

2019 | Facilitator Guide

## Collaboration and Partnership in One Health



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WORKFORCE



**UNIVERSITY OF MINNESOTA**

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## Preface

This module is One of the 16 One Health Training Modules developed by the One Health Central and Eastern Africa Network (OHCEA). OHCEA is an international network, currently of 24 institutions of higher education in public health, veterinary sciences, pathobiology, global health and environmental sciences. These are located in 16 universities in 8 countries in Eastern, Central and Western Africa regions.

The universities currently forming OHCEA are: Universite des Montagnes and University of Buea (Cameroon), University of Lubumbashi and University of Kinshasa (DRC), Jimma University, Addis Ababa University and Mekelle University (Ethiopia), Moi University and University of Nairobi (Kenya), Université Cheikh Anta Diop (Senegal), Muhimbili University of Health and Allied Sciences and Sokoine University of Agriculture (Tanzania), University of Rwanda and University of Global Health Equity (Rwanda), Makerere University and Mbarara University of Science and Technology (Uganda).

The OHCEA network's vision is to be a global leader in One Health, promoting sustainable health for prosperous communities, productive animals and balanced ecosystems. OHCEA seeks to build capacity and expand the human resource base needed to prevent, detect and respond to potential pandemic disease outbreaks, and increase integration of animal, wildlife and human disease surveillance and outbreak response systems.

The overall goal of this collaboration is to enhance One Health policy formation and implementation, in order to contribute to improved capacity of public health in the region. OHCEA is identifying opportunities for faculty and student development as well as in-service public health workforce that meet the network's goals of strengthening One Health capacity in OHCEA countries.

The 16 modules were developed based on One Health core competencies that were identified by OHCEA as key elements in building a skilled One Health workforce. This network is supported by two United States University partners: Tufts University and the University of Minnesota through the USAID funded One Health Workforce Project.



## Acknowledgements

This module was made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of the One Health Central and Eastern Africa (OHCEA) university network under the Emerging Pandemic Threats 2 One Health Workforce Project and do not necessarily reflect the views of USAID or the United States Government. USAID reserves a royalty-free nonexclusive and irrevocable right to reproduce, publish, or otherwise use, and to authorize others to use the work for Government purposes.

OHCEA extends her gratitude to those who participated in earlier works that informed the development of this module as well as reviewers and editors of the module. Sections/parts of the materials for this course were adopted from RESPOND SEAOHUN One Health Course Modules: <https://seaohunonehealth.wordpress.com/ecosystem-health/>



technical skills such as ecosystem health, infectious disease epidemiology, One Health concepts and outbreak response. The modules are intended to:

- create a framework for One Health curriculum.
- improve workforce capacity to prevent, detect and respond to threats posed by infectious diseases and zoonosis.
- generate a shift in countries' workforce culture and training structure.
- enable working across sectors and disciplines for a stronger and more effective public health sector.
- allow universities to be key drivers of the future workforce as they forge partnerships and drive change.
- combine human health, animal health and infectious disease with principles of ecology and environmental sciences.

The modules can be used at both pre-service and in-service levels as full courses, workshops or integrated into course materials for professionals who impact disease detection, prevention and response, allowing them to successfully function as an integral part of a larger, multi-disciplinary, team of professionals. This is key to creating a stronger sustainable Public Health workforce.

Each module contains a Facilitator Guide, Student Guide, PowerPoint slides and a folder of resources/ references for users. These modules are iterative and are continuously being revised.

These 16 modules were developed by collaborative efforts of multiple disciplines and teams of people from seven different OHCEA partner countries with the support of two US university partners namely Tufts University and University of Minnesota. A team of 66 people were engaged in the development of these modules. All the materials represent contribution by the faculty and leadership of the OHCEA network institutions and the technical and managerial support of the OHCEA Secretariat.

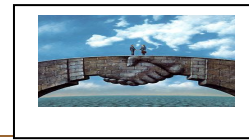
The modules were built off previous One Health modules developed by SEAOHUN-network: [https:// seahunonehealth.wordpress.com/ecosystem-health/](https://seahunonehealth.wordpress.com/ecosystem-health/) with addition of more Africa-specific materials, examples and case studies relevant and applicable to the region. Each module was reviewed by OHCEA network faculty including US university partners with technical expertise as well as partners with field experience that allows for One Health application and appreciation of the local African context.

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## Module Overview

Repeated emergence and reemerging of infectious disease outbreak in Africa urge the collaborative effort of multiple health science professions, together with their related disciplines and institutions working locally, nationally, and globally to attain optimal health for people, domestic animals, wildlife, plants, and our environment. It is clear that no one discipline or sector of society has enough knowledge and resources to prevent the emergence or resurgence of diseases in today's globalized world. No one nation can reverse the patterns of habitat loss and extinction that can and do undermine the health of people and animals. Only by breaking down the barriers among agencies, individuals, specialties and sectors can we unleash the innovation and expertise needed to meet the many serious challenges to the health of people, domestic animals, and wildlife and to the integrity of ecosystems. Solving today's threats and tomorrow's problems cannot be accomplished with yesterday's approaches. We are in an era of 'One World, One Health' and we must devise adaptive, forward-looking and multidisciplinary solutions to the challenges that undoubtedly lie ahead.

The training module will foster understanding and skill in the basic principles and importance of collaboration and partnership, in the context of a One Health approach to address complex health challenges by One Health professionals. It covers the need for human, animal and environmental health organizations and professionals to share knowledge and resources for improving global health problems. This module provides students and other trainees with the knowledge, skills and attitudes to successfully implement One Health collaborative work. Collaborative partnerships rely on participation by all parties who agree for one goal by sharing knowledge, resources, and people for the benefit of human, animal and environment. Common vision and mission and team building for One Health are the focus.

Some of the materials and resources in this module were directly borrowed from the SEAOHUN collaboration and partnership module.

### Goals of the Training

- i) To appreciate the importance of collaboration and partnerships of human, animal, and environmental health professionals to the global health and increase exposure to and improve cross-sectoral and inter-professional collaboration.
- ii) To understand the factors facilitating and affecting the role and responsibility of collaborators and partners and also identify the benefits and challenges in one health approach.
- iii) To comprehend the need for team building and features of effective teamwork for shared vision to improve human, animal and environmental health, teaming multilateral health agencies in One Health principle.

- iv) To illustrate sharing of resources, ways of communication, different professions' contribution of professionals during collaboration and partnership for one common goal - global health.
- v) To help participants be aware of basic gender sensitive approaches in dealing with conflict of interest between professionals in collaboration and partnership.

## Training Objectives

The participants will be able to:

- i) understand the principles and methods of collaborative partnership working in identify the “multidisciplinary, interdisciplinary and trans-disciplinary” collaboration and partnerships in One Health.
- ii) value the importance of team building for One Health approach in disease surveillance and outbreaks investigations of emerging and re-emerging infectious and zoonotic diseases.
- iii) understand how different organizational cultures can influence the outcomes of collaborative work.
- iv) have a clear understanding of how communication and behavior of individuals and different professionals impact on others.
- v) understand the roles that different organizations, agencies, individuals and professionals play and the influence they may have on One Health collaboration.
- vi) understand the importance of negotiation and influencing skills and their application in bringing about change, particularly in a multidisciplinary working environment.
- vii) identify basic gender principles and related concepts.

## Target Audience

- Undergraduate students
- Graduate students
- Diploma and certificate level students
- Academics/faculty members
- Short course attendees of human, animal and environmental health
- In-service trainees, One Health partners, practitioners and professionals



## Program /Agenda

Session 1	Session 2	Session 3	Session 4	Session 5
Introduce concepts and contexts of one health and create awareness on basic gender sensitive approaches	Explain one health approach in relation to collaboration and partnership	Team building and stage of team development for collaboration and partnership	Importance of communication in collaboration and partnership	Conflict management in inter-professional collaboration in one health practice for outbreak investigation
Concept and context of One Health interdisciplinary collaboration and partnership	Explain factors facilitating and affecting collaboration and partnership	Collaboration skills and One Health team building and forming partnership	Communication skills for inter-professional partnership in one health	Gender sensitive case studies in outbreak investigation

## Goals, Learning Objectives, Activities and Materials

No	Goal	Learning Objective	Activities	Time (min)
1	To appreciate the importance of collaboration and partnerships of human, animal, and environmental health professionals to the global health and increase exposure to and improve cross-sectoral and inter-professional collaboration.	The concept, context and meaning of collaboration and partnership	<ul style="list-style-type: none"> <li>• Lecture</li> <li>• Role play</li> <li>• Brainstorming</li> <li>• Individual learning</li> <li>• Group discussion</li> </ul>	160
		What One Health collaboration means and description		40
		Multidisciplinary, interdisciplinary and trans-disciplinary collaboration means		40
		Basic gender principles and related concepts including sex, gender, gender roles, equity, and life cycle		40
2	To understand the factors facilitating and affecting the role and responsibility of collaborators and partners and also identify	Explain the One Health approach	<ul style="list-style-type: none"> <li>• Brainstorming</li> <li>• Storytelling</li> <li>• Drama</li> <li>• Small group activity</li> <li>• Large group discussion</li> <li>• Lecture</li> </ul>	100
		Explain attributes of collaboration and partnership		60
		Demonstrate stages of partnership and collaboration		60
		Discuss factors for successful collaboration and partnership		40
		Compare the benefits and		40

	the benefits and challenges in One Health approach.	challenges of collaboration and partnership		
3	To comprehend the need for team building and features of effective teamwork for shared vision to improve human, animal and environmental health problems, teaming multilateral health agencies in One Health principle.	Describe the importance of teamwork	<ul style="list-style-type: none"> <li>• Small group activity</li> <li>• Large group discussion</li> <li>• Lecture</li> <li>• Team building exercise</li> <li>• Paper tower exercise</li> <li>• Self-studies and assessment exercise</li> </ul>	80
		Explain the typical stages in the development of a team.		90
		Collaboratively organize a team and complete a project.		70
		Create one health team and identify the team dynamics		120
4	To illustrate sharing of resources, ways communication, different professions' contribution of professionals during collaboration	Express the different ways of communication in collaboration and partnership	<ul style="list-style-type: none"> <li>• Lecture</li> <li>• Role play</li> <li>• Individual, small group and large group activities</li> <li>• Storytelling</li> <li>• Dialogue</li> <li>• Drawing</li> </ul>	60
		Debate how communication affect collaboration and partnership		60
		Listen, speak and write to be understood by all (gain understanding of personal working style, styles of		60

	and partnership for one common goal, global health.	others). Prepare and deliver gender-sensitive risk communication	activity	60
5	To understand collaboration and partnership accountability with the conflict of interest between professionals and participants, are more effective in their disciplines by being aware of gender dynamics and applying gender sensitive approaches in collaboration and partnership.	Explain the types of conflict in collaboration.	<ul style="list-style-type: none"> <li>• Small and large group activity</li> <li>• large group discussion</li> <li>• lecture</li> <li>• role play</li> <li>• stage dialogue</li> <li>• team activity</li> <li>• case studies</li> <li>• drama group activity and evaluation exercise</li> <li>• simulation exercise</li> <li>• field visit and reporting activity</li> </ul>	60
		Discuss the source of conflict in collaboration and partnership.		60
		Demonstrate constructive conflict resolution skills.		60
		Identify roles of One Health team members for outbreak investigation and discuss the steps on outbreak investigation.		80
		Collaboratively organize a team and complete a project.		80

		Develop gender sensitive case studies and evaluate the participants' ability to use gender analysis to respond to outbreak One Health Team.		80
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## Materials

- A pair of scissors, and glue
- A4 paper of different colors
- Computer
- Flipchart or whiteboard with markers
- Handouts – conflict resolution techniques,
- Instruction “drawing activity”
- LCD projector
- Module PowerPoint
- Participant guides
- Reading material
- Screen/ blank wall

# SESSION 1: Concepts and Contexts of Collaboration and Partnership



60 min

## Participant Registration

- i)* Have participants sign the attendance register
- ii)* Explain logistics (e.g., breaks, meals, etc.)
- iii)* Issue accommodation, training rooms, etc.
- iv)* If the short course is residential, check on housing accommodations



60 min

## Facilitator Welcoming Remarks

### Participants' Introduction



- i)* In pairs have participants share:
  - their name.
  - where they are from.
  - type of work and position.
  - a story about an experience they had that made them aware of the difference between men and women.
- ii)* Let them prepare a 1-minute introduction of their partner to the class.
- iii)* Go around the room and have each pair present their partner to the class.



## Expectations

Set up:

30 min



- i)* Have two flipcharts in the front of the room: one titled “Expectations” and the other “Concerns.”
- ii)* Give each participant two different colored sticky notes.
- iii)* Ask participants to write down their expectations for the short course on one of the sticky notes (specify color) and their concerns about the course on the second sticky note (specify color).
- iv)* Have participants place their expectation sticky notes on a flipchart titled “Expectations” and their concerns sticky notes on another flipchart titled “Concerns”.
- v)* Organize the sticky notes according to common themes.
- vi)* Explain the agenda for the week and the goals of the short course highlighting the expectations that will be met over the week and the expectations that will not be met. Comment on and address concerns.

### Goals of the Short-Course

At the end of the training, trainees will:

- i)* understand the principles and methods of collaborative partnership working in One Health domain and the benefits and challenges which collaboration can bring.
- ii)* identify the “multidisciplinary, interdisciplinary and trans-disciplinary collaboration and partnerships in One Health.
- iii)* value the importance of team building for One Health approach in disease surveillance and outbreaks investigations of emerging and re-emerging infectious and zoonotic diseases.
- iv)* understand how different organizational cultures can influence the outcomes of collaborative work.
- v)* have a clear understanding of how communication and behavior of individuals and different professionals impact



on others.

- vi)* understand the roles that different organizations, agencies, individuals and professionals play and the influence they may have on One Health collaboration.
- vii)* understand the importance of negotiation and influencing skills and their application in bringing about change, particularly in a multidisciplinary working environment.
- viii)* participants have basic knowledge on how to develop gender inclusive case studies.

### **Introduction to OHCEA**

- i) Explain that this course sponsor and the module are by OHCEA
  - OHCEA is the One Health Central and Eastern Africa network comprised of 21 academic institutions from six African countries consisting of Schools of Public Health and Veterinary schools, with two US partners - Tufts University and the University of Minnesota. OHCEA is funded under a major USAID grant.
  - OHCEA's vision is to be a global leader in One Health promoting sustainable health for prosperous communities, productive animals and balanced ecosystems. OHCEA seeks to expand the human resource base needed to detect and respond to potential pandemic disease outbreaks.
- ii) OHCEA has identified collaboration and partnership, one of the soft skills which are critical to achieving their vision, for which reason they have sponsored the development of the course modules.



15 min



### Guest Speaker - Opening Workshop

- i) In advance, be sure the speaker is prepared to address the group. Share with the speaker the short course goals and desired outcomes and what you would like her/him to emphasize in her/his address.
- ii) Introduce invited guest speaker to “officially open the course”.



15 min

### Pre-Test

- i) Pass out copies of the pre-test.
- ii) Tell participants they have 15 minutes to complete the pre-test.
- iii) Explain that a pre-test is used to gauge how much they learned over the week; a post-test will be administered at the end of the course. The two tests will be compared. There is no grade associated with the pre-test. When participants finish, they can begin their break.



