropriate public websites for global input. The term “working”, or equivalent term, is meant to denote that the posted competencies are a work in progress—that global input is welcome to ensure that these global-level competencies are useful and appropriate to help guide the development of more specific institutional and national-level competencies; projected timeframe is November 2012-January 2013 onwards with ongoing refinement as needed.
- Presentations at relevant global organizations. The “working” One Health Core Competencies will be presented at various global organizations for their input and “adoption” if appropriate (such as participants at the Stone Mountain meeting); projected timeframe January 2013 onwards.
- Ongoing tracking and analysis of global One Health Core Competencies development. The entire development process will be documented and analyzed for ongoing process improvement and documentation.

Sub-activity 1.2.4 GL: Global Network Organizational Development (New Year 3 Activity)

Development of robust university networks—able to effectively and efficiently pursue their programmatic missions—requires attention to the organizational development of the networks as well as to the work they are doing. Issues including network membership, governance and decision-making, management, and communication must be worked through early in the life of the network in order to develop trust and foster collaboration amongst network members.

In Year 3, Quarter 1, RESPOND developed a framework for strengthening network development and activities. The framework was developed at the global level, for implementation at the regional level reflecting country-specific perspectives (see sub-activities 1.2.1 SE, 1.2.1 WC, and 1.2.4 EC). Activities will ensure common vision for the network across its members, ensure that governance mechanisms are in place to support and strengthen collaboration within the network and sustain the link with the US-based partner universities.

The framework was employed in Southeast Asia to guide the establishment of the Southeast Asia One Health University network (SEAOHUN).

Planned activities:

Working with the Regional Managers in Southeast Asia and East/Central Africa to develop a plan for further strengthening of both networks as well as establishment and nurturing of networks in each member country.

Sub-activity 3.1.2 GL: Government innovations supporting integrated disease surveillance and response in human and animal health (New Year 3 Activity).

To enhance the focus on the role of government and international health agencies in the area of outbreak response and emergency preparedness, at the request of WHO-AFRO officials at USAID authorized the RESPOND project to hire a Regional Epidemic Preparedness and Response Technical Officer. In late October 2011, an epidemiologist previously working with U.S. CDC, Jenny Tegelvik, was seconded to WHO-AFRO headquarters in Brazzaville, Republic of Congo, and assigned to the Emergency Preparedness and Response office.

Planned activities:

In December 2011, discussions between RESPOND senior technical staff, the Regional Technical Officer and Dr. Benido Impouma (EPR Director) led to a draft 2012 workplan which, if approved by USAID, would focus on several areas, including:

- Conducting a review of existing national emergency preparedness plans, and support development of regional guidelines;
- Document the orientation/training of WHO-AFRO's Rapid Response Team (RRTs), and work collaboratively to improve the quality of training;
- Strengthen One Health aspects of outbreak response activities;
- Review selected outbreak response activities in multiple countries, and identify consensus parameters to facilitate monitoring of the quality of field investigations, and;
- Strengthen the reporting of suspected outbreaks by countries in WHO-AFRO the region.

LOW 3.2 SUPPORT OUTBREAK RESPONSE ACTIVITIES

Sub-activity 2.2.1 GI: Develop best management practice recommendations for extractive industries based on PREDICT-identified vectors in hot spot regions

During this quarter, RESPOND completed the first drafts of the white paper entitled "The effects of extractive industry activities on rodents, bats, and non-human primates in equatorial West Africa" and a supplemental document that compiled existing best practices recommendations. These papers were distributed to Extractive Industry Working Group for their review. We are still receiving comments and will update the paper accordingly.

As part of the Extractive Industry Work Group, RESPOND reviewed the XRAT tool developed by PREDICT and participated in multiple meetings with PREVENT and the EIWG to update and re-design this tool. This work is ongoing. RESPOND was and will be working with PREVENT to refine the mitigation/best practices to be recommended to extractive industries.

In conjunction with PREVENT, RESPOND submitted abstracts to the Society of Petroleum Engineers – Health, Safety, and Environment Conference and the Global Risk Forum One Health Summit. RESPOND also began planning with the World Wildlife Fund Gabon to hold a conference with Australian mining companies that are planning to construct mines in the TRIDOM area of Gabon, Cameroon, and the Republic of Congo.

Planned activities:

In the second quarter of Year 3, RESPOND will update the white paper to address comments and expand its regional breadth to include Central and East Africa. Work will also continue on the new risk mitigation tool as part of the EIWG. This will include updating the mitigation tables. RESPOND is also working with the members of the EIWG to develop a general education piece to discuss the topics of concern in the white paper.

RESPOND will attend the first conference with WWF Gabon at Mining Indaba to begin discussions with the Australian mining companies. RESPOND will work with PREVENT to conduct a stakeholder analysis of the countries where we will be focusing our efforts first, specifically Gabon and Uganda. RESPOND will also assist PREVENT to develop and present the paper at the Global Risk Forum One Health Summit (Davos).

Sub-activity 3.2.0 GL: Outbreak response support.

This is a placeholder for centrally held funds that are allocated to regional activities. For detail, see sub-activities 3.2.0.1EC, 3.2.0.2EC, 3.2.0.3EC, 3.2.0.4EC, 3.2.0.5EC, 3.2.0.6EC

Planned activities:

See sub-activities 3.2.0.1EC, 3.2.0.2EC, 3.2.0.3EC, 3.2.0.4EC, 3.2.0.5EC, 3.2.0.6EC

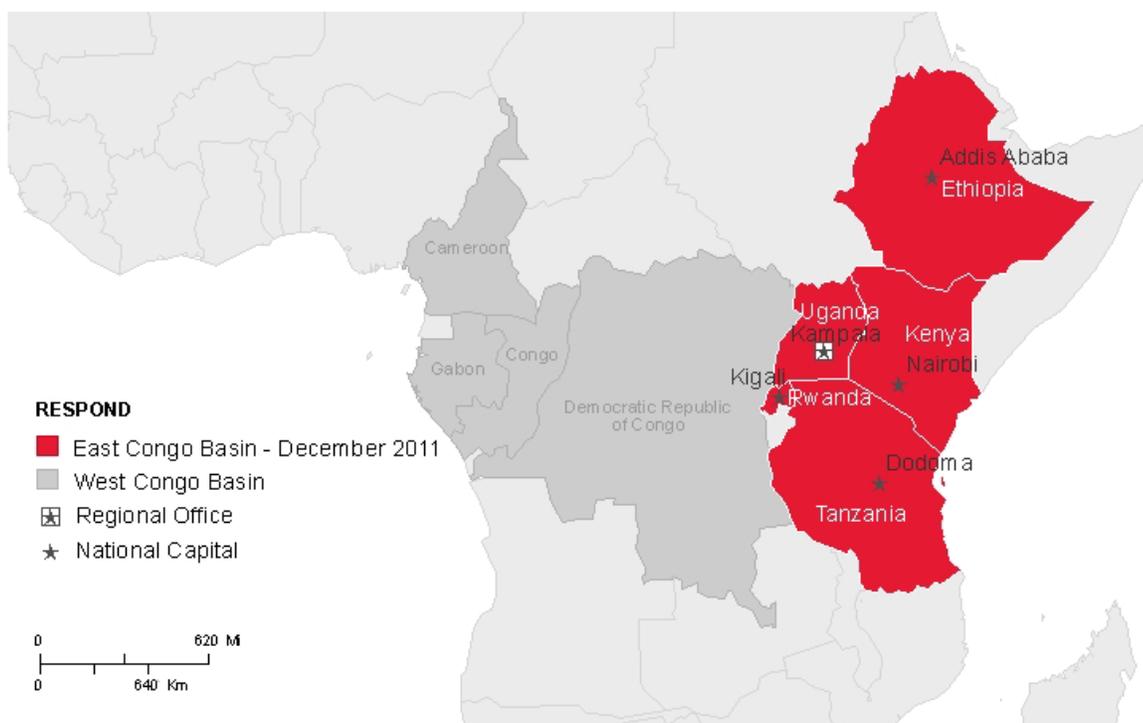
Sub-activity 3.3.1 GL: ProMED Mail: Expanding surveillance and verification for wildlife diseases

The purpose of this activity is to provide training on the use of non-traditional information sources for enhancing routine disease infectious disease surveillance activities. Participants are expected to include field epidemiologists and trainees working within the field of disease surveillance in the human, animal and wildlife sectors. Tufts University technical personnel are negotiating with ProMED Mail regarding two additional workshops that could be given in Africa this year. Once agreement on a scope of work has been achieved, a new contract will be signed.

Planned Activities:

Additional detail will be provided once the new contract with ProMED Mail is finalized.

III. EAST CONGO BASIN ACTIVITIES



The map above the East Congo Basin shows where RESPOND currently works (in red). The Congo River is represented by the white line that runs to the border of the Republic of Congo and the Democratic Republic of Congo from the eastern side of the Democratic Republic of Congo. The stars represent capital cities. The capital city of Kampala, Uganda, is where the RESPOND East Congo Basin Regional Office is located. Surrounding countries shaded in gray represent the reach of the RESPOND regional partners, including the HEALTH Alliance, the Africa Field Epidemiology Network (AFENET), and One Health Central and East Africa (OHCEA).

MANAGEMENT REPORT

GENERAL OBSERVATIONS AND HIGHLIGHTS OF THE QUARTER:

During this quarter the East Congo Basin team diligently worked to continue implementing existing program activities, while working towards submitting new grant agreements for USAID approval.

Highlights from the quarter include:

- 56 delegates from the six OHCEA member countries traveled to Kampala for the first OCHEA Regional Country Coordinating Committee and were trained in One Health Leadership.
- 34 students and 14 mentors were sponsored to attend AFENET's Fourth Annual Scientific Conference.
- 80 students and mentors attended RESPOND's One Health workshop on how to incorporate One Health concepts and approaches into surveillance at mass gathering events.

An enormous focus was placed on OHCEA and its continued development. In early October, a meeting in Kampala convened of USAID/Washington representatives, OHCEA Secretariat, Co-Chair and two focal persons, and RESPOND leadership including the Project Director, East Congo Basin Regional Director, UMN Principal Investigator and Liaison, and UMN School of Public Health Dean. From that meeting, the idea of a Master Plan was developed. The plan is an integrated work plan detailing all the OHCEA activities for the October 2011 - September 2012 period. It is a result of intensive efforts by the OHCEA Secretariat, RESPOND technical staff, and university partners.

In line with the OHCEA theme, one of two major events funded by RESPOND this quarter was the first ever OHCEA Regional Country Coordinating Committee Leadership Training held December 5- 9, 2011, in Kampala. In attendance were 56 delegates from the six OHCEA member countries.

The other major event partially funded by RESPOND was AFENET's Fourth Scientific Conference held December 12 – 16, 2011, in Dar Es Salaam, Tanzania. RESPOND sponsored 48 people (34 Field Epidemiology and Laboratory Training Program (FELTP) trainees and 14 mentors) to attend the conference. At the conference, RESPOND held a One Health workshop attended by 80 conference participants on how to incorporate One Health concepts and approaches into surveillance at mass gathering.

PROJECT ADMINISTRATION:

In early October, the West Congo Basin Regional Director, Deputy Regional Director, Technical Lead and UMN Technical Liaison, visited the East Congo Basin to engage in conversations on how to best integrate the two offices' overlapping programs, namely OHCEA and AFENET

activities. The conversations touched on both technical integration, and the related operational integration for seamless implementation.

The volume of RESPOND activities in Uganda, and the region, resulted in a high portion of ECB’s administrative and logistical support focused on travel to the RESPOND ECB office, regional travel by ECB staff, and travel to and within the region by partners to attend key program-related events. Key events for the quarter include:

- USAID, OHCEA and RESPOND leadership meetings for continued OHCEA development held the first week of October in Kampala.
- OHCEA Regional Country Coordinating Committee meeting held December 5- 9 in Kampala. Delegates from all six OHCEA countries were in attendance.
- AFENET’s Fourth Annual Scientific Conference held in Dar Es Salaam, Tanzania, December 12 – 16, 2011. RESPOND sponsored 48 students and mentors to attend.

Table 1: ECB Travel Log for Year 3, Quarter 1

ECB Travel (October – December 2011)	
Type of Travel	Number of Trips
East Congo Basin staff regional/international travel	3 trips
RESPOND Staff Travel to ECB	23 trips
Non-staff Regional/International Travel for ECB-sponsored Events (includes sponsored students, visitors, and partners/grantees)	98 trips

STAFFING:

- Tufts’ East Congo Basin Liaison, Siobahn Mor, departed the project in October. Dr. Jeff Griffiths is her replacement.
- East Congo Basin recruited for two Program Manager positions. It is a great pleasure to announce two promotions within our ECB team for those positions: Rose Nauma accepted the position of Program Manager, and Toskin Ofoyuru accepted the position of

Assistant Program Manager. These are new positions to our technical team as we try to create an internal structure that best supports and monitors our program activities and responds to our grantees' needs. Both the Program Manager and Assistant Program Manager will report directly to the ECB Technical Lead.

- On December 21, 2011, Dr. Mac Farnham demobilized from post in Kampala to begin his UMN Liaison position for the East Congo Basin office.
- With Dr. Farnham's departure, Dr. Innocent Rwego is now the Technical Lead for the East Congo Basin office.

LESSONS LEARNED AND PROPOSED SOLUTIONS:

Due to focus and dedication towards communication, leadership, stewardship and innovation, the ECB office has demonstrated a consistent record of overcoming obstacles and delivering outputs.

Communication

A focus on weekly reporting to the Project Headquarters and university partners has kept personnel at the 'global level' informed of technical and administrative happenings in the regional office. Technical and administrative personnel have been working on the concept of 'executive summation' to help provide brief, concise and accurate reports on their individual and team activities. Being able to convey very technical information in a concise and brief manner is recognized as a hallmark of successful leadership, and is a lesson that can be applied throughout the RESPOND global project.

One Health in Practice

The idea of transdisciplinary approaches in public health is one that must continue to be emulated and promoted. RESPOND has done so through planning, training and outbreak investigation. At first thought a seemingly a hard lesson, but it has proven to be the opposite, with adoption of methods being readily pursued, mainly due to three main reasons. The first is that it is not a new concept, with presentations being made by a number of NGOs and IGOs in the past few years. The second is that it is conceptually and intellectually attractive that the disciplines follow the flow of agents. Finally, it is rewarding in its ability to identify new methods of controlling and ameliorating the effects of emerging zoonotic diseases.

Leadership

Sharing a common vision, mission and strategy has empowered the ECB office to work with and through the many challenges encountered this quarter. The ECB senior management team has dedicated itself to a team-based approach making sure that all members of the ECB and greater RESPOND team are involved and their respective inputs used towards moving the project in a successful direction. United by a common vision, mission and strategy, the ECB office has been successful in operating in a realm of uncertainty and ambiguity that would undermine most development efforts.

Stewardship

A dedication to local and strategic partnerships has enabled the ECB regional office to succeed. Using openness and transparency towards keeping partners and potential partners informed has kept the ECB team at the table where many would have been left ignored. Focusing on face-to-face engagement, responding to technical support requests, and being available when questions and uncertainty arise, all contribute to the success of the program and the continued engagement of our partners in the field.

Innovation

In the current development climate of stringent funding, innovation, or looking for new ways to achieve greater goals and outputs, is often left by the wayside. To be a continued success the ECB regional office continues to strive towards innovation in an environment and reality that curbs it. When a challenge surfaces, innovation will show the way forward.

PROGRESS REPORT: EAST CONGO BASIN REGIONAL ACTIVITIES

Below is a summary of progress toward RESPOND East Congo Basin regional activities during the reporting period, organized by RESPOND LOWs and sub-activities.

LOW 3: OUTBREAK RESPONSE CAPACITY BUILDING

LOW 3.1 STRENGTHEN HUMAN AND ORGANIZATIONAL CAPACITY TO IMPROVE OUTBREAK RESPONSE

Sub-activity 1.2.2 EC: Creation of OHCEA Secretariat and member coordinating committees

The proposed modification to the grant to the Health Alliance in support of the creation of the OHCEA Secretariat to extend the end date to 31 December 2011 was pulled on December 16th. Based on direct feedback from USAID, ECB will be submitting new grant for USAID approval for the envisioned activities.

Planned Activities:

Submit the new grant application for Health Alliance for support towards the continued development of the OHCEA Secretariat.

In support of the planned grant directly to OHCEA (see below), RESPOND will engage an organizational development expert to engage the OHCEA Deans Summit and Board on addressing the roles and responsibilities of the management structure and short, medium and long-termed strategic funding.

RESPOND will create a seconded position to OHCEA to support the development of its program and fund raising development and member services.

Sub-activity 1.2.3 EC: OHCEA August 2011 - September 2012 (Year 2 & 3) Workplan

RESPOND's continued support for the establishment of OHCEA consisted of the following this quarter:

- USAID hosted the OHCEA planning summit at the Sheraton Hotel, Kampala from 5-6 October, 2011. The meeting was attended by Dennis Carroll and Rob Henry (USAID); Thomas Easley (USAID EPT Coordinator/Uganda); Juno Lawrence (USAID/Uganda); David Elkins and Lendell Foan (DAI-RESPOND); Dean John Finnegan, John Deen and Dominic Travis (UMN-RESPOND); Deans William Bazeyo and David Kabasa (OHCEA Co-Chairs); Dr.

Geoffrey Kabagambe (OHCEA Program Manager); Dean Philemon Wambura (OHCEA/Tanzania); and Professor Kifle Woldemichael (OHCEA/Ethiopia); and focused on a strategic approach to fund and implement the OHCEA work plan activities for the next 12 months. Challenges include managing several lines of funding activities as well as the USAID timelines for grant approvals. Discussions revolved round OHCEA organizational development, country-level activity implementation and U.S. university partner participation, but the central focus was how to mobilize direct assistance to work immediately, in light of a potential two to three month processing for USAID approval of grants.

- After weeks of intensive collaboration and work creating the Master Plan narrative and budget detailing all OHCEA activities between January and September 2012, on November 11, RESPOND submitted the OHCEA Master Plan to the Secretariat for distribution to the OHCEA deans, their review and approval. This Master Plan is an output from the meeting in early October, and captures all RESPOND funding, through both a grant mechanism and direct assistance, committed to support the development of OHCEA. To date, OHCEA has not yet officially approved the Master Plan.
- East Congo Basin directly funded the OHCEA DRC Country Coordination Committee (CCC) meeting that convened in Kinshasa on 20 October. In attendance was the Chief of Staff of the Minister of Higher Education, the two DRC OHCEA Deans and their University Focal Persons. The purpose of the meeting was to revise the composition of the DRC CCC such that key government ministries and agencies were well represented, and to prepare the next steps before the meeting in December. To create the CCC, it was decided the Minister of Higher Education will invite his colleagues to assign their respective representatives, and then he will create the CCC by a ministerial decree. This process was decided on because of two considerations: first, in the DRC, the deans cannot officially correspond to a minister directly, they have to do it through either their Rector or the Ministry of Higher Education; and secondly, the CCC has to be formally created with a legal process to ensure its legitimacy. The following month a second DRC CCC meeting was held to review the Master Plan distributed by the OHCEA Secretariat in preparation for the Regional CCC meeting held in Kampala the first week of December.
- In continued support to the outcomes of the Rwanda One Health meeting convened on September 22, RESPOND assisted PREDICT in honoring this request from the Government of Rwanda to write a One Health concept paper.

- RESPOND funded and supported a successful regional meeting and training workshop for OHCEA’s Country Coordination Committees. The meeting was organized by OHCEA and occurred from 5 - 9 December 2011, in Kampala. Bringing together 56 CCC members from six countries representing government (25), non-governmental institutions (7), and OHCEA universities (24), the meeting served as an opportunity for OHCEA to directly engage these stakeholder groups and allow for an active exchange with them to define their roles and responsibilities as CCC members and design and agree upon planned activities and government initiatives the committees will promote/carry out during the period of January to September 2012.

In addition, the meeting set out to strengthen the knowledge of the CCC members on One Health and enhance the capacity of members to work together using a One Health approach. This was supported by keynote speaker, and new RESPOND Senior One Health Technical Advisor Marguerite Pappaioanou. In support of these initiatives the CCC members were also trained on leadership skills such as collaborative teamwork, effective communication, developing a shared vision, and managing conflict constructively. The meeting was officially opened by the Ugandan Minister of State for Health, the Honorable Dr. Richard Nduhuura.

- One Health Core Competencies. RESPOND, in collaboration with partners from the USAID-funded EPT suite of projects, is developing a set of competencies required for taking a One Health approach to disease surveillance and outbreak response. These competencies will enable organizations globally to either construct or analyze One Health training programs and curriculum. On November 2nd the ECB Technical Lead, Dr. Mac Farnham, requested the OHCEA Chairman, Vice Chairman and Secretariat, to participate in the development of One Health core competencies in support of this RESPOND global activity to define One Health and identify One Health core competencies.

Planned Activities:

Starting in mid-January, each OHCEA member institution will host “sensitization meetings” at their respective universities to sensitize faculty and students to the idea of One Health.

As a follow up to the Regional CCC Meeting held this quarter, national CCCs will be holding their first meeting during January and February where they will be establishing their agendas and planned activities for the year.

COUNTRY ACTIVITIES – UGANDA

LOW 3: OUTBREAK RESPONSE CAPACITY BUILDING

LOW 3.2 SUPPORT OUTBREAK RESPONSE ACTIVITIES

Sub-Activity 1.5.4 EC: Residency-based knowledge partnership model for building veterinary public health competence in Uganda. (New Year 3 Activity)

On Thursday, October 6, the Dean of UMN School of Public Health, John Finnegan together with a team from the ECB office, was hosted by the Makerere University College of Veterinary Medicine faculty Professor Francis Ejobi and Dr. Andrew Tamale. The aim of the meeting was to continue discussions on issues of joint interest for collaboration including the planned development of a Veterinary Public Health Residency program at Makerere. The items discussed were: implementation of the joint One Health residency proposal, joint project/grant writing partnerships, technical backstopping, implementation of translational research and extension model, faculty exchange programs, student exchange programs and student team field experiences (disease outbreak investigations and 'medical reserve corps' model).

Related Activities: An evaluation tool for the planned RESPOND funded Veterinary Public Health (VPH) Residency Program in Uganda.

The ECB Technical Advisor, Dr. Innocent Rwego, worked with the Makerere University College of Veterinary Medicine to develop an evaluation tool for the planned RESPOND-funded Veterinary Public Health (VPH) Residency in Uganda. The costs for this evaluation will be covered by a seed grant from the Center for Animal Health and Food Safety (CAHFS) at UMN. The goal is to enhance the acceptability of an applied, experiential residency-based model as a tool for building core competences for effective delivery of veterinary public health services with the framework of One Health in Uganda. The tool will be used to establish the knowledge, attitudes, perceptions and potential partnerships for key stakeholders in the academic, private and public sectors on the development and piloting of a VPH residency program in Uganda.

Planned Activities:

Veterinary Public Health candidate, Sylvia Wanzala, plans to arrive to the University of Minnesota by mid-February to begin her residency.

Sub-activity 3.2.0.4 EC: Outbreak Response: Strengthening Surveillance, Reporting & Diagnostic Capacity to improve Early Detection, Diagnosis & Response to Disease Outbreaks in Humans, Livestock and Wildlife

The ECB Monitoring and Evaluation Officer made a monitoring visit to Kumi and Soroti districts in Eastern Uganda from October 11-14, where Field Epidemiology students from Makerere University College of Veterinary Medicine (under the RESPOND grant to AFENET) were conducting field activities.

Three of the five AFENET/Makerere University Vet Epi students and one supervisor joined two epidemiologists and one microbiologist from CDC/Atlanta, one epidemiologist from CDC/Uganda and two FELTP trainees from CDC/Kenya for the Typhoid Epi-Aid trip from October 17 -21, 2011. The objectives of the Typhoid Epi-Aid visit to western Uganda was to strengthen laboratory and surveillance at some hospitals in two districts, review progress with the District Health Officer, Kasese District, in implementing the recommendations following the 2009 Typhoid investigation, confirm and characterize the magnitude of the new typhoid outbreak in Bundibugyo District, and identify and implement control measures in collaboration with other donors/stakeholders. The AFENET students took advantage of the typhoid outbreak to learn and practice epidemiological surveillance and determine risk factors for occurrence of a typhoid outbreak, carried out an environmental monitoring and used participatory epidemiology to determine the role of animals in the occurrence of typhoid.

The trainees held 16 focus group discussions using Participatory Epidemiology methods, reviewed hospital records to extract data of gut perforation cases which they eventually line listed, participated in designing and strengthening protocols for typhoid case management and treatment protocols, and finally trained communities (including village health teams) in water treatment.

During the week October 25-29, 2011, AFENET - supported by its grant from RESPOND - commenced work on district community surveillance and outbreak investigation training of trainers in Gulu, Uganda. The main objective was to train a cadre of trainers at the district level who will then be involved in training Uganda's village health teams. Four participants (1 District Veterinary Office, 1 District Health Officer, 1 District Local Focal Person and 1 District

Surveillance Focal Person) from nine districts were involved in this training of trainers (36 in total).

RESPOND sponsored 48 people (consisting of 34 Field Epidemiology and Laboratory Training Program (FELTP) trainees and their 14 mentors) to attend AFENET's Fourth Annual Scientific Conference. The AFENET Scientific Conference is a premier and key networking event for residents of FELTPs, field epidemiologists and other public health practitioners in Africa. This year's conference was hosted by the Tanzania FELTP under the patronage of the Tanzania Ministry of Health and Social Welfare. The conference was held from December 11-16, 2011 in Dar es Salaam. The theme for this conference was: "Field Epidemiology and Laboratory Training Programs as a Platform for Health Systems Strengthening." RESPOND hosted a workshop during the conference entitled 'Public Health Surveillance for Mass Gatherings,' which brought in more than 80 participants that were actively engaged in learning how to incorporate One Health concepts and approaches into surveillance at mass gathering events. Presentations included an overview of the public health surveillance at the 2010 FIFA World Cup in South Africa, the 2011 Martyrs Day celebrations in Uganda, and an overview of surveillance at mass gatherings from the WHO Health Security Interface in Geneva Switzerland.

Related Activities: RESPOND facilitates FAO workshop piloting GEMP training for Eastern Africa Chief Veterinary Officers

Following a request from FAO's crisis management center in Rome, RESPOND provided facilitation for a pilot of their revised 'Good Emergency Management Practice' (or GEMP) for chief veterinary officers from Uganda, Tanzania, Kenya, Rwanda and Ethiopia who convened in Entebbe, Uganda from November 28-30, 2011. The GEMP essentials manual and training materials are focused on providing national-level veterinary services with an applied, systems-based approach to prepare for, prevent, detect, respond to and recover from animal health emergencies. RESPOND ECB Technical Lead, Dr. Mac Farnham, was joined by WCB technical advisor, Serge Nzietchueng, and USAID Uganda EPT Program Coordinator, Thomas Easley, in facilitating the training, leading applied learning activities and providing feedback to FAO on their training materials. Key feedback from workshop participants included suggestion to include other relevant ministries and professions (especially social science), appreciation for the applied learning approach (using existing emergency preparedness plans from participant's respective countries), and gratitude for the opportunity to come together to address complex disease challenges.

Planned Activities:

Program review of AFENET training programs and outbreak response mechanisms.

Sub-activity 3.2.0.5 EC: Community-based Training through the Private Sector

On November 23, 2011, the RESPOND Regional Director and Training Administrator, and Grants Officer, met with officials from the Uganda Manufactures Association (UMA) and the Federation of Uganda Employers (FUE) at the UMA offices to discuss modifying their grant application for the private sector training. During the discussions, it was agreed that the two associations will each develop a grant proposal and a budget covering 12 months (six months for the original pilot concept and an additional six months for an expanded program roll out) to be submitted to RESPOND during the week of November 28th. On December 2, the East Congo office received revised applications and budgets from both the UMA and FUE. These budgets are being reviewed and grant applications for both organizations will be submitted to USAID in the first weeks of January.

Planned Activities:

Grant implementation depends on the timing of USAID approval. Next quarter the ECB office aims to issue the grants to FUE and UMA respectively and work towards training their respective master trainers in disease surveillance and response. The Training of Trainers is currently scheduled for mid-February.

Sub-activity 3.2.2 EC: Strengthening existing platforms for outbreak response in Uganda

The grant application submitted to USAID was under revision to combine East and West Congo Basin grants to AFENET into one grant.

On October 12, 2011 Tufts ECB and WCB Liaisons, Siobhan Mor and Hellen Amuguni, and the ECB Training Administrator, Rose Nauma, met with officials from AFENET, represented by Dr. Monday Busuulwa and Bernard Lubwama, to review timelines for an implementation plan for the ECB activities and a combined Pan-Congo RESPOND implementation plan. An implementation plan was generated for the next 12 months plus the monitoring and evaluation logic framework. This combined implementation plan anticipated the need to have seamless coordination between the two grants to AFENET.

RESPOND ECB/WCB combined grant to AFENET will strengthen human resource capacity in field epidemiology and to strengthen AFENET institutional capacity for training, mentoring, and management. The grants provide an expansion of PE training and PIA methodologies by AFENET in support of specific regional activities including: (1) ongoing support for five AFENET fellows currently enrolled at the Makerere School of Veterinary Medicine (Sub-activity 3.2.0.4 EC); (2) capacity building activities to strengthen AFENETs internal capacity to undertake M&E activities; and (3) training and organizational development technical assistance to strengthen project management and mentorship capacity of the Secretariat; (4) a review of outbreak response mechanisms and the related linkages to the Government of the DRC; and (5) the development and implementation of short courses to build the capacity in field epidemiology, risk analysis and outbreak investigation for field staff operating at the DRC's Ministries of Agriculture, Health and Environment.

Planned Activities:

Receive USAID grant approval, hold the grant kick-off meeting and begin grant implementation.

Sub-activity 4.1.2 EC: Evaluate existing Knowledge Management Systems for the health sciences, their application and utilization in the university context, and support the improvement and integration of appropriate systems

Although the grant closed on September 30, the ECB office continues to work with the MUSK Program Manager and Tufts to finalize outstanding issues to complete the direct assistance portion of this sub-activity.

Planned Activities:

The ECB office aims to close this sub-activity in the next quarter.

OTHER ACTIVITIES (UGANDA)

LOW 3.1 STRENGTHEN HUMAN AND ORGANIZATIONAL CAPACITY TO IMPROVE OUTBREAK RESPONSE

- *Emerging Pandemic Threat Partners' Meetings*

The Uganda USAID EPT Program Coordinator, Thomas Easley, facilitated an EPT program partners' meeting at the ECB office on Thursday, October 6, 2011. The meeting was attended by representatives from RESPOND, PREDICT, CDC and WHO/IDENTIFY. PREDICT and IDENTIFY, two of the EPT partners that missed the 28 September meeting at CDC/UVRI, presented their planned activities. IDENTIFY plans to map out lab capacity from Health Centre III to the national level. PREDICT plans to carry out modeling in areas of anthropogenic disturbances. Two of the sites selected so far are Bwindi Impenetrable and Mgahinga National Parks.

Additionally Thomas Easley facilitated an EPT program partners' meeting at the ECB office on Wednesday, December 7. In attendance were: Dr. Thomas Easley, USAID EPT Country Coordinator; Lendell Foan, RESPOND; Dr. Mac Farnham, RESPOND; Jerry Martin, DAI; Dr. Marguerite Pappaioanou, RESPOND; Dr. Benard Ssebide, PREDICT; Rachel Mbabazi, PREDICT; Dr. Jeff Borchert, CDC/Uganda. The partners discussed December activities schedules to identify areas of collaboration and cooperation.

