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RESPOND YEAR THREE QUARTERLY REPORT

EMERGING PANDEMIC THREATS PROGRAM

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RESPOND

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EMERGING PANDEMIC THREATS PROGRAM

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TABLE OF CONTENTS

TABLE OF CONTENTS.....	3
ACRONYMS.....	5
EXECUTIVE SUMMARY.....	11
GLOBAL ACTIVITIES AND HEADQUARTERS HIGHLIGHTS.....	11
EAST CONGO BASIN.....	12
WEST CONGO BASIN.....	12
SOUTHEAST ASIA.....	13
MONITORING AND EVALUATION.....	14
I. GLOBAL ACTIVITIES.....	15
MANAGEMENT REPORT.....	15
PROGRESS REPORT: GLOBAL ACTIVITIES.....	18
II. EAST CONGO BASIN ACTIVITIES.....	23
MANAGEMENT REPORT.....	23
PROGRESS REPORT: EAST CONGO BASIN REGIONAL ACTIVITIES.....	27
COUNTRY ACTIVITIES – UGANDA.....	30
COUNTRY ACTIVITIES – KENYA.....	35
COUNTRY ACTIVITIES – ETHIOPIA.....	37
COUNTRY ACTIVITIES – RWANDA.....	38
COUNTRY ACTIVITIES – TANZANIA.....	38
COUNTRY ACTIVITIES – DEMOCRATIC REPUBLIC OF CONGO.....	39
III. WEST CONGO BASIN ACTIVITIES.....	41
MANAGEMENT REPORT.....	41
PROGRESS REPORT – WEST CONGO BASIN REGIONAL ACTIVITIES.....	44
COUNTRY ACTIVITIES – DEMOCRATIC REPUBLIC OF CONGO.....	49
IV. SOUTHEAST ASIA ACTIVITIES.....	53
MANAGEMENT REPORT.....	53
PROGRESS REPORT – SOUTHEAST ASIA REGIONAL ACTIVITIES.....	58
COUNTRY ACTIVITIES - THAILAND.....	61
COUNTRY ACTIVITIES - VIETNAM.....	64
COUNTRY ACTIVITIES – LAO PDR.....	65
COUNTRY ACTIVITIES - INDONESIA.....	66
COUNTRY ACTIVITIES - CAMBODIA.....	67
COUNTRY ACTIVITIES - MALAYSIA.....	68

V. MONITORING & EVALUATION.....	69
Q2 HIGHLIGHTS	69
EVENT OVERVIEW.....	72
EVENT PARTICIPANT PROFILE	75
INSTITUTIONAL COLLABORATION.....	77
OTHER RESULTS	77
PROJECT TO DATE	78
MUSK ASSESSMENT.....	80
BEST PRACTICE REVIEW – WASTE DISPOSAL IN REMOTE LOCATIONS	82
M&E TEAM MEETING.....	82
INDICATORS	84
SUB-ACTIVITY PROGRESS	89
VI. APPENDICES:	131
APPENDIX I: CONCEPT PAPERS AND GRANTS	131
APPENDIX II: SUCCESS STORIES AND REGION HIGHLIGHTS	139
APPENDIX III: PUBLICATIONS AND ABSTRACTS	154
APPENDIX IV: ONLINE COMMUNICATIOS AND PRESS COVERAGE	156
APPENDIX VI – OTHER MATERIALS	162

ACRONYMS

ADPC	Asian Disaster Preparedness Center
AET	Applied Epidemiology Training
AFENET	Africa Field Epidemiology Network
AFRO	WHO – Regional Office for Africa
AFRUS-IDM	Africa-US Integrated Disease Management
ANIC	National Nurses Association of DRC
ANPN	Agence Nationale des Parcs Nationaux
AOTR	Agreement Officer’s Technical Representative
ASEAN	Association of Southeast Asian Nations
ATVCO	L'Association des Techniciens Veterinaires au Congo (Association of Veterinary Technicians of Congo)
AU	African Union
AUF	Agence Universitaire de la Francophonie
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
CAHW	Community Animal Health Workers
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)
COVAB	Makerere University College of Veterinary Medicine, Animal Resources and Biosecurity (Uganda)
CTPH	Conservation Through Public Health
DA	Direct Assistance
DDAF	Deputy Director for Administration and Finance
DGLAHS	Directorate General for Livestock and Animal Health Services
DLD	Department of Livestock Development
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
ERAIFT	École Régionale Post-Universitaire d'Aménagement et de Gestion Intégrés des Forêts et Territoires Tropicaux
EZD	Emergency Zoonotic Diseases
FAO	Food and Agriculture Organization of the United Nations
FAS	Field Accounting System
FEAT	Field Epidemiology Association of Thailand
FESC	Field Epidemiology Short Courses
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
IFASIC	Institut Facultaire des Sciences de L’Information et Communication
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
ITAV	Institut de Technique Agro-Vétérinaire
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
MINAGRI	Ministry of Agriculture and Animal Resources
MISRZ	Multidisciplinary and Integrated Surveillance and Response to Zoonotic Diseases
MOA	Ministry of Agriculture
MOF	Ministry of Forestry
MOH	Ministry of Health (Uganda)
MoNRE	Ministry of Natural Resources and Environment
MOPH	Ministry of Public Health (Thailand)
MOU	Memorandum of Understanding
MPH	Master of Public Health
MS	Master of Science
MVPM	Masters of Veterinary Preventive Medicine
MUSPH	Makerere University School of Public Health
NAC	Nabong Agricultural College
NaVri	National Veterinary Research Institute
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
SOW	Standard of Work
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
UNSC	UN System Influenza Coordination
UPDF	Uganda People’s Defense Force
UPN	Université Pédagogique Nationale
USAID	U.S. Agency for International Development
USAID/W	USAID Washington
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
VAT	Value Added Tax
VMKKU	Veterinary Medicine Khon Kaen University
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

EXECUTIVE SUMMARY

GLOBAL ACTIVITIES AND HEADQUARTERS HIGHLIGHTS

This quarter of Year 3 started with a major change in leadership. David Elkins, RESPOND's project director since its inception, resigned on December, 2011, and **Robert Ryan-Silva** started as project director on February 1, 2012. The new project director visited two of the three regional offices during the first quarter (East Congo and West Congo) to have a first-hand understanding of the project as a whole and to meet with regional project managers. The director will visit the third regional office (Southeast Asia) in April of 2012, after which changes in the project structure and management will be made as they become necessary to streamline the activities for the remaining years of the project.

In general, the number of activities for the project has increased substantially, and a number of Region Highlights and Success Stories were generated due to the increase in events and activities. In particular, RESPOND's U.S. university partners (Tufts University and University of Minnesota) held several student and faculty One Health sensitizations in OHCEA member universities. Hundreds of students and faculty attended the sensitization events.

Another highlight for the headquarters office in Bethesda was the start of expansion of the Central Desktop content management system to include other EPT projects. The objective is to create a more collaborative environment throughout the EPT program, and share events, activities and milestones. The program-wide platform is expected to launch sometime during Quarter 3 of Year 3.

Communications Officer, Claudia Costabile, started visiting the regional offices during this quarter to provide USAID branding and marking guidance as activities in the field are implemented. She also offered a number of trainings to the East Congo and West Congo regional offices, including communications best practices, effective reporting and online communications. She plans to visit the Southeast Asia office sometime in the Summer of 2012.

On the Global Activities side, most of the work focused on the One Health Core Competencies development. A summary write-up of the work to date reviewing discipline-specific competencies and the initial group of subject matter expert interviews and analyses was developed in. The summary was sent to the EPT One Health Core Competency working group for review and comment. RESPOND's Felicia Nutter and Marguerite Pappaioanou met with the Tufts team in Boston on February 24 to provide additional feedback on the summary report, and to discuss suggested next steps.

This quarter RESPOND also contributed to the development of an educational brochure for the Extractive Industry Working Group (EIWG) that was distributed and presented at the EPT meeting in January 2012. Following additional time for external review and comment, the brochure will be

finalized and then used during outreach to extractive industry companies and shared industry-related meetings and conferences.

EAST CONGO BASIN

One of the major events led by the East Congo regional office during this quarter was the start of One Health sensitization to students and faculty in the OHCEA member universities. Led by RESPOND's U.S. university partners (Tufts University and University of Minnesota), the sensitizations attracted hundreds of students and faculty interested in ways of collaborating and expanding the One Health concept in Eastern and Central Africa.

The ECB office also welcomed RESPOND's new Project Director, Robert Ryan-Silva, to the regional office. There, Rob met with the ECB team and local partners. RESPOND Agreement Officer's Technical Representative, Rob Henry, accompanied the new project director and both participated in the 4th OHCEA Summit in Nairobi, in January, 2012.

RESPOND Communications Officer, Claudia Costabile, traveled to the East Congo Basin office for two weeks in January to work on ECB communications planning. She also offered trainings to RESPOND's current and future partners on USAID branding, marking and communications best practices. The training was attended by OHCEA, the Uganda Manufacturers Association, the Federation of Uganda Employers, and AFENET. While in Kampala, Ms. Costabile worked with OHCEA's Website Manager to review content and improve the website's design. The redesigned website can be found at: www.ohcea.org.

Another accomplishment for the East Congo regional office this quarter was the formal submission of the OHCEA grant to RESPOND in March, 2012, after careful reformatting and evaluation by RESPOND's leadership (regional and at headquarters).

WEST CONGO BASIN

Due to the travel ban imposed by the U.S. Embassy in the DRC because of the country's general election period of unrest, between November and January of 2012, the West Congo regional office had to postpone several activities planned for the beginning of Quarter 2.

Even with restricted travel, many activities took place in the West Congo region. One of the highlights of the WCB office this quarter was the support to the government of Cameroon in their establishment of a **National Program for Prevention and Control against Emerging and Reemerging Zoonoses**, aimed at

making Cameroon a reference of success in the prevention and control of emerging and re-emerging zoonoses, employing One Health approaches, by 2035. RESPOND sponsored two national experts to assist the ad hoc committee in developing the national program. Other EPT partners were also actively engaged and contributed to this initiative (PREDICT, represented by the Global Viral Forecasting Initiative (GVFI), and IDENTIFY represented by WHO and FAO). This collaboration allowed the integration of EPT's objectives in the national program.

RESPOND's Communications Officer, Claudia Costabile, conducted trainings for staff and local stakeholders (CCUS, FUS, UNIKIN and Ministry of Higher Education) on the USAID branding and marking policies and regulations, communications best practices and effective writing skills.

The new RESPOND's Project Director, Robert Ryan-Silva and DAI's Health Sector Managing Director, Jerry Martin, visited the West Congo regional office in March of 2012. Together with the East Congo regional office manager, Lendell Foan, they met with key partners including OHCEA focal persons and the CCC to understand and realign the West Congo activities towards OHCEA.

Members of Tufts University and University of Minnesota (UMN) traveled to University of Lubumbashi to carry OHCEA-related activities, and to establish relationships with faculty for future training opportunities.

SOUTHEAST ASIA

SEAOHUN's establishment and preliminary operation started during Quarter 2, representing the most important task carried in the Southeast Asia regional office. After the 2nd Deans' meeting in December 2011, an Executive Board was created to govern the network, and the first formal meeting of the Executive Board was held during the December Dean's meeting. A follow-up meeting was conducted on February 21 and 22, 2012 in Jakarta, Indonesia, in which a SEAOHUN annual work plan was discussed, reviewed and endorsed by the Executive Board members.

The Southeast Asia regional office also supported and co-organized the Global Health Institute (GHI) One Health leadership program in collaboration with Chiang Mai University in Thailand, during January, 2012. The program focused on developing One Health leadership and technical capacity, and provided training opportunities to Master's and doctoral-level students, as well as mid-to-senior level career professionals.

On the administrative side, the regional office has restructured its operations (corporate diagram attached in the end of this report) to reflect the needs of SEAOHUN. RESPOND's project director, Robert Ryan-Silva is travelling to the regional office early in Quarter 3 to meet with the Southeast Asia team and provide guidance on further changes in structure necessary to the effective support to SEAOHUN.

MONITORING AND EVALUATION

Twenty-nine sub-activity events occurred in Quarter 2, which was the most productive RESPOND quarter to date, in terms of the number of events. Public lectures/presentations/press conferences accounted for a nearly 400% increase in participation in this quarter, mostly due to the One Health sensitizations in OHCEA countries, held by the East Congo and West Congo Regional Offices.

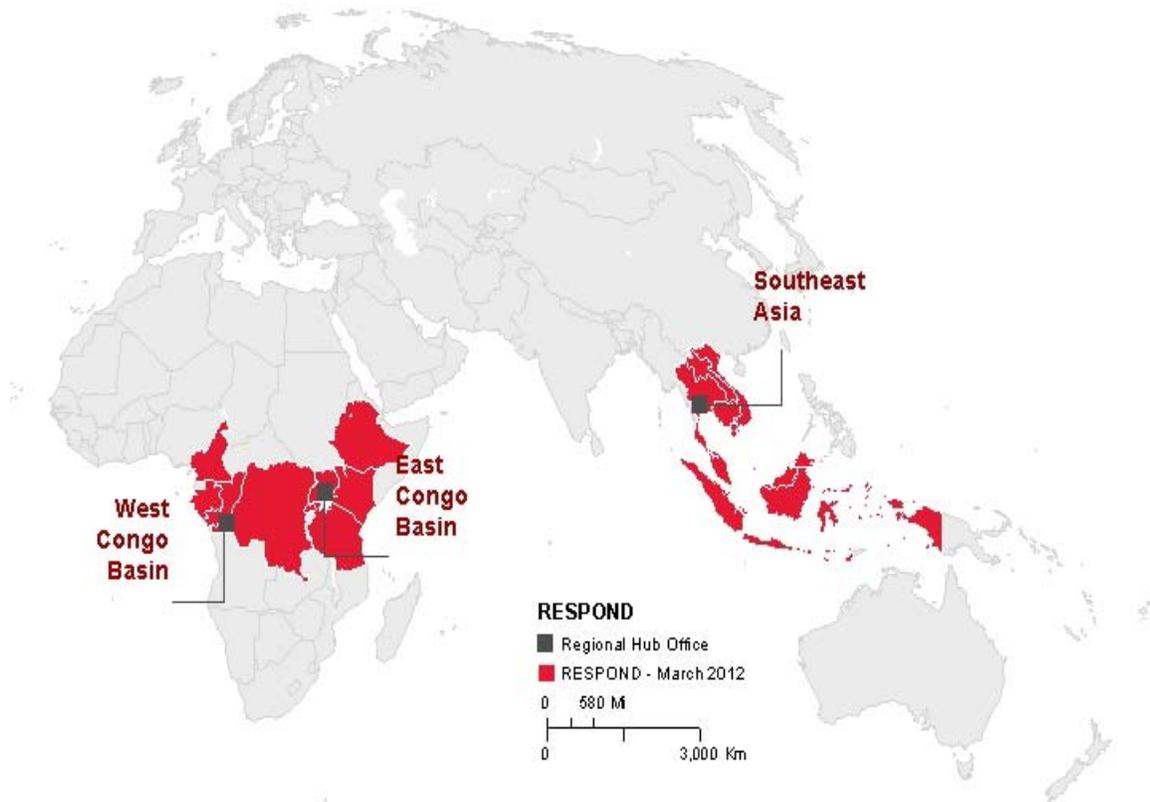
Government and university representation at RESPOND events were nearly equal (approximately 40%) in the second quarter. While the nationality of event participants is largely dependent on event location, for the events conducted during Quarter 2 participants were primarily from Thailand (30%), Cameroon (21%), and DRC (16%). Overall, event participants have rated RESPOND events as good (3.4 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).

With respect to institutional collaboration (i.e., networks, twinning), 18 exchanges occurred in Quarter 2. 61% of the exchanges that have occurred were introductory partnership exchanges, laying the groundwork for future activities. Curriculum development, module development, lecturing and collaborative research activities are all beginning to occur, approximately 9% each of the total collaboration. Professional exchanges are also occurring, but to a lesser degree (5%). A Best Management Practices Review was conducted to provide a state-of-the-art summary of issues related to waste disposal during outbreak responses, provide reference materials for national RESPOND partners, provide training materials for use by RESPOND or others, disseminate knowledge of relevant Best Management Practices (BMPs) to project partners and the wider practitioner community.

The M&E team conducted an assessment of the MUSK implementation at Makerere University (4.1.2EC), and the assessment revealed that it will take a concerted effort to meet the original system objectives (e.g., additional hardware installation, additional training, user incentives, support improvement).

The full M&E team (M&E Manager, Regional M&E Officers, university M&E team members) met in Bangkok, in February, 2012, to review and develop M&E plans, activities and tools. This weeklong meeting was valuable to support cross-partner and cross-regional collaboration, as well as to interact with the Southeast Asia office.

I. GLOBAL ACTIVITIES



The global map above displays where RESPOND currently works (in red). RESPOND Regional Hub Offices are located in Kampala (Uganda), Kinshasa (Democratic Republic of Congo), and Bangkok (Thailand), covering two regions considered hot-spot areas for the emergence and re-emergence of zoonotic pandemic threats.

MANAGEMENT REPORT

GENERAL OBSERVATIONS AND HIGHLIGHTS OF THE QUARTER:

Central Desktop, a content management system, currently hosts two knowledge management systems affiliated with the RESPOND Project and the EPT Program. The RESPOND Team has been using Central Desktop as a collaborative tool since April, 2011. With fifty-six active Workspaces and over one hundred members, the RESPOND Central Desktop site has been highly effective in providing a space for communication, event planning, and document sharing.

During this quarter, RESPOND has led the development and early stages of implementation of a second Central Desktop site to be used by client and project staff members throughout the EPT network. The

effort is designed to foster greater collaboration between the EPT projects in order to enhance activity coordination and encourage the sharing of technical resources. The EPT site on Central Desktop is designed to include a Global Workspace that is visible to all members of the site, as well as a set of Workspaces grouped by program country.

The EPT Global Workspace includes relevant news, pictures and documents of interest to project staff and select members of partner organizations. Country-specific Workspaces housed in Central Desktop will have a more limited population, and it is where the majority of collaboration on technical content is expected.

Beginning in February, 2012, RESPOND staff worked closely with USAID to design a system that would efficiently meet the aforementioned goals. The rollout of the EPT site began in March, 2012, and will continue as more country-specific Workspaces are developed.

Through the assistance of an independent consultant, the Central Desktop information sharing system used by the RESPOND Project began to be populated to include other Emerging Pandemic Threats programs. Once fully rolled out, Central Desktop will serve as a central platform for EPT-wide knowledge management and communication.

The RESPOND website (<http://www.respond-ept.com>) is in the process of being redesigned by the DAI information technology team, and is expected to be re-launched in the third quarter of Year 3.

Project financial spend-to-date tracking mechanisms were accurate across all RESPOND offices and are updated monthly, which greatly streamlines the financial reporting process.

PROJECT ADMINISTRATION:

- Svafa Asgeirsdottir, Headquarters Grants Manager, traveled to Uganda and DRC in January 2012 to provide training for both East and West Congo Regional Grants Officers.
- RESPOND staff attended the EPT Partners' Meeting in Washington, DC in January 2012. Representatives from Tufts University and University of Minnesota, along with RESPOND's AOTR, Rob Henry, presented on university engagement and development.
- Communications Officer, Claudia Costabile, traveled to Uganda in January, 2012, and Kinshasa in March, 2012, to train East Congo and West Congo offices' staff and active local partners in USAID Policies for Branding and Marking, Communications Best Practices and Writing and Reporting Skill; she also supported both offices in preparing regional materials for distribution in key events.
- In March 2012, deans from Tufts University and University of Minnesota as well as DAI staff met with Rob Henry, Dennis Carroll, and Alisa Pereira to discuss university "twinning" relationships as well as potential avenues for bringing awareness to the project.

- Southeast Asia Regional Program Administrator, Pete Telaroli, worked with USAID/W to implement TAMIS WebMail in order to facilitate the travel approval process, streamlining both client and internal processes.

FINANCE:

- A new VAT (Value Added Tax) policy was implemented in the DRC in March, 2012. Lindsay Nelson, West Congo Regional Office's RPA, helped contact suppliers to request acceptance of RESPOND's VAT exemption, to comply with the new policy.

STAFFING:

- In March, Lindsay assisted the demobilization process for Wendy Ravano, West Congo Basin Regional Office Training Officer.
- In the absence of a Grants Officer in the Southeast Asia Regional Office, Pete Telaroli facilitated support for the grants process to the office.
- On 26 March, 2012, RESPOND's Operations Manager, Russ Klein, resigned, effective April 13, 2012. Transition planning and recruitment for a replacement are currently underway.

LESSONS LEARNED AND PROPOSED SOLUTIONS:

- DRC's Embassy recently started to require letters of invitation for travel to the country. Lindsay Nelson, West Congo Regional Office's RPA is coordinating letters of invitation for all travelers to avoid travel delays.
- With the volume of travel requests for the project, the approval process was becoming very laborious for USAID/W and RESPOND. In order to make the process more efficient, a new travel approval process was implemented, involving direct approval from USAID/W for all travel requests through TAMIS WebMail.

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

- Drafting of One Health Core Competencies: A summary write-up of the work to date reviewing discipline-specific competencies and the initial group of subject matter expert interviews and analyses was developed in February by Mary Y. Lee and the Tufts team, including Ray Hyatt and Donna Qualters, with assistance from Margaret Morehouse. The summary was sent to the EPT One Health Core Competency working group for review and comment. Felicia Nutter and Marguerite Pappaioanou met with the Tufts team in Boston on February 24 to provide additional feedback on the summary report, and to discuss suggested next steps.
- Posting of One Health Competencies. An opportunity arose earlier than initially planned to post work-in-progress for comment. The www.onehealthtalk.org website opens one topic of interest for discussion each month with a technical expert facilitator and e-discussion moderator. The summary of the discipline-specific competency review and subject matter expert surveys was posted in March for discussion. There was minimal participation and no useful feedback on the content was received. This may be in part because the www.onehealthtalk.org forum is new and not yet well known. RESPOND will consider posting future drafts of the One Health core competencies here, to continue with the open and transparent process.
- Presentations at relevant global organizations. On March 12-13, a One Health competency synthesis workshop was held at FAO in Rome, Italy, to bring together multiple different initiatives working to develop One Health competencies. Mary Lee (Tufts activity lead) and Felicia Nutter joined the workshop via teleconference, and Marguerite Pappaioanou participated in person. Workshop participants agreed upon common terminology, reviewed nine competency frameworks, and agreed upon seven competency domains that are central to One Health practice. Those are 1), communication, 2) conflict resolution, 3) systems analysis/thinking (external awareness and big picture), 4) values & ethics, 5) creating an enabling environment and advocating for change, 6) teamwork, and 7) leadership and management. A more comprehensive summary of the meeting can be found at <http://www.onehealthtalk.org/1/assets/File/One%20Health%20Competency%20Workshop.pdf>.

Planned activities:

- Drafting of One Health Core Competencies: The EPT One Health Core Competency Working Group will meet again on May 31 – June 1, in Arlington, VA, to advance the draft competencies.
- 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 continue to 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)

This global component of this activity is complete. Additional work will be undertaken regionally, with both OHCEA and SEAOHUN. TRG is 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).

In February 2012, officials from the USAID-Washington EPT program met with senior officials at WHO-AFRO headquarters in Brazzaville, Republic of Congo. One of the objectives of this meeting was to priorities which would be the core focus of activities for the RESPOND epidemiologist assigned to the Epidemic Preparedness and Response (EPR) group supervised by Dr. Benido Impouma.

Following additional discussions and technical meetings – including a WHO-AFRO visit during March by CDC officials responsible for IDSR technical guideline support, RESPOND is prepared to provide support to WHO-AFRO in the following areas:

- Facilitating discussions with Disease Surveillance & Response (DSR) unit to refine purpose of AFRO Regional Guidelines in support of Comprehensive Epidemic and Pandemic Prone Preparedness Planning.
 - Propose decision making algorithm for emerging pandemic threats of unknown etiology
 - Provide guidance on multi-sectoral coordination between national government authorities
- Broad agreement that IDSR Technical Guidelines serve as a strong foundation for strengthening systems to detect and respond to disease
- Engaging in discussions about potential linkages with International Health Regulations - Will the development of this plan support IHR compliance? Supporting coordination with WHO Headquarters initiative underway
- Once the concept note for regional guidelines receives internal approval, AFRO will invite stakeholders (partner agencies and technical experts) to a consultative meeting.
- Simultaneously, conduct a review of outbreak and response data available in the region (2010-2011) in the Event Management System and/or through trip reports.
- Prepare a proposal to carry out comprehensive review of outbreak preparedness and selected responses in 3-4 countries using the IDSR Evaluative Tool (Annex 7A)

Planned activities:

WHO-AFRO will continue to oversee activities, with technical input from RESPOND/EPT and CDC, pending final WHO-AFRO and USAID agreement. Once specific activities to be supported are agreed upon, an implementation plan will be developed.

LOW 3.2 SUPPORT OUTBREAK RESPONSE ACTIVITIES

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

Extractive Industry Working Group activities:

- RESPOND contributed to the development of an educational brochure for the Extractive Industry Working Group (EIWG) that was distributed and presented at the EPT meeting in January 2012. Following additional time for external review and comment, the brochure will be finalized and then used during outreach to extractive industry companies and shared industry-related meetings and conferences.
- Louise Flynn and Kama Garrison attended the Mining Indaba Conference, February 6-9, Cape Town, South Africa. The educational brochure was updated and focused on the mining industry for distribution at this conference. Contacts were made with the International Finance Corporation, International Council of Mining and Minerals, the World Bank, environmental consulting firms working in the area, and many different mining companies. In addition, Ms. Flynn participated in an introductory meeting sponsored by the World Wildlife Fund (WWF) to discuss conservation issues in the TRIDOM area, a USAID CARPE transboundary landscape of Cameroon, Gabon and Republic of Congo that includes critical protected areas and extractive industry (mining) concessions. Initial discussions covered plans to consider what the mining companies currently are planning to do in the area, and to assess the level of interest with the mining companies about forming a stakeholders group to work on conservation issues in the area. The mining companies that attended were interested in continuing the dialogue and would like participate in a workshop in Brazzaville later in the spring. RESPOND will be a stakeholder at this workshop.

Additional meetings and conferences attended:

- Louise Flynn attended meeting at Chatham House (February 14-16, London, UK) to discuss their role in advancing the message being developed by the EIWG with industry, governments, and lending institutions;
- Louise Flynn attended the Global Risk Forum One Health conference (February 19-22, Davos, Switzerland) with Renuka Bery of PREVENT. Renuka Bery presented on behalf of the EIWG. Contacts were made with representatives of the National Oceanic and Atmospheric Association, the Asian Development Bank, University of Minnesota, the Swiss Tropical Public Health Institute, and others.

Planned activities:

Extractive Industry Working Group activities:

- Update the white paper on emerging infectious disease risks from bats, rodents, and primates related to logging and forestry in Central/West Africa to reflect comments received, and to include information from East Africa;
- Update the mining brochure and submit to the International Council on Mining and Metals for review and comment;
- Continue refining the Extractive Industry Risk Assessment Tool.

