

2019 | Facilitator Guide

ONE HEALTH COMMUNICATION



One Health demonstration. Picture supplied by OHCEA Uganda



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One Health Communication Facilitator Guide

This is a product of the One Health Central and Eastern Africa (OHCEA) for health professionals' training with support from the United States Agency for International Development (USAID).

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OHCEA
8 Countries
16 Universities
24 Institutions



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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: Université 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.

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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://seahunonehealth.wordpress.com/ecosystem-health/>

A total of 16 modules have been developed including One Health soft skills such as communication, culture, leadership, gender and core 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

Communication and cooperation between human health care providers, public health professionals, and veterinarians is important to better address issues of emerging diseases and environmental change. Communication is central to our everyday ideas about what makes life worth living and is necessary in all aspects of human endeavor. In many communication situations, people simultaneously act as the source and receiver of information. Effective communication in One Health is essential because it equips the public with the tools and knowledge to respond appropriately to health crises such as diseases transmitted from animals to humans and humans to animals.

This Training Module will look at the differences in the way people communicate and demonstrate the role of information technology (IT) in preventing and responding to emerging pandemic threats. The module will allow the participants to explore different communication strategies and the risks of trans-boundary communication. It will equip them with ways of collecting, synthesising and disseminating information.

OHCEA network recognises that effective communication strategy can improve human, animal and ecosystem health. It also recognises the role of IT in addressing health risks.

Goals of the Training

By the end of the training, participants should be able to:

- i) understand One Health principles and communication.
- ii) understand the need for contextual communication strategies.
- iii) appreciate the concepts and process of risk and trans-boundary communication during disease surveillance.
- iv) know how to use different communication platforms, computer software and IT systems with an understanding of changing media trends.
- v) know the process of collection, synthesis and dissemination of information to various audiences.
- vi) become transformative agents by promoting gender equality and equity in all aspects of their work and sharing this information with others.

Target Audience

This module on Communication can be used by undergraduate and postgraduate learners, middle cadre trainees, and in-service personnel from multiple disciplines and sectors (private, NGO's, civil society). The module can be adapted for continuous professional development by health professional organizations that directly and indirectly champion health practice from a One Health perspective such as medical and veterinary associations, nursing, public health, environmental

One Health Communication

scientists, biotechnologists as well as community, social and gender development professionals and practitioners.

Learning Objectives of the Course

By the end of the training, participants should be able to:

- i) define important communication and basic One Health principles.
- ii) describe and relate to basic communication theories.
- iii) discuss the importance of gender, culture and ethics in communication.
- iv) describe communication techniques that will be required to promote communication strategies.
- v) develop communication strategies required to facilitate effective communication across multi-disciplinary responders to infectious disease outbreaks.
- vi) apply communication strategies to particular disease outbreak scenarios through existing leadership with a perspective of gender, culture and ethics.
- vii) demonstrate the ability to communicate risk at multiple levels.
- viii) demonstrate the ability to effectively communicate with the media and public.
- ix) design communication strategies across multiple sectors, including local and international players i.e. non-governmental organisations (NGOs), World Organisation for Animal Health (OIE), Food and Agricultural Organisation (FAO), World Health Organisation (WHO) etc.
- x) define basic computer concepts (hardware, software, etc.).
- xi) develop press releases and risk communication messages.
- xii) develop gender-sensitive emergency response plans.
- xiii) develop an advocacy plan for engendering One Health and emerging pandemics programs using gender analysis tools and skills.

Program/Agenda

Session 1	Session 2	Session 3	Session 4
Introduction to One Health principles and communication	Communication strategies	Risks of communication at multiple levels	Development of emergency response plans
Basic communication theories	Communication across multi-disciplinary responders to infectious disease outbreaks	Effective communication with the media and the public	Developing an advocacy plan for engendering One Health and emerging pandemics programs using gender analysis tools and skills

One Health Communication Facilitator Guide

Exploring the gender, culture and ethics in communication	Communication in outbreak scenarios	Designing communication strategies across multiple sectors Developing press releases and risk communication messages	Departure
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One Health Communication

	Topic (Goal)	Learning Objectives (LO)	Instructional Activities (Mode of Delivery)	Time (Min)
01	Understand the important communication principles and theories	Define important communication and basic One Health principles	Classroom training, lectures, group discussions, mime	60 min
		Describe and relate to basic communication theories	Classroom training, lectures, case studies, and project from case studies	120 min
		Discuss the importance of gender, culture and ethics in communication	Videos, case studies, debates and pictures	120 min
02	Understand the need for contextual communication strategies	Describe communication techniques that will be required to promote communication strategies	Classroom training, lectures, and case studies	60 min
		Develop communication strategies required to facilitate effective communication across multi-disciplinary responders to	Case studies of existing communication strategies, projects, webcasts and small group discussions	300 min

		infectious disease outbreaks		
		Apply communication strategies to particular disease outbreak scenarios through existing leadership with a perspective of gender, culture and ethics	Simulations and projects	240 min
03	Appreciate the concepts and process of risk and trans-boundary communication during disease surveillance	Demonstrate the ability to communicate risk at multiple levels	Role-plays, drama for schools, songs and dance	180 min
		Demonstrate the ability to effectively communicate with the media and the public	Role-play and problem-based learning	120 min
		Design communication strategies across multiple sectors including local and international players i.e. NGOs, OIE, FAO, WHO, etc.	Projects and problem-based learning	300 min
		Develop press releases and risk communication messages	Project, case studies, role-plays	300 min

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04	Know the process of collection, synthesis and dissemination of information to various audiences	Demonstrate proficiency in designing data collection tools using different computer software	Projects and problem-based learning	300 min
		Be able to develop gender-sensitive emergency response plans	Projects and problem-based learning	300min
05	Become transformative agents by promoting gender equality and equity in all aspects of their work and sharing this information with others	Be able to develop an advocacy plan for engendering One Health and emerging pandemics programs using gender analysis tools and skills		

Materials

- Computer
- Projector
- Flip charts
- Internet connectivity
- Case study
- Tablets
- Smartphone

SESSION 1

Introduction to One Health Principles and Communication






Session Overview




This session provides an introduction to communication and informatics goals, and gives the participants an opportunity to learn more about each other's background, disciplines and skills. The key element of this session is an introduction to One Health principles and communication.

Session Learning Objectives and Activities






By the end of this session, participants should be able to:

- i) define important communication and basic One Health principles.
- ii) describe and relate to basic communication theories.
- iii) discuss the importance of gender, culture and ethics in communication.

 20 min	Registration 	Registration of Participants <ol style="list-style-type: none"> i) Have participants sign the OHCEA attendance register. ii) Explain logistics (e.g. breaks, meals, etc.). iii) Issue per diem. iv) If the short course is residential, check on accommodation.
 20 min	Welcome 	Facilitator Welcoming Remarks and Introductions of Participants <ol style="list-style-type: none"> i) In pairs, have participants tell each other: <ul style="list-style-type: none"> o their name. o where they are from. o type of work and position. o 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.
 20min	Expectations	Set-up: <ol style="list-style-type: none"> i) Have two flip charts in the front of the room, one titled “Expectations” and the other “Concerns.”

	 <p>Goals of the Short Course</p> 	<p><i>ii)</i> Give each participant two different coloured sticky notes.</p> <p><i>iii)</i> Ask participants to write down their expectations for the short course on one of the sticky notes (specify colour) and their concerns about the course on the second sticky notes (specify colour).</p> <p><i>iv)</i> Have participants place their expectations sticky notes on a flip chart titled “Expectations” and their concerns sticky notes on another flip chart titled “Concerns”.</p> <p><i>v)</i> Organise the sticky notes according to common themes.</p> <p><i>vi)</i> 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.</p> <p>Goals of the Short Course</p> <p><i>i)</i> To introduce One Health principles and communication.</p> <p><i>ii)</i> To understand the need for contextual communication strategies.</p> <p><i>iii)</i> To appreciate the concepts and processes of risk and trans-boundary communication during disease surveillance.</p> <p><i>iv)</i> To use different communication platforms, computer software and IT systems with an understanding of changing media trends.</p> <p><i>v)</i> To collect, synthesize and disseminate information to various audiences.</p> <p><i>vi)</i> To become transformative agents by promoting gender equality and equity in all aspects of their work and sharing this information with others.</p>
		<p><i>i)</i> Explain that this course is sponsored by OHCEA.</p> <ul style="list-style-type: none"> - OHCEA is the One Health Central and Eastern Africa network comprised of 24 academic institutions from Eight African countries. They include schools of public health, veterinary medicine and environmental sciences with support from two US partner universities: Tufts University and the University of Minnesota. OHCEA is funded to develop these materials by the USAID - Emerging Pandemics Threat - One

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		<p>Health Workforce grant.</p> <ul style="list-style-type: none"> - OHCEA’s vision is to be a global leader in One Health, promoting sustainable health for the prosperity of communities, productive animals and balanced ecosystems. OHCEA seeks to expand the human resource base needed to detect and respond to potential pandemic disease outbreaks. <p><i>ii)</i> OHCEA has identified Communication and Informatics as a critical One Health core competency in achieving its vision. For this reason, they are sponsoring this course.</p>
<p>20 min</p>  <p>15 min</p> 		<p>Guest Speaker Opening Workshop</p> <ul style="list-style-type: none"> i) In advance, be sure the speaker is prepared to address the group. Share with him/her the short course goals and desired outcomes and what you would like him/her to emphasize in her/his address. ii) Introduce the invited guest speaker to “officially open the course”. <p>Pre-Test</p> <p>Distribute copies of the pre-test. Tell participants they have 15 minutes to complete the pre-test. Explain that a pre-test is used to gauge how much they will have known 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.</p>
<p>80 min</p> 	<p>Pre-training Reading Material</p> 	<p>Send out the following two articles to participants to read before they come to the training:</p> <ol style="list-style-type: none"> 1. Haddow, G. D. and Haddow, K. S. (2014). Application of Communications Principles to All Four Phases of Emergency Management. Disaster Communications in a Changing Media World (Second Edition), 71-92. 2. Rauwers, F., Hilde, Voorveld, H.A.M and Neijens, P. C. (2016). The Effects of the Integration of External and Internal Communication Features in Digital Magazines



Discovery Activity: What is One Health?



on Consumers' Attitude, 61(8), 454-462.
 3. Participants should also watch the movie “Contagion”.

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>




Discussion










- 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. Give the meaning of One Health approach.
 2. Identify two examples of One Health in practice.
 3. Identify two to three advantages of multiple disciplines working together to promote One Health.
- iv) Have participants 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 purposes of this course, we will adopt the American Veterinary Medical Association (AVMA) definition of One Health (www.avma.org).