- *Pan African Sanctuary Alliance's 2011 Veterinarian Workshop*

On 15 November, the Regional Technical Advisor, Dr. Innocent Rwego, gave a lecture on Disease Outbreak Investigation to a group of veterinarians and primate healthcare workers during the Pan African Sanctuary Alliance's 2011 Veterinary Workshop in Entebbe, Uganda.

- *Collaboration with UNICEF*

In response to UNICEF's inquiry to meet with RESPOND, ECB invited PREVENT and the USAID EPT Coordinator, Thomas Easley, to RESPOND's office to meet with UNICEF's Ugandan and Regional Communication Development Specialists to discuss their development of a Regional Disease Outbreak Communication Framework and associated planning toolkit.

- *Media Orientation on Emerging and Re-emerging Infectious Diseases- Uganda*

Responding to a request from Ugandan journalists, ECB hosted and facilitated an emerging infectious disease orientation for media representatives on November 22, 2011. The one-day orientation was facilitated by ECB's Technical Lead, Dr. Mac Farnham and Dr. Monica Musenero. During the orientation, risk communication, or methodologies for communicating complex technical information to non-technical audiences were introduced to the journalists and exercised through group discussions. In addition, the orientation highlighted disease specific information on three outbreaks currently occurring in Uganda namely, Typhoid, Cholera and Anthrax. The event was supported by USAID EPT Partners PREVENT and RESPOND. The activity was posted on to RESPOND's Twitter account: <http://twitpic.com/7hvkcz>

- *Uganda National Laboratory Forum*

ECB's Technical Lead, Dr. Mac Farnham, and Technical Advisor, Dr. Innocent Rwego, attended the National Laboratory Forum meeting on 25 November. RESPOND participated in the review of a questionnaire designed to map the laboratory capacity in both animal and human sectors in the country. Capacity will be assessed in terms of equipment, personnel, tests carried out and locations of the labs. In addition, strengthening of lab networks and capacity will be added into the Integrated Disease Surveillance and Response (IDSR) documents that the Ministry of Health and partners are discussing during their national workshop the week of November 28th.

- *Adaption of the Generic Technical Guidelines for Integrated Disease Surveillance and Response (IDSR)*

The ECB RESPOND office participated in a weeklong workshop hosted by WHO, whose objective was to build capacity for the adaption of the generic technical IDSR guidelines to meet Uganda's national surveillance needs. The ECB Program Manager, Rose Nauma participated in the workshop together with the national IDSR task force members, representatives from district health offices and health facilities, health management information systems managers, WHO national officers and key partners. The participants agreed to harmonize language, wording and terms used in the guidelines, participant's and facilitator's handbooks. Following the workshop the WHO held a national training of trainers, the week of 4th December 2011, who will cascade the training to the districts and update the training materials based on recommendations of the workshop including other disciplines like domestic and wildlife health sectors.

- *Uganda Veterinary Association Symposium and General Meeting.*

The RESPOND ECB Technical Advisor, Dr. Innocent Rwego, participated as chair of a session and member of the scientific program committee for the Uganda Veterinary Association Symposium and General Meeting from December 1 - 2, 2011.

- *Uganda National Taskforce Meeting for Epidemic Preparedness and Response*

Highlights of the Uganda NTF meeting on Friday, December 2nd include: a CDC EpiAid investigation into an ongoing Typhoid epidemic in Kasese District; Anthrax outbreak in Sheema District; an Ebola ecological survey in Luwero District; dengue fever outbreak in UPDF troops in Somalia; and the outstanding national risk assessment for Yellow Fever.

After more than a year of RESPOND's active participation with the Uganda NTF, key areas for targeted capacity building remain and include: 1) transforming planning into action; 2) building communication skills to draft clear and concise executive summaries and action plans; and 3) up-skilling to proactively advocate needs to appropriate decision making and policy levels. The Uganda NTF has been very proactive in application of One Health approaches to address challenges within existing complex systems involved in outbreak response and has expressed continued appreciation for support from USAID, and RESPOND.

COUNTRY ACTIVITIES – KENYA

OTHER ACTIVITIES (KENYA)

- **Sub-activity 1.2.2 EC: Creation of OHCEA Secretariat and member coordinating committees**
- **Sub-activity 1.2.3 EC: Support OHCEA work plan**

COUNTRY ACTIVITIES – ETHIOPIA

OTHER ACTIVITIES (ETHIOPIA)

- **Sub-activity 1.2.2 EC: Creation of OHCEA Secretariat and member coordinating committees**
- **Sub-activity 1.2.3 EC: Support OHCEA work plan**

COUNTRY ACTIVITIES – RWANDA

OTHER ACTIVITIES (RWANDA)

- **Sub-activity 1.2.2 EC: Creation of OHCEA Secretariat and member coordinating committees**
- **Sub-activity 1.2.3 EC: Support OHCEA work plan**

COUNTRY ACTIVITIES – TANZANIA

OTHER ACTIVITIES (TANZANIA)

- **Sub-activity 1.2.2 EC: Creation of OHCEA Secretariat and member coordinating committees**
- **Sub-activity 1.2.3 EC: Support OHCEA work plan**

COUNTRY ACTIVITIES – DEMOCRATIC REPUBLIC OF CONGO

OTHER ACTIVITIES (DEMOCRATIC REPUBLIC OF CONGO)

- **Sub-activity 1.2.2 EC: Creation of OHCEA Secretariat and member coordinating committees**
- **Sub-activity 1.2.3 EC: Support OHCEA work plan**

IV. WEST CONGO BASIN ACTIVITIES



The map above of the West Congo Basin shows where RESPOND currently works (in red). The Congo River is represented by the white line bordering the Republic of Congo and the Democratic Republic of Congo from the eastern side. The stars represent capital cities, and the capital city of Kinshasa, DRC, is where the RESPOND West Congo Basin Regional Office is located. Surrounding countries shaded in gray represent the reach of the RESPOND regional partners, such as HEALTH Alliance and AFENET.

MANAGEMENT REPORT

GENERAL OBSERVATIONS AND HIGHLIGHTS OF THE QUARTER:

During the reporting period, National Elections in the DRC were held. Security prior to, during, and after the elections were of concern leading the U.S. Embassy to issue a travel ban from mid-November through to December 31st. Movement within the country was also restricted due to security concerns. The West Congo Regional Office was operating under reduced schedule following guidance from the Embassy throughout the election period. This has significantly affected program implementation in the first quarter of the year. In addition, there was a marked slowdown in public institutions' operations contributing to the lag in progress and implementation.

DRC CCC (or referred to as CCUS in French) was established by government decree signed by the Minister of Higher Education on November 18, 2011. Representatives of seven (7) government ministries, 2 OHCEA Focal Points, and civil society (represented by Federation Une Santé) make up the committee in the DRC. This is an important milestone for the DRC as it seeks to play an important role in OHCEA and in the region in promoting One Health approach.

While there was a slow-down in the DRC, activities progressed in earnest in Cameroon with the launch of the national ad hoc committee in charge of elaborating the national program for prevention and control of emerging and re-emerging zoonotic disease and the organization of a national workshop on One Health, also attended by the US Ambassador. RESPOND is currently supporting the Committee in developing its national program on zoonotic disease- a critical step towards effective management and response.

PROJECT ADMINISTRATION:

During the reporting period, the DRC government released a new law on VAT. The new text released in the midst of the election period in November 2011 comes into effect January 1, 2012. The text released by the Ministry of Finance remains complicated and controversial and fails to provide clear guidelines for organizations operating with foreign assistance funds- organizations that should be exonerated from such taxation. DAI is consulting with the USAID mission on the best possible approach to address this gap as soon as possible.

A second round of training on financial management and grant management was held for UNIKIN (University of Kinshasa) and FUS (Federation Une Santé) in December 2011. The three-day exercise brought together program management and finance, in order to ensure shared understanding and appreciation for the rules and regulations. The exercise was also aimed at providing a preliminary insight into grant management and ensuring important elements are taken into consideration, as FUS prepares to submit its grant application.

STAFFING:

During the reporting period, the grants officer position was filled. Due to travel restrictions, the orientation/training of the senior grants officer will only be completed in early January 2012.

The TRG Training Administrator Contract was extended through February 2012 as she will continue to play a critical role in the development and finalization of training tools and curriculum (under WC 1.2.3, 1.5.5, 1.5.1).

LESSONS LEARNED AND PROPOSED SOLUTIONS:

EPT Coordination: The WC Regional Office continued to closely coordinate its activities with other EPT partners during the reporting period. Particularly in Cameroon, the EPT partners (PREDICT represented by GVFI, and IDENTIFY represented by WHO and FAO) are actively engaged in the development of the national program on zoonoses in close collaboration with the national ad hoc committee led by the Ministry of Livestock, Fisheries and Animal Industry. This collaboration has contributed to the promotion of the concept of One Health and the integration of the objectives of EPT in the national program.

Engaging the government is a complicated and long process, especially when working with different sectors. Leadership conflict between the three major sectors (human health, animal health, and environment) involved in RESPOND project is one of the biggest obstacles preventing their collaboration. In the DRC, the fact that the Minister of Higher Education is championing the One Health promotion process through the CCC has somehow attenuated the historic competition between the Ministry of Agriculture in charge of animal health and the Ministry of Public Health, illustrated by the failure of the H5N1 multisectoral commission. The H5N1 commission was set up to coordinate prevention effort, but has never been formalized and is not functional. The Higher Education sector is a neutral one, and it is trying to build the foundation for collaboration.

In Cameroon, the ad hoc committee set up by the Prime Minister himself was a very good opportunity to promote the One Health approach. RESPOND supported a challenging consensus building process, taking advantage of this strong political willingness from high-level decision maker. Recently, a Secretariat of State, in charge of epidemics and pandemics, was appointed in response to the current epidemiological situation of the country and the activities of the ETP projects in Cameroon. The political will is crucial to support and move forward projects that claim to change practice and improve institutions.

PROGRESS REPORT – WEST CONGO BASIN REGIONAL ACTIVITIES

Below is a summary of progress toward RESPOND West Congo Basin regional activities during the reporting period, organized by RESPOND LOWs and sub-activities.

LOW 3: OUTBREAK RESPONSE CAPACITY BUILDING

LOW 3.1 STRENGTHEN HUMAN AND ORGANIZATIONAL CAPACITY TO IMPROVE OUTBREAK RESPONSE

(Sub-activity 1.2.1 WC: Conduct twinning and mentoring with universities and vocational schools)

Faculty from UNILU Veterinary School, UNIKIN Veterinary School, and ISTM Lubumbashi visited various universities in Zambia, Uganda and South Africa and met with their counterparts. The purpose of their visits was to establish an institutional relationship. As outcomes of these trips, MOUs were drafted describing areas of collaboration, such as joint research, students' internships, joint conferences and/or workshops, joint institutional research and quality insurance.

Professor Tzipori met with the Rector of UNIKIN and discussed RESPOND collaboration with the University of Kinshasa. He also met with the Deans of the Veterinary schools of UNIKIN and UNILU and the Director General of ISTM Lubumbashi. Together they discussed details related to the implementation of the twinning program funded through Tufts University

Tufts University developed a working group made up of faculty to act as mentors for UNIKIN and UNILU in the twinning program. The departments involved are Microbiology, Infectious Diseases, Parasitology, Epidemiology, Public Health, Wildlife and Immunology. The focus of the twinning will be on curricula review, human resources capacity building and infrastructure development.

Project extensions without cost were submitted by grantees (UNILU Veterinary School, UNIKIN Veterinary School and ISTM Lubumbashi). The end period of these projects is now set for March 2012. The UNILU and UNIKIN conducted a preliminary assessment of their key departments for the purpose of the twinning program with Tufts University.

Planned activities:

Veterinary Schools of UNILU and UNIKIN will visit the University of Nairobi in February 2012 which has a long experience in Veterinary Public Health and wildlife programs. International exchange of faculty from Tufts and UNILU and UNIKIN is planned for months of February to May 2012. Activities include reviewing the curriculum, teaching and lecturing, developing research interests and writing grant proposal. Quality Assurance workshops will be conducted at UNIKIN and ISTM, Kinshasa.

Sub-Activity 1.3.1 WC: Support regional and international exchanges of personnel to improve outbreak response and control; develop an action plan to strengthen and enhance ongoing career path development in the Democratic Republic of Congo.

FUS and the WCB RO developed detailed implementation plans on the situational analysis and the outreach program activities which will be funded under DA. Those documents are under final review and will be submitted to PHQ for approval next week. A schedule of activities was issued to FUS for them to develop a proposal to set up a database for the 5 professions, which will be funded through a grant. FUS has started to meet with stakeholders and will start collaboration to accomplish activities.

Planned Activities:

Approval of new grant for FUS.

FUS will start the outreach project targeting health professionals to disseminate the One Health concept, disease surveillance and outbreak response information and useful educational materials. FUS will start to implement a situational analysis of five health professions. This knowledge will help develop policies and actions needed to strengthen academic and vocational institutions.

Sub-Activity 1.5.1 WC: Conduct professional continuing education through didactic and field training workshops using the WILD module

The joint technical team continued its regular calls to design and prepare the next WILD course. RESPOND WC, Tufts and AU-IBAR discussed practical implications and modalities of implementing the next WILD session in Gabon through direct assistance. The proposed dates are now February 19 to 29, 2012. The preparation phase started with a RESPOND-AU IBAR joint mission in Gabon in mid-December 2012.

Introductory discussions were held with key ministries and the US Embassy. A committee led by the Director of Livestock and composed of the Director of Health, the Director of Wildlife and Protected Areas and the Director of the National Agency of Natural Parks was set up and is in charge of the preparation of the next WILD training scheduled for mid-February.

Planning for the second training in Gabon is underway, but the absence of a signed contractual agreement is posing difficulties for Tufts.

Planned Activities:

The next WILD training will be held in Gabon during the last two weeks of the February. Following the training, a two-day meeting will be held between AU-IBAR, RESPOND, and RVC to determine lessons learned and agree on critical details of training to be funded with Year 3 funds.

Sub-Activity 1.5.5 WC: Support the Mentoring for Environmental Training in Outreach and Resource Conservation- Forest Ecology and Stewardship Training (MENTOR-FOREST) program by adding One Health content and supporting fellows and a mentor from Gabon and the Republic of Congo.

The grant proposal from the Gabon Park Authority (ANPN) is finalized, and a request for grant concurrence will be submitted to USAID in January 2012. Curriculum development and documentation related to Forestry, Conservation, Biodiversity, Bushmeat Trade and Logging was gathered and posted on Central Desktop. Under the guidance and supervision of Dr. Connie Clark, Program Coordinator for USFWS based in Gabon, the selection of fellows and related determination of priority content areas are underway.

Planned Activities:

Conduct a forestry mentoring and training program in Gabon.

Sub-Activity 3.1.1 WC: Strengthen systems for disease surveillance, outbreak investigation and response with a One Health approach

After the One Health launch in Cameroon in September 2011, where experts from Tufts and UMN participated, a series of workshops and working sessions were held by the ad hoc committee to adopt the terms of reference of the Technical Secretariat, the methodology for the consensus building, and a detailed timeframe for the elaboration of the national program for zoonotic disease prevention and control in Cameroon, and to start drafting the content of the document. The Technical Secretariat of the ad hoc committee in Cameroon started the situational analysis activity by collecting data with the support of two RESPOND consultants. The results of that first step were presented during a three-day workshop in December in Yaoundé, Cameroon. During the reporting period the tender invitations for procurement of essential office supplies for DRC and Cameroon were elaborated and will be released the first week of January. The procurement is part of in-kind grants to Ministry of Agriculture (Department of Livestock production and Animal Health in the DRC) and Ministry of Livestock, Fisheries and animal industries in Cameroon in support of their efforts to lead the disease surveillance and outbreak response. Request for concurrence will be submitted to USAID following the completion of the process.

Planned Activities:

Continue to develop the national program for zoonotic disease prevention and validate it in Cameroon. The Ad hoc committee will also develop an implementation plan focused on

dissemination of the strategy to a wider audience. Purchase equipment for the disease surveillance department in Cameroon and in DRC.

Sub-Activity 3.4.4 WC: Outbreak response training for multi-disciplinary teams at national and sub-national levels, including training of front line health workers in outbreak response.

Planning meetings were held between Tufts, RO and AFENET secretariat to develop logical frameworks and implementation plans, and to agree on deliverables for the Tufts/AFENET grant that was awaiting approval from USAID.

AFENET successfully conducted a rapid assessment study including field visits and focus group interviews to “assess skills of existing teams and outbreak response structures in 3 provinces in DRC” from Nov. 1 to 11. Field visits were conducted in Kikwit (Nov 1-4), in Matadi in Bas-Congo (Nov. 6-9), and in Kinshasa to meet with the central and provincial level public health professionals. AFENET requested for extra days to produce the report due to time constraints related to the preparation of the 11th regional conference. The report is expected to be submitted in January, 2012.

Plans and materials were developed for a 5-day descriptive and qualitative risk analysis training for in-service personnel related to zoonotic diseases in DRC that would be held in 2012. Professor Christine Rioux, a risk assessment specialist in the department of Public health at Tufts University was contracted to prepare materials and deliver the RA training in DRC. The objective of this 5-day training is to increase the capacity of local veterinary and health personnel to utilize available data and coordinate the expertise necessary to evaluate, manage, and communicate the risks associated with potential animal and human health threats from zoonotic diseases in the Democratic Republic of Congo.

AFENET also held its annual scientific conference in Tanzania in the month of December and RESPOND sponsored many participants.

Planned Activities:

- Organize an outbreak response and investigation training facilitated by AFENET.
- Conduct risk analysis training in DRC.

COUNTRY ACTIVITIES – DEMOCRATIC REPUBLIC OF CONGO

LOW 3: OUTBREAK RESPONSE CAPACITY BUILDING

LOW 3.1 STRENGTHEN HUMAN AND ORGANIZATIONAL CAPACITY TO IMPROVE OUTBREAK RESPONSE

Sub-Activity 1.2.3 WC: Upgrade the skills of faculty at ISTM; Institut Technique Agricole and Vétérinaire (ITAV); and Institut d’Enseignement Medical/Institut Technique Medical (IEM/ITM)

Through the Faculty of Veterinary Medicine of UNILU and the ISTM Lubumbashi, two workshops attended by high-level national experts were conducted during the reporting period (October 16 to 21 and November 17 to 21) to complete the pre-service reference documents for competencies, for training content and for evaluation for three types of institutions (IEM/ITM, ITAV and ISTM) and per academic year, started during the previous reporting period. The reference documents are now ready to be submitted for approval to the three educational reform committees, prior to the preparation of the training of the trainers.

Planned Activities:

The reference documents will be submitted for approval to the three educational reform committees in a workshop scheduled for January 24 and 25. Training of trainers will be conducted in March 2012.

Sub-activity 3.4.1 WC: Deliver refresher outbreak response training to rural medical personnel and first-responder training to communities in the USAID-CARPE Salonga-Lukenie-Sankuru Landscape region

Participants’ training manual and facilitators’ guide on Multisectoral Integrated Surveillance and Response to Zoonoses (MISRZ) were finalized and technically validated during a two-day workshop on November 2 and 3, 2011. A team of experts from MoA, MoH and KSPH undertook the final touch to the documents addressing the content and formatting comments from the technical validation workshop, and proofread them. They are being prepared for the official validation and endorsement by the General Secretariats of the three sectors (Agriculture, Public Health and Environment), and will be printed in sufficient quantities for dissemination.

The process of recruiting a consultant to follow-up the distribution of PPE, the shipment and the distribution of the communication equipment in the Tshuapa District is underway. The WC office will closely work with ministries and CDC to plan the distribution and follow-up activities.

InCEF prepared and completed the EBOLA film. The second cut of the EBOLA film was approved by Tufts and the regional office. InCEF contract was extended and it is in the process of implementing the field-based activities.

InCEF procured essential IEC materials in the US and will bring them to DRC through RoC. However, InCEF Executive Director has delayed her travel to RoC for security reason. Thus, all deliverables for this activity will be delayed as well.

Planned Activities:

- INCEF to train first responders and show the EBOLA film in 30 villages.
- Essential supplies (bicycles and rubber boots) and equipment (radio communication equipment and motorcycles) to be procured and delivered to 12 health zones in Tshuapa district, Equateur Province. The ministry of Health, Agriculture, and Environment are the primary recipients of this equipment. They will share the use of the radio communication equipment for surveillance and reporting.

LOW 3.2 SUPPORT OUTBREAK RESPONSE ACTIVITIES

Sub-Activity 4.1.2 WC: Evaluate existing Knowledge Management Systems for the health science, their application and use in the university context, and support the improvement and integration of appropriate systems.

The process of recruiting a consultant to assist the Regional Office in preparing the bidding process to select a company that will repair UNILU intranet service has started. Security permitting, the selected consultant will start his/her work before the end of the month of December. Further, the translation of TUSK into French is still ongoing. Both students and volunteer translators are satisfied of the opportunity and the implementation of the task. User support groups are being put together at UNIKIN and UNILU, which will facilitate the adoption of the use of the intranet in teaching and research and later assist TUSK users.

Planned Activities:

Continue the translation of TUSK into French. Intranet repair at UNILU and the installation of TUSK at both UNIKIN and UNILU. Training on the use of intranet and TUSK in teaching and research will be conducted as well.

OTHER ACTIVITIES (DRC)

OHCEA support

The annual assessment to monitor the development of the OHCEA university partnerships continued during the first part of the reporting period. The purpose of the assessment was to: 1) establish a baseline against which to analyze and interpret future OHCEA successes and challenges, 2) collect information about OHCEA stakeholders' expectations that can be used to make adjustments that improve the network, and 3) build the capacity within OHCEA to continue to monitor and evaluate the development of the network through collaboration with point people at OHCEA member universities. The baseline assessment was conducted during the previous reporting period. In Lubumbashi, 16 people from Vet school of UNILU, Public Health school, and ISTM Lubumbashi were interviewed from October 10 to 15.

DRC's CCC has been established by government decree signed by the Minister of Higher Education on November 18, 2011. The committee consists of representatives of 7 government ministries (Higher Education, Agriculture, Public Health, Environment, Interior and Security, Primary and Vocational Education, and Communication and Media), 2 OHCEA Focal Points (KSPH and UNILU Vet School) and a representative of civil society represented by the Federation Une Santé (FUS). All government representatives have a ranking of director. The committee is made of 3 women and is chaired by the representative of the Ministry of Higher Education. The DRC CCC members attended the regional meeting and training held in Kampala, Uganda, from December 5 to 9.

During the upcoming quarter, the committee will continue developing its work plan in mid-January and meet with key stakeholders.

COUNTRY ACTIVITIES – GABON

No country-specific activities were implemented in Gabon during the reporting period.

Sub-Activity 1.5.1 WC: Conduct professional continuing education through didactic and field training workshops using the WILD module

Sub-Activity 1.5.5 WC: Support the Mentoring for Environmental Training in Outreach and Resource Conservation- Forest Ecology and Stewardship Training (MENTOR-FOREST) program by adding One Health content and supporting fellows and a mentor from Gabon and the Republic of Congo.

OTHER ACTIVITIES (GABON)

COUNTRY ACTIVITIES – REPUBLIC OF CONGO

No country-specific activities were implemented in Gabon during the reporting period.

OTHER ACTIVITIES (REPUBLIC OF CONGO)

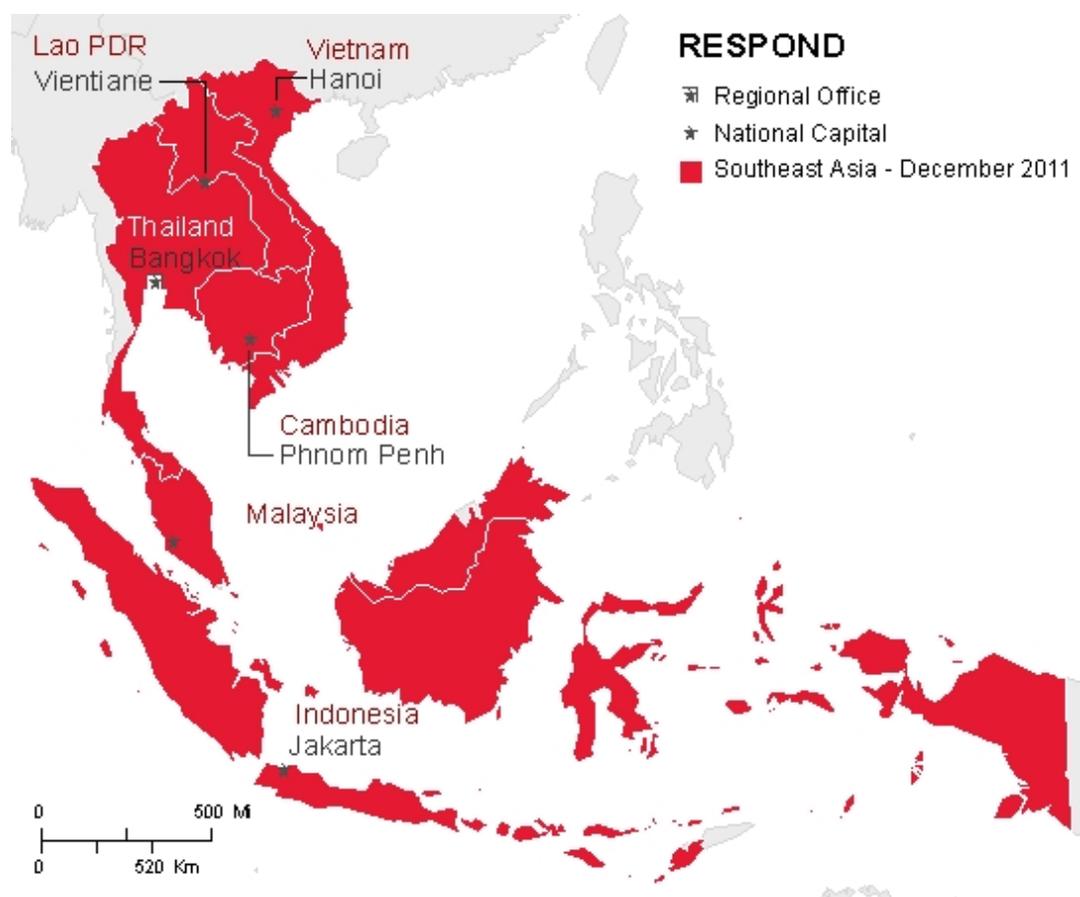
COUNTRY ACTIVITIES – CAMEROON

No country-specific activities were implemented in Gabon during the reporting period.

Sub-Activity 3.1.1 WC: Strengthen systems for disease surveillance, outbreak investigation and response with a One Health approach

OTHER ACTIVITIES (CAMEROON)

V. SOUTHEAST ASIA ACTIVITIES



The map above the Southeast Asia region displays where RESPOND currently works (in red). The Mekong River is represented by the white line that runs from Vietnam south to Cambodia. The stars represent capital cities, and Thailand’s capital city, Bangkok, is where the RESPOND Southeast Asia Regional Hub Office is located.

MANAGEMENT REPORT

PROJECT ADMINISTRATION:

Project administration was focused on providing extensive administrative and logistical support to RESPOND activities which were heavily implemented through direct assistance especially during this quarter as follows:

- Supported and co-organized the Emerging Zoonotic Diseases (EZD) Short Course at the Faculty of Public Health, Mahidol University from September 26 to October 7, 2011. This event is aimed at medical, veterinary and public health faculty interested in the ‘one health approach to zoonotic disease emergence’. Participants were nominated and selected from

SEAOHUN (Southeast Asia One Health University Network) which comprised 14 faculties, 10 universities in Indonesia, Malaysia, Thailand, and Vietnam.

- Organized 2nd SEAOHUN Working Group meeting on October 10 and 11, 2011, at the Hilton Kuala Lumpur, Malaysia. This was a follow up to the meeting conducted on August 29, 2011 in Bangkok.
- Supported plenary speakers, as well as 53 participants from Cambodia, Lao PDR, Indonesia, Malaysia, Thailand, and Vietnam to attend The 6th TEPHINET BI-Regional Scientific Conference. The meeting was held at the Nusa Dua Convention Center, Bali, Indonesia from November 7-11, 2011 with the theme “Global Surveillance Networking for Global Health”.
- Supported the first Vietnam National One Health University Network Workshop in Nha Trang, Vietnam on November 22, 2011. The workshop was very successful and enthusiastically received by the universities.
- Supported and co-organized an EPT meeting in Vientiane, Lao PDR on November 23, 2011. Participants included government officials from Vientiane and RESPOND EPT partners in Lao PDR.
- Organized 3rd SEAOHUN Working Group on November 24 and 25, 2011, at the Conrad Hotel, Bangkok. Mainly to prepare content and agenda to present to SEAOHUN Deans for the upcoming Dean’s Meeting.
- Organized 2nd SEAOHUN Deans’ Meeting at the Hilton Opera Hanoi, Vietnam from on December 6 and 7, 2011.
- Supported and conducted regional Emerging Infectious Diseases Preparedness Forum in Bangkok, Thailand on October 6, 2011 around the theme: ‘Towards a Safer World: Promoting Lessons Learned from the Pandemic Experience’.
- Supported and conducted regional Emerging Infectious Diseases Preparedness Forum in Bangkok, Thailand on December 1, 2011 around the theme: ‘Thailand Floods 2011 – Emerging Infectious Diseases Risks and Mitigation Measures’.

There were other activities RESPOND SEA planned for support and co-organization during this quarter (i.e. Thailand National One Health University Network Workshop – October 31 to November 2, 2011 - and the 4th VET Training Workshop – November 13-19, 2011), but were postponed due to flooding in Bangkok and Thailand.

In addition, staff in the regional office were heavily engaged in the preparation and coordination for the GHI (Global Health Institute), which will be conducted in Chiang Mai, Thailand from January 30 to February 9, 2012. The intensive program of study offered at this GHI will focus on developing One Health leadership and technical capacity, which are both critical elements in transforming the current and future workforce to ensure preparedness for new and emerging public health challenges.

Specifically, the course will provide training opportunities designed to catalyze trans-disciplinary teaching and learning capacity in response to the challenges of emerging and re-emerging infectious and zoonotic diseases. The GHI target participants are Master's or doctoral level students, and mid-to-senior level career professionals, from SEAOHUN university faculty members from a range of One Health disciplines. Seven scholarships are available for participants from each SEAOHUN member faculty. Any unclaimed scholarships will be offered to participants of affiliated faculties from universities within the SEAOHUN region.

STAFFING:

- Candidates for Senior Technical Officer were interviewed and final candidates were identified.
- RESPOND contracted Ms. Pratin Dharmarak as Senior Technical Officer, who started in her position on November 28, 2011.
- Many candidates for Regional Network Manager were interviewed, but a suitable candidate is yet to be identified. The SEA office continues the search for a candidate to fulfill this position.
- SEA office organized an annual staff retreat from December 14-16, 2011 at Hua Hin, Thailand. Margaret Morehouse from TRG helped facilitate the retreat.