20 min



### *Candy Sharing Game*

- i) Begin the session by having the participants do the following exercise on sharing.
- ii) Give them the following instructions:
  - You have a container of candies that you are going to give to them on the following conditions (total number of candies in container is 150 but do not share this information with the group).
  - Each individual must write down on a piece of paper how many pieces of candy they would like.
  - The total number of candies requested must not

exceed the number of candies in the container, so as they write this down, they should think through it and consider what their partners might be doing or writing down.

- If the total number of candies exceeds what is in the container, no one gets any candy.
  - If the total number does not exceed, they all receive the candy to share with each other.
  - Additionally, whoever requested for the highest number of candies receives 10 dollars, second highest 5 dollars and 3 highest 2 dollars.
- iii) At the end of this exercise, ask the participants to share their thinking process as they selected the number of candies to write down on the piece of paper. What was the basis for their decisions?
- iv) Repeat the activity but have them discuss as a group prior to writing down on the pieces of paper. What is the difference?



20 min



### Discovery Activity: What is One Health?

- i) Begin the session by having the participants watch the following videos:

One Health: From Concept to Action by CDC

<https://www.youtube.com/watch?v=TG0pduAYESA>

One Health: From Idea to Action:

<https://www.youtube.com/watch?v=gJ9ybOumITg&t=4s>

- ii) Briefly discuss the two videos with the participants.
- iii) Have each participant take 5-7 minutes to think about

and legibly write down on separate sticky notes the answers to the following questions:

1. Define what One Health approach means.
  2. Identify two examples of One Health in practice.
  3. Identify two to three advantages to multiple disciplines working together to promote One Health.
- iv) Have them display these sticky notes on the wall in the three separate sections. Then in a plenary review the following:
1. What are the common things identified?
  2. What are the differences?
  3. Is there anything that surprised anyone?
- v) Come up with a group description of what One Health is.

There are many different definitions of One Health by different health organizations, but for the purpose of the course we will adopt the American Veterinary Medical Association (AVMA) definition of One Health ([www.avma.org](http://www.avma.org)).

**AVMA** defines One Health as the integrative (collaborative) effort of multiple disciplines working locally, nationally, and globally to attain optimal health for people, animals, and the environment. Together, the three make up the One Health triad, and the health of each is inextricably connected to the others in the triad.

The common theme of One Health is multiple disciplines working together to solve problems at the human, animal and environmental interface. Collaborating across sectors that have a direct or indirect impact on health involves thinking and working across silos and enhancing resources and efforts while valuing the role each different sector plays. To improve

the effectiveness of the One Health approach, there is a need to create a balance and a greater relationship among existing groups and networks, especially between veterinarians and physicians and to amplify the role that environmental and wildlife health practitioners, as well as social scientists and other disciplines play to reduce public health threats.

In less than 10 years, One Health has gained significant momentum. It is now a movement and it is moving fast. The approach has been formally endorsed by the European Commission, the US Department of State, US Department of Agriculture, US Centers for Disease Control and Prevention (CDC), World Bank, World Health Organization (WHO), Food and Agriculture Organization of the United Nations (FAO), World Organization for Animal Health (OIE), United Nations System Influenza Coordination (UNSIC), various universities, NGOs and many others.

The current One Health movement is an unexpected positive development that emerged following the unprecedented Global Response to the Highly Pathogenic Avian Influenza. Since the end of 2005, there has been increasing interest in new international political and cross-sectoral collaborations on serious health risks. Numerous international meetings and symposia have been held, including major initiatives in Winnipeg (Manitoba, Canada, March 2009), Hanoi (Vietnam, April 2010), and Stone Mountain (Georgia, US, May 2010), as well as four international One Health scientific congresses, the last of which took place in Saskatoon, Canada, in 2018.



30 min



### What is Collaboration and Partnership?

The definition of One Health makes collaboration and creating partnerships central to the One Health Concept and Implementation. One Health teams must be working together with a common vision and team spirit to achieve the required health benefits for humans, animals and the environment. Supporting and sustaining multidisciplinary partnerships requires respect and genuine commitment. This guide therefore focuses on building relationships between different sectors, disciplines and communities and the processes that support and facilitate those relationships.

### Prior Training Reading Material

Send out the following article to participants to read before they come to the training:

*Ros Carnwell and Alex Carson 2008: The concepts of partnership and collaboration*



30min



**Discovery  
Activity:**

### What is Our Story?

i) Have each participant take 5-7 minutes to think about and legibly write down on separate sticky notes the answers to the following questions:

1. What is your interest in collaboration and partnership?
2. What experience do you have of successful partnerships?
3. What are three key things that made partnerships unsuccessful?
4. What type of partnership structure are you involved in?

ii) Discuss the above questions as a group and identify

common areas.

Different organizations approach partnerships in different ways and the terms used reflect this diversity. There are two main types of partnerships: collaborative partnerships and commercial partnerships. One Health partnerships involve organizations or groups entering into partnership on an equal basis, networking, sharing resources, and working towards a shared goal.



### **Ensuring Cultural and Gender Sensitivity from the Beginning**

Partnerships do not succeed without trust. This is especially important if we are building community based partnerships. Recognizing the cultural, social and gender dynamics of communities and understanding leads to an understanding of how these will affect the partnership.

Ask the class to think through the following scenarios:

#### **Group 1**

In this community, there is conflict between the people and the national parks because the community is collecting medicinal plants and firewood from the national parks- an area that is protected. The wildlife has also been destroying the villagers' crops and killing their domestic animals. The national park management decides to arrest anyone that trespasses into the park and a heavy fine is imposed on them. They create awareness about the role of wildlife by delivering a training and awareness program primarily through night

classes. Within the next few months a lot of wild animals are poisoned by the community and found dead. The conflict escalates.

*The national park management is not consulting with anyone on their decision. They do not consider the community as partners in the protection of wildlife therefore the community reacts by poisoning the wildlife. They do not see the benefit of wildlife to them. The awareness classes are held primarily through night classes which limits women who are care providers for children from attending. In some communities, women are not even allowed to go out at night. Considering the fact that most of the people who collect medicinal plants and firewood are women, they should be a key stakeholder in the decision making as well.*

Ask the group to share similar examples from their own experience. Analyze the key issues that create unsuccessful partnerships.



15 min



#### **PowerPoint Presentation (PPP No.1)**

- Degree of collaboration
- Stakeholders of collaboration



40 min  
**Discu  
sion  
and**

#### **Different Degrees of Collaboration**

- Ask the class, “Where does One Health fit in with our definitions of the different degrees of collaboration?”  
Take a few responses.
- Identify the key stakeholders of One Health which need



**Group  
Activities**

- collaboration.
- iii) List the stakeholders and compare with the lists from the resource material.
  - iv) Give participants a quick quiz to review the core terms they learned about in the pre-work reading. Have each participant/student write down their definitions for the following terms: Discipline, Multidisciplinary, Interdisciplinary and Transdisciplinary. Each participant/student should self-assess as you review the definitions.



45 min



### **Stakeholder Analysis: Mining Case Study**

It is important to identify all the different stakeholders and the roles they play in a partnership and to ensure they are all included.

- i) Have the participants use the case study below to do a stakeholder analysis.

#### **Mining in Lake Tshangalele: Environmental and Health Impact Assessment in the Democratic Republic of Congo**



<http://www.amnesty.org/en/news/chinese-mining-industry-contributes-abuses-democratic-republic-congo-2013-06-19>

To provide incentives and attract investors to the mining sector a new mining code was enacted in the DRC in July of 2002. The new code attracted several new mining companies generally of smaller size compared to those operating at the time of the reform. For economic reasons, small mining operations tend to operate closer to large populations creating health and environmental problems. To mitigate the environmental impact of extractive industries, the government of DRC has recently enacted an environment framework law. However, this 2011 legislation still needs other implementation measures to guarantee its effectiveness.

The increase in mining operations in Lubumbashi, a city of 1.3 million inhabitants and surrounding areas has led to air and water pollution directly affecting humans, animals and the food chain. The mines are estimated to provide direct

employment to between 200,000 and 280,000 permanent full-time miners and are located only 0.1 km from the edge of the city (see Figure). During the peak season, the total number of miners reaches an estimated 400,000 workers. About 74% of miners are diggers while the remaining are sorters and washers.

Miners and their families are exposed to heavy metals through dust inhalation, food and water contamination. In Shinkolobwe and Kolwezi, miners are exposed to radiation of up to 24 mSv per year. Poor sanitary conditions in miners' camps also favor epidemics. Recent studies have shown a significant risk of heavy metal contamination in humans, goats and fishes. Massive excavations related to copper mining operations affect the ecosystem such that the natural habitat of rodents and other animal carriers of pathogens that may cause known and unknown diseases are invading human habitats creating a serious health risk.

In 2011, an outbreak of unknown disease with hemorrhagic fever like symptoms caused several deaths and hospitalizations in Kapolowe health district, 114 Km North West of Lubumbashi. However, follow up was not made as there was generally a poor understanding of these exposures and their specific effects and they did not have adequate capacities to study and mitigate these problems.

Evidence suggests fish from Lake Tshanga-Lele located in the same district are heavily contaminated. Fish from this lake constitute a main source of protein for the population of the city of Lubumbashi. Illnesses of unknown origin have also been observed in goats within the same area. These kinds of exposures from mining and activities related to it may be associated with significant disease burden.

The World Health Organization (WHO) estimates that environmental risk factors contribute to 24% of the global burden of disease from all causes, and to 23% of deaths, emphasizing that this is likely a conservative estimate because for many diseases, the associations are poorly understood (Prüss-Üstün and Corvalán, 2006).

ii) Have them read the case study and analyze it and have a discussion based on the ensuing questions.

iii) Reflect on the following questions and record the answers on a flip chart:

1. What is the problem?
2. Who is affected?
3. Is there a social, gender, economic, political angle to this?
4. What key One Health issues can be identified?
5. Are there any policy implications?
6. What gender sensitive measures can be done to protect the health of humans, animals and the environment?
7. Can you give similar examples from your own background/work?
8. How did you deal with it?



45 min

### Stakeholder Mapping

#### **Tshangalele Stakeholder Analysis and Emergency meeting:**

Form groups of 6 team members and give them the following instructions:

A)

- i) You have been provided with a set of sticky notes.
- ii) On a sticky note, write a name of a stakeholder or player in the Tshangalele scenario, one name per note.

- iii) Write as many stakeholders as you can think of.
- iv) Identify them by their roles.
- v) Consider their gender as well especially at the community level.
- vi) Line the sticky notes on the plain piece of paper according to whether they are international, national, regional or local.
- vii) Draw a circle around those stakeholders with lots of power and authority using a red marker.
- viii) Draw a square around those players with the most interest in the activity or who are impacted the most.
- ix) Using a red marker, draw arrows that show flow of decision making (power and authority) from one stakeholder to another.
- x) Using a green marker draw arrows that show flow of resources (funding) from one stakeholder to another.
- xi) Using a blue marker draw arrows that show communication flow from one stakeholder to another. Have the groups discuss the map and the following questions:
  1. Who has power and authority?
  2. Who do you think should have power and yet does not?
  3. Who is being left out of the different arrows and yet considered important and how do you include them?
  4. Can you identify any gender differences in power, communication flow and resource flow?

(This exercise was adopted from the University of Minnesota OH-SMART tool (<https://www.vetmed.umn.edu/centers-programs/global-one-health-initiative/one-health-systems-mapping-and-analysis-resource-toolkit>) and from work done by Professor Jodi Sandfort of UMN on Policy Field analysis.

B) You have been asked to select and coordinate a team to discuss response to the problem in Tshangalele, including developing a plan to intervene. The first step of this process is a stakeholder meeting.

Their task is to:

- identify a maximum of 10 individuals who will attend the meeting.
- justify why each member is critical to the response (i.e., role, expertise, responsibilities, etc. (present these in a table).
- discuss who should chair the stakeholders' meeting and why.

Discuss these and present the information to the class.



30 min

### Challenges Facing the Stakeholders in Developing an Intervention

- Briefly reflect on the One Health case study and why there is a need to involve different stakeholders in an issue like that.
- What challenges do the stakeholders face in implementation considering that they are coming from different disciplines?
- List some of these challenges: inadequate distribution of resources across the ministries, different groups are used to working in silos, powerful political interests, economic dynamics of the communities, marginalized communities.



### Driving Forces of Collaboration

Then ask the group to brainstorm a list of driving forces for

- 60 min **Brainstorming Exercise**
- collaboration in One Health. Capture the list on a flipchart or whiteboard. Some examples include:
- i) Health problems cannot be tackled by a single profession
  - ii) Requires different professional's involvement
  - iii) To exercise power, control, or influence over other people or organizations
  - iv) To reciprocate through cooperation and coordination.
  - v) To promote greater efficiency in the use of scarce resources.
  - vi) To reduce the transaction costs of other forms of organizing.
  - vii) To search for stability by reducing environmental turbulence & uncertainty by sharing risks.
  - viii) To improve reputation, image or profile.
  - ix) To access new resources – money, skills and staff.
  - x) To promote individual and organizational learning.
  - xi) To design services around the needs of citizens and clients and Altruism.



30 min



**Brainstorming Exercise**

### Attributes of Collaboration

- i) Using the same group ask what the attributes of collaboration and partnership are.
- ii) Let the participants list the attributes of collaboration and partnerships in flip chart and finally compare with the list in the facilitator note below.




### Post-training Unit Assessment

1. What is collaboration in One Health?
2. Who are the partners of One Health?
3. Define each of the terms listed below and give an

15 min

example for each:

- i) Discipline:
  - ii) Multi-disciplinary
  - iii) Inter-disciplinary
  - iv) Trans-disciplinary
4. Where does One Health fit in with our definitions of different degrees of collaboration?
  5. What are the attributes of collaboration and partnerships?
- 



# Detailed Facilitator Notes for Session 1

*The ensuing resources were obtained from the SEAOHUN Collaboration and Partnership module*

Prior to the session, have learners read the article Choi, B. and A. Pak. 2006 from the reading material and come prepared to discuss it in class. “Multidisciplinary, interdisciplinary and trans-disciplinary collaboration”.

## **What is Collaboration?**

Collaboration means "to work together." It is a mutually beneficial relationship between two or more parties to achieve common goals by sharing responsibility, authority and accountability for achieving results. It is more than simply sharing knowledge and information (communication) and more than a relationship that helps each party achieve its own goals (cooperation and coordination). The purpose of collaboration is to create a shared vision and joint strategies to address concerns that go beyond the view of any particular party. Collaboration as an alternative strategy for addressing public concerns grows out of the increasingly destructive consequences of current political and economical practices. The idea of working together incorporates several closely related concepts fundamental to its practice. These include the distinction between adaptive and routine challenges; the notion of a holding environment in which to do adaptive work; the use of facilitation to guide or orchestrate adaptive work; and the use of consensus-based decision making rather than majority rule.

## **What is Partnership?**

**Partnership** is the term used in the field of civic engagement to talk about the existing or intended relationships between individual people and entities pooling or sharing resources, knowledge and other assets to achieve one or more goals that are

mutually beneficial. Partnership allows for many people to have a voice in addressing issues and creating positive change. As multiple perspectives are shared, a fuller understanding of the needs, assets, strategies, and abilities needed or available to address an issue is perceived. Developing a partnership requires clear terms and open communication. It is best if each partner explicitly and clearly states how they understand their needs, goals, assets and roles in the partnership. Partnership for health means voluntary joint action or decision-making in a harmonious and supportive way, for a common goal and outcome. It involves all players or stakeholders at different levels who, through their actions, will influence services delivery at any of the health delivery points in the district, region or country.