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



 <p>15 min</p>	<p>PowerPoint: Overview of One Health</p>	<p>connected to the others in the triad.</p> <p>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 balanced and 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.</p> <p>In less than 10 years, One Health has gained significant momentum and it is now a fast growing movement. 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, WHO, FAO, OIE, United Nations System Influenza Coordination (UNSIC), various universities, NGOs and many others.</p> <p>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.</p> <p>Overview of One Health Concepts</p> <p>Give a 15-minute presentation on One Health (PPP No. 1) and the underlying drivers of disease emergence. This presentation introduces One Health, the</p>
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	<p>Concepts</p> 	<p>interdependence between humans, animals and the environment and why disciplines need to work together. It also brings out the One Health Core Competencies and answers the questions: Why One Health and why now?</p> <p>Debrief</p> <p>Debrief the session, as part of this presentation, by asking the participants to reflect on:</p> <ol style="list-style-type: none"> 1. What One Health is and any questions they may have related to the PowerPoint presentation. 2. Discussion of the One Health Core Competencies and how communication is a key competency required to be effective One Health change makers.
 20 min	<p>Discovery Activity: What is Communication?</p>	<p>Discovery Activity: What is Communication?</p> <p>Have the participants watch the following YouTube video: What is communication?</p> <p>https://www.youtube.com/watch?v=S7CN9Trw43w</p>
 15 min	 <p>Group Activity</p>	<p>Discuss the video with the participants.</p> <p>Mime: What are the most common ways we communicate?</p>
 15 min		<ol style="list-style-type: none"> i) Ask the participants to form two groups. Provide each group with a topic related to One Health. Elect one person from each group to mime it accurately, describing the topic related to One Health non-verbally. The other group should observe and then write a short paragraph interpreting what has been acted out by a group. The intention of this exercise is to show that communication is not only verbal. <ol style="list-style-type: none"> 1. What is he/she describing? 2. Is he/she telling us about animals or humans? 3. Is he/she telling us about collaboration? 4. Is it about zoonotic diseases?
		<ol style="list-style-type: none"> ii) Brief the participants that the "One Health"

One Health Communication

5 min		<p>approach calls for greater communication and cooperation between human, animal and environmental health and other professionals as well in order to better address vital issues of emerging diseases and environmental change and public health threats.</p> <p>iii) Have the participants then share information about different ways people communicate.</p>
30 min	 	<p>Discovery Activity: Communication in One Health</p> <p>Divide the class into three groups and provide them with the following scenarios. Each group has 5 minutes to discuss the activity and then present their view.</p> <p>Group 1: There is an outbreak of Ebola in this community. There is a lot of education and mobilization going on. A local NGO decides to use a famous young male musician to perform songs about Ebola transmission and how to prevent it. The musician performs daily in the local pub in the evenings. After a couple of weeks, the NGO realizes that they are having minimal impact.</p> <p><i>Ebola transmission has mostly been through person to person contact and washing of dead bodies. Most of the people affected are women because they are responsible for taking care of the sick, cooking the food at the funerals, as well as washing of the dead bodies. Women would not be able to attend functions in night clubs in the evenings because they are busy with their evening chores and in some places their husbands will not let them go out late at night. The NGO is therefore communicating with the wrong audience.</i></p> <p>Group 2: 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 create awareness about the role of wildlife by delivering a training and awareness program primarily through night classes.</p> <p><i>The awareness is primarily held through night classes,</i></p>

 <p>10 min</p>		<p><i>which limits women who are care providers for children from attending. In some communities, women are not even allowed to go out at night. The park does not consult the community members on its plans. 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.</i></p>
 <p>15 min</p>		<p>Group 3: The veterinary and health department’s staff are very worried about the increasing number of brucellosis cases in the community. They have noticed an increased level of abortion among the animals as well as increased number of people showing up with undulating fevers. They have analyzed the samples and realized that it is brucellosis affecting both humans and the animals. They have gone ahead and released commercials on the TVs, providing people with information about brucellosis.</p> <p><i>In most rural communities, very few people have TVs. The medium of communication is very important. It is advisable to select a medium through which most people can access information, and consider as well the literacy levels of the community.</i></p> <p>Group Activity: Personal Experiences After discussing the above scenarios, have the class share some personal examples from their workplaces where they have seen communication failures. It could be related to wrong audience, or using wrong media or even giving the wrong message. How was the issue corrected? Every member of the group should have come up with at least one example.</p>
 <p>15 min</p>	<p>PowerPoint Presentation</p>	<p>Self-awareness and Social Styles To be an effective One Health communicator, one must understand the characteristics of their One Health team, be aware that people are different and have different characters, and that different sectors and departments have different cultures. The Social Style activity allows the participants to understand different people’s character so as to improve team relationships. Begin this session by doing a brief presentation (PPP</p>

 <p>10 min</p>		<p>No. 2) on social styles.</p> <p>Self-awareness: the ability to recognize and understand your moods, emotions and drives as well as their effects on others.</p> <p>Self-regulation: the ability to control or redirect disruptive impulses and moods, that is, think before you act and suspend judgment.</p> <p>Empathy: the ability to understand the emotions of other people and their emotional needs. Understanding social styles helps us know how we communicate, address some difficult communication situations, appreciate differences, recognize different styles and adapt in order to connect with others more effectively.</p> <p>Social Style is the <i>world's leading Behavioral Style model</i>. 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 to apply. It makes your relationships more effective. Years of research in workplace success have shown that people are one of the 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 others.</p> <p>Each Style presents itself through people's daily interactions. At surface level, each Style is closely linked to whether an individual tends to assert himself/herself or respond to others in a social setting, and whether he/she tends to display emotion or secure control in group setting.</p> <p>Activity 1: Ask the participants to complete the questionnaire on Social Styles following the instructions given (Questionnaire found in Appendix).</p> <p>Choose the statement in each pair that you think most accurately expresses how other people see you at work. If you think that the paired statements do not accurately reflect you, choose one that <i>more closely describes</i> how others perceive your behavior. On some paired statements, you may find that some people see you as described by one statement while others might</p>
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see you as described by the other statement. For those items, select the statement that represents how the majority view you.

When you have completed the questionnaire, 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

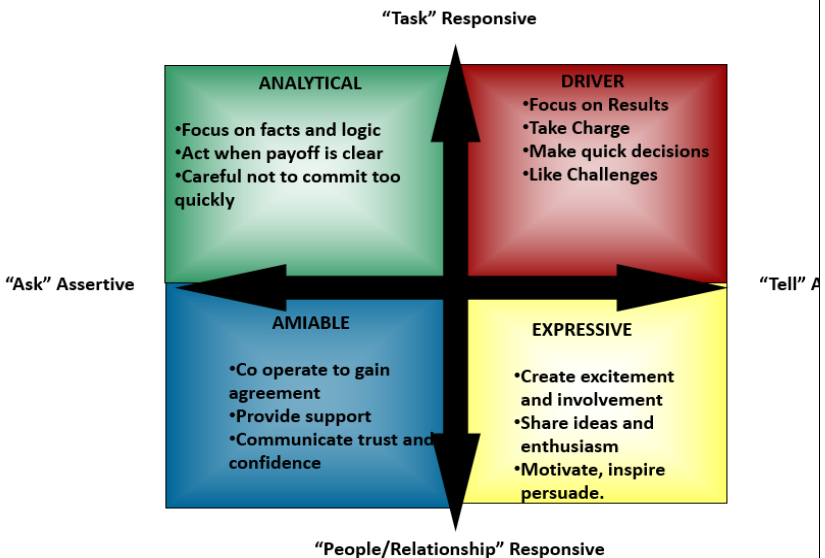
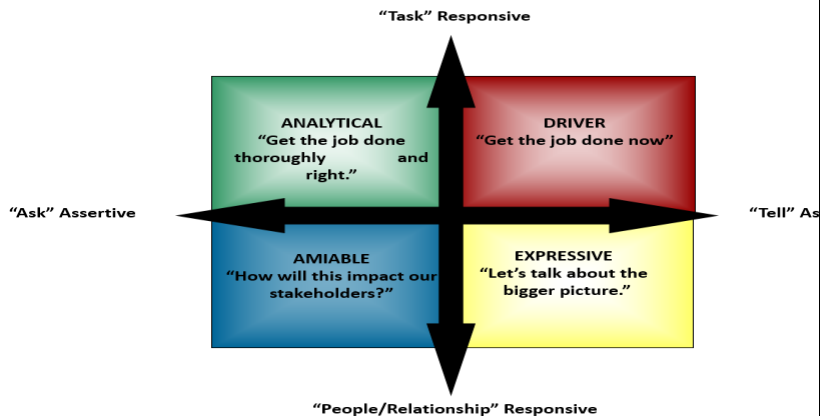
Column 1	Column 2	Column 3	Column 4
<i>The "Greens"</i>	<i>The "Reds"</i>	<i>The "Blues"</i>	<i>The "Yellows"</i>



Class Activity



5 min



What Makes Them Tick: Social Styles – Characteristics

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



120 min



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:

1. What communication style works best for you? (formal, informal, fast, slow, face-to-face, verbal, written)?
2. How do you like to get information (details, summary, facts, people)?
3. Switch roles and let them ask you the same questions.

Detailed Facilitator Notes

Retrieved from various sources

Communication is central to our everyday activity, and it is what makes life worth living. It is not surprising that academicians have attempted to unravel the secrets of the communication process. In this section, we will examine the theories of communication. To understand communication theory, we need to



10 min



understand the nature of communication.

Nature of Communication

People define different terms in different ways, and those differences can have a profound impact on the extent to which we understand each other and the way we move forward with both academic and everyday pursuits. Given the various ways in which words are used and understood, we are often unable to search for a single correct definition of a term.

In other words, it is better to evaluate definitions in terms of their utility rather than in terms of their correctness. So we should not assume that there is always a single right way to define a concept. There is a great deal of variation in the definitions. Some are very abstract and some are extremely specific. Few definitions are cited below.

(Janis and Kelly, 1953) define communication as the process by which an individual (the communicator) transmits stimuli (usually verbal) to modify the behavior of other individuals (the audience).

Communication is the process by which we understand others and in turn endeavor to be understood by them. It is dynamic, constantly changing and shifting in response to the total situation (Anderson, 1959).



Communication is all of the procedures by which one mind can affect another (Weaver, 1949).

Communication means that information is passed from one place to another (Miller, 1951).





These definitions are incomplete, for example, Weaver’s definition is incredibly broad; it includes all the procedures by which one “mind” could have an effect on another. Whereas, the other definitions exclude too many activities that we normally think of as communication. However, through this definitional turmoil, many conceptual features have emerged as important points of discussion.

Communication is critical to success in life.

Effective Communication Skills for One Health Teams

 <p>20 min</p>		<p>Group Activity: Active Listening</p> <p>i) Ask participants to watch the following video clips from big bang theory:</p> <p>https://www.youtube.com/watch?v=vkSwXL3cGUg&list=PLLTRx2n5eYMXHcpnIrwDNBpHf4YVmjUp-</p> <p>https://www.youtube.com/watch?v=6TeOGJP5vGA</p> <p>ii) Let them briefly reflect on the video and discuss some of the problems you recognize in the clips and some possible solutions to those problems.</p> <p>iii) Give a brief PowerPoint (PPP No. 3) presentation on communication strategies. Please note that PPT has an inbuilt exercise on active listening as the lecture progresses.</p> <p>iv) 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 and 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 pay attention, they focus on how they can respond to win the argument.</p> <p>v) Active listening is a structured form of listening and responding by focusing attention on the speaker. The listener must take care to attend to the speaker fully and then respond to what he or she thinks the speaker has said. The listener does not have to agree with the speaker, to respond to the speaker. This enables the speaker to find out whether the listener understood. If the listener did not, the speaker can explain some more.</p> <p>vi) 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,</p>
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		<p>denying the opponent's description of a situation. This tends to make people defensive, and they will either lash out or withdraw. 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 in the conflict do this, the chances of reaching a solution become much greater.</p> <p>Small Group Work on Active Listening</p> <p>Put the participants in groups of threes: One member listens (observer) while the other two carry out a conversation. The observer notes the active listening skills being applied and reports back to the group. Group members then change roles.</p> <p>Debrief</p> <p>Note that these days, 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 participants lose interest. In class, discuss some of these modern-day issues that are evident 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 the participants can come up with?</p> <p>Non-Verbal Communication</p> <p>Role-play</p> <p>Divide the participants into four groups. Ask each group to move away from the other. Visit each group and provide them with the following instructions:</p> <p>Group 1 should think of 3 ways to demonstrate submissiveness. They then need to act this out without talking. They should act out three types of submissive behaviours. The other groups will try to identify what behaviour they are acting out.</p> <p>Group 2 has to demonstrate three ways of showing boredom. Group 3, friendliness, and Group 4, arrogance. In all cases, the groups should not be allowed to speak.</p> <p>After the role-plays, discuss other issues related to non-verbal communication. These can include gender roles</p>
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 <p>20 min</p>	 <p>Group Activity</p>	<p>for example, where do women or men sit? Where are women or men allowed to go? What can we learn from different sitting arrangements, dressing or even maintaining eye contact?</p> <p>The Importance of Clear Instructions: the Folding Paper Game</p> <p>Select four volunteers and ask them to stand facing the rest of the participants. Give each volunteer a blank square piece of A4 paper and then provide the following instructions:</p> <ol style="list-style-type: none"> i) Close your eyes. ii) You may not ask questions. iii) Fold the paper into half and tear off the bottom right corner. iv) Fold the paper in half again and tear off the top right-hand corner. v) Fold the paper into half again and tear off the bottom left-hand corner vi) Open your eyes, unfold the paper and show it to the rest of the participants. <p>Usually the pieces of torn paper have completely different shapes.</p> <p>This game shows that although verbal instructions may appear simple, they can be interpreted differently when given to different people. In communication, instructions need to be very clear.</p>
 <p>15 min</p>		<p>Discovery Activity: Perception Skills</p> <p>Provide the participants with the following pictures. Put the participants into groups and have them write a story based on the picture that they have.</p> <ol style="list-style-type: none"> 1. How powerful is an image as a form of communication? 2. What is the image communicating to you?