LESSONS LEARNED AND PROPOSED SOLUTIONS:

The SEA office expects to be fully staffed early in Quarter 2 of Year 3 of the project. Nevertheless we will still need significant STTA support to implement ongoing activities and new activities planned for SEAOHUN. In particular, the SEA office is working on a plan to mobilize additional capacity to support the start-up and development of the SEAOHUN Secretariat at the Faculty of Veterinary Medicine at Mahidol University. We will also continue to utilize direct assistance to support our programs rather than grants, as the grants process has proven to be too slow and does not facilitate efficient implementation of programming.

PROGRESS REPORT – SOUTHEAST ASIA REGIONAL ACTIVITIES

Below is a summary of progress toward RESPOND Southeast Asia regional activities during the reporting period, organized by RESPOND LOWs and sub-activities.

LOW 3: OUTBREAK RESPONSE CAPACITY BUILDING

LOW 3.1 STRENGTHEN HUMAN AND ORGANIZATIONAL CAPACITY TO IMPROVE OUTBREAK RESPONSE

Sub-Activity 1.2.1 SE: Implement Twinning and Mentoring Program

- Conducted 2nd Working Group meeting October 10-11, 2011, in Kuala Lumpur, Malaysia;
- Conducted 3rd Working Group meeting November 24-25, 2011 in Bangkok, Thailand;
- Conducted Vietnam National One Health meeting November 22, 2011 in Nha Trang, Vietnam;
- Conducted 2nd Deans' Network meeting of SEAOHUN December 6-7, 2011, in Hanoi, Vietnam;
- Conducted 1st Executive Board meeting on December 8-9, 2011, in Hanoi, Vietnam;
- Began mapping of curriculum with Vietnamese universities in November, 2011.

Planned Activities:

- Conduct Thailand National One Health meeting in Q2 in Bangkok, Thailand;
- Open and complete establishment of Network Coordinating Office in Thailand;
- Open and complete establishment of Network Coordinating Office in Vietnam;
- Prepare for regional Global Health Institute 28 January – 9 February, 2012 in Chiang Mai, Thailand;
- Develop activity workplan for SEAOHUN by January 31, 2012;
- Conduct 2nd Executive Board meeting beginning of February, 2012 in Jakarta;
- Launch 1st inaugural meeting of INDOHUN members to plan INDOHUN activities in Indonesia in March.

Sub-Activity 1.2.2 SE: Support relationship between Khon Kaen Veterinary Medical School (VMKKU) and the Faculty of Agriculture, Nabong Agricultural College (NAC) campus, National University of Laos (NUOL)

- Continue to support staff from NAC/NUOL currently in the Masters of Public Health program at KKU, as this is an important activity to build staff capacity to support the newly established veterinary curriculum at NAC.
- Continue to support Faculty and student exchanges between KKU/VMS, Tufts and NAC/NUOL in order to support the first cohort of veterinary science graduates in Lao PDR, currently in Year 3 of a five-year course.
- Held meeting with US ambassador and KKU faculty to discuss KKU/NAC partnership.

Planned Activities:

- Support curriculum co-development in the areas of outbreak response and emerging infectious disease investigation and control between the faculties of Public Health and Veterinary Medicine at KKU, and between KKU/VMS and NAC/NUOL faculties.
- Coordinate visits to KKU and NAC/NUOL with Tufts faculty to meet Deans and faculties and discuss plans for 2012, which the U.S. Ambassador to Laos will also attend.
- Plan stakeholder workshop to discuss Lao government plans for NAC/NUOL.

LOW 3.2 SUPPORT OUTBREAK RESPONSE ACTIVITIES

Sub-Activity 2.4.4 SE: Support Regional TEPHINET Conference in Bali, Indonesia

- Conducted TEPHINET conference in Bali;
- Worked with SAFETYNET to identify candidates for scholarship support;
- Worked with SAFETYNET to develop pre-conference workshop programming;
- Supported regional FET Fellows, supervisors, and alumni for 6 target countries to attend and participate in the TEPHINET conference.

Planned Activities:

There are no planned activities at this point.

COUNTRY ACTIVITIES - THAILAND

LOW 3: OUTBREAK RESPONSE CAPACITY BUILDING

LOW 3.1 STRENGTHEN HUMAN AND ORGANIZATIONAL CAPACITY TO IMPROVE OUTBREAK RESPONSE

Sub-Activity 1.5.2 SE: Applied field training for wildlife veterinary medical officers and field pathologists

RESPOND planned to conduct the fourth and final workshop from November 13-19, 2011, to focus on forensic investigations, data management putting wildlife epidemiological knowledge into practice in order to go forward with a One Health approach. This workshop was postponed due to the flooding crisis in Thailand.

Planned Activities:

RESPOND will conduct the fourth and final workshop in 2012, which will focus on forensic investigations, data management putting wildlife epidemiological knowledge into practice in order to go forward with a One Health approach. This workshop will be conducted at Huai Kha Kaeng National Park in Thailand.

Sub-Activity 1.5.5 SE: Master's Degree Program for Human & Animal Health Professionals at Thailand's Field Epidemiology Training Program (FETP/FETP-V) and International FETP (iFETP) to Strengthen Career Opportunities, and the Management, Supervisory and Response Capacity for Outbreaks and Epidemics of Zoonoses and Emerging infectious Diseases

- Completed enrollment of seven (7) FETP/FETP-V/iFETP students or graduates from Thailand or other countries in a Thai university Masters or equivalent degree program (e.g. postgraduate diploma) based on governmental priorities.
- Provided support for enrolled students to participate in field projects, including outbreak investigations and surveillance evaluation activities, as part of their training, in collaboration with FETP/FETP-V.

- Provided support to FET Fellows and select supervisors and alumni attending the regional TEPHINET conference, held in Indonesia in November, 2011.
- Provided support for university tuition costs to enroll in an existing Masters or equivalent degree program in Thailand.
- Provided laptop computers to program participants for use during the training, as well as two laptops for the FETP/FETP-V program, for use in program administration and during outbreak investigations.

Planned Activities:

- Review the progress of supported students.
- Provide support for students to travel to an international scientific conference (e.g. EIS Conference, Atlanta) in Q3 to present the findings of their fieldwork, enhance career development, increase knowledge, improve international collaboration on One Health issues, and share experiences with other public health professionals.

Sub-Activity 3.4.4 SE: Support training to strengthen One Health epidemiological teams at the provincial and district levels

- Established working group by Field Epidemiology Association of Thailand (FEAT), Dr. Sopon, DLD, and Ministry of Health to develop curriculum content and training schedule.

Planned Activities:

- Establish selection criteria and assist government where requested to identify trainers to attend training-of-trainer workshops.
- Conduct first training in Q2.
- Deliver short-term training courses in 5 provinces, which will include support for meeting venues and related travel of district and provincial level officials (animal and human health) responsible for disease surveillance and outbreak response activities.
- Conduct Short-term training workshops to improve skills of mentors and trainers overseeing field projects, with the objective of improving the quality of technical supervision.

- Support for subject matter experts to provide technical assistance and mentoring to participants conducting field projects.
- Review and strengthening of existing training materials, as requested, and monitoring and evaluation of selected training courses.
- Strengthen training and coursework, including training of trainers at faculties of public health and nursing to increase epidemiology capacity. Staff working in disease surveillance will participate in short-courses and practical field projects at their work assignments, with agreement of supervisors.

OTHER ACTIVITIES (THAILAND)

The following Southeast Asia Regional sub-activities were active in Thailand this quarter or are planned for next quarter. Details of these activities are found in the section entitled “**Progress Report: Southeast Asia Regional Activities**” since they are considered regional activities (not country-specific activities) for purposes of this quarterly report.

One Health Regional University Networks

(Sub-activity 1.2.1 SE: Planning and implementation of university twinning (Southeast Asia One Health University Network – SEAOHUN))

Refer to section: **One Health Regional University Network -Sub-activity 1.2.1 SE: Planning and implementation of university twinning (Southeast Asia One Health University Network – SEAOHUN)**

Preparation for Global Health Institute (GHI)

RESPOND has been collaborating with the Faculty of Veterinary Medicines of Chiang Mai University to hold the first GHI in Thailand from January 30 to February 9, 2012. The intensive program of study offered to over 100 mid-level human and animal health personnel and graduate students from 14 Faculties of 11 universities in Thailand, Lao PDR, Vietnam, Indonesia and Malaysia will focus on developing One Health leadership and technical capacity, which are both critical elements in transforming the current and future workforce to ensure preparedness for new and emerging public health challenges. Specifically, the course will provide training opportunities designed to catalyze trans-disciplinary teaching and learning capacity in response to the challenges of emerging and re-emerging infectious and zoonotic diseases.

COUNTRY ACTIVITIES - VIETNAM

LOW 3: OUTBREAK RESPONSE CAPACITY BUILDING

LOW 3.1 STRENGTHEN HUMAN AND ORGANIZATIONAL CAPACITY TO IMPROVE OUTBREAK RESPONSE

Sub-Activity 3.4.2 SE: Support training to strengthen One Health epidemiological teams with focus on Applied Veterinary Epidemiology Training (AVET) at selected provincial, district levels

Waiting for grant approval.

Planned Activities:

- Identify appropriate staff to attend training-of-trainer workshop, and design appropriate materials.
- Support delivery of FESC in-service training courses in multiple provinces, including meeting venues and related travel of district and provincial level officials (animal and human health) responsible for disease surveillance and outbreak response activities.
- Strengthen skills of mentors and supervisors overseeing trainees responsible for 2 to 3-month long field projects focused on outbreaks and disease surveillance systems.
- Support for subject matter experts to provide technical assistance during FESC and field projects.
- Review and strengthen existing training materials in collaboration with FETP-Vietnam, WHO, and CDC, based on monitoring and evaluation of selected training courses.

OTHER ACTIVITIES (VIETNAM)

The following Southeast Asia Regional sub-activities were active in Vietnam this quarter and are planned through next quarter. Details of these activities are found in the section entitled “**Progress Report: Southeast Asia Regional Activities**” since they are considered regional activities (not country-specific activities) for purposes of this quarterly report.

One Health Regional University Networks

(Sub-activity 1.2.1 SE: Planning and implementation of university twinning (Southeast Asia One Health University Network – SEAOHUN))

Refer to section: **One Health Regional University Network -Sub-activity 1.2.1 SE: Planning and implementation of university twinning (Southeast Asia One Health University Network – SEAOHUN)**

COUNTRY ACTIVITIES – LAO PDR

LOW 3: OUTBREAK RESPONSE CAPACITY BUILDING

LOW 3.1 STRENGTHEN HUMAN AND ORGANIZATIONAL CAPACITY TO IMPROVE OUTBREAK RESPONSE

Sub-Activity 1.5.6 SE: Monitoring and disease surveillance training for Department of Forestry Protected Area (PA) staff and Forestry Volunteers in Lao PDR

- Identified partner for activity in-country (WCS);
- Finalized grant and activities.

Planned Activities:

Grant to be submitted to USAID in Q2.

3.4.5 SE: Support training to strengthen One Health epidemiological teams at selected provincial, district, and village levels

- Identified partner for activity in-country (NEIDCO);
- Worked closely with the Lao PDR mission in supporting NEIDCO in the grant development and application process;
- NEIDCO prepared a well articulate narrative application for the One Health outbreak response training planned to take place in 2012;
- Finalized grant and activities.

Planned Activities:

- Review proposed budget;
- Submit completed grant to USAID;
- Provide technical assistance to NEIDCO in its logistics and planning of the training activities;
- Provide technical assistance to implement the activity;
- Obtain support from in-country staff of US-CDC, WHO and FAO to review existing training materials and design additional/new materials appropriate for the provincial and district training to fit the operational context of Lao PDR.

OTHER ACTIVITIES – LAO PDR

- Supported and facilitated EPT Planning meeting with all EPT partners, Government of Lao counterparts and USAID on November 23, 2011.
- Refer to section: **Support for Regional Academic Collaboration**
- *Sub-activity 1.2.2 SE: Support existing twinning relationship between Khon Kaen University Veterinary Medical School (KKU/VMS), and Nabong Agricultural College (NAC)/National University of Laos (NUOL)*

COUNTRY ACTIVITIES - INDONESIA

3.4.1 SE: District and Provincial Zoonotic Disease Outbreak Response Training, Indonesia

Identified activities and partners for a limited competitive bid.

Planned Activities:

- Write RFP and accept grant applications.
- Submit successful grant application to USAID.

OTHER ACTIVITIES (INDONESIA)

The following Southeast Asia Regional sub-activities were active in Indonesia this quarter or are planned for next quarter. Details of these activities are found in the section entitled “**Progress Report: Southeast Asia Regional Activities**” since they are considered regional activities (not country-specific activities) for purposes of this quarterly report.

One Health Regional University Networks

(Sub-activity 1.2.1 SE: Planning and implementation of university twinning (Southeast Asia One Health University Network – SEAOHUN))

COUNTRY ACTIVITIES - CAMBODIA

Sub-Activity 3.4.7 SE: Support training to strengthen One Health epidemiological teams, including MOH and MOA staff, at selected provincial and district levels (New - Year 3 Activity)

Continued dialogue and collaboration with other EPT partners, in particular, WHO and the US-CDC who are working with Cambodia Department of Communicable Disease Control for the February 2012 Applied Epidemiology Training (AET).

Planned Activities:

- Attend EPT meeting in Phnom Penh in January 2012 to discuss next steps for RESPOND.
- Support Applied Epidemiology Training for government staff as conducted by WHO.

OTHER ACTIVITIES (CAMBODIA)

- Continue dialogue for wildlife health capacity building with MAFF to develop a strategic plan for wildlife planning.

COUNTRY ACTIVITIES - MALAYSIA

The following Southeast Asia Regional sub-activities were active in Malaysia this quarter or are planned for next quarter. Details of these activities are found in the section entitled “**Progress Report: Southeast Asia Regional Activities**” since they are considered regional activities (not country-specific activities) for purposes of this quarterly report.

One Health Regional University Networks

(Sub-activity 1.2.1 SE: Planning and implementation of university twinning (Southeast Asia One Health University Network – SEAOHUN))

Refer to section: **One Health Regional University Network -Sub-activity 1.2.1 SE: Planning and implementation of university twinning (Southeast Asia One Health University Network – SEAOHUN)**

VI. MONITORING & EVALUATION

RESPOND sub-activity (program) results have been tracked across regions since the inception of the project. While the quality of the data collection has improved in each office over time, the monitoring data has been captured consistently across offices, to enable the ability to summarize the data across the entire project.

Across regions, we are monitoring all sub-activity events, which include: campaigns, conferences, distance learning courses, field experience, lectures, meetings (stakeholder), seminars, study tours, trainings, and workshops. Except for meetings, all participant values below exclude RESPOND staff, facilitators, trainers, support, etc.

The first three quarters of Year 1 were spent in discovery/start-up mode, where there were no significant programmatic results. Quantifiable sub-activity results begin in Year 1 Quarter 4 (Y1Q4.) Non-sub-activity related events (e.g., discovery, internal RESPOND, USAID meetings) are excluded from the results.

Q1 HIGHLIGHTS

- For Year 3 Quarter 1 (Y3Q1), highlights, including both successes and opportunities for improvement, include: South East Asia One Health University Network (SEAOHUN) Dean's Meeting in Vietnam: 2 day meeting (57 attendees) in Hanoi focused on reviewing the activities implemented by the interim Working Group, reaching agreement on key provisions for SEAOHUN governance, and identifying activities that are of value to the Network, would facilitate collaboration among Universities, and which could be started in the near term.
- OHCEA 1st Regional CCC Meeting in Kampala: 5 day meeting (58 attendees) served as an opportunity for OHCEA to directly engage the stakeholder groups and allow for an active exchange with them to define their roles and responsibilities and agree to planned activities for the remainder of Year 3.
- Validation of the draft National Control Program of emerging and re-emerging zoonoses in Cameroon: a 3 day meeting (34 attendees) was convened in Yaoundé to review and validate the draft program started earlier in the year

- A total of 18 sub-activity events occurred in Quarter 1, which hit a new high, as compared to the previous quarter high of 15 events. This is in spite of external forces (flooding, national elections) hindering activities in Thailand and DRC.
- The number of event participants decreased 6%, compared to Quarter 4. Workshops accounted for 66% of the participation, stakeholder meetings (16%), press conference/public lecture/presentations (11%), and training the remaining 8%.
- Government representation (45%) at RESPOND events continued the lead over university participation (35%) in the 1st Quarter.
- While nationality of event participants is largely dependent on event location, for the Q1 events conducted, participants were primarily from DRC (27%), Vietnam (14%), Uganda (11%), Thailand (9%), and Cameroon (7%).
- Overall, event participants have rated Y3Q1 RESPOND events as good (3.2 out of 4) across regions, which is the lowest average quarterly score received to date.
- From participants' perspective, RESPOND events have continued to help expand/clarify their understanding of "One Health" (3.2 out of 4), slightly above the previous score of 3.1.
- The Vietnam Knowledge & Utilization baseline assessment was completed by the M&E team. A summary is included later in the M&E section.
- An external event evaluation survey was developed and used for RESPOND-supported participants attending events hosted by other organizations (e.g., conferences, seminars), in order to understand the value of these events for RESPOND. Further details are included later in the M&E section.
- The Environmental Mitigation and Monitoring Plan (EMMP) and Environmental Mitigation and Monitoring Annual Report were both delivered to USAID. RESPOND has implemented a consistent environmental mitigation/monitoring approach in all hub offices. Further details are included later in the M&E section.

EVENT OVERVIEW

To date, after the initial discovery period for each office, the majority of sub-activity events have been meetings (stakeholder), trainings and workshops. External events (e.g., UMN’s Public Health Institute (PHI)), where RESPOND supports participants to attend, are excluded from the following analysis, but are presented separately in the following “Other Results” section.

The number of completed events (Figure 1) across regions hit a new high, in spite of external forces hindering activities in Thailand (flooding) and DRC (elections.) Eighteen events occurred, with West Congo leading the activity with eight events.

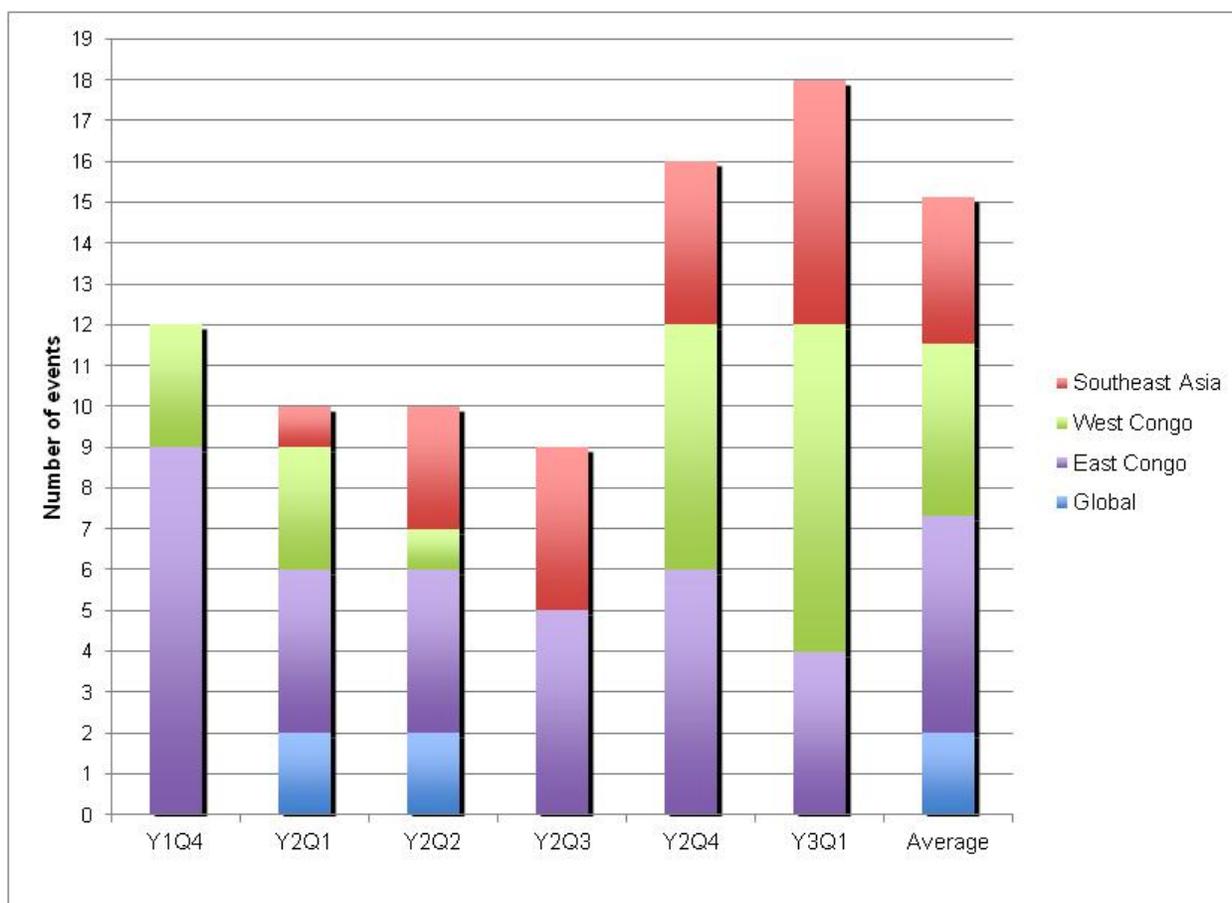


Figure 1: Number of Completed Events by Region and Quarter

Q1 event attendance declined 6% from Q4 (Figure 2.) While training declined to 8 % of the participation, workshop participation increased to account for 66% of the participation. Note that Year 1 Quarter 4 participant level was unusually high, due to large public lectures/campaigns.

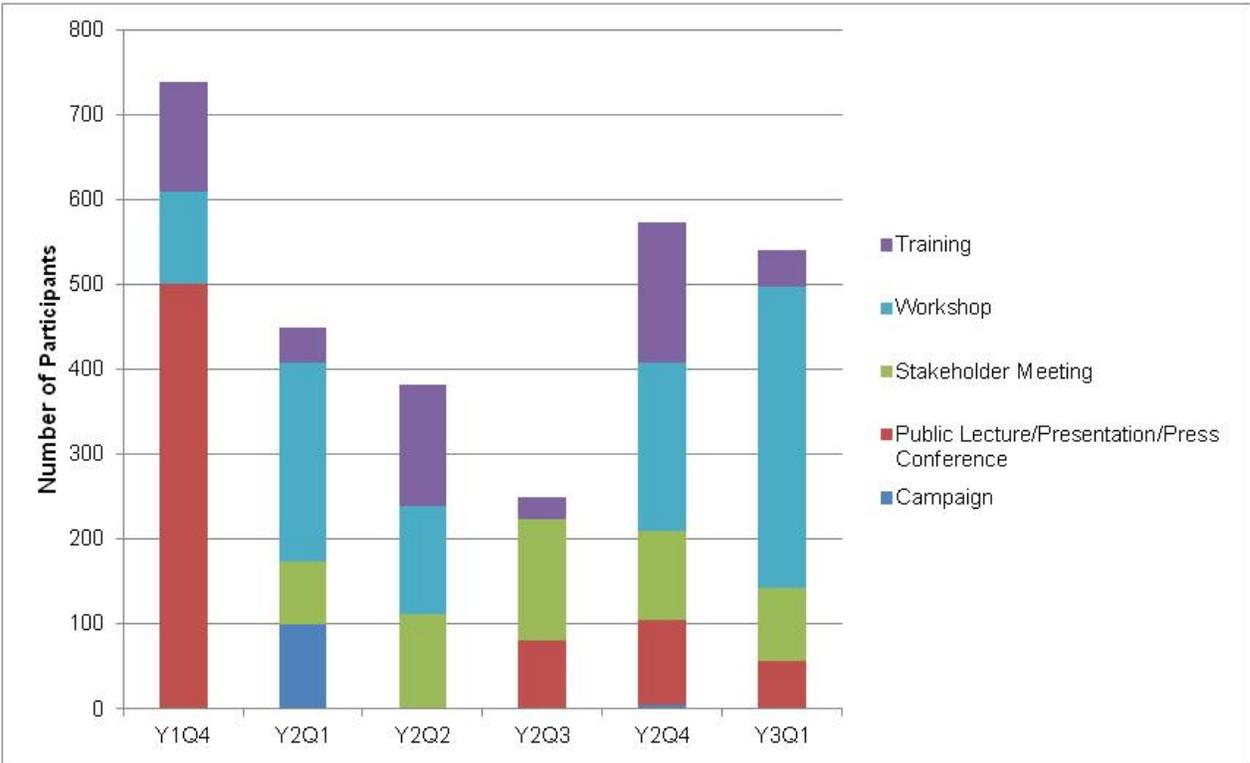


Figure 2: Event Participants by Quarter and Event Type

At the end of every event, we collect feedback from participants to understand how the event was received, usefulness, whether or not objectives were met, and more importantly how to improve future events of a similar nature. Currently we do not have enough data to show the results at the regional level. But at a RESPOND-wide aggregate level, the results are very promising, as the average rating for all events falls between “good” and “excellent” (Figure 3). For Q1, only 1 event (East Congo – OHCEA CCC meeting) had evaluation results available for this quarterly report. The average rating was near “good” (3.2), which is the lowest average quarterly score received to date, yet still a promising score. The remaining Q1 event evaluation results will be presented in the next quarterly report.

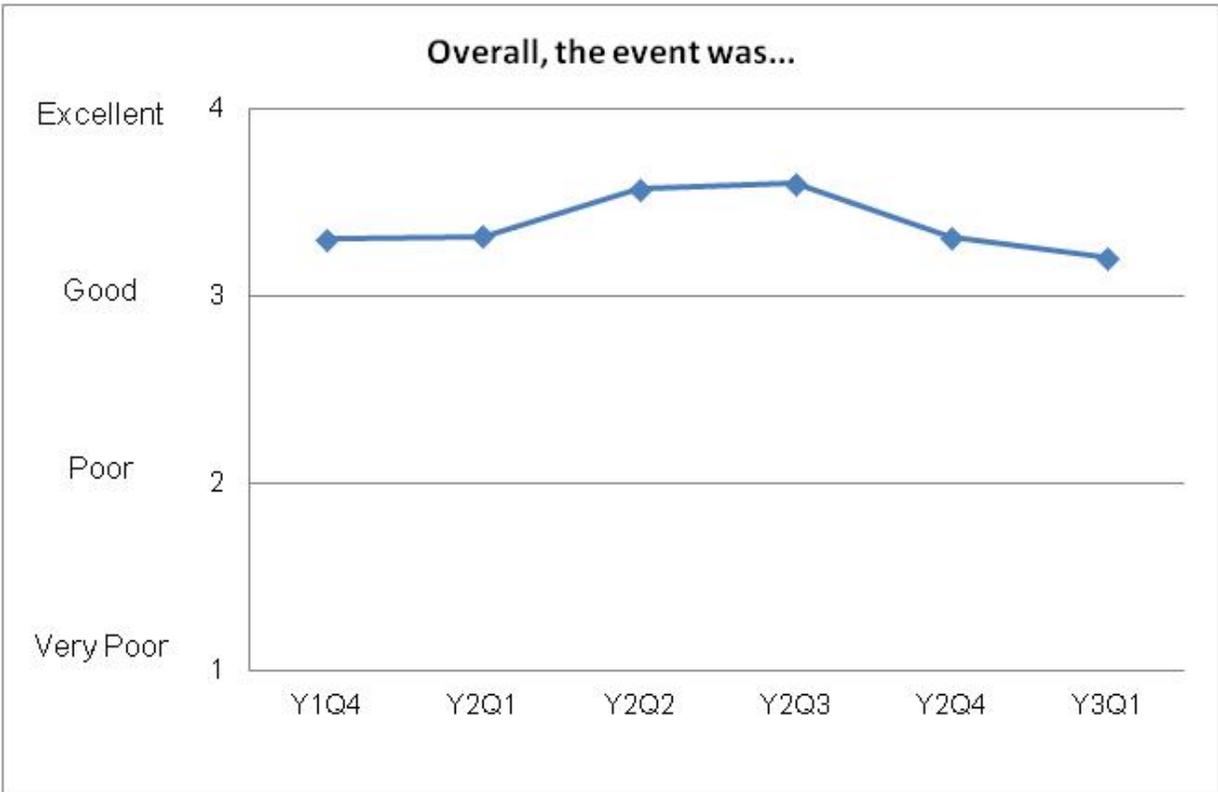


Figure 3: Event Evaluation Results: “Overall the event was...”

Another question that is asked in the event evaluation is the participant’s agreement with the statement that the event helped expand/clarify their understanding of “One Health”. The results have been consistently high each quarter. For Q1, only 1 event (East Congo – OHCEA CCC meeting) had evaluation results available for this quarterly report. The average rating was near “good” (3.2), which is just above the lowest score (3.1) received to date, yet still a promising score. The remaining Q1 event evaluation results will be presented in the next quarterly report.

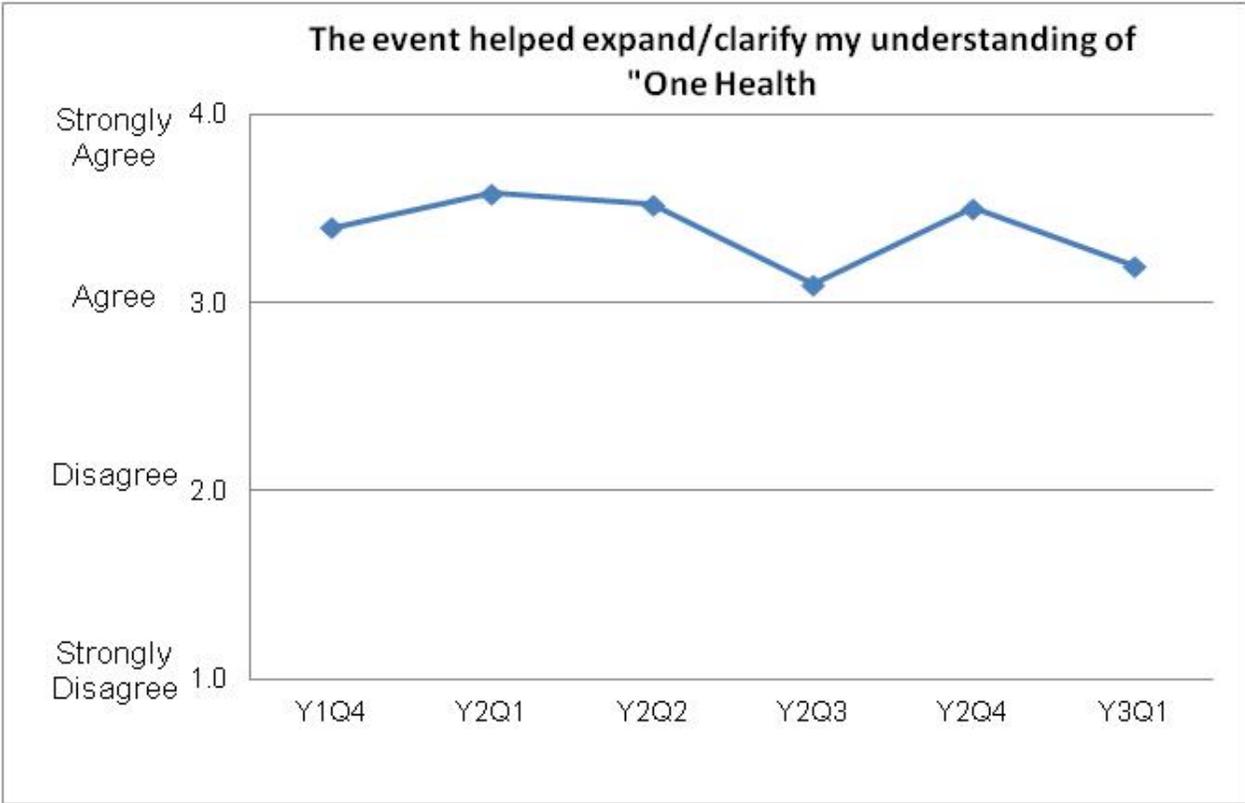


Figure 4: Event Evaluation Results: “This event helped expand/clarify my understanding of “One Health”

EVENT PARTICIPANT PROFILE

In the first quarter of year three, participants to RESPOND events came from five major types of organizations (Figure 5.) They included government, which was the largest group making up, on average, around 45% of all participants, followed by representatives from universities (35%), community-based and professional organizations (10%), non-governmental organizations (5%), and private companies (<1%). The remaining 5% came from uncategorized organizations, due to insufficient data collection. By region, participants from the government sector made up the largest group at West and East Congo (60%) events, followed by Southeast Asia (25%). University participants were most prominent in the Southeast Asia region (50%), followed by East Congo (20%) and West Congo (15%).