Meetings and conferences to attend to continue raising awareness on One Health issues related to extractive industry activities:

- Prepare a paper for the International Union of Forest Research Organizations (IUFRO) Forestry Conference in Nairobi in June 2012;
- Prepare a paper for the Society of Petroleum Engineers Conference in Perth, Australia, in September 2012;
- Help plan and participate in a WWF Workshop in Brazzaville, Republic of Congo, to discuss mining and conservation in the TRIDOM CARPE Landscape, May 2012;
- Meet with International Finance Corporation and the World Bank

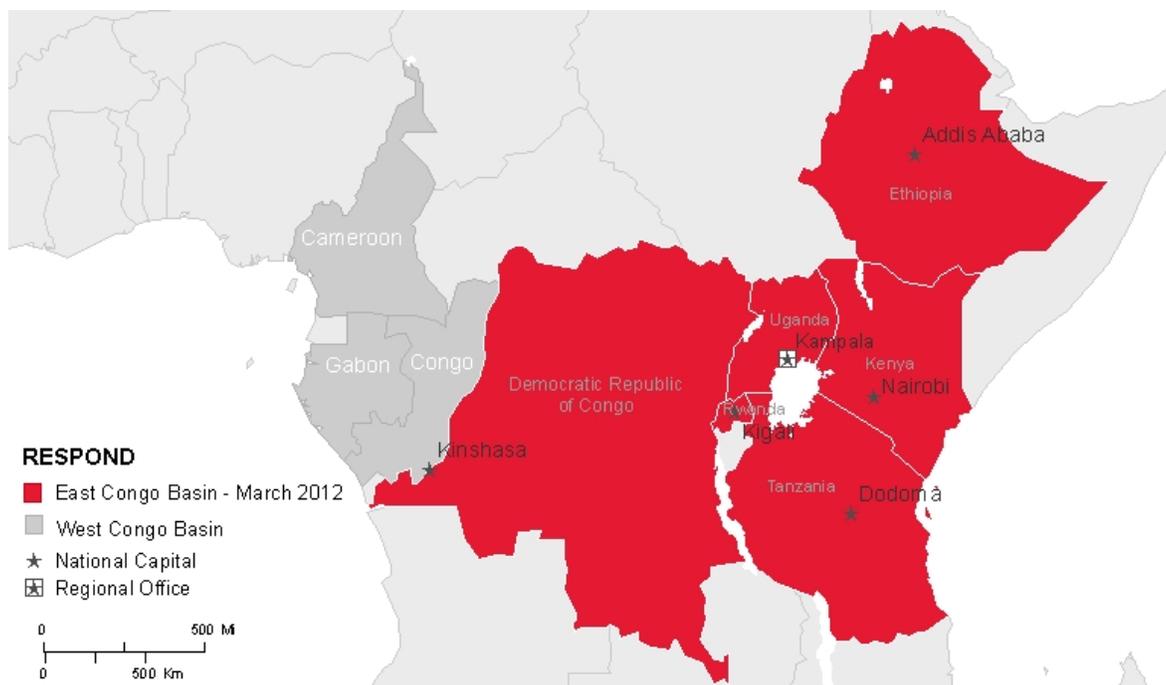
Sub-activity 3.3.1 GL: ProMED Mail: Expanding surveillance and verification for wildlife diseases

A new contract with ProMED Mail is in the final stages of negotiation, and will be signed in Q3.

Planned Activities:

PROMED will conduct two three-day workshops on the use of non-traditional information sources for enhancing routine disease infectious disease surveillance activities. One workshop will be held in the East Congo region, and the other in the West Congo region. Participating individuals will be from a wide range of disciplines including wildlife health, human and veterinary medicine, public health professionals, and community health care workers, among others.

II. EAST CONGO BASIN ACTIVITIES



The map above shows the East Congo Basin countries where RESPOND currently works (in red). The Democratic Republic of Congo (in light red) represents the reach of the East Congo office through OHCEA (One Health Central and Eastern Africa university network). 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:

Great strides were made this quarter as the ECB office worked closely with OHCEA to begin engagements with faculty, students, and US partners to kick-off One Health sensitizations, faculty exchanges, and Country Coordinating Committee meetings. Specific highlights from the quarter include:

- ECB facilitated eleven **One Health Sensitization** meetings held in five of the six OHCEA member countries throughout the quarter. A total of 2,621 students and faculty attended those

meetings. Universities that participated in the sensitizations were: Mekelle University School of Public Health and Jimma University School of Public Health and School of Veterinary Medicine in Ethiopia; University of Lubumbashi School of Veterinary Medicine and University of Kinshasa School of Public Health in DRC; Makerere University College of Veterinary Medicine, Animal Resources and Biosecurity (COVAB) and Makerere University School of Public Health in Uganda; Moi University School of Public Health, University of Nairobi School of Public Health and University of Nairobi Faculty of Veterinary Medicine in Kenya; and Umutara Polytechnic, Faculty of Veterinary Medicine in Rwanda.

- **One Health faculty exchanges and partnership discussions** were initiated between faculty from UMN and Tufts University and 13 OHCEA universities colleges and schools.
- A total of five **Country Coordinating Committee** meetings took place in Kenya, DRC, Uganda, and Ethiopia, representing a variety of One Health government and academic stakeholders in each country.
- The **Fourth Deans' Summit** was held in Nairobi, Kenya, February 26 – 29, 2012, attended by 13 deans from OHCEA's African institutions, as well as the University of Minnesota's Dean of School Veterinarian Medicine.
- Seven OHCEA Deans attended the **Engaging Intergovernmental Organizations** executive leadership and training study tour in Europe spanning Switzerland, Italy and France, from March 2 to 10, 2012.
- **OHCEA submitted its formal grant application** to RESPOND on March 2, 2012. After internal review, the application was submitted to USAID and OAA on March 8, 2012.
- On February 28, 2012, RESPOND's Project Director Rob Ryan-Silva and AFENET's Director, David Mukanga signed the **USAID-approved AFENET no cost extension** grant agreement modification. This grant is now active until July 31, 2012.

PROJECT ADMINISTRATION:

This quarter the ECB office focused on strengthening the capacity of local partners through direct technical support and by providing training and mentoring opportunities. In addition, extra attention was given towards the capacity and partnership building of OHCEA in expectation of their pending grant being approved early in the next quarter. In preparing OHCEA for this major milestone:

- RESPOND's new Project Director, Rob Ryan-Silva, travelled to Uganda to meet the ECB team, OHCEA and other RESPOND partners before continuing to Nairobi to attend the Fourth OHCEA Deans' Summit. Rob was accompanied by Rob Henry, RESPOND's Agreement Officer Technical Representative.

- RESPOND Communications Officer, Claudia Costabile, traveled to Uganda, and led a training for RESPOND current and future partners (OHCEA, UMA, FUE and AFENET) on USAID branding, marking and communications best practices. In addition, she worked with OHCEA’s Website Manager to review content and improve the website’s design. The redesigned website can be found at: www.ohcea.org
- RESPOND sponsored AFENET’s Grants Manager and Finance Manager, along with OHCEA’s Administrator and ECB’s Grants Officer to attend a USAID grants compliance and regulations training workshop in Nairobi, Kenya from February 20 -23, 2012.
- OHCEA Deans attended the Engaging Intergovernmental Organizations workshop at the WHO, OIE, FAO and WTO in Europe from March 2 – 10, 2012;
- In March, RESPOND provided OHCEA with the first monthly listing of project, grant, and research funding opportunities for the network of school and their faculty.

The ECB office also maintained its commitment to fully support RESPOND’ grant and M&E reporting and processes:

- RESPOND Senior Grants Manager, Svafa Asgeirsdottir, traveled to Uganda to provide grants management training to the new West Congo Basin Grants Manager as well as conduct a refresher training for the ECB Grants Manager.
- In mid-February, Humphrey Kabugo, ECB M&E Officer, traveled to Bangkok to attend the RESPOND Global M&E training meeting held there from February 12 to 18, 2012.

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 the key program-related events highlighted above.

ECB Travel (January – March, 2012)	
Type of Travel	Number of Trips
East Congo Basin staff regional/international travel	8 trips
RESPOND Technical Travel to ECB office and region	22 trips
Non-staff Regional/International Travel for ECB-sponsored Events (includes sponsored students, visitors, and partners/grantees)	39 trips

STAFFING:

- No staffing updates this quarter.

LESSONS LEARNED AND PROPOSED SOLUTIONS:

During the quarter, the ECB office maintained its focus on active communication and technical support to implementing partners, through an enhanced and integrated program management model that has built trust with two key implementing partners, AFENET and pending grantee OHCEA.

For AFENET – ECB has a designated a Program Manager to collaborate, support and monitor current grant activities. The active integration of RESPOND into AFENET includes the Program Manager attending AFENET’s internal monthly One Health Component Team meetings. Being embedded with our partners allows for active management of RESPOND funded activities, early identification of project, or grantee needs, and ability to network the partner to other EPT or donor related work. An example of this for AFENET is the planned inclusion of their Outbreak Investigation Module training at the U.S. Army Civil Affairs Team/Uganda Veterinary Civil Action Programs training program, for forty-four Community Animal Health Workers (CAHW) in the Karamoja region of Uganda.

Learning from the successful development of this ECB role, RESPOND has applied similar direct engagement with planned grantee OHCEA. Working with the new RESPOND Program Director, the Regional Director has increased the active and open communication between RESPOND and OHCEA, as RESPOND supports their activities directly, while also processing their grant application. This has created a better foundation of understanding and increased the strength of the working partnership to build upon once the grant is approved and OHCEA activities commence in full.

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

RESPOND supported OHCEA activities during the quarter that were focused on continued developed and understanding of One Health, both with the faculty and students of member universities, and also at the national level through the OHCEA One Health Country Coordination Committees. Specifically, RESPOND engaged OHCEA member schools to conduct faculty and student One Health sensitizations, supported U.S.– African university partnership discussions and faculty exchanges, and funded Country Coordinating Committee meetings.

One Health Sensitizations were held at numerous OHCEA institutions, educating students and faculty on the One Health approach to disease surveillance and response. Overall, the One Health sensitizations were very successful, typically with hundreds of students and faculty attending. Throughout the quarter, eleven One Health sensitizations were held, sensitizing a total of 2,621 students and faculty. The activities and results of these engagements are reported in the county sections contained within the ECB section of this report.

An output of the faculty engagements was an overall map of the needs and interests of the faculty at OHCEA schools. This will be a foundation for developing continued faculty exchanges and mentoring between the RESPOND U.S. university partners and OHCEA schools.

OHCEA also held its 4th Deans' Summit in Nairobi from February 27 – 28th. The Deans reviewed and endorsed the January – September 2012 Work Plan, reviewed the 2012 – 2013 work plan framework, and discussed the engagement of strategic partners outside of RESPOND. Operational issues, but of no less importance, included a review of OHCEA's draft operations manual, discussions on the definition of roles and responsibilities and reporting structures within institutions (focal persons and deans) and within OHCEA as a whole. The meeting was capped by the Secretariat presenting signed copies of OHCEA's Memorandum of Understanding and Articles of Association to each of the member institutions.

RESPOND supported seven OHCEA deans from veterinary medicine and public health disciplines to attend the Engaging Intergovernmental Organizations (EIO) executive leadership course held at the FAO, OIE, WHO and WTO from March 3 – 9, 2012. The deans attended this week-long intensive professional development program that is designed to help mid- and senior level government officials, industry leaders and academic faculty interact more effectively with intergovernmental organizations and with each other as they interacted and worked together through the week. Participants had an opportunity to gain insights into international standards for human health, animal health, and food safety.

"I would like to express my heartfelt thanks and gratitude to all of you for the encouragement and kindness you showed to me during the [EIO] workshop. The workshop has been a wonderful experience for me as this is my first time to go out of Africa and participate in international workshop. My school, Jimma University, and I will definitely benefit a lot from this workshop because it has been instrumental for me to make personal interactions with many officials of the intergovernmental organizations, US and Canadian universities. This in turn will be a starting for possible collaboration."

- Head, School of Veterinary Medicine, Jimma University College of Agriculture and Veterinary Medicine

Following the EIO study tour, three OHCEA deans stayed in Rome to attend the One Health Competency Workshop held on March 12 and 13, 2012. A broad range of One Health disciplines were represented at the workshop, including veterinary medicine, public health, nursing, occupational psychology, nutrition, medicine, and education. All participants work actively on One Health issues and developed or implemented competencies in their area of expertise, trying to work towards synthesizing One Health core competencies.

In support to the development of activities across the network, UMN supported the following calls bringing together the OHCEA Deans, OHCEA Secretariat, the U.S. University Deans and RESPOND ECB office:

- February 9. Agenda: (1) Update on EIO workshop- its importance and current arrangements. (2) Update on the OHCEA grant submission, and the proposed 3- year framework. (3) The 4th Deans Summit. (4) Discuss the USAID University Engagement call for proposals.
- March 15. Agenda: (1) Briefing on the outcomes of the Four Deans Summit. (2) Debrief by the OHCEA deans that participated in the EOI workshop. (3) Information on the upcoming UMN Public Health Institute. (4) Update on the progress of the review of the OHCEA grant. (5) Overview of planned regional OHCEA meetings and events. (5) Update on the progress of the joint UMN/OHCEA application to the USAID Higher Education Grant.

Though not directly related to RESPOND, during this quarter UMN and OHCEA partnered and submitted a joint proposal in response to the USAID Higher Education for Development call for proposals. This is an example of how the direct engagement of RESPOND's U.S. university partners with OHCEA

institutions can broaden the overall impact of the RESPOND project and the increased value and investment that can be brought in to the region.

Planned Activities:

The following activities are planned for the upcoming quarter. Exact dates will depend on the date of the grant award.

- May 6 – 7: The Ethiopia Country Coordination Committee “plus” meeting in Addis Abba, a meeting for CCC members in addition to government stakeholders;
- May 14– 16: OHCEA Focal Persons Year 4 Activity work planning;
- May 21 to June 8: Faculty Exchange between OHCEA faculty and US Universities at UMN’s Public Health Institute. Faculty from OHCEA countries will be traveling to UMN for faculty exchange activities;
- June 17 – July 14: RESPOND facilitating and supporting OHCEA member school students from the region to participate in the planned HED Summer School Program, hosted at Makerere University (Uganda). The program is a collaborative study program that brings students from U.S universities, East and Central Africa and others to engaged in courses that cover zoonotic diseases emphasizing experiential learning with students interfacing with wildlife, domestics and environmental issues;
- OHCEA Organizational Development. RESPOND facilitated initial conversations between TRG and the OHCEA Secretariat to provide technical support to the organizational, operational, and managerial structure of the network. The plan is to have full implementation through two separate consultancies. One will address management (the Board and the Deans Summit) and how it sets policy, addresses challenges and manages the growth of the network. The second consultancy will focus on operations, roles and responsibilities of the Secretariat to assure sound and effective day-to-day operational management of the network.

Other activities proposed for the coming quarter are below (pending approval of the OHCEA grant):

- Late May/early June: The 1st OHCEA Board Meeting;
- Late May/early June: OHCEA Secretariat Compliance Workshop and Country Administrator Training;
- June 2012: Focal Persons activity work planning for the October 1, 2012, through September 30, 2013.

COUNTRY ACTIVITIES – UGANDA

During the quarter there were regional activities in which OHCEA schools in Uganda participated. Please refer to sub-activity 1.2.3: One Health Central and Eastern Africa Network, under the Regional Activities section for more information.

LOW 3: OUTBREAK RESPONSE CAPACITY BUILDING

LOW 3.2 SUPPORT OUTBREAK RESPONSE ACTIVITIES

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

This quarter, RESPOND engaged OHCEA member schools in Uganda to conduct One Health sensitizations, U.S. – African university partnership discussions and faculty exchanges, and Country Coordinating Committee meetings.

One Health Sensitizations were held at Makerere University's College of Veterinary Medicine, Animal Resources and Biosecurity (COVAB) and its School of Public Health, aiming at educating students and faculty on the One Health approach to disease surveillance and response.

- February 25: COVAB One Health sensitization. Lead by Dr. Carolyn Garcia, and attended by 170 students and faculty.
- March 9: Makerere University College of Health Sciences One Health sensitization. Lead by Makerere's OHCEA Focal Persons, and attended by RESPOND Deputy Regional Director, Sandra Butler. Attended by 168 students.
- March 21: School of Public Health's One Health sensitization for faculty. Lead by Makerere's OHCEA Focal Persons, and attended by Dr. Mac Farnham and RESPOND Regional Director Lendell Foan. Attended by 68 faculty.

During the quarter RESPOND engaged in university – university One Health partnership discussions and faculty exchanges with Makerere University. These engagements were lead by Dr. Carolyn Garcia (UMN). Twenty faculty from COVAB and the Makerere University School of Nursing were engaged in separate meetings on 27 February.

The third major deliverable of OHCEA activities in Uganda was the Uganda One Health Country Coordination Committee meeting held on January 24 at the Makerere University COVAB. The meeting:

- Reviewed One Health activities being developed in the country by OHCEA;
- Discussed the Uganda CCC work plan and the outlined strategies, and put timelines to activities;

- Agreed to review the One Health Gap analysis report, identify the strengths and weaknesses, and advise accordingly.

In addition, the CCC decided that:

- the concept of One Health has to be popularized among relevant sector Ministries, NGOs and other stakeholders. Members agreed to ensure that One Health becomes synonymous with all stakeholders in the country;
- members should review or develop institutional work plans to include some of those non-RESPOND funded activities; and
- the CCC has to identify with other One Health teams in and out of the country, and learn how to relate and co-exist with other forces.

Planned Activities:

- The next Uganda CCC meeting is set for April 2012.

Sub-Activity 1.5.4 EC: Residency-based Knowledge Partnership Model for Building Veterinary Public Health Competence in Uganda.

This quarter activities under the Veterinary Public Health (VPH) sub-activity commenced with direct assistance funding. On 15 February, Sylvia Wanzala, the first VPH resident, traveled from Kampala to the University of Minnesota. Sylvia's trip is a pilot initiative for OHCEA, exemplifying the concept of university 'twinning' – to leverage existing programs towards building One Health institutional capacity. Sylvia will attend the VPH residency as a full resident at Makerere and (once accepted into the program), a student in the Masters in Public Health program at UMN, and she will also attend distance learning and the UMN-based Public Health Institute in May 2012.

A Request for Grant Application was sent to COVAB with a due date of submission of March 9, 2012, to which was adhered. The ECB Grants Officer has reviewed the budget and sent clarification questions back, while the ECB technical team reviews the technical application.

Planned Activities:

Next quarter, the ECB office plans to submit the VPH grant application to USAID for review, and when approved, commence grant-funded activities.

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

After more than six months of MUSK integration, at Makerere University, RESPOND started an assessment of the system's implementation and usage. The goals of the evaluation were to help develop an understanding of: MUSK's current level of use, adoption levels of MUSK among different user types, user experiences with MUSK, satisfaction levels among user groups, and to identify areas for improvement with the current and future implementations.

Noting the fact that technology integration is a complex process, especially in educational settings where meaningful integration requires that individual stakeholders reach their personal comfort levels with the new technology, required content, and changing pedagogy, the evaluation reports both successes and shortcomings of the current implementation.

On the positive side, there are teachers and students who are pleased to have and be using the MUSK system and Dean William Bazeyo (Makerere University School of Public Health) is pleased with the implementation. Regarding shortcomings, the system's installation is fragile. The hardware required to sustain MUSK is only partially installed and is not fully operational; the availability of MUSK within COVAB is limited and used by only a small number of COVAB faculty and their students; materials are not properly uploaded and maintained in MUSK making access via searches and long-term use problematic. The training of IT and teaching staff was limited and lacked adequate focus and support to achieve RESPOND's objectives. Further, on-site technical support for the system is extremely limited.

The evaluation report highlights many opportunities to improve both the MUSK implementation and possible future TUSK iterations with other institutions. In both cases, the opportunities identified are intended to enhance, improve, and extend the use of technology for teaching and learning in support of RESPOND's objectives.

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.

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

This quarter a number of stakeholder meetings were held between AFENET, the Makerere University College of Veterinary Medicine (MVPM), Animal Resources and Biosecurity (COVAB) and RESPOND to discuss the Masters of Veterinary Preventive Medicine curriculum, and the addition of a Field Epidemiology track. Additionally, a high-level meeting was held to review the roles and responsibilities

between AFENET and COVAB regarding oversight and mentoring of the five sponsored students. It was agreed that the main deliverables of this program in the next few months should be: 1) the five students graduating with strong skills in field epidemiology; 2) the existing MVPM curriculum revised and implemented in COVAB so that the program is institutionalized; 3) the role of Makerere's School of Public Health (SPH) be recognized and strengthened in administering this program; and 4) clear roles and responsibilities of AFENET, COVAB, SPH and other donors and partners defined. It was agreed that AFENET is the "Principal Investigator" on this RESPOND- supported program and COVAB is the main partner implementing and delivering the courses to the trainees.

The MVPM students received the following trainings from RESPOND:

- On January 23, Ms. Claudia Costabile, RESPOND's Communications Officer, held a Writing and Reporting training, focusing on effective reporting of data for varied audiences, and capturing events while in the field, both in picture and in word.
- On January 26, Dr. Hellen Amuguni, from Tufts University, taught a three-hour session on biosecurity and biodefense to a group of twelve Makerere public health and veterinarian students, including four of the five -sponsored AFENET students.

Planned Activities:

In April, the five students will be placed in the field for their field attachment, or practicum portion of the program. While in the field students will be trained in surveillance system evaluation data analysis. Additionally, discussions on the Field Epidemiology track will continue in hopes to finalize the curriculum and have it presented for ratification.

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

During this quarter, grants to the Uganda Manufacturing Association (UMA) and the Federation of Uganda Employers (FUE) were approved by USAID on March 29. Working through these organizations, RESPOND will work with the private sector in Uganda to increase surveillance of IDSR reportable and zoonotic diseases through company Peer Educators in firms operating in Uganda "hot spots."

Planned Activities:

The ECB office will issue the grants to FUE and UMA respectively in the first week of April. Event planning for the first training of trainers, will commence, and is tentatively scheduled for mid-May.

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

The proposed grant to AFENET has been internally reviewed by the Project Headquarters office and is awaiting submission to USAID.

Planned Activities:

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

Other Outbreak Response Activities:

- **Evaluation of RESPOND's Outbreak Responsiveness:** Following on ECB office support to the Government of Uganda during three different outbreak response efforts starting with Anthrax in July 2010, an evaluation of RESPOND's support/involvement was performed during January. Monitoring and Evaluation consultant Tom Kane traveled to Kampala to work with ECB's M&E Officer to assess RESPOND's performance to the outbreak response efforts for Anthrax, Yellow Fever and Ebola. While there had been post-response debriefs conducted for all organizations involved in the response efforts, there had not been an evaluation conducted of RESPOND's specific roles and contributions. The evaluation will help the Kampala office, as well as the wider RESPOND community, determine what did and did not work within the context of RESPOND's support and involvement in outbreak response efforts. The assessment report will be submitted to the ECB office during the next quarter.
- Upon invitation from the Uganda National Taskforce, ECB Regional Director, Lendell Foan, participated in the Yellow Fever Risk Assessment workshop on January 11, 2012, in Kampala.
- On March 29 RESPOND's AOTR, Rob Henry, approved the concept paper for providing funding assistance to support the planned U.S. Army Civil Affairs Team/Uganda Veterinary Civil Action Programs training program, a two-week field and training program for forty-four Community Animal Health Workers (CAHW) and five District Veterinary Officers (DVO) in the Karamoja District of Uganda. The two-week training will include one week of classroom work covering basic disease surveillance, recognition, and epidemiology. This will be followed by a one-week program of direct work with the pastoralists in their communities, and assisting the CAHWs in providing invaluable services in the prevention, diagnosis and treatment of regional livestock diseases. Additionally, participants will gain awareness of potential zoonotic diseases outbreaks/epidemics and receive training on animal disease response, reporting and sampling. RESPOND is planning to increase the planned classroom training by having AFENET conduct their Outbreak Response Field Training Module. The training will start on April 23, 2012.

OTHER ACTIVITIES (UGANDA)

Africa-US Integrated Disease Management (AFRUS-IDM) partners inception meeting

- On January 29, the ECB Technical Lead, Dr. Innocent Rwego, presented at the USAID HED Capacity Building in Integrated Management of Transboundary Animal Disease and Zoonoses inception workshop in Kampala, Uganda. He was joined by Regional Director Lendell Foan in direct discussions with the HED Principal Investigators on potential areas of collaboration.

EPT Partners Meetings

- On February 22, the Uganda EPT Coordinator held the EPT Partners meeting at the RESPOND office. In attendance were representatives from CDC, PREDICT, PREVENT, and RESPOND's Regional Director, Deputy Regional Director and Technical Lead as well as RESPOND's Project Director and AOTR in from Washington, DC. Each project gave an overview of activities for March as well as updates on outstanding issues.
- On March 28, the EPT Coordinator held the EPT Partners meeting at the RESPOND office. In attendance were representatives from CDC, PREDICT, PREVENT, and RESPOND's Deputy Regional Director. Each project gave an overview of activities for April as well as updates on outstanding issues.

Uganda National Task Force

- On February 24, the ECB Technical Lead, Dr. Innocent Rwego, attended the Uganda National Task Force meeting at the Ministry of Health. The members discussed the status of the Nodding Disease outbreak in northern Uganda.
- On March 9, the ECB Technical Lead, Dr. Innocent Rwego, and Program Manager, Toskin Ofoyuru, attended the National Task Force meeting at the Uganda Ministry of Health. RESPOND was requested to support a team being organized by AFENET to investigate a meningitis-like disease outbreak in Kiryandongo and Amuru Districts. In addition, at the meeting research topics were suggested in relationship to the current Nodding Disease outbreak.

COUNTRY ACTIVITIES – KENYA

During the quarter there were regional activities in which the Kenyan OHCEA schools participated. Please refer to sub-activity 1.2.3: One Health Central and Eastern Africa Network in the Regional Activities section for more information.

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

During the quarter RESPOND engaged OHCEA member schools in Kenya to conduct One Health sensitizations, U.S. – African university partnership discussions and faculty exchanges, and Country Coordinating Committee meetings.

One Health Sensitizations were held at Moi University School of Public Health and the University of Nairobi Faculty of Veterinary Medicine to educate students and faculty on the One Health approach to disease surveillance and response:

- March 26: Moi University School of Public Health One Health student sensitization. Lead by Moi's OHCEA Focal Person with support from ECB Technical Lead, Dr. Innocent Rwego. Ninety-three (93) faculty and students attended;
- March 28: University of Nairobi Faculty of Veterinary Medicine One Health sensitization for faculty. Lead by the schools' OHCEA Focal Person with support from Dr. Rwego. Forty (40) faculty attended;
- March 29: University of Nairobi Faculty of Veterinary Medicine One Health sensitization. Lecture lead by the schools' OHCEA Focal Person and attended by Dr. Rwego. Ninety (90) students attended.

In addition, RESPOND engaged in university – university One Health partnership discussions and faculty exchanges with Kenyan universities:

- January 24: University of Nairobi Faculty of Veterinary Medicine. Conducted by Dr. Dominic Travis (UMN). Twenty (20) faculty attended;
- January 25: Moi University School of Public Health. Conducted by Dr. Dominic Travis. Nine (9) faculty attended.

The third major deliverable of OHCEA activities in Kenya was the Kenya One Health Country Coordination Committee meeting, held on January 12, 2012. Attended by ECB Technical Lead, Dr. Innocent Rwego, the committee discussed and planned for the national One Health sensitization programs/events. They also discussed how to gather more information on the laboratory resources in the country. It was noted that in the original baseline assessment survey carried out by OHCEA last year, questions on the environment component had not been incorporated. It was agreed that the National Environment Management Authority will provide more information so that a full package representing all necessary sectors can be published in journals and a simplified version be given to different government ministries. The CCC agreed to involve more ministries in reviewing Risk Analysis course outline that was developed by the Kenya CCC to target pre- and in-service personnel based on a One Health approach.

COUNTRY ACTIVITIES – ETHIOPIA

During the quarter there were regional activities in which the Ethiopian OHCEA schools participated. Please refer to sub-activity 1.2.3: One Health Central and Eastern Africa Network in the Regional Activities section for more information.

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

During the quarter RESPOND engaged OHCEA member schools in Ethiopia to conduct One Health sensitizations, U.S. – African university partnership discussions and faculty exchanges, and Country Coordinating Committee meetings.

One Health Sensitizations were held at Ethiopia’s OHCEA schools – Mekelle University School of Veterinary Medicine and Jimma University’s School of Public Health and School of Veterinary Medicine – to educate students and faculty on the One Health approach to disease surveillance and response:

- January 27-30: Mekelle University. Conducted by Drs. Mac Farnham (UMN), Cheryl Robertson (UMN) and Hellen Amuguni (Tufts). Attended by over 75 faculty and 100 students;
- February 1: Jimma University. Conducted by Drs. Mac Farnham, Cheryl Robertson and Hellen Amuguni. Attended by more than 220 faculty and students.

In addition, the above RESPOND team engaged in university – university One Health partnership discussions with 12 faculty from Mekelle University and 70 from Jimma University.

The third major deliverable of OHCEA activities in Ethiopia was the Ethiopia One Health Country Coordination Committee meeting held on March 3rd in Addis Ababa and attended by ECB Regional Director, Lendell Foan. The committee reviewed progress made on the work plans developed during the OHCEA Regional CCC meeting held in December 2011, and agreed to the series of next meetings and engagements required to host a successful launch of One Health in Ethiopia. It was agreed that the next step is to have a “CCC +” meeting – inviting 12 to 15 additional stakeholders to discuss One Health in Ethiopia. The date for the event is tentatively set for the week of May 7, 2012.

Planned Activities:

On May 7 and 8 the OHCEA members in Ethiopia will hold a two-day Ethiopia Country Coordination Committee “plus” meeting in Addis Abba, to broaden the understanding and national engagement on One Health and its practices.