3. What are the lessons you can learn from the picture?

Present the pictures to the participants and have them brainstorm the different messages that can be obtained from the different pictures. Discuss with them that perception is very different for everyone and communication is a key part of that perception. Let the participants know that different people can look at the same image and see completely different things. Therefore, they should be very careful when they are communicating to ensure that they are passing on the same message especially in the case of a One Health emergency or public health threat.

Picture 1:



Picture 2:



Picture 3:



Have the participants try to link up all the pictures above and tell one story that includes all these pictures.

		<p>Summarize all group ideas in the context of One Health. The summary should include the following key words:</p> <ul style="list-style-type: none">i) Environmentii) Humaniii) Collaborationiv) Multidisciplinary approaches <p>Detailed Facilitator Notes</p> <p>One Health Principles</p> <p>One Health approach recognizes the interdependence of, and seeks to improve human, animal and environmental health. One Health concept is a worldwide strategy for expanding interdisciplinary collaborations and communications in all aspects of health care for humans, animals and the environment. The synergism can accelerate health research discoveries, enhancing public health efficacy, expeditiously expanding the scientific knowledge base, and improving medical education and clinical care. It will help protect and save untold millions of lives in our present and future generations.</p> <p>The One Health approach recognizes the connection between the health of humans, animals and the environment. CDC uses a One Health approach by working with physicians, ecologists, and veterinarians to monitor and control public health threats. This is done by learning about how diseases spread among humans, animals and the environment.</p> <p>One Health is the collaborative effort of multiple disciplines working locally, nationally and globally to attain optimal health for humans, animals and our environment. Together, the three – human, animal and environment – make up the One Health triad, and the health of each is inextricably connected to the others in the triad. Understanding and addressing the health issues created at this intersection is the foundation for</p>
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	<p>the concept of One Health. Recognizing that the health of humans (including mental health via the human-animal bond), animal, and ecosystem are inextricably linked, One Health seeks to promote, improve and protect the health and wellbeing of all species by enhancing cooperation and collaboration between physicians, veterinarians, other scientific health and environmental professionals, and by promoting strengths in communication.</p> <p>The One Health concept is a worldwide strategy for expanding interdisciplinary collaborations and communications in all aspects of health care for humans and animals. (http://www.onehealthinitiative.com/news.php)</p> <p>One Health is a collaborative effort of multiple health science professions, together with their related disciplines and institutions—working locally, nationally and globally—to attain optimal health for human, domestic animals, wildlife, and our environment (One Health Commission www.onehealthcommission.org). In 2008, four international organizations, FAO, OIE, WHO and UNICEF, along with the World Bank and UNSIC, joined forces to produce a strategic document entitled “Contributing to One World, One Health: A Strategic Framework for Reducing Risks of Infectious Diseases at the Animal–Human–Ecosystems Interface.</p> <p>Discovery Activity: Importance of Gender, Culture and Ethics in Communication</p> <p>What is Gender?</p> <p>Ask the participants to think as far back as possible and write down their first experience when someone gave a speech to people of the opposite sex.</p> <p>Ask them to answer the following questions:</p> <ol style="list-style-type: none">1. Was he a man talking to women?2. Was she a woman talking to men?3. How did the audience feel?4. Was the speaker convincing?5. How old were you?6. Who was involved?7. Where did the incident take place?8. What incident was it?
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	<p>9. How did you feel? 10. What made the speaker convincing? 11. Were there people of different races, religions and colors?</p> <p>Let the participants watch the following video: https://www.youtube.com/watch?v=pzOZeJCGDbE</p> <ul style="list-style-type: none">i) Explain the role of gender, culture and ethics in communication.ii) Give the participants 5 to 10 minutes to discuss what the video is about.iii) Summarize the findings of the discussion. <p>Importance of Gender, Culture and Ethics in Communication</p> <ul style="list-style-type: none">i) Let participants watch the following video: https://www.youtube.com/watch?v=pzOZeJCGDbEii) Explain the role of gender, culture and ethics in communication.iii) Think through the scenarios on AMR. What role does culture and gender play in AMR stewardship? Let participants brainstorm the ideas and write them on sticky notes, review these ideas and share them in the plenary. Are there specific roles that women play? They are probably the ones who administer most medications to their children or take care of the animals when they are sick, so they are responsible for giving them antibiotics. Are most of the Gazon traders men or women? Thinking through who is affected by what is important. <p>Facilitator Notes</p> <p>What is communication?</p> <p>Communication is necessary in all aspects of human endeavor. This topic looks at the difference in the way women and men communicate. It looks at social settings and attempts to provide an understanding of behaviors that will ultimately help people feel</p>
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		<p>comfortable and be effective in mixed gender environments.</p> <p>Taking an inter-disciplinary approach, the main concern of this topic is to show how gender plays key roles in understanding and communicating One Health approaches. This provides the starting point and central focus of One Health in the fields of zoonotic diseases prevention. The first step to creating equality in One Health advocacy is to understand the different strengths and styles that different genders bring to the workplace.</p> <p>The Role of Gender in Reduction of Uncertainty in Communication Theories</p> <p>This is one of the most controversial areas of communication research in recent decades. By distinguishing between sex and gender, a two-culture perspective illustrates that many differences in people's communication are socially constructed; not biologically determined. Social life is filled with ambiguities. A woman seeks to explain and predict when, why and how individuals use communication to minimize their doubts when interacting with others. There are several ways to guide the uncertainty reduction framework.</p> <p>Types of Uncertainty</p> <ul style="list-style-type: none">i) Behavioral uncertainty: your insecurity about which actions are appropriate in a given situation.ii) Cognitive uncertainty: when individuals question how they should act in a given situation, what to think and so on. <p>Uncertainty Reduction Strategies</p> <ul style="list-style-type: none">i) Passive strategy: individuals observe their surroundings and gather clues about which behaviors are appropriate as well as which attitudes and beliefs others hold.ii) Active strategy: seeking information from the third party. You go to someone else who may know more about the person or situation in question.iii) Interactive strategy: when you go to the person or situation in question and ask for as much
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		<p>information as possible.</p> <p>As a group activity, have participants share experiences from their lives relating to this. In the African cultural context, cognitive uncertainty is evident when gender roles are discussed. Women are not supposed e.g. women may not be allowed to shake hands with men. What happens then if you are a woman member of parliament meeting with your constituents. Do you shake hands with men and leave out the women?</p> <p>Gender Differences in Non-verbal Communication Communication has always been an important skill that all people should develop. Previous studies have hinted at the idea that men and women communicate differently. Hall (1978) suggests that women tend to be better at using and decoding non-verbal communication cues, especially facial expressions. A stereotypical beliefs study by Kramer (1977) suggested that women were believed to use the face and hands to express their ideas more than men. While another study by Briton (1995) suggested that women were believed to employ more expressive and non-verbal communication than men, and that they were more skilled at sending and receiving non-verbal messages.</p> <p>Theories of Gender Communication Genderlect Theory The best way to describe communication between genders is in a cross-cultural format. Women use rapport talk to establish meaningful connection with others, while men use report talk to gain status in relation to others. Because women and men use language differently, Tannen suggests they are speaking different dialects, or genderlects. The goal of Genderlect Theory is to acknowledge and appreciate the language of the opposite sex and achieve mutual respect and understanding.</p> <table border="1" data-bbox="609 1753 1429 1892"> <thead> <tr> <th data-bbox="609 1753 836 1816">Tenet</th> <th data-bbox="836 1753 1429 1816">Clarification</th> </tr> </thead> <tbody> <tr> <td data-bbox="609 1816 836 1892">Why we communicate:</td> <td data-bbox="836 1816 1429 1892">Women engage in communication to build relationships with others. By d</td> </tr> </tbody> </table>	Tenet	Clarification	Why we communicate:	Women engage in communication to build relationships with others. By d
Tenet	Clarification					
Why we communicate:	Women engage in communication to build relationships with others. By d					

One Health Communication

	Women seek connection, men seek status.	are more likely to engage in talk only when it makes them look good, strong, competitive, or independent.	
	<u>Style of communication</u> : Women use rapport talk, men use report talk.	Women express emotions, share personal feelings, relate stories, and listen empathetically (rapport talk). Men engage in competitive joking and assertive speech that wins control of the conversation (report talk).	
	<u>Language</u> : We speak the same language, but each gender has its own dialect.	Each gender has its own set of vocabulary and preferred topics, and they use spoken language differently: men talk to get things done (instrumental approach); women talk to interact with others (relational approach).	
	<u>Goal of Genderlect Theory</u> : Mutual respect and understanding	In contrast to feminist viewpoints that criticize men for inferior communication that represses women, Genderlect Theory simply identifies the differences between us and encourages us to acknowledge and accept the communicative culture of the other.	
	<ol style="list-style-type: none"> 1. To what extent does Genderlect Theory meet the criteria for a good <u>interpretive</u> theory? 2. <u>Does it lead to a deeper understanding of people?</u> Because this theory reveals how men and women subconsciously communicate in different ways, it shows how easy it is for all of us to misjudge the words and actions of others. 3. <u>Is it value-based or does it bring values into the open?</u> This theory promotes mutual respect and understanding by showing that communicators should appreciate and respect the style of communication of both genders. 4. <u>Does it have aesthetic appeal?</u> Genderlect Theory has universal appeal because we can all identify with the frustrations and misunderstandings of communicating across genders. 5. <u>Has it generated a community of agreement?</u> This theory has been widely accepted by the popular press, but a relatively small number of communication scholars take this theory seriously enough to use it as a grounding theory 		

		<p>for further research.</p> <p>6. <u>Does it contribute to communication competence?</u> We can all improve in this area. Competent communicators who understand and appreciate both sides of gender communication can become more effective (minimizing misunderstanding) and more appropriate (socially acceptable) as we adapt to the contrasting styles of the other gender.</p> <p>Standpoint Theory – Sandra Harding and Julia Wood</p> <p>Feminist Standpoint theorists suggest that women are under-advantaged, and thus men are over-advantaged. <i>Otherness</i> is engendered in women by the way men respond to them. Different locations within the social hierarchy affect what is seen. The standpoints of marginalized people provide less false views of the world than do the privileged perspectives of the powerful. Strong objectivity requires that scientific research start from the lives of women, the poor, gays and lesbians, and racial minorities. A culture is not experienced identically by all members. “Each person can achieve only a partial view of reality from the perspective of his or her own position in the social hierarchy” (Harding). “The social groups within which we are located powerfully shape what we experience and know as well as how we understand and communicate with ourselves, others, and the world” (Wood).</p> <p>Muted Group Theory – Cheris Kramarae</p> <p>Mutedness is due to the lack of power; people with little clout have trouble giving voice to their perceptions. As a result, they are overlooked, muffled and rendered invisible.</p> <p>“Women are not as free or as able as men are to say what they wish, when and where they wish, because the words and the norms for their use have been formulated by the dominant group, men” (Kramarae). Man-made language aids in defining, depreciating, and excluding women. As women cease to be muted, men will no longer maintain their position of dominance in society.</p>
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		<p>In the plenary, have the participants discuss the following questions:</p> <ol style="list-style-type: none">1. How accurate is Groupthink? What evidence do you have to support your evaluation?2. How practical is Groupthink? Use the Internet to see how the theory has been used.3. Is the theory appropriately succinct? Or is it overly simple or overly complex? Why do you make this judgment?4. Is Groupthink consistent with other theories about group communication? Does it demonstrate internal consistency? Why or why not?5. Does Groupthink demonstrate acuity? Does it demonstrate an ability to explain a difficult real-world problem? Why, or why not?6. How applicable is this theory in analysing the effects of social media and Internet communication on reduction of zoonotic diseases? <p>Communication and Culture</p> <p>Social life is more than power and trade. It also includes the sharing of aesthetic experience, religious ideas, personal values and sentiments, and intellectual notion – a ritual order. Perhaps the most general and essential attribute of culture is communication, since cultures cannot develop, survive, extend and generally succeeded without communication.</p> <p>In order to study culture, we need to be able to locate it. Essentially, there are many places to look for culture: in people, in things, texts, artefacts, and in human practices.</p> <p>Characteristics of Culture</p> <ol style="list-style-type: none">i) Collectively formed and heldii) Open to symbolic expressioniii) Ordered and differentially valuediv) Systematically patternedv) Dynamic and changing
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		<p>vi) Communicable over time and space</p> <p>Divide participants into six groups. Each group is assigned one of the characteristics above. They should discuss and present to the group how these characteristics influence communication. They should provide examples from their lives or practice.</p>
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Reading Materials

Haddow, G. D and Haddow, K. S. (2014). Application of Communications Principles to All Four Phases of Emergency Management. *Disaster Communications in a Changing Media World (Second Edition)*, 71-92.

