



INTERNATIONAL SOCIETY
FOR DISEASE SURVEILLANCE

International Society for Disease Surveillance One Health Surveillance Working group

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www.syndromic.org

Outline


- Short description of ISDS
- OH Surveillance Working Group
 - History
 - Purpose
 - Activities
- Collaboration with NEOH


About ISDS

- US registered non-profit
- Established in 2005
- Yearly Conference
- Based in Boston, MA
- Director and small staff
- Supported by grants
- Initial focus SYS
- Currently changing focus


 460+ members


 12 board members

 2,000+/year volunteer hours

 350+ organizations

 41 US states and territories

 40 countries

 5 continents

ISDS: 2016-18 Strategic Plan

- **Vision**

Population health decisions are informed by accurate and timely health surveillance.

- **Mission**

The mission of ISDS is to advance the science and practice of health surveillance worldwide.

ISDS: Our Approach

- **What we do:**

- Build surveillance capacity
- Strengthen surveillance infrastructure
- Foster global surveillance networks



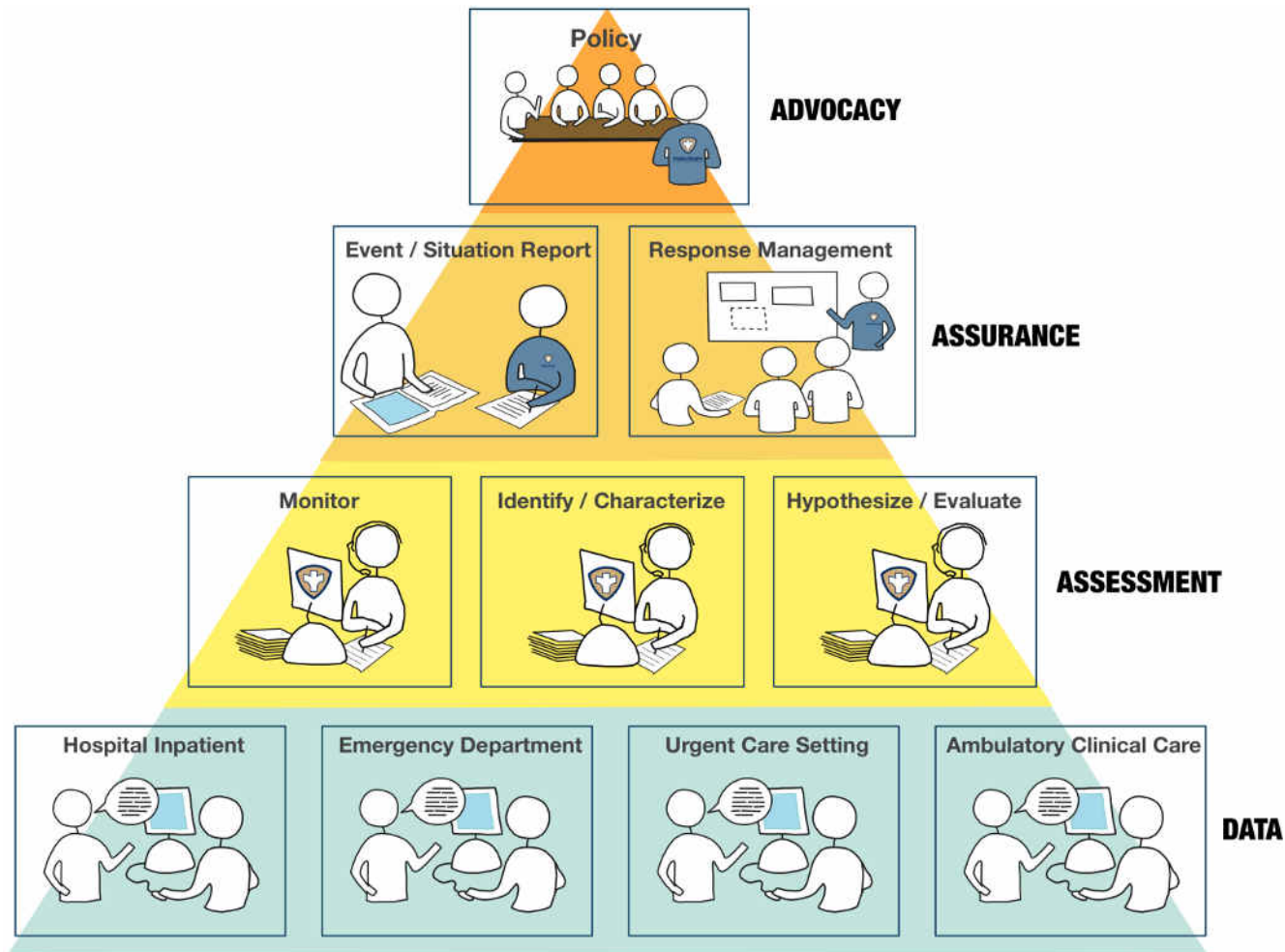
- **How we do it:**

- Cultivate action-oriented interdisciplinary collaborations
- Develop, evaluate, and disseminate innovations in surveillance
- Support research, education, and advocacy