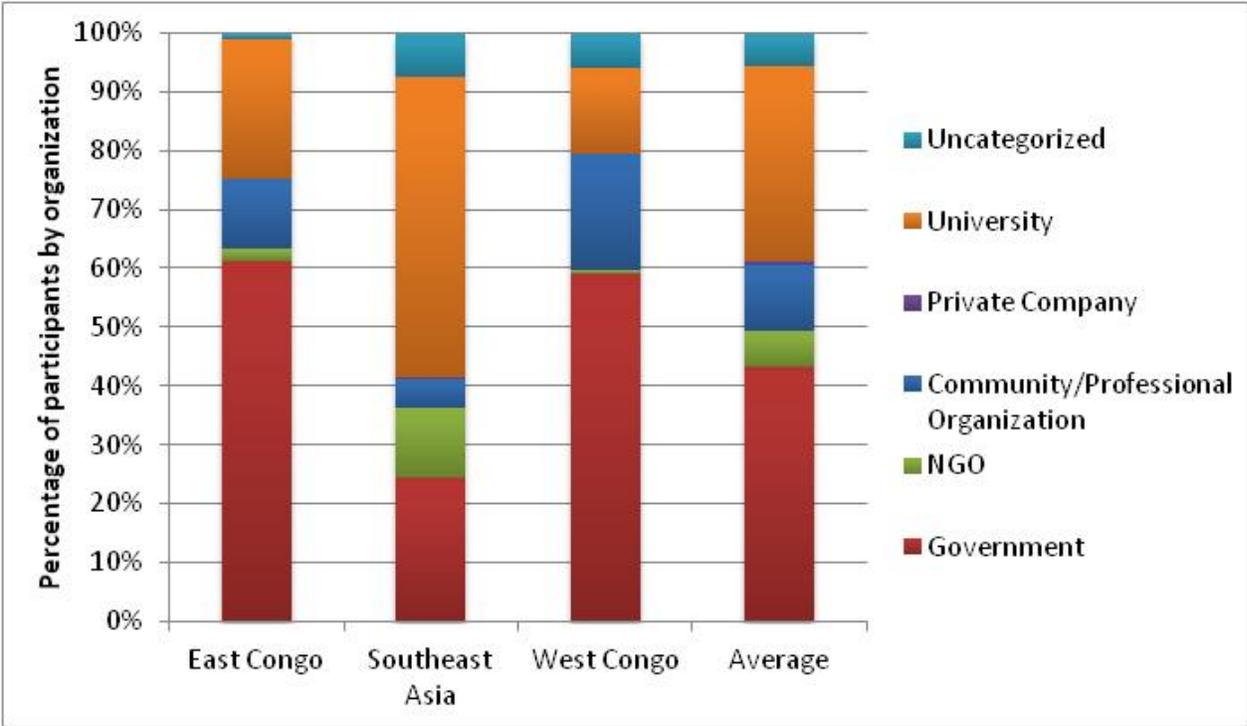


Figure 5: Q1 Participant by Organization Type and Region

Male attendees continued to outnumber their female counterparts throughout the six quarters (Figure 6.) In the latest quarter, female participation was at approximately 25%. Female participation has declined in three consecutive quarters.

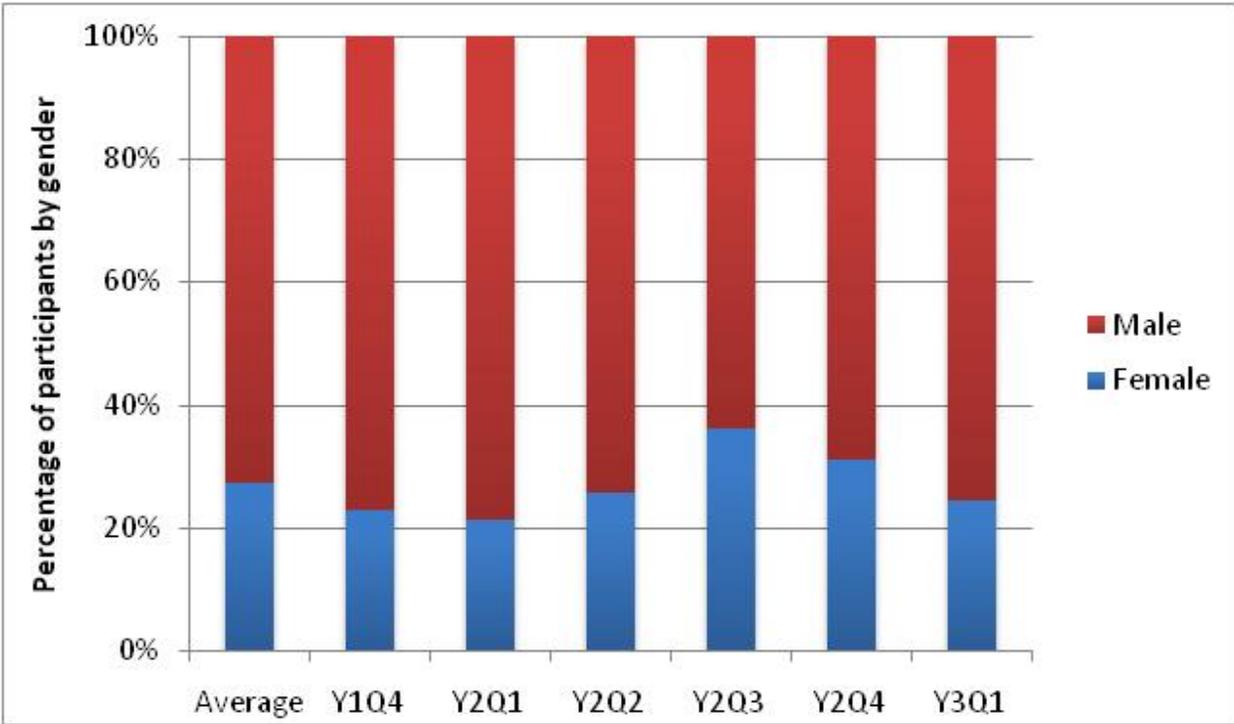


Figure 6: Gender by Quarter

Figure 7 is a breakdown of all RESPOND event participants from Q1 by their nationality. DRC nationals represented nearly one third of all event attendees during the period. Vietnam (14%) and Cameroon (9%) rose up in the ranks due to several large events in both countries.

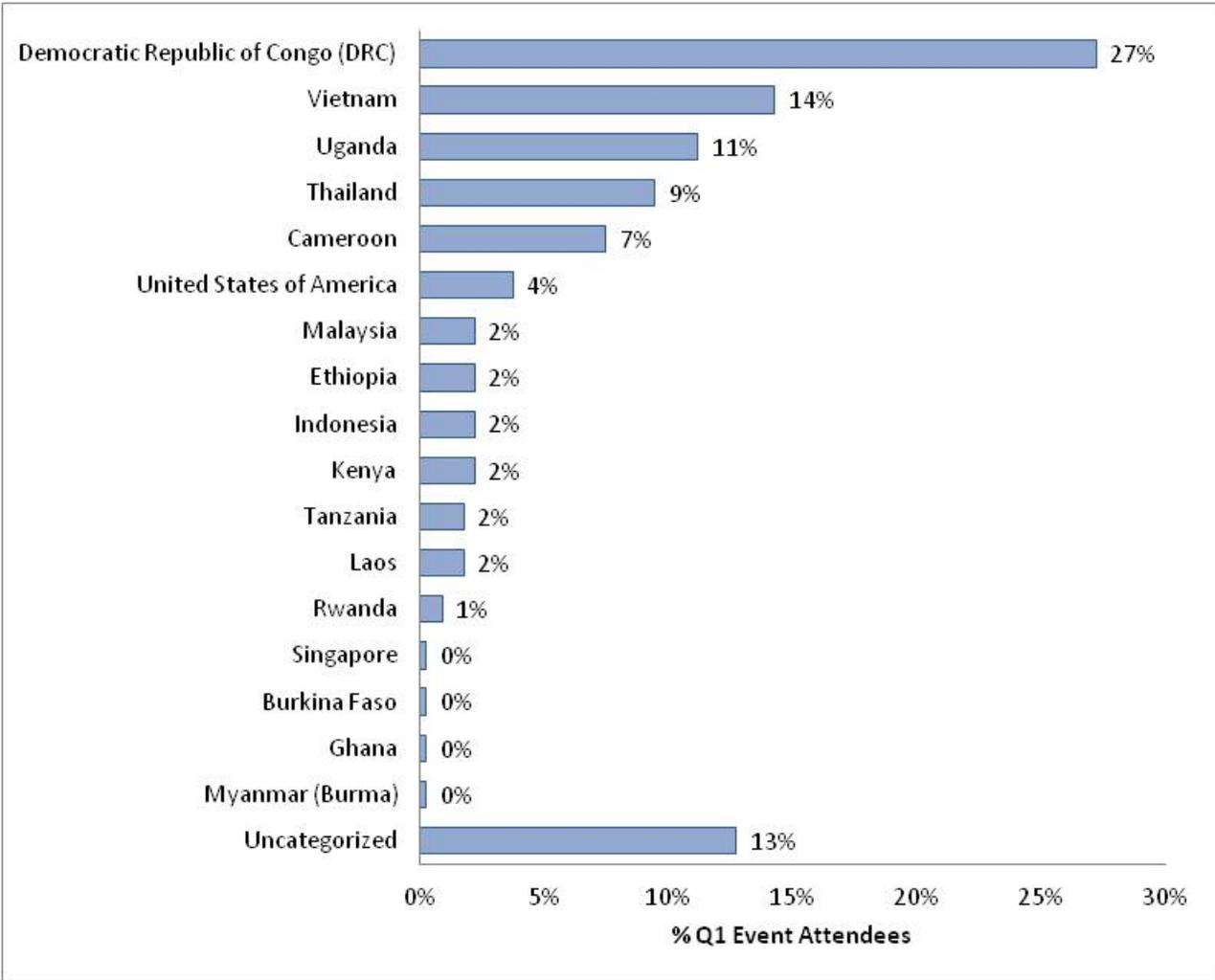


Figure 7: Q4 Event Attendees by Nationality

OTHER RESULTS

In addition to the sub-activity event results noted above, in Q1, RESPOND accomplished the following:

Network:

- Global: Developed a framework, at the global level, for strengthening network development and activities. Regional level development to be conducted within country-specific sub-activities
- East Congo: OHCEA – First draft of the OHCEA ‘Master Plan’
- East Congo: OCHEA – Evaluation tool created for the planned RESPOND funded Veterinary Public Health (VPH) Residency in Uganda

Participant support at external events:

- East Congo: The 4th AFENET Scientific Conference (48 participants)
- SE Asia: TEPHINET 6th Bi-Regional Scientific Conference: Global Surveillance Networking for Global Health (53 participants)
- SE Asia: EID Pandemic Preparedness Forum: Theme: Thailand Floods 2011: Emerging Infectious Disease Risks...(37 participants)

Other:

- Global: To enhance focus on role of govt and intl. health agencies in outbreak response and emergency preparedness, hired Jenny Tegelvik, seconded to WHO-AFRO HQ in Brazzaville, Republic of Congo, assigned to Emergency Preparedness and Response office.
- East Congo: Implementation plan was generated for the next 12 months for the AFENET activities with the M&E logic framework

PROJECT TO DATE

The project to date (PTD) distribution of event attendees according the region that hosted the event and the event type are displayed in Figure 8. The East Congo Basin RESPOND Office (Uganda) has hosted the highest number of event participants, even with the exclusion of the lecture event in Year 1 Quarter 4, by far the largest single event in RESPOND's history. To date, RESPOND has had 3,000 participants, which includes 500 trainees and 1,000 workshop attendees.

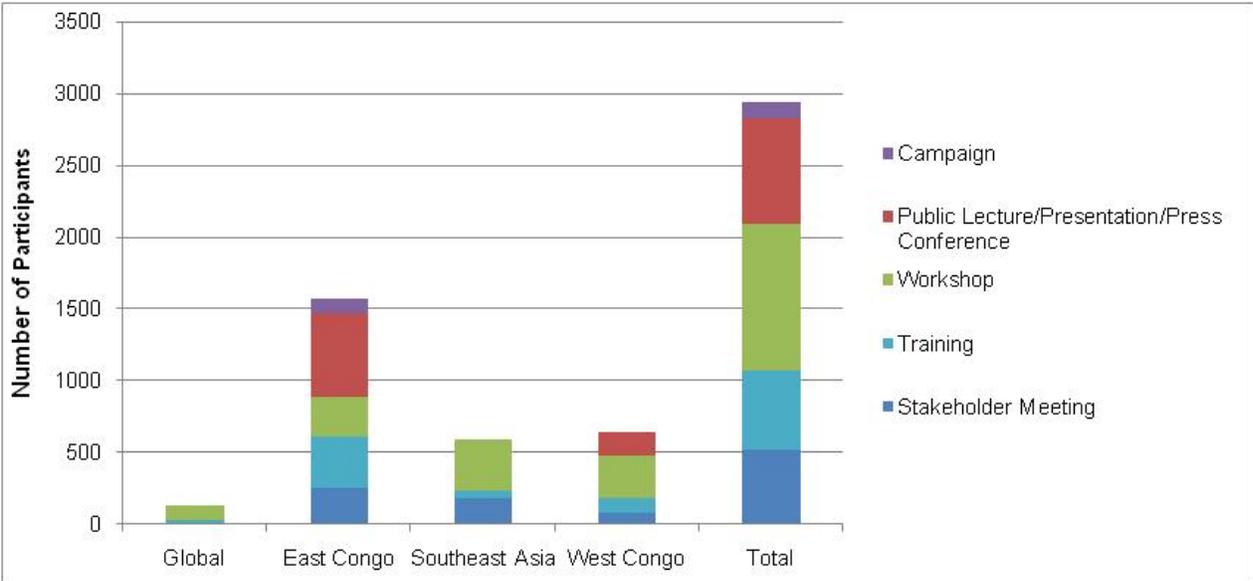


Figure 8: Event Participants by Host Region and Event Type (PTD)

For each event, we also track participant profile information to understand the background/role of participants and the organizations they represent. Generally, attendees to RESPOND events came from five major types of organizations (Figure 9.) They included universities, which was the largest group making up 39% of all participants, followed by representatives from governments (35%), non-governmental organizations and professional, community-based and professional organizations /associations (8%), and private companies (2%). The remaining 8% comes from organizations which are unknown (due to lack of data collection at particular events.)

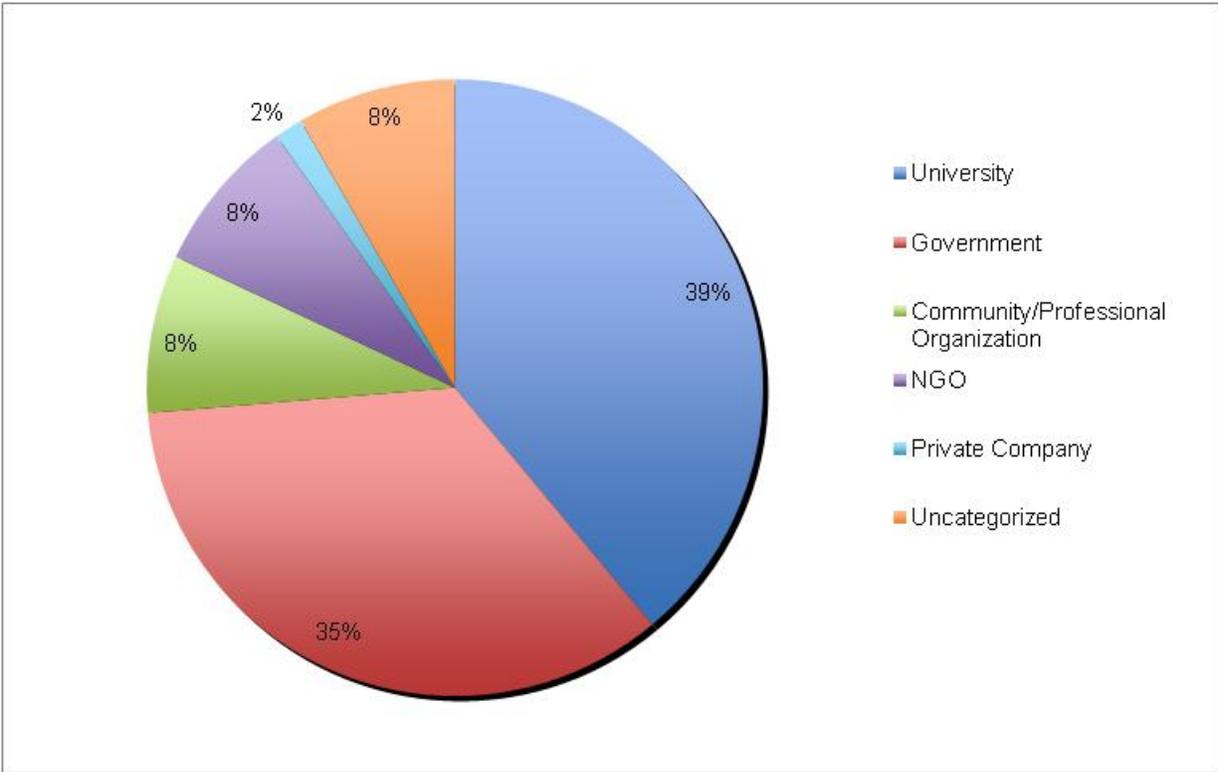


Figure 9: Participant by Organization Type (PTD)

Figure 10 displays the nationalities of all RESPOND event participants. Unsurprisingly, the highest proportions of participants are from countries where large RESPOND events have been held, including the Democratic Republic of Congo, Uganda, Vietnam, and Thailand. Figure 10 also demonstrates that the program reach extends far beyond the countries that have hosted events. Overall, individuals from 50 different countries (not all shown) have participated in RESPOND events.

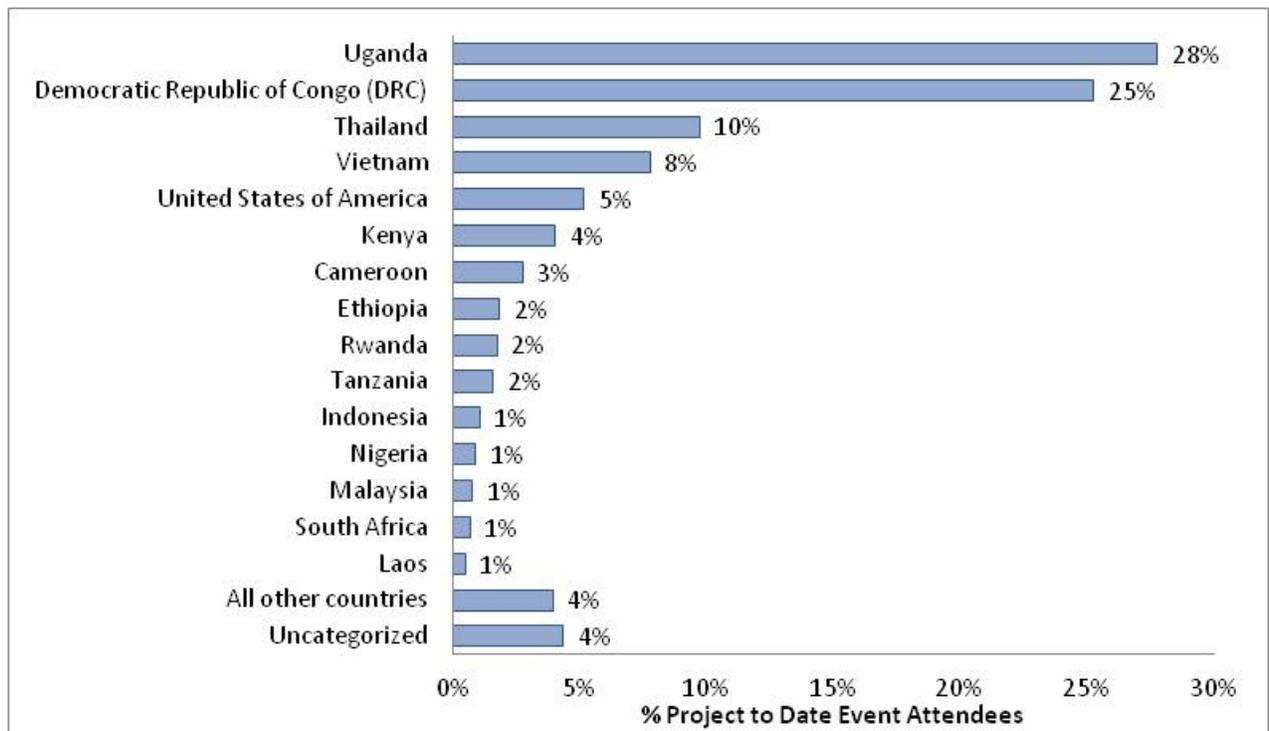


Figure 10: Participant by Nationality (PTD)

VIETNAM BASELINE ASSESSMENT

During Quarter 1, a baseline assessment was completed of the USAID-supported One Health university networks that have recently been initiated in Vietnam: The South East Asia One Health University Network (SEAOHUN) and the Vietnam University One Health University Network (VUOHUN). International literature on university partnering indicates that the formative years of these partnerships are the most critical to the sustainability of these relationships. Early negotiations around partnering arrangements shape subsequent experiences. To that end, this activity was designed to collect baseline data on partner expectations, extent of understanding of partner motives and needs, and early identification of issues.

Data were collected through a series of 24 semi-structured interviews of about one hour each between November 28 and December 5, 2011 with relevant stakeholders. Interviewees were drawn from government and university personnel involved with RESPOND. The interview protocol was similar to those previously utilized in similar studies in Thailand and the Congo

basin. Content analysis of interview data was used to identify issues and themes relevant to the partnering relationships.

Summary of key findings

- Higher education leaders in Vietnam have shown considerable initiative in introducing a Vietnam One Health University network (VOHUNET) to create for Vietnam what SEAOHUNET now provides for the region.
- There is universal positive regard for the One Health concept and the creation of a One Health network in Vietnam.
- There is unanimous interest among those we interviewed in wanting VOHUNET to succeed.
- Virtually all respondents expressed a 'system perspective' e.g., an overall commitment to strengthen the higher education system not just their individual institutions. They conveyed little or no sense of competition among universities
- There is pervasive ambiguity about what the concrete activities of the network will be, beyond curriculum mapping and the possible design of courses that could be offered across disciplines.
- Assignment of responsibilities for network activities at the university level is not clear to either administrators or instructional staff, possibly because the network is still new and still getting organized.
- For many instructional staff, the benefits of personal participation in the network are not yet clear. Short-term personal and institutional costs are clearer to respondents than are the long-term payoffs.
- The formal curriculum approval process poses some concerns about timeliness and eventual success of the curriculum revision efforts. Less concern was expressed about the process of changing content of existing courses.
- Sustainability will depend on the extent that network activities are seen as having tangible and immediate payoffs to the participating universities.
- There are sharply different views regarding likelihood of sustainability. One view is that the One Health concept would be sustained in the minds of the participants but that the VOHUNET network is likely to die when USAID funding ends. An alternative view is that VOHUNET will have demonstrated its value and that either government or other donors are likely to provide support for it to continue.

EXTERNAL EVENT EVALUATION

In December, the RESPOND M&E team piloted an online evaluation of four external events that took place during year two. These events, in which RESPOND sponsored One Health professionals from Central and Eastern Africa and South and Southeast Asia to attend, include Australia’s First One Health Congress, the University of Minnesota’s Annual One Health Workshop, the University of Minnesota’s Annual Public Health Institute, and Bangkok’s Putting One Health to Work Workshop. This pilot was an attempt to determine the feasibility of using online surveys for future program evaluations as well as evaluate participant satisfaction and program effectiveness.

Based on the overall and country-level response rates, the feasibility of using online surveys for future evaluations looks promising. Twenty-three participants with valid email addresses on file (85% of all participants) were contacted to complete the online survey. The overall response rate for all four events was 57% and, every country represented, with the exception of the DRC, had a response rate above 50% (see Figure 11). No technical difficulties were reported and Internet connectivity issues did not appear to present a major problem in any of the regions surveyed. However, the feasibility of using online surveys for future events may vary depending on participant demographics and location of residence, particularly if participants come from rural areas with limited Internet connectivity.

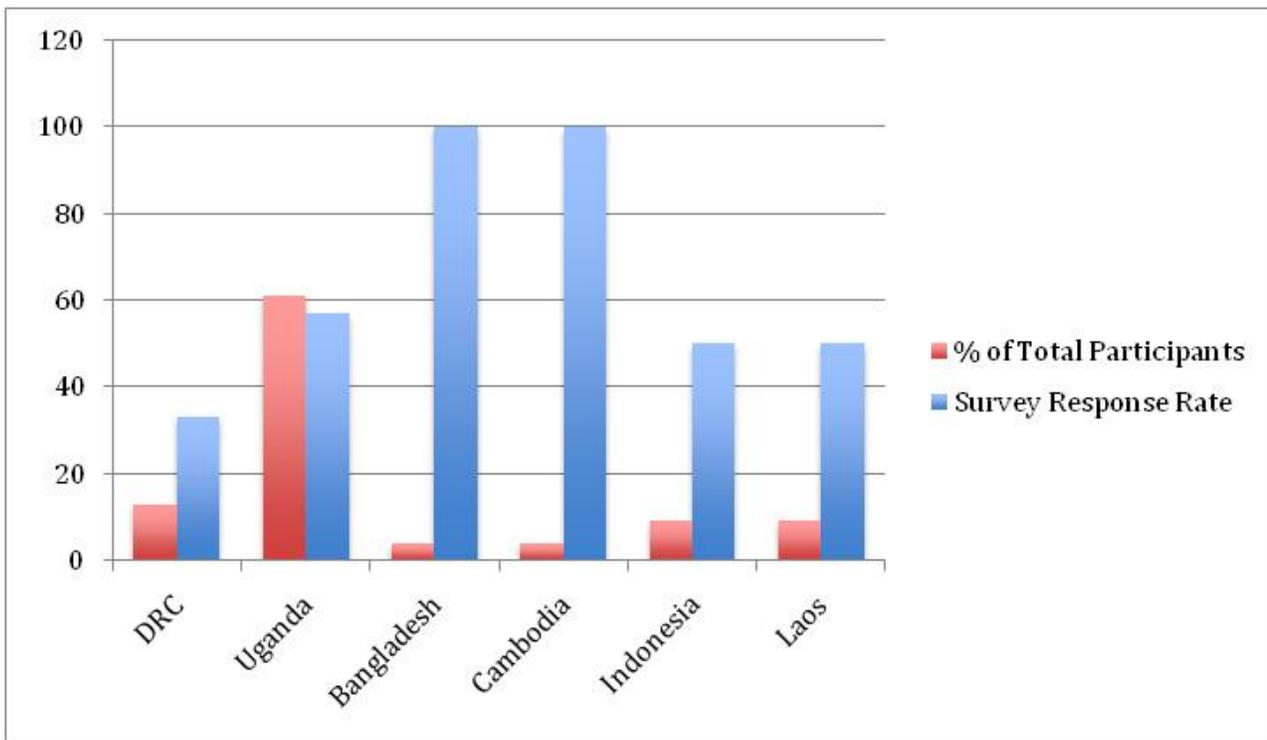


Figure 11: Survey Participants and Response Rate by Country

In terms of the evaluation itself, all four external events received high ratings across all categories measured: i) participant satisfaction, ii) content and relevancy, and iii) impact on the participants' One Health work (see Figure 12). Overall event ratings across all three categories rank 3.5 on a 4-point scale with 1 being the lowest and 4 being the highest. In terms of participant satisfaction, 92% of respondents indicated that their event met their expectations (3.69 average rating) and 100% agreed or strongly agreed that it was worthwhile overall (3.67 average). Regarding event content and relevancy, 92% of respondents indicated that their event was relevant to their personal and professional interests (3.54 average), and 83% affirmed that the information presented was new to them (2.92 average). Participants were also very positive about the impact of their attendance, with 92% agreeing or strongly agreeing that the event they attended helped clarify their understanding of "One Health" (3.5 average) and 100% reporting plans to take future action in their work as a result of what they learned at the event (3.75 average rating). Overall, sponsored participants seemed very optimistic about their experiences and felt that their attendance had a positive impact on their One Health area of work.

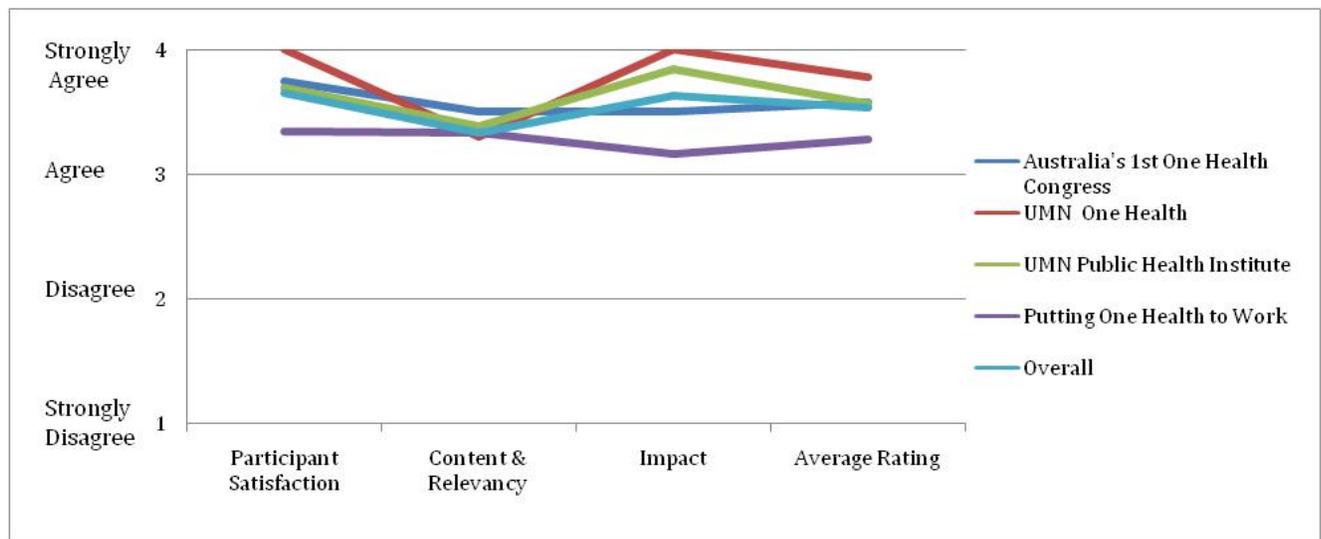


Figure 12: Average Participant Evaluation by Category & Event

ENVIRONMENTAL MITIGATION & MONITORING

In 2011 (Year 2/3), RESPOND developed an environmental mitigation approach for the project.