SESSION 2:

Communication Strategies




Session Overview


Session 2 will provide a foundation for understanding communication strategies. This session will help the participants to better understand the communication techniques and the application of communication strategies to respond to a particular disease outbreak.


Learning Objectives and Activities

By the end of this session, participants should be able to:

- i) describe communication techniques that will be required to promote communication strategies.
- ii) develop communication strategies required to facilitate effective communication across multi-disciplinary responders to infectious disease outbreaks.
- iii) apply communication strategies to particular disease outbreak scenarios through existing leadership with a perspective of gender, culture and ethics.

 60 min		<p>Tippy Tap—the newest innovation</p>  <p>http://hetv.org/programmes/hand-washing.htm</p> <p>Start this session by having the participants discuss the Tippy Tap invention. Ask them to write down instructions on how to use this Tippy Tap to be communicated to a local village. They</p>
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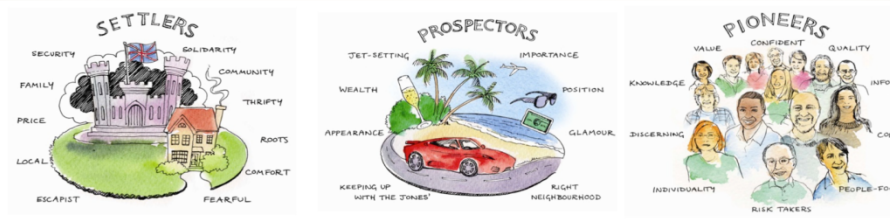
	 <p>Class discussion</p>	<p>should consider the media they will use for communicating the information as well. Other questions to consider include:</p> <ol style="list-style-type: none"> 1. What would they need to launch their tippy tap and inform people about it? 2. What kind of resources? 3. Who would be the target audience? 4. What are the outputs? 5. What is the intended outcome? <p>Session: Know your Audience</p> <p>Introduce the topic of knowing your audience prior to communicating.</p> <p>Knowing your audience and understanding their values is very important. If you do not know who your audience is or what they care about, you cannot reach them effectively. Understanding and using the appropriate value mode helps ensure that your message is in a language that your audience understands. Before communicating with any audience, it is important to know their beliefs, values and attitudes.</p> <p>Our Beliefs, values, and attitudes are more likely predictors of behavior than knowledge.</p> <p>Belief: Something you are convinced is true (may be based on fact, faith, or hearsay, for example: I believe in climate change because 97% of scientists say it is happening).</p> <p>Values: Guiding principles, for example: I value a healthy environment.</p> <p>Attitudes: +/-/0 feelings based on beliefs and values, for example: I dislike Hummers because they use a lot of fuel. This attitude meshes well with my belief in climate change and value of a healthy earth.</p>
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		 <p>I believe... I value... I like/dislike...</p> <p>Over a quarter of a century of quantitative research has shown that the determining factor in why a person does what he/she does is because of his/her values.</p> <p>Values are tied directly to our emotions and not our rational faculties. They are what so frequently make us choose something or perform an action before we have thought about the consequences.</p> <p>Cultural Dynamics Strategy & Marketing, a UK-based company, studied the values, beliefs and motivations of (primarily) the population of the United Kingdom and determined that people can be divided into groups called value modes, which fall into 3 broad categories namely; settlers, prospectors and pioneers. A person's value mode will affect what they perceive as barriers and benefits.</p> <ul style="list-style-type: none">i) Settlers (sustenance driven, focused on meeting own needs/those in innermost circle). This category of people tends to look backwards to yesterday (which was better) and dislike anything new or different. They aim to establish a sense of identity, belonging, and security.ii) Prospectors (driven by what others think and on upward mobility). These people live in the now, for today, and seek rewards in terms of status, fashion, and achievement. They don't like to be told they are doing anything wrong, or that they ought to give anything up.
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iii) **Pioneers** (driven by intrinsic values and making the world a better place). These people look forward, both in time and to new horizons: like change, discovery, and the unknown so long as it is ethically acceptable. They have already met their need for belonging and status.

Value modes

- Settlers
- Prospectors
- Pioneers



Attitude towards environmental issues

"it's not a problem unless it immediately affects my family, my local area, my identity, my traditions"

"it's not my problem unless it affects my prospects for achievement and success"

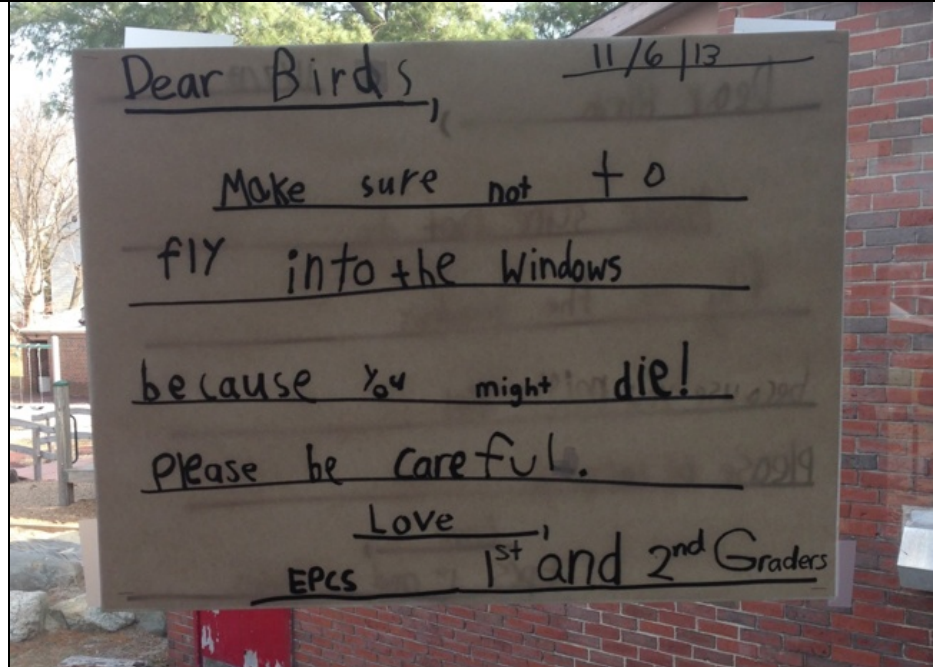
"it's a problem"

If you know your audience consists of people of one value mode, then it is easy to choose, but most often you must **tailor your messages to all 3 value modes**. So, if talking about climate change, you could say that it is important to act to prevent climate change because:

- i) it helps preserve the planet for our grandchildren — an idea that will resonate with settlers.
- ii) it helps your company meet its CSR goals, which will make your boss happy and impress the CEO — prospectors will find it compelling.
- iii) it is the right thing to do for the planet and the people and organisms that live on it — acknowledging the intrinsic value of the earth will appeal to pioneers.

Group Activity

1. Discuss the image below. Are they communicating?
2. How would they communicate better?



Group Activity 1:

Divide participants into three groups representing the different value modes. Assume that you are the government of Uganda and you have discovered oil in an area close to the national park, which is occupied by livestock farmers. You need to start drilling the oil and you need to convince the people that this is a good idea. Each group should brainstorm and write down a message that will appeal to their value mode.

Discuss the group messages with the participants.

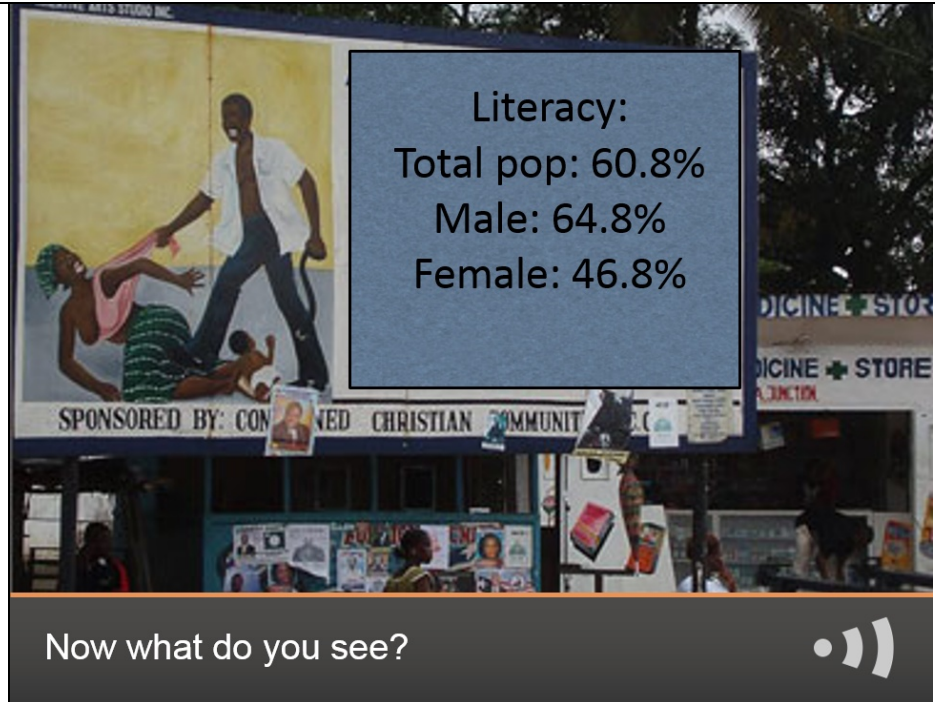
Were they effective/ineffective? What can be done to change them?



Group Activity 2: Knowing the gender of your audience

Give the participants the following case study:

Guinea worm is a debilitating disease in Southern Sudan. It is contracted when people consume water from stagnant sources, contaminated with Guinea worm larvae. Inside a human's abdomen, Guinea worm larvae mate and female worms mature and grow. After about a year of incubation, the female Guinea worm, one-meter-long, creates an agonizingly painful lesion on the skin and slowly emerges from the body. Guinea worm sufferers may try to seek relief from the burning sensation caused by the emerging worm and immerse their limbs in water



Discuss the above pictures. What is the significance of knowing your audience?







Another example of identifying and profiling audience:

1. Who are the different people in your target audience?
2. How do they like to receive information?
3. What are their beliefs about sugary beverages, and whom do they trust?



It is important to understand how perspectives and needs may differ among your audiences. For instance, parents may also consume sugary beverages. Teachers and principals may be uninterested without school board involvement. Family clinicians may not know how to articulate these issues to patients.