### Motivations for One Health Collaboration

Give a short introduction to the motivation for collaborating in a One Health situation. Tell the participants that there are diverse and complex factors motivating individuals and organizations to collaborate. At the outset of collaborative initiatives, it is critical to understand the reasons that actors are seeking to work together. Collaboration is not necessarily the appropriate response or approach to all challenges, and it won't necessarily lead to successful solutions to problems. The compatibility and transparency of motives is highly influential on the success of collaboration. The costs and benefits to the different forms of collaboration need to be critically evaluated.

### Degrees of Collaboration

	Definition	Illustrative Examples
Discipline	<ul style="list-style-type: none"> <li>A branch of knowledge, instruction or learning</li> </ul>	Public Health; Environmental Science; Veterinarian Science
Multidisciplinary	<ul style="list-style-type: none"> <li>Involving or of several disciplines</li> </ul>	<ul style="list-style-type: none"> <li>Going to see two different healthcare providers who are</li> </ul>

	<ul style="list-style-type: none"> <li>▪ Additive, not integrative</li> <li>▪ Disciplinary perspectives not changed</li> <li>▪ Additive</li> </ul>	specialists separately (e.g., pediatrician and nutrition counselor)
<b>Interdisciplinary</b>	<ul style="list-style-type: none"> <li>▪ Synthesis of two or more disciplines establishing a new level of discourse or integration of knowledge</li> <li>▪ Interactive</li> </ul>	<ul style="list-style-type: none"> <li>▪ Nuclear physics plus medical knowledge have been used together to lead new treatments for cancer.</li> </ul>
<b>Transdisciplinary</b>	<ul style="list-style-type: none"> <li>▪ Using shared conceptual framework to go across and beyond disciplinary boundaries</li> <li>▪ Melding</li> <li>▪ Holistic</li> </ul>	<ul style="list-style-type: none"> <li>▪ Addressing issues like hunger and pollution, which go beyond the field (e.g. economics, ecology, etc.)</li> <li>▪ Involve both role release (helping someone else understand/grow in your field) and role expansion (you growing into another field).</li> </ul>

Source: SEA OHUN Collaboration and Partnerships Module 2014

<https://seahunonehealth.wordpress.com/>,

**Multidisciplinary** work does *not* seek to integrate the *multiple disciplines involved*.

- i) The methodologies and assumptions of each discipline are not expressly developed from the interaction with the others.
- ii) Multidisciplinary teams can work either concurrently or in sequence, but the activities of their respective disciplines run parallel and do not blend.
- iii) Multidisciplinary is the least integrative form of integrated research yet it is arguably the most attainable.

- iv) Multidisciplinarity features several academic disciplines in a thematically based investigation with multiple goals essentially, studies “co-exist in a context.”
- v) Collaborators aim to share knowledge and compare results from the studies; there is no attempt to cross boundaries or generate new integrative knowledge.
- vi) Each member is able to contribute a professional perspective on the issue.
- vii) One advantage of this approach is that, while the research approaches are disciplinary, the different perspectives on the issue can be gathered together.
- viii) Multidisciplinary work is typically project-driven or geared toward problem solving.

**Interdisciplinary** work has a collaborative focus and *blends and integrates research between disciplines.*

- i) Two or more disciplines work together and create a shared discourse.
- ii) Focus on addressing specific ‘real world’ problems pushes participants (from a variety of unrelated disciplines) to cross boundaries to create new knowledge. The necessity of bridging disciplinary viewpoints generally stems from the need to address complex “problems that involve an interface of human and natural systems.”
- iii) People and ideas are brought together from different disciplines to jointly frame a problem, agree on a methodological approach and analyze data. Thus, interdisciplinary research requires a much more collaborative approach to problem formulation and methodological development than multidisciplinary research.
- iv) In some projects, a single discipline may dominate and effectively control the integration of knowledge. Unidirectional approaches are problematic for both theoretical reasons and because the greater power provided to one discipline is likely to hinder the creation of trust within the research team (and thus transfer of information, extent of boundary crossing, etc.).

- v) In some cases, the interaction and development of the project is guided by the nature of the issue (issue-centric) and this is termed 'goal-oriented' interdisciplinarity.
- vi) Others differentiate between 'big' and 'small' interdisciplinarity, with big interdisciplinarity typified by links between distant disciplines (e.g., natural and human sciences) and small interdisciplinarity between isolated sub-disciplines (e.g., within natural sciences) where tools and knowledge are exchanged. Recognizes that not all interdisciplinary research is integrated across disciplines to the same level.

A **transdisciplinary** approach focuses on *problems or issues that cut across the boundaries of two or more disciplines*, or fall between them, whatever the nature of the interactions between these disciplines.

- i) The aim is to create a unity of knowledge, but not necessarily the development of blended practices and assumptions. Transdisciplinary work tends to have a 'real world' focus and to include in the work the interests and involvement of third parties, such as government and non-government agencies or businesses.
- ii) Transdisciplinarity is probably the most desirable & yet difficult to obtain form of integrated research.
- iii) Transdisciplinarity is the highest form of integrated project, involving not only multiple disciplines, but often also multiple non-academic participants in a manner that combines interdisciplinarity with participatory approaches. The variety included in many transdisciplinary frameworks is largely the result of the strong problem-solving objectives of the research. The need for flexible methodologies in transdisciplinary research is driven by this problem-solving approach as "methodologies employed in transdisciplinary research need to correspond to and reflect the problem and context under investigation."
- iv) This focus on the problem, rather than the disciplines, minimizes the possibility of unidirectional research. Within a trans-disciplinary environment, no single discipline has intellectual precedence.

- v) Transdisciplinarity requires considerable effort on the part of the participants to open up their work to alternative ways of thinking.
- vi) The demands placed on researchers to collaborate means that transdisciplinarity, of all the integrated forms, has a strong focus on the building of personal relationships and joint understandings. Establishing trust and understanding among researchers within the projects is thus a key objective of building transdisciplinary capacity.

### Attributes of Collaboration and Partnership

Attributes of Collaboration	Attributes of Partnership
<ul style="list-style-type: none"> <li>• Intellectual and cooperative endeavor</li> <li>• Knowledge and expertise more important than role or title</li> <li>• Joint venture</li> <li>• Working as a team</li> <li>• Participation in planning and decision making</li> <li>• Non-hierarchical relationship</li> <li>• Sharing of expertise</li> <li>• Willing to work together towards agreed purpose</li> <li>• Trust and respect in collaborators</li> <li>• Partnership</li> <li>• Inter-dependency</li> <li>• Highly connected network</li> <li>• Low expectation of reciprocation</li> </ul>	<ul style="list-style-type: none"> <li>• Trust and confidence in accountability</li> <li>• Respect for specialist expertise</li> <li>• Joint working</li> <li>• Teamwork</li> <li>• Blurring of professional boundaries</li> <li>• Members of partnerships share the same vested interests</li> <li>• Appropriate governance structures</li> <li>• Common goals</li> <li>• Transparent lines of communication within and between partner agencies</li> <li>• Agreement about objectives</li> <li>• Reciprocity</li> <li>• Empathy</li> </ul>

# SESSION 2: Factors Facilitating and Affecting Collaboration and Partnership in One Health Approach

This session discusses a framework for genuine partnership as well as demonstrates the attributes, stages, factors of successful collaboration and partnership in One Health.

## Learning Objectives

Participants will be able to:

- i) explain the framework for genuine partnerships.
- ii) explain attributes of collaboration and partnership.
- iii) demonstrate stages of partnership and collaboration.
- iv) discuss factors for successful collaboration and partnership.
- v) compare the benefits and challenges of collaboration and partnership.

## Type of Learning

Brainstorming, storytelling, drama, small group activity, large group discussion; PowerPoint presentation, lecture

## Materials

- Computer, LCD projector, screen/blank wall
- Flipchart or whiteboard with markers
- Reading material
- Module PowerPoint
- Student guides

## Pre-class Assignment

Required prior reading: Prior to coming to this training or course provide participants with the following article and ask them to read it and come prepared to discuss it.

*One Health: Interdependence of people, other species and the planet by Meredith A. Barret and Steven. A. Osofsky*

*Rift Valley Fever case study: A forgotten Viral Hemorrhagic Fever- The Uganda 2016 outbreak of Rift Valley fever*



30 min

### Quick Research: A Framework for Genuine Partnerships

In different groups, have the participants perform a quick research on the web to identify a framework for genuine partnership. Their search should include the following four key domains that inform the process to ensure that a partnership achieves the objective for which it was formed:

- i) **Capacity building:** partners work to build capacity for community driven quality, culturally and gender sensitive appropriate participation of all partners and equitable delivery of services
- ii) **Process governance and accountability:** structures and processes are developed to support the partnership including governance, facilitation and agreements. Partners plan, monitor progress and evaluate outcomes together.
- iii) **Cultural competence:** partners respect each other's culture and make an effort to understand.
- iv) **Relationships:** partners commit to developing



respectable and sustainable relationships based on trust. They negotiate a shared vision and work together to improve health for humans, animals and environment.



60 min



### Show the video, *Fatal Infestations*

The CDC, US army and a Bronx Zoo veterinarian join forces to identify the disease that is rapidly filling the city's emergency rooms and curiously killing 17,000 crow and Zoo birds in NYC. This video focuses on how West Nile virus was first detected and the way multiple agencies interacted to respond to it.

After watching the video-discuss the following questions:

1. Who are the different stakeholders involved?
2. How did they collaborate?
3. What were the consequences of unsuccessful collaborations?
4. How does this relate to collaboration and One Health?

Review the video based on the four domains in the collaboration framework discussed above. Discuss how each domain is evidenced in the video and the challenges and possible solutions to solving the challenges. Participants should then share examples from their own experience and how they resolved or attempted to resolve the challenges they faced.



30 min



### Stages, Success Factors and Challenges of Collaboration and Partnership

**PowerPoint Presentation**

Brainstorming exercise on developmental stage of collaboration and partnership

(PPP No.2)

- i) Form again a group of 5-6 participants.
- ii) Ask the participants what the developmental stages of collaboration and partnership are and write them on a flipchart.
- iii) Finally explain the stages using the information in the detailed facilitator note.



40min



Storytelling

### How Partnership Support Health-related Issues

- i) Divide the participants into different multi-disciplinary groups. Ask them Based on their experiences, ask them to respond to the questions below. Take an example of partnerships currently in place in your district/place of work and how they influence the health of the population.
- ii) Summarize reasons why partnership or collaboration between organizations in your district may be beneficial.
- iii) Explain cases and reasons why collaboration may not be the best option.
- iv) Give examples where some partnerships have failed and the reasons why.
- v) The participants should present their cases to the rest of the team.



60 min



Group Work

### Collaboration Benefits and Challenges

- i) Tell the class that most individuals in the room have had to collaborate and have already discovered some of the benefits and challenges to collaboration.
- ii) Divide the class into two groups and ask them to respond to the following question: Thinking about

your own experience on One Health: What do you anticipate are some of the benefits and challenges of collaborating in a One Health setting?”

- i) Assign one group to think of the challenges and the other to outline the benefits.
- ii) Give the groups 10 minutes to brainstorm and then switch the roles.
- iii) Have each group read their responses and capture notes on a flipchart or whiteboard.
- iv) Add any benefits or challenges that they missed; some examples that you want to hear are outlined below.

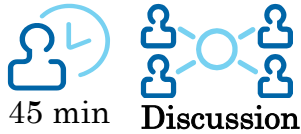
#### **Benefits of Collaboration**

- i) Increased access to resources
- ii) More efficient use of resources
- iii) Enhancement of accountability
- iv) Development of innovations
- v) Broadened awareness
- vi) Lasting relationships
- vii) Sustainable development of activities
- viii) Broad sharing of responsibility
- ix) Stronger ownership by stakeholders
- x) Use of strengths of different partners
- xi) Sharing of knowledge and technology
- xii) Better balanced design of projects

#### **Challenges of Collaboration**

- i)* Requires trust
- ii)* Time commitment

- iii) A need to plan together and meet often
- iv) Investment of resources



### Paper by Barrett and Osofsky

At the end of this session, spend 45 minutes discussing the paper by Barrett and Osofsky. Assign sections of the paper to different participants and have them share key highlights of each section.



### Rift Valley Fever Case Study

(Case found in the Resources folder)

- i) Spend the next 75 minutes discussing the Rift Valley Fever case study on the outbreak in Uganda in 2016. The participants should have read the case study thoroughly to effectively participate in this discussion. The discussion should centre around the following questions:
  1. Why is this case study being used to demonstrate collaboration?
  2. What were the factors active in South Western Uganda that contributed to the RVF outbreak?

#### Responses could include:

- *Presence of livestock: Meat handling procedures: Abattoirs- meat slaughter procedures*
- *Eating of meat/raw milk/lack of funds to purchase other alternatives*
- *Inadequate health systems*

- *Limited resources –being shared/had to use personal resources*
- *Crowded conditions in hospitals*
- *Disease ecology*
- *Weather pattern changes-making it high risk-warning sent out in 2015*
- *Trade across districts and borders*
- *Cross-border traffic of people: Mixed populations-border of Rwanda and DRC*
- *Regulatory factors- no meat inspection*
- *Government unprepared although they were warned*
- *Reduced expertise*

**What were the consequences?**

- *Death in humans/quarantine of humans - no movement*
- *Increased transmission*
- *Death of livestock*
- *Livestock markets closed- no sale of meat*
- *Instability/community upset because butchers were closed/no other source of meat*
- *Trade bans/affecting importation*
- *Evaluate response from animals as well as humans and mosquitoes*
- *Misinformation-panic/fear in the community*
- *Impact on tourism*

- ii) Have the participants identify and generate a list of stakeholders at national and district levels.
1. Were they appropriately involved?  
Who do you think are the important stakeholders?

2. How did they collaborate with each other?
  3. Are there any stakeholders that should have been involved but were not?
  4. What challenges were detected during response and what can be done to improve from a One Health perspective?
  5. What should the country's long-term response involve in order to prevent and manage future RVF outbreaks?
- iii) Debrief this session by highlighting the importance of collaboration and partnership and how that is the basis of One Health. That One Health emphasizes use of holistic systems approach in the management of complex health challenges:
- Human animal environmental interactions
  - Multidisciplinary and/or inter-sectoral collaboration
  - Sharing of resources: technical, information, structural, human, financial etc.
  - Promotion of transparent communication and sharing of information between stakeholders
  - Cooperation between the public and private sectors
  - Unified and cooperative capacity building within the health sector



## Factors Influencing Successful Partnerships and

30 min **Group  
Activity**

## **Collaboration**

Brainstorm with the participants what they consider are factors that influence successful collaboration. As they discuss these factors they should give examples from their own experience of successes and failures. The list below highlights these factors that contribute to successful partnerships and collaborations.