COUNTRY ACTIVITIES – RWANDA

During the quarter there were regional activities in which the Rwandan OHCEA schools participated. Please refer to sub-activity 1.2.3: One Health Central and Eastern Africa Network in the Regional Activities section for more information.

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

During the quarter RESPOND engaged OHCEA member schools in Rwanda to conduct One Health sensitizations, and U.S. – African university partnership discussions and faculty exchanges.

One Health Sensitizations were held at Umutara Polytechnic’s Faculty of Veterinary Medicine on March 1 and 2, with lectures lead by Dr. Carolyn Garcia (UMN) that were attended by 187 students and faculty.

In addition, Dr. Garcia engaged in university – university One Health partnership discussions with 78 faculty and students from Umutara Polytechnic, and 12 Faculty from the National University of Rwanda’s School of Public Health.

During the quarter, progress was made by OHCEA’s Rwanda Focal Persons and deans in having the government authorize the Rwanda One Health Country Coordination Committee, with the Minister of Health receiving the member names on 30 March for review and authorization.

Planned Activities:

- Formalization of Rwanda One Health Country Coordination Committee;
- Rwanda CCC Meeting establishing their mandate and agenda;
- One Health sensitization lectures for the National University of Rwanda School of Public Health;

COUNTRY ACTIVITIES – TANZANIA

During the quarter there were regional activities in which the Tanzanian OHCEA schools participated. Please refer to sub-activity 1.2.3: One Health Central and Eastern Africa Network in the Regional Activities section for more information.

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

RESPOND through its U.S. university partners, Tufts University and UMN, engaged in university – university One Health partnership discussions and faculty exchanges with the schools:

- February 6: Muhimbili University School of Public Health and Social Sciences. Conducted by Dr. Cheryl Robertson; and
- February 7: Sokoine University of Agriculture Faculty of Veterinary Medicine. Conducted by Dr. Cheryl Robertson.

These collaborative interactions allowed RESPOND and individual faculty of OHCEA schools to map out mutual interests and priorities for program and curriculum design. For the Tanzania schools, these include: the hosting of a Regional Public Health Institute, the development of a One Health integrated study demonstration site for veterinarians, public health students and nurses, and the development of joint papers and publications on One Health. Together, RESPOND will continue its university – university collaborations to develop strategies for implementing these needs and initiatives through the pending OHCEA grant and related technical support from RESPOND.

Planned Activities:

- One Health sensitization programs for faculty and students at Muhimbili and Sokoine Universities;
- Hold Tanzania’s CCC meeting.

COUNTRY ACTIVITIES – DEMOCRATIC REPUBLIC OF CONGO

During the quarter there were regional activities in which the Congolese OHCEA schools participated. Please refer to sub-activity 1.2.3: One Health Central and Eastern Africa Network in the Regional Activities section for more information.

Activities sponsored by RESPOND’s direct support to OHCEA member schools – the University of Kinshasa School of Public Health and the University of Lubumbashi School of Veterinary Medicine – are being implemented by the RESPOND West Congo Basin office that are reported in the **West Congo Basin Activities**.

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

During the quarter RESPOND engaged OHCEA member schools in DRC to conduct One Health sensitizations, U.S. – African university partnership discussions and faculty exchanges, and Country Coordinating Committee meetings.

One Health Sensitizations were held at DRC's OHCEA schools – University of Kinshasa School of Public Health and the University of Lubumbashi School of Veterinary Medicine – to educate students and faculty on the One Health approach to disease surveillance and response:

- February 15-18: University of Lubumbashi School of Veterinary Medicine. Lead by Dr. Cheryl Robertson (UMN) and Diafuka Saila-Ngita (Tufts), Technical Advisor WCB. Attended by 410 students and faculty; and
- February 27: University of Kinshasa School of Public Health. Attended by Dr. Cheryl Robertson and Diafuka Saila-Ngita, as well as over 1,000 students.

In addition, RESPOND engaged in university – university One Health partnership discussions and faculty exchanges with DRC's member schools:

- February 15: University of Lubumbashi School of Veterinary Medicine. Conducted by Dr. Cheryl Robertson; and
- February 27: University of Kinshasa School of Public Health. Conducted by Dr. Cheryl Robertson, and attended by over 30 faculty.

The third major deliverable of OHCEA activities in the DRC was the DRC One Health Country Coordination Committee meeting held on January 20 and 21 at RESPOND's WCB office in Kinshasa. During the meeting, the CCC members agreed on the draft bylaws to govern the CCC, developed mechanisms of collaborating with the Fédération Une Santé (a consortium of health professionals' associations and councils), and planned OHCEA activities from January to September, 2012.

Planned Activities:

Please see the West Congo Basin Activities section of this report.

III. 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:

Security-related travel ban and impact on Project

The WC Basin Regional Office has had to push several activities planned for January as the travel ban from the US Embassy was only lifted in the middle of January. The travel ban had an inevitable impact on the implementation of activities and consequently the Regional Office burn rate.

New DRC government regulations and impact on Project

In November 2011, the DRC government issued a new law on VAT to be effective January 1st 2012. The law was released with very little clarity on the mechanisms of application. The law was also

released without prior notice period to the diplomatic community and organizations with funding from donor governments with bilateral agreements with DRC. The Mission has required that all implementing partners refrain from billing VAT and to use all available means to get exemption while the discussions continue with the DRC Government at the US Embassy level.

RESPOND has collaborated with other programs in the country funded directly through the USAID Mission to get clarification on the VAT application and billing and/or reimbursement processes from the Mission and DAI Headquarters. As a Cooperative Agreement, RESPOND will bill through VAT after exhausting all reasonable means to get exemption from suppliers.

It should be noted that this new law has inevitably increased the transaction cost and the overall project implementation budget.

Continued capacity building

RESPOND's Communications Officer, **Claudia Costabile**, conducted a 2-day training (March 21 and 22) for staff and local stakeholders (CCUS, FUS, UNIKIN and Ministry of Higher Education) on the USAID rules, regulations and policies on branding and marking, communications best practices and effective writing skills. The training proved to be invaluable, particularly for partners.

New management visit

The new RESPOND's Project Director, Rob Ryan-Silva and DAI's Health Sector Managing Director, Jerry Martin, visited the West Congo Regional Office during the reporting period (March 21 to 27). They met with key partners, including OHCEA focal persons and Deans, and members of the CCUS (DR Congo's CCC). ECB Regional Director Lendell Foan joined the team to discuss how best to align the support to OHCEA across the region in order to allow Congolese member institutions to participate fully in the network.

STAFFING:

During the reporting period, the Administrative Assistant position for the RO was filled on January 30, a position that is expected to provide invaluable support to the entire office as activities implemented as Direct Assistance are expected to increase.

The grants officer recruited towards the latter part of the first Quarter of the year received a practical training with his peer from East Congo and the PHQ Senior Grants Officer in January followed by a USAID Rules and Regulations training organized by the organization *InsideNGO* in Nairobi.

The TRG Training Technical Advisor seconded to the RESPOND Office for 21 months completed her mission and traveled back to the US on March 17, 2012. The CCN Training Administrator is

expected to take on and complete much of the remaining activities supported by the Tufts and UMN Technical Advisors.

LESSONS LEARNED AND PROPOSED SOLUTIONS:

Stakeholder/Partner capacity

Many of the local partners have limited experience and capacity implementing USG grant and the related rules and regulations. During much of the reporting period, the RO held multiple one-on-one meetings and coaching sessions with partners like FUS and UNIKIN in an effort to build their knowledge and capacity in the application/use and reporting on USAID funds. As part of the capacity building process, the Regional Office has established weekly working sessions with these partners.

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

The three schools receiving RESPOND grants under this sub-activity (UNKIN and UNILU veterinary schools and ISTM Lubumbashi) have completed their visits to regional universities for the purpose of developing institutional relationships. Memoranda of understanding are expected to be signed during the next quarter with academic entities visited thus far (University of Kwazulu-Natal, South Africa; University of Zambia; University of Makerere, Uganda; and University of Nairobi, Kenya). Opportunities to collaborate in faculty exchanges, training and research have been identified. More importantly, DRC schools started to assess and compare the quality of their institutions to their counterparts in the region. As a result, issues related to poor infrastructure at DRC academic institutions are critical to build required capacity. Besides the visits, grantees implemented or planned to conduct workshops involving multiple disciplines.

Faculty from RESPOND university partners (Tufts University and UMN) have started to visit DRC OHCEA member schools to collaborate with their counterparts under the twinning program led by Tufts University. The twinning program focuses on the following fields of study: public health, infectious diseases, immunology, microbiology, parasitology, epidemiology, biostatistics, and health economics. To date, courses, workshops, faculty exchanges and field visits have been conducted in epidemiology, problem-based learning method, research methods and zoonotic diseases transmission at UNKIN and UNILU with the participation of nursing schools (ISTM Kinshasa and Lubumbashi) and ERAIFT (Tropical Forests Management School).

Students and junior faculty are particularly targeted during these training opportunities. The courses, workshops, and exchanges have been an opportunity for junior faculty to learn and discuss various health related issues together with colleagues from different disciplines. For instance, students and junior faculty from the UNILU veterinary School had an opportunity during a field visit in Kapolowe Health District to discuss a recent outbreak of an unknown disease with hemorrhagic symptoms with medical personnel of the referral hospital of Kapolowe, as well as rabies cases, other dog related diseases and environmental issues related to heavy metal in fish found in lakes

and streams surrounding mining operation areas 114Km from Lubumbashi. The twining program has led to more interactions within departments of participating schools, between the Veterinary school of UNILU and ISTM Lubumbashi, and between the UNIKIN School of Public Health, Faculty of Veterinary Medicine and ISTM Kinshasa. More opportunities for junior faculty and students to learn and share experiences are planned during the next quarter.

Planned activities:

In the next quarter, Tufts University, in collaboration with UMN and RESPOND West Congo Regional Office, will continue implementing the twining program with both the Faculty of Veterinary Medicine of UNILU and the School of Public Health of UNIKIN, both OHCEA members. Faculty from Tufts University and UMN will visit and interact with counterparts from DRC schools. RESPOND West Congo will support DRC higher education entities to continue institutionalizing quality assurance activities.

A second Institutional Research workshop will be implemented in Kinshasa.

RESPOND grantees will continue procurement of equipment and implement workshops.

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.

During the reporting period, FUS (Fédération Une Santé) started implementing the three activities funded by RESPOND: a) Census of health professionals; b) Outreach program to sensitize and inform health professionals about the One Health concept; and c) Situational analysis of health professions. A year after its creation in December 2010, FUS has demonstrated its ability to engage and foster collaboration among health professionals from various disciplines. The five health corporations members of FUS have come to share leadership in implementing joint activities funded by RESPOND through FUS. Veterinarians are managing administrative aspects of FUS.

The Pharmacy Council leads outreach activities to sensitize and inform health professionals on One Health concept and opportunities. The working group composed by communication experts is now set. This project involves the University of Kinshasa School of Communication and IFASIC (Institut Facultaire des Sciences de l'Information et Communication). Students from these academic entities are offered an opportunity to intern with expert communicators participating in the project.

The Congolese Nursing Association is leading the situational analysis of 5 health professions. The consultant who will be assisting FUS is now hired. This investigation will analyze the inadequacy between the supply and demand of health professionals and at least one specific issue facing each

of the five professions (medicine, veterinary medicine, pharmacy, nursing and veterinary technician).

The Medical Council is leading the census of health professionals for which all 5 members have expressed interest. During its first stage, this activity aims at collecting information of at least 35% of FUS member professionals, and set up a data base that will be administered by FUS.

FUS is an important vehicle to engage the government, academia and the private sector given the fact that members of corporations involved in FUS operate in these three sectors.

Planned Activities:

RESPOND will continue to support FUS to implement these three activities:

- a situational analysis;
- a census of health professionals as a means to develop an actionable plan to improve the career path for health professionals;
- an outreach program targeting health professionals using radio broadcasts and the Internet.

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

During the reporting period, a decision was reached to postpone the planned training in Gabon to July 2012, following concerns of availability and readiness of facilities to accommodate the large influx of participants. A meeting, however, was held at AU-IBAR Offices to assess the progress of the implementation of the sub-activity of WILD Year 2 and plan activities of sub-activity WILD Year 3. For Year 3, the implementation of activities from Year 2 will continue, and activities of Year 3 will include: a) completion of the WILD manual; b) WILD training (TOT training, WILD training in Gabon and Ghana, where RESPOND will provide technical assistance); c) One Health Champion activity; and d) WILD network and IRCM framework that will be implemented in parallel. OHCEA facilitation in integrating the WILD training modules into university curricula has been considered a possible strategy.

Planned Activities:

- RESPOND will provide technical assistance to the WILD training in Ghana from 7th to 19th May 2012;
- RESPOND will provide both technical and financial support to the Gabon WILD training scheduled for 9th to 19th July 2012.

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.

Discussions with USFWS (the US Fish and Wildlife Service), the co-funder of the Mentor Forest Masters Program in Gabon, and ANPN (Agence National des Parc Nationaux), the local implementing partner, continued during the reporting period. The module entitled “Addressing the Emerging Infectious Diseases (EID) in the context of Timber Extraction in One Health approach”, which will be delivered by RESPOND, has been developed and currently under review. Translation of scientific articles that will be offered as foundation material for the module is in progress. The discussions focused on review of budget and implementation of activities as DA.

The courses are expected to start the first week of April 2012.

Planned Activities:

- A possible mechanism for supporting one fellow through the two-year Masters Program will be identified;
- Deliver Emerging Infectious Disease module during the MENTOR-FOREST courses;
- Formalize the agreement between RESPOND and other parties (ANPN, etc).

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

The Cameroonian government has officially validated the *National Program for Prevention and Fight Against Emerging and Re-emerging Zoonoses* at an event attended by representatives of the US Embassy and all the EPT Programs in Cameroon (GVFI for PREDICT, WHO and FAO for IDENTIFY). The Minister of Livestock, Fishery and Animal Industries, the Minister of Environment and Protection of Nature, the Minister of Public Health and the Minister of Forests and Wildlife co-signed the preface of the document. The program consists of three components: (1) Strengthen disease surveillance, outbreak investigation and response on zoonoses; (2) Strengthen training on zoonoses; and (3) Strengthen Research on zoonoses.

Cameroon’s Prime Minister is the chair of the steering committee of the national program, the chairmanship of technical committee rotates among ministries, and the permanent secretariat is hosted by the Ministry of Livestock, Fisheries, and Animal Industries (MLFAI). MLFAI already allocated a budget to the program for 2012 fiscal year.

The West Congo Regional Office is developing a scope of work for implementation of One Health Sensitization across South West and Northern Regions of the country primarily focused on Universities, their faculty and students (University of Buea, University of Ngaoundere, and School of Wildlife in Garoua). The activities will likely be implemented as Direct Assistance in the third quarter of the year.

Planned Activities:

- Complete procurement of office supplies and IT equipment for both DRC and Cameroon and handover;
- Implement one Health sensitizations in Cameroon.

Sub-Activity 3.4.4 WC: Outbreak response training for multi-disciplinary teams at national and

A one-week in-service risk analysis training course was held from March 12 to 18, 2012, bringing together 26 professionals from the Ministry of Agriculture, Ministry of Public Health, Ministry of Environment, Conservation of Nature and Tourism and the Ministry of Higher Education of Democratic Republic of Congo. CDC and FAO representatives attended the opening and closing ceremonies. The weeklong course presented the core of risk analysis: hazard identification, risk assessment, risk management and risk Communication, and exemplified the One Health approach through experiential learning and applied problem-solving, based on three case studies covering *bovine tuberculosis*, *Ebola virus in bushmeat* and *Rift Valley Fever in goats*. A mechanism of monitoring to continue to provide technical support to participants in order to review and update preparedness and contingency plan has been set up. Experts from Tufts University and UMN co-facilitated this training.

The procurement process (collection of bids, bids analysis, and selection of supplier) for an in-kind grant to the Ministry of Agriculture has been completed. The WC RO will procure basic office supplies for the MINAGRI to be used at central and provincial levels by trained personnel.

Planned Activities:

- Work with AFENET to update implementation plan after submission of grant concurrence request to USAID;
- Contingent on approval, start AFENET grant-related activities, primarily the first training in outbreak response and investigation.

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)

On January 24 and 25, 2012, a workshop was held at the WC regional Office to present and validate the One Health-MISRZ (Multidisciplinary and Integrated Surveillance and Response to Zoonotic Disease) pre-service training curriculum for the Reforms Committee members. This two-day workshop included 25 key members of national committees responsible for curriculum reform from the three educational sectors, namely the Ministry of Primary, Secondary and Vocational Education, the Ministry of Public Health and the Ministry of Higher and University Education, representing the three types of institutions (ISTM, ITM / EMI and ITAV).

This workshop had the following results:

- Adoption of the review methodology and validation of technical references (skills, training content and assessment) as directed by administrative and legal reforms of each committee;
- Review of technical standards of skills, training content and assessment of One Health - MISRZ for ISTM and for EMI / ITM and ITAV;
- Development of micro-planning to implement the rest of the incorporation process of One Health-MISRZ curriculum modules;
- The One Health MISRZ curriculum was also presented to the DRC CCUS¹ and OHCEA institutions and focal persons. This presentation had three primary objectives:
 - Ensure that the CCUS and OHCEA start to determine the formal adoption of the reference material and the manual; appropriating the document of referential;
 - Explore ways to transfer and / or integrate the rest of the activities of the process in OHCEA and CCUS objective 3.2, activity OHCEA 3.2.2;

¹ CCUS (Comité de Coordination Une Santé) is the French translation of CCC.

- Advocacy to facilitate the formalization of the One Health MISRZ technical references in the vocational education.

Planned Activities:

- Execution of preparations for the training of Masters Trainers - provincial and national inspectors in the province of Katanga at Lubumbashi, scheduled for April 6-18, 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

During the reporting period, InCEF finished the selection of villages for implementation of the community sensitization. InCEF also reported having completed the training of community educators. The InCEF grant ended on March 31 and with no possibility of extension.

During the reporting period, the One Health-MISRZ participants' manual and facilitator's guide for in-service training was presented to the CCUS. These two documents distributed to the members of CCUS have been well received by all, and as a follow up the CCUS has been tasked to facilitate the formal adoption of the manuals by the respective line ministries: Health, Agriculture, Environment, and Higher Education.

During the reporting period, the Regional Office used the services of a local consultant who traveled to Tshuapa District to identify the possible storage and delivery mechanisms for the supplies being procured for the Ministry of Agriculture, Health, and Environment. The report proved the logistical challenge of delivering items to the remotest parts of the country with nonexistent infrastructure in terms of communication and transport. The RO will finalize the delivery of the items in close collaboration with the recipients and local Consultant.

Planned Activities:

- Finalize the procurement and delivery of supplies and equipment to the Tshuapa District.

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.

A consultant was hired to facilitate the process of repairing and extending the UNILU intranet and evaluate the feasibility of connecting the UNIKIN intranet to local main veterinary and public laboratories. Working in partnership with UNIKIN and UNILU, the consultant will develop design and source selection documents for the intranet rehabilitation and extension project.

Translation of TUSK into French is still underway with the involvement of Translators Without Borders (TWB).

Planned Activities:

During the next quarter, RESPOND will support the intranet network repair and extension at UNILU, evaluate the feasibility of connecting UNKIN intranet to local laboratories (veterinary and public health), install TUSK and train users, and facilitate the operationalization of users support groups.

OTHER ACTIVITIES (DRC)

The four-day sensitization at University of Lubumbashi took place from February 15-18. Between 200 and 350 students, and about 40-50 faculty attended each day. Students were primarily from veterinary medicine, agronomy, public health and ISTM (nursing, nutrition, laboratory science). Faculty members were primarily vet med, ISTM and public health. Professor Malongo, from the Veterinary Medicine School of UNILU, chaired the entire conference which was held at a different faculty/school every day: languages, veterinary, nursing, and medicine. The fourth day was reserved for faculty discussion regarding collaboration. Various aspects of department activities, One Health strategies, RESPOND, OHCEA and collaboration possibilities were presented. A film about avian influenza in Senegal was shown for students. Lively question and answer periods followed all presentations.

Besides sensitization, some fields of collaboration were suggested: i) development of a multidisciplinary on-line journal (the vet school has a school-wide journal supported by vet faculty salary donations); ii) multidisciplinary research; iii) development of a combined vet tech/nursing pilot education program at the A2 level to meet rural needs; iv) development of a pilot

demonstration site for multi-disciplinary students and faculty in Kapolowe area; and v) development of a Masters degree program.

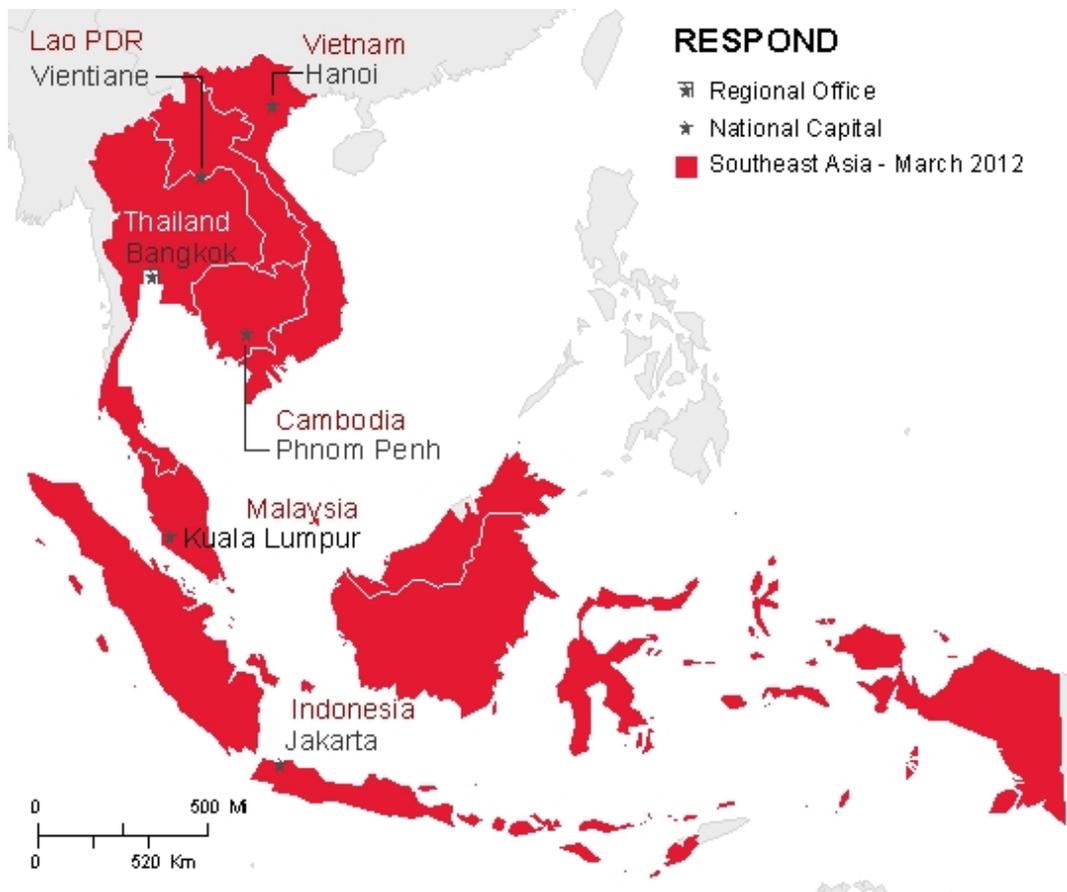
The two-day sensitization at University of Kinshasa started on February 27, 2012, where the Minister of Higher Education presided over the One Health opening ceremony in the presence of Representatives of WHO and the USAID Mission, the Rector of the University of Kinshasa, the Director General of ISTM Kinshasa, Permanent Secretaries of Ministries represented in the CCUS and members of CCUS. The event was attended by more than one thousand students and faculty from the University of Kinshasa and ISTM Kinshasa (Institut des Techniques Médicales). In his speech, the Minister reminded the audience of past outbreaks in DRC and urged the university community to work collaboratively. He also mentioned that he has officially mandated that One Health concept be included in academic curricula for the training of health professionals. The concept of One Health, its introduction in nursing and veterinary technicians' curricula and the role of a nurse in the prevention and control of diseases, and EPT objectives were presented to the audience.

The following day (February 28, 2012) at the School of Public Health of UNIKIN, about 30 faculty from UNIKIN and ISTM Kinshasa attended a workshop to discuss multidisciplinary collaboration ideas among DRC academic entities and with RESPOND university partners. Prof. Cheryl Robertson (UMN Liaison) and Dr. Luboya (Associate Dean Faculty of Veterinary Medicine, UNIKIN) introduced the discussion proposing some ideas such as the creation of a joint veterinary public health program, joint veterinary technician and nursing degree, professional doctoral degree, creation of academic demonstration site. The two-day sensitization event was officially closed by the Rector of UNIKIN who expressed his gratitude to RESPOND for sponsoring the event.

Planned Activities:

During the next quarter, RESPOND will continue to support the CCUS and the OHCEA school members in DRC to finalize and implement their nine-month action plan.

IV. SOUTHEAST ASIA ACTIVITIES



The map above the Southeast Asia region displays where RESPOND currently works (in red). The stars represent capital cities, and Thailand’s capital city, Bangkok, is where the RESPOND Southeast Asia Regional Hub Office is located.

MANAGEMENT REPORT

GENERAL OBSERVATIONS AND HIGHLIGHTS OF THE QUARTER:

The most important Project Management tasks undertaken during the quarter centered on vital needs for SEAOHUN’s establishment. In this quarter, a notable achievement was the formation and preliminary operation of “SEAOHUN” (South East Asia One Health University Network). After the 2nd Deans’ meeting in December 2011, an Executive Board was created to govern the Network under the Chairmanship of Dr. Ali Ghufroon Mukti, Dean of the Faculty of Medicine, Gadjah Mada University. The first formal meeting of the Executive Board was held during the December Dean’s meeting. A

follow-up meeting was conducted on February 21 and 22, 2012 in Jakarta, Indonesia, in which a SEAOHUN annual work plan was discussed, reviewed and endorsed by the Executive Board members. A Planning Committee, comprised of a representative from the four country members, was also formed to oversee development and implementation of approved activities. Time frame for implementing activities was March 1, 2012 – February 28, 2013.

As a result, the SEA regional office management team, in consultation with PHQ, took measures to provide program operations, administrative and financial management support that balanced the achievement of ambitious program targets. Our management philosophy seeks to operate and maintain a thorough and efficient administrative and financial management system that frees up the time and creativity of the excellent professional staff of the SEA regional office team.

Nevertheless, there is always a need for improving and/or reinforcing skills and techniques, and specific steps taken this year included:

- Expanding administrative capacity by developing/restructuring regional office organizational structure to provide more focused attention to these primary administrative responsibilities, particularly with the program growing;
- Regularly meetings for technical and administrative staff to ensure quality and consistency in RESPOND's overall implementation;
- Provision of on-going and on-the-job training for administrative, finance, and technical staff.

PROJECT ADMINISTRATION:

The SEA Regional office continued to provide strong administrative and finance support to ensure technically and contractually compliant program implementation. Year 3 marked a significant ramp-up of field activities, and project management ensured that this was achieved as effectively as possible. Completed activities implemented through direct assistance are described below:

- Global Health Institute (GHI) – supported and co-organized the GHI One Health leadership program in collaboration with Chiang Mai University at the Imperial Mae Ping Hotel, Chiang Mai, Thailand from January 29 to February 9, 2012. The goal of the program was to strengthen a One Health approach among educational institutions in Southeast Asia region. This event was aimed at medical, veterinary and public health faculty interested in “One Health leadership”. The intensive program of study offered at the GHI focused 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 provided 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 targeted Master's or doctoral level students, and mid-to-senior level career professionals, with over 120 participants selected from SEAOHUN (Southeast Asia One Health University Network - comprising 14 faculties from 10 universities in Indonesia, Malaysia, Thailand, and Vietnam) and from universities in Lao PDR.

- Provided support to 10 provincial health staff attending the first didactic part of the Applied Epidemiology Training (AET) in Cambodia from February 13 to March 7.
- SEAOHUN 2nd Executive Board Meeting – organized the executive board meeting in Jakarta, Indonesia on February 21-22, 2012. During this 2-day meeting, several issues and significant outcomes were identified/achieved i.e. the responsibility for program and funding decisions shifted from the RESPOND Regional Office to the Executive Board, an overview of USAID funding rules and regulations, timeframes and requirements for program implementation, presentation of the SEAOHUN annual work plan, which was approved and endorsed by the Executive Board, establishment of a Planning Committee, governance of SEAOHUN, etc.
- 2nd Thailand National One Health Forum – supported and co-organized 2nd Thailand National One Health Forum with Mahidol University at the Siam City Hotel, Bangkok from March 26-28, 2012, to update the information of health problem and the knowledge related with the One Health approach. This meeting included participants from government and universities in Thailand and was used as a forum to further develop and promote the One Health approach to disease investigation and outbreak response and to advocate to government to support this strategy.