Group Activity

Divide participants into three groups representing the different value modes. Assume that you are the government of Cameroon and you are very keen on reducing antimicrobial resistance. Your plan is to enforce the law to ensure that antibiotics are only distributed and sold by licensed people. You understand that there are all these other people on the market both legally and illegally, selling antibiotics. You need to convince the people that

		<p>licensed pharmacies as the only source of antibiotics is a good idea. Each group should brainstorm and write down a message that will appeal to their value mode.</p> <p>Discuss the group messages with the class:</p> <ol style="list-style-type: none"> 1. Were they effective/ineffective? 2. What can be done to change them?
 20 min	 Group Activity	<p>Group Activity: Determine your Goal</p> <p>Outline a specific, tangible goal that will become the framework of your plan. As an example, you may want to reduce sugar-loaded beverage consumption among children, thereby reversing childhood obesity trends. This goal may require reaching children, but also parents and caretakers, schools, and family clinicians.</p> <p>In groups:</p> <ol style="list-style-type: none"> i) identify a goal related to the topic of fighting antimicrobial resistance. ii) define what you want to do, and who your target audience is going to be. iii) list all your target audiences and why. iv) write it out and share with the group.
 20 min	 Group Activity	<p>Group Activity: Develop Messages</p> <p>To help choose a message, identify a few options within your team and then solicit feedback from your audiences about which ones resonate with them. This can be done formally or informally, through key-informant interviews or focus groups. Then, pick one clear directive, and stick to it. You might decide, in this situation, that you want to educate parents about alternate beverage options like milk and water with the tagline “Don’t stop at pop”.</p> <p>In your groups, develop a message that you think will help you achieve your goal that you want to achieve for AMR or whichever topic you have selected.</p>
 20 min	 Group	<p>Group Activity: Select Communications Channels</p> <p>Consider all of the possible venues for outreach, and select the options that make the most sense for this message and its audience. An ad or an article in the school bulletin may be more effective than a similar placement in the local newspaper</p>

One Health Communication

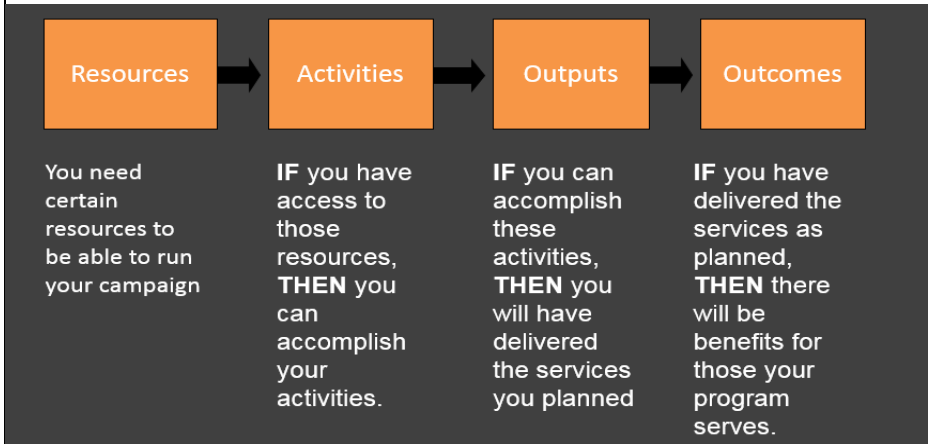
	Activity	<p>because it targets parents specifically.</p> <p>Now select a channel for your message - brochures, radio, TV, advertisement, focus group meetings. Justify why this is the most appropriate. Consider gender, culture, socioeconomic status and age as you select your channels.</p> <p>Present your channels to the plenary.</p>
		<p>Choose Activities and Materials, Establish Partnerships and Implement Plan</p> <p>Choose activities and materials</p> <ol style="list-style-type: none"> 1. Are there existing events in place where you can reach your key audience? 2. Do you want to attend a radio show or hold a press conference? 3. What materials (brochures, fliers, and posters) would help support this activity? <p>A small flier might help spread your message at a PTA meeting, and a poster might be more useful at a book fair.</p> <p>Establish Partnerships</p> <p>Partner with people who can help spread your message. You might be able to receive support from diabetes organizations, a group of concerned physicians, a school board, and even grocery vendors.</p> <p>Implement the Plan</p> <p>Once you have selected your activities, develop tactical goals. Assign dates, materials, budget, and staff to help achieve those goals. For instance, on May 23, your communications director will attend a school board meeting and give a testimony. You have identified John Doe and Jane Smith from the local newspaper to cover the event. You will bring 100 brochures that cost \$25 each to design and print.</p>

		<p>Communication Theory of Change</p> <p>Spend the next 30 minutes introducing and discussing the communications Theory of Change (ToC).</p> <ol style="list-style-type: none"> i) When designing a communications program, develop and identify: Theory of Change (rationale). These are a
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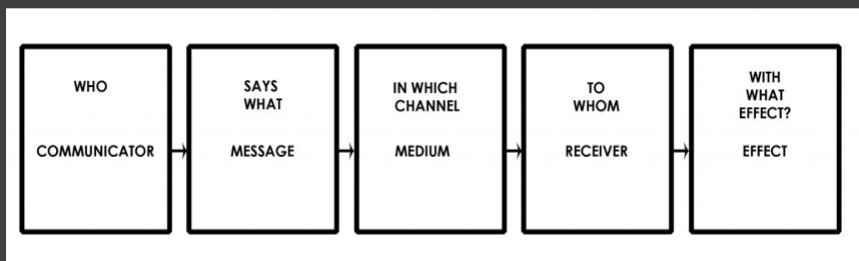
set of beliefs of how change happens.

- ii) Invite questions to ensure the greatest likelihood of creating positive change.
- iii) State your assumptions about what will result from your designed program.
- iv) Ensure goals that are attainable.
- v) Focus on change you want to see rather than activities.
- vi) Ensure alignment at all levels of program design.

Under these, you need to have thought through the following before you plan your communication: resources, activities, outputs, outcomes, indicators.



Communications Theory of Change



Have the participants watch Michelle Obama’s “evolution of Mom dancing with Jim Fallon”— a late night comedian who is



very popular in the US.

<https://www.youtube.com/watch?v=Hq-URL9F17Y>

More than 50 million people watched the video.

Let's MOVE Campaign by Michelle Obama

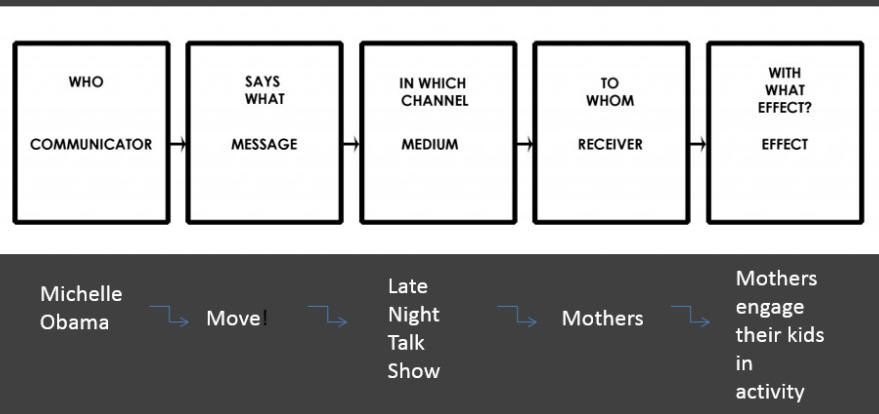
Problem statement: Almost one third of children in the United States are overweight.

Her Goal: Reduce child obesity rate to 5% by 2030.

She launched a massive campaign in the US to do that. One of them was through late night shows to get mothers to move with their children.

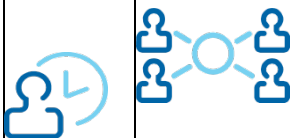
Communications ToC: *Let's Move!*





Can you identify each of the following in the *Evolution of Mom Dancing* video?



Let's MOVE Campaign outcomes:

- i) Improved awareness of nutrition
- ii) Partnerships with athletic organizations, celebrities and community groups that spread the *Let's MOVE!* message
- iii) 5,000+ schools now meeting high standards for nutrition and fitness
- iv) Through partnership with the Olympic Committee, in 2012, 1.7 million children had access to low-cost



<p>20 min</p> 	<p></p> <p></p> <p></p> <p>Discussion</p>	<p>athletics</p> <p>v) Institutional policy changes</p> <p>Watch the following commercial</p> <p>https://www.youtube.com/watch?v=UAyDinDY950</p> <p>Is it effective?</p> <p>Based on the ToC discussed above, you are provided with the following four scenarios. In four groups, develop a relevant message for each scenario.</p> <p>Group 1: Anthrax: One animal has tested positive for anthrax in your community but no other animals have tested positive in the last one year.</p> <p>Group 2: Brucellosis: Unboiled milk is being provided to school children at one local school in the rural area.</p> <p>Group 3: Ebola: An Ebola vaccine has just been developed.</p> <p>Group 4: Avian Influenza: One poultry trader who is normally at the marketplace has died. The cause of death is suspected to be Avian Influenza.</p> <p>Think about the following:</p> <ol style="list-style-type: none"> 1. What is the risk? 2. What does the public need to be aware of? 3. What message are you passing on? How? 4. Who is your target audience? <p>Take 10 minutes to prepare your message and 2 minutes to present.</p> <p>Discuss with the participants the different messages. Any gaps? Were the messages clear? What needs improvement?</p> <p>One Health Risk Communication</p> <p>What causes risk?</p> <p>Social Determinants of Health</p> <p>To effectively communicate risk, it is important to understand why people are exposed to risk, and why people behave the way they do. Do a brief introduction to social determinants of health?</p>
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One Health Communication

Social determinants of health are defined by WHO as “...circumstances in which people are born, grow up, live, work and age and the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies and politics.”

Briefly brainstorm what some of these circumstances and shapers are and how they link with systems thinking approach in One Health and then show the participants the picture below on the social determinants of health.



Briefly discuss the picture. What are the One Health issues identified in the picture that determine the health of individuals?

Risk communication is an open, two-way exchange of information and opinion about risk that leads to better understanding and better risk management decisions by all involved.

It is critical to have a plan in place to deal with a crisis before it happens. Communicating information about possible life threatening issues can be difficult, but if it is not done well, the communicator can put the public at a greater risk by creating misunderstanding or possibly inciting panic. Professional communicators owe it to the people and agencies they represent, as well as to the public, to be prepared to deal with a crisis— natural or manmade.

Establishing trust and credibility are two of the cornerstones of effective risk communication. When an issue is of high concern, such as the most recent Ebola outbreak, trust and credibility



15 min



10 min



on the part of communicators is essential. Without them, your message will not be heard, people will not make informed decisions, and problems can escalate. Using risk communication best practices can help manage risks better.

Present introduction on risk communication using PowerPoint (PPP No. 4). This brief PowerPoint will introduce the idea of risk communication to the participants, stressing the points mentioned above.

Think, Pair, Share

Present the following scenarios to participants and have them find solutions through think, pair and share techniques. In pairs, let them think of an answer, share the answer with each other and then have one of them share with the rest the solutions they came up with.

Scenario 1

- i) You are the spokesperson for the National Emergency Taskforce leading government response to an outbreak of anthrax in wildlife in a national park. The outbreak has spilled over to domestic animals and humans. Over 500 hippos have so far died.
- ii) Following the initial press release about the outbreak you are misquoted in the international media — misinformation which may cause undue concern or alarm and massively affect the tourism industry (outrage!).
- iii) As a spokesperson, how should you address inconsistent messages about the outbreak?

Scenario 2

You receive information that there seems to be a “strange disease”/haemorrhagic fever outbreak in a remote town.

- i) As a One Health leader, how can you communicate appropriate risk messages and ensure that you are communicating to the right audience?
- ii) Taking gender roles into consideration, who has access to what communication channels?
- iii) Identify one audience, one to two communication vehicles and develop 3 key points (messages).


25 min



Activity:

- i) Divide participants into groups.
- ii) Develop an interim plan for risk communication and information dissemination to educate the public regarding exposure risks and effective public response on an emergency of your choice. The following key issues need to be addressed:
 1. As part of the plan, identify key One Health spokespersons that can effectively communicate with the public and media to prepare for and respond to. Who did you select and why?
 2. Establish an emergency public information system, including call-down lists of One Health contacts, backup personnel who can be activated to address communications and information dissemination issues during the emergency. Ensure you are being gender sensitive.
 3. Establish mechanisms for tracking and monitoring message dissemination and exposure, media coverage, audience reaction and feedback, and changing communication issues and priorities.
 4. Consider how to communicate to multiple audiences based on their gender, culture, age, literacy and status.