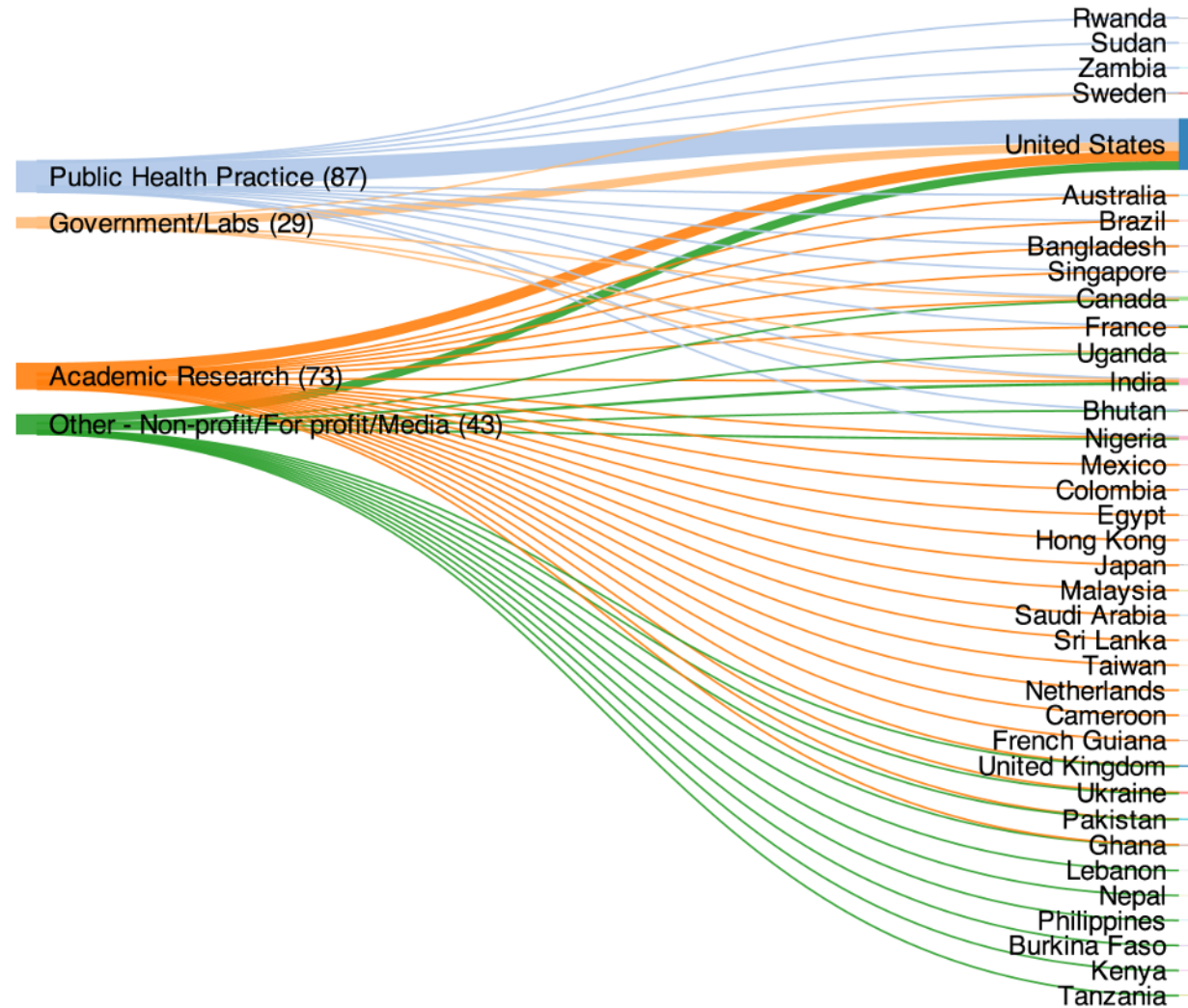
ISDS Activities

- Annual Conference
- Webinars
- Surveillance expertise
- Research priorities for surveillance
- Surveillance knowledge repository
 - Papers, R code, courses, methods
- Supports communities of practice
 - Data sharing, Methods and Tools (r), working groups
- Project work
 - Training, courses, consultation

Common Goal: Data for Decision-Making



Cross-sector networks



OHS Working Group

- Emerged out of relationships established in 2014
 - Following ICAHS² in Cuba
 - Survey of attitudes towards OHS
 - Workshop at ISDS Conference in Dec 2014
- Inaugural meeting: March, 4 2015
- Collaboration
 - Between human, animal and environmental surveillance practitioners