In addition, an interim grants manager and project accountant conducted a field visit to the Faculty of Veterinary Medicine, Khon Kaen University, to support the implementation of grant activities and to build grantee capacity in financial and administration management to ensure compliance to USAID rules/regulations and RESPOND requirements.

Continuation of evaluation and streamlining of administrative procedures to ensure that the appropriate systems and practices are in place to support scaled up project activities is still the priority of project management.

On technical and program management aspects, RESPOND provided increased technical support to implementing partners and program activities so that they meet the needs of the countries as they improve their capacity in disease surveillance and outbreak response.

Upcoming direct assistance-supported activities:

- Regional One Health Core Competency workshop back-to-back Curriculum Mapping workshop – Conrad Hotel, Bangkok, April 2 – 5, 2012;
- SEAOHUN Planning Committee meeting – Bangkok, April 9, 2012;
- Emerging Zoonotic Diseases workshop – Hanoi, Vietnam, April 23 – 29, 2012;
- INDOHUN Inaugural National Symposium – Bali, Indonesia, May 3 – 4, 2012;
- Mekong Health Congress – Hanoi, Vietnam, May 10 – 12, 2012;
- MYOHUN Inaugural National Meeting – May 23 – 24, 2012;
- 2nd Executive Board meeting – Jakarta, June 18 – 19, 2012;
- Emerging Zoonotic Diseases workshop – Kuala Lumpur, Malaysia, June 25 – 29, 2012;
- 2nd didactic part of AET Training – Phnom Penh, Cambodia May 21-June 8;
- Cambodia EPT partner and government 2012 zoonotic diseases Workplan progress review, and development of the 2013 EPT workplan – Siem Reap, Cambodia, June 5-6, 2012.

STAFFING:

During the first and second quarters of Year Three, there have been a few changes in field project personnel. RESPOND encountered difficulties in recruiting a suitable Grants Manager for the regional office. After the position became vacant, the Training Officer was asked to temporary cover this position by working closely with Director of Administration and Finance. Following the staff retreat in December 2011, organizational structure and scopes of work for each position have been reviewed, reassessed, and revised. In addition to reducing the workload of the Director of Administration and Finance, and the Travel and Logistics Coordinator, and to have more efficiency in grants management, two modified scopes of work/positions were created to share grants responsibilities (Administrative Manager and Grants/Administrative Officer). A new organization chart was developed and already approved by the PHQ. The recruitment process for these two new positions has begun and RESPOND has continued its recruitment efforts for the outstanding positions. We anticipate regional office will operate with a full staff in the next quarter.

The project has continued to make good use of STTA during the quarter. Dorothee Stangle, Operations Specialist (consultant) travelled from PHQ to Bangkok from March 21 - April 27, 2012 to provide critically needed support during SEAOHUN start up process and work plan development. She is also responsible for providing operations support while the Southeast Asia regional office makes staffing transitions and recruits new staff.

Staff Development:

- The Senior Technical Officer, Senior Program Officer, and Training Officer attended training on Gender Analysis and Integration conducted and provided by USAID/RDMA at the Asia Regional Training Center, on February 14, 2012. Participants from implementing partners learned to integrate gender throughout the implementation and monitoring of their programs.
- The Director of Administration and Finance, and the Training Officer (Interim Grants Manager) attended USAID Rules and Regulations Workshop and Procurement Planning and Execution Workshop organized by InsideNGO in Bangkok, from March 27 – 30, 2012. The participants benefitted the most from the workshops, giving them enhanced understanding of USAID's project management expectations and industry standards. After completion of the workshops, we expect to see an increased efficiency of their work; ascertained compliance; and a better overall management.

LESSONS LEARNED AND PROPOSED SOLUTIONS:

Grant operations have proven labor-intensive and time consuming, and grant awards have taken more time than anticipated. Project management is undertaking a review of the grant program policies and procedures, with the goal of developing more efficient procedures and approaches. Maintaining a robust grant program while adhering to government regulations is the primary issue in this dilemma. We continue to utilize direct assistance as necessary for efficient program implementation.

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 the Thailand National One Health meeting from March 26-28, 2012, in Bangkok, Thailand. The purpose of the meeting was to provide a forum to share One Health-related programming experiences and networking with colleagues within and across disciplines. One hundred twenty one (121) participants attended the meeting;
- Continued dialog and discussion about establishment of Network Secretariat Office in Thailand;
- Continued dialog and discussion about establishment of Network Coordinating Office in Vietnam, Indonesia, Malaysia and Thailand;
- Conducted the Regional Global Health Institute from 28 January to February 9, 2012, in Chiang Mai, Thailand. The intensive program of study offered at this GHI focused 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 provided 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. One hundred twenty eight (128) participants attended. RESPOND/UMN and Chiang Mai University faculty co-taught the two-week course.
- Activity workplan for SEAOHUN completed, January 31, 2012;
- Conducted 2nd Executive Board meeting on February 21 and 22, 2012 in Jakarta. During this meeting, the one year SEAOHUN workplan (March 1, 2012 to February 28, 2013) was reviewed and approved, an Activity Planning Committee was established, and SEAOHUN organizational development issues were discussed;
- Inaugural meeting of INDOHUN members held in Jogjakarta to plan INDOHUN kick-off meeting and activities.

Planned Activities:

- Conduct OH Core Competency workshop, Bangkok, April 2-3, 2012;
- Conduct Curriculum Mapping workshop, Bangkok, April 4-5, 2012;
- Conduct SEAOHUN Planning Committee meeting, Bangkok, April 9, 2012;
- Develop initial draft of implementation plan for SEAOHUN activities (March 1st 2012 to February 28, 2013), April 15, 2012
- Conduct Emerging Zoonotic Disease Training 2, Hanoi, April 23-27, 2012;
- Conduct INDOHUN inaugural national meeting, Bali, May 3-4, 2012;
- Conduct OH Symposium at the Mekong Health Congress, Hanoi, May 10-12, 2012;
- Conduct MYOHUN inaugural national meeting, Kuala Lumpur, May 23-24, 2012;
- Develop an analysis and a set of recommendations for legal status and establishment of the SEAOHUN Secretariat, June 15, 2012;
- Conduct 2nd Executive Board meeting, Jakarta, June 18-19, 2012;
- Conduct Emerging Zoonotic Disease Training 3, Kuala Lumpur, June 25-29, 2012;
- Continue establishment of Network Coordinating Office in Vietnam, June 30, 2012;
- Support SEAOHUN member faculty to attend OH-related conferences held in Q2 following approval criteria agreed upon at the EB meeting.

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)

Increasing the number of qualified veterinarians in Lao PDR is a way to increase the country's capacity for zoonotic disease management and outbreak investigation and response to emerging infectious diseases.

In 2009-2010 NAC revised its 4-year Bachelor in Animal Sciences degree to become a 5-year Doctor of Veterinary Medicine (DVM) degree. However, NAC lacks qualified lecturers to teach the pre-clinical and clinical subjects offered in Years 3, 4 and 5. As RESPOND's support became available in 2011, NAC and KCU agreed to have lecturers from KCU to provide teaching on the pre-clinical and clinical subjects at NAC for Year 3 and Year 4 students and that Year 4 students from NAC come to

KKU for laboratory, surgery and practicum sessions. This is the first cohort of students for the 5-year DVM. Due to limited training background of current staff at NAC, it was difficult to adopt co-lecturing or a coaching mode to assist capacity building of existing lecturers.

During the first semester, between November 2011 and January 2012, twenty-three lecturers from KKU provided teaching at NAC on eight subjects. These were: veterinary bacteriology and mycology, veterinary entomology and protozoology, ruminant medicine, small animal medicine, veterinary toxicology, veterinary radiology, special veterinary pathology, and general surgery.

From February 13 to 22, twenty-six Year 4 students came to KKU for a short course focusing on laboratory and surgery practice. NAC will receive assistance from the Asian Development Bank (ADB) for essential laboratory equipment and will work with KKU to obtain them.

In the second semester, from March 5 to May 18, twenty-six lecturers from KKU will teach 9 subjects at NAC for Year 3 and Year 4 students. These will be: virology, veterinary helminthology, zoonoses, small animal surgery, large animal surgery, swine medicine, avian medicine, fish and exotic animal medicine, and epidemiology and preventive medicine and biostatistics.

- Continued 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 and year 4 of a five-year course. The funding brought NAC staff and students to VMKKU where courses are taught at the fully equipped VMKKU facilities, allowing students the resources to practice critical laboratory, surgical, and diagnostic skills as well as the opportunity to learn through participatory methodologies utilized at VMKKU.
- In March, one staff from NAC commenced 1-Year International Graduate Diploma in Livestock Diseases and Health Management. Two additional staff from NAC received scholarships from Thailand's TICA for the course.
- Staff from Tufts University (Dean Kochevar and Dr. Saul Tzipori) visited KKU and Nabong to discuss ongoing activities. The Nabong, KKU, and Tufts meeting was also attended by DCM, U.S. Embassy, Lao PDR (Ms. Angela Dickie).

Planned Activities:

- Continued 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 and Year 4 of a five-year course;
- Continue support for the NAC staff enrolled in International Graduate Diploma in Livestock Diseases and Health Management;

- Develop outbreak response and field investigation training activity for students and faculty from Nabong;
- Support VMKKU professionals to travel to Tufts for a one-month technical exchange focusing on improvement of skills on disease diagnostics and prevention;

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:

This workshop will be conducted at Huai Kha Kaeng National Park in Thailand in Quarter 3. Once this is held the activity will be completed.

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

- Continued support for seven (7) FETP/FETP-V/iFETP students from Thailand and other countries in a relevant Thai university Masters program;
- 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.

Planned Activities:

- Continue support for seven (7) FETP/FETP-V/iFETP students from Thailand and other countries in a relevant Thai university Masters program;
- Continue to provide 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;
- Review the progress of supported students.

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

The support for joint training in applied epidemiology and field investigation further strengthens and expands collaboration between the human health and livestock health sectors including those from wildlife disciplines to work together under a One Health approach. The implementing partner, Field Epidemiologist Association of Thailand (FEAT) has been strategic in capitalizing on policy, technical and management support from national level down to provincial level. FEAT has involved the relevant departments and key stakeholders to develop and show case the operations of multi-disciplinary One Health models. Key agencies involved in the project are: Ministry of Health (MoH), Department of Livestock Development under Ministry of Agriculture and Cooperatives (MoA), and Zoological Park Organization and Department of Natural Parks, Wildlife and Plant Conservation under the Ministry of Natural Resources and Environment (MoNRE).

The training brought together technical and financial collaboration from many agencies, including Thai MoPH, USAID, US-CDC, FAO, WHO and OIE. The five provinces selected from the five regions - Chiangmai, Nakornrajsima, Chonburi, Kanchanaburi and Songkla – have the necessary human and laboratory resources to support field investigation activities. Trainings were conducted in Bangkok with participants from the five provinces attending. Due to major flooding in Thailand during August-November 2011, the activities have been delayed.

- A no-cost extension to FEAT was completed in early 2012 so that the planned activities could take place after the flooding situation in Thailand;
- Working group established with key staff from the three agencies and meetings held by Field Epidemiology Association of Thailand (FEAT), Dr. Sapon, DLD, and Ministry of Health to develop curriculum content and training schedule;
- Held the Training of Trainers(ToT) workshop for supervisors and mentors from February 20-24. Participants were 34 senior physicians, nurses, public health staff, veterinarians, wildlife

experts and university lecturers from the five provinces and key personnel at national level from Bangkok. The training topics included the overview of multi-sectoral collaboration under a One Health approach, human health surveillance, animal health surveillance and sessions on working across disciplines through case studies and field exercise to address emerging infectious/zoonotic diseases. Lists of top 10 concerned EIDs in each province were developed. Five provincial support/mentoring teams with members from the three sectors were formed.

- Training of provincial and district level outbreak response staff from MoA, MoH and Mo Natural Resources and Environment, from March 12-16, 2012, with 44 personnel from the three Ministries. The workshop was designed for relatively junior staff at field level. In addition to the One Health approach, sessions included quantitative methodology and basic epidemiology for disease surveillance and outbreak investigation and working across disciplines through case studies;
- The assigned provincial team mentors worked with team members in selecting one or two disease of concern for joint field work project with clear objectives and investigation plan. The diseases/pathogens selected for joint field investigations are: West Nile Virus, Q fever, tuberculosis, melioidosis, and brucellosis.

Planned Activities:

- Hold provincial meetings in five provinces to inform and obtain support and agreement from supervisors and relevant stakeholders to carry out project activities;
- Five teams conduct their field investigation in their respective province with support and supervision from mentors, senior staff in the province and from national level.
- Completion of joint field investigation will be in August, 2012, and presentations of project findings and results are scheduled to take place in September, 2012.

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)

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

- Grant approved February 2012;
- Meeting of GOV Ministry staff and WHO to revise the implementation plan for the joint training activity, March 2012.

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

- Finalized grant and activities for grant application;
- Continued to work on the report to satisfy Leahy Amendment exemption.

Planned Activities:

- Grant to be submitted to USAID in Quarter 3.

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

- Finalized grant and activities with NEIDCO;

- Submitted grant to RESPOND PHQ and USAID.

Planned Activities:

Once the grant is approved:

- 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 April 5th, 2012;
- 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

- Met with government and other stakeholders to discuss the planned activity and to develop the implementation plan in March 2012. Follow-up steps from this meeting were:
 - Proposed hiring of local consultants to assist with development of the plan;
 - Prepared SOW and TOR and identified potential consultants, with support from USAID mission and government partners.

Planned Activities:

- Hire consultants to assist with planning the training activity and seeking government support and commitment;

- Conduct briefing meeting with consultants in April, 2012;
- Plan an inception workshop for Quarter 3 to discuss and finalize plans for implementation of the activity with all stakeholders;
- Develop the competitive bid process for implementation of the activity.

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)

Building capacity in EZD disease outbreak response and promoting multi-disciplinary collaboration are key RESPOND objectives in Cambodia. Following the approved concept paper, activities will be implemented through three main training courses: a) Applied Epidemiology Training (AET), managed by WHO and the Department of Disease Control (DDC) of the Ministry of Health (MOH); b) Mini-FETPV for animal health workers, managed by FAO and National Veterinary Research Institute (NaVri), under the Ministry of Agriculture, Fisheries and Forestry (MAFF); and c) One Health First Responder training co-organized by Department of Disease Control and NaVri.

The first didactic AET training activity with WHO was conducted for a total of 15 trainees in Phnom Penh, from February 13 to March 7. Provided support to 10 provincial participants attending the first didactic part of the AET course. As the epidemiology course requires rather high prior training, there were not many women who met the criteria. There are 2 female nurses among the 10 participants supported by RESPOND.

Planned Activities:

- Meet with government and other counterparts in Phnom Penh and relevant provinces to continue planning activities outlined above;
- Support 2nd didactic part of Applied Epidemiology Training for government staff as conducted by WHO May 21-Jun 8, Phnom Penh;
- Support USAID Cambodia mission to hold a review of EPT partner and government s' workplan 2012 progress in order to develop EPT partner workplan for 2013 , June 5-6, Siem Reap;
- Responding to the request of the Forestry Administration for assistance in developing a Wildlife Health Strategic Plan. RESPOND will utilize technical expertise within in the region and SEAOHUN to support the development of the Cambodia Wildlife Health Strategic Plan.
- Support 3rd didactic part of Applied Epidemiology Training for government staff as conducted by WHO August 20-31 and National Epidemiology Conference, Phnom Penh.

OTHER ACTIVITIES (CAMBODIA)

- Continue dialogue for wildlife health capacity building with MAFF to develop a strategic plan for wildlife health 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)*

V. 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 noted 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.

The demographic results that follow do not include public lectures, large presentations (e.g., OHCEA One Health sensitizations.) The demographic results are only based on other types of events (e.g., training, workshops, stakeholder meetings) where we are able to collect the appropriate data.

Q2 HIGHLIGHTS

For Year 3 Quarter 2 (Y3Q2), highlights, including both successes and opportunities for improvement, include:

- Key Regional Events:
 - East Congo: Within the OHCEA network, One Health Sensitization presentations occurred at Mekelle University, Jimma University, University of Kinshasa, University of Lubumbashi, Makerere University, Umutara Polytechnic, Moi University, and University of Nairobi for faculty, students and administration. The meetings helped raise awareness of the One Health approach, the programs and activities taking place, as well as how to take part in it and begin to address identified gaps. Approximately 2,600 individuals attended these sessions.
 - West Congo: 26 professionals took part in the Training in Risk Analysis for Sectoral Animal, Human and Environmental Health in the DRC. This 10-day experiential learning and applied problem-solving training was designed to strengthen the capacities, competencies and abilities of government ministry personnel to respond to the needs of prevention and control of epidemics and epizootics. The course targeted specific topics in risk analysis

including: hazard identification, development of conceptual models, release assessment, exposure assessment, consequence assessment, risk management and risk communication. The individuals who participated in the course expressed utmost appreciation and great interest in utilizing the skills in their roles as health professionals. Developing a cadre of in-service professionals with needed skill sets in risk analysis provides another great example of how RESPOND is building outbreak response capacity in the DR Congo.

- South East Asia: South East Asia One Health University Network (SEAOHUN) Global Health Institute: 10 day training (124 attendees) in Thailand focused 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 provided 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.

- A total of 29 sub-activity events occurred in Quarter 2, which hit a new high, as compared to the previous quarter high of 18 events.
- The number of event participants increased nearly 400%, compared to Quarter 2, due to the One Health sensitization presentations in OHCEA institutions.
- Government and university representation at RESPOND events were both approximately 40% of the participants in the 2nd Quarter². Female representation at events has remained stable in recent quarters at approximately 30%².
- While nationality of event participants is largely dependent on event location, for the Q2 events conducted, participants were primarily from Thailand (30%), Cameroon (21%), and DRC (16%)². Overall, event participants have rated RESPOND events as good (3.4 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.)
- With respect to institutional collaboration (i.e., networks, twinning), 18 exchanges occurred in Quarter 2. 61% of the exchanges have been introductory partnership exchanges, laying the groundwork for future activities. Curriculum development, module development, lecturing and collaborative research are all beginning to occur, approximately 9% each of the total collaboration. Professional exchanges are also occurring, but to a lesser degree (5%). In January-

² This is only reflective of events where demographic data can be collected (e.g., workshops, meetings, trainings.) Public lecture/presentation/press conference participants are excluded from these results.

February, the M&E team conducted an assessment of the MUSK implementation at Makerere University (4.1.2EC). While the MUSK implementation occurred in 2011 and the related grant ended in September, the evaluation revealed that there is still much work to be done in order to meet the sub-activity objectives (e.g., course resources, student and faculty usage, resource sharing.) The assessment revealed that it will take a concerted effort (e.g., additional hardware installation, additional training, user incentives, support improvement) to meet the system objectives. A summary is included later in the M&E section.

- A Best Management Practices Review was conducted by the M&E team from November 2011-February 2012, to provide a state-of-the-art summary of issues related to waste disposal during outbreak responses, provide reference materials for national RESPOND partners, provide training materials for use by RESPOND or others, disseminate knowledge of relevant BMPs to project partners and the wider practitioner community. This review used publications, written documents and oral reports of practitioners as inputs to the data collection. The review met objectives of RESPOND and of USAID environmental regulations, which require continual review of environmental issues of concern to augment training materials. A summary is included later in the M&E section.
- The full M&E team (M&E Manager, Regional M&E Officers, university M&E team members) met in Bangkok from February 13th-17th. The weeklong meeting was valuable to support cross-partner, cross-regional collaboration on all things related to M&E, as well as interact with the SE Asia office on M&E matters. A summary is 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. Twenty-nine events occurred, with East Congo leading the activity with seventeen events.

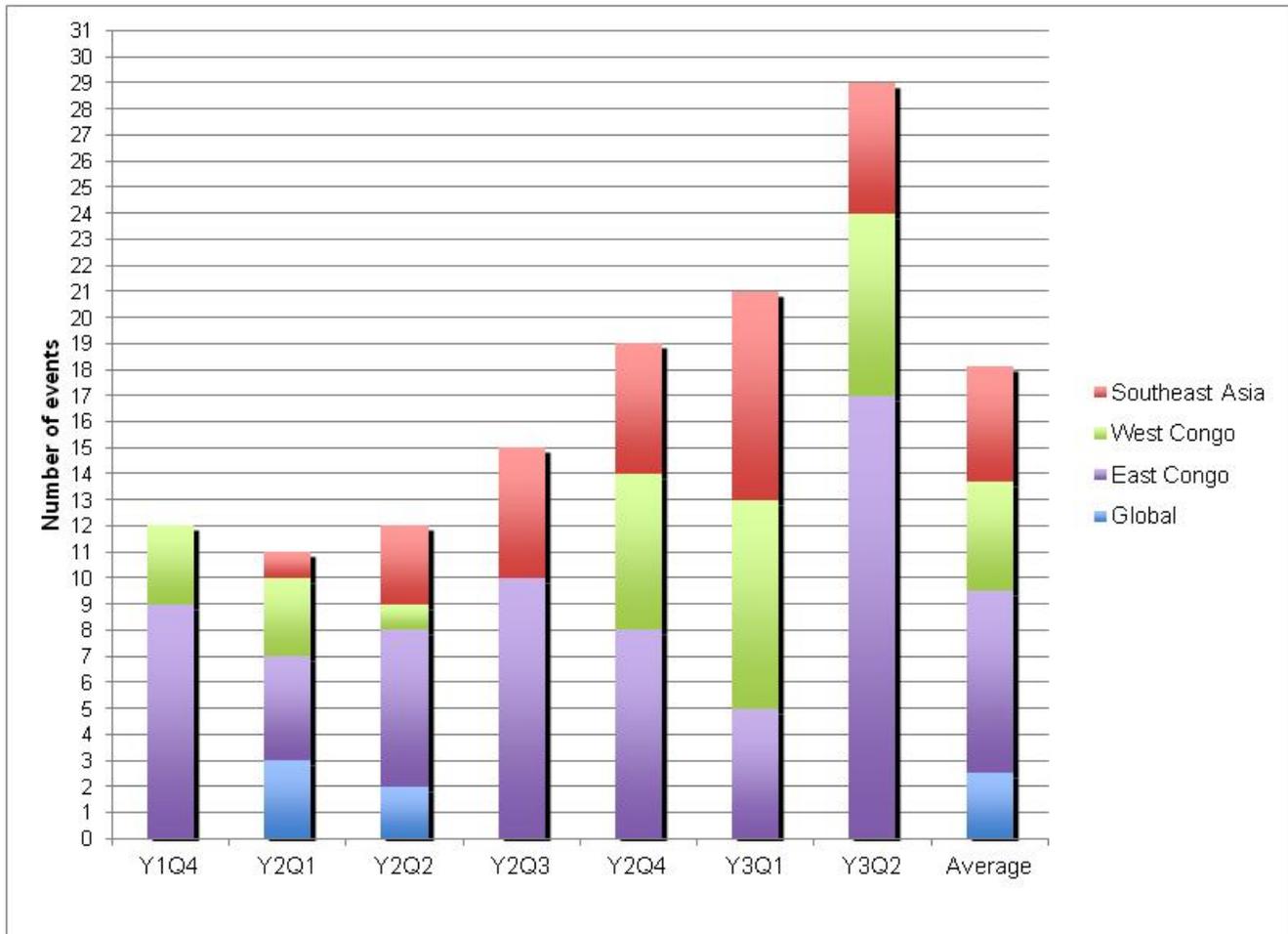


Figure 1: Number of Completed Events by Region and Quarter

Q2 event attendance increased nearly 400% from Q1 (Figure 2.) This dramatic increase in participants is a result of the eleven One Health Sensitization presentations in OHCEA institutions

- Jimma University (Ethiopia) – School of Public Health, School of Veterinary Medicine;
- Makerere University (Uganda)- School of Public Health, School of Veterinary Medicine;

- Mekelle University (Ethiopia) – School of Veterinary Medicine;
- Moi University (Kenya) – School of Veterinary Medicine;
- Umutara Polytechnic (Rwanda) – School of Veterinary Medicine;
- University of Kinshasa (DRC) – School of Public Health;
- University of Lubumbashi (DRC) – School of Veterinary Medicine;
- University of Nairobi (Kenya) – School of Public Health, School of Veterinary Medicine.

Training participants also increased approximately 8% from Q2, reaching a new quarterly high of 195 trainees. This is largely due to the Global Health Institute training in South East Asia.

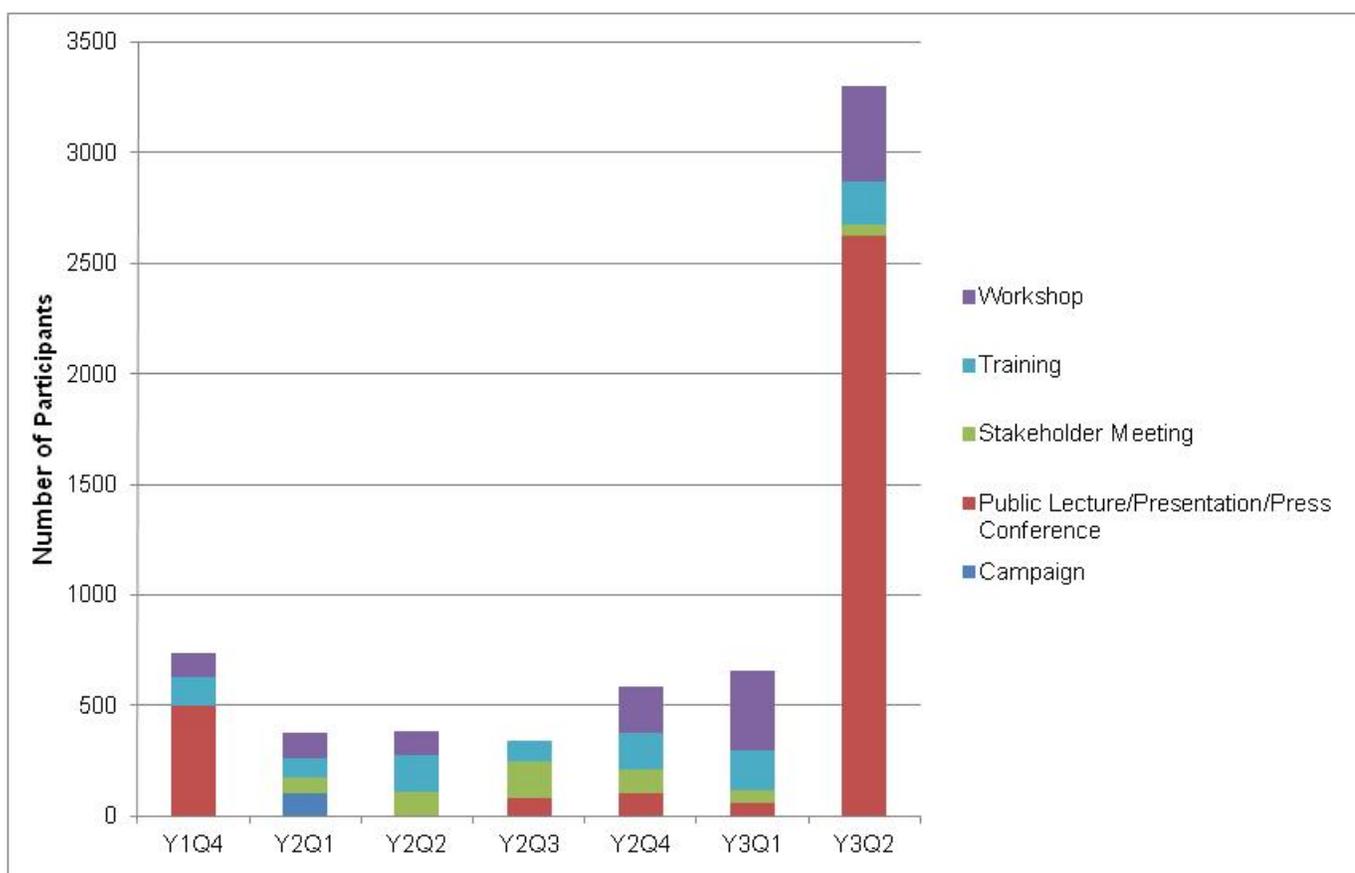


Figure 2: Event Participants by Quarter and Event Type

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 Q2, the average rating was 3.4 (out of 4), between good and excellent.