Debrief:

Each group will present and the participants will discuss.



Message Basics

- i) Know your audience, keep messages short and focused (single sentences & headlines), save the background information for later, give action and recommendations in positive terms (“do” rather than “don’t do”).
- ii) Prioritize messages: first and last, must do, should do, could do; use visuals (graphics, demos), use non-technical language, use common figures of speech; don’t overwhelm with numbers/probabilities.
- iii) Be gender-sensitive.



Concluding Comments



Best practices in risk communication include:

- i) Remember communication is a two-way street

	 	<ul style="list-style-type: none">ii) Be aware of cultural and language differencesiii) Listen to your audience and seek understandingiv) Communicate with empathy and concernv) Do not assumevi) Use appropriate terminologyvii) Accept uncertaintyviii) Use key pointsix) Provide resourcesx) Foster partnershipsxi) Remain accessible <p>Have the participants watch YouTube video on “Outrage causes hazard perception”: https://www.youtube.com/watch?v=QhPWYlqd7qg</p> <p>Communication Strategies Communication strategies required to facilitate effective communication across multi-disciplinary responders to disease outbreaks</p> <p>Brief the participants that communication strategies are plans for communicating information related to a specific issue, event, situation or audience. They serve as the blueprints for communicating with the public, stakeholders or even colleagues.</p> <p>Ask participants to read the case of Aflatoxin occurrence in cow milk and list the key elements of effective communication strategies. Stress that communication strategies should identify the why, who, what and how.</p> <p>Specifically, the strategy should:</p> <ul style="list-style-type: none">i) outline the objective/goals of the communication.ii) identify stakeholders.iii) define key messages.iv) pinpoint potential communication methods and vehicles for communicating information for a specific purpose.v) specify the mechanisms that will be used to obtain feedback on the strategy. <p>Group Activity Divide the participants into small groups of (4–5 people each) and have them review the selected case given above. Ask each</p>
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	<p>group to produce a communication message by taking into consideration the above mentioned explanation. Give them 15 minutes to create a set of talking points targeting their audience. Have each group (or select a few groups) to share their talking points.</p> <p>Detailed Facilitator Notes</p> <p><i>Retrieved from various sources</i></p> <p>Communication Strategies</p> <p>Communication strategies are plans for communicating information related to a specific issue, event, situation, or audience. They serve as the blueprints for communicating with the public, stakeholders, or even colleagues. Communication strategies should:</p> <ol style="list-style-type: none">i) outline the objectives/goals of the communication.ii) identify stakeholders.iii) define key messages.iv) point out potential communication methods and vehicles for communicating information for a specific purpose.v) specify the mechanisms that will be used to obtain feedback on the strategy. <p>Communication strategies do not have to be formal written documents. They can simply involve taking the time to think about a communication problem or issue and determining the best approach for communicating the message or information. Such an approach is especially true for simple issues that need to be conveyed about low-risk sites that have not generated a high level of public concern. However, at sites with high levels of public concern or site clean-up issues that are expected to be controversial, a more formal written strategy may be needed to ensure that all stakeholders are reached and all key messages are communicated effectively.</p> <p>The first step toward developing a communication strategy is to determine the reason why the communication is necessary and defining the desired objectives. What do we want to accomplish by communicating information related to One Health? Objectives may include:</p> <ol style="list-style-type: none">i) Providing information on zoonotic diseaseii) Increasing One Health awareness
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 <p>60min</p>		<ul style="list-style-type: none"> iii) Encouraging action iv) Building consensus v) Changing behavior vi) Promoting community participation vii) Resolving conflict or asking for input <p>The Situation, Background, Assessment and Recommendation</p> <p>Explain the situation, background, assessment and recommendation (SBAR) communication process and how it can be used in One Health communication. The technique has become the best practice for standardized communication in health care; effortlessly structuring critical information primarily for spoken delivery. Regular use of SBAR is an important part of any organization's Crew Resource Management (CRM) family of skills, helping caregivers to function as effective team members while establishing a culture of quality, patient safety and high reliability. SBAR promotes quality and patient safety, primarily because it helps individuals communicate with each other with a shared set of expectations. Staff and physicians use SBAR to share patient information in a clear, complete, concise and structured format, improving communication efficiency and accuracy.</p> <p>In addition to these aforementioned staff, there is need to include the veterinarians in order to form a multidisciplinary team. Originally developed by the United States Navy as a communication technique that could be used on nuclear submarines, Safer Healthcare helped introduce SBAR into health care in the late 1990s as part of its CRM training curriculum. Since that time, SBAR has been adopted by hospitals and care facilities around the world as a simple yet effective way to standardize communication between caregivers.</p> <p>Standardize communication amongst staff</p> <p>The SBAR technique offers hospitals and care facilities a solution to bridge the gap in communication, including hand-offs, patient transfers, critical conversations and telephone calls. It creates a shared expectation between the sender and receiver of the information being shared.</p>
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 <p>60 min</p>		<p>Here is how SBAR works:</p> <ol style="list-style-type: none"> i) First, quickly organize the briefing information in your mind or on paper using the four elements (Situation, Background, Assessment and Recommendation) in sequence. Only the most relevant data is included, and everything irrelevant or of secondary importance is excluded. ii) Second, present your briefing. Since team members can immediately recognize and understand the familiar, predictable SBAR format, you help them more efficiently and effectively address a situation or solve a problem. iii) Third, they may confirm, clarify or enhance what you have said, then work with you to take the required action. <p>SBAR increases overall operational excellence, creates an environment in which a multidisciplinary team can work together more effectively and, most important, improves the safety of the patients they serve. One of the ways SBAR does this is by creating a shared mental model that ensures members are on the same page. SBAR also requires you to speak frankly and openly with others, regardless of their position in the organization.</p> <p>SBAR example: Nurse calling a physician</p> <p>SBAR promotes better communication in health care. In most cases, nurses and physicians communicate in very different ways. Nurses are taught to report in narrative form, providing all details known about the patient. Physicians are taught to communicate using brief “bullet points” that provide only the key information to the listener.</p> <p>The following is an example of a nurse’s call to a physician using SBAR:</p> <p>"Dr Jones, this is Deb McDonald RN. I am calling from ABC Hospital about your patient, Jane Smith."</p> <p><i>Situation</i></p> <p>"Here's the situation: Mrs Smith is having increasing dyspnoea and is complaining of chest pain."</p> <p><i>Background</i></p> <p>"The supporting background information is that she had a</p>
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	<p>total knee replacement two days ago. About two hours ago she began complaining of chest pain. Her pulse is 120 and her blood pressure is 128 over 54. She is restless and short of breath."</p> <p><i>Assessment</i></p> <p>"My assessment of the situation is that she may be having a cardiac event or a pulmonary embolism."</p> <p><i>Recommendation</i></p> <p>"I recommend that you see her immediately and that we start her on O2 stat. Do you agree?"</p> <p>The SBAR technique creates the shared mental communication model that ensures the nurse and physician remain on the same page throughout the conversation.</p> <p>After delivering the above message, ask the participants to build a case study on SBAR, giving an example of a medical doctor calling a veterinarian and environmentalist in an outbreak investigation.</p> <p>Things to Consider in Delivering your Message</p> <p>In assessing your total communication strategy, ask yourself:</p> <p>“What resources are readily available to me to communicate my message?” Once you have identified your needs and resources, review potential constraints you might face and develop strategies for overcoming these challenges. Determine when the communication will be best received. Determining the best timing involves thinking about whether your audiences prefer to be reached on weekdays or weekends, mornings or evenings, at work, or at home. Keep in mind that community demographics play an important role in determining the best methods for message delivery. Older populations or communities in remote locations may not be comfortable with or have access to the Internet, and some ethnic groups may prefer radio or a community newspaper to television as a news source. Build in time for producing materials and advance notice of events.</p> <p>Feedback</p> <p>When delivering key messages, ensure your messages are clearly communicated and have integrity. Encourage your audience to provide feedback after the message is delivered. This feedback will help you to evaluate the implementation of</p>
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your strategy; its strengths and weaknesses; how it can be improved, and how your strategy should be revised to ensure continued effectiveness. Some simple feedback methods include taking note of how many people attended a public meeting; television station viewership number, the gender of the participants, how many people stayed to the end.

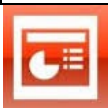
Participant Assignment

Case study: Outbreak of Ebola in Rwanda



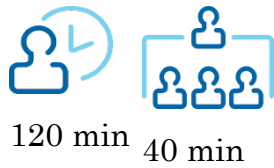
In a rural community of Gatuna in Rwanda, there was an Ebola outbreak in 2010. The village of Gatuna is characterized with a high population density, high mortality, high mobility, poor accessibility and high poverty levels. The people in the community are mainly involved in subsistence agriculture

		<p>although they grow a few cash crops like coffee. The people of this community are also involved in livestock farming and they raise cattle mainly for milk and beef. Apart from the meat from domesticated animals, the people of this community also eat meat from wild animals. The people are very sociable and they live and work so closely and support each other in various ways.</p> <p>Practices of communal eating/feasts, marriage festivals and traditional burial ceremonies are frequent in this community. The community has several traditional chiefs, religious leaders, especially church priests and pastors as well as sheiks. Whereas the literacy levels are still low, there are 2 primary schools and one secondary school in the community. During the Ebola outbreak of 2010, over 50 people died in a period of 3 months. This was the first time an Ebola outbreak occurred in this village.</p>		
Communication Strategies Worksheet				
Description of the issue/problem:				
Key messages:				
Audience	Communication Vehicles	Resources & Time		
<p>Question</p> <p>Assuming that you were there during the outbreak, use the Communication Strategies Worksheet to call for assistance from different organizations.</p>				



Apply communication strategies to particular disease outbreak scenarios through existing leadership with a perspective of gender, culture and ethics.

45 min



The participants should understand the gender roles to communicate a disease outbreak, prevention and control and the use of a multidisciplinary approach to inform policy and practice.

Divide the participants into groups of 5–6 (depending on the size of class) and give them 20 minutes to complete the following task:

You have been asked to speak to a community or an organization about One Health. Your goal is to promote the One Health approach relating to a recent outbreak with a perspective of gender, culture and ethics.

Have two or three groups present their key message on the scenario they selected. After the final presentation, give participants a positive and constructive feedback.

Conclude the session with short lecture on how to map, develop and summarize.



Gender Gap in Communications

- i) First divide the participants into 2 groups.
- ii) Ask each group to select and discuss one of the following points:
 - How culture, gender or behavior affects communication.
 - How gender, social and cultural factors could be a barrier for effective communication.
- iii) Let the group present the summary of their discussion.
- iv) Give them a feedback.
- v) Conclude the session with a brief presentation on the gender gap in communication.

Reading Materials

Houghton, S. A., Khalifa, A. A. (2014). An Exploration of the Communication Strategies Used when Culture-Laden Words are Translated from Japanese to Arabic in ELF

Interaction. Linguistics and Education, 28(9), 28-40.

SESSION 3

Risks and Trans-boundary Communication



Session Overview

Session 3 will include a session on the ability to communicate risk at multiple levels, as well effective communication with the media and the public.

Learning Objectives and Activities

By the end of this session, participants should be able to:

- i) demonstrate the ability to communicate risk at multiple levels.
- ii) demonstrate the ability to effectively communicate with the media and the public.
- iii) design communication strategies across multiple sectors.