- i) **People:** Organizations do not work together, people do – thus individual characteristics will be a factor in whether the collaboration is successful or not. Check out the behavior and culture of different health professionals and their level of commitment to the collaboration.
- ii) **Vision:** Create a **shared** vision and common goals (Global health) that incorporate all of the members' perspectives and interests, and identify mutual needs that cannot be met by one organization alone.
- iii) **Trust:** Take some **time** to explore your common ground. "Trust is built through mutual respect for each professional's experience, knowledge and contribution.
- iv) **Time:** Do not give in to the pressure for speed and action. Getting to know each other in order to develop a solid partnership takes time, as does planning and implementation.
- v) **Planning:** Working together effectively requires a great deal of planning. All aspects of the collaboration, including purpose, function, decision-making process, the risks and benefits to

each member and anticipated results need to be considered, agreed upon and committed to (usually by signing a written agreement). Subsequently, every meeting, every work plan, every approach to a prospective member or funder, has to be planned.

- vi) **Communication:** There needs to be a transparent flow of information among members, and mechanisms for ensuring that all members are kept up-to-date on matters relating to the collaborative and have clear means of voicing concerns and suggestions.
- vii) **Learning Together:** Partnerships involve learning about each other, about the issues or needs that are being addressed, and about how to work together effectively.
- viii) **Decision-Making:** It is crucial that how decisions are made is agreed upon right at the start of the partnership and adhered to throughout its duration. Partners should also agree on a problem resolution process. Agreements regarding the investment of people, time and resources need to be negotiated and clearly understood by all partners.
- ix) **Leadership:** There are many options for leadership; e.g. elect a Chair or Co-chairs, or establish different roles for different members. It may be formal or informal. Shared leadership can renew energy and increase commitment.
- x) **Technology:** Electronic communication can enhance and support the work of the partnership by facilitating connections and opportunities for

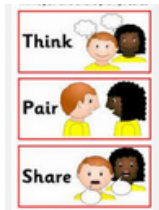


innovation. An assessment of current systems and technical capacities of each of the members is required before effective information and communications systems can be established.

- xi) **Flexibility:** As circumstances change, one or more members may not be able to contribute to the extent originally intended, or may not be able to remain involved at all. The remaining members will have to make adjustments accordingly.



20 min



## Identifying Different Types of Collaborations

There are two types of collaborations:

### Spatial Scale

- International collaboration
- Regional
- National
- Local

### Function

- Research
- Funding
- Advocacy
- Project implementation

- i) Ask the participants/students to break into pairs. Each pair should take one of these types of collaborations in relation to One Health, identify the purpose and find an example of each, and identify one benefit thus far of that collaboration. For example, at international level, FAO, OIE and WHO have formed a One Health

- tripartite agreement. The participants should present this information to the group for discussion.
- ii) The need for collaboration arises from the diverse nature of the One Health challenges.
  - iii) The problem has multiple determinants, affects many people and sectors, and requires action by different sectors.
  - iv) Multi-sectoral collaboration increases access to resources, shares responsibilities and strengthens ownership of activities.
  - v) Collaboration needs to be organized around complementary issues at international, regional, national and local levels.

### **Questions for Participants to Think About:**

1. Based on your work experience, describe a collaboration project that you have participated in.
2. What were the main objectives of the project?
3. How many people were involved, and what were their work and training backgrounds?
4. Were the project objectives achieved? If they were, explain the role played by each member of the project.
5. Discuss the roles of the different sectors involved in public health activities in your country.
6. How well do these sectors collaborate in your country?
7. What areas of collaboration need to be improved?
8. Identify and discuss the challenges that professionals with an interest in international collaboration on improving health care for humans, animals and the

environment face? How can these challenges be addressed?

All participants should be ready to share.



20min

### **Post-training Session Assessment**

1. What are the factors influencing success of collaboration in One Health?
2. What do you anticipate as the benefits of collaborating in a One Health Setting?
3. What are the challenges of collaborating in a One Health setting?

## Detailed Facilitator Notes for Session 2

*Retrieved from various sources*

One Health is the collaborative effort of multiple health science professions, together with their related disciplines and institutions working locally, nationally, and globally to attain optimal health for people, domestic animals, wildlife, plants, and our environment. One Health is a collaborative, international, cross-sectoral, multidisciplinary mechanism to address threats and reduce risks of detrimental infectious diseases at the animal-human-ecosystem interface. The One Health Global Network considers that the aim of One Health is to ‘improve health and wellbeing through the prevention of risks and the mitigation of effects of crises that originate at the interface between humans, animals and their various environments’.

It is clear that no one discipline or sector of society has enough knowledge and resources to prevent the emergence or resurgence of diseases in today’s globalized world. No one nation can reverse the patterns of habitat loss and extinction that can and do undermine the health of people and animals. Only by breaking down the barriers among agencies, individuals, specialties and sectors can we unleash the innovation and expertise needed to meet the many serious challenges to the health of people, domestic animals, and wildlife and to the integrity of ecosystems. Solving today's threats and tomorrow's problems cannot be accomplished with yesterday's approaches. We are in an era of ‘One World, One Health’ and we must devise adaptive, forward-looking and multidisciplinary solutions to the challenges that undoubtedly lie ahead.

**One Health Collaboration** is cooperative arrangement in which human, animal, and environmental health professionals or institutions (which may or may not have any previous relationship) work jointly towards a common goal improving the global health. It is effective method of transferring 'know how' among individuals, therefore critical to creating and sustaining a competitive advantage. It is the situation of all health professionals or institutions working together to address such issues as food safety, food security, antimicrobial resistance, climate change and the human-animal bond.

**One Health Partnerships:** is a relationship in which human, animal, and environmental health organizations share resources and responsibilities to achieve a common objective, as well as any resulting rewards or recognition. Partnerships are intended for joint solving of human, animal, and environmental health problems, resource exchange, cooperation, coordination and coalition building. The relationship among human, animal, and

environmental health partners should be permanent. One Health partnership brings together institutional capabilities and human resources in the form of skills, experiences and ideas to tackle common human, animal, and environmental health problems that are often beyond the capacity of a single organization or group. Unlike collaboration, this definition implies a formal, structured relationship between equals with mutually defined objectives and goals to improve global health.

**One Health Collaborative partnerships** are agreements and actions made by human, animal and environmental health organizations to share resources to accomplish improving global health problems. Collaborative partnerships rely on participation by all parties who agree to share resources, such as finances, knowledge, and people for the benefit of human, animal and ecosystem health. These organizations in a collaborative partnership share the vision - global health improvement. The essence of One Health collaborative partnership is for all parties to mutually benefit from working together. These are instances where One Health collaborative partnerships develop between those in different fields to supplement one another's expertise. These relationships between One Health collaborative partners can lead to long term partnerships that rely on one another. Partnership and collaboration optimizes performance through shared resources and responsibilities for the common goal - global health.

## **Stages of Collaboration**

### **Understanding the Context of Collaboration**

- i) Identify the problem type.
- ii) Understand what makes leadership difficult.
- iii) Identify the relevant community to the problem.
- iv) Assess the extent of stakeholders' agreement.
- v) Evaluate the community's capacity for change.
- vi) Identify where the problem/issue can be most effectively addressed.

### **Organizational Steps in Collaboration**

- i) Agree on the mission, values, and principles of the effort.
- ii) Agree on a process with ground rules for working together.
- iii) Design organizational structure.

- iv) Determine meeting guidelines.
- v) Define rules and responsibilities.
- vi) Create an effective process for communication.
- vii) Coordinate budget and fund development.
- viii) Link with other efforts.
- ix) Celebrate.
- x) Promote the effort.
- xi) Build the leadership capacity of all stakeholders.
- xii) Enlist technical assistance and support.

### **The Keys to Successful Collaboration**

- i) Good timing and clear need
- ii) Strong stakeholder groups
- iii) Broad-based involvement
- iv) Credibility and openness of process
- v) Commitment and/or involvement of high level, visible leaders (e.g. elected officials)
- vi) Support of acquiescence of established authority or powers (e.g. board of health or county)
- vii) Overcoming mistrust or skepticism
- viii) Strong leadership of the process (strategic leadership)
- ix) Interim successes, shift to broader concerns of the community

### **Stages of Partnership**

It can be helpful to think of partnerships going through a series of stages, during which particular tactics are most appropriate to ensuring partnership progress and success. These are similar to the stages that any team is likely to go through, as people come together to achieve common goals.

## Typical Characteristics of each Stage

### i) **Forming**

- Common cause, arising from shared interests, opportunities, threats
- Early enthusiasm: new challenge, new relationships
- Exploring what's needed, what's possible
- Nature of commitments unclear

### ii) **Frustration**

- Partners feel “in a fog”
- Disputes or tension over priorities and methods
- Individuals questioning purpose of the partnership and reasons for being there
- Hidden agendas influencing what partners do
- Doubts about what each one brings to the party
- Partners competing for credit and control

### iii) **Functioning**

- Renewed vision and focus
- Progress through joint project teams
- Partners talk in terms of “we” not “you”
- Clear roles and responsibilities
- Full accountability to each other for actions

### iv) **Flying**

- Successful achievement of partnership goals
- Shared leadership
- Partners changing what they do and how they do it to achieve partnership objectives
- Trust and mutual respect
- Partnership priorities are central to partner activities

v) **Failing**

- Disengagement
- Lack of commitment
- Recurrent tensions
- Breakdown or frittering away of relationships

<http://fivevital.educe.co.uk/images/Partnership%20Life%20Cycle%20rtf.rtf>

### Factors Influencing the Success of Collaboration and Partnership

Eleven factors that contribute to successful partnerships and collaborations are:

- i) **People:** Organizations do not work together, people do – thus individual characteristics will be a factor in whether the collaboration is successful or not. Check out the behavior and culture of different health professionals and their level of commitment to the collaboration.
- ii) **Vision:** Create a shared vision and common goals (Global health) that incorporate all of the members' perspectives and interests, and identify mutual needs that cannot be met by one organization alone.
- iii) **Trust:** Take some time to explore your common ground. "Trust is built through mutual respect for each professional's experience, knowledge and contribution.
- iv) **Time:** Do not give in to the pressure for speed and action. Getting to know each other in order to develop a solid partnership takes time, as does planning and implementation.
- v) **Planning:** Working together effectively requires a great deal of planning. All aspects of the collaborative, including purpose, function, decision-making process, the risks and benefits to each member and anticipated results need to be considered, agreed upon and committed to (usually by signing a written agreement). Subsequently, every meeting, every work plan, every approach to a prospective member or funder, has to be planned.
- vi) **Communication:** There needs to be transparent flow of information among members, and mechanisms for ensuring that all members are kept up-to-



date on matters relating to the collaboration and have clear means of voicing concerns and suggestions.

- vii) **Learning Together:** Partnerships involve learning about each other, about the issues or needs that are being addressed, and about how to work together effectively.
- viii) **Decision-Making:** It is crucial that how decisions are made is agreed upon right at the start of the partnership and adhered to throughout its duration. Partners should also agree on a problem resolution process. Agreements regarding the investment of people, time and resources need to be negotiated and clearly understood by all partners.
- ix) **Leadership:** There are many options for leadership; e.g. elect a Chair or Co-chairs, or establish different roles for different members. It may be formal or informal. Shared leadership can renew energy and increase commitment.
- x) **Technology:** Electronic communication can enhance and support the work of the partnership by facilitating connections and opportunities for innovation. An assessment of current systems and technical capacities of each of the members is required before effective information and communications systems can be established.
- xi) **Flexibility:** As circumstances change, one or more members may not be able to contribute to the extent originally intended, or may not be able to remain involved at all. The remaining members will have to make adjustments accordingly.

## Benefits of Collaboration

- i) Opportunities to learn and to adapt are created.
- ii) New resources—time, money, information, raw materials, legitimacy and status—can be acquired.
- iii) The costs involved of developing new policies and services and the risks can be shared.
- iv) Influence over a policy or sector can be enhanced.

- v) Ability to manage uncertainty and solve complex problems
- vi) The mutual support of other organizations can be gained and harmonious working relationships created.
- vii) It allows a broad and comprehensive analysis of problems to be explored.
- viii) The response capability is more diversified through joint action from different partners.
- ix) The process ensures that each stakeholder's interest is considered in any agreement.
- x) Parties retain ownership of the solution.
- xi) Participation enhances acceptance of the solution, greater ownership and willingness to implement it.
- xii) Potential to deliver novel, innovative solutions is enhanced.
- xiii) Transaction costs associated with working in hierarchies and markets are avoided.
- xiv) Mechanisms for coordinating future action among partners can be established through increased trust and building social capital.
- xv) Collaboration encourages a more efficient use of scarce resources, avoids duplication and promotes coordination.

### Challenges of Collaboration

- i) Loss of technological superiority
- ii) Loss of resources – time, money, information, raw material, legitimacy and status
- iii) Perceived danger of being linked with failure and sharing costs of failing such as loss of reputation, status and financial position
- iv) Loss of autonomy and ability to unilaterally control outcomes
- v) Goal displacement and general lack or loss of control
- vi) Conflict over domains, goals or methods
- vii) Delays in solutions due to problems in coordination and higher transaction costs

- viii) Increase complexity of decision-making
- ix) Problems of lack of accountability and transparency
- x) Confusion over organizational identity and professional roles.

## References

Ros Carnwell and Alex Carson 2009. Understanding partnerships and collaboration

WHO 2008: Zoonotic diseases: a guide to establishing collaboration between animal and human health sectors at the country level.

Paul Williams, (2007). Learning to Collaborate: Lessons in Effective Partnership Working in Health and Social Care

## ***SESSION 3: Team Building and Stage of Team Development for Collaboration and Partnership in One Health***

This section will include and create understanding of team building and stages of team development in collaboration and partnership and explain the importance of team dynamics in collaboration. Examples will be drawn from multiple public health related outcomes.

### **Session Learning Objectives**

Participants will be able to:

- i) describe the importance of teamwork.
- ii) explain the typical stages in the development of a team.
- iii) collaboratively organize a team and complete a project.
- iv) create One Health team and identify the team dynamics.

### **Mode of Learning**

Small group activity; large group discussion; lecture, team building exercise; paper tower exercise; self-studies and assessment exercise

## Materials

- Computer, LCD projector, screen/blank wall
- Flipchart or whiteboard with markers
- Reading materials
- Module PowerPoint
- A4 paper of different colors, a pair of scissors, and glue
- Student guides

## Session Assignment

Articles on team building from reading material and articles from the resource collection

## Reading Materials

International Centre for Development Oriented Research in Agriculture (ICRA). (n.d) Conflict in Teams. Retrieved on August 10, 2015, from [http://www.icra-edu.org/objects/anglolearn/Conflict-Key\\_Concepts1.pdf](http://www.icra-edu.org/objects/anglolearn/Conflict-Key_Concepts1.pdf).

International Centre for Development Oriented Research in Agriculture (ICRA). (2013) Conflict Resolution Guidelines – Negotiation. Retrieved on August 10, 2015, from [http://www.icra-edu.org/objects/anglolearn/Negotiation\\_Tool1.pdf](http://www.icra-edu.org/objects/anglolearn/Negotiation_Tool1.pdf).

Partnerships: Frameworks for Working Together  
<http://www.strengtheningnonprofits.org/resources/guidebooks/Partnerships.pdf>

- 
- Facilitator Pre-Class Setup** i) Prior to the session, create kits for teams of 4-6 learners; make sure that there is an even number of groups. Each kit should contain the following supplies:
- A4 paper of different colors
  - A pair of scissors
  - Glue

These materials should be placed into a small paper bag or envelope, which simplifies distribution and hides the contents, maximizing the element of surprise.