Goals of OHS Working Group

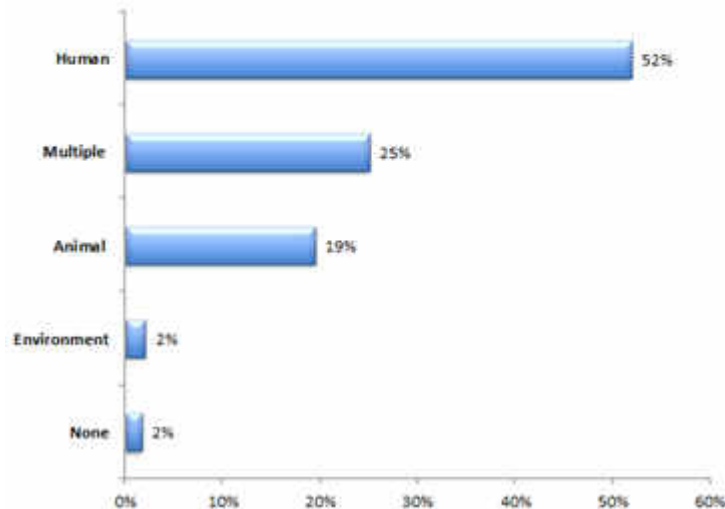
1. Promote integrated/collaborative surveillance for OH decision making
2. Characterize and understand OH surveillance
 - What information/data is needed for OH decision making?
3. Work with communities to identify, test, and validate best practices.
4. Contribute to the evidence-base for OHS through knowledge creation and management.
5. Partner synergistically with other organizations.

OHS Working Group

- **OHS Leadership Team**
 - SMEs in human and animal health surveillance from around the world;
 - Common interest in discussing One Health concepts from a surveillance perspective.
- **OHS Working Group**
 - Monthly meetings
- **Webinars, Workshops, Projects, Conference track**

2014: Surveyed Health System Worker Attitudes to OH Surveillance

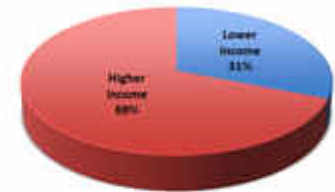
Study Population



Study Population

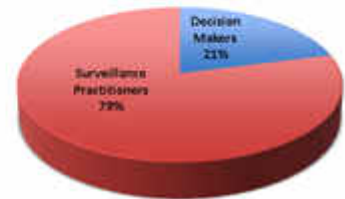
Income

World Bank Definition
<http://data.worldbank.org/>



Role

Surveillance Practitioner
Decision Maker



185 completed responses
44 countries
40% from the USA

Scenario

- A patient visits an emergency room:
 - In respiratory distress
 - Farmer with large flock of chickens and geese
 - He/she and his/her children recently swam in a community pond
 - Migratory birds were present in the pond
- In past month: unusually high number of people seen at emergency with similar signs
- ER Dr contacts you at the local health/VPH dept
- This is in your jurisdiction and you have to establish a joint human, animal, environment investigation

Results

- **Is there a Gap in surveillance capacity for OH?**
 - 22% – 55% said there was frequently or always a challenge
 - PH less likely to report there was a challenge than AH or M, for a few surveillance capacities
- **Is there motivaton to improve surveillance capacity?**
 - 62% - 82% said improvement was medium or high priority
 - LI more motivated than HI for most capacities
- **Would OHS benefit you?**
 - 85.5% said yes
 - PH less likely to say they would benefit than AH or M
- **Are you using OHS?**
 - 48.7% said yes

2015: OHS Case Studies

- June 2015: Call for OHS case studies
 - Collect examples of OHS projects and initiatives from around the world
- 33 case studies submitted
 - Reviewed by volunteers from OHS workgroup and ISDS staff
- 7 Selected for ISDS workshop Denver 2015
 - Expenses paid by Skoll Global Health Threats Fund

Case Studies

ISDS Conference Denver Dec 2015

Country	Case Study Title
Cuba	CEDESAP and REDesastres network with “One Health” surveillance approach for the sanitary risk reduction in the agricultural sector.
USA	Developing a One Health Surveillance (OHS) Approach in Washington State: A case study of <i>Coccidioides immitis</i>
India	The “One Health” experience in India: A partnership among veterinarians, physicians and other healthcare professionals in curbing Vector Borne Zoonoses
Bolivia	Promoting the One Health Approach to prevent wildlife-borne zoonotic diseases in Bolivia – Yellow fever outbreak case study
Georgia	Georgia’s Choice: Moving One Health Forward
Rwanda	Promoting and supporting wildlife surveillance for zoonotic pathogens in Rwanda

Workshop Outcome



OH is complex

Because of this:

- Understanding health in a OH context is a challenge
- Communicating OH information is a challenge

Explore modeling frameworks for describing:

- Health problem(s) in a OH context
- Potential solutions, responses, mitigations
- Information and surveillance needed for decisions

NEOH-ISDS Collaboration

- Work together with Case-Study authors
- Develop modelling framework
- Develop, test and validate metrics
- Funding
 - Swiss grant (SERI)
 - CDC global health grant with Ecohealth Alliance

Questions