 <p>415 min</p>	 <p>20 min</p>	<p>One Health Presentation: Trans-boundary Communication</p> <p>Trans-boundary communication is the communication practice that occurs across international borders and the need for international communication due to the increasing effects and influences of globalization on One Health approach.</p> <p>Delivering a Message</p> <p>Tell the participants to work in pairs and practice the message delivery as follows:</p> <ul style="list-style-type: none"> i) Decide who will share the message first. ii) Deliver your message in 3 minutes. The message must be in line with One Health core competences. During the delivery, your partner will play the role of the target audience. iii) Once you have finished, give your partner time to complete the observation worksheet. iv) Then switch roles and repeat steps (i) and (ii). <p>Observation Worksheet</p>
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Speaker	Yes	No	Comments
Acknowledges concerns, fears, or other emotions			
Personalizes caring (within first 30 seconds)			
States confidence problem will be solved (even if not all info is available)			
Uses short words (< than 3 syllable English words)			
Uses common terms (plain language)			
Uses short sentences (< than 10 words)			
Describes risk or situation without statistics			
Shows preparation and competence			
Describes commitment			

Ask the participants the following questions:

What do you think?

1. How did the limited amount of time affect which messages you were able to say?
2. What makes it hard to show empathy or competence?
3. What makes it easier to show empathy or competence?
4. What makes it hard to use simple language?
5. Who else can assist you in talking with people to establish trust and credibility?

		<p>6. What differences do you notice between the different audiences? Summarize whatever they have talked about.</p>
<p>120 min</p>	<p>Group Activity</p>	<p>Group Activity: Design thinking and communication. This session will introduce the concept of design thinking using Antimicrobial stewardship as the basis</p> <p>Introduce the concept of design thinking that will lead us into communication and education on AMR stewardship. Break participants into four groups. Through the design thinking process the groups will think through an identified problem:</p> <p>The 4 groups will work on the following four problems:</p> <ol style="list-style-type: none"> 1. How might we effectively communicate with the illegal traders to reduce antibiotic misuse /abuse? 2. How might we reduce bad prescribing practices and their causes (targeting prescribers and users)? 3. How might we involve community members including human, animal and environment sectors on proper AMR stewardship? 4. How might the government improve policies, regulation and use of antimicrobials and antibiotics use? <div data-bbox="594 1108 1395 1690" data-label="Diagram"> <p>The diagram illustrates the Design Thinking process through five interconnected stages, each represented by a colored hexagon:</p> <ul style="list-style-type: none"> EMPATHIZE (Blue): Develop a deep understanding of the challenge DEFINE (Green): Clearly articulate the problem you want to solve IDEATE (Yellow): Brainstorm potential solutions, select, and develop your solution PROTOTYPE (Orange): Design a (series of) prototype(s) to test all or part of your solution TEST (Red): Engage in a short-cycle testing process to refine and improve your solution </div> <p>As part of the design thinking process, the participants will work through all the design thinking steps as above with your instruction and support. At the end, they will develop a visual prototype based on their best solution, and share that solution with the plenary.</p>

 <p>20 min</p>		<p>Discovery Activity: Communication in AMR Review the following scenario and discuss.</p> <p>The Ministry of Health is worried about the misuse of antibiotics and the development of AMR in Cameroon, especially the sale of antibiotics in the market place in Bangante. They decide to have a meeting to educate people on the use of antibiotics and antimicrobials. They announce this information on the TV asking traders to show up for this training. They host a three-day meeting at the Ministry of Health offices including during the market day to educate the traders on the use of AMR. Unfortunately, very few people show up. The Ministry realizes that they need to change their strategy.</p> <ol style="list-style-type: none"> 1. What are they doing wrong? 2. What can they do differently? 3. Who is the target audience? 4. How do they reach /communicate with the target audience? 5. Are there any gender issues included here? <p>Group Activity: Personal Experiences After discussing the above scenario, have the class share some personal examples from their work where they have seen communication failures. It could be related to wrong audience, using wrong media or even giving the wrong message. How was the issue sorted out? Every member of the group should have come up with at least one example.</p>
 <p>60 min</p>	 <p>30 min</p>	<p>Design communication strategies across multiple sectors including local and international players i.e. NGOs, OIE, FAO, WHO etc.</p> <p>Key topic:</p> <ul style="list-style-type: none"> • The concept of borders and cross-border communications • Globalization, globalism and transnational networks <p>Ask the participants to work in pairs:</p> <ol style="list-style-type: none"> i) Decide which participant shares the message first. ii) Deliver your message in 5 minutes. The message must be in line with One Health core competences. During



30 min

the delivery, your partner will play the role of the target audience such as the Country Director of any NGO, OIE, FAO, WHO or local or international media.

- iii) Once you have finished, give your partner time to complete the observation worksheet.
- iv) Then switch roles and repeat steps (i) and (ii).

Observation Worksheet

Speaker	Yes	No	Comments
Acknowledges concerns, fears, or other emotions			
Personalizes caring (within first 30 seconds)			
States confidence problem will be solved (even if not all info is available)			
Uses short words (< than 3 syllable English words)			
Uses common terms (plain language)			
Uses short sentences (< than 10 words)			
Describes risk or situation without statistics			
Shows preparation and competence			
Describes commitment			

Ask the participants the following questions:

1. How did the limited amount of time affect which messages you were able to say?
2. What makes it hard to show empathy or competence?
3. What makes it easier to show empathy or competence?
4. What makes it hard to use simple language?
5. Who else can assist you in talking with people to establish trust and credibility across multiple sectors?

		<p>Facilitator Notes</p> <p>Essentials of Communication</p> <ul style="list-style-type: none">i) Always think ahead about what you are going to say.ii) Use simple words and phrases that are understood by everybody.iii) Increase your knowledge on all subjects you are required to talk about.iv) Speak clearly and audibly.v) Check twice with the listener whether you have been understood accurately or not.vi) In case of an interruption, always do a little recap of what has already been said.vii) Always pay undivided attention to the speaker while listening.viii) While listening, always make notes of important points.ix) Always ask for clarification if you have failed to grasp other's point of view.x) Repeat what the speaker has said to check whether you have understood accurately. <p>Basics of communication</p> <ul style="list-style-type: none">i) Improve languageii) Improve pronunciationiii) Work on voice modulationiv) Work on body languagev) Read morevi) Listen morevii) Avoid reading or watching or listening to unwanted literature, gossip, media presentation, etc.viii) Interact with qualitative people.ix) Improve on your topic of discussion.x) Practice meditation and good thoughts.xi) Think and speak.xii) Do not speak too fast.xiii) Use simple vocabulary.

		<p>xiv) Do not speak only to impress someone.</p> <p>xv) Look presentable and confident.</p> <p>Tips on Improving Body Language</p> <p>i) Keep appropriate distance</p> <p>ii) Touch only when appropriate</p> <p>iii) Take care of your appearance</p> <p>iv) Be aware that people may give false cues</p> <p>v) Maintain eye contact</p> <p>vi) Smile genuinely</p>
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SESSION 4

Emergency Response Planning and Communication

Session Overview

This session focuses on emergency response planning. The session takes the approach of student-based-learning, facilitating participants to reflect on the relevance and gaps of what they do daily in their work of communicating and managing disease pandemics. Participants will be able to develop a gender lens so as to see gender gaps in the emergency planning as it impacts men, women, boys and girls, young and old. The rest of the day will engage the participants and a simulation exercise in which they will be expected to construct a visual of their plan engaging either the community or stakeholders. This will require them to be innovative and come up with exciting and new ideas on how to present their plan to the community or stakeholders.

Learning Objectives and Activities

By the end of this session, participants should be able to:

- i) create and implement gender-sensitive disease outbreak emergency response plans across all phases (e.g. preparation and planning, detection and risk assessment, response, and evaluation) of a response.
- ii) advocate for One Health change.
- iii) prepare and deliver gender-sensitive risk communication.

Detailed Facilitator Notes



15 min



This session focuses on gender-sensitive emergency response planning that is both efficient and effective in planning properly for men and women, boys and girls, young and old. Participants will be able to develop a gender lens so as to see gender gaps in their response planning for:

- i) preparation and planning.
- ii) detection and risk assessment.
- iii) response.
- iv) evaluation.



60 min

Fundamental Principles of Gender-Sensitive Emergency Response Planning in Disease Outbreaks

Interactive lecture covering:

- i) What is emergency response planning?
- ii) The fundamentals of emergency response planning in disease outbreaks.



60 min



Introduction to Advocacy

Almost all development initiatives that focus on transformed gender relations involve some level of advocacy involving women and men, boys and girls who are affected. In order to effectively operationalize gender issues in One Health and emerging pandemics, there is need for:

- i) continuous awareness creation campaigns and establishment of formal coordination mechanism for gender and One Health approach.
- ii) ensuring political will and availability of favorable gender policies within OHCEA and at national and regional levels.
- iii) building capacity of health care professionals in gender and One Health sectors for operationalization of an engendered One Health approach.

In this section, we will briefly discuss advocacy issues related to increasing awareness of pertinent gender issues as they relate to One Health and emerging pandemics.

Video: Rabies Advocacy

Select one of the videos from the list below.

- Her Royal Highness Princess Haya with OIE Against Rabies at <http://www.youtube.com/watch?v=XjbBeie2G>
- No more Deaths from Rabies at <https://www.youtube.com/watch?v=qoBumMaDr3g>
- Fighting Rabies in Asia at http://www.youtube.com/watch?v=RS4_38sZF3w&feature=c4-



[overview&list=UUYWwT1w9Yv2qpKChz9Hoomg](#)

Debrief

- i)* Ask four or five participants to share an experience when an individual or organization advocated on their behalf about a health issue and changed a dynamic in their lives. How did it feel to have someone advocate for them?
- ii)* Ask four or five participants to share their experiences when they had opportunity to advocate for someone about a health issue. What were the challenges and how did they overcome them? How did they feel advocating for someone?



Gender Advocacy

Show the PowerPoint (**PPP No. 5**) presentation on “do you know?” - a gender advocacy presentation.



45 min



Introducing Negotiation Skills in One Health

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. Communication is key to great negotiation. 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 government, 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 AK-47s. The rebels had not come to intimidate the villagers, but to target the lake's hippo population.

Conflict had erased most of the Congolese wildlife authority's control in this part of the park. According to 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 at nightfall. The next day, patrolling the sector on 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)



30 min



**Small Group
Activity**

would be implicated, though none have yet been held accountable.

Small Group Activity

- i) Divide the participants 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 use the principles they learnt in communication.
 1. What message are they trying to communicate?
 2. Who is their audience?
 3. What do they hope to achieve?
 4. Do they understand the value mode of their counterparts, and how can they use that to negotiate better?
- ii) They should elect a representative who will state their key position and a solution to the problem.
- iii) Bring all the groups together to the table.
- iv) At this point give the PowerPoint (**PPP No. 6**) presentation on negotiation. 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.
- v) 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

How easy is it to negotiate? Apart from this instance, let each participant discuss instances where she/he needed to negotiate and the methods she/he used. How did she/he prepare? How did she/he bring everyone on board? Brainstorm with the participants some solutions to the Virunga problem.



200
min

Simulation Exercise

The rest of the day will be spent developing a simulation exercise. Divide the participants into 3 groups:

- i) Preparation team
 - ii) Detection (surveillance) and response
- Post-emergency response and evaluation



200 mins

Using a Simulation to Integrate Course Concepts, Skills and Knowledge

A simulation is a tool used for the reproduction of an event and analysis of its results in order to improve readiness for an eventual occurrence of the situation or similar situations. From the point of view of One Health, a simulation is defined as a multi-sector and coordinated approach integrating fauna, animal health, human health, the environment and communication. It aims at responding in a more effective way to an emerging pandemic threat. This approach recognizes the need to strengthen collaboration, communication and the coordination among specialists of different sectors. This implies the need to create bridges between disciplines in order to complete planning, intervention in terms of surveillance or response, reporting, data analysis and evaluation of activities in an integrated manner in order to better fight pandemic threats.

In this exercise, we are using a simulation to integrate skills and knowledge across the domains of:

- i)* Epidemiology
- ii)* Emerging Pandemic Threat Response
- iii)* Gender Analysis
- iv)* One Health

This simulation will evaluate the participant's ability to:

- i)* integrate knowledge across multiple domains.
- ii)* identify the necessary actions within the framework of a national plan of preparation to a pandemic.
- iii)* follow procedures when planning and responding to epidemics and epizooties.
- iv)* work on multi-disciplinary teams.
- v)* coordinate actions across sectors.
- vi)* communicate clear and consistent messages to multiple audiences.