## Self-awareness and Social Styles

Effective collaboration requires that partners understand the characteristics of the One Health team, are aware that people are different and have different characters, and that different sectors and departments have different cultures. The social style activity allows participants to understand people's characteristics to improve team relationships. Begin this session by doing a brief presentation on self-awareness. (PPP No. 3)

**Self-Awareness:** the ability to recognize and understand your moods, emotions and drives as well as your effect on others.

**Self-Regulation:** the ability to control or redirect disruptive impulses and moods; the ability to think before acting and to suspend judgment.

**Empathy:** the ability to understand the emotional make up of other people and to be sensitive to their emotional needs.

Understanding social styles builds our **self-awareness** around how we like to communicate, provides **clues** as to why we find some communication situations **difficult**, helps us to **appreciate difference**, equips us to **recognize different styles and to adapt to connect more effectively**.

SOCIAL STYLE is the *world's leading Behavioral Style model*. It has been used by thousands of organizations to improve leadership performance and sales results. SOCIAL STYLE is powerful because it is easy to understand and apply with others. It makes your relationships more effective. Years of research into workplace success have shown that people are one of four SOCIAL STYLES, each with their own preferred way of acting, thinking and making decisions. Understanding those preferences allows you to determine the best way to interact with anyone.

Each style represents itself through people's daily interactions. At surface level, each style is closely linked to whether an individual tends to assert himself or respond to others in social settings, and whether he tends to display emotion or secure control in group settings.

i) Characteristics of a team

- ii) Process roles of team members
- iii) Technical roles of team members
- iv) Stages of team development
- v) importance of teamwork and team dynamics



**Activity 1:** Ask the participants to complete the questionnaire on social styles following the instructions given (questionnaire found in the appendices)

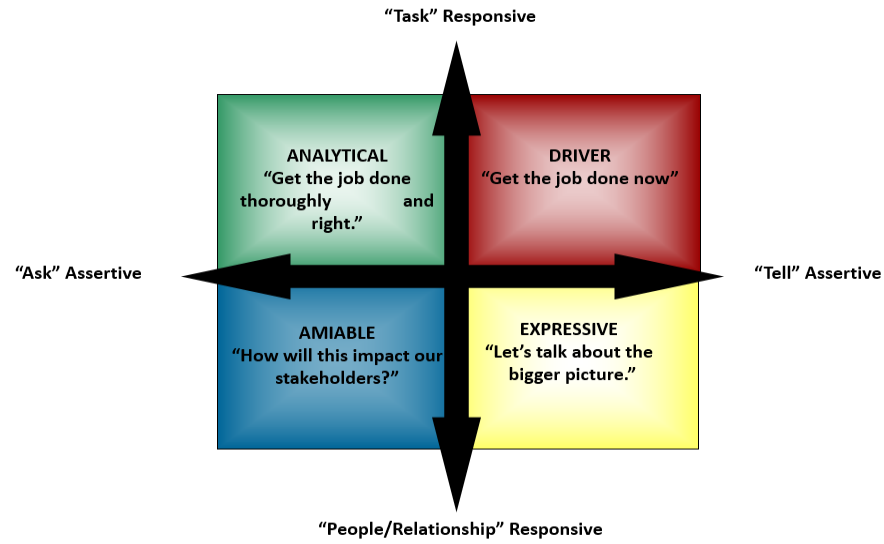
Choose the statement in each pair that you think most accurately expresses how other people see you at work. If you think that neither reflects how you come across to others, choose the one that *more closely describes* how others perceive your behavior. On some items, you may think some people would see you as described by one statement while others might see you as described by the other statement. For those items, select the statement that represents how a majority might view you.

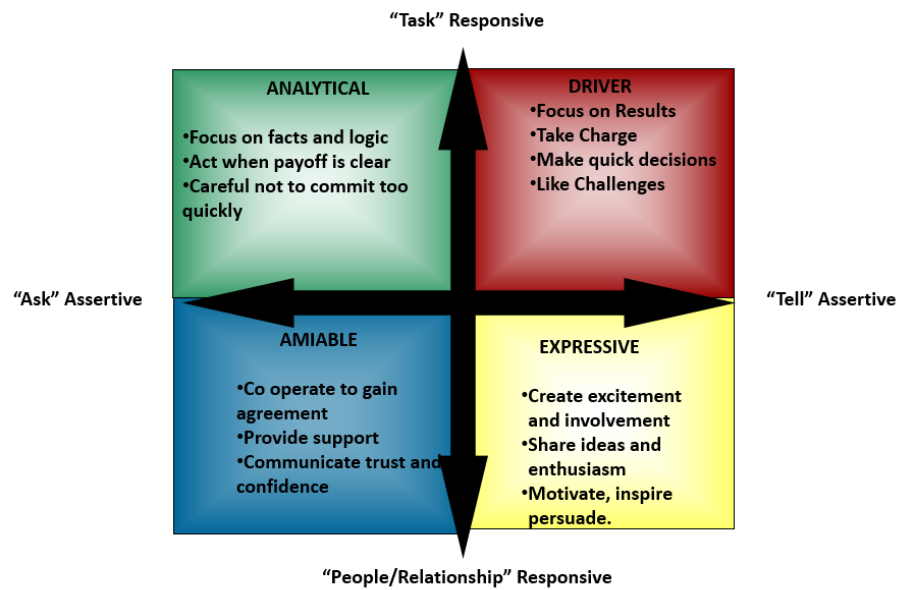
When you have completed the questionnaire, please **add up the total number of Xs in each column** from both pages and enter in the TOTALS space provided below: (**max total = 9**)



### TOTALS

Column 1	Column 2	Column 3	Column 4
<i>The "Greens"</i>	<i>The "Reds"</i>	<i>The "Blues"</i>	<i>The "Yellows"</i>





*What Makes Them Tick: Social Styles – Characteristics*

<p><b>Analyticals – The “Greens”</b></p> <ul style="list-style-type: none"> <li>❖ Dislike rapid change</li> <li>❖ Dislike personal attention</li> <li>❖ Accuracy</li> <li>❖ Task focused – method and detail</li> <li>❖ Serious, orderly and persistent</li> <li>❖ Cautious</li> <li>❖ High standards</li> <li>❖ Like clear org structures</li> <li>❖ Neat and tidy</li> <li>❖ Decide when information is complete and have taken time to reflect</li> </ul>	<p><b>Drivers – The “Reds”</b></p> <ul style="list-style-type: none"> <li>❖ Tangible results</li> <li>❖ Shape their own world</li> <li>❖ Task focused – getting it done now</li> <li>❖ Control and dominance</li> <li>❖ Assess benefits and risks</li> <li>❖ Emotion averse</li> <li>❖ Independent and strong willed</li> <li>❖ Cool, calculating and competitive</li> <li>❖ Love a challenge</li> <li>❖ Can be impatient</li> <li>❖ Work independently</li> <li>❖ Entrepreneurial</li> </ul>
<p><b>Amiables – The “Blues”</b></p> <ul style="list-style-type: none"> <li>❖ Relationships</li> <li>❖ Build trust</li> <li>❖ Personal worth measured by response from others</li> <li>❖ Supportive, approachable</li> <li>❖ Aggressive behavior switches them off</li> <li>❖ Steady, agreeable</li> <li>❖ Relaxed</li> <li>❖ Decide after careful consideration</li> <li>❖ Change in small doses</li> <li>❖ Criticism and conflict averse</li> <li>❖ Informal and welcoming</li> </ul>	<p><b>Expressives – The “Yellows”</b></p> <ul style="list-style-type: none"> <li>❖ Acknowledgement and recognition</li> <li>❖ Fast-paced manner</li> <li>❖ Relationship driven</li> <li>❖ Like to join in</li> <li>❖ Enjoy visibility</li> <li>❖ Visionaries</li> <li>❖ Enthusiastic, charismatic</li> <li>❖ Optimistic - glass is half full</li> <li>❖ Detail averse</li> <li>❖ May jump to conclusions</li> <li>❖ Like open friendly environments</li> <li>❖ Quick to say yes to an exciting opportunity</li> </ul>

Discuss these different social styles and how they can work together as multi-sectoral teams. This activity is very interesting because people discuss what they think their social styles are.



**Activity 2:** Find someone with a different style from yours. Ask them these questions:

- i)* What communication style works best for you? (formal, informal, fast, slow, face to face, verbal, written)
- ii)* How do you like to get information (details, summary, facts or people)?
- iii)* Switch roles and let them ask you questions.



iv) Within a team, members take on different roles and responsibilities. There are approximately nine characteristic roles based on how a person relates to others in the team.

These roles include those who are:

- action-oriented (shaper, implementer, completer/finisher).
- people-oriented (coordinator, team worker, resource investigator).
- cerebral (monitor, evaluator, specialist).
- 

### Teamwork Role Play

Have learners watch YouTube video on teamwork:

<https://www.youtube.com/watch?v=xevQ2yTyK9Y>

**After watching this video:**

- i) Break down into 3 groups: Each group will be given 10 minutes to generate an idea and develop a role play/ skit on teamwork.
- ii) The teams will then present their role plays to the rest of the class. The role plays should only last at most 3 minutes. Discuss the role plays and key themes identified that make a good team.
- iii) Summarize the section by talking about teamwork and the qualities expected of an efficient One Health team. Discuss the concept of teams.

### Points for Discussion

1. What happened? What did you notice about how teams prepared?



role play

2. What were the leadership dynamics? (e.g., were there discussions about who would lead? Did different people assume leadership at different times?)
3. What did the leader(s) do that was effective? Not as effective?
4. As a team member, how did you communicate to leadership your personal needs and opinions?
5. Did you feel you were competing with the other teams to be the first or did the teams collaborate?
6. What will you do differently next time; as a leader? As a follower?

Have the class discuss teamwork skills portrayed in the video and list them down. Let learners indicate the skills that they have applied before while working in teams (notes on teamwork included).



**Present a PowerPoint on Leadership, Teamwork and Team building (PPP No. 4A & 4B)**



### **Post-training Session Assessment**

1. What are the social skills needed for success of teamwork?
2. List the dysfunction of the team?
3. What are the stages of team development and their characteristic features?

4. What are teams?
5. What are the characteristics of effective teams?
6. How do you create a shared vision?
  - a. *Individually share your vision of your ideal team.*
  - b. *Identify common ideas; find others you can agree on.*
  - c. *Create a presentation (draw a picture, enact a role-play, etc.) that reflects your group's ideas.*
  - d. *Write one to three sentences using key words or phrases to describe your group's vision.*
7. How do you improve team effectiveness?
  - a. *Select the priority characteristic you are most interested in or passionate about (you will work on that idea in a small group).*
  - b. *Identify two or three concrete actions you could take as a team to improve your effectiveness in this area.*

# Detailed Facilitator Notes for Session 3

*Retrieved from various sources*

## Defining Some Terms

**Team:** A group of individuals with complimentary abilities and skills committed to a common purpose and accountable for performing tasks that contribute to achieving common goals. Collective benefits from working in a team must outweigh the benefits of working individually.

**Teamwork:** The process by which a group of individuals, working as a team, is able to collaborate on a specific project or activity.

**Team synergy:** Setting the stage so that the team is able to work as a unit. This can be built through strategic planning sessions as well as social gatherings.

## Functions and Roles of Teams

Teams unite individuals who share a common goal or purpose and have skills that will help to reach this goal. What differentiates a team from a simple grouping of individuals is the accountability within the team for performing tasks related to the purpose and goal.

Four types of teams have been described, based on the function the team is meant to play:

- Problem-solving teams: created to address a specific problem; these teams are time bound by the problem they are attempting to understand and manage.
- Self-managed teams: usually ongoing groups within an organization who share a common mission and collectively manage their own affairs.

- Cross-functional teams: multidisciplinary groups consisting of people who bring diverse skills and experience to work on a number of different issues.
- Virtual teams: these are teams whose members live and work in different places, yet still manage to work together, usually electronically, either at the same time or at a different time.

## Teamwork

**Teamwork** is defined as "a joint action by a group of people, in which each person subordinates his or her individual interests and opinions to the unity and efficiency of the group." This does not mean that the individual is no longer important; however, it does mean that effective and efficient teamwork goes beyond individual accomplishments. The most effective teamwork is produced when all the individuals involved harmonize their contributions and work towards a common goal.

In order for teamwork to succeed one must be a team player. A team player is one who subordinates personal aspirations and works in a coordinated effort with other members of a group, or team, in striving for a common goal. Businesses and other organizations often go to the effort of coordinating team building events in an attempt to get people to work as a team rather than as individuals.

Aside from any required technical proficiency, a wide variety of social skills is desirable for successful teamwork, including:

- i) **Listening** - it is important to listen to other people's opinions. When people are allowed to freely express their ideas, these initial ideas will produce other ideas.
- ii) **Discussing** - It is important to discuss your ideas with your teammates until you agree.
- iii) **Questioning** - it is important to ask questions, interact, and discuss the objectives of the team.
- iv) **Persuading** - individuals are encouraged to exchange, defend, and then to ultimately rethink their ideas.



- v) **Respecting** - it is important to treat others with respect and to support their ideas.
- vi) **Helping** - it is crucial to help one's co-workers, which is the general theme of teamwork.
- vii) **Sharing** - it is important to share with the team to create an environment of teamwork.
- viii) **Participating** - all members of the team are encouraged to participate in the team (which usually consists of three or more people).
- ix) **Communicating** - For a team to work effectively it is essential for team members to acquire communication skills and to use effective communication channels between one another e.g. using email, viral communication, group meetings and so on. This will enable team members of the group to work together and achieve the team's purpose and goals.

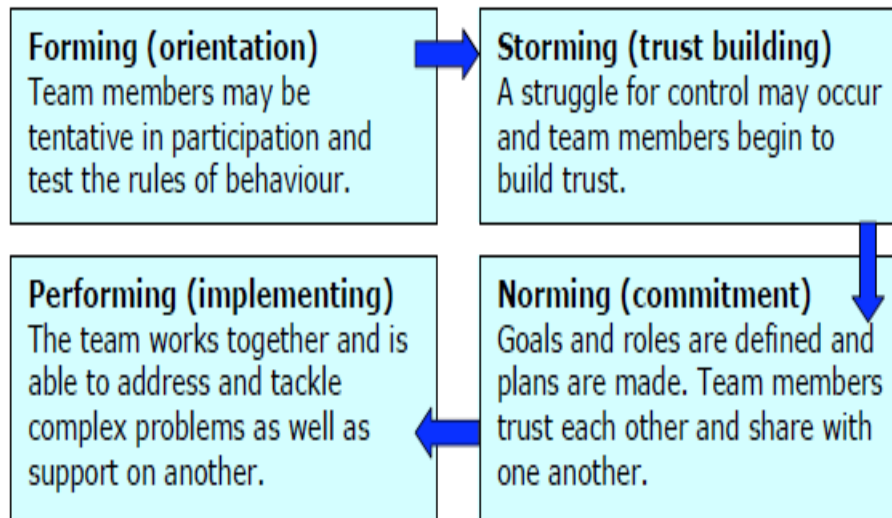
The Forming-Storming-Norming-Performing model takes the team through four stages of team development and maps quite well onto many project management life cycle models, such as initiation-definition-planning-realisation. As teams grow larger, the skills and methods that people require grow as more ideas are expressed freely. Managers must use these to create or maintain a spirit of teamwork change. The intimacy of a small group is lost, and the opportunity for misinformation and disruptive rumours grows.