To date, accomplishments include:

- Environmental Mitigation & Monitoring Plan (EMMP) – The RESPOND EMMP, delivered to USAID in December 2011, describes the methodology used by the project across offices, potential environmental issues and mitigation measures inherent in RESPOND work, best practice review opportunities and an environmental workshop session;
- Process – The RESPOND team developed an environmental mitigation/monitoring approach that tied into the existing regional office/M&E structure. The M&E team is responsible for the overall approach; however the technical team members are responsible for ensuring that the proper consideration/screening occurs, as well as any identified mitigation measures are addressed;
- TAMIS - The DAI database TAMIS is used to collect, maintain and report the environmental information. An integrated screening form was developed in TAMIS to include the initial screening/risk categorization, as well as the identification of related actions, potential issues, mitigation measures, monitoring indicators, etc. While the project administrative staff initiate the screening, through their grant and direct assistance documentation, it is sent to the technical lead and related M&E Officer to complete. Upon completion/certification, the form then resides with other forms of similar status (In Progress, Complete), available for future updates/review. Finally, the database allows for full exporting to support the annual report development, as well as summary views of the data to support decision making/reporting;
- Training – Environmental mitigation/monitoring introductory training occurred in all regional offices in the first half of 2011. While each office received the overview of the requirements and process, the M&E Officers went through more detailed training to understand the process/TAMIS steps;
- Environmental Mitigation & Monitoring Report (EMMR) – The annual report, comprising Year 1 and Year 2 results, delivered to USAID in December 2011, summarized the progress to date, including environmental screening results. As of December 2011, overall environmental review and mitigation measure metrics included:

- Funding component (i.e., grant, direct assistance) environmental reviews completed: 93 out of 94 funding components created
 - Reviews with actions requiring risk mitigation/monitoring: 35 (38% of total)
 - Most common action requiring risk mitigation/monitoring: Training with content to be determined
 - Most common closed action that required mitigation: None at this point, as the only closed actions were due to cancelled activities.
- Environmental workshop session – In order to support the requirements that environmental consideration be properly addressed in our work, a workshop session was developed to be used in RESPOND implementation. The workshop can be a complementary session to an existing training or as a standalone session;
 - Best Practice Reviews – In the course of compiling the EMMP, five issues (noted in the previous section) were identified that require additional consideration/research. The M&E team intends to put together short-term teams to conduct the research/data collection needed to compile a best practice approach to each issue.
 - Year 3 plans - Along with ongoing environmental reviews, mitigation, monitoring, documentation and reporting, additional initiatives include completing a best practice review on waste disposal in remote locations (where incinerators are not available), potentially conducting additional best practice reviews, creating a library of reference material for regional offices to leverage, implementation of the new environmental workshop training module and follow-up regional training.

INDICATORS

As the RESPOND project’s focus has evolved since project inception, the project M&E indicators have also evolved with the changing focus. The indicators below were recently aligned to the project during Year 2. A discussion with USAID to establish targets for the indicators will be forthcoming. At this time, there are indicators (shaded gray) that we have not collected data for as they are either long-term impact indicators (e.g., trainees using gained knowledge) which will be measured at a later date or have proven difficult to obtain (e.g., average time from first report (national level) of suspected disease to arrival of outbreak response teams.) However, these indicators remain in our scope as we intend to address them.

Table 1: RESPOND Indicators by Quarter

Indicators	5 Year Target	Year 1	Year 2	Y3Q1	Y3Q2	Y3Q3	Y3Q4	Total
Training (i.e., training, workshops)*								
Number of trainees	TBD	236	789	398				1,423
Global	TBD		135					135
East Congo	TBD	126	293	119				538
West Congo	TBD	110	143	90				343
Southeast Asia	TBD		218	189				407
Change in trainee knowledge (%)**	50	45	95					70
Global	50		23					23
East Congo	50	45	-					23
West Congo	50		51					51
Southeast Asia	50		21					21
Trainees using gained knowledge (%)	80							
Global	80							
East Congo	80							
West Congo	80							
Southeast Asia	80							

Linkages								
Number of stakeholder meeting participants***	TBD		593	85				678
Global	TBD		-					
East Congo	TBD		329	58				387
West Congo	TBD		105	4				109
Southeast Asia	TBD		159	23				182
Number of press conference/lecture/presentation participants	TBD	600	163	57				820
Global	TBD							
East Congo	TBD	600	79					679
West Congo	TBD		84	57				141
Southeast Asia	TBD							
% of relationships strengthened	TBD							
Global	TBD							
East Congo	TBD							
West Congo	TBD							
Southeast Asia	TBD							
Networking/Twinning/Mentoring								
Number of milestones achieved for networks	TBD		5					5
Global	TBD							
East Congo	TBD		5					5
West Congo	TBD							
Southeast Asia	TBD							
Number of exchanges	TBD		4					4
Global	TBD							
East Congo	TBD							
West Congo	TBD							
Southeast Asia	TBD		4					4
Objectives obtained (%)	80							
East Congo	80							
West Congo	80							
Southeast Asia	80							
Outbreak								
Number of procedural and structural improvements implemented for outbreak	TBD							

response capacity								
East Congo	TBD							
West Congo	TBD							
Southeast Asia	TBD							
Average time from first report (national level) of suspected disease to arrival of outbreak response teams	TBD							
East Congo	TBD							
West Congo	TBD							
Southeast Asia	TBD							
% of outbreak responses following IDSR guidelines	TBD							
East Congo	TBD							
West Congo	TBD							
Southeast Asia	TBD							
Other								
Event rating (average 4 point scale)	3.5	3.3	3.4	3.2				3.3
Global	3.5		3.3					3.3
East Congo	3.5	3.3	3.5	3.2				3.3
West Congo	3.5	3.3	3.3					3.3
Southeast Asia	3.5		3.6					3.6
Event helped expand/clarify One Health understanding (average 4 point scale)	3.5	3.4	3.4	3.2				3.3
Global	3.5		3.6					3.6
East Congo	3.5		3.5	3.2				3.3
West Congo	3.5	3.4	3.6					3.5
Southeast Asia	3.5		3.1					3.1
Campaign reach (people)****	TBD	39,349						39,349
Global	TBD							
East Congo	TBD	9,349						9,349
West Congo	TBD	30,000						30,000
Southeast Asia	TBD							

Number of RESPOND created/modified materials used	TBD		9					9
Global	TBD							
East Congo	TBD		6					6
West Congo	TBD		3					3
Southeast Asia	TBD							

* Excludes facilitators, trainers, and event support staff, Includes facilitators that participate

** Measured through audience analysis/pre-tests and post tests

*** Includes facilitators that participate

**** Estimate of reach. For Year 1, in WC, 30,000 rabies leaflets were distributed

“TBD” To be determined

Data collection forthcoming

SUB-ACTIVITY PROGRESS

The following section catalogues results produced during the quarter and the year to date for RESPOND sub-activities identified in the Year 2 Work Plan.

GLOBAL ACTIVITIES RESULTS MATRIX

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.1	1.1.4 GL	Develop EPT program-wide definition of One Health core competencies. (Fast Track)	TBD	Published, internationally accepted core competencies	Working group meeting on Nov. 9 th , 2011 (13 participants) to review potential competencies (1800+), and sources (80+). Group agreed to set of major competency domains. Review results of subject matter interviews (20), which are being transcribed. On Nov. 10 th , a subgroup compiled a draft of competencies, pending additional input.	Invitations sent to PREDICT, PREVENT, IDENTIFY CDC and USDA for representative nomination to the team; Management team created for the development of standard definitions for One Health core competencies that consists of TRG and Tufts. Implementation team formed includes members from RESPOND, PREVENT, PREDICT, CDC and USDA; Workshop conducted with mgt and implementation teams on March 21 st -22 nd 2011, establishing: common elements to consider, scope/purpose/audience/use of competencies, development methodology, roles/responsibilities of teams, development work plan, and coordination/communication mechanisms for teams. Revised timeline for sub-activity completion. Working session teleconference held with working group (i.e., EPT partners, CDC, USDA) on 11 th July. Interview protocol drafted for subject matter discipline nominees. Literature review underway. References collected for potential interviewees. Compiled a list of subject matter experts in One Health-related

						disciplines for interviews. The interview script was drafted and pilot tested. Working group meeting on Nov. 9 th , 2011 (13 participants) to review potential competencies (1800+), and sources (80+). Group agreed to set of major competency domains. Review results of subject matter interviews (20), which are being transcribed. On Nov. 10 th , a subgroup compiled a draft of competencies, pending additional input.
3.1	1.2.4 GL	Global Network Organizational Development		Networks have established functional governance mechanisms; network members share a common vision/understanding of the networks' role	Complete: Developed a framework, at the global level, for strengthening network development and activities. Regional level development to be conducted within country-specific sub-activities	Complete: Developed a framework, at the global level, for strengthening network development and activities. Regional level development to be conducted within country-specific sub-activities
3.2	2.2.1 GL	Develop best management practice recommendations for extractive industries based on PREDICT-identified vectors in hot spot regions.	TBD	Best management practices (BMPs) developed and communicated	Completed 1 st draft of white paper ("The effects of extractive industry activities on rodents, bats, and non-human primates in equatorial West Africa" and supplemental doc that compiled existing best	RESPOND representatives met with USAID in order to form an EPT working group on extractive industries; collaborated with AED to develop a plan for the activities that will occur from December 2010 to May 2011; and worked with AED to develop a job description for an Extractive Industry Lead for PREVENT. In November, RESPOND partner E&E sent a rep to the International Premier Mining Congress & Exhibition in Tianjin China to meet with reps from Chinese companies operating in RESPOND regions. 6 of 10 companies expressed interest in

				<p>practices recommendations, which Extractive Industry Working Group is reviewing. Reviewed and collaborating on redesign of XRAT tool. Submitted abstracts to the Society of Petroleum Engineers – Health, Safety, and Environment Conference and the Global Risk Forum One Health Summit. Australian mining company conference planning underway with WWF Gabon.</p>	<p>collaboration; Concept paper developed and approved by USAID. RESPOND worked with other EPT partners to refine tools for the extractive industries to use to avoid the contamination of employees and the spread of zoonotic diseases as a result of operations; Research conducted on oil and gas industry activities to develop impact tables and best management practices. Tools/perspectives exchanged with EPT Partners PREDICT and PREVENT; Extractive Industries Working Group progress presented at EPT partners’ meeting. Planning underway for outreach activities to extractive industry groups. Conference call conducted with Extractive Industries Working Group to review new mitigation tool. The EPT Extractive Industry Working Group has produced draft documents summarizing the existing knowledge on the effects of extractive industry activities on rodents, bats, and non-human primates in Equatorial West Africa, and of related mitigation measures. Completed 1st draft of white paper (“The effects of extractive industry activities on rodents, bats, and non-human primates in equatorial West Africa” and supplemental doc that compiled existing best practices recommendations, which Extractive Industry Working Group is reviewing. Reviewed and collaborating on redesign of XRAT tool. Submitted abstracts to the Society of Petroleum Engineers – Health, Safety, and Environment Conference and the Global Risk Forum One Health Summit. Australian mining company conference planning underway with WWF Gabon.</p>
--	--	--	--	---	--

3.2	2.4.2 GL	Support for TEPHINET to host global conference and add One Health sessions. (Fast Track)	TEPHINET	Support conference and conduct One Health workshop for 30 persons; plenary session for One Health issues	N/A	Completed: RESPOND PHQ staff attended the 6 th Global Scientific Conference for TEPHINET (Dec. 13-17 th) in Cape Town, South Africa. A One Health pre-conference workshop (91 attendees) was supported, 8 speakers and 11 students supported to attend, as well as regional technical and training staff supported to attend and learn about field epidemiology training programs in their regions, associated outbreak investigations of emerging infectious diseases completed in the last year and in-service training for governmental officials
3.1	3.1.2 GL	Government innovations supporting integrated disease surveillance and response in human and animal health		Advocacy package developed for each country/region; reps from 6 E. African countries attend 2011 WHO/OIE/FAO management; IHR 2005 universally understood by stakeholders and adoption begun.	Advocacy package drafted, under review. To enhance focus on role of government and international health agencies in outbreak response and emergency preparedness, hired Jenny Tegelvik, seconded to WHO-AFRO HQ in Brazzaville, Republic of Congo, assigned to Emergency Preparedness and Response office.	Advocacy package drafted, under review. To enhance focus on role of government and international health agencies in outbreak response and emergency preparedness, hired Jenny Tegelvik, seconded to WHO-AFRO HQ in Brazzaville, Republic of Congo, assigned to Emergency Preparedness and Response office.

3.2	3.2.0 GL	Outbreak response support for newly emerging epidemics.	TBD	Training, technical, logistical, material and communications support provided	See sub-activity 3.2.0.1EC, 3.2.0.2EC, 3.2.0.3EC, 3.2.0.4EC, 3.2.0.5EC, 3.2.0.6EC	See sub-activity 3.2.0.1EC, 3.2.0.2EC, 3.2.0.3EC, 3.2.0.4EC, 3.2.0.5EC, 3.2.0.6EC
-----	-------------	---	-----	---	---	---

EAST CONGO BASIN ACTIVITIES MATRIX

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.1	1.2.2 EC	Creation of OHCEA Secretariat and member coordinating committees. <i>(Fast Track, HEALTH Alliance)</i>	HEALTH Alliance, One Health Central and East Africa Network (OHCEA)	TBD	On December 2nd, submitted revised grant modification documents to USAID for approval.	Leadership skill training on Aug. 12 th , 2010 for 15 participants. One Health Summit in Kampala held on Oct. 13-17, 2010: 59 participants from 6 countries schools of public health and veterinary medicine formed the regional network OHCEA (One Health Central and East Africa Network); OHCEA planning meeting held in Nairobi, Kenya Dec. 12-17 th : 31 participants involved with key agreements, planned activities, network support, One Health Kenya launch and leadership training (25 participants); At the close of Dec. 2010, RESPOND awarded a grant to the HEALTH Alliance in support of the creation and establishment of the organizational framework for OHCEA. Initial funds were disbursed and the following milestones achieved: OHCEA organizational structure established/agreed to; Secretariat created/staffed; Secretariat offices opened; organizational registration in Uganda agreed to by members, and legal registration process complete; Purchased computers for the 14 OHCEA Focal Persons. Provided support for 3 people (One Health Team) from Makerere University to attend and present at the Annual One Health workshop, at UMN, on May 9-13th. Provided support for 12 participants to attend UMN Annual Public Health Institute from May 23 – June 10 th . Presented OHCEA with laptop computers for the 14 OHCEA Focal Persons on July 11th. Revised the strategic plan for OHCEA.

						Grant cost extension submitted to USAID for approval. On December 2nd, submitted revised grant modification documents to USAID for approval.
3.1	1.2.3 EC	Support OHCEA work plan (Fast Track, HEALTH Alliance)	HEALTH Alliance, One Health Central and East Africa Network (OHCEA)	TBD	OHCEA planning summit in Kampala 5-6 Oct. for strategic planning; RESPOND created the first draft of the OHCEA 'master plan'; OHCEA submitted tech proposal/grant documents; DRC Country Coordination Committee (CCC) meeting in Kinshasa 20 th Oct. to revise CCC composition; One Health concept paper created for Govt. of Rwanda; Regional meeting, 5-9 th Dec. 2011 in Kampala of, and leadership skill training workshop for the CCCs, (56 members) to engage these stakeholder groups,, allow for exchange to define their roles and responsibilities, planned activities and government	Preparatory meetings conducted with UMN and OHCEA Co-Chairs in Uganda; OHCEA Deans & Focal Persons Meeting conducted Feb. 7-11 th , Rwanda with 63 participants: OHCEA regional vision and mission determined, deans and focal person trained in strategic planning, member roles/responsibilities defined, commencement of OHCEA country specific strategic planning, leadership training (27 participants); OHCEA Focal Persons Meeting conducted March 8-12 th in Kenya with 13 participants: finalize 10 yr. strategic plan with country specific input and design/budget for May-Sept 2011 work plan of activities; OHCEA Leaders Training conducted Feb. 25 th -Mar. 5 th in Europe: leaders of OHCEA were sponsored to participate in a course on Engaging Intergovernmental Organization. Attended USAID organized EPT meeting with OHCEA, RESPOND, WHO, AU-IBAR, FAO and OIE in Congo-Brazzaville to devise plan and define roles in engaging regional govt. Sponsored an OHCEA Deans and Focal Persons meeting in Kinshasa, DRC May 16 th -19 th , with 40 participants. Strategic plan was ratified, country capacity needs/gap reports and work plans presented, and discussed OHCEA can support EPT's work with govt. M&E team began OHCEA baseline assessment & M&E capacity building with member universities in Rwanda, Ethiopia, Tanzania, Kenya, DRC and Uganda. Data was collected from four Schools of Vet Medicine and four Schools of Public

					<p>initiatives the committees will promote during Year 3 Workplan. M&E team concluded OHCEA baseline report with data and results from DRC universities (Universities of Kinshasa and Lubumbashi); OHCEA participation with One Health core competency development</p>	<p>Health. The draft report was finalized August 31, 2011 and circulated internally within RESPOND. Supported a Stakeholder Sensitization Workshop for the development of a residency based knowledge partnership for Uganda on August 4 (attended by 25 people). Supported a member of the faculty of Makerere School of Veterinary Medicine (SVM) to travel to the UMN, on August 7, to observe and participate in an existing VPH residency program. Request for grant application submitted to OHCEA, awaiting application submission. OHCEA planning summit in Kampala 5-6 Oct. for strategic planning; RESPOND created the first draft of the OHCEA 'master plan'; OHCEA submitted tech proposal/grant documents; DRC Country Coordination Committee (CCC) meeting in Kinshasa 20th Oct. to revise CCC composition; One Health concept paper created for Govt. of Rwanda; Regional meeting, 5-9th Dec. 2011 in Kampala of, and leadership skill training workshop for the CCCs, (56 members) to engage these stakeholder groups,, allow for exchange to define their roles and responsibilities, planned activities and government initiatives the committees will promote during Year 3 Workplan. M&E team concluded OHCEA baseline report with data and results from DRC universities (Universities of Kinshasa and Lubumbashi); OHCEA participation with One Health core competency development</p>
3.1	1.4.4 EC	Support fellows to attend existing Field Epidemiology	AFENET	Strengthening human resource capacity in	N/A	Merged with 3.2.2EC. See EC region listing

		Training Programs with veterinary-specific components. (Fast Track)		field epidemiology and effective outbreak response; Strengthening AFENET institutional capacity for training, mentoring and management.		
3.1	1.5.3 EC	Strengthen and expand the Global Health Institute to serve as a platform for in-service programs and graduate level training.	Makerere University, Ministries and HEALTH Alliance universities	Implement a 2-week GHI; train 70 students	N/A	Completed: GHI conducted in Kampala, with 77 students and faculty from various schools (e.g., public health, veterinary medicine) trained in zoonotic diseases, global public health systems, participatory epidemiology, applied biostatistics
3.2	3.2.0 EC	Outbreak response support for newly emerging epidemics.	TBD	Training, technical, logistical, material and communications support provided.	N/A	N/A

3.1	3.4.8 EC	Support for development of materials and media messages to build public awareness about zoonotic disease – World Rabies Day, 28 September 2010, as a pilot activity. (Fast Track)	Veterinary Association, Ministry of Health, Ministry of Agriculture	Increased awareness of issues related to zoonotic disease transmission	N/A	Completed: Logistical support for 4 district rabies awareness information campaigns (4,000 potential reach) and joint Ministry of Health and Ministry of Agriculture community action and vaccination campaigns
-----	-------------	---	---	--	-----	---

UGANDA COUNTRY ACTIVITIES

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.2	1.5.4EC	Residency-based knowledge partnership model for building veterinary public health competence in Uganda	Makerere University	An established residency program (with at least 5 residents trained) in veterinary public health, which can be expanded to other OHCEA institutions.	Planning meeting on 6 th Oct with UMN and Makerere University; Worked with the Makerere University College of Veterinary Medicine to develop an evaluation tool for the Veterinary Public Health (VPH) Residency in Uganda.	Planning meeting on 6 th Oct with UMN and Makerere University; Worked with the Makerere University College of Veterinary Medicine to develop an evaluation tool for the Veterinary Public Health (VPH) Residency in Uganda.
3.2	3.2.0.1 EC	Outbreak response: Control of Anthrax in Queen Elizabeth National Park.	Ugandan Wildlife Authority, Ministry of Health, Ministry of Agriculture, CDC, AFENET and Conservation through Public Health	Support provided for response, best practices developed and an adaptable outbreak response template created.	N/A	Completed: Funded the logistics for many activities (e.g., baseline survey, 34 officials trained, aerial surveillance, containment activities, community info campaigns, public awareness campaign (website with 27 unique visitors), community sensitization to 5,272 households, TV talk show with national coverage), logistical support); RESPOND supported an after action review meeting (33 participants) of the Anthrax National Task Force. Held from March 9-10 th , 2011 and facilitated by AFENET, reviewed response, roles and effectiveness of the Task Force's actions with an eye for tangible lessons learned and preventative steps to be taken in preparation for the next outbreak. Consensus that a national outbreak response strategy should be developed for Uganda.
3.2	3.2.0.2 EC	Outbreak response: Unidentified hemorrhagic outbreak in	AFENET	Support provided for response, best practices developed and an adaptable outbreak response	N/A	Completed: Invited to participate in National Disease Task Force, provided funds to support active case surveillance, community awareness, case management and social mobilization; Provided tech advice & direction to EPT PREDICT;

		Bundibugyo, District		template created.		Facilitated & guided National Task Force in developing a national response plan; RESPOND conducted a post action analysis and mapping of the response by Ugandan officials, NGOs, CDC/Uganda, IDENTIFY, PREDICT and RESPOND. Analysis was presented jointly by RESPOND and AFENET to the USAID EPT Partners Quarterly Meeting in Washington, DC March 2011, which was used as a tool to focus conversations on the roles of EPT partners during human and animal outbreaks. Convened the first Ugandan EPT local partners coordination meeting on May 5 th , to prepare for the after action review with MoH. Received final report on the Yellow Fever outbreak from the grantee, AFENET, on May 18 th , which closed this sub-activity. Supported a post-2010/2011 Yellow fever outbreak response review on September 1 st to develop lessons learned from the outbreak to be applied for better preparation for future outbreaks. Attended by 42 people, the discussions centered on general coordination and logistics, epidemiology and surveillance, case management, social mobilization and, animal and environmental health.
3.2	3.2.0.3 EC	Outbreak response: Unidentified hemorrhagic outbreak in Abim and Agabo Districts	AFENET	Support provided for response, best practices developed and an adaptable outbreak response template created.	See 3.2.0.2 EC	See 3.2.0.2 EC
3.2	3.2.0.4 EC	Outbreak response: Strengthening surveillance, reporting diagnostic capacity to	AFENET	Strengthening training (skills) and capacity (resources) to identify outbreaks of infectious diseases; conducting appropriate, routine	Field Epidemiology students conducted field activities 11-14 th Oct.; 3 students went on the Typhoid Epi-Aid trip (17-21 Oct 2011) to western	Concept paper developed and approved by USAID on June 15. Grant application process underway. The 5 trainees undertaking the Master of Veterinary Preventive Medicine (MVPM) completed their first round of modular courses and started their first field assignments. Received a formal request from AFENET on September 22 nd

		<p>improve early detection, diagnosis and response to disease outbreaks in humans, livestock and wildlife</p>		<p>disease surveillance in animals and humans with reinforced local resources and personnel in a sustainable manner; Strengthening the coordination of national and local outbreak response efforts.</p>	<p>Uganda to strengthen laboratory and surveillance at some hospitals in two districts, review progress with the District Health Officer, Kasese District in implementing the recommendations following the 2009 Typhoid investigation, confirm and characterize the magnitude of the new typhoid outbreak in Bundibugyo District; Trainees held 16 focus group discussions using PE methods, reviewed records, strengthened protocol, and trained communities in water treatment.</p> <p>25-29th October 2011, AFENET, commenced work on district community surveillance and outbreak investigation training of trainers in Gulu, Uganda. 35 people at the district level from nine districts were</p>	<p>for the extension of the grant and started working with the PHQ to submit the request formally to USAID. Makerere University was faced with 1-month strike which caused delays. Field Epidemiology students conducted field activities 11-14th Oct.; 3 students went on the Typhoid Epi-Aid trip (17-21 Oct 2011) to western Uganda to strengthen laboratory and surveillance at some hospitals in two districts, review progress with the District Health Officer, Kasese District in implementing the recommendations following the 2009 Typhoid investigation, confirm and characterize the magnitude of the new typhoid outbreak in Bundibugyo District; Trainees held 16 focus group discussions using PE methods, reviewed records, strengthened protocol, and trained communities in water treatment; 25-29th October 2011, AFENET, commenced work on district community surveillance and outbreak investigation training of trainers in Gulu, Uganda. 35 people at the district level from nine districts were trained; Sponsored 48 people to attend AFENET's 4th Annual Scientific Conference (11-16 Dec. 2011) in Dar es Salaam, where RESPOND hosted Public Health Surveillance for Mass Gatherings workshop (80 participants); Facilitation for pilot of FAO's "Good Emergency Management Practice (GEMP) for regional chief vet officers convened in Entebbe 28-30 Nov. 2011</p>
--	--	---	--	--	--	--

					<p>trained; Sponsored 48 people to attend AFENET's 4th Annual Scientific Conference (11-16 Dec. 2011) in Dar es Salaam, where RESPOND hosted Public Health Surveillance for Mass Gatherings workshop (80 participants); Facilitation for pilot of FAO's "Good Emergency Management Practice (GEMP) for regional chief vet officers convened in Entebbe 28-30 Nov. 2011</p>	
3.2	3.2.0.5 EC	Extractive industries outbreak response training	Federation of Ugandan Employers, Uganda Manufacturing Association, Ugandan Red Cross	<p>Engage private sector in Uganda to begin training with 2 private sector organizations associated with the extractive industry. Leverage existing peer educator programs and IDSR and health messaging curriculum to design and implement this program. Establishment of a partnership with UMA and FUE;</p>	<p>On December 2, the East Congo office received revised budgets from both the Uganda Manufacturer's Association (UMA) and Federation of Uganda Employers (FUE). On 6 and 7 December, UMA and FUE submitted their technical proposals to the East Congo office.</p>	<p>Concept paper developed and approved by USAID in May. Presentation made to the FUE executive council (22 attendees) on June 30th to raise awareness of RESPOND activities and obtain approval/support for future collaboration. Customized a training curriculum based on available materials and incorporated the IDSR reportable diseases. Held a one-day workshop (19 attendees) on August 23 to review the Uganda Red Cross curriculum on disease outbreaks; On December 2, the East Congo office received revised budgets from both the Uganda Manufacturer's Association (UMA) and Federation of Uganda Employers (FUE). On 6 and 7 December, UMA and FUE submitted their technical proposals to the East Congo office.</p>

				Development of a curriculum tailored to the private sector; Trained Master Trainers and Trainers; Trained peer educators.		
3.2	3.2.0.6 EC	Support for investigation & response to Ebola in Uganda	AFENET	Support provided for response, best practices developed and an adaptable outbreak response template created.	N/A	Completed: RESPOND invited by Ugandan Ministry of Health (MoH) to first meeting of Ebola Outbreak Task Force on May 14 th . Focus on strengthen MoH response efforts through provision of materials and logistical support to One Health multidisciplinary teams. RESPOND to provide material and logistical needs to the MoH to enable them to conduct field investigations as well as provided support for a targeted community education communication strategy. Concept paper developed and approved by USAID. RESPOND provided funds, logistical/commodity support (PPE), outbreak response, and technical assistance. Outbreak declared over after 42 days. Supported a post-2011 Ebola outbreak response review on September 2, to develop lessons learned from the outbreak to be applied for better preparation for future outbreaks. Attended by 49 representatives from the affected districts, national level response teams and representatives from RESPOND, IDENTIFY, PREDICT, CDC, WHO, Makerere University, and the Uganda USAID EPT Coordinator.
3.2	3.2.2 EC	Hold a series of district, national and regional meetings and workshops to identify needs and initiate the	AFENET	10 meetings/workshops, with total 500 participants. To be combined with EC 1.4.4 and concept note drafted.	July 27 th grant submission to USAID rescinded in December to revise and combine with WCB grants; Oct. 12 th 2011 meeting with	This sub-activity was originally placed on hold due to program challenges for the host training center in Nigeria, planned course was cancelled. New concept note developed that merged sub-activities 1.4.4EC and 3.2.2EC into a single sub-activity, which was approved by USAID in May. Submitted a draft grant agreement with AFENET

		development of a prioritized plan for outbreak response.			ECB, WCB and AFENET, with an implementation plan was generated for the next 12 months for the ECB - AFENET Activities plus the monitoring and evaluation logic framework; On December 2, submitted the revised grant documents to USAID for approval.	to USAID for approval on 27 July. Two key WCB personnel traveled to Kampala to work with AFENET in collaboration with the ECB team in an effort to create pan-Congo uniformity and increased collaboration between the East and West Congo; July 27 th grant submission to USAID rescinded in December to revise and combine with WCB grants; Oct. 12 th 2011 meeting with ECB, WCB and AFENET, with an implementation plan was generated for the next 12 months for the ECB - AFENET Activities plus the monitoring and evaluation logic framework; On December 2, submitted the revised grant documents to USAID for approval.
3.1	3.4.1 EC	Develop an implementation plan for identifying sites, trainers and needs to conduct community level first responder training.	TBD	Training implementation plan; Knowledge base created	N/A	Completed: Planning meeting conducted in November 2010.

KENYA COUNTRY ACTIVITIES

Activities included in the following regional sub-activities: 1.2.2 EC, 1.2.3 EC.

ETHIOPIA COUNTRY ACTIVITIES

Activities included in the following regional sub-activities: 1.2.2 EC, 1.2.3 EC.

RWANDA COUNTRY ACTIVITIES

Activities included in the following regional sub-activities: 1.2.2 EC, 1.2.3 EC.

TANZANIA COUNTRY ACTIVITIES

Activities included in the following regional sub-activities: 1.2.2 EC, 1.2.3 EC.