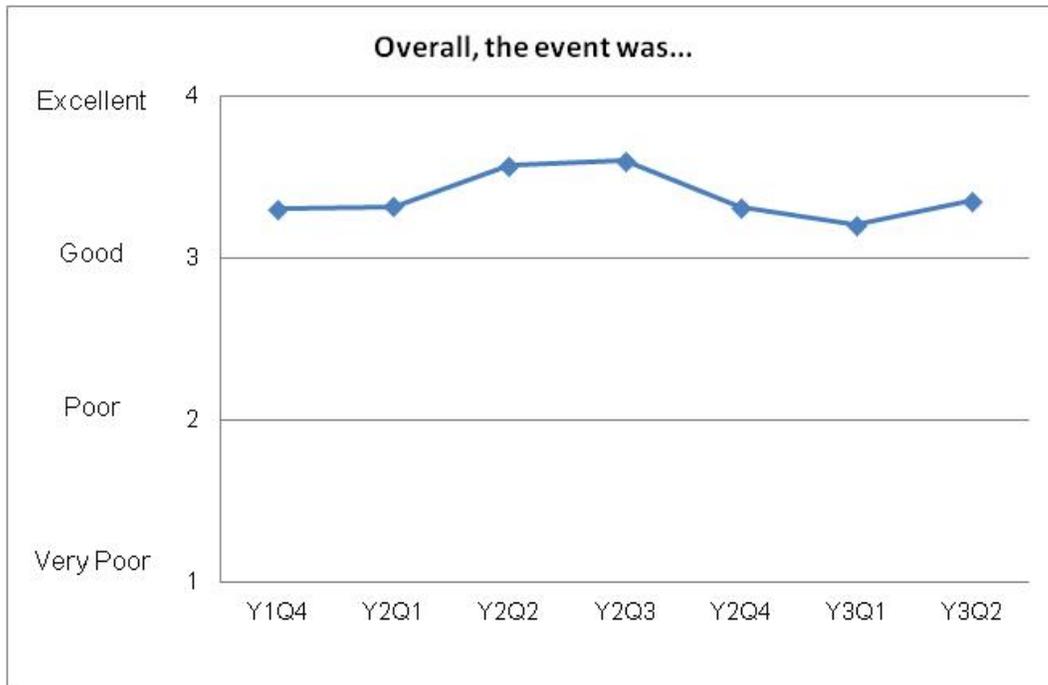


Figure 3: Event Evaluation Results: “Overall the event was...”

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 Q2, the average rating was 3.2 (out of 4), between agree and strongly agree.

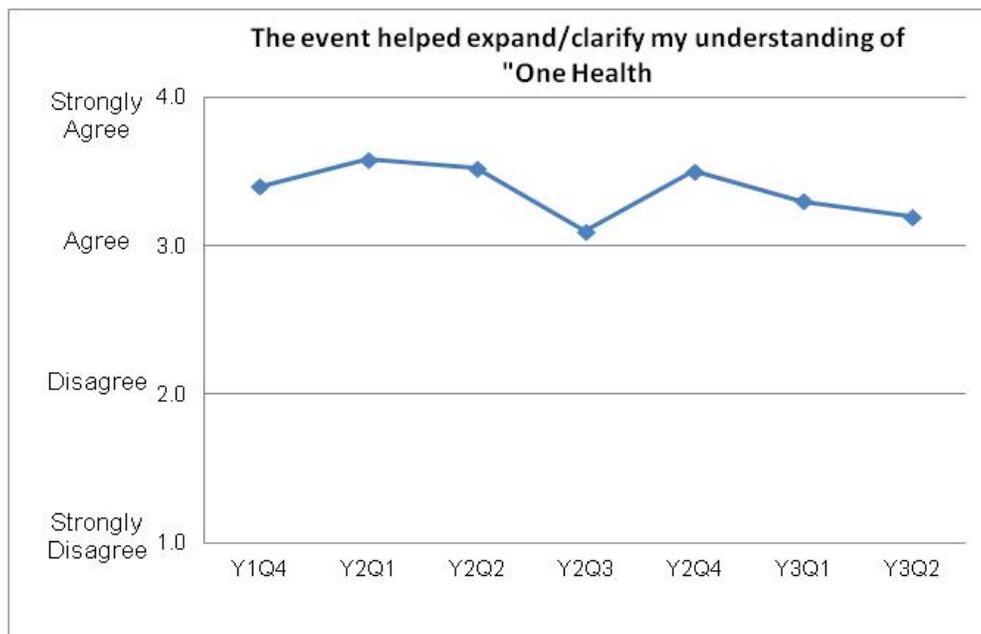


Figure 4: Event Evaluation Results: “This event helped expand/clarify my understanding of “One Health”

EVENT PARTICIPANT PROFILE

In the 2nd 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 48% of all participants, followed by representatives from universities (32%), community-based and professional organizations (6%), non-governmental organizations (3%), and private companies (<1%). The remaining 12% came from uncategorized organizations, due to insufficient data collection. By region, participants from the government sector made up the largest group at West Congo (70%) events, followed by East Congo (11%). University participants were most prominent in the both East Congo and Southeast Asia region (60%), followed by West Congo (12%).

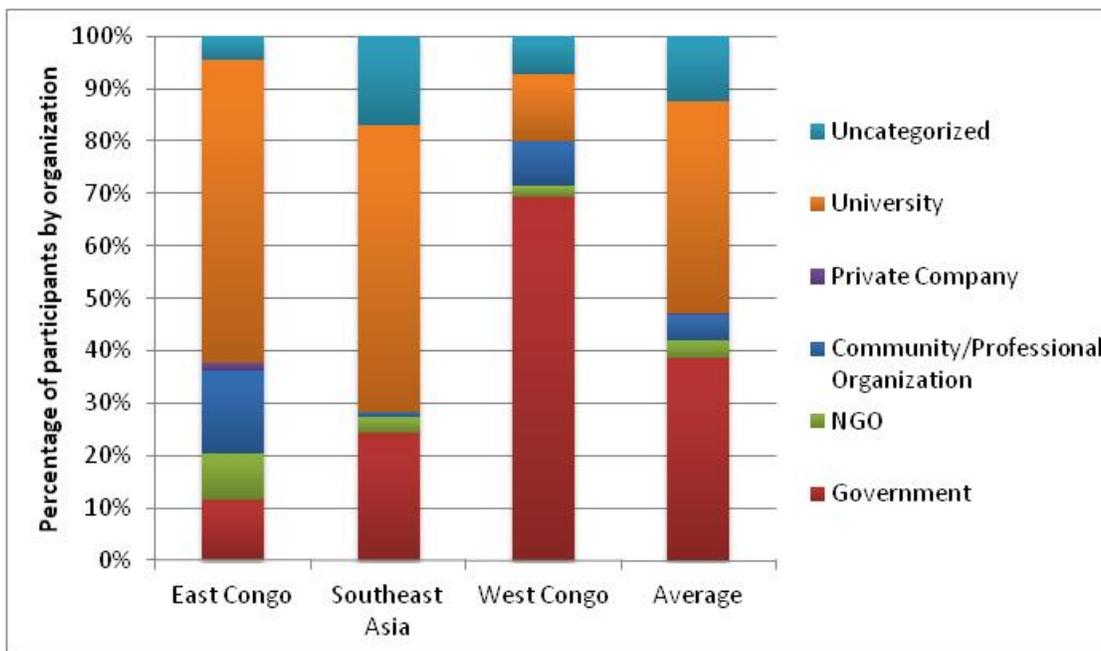


Figure 5: Q2 Participant by Organization Type and Region

Male attendees continued to outnumber their female counterparts (Figure 6.) In the latest quarter, female participation was at approximately 30%. Female participation has stabilized at this level for the last three consecutive quarters.

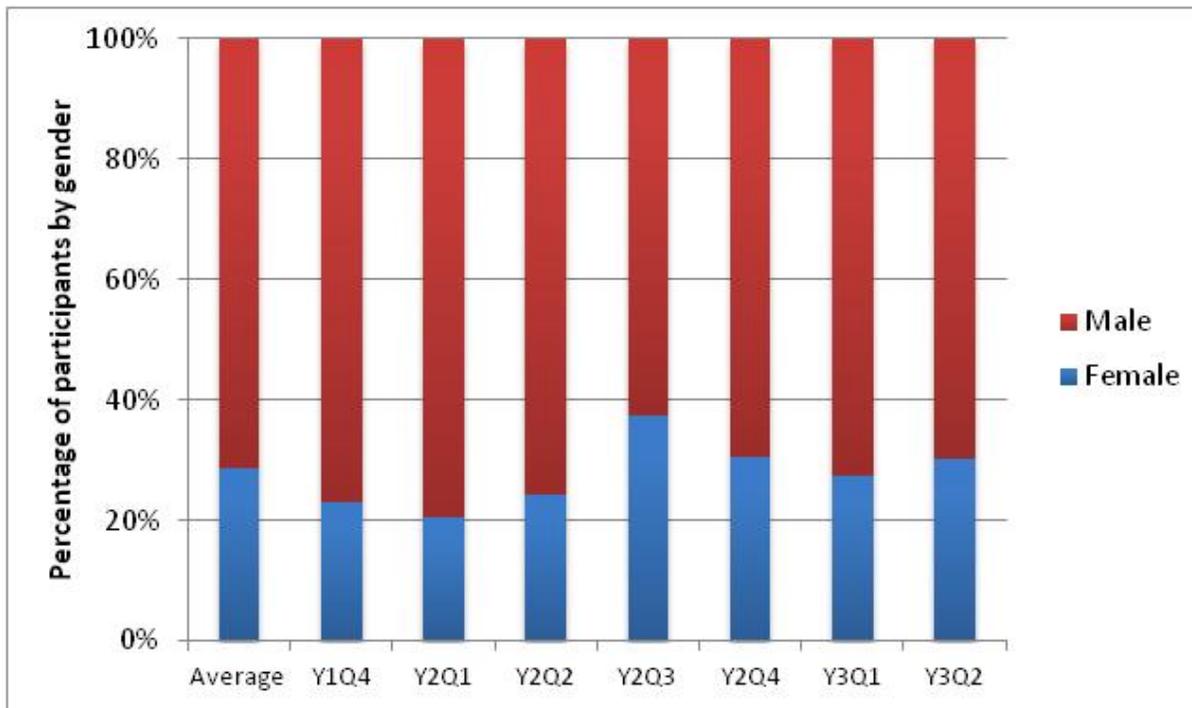


Figure 6: Gender by Quarter

Where we are able to collect participant demographic data at events, Figure 7 is a breakdown of RESPOND event participants from Q2 by their nationality. Thailand nationals represented nearly one third of all event attendees during the period. Other notables were Cameroon (21%) and DRC at 16%. Unfortunately participant demographic data is not available from certain large lectures/presentations, like the One Health sensitization presentations for OHCEA institutions.

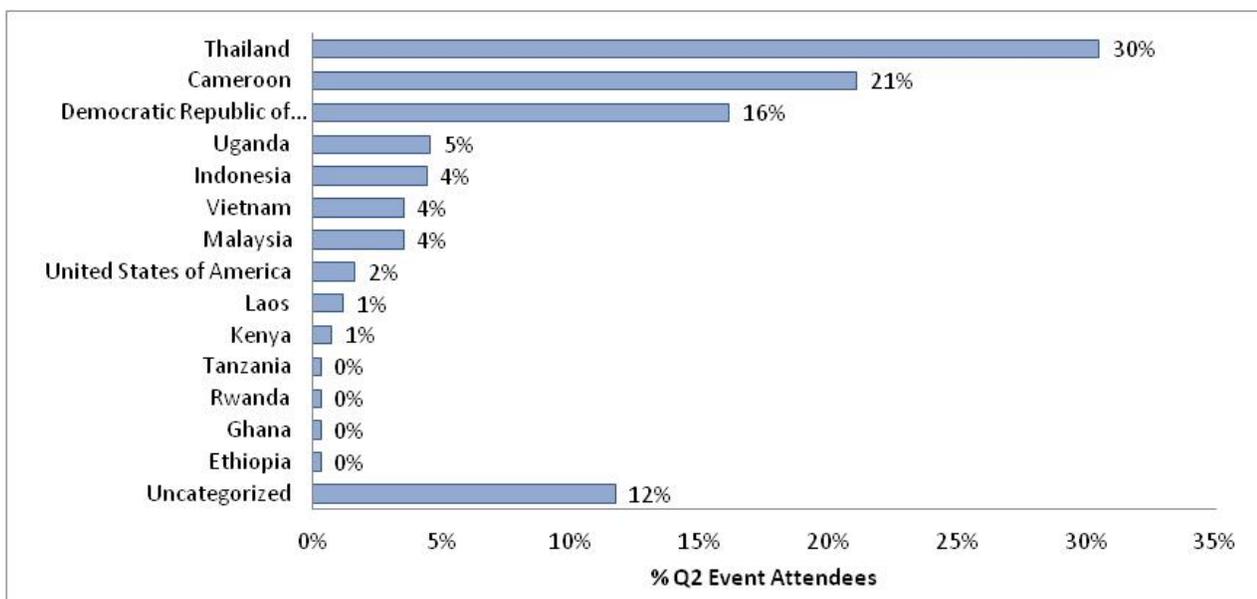


Figure 7: Q2 Event Attendees by Nationality

INSTITUTIONAL COLLABORATION

While both regional One Health university networks are both getting off the ground, we are seeing collaborative activities emerge. In the most recent quarter, 18 exchanges occurred between institutions. To date, as noted in Figure 8, 61% of the exchanges have been on introductory partnership exchanges, laying the groundwork for future activities. Curriculum development, module development, lecturing and collaborative research are all beginning to occur, approximately 9% each of the total collaboration. Professional exchanges are also occurring, but to a lesser degree right now (5%).

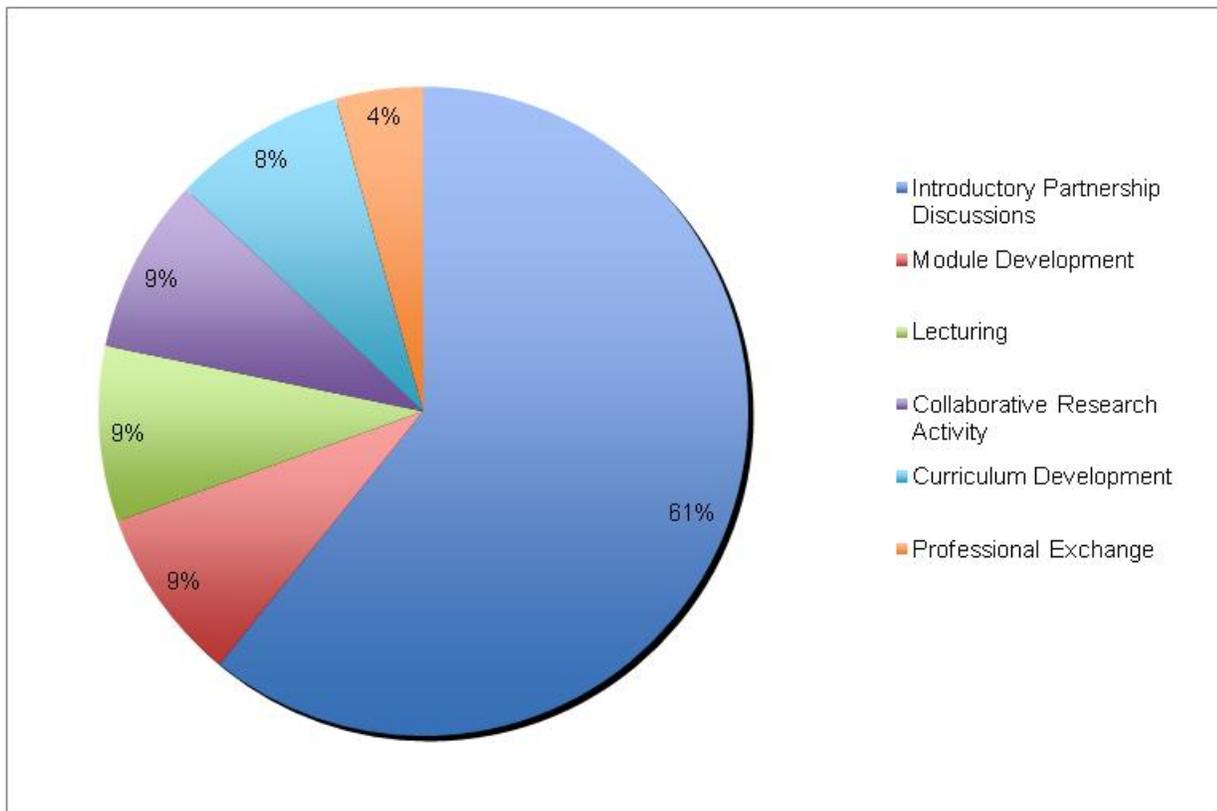


Figure 8: Q2 Institutional Collaboration to Date, by Exchange Type

OTHER RESULTS

In addition to the sub-activity event results noted above, in Q2, RESPOND accomplished the following:

Participant support at external events:

- East Congo: Yellow Fever Risk Assessment workshop (1 participant supported) Upon invitation from the Uganda National Taskforce, the EC Regional Manager participated in the workshop where protocols and tools for a planned Yellow Fever risk assessment were reviewed and agreed upon. East Congo: OHCEA Deans for Engaging Intergovernmental Organizations (EIO) workshop 2012 (8 participants supported) Executive leadership course held at the FAO, OIE, WHO and WTO. The deans attended this week-long intensive professional development program that is designed to help mid- and senior level government officials, industry leaders and academic faculty interact more effectively with intergovernmental organizations and with each other as they interact and work together through the week. East Congo: One Health Competency Workshop (2 participants supported) All participants work actively on One Health issues and developed or implemented competencies in their area of expertise, trying to work towards synthesizing One Health core competencies.

Other:

- East Congo: -In January-February, the M&E team conducted an assessment of the MUSK implementation at Makerere University (4.1.2EC). A summary is included later in the M&E section.
- East Congo: - In January, the M&E team conducted an assessment of the past RESPOND outbreak response sub-activities (Anthrax, Yellow Fever, Ebola). Report forthcoming.

PROJECT TO DATE

The project to date (PTD) distribution of event attendees according to the region that hosted the event and the event type are displayed in Figure 9. The East Congo Basin RESPOND Office (Uganda) has hosted the highest number of event participants, largely due to the One Health Sensitization Presentations in Q2. To date, RESPOND has had approximately 6,000 participants, which includes 1,000 trainees and 1,300 workshop attendees.

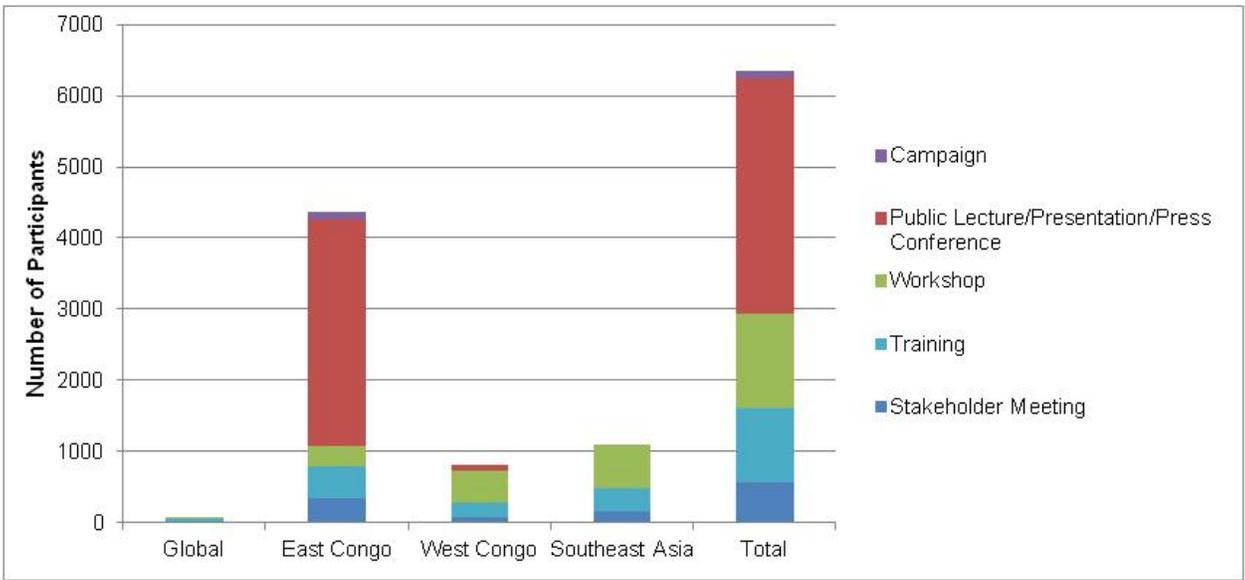


Figure 9: Event Participants by Host Region and Event Type (PTD)

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 10.) They included universities, which was the largest group making up 41% of all participants, followed by representatives from governments (35%), non-governmental organizations and professional, community-based and professional organizations /associations (7-8%), and private companies (2%). The remaining 7% comes from organizations which are unknown (due to lack of data collection at particular events.)

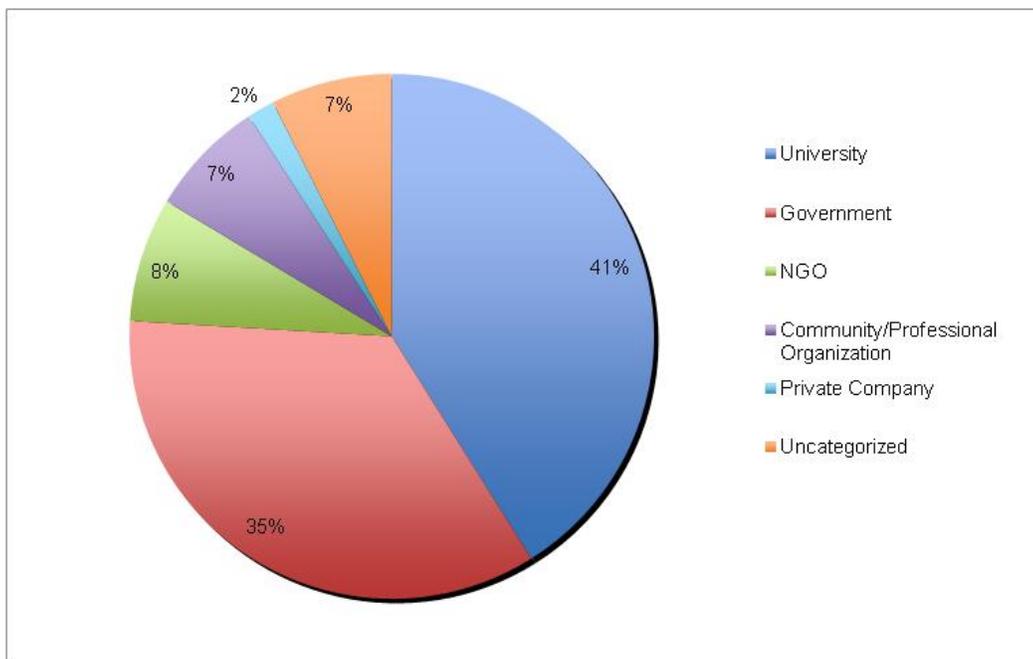


Figure 10: Participant by Organization Type (PTD)

Figure 11 displays the nationalities of all RESPOND event participants. Unsurprisingly, the highest proportions of participants are from countries with regional hub offices, Democratic Republic of Congo, Uganda, and Thailand. Figure 10 also demonstrates that the program reach extends beyond our hub countries, with Cameroon (8%) and Vietnam (6%) both showing good representation. Overall, individuals from 50 different countries (not all shown) have participated in RESPOND events.

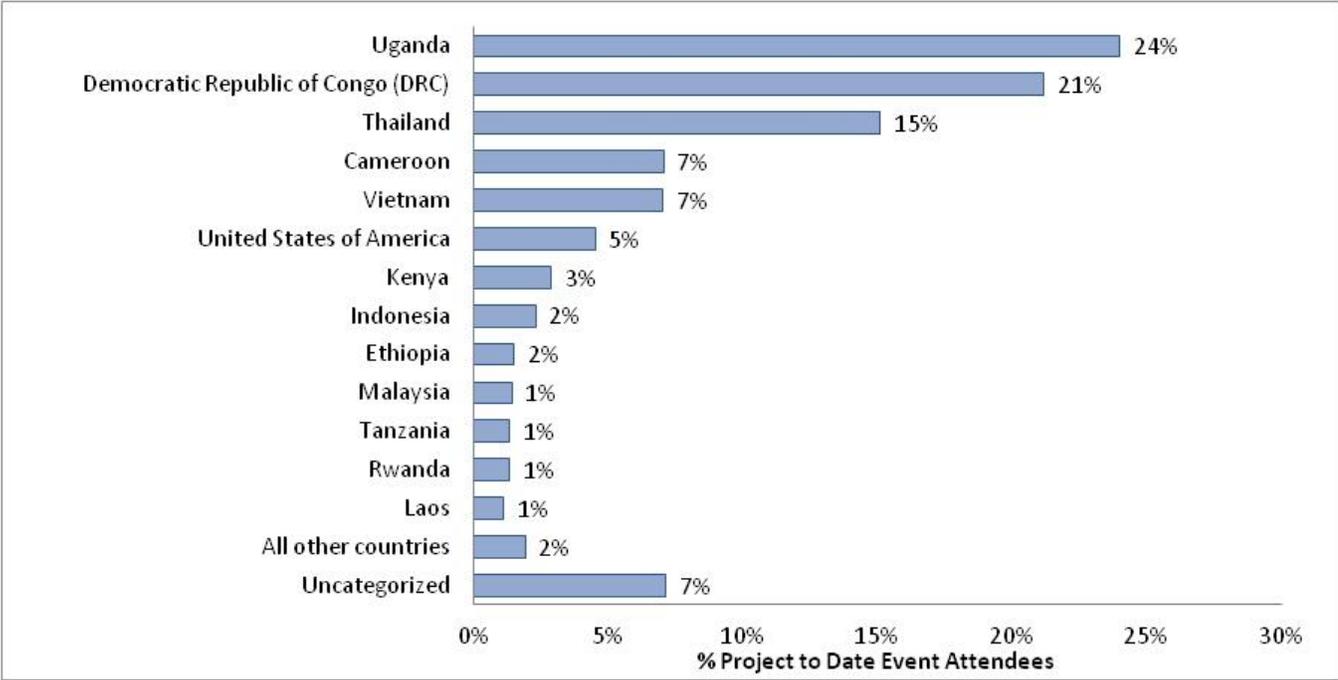


Figure 11: Participant by Nationality (PTD)

MUSK ASSESSMENT

The M&E team recently engaged an external STTA to conduct an evaluation of the MUSK implementation at Makerere University (4.1.2EC). For this evaluation we chose an external evaluator, as there were concerns voiced at the end of last year that we needed to have an unbiased evaluator, so our team (DAI/Tufts/UMN) was ruled out. We engaged an expert on higher education knowledge management systems, Greg Sales, to conduct the evaluation.

Greg collected data from site visits to Tufts University, Kampala office, Makerere University and an online survey to end users. I've attached his final report, which we recently received.

The summary of his findings:

- There are teachers and students who are happy to have and be using the MUSK system, Dean Bazeyo (School of Public Health) is pleased with the implementation, and during the first two semesters MUSK has been used by as many as 4 out of 10 SPH teachers.
- The installation is fragile. The hardware required to sustain MUSK is only partially installed and is not fully operational, the availability of MUSK within COVAB (College of Veterinary Medicine, Animal Resources and Biosecurity) is limited and used by only a small number of COVAB faculty and their students, materials are not properly uploaded and maintained in MUSK making access via searches and long-term use problematic. The training of IT and teaching staff was limited and lacked adequate focus and support to achieve RESPOND's objectives. Further, on-site technical support for the system is extremely limited.
- As with most technology innovations in higher education, adequate planning and the establishment of the systems of support required to achieve the stated objectives were not in place from the outset of the implementation. This has limited the adoption of MUSK, resulted in use well below its potential, and there is real potential for system failures that could end MUSK's use.
- Support of MUSK by MU, after the initial funding ended in September, was reduced. Current support of MU is minimal and shows no indications of improvement. The current level of technical and user support is inadequate to promote the effective use of MUSK and without that, the implementation cannot reach its potential and is in jeopardy of failing. In addition, if the one MUSK support person were to leave her position, it is unclear if, or how, that vacancy would be filled with a person knowledgeable about MUSK. Employing knowledgeable, skilled individuals in technical and user support roles is essential to the future of the implementation.
- Achieving the original outcomes and expectations of the MUSK initiative seem unlikely given the current state of the implementation. Achieving the desired results will not evolve organically as a natural outcome of the implementation. If these outcomes are essential to the mission of RESPOND, specific and targeted actions must be taken in the near future to ensure they are attained.
- There are many opportunities to improve both the MUSK implementation and possible future TUSK iterations with other institutions. All of these require some level of expense, planning, and commitment. Going to the next level, by bolstering the fledgling implementation of MUSK and putting the required infrastructure elements in place, will provide users with the skills and incentives to effectively utilize the system. This could result in significant benefits for not only Makerere University and RESPOND, but also for other institutions that wish to implement this system.