### **What Makes a Team Effective and Satisfying?**

Effective teams depend highly on the dynamics of the group. Group dynamics are related to the size of the group, tasks and roles of members, group leadership, development of the team, and the norms of the team. Each of these is dependent on the process of team development. There are a number of different theories on how teams effectively and successfully develop. Two of these are:

## Forming, Storming, Norming and Performing

This four-stage model is followed at the end by a period of renewal and reassessment in which team members consider the goals and objectives and recommit to the work of the team. They become re-energized.



## Creating and Sustaining

In this seven-step model, teams move through a period in which they are created and evolve into a period in which they are sustained and continue their work. Achieving commitment among team members is central and therefore must occur in both the creating and sustaining stages. Each step may be oriented around a simple question to team members:

### *Creating Stages*

1. Orientation: Why am I here?
2. Trust Building: Who are you?
3. Goal and Role definition: What are we doing?
4. Commitment: How will we do it?

### *Sustaining Stages*

4. Commitment: How will we do it?
5. Planning: Who does what, when and where?
6. Implementation: the high performance (or "wow!") stage
7. Re-assessment and Renewal: Do we continue? If yes, why and how?

“Forming, Storming, Norming and Performing” is seen as a linear, step-wise process. In contrast, stages within Creating and Sustaining may occur simultaneously. Neither is time bound, as different teams require a different timeframe for achieving commitment and trust.

## **Team Building**

Team Building, or Team Development, is a coverall term given to methods of developing an effective team. The methods of doing this vary widely, and include:

- i) Simple social activities - to encourage team members to spend time together
- ii) Group bonding sessions - company sponsored fun activities to get to know team members
- iii) Personal development activities - personal change applied on a group level, sometimes physically challenging
- iv) Team development activities - group-dynamic games designed to reveal how individuals approach a problem and how the team works together
- v) Psychological analysis of team roles, and training in how to work better together

Team building generally seats within the theory and practice of organizational development.

The five dysfunctions of the team are:

- i) Absence of trust—unwilling to be vulnerable within the group
- ii) Fear of conflict—seeking artificial harmony over constructive passionate debate
- iii) Lack of commitment—feigning buy-in for group decisions creates ambiguity throughout the organization
- iv) Avoidance of accountability—ducking the responsibility to call peers on counterproductive behavior which sets *low standards*
- v) Inattention to results—focusing on personal success, *status and ego* before team success

### Features of Effective Working Teams

In order to work as an effective team, you as an individual member, together with other members of the One Health team, should:

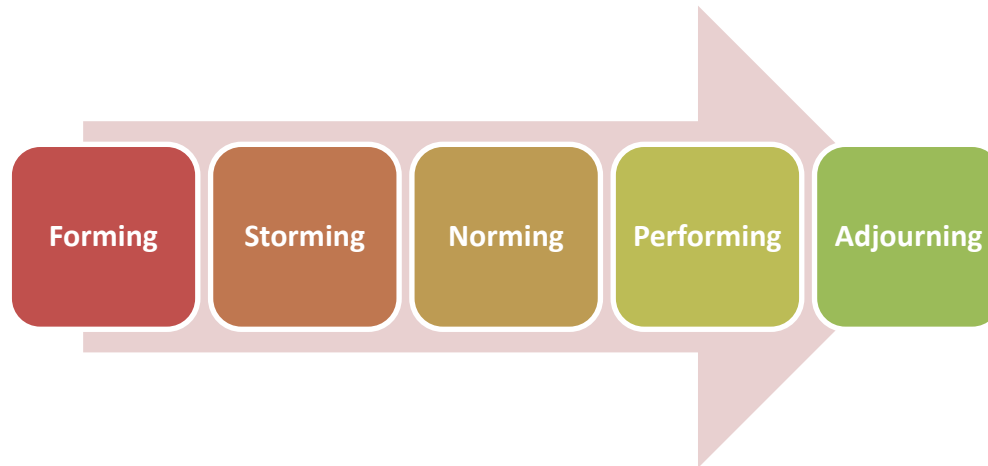
- i) have a clear understanding and commitment to a common task and overall purpose.
- ii) have a clear idea of your own job and how it relates to other team members' jobs.
- iii) understand the work and duties of other members, particularly where there is an overlap in functions; for example, a nurse and a clinical officer may do similar work from time to time.
- iv) be flexible among yourselves so that the work of your team does not collapse when one member is absent.
- v) create a good learning and training environment in the workplace. Your team leader should encourage and stimulate this process.
- vi) ensure stability and continuity of your functions by avoiding frequent changes of members, otherwise you will not sustain teamwork.
- vii) build-up an efficient team by mobilizing sufficient resources to carry out the team's functions. You also need to develop working methods and procedures

which are well understood and practiced by each team member and ensure efficient use of the resources available to your district.

- viii) develop good relationships within yourselves by being open, understanding and willing to help each other.
- ix) develop ways of measuring and recognizing your team's functionality, achievements and success.
- x) develop a strong sense of cohesiveness and loyalty, which will enable you to work well and tackle health problems successfully. However, this loyalty should not be at the expense of other health workers.

### Operating as a Team

- Characteristics of a team
- Process roles of team members
- Technical roles of team members
- Stages of team development (as outlined in the diagram below)



**Source:** SEAOHUN Collaboration and Partnerships Module 2014  
<https://seahunonehealth.wordpress.com/>

## References

International Centre for Development Oriented Research in Agriculture (ICRA). (n.d) Conflict in Teams. Retrieved on August 10, 2015, from [http://www.icraedu.org/objects/anglolearn/Conflict-Key\\_Concepts1.pdf](http://www.icraedu.org/objects/anglolearn/Conflict-Key_Concepts1.pdf).

International Centre for Development Oriented Research in Agriculture (ICRA). (2013) Conflict Resolution Guidelines – Negotiation. Retrieved on August 10, 2015, from [http://www.icraedu.org/objects/anglolearn/Negotiation\\_Tool1.pdf](http://www.icraedu.org/objects/anglolearn/Negotiation_Tool1.pdf).

Partnerships: Frameworks for Working Together Retrieved on August 12, 2015, from <http://www.strengtheningnonprofits.org/resources/guidebooks/Partnerships.pdf>

## **SESSION 4: Importance of Communication in Collaboration in One Health and Skills for Inter-professional Partnership in One Health**

This session focuses on creating a skill on inter-professional partnership in One Health and conflict management in inter-professional collaboration in One Health. The session takes the approach of student-based-learning, facilitating participants to reflect on the relevancy and gaps of what they do daily in their work of managing disease pandemics. For most part of the day, participants will engage in an interactive simulation exercise. Participants play the role of a One Health practitioner as they work with a community to create effective disease control and response strategies to the outbreak in the scenario. In these scenarios the students will be able to evaluate each other on the performance of the groups.

### **Session Learning Objectives**

Participants will be able to:

- i) express the different ways of communication in collaboration and partnership.
- ii) debate how communication affects collaboration and partnership.
- iii) listen, speak and write to be understood by all (gain understanding of personal working style, styles of others).
- iv) prepare and deliver gender-sensitive risk communication.

### **Type of Learning**

Lectures; role play; individual, small group and large group activities, storytelling, dialogue, drawing activity

## Materials

- Computer, LCD projector, screen/blank wall
- Flipchart or whiteboard with markers
- Module PowerPoint
- Student Guides
- Instruction “Drawing Activity”

## Pre session Assignment

- Read articles on communication for collaboration from the reading material and resource and essay, “Politics and the English Language” (George Orwell)

## Reading Materials

1. Building Effective Relationships: Effective Communications in Collaborations: Critical Factors <http://www.collaborationcoach.ca/wp-content/uploads/2013/02/EffectiveComm CriticalFactors.pdf>
2. CCGHR: Building Respectful and Collaborative Partnerships for Global Health Research
3. Rufaro Chatora, Prosper Tumusiime 2004: Management, Leadership and Partnership for Communication
4. Prior to this session, review the One Health Course Communication and Informatics module for related information and exercises.

Welcome participants and tell them that this session on communication for collaboration will focus on the speaking, writing and listening skills that are essential for team communication.

## Lecture on Communication

Deliver the lecture on team communication, viewing the module PowerPoint for detailed lecture notes. The lecture will review the following concepts:



- i) What is communication?
- ii) What is effective communication?
- iii) Why is effective communication important to collaboration?
- iv) Speak clearly and listen openly
- v) Managing differences
- vi) Ways of responding

### Active Listening

- i) Watch the following video clips from big bang theory:

<https://www.youtube.com/watch?v=vkSwXL3cGUg&list=PLLTRx2n5eYMXHcpnIrwDNBpHf4YVmjUp>

<https://www.youtube.com/watch?v=6TeOGJP5vGA>

- ii) Briefly reflect on the video and discuss some of the problems you recognize in the clips and some possible solutions to those problems.
- iii) Give a brief PowerPoint presentation on **Active Listening (PPP No.5)**. Please note that PPT has an inbuilt exercise on active listening as the lecture progresses.

Active listening is a way of listening and responding to another person that improves mutual understanding. Often when people talk to each other, they do not listen attentively. They are often distracted, half listening, half thinking about something else. When people are engaged in a conflict, they are often busy formulating a response to what is being said. They assume that they have heard what their opponent is saying many times before, so rather than paying attention; they focus on how they can respond to win the argument.

Active listening is a structured form of listening and responding that focuses the attention on the speaker. The listener must take care to attend to the speaker fully, and then repeats, in the listener's own words, what he or she thinks the speaker has said. The listener does not have to agree with the speaker--he or she must simply state what they think the speaker said. This enables the speaker to find out whether the listener understood. If the listener did not, the speaker can explain some more.

Active listening has several benefits. First, it forces people to listen attentively to others. Second, it avoids misunderstandings, as people must confirm that they do understand what another person has said. Third, it tends to open people up, to get them to say more. When people are in conflict, they often contradict each other, denying the opponent's description of a situation. This tends to make people defensive, and they will either lash out, or withdraw and say nothing more. However, if they feel that their opponent is attuned to their concerns and wants to listen, they are likely to explain in detail what they feel and why. If both parties to a conflict do this, the chances of being able to develop a solution to their mutual problem becomes much greater.

### **Small Group Work on Active Listening**

Groups of three: One member listens (observer) while the other 2 carry out a The observer notes the active listening skills be applied and reports back to the group. Group members then change roles.

**Debrief:** Please note that nowadays, people are becoming

extremely busy and listening skills are changing. There is a belief that a video clip should not be more than 3 minutes because students lose interest. In the class discuss some of these modern-day issues are because of changing technology and how to deal with them. Is active listening still applicable or should it be done differently? What are some of the ideas that participants can come up with?

### **Drawing Activity to Solve Problems of Expression and Listening**

- i) Hand each participant a sheet of paper. Explain that you are going to give directions. Participants will replicate a drawing through simple verbal instructions. There are two rules: 1) Each person must remain silent throughout the exercise; and 2) no one may ask a question.

Here are the participants' instructions:

- Draw a circle.
  - Draw a triangle inside the circle.
  - Draw a square in the corner.
  - Write your name on the paper.
- ii) Have all participants hold up their picture. Most will be different in some way. Ask participants why their drawings were not similar. Everyone heard the same message, yet everyone perceived the message differently. Comments may include, "We could only be silent and not ask questions; the instructions were basic with no detail; the instructions were quick."
  - iii) Tell participants that none of their pictures matches, so

- they will try the activity again.
- iv) Ask the group to flip over the paper and start again. Use the following directions:
    - Draw a circle 4 inches in diameter in the center of your paper.
    - Draw a triangle inside the circle so that all three corners are touching the circle.
    - Draw a 1-inch square on the bottom-left corner of your paper.
  - v) Write "your name," spelled out Y-O-U-R-N-A-M-E, on the bottom-right side of the paper.
  - vi) Have all participants hold up their papers and hold up the one you prepared in advance. They should match. Close by saying that a team needs to communicate and listen to get the intended results.
  - vii) Once the participants have finished their drawing, discuss the experience. Ask the team to hold up their drawings and ask, "Why do the pictures look different? Weren't you listening?"
  - viii) Then prepare to repeat the activity. Say, "We are going to try this again. What needs to be different so everyone can listen more effectively?" Participants will say things such as: speak more slowly; let us ask clarifying questions; let us see your face as you read. You might ask them why they did not make these requests the last time.
  - ix) Then, read the description again. As you read, use the changes suggested by the team and allow questions.
  - x) Discuss the second experience. Ask team members to hold up their second drawings. Ask the following questions:
    1. Do the second drawings look more like one another?
    2. What active listening skills did you use this time?
    3. What helped your listening to be more effective?

- xi) Finally, show the sample picture and then debrief the session by asking the following questions:
1. Is that okay? Make sure the participants say something like, “We all bring our own experiences to our communication, to what we hear.”
  2. What are the implications for a cross-disciplinary, cross-sector, cross-culture One Health team?

40 min

## Putting it All Together: One Health Improve Circle

This activity comes from improvisational theatre. It requires close listening and the ability to build and strengthen your teammates or partner's "story".

### Directions:

- i) Have the class form a large circle.
- ii) Explain that you are going to start a One Health story and the person to your right needs to add a sentence.
- iii) The person on that person's right adds another sentence to the story.
- iv) You will continue until everyone has added to the One Health story and it comes to a natural end (e.g., complete at least one sentence).
- v) Start the improve circle by saying: "Once upon a time in a country far, far away, a small community was worried about the outbreak of . . ."

## Reflections on Listening and the One Health Improve Circle

Ask participants to reflect on their learning from the listening and improve exercises:

1. What listening techniques do you think are especially important?
2. What techniques did you use to add to the story?
3. How stronger was the final story with everyone's contributions?

4. How will you use some of these techniques to help your team communicate and collaborate?

5 min

### **Post-training Session Assessment**

1. How do you find the exercise of draw in relation to communication?
2. What listening techniques do you think are especially important?
3. Which of these techniques come naturally to you?
4. What is a technique that you want to improve?
5. How do you improve the communication in collaboration and partnerships for effective team building in One Health?

# Detailed Facilitator Notes for Session 4

*Retrieved from various sources*

## Communication

Communication is the vehicle for establishing information flow. Disclosing your needs, providing others with feedback, listening to their needs and feedback not only build trust but also set the stage for having a clear understanding of how you can help each other become successful, which leads to collaboration. The skill to accomplish this human-intensive communication activity is to create an atmosphere where partners can be open, safe, and comfortable in sharing information with each other.

This must not be left to chance. Partners need to be purposeful and deliberately design this atmosphere to ensure that they understand (1) the importance of building trust to allow communication to occur and (2) the very real consequences that destroying trust has on a relationship and ultimately, on the quality of the outcome of whatever task they are working on accomplishing together.

Communication also plays a large role in establishing mutual benefits. People do things for their reasons, not yours. Understanding, acknowledging, and working to help your partners satisfy their needs will build their commitment to the relationship. When people are committed to the relationship, they freely collaborate with you since they see the benefit for themselves. When they see the benefits, their commitment increases and they work even harder to make outcomes happen.