DEMOCRATIC REPUBLIC OF CONGO COUNTRY ACTIVITIES

Activities included in the following regional sub-activities: 1.2.2 EC, 1.2.3 EC

WEST CONGO BASIN ACTIVITIES RESULTS MATRIX

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.1	1.2.1 WC	Conduct twinning and mentoring with universities and vocational schools. (Fast Track)	University of Kinshasa (DRC), University of Lubumbashi (DRC), ISTM Kinshasa and Lubumbashi, Ecole de Faune de Garoua (Cameroon)	Twinning/mentoring established with 3 institutions. Six PhD candidates mentored; masters programs supported.	UNIKIN Veterinary School, UNILU Veterinary School, and ISTM Lubumbashi visited universities in the region to develop institutional relationships (South Africa, Zambia, and Uganda); Senior faculty from Tufts University and the UNILU Veterinary School were identified to lead the twinning program; The Ministry of Higher Education has issued a decree creating a Permanent Commission for Quality Assurance higher education institutions in DRC	RFAs issued and proposals were received and reviewed from UNIKIN, UNILU and ISTM Lubumbashi to develop twinning initiatives; Twinning model developed which consists of enhancing inst. Relationships among academic inst., and creating linkages with regional entities such as Health Alliance members and SACIDS. UNIKIN, UNILU and ISTM Lubumbashi grants approved June 29; Six junior faculty (2 from each school) and six mentors from Tufts University have been identified and paired; A workshop on Quality Assurance was conducted in Lubumbashi on Aug 8 to 10, 2011; UNIKIN Veterinary School, UNILU Veterinary School, and ISTM Lubumbashi visited universities in the region to develop institutional relationships (South Africa, Zambia, and Uganda); Senior faculty from Tufts University and the UNILU Veterinary School were identified to lead the twinning program; The Ministry of Higher Education has issued a decree creating a Permanent Commission for Quality Assurance higher education institutions in DRC

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.1	1.3.1 WC	Develop an actionable plan to strengthen and enhance ongoing career path development in DRC and Republic of Congo (ROC).	Federation Une Santé-RDC	Corrective programs are compiled in an action plan for resource mobilization. Plan includes: 1) Conduct a situational analysis of 2 professions and “epidemiology”, 2) Conduct an outreach program targeting health professionals using radio broadcasts and internet	Implementation plan of two of its activities finalized: 1) an outreach program to sensitize health professionals on the concept of One Health; and 2) a situational analysis of 5 health professions; A schedule of activities issued to FUS on public health professionals database setting up.	The Fédération Une Santé-RDC was identified as the implementing partner for this activity. RESPOND supported FUS-RDC to develop a budgeted 15-month (June 2011 – Sep 2012) work plan, presented to partners on May 14; RESPOND contributed to the organization of ANIC (the national nurses association of DRC) workshop held on September 22 to 24, gathering about 100 nurses from all over the country. ANIC is a member of FUS. It was an opportunity for RESPOND to inform and sensitize the nurses on One Health approach, whose majority heard about One Health for the first time; Implementation plan of two of its activities finalized: 1) an outreach program to sensitize health professionals on the concept of One Health; and 2) a situational analysis of 5 health professions; A schedule of activities issued to FUS on public health professionals database setting up.
3.1	1.5.1 WC	Conduct professional continuing education through didactic and field	African Union Inter-Agency Bureau for Animal Resources (AU-IBAR), Royal Veterinary College (RVC)	3 participants (vet, wildlife biologist, lab) from each of the 13 EPT Congo Basin countries will be trained and gain field experience.	A team of RESPOND and AU-IBAR representatives visited Gabon in December 2011 and held introductory discussions with key ministries and the US Embassy; A committee led by the Director of Livestock and	The first of four workshops was held in Cape Town South Africa week of 22 November 2011 – Dr. Richard Kock delivered the training to 30 participants from Southern African and 2 EPT countries (Mozambique, Angola) jointly with FAO; AU-IBAR developed a proposal to conduct three workshops including one which will be organized

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
		workshops using the Wildlife Investigation and Livestock Disease (WILD) module.			composed of the Director of Health, the Director of Wildlife and Protected Areas and the Director of the National Agency of Natural Parks was set up and is in charge of the preparation of the next WILD training scheduled for mid-February. Planning for training hindered by absence of signed contractual agreement.	with other source of funding. AU-IBAR grant approved June. The Rwanda WILD session was held on July 2 to 12, 2011, with 24 participants from 10 countries (all ministry professionals) and 7 resource people (representing RESPOND, AU-IBAR, ZLS, WCS, and PREDICT). Both participant and facilitator evaluation forms show very positive ratings. A small technical group has been set up to address the recommendations from the evaluation of the Rwanda training and to review the curriculum and delivery method for the training; A team of RESPOND and AU-IBAR representatives visited Gabon in December 2011 and held introductory discussions with key ministries and the US Embassy; A committee led by the Director of Livestock and composed of the Director of Health, the Director of Wildlife and Protected Areas and the Director of the National Agency of Natural Parks was set up and is in charge of the preparation of the next WILD training scheduled for mid-February; Planning for training hindered by absence of signed contractual agreement

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.1	1.5.5 WC	Support FOREST MENTOR program focused on extractive industry issues by adding One Health content and supporting fellows and a mentor from DRC to participate.	TBD	Provide content and support 2 fellows and 1 mentor; fellows mentored on relationships, risks and approach	The grant proposal from the Gabon Park Authority (ANPN) is finalized and request for grant concurrence is to be submitted to USAID in early January 2012; Few articles were translated into French to be used to develop a module on One Health to be delivered by REPSOND as a contribution to the Mentor Forest Curriculum	Concept paper approved 18 May; The Schedule of Activity has been finalized and sent to the Gabonese National Parks Agency which is the identified grantee. The first proposal was received from ANPN in Gabon in early August and was reviewed by the technical team; The grant proposal from the Gabon Park Authority (ANPN) is finalized and request for grant concurrence is to be submitted to USAID in early January 2012; Few articles were translated into French to be used to develop a module on One Health to be delivered by REPSOND as a contribution to the Mentor Forest Curriculum
3.2	2.1.1WC	Introduce EPT RESPOND program to key collaborators (USAID missions, host governments, international health agencies, private sector	TBD	Cameroon and Republic of Congo visited, background information collected, sub-activities identified.	N/A	Completed: Discovery phase conducted 11th-20th April in Cameroon, meeting with various stakeholders; A One Health workshop (34 participants) was held in Yaoundé, Cameroon, on September 22 and 23, 2011.

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
		partners, NGOs, universities).				
3.2	2.1.2 WC	Support for veterinarians to attend the annual meeting of the Congolese Veterinary Medical Association	Congolese Veterinary Medical Association	TBD	N/A	Completed: AMVC workshop conducted on 1 July 2010-3 July 2010 with 60 participants
3.2	3.1.1WC	Strengthen systems for disease surveillance, outbreak investigation and response with a One Health approach	PREDICT, IDENTIFY, PREVENT, MoH, MoA, MoEnv	Gap analysis undertaken and outcomes made available; strategy to strengthen coordination mechanisms is developed, validated and implemented in DRC; and collaborative tools for Disease surveillance,	Series of workshops and working sessions held by ad hoc committee to adopt terms of reference of Technical Secretariat, methodology for consensus building and timeframe for elaboration of the national program for zoonotic disease prevention and control in Cameroon. Drafting of document initiated.	Project introduced to provincial authorities and stakeholders: The first provincial introduction workshop was held in Matadi (Bas Congo province) on March 22, 2011 and the 2 nd workshop was held on March 30 in Kikwit (Bandundu province). Representatives from central ministries attended these workshops. Provincial introduction and information gathering workshop in Mbandaka (Equateur province) held on 6 th April. The list of equipment to be provided to the Ministry of Agriculture of DRC to strengthen the technical capacity of the Veterinary Services and the

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
				outbreak investigation and response are elaborated and implemented	Situational analysis data collection conducted and presented at stakeholder workshop on 13-16 th December in Yaoundé, Cameroon. Procurement of office supplies initiated.	Quarantine Services was established; Series of workshops and working sessions held by ad hoc committee to adopt terms of reference of Technical Secretariat, methodology for consensus building and timeframe for elaboration of the national program for zoonotic disease prevention and control in Cameroon. Drafting of document initiated; 15th April, met with Cameroonian ad hoc committee, composed of several reps from various ministries and NGOs, tasked with developing a national program for zoonotic diseases control and prevention. Scope of Work developed; 2 consultants were selected to assist the ad hoc committee to conduct the consensus building process and design the national program; The consultants participated to the One Health workshop held in Yaoundé in September 2011; An action plan for the ad hoc committee was elaborated. An “Executive Secretariat” was put in place to coordinate the consensus building process with a support from the consultants provided by RESPOND; Situational analysis data collection conducted and presented at stakeholder workshop on 13-16 th December in Yaoundé, Cameroon. Procurement of office supplies initiated.

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.2	3.2.0 WC	Outbreak response support for newly emerging epidemics.	TBD	Training, technical, logistical, material and communications support provided.	N/A	N/A

DRC COUNTRY ACTIVITIES

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.1	1.2.3 WC	Upgrade the skills of faculty at Institut Supérieur de Techniques Médicales, Institut Technique Agricole et Vétérinaire, and Institut d'Enseignement Médicale / Institut Techniques Médicale. (Fast Track)	Institut Supérieur de Techniques Médicales, Institut Technique Agricole et Vétérinaire, and Institut d'Enseignement Médicale / Institut Techniques Médicale.	3 institutions involved; 10 national trainers trained; 2 modules developed	Two workshops attended by high-level national experts were conducted (October 16 to 21, November 17 to 21) to complete the pre-service reference documents; The pre-service reference documents for competencies, for training content and for evaluation developed and completed in November 2011, for IEM/ITM, ITAV and ISTM and per academic year.	The Schedule of Activities has been finalized. Implementation time line and budget are being developed to reach an agreement with the Directorate of Nursing Education at the Ministry of Public Health. First meeting between sub-awardees and stakeholders held on 20 th May, to inform roles/responsibilities of each party involved and agree on grant deliverables. A two-day workshop for stakeholders and potential recipients (6 participants in total) was prepared and took place on August 8 to 9, 2011, which

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
						aimed at presenting the activity to stakeholders. A draft logical framework was finalized, as well as the two proposed implementation plans; Two workshops attended by high-level national experts were conducted (October 16 to 21, November 17 to 21) to complete the pre-service reference documents; The pre-service reference documents for competencies, for training content and for evaluation developed and completed in November 2011, for IEM/ITM, ITAV and ISTM and per academic year.
3.1	3.4.1 WC	Deliver refresher outbreak response training to rural medical personnel and first-responder training to communities in the USAID-CARPE Salong-Lukenie-Sankuru Landscape region.	Training: CDC, Ministry of Public Health, Ministry of Agriculture, ICCN, CARPE; Community awareness: InCEF	Medical personnel in isolated rural areas trained; Training modules developed and delivered.	Participants' training manual and facilitators' guide on Multisectoral Integrated Surveillance and Response to Zoonoses (MISRZ) were finalized and technically validated; INCEF has adapted and produced an 11 minutes video on Ebola. Recruitment underway for consultant to follow-up distribution of PPE and shipment	Implementation plan developed with partners; Modules developed; The first training session jointly conducted by CDC (first 3 days on Monkey pox training) and RESPOND (2nd 3 days on IDSR applied to viral hemorrhagic fever diseases) took place in Boende from Feb. 19-24th, 2011; In total, 79 participants from Health, Agriculture and Environment sectors attended that session. Negotiation with InCEF is ongoing to finalize the

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
					and distribution of communication equipment in Tshuapa district	community awareness program. Follow-up training in Monkoto was suspended indefinitely; One Health IDSR manual and guidelines for participant and facilitator being developed. Grant to InCEF (community awareness in Tshuapa district) approved by USAID; Participatory Impact Assessment by the M&E team being developed by working group with consists of RESPOND and PREVENT representation; InCEF movie on Ebola is being adapted to the DRC content; During three days (July 20 -22), eight core group members from three sectors and the School of Public Health UNIKIN, along with three RESPOND team members finalized the participant and trainer manuals on multisectoral integrated disease surveillance and response (also known as IDSR+). Thereafter, comments and changes were consolidated to obtain final versions of participant's and trainer's manuals; InCEF contract has been signed and the team is deploying. InCEF conducted a series of

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
						interviews to adapt existing movie on Ebola for DRC context, which will be used during the community outreach to be conducted during the next quarter; Participants' training manual and facilitators' guide on Multisectoral Integrated Surveillance and Response to Zoonoses (MISRZ) were finalized and technically validated; INCEF has adapted and produced an 11 minutes video on Ebola; Recruitment underway for consultant to follow-up distribution of PPE and shipment and distribution of communication equipment in Tshuapa district
3.2	4.1.2WC	Evaluate existing Knowledge Management Systems for the health sciences, their application and utilization in the university context, and support the	UNIKIN, UNILU	Implementation plan for RESPOND support of appropriate technology	<ul style="list-style-type: none"> • Consultant recruitment underway for company selection for UNILU intranet service repair. TUSK French translation underway; User support group creation continuing. 	Preliminary assessment of current level of technology, staffing availability conducted at UNIKEN and UNILU. Network assessment and hardware installation and training (2 participants) took place on 21-27 April in UNILU and UNIKIN; RESPOND started the process of translating TUSK into French for its deployment in French speaking countries such as DRC. The process of procuring ICT

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
		improvement and integration of appropriate systems.				equipment and materials to repair and expand intranet networks at UNIKIN and UNILU is underway; UNIKIN and UNILU have started the process of creating users support groups to facilitate the adoption of this new technology. A meeting presided by the Chief of Staff of the Minister of Higher Education was held in Lubumbashi in August to discuss the opportunity of repairing the existing intranet and its expansion to connect government public health and veterinary laboratories.
LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.1	1.2.3 WC	Upgrade the skills of faculty at Institut Supérieur de Techniques Médicales, Institut Technique Agricole et Vétérinaire, and Institut	Institut Supérieur de Techniques Médicales, Institut Technique Agricole et Vétérinaire, and Institut d'Enseignement Médicale / Institut	3 institutions involved; 10 national trainers trained; 2 modules developed	Two workshops attended by high-level national experts were conducted (October 16 to 21, November 17 to 21) to complete the pre-service reference documents; The pre-service reference documents for competencies, for training	The Schedule of Activities has been finalized. Implementation time line and budget are being developed to reach an agreement with the Directorate of Nursing Education at the Ministry of Public Health. First meeting between sub-awardees and stakeholders held on 20 th May, to inform roles/responsibilities

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
		d'Enseignement Médicale / Institut Techniques Médicale. (Fast Track)	Techniques Médicale.		content and for evaluation developed and completed in November 2011, for IEM/ITM, ITAV and ISTM and per academic year.	of each party involved and agree on grant deliverables. A two-day workshop for stakeholders and potential recipients (6 participants in total) was prepared and took place on August 8 to 9, 2011, which aimed at presenting the activity to stakeholders. A draft logical framework was finalized, as well as the two proposed implementation plans; Two workshops attended by high-level national experts were conducted (October 16 to 21, November 17 to 21) to complete the pre-service reference documents; The pre-service reference documents for competencies, for training content and for evaluation developed and completed in November 2011, for IEM/ITM, ITAV and ISTM and per academic year.

Activities included in the following regional sub-activities: 1.2.1 WC, 1.3.1 WC, 1.5.5 WC

GABON COUNTRY ACTIVITIES

No country-specific activities were implemented in Republic of Congo during the reporting period.

REPUBLIC OF CONGO COUNTRY ACTIVITIES

Activities included in the following regional sub-activities: 1.5.5 WC

CAMEROON COUNTRY ACTIVITIES

Activities included in the following regional sub-activities: 3.1.1 WC

SOUTHEAST ASIA ACTIVITIES RESULTS MATRIX

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.1	1.2.1 SE	Planning and implementation of university twinning (Southeast Asia One Health University Network - SEAOHUN)	Thailand: Chiang Mai University, Mahidol University, Indonesia: University of Gadjah Mada, Institut Pertanian Bogor, University of Indonesia, Malaysia: Universiti Kebangsaan Malaysia, Universiti Putra Malaysia	Development of Southeast Asia university network (Southeast Asia One Health University Network - SEAOHUN): 1) Establish Coordinating Office and leadership; 2) have a supporting function for organizational development & strengthening; 3) activities started in consultation with members. Year 1: define roles, develop relationships and develop tools	Working Group Meetings: October 10-11, 2011 in Kuala Lumpur, November 24-25, 2011 in Bangkok. Deans Meeting on December 6-7, 2011 in Hanoi. Network structure (executive board and coordinating office), establishment process, regional network name (SEAOHUN) endorsed and roles/responsibilities identified. Executive Board meeting on Dec. 8-9 2011 in Hanoi, Vietnam. Inaugural meeting of the Vietnam One Health University Network (VOHUNet) meeting on November 22, 2011 in Nah Trang city, Vietnam. EcoHealth Zoonotic Disease workshop on September 26 –	Met with universities, APEIR, ASEAN Secretariat in Jakarta, ILRI; Assessed partnerships between universities and UMN/Tufts; Met with Chiang Mai, Chulalongkorn, Mahidol, and Kasetsart Universities; Concept paper approved by USAID. Team decided upon regional universities that will form the initial network in Malaysia, Thailand, Vietnam and Indonesia. Meet/greet tour of universities at Mahidol and Chiang Mai Universities in Thailand, and University of Indonesia in Indonesia. Assessed existing regional networks; New network was initiated in April 2011; Hosted a Deans meeting in Bangkok on 24 th -25 th May, with 55 participants. Set up a Working Group to expedite the network activities. Conducted the 1 st Working Group meeting in Bangkok on August 29 th . Began the two-week short course training on eco-health zoonotic diseases. Working Group Meetings: October 10-11, 2011 in Kuala Lumpur, November 24-25, 2011 in Bangkok. Deans Meeting on December 6-7,

			<p>Vietnam: Hanoi School of Public Health, Hanoi University of Agriculture, Hanoi Medical University</p> <p>UMN, Tufts</p>		<p>October 7, 2011 in Thailand.</p>	<p>2011 in Hanoi. Network structure (executive board and coordinating office), establishment process, regional network name (SEAOHUN) endorsed and roles/responsibilities identified. Executive Board meeting on Dec. 8-9 2011 in Hanoi, Vietnam. Inaugural meeting of the Vietnam One Health University Network (VOHUNet) meeting on November 22, 2011 in Nah Trang city, Vietnam. EcoHealth Zoonotic Disease workshop on September 26 – October 7, 2011 in Thailand.</p>
3.1	1.2.2 SE	<p>Support relationship between Khon Kaen Veterinary Medical School (VMKKU) and the Faculty of Agriculture, Nabong Agricultural College (NAC) campus, National University of Laos (NUOL)</p>	<p>TUFTS, Khon Kaen Veterinary Medical School (VMKKU) and the Faculty of Agriculture, Nabong Agricultural College (NAC) campus, National University of Laos (NUOL)</p>	<p>Improve existing twinning relationship between 3 institutions: staff/student exchanges, course/lecture/workshop delivery, lecture capacity improvement, enrollment/support in masters programs, curriculum co-development</p>	<p>Support staff from NAC/NUOL in MPH program at KKU; Support faculty and student exchanges between KKU/VMS, Tufts and NAC/NUOL; Held meeting with US ambassador and KKU faculty to discuss KKU/NAC partnership</p>	<p>Concept paper developed; Assessed capacity of KKU to support NAC in developing vet schools and Lao vets; Concept paper approved; RESPOND team visited NAC and KKVMS separately in Q2. Details and statement of work were prepared and reviewed and agreements are underway; Staff from VMKKU have visited NAC/NUOL to deliver courses to students in the student exchanges; staff from NAC/NUOL have spent time at VMKKU working with local staff to increase their capacity to deliver lectures in the Veterinary Science program; staff from NAC/NUOL are enrolled in master programs at VMKKU; On 9th-10th June, a regional One Health conference was held at</p>

						<p>VMKKU and staff and students from NAC/NUOL were supported to attend the conference. Supported staff from NAC/NUOL currently in the Masters of Public Health program at KKU. This will build staff capacity to support the newly established veterinary curriculum at NAC. Supported faculty and student exchanges between KKU/VMS, Tufts and NAC/NUOL in order to support the first cohort of veterinary science graduates in Lao PDR, currently in Year 3 of a five-year course. Supported KKU/VMS in delivering field epidemiology and outbreak response short courses and workshops to staff from the Department of Livestock and Fisheries, MOA, Lao PDR. Support staff from NAC/NUOL in MPH program at KKU; Support faculty and student exchanges between KKU/VMS, Tufts and NAC/NUOL; Held meeting with US ambassador and KKU faculty to discuss KKU/NAC partnership</p>
3.1	1.5.1 SE	Establish a regional training center for wildlife professionals.	Wildlife Conservation Society	15 workshops conducted, with 90 trainees total	N/A	<p>Cancelled: Orientation held in November to discuss SMART patrolling program with 16 wildlife directors from the Thai Department of National Parks, Wildlife and Plant Conservation. Liaised with Wildlife Conservation Division of DNP and Wildlife Conservation Society to discuss RESPOND's capacity and how we might</p>

						support a center. Identified need for 4 district workshops for wildlife veterinarians to improve retention and broaden capacity; In January 2011, regional RESPOND team attended regional ranger training as hosted by Smithsonian and Wildlife Conservation Society (WCS) to explore training center facilities and meet the WCS team; Cancelled in June after partial implementation of activities.
3.2	2.2.1 SE	Initiate extractive industry outreach in SE Asia.	TBD	Plan for engagement with industries operating in Southeast Asia	N/A	Cancelled: Extractive industry working group developed under USAID leadership; Concept paper submitted to USAID. Sub-award canceled by USAID
3.2	2.4.1 SE	Host regional EID (formerly PPF) Forum for 2011.	PREVENT, IFRC, ADPC, FAO	Monthly forum with 20-25 participants each month	The theme of the forum on October 6 th was on a safer world with 2 presentations: a) Promoting Lessons Learned from the Pandemic Experience and b) Using Scenario to Prepare for the Next Pandemic. 26 people participating. Forum on December 1 st presented a panel discussion referencing the flooding situation in Thailand to discuss EID risks	The forum focus is One Health and EIDs. First RESPOND-sponsored forum meeting was conducted on March 3 in Bangkok. EID Forum website was purchased and is being populated. Forum sponsored on April 5th on epidemic preparedness, attended by 11 participants. Emerging Infectious Diseases (EIDs) forum meeting conducted on ecohealth on June 2 nd , attended by 22. Forum on July 7 th was on Wildlife Trade and Emerging Infectious Diseases, attended by 21 participants. For rum on August 10 th was about Putting One Health to Work, attended by 30 participants. Forum on

					and mitigation measures including the topics of surveillance & responses and food & health. 39 participants.	September 1 st was on The Use of Mobile Technologies for Surveillance and Education attended by 21 participants. The theme of the forum on October 6 th was on a safer world with 2 presentations: a) Promoting Lessons Learned from the Pandemic Experience and b) Using Scenario to Prepare for the Next Pandemic. 26 people participating. Forum on December 1 st presented a panel discussion referencing the flooding situation in Thailand to discuss EID risks and mitigation measures including the topics of surveillance & responses and food & health. 39 participants.
3.2	2.4.4 SE	Support regional TEPHINET Conference in Bali, Indonesia	SAFETYNET, Indonesian Ministry of Agriculture	Organization and delivery of short courses at pre-conference workshop; 4 plenary speakers deliver scientific papers at the conference; scholarships for up to 100 FET students to attend and deliver presentations	Scholarship support candidates identified; pre-conference workshop programming developed; supported regional FET Fellows, supervisors, and alumni for 6 target countries to attend and participate; TEPHINET conference in Bali conducted	Scholarship support candidates identified; pre-conference workshop programming developed; supported regional FET Fellows, supervisors, and alumni for 6 target countries to attend and participate; TEPHINET conference in Bali conducted

THAILAND COUNTRY ACTIVITIES

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.1	1.2.3 SE	Support a master's degree program in animal epidemiology at Kasetsart University	TBD	TBD	N/A	Cancelled: Met with Kasetsart Veterinary School to discuss development of concept paper; This sub-activity was not approved by USAID
3.1	1.5.2 SE	Applied field training for wildlife veterinary medical officers and field pathologists.	Mahidol University	20 wildlife vets trained in forensic investigation, including 6 Thai zoo veterinarians	The 4 th training workshop was planned for November. Due to flooding, the workshop was postponed.	Orientation of 16 National Park Directors for upcoming training events. Met with PREDICT vets in the region for their participation in training activities. The 1 st (3-day) training conducted in January 2011 in Kanjanaburi, Thailand for 16 wildlife vets working for the Department of National Parks (DNP). Wildlife veterinarian competencies were drafted and approved by DNP for use in planning subsequent workshops. A 3-day TOT workshop conducted in March 2011 for 15 Mahidol University staff to provide them with knowledge and practices on core facilitation skills. The 2 nd (5-day) training with a focus on wildlife immobilization techniques conducted 30th May /June 2011 in Ratchaburi province for 15

						wildlife veterinarians. The 3 rd training workshop conducted on August 8-11 for 20 wildlife veterinarians with a focus of wildlife epidemiology. The training consisted of classroom lectures, case studies, hands-on practice under supervision of international and local experts, problem-based learning, and group discussions. Coordination and preparations for the 4 th training workshop was made. The 4 th training workshop was planned for November. Due to flooding, the workshop was postponed.
3.1	1.5.5 SE	Support FETP-FETPV for Masters degree in epidemiology	CDC, WHO, Mahidol University, Prince of Songkla University	Enroll 7 FETP/FETP-V/iFETP students in Thai Masters program: Select universities; Support students in field projects, attendance at international conference, tuition costs, laptops	Enrollment of 7 FETP/FETP-V/iFETP students or graduates from Thailand or other countries in a Thai university Masters or equivalent degree program (e.g. postgraduate diploma) based on governmental priorities. Support includes: field projects, tuition costs, TEPHINET conference costs, and laptops.	Concept paper approved by USAID. Team worked with Ministry of Public Health's Department of Disease Control to start contract process FETP leadership reached agreement with several Thai universities for student cost and time requirement reduction; Schedule of Activities developed; Award in process. Due to the delay in receiving grant approval, RESPOND changed the funding mechanism from a grant to direct assistance. Universities in Thailand were identified for their involvement in the program. Students have been enrolled into the program. Enrollment of 7 FETP/FETP-V/iFETP students or graduates from Thailand or other countries in a Thai university Masters or equivalent degree program (e.g. postgraduate diploma) based on governmental priorities. Support includes: field projects, tuition costs, TEPHINET conference costs, and laptops.

Activities included in the following regional sub-activity: 1.2.1 SE.

VIETNAM COUNTRY ACTIVITIES

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.2	2.4.2 SE	Collaborate with USAID Vietnam Mission to hold PREDICT and RESPOND One Health meeting in country.	RESPOND, PREDICT	Meeting held with 100 participants from various sectors	N/A	Complete: Contributed to planning and attendance of meeting with PREDICT; supported WCS in initial development and facilitating of One Health EPT workshop in Hanoi; Meeting was held March 15-16 in Hanoi and attended by 150 participants from all levels of government within animal health ministries and select NGOs through Vietnam
3.2	3.4.2 SE	Support training to strengthen One Health epidemiological teams with focus on AVET training at selected provincial, district and community levels.	WHO, Vietnam Ministry of Health	Review and improve training materials & delivery methods: Identify trainers, design materials, support training course delivery in multiple provinces, strengthen and support mentor/supervisor skills for field projects, review/strengthen training materials	Waiting for grant approval.	Concept paper approved by USAID; Met with WHO and Ministry of Public Health to develop plan for providing intensive 12 week classroom and field experience, including mentor and supervisor training, for professionals who have previously completed FETP and AVET. Grant application was submitted in September. RESPOND is awaiting approval to move forward. Planned activities are on hold until approval is received.

Activities included in the following regional sub-activity: 1.2.1 SE

LAO PDR COUNTRY ACTIVITIES

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.2	1.5.6 SE	Applied field training (wildlife health) for wildlife rangers in Nam Ha Protected Area (NPA)	WCS	Obtain government/district /commune support; development of Smart Patrolling curriculum, develop training materials, training of trainers workshop; selection/training of One Health teams, Protected Area staff training, support trainee supervision, monthly meetings, quarterly workshops	Grant application from WCS was reviewed and finalized by RESPOND regional office.	Conducted discovery visit and drafted concept paper based on findings of meetings with Ministries; Sub-activity approval received from Ministry of Foreign Affairs, Lao PDR. Grant application was initiated. Initial meetings were held, involving government staff from DoF, DoH and DoA, protected area staff, and community leaders to discuss the value of these activities, to seek district and commune level input and support. The grant application from WCS was reviewed and finalized by RESPOND regional office.
3.2	3.4.5 SE	Support training to strengthen One Health epidemiological teams at	NEIDCO	Review and improve training materials & delivery methods: Training of Trainers (ToT) workshops, workshops for	Grant application from NEIDCO was reviewed and finalized by RESPOND regional office.	Conducted discovery visit and drafted concept paper based on findings of meetings with Ministries. With USAID obtaining agreement that EPT partner activities can proceed. Grant application from NEIDCO was reviewed and finalized by RESPOND regional office.

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
		provincial and district levels.		provincial and district level staff		

Activities included in the following regional sub-activity: 1.2.2 SE

INDONESIA COUNTRY ACTIVITIES

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results	Project to Date Results
3.2	3.4.1 SE	Support training to strengthen One Health epidemiological teams at provincial, district levels - Indonesia	TBD	Review and improve training materials & delivery methods: model/strategy to implement joint in-service trainings of PDSR and DSO staff, review/updating training materials, review of training methods, support short-courses and workshops, material review/updated	Identified activities and partners for a limited competitive bid	Conceptual plan for the training of PDSR and DSO teams, responsible for outbreak confirmation and response at the provincial and district levels was developed. RESPOND is awaiting contract approval. Identified activities and partners for a limited competitive bid

Activities included in the following regional sub-activity: 1.2.1 SE.

CAMBODIA COUNTRY ACTIVITIES

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q1 Results
3.2	3.4.7 SE	Support training to strengthen One Health epidemiological teams including MOH and MOA staff at selected provincial and district levels	TBD	Improve knowledge and practical skills of in-service government staff at the district and provincial levels.	Continued dialogue and collaboration with EPT partners, WHO, CDC

MALAYSIA COUNTRY ACTIVITIES

Activities included in the following regional sub-activities: 1.2.1 SE.

VII. APPENDICES:

APPENDIX I: CONCEPT PAPERS

RESPOND Concept Paper FY3 New Sub-activity Funding

Cooperative Agreement Number GHN-A-00-09-00015

Sub-activity number: 1.2.4 GL

Sub-activity name: Network Development

Partner lead: DAI

Grantee: N/A

Background

In order for a One Health philosophy to be firmly embedded in all levels of society, it is vital that concerted efforts are made to establish and maintain strong linkages between many different disciplines including, but not limited to public, veterinary and environmental health, the social sciences and others. Moving towards a One Health approach to investigate, respond to, and counter existing and future emerging infectious disease threats is the overarching goal of the EPT program. This requires commitment at the international, regional, national, and local levels. Therefore our strategy is to develop and support a regional One Health network based upon government and university partnerships. The network will leverage existing capacity to strengthen and sustain public health infrastructure and outbreak response capability, build upon the framework of existing linkages between government and universities throughout the region, and identify and respond to areas of One Health capacity-building need. RESPOND's consortium partners, University of Minnesota and Tufts University, will work together synergistically to provide technical support to the newly created university networks and its members.

RESPOND's vision involves "sustainable One Health university networks that will provide trained leadership, ongoing capacity building, and technical support to governments in the development and strengthening of a cross disciplinary, trans-boundary approach to emerging infectious disease outbreak response and surveillance in their respective regions." Our belief is that this will take ten years to achieve. It is essential to note that this vision needs to be endorsed and supported by the Deans of the network member universities and therefore this may be altered to reflect their views once the networked is formed and functional.