While at the end of the grant (September 2011), there was much enthusiasm/satisfaction with the implementation of MUSK, it's clear that there is much work that needs to be done to really make it a long-term success. This should be taken into account if it is to be rolled out to additional schools/universities.

BEST PRACTICE REVIEW – WASTE DISPOSAL IN REMOTE LOCATIONS

Practitioner review of environmental compliance issues to prepare the RESPOND Environmental Mitigation and Monitoring Plan (EMMP) showed that experience and best practices for medical waste disposal in remote areas with minimal or no health infrastructure (“remote” referring to areas that do not have access to adequate health services and standard facilities for disposal of medical waste) needed to be further explored to harmonize materials, focus on specific concerns in remote locations, review best management practices (BMPs), and identify key issues and mitigation measures. Practitioners understand the problem and manage it by varied means, but do not have consistent and standardized BMPs to guide their response.

A Best Management Practices Review, led by Sally Lahm (Ecology & Environment) was conducted from November 2011-February 2012, to provide state-of-the-art summary of issues related to waste disposal during outbreak responses, provide reference materials for national RESPOND partners, provide training materials for use by RESPOND or others, disseminate knowledge of relevant BMPs to project partners and the wider practitioner community. This review used publications, written documents and oral reports of practitioners as inputs to the data collection. The review met objectives of RESPOND and of USAID environmental regulations, which require continual review of environmental issues of concern to augment training materials.

The Best Practice Review describes the roles and responsibilities of outbreak investigation and response team members, identifies types of health care waste that would likely be generated during disease outbreaks, explains health risks and environmental impacts of waste disposal, and details best practices and adaptive management procedures for treating and disposing of health care waste in remote areas. It has been written to guide USAID RESPOND Project staff, partners and outside practitioners on methods to properly dispose of waste in ways that reduce risks of further transmission and mitigate adverse environmental impact when working in remote areas.

M&E TEAM MEETING

The U.S. and Regional M&E team members collaborate on M&E plans, indicators and tools, but face communication and collaboration obstacles as the team is dispersed across the globe and different

time zones. In spite of the cost, it is very beneficial to meet annually to share results, challenges and opportunities for improvement, as well as develop future M&E activities. With the project having reached its mid-way point in its third year, it is especially beneficial to meet as a full team to discuss progress to date and develop the mid-term review methodology.

The full M&E team (M&E Manager, Regional M&E Officers, university M&E team members) met in Bangkok from February 13th-17th. The week-long meeting was exceptionally valuable to support cross-partner, cross-regional collaboration on all things related to M&E. Day 1 was spent getting acquainted, updated on results and talking about regional issues. It was a good level-setting day for everyone to get grounded in the work.

During Day 2, significant progress was made on the mid-term review methodology. In addition, a few M&E members attended a USAID-sponsored gender analysis training to learn about new USAID requirements for promoting gender equity and how to incorporate them into the RESPOND project. Day 3 gave us a chance to revise the mid-term methodology further, as well as deal with some lingering M&E discussions (e.g., definition of twinning, measuring the impact of institutional collaboration.) Days 4-5 were focused on regional officer M&E issues, e.g., using TAMIS, templates, reporting. While five days were not enough time to cover all of the M&E topics we would have liked to discuss, it paved the way for better communication and collaboration across the M&E team. More time for DAI regional officer sessions was also needed.

INDICATORS

The latest EPT Indicators, released to the EPT Program in January, are now included with the existing RESPOND indicators. 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

Indicators	5 Year Target	Base-line	Year 1	Year 2	Y3Q1	Y3Q2	Y3Q3	Y3Q4	Total
Training (i.e., training, workshops)									
Number of schools teaching One Health curriculum	TBD	7	7	7	7	7			7
Global	TBD								
East Congo	TBD	7	7	7	7	7			7
West Congo	TBD								
Southeast Asia	TBD								
Number of trainees*	TBD		124	582	139	210			1,055
Global	TBD			141					141
East Congo	TBD		124	228	86	20			458
West Congo	TBD			143		66			209
Southeast Asia	TBD			70	53	124			247
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								

Indicators	5 Year Target	Base-line	Year 1	Year 2	Y3Q1	Y3Q2	Y3Q3	Y3Q4	Total
Global	80								
East Congo	80								
West Congo	80								
Southeast Asia	80								
Institutional Collaboration									
Number of network milestones achieved	TBD			5	2				7
Global	TBD								
East Congo	TBD			5	2				7
West Congo	TBD								
Southeast Asia	TBD								
Number of exchanges	TBD			4	1	18			23
Global	TBD								
East Congo	TBD				1	18			19
West Congo	TBD								
Southeast Asia	TBD			4					4
Objectives obtained (%)	80								
East Congo	80								
West Congo	80								
Southeast Asia	80								
One Health Collaboration									
Number of stakeholder/workshop meeting participants***	TBD		109	886	468	298			1,761
Global	TBD			11					
East Congo	TBD			408	129	112			649
West Congo	TBD		109	136	90	87			422
Southeast Asia	TBD			331	249	99			679
Number of press conference/lecture/presentation participants	TBD		600	179	-	2,632			3,411
Global	TBD								
East Congo	TBD		600	80		2,632			3,312
West Congo	TBD			99					99
Southeast Asia	TBD								

Indicators	5 Year Target	Base-line	Year 1	Year 2	Y3Q1	Y3Q2	Y3Q3	Y3Q4	Total
% of relationships strengthened	TBD								
Global	TBD								
East Congo	TBD								
West Congo	TBD								
Southeast Asia	TBD								
Outbreak									
Number of countries that have tested multisectoral outbreak response protocols	TBD								
East Congo	TBD								
West Congo	TBD								
Southeast Asia	TBD								
Number of outbreak responses that have followed established protocol	TBD		1	2					3
East Congo	TBD		1	2					3
West Congo	TBD								
Southeast Asia	TBD								
% of outbreak responses following IDSR guidelines	TBD								
East Congo	TBD								
West Congo	TBD								
Southeast Asia	TBD								
Number of procedural and structural improvements implemented for outbreak response capacity	TBD		1	1					2
East Congo	TBD		1	1					2
West Congo	TBD								
Southeast Asia	TBD								
Average time from start of outbreak to laboratory confirmation	TBD			27					27
East Congo	TBD			27					27
West Congo	TBD								
Southeast Asia	TBD								
Average time from first report (national level) of	TBD								

Indicators	5 Year Target	Base-line	Year 1	Year 2	Y3Q1	Y3Q2	Y3Q3	Y3Q4	Total
suspected disease to response initiation									
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

Indicators	5 Year Target	Base-line	Year 1	Year 2	Y3Q1	Y3Q2	Y3Q3	Y3Q4	Total
Southeast Asia	TBD								
Value of commodities provided	TBD		\$ -	\$ -	\$ -	\$ -			\$ -
Global	TBD		\$ -	\$ -	\$ -	\$ -			\$ -
East Congo	TBD		\$ -	\$ -	\$ -	\$ -			\$ -
West Congo	TBD		\$ -	\$ -	\$ -	\$ -			\$ -
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 3 Work Plan.

GLOBAL ACTIVITIES RESULTS MATRIX

LOW	Sub-Activity ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q2 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	Internal sub-activity working sessions	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.

LOW	Sub-Activity ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q2 Results	Project to Date Results
3.1	1.2.4GL	Global Network Organizational Development		Networks have established functional governance mechanisms; network members share a common vision/understanding of the networks' role	N/A	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	Contributed to Extractive Industry Working Group (EIWG) educational piece for EPT Meeting; Attended Mining Indaba Conference; Attended meeting at Chatham House; Attended Global Risk Forum One Health Conference	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 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

LOW	Sub-Activity ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q2 Results	Project to Date Results
						primates in Equatorial West Africa, and of related mitigation measures. 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 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. Contributed to Extractive Industry Working Group (EIWG) educational piece for EPT Meeting; Attended Mining Indaba Conference; Attended meeting at Chatham House; Attended Global Risk Forum One Health Conference
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	3.1.2GL	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	No results	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.

LOW	Sub-Activity ID	Activities by LOW	Implementing Partner(s)	Expected Results	Q2 Results	Project to Date Results
				understood by stakeholders and adoption begun.		
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
3.2	3.3.1 GL	ProMed Mail: Expanding surveillance and verification for wildlife diseases.	ProMED Mail	Increased use of wildlife health information to protect and improve public health.	Contract under negotiation for final 2 workshops.	Contract signed with ProMED; Workshop held for 13 attendees at the TEPHINET Global Conference on Dec. 13 th ; Planning underway for future ProMED training workshops; In February 2010, RESPOND completed a six-hour training on non-traditional information sources as an adjunct to routine disease surveillance in Bangkok, Thailand. Participatory training conducted with 20 Field Epidemiology Training Program Veterinarians (FETPVs) as part of a larger month-long course for Thai FETPVs.
3.1	3.4.8 GL	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)	Global Alliance for Rabies Control	Increased awareness of issues related to zoonotic disease transmission	N/A	Completed: See sub-activity 3.4.8EC and sub-activity 3.4.8WC

EAST CONGO BASIN ACTIVITIES MATRIX

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
3.1	1.2.2 EC	Creation of OHCEA Secretariat and member coordinating committees.	HEALTH Alliance, One Health Central and East Africa Network (OHCEA)	TBD	N/A	Complete: 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

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
						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.
3.1	1.2.3 EC	Support OHCEA work plan	HEALTH Alliance, One Health Central and East Africa Network (OHCEA)	TBD	Fourth OHCEA Deans Summit in Nairobi, Kenya 27- 28 February, which was attended by 14 Deans. Five Country Coordination Committee meetings: Kenya (attended by 8); Democratic Republic of Congo (DRC) (19); Uganda (9); and Ethiopia (13). One Health Sensitization Meetings for staff and students at OHCEA Universities: Mekelle University School of Public Health and Jimma University School of Public Health and School of Veterinary Medicine (220) in Ethiopia; University of Lubumbashi School of Veterinary Medicine in DRC (410); University of Kinshasa School of Public Health (1,000); Makerere University College of Veterinary Medicine, Animal Resources	Preparatory meetings conducted with UMN and OHCEA Co-Chairs in Uganda; OHCEA Deans & Focal Persons Meeting conducted Feb. 7-11th, 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 8-12th 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. 25th-Mar. 5th 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 16th-19th, with 40 participants. Strategic plan was ratified, country capacity needs/gap reports and work plans presented, and discussed OHCEA can support EPT's

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
					<p>and Biosecurity (COVAB) (170); Umutara Polytechnic, Faculty of Veterinary Medicine, Rwanda (187); and at Makerere University School of Public Health (SPH) (70). Facilitated seven OHCEA deans to attend Engaging Intergovernmental Organizations (EIO) executive leadership and training study tour in Europe, March 3-9.</p>	<p>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. M&E team finalized data collection from four Schools of Veterinary Medicine at Jimma University, Umutara Polytechnic, Sokoine University of Agriculture and Makerere University and four Schools of Public Health at Jimma University, Moi University, University of Nairobi, and Makerere University. Finalized the draft report on August 31, 2011 circulated it internally within RESPOND. (Data collection at DRC universities occurred separately in September, with report following.) 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</p>

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
						<p>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 in the Fourth OHCEA Deans Summit in Nairobi, Kenya, 27- 28 February, which was attended by 14 Deans. Four Country Coordination Committee meetings: Kenya (attended by 8); Democratic Republic of Congo (DRC) (19); Uganda (9); and Ethiopia (13). One Health Sensitization Meetings for staff and students at OHCEA Universities: Mekelle University School of Public Health and Jimma University School of Public Health and School of Veterinary Medicine (220) in Ethiopia; University of Lubumbashi School of Veterinary Medicine in DRC (410); University of Kinshasa School of Public Health (1,000); Makerere University College of Veterinary Medicine, Animal Resources and Biosecurity (COVAB) (170); Umutara Polytechnic, Faculty of Veterinary Medicine, Rwanda (187); and at Makerere University School of Public Health (SPH) (70). Facilitated seven OHCEA deans to attend Engaging Intergovernmental Organizations (EIO) executive leadership and training</p>

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
						study tour in Europe, March 3-9.
3.1	1.4.4 EC	Support fellows to attend existing Field Epidemiology Training Programs with veterinary-specific components.	AFENET		Merged with 3.2.2 EC. See EC region listing.	Merged with 3.2.2 EC. See EC region listing.
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	TBD	Training, technical, logistical, material and communications support provided.	Evaluation, in January/February 2012, of completed RESPOND East Congo Basin outbreak	Evaluation, in January/February 2012, of completed RESPOND East Congo Basin outbreak response sub-activity initiatives (anthrax, yellow fever and Ebola outbreaks in Uganda). The final report will be

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
		emerging epidemics.			response sub-activity initiatives (anthrax, yellow fever and Ebola outbreaks in Uganda). The final report will be produced during the next reporting period.	produced during the next reporting period.
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 January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
3.2	1.5.4E C	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.	Facilitated Sylvia Wanzara, faculty at Makerere University to attend the Veterinary Public Health Residency Program at University of Minnesota and concurrently start Executive Masters in Public Health (MPH).	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. Facilitated Sylvia Wanzara, faculty at Makerere University to attend the Veterinary Public Health Residency Program at University of Minnesota and concurrently start Executive Masters in Public Health (MPH).
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

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
						response strategy should be developed for Uganda.
3.2	3.2.0.2 EC	Outbreak response: Unidentified hemorrhagic outbreak in Bundibugyo, District	AFENET	Support provided for response, best practices developed and an adaptable outbreak response template created.		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; 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

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
						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.	Participated in the Yellow Fever Risk Assessment workshop, January 11, 2012.	Participated in the Yellow Fever Risk Assessment workshop, January 11, 2012.
3.2	3.2.0.4 EC	Outbreak response: Strengthening surveillance, reporting diagnostic capacity to improve early detection, diagnosis and response to disease outbreaks in humans, livestock and wildlife	AFENET	Strengthening training (skills) and capacity (resources) to identify outbreaks of infectious diseases; conducting appropriate, routine 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.	RESPOND staff gave presentation to Master of Science in Preventative Vet Medicine – Epidemiology students in communications and reporting, and Biosecurity, Biosafety and Bioterrorism threats. Facilitated stakeholders meetings (attended by AFENET, COVAB, MAAIF, RESPOND) for the Master of Science in Preventative Vet Medicine – Epidemiology to discuss technical and operational aspects of the course including review of	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. The trainees were district team leaders for 4 districts where World Rabies Day events were held to promote One Health sensitization. Received a formal request from AFENET on September 22 nd for the extension of the grant and started working with the PHQ to submit the request formally to USAID. Makerere University was faced with a 1-month strike which caused delays. 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 Uganda to strengthen laboratory and surveillance at some hospitals in two districts, review

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
					<p>the curriculum; RESPOND sponsored MVPM students went on a Herd Health Medicine and Control and Eradication of Zoonoses field attachment.</p>	<p>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. 2011RESPOND staff gave presentation to Master of Science in Preventative Vet Medicine – Epidemiology students in communications and reporting, and Biosecurity, Biosafety and Bioterrorism threats. Facilitated stakeholders meetings (attended by AFENET, COVAB, MAAIF, RESPOND) for the Master of Science in Preventative Vet Medicine – Epidemiology to discuss technical and operational aspects of the course including review of the curriculum; RESPOND</p>

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
						sponsored MVPM students went on a Herd Health Medicine and Control and Eradication of Zoonoses field attachment.
3.2	3.2.0.5 EC	Extractive industries outbreak response training	Federation of Ugandan Employers, Uganda Manufacturing Association, Ugandan Red Cross	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; Development of a curriculum tailored to the private sector; Trained Master Trainers and Trainers; Trained peer educators.	Both Federation of Uganda's Employers and Uganda Manufacturer's Association grant applications were submitted to USAID for review on March 21, and were approved by USAID on March 29.	<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.</p> <p>Customized a training curriculum based on available materials and incorporated the IDSR reportable diseases. Held a one-day workshop (19 attendees) on August 23, 2011 to review the Uganda Red Cross curriculum on disease outbreaks. Submitted draft grant agreements for UMA and FUE to USAID.</p> <p>Both Federation of Uganda's Employers and Uganda Manufacturer's Association grant applications were submitted to USAID for review on March 21, and were approved by USAID on March 29.</p>
3.2	3.2.0.6 EC	Support for investigation & response to Ebola in	AFENET	Support provided for response, best practices developed and an adaptable outbreak response template		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

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
		Uganda		created.		teams. With only one known case RESPOND did not participate as originally planned. 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 development of a prioritized plan for outbreak response.	AFENET	Strengthening human resource capacity in field epidemiology and effective outbreak response; Strengthening AFENET institutional capacity for training, mentoring and management.	Grant agreement revised, reviewed and awaiting submission to USAID.	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 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

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
						the monitoring and evaluation logic framework; On December 2, submitted the revised grant documents to USAID for approval. Grant agreement revised, reviewed and awaiting submission to USAID.
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.
3.2	4.1.2 EC	Evaluate existing Knowledge Management Systems for the health sciences, their application and utilization in the university context, and	MUSPH	Implementation plan for RESPOND support of appropriate technologies	Evaluation of the TUSK implementation at Makerere University. The goals of the evaluation were to help develop an understanding of: MUSK's current level of use, Adoption levels of MUSK among different user types, User experiences with MUSK, Satisfaction levels among user groups, and to Identify areas for improvement [with the	Pre-installation assessment completed. RESPOND received approval from USAID for the proposed grant to be issued to the Makerere School of Public Health. RESPOND procured and installed a server at MUSPH. Provided training by Tufts University TUSK staff to the Makerere User Support team (2 people.) Provided on-site training to Makerere faculty and students (61 people total) on the use of the TUSK system. 2 one-hour introductory sessions provided to 100 people in total Additional training done to bring the number of trained users to 120; more than 500 faculty and students (71%) enrolled on the platform.

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
		support the improvement and integration of appropriate systems.			current and future implementations]. This evaluation was conducted in February of 2012.	<p>In addition, more than 500 files with teaching materials uploaded at MUSPH and SVM. With RESPOND support, additional IT procurements were made to link MUSPH with the SVM. 1-month university strike caused delays. Grant completed on September 30th.</p> <p>Evaluation of the TUSK implementation at Makerere University. The goals of the evaluation were to help develop an understanding of: MUSK's current level of use, · Adoption levels of MUSK among different user types, User experiences with MUSK, Satisfaction levels among user groups, and to Identify areas for improvement [with the current and future implementations]. This evaluation was conducted in February of 2012.</p>

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-Activity ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 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.	<ul style="list-style-type: none"> – The three schools beneficiaries of RESPOND grants under this sub-activity (UNIKIN and UNILU veterinary schools and ISTM Lubumbashi) have completed their visits to regional universities for the purpose of developing institutional relationships – The Faculty of Veterinary Medicine of the University of Kinshasa held a workshop on March 16th to 20th, 2012 in collaboration with the School of Public Health on “Applied Methods for Outbreak Investigation and Response.” – Dr. Aluma Araba Ameriama, an epidemiologist, visited UNIKIN from March 3 to 10. Prof. Sam 	RFAs issued and proposals were received and reviewed from UNIKEN, 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. UNIKEN, UNILU and ISTM Lubumbashi grants approved 29 th June. 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. ¶The Faculty of Veterinary Medicine of the University of Kinshasa held a workshop on March 16th to 20th, 2012 in collaboration with the School of Public Health on “Applied Methods for Outbreak Investigation and Response.” Dr. Aluma Araba Ameriama, an epidemiologist, visited UNIKIN from March 3 to 10. Prof. Sam Telford, a wildlife health specialist, visited UNILU from March 25 to April 1.

LOW	Sub-Activity ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
					Telford, a wildlife health specialist, visited UNILU from March 25 to April 1.	
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 Sante-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	The three activities were launched: The working group composed by communication experts is now set, The consultant who will be assisting FUS conduct the situational analysis is now hired. Implementation plan for the census is established.	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. Work plan presented to partners 14 May A press conference was organized to present FUS activities, with 84 attendees. RESPOND contributed to the organization of ANIC (the national nurses association of DRC) workshop held on September 22 to 24, with 100 participants. 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. The three activities were launched: The working group composed by communication experts is now set, The consultant who will be assisting FUS conduct the situational analysis is now hired. Implementation plan for the census is established.

LOW	Sub-Activity ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
3.1	1.5.1 WC	Conduct professional continuing education through didactic and field workshops using the Wildlife Investigation and Livestock Disease (WILD) module.	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.	Assessment of Y2 activities and planning of Y3 activities were conducted.	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 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 Assessment of Y2 activities and planning of Y3 activities were conducted.

LOW	Sub-Activity ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 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	A budget has been review by RESPOND and USWF and a mechanism has been identified to support fellows who will participate to the program. Module developed and under review. Translation of scientific articles in progress.	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. A budget has been review by RESPOND and USWF and a mechanism has been identified to support fellows who will participate to the program. Module developed and under review. Translation of scientific articles in progress.
3.2	2.1.1W C	Introduce EPT RESPOND program to key collaborators (USAID missions, host governments, international health agencies, private sector partners, NGOs, universities).	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-Activity ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
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	3.2.0 WC	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 WC	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, Health, Environment, FAO, WHO and CDC	Increased awareness of issues related to zoonotic disease transmission	N/A	Completed. 3 key ministries collaborated for a common interest, with the support of technical partners and donors. 1 day workshop held (32 participants); 30,000 flyers and posters distributed across city of Kinshasa in public places, schools and health centers; Professional associations initiated One Health Federation

DRC COUNTRY ACTIVITIES

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 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	<ul style="list-style-type: none"> – On January 24-25th, 2012, a workshop was held at the WC regional Office to validate the One Health-MISRZ pre-service training Curriculum by national curriculum Reforms Committee members. – The One Health-MISRZ pre-service training Curriculum was presented to CCUS. 	<p>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 20th 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 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. On January 24-25th, 2012, a workshop was held at the WC regional Office to validate the One Health-MISRZ pre-service training Curriculum by national curriculum Reforms</p>

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
						Committee members. The One Health-MISRZ pre-service training Curriculum was presented to CCUS.
3.2	3.1.1 WC	Strengthen systems for disease surveillance, outbreak investigation and response with a One Health approach and response. (Fast Track)	TBD	Analysis and improvement of systems and procedures completed in each country.	No Results	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 Quarantine Services was established.
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	Training: CDC, Ministry of Public Health, Ministry of Agriculture, ICCN, CARPE; Community awareness:	Medical personnel in isolated rural areas trained; Training modules developed and delivered.	– InCEF finished the selection of 30 villages for implementation of the community sensitization. InCEF also reported having completed the training of community educators.	Implementation plan developed with partners; Modules developed; The first training session jointly conducted by CDC (first 3 days on Monkey pox training) and RESPOND (2 nd 3 days on IDSR applied to viral hemorrhagic fever diseases) took place in Boende from Feb. 19-24 th , 2011. In total, 79 participants from Health, Agriculture and Environment sectors attended that session.

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
		Salong-Lukenie-Sankuru Landscape region.	InCEF		<ul style="list-style-type: none"> <li data-bbox="978 402 1310 699">– The InCEF grant ended on March 31 and with no possibility of extension decision was reached to finish the grant with community sensitization in thirty villages still pending. <li data-bbox="978 789 1310 971">– The One Health-MISRZ participants’ manual and facilitator’s guide for in-service training was presented to the CCUS. <li data-bbox="978 1000 1310 1338">– The local consultant traveled to Tshuapa District to identify the possible storage and delivery mechanisms for the supplies being procured for the Ministry of Agriculture, Health, and Environment 	<p data-bbox="1331 402 1915 1398">Negotiation with InCEF is ongoing to finalize the 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 which 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 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</p>

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
						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. InCEF finished the selection of 30 villages for implementation of the community sensitization. InCEF also reported having completed the training of community educators. The InCEF grant ended on March 31 and a decision was reached to finish the grant with community sensitization in thirty villages still pending. The One Health-MISRZ participants' manual and facilitator's guide for in-service training was presented to the CCUS. The local consultant traveled to Tshuapa District to identify the possible storage and delivery mechanisms for the supplies being procured for the Ministry of Agriculture, Health, and Environment
3.1	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	AFENET	Multi-disciplinary teams are developed and trained	A one-week in-service risk analysis training course was held on March 12 to 18 and has brought together 26 professionals from the Ministry of Agriculture, Ministry of Public Health, Ministry of Environment,	The concept paper jointly developed with AFENET was approved. RESPOND team is preparing Schedule of Activities to be sent to AFENET for them to submit a proposal. AFENET proposal being finalized, including implementation plan and log frame. A one-week in-service risk analysis training course was held on March 12 to 18 and has brought together 26 professionals from the Ministry of Agriculture,

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
		response.			<p>Conservation of Nature and Tourism and the Ministry of Higher Education of Democratic Republic of Congo.</p> <p>Procurement process for in kind grant for office supplies to Ministry of Agriculture completed</p>	<p>Ministry of Public Health, Ministry of Environment, Conservation of Nature and Tourism and the Ministry of Higher Education of Democratic Republic of Congo</p> <p>Procurement process for in kind grant for office supplies to Ministry of Agriculture completed</p>
3.2	4.1.2 WC	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.	UNIKEN, UNILU	Implementation plan for RESPOND support of appropriate technology	<ul style="list-style-type: none"> – A consultant has been recruited to develop bid documents for the rehabilitation and extension of UNIKIN and UNILU intranet. – Translation of TUSK into French is still underway 	<p>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 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</p>

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 – March 31, 2012	Q2 Results	Project to Date Results
						connect government public health and veterinary laboratories. A consultant has been recruited to develop bid documents for the rehabilitation and extension of UNIKIN and UNILU intranet. Translation of TUSK into French is still underway

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

GABON COUNTRY ACTIVITIES

Activities included in the following regional sub-activities: 1.5.1 WC, 1.5.5 WC

REPUBLIC OF CONGO COUNTRY ACTIVITIES

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

CAMEROON COUNTRY ACTIVITIES

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1 2012 – March 31, 2012	Q2 Results	Project to Date Results
3.2	3.1.1 WC	Strengthen systems for disease surveillance, outbreak investigation and response	Ad hoc committee in Cameroon, EPT partners	National program for zoonotic disease control and prevention designed for Cameroon	The Cameroonian government has been joined by the US Embassy and the representatives of all the EPT Programs in Cameroon to officially validate the National Program for Prevention and	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,

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1 2012 – March 31, 2012	Q2 Results	Project to Date Results
		with a One Health approach and response. (Fast Track)			Fight against Emerging and Re-emerging Zoonoses. The Minister of Livestock, Fishery and Animal Industries, the Minister of Environment and protection of Nature, the Minister of Public Health and the Minister of Forests and Wildlife co-signed the preface of the document. The National Program for Prevention and Fight against Emerging and Re-emerging Zoonoses of Cameroon was officially validated on March 2.	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 13-16th December in Yaoundé, Cameroon. Procurement of office supplies initiated. The National Program for Prevention and Fight against Emerging and Re-emerging Zoonoses of Cameroon was officially validated on March 2.