Achieving collaboration is the result of connecting and communicating. After finding the right partner, communicating your needs, establishing the mutual



benefits and trust, the stage is set for collaboration. True collaboration happens when people feel safe to share information and ideas, when they are unrestrained by fear. This releases a torrent of synaptic activity that stimulates the creative and innovative portions of the brain. When people feel they will benefit from the outcome, openly communicate and feel trust in the relationship, win-win solutions are easily achieved. People work together with less conflict and with more energy as they focus on the vision they are working on achieving together.

Achieving a common understanding is very crucial for the success of any partnership. To arrive at a common understanding, there has to be good and effective communication, where messages are conveyed with a shared meaning in a two-way manner between the parties involved. Often, conflict arises because of barriers to communication. Such barriers could be differences in perception, lack of knowledge, prejudice or bias, among others.

### **Open Communication**

There is a need for open and constant communication to ensure that everything flows accordingly in collaboration and partnership. This means that all parties need to be open and willing to communicate honestly with one another. In talking about addressing barriers, open and honest communication is the key to working through challenging situations. Open communication has been critical in building the strong relationships with collaborators, and it is clear that the 'team approach' is working very well in such cases.

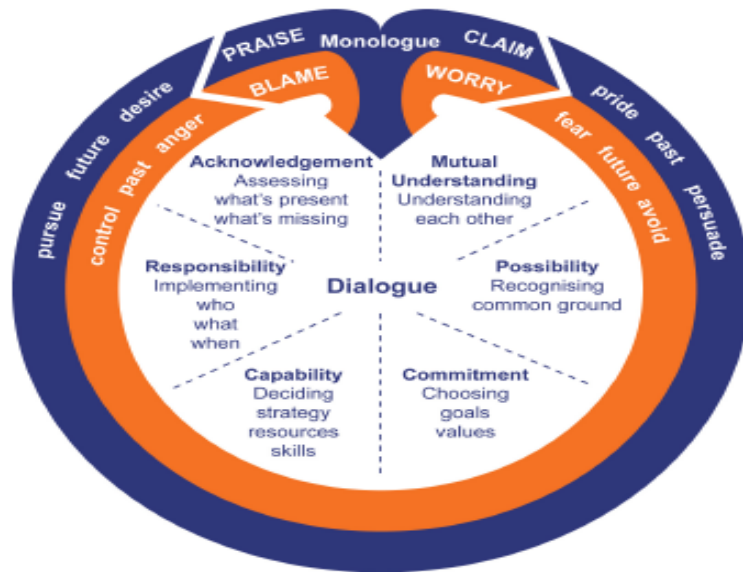
### **Dialogues**

The more people participate in dialogue and the decision-making process, the more effectively they work and learn. Individuals' monologues can be shared in dialogue in ways that create partnership and collaboration with those with whom we differ. In dialogue there is respectful sharing of different viewpoints that leads to mutual

understanding. Such understanding forms the basis for a shared vision, commitment to goals and values, and collaborative action.

Dialogue requires the willingness to listen to understand others who see situations different from how we do and to share our points of view honestly until each feels understood. Listening to understand means putting aside the temptation to agree, disagree, commiserate, or fix the situation and, instead, to listen respectfully in order to understand and learn. When we feel strongly about our own position, listening for understanding can be very challenging.

**The Mobius Model** (Demerest et al 2004)



These patterns of communication are shown on the Mobius Model where the outer circles depict the flow and unfolding of the four monologue conversations. Blame and Praise monologues flow anti-clockwise, and Worry and Claim monologues flow

clockwise. The monologues are described as being 'outside' the circle, where the focus is on the qualities of individuals, either self or others.

The process of dialogue is shown on the inside of the Mobius Model, where the focus is on the qualities of the relationship between self and others. The arrow at the top of the circle represents the choice we have when confronting differences. The six essential qualities of relationships identified within the Mobius Model can be recognized as present or absent in a particular relationship or interaction.

**Mutual understanding** exists when each person feels understood and also understands other(s). It is important to note that mutual understanding is not the same as agreement. We can understand others without necessarily agreeing with them.

**Possibility exists** when everyone recognizes something new that is desirable and seems realistic to create.

**Commitment** exists when there is agreement to priorities among the goals and values that will direct action.

**Capability** exists when there is agreement to a way to fulfill the commitments to which everyone has agreed.

**Responsibility** exists when there is agreement to expectations about what each person will do to carry out the commitments.

**Acknowledgement** exists when there is mutual recognition of what has been accomplished and what is still missing for the commitments to be fully realized.

## Five Ways of Responding

- i) Advising and evaluating
- ii) Analyzing and interpreting
- iii) Reassuring and supporting
- iv) Questioning and probing
- v) Understanding and paraphrasing

## Listening to Your Team and Partners

Listening requires an intent to “listen for meaning,” in which the listener checks with the speaker to see that a statement has been correctly heard and understood. The goal of listening should be to improve mutual understanding. When interacting, people often are not listening attentively to one another. They may be distracted, thinking about other things or thinking about what they are going to say next. (The latter case is particularly true in conflict situations or disagreements).

True listening is a structured way of listening and responding to others. It focuses attention on the speaker. Suspending one’s own frame of reference and suspending judgment are important in order to fully attend to the speaker.

### Techniques

- i) Focus on the speaker.
- ii) Watch for non-verbal cues. These may be more important than what is said.
- iii) Listen to how something is said. Inflection, intonation and strength of the speaker’s voice may communicate more than words alone.
- iv) Eliminate distractions.
- v) Give encouraging non-verbal cues; nodding and leaning toward the speaker show interest.
- vi) Encourage the speaker by using words such as, “Yes,” “I see,” and “go on.”
- vii) Ask questions to clarify what is said.
- viii) Check your understanding by repeating or paraphrasing what you think you heard.
- ix) Respond when appropriate.
- x) Control emotional responses.
- xi) Listen to the entire point without interrupting.
- xii) Give the speaker time to think as well as talk.

xiii) Summarize what was said.

## **SESSION 5: Conflict Negotiation and Management in One Health**

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In the presence of multiple collaborators, especially from different disciplines, conflict is bound to happen. This session will focus on conflict negotiation and management skills, collaboration skills and One Health team building practices.

### **Session Learning Objectives**

Participants will be able to:

- i) explain the types of conflict.
- ii) discuss the sources of conflict.
- iii) demonstrate constructive conflict resolution skills.

### **Type of Learning:**

Small and large group activity; large group discussion; lecture; role play, stage dialogue, team activity, case studies, drama and evaluation exercise, simulation exercise, field visit and reporting activity

### **Materials**

- Computer, LCD projector, screen/blank wall
- Flipchart or whiteboard with markers
- Module PowerPoint
- Handouts – Conflict Resolution Techniques
- Student guides

### **Pre-session Assignment**

Read articles on conflict and conflict resolution from the reading material and the

## Thomas-Kilmann Conflict Modes of Self-Assessment

### Reading Materials

1. Bertram, I. Spector 1997: Managing Disputes and Building Consensus: A Guide to Applying Conflict Resolution Mechanisms When Implementing Policy Change
2. International Centre for Development Oriented Research in Agriculture (ICRA). (2013) Conflict Resolution Guidelines – Negotiation.
3. Ten Lessons for Teaching Conflict Resolution Skills.
4. Tackling the Root Causes of Gender Inequalities in the Post-2015 Development Agenda,” Somali Cerise and Francesca Francavilla, OECD Development Centre, Paris, 2012

### Facilitator

Prior to the class on conflict resolution, participants should take a self-assessment on how they handle conflict. A copy of the Thomas-Kilmann Conflict Modes of Self-assessment is available in the resource folder of the module.

- i) Welcome learners to the session on conflict resolution and collaboration.
- ii) Ask them to quickly brainstorm a list of issues people often have conflict over, especially when working in teams.
- iii) Capture the list on a flipchart or whiteboard so you can refer back to it later in the session.



15 min

### Discovery Activity: What Do We Disagree Over?

- i) Give the participants 3 minutes each to make a list of the three things they mostly disagree over or that cause the most conflict in their lives.
- ii) Then have them make another list of three things they think cause the most conflict in the world?
- iii) Review these lists in a discussion and identify the most

common things in both lists.

Conflicts are a normal consequence of human interaction.

They can be constructive forces for social change.

Conflict resolution should not be an effort to suppress conflict but rather an effort to focus conflict energy through constructive channels.

### **Definition of Conflict**

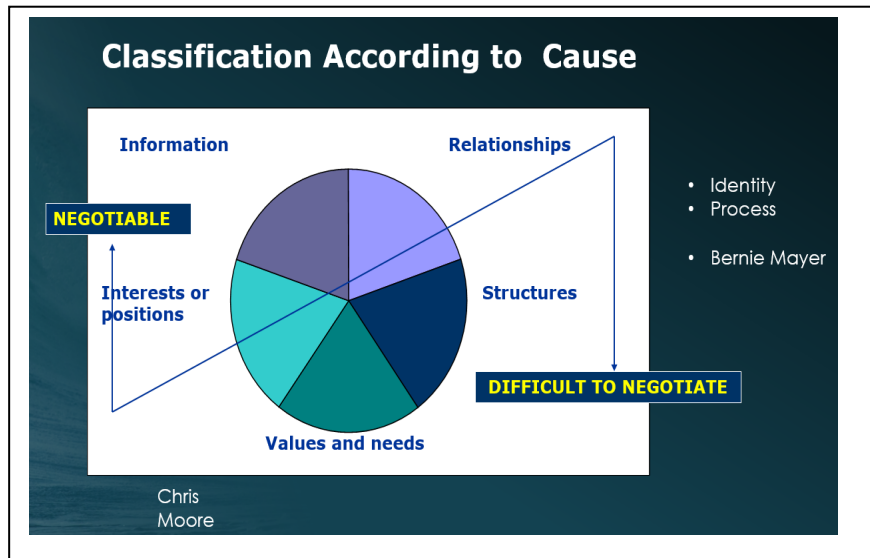
Conflict is the energy that builds up when individuals or groups of people pursue incompatible goals in their drive to meet their needs and interests.

Conflicts can be classified according to cause, and this makes it understandable whether they can be negotiated or not.

Many conflicts resulting out of values and needs and structures are difficult to negotiate, such as religious conflicts.

It is easier to resolve or negotiate conflicts that are from interests or positions because these can be changed or shifted.

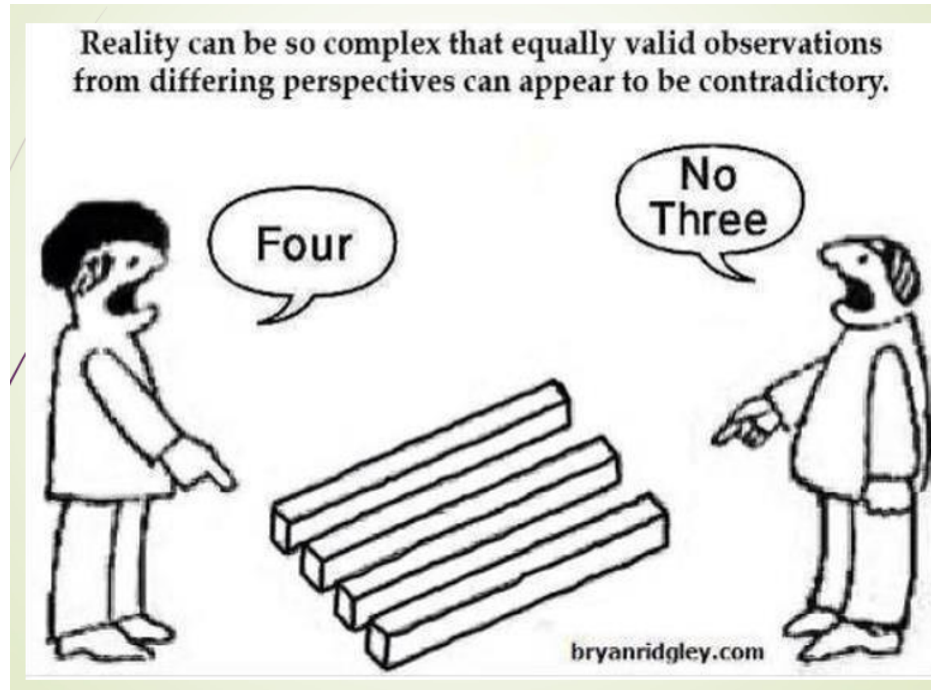




What do you see?

Let participants examine the two pictures below:

Picture 1:



Picture 2:



### **Conflict Resolution Techniques**

Deliver the lecture on Conflict Resolution Techniques as highlighted.

1. **Negotiation:** Usually associated with bargaining. It is typically used when a contract or transaction is involved. Parties come to terms through discussion.

2. **Mediation:** A third person acts as an intermediary to help settle a dispute. She/he guides discussion to help generate a solution. Parties must want to settle and demonstrate some give and take.
3. **Arbitration:** An impartial third party listens to both sides of a dispute and decides on the issue. The disputing parties are bound by the decision. Often flows from a contract of dispute over money (no flexibility) or when mediation has failed.
4. **Collaboration:** Parties work together to develop creative solutions that produce mutually desirable outcomes. Brainstorming is often used. No neutral third person is required.
5. **Concensus:** Those involved in the conflict agree on some points and come to a decision they can all live with. Everyone gives a little. Not the same as voting, although some associate it with majority rule.



45 min

### Types and Sources of Conflict

Deliver the lecture on types and source of conflict in collaboration. The lecture will review the following concepts:

- ▀ Types of conflict in collaboration
- ▀ The source of conflict in collaboration and partnership
- ▀ Conflict resolution skills
- ▀ Identifying roles of One Health team members for outbreak investigation and discuss the steps on outbreak investigation



40min



### Individual Exercise on Collecting Data on Sources of Conflict in a Partnership

<i>Example of Possible Conflict Sources</i>	<i>Exists</i>		<i>Level of Importance</i>		
	Agree	Disagree	Low	Moderate	High
This is a source of conflict because of differences over:					
Perceived power to influence decision					
The importance of resources received or expected from other partners					
How little some members know about the partnership					
The acceptance of partnership's purpose and objectives					
Interpersonal styles					
Perceptions of the other partners' ability to contribute constructively					
The real or hidden motive of the other partner					

The impact of the external environment on the partnership					
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70min



### Conflict Resolution Techniques Game

Identify one lady (Helen) and one gentleman (John) for the role play substituting the names as mentioned on the script.

#### Conflict Scenario

- i) Provide the participants with the following scenario: John and Helen are assigned by the Director of Disease Control and Prevention Department to work as a team on disease outbreak investigation. They disagree on what procedures to follow because each department has different standard operating procedures. The misunderstanding is costing their two departments, time and money and their limited resources are stretched.
  
- ii) Divide the participants into groups and have them discuss in their groups their approach to solving the conflict. Then discuss in a plenary. Identify which category it falls in and whether it is negotiable or not.



20 min



Role play

### Role Play of Conflict Mediation Technique

- i) Divide participants into four groups and assign each one a different conflict mediation technique (negotiation, mediation, arbitration and consensus). Give them a set of resources with more information on each technique. Then assign the following task:
- ii) Read or do some research on the technique assigned to your group.
- iii) Develop a 3- 5 minute roleplay that demonstrates this technique in action for the rest of the class. Use one of the topics brainstormed at the beginning of the class to illustrate or create a new scenario.
- iv) If participants need to do research, give them 45 minutes. If they get a handout, give groups 30 minutes to prepare.