Introduction:

In year 2 RESPOND supported the establishment of two regional One Health University Networks—one in the Congo Basin and one in Southeast Asia, with work continuing in year 3. Development of robust university networks—able to effectively and efficiently pursue their programmatic missions—requires attention to the organizational development of the networks as well as to the work they are doing. Issues including network membership, governance and decision-making, management, and communication must be worked through early in the life of the network in order to develop trust and foster collaboration amongst network members

In Year 3 RESPOND will further develop a framework for strengthening network development and activities. While the framework concept will be developed at the global level, implementation will be contextualized at the regional level. Activities will be designed to ensure common vision for the network across its member universities, to assure that governance mechanisms are in place to support and to strengthen collaboration within the network and the link with the US-based partner universities. Activities may include assessment of and support to the network and its members and strengthening of individual universities and collective network program initiatives,

The networks will require continued support from RESPOND to develop further in year 3. The institutions that form the networks will be challenged to overcome disciplinary and professional restrictions and to establish innovative approaches to planning, modeling and implementing a cross-disciplinary cross-sectoral One Health Approach.

This concept note provides an overview of how the university networks will be developed and sustained as supported by RESPOND.

EPT and other Partners:

OHCEA, OHSEA

Goal:

Long-term organizational sustainability of regional One Health university networks to transform the workforce by developing One Health professionals.

Objectives:

1. Network governance mechanisms are established to ensure effective decision-making and communications within the network and amongst network members and at completing Respond project deliverables
2. Networks are able to support the interaction and collaboration among University partners both within and outside the network.
3. A foundation is laid to ensure network sustainability beyond the life of RESPOND.

Activities:

1. RESPOND and the networks develop a strategy for network development to meet identified needs of network members and USAID/RESPOND.
2. RESPOND regional offices and network leadership define a development plan aligned with the intersection of their respective needs.
3. RESPOND supports the establishment of governance structures with network leadership.
4. RESPOND supports network leadership to assure a network-wide understanding of these mechanisms, including how the network is intended to function, the services it is intended to provide to member universities, the roles, and tenure of network leadership and decision making authorities as among members and as between members and Secretariat.
5. RESPOND will work with network members to develop an Operations Manual and an external communication plan and such other documents as required to support their operations.
6. RESPOND will assist networks to develop and strengthen member and Secretariat capacity to conduct, administer and manage the network.
7. RESPOND will support the network to develop a vision and plan for the development of the One Health Professional, including but not limited to:
 - a. Facilitate a process to develop a shared vision of the one health professional and the systems required to ensure optimal performance.
 - b. Identify key variables needed to drive transformational change.
 - c. Plan for the development of that professional and transformation of the systems necessary to enable trained One Health workers.

Expected Outcomes:

1. Networks have established functional governance and management mechanisms;
2. Network members share a common vision and understanding of the roles of the networks, individual members and RESPOND.;
3. Network members are collaborating and communicating effectively;
4. Self-sustaining university networks whose members work collaboratively to develop One Health professionals across disciplines.

RESPOND Concept Paper
FY3 New Sub-activity Funding

Cooperative Agreement Number GHN-A-00-09-00015

Sub-activity number: 1.2.4 EC

Sub-activity name: OHCEA Network Development

Partner lead: Tufts

Grantee: OHCEA

Introduction:

One Health Central and Eastern Africa (OHCEA) is a new partnership aimed at providing a conceptual home for One Health activities in the Congo Basin. The current OHCEA membership consists of Deans and faculty representing 14 Schools of Public Health and Veterinary Medicine in six countries — Democratic Republic of the Congo (DRC), Ethiopia, Kenya, Rwanda, Tanzania, and Uganda.

This concept note focuses on strengthening OHCEA member institutions, and their faculty, so that they are better able to participate in network activities and enhance and maintain the quality of their programs. In particular this sub-activity will support OHCEA member institutions as they revise and develop new curriculum, and improve their delivery of in-service and pre-service training. These activities will build on previously initiated activities, namely:

- TUSK: Prior to RESPOND, Tufts supported the installation of TUSK at Makerere University School of Public Health (Uganda), University of Nairobi (Kenya), and Muhimbili College of Health Sciences (Tanzania). In Y1 and Y2 RESPOND undertook assessments of IT infrastructure and human resources at Makerere University (Uganda), University of Kinshasa (DRC) and University of Lubumbashi (DRC). These assessments demonstrated high interest in expanding capacity for using technologies such as TUSK in the classroom. With Y2 RESPOND funding, new servers were installed and facilities upgraded in all three universities, and a new version of TUSK was rolled out at Makerere University along with user support training at both the School of Public Health and School of Veterinary Medicine. Further, in Y2 veterinary and public laboratories located in Kinshasa and Lubumbashi were connected to University of Lubumbashi (UNILU) and University of Kinshasa via the intranet. In Y3, TUSK will be implemented in DRC (*sub-activity 4.1.2 WC*) and additional assessments of IT infrastructure and human resources will be undertaken at remaining OHCEA countries in preparation for TUSK roll out (outlined below).
- Institutional quality assurance capacity building workshops: In Y2 RESPOND supported a workshop on quality assurance (QA) in two institutions: UNILU (Public Health and Veterinary Schools) and ISTM Lubumbashi, in the DRC (*sub-activity 1.2.1 WC*). The purpose of the workshop was to provide

individuals at participating institutions with an understanding of institutional quality assurance, as well as provide training in appropriate QA techniques. The ultimate goal was to enable participating institutions to create an Institutional QA office within their school/University. In Y3, these workshops will be adapted and implemented in each of the remaining countries in the OHCEA network (outlined below). The activities will also be expanded to include other veterinary schools, public health institutions and schools of nursing with the aim of developing common indicators across similar schools in each region.

EPT and other Partners:

OHCEA institutions

Goal:

To strengthen OHCEA member institutions, and their faculty, so that they are better able to participate in network activities, and enhance and maintain the quality of their programs.

Objectives:

1. To conduct an assessment of IT infrastructure and human resources at remaining OHCEA member institutions;
2. To develop an implementation plan for the roll out of TUSK and associated user support training at all institutions;
3. To adapt and implement a series of institutional quality assurance workshops in OHCEA member countries.

Activities:

Under this sub-activity RESPOND will:

1. Conduct an assessment of University IT infrastructure and human resources at OHCEA member institutions in Ethiopia, Kenya, Rwanda, and Tanzania in order to develop an implementation plan for the roll out TUSK and other educational technologies. These technologies will be used to support curriculum co-development, course content sharing and distance learning across the network.
2. Implement 3-day institutional quality assurance (QA) capacity building workshops in Ethiopia, Kenya, Rwanda, Tanzania and Uganda and 3-day follow up workshop in the DRC at the participating institutions. Workshops will be tailored to the country and involve relevant representatives from each OHCEA member institution (School of Public Health and School of Veterinary Medicine). The Minister for Higher Education will be invited as recommended by each country.

Expected Outcomes:

1. Plan for roll out of TUSK across OHCEA network based on institutional needs
2. OHCEA institutions with expanded capacity to undertake quality assurance activities

Concept Note:

One Health Central and Eastern Africa (OHCEA): Year One Implementation

Sub-activity: Multiple sub-activities combined

Partner Lead: University of Minnesota

OHCEA Creation:

One Health Central and Eastern Africa (OHCEA) was created in an effort to strengthen One Health at educational institutions in EPT hot-spot regions. The founding member institutions of OHCEA represent 14 schools of public health and veterinary medicine, from six countries in central and eastern Africa. Additionally, multiple schools within the University of Minnesota and Tufts University are partner institutions within OHCEA. The collaborative approach of OHCEA was intentionally developed in association with regional universities because they are a primary long-term, stable source of pre-service and in service training for outbreak resource training and response. Universities are also a major source of innovation for social and institutional change, and have the capacity to foster truly transformative movements, in part through their ability to be a neutral convener of thought leaders across sectors and disciplines, and then to transfer the new ideas to the next generation of thought leaders. Finally, Universities are ideal partners for regional cooperation, as they do not adhere to national agendas or boundaries, and are able to participate more openly to create a truly trans-boundary approach. Already, universities in East Africa are leaders in discipline-specific regional capacity building through admirable organizations like Health Alliance (Schools of Public Health) and RUFORUM (Agricultural Schools). OHCEA plans to build on these existing models to create a new model of cooperation that strengthens regional capacity not only of one discipline, but across disciplines and sectors to improve whole health systems throughout the region. The vision for this new alliance will be actualized by convening One Health thought leaders from across professions (public health, veterinary medicine, nursing, medicine, wildlife sciences, natural resource sciences) and organizational sectors (intergovernmental, governmental, academic, private, NGO) to work together to identify common interests and build truly collaborative programs to advance One Health capacity in the region.

Below are the outlined objectives for the OHCEA year one workplan. This is an implementation plan that includes both approved and pending OHCEA activities, in three phases throughout RESPOND Y2.

PHASE ONE

Timeline: January 1 to February 15, 2011

Deliverable for Phase 1:

1. Establish the OHCEA Secretariat;
2. Establish Country Coordinating Committees (CCC) in each country;
3. Complete an itemized budget for OHCEA grants for 2011;
4. Complete the OH surveillance and response country baseline assessment;
5. Identify OH leadership core competencies, training needs and plan for continued leadership training;
6. Hold the First Annual OHCEA Deans meeting in Rwanda;
7. Begin the development of a ten-year strategic plan for OHCEA;
8. Launch the sensitization of One Health Rwanda

This phase will finalize the structure of the OHCEA secretariat, including organization registration, the hiring of administrative staff and the establishment of the OHCEA office. It also includes building CCC teams for each member country consisting of stakeholders from member universities, ministries and non-governmental organizations. All of these stakeholders will participate in the OHCEA meeting being held in Rwanda in February 2011. During this meeting OHCEA will define and finalize its overall vision/mission statement, begin developing a strategic plan for short, medium and long term goals, review the OH leadership competencies for future training, complete and discuss the OH surveillance and response country baseline assessment tool and participate in the launch of One Health Rwanda.

PHASE TWO

Timeline: February 15 to April 30, 2011

Deliverables for Phase 2:

1. Complete and deliver a report of the full Gap Analysis for each country;
2. Complete a short, medium and long term Strategic Plan for OHCEA that will inform the next three RESPOND work plans;
3. Identify country stakeholders and identify training needs;
4. Begin to evaluate and implement OH training through RESPOND training mechanisms;
5. Draft OHCEA Network Manual

In this phase OHCEA stakeholders will begin the Gap Analysis process which includes curriculum review, identification of core competencies and assessment of knowledge/skill levels by CCC. This will identify both strengths and gaps of existing OH curricula at the pre-service, in-service and community level, and will include the revision and/or development of One Health curricula. OHCEA deans and stakeholders will complete the strategic plan which includes short, medium and long-term goal setting, and OHCEA deans/secretariat will begin to draft the OHCEA Network Manual by defining the table of contents and development of content materials for review/feedback.

PHASE THREE

Timeline: May 1-September 30, 2011

Deliverables for Phase 3:

1. Launch OH sensitization in Tanzania;
2. Launch OH sensitization in Ethiopia;
3. Develop and/or modify OH curriculum;
4. Develop strategic plan for inclusion of Nursing, Human Medicine and Wildlife professions;
5. Complete OHCEA Network Manual

The final phase of OHCEA year one implementation includes a One Health launch in both Tanzania and Ethiopia. At these meetings OHCEA deans and stakeholders will continue to develop and modify the One Health curriculum as defined by the OHCEA vision/mission. Additionally, OHCEA will begin to develop a strategic plan for opening membership to other health disciplines, which includes nursing, medicine and wildlife professions; this will foster the development of an inclusive 'One Health' model for OHCEA. Finally, the OHCEA deans/secretariat will complete the OHCEA Network Manual for organizational reference and development.

Full OHCEA implementation is occurring through collaborative efforts of the RESPOND East and West Congo teams, the founding member institutions of OHCEA, the recently developed OHCEA secretariat and the Country Coordinating Committees for each member country. These key stakeholders are working to facilitate activities, workshops and planning sessions which will allow for the deliverables outlined above to be met, and sets a strong foundation for the long term management and continued development of OHCEA in the Central and Eastern African region. It is expected that the resources and outcomes developed within OHCEA will continue beyond RESPOND, and the continued development of OHCEA's vision and mission will build outbreak response capacity within the region, as well as, provide a global model for building One Health Networks globally.

RESPOND Concept Paper

FY3 New Sub-activity Funding

Cooperative Agreement Number GHN-A-00-09-00015

Sub-activity number: 1.5.4 EC

Sub-activity name: Residency based knowledge partnership model for building veterinary public health competence in Uganda

Partner lead: UMN

Grantee: Makerere College of Veterinary Medicine

Introduction:

Through a combination of direct assistance and a grant to Makerere University, RESPOND will help develop a residency-based program in Veterinary Public Health (VPH) at Makerere University's College of Veterinary Medicine (CVM). Using best practices and techniques from a unique VPH residency program at the University of Minnesota (UMN), the Makerere CVM is interested in adapting a similar residency program as a means of strengthening its programs to become a leading institution in meeting regional workforce needs for applied problem solving in public health, zoonotic disease, food security and development.

Modeled on a clinical residency, a resident spends 75% of their time working on practical problems in public health through paid partnerships with industry, government and academia, with the remaining 25% of their time spent in traditional learning environments earning a degree. At UMN, the residency is tied to an MPH program and is certified by the American College of Veterinary Preventative Medicine, and all graduating residents have become board certified by this body (following a rigorous examination). In addition to building on the model of the UMN residency, this program will review and integrate where appropriate key components of the Tufts Masters of Conservation Medicine and the pilot modified Masters of Preventative Medicine at Makerere University.

On 4th August 2011, 15 potential Ugandan partners and stakeholders (including government, academia and private sectors) met to discuss how the existing residency could be adapted to Uganda. All expressed enthusiasm for the idea and recommended that, long-term, it extend beyond veterinary public health to include human, environmental and wildlife health professionals, thus aiming for a broader "One Health" residency-type program. In this first year, the program will develop as a VPH residency program, recognizing and leveraging towards expansion to other One Health disciplines. Thus the program will initially be targeted to address a critical need to provide applied practical training to Ugandan veterinarians in areas of food safety, food security, zoonotic disease, animal disease surveillance systems, outbreak investigation, and outbreak response. All of these areas address strengthening the "veterinary pillar" of the one health framework which remains weak, underdeveloped and under resourced

throughout most of East and Central Africa.

Selected trainees will be trained in a variety of applied learning opportunities directed towards developing skill sets and critical competencies including; food safety and security, emergency response, environmental health, infectious diseases, epidemiology (including wildlife epidemiology), participatory disease surveillance and response, field pathology and diagnostics, one health approaches, health policy and administration. A Ugandan coordinator of the new program will be sent to UMN for 2 months to learn the administrative structure and become familiar with the residency model, with the aim to adapt the program for Uganda and East Africa context. Additional stakeholders will be sensitized to garner both potential local partners as well as, interest additional Makerere University faculty members to the strengths and benefits of the program. A faculty member from Makerere CVM will be designated as program mentor, and participate in the UMN residency as a mentor in training. Throughout RESPOND Y3 bi-directional faculty, student and staff exchange will be used to enhance the capacity at Makerere to adapt and implement the residency program, as well as to work together to adapt the Minnesota residency to meet workforce and funding needs in Uganda. Once the program is successfully running, the program coordinator and advisors at Makerere will assist another school within the region (targeting an additional one health profession [preference for Nursing] to help with OHCEA expansion) to develop a similar program.

EPT and other Partners:

College of Veterinary Medicine, Makerere University (OHCEA member)

Goal:

Developed residency-based program in Uganda which can serve as an anchor for the region and continent.

Objectives:

1. To provide applied practical training to Ugandan veterinarians in the area of epidemiology, food safety and security, outbreak response, and field diagnostics - thereby improving food safety supply chains, outbreak control and response.
2. To develop a long-term sustainable plan for the Uganda residency program that reviews and incorporates best practices of existing programs at US and African partner universities and works with stakeholders to expand the program to other disciplines or regions as meets needs identified.
3. To foster exchange of faculty, students and staff between OHCEA institutions and also between OHCEA institutions and RESPOND's university partners.
4. To strengthen networks between university, community, private, and public partners in order to provide sustainable development around the region.

Activities:

1. From September 2011-August 2012, one faculty member from Makerere CVM will participate in the UMN residency program as a mentor in training. This faculty member will enroll in the UMN Executive MPH program with the other residents, but will have a dual role in the residency of participating in residency projects while also co-mentoring projects with UMN faculty to build skills in applied training mentorship.
2. At the same time, a student from Makerere University will participate as a full resident and MPH student at UMN.
3. In September 2012, both mentor and trainee will return to Makerere University to initiate the residency program there, one as a mentor and one as a student in the program.
4. Both individuals will be closely mentored by UMN faculty through faculty exchange and through UMN staff based in the RESPOND field office.
5. The two students will attend distance learning and the UMN based Public health Institute (PHI).

Expected Outcome:

1. An established residency program in veterinary public health, which can be readily expanded to other OHCEA institutions and other One Health disciplines as needed.
2. At least 5 residents trained in the program that can provide a valuable human resource across and between academic, public and private sectors in Uganda and the region.

RESPOND Concept Paper

FY3 New Sub-activity Funding

Cooperative Agreement Number GHN-A-00-09-00015

Sub-activity number: 3.4.7 SE

Sub-activity name: Support training to strengthen One Health epidemiological teams at selected provincial and district levels in Cambodia.

Partner lead: DAI

Grantee: TBD

Introduction:

USAID announced in the first month of FYEAR 2011's third quarter that Cambodia would be participating in the Emerging Pandemic Threats program along with other countries in SE Asia. Subsequent to this announcement, RESPOND communicated with officials in the Ministry of Health of the government of Cambodia about the RESPOND concept of supporting collaborative in-service training activities designed to strengthen outbreak response capacity at the district and provincial levels.

At a multi-sectoral workshop in Siam Reap in May (May 18-20th), facilitated by RESPOND, the Royal Government of Cambodia stressed the need for strengthening and capacity building of their district and provincial level staff in the areas of field epidemiology, disease investigation and outbreak response. A One Health approach to such training was strongly endorsed at the workshop and thus a similar activity to those already approved for other SE Asian countries is a high priority for RESPOND.

This proposal is based on the models developed for Vietnam and Thailand for ongoing in-service training and follows initial discussions held in Cambodia during the discovery phase of the RESPOND project (May 2011) with in-country representatives from EPT partners, including WHO-Cambodia, CDC and FAO (Bangkok regional office), leadership of the Applied Epidemiology Training Program in the Ministry of Health, and officials from the Ministry of Agriculture National Veterinary Research Institute (NAVRI).

The proposal is in three parts:

- Support for the Cambodian Modified Field Epidemiology Training Program (called Applied Epidemiological Training - AET)
- Joint training of MoH/ MAFF staff at national, provincial and district levels to help with identification and response to the priority zoonotic diseases
- Support for field investigation of outbreaks of zoonotic and other emerging or reemerging infectious diseases (EID) by Rapid Response Teams throughout the country to complement the training activities

The guiding principles used for implementing these activities are:

- Cambodian National Outbreak Investigation Guidelines
- Cambodian National AET training curriculum
- Cambodian National Zoonotic Disease Policy

This proposal builds on existing work carried out by MoH, MAFF, FAO, WHO, US CDC and USAID sponsored sub recipients in the community to prevent and control avian influenza and H5N1. The focus is to build on the success of the existing avian influenza collaboration. RESPOND funding will have a direct impact on improving coordination and quality of outbreak investigation of zoonotic diseases in Cambodia.

Goal:

To strengthen the quality and usefulness of the existing in-service training methods and materials in order to improve the outbreak response capacity of government staff working at the provincial and district levels in Cambodia, and to broaden activities to include additional animal and wildlife health professionals, as well as other human health staff involved in surveillance (e.g. nurses).

Objectives:

To improve knowledge and practical skills of government employees responsible for the areas of disease surveillance, outbreak identification, disease reporting, disease control, communication, teamwork and the effectiveness of responses in provinces and districts.

EPT and other partners:

This work will be implemented by WHO, in collaboration with the following partners, to *ensure that the proposed activities do not duplicate or interfere with other existing training activities*, and that they reflect current Ministry priorities.

- Cambodia MoH, MAFF, NIPH
- RESPOND
- FAO
- US CDC
- Other EPT Partners

Over view of planned activities:

The objective is to integrate three tiers of activities currently supported by WHO to improve One Health outbreak response. The proposal combines in depth training of government staff on outbreak response and surveillance as part of a modified Field Epidemiology Training program, with focused short term training courses on specified priority zoonotic diseases for human and animal sector staff at the national and sub national levels, and provision of funds so that they can use their newly acquired skills to investigate outbreak situations.

1. *Support for the Cambodian AET Programme*

The AET program started in 2011 with training of the first cohort, and is a 6-8 month in-service training activity, mixing 2 months of didactic training with on-site supervision and field outbreak and surveillance activities. It is based on a modified FET program and aims to be the next step in developing field epidemiology services in Cambodia.

The program already has an international technical advisor, hired by WHO, and the curriculum has been developed. There are both national and international supervisors/mentors who support the students during the fieldwork. The program has a national coordinator although the funding for this person in 2012 is not secure as yet.

The time line of proposed activities is depicted in the following table:

Month	Activity	Number of students	Notes
1	<ul style="list-style-type: none"> • Didactic training 1 • English training 	15 MoH based students selected on merit; 10 MAFF participants	<p>First didactic training focuses on basic epidemiology and is open to 15 students, of these only 5 will be selected to go for the full field training</p> <p>2 weeks</p>
2 - 3	<ul style="list-style-type: none"> • Produce weekly and monthly surveillance reports • Perform an outbreak investigation if possible • Internet based English training 	5 AET students	Field supervision by national supervisors and international mentors
4	<ul style="list-style-type: none"> • Didactic training 2 • English training • AET students to develop proposal for surveillance project 	5 AET students; 10 MoH and 10 MAFF students	2 weeks
5 - 6	<ul style="list-style-type: none"> • Data gathering for surveillance project • At least 1 outbreak investigation each student • Monthly and weekly surveillance reports • Internet based English training 	5 AET students	Field supervision by national supervisors and international mentors
7	<ul style="list-style-type: none"> • Didactic training 3 • Finalize reports • Finalize surveillance project 	5 AET students; 10 MoPH students and 10 MAFF students	2 weeks
8	<ul style="list-style-type: none"> • Final Workshop and Graduation 	All students	1 week

Response Teams (RRTs), responsible for early warning, surveillance and outbreak investigation of zoonotic, food borne, or other emerging diseases at the sub-national level.

The didactic course will involve participants from other sectors, which will include sub-national level staff from MAFF. To maximize the effectiveness of the course, it is envisaged that there should be geographical matching between candidates selected from health and agriculture so that joint training will have maximum benefit.

The didactic training will be focused on basic field epidemiology, improving surveillance quality to improve Cambodia's Early Warning Surveillance System, outbreak investigation, performance of case control studies in an outbreak setting and basic analysis of data. These are all part of the national strategy for outbreak response.

The best graduate of the course along with international and national technical advisors (total 3 people) will attend the international TEPHINET course in 2012.

2. *District and Provincial level training on priority zoonotic diseases*

A Joint MoH/MAFF/WHO/FAO/WCS Technical Working Group on Zoonotic Disease Control (TWG) has identified four priority diseases as the focus of initial training activities. These are:

1. Avian Influenza
2. Rabies
3. Leptospirosis
4. Anthrax
5. Other diseases as needed

Currently WHO is supporting MoH, MAFF and other partners to finalize the national policy for the management of zoonotic diseases, with a focus on the wishes of the TWG for priority zoonotic diseases. In addition, WHO is also developing training material for the management of the four priority diseases, focusing on the practical needs of the country. The next step after development and ratification of the policy and the training material is joint training of staff at both MoH and MAFF on management of these four priority diseases. It is envisaged that the training will be at provincial and district level, bringing together both animal and health staff.

- *Objective of the training:* to reinforce the importance of providing accurate and timely disease information to managers responsible for disease prevention and control activities, thereby protecting the public's health, and in preventing further disease transmission to themselves, their families and their communities.

The training will build upon the successful training provided to human and animal sector staff on the investigation of H5N1 influenza outbreaks by (i) expanding the program to include a wider range of infectious diseases in both animal and human populations and (ii) by improving the effectiveness of

existing provincial and district level training by promoting and strengthening a One Health teamwork approach for outbreak response activities.

- *Core principle of this proposal:* to include and encourage collaborative disease surveillance and outbreak response training of veterinarians and animal health workers (both domestic and wildlife), agriculture extension workers, physicians and other human health care workers, as well as other stakeholders, to the maximum extent possible.
- *Activities:* The process will include creating a cohort of trainers who will then train district and provincial level staff at a number of training sessions at the sub national level. Total number of participants would be around 300. This policy will act as the cornerstone of the future activities for the TWG for zoonotic diseases.

An initial ToT workshop of one-week duration will be held with selected animal and human health staff at national level and will include staff from MoH, MAFF, National Institute of Public Health, the University of Health Sciences and one of the veterinary training institutions. Training will include specific training on the four priority diseases as well as general topics such as One Health, data collection/recording, early outbreak identification, disease reporting, appropriate sample collection and shipment (including biohazards, biosafety and PPE use), biosecurity/quarantine, and outbreak communication.

In addition, an introduction to methods for training First Responders will be delivered, following appropriate education and adult-learning principles and participatory training methods.

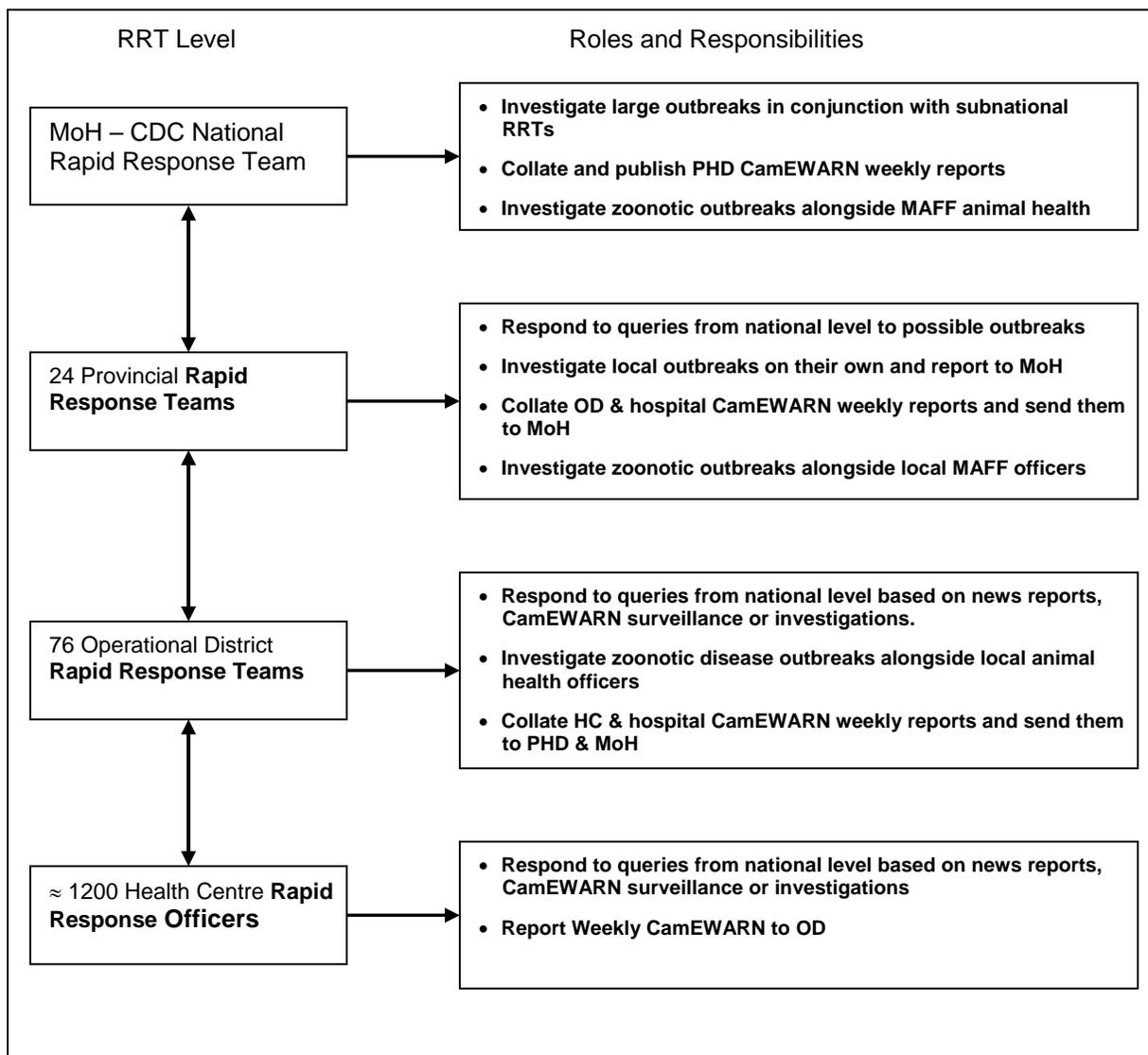
Following this initial ToT workshop, 3, three-day workshops will be held to train provincial and district level MoH and MAFF staff. Each workshop will have approximately 100 students.

3. *Support for outbreak investigation to reinforce the AET and Zoonoses training activities*

The third part of the proposal is the provision of resources for staff trained during activities 1 and 2 to implement what the lessons learned. Rapid Response teams (RRTs) are the backbone of the national outbreak investigation and early warning surveillance program. Staff of MoH who will attend activity 2 will be members of countrywide rapid response teams (RRTs). While RRTs do not as yet include MAFF staff, the vision for the future is to strengthen this inter-disciplinary relationship.

RRTs will put into practice their training under activities 1 and 2 by the investigation of unusual outbreaks. The funding will provide logistics for the teams to visit the outbreak site. Membership of the team could include national as well as provincial and district level staff from the health sector, and relevant local animal health sector staff will be included as required e.g. for investigation of potential zoonotic disease outbreaks.

The figure below describes the structure:



1. Increased knowledge of the principles and application of epidemiology for outbreak investigation and response for selected Cambodian provincial staff.
2. Increased scope of short-term applied epidemiology, One Health and outbreak response in-service training to provincial and district-level MoH and MAFF staff responsible for outbreaks in all provinces in Cambodia.
3. Improved capacity of staff in basic data analysis and interpretation, early outbreak identification and reporting, outbreak communication, including the need to provide timely and accurate health information to managers responsible for disease prevention and control activities.
4. Improved capacity to safely collect and transport appropriate samples as required in order to determine the cause of disease outbreaks, in collaboration with PREDICT and IDENTIFY.

5. Improved collaboration between animal and human health agencies at all levels in Cambodia in the areas of outbreak response, disease investigation and reporting, and increased awareness of international health agency priorities (e.g., WHO's IHR).
6. Improved skills and knowledge of trainers in methodologies for the training of participants and trainees attending workshops.
7. Increased capacity and resources for staff to perform outbreak response activities

APPENDIX II: SUCCESS STORIES AND REGION HIGHLIGHTS

Emerging Pandemic Threats Program

PREDICT • RESPOND • PREVENT • IDENTIFY



RESPOND

SUCCESS STORY: EAST CONGO



The Way Forward

- Ministry of Health will supply case definition booklets, charts, and log of rumors and outbreaks;
- Trainees will sensitize VHTs on the community case definitions to facilitate community surveillance activities.
- Districts will form Epidemic Management Committees and prepare epidemic preparedness and response plans.
- Trainees will work on sensitization of political leaders on epidemic preparedness and response.
- Ministry of Health will supply District Surveillance Focal Persons with motor cycles to facilitate surveillance work at community level.