Activities included in the following regional sub-activities: 1.5.1 WC, 2.1.1 WC

SOUTHEAST ASIA ACTIVITIES RESULTS MATRIX

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 - March 31, 2012	Q2 Results	Project to Date Results
3.1	1.2.1 SE	Planning and implementation of university twinning (One Health Southeast Asia – OHSEA)	<p>Thailand: Chiang Mai University, Mahidol University,</p> <p>Indonesia: University of Gadjah Mada, Institut Pertanian Bogor, University of Indonesia,</p> <p>Malaysia: Universiti Kebangsaan Malaysia, Universiti Putra Malaysia</p> <p>Vietnam:</p>	<ul style="list-style-type: none"> - Conduct Thailand National One Health meeting - 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 	<ul style="list-style-type: none"> - SEAOHUN one-year workplan (FY12) developed - The 2nd Executive Board meeting held on February 21-22 in Jakarta - GHI short training course (128 participants) conducted on January 30 – February 9, 2011 in Chaing Mai, Thailand. - Provided funding support to Thailand National One Health meeting (121 attendees) held on March 26-28, 2012, Bangkok 	<p>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; 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 24th-25th May. Set up a Working Group to expedite the network activities. Conducted the 1st Working Group meeting in Bangkok on August 29th. Began the two-week short course training on eco-health zoonotic diseases. The 2nd and 3rd Working Group meetings were conducted in Kuala Lumpur and Bangkok in October and November 2011 respectively. Support to the Vietnam’s National One Health University Network meeting in Nah Trang, Vietnam on November 22, 2011. The 2nd Deans’ Meeting was organized in December 2011. The SEAOHUN vision & missions were developed and the Executive Board was established. The 1st Executive Board meeting was held in Vietnam in conjunction with the Deans’ Meeting. A one-year SEAOHUN workplan was developed. The 2nd Executive Board meeting held on February 21-22, 2012 in Jakarta. GHI short training course (128 participants) was conducted on January 30 – February 9, 2011 in Chaing Mai, Thailand.</p>

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 - March 31, 2012	Q2 Results	Project to Date Results
			Hanoi School of Public Health, Hanoi University of Agriculture, Hanoi Medical University UMN, Tufts	January 31, 2012. - Conduct 2 nd Executive Board meeting beginning of February, 2012 in Bangkok. - Launch 1 st inaugural meeting of INDOHUN members to plan INDOHUN activities in Indonesia		Thailand National One Health meeting (121 attendees) was organized by The Faculty of Veterinary Sciences, Mahidol University on March 26-28, 2012 in Bangkok, Thailand.
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	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 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.

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 - March 31, 2012	Q2 Results	Project to Date Results
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	Continuation of the Master's degree program for the enrolled students, including field projects.	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. Seven (7) Students were enrolled with funding support from RESPOND. The FETP/FETP-V program is continued throughout the FY12.
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 during the first quarter with 20-25 participants each month.	N/A	Completed: 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

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 - March 31, 2012	Q2 Results	Project to Date Results
						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 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. This activity completed in December 2011 and discontinued.
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	N/A	Completed: 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

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 - March 31, 2012	Q2 Results	Project to Date Results
3.2	3.2.0 SE	Outbreak response support for newly emerging epidemics.	TBD	Training, technical, logistical, material and communications support provided.	N/A	N/A

THAILAND COUNTRY ACTIVITIES

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 - March 31, 2012	Q2 Results	Project to Date Results
3.1	1.2.2 SE	Support twinning relationship between Khon Kaen Veterinary Medical School and Nabon Agricultural College.	TUFTS, Khon Kaen University Veterinary Medical School, Nabong Agricultural College	Improve existing twinning relationship between 2 institutions: staff/student exchanges, course/lecture/workshop delivery, lecture capacity improvement, enrollment/support in masters programs, curriculum co-development	<ul style="list-style-type: none"> - Continued from the first quarter, 23 KKU lecturers provided lectures at Nabong Agricultural colleges. - 26 fourth year students of Nabong received laboratory training at KKU to build their capacity to operate their lab equipment supported by Asian Development Bank - Lecturers (26) from KKU began teaching in March for the 2nd semester of NAC for the 3rd and 4th 	Assessed capacity of KKU to support NAC in developing vet schools and Lao vets; RESPOND team visited NAC and KKUVMS. 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 9 th -10 th June 2011, a regional One Health conference was held at 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

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 - March 31, 2012	Q2 Results	Project to Date Results
					<p>year students.</p> <ul style="list-style-type: none"> - Preparation to process USAID approval for two VM/KKU staff to attend a one-month exchange program at Tufts University in June. 	<p>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 partnership²³ lecturers from KKU provide teaching to the 3rd and 4th year student of Nabong Agricultural College (NAC) during November 2011 – January 2012. 26 fourth year students of Nabong received laboratory training at KKU. 26 Lecturers from KKU began to provide their lectures for the 2nd semester of NAC, starting from March through May. Preparation to process USAID approval for two VM/KKU staff to attend a one-month exchange program at Tufts University in June.</p>
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

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 - March 31, 2012	Q2 Results	Project to Date Results
3.1	1.5.2 SE	Applied field training for wildlife veterinary medical officers and field pathologists.	Mahidol University	16 DNP cohort wildlife veterinarians trained on forensic investigation and putting epidemiological knowledge into practice	No results. The last (4 th) workshop will be conducted in June 2012 (Q3).	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.
3.2	3.4.4 SE	Support training to strengthen One Health epidemiological teams at provincial and	Field Epidemiology Association of Thailand (FEAT)	Review and improve training materials & delivery methods: assist government to identify trainers, deliver training courses in 5 provinces, short-term training workshops, support field	<ul style="list-style-type: none"> - A grant was approved. - 5-day TOT workshop was conducted in February 2012 for 30 selected trainers - Follow-on 5-day training workshop for provincial field implementers was 	A grant was approved. 5-day TOT workshop was conducted in February 2012 for 30 selected trainers. Follow-on 5-day training workshop for provincial field implementers was conducted in March 2012. Five field projects, one project per province, were developed for the implementation.

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 - March 31, 2012	Q2 Results	Project to Date Results
		district levels.		project mentoring/assistance support, review/strengthening of materials, training, coursework	conducted in March 2012. - Five field projects, one project per province, were developed. -	

Activities included in the following regional sub-activity: 1.2.1 SE. 1.5.1SE

VIETNAM COUNTRY ACTIVITIES

LOW	Sub-Act ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 - March 31, 2012	Q2 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	<ul style="list-style-type: none"> - Grant application was approved by USAID in February - Discussed with the Vietnam government and WHO in March to revise the joint implementation plan 	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 approved by USAID in February. Discussed with the Vietnam government and WHO in March to revise the joint implementation plan

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 January 1, 2012 - March 31, 2012	Q2 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	Finalized grant and activities for grant application. Continued to work on report to satisfy Leahy Amendment exemption.	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. Finalized grant and activities for grant application. Continued to work on report to satisfy Leahy Amendment exemption.
3.2	3.4.5 SE	Support training to strengthen One Health epidemiological teams at provincial and district levels.	National Emerging Infectious Disease Coordination Office (NEIDCO)	Review and improve training materials & delivery methods: Training of Trainers (ToT) workshops, workshops for provincial and district level staff	Finalized grant and activities. Submitted grant to RESPOND PHQ/USAID.	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. Finalized grant and activities. Submitted grant to RESPOND PHQ/USAID.

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 January 1, 2012 - March 31, 2012	Q2 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	<ul style="list-style-type: none"> - Stakeholders meeting conducted - Activity plan discussed - Potential consultant identified to assist with the development of project activities 	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. Stakeholders meeting conducted. Activity plan discussed. Potential consultant identified to assist with the development of project activities

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

CAMBODIA COUNTRY ACTIVITIES

LOW	Sub-Activity ID	Activities by LOW	Implementing Partner(s)	Expected Results January 1, 2012 - March 31, 2012	Q2 Results	Project to Date Results
3.2	3.4.7 SE	Support training to strengthen One Health epidemiological teams, including MOH and MOA staff, at selected provincial, district levels.	TBD	a) Applied Epidemiology Training (AET); b) Mini-FETPV for animal health workers; c) One Health First Responder training.	- 1 st didactic training activity (15 trainees) in Phnom Penh, Feb. 13 th – March 7 th . Provided support to 10 provincial participants.	1 st didactic training activity (15 trainees) in Phnom Penh, Feb. 13 th – March 7 th . Provided support to 10 provincial participants.

MALAYSIA COUNTRY ACTIVITIES

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

VI. APPENDICES:

APPENDIX I: CONCEPT PAPERS AND GRANTS

1.5.7 SE

RESPOND Concept Paper

January 16, 2012 version

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

Sub-activity number: N/A

Sub-activity name: Short term CDC Fort Collins virology training designed to improve in country diagnostic capacity for priority viral diseases, INDONESIA

Partner lead: DAI

Grantees: TBD

Introduction

An integral part of both field investigations of outbreaks and conducting effective disease surveillance in human and animal populations includes the capacity to rapidly and accurately diagnose the actual cause of infection. This capacity is dependent on multiple elements within the health system, including the need to collect proper specimens; the use of appropriate media for transport, and prompt and accurate diagnostic testing capacity at laboratories. The process can be further enhanced if countries have within their border the laboratory capacity to determine the actual cause of outbreaks or epidemics. This in-country capacity is also useful to support investigations in remote areas, or reporting of outbreaks that may cross-political borders, and thus is an important component to support universal implementation of the International Health Regulations (IHR 2005).

The timeliness and accuracy of diagnostic capacity within EPT countries and regions is of key importance to the leadership of animal and human health agencies, which can more adeptly react to outbreaks and epidemics if managers have the appropriate information about causal agents to guide the proper management of disease prevention and control activities.

During 2012, USAID EPT is funding CDC to build capacity to perform valid laboratory diagnosis of epidemic vector-borne viral infections at the Eijkman Institute of Molecular Biology in Jakarta, Indonesia. The capacity to diagnose a wide range of such viruses is now essentially absent in Indonesia. This effort will be a first step toward an accurate, in-country diagnostic capacity that will further support a more rapid and appropriate response to outbreaks and epidemics of emerging diseases. CDC is already planning to build the laboratory and staff the facility with a highly qualified virology technician.

Introduction

This document requests approval for use of RESPOND funds to support a laboratorian from Indonesia (Devi Mienanti) proposed by CDC, to travel Fort Collins, Colorado (USA) during the first quarter of 2012 to attend a two week advanced CDC laboratory training. During this training, the student will learn the proper techniques for confirming infections of all major arboviruses, including dengue, chikungunya and Japanese encephalitis, and is also provided with the reagents necessary for conducting those tests upon their return to Indonesia.

The concept for RESPOND support for this training has the endorsement of senior CDC Fort Collins staff (i.e. Ron Rosenberg, ScD | Associate Director for Global Health | National Center for Emerging & Zoonotic Diseases | Centers for Disease Control & Prevention -- CDC), the RESPOND SE Asia Regional Technical Director (Stan Fenwick), and the RESPOND Senior Field Epidemiology Officer (DL Hatch). The concept was also discussed during the recent RESPOND team visit with USAID-Indonesia staff overseeing EPT program coordination, and received support.

RESPOND proposes to fund both travel and per diem of the technician to attend the 2-week laboratory training course held at CDC Fort Collins, Colorado; there is no additional course fee or charge for reagents.

Upon the laboratorian's return to Indonesia, U.S. CDC will be working with the government of Indonesia and EPT partners to link this training to directly enhance both diagnostic capacity during outbreaks (e.g. in collaboration with FETP-Indonesia), and further support the International Health Regulations (IHR). The expected outcome of the training would be to improve in-country capacity to accurately diagnose diseases in animals and humans, and enhance the accuracy and timeliness of reporting, including for emerging zoonoses.

RESPOND Objective applicable: Objective 4 (Introduction of appropriate new technologies to improve training, disease surveillance, and outbreak investigations)

APPROVED GRANTS

Federation of Uganda Employers (FUE) Grant Approval

Agreement Type:	Fixed Obligation Grant (FOG)
Program Description:	<p>The RESPOND project began in October 2009 with a mandate to strengthen training, educational programs, and support to governments, universities and civil society with the objective of improving the capacity to respond to zoonotic and emerging infectious disease outbreaks. This project is one of five in the United States Agency for International Development's (USAID) Emerging Pandemic Threats (EPT) program portfolio.</p> <p>This grant will strengthen the private sector in early detection and quick response to epidemics. Such disease outbreaks affect workers, the community and the supply chain and thus infringes on productivity of labor.</p> <p>To achieve the objectives of Phase I, FUE will undertake the following activities:</p> <ol style="list-style-type: none"> 1 - Conduct a series of meetings with the FUE technical staff, UMA officials, RESPOND, the Uganda Red Cross, the Ministry of Health and other stakeholders. 2 - FUE will work with RESPOND to identify, organize and hold a management breakfast meeting with 20 Executive officers from FUE member companies. 3 - FUE will select at least 5 companies from the list obtained from the management breakfast meeting, all which will meet established criteria. 4 - With support from RESPOND, FUE will develop and print a series of promotional materials for Peer Educators to use. 5 - FUE will support RESPOND in developing a Uganda-specific comprehensive curriculum for the training workshops for the Peer Educators. This curriculum will consist of a Disease Outbreak Response Handbook for Peer Educators, an accompanying facilitator guide and a disease outbreak toolkit. 6 - RESPOND will work with FUE to organize a five-day training of the Master Trainers. This training will build and strengthen FUE's capacity to carry out trainings in disease surveillance and outbreak response. In turn, the Master Trainers will train the Peer Educators. 7 - FUE Master Trainers will train 20 Peer Educators from each selected company. 8 - During implementation, FUE will assist each Peer Educator team to

	<p>develop its own training plan. The company-based Peer Educators will be required to conduct at least one formal sensitization training in their company. One of the FUE Master Trainers will attend at least one Peer Education event.</p> <p>To achieve the objectives of Phase II, FUE will undertake the following activities:</p> <ol style="list-style-type: none">1 - FUE, with support from RESPOND, will update the training materials used by Master Trainers and Peer Educators in Phase I. These updates will be based on lessons learned from Phase I as well as any information learned about Ugandan outbreaks from Peer Educators and the community.2 - FUE will work with RESPOND to identify the locations and types of companies and organizations eligible for Phase II.3 - FUE will organize, schedule and hold meetings with 10 selected companies to solicit their participation in the program.4 - The FUE Master Trainers will conduct peer education training. An average of 20 Peer Educators from each of the 10 companies will be trained. Participants attending this training will include Peer Educators, community members such as the Village Health Teams or the Community Health Workers.5 - Given that the first Peer Educators will have received training six months earlier, FUE will conduct a one-day refresher training for the 100 Peer Educators trained in the first Phase.6 - FUE will carry out ongoing support supervision. These services provide opportunities for Peer Educators to express their thoughts and concerns about the program.7 - Conduct monitoring and evaluation continuously to determine whether or not activities are being performed on schedule, resources are being utilized efficiently and targets are being achieved.8 - To ensure sustainability, FUE will develop a detailed sustainability plan that will include both financial and marketing plans aimed at increasing self-sufficiency by involving other projects and programs in formulating resource mobilization strategies. <p>The companies to be trained will be selected based on pre-determined criteria: companies in extractive industries, companies in areas that have experienced disease outbreaks, companies interested in participating in outbreak response training and companies that are willing to commit to outbreak response training in the future.</p>
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Uganda Manufacturers Association (UMA) Grant Approval

Agreement Type:	Fixed Obligation Grant (FOG)
Program Description:	<p>The RESPOND project began in October 2009 with a mandate to strengthen training, educational programs, and support to governments, universities and civil society with the objective of improving the capacity to respond to zoonotic and emerging infectious disease outbreaks. This project is one of five in the United States Agency for International Development's (USAID) Emerging Pandemic Threats (EPT) program portfolio.</p> <p>This grant will strengthen the private sector in early detection and quick response to epidemics. Such disease outbreaks affect workers, the community and the supply chain and thus infringes on productivity of labor.</p> <p>To achieve the objectives of Phase I, UMA will undertake the following activities:</p> <ol style="list-style-type: none"> 1 - Conduct a series of meetings with the UMA technical staff, FUE officials, RESPOND, the Uganda Red Cross, the Ministry of Health and other stakeholders. 2 - UMA will work with RESPOND to identify, organize and hold a management breakfast meeting with 20 Executive officers from UMA member companies. 3 - UMA will select at least 5 companies from the list obtained from the management breakfast meeting, all which will meet established criteria. 4 - With support from RESPOND, UMA will develop and print a series of promotional materials for Peer Educators to use. 5 - UMA will support RESPOND in developing a Uganda-specific comprehensive curriculum for the training workshops for the Peer Educators. This curriculum will consist of a Disease Outbreak Response Handbook for Peer Educators, an accompanying facilitator guide and a disease outbreak toolkit. 6 - RESPOND will work with UMA to organize a five-day training of the Master Trainers. This training will build and strengthen UMA's capacity to carry out trainings in disease surveillance and outbreak response. In turn, the Master Trainers will train the Peer Educators. 7 - UMA Master Trainers will train 20 Peer Educators from each selected company. 8 - During implementation, UMA will assist each Peer Educator team to develop its own training plan. The company-based Peer Educators will be required to conduct at least one formal sensitization training in

	<p>their company. One of the UMA Master Trainers will attend at least one Peer Education event.</p> <p>To achieve the objectives of Phase II, UMA will undertake the following activities:</p> <ol style="list-style-type: none"> 1 - UMA, with support from RESPOND, will update the training materials used by Master Trainers and Peer Educators in Phase I. These updates will be based on lessons learned from Phase I as well as any information learned about Ugandan outbreaks from Peer Educators and the community. 2 - UMA will work with RESPOND to identify the locations and types of companies and organizations eligible for Phase II. 3 - UMA will organize, schedule and hold meetings with 10 selected companies to solicit their participation in the program. 4 - The UMA Master Trainers will conduct peer education training. An average of 20 Peer Educators from each of the 10 companies will be trained. Participants attending this training will include Peer Educators, community members such as the Village Health Teams or the Community Health Workers. 5 - Given that the first Peer Educators will have received training six months earlier, UMA will conduct a one-day refresher training for the 100 Peer Educators trained in the first Phase. 6 - UMA will carry out ongoing support supervision. These services provide opportunities for Peer Educators to express their thoughts and concerns about the program. 7 - Conduct monitoring and evaluation continuously to determine whether or not activities are being performed on schedule, resources are being utilized efficiently and targets are being achieved. 8 - To ensure sustainability, UMA will develop a detailed sustainability plan that will include both financial and marketing plans aimed at increasing self-sufficiency by involving other projects and programs in formulating resource mobilization strategies. <p>The companies to be trained will be selected based on pre-determined criteria: companies in extractive industries, companies in areas that have experienced disease outbreaks, companies interested in participating in outbreak response training and companies that are willing to commit to outbreak response training in the future.</p>
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Institute for Preventive Medicine and Public Health (IPMPH) Grant Approval

Agreement Type:	Limited Scope Grant Agreement (LSGA)
Program Description:	<p>The RESPOND project began in October 2009 with a mandate to strengthen training, educational programs, and support to governments, universities and civil society with the objective of improving the capacity to respond to zoonotic and emerging infectious disease outbreaks. This project is one of five in the United States Agency for International Development’s (USAID) Emerging Pandemic Threats (EPT) program portfolio.</p> <p>This project supports in-service training activities designed to enhance the capacity for early outbreak identification, notifiable disease reporting, disease surveillance, and diagnostics to promptly confirm the cause of outbreaks, and to facilitate rapid outbreak response. The objective of the project is to expand and strengthen delivery of in-service One Health training in order to build outbreak response capacity of provincial and district staff. The activities include training for both animal and human health professionals.</p> <p>This training project was designed to include: Training of Trainers; Applied Epidemiology Training & Field Assignments for Preventive Sector /MOH and</p> <p>MARD staff from the district and provincial levels; presentation of results; and experience sharing workshop.</p>
Description of Grant Objectives:	<ul style="list-style-type: none"> • To expand and strengthen delivery of in-service One Health training in order to build outbreak response capacity of provincial and district staff, • To build on initial WHO pilot FESC course, and expand such practical, applied epidemiology and outbreak and surveillance training to areas where this has not been performed previously, and • To broaden FESC-type training activities to include both animal and human health professionals. <p>These objectives will be accomplished by:</p> <ol style="list-style-type: none"> 1. Development and delivery of FESC-style short training courses and workshops 2. Enhancement of technical supervision and mentoring skills 3. Review and evaluation of existing in-service surveillance and outbreak training

The following grants were approved for extensions during Year 3 Quarter 2:

- 1- International Conservation and Education Fund (InCEF) - no cost extension on 01/03/2012;
- 2- University of Kinshasa (UNIKIN) - no cost extension on 01/03/2012;
- 3- African Field Epidemiology Network (AFENET) - no cost extension on 02/14/2012;
- 4- Institut Supérieur des Techniques Médicales (ISTM)- no cost extension on 03/01/2012;
- 5- University of Lubumbashi (UNILU) - no cost extension on 03/01/2012.

APPENDIX II: SUCCESS STORIES AND REGION HIGHLIGHTS

Emerging Pandemic Threats Program

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RESPOND

SUCCESS STORY: WEST CONGO

Cameroon Steps Forward as the First Country in Central and West Africa to Officially Support One Health

On March 2, 2012, representatives of the EPT Program and the U.S. Embassy joined the Cameroonian government to officially launch the National Program for Prevention and Control against Emerging and Re-emerging Zoonoses, aimed at making Cameroon a reference of success in the prevention and control of emerging and re-emerging zoonoses, employing the One Health approach, by 2035.

The Minister of Livestock, Fisheries and Animal Industries, the Minister of Environment and Protection of Nature, the Minister of Public Health and the Minister of Forests and Wildlife co-signed a document to make the cross-sector collaboration official.

Between 2004 and 2012, Cameroon has faced several emerging and re-emerging disease threats, such as anthrax, the H5N1 avian influenza and the pandemic H1N1 influenza viruses, tuberculosis, rabies, among others. Realizing the impact of a potential outbreak on public health, as well as the social and economic impact in the country's development, Cameroon's Prime Minister set up an ad hoc committee in 2008 to work on a national program that would address emerging and re-emerging zoonotic disease threats. The ad hoc committee, led by the Ministry of Livestock, Fisheries and Animal Industries, was an excellent opportunity to promote the One Health approach.



Front row, right to left: RESPOND West Congo Regional Director, FAO representative, Wildlife and Protect Areas director, Ministry of Public Health General Secretariat, USA Embassy Deputy Chief of Mission, the Minister of Environment and Protection of Nature, the Minister of Livestock, Fisheries and Animal Industries, the vice-chancellor of University of Montagne, the vice-chancellor of University of Ngaoundere.

"The newly created program clearly demonstrates collaboration across human health, animal health, and wildlife professionals to minimize the risk of disease emergence and the spread of new pandemic threats"

Lisa Peterson, Deputy Chief of Mission, USA Embassy

The process engaged the government in an effort to integrate several ministries towards a single initiative and to overcome leadership conflict that prevented collaboration between often resource-competing sectors (human health, animal health, and environment). Universities, laboratories, INGOs and NGOs also took part to the process.

After USAID's Emerging Pandemic Threats Program (EPT) was launched in April 2011 in Cameroon, RESPOND supported a challenging consensus building process, taking advantage of this strong political willingness from high-level decision makers. RESPOND sponsored two national experts to assist the ad hoc

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committee in developing the national program, and other EPT partners were also actively engaged and contributed to this initiative (PREDICT, represented by the Global Viral Forecasting Initiative (GVFI), and IDENTIFY represented by WHO and FAO). This collaboration allowed the integration of EPT's objectives in the national program. Most 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 Ministry of Livestock, Fisheries and Animal Industries already allocated a budget for the 2012 fiscal year to support the National Program. Political will is crucial to support and move forward national initiatives such as this, and the government of Cameroon seems to be engaged and ready to change practice and improve its national health institutions.

RESPOND

SUCCESS STORY: WEST CONGO

First Risk Analysis In-Service Training Course in the Democratic Republic of Congo is a Success

In March 2012, the RESPOND project facilitated the first ‘risk analysis’ in-service training course in the Democratic Republic of the Congo. Bringing together professionals from the Ministry of Agriculture, Ministry of Public Health, Ministry of Environment, Conservation of Nature and Tourism and the Ministry of Higher Education, the weeklong course exemplified the One Health approach through experiential learning and applied problem solving. Developed and led by faculty from Tufts University and the University of Minnesota, along with RESPOND colleagues from the West Congo Regional Office, the course targeted specific topics in risk analysis including; hazard identification, development of conceptual models, release assessment, exposure assessment, consequence assessment, risk management and risk communication.

Core concepts of risk analysis were introduced through three case studies covering *Bovine Tuberculosis*, *Ebola Virus in Bushmeat* and *Rift Valley Fever in Goats*, highlighting and overlapping approaches used for a hazard (*Mycobacterium Bovis*), a commodity (bushmeat) and an animal population (goats). Using these examples as a starting point, course participants worked together with colleagues from other professions to frame an appropriate risk analysis question, develop a conceptual model, conduct exposure/release and consequence assessments, and analyze and report on the associated risks. Risk communication methodologies and tools were emphasized and exercised throughout the course, to highlight the importance and interconnection of risk communication, risk assessment and risk management in the risk analysis paradigm.

To develop risk analysis frameworks and conceptual models, participants traveled to the public abattoir and livestock market in Kinshasa to conduct informational interviews and observe the environmental and working conditions present. The field exercise was used to reinforce methods of identifying information sources and data collection, then applying it towards a risk analysis.

The individuals who participated in the course expressed utmost appreciation and great interest in utilizing the skills in their roles as health professionals. Developing a cadre of in-service professionals with needed skill sets in risk analysis is a good example of how RESPOND is building outbreak response capacity in the Democratic Republic of Congo.



(1) Lead instructor, Dr. Christine Rioux (Tufts University). (2) Participants drafting a conceptual model. (3) Participants working on hazard identification.



(1) Interviews with saleswomen at the abattoir. (2) Example DR Congo animal transport permit. (3) Heifer in cattle yard.



(1) Donning protective gear to prevent risk of disease transmission. (2) Juxtaposing footwear at the abattoir. (3) Inspected and certified product leaves the abattoir (side of beef with inspection stamp).



(1) Abattoir client transports product to her butcher shop. (2) Viewing waste disposal from the abattoir. (3) Children swimming (ferry boats just downstream)



(1) Newborn goat kid and ewe at Kinshasa livestock market. (2) Interviewing goat salesmen at livestock market. (3) Data collection.



Group photo on a hot day outside the Kinshasa public abattoir.

Special thanks to: Dr. Christine Rioux (Lead Instructor – Tufts University), Dr. Serge Nzietchueng (Regional Technical Advisor – Kinshasa Regional Office), Dr. Mac Farnham (Technical Liaison – University of Minnesota), Dr. Hellen Amuguni (Technical Liaison – Tufts University), Dr. Wendy Ravano (Training Lead - Kinshasa Regional Office), Thérèse Kayembe (Training Officer - Kinshasa Regional Office), Dr. Prosper Kabambi (Chief of Animal Protection – Department of Livestock Production and Animal Health, DR Congo Ministry of Agriculture), Augustin Ndombe Kawish (Certified Interpreter – Excellence).

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RESPOND

REGION HIGHLIGHT: WEST CONGO

University of Kinshasa (UNIKIN) – Building Capacity to Respond to Disease Outbreaks



How do you communicate during a disease outbreak, when uncertainty and fear about perceived risk are the foremost concern in the minds of your target audience? What do you do to begin framing questions about a disease hazard, to provide policy and decision makers with the scientific basis for informed decision-making? Where do you find information and data sources to conduct a risk analysis? How do you communicate complex technical information to a non-technical audience? Who is your target audience for communicating information about disease risks? Why is

risk analysis important in a world with so many complex and challenging health issues, like HIV/AIDS, Tuberculosis, famine, and foot-and-mouth disease?

These are some of the questions that were addressed as part of a five-day short course, 'Applied Methods for Epidemic and Zoonotic Disease Investigation and Response'. The course was organized by the School of Veterinary Medicine and hosted by the School of Public Health, University of Kinshasa, showing strong collaboration between the two schools to move their joint capacity-building forward. Lectures in Risk Analysis, Risk Communication, Participatory Epidemiology, Applied Problem Solving and other topics were provided by faculty members from Tufts University and the University of Minnesota (UMN), sponsored by RESPOND, part of USAID's Emerging Pandemic Threats Program.

For the past two years, RESPOND has been working to establish a network of schools of public health and veterinary medicine in Central and Eastern Africa (OHCEA), through which university partners (Tufts and UMN) deliver technical programs to address and build capacity at



the university institutional level, demonstrating successful models to bridge universities to government ministries, and linking different health disciplines together to address complex health challenges using a One Health approach.

Junior faculty from UNIKIN Schools of Public Health and Veterinary Medicine were targeted for this particular course to introduce course content and delivery methods, practice and develop skills through applied learning, establish relationships across UNIKIN schools and develop partnerships with faculty from the University of Minnesota and Tufts University. In plenary sessions and small group activities, the faculty members developed their skills in hazard identification, how to use a conceptual model to conduct release, exposure and consequence assessments, methodologies to communicate appropriate information about risk during a disease outbreak, and how to develop key messages around a disease or issue. Applying these skills, and passing them on to their students through practice and in collaboration across disciplines, is one approach RESPOND is taking build sustainable capacity in disease outbreak response through support for the OHCEA network.