5 mins

In this section, the participants will be able to prepare and respond to an emergency, taking into consideration all the gender tools given during this training; identify and manage challenges that occur in any emergency situation. Begin by presenting the following scenario to the participants:

You have just been informed that there is a suspected Ebola outbreak in Luwero village in

western Uganda bordering Rwanda. A total of 14 people have died and 26 others in the village are reportedly sick. There is only one health center in the area manned by one local doctor and two nurses. The Government is putting you in charge of the emergency response. You have been given a budget of US\$ 20,000 to mobilize three teams: Preparation Team, Detection and Response Team, and Post-emergency and Evaluation Team, to prepare and respond to this emergency. The three teams are first of all expected to get together, brainstorm and draw up a plan of action for each of them.

The following are the key questions to consider when brainstorming:

Coordination Structures

1. How do you bring gender into coordination structures you are creating?
2. How do you proactively support gender and protection services? (gender continuum could be useful here)

Gender Analysis to Inform Preparedness, During and After:

1. What gender analysis tools are you going to use to support your activity?
2. What gender lessons would you anticipate?
3. What are the lessons to

learn and recommended actions to be taken?

Vulnerability Assessments

1. What tools and approaches can you use to map the gender differentiated risks?
2. What technical support will you provide to gain gender differentiated insight into the capacities and the vulnerabilities of the affected communities?
3. What kind of gender technical support can you provide to monitor threats to vulnerable groups?

Information Gathering and Management

1. How do you ensure an appropriate mix in an assessment team, and how do you ensure that you are consulting with all the required parties?
2. How do you ensure post assessments capture relevant data by sex, age, disability and vulnerability?

Group Work



75 mins

Information Sharing and Communication

How will technical support be provided to ensure that information and communication flows to all groups in the community?



15 mins

Planning

1. How do you ensure that outbreak response prioritization is based on gender analysis?

2. How do you ensure that gender and diversity are included in capacity assessment, that any contingency plans are gender-sensitive, that gender gaps are identified in any section of preparedness, response and evaluation, and that gender is mainstreamed in emergency preparedness training?



45 mins

Capacity Building

1. What existing knowledge among your community members can you build on or enhance?
2. What coping strategies can you identify among the different groups, and how do you use them to be more effective?
3. How do you facilitate the community to become self-sustaining and create and implement a disaster management plan?
4. How do you help train and build the capacity of key stakeholders and implementing partners?
5. How do you ensure the capacity building efforts are gender balanced and sustainable?



30 mins

Resource Mobilization

1. How do you ensure that gender needs are reflected in each part of the process and that resources being mobilized are utilized to address all groups?

2. How do you evaluate to see if you handled everything in the right manner?
3. How do you develop/put in place a gender sensitive risk assessment plan and a preparedness plan to ensure you are prepared for another outbreak?
4. What are the key challenges facing this community and the country after the outbreak has been contained?



30 mins

Step 1

Using flip charts and sticky notes, map out a plan of action including the personnel and resources you will need in your group. Put resources and personnel and action items on the left side of one flip chart and on the right, indicate how you will make the process gender-sensitive by responding to the above questions. Present this to the plenary. Each group has 10 minutes to make a presentation.

Step 2

Based on the above, identify/select 5 key activities that your group feels are important to achieve your objective of an efficient gender-sensitive preparedness, response or post-emergency evaluation program.

Step 3

Using the material provided, create/build your visual plan, focusing on the five activities mentioned above. Ensure that

gender issues are reflected in that visual.

Step 4

Each group will be allowed 10 minutes to present their visual/construction plan to the rest of the group. All participants will then grade the groups depending on how good their visual is, how easy it is to understand, how it encompassed gender issues discussed in the training and how efficient it seems to be to achieve its objective. The participants will then select what is considered as the best visual.

Debrief

As you debrief the participants, keep them focused on the following:

1. **Why?** – Why are we doing this initiative?
2. **What?** – What is the work that needs to be performed to successfully complete the initiative? What are the major products/deliverables?
3. **Who?** – Who will be involved and what will be their responsibilities within the initiative? How will they be organized?
4. **When?** – What is the timeline and when will milestones be completed?
5. **Where?** – Where is the engendered One Health initiative taking place (e.g.

the location)?

These questions are critical in defining the limiting constraints on an initiative, or the scope, resources and schedules available in an emergency.

- Visual of final product





As each group's response and actions need to build on the work of the following group, it is important that during the debrief you review the performance of the presenting team and give feedback, ensuring that the participants know what the complete and accurate actions should be.

Preparation Team

- i)* Form a gender balanced Outbreak Technical Committee (OTC). The team should have at least one member of the opposite sex.
- ii)* All sectors directly affected by ebola must be represented on the team (veterinary, health, wildlife, security, media, community development/gender expert, community leader/politician, development partners).
- iii)* Hold outbreak coordination meetings chaired and co-chaired by Commissioner for Health and Commissioner of Veterinary Services respectively.
- iv)* Put in place a surveillance system: weekly reports to the Ministry of Health, Ministry of Animal Industry, WHO, OIE and FAO.
- v)* Develop an outbreak response plan: resources, skills and activities required.
- vi)* Stockpiles: sampling kits, chemicals, drugs and vaccines.

One Health Communication

- vii)* Develop contingency plans for isolation wards in hospitals and quarantine of poultry.
- viii)* Put in place laboratory support.

Detection Team

- i)* From the preliminary laboratory sample reports and circumstantial evidence, the Outbreak Technical Team has been convinced that there is an outbreak of HPAI in the country, and thus they recommend the concerned sectors to constitute a field detection team immediately. The Field Detection Team will be directly reporting to the OTC.
- ii)* The Field Detection Team is formed consisting of the relevant experts of veterinarian, medical doctor, nurse, wildlife expert, disease anthropologist/socio-economist, laboratory technologist, and communication expert.
- iii)* The team sets out to the field to collect interview responses and laboratory samples from poultry and human beings with suspected clinical signs.
- iv)* The team must be gender balanced and deliberately include female respondents.
- v)* The samples are submitted to the laboratory.
- vi)* Tests are carried out and report written and submitted to the OTC.

Response Team

- i)* The Outbreak Technical Team recommends formation of a Response Team.
- ii)* The Response Team consists of expert members from the relevant sectors (veterinary, medical, nurse, wildlife, gender/community development expert, communication expert, community leader, and international organizations (e.g. FAO and WHO).
- iii)* The Response Team must consist of at least a member of the opposite sex to avoid gender-insensitive conclusions and decisions.
- iv)* The Response Team studies the reports (both laboratory and field reports) to confirm Avian Influenza.
- v)* The number of cases highly points to the outbreak of Avian Influenza.
- vi)* Clinical specimens are dispatched to CDC laboratories for confirmation.
- vii)* The response team counts number of cases and determines size of population to calculate attack rate.
- viii)* Analyze descriptive data to date e.g. time/date of onset, place/location of cases and individual characteristics such as age and sex.
- ix)* Determine the population at risk. (This must be age and gender disaggregated.)
- x)* Formulate hypothesis for pathogen/source transmission.
- xi)* Follow up cases and contacts.
- xii)* Produce a report (results and recommendations for action).
- xiii)* Discuss the report with the OTC.
- xiv)* Implement control and prevention measures specific for the disease (press releases, public education messages, radio and TV talk shows, memos from the

Ministry Headquarters to District Directors of Health, Commissioner of Veterinary Sciences to District Veterinary Officers (DVOs).

- xv)* Institute quarantine of poultry
- xvi)* Produce bio-security SOPs to be used on farms.
- xvii)* After the disease is seemingly under control, e.g. no reports of new cases, the OTC recommends the formation of an Evaluation Team.

Evaluation Team

The team:

- i)* consists of at least one of the following experts: veterinarian, medical doctor, nurse, wildlife expert, community development expert, media expert.
- ii)* assesses the appropriateness of containment measures.
- iii)* assesses timeliness of outbreak detection and response.
- iv)* assesses the preparedness of the country as far as the disease is concerned.
- v)* assesses the effectiveness of the various teams in terms of gender composition and One Health compliance.
- vi)* writes and disseminates the outbreak report, declaring the status of the disease and recommendations where necessary for future implementation.

OHCEA EVENT EVALUATION – ONE HEALTH COMMUNICATION SHORT COURSE

Facilitators: _____

Dates: _____

OHCEA supported you to attend the One Health **Communication** 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

1. This event met my expectations.
 - a) Strongly disagree
 - b) Disagree
 - c) Agree
 - d) Strongly agree
 - e) Don't know
2. This event was relevant to my personal interests.
 - a) Strongly disagree
 - b) Disagree
 - c) Agree
 - d) Strongly agree
 - e) Don't know
3. This event was relevant to my professional interests.
 - a) Strongly disagree
 - b) Disagree
 - c) Agree
 - d) Strongly agree
 - 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
5. The amount of information provided was:
 - a) Not enough
 - b) About right
 - c) Too much
6. This event helped clarify my understanding of "One Health."
 - a) Strongly disagree
 - b) Disagree
 - c) Agree
 - d) Strongly agree
 - e) Don't know
7. The pre-event logistics were well organized.
 - a) Strongly disagree
 - b) Disagree
 - c) Agree
 - d) Strongly agree
 - e) Don't know
8. The event itself was well organized.
 - 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
10. I intend to take action in my work as a result of what I have 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 because of this event.

12. What were the strengths of this event?

13. What can be done to improve this event?

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

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

16. Did you present at this event?

- a) Yes
- b) No

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

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: _____

References

- Article, O. (2011). Recommendations of the International Medical Informatics Association (IMIA) on Education in Biomedical and Health Informatics – First Revision, 7(2), 3–18.
- Beltz L. A. (2011). Emerging Infectious Diseases: A Guide to Diseases, Causative Agents and Surveillance
- Carlos Castillo-Chavez, et al (2002). Mathematical Approaches for Emerging and Re-emerging Infectious Diseases: Models, Methods, and Theory (The IMA Volumes in Mathematics and its Applications)
- Dworkin, M. S. (2009). Outbreak Investigations around the World: Case Studies in Infectious Disease Field Epidemiology
- <http://codex.cs.yale.edu/avi/os-book/OS8/os8c/practice-exer-dir/>
- http://global.oup.com/us/companion.websites/9780195383157/student/chapter7/quizzes/fb_quiz/
- http://highered.mheducation.com/sites/0072967757/student_view0/chapter5/multiple_choice_quiz.html
- <http://pr.viu.ca/ce/ComputerBasicsQuiz.htm>
- <http://www.bcs.org/content/ConWebDoc/3393>
- <http://www.indiabix.com/computer-science>
- <http://www.indiabix.com/electronics/analog-to-digital/>
- <http://www.isbe.net/sis/html/faqs.htm>
- <http://www.pearsonitcertification.com/articles/article.aspx?p=2218577&seqNum=15>
- <http://www.pitara.com/quizzes-for-kids/technology-quizzes-for-kids/computer-hardware/>
- <http://www.proprofs.com/quiz-school/story.php?title=easy-computer-quiz-beginners>
- <http://www.technotouch.com/TechBasicQuiz.htm>
- <http://www.youtube.com>
- <https://clep.collegeboard.org/exam/information-systems-computers/questions>
- https://docs.moodle.org/23/en/Effective_quiz_practices
- Kenrad, E. N. and Carolyn, W. (2013). Infectious Disease Epidemiology: Theory and Practice
- Manya, M. (2009). Essentials of Infectious Disease Epidemiology (Essential Public Health)
- Overview Informatics Competencies for Every Practicing Nurse: Recommendations from the TIGER Collaborative. (n.d.).

Rolf Bauerfeind, et al (2015). Zoonoses: Infectious Diseases Transmissible from Animals to Humans (2015).

SEAHOUN Module on Infectious Disease Management, Communication & Informatics

Services, H., Control, D., Workforce, O., Development, C., Medicine, C., & Informatics, H. (2009). Competencies for Public Health Informaticians.

Yasnoff, W. A., et al. (2000). Public Health Informatics: Improving and Transforming Public Health in the Information Age, 6(6), 67–75.