AFENET students and mentors sponsored presented posters and attended the One Health workshop co-sponsored by RESPOND. Photo courtesy of AFENET

Supporting Community Surveillance and Outbreak Investigation Capacity Building in Uganda

In line with its objective to improve the capacity to conduct investigations of suspected outbreaks, RESPOND supported a ***Community Surveillance and Outbreak Investigation Capacity Building, and One Health*** training in Uganda from October 25-29, 2011.

Organized and conducted by AFENET, a key RESPOND implementing partner, the training was attended by thirty-five (35) participants in teams consisting of one District Veterinary Officer, one District Health Officer, one District Local Focal Person and one District Surveillance Focal Person from nine (9) different districts of Uganda.

The main objective of the training was to train a cadre of trainers at the district level who will, then, be involved in training Uganda's village health teams (VHTs). These trainers will have the capacity to empower the local communities and establish sustainable efforts focused on building capacity for zoonotic disease outbreak response at the community level.

In addition to introducing participants to the One Health Strategy in disease outbreak investigation and response, and sharing experiences on One-Health approach to investigation and response to recent epidemics in Uganda (Yellow Fever and Ebola), participants were provided with an overview of the core functions of **Integrated Disease Surveillance and Response** within the context of the International Health Regulations.

The training was engaging to the point where participants decided to work on improving disease investigation and response, as well as prepare for disease outbreaks through the formation of local Epidemic Management Committees. They also decided to develop preparation of epidemic preparedness and response plans, and to work on sensitization of local political leaders on epidemic preparedness and response.

Emerging Pandemic Threats Program

PREDICT • RESPOND • PREVENT • IDENTIFY



RESPOND

REGION HIGHLIGHT: EAST CONGO

RESPOND facilitates FAO's Good Emergency Management Practice (GEMP) course for chief veterinary officers from Eastern Africa



Participants and facilitators at the training

Following a request from the Food and Agriculture Organization (FAO), RESPOND team members provided facilitation for a pilot training of FAO's "Good Emergency Management Practice" (or GEMP) for chief veterinary officers from Uganda, Tanzania, Kenya, Rwanda and Ethiopia.

The workshop took place on November 28-30, 2011, and focused on introducing and applying GEMP principles to existing animal emergency preparedness plans, including a set of standard response procedures for avian influenza and an outbreak communication tool-kit.

GEMP's essentials manual and training materials (<http://www.fao.org/docrep/014/ba0137e/ba0137e00.pdf>) focus on providing national level veterinary services with an applied, systems-based approach to prepare for, prevent, detect, respond to and recover from – animal health emergencies. RESPOND's team facilitated the training, led the applied learning activities and provided feedback to FAO on the training materials.

Immediate feedback from the participants included:

- Suggestion to include more ministries and professionals in addition to veterinary services. In particular, social scientists and human health professionals were cited as critical additions to this effort;
- Appreciation for the applied learning approach (using existing emergency preparedness plans from participant's respective countries);
- Gratitude for the opportunity to come together to address complex disease challenges.

"The suggestions [RESPOND provided] will be tremendously helpful in improving the training materials and the preparations for the next workshop... I am looking forward to the prospect of future collaborations."

Arza Edgardo, Veterinary Planning and Response Coordinator, Crisis Management Centre - Animal Health (CMC-AH), UN Food and Agriculture Organization (FAO)

RESPOND's facilitators suggested a stronger emphasis processes and skills to stress the systems-based approach of GEMP. Relating GEMP materials and methodologies to other existing systems, such as OIE's (Organisation for Animal Health) tool for 'performance of veterinary services', WHO's International Health Regulations, Integrated Disease Surveillance and Response, and Epidemic Preparedness and Response, looking for synergy between existing outbreak response systems. Addition of One Health approaches was also suggested as a relevant and timely means to connect all these systems together.

U.S. Agency for International Development
www.usaid.gov

Emerging Pandemic Threats Program

PREDICT • RESPOND • PREVENT • IDENTIFY



RESPOND

SUCCESS STORY: EAST CONGO



RESPOND supports AFENET's 4th Scientific Conference in Tanzania

Promoting their field epidemiology and laboratory training programs (FELTPs) as a platform for public health systems strengthening, the African Field Epidemiology Network (AFENET) celebrated its fifth birthday at its 4th scientific conference in Dar es Salaam, Tanzania from December 11-16, 2011. The EPT RESPOND project, one of AFENET's strongest supporters provided funding for 50 FELTP residents and their mentors to attend the conference.



RESPOND also co-hosted a One Health workshop during the conference, which brought together more than 80 participants actively engaged in learning how to employ One Health concepts and approaches. Presentation at the workshop, entitled 'Public Health Surveillance for Mass Gatherings', included an overview of the public health surveillance at the 2010 FIFA World Cup in South Africa, the 2011 Martyrs Day celebrations in Uganda, and an overview of surveillance at mass gatherings from the WHO Health Security Interface. Even though it was a long day of activities at the conference, most workshop participants remained engaged in discussions until late in the evening.



During the workshop, RESPOND's senior technical officer, Dr. Douglas Hatch, and regional technical lead from University of Minnesota, Dr. Mac Farnham, met with AFENET director, Dr. David Mukanga to discuss senior level technical support, mentoring program development, and monitoring and evaluation of outbreak response related activities. The director expressed appreciation for the strategic partnership that has developed between AFENET and RESPOND in the past two years.

AFENET students and mentors sponsored presented posters and attended the One Health workshop co-sponsored by RESPOND.

Several of the conference participants RESPOND sponsored to attend the meeting presented posters and oral presentations on their respective work in investigating epidemics and other public health issues.

U.S. Agency for International Development
www.usaid.gov

Emerging Pandemic Threats Program

PREDICT • RESPOND • PREVENT • IDENTIFY



RESPOND

SUCCESS STORY: EAST CONGO

Leveraging stakeholder involvement in One Health Central and Eastern Africa (OHCEA)

On December 5-9, 2011, RESPOND sponsored a very successful OHCEA Country Coordination Committees (CCC), in Kampala, Uganda.

Even though OHCEA is a network of universities and it is university driven, to achieve its stated mission and vision there is a need to work with stakeholders in government and non-governmental institutions for successful implementation. OHCEA's CCCs are responsible for their country-specific activities and to support each country's university work.

The meeting gathered 56 members from six countries representing

government (25), non-governmental institutions (7), and OHCEA universities (24), bringing together different sectors and departments, including education, environment, veterinary, nursing and public health. This not only helped to foster trans-disciplinary, multicultural and multi-sectoral relationships and partnerships, but also served as a great opportunity for OHCEA to directly engage these stakeholder groups.

The meeting also served to initiate a discussion about CCC members' roles and responsibilities, norms for each CCC and planned activities (including government initiatives) the committees will promote and help carry out during the period of January to September 2012.

The meeting was officially opened by the Ugandan Minister of State for Health, the Honorable Dr. Richard Nduhuura, who emphasized that the

challenge of new zoonotic diseases requires multi-disciplinary and multisectoral support and affirmed that Uganda fully subscribes to the One Health concept. The meeting included case studies of One Health application from each participating country: a fatal outbreak of unknown cause and landslides in Uganda, the benefit of One Health approach in disease control in Democratic Republic of Congo, Rift Valley Fever outbreaks in Tanzania and Kenya, an Avian Influenza outbreak in Ethiopia and an H1N1 outbreak in Rwanda.



OHCEA Regional CCC Meeting participants and sponsors, pictured with the Ugandan Minister of State for Health, the Honorable Dr. Richard Nduhuura (pictured center).

"Success of the region and the world in One Health approach will be a result of OHCEA. We want to be the first to produce the outputs". Prof. Mwanthi, Kenya.

"As we go back we will make sure the OH strategy will become a new way of life, thinking and acting". Prof. Kabamba, DRC

"The challenge is a big one and won't be easy but the work accomplished over these 5 days is fantastic." Dr. Thomas Easley, USAID Uganda EPT-Coordinator

"It won't be business as usual. We have to change and work together." Prof. Kabasa, closing remarks

Emerging Pandemic Threats Program

PREDICT • RESPOND • PREVENT • IDENTIFY



RESPOND

REGION HIGHLIGHT – WEST CONGO

RESPOND supports OHCEA in setting up the Country Coordinating Committee in DRC, under the leadership of the Minister of Higher Education.



From left to right: USAID Representative, WHO Country Representative, DRC Minister of Higher Education, FAO Representative, and the Regional Director of RESPOND West Congo during the inauguration ceremony of DRC Country Coordinating Committee

“The One Health Country Coordination Committee is a think tank, a platform for policy formulation, coordination and harmonization of One Health activities in the DRC.” Article 2, Decree Number 405 of the Minister of Higher Education issued on November 9, 2011.

The Minister of Higher Education of the Democratic Republic of the Congo (DRC) issued two decrees on November 9th and 18th respectively creating a One Health Country Coordinating Committee and nominating its members. The committee is called “Comité de Coordination Une Santé (CCUS)” in French and made of high level government officials and faculty from the University of Kinshasa and the University of Lubumbashi. CCUS is under direct supervision of the Minister of higher education which allows it to have direct access to high level decision makers.

DRC’s Country Coordinating Committee (CCC) is a platform for the coordination of One Health strategy in the DRC. It was inaugurated on November 19, 2011 in the presence of His Excellency the Minister of Higher Education, a WHO Representative, a delegate of FAO Representative and a representative of USAID Mission. DRC’s CCC consists of 10 members from the following entities: Ministry of Higher Education; OHCEA (One Health Central and Eastern Africa) Focal Points from the University of Kinshasa and the University of Lubumbashi; Ministry of Health; Ministry of Agriculture; Ministry of Interior and Security; Ministry of Primary, Secondary and Vocational Education; Ministry of Environment; Ministry of Communication and Media; and One Health Federation (FUS) a consortium of five health professional councils and associations.

DRC’s One Health Country Coordinating Committee intends to work with existing platforms where entities and actors from various sectors interact. One of these platforms is the “Thematic Groups” coordinated by the Ministry of Planning. Thematic groups facilitate interactions between government ministries, civil society and development partners.

It is expected that OHCEA, through its DRC founding members the School of Public Health and the Faculty of Veterinary Medicine of Lubumbashi, will provide the leadership and vision to introduce One Health strategy in the Democratic Republic of the Congo.

U.S. Agency for International Development
www.usaid.gov

Emerging Pandemic Threats Program

PREDICT • RESPOND • PREVENT • IDENTIFY



RESPOND

REGION HIGHLIGHT – SOUTHEAST ASIA



Conference participants from the host country, Indonesia, share a traditional Balinese dance.

Training Programs in Epidemiology and Public Health Interventions Network – TEPHINET – held its 6th Southeast Asia and Western Pacific Bi-regional Conference from November 8-11, 2011. The TEPHINET Conference was hosted this year by Indonesia and was held at the Nusa Dua Convention Center in Bali, with the theme “Global Surveillance Networking for Global Health.”

RESPOND provided full support and assistance to 53 individuals attending the conference, including conference speakers, presenters, and moderators, as well as Field Epidemiology Training Program (FETP) fellows, graduates and trainers from the 6 RESPOND supported Southeast Asian countries. Many of the RESPOND supported FETP fellows and graduates were selected to present the results of their current research and outbreak investigations in oral presentations and posters at the conference.

The conference began with one day of workshops on topics including FETP training, epidemiological data management, disease response policies, avian influenza control and pandemic preparedness, and international collaboration. The following days of the conference provided a venue for attendees to present the results of their recent research as FETP fellows in focused sessions on topics such as global disease surveillance and response, zoonotic disease and veterinary epidemiology, vector borne disease, social and environmental epidemiology, food and water borne disease, and pandemic preparedness.

The TEPHINET conference was successful in creating a unique event able to bring together individuals from many One Health fields, including human and veterinary medicine, public health, social sciences, and public policy, to present current findings and discuss disease issues facing the international health community today.

RESPOND support allowed many individuals to attend and participate in the conference and was greatly appreciated by the TEPHINET conference organizers and host country, the international agencies present, and, of course, the attendees themselves!

APPENDIX III: PUBLICATIONS AND ABSTRACTS

Biodiversity, Conservation, Industry, and Emerging Pandemic Threats

Forest biodiversity and conservation not only serve to strengthen the resiliency of ecosystems, it also plays an important role in public health. The emergence of zoonotic infectious diseases, such as Ebola, Nipah, and SARS, is directly related to increased interaction between human and animal populations resulting from changing patterns of wildlife populations and human intrusion into habitats. Timber harvesting, onshore oil and gas, and mining operations increase human incursions into wildlife areas, facilitating mechanisms for zoonotic pathogen transmission. Activities associated with these industries, specifically land clearing and road construction change forest ecosystem dynamics by fragmenting habitats, increasing the edge effect, and decreasing biodiversity. These ecosystem modifications alter wildlife dynamics in forested ecosystems to favor species that are host for zoonoses and can thrive in environments with people. The presence of extractive industries also often creates a labor influx and additional demands on local resources, such as increased demand for bush meat and agricultural products. Food storage facilities, housing, and waste handling facilities also can attract certain wildlife species. These dynamics increase the potential for wildlife-human interaction, thus increasing the risk of zoonotic disease transmission.

Extractive industry development is expanding annually in Sub-Saharan Africa and extractive industries need to be considered as stakeholders in efforts to maintain biodiversity and conservation of forested ecosystems. Many of these industries have developed management practices to address environmental, social, and health issues. Addressing emerging zoonotic diseases crosses the boundaries of all of these issues. The added public health benefits that results in maintaining the health of their workforce could serve as a motivating factor for industry to implement environmental measures to conserve biodiversity and habitat connectivity.

This presentation will outline the links between extractive industry activities and the potential for zoonotic disease transmission. It will also highlight some known best practices that companies can take to encourage biodiversity, protect worker and community health and limit the possibility of global epidemics.

Emerging Pandemic Threats and the Oil and Gas Industry

Description

Emergence of zoonotic infectious diseases, such as Ebola, Nipah, and SARS, is directly related to increased interaction between human and animal populations resulting from changing patterns of wildlife populations and human intrusion into habitats. Because the frequency of human interaction with animal hosts is a critical factor; those human populations with the most frequent direct and indirect exposure to animal hosts are the most susceptible.

Application

Timber harvesting, onshore oil and gas, and mining operations increase human incursions into wildlife areas, facilitating mechanisms for zoonotic pathogen transmission. Land clearing and road construction change forest ecosystem dynamics by fragmenting habitats, increasing the edge effect, and decreasing biodiversity. These ecosystem modifications alter wildlife dynamics in forested ecosystems to favor species that are host for zoonoses and can thrive in environments with people. The presence of extractive industries also often creates a labor influx and additional demands on local resources, such as increased demand for bush meat and agricultural products. Food storage facilities, housing, and waste handling facilities also can attract certain wildlife species. These dynamics increase the potential for wildlife-human interaction, thus increasing the risk of zoonotic disease transmission.

Results, Observations, and Conclusions

Extractive industries have developed best management practices to address both environmental and health issues. Addressing emerging zoonotic disease crosses the boundaries of both topics. Best management practices/mitigation strategies exist to maintain biodiversity, ensure habitat connectivity, prohibit bush meat hunting, construct and maintain acceptable camp/facilities, manage solid and liquid waste, and maintain worker and community health. These practices and others can also serve to limit the potential transmission of zoonotic diseases.

Significance of Subject Matter

While we often know what to do to mitigate disease transmission, industries do not always ensure that such practices are followed for myriad reasons: knowledge, political will, cost, etc. This presentation will outline the links between extractive industry activities and the potential for zoonotic disease transmission. It will also highlight some known best practices that companies can take to encourage biodiversity, protect worker and community health and limit the possibility of global epidemics.

APPENDIX IV: ONLINE COMMUNICATIO S AND PRESS COVERAGE

Facebook

<http://www.facebook.com/media/set/?set=a.325957037421558.105764.120761677941096&type=1>

<http://www.facebook.com/media/set/?set=a.305726736111255.101451.120761677941096&type=1>

<http://www.facebook.com/media/set/?set=a.366039463413315.113891.120761677941096&type=1>

Twitter

RESPOND_EPT RESPOND

USAID's RESPOND and PREVENT projects trained Ugandan media in outbreak response reporting. twitpic.com/7ico72

RESPOND_EPT RESPOND

USAID's RESPOND project, collaborating with the PREVENT project, trained Ugandan media in outbreak response. twitpic.com/7hvkcZ

RESPOND_EPT RESPOND

RESPOND supported sensitization of communities in Uganda on One Health approaches during World Rabies Day, 2011 twitpic.com/71vrat

RESPOND_EPT RESPOND

Students sponsored by RESPOND in Uganda enhance their knowledge thru practical field experiences. twitpic.com/71vqhd

RESPOND_EPT RESPOND

RESPOND hands over servers to Makerere University College of Veterinary Medicine to support e-learning. twitpic.com/6zcDiw

Press Releases



Action Office: ECON, PAS, AID, CDC, CLO, POL
Info Office: CIS_INFO, ECON_LES_INFO, POL_LES_INFO, PAS_LES_INFO, FAS_LES_INFO, DAO_INFO, AID_LES_INFO, POL_INFO
MRN: 11 BANGKOK 3710
Date/DTG: Oct 18, 2011 / 180625Z OCT 11
From: AMEMBASSY BANGKOK
Action: WASHDC, SECSTATE *ROUTINE*
E.O.: 13526
TAGS: EAGR, EAID, ELAB, ETRD, MARR, OEXC, PREL, TBIO, TH, LA
Captions: SIPDIS
Subject: Ambassador Promotes U.S.-Led Regional Cooperation In Provincial Thailand

1. (U) Summary: Ambassador Kenney visited Khon Kaen Province, the educational and commercial capital of Northeastern Thailand October 7, where she engaged various Thai counterparts from the government, the military, the private sector and academia. The Ambassador held open discussions with students, teachers and administrators at Khon Kaen University (KKU), explored civil-military activities with the Royal Thai Army's 23rd Military Circle, and toured the factory that makes official NBA jerseys. The highlight of the visit was a meeting with the leadership of the KKU Faculty of Veterinary Medicine where the Ambassador learned about a Thai-U.S. partnership, through the Emerging Pandemic Threats program, that is strengthening detection and response to infectious disease of animal origin threatening human and animal health in Laos and the region.

2. (U) Comment: As exemplified by the Emerging Pandemic Threats program, U.S. engagement in the poorest region of Thailand has promoted bilateral relations not only between the U.S. and Thailand, but between Thailand and Laos as well. While focused on the goal of mitigating disease emergence in the region, the Thai-U.S. partnership is also contributing significantly towards transnational cooperation, as well as peace and prosperity in the Mekong region. The program also serves as a good example of Thailand's graduation from aid recipient to development partner. End Summary and Comment.

Ambassador's First Trip to Khon Kaen

3. (U) The Ambassador began her day by engaging students and faculty from KKU in a wide-ranging conversation touching on the importance of ASEAN, strengthening Thai civil society, and U.S.-Thai relations. For a provincial university, KKU has a rich history of internationalization, with at least 28 undergraduate exchange students from the U.S., and an active former Fulbright community. This diverse academic environment enabled the Ambassador to continue her outreach later in the day with State Department exchange program alumni and U.S. students currently participating in exchange studies at KKU.

4. (U) During her visit Ambassador Kenney was also briefed by Royal Thai Army officials on civil-

military efforts in the region, including the military response to ongoing flooding. In addition, she visited the factory where official NBA jerseys are manufactured in compliance with strict international labor practice standards. The Ambassador’s visit drew keen interest from the local press corps throughout the day.

A U.S. - Thai Partnership in Regional Health

5. (U) The highlight of the Ambassador’s trip was her visit to KKU’s USAID-supported Emerging Pandemic Threats program. The program addresses drivers of disease emergence, and improves capacity for early detection and response to infectious disease events of animal origin before they threaten the human population. Such pathogens of import to the region include highly pathogenic avian influenza (H5N1), Nipah virus, and SARS coronavirus, which carry high fatality rates in humans and the potential to be transmitted rapidly across country borders. Broadly, USAID helps Mekong River countries jointly develop a coordinated regional response to disease outbreaks.

6. (U) More specific to the Ambassador’s visit, USAID technical assistance facilitates a partnership between KKU Veterinary Faculty and Nabong Agricultural College, National University of Laos, which aims to build Laotian capacity in veterinary medicine. The three-party relationship aims to address the severe shortage of doctoral-level veterinarians in the Lao People’s Democratic Republic, training a future cadre of veterinarians in Laos to manage disease outbreaks through a multidisciplinary approach. Khon Kaen University’s Veterinary Faculty is comparatively advanced – vis-à-vis Laos - and has developed a collegial and productive relationship with Laotian staff and students through faculty and student exchanges and other approaches. The veterinary school has also received USAID assistance through the Food and Agriculture Organization to train Laotian provincial and district livestock officers on disease investigation and outbreak response.

7. (U) The Emerging Pandemic Threats Program demonstrates the effectiveness of regional health partnerships under joint U.S.–Thai leadership. The Ambassador found that the program provides a strong base for the Lower Mekong Initiative by leveraging technical support from a number of U.S. based consulting firms and academic institutions including Tufts University and the University of Minnesota. U.S. influence is evident in the makeup of the staff as well. Twelve members of KKU’s veterinary staff earned doctorates in the U.S. For its part, the Royal Thai Government provides scholarship support for students from Nabong Agricultural College to study at KKU’s veterinary school. Thus, this partnership has a “trilateral” nature, with U.S. and Thai assistance promoting health and prosperity in Lao PDR and beyond, to address health issues throughout the Lower Mekong region.

Drafted By:	BANGKOK:Bruchon, Emilie S
Cleared By:	1900.0 - POL:Hansen, Joel B 1900.0 - DCOM:Cefkin, Judith B 1900.0 - ECON:Schultz, Jacob T 1967.0 - PAS/INF/MED:Braunohler, Walter M Office of Public Health:Schar, Daniel (RDMA/OPH)
Approved By:	1900.0 - EXEC:Kenney, Kristie A
Released By:	BANGKOK:Bruchon, Emilie S
Info:	
Attachments:	Metadata.dat

Emerging Pandemic Threats Program

PREDICT RESPOND PREVENT IDENTIFY



For Immediate Release

Contacts: Dr. Le Vu Anh
Dean, Hanoi School of Public Health
lva@hsph.edu.vn

Brian McLaughlin
Regional Director, RESPOND project, USAID
Brian_McLaughlin@dai.com

Claudia Costabile
Communications Officer, RESPOND project, USAID
claudia_costabile@dai.com

USAID EPT Project (Emerging Pandemic Threats) Supports Vietnam's One Health University Network

Nha Trang, Vietnam (November 22, 2011) – The Hanoi School of Public Health, supported by the United States Agency for International Development (USAID) Emerging Pandemic Threats (EPT) RESPOND project, held today, the first meeting of the Vietnam One Health University Network (VOHUNET) to promote an effective national response to animal diseases that could affect human health.

VOHUNET is the result of advocacy efforts to establish a Southeast Asia One Health University Network (SEAOHUN) to address zoonotic diseases outbreaks. The organization of a network of universities seeks to increase regional coordination in the response to disease outbreaks.

The Vietnamese network plans to register eighteen¹⁸ universities as part of its network of schools of medicine, public health, and veterinary medicine. The Hanoi School of Public Health, Hanoi Medical University, and Faculty of Veterinary Medicine, Hanoi University of Agriculture will act as the focal institutions for the newly formed network.

The meeting, which was a follow up to an initial VOHUNET formative meeting, held on June 2 and 29, 2011, gathered representatives of USAID, RESPOND, Vietnam's Ministry of Agriculture and Rural Development, Ministry of Health, Ministry of Education and Training, Ministry of Science and Technology as well as representatives from ten universities throughout Vietnam.

Participants discussed plans to establish a One Health university network comprised of Vietnamese universities, assessed One Health training and research gaps in VOHUNET partners, and worked with target ministries to develop One Health trainings and research strategies.

Keynote speakers included USAID Vietnam Mission Director, Francis Donovan, Hanoi School of Public Health Dean, Dr. Le Vu Anh, and RESPOND Technical Director, Dr. Stanley Fenwick.

Notes to editors

The **One Health** approach recognizes that human health, animal health, and ecosystem health are inextricably linked, and that collaboration across sectors is needed to achieve more rapid and effective responses with benefits to public, animal, and environmental health.

Collaboration among sectors is needed for effective and timely disease surveillance, monitoring environmental impacts, leadership and management needed for this new approach to surveillance and response, evaluation, and capacity building in each of these areas.

The RESPOND project is one component of USAID's Emerging Pandemic Threats (EPT) program and coordinates activities with three other EPT projects: PREDICT, PREVENT and IDENTIFY. RESPOND is also in close coordination with other international agencies, such as the U.S. Centers for Disease Control and Prevention (CDC), the Food and Agriculture Organization (FAO), the Organisation for Animal Health (OIE), and the World Health Organization (WHO).

Implemented by DAI, the RESPOND project team builds on the expertise of the University of Minnesota (UMN), Tufts University, Training Resources Group, Inc.(TRG), and Ecology and Environment (E&E) to accomplish its goal of transforming public health education to ensure a more integrated approach to outbreak response.

For more information, visit <http://respond-ept.com>

Emerging Pandemic Threats Program

PREDICT RESPOND PREVENT IDENTIFY



For Immediate Release

Contacts: Dr. Bounlay Phommasack
Director, NEIDCO
neidco@laopdr.com

Thomas D'Agnes
USAID Director, Lao P.D.R.
dagnestr@state.gov

Brian McLaughlin
Regional Director, RESPOND project, USAID
Brian_McLaughlin@dai.com

Claudia Costabile
Communications Officer, RESPOND project, USAID
claudia_costabile@dai.com

USAID's Emerging Pandemic Threats Program (EPT) hosts a One Health meeting with LAO PDR Ministry of Health, Ministry of Forestry and Fisheries, and Ministry of Foreign Affairs

The four components of the USAID's program will discuss plans and activities for 2012

Vientiane, LAO PDR (November 23, 2011) – USAID's Emerging Pandemic Threats Program (EPT), in collaboration with the National Emerging Infectious Diseases Coordinating Office (NEIDCO) of Lao PDR is hosting a One Health meeting with EPT partners (PREVENT, IDENTIFY, PREDICT and RESPOND) to discuss plans and activities in disease outbreak response for 2012.

The meeting, which is a follow up to a successful National One Health Symposium hosted in September 2011, will feature representatives of all four USAID EPT projects as well as representatives of Lao PDR's Ministry of Health, Ministry of Forestry and Fisheries, and Ministry of Foreign Affairs.

Participants of the meeting aim at defining EPT's current and future role in Lao PDR's national strategy for prevention and control of emerging zoonotic diseases (EZDs), increasing dialogue between Ministries to address existing policy gaps, and coordinating between EPT partners for

Lao-based activities. Presentations will focus on work progress and achievements, planned 2012 activities, and a Monitoring and Evaluation (M&E) plan with indicators to measure the progress of activities under each EPT Project.

Keynote speakers include the U.S. Ambassador, Karen Stewart, and NEIDCO director, Dr. Bounlay Phommasack.

Notes to editors

The **One Health** approach recognizes that human health, animal health, and ecosystem health are inextricably linked, and that collaboration across sectors is needed to achieve more rapid and effective responses with benefits to public, animal, and environmental health.

Collaboration among sectors is needed for effective and timely disease surveillance, monitoring environmental impacts, leadership and management needed for this new approach to surveillance and response, evaluation, and capacity building in each of these areas.

The National Emerging Infectious Disease Coordination Office (NEIDCO) is an inter-governmental agency that implements Lao PDR's National Avian Influenza and Pandemic Preparedness Plan (the National Plan). Drawing on global strategies to combat emerging infectious diseases, NEIDCO monitors animal and human health, increases awareness of EIDs through information, education, and communication as well as coordinates multi-sector responses to new and emergent threats.

The U.S. Agency for International Development (USAID) Emerging Pandemic Threats program (EPT) emphasizes early identification of and response to dangerous pathogens in animals before they can become significant threats to human health. Using a risk-based approach, the EPT program builds on USAID's successes in disease surveillance, training, and outbreak response to focus on geographic areas where these threats are most likely to emerge.

The EPT program draws on expertise from across the animal- and human-health sectors to build regional, national, and local capacities for early disease detection, laboratory-based disease diagnosis, rapid disease response and containment, and risk reduction. These efforts target a limited number of geographic areas, known as "hot spots," where new disease threats have emerged in the past.

The EPT program currently focuses on "hot spots" in the Congo Basin of East and Central Africa, and in the Mekong region of Southeast Asia.

Websites

Southeast Asia

<http://www.tuoitrenews.vn/cmlink/tuoitrenews/society/us-program-supports-one-health-university-network-1.52112>

<http://www.tuoitrenews.vn/cmlink/tuoitrenews/society/us-program-supports-one-health-university-network-1.52112>

<http://baodientu.chinhphu.vn/Home/70-cac-benh-moi-noi-co-nguon-goc-tu-dong-vat/201111/103079.vgp>

<http://vnexpress.net/gl/suc-khoe/2011/11/70-cac-benh-moi-noi-lay-tu-dong-vat/>

<http://thanhtra.com.vn/tabid/77/newsid/47809/temidclicked/34/seo/Ho-tro-ung-pho-hieu-qua-dich-benh-tu-dong-vat/Default.aspx>

<http://giadinh.net.vn/20111122050918860p1044c1045/my-ho-tro-viet-nam-ung-pho-cac-dich-benh-tu-dong-vat.htm>

<http://www.ktdt.com.vn/news/detail/312960/70-cac-benh-moi-noi-co-nguon-goc-tu-dong-vat.aspx>

<http://giaoduc.edu.vn/news/song-khoe-720/70-cac-benh-moi-noi-co-nguon-goc-tu-dong-vat-175773.aspx>

http://www.soytekhanhhoa.gov.vn/index.php?option=com_content&task=view&id=2202&Itemid=55

<http://www.baokhanhhoa.com.vn/Tintuc-Sukien/201111/70-giao-su-tien-si-giang-vien-tham-gia-2112620/>

<http://www.hsph.edu.vn/node/958>

East Congo Basin

Minister formalizes the DRC CCC to ensure its legitimacy at a USAID RESPOND funded meeting

<http://fr.allafrica.com/stories/201111211866.html>

USAID RESPOND supports a successful AFENET Conference in Tanzania, 11-16 December 2011.

<http://www.afenet-conference.net/onehealth.php>

Ministers resolve to strengthen Epidemiology training at a USAID RESPOND funded AFENET conference

<http://www.dailynews.co.tz/home/?n=26368&cat=home>

Tanzania's Prime Minister advises on emerging and re-emerging diseases at a USAID RESPOND funded AFENET conference <http://www.ippmedia.com/frontend/index.php?l=36415>

APPENDIX V – OTHER MATERIALS

The documents entitled “**Environmental Manual and Framework Mitigation and Monitoring Plan (EM/FMMP)**” and “**Environmental Mitigation and Monitoring Report (EMMR)**” were delivered during the first quarter of Year 3. Copies of the documents are in USAID possession.