Developing future health professionals with needed skill sets, like risk analysis and risk communication, provides another great example of how RESPOND is building sustainable outbreak response capacity in the DR Congo. RESPOND's university partners, Tufts University and University of Minnesota, are proud to be providing technical excellence and partnership with the OHCEA network.

Captions:

Page 1, top: training group at UNIKIN with facilitators from Tufts University and University of Minnesota; bottom right: UNIKIN junior faculty and Tufts University Dr. Hellen Amuguni watch one of the plenary sessions.

Page 2: Dr. Hellen Amuguni of Tufts University.

Special thanks to: Dr. Diafuka Saila-Ngita (Regional Technical Advisor – Kinshasa Regional Office), Dr. Christine Rioux (Assistant Professor – Tufts University), Dr. Mac Farnham (Technical Liaison – University of Minnesota), Dr. Hellen Amuguni (Technical Liaison – Tufts University), Dr. Serge Nzietchueng (Regional Technical Advisor – Kinshasa Regional Office), Augustin Ndombe Kawish (Certified Interpreter – Excellence)

RESPOND

SUCCESS STORY: EAST CONGO

OHCEA (One Health Central and Eastern Africa) sensitizations attract hundreds of students and faculty interested in One Health.



1 - Jimma University president, Dr. Fikre Lemessa, addresses faculty at a One Health sensitization meeting; 2-Front gate of campus housing College of Public Health and Medical Sciences, Jimma University;

The first three months of 2012 have been exciting ones for RESPOND and OHCEA. Through student and faculty One Health sensitizations, lead by RESPOND U.S. university partners (University of Minnesota and Tufts University), hundreds of students and faculty participated in One Health activities, sharing ideas and models.

There were a number of common goals that emerged from all of the meetings:

- The importance of communications and information sharing;
- Faculty and student exchanges;
- Methodologies to develop trans-disciplinary collaboration;
- Sharing of ‘best practices’;
- Expanding partnership opportunities between OHCEA member institutions and their U.S.-based RESPOND counterparts.

Five out of the six OHCEA countries were involved in the sensitizations. Below is an example of the activities carried out in Ethiopia:

Jimma University and Mekelle University (Ethiopia): The critical need for additional PhD graduates and programs, research partnership opportunities, and short courses for skills development for faculty and students, were the top three areas highlighted during in a trans-disciplinary discussion at Jimma University.

An overview of One Health approaches to address Emerging Pandemic Threats, the RESPOND project, examples from the University of Minnesota and Tufts University on different One Health approaches and activities, OHCEA's development and activities in Ethiopia, were all covered as part of the sensitization meetings.

At Mekelle University, plenary discussions identified key goals and activities. E-learning, communications/information sharing, faculty and student exchanges, opportunities for trans-disciplinary collaboration, and partnership with other Ethiopian universities, were highlighted examples.

A number of opportunities were identified during the sensitizations for immediate engagement:

- formation of a zoonotic disease working groups in each of the OHCEA member universities;
- formation of field sites for multidisciplinary collaboration and partnerships (particularly DRC and Tanzania);
- development of private sector One Health training materials;
- development and establishment of an African “engaging intergovernmental organizations course” in collaboration with AU-IBAR and local agencies;
- development of health policy-related courses (local/national /international level);
- expansion of wildlife veterinary skills training.

Other universities and schools visited during the sensitizations were:

- **University of Nairobi College of Health Sciences (Kenya)**
- **Moi University (Kenya)**
- **University of Lubumbashi (Democratic Republic of Congo)**
- **Umatara Polytechnic University (Rwanda)**
- **Makerere University (Uganda)**

More photos of the One Health sensitizations in the six OHCEA countries can be found at:

<http://www.facebook.com/media/set/?set=a.441458792538048.129716.120761677941096&type=1#!/photo.php?fbid=441458889204705&set=a.441458792538048.129716.120761677941096&type=3&theater>.

RESPOND

SUCCESS STORY: EAST CONGO

RESPOND helps restore a national key capacity: Uganda Virus Research Institute, Uganda



Antibodies. Antigen. Buffers. Conjugate. Optical density ratios. Cell lines. Viral isolates. In the vernacular of laboratorians, diagnostic testing capacity can be boiled down to just one word, “reagents”. Either you have them, have a way to access them, or you don’t.

In early 2011, after battling an unknown deadly “strange disease” outbreak affecting several districts in Northern Uganda for more than six weeks, a Yellow Fever Virus diagnosis from the U.S. Centers for Disease Control and Prevention (CDC) marked an important milestone. Once one of the global leaders in the fight to control and eliminate this disease, Uganda no longer had the capacity to detect and confirm Yellow Fever Virus from suspect cases. The reasons were many including years of strife, the emergence of HIV / AIDS pandemic, and a major shift to molecular diagnostic techniques – but the fact remained, the ability to detect, confirm and respond to a Yellow Fever epidemic was lost.

To address this critical gap, RESPOND collaborated with the Uganda Virus Research Institute (UVRI) and CDC to send a laboratorian to the CDC’s arboviral diagnostics training course in Fort Collins, Colorado, in March 2011. Now, in 2012, RESPOND visited that laboratorian, John Kayiwa – head of UVRI’s arboviral lab (photos), for an update on Uganda’s Yellow Fever diagnostic capacity.

Sitting down with John and his division director, Dr. Julius Lutwama, they both expressed gratitude that UVRI is now able to do diagnostic tests for both Yellow Fever and Dengue Fever (another arbovirus that recently affected Ugandan troops stationed in Somalia). Over the past year, John and his team have established standardized operating procedures (SOPs) for detecting virus antibodies (markers of an individual’s immune system response to a viral exposure and/or infection) as well as the viral agents themselves.





Prior to the Fort Collins training course, UVRI was only able to detect a single type of antibodies to the Yellow Fever Virus, but unable to confirm a diagnosis. Both John and Dr. Lutwama anticipate developing Standard Operation Procedures (SOPs) for about 15-20 different viral pathogens including Rift Valley Fever, West Nile Virus, Chikungunya Virus, and Semliki Forest Virus. This is where the “reagents” come in to play.

Touring the arboviral lab, John explains that UVRI is receiving on average three suspect samples to test for Yellow Fever each week, most coming from sick people in the same area affected by the 2010 outbreak. He says the suspect samples are first tested for Ebola Virus and Marburg Virus as these are of greater concern to both national and global health authorities, and are biosecurity level 4 (or “hot”) pathogens. They also run another 10 samples per week coming from patients suspected to have Hepatitis E, a disease with a clinical presentation similar to Yellow Fever thought to be endemic in the same area where the 2010 outbreak occurred.

Taking a short break from the tour to assist a post-doctoral student with her real-time PCR assay for Malaria, John shows off some of his mentoring skills. He quickly gets the assay back on track, explaining with ease and familiarity the challenge that was holding it up. Since the Fort Collins course last year, he has trained a technician in his lab, and another UVRI colleague trained in Dakar, Senegal, bringing Uganda’s national human resource capacity for arboviral diagnostics to three people.

When John returned from the arboviral diagnostic training course, he came with positive and negative controls for Yellow Fever Virus (“Yellow Fever” Suckling Mouse Brain Antigen [SMBA], and “Normal” SMBA). Prior to this, these reagents were not available in Uganda, and a big part of John’s job is to maintain stocks of these reagents, as well as the collaborative relationships with the other laboratories that source them. Reagents for Dengue Fever diagnostics were made available through a collaborative relationship with a CDC’s Dengue laboratory in Puerto Rico.



Increasing global awareness of the interconnection and interdependence between infectious diseases, human beings, domestic animals, wild animals and the environment makes for fierce competition between laboratories for resources and reagents to diagnose diseases. Often inter-laboratory collaborations have to add value for both collaborating parties to remain viable. The arboviral lab at UVRI is optimistic that the re-established capacity to maintain reagent stocks, and develop their own, will provide that benefit, strengthening collaborative opportunities with other labs.

Together with the Ugandan government, UVRI, World Health Organization and CDC, RESPOND has provided demonstrable, measurable results in 2012 through re-establishing a critical diagnostic capacity for the country of Uganda.

Emerging Pandemic Threats Program

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RESPOND

REGION HIGHLIGHT: EAST CONGO

Masters of Veterinary Preventive Medicine students acquire practical skills



RESPOND-supported students collecting blood samples from goats at Buyana stock farm as part of their field training.

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RESPOND, in partnership with the African Field Epidemiology Network (AFENET) is implementing a “Field Epidemiology” graduate program at Makerere University’s College of Veterinary Medicine, Animal Resources and Biosecurity (COVAB). Five former district veterinary officers are supported by RESPOND to pursue a Masters of Veterinary Preventive Medicine (MVPM).

From February 6 to 10, 2012, the five RESPOND-supported trainees at COVAB participated in a weeklong field attachment exercise as part of their training. The theme of the field attachment was “*Herd Health Medicine and Control and Eradication of Zoonoses*”. The training was held at the COVAB Buyana Stock Farm in the Gomba district in Uganda. The objectives of this field training were to:

- 1) provide the trainees with opportunities for hands-on experiences in managing zoonoses in areas with large farms;
- 2) identify control measures for preventing spread of animal diseases from surrounding farms and herds to other species including humans;
- 3) conduct risk and environmental assessment for animal disease spread; and
- 4) participate in specimen collection for the purpose of field rapid diagnosis of suspected zoonoses.

During the visit, the students visited farms and households with livestock near the stock farm and conducted key informant interviews and environmental assessments of farms and villages.

They also reviewed farm records, collected specimens and carried out field-based specimen analysis on blood samples using rapid diagnostic tests for zoonoses, such as brucellosis.

Emerging Pandemic Threats Program

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RESPOND

REGION HIGHLIGHT: EAST CONGO

FOURTH OHCEA DEANS' SUMMIT

FEBRUARY 27 – 28, 2012

NAIROBI, KENYA



Deans, or their representative, in attendance:

- Assoc. Prof. William Bazeyo, Chair, Makerere School of Public Health
- Prof. John David Kabasa, Co-Chair, College of Veterinary Medicine, Animal Resources and Bio-security
- Prof. Kayembe Kalambayi Patrick, Kinshasa University School of Public Health
- Prof. Mahangaiko Muyumba, Lubumbashi School of Veterinary Medicine
- Dr. Yigeremu Mulugeta Tefera, Jimma School of Veterinary Medicine
- Dr. Gebrehiwot Tadesse, Mekelle School of Veterinary Medicine
- Dr. Grace Adisa Etyyang, Moi University School of Public Health
- Prof. Charles Mulei, University of Nairobi Faculty of Veterinary Medicine
- Dr. Dismas Ongore Oluoch, University of Nairobi School of Public Health
- Dr. Jeanine Umutesi Condo, National University Of Rwanda School of Public Health
- Dr. Kagarama Juvenal, Umutara Polytechnic Faculty of Veterinary Medicine
- Dr. Gideon Paul Kwesigabo, Muhimbili University of Health and Allied Sciences
- Prof. Wambura Philemon Nyangi, Sokoine University of Agriculture
- Dr. Trevor Ames, University of Minnesota College of Veterinary Medicine

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

The deans of OHCEA (One Health Central and Eastern Africa) network convened at the Safari Park Hotel in Nairobi for the 4th Deans' Summit on February 27 and 28, 2012. In attendance were deans, or a designated representative, for thirteen of the fourteen OHCEA network members.

Dr. Trevor Ames, Dean of University of Minnesota College of Veterinary Medicine attended the event representing both University of Minnesota and Tufts University, the two U.S. university partners of OHCEA. Please find a list of deans in attendance to the left.

Agenda items for the two-day meeting included the review of the OHCEA Workplan (for January – September, 2012), a review of the 2012 – 2013 workplan framework, and engagement of strategic partners for financial planning and support outside the RESPOND project. Operational agenda items, but of similar importance, included a review of OHCEA's draft operations manual, defining roles and responsibilities and reporting structures within institutions (focal persons and deans) and within OHCEA as a whole. OHCEA's Secretariat also presented the Memorandum and Articles of Association to each of the institutions.

Overall, the meeting was successful and productive. The Fifth Deans' Summit is tentatively planned for July 2012, and will be held in Addis Ababa, Ethiopia.

RESPOND

SUCCESS STORY: SOUTHEAST ASIA

Joint One Health training in applied epidemiology and field investigation fosters Thailand's intersectoral partnerships

Despite Thailand's success in the country's responses to the Highly Pathogenic Avian Influenza (HPAI) and H1N1 influenza pandemics in 2004 and 2010, the resulting health impact and economic loss made Thailand see the need to strengthen its preparedness and response plans for emerging infectious diseases (EIDs). In 2011, Thailand began the process of drafting a new 5-year National Strategic Plan for Emerging Zoonotic Diseases (EZD) preparedness, prevention and control (starting in 2012). The Plan went through a public hearing exercise for comments and suggestions in March, 2012. The key emphasis of this new Strategic Plan is the interdisciplinary and multisectoral collaboration using One Health approaches.

During Thailand's response to HPAI/H1N1, teamwork was strengthened between animal and human health professionals. Building on the country's success, RESPOND has been working with the Field Epidemiologists Association of Thailand (FEAT) to conduct multi-sectoral training in applied epidemiology and field investigation. The goal is to enhance and expand collaboration between the human health and livestock health sectors, and to include professionals in wildlife to work as a cohesive group using One Health approaches. The implementing partner, FEAT, has been strategically involved in shaping policy and coordinating technical, management, and stakeholder support from the national level, down to the provincial levels of the relevant departments using multi-disciplinary One Health models.



Dr. Karn Lekakul facilitated a group discussion on risk of zoonotic diseases at Bangkok, Dusit Zoo during field case study exercise.

"These One Health workshops brought together health professionals, livestock and wildlife sectors from five provinces to not only share and learn, but to work together in training future One Health epidemiologists. I truly believe that this hands-on process of learning will lead to continued cooperation among sectors in the spirit of One Health."

Dr. Karn Lekagul, DVM, Dusit Zoo, Bangkok



Dr. Sapon Iamsirithaworn (FEAT) led discussions with national and provincial mentors who will support field investigation conducted by multi-disciplinary teams.

PARTNERS:

- Field Epidemiologists Association of Thailand (FEAT)
- Field Epidemiology Training Program (FETP), Ministry of Public Health, Thailand
- FETP-V, Department of Livestock Development (DLD), Ministry of Agriculture
- Department of Livestock Development (DLD) and Zoological Park Organization (ZPO), Ministry of Agriculture and Cooperative
- Department of Natural Parks, Wildlife and Plant Conservation (DNP), Ministry of Natural Resources and Environment
- USAID RESPOND, US-CDC, WHO, OIE, FAO.

During February and March, 2012, two workshops were held for supervisors/mentors, and field staff. Participants included 78 physicians, nurses, public health staff, veterinarians, wildlife experts and university lecturers from 5 provinces, as well as key personnel at the national level from Bangkok. The training topics included an overview of multi-sectoral collaboration using One Health models, human health surveillance, animal health surveillance, emergency preparedness, and sessions on working across disciplines through case studies and field exercises to address emerging infectious/zoonotic diseases. At the end of the second workshop, each provincial team comprised of mentors and field investigators from three sectors (Ministry of Public Health, DLD/Ministry of Agriculture, and the Department of National Parks), selected one or two diseases of concern to focus on, based on the province's ten priority zoonotic diseases. The teams offered justification of their choices and developed objectives, investigation plans and budgets for each activity. The diseases/pathogens selected for joint field investigations were: West Nile Virus, Q Fever, Tuberculosis, Melioidosis, and Brucellosis.

Following the initial workshops, meetings will be held in five provinces to educate and obtain support from supervisors and relevant stakeholders to carry out the project activities. During fieldwork and investigation, the five teams will receive support and supervision from mentors, senior staff in the provinces, FEAT national level team, CDC, FAO and RESPOND. To facilitate and share information among teams, and to disseminate relevant information on EIDs in Thailand, a Facebook page was created: Thai OneHealth (<https://www.facebook.com/profile.php?id=100003479131759>).

It is expected that the field project will be completed in August, 2012, and the final workshop for presentations of project findings and results is scheduled to take place in September 2012.

APPENDIX III: PUBLICATIONS AND ABSTRACTS

The One Health Vision: From Institutional Support to Local Practice

Friday, February 17, 2012: 1:30 PM-4:30 PM

Room 116-117 (VCC West Building)

One Health has emerged as a multidisciplinary effort to attain optimal health of humans, animals, and our environment. Emerging zoonotic diseases, food- and water-borne diseases, and environmental change pose increasing threats to health on a global basis. The One Health vision is being embraced institutionally while being practiced locally.

Participants will focus on implementing One Health principles through both public health policy support and concrete actions at the human-animal-environment interface.

This session will provide updates on the status of large international initiatives related to One Health, ongoing policy-related working groups based on interdisciplinary international collaborations, and specific presentations that describe One Health being practiced at the local level, including efforts in developing countries.

Organizer:

Barbara Hyde, American Society for Microbiology

Moderator:

Stanley Maloy, San Diego State University

Discussant:

Ronald Atlas, University of Louisville

Speakers:

Carol Rubin, Centers for Disease Control and Prevention

[Operationalizing One Health: A Policy Perspective](#)

Dominic Travis, University of Minnesota College of Veterinary Medicine

[Implementing One Health in Africa](#)

Esther Schelling, Swiss Tropical and Public Health Institute

[Enhancing Joint Delivery of Human and Animal Health Services in Remote Areas](#)

Parntep Ratanakorn, Mahidol University

[One Health Initiative in South East Asia](#)

Roland Suluku, Njala University

[Animal Health Clubs in Sierra Leone](#)

Mark Raizenne, Centre for Food-borne, Environmental and Zoonotic Infectious Diseases (CFEZID)

[One Health: A Canadian Public Health Perspective](#)

Implementing One Health in Africa

Friday, February 17, 2012: 2:00 PM

Room 116-117 (VCC West Building)

Dominic Travis, University of Minnesota College of Veterinary Medicine, St. Paul, MN

This presentation discusses the implementation and accomplishments of the One Health Central and East Africa Network (OHCEA), which has convened deans of 14 medical and veterinary schools from 6 African countries to set up a network integrating approaches to animal and human health. This project is an activity of RESPOND, part of the USAID Emerging Pandemic Threats program.

One Health Initiative in South East Asia

Friday, February 17, 2012: 3:00 PM

Room 116-117 (VCC West Building)

Parntep Ratanakorn, Mahidol University, Salaya, Thailand

South East Asia is a hot spot for zoonotic infectious diseases as well as biodiversity which could further impact global health in the near future. One Health is a tool to address these issues. The initiative is being implemented in the region by capacity building through academic institutions and universities. Health alliance faculties have been convened for development of collaborative teaching and research as well as integrating a One Health perspective into our work. The USAID Emerging Pandemic Threats program supports this activity through RESPOND.

APPENDIX IV: ONLINE COMMUNICATIONS AND PRESS COVERAGE

Facebook - <http://www.facebook.com/EPTRESPOND>

- [**RESPOND/AFENET/COVAB Meeting - February 2012**](#) (11 photos)
USAID RESPOND facilitates stakeholders meeting to discuss Masters in Preventative Veterinary Medicine program
- [**Project Director Visit to ECB Office - February 2012**](#) (5 photos)
USAID's Rob Henry and the new RESPOND Project Director Rob Ryan-Silva visit the East Congo Basin Office in February, 2012. Activities will include discussions with RESPOND partners in the region and the Deans' Meeting in Kenya.
- USAID RESPOND Monitoring and Evaluation officers meet in Bangkok to review past activities, and plan for future events.
<http://www.flickr.com/photos/respond-ept/sets/72157629345889097/with/6887140699/>
- [**Outbreak Assessment - January and February 2012**](#) (11 photos)
USAID RESPOND Monitoring and Evaluation team evaluates RESPOND's support to the 2010 Anthrax outbreaks in Uganda.
- [**Biodefense Lecture at RESPOND ECB Office**](#) (32 photos)
Makerere University veterinary Master students attend lecture offered by Dr. Hellen Amuguni of Tufts University.
- RESPOND West Congo completed on January 25 the validation of the One Health - MISRZ référentiels on competencies, on training per academic year and type of educational institution and on evaluation.
- Read about the latest regional OHCEA Country Coordinating Committee.
<http://respond-ept.com.s79942.gridserver.com/2012/01/testing/>
- [**Emerging Pandemic Threats \(EPT\) Meeting**](#) (12 photos)
EPT partners meet at the RESPOND ECB Regional Office on January 25, 2012
- [**Masters Vet Epi Program Joint Planning Session**](#) (19 photos)
AFENET, RESPOND, Makerere University College of Veterinary Medicine, Animal Resources and Biosecurity (COVAB)

- [Writing and Reporting Skills Training - AFENET students](#) (13 photos)
Practical training on how to write reports to different audiences.
- [Communications Training 2012](#) (29 photos)
Training for RESPOND Partners - UMA, FUE, AFENET and OHCEA
- DRC Minister of Higher Education formalizes One Health Country Coordinating Committee (CCC) to ensure its legitimacy at a USAID RESPOND funded meeting. (in French)<http://fr.allafrica.com/stories/201111211866.html>

Twitter - @RESPOND_EPT - https://twitter.com/#!/RESPOND_EPT

- USAID RESPOND Supports One Health sensitization for faculty and students at in Northern Rwanda, March, 2012. <http://www.umutarapolytech.ac.rw/workshop.html>
- Makerere University College of Health Sciences Get Exposure to One Health Concept. <http://chs.mak.ac.ug/content/college-health-sciences-students-get-exposure-one-health-concept>
- USAID RESPOND supports One Health sensitization at Makerere University during March, 2012. http://covab.mak.ac.ug/index.php?option=com_content&view=article&id=72:usaids-in-promoting-one-health&catid=16
- DAI's Health Sector Director Jerry Martin and RESPOND's Project Director Rob Ryan-Silva visit Univ. of Kinshasa. <http://twitpic.com/90brks>
[View photo](#)
- RESPOND WCB Serge Nzietchueng recommendation of a good read: Colonialism in Africa and the launch of the HIV epidemic. http://www.washingtonpost.com/national/health-science/colonialism-in-africa-helped-launch-the-hiv-epidemic-a-century-ago/2012/02/21/gIQAyJ9aeR_story.html
- WCB regional office discussing key messages at the Communications training on March 20, 2012. <http://twitpic.com/8z9biw>
[View photo](#)
- USAID RESPOND supports One Health sensitization at Jimma University, Ethiopia. <http://www.ju.edu.et/node/295>

- USAID RESPOND facilitates stakeholders meeting to discuss Masters program in Preventative Veterinary Medicine: <http://www.facebook.com/media/set/?set=a.396412790375982.119813.120761677941096&type=1>
- USAID's Rob Henry and the new RESPOND Director Rob Ryan-Silva visit East Congo Basin Regional Office: <http://www.facebook.com/media/set/?set=a.395715063779088.119616.12076167941096&type=3&saved#!/media/set/?set=a.395715063779088.119616.120761677941096&type=1>
- USAID RESPOND Monitoring and Evaluation team assesses RESPOND's support to the 2010 Anthrax outbreak in Uganda: <http://www.facebook.com/media/set/?set=a.385071741510087.117654.120761677941096&type=1>
- Emerging Pandemic Threats (EPT) meeting held at the RESPOND ECB office on January 25, 2012. <http://twitpic.com/8c6d8t>
[View photo](#)
- The National Link Coalition: Multi-disciplinary Human-Animal Partnerships to Prevent Family and Community Violence <http://www.onehealthinitiative.com/publications/One%20Health%20-%20description%20of%20NLC2.pdf>
- DRC Minister of Higher Education supports One Health through university network OHCEA. <http://fr.allafrica.com/stories/201111211866.html> (French)

Press Releases



Emerging Pandemic Threats Program
PREDICT RESPOND PREVENT IDENTIFY



Pour diffusion immédiate

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Validation du Programme National de Prévention et de Lutte contre les Zoonoses Emergentes et Ré-Emergentes au Cameroun

Yaoundé, Cameroon, 02 Mars 2012 - Entre 2004 et 2012, le Cameroun a fait face à plusieurs menaces de maladies émergentes ou ré-émergentes tels que l'anthrax, la grippe aviaire hautement pathogène H5N1, la grippe pandémique A H1N1, la rage, la tuberculose etc. Ayant mesuré l'ampleur des conséquences que pourraient avoir ces maladies dans le domaine de la santé publique, sur la sécurité alimentaire, sur les aspects socio-économiques, le Premier Ministre, Chef du gouvernement a mis en place un Comité Ad Hoc¹ chargé de l'élaboration du *programme national de contrôle et de lutte contre les zoonoses émergentes et ré-émergentes au Cameroun* par arrêté N°070/PM le 28 avril 2008. Le présent programme est le résultat d'un processus participatif et consensuel qui a vu la participation d'un certain nombre de parties prenantes, avec l'appui technique et financier du Gouvernement Américain à travers l'Agence

¹ Ministère de l'Élevage, des Pêches et Industries Animales, Ministère des Forêts et de la Faune, Ministère de l'Environnement et de la Protection de la Nature, Ministère de la Santé Publique, Ministère de la Recherche Scientifique, Ministère des Finances, Ministère du Tourisme, Ministère de l'Économie, de la Planification, et de l'Aménagement du Territoire, Ministère de l'Agriculture et du Développement Rural, le Représentant de l'Ordre National des Vétérinaires, le Représentant du syndicat des Guide des Chasses, des ONGs de la protection de la faune et partenaires du Ministère des Forêts et de la Faune sauvage.



Emerging Pandemic Threats Program

PREDICT RESPOND PREVENT IDENTIFY



Américaine pour le Développement International (USAID). La vision de ce programme est de faire du Cameroun à l'horizon 2035 une référence en matière de prévention et de lutte contre les zoonoses Emergentes et Ré-Emergentes dans une approche Une Santé.

La validation de ce programme aura lieu le 2 Mars 2012 à l'Hôtel Djeuga Palace, Yaoundé. Cette cérémonie sera présidée par Son Excellence Monsieur le Ministre de l'Elevage, de la Pêche et des Industries Animales, en présence du Chef de Mission Adjoint de l'Ambassade des Etats-Unis au Cameroun et de personnalités de haut rang de différents secteurs du gouvernement.

Votre organe de presse est cordialement invité à couvrir cet important événement et à lui assurer un large écho auprès du public.

Renseignements

Sous l'approche « **Une Monde, Une Santé** » on est reconnaissant que l'intégration de l'épidémiologie animale, de la santé humaine, et de l'environnement est essentielle et qu'il faut la coordination entre eux afin de réaliser les réponses plus rapides et efficaces.

La mise en œuvre de l'approche « **Une Monde, Une Santé** » nécessite un cadre de collaboration multidisciplinaire et multisectoriel en vue du renforcement de capacités régionales, nationales et locales dans la détection précoce des maladies, prévention, et la lutte contre les zoonoses.

Le Projet RESPOND fait partie des composantes du programme EPT, dont le but est de développer les systèmes, les pratiques et les procédures pérennes pour améliorer la capacité de riposte aux maladies zoonotiques, et de promouvoir l'approche « Une Santé » entre les professionnels de la santé publique animale, humaine, et environnementale.

RESPOND s'engage avec les autres programs de EPT: PREDICT, PREVENT, et IDENTIFY pour la détection précoce des maladies, leur diagnostic en laboratoire, la réponse rapide aux maladies et leur éradication, et la réduction des risques en promouvant l'approche « Une Santé. »

RESPOND s'engage simultanément avec une large gamme des agences internationales, y compris Centres pour le contrôle et la prévention des maladies (CDC), L'Organisation des Nations Unies pour l'agriculture et l'alimentation (FAO), Organisation mondiale de la Santé Animale (OIE), et Organisation mondiale de la Santé (WHO).

DAI mène ce projet avec nos partenaires, Université de Tufts, Université de Minnesota, Training Resources Group, et Écologie et Environnement, afin de renforcer et développer les systèmes, pratiques et procédures pérennes pour améliorer les capacités de riposte aux maladies zoonotiques.

Pour ample information, veuillez visitez le site Web <http://respond-ept.com>.

Press Coverage (including EPT):

- **Preparing for animal disease emergencies ‘by the book’**
http://www.fao.org/ag/againfo/programmes/en/empres/news_120112.html

- **FAO Monitors Pigs, Poultry and Waterfowl in Hot Spots for Influenza**

Disease surveillance is supported by USAID’s Emerging Pandemic Threats programme

http://www.fao.org/avianflu/en/news/ept_plus.html

APPENDIX V – OTHER MATERIALS

- 1- **REPORT - The MUSK Implementation at Makerere University: An Evaluation (Attached report);**