### Role Play Presentations

Have each group demonstrate their role play. After each presentation, take some time to have the other individuals identify the skills they used in the role play for their assigned technique. Have the presenting group add in any points that were missed and add in your own overview of the key skills necessary to make the technique successful. Take 10 minutes total per group.



45 min



### Practicing Negotiation Skills

*Negotiation* is a method by which people settle differences. It is a process by which compromise or agreement is reached while avoiding argument and dispute. In any disagreement, individuals understandably aim to achieve the best possible

outcome for their position (or perhaps an organization they represent).

**Read the following case study:**

MEAs, Conservation and Conflict: A case study of Virunga National Park, DRC by Alec Crawford and Johannah Bernstein, October 2008.

The fishing village of Vitshumbi lies on the southern shore of Lake Edward in the Democratic Republic of Congo (DRC), about 25 km west of the Ugandan border and 200 or so south of the Equator. Economic life in the village revolves around the local fishery, and both the fishery and the village fall within the boundaries of Africa's oldest park, Virunga National Park (Parc National des Virunga, PNVi). Vitshumbi pre-dates the park, having been settled before its creation in 1925, when PNVi was first established as Albert National Park by the country's colonial administrators.

More recently, the people of Vitshumbi have experienced several turbulent changes. Over the past 20 years, violent conflicts, both local and regional, have engulfed the area, and rebel groups, park guards and armed forces often fight for control of the surrounding territory. The village itself has grown dramatically, as more and more fishers and their families arrive in town to vie for an increasingly small slice of the fishery pie. Public services have all but dried up, with most coming not from the state but from humanitarian organizations working in the area. The formal economy is stagnant. Poaching has increased.

In late December 2006, a fleet of four motorized pirogues arrived in Vitshumbi, each carrying 20 men armed with AK47s. The rebels had not come to intimidate the villagers,



but were there to target the lake's hippo population. Conflict had erased most of the Congolese wildlife authority's control in this part of the park; per newspaper reports, by nightfall, with no protection, 74 of the animals had been dragged out of the water and hacked into large pieces, their meat and ivory quickly shipped off to markets. While in the 1970s tens of thousands of hippos had maintained the ecological balance of the lake, by late 2006 only a few hundred remained.

Seven months later, on July 22, 2007, rangers working in the park's Southern Sector heard gunshots as night fell. The next day, patrolling the sector by foot, they came across the executed bodies of three members of the Rugendo family, a habituated, well-known group of endangered mountain gorillas. More bodies would be found in the next few days, and by the end of the summer, 10 gorillas in all were dead, none killed by poachers. Only 720 of the animals remain in the world, so the loss was significant. Eventually the murders would be tied to the perpetrators of the region's lucrative but illegal charcoal trade, a warning to those conservationists trying to break up that trade and protect the park resources and habitats it was destroying. Rebels, soldiers and corrupt members of the Institut Congolais pour la Conservation de la Nature (ICCN) would be implicated, though none have yet been held accountable.

- i) Divide the class into 5 groups as follows: villagers of Vitshumbi, hippo poachers, park rangers, charcoal traders, and government of DRC. Each group should brainstorm and identify what their needs are, why they do what they are doing and what they would like to see happen. They should all write their needs and opinions

on flip charts. They should elect a representative who will state their key position and a solution to the problem.

- ii) Bring all the groups together to the table.
- iii) At this point give the PowerPoint presentation on negotiation (**PPP No. 6**). As you give this presentation, the groups should continue to identify their bargaining stages, their concessions and their agreements. At the end of the presentation, give the groups 10 minutes to write these down and then come to the negotiating table.
- iv) Give all the groups, time to lay out their views and negotiations and have the groups try and reach an agreement on reducing the conflicts in the community and deaths of wildlife.

### Debrief:

1. How easy is it to negotiate?
2. Apart from this instance can members each discuss instances where they needed to negotiate and the methods they used. How did they prepare?
3. How did they bring everyone on board?

Brainstorm with the participants some solutions to the Virunga problem.



### Final Act

At the end, have the learners in groups of three: One observer, two negotiators. Have the group raise an issue and practice

negotiation skills.



## Case Studies and Activities of Medication Distribution for an Outbreak

i) Share the following scenario:

### One Health Scenario: Cholera outbreak Medication Distribution

There is a terrible cholera outbreak in Gambella region western Ethiopia where the refugees of South Sudan are settling. A One Health team is working to get vitally needed medications to the refugee camps. It takes too long and is too dangerous to bring the medications in by truck. It is also considered too dangerous to land a plane. It has been decided that the medications will be air-dropped. You are part of a One Health team who has been asked to design a container that will protect the medications as they fall to the ground. Your challenge is to use an egg to create a prototype that can safely be dropped from 10 feet.

- ii) Give the teams the following challenge, “Make a transportation device for a raw egg.” Tell them that they will be judged on the following three factors:
- Structure:** Ability to protect the egg from a 10-foot fall.
  - Aesthetics:** The overall attractiveness of the design.
  - Economics:** They will be given extra points for using fewer supplies. They are limited to using only the supplies given to their team.
- iii) Ask if there are any questions before handing out the following materials: 2 eggs (raw), 3 feet of masking tape, 15 soda straws, 2 pencils, 5 paperclips, 2 cups

- iv) Start the timer for 30 minutes and give reminders when 15, 5 and 1 minute(s) remain.
- v) Have each group present their transportation device, share supplies if they have any left and drop their egg. Give each group the opportunity to rank the other teams on their products (they cannot rank themselves and need to rank each team 1 to 4 for each of the three categories: structure, aesthetics and economics).
- vi) Gather the ranking sheets and give the groups a short break while you tally the rankings. When they return, declare the winner.



### **Putting it All Together: One Health Improve Circle**

Back in small groups, have learners discuss the following questions:

1. Where did we see improvement in our teaming and collaboration skills from the egg drop challenge?
2. How did you listen to each other? How did you complement and build on each other's ideas?
3. What conflict resolution styles/skills did we utilize? What was the impact on the team?
4. Where do we want to continue to improve individually as we move forward?
5. How do lessons from this experience translate to One Health?

### **Group Sharing and Final Reflections**

Ask groups to summarize their experiences during this process, and then ask them to describe how that applies in a One Health context.



### Assessment

1. Why is ignoring conflict usually not the best way to deal with a conflict situation?
2. How can you show you are listening to the people involved in a conflict?
3. Give some examples of open-ended questions that you might ask when trying to resolve a conflict.
4. Name three things to avoid when handling conflict.
5. Identify a conflict for which you plan to take responsibility. How will you use what you learned today to handle that conflict?
6. What have you learned from the John and Helen conflict?
7. What are the sources of conflicts in collaboration and partnership?
8. Do you feel the intervention strategy in the case study of cholera outbreak an appropriate measure or what would you like to improve?

# Detailed Facilitator Notes for Session 5

## Conflict in Collaboration

Conflict is neither positive nor negative in and of itself. Conflict is an outgrowth of the diversity that characterizes our thoughts, our attitudes, our beliefs, our perceptions, and our social systems and structures. It is as much a part of our existence as is evolution. Each of us has influence and power over whether or not conflict becomes negative, and that influence and power is found in the way we handle it.

The problem with inter-sectoral action in health is that everybody agrees to it, but no-one seems to be doing it!! Why aren't we doing it? Because organizations and sectors are like human beings, they like to dominate their relationships with others, and if they cannot they prefer to erect a high fence and say: This is my territory! Before turning to a discussion of the sources of conflict in collaborative groups, it is useful to examine the concept of social conflict in general. Sociology, psychology, communications studies, and business management perspectives inform multiple theories about the causes and consequences of conflict. Conflict is typically defined as the perceived incompatibility of values, interests, or goals between interdependent people.

Traditionally, conflict has been conceived as a negative outcome of dysfunction and something to avoid due to its destructive consequences. However, contemporary theorists suggest that not only is conflict normal and inevitable, but also necessary to catalyze social change and maintain a strong democracy.

In this conception, conflict is a transformative, creative force that can help raise awareness of injustice, mobilize participation, and foster leadership. In contrast to the highly polarized, "win-lose" nature of destructive conflict, "productive" conflict results from a "sustained effort to bridge the apparent incompatibility of positions"

and attain mutually satisfactory solutions that produce “a general feeling that the parties have gained something.”

Conflict is a predictable element in participatory planning and the ability to resolve conflict is one factor influencing collaborative success. Though the “norms to get along dominate many coalitions, the tendency to avoid or suppress conflict may exacerbate it and make it more destructive. There are numerous reasons conflicts occur – from a lack of shared vision and competition over scarce resources to determination of who participates and how decisions are made”. Regardless of the specifics, conflict seems to center on issues of power and control; identity and representation; communication. Additionally, “the history of individual or group relations (i.e., previous conflicts or reasons for loss of trust) can significantly influence the emergence and later escalation of conflict situations”.

### **Sources of Conflicts in Collaboration and Partnership**

Common underlying issues identified through reviews of locality collaboration and partnerships reveal a variety of conflicts that can be divided into six broad categories:

- Value disagreements (inadequate resources to meet needs or demands)
- Personality conflicts (personal, historical and hidden issues)
- Communication misunderstandings (lack or misunderstanding of policies, objectives and priorities)
- Doubts about priority need for partnership
- Confusion over differing degrees of members’ autonomy (incompatible structures and procedures, roles)
- Different power interests

As the partnership itself becomes the agent for change, it is clearly important to recognize the need for both personal understanding of one’s own potential for conflict and the potential brought to the partnership from the organizations represented. Clear links have been identified between conflict, change and

organizational development. Brown (1993) discusses how effective conflict management is often critical to constructive change processes.

### Conflict Style Pros and Cons

Divide the participants into small groups based on their guessed conflict handling mode. Have the groups discuss and be prepared to share their thoughts on the following questions:

1. How do you perceive “conflict”? Develop a metaphor or think of an image you associate with conflict as a group.
2. In what conflict situations is your style beneficial?
3. In what conflict situations is your style not the best and why?

Have each group quickly share highlights from their conversation. Connect what they have shared to the presentation on conflict resolution techniques.

### Conflict Resolution Techniques( derived from SEAOHUN Module)

Deliver the lecture on Conflict Resolution Techniques. See the PowerPoint slides (PPP No. 7) for the complete lecture notes.

<b>Negotiation</b>	Usually associated with bargaining. It is typically used when a contract or transaction is involved. Parties come to terms through discussion.
<b>Mediation</b>	A third person acts as an intermediary to help settle a dispute. They guide discussion to help generate a solution. Parties must want to settle and demonstrate some give and take.



<b>Arbitration</b>	An impartial third party listens to both sides of a dispute and decides on the issue. The disputing parties are bound by the decision. Often flows from a contract of dispute over money (no flexibility) or when mediation has failed.
<b>Collaboration</b>	Parties work together to develop creative solutions that produce mutually desirable outcomes. Brainstorming is often used. No neutral third person is required.
<b>Concensus</b>	Those involved in the conflict agree on some points and come to a decision they can all live with. Everyone gives a little. Not the same as voting, although some associate it with majority rule.

### How to Address/Reduce Partnership Conflicts

Conflict management in partnerships should focus on encouraging open communication and ways of negotiating expressed differences to meet at least some of the needs of all partners.

- i) Choose a person who is seen as being neutral to serve as a process observer. The role of this observer can vary from keeping time, offering clarification or remarks, to suggesting possible ways of managing or resolving the conflict. It is important, however, that all partners agree upon the process observer's role.
- ii) Select a specific conflict that is important to the partnership and the partners concerned.
- iii) Have the conflicting partners state their positions without interruption.
- iv) Have each opposing partner paraphrase the other side's explanations or point of view. This effort to understand more clearly and fully each other's position often results in useful conflict management. However, more work may be needed.
- v) Start an open dialogue for questioning, obtaining more information and further explanation. This helps ensure that each side understands the other. As the

dialogue continues, it is necessary to move beyond explanations. This would require two interacting skills - both parties should behave assertively and cooperatively.

- vi) Summarize the position of each party, emphasizing their major points of view. Provide an opportunity to each party to correct misinformation or clarify points.

## OHCEA EVENT EVALUATION - ONE HEALTH COLLABORATION AND PARTNERSHIP SHORT COURSE

Facilitators: \_\_\_\_\_

Dates: \_\_\_\_\_

OHCEA supported you to attend the **One Health Collaboration and Partnership Short Course** event. Please take a few minutes to fill out the following confidential questionnaire. Your responses will help us better understand the value of this event and improve future programs. Thank you!

*Please circle your response to each of the following.*

<p>This event met my expectations.</p> <ul style="list-style-type: none"> <li>a) Strongly disagree</li> <li>b) Disagree</li> <li>c) Agree</li> <li>d) Strongly agree</li> <li>e) Don't know</li> </ul>	<p>6. This event helped clarify my understanding of "One Health."</p> <ul style="list-style-type: none"> <li>a) Strongly disagree</li> <li>b) Disagree</li> <li>c) Agree</li> <li>d) Strongly agree</li> <li>e) Don't know</li> </ul>
<p>2. This event was relevant to my personal interests.</p> <ul style="list-style-type: none"> <li>a) Strongly disagree</li> <li>b) Disagree</li> <li>c) Agree</li> <li>d) Strongly agree</li> <li>e) Don't know</li> </ul>	<p>7. The pre-event logistics were well organized.</p> <ul style="list-style-type: none"> <li>a) Strongly disagree</li> <li>b) Disagree</li> <li>c) Agree</li> <li>d) Strongly agree</li> <li>e) Don't know</li> </ul>
<p>3. This event was relevant to my professional interests.</p> <ul style="list-style-type: none"> <li>a) Strongly disagree</li> <li>b) Disagree</li> <li>c) Agree</li> </ul>	<p>8. The event itself was well organized.</p> <ul style="list-style-type: none"> <li>a) Strongly disagree</li> <li>b) Disagree</li> <li>c) Agree</li> <li>d) Strongly agree</li> </ul>

d) Strongly agree e) Don't know	e) Don't know
4. The information presented was new to me. a) Strongly disagree b) Disagree c) Agree d) Strongly agree e) Don't know	9. Overall, I found this event to be worthwhile. a) Strongly disagree b) Disagree c) Agree d) Strongly agree e) Don't know
5. The amount of information provided was: a) Not enough b) About right c) Too much	10. I intend to take actions in my work as a result of what I learned at this event. a) Strongly disagree b) Disagree c) Agree d) Strongly agree e) Don't know

11. Describe what, if any, actions you will take in your work as a result of this event.

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12. What were the strengths of this event?

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13. What can be done to improve this event?

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14. What single most important lesson did you learn from this event?

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15. Please write any additional comments you may have about this event.

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16. Did you present at this event?

- a) Yes
- b) No

16a. If yes, what was the topic of your presentation?

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17. What is your *primary* area of work?

- a) Nursing

- b) Human Medicine
- c) Veterinary Medicine
- d) Wildlife Medicine
- e) Public Human Health
- f) Public Veterinary Health
- g) Other (please specify): \_\_\_\_\_

18. Which sector do you represent?

- a) Government
- b) Private sector
- c) Education
- d) Non-governmental organization (NGO)
- e) Research
- f) Other (please specify): \_\_\_\_\_

19. What is your sex?

- a) Male
- b) Female

20. Nationality: \_\_\_\_\_

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