

International and EU Health Law and Governance for 'One Health'

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OUTLINE

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The 'One Health' Approach Means

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**One World, One Medicine,
One Health**

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Reasons for a 'One Health' Approach

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**Acknowledgment of the linkages
among human health, animal
welfare and plant protection**

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In other terms,

- ➤ (Human) Health protection as a result of
 - ▣ Animal welfare ➤
 - ▣ Environment/Plant protection ➤
 - ▣ Food security ➤

Health protection can be undermined because of

- Zoonotic spill over and spillbacks of pathogens from animals to humans and viceversa
- Environmental degradation
- Air and Water pollution
- Deforestation
- Loss of biodiversity
- Land use change, whether direct or indirect
- Climate change
- Food insecurity

Since 2003 SARS,

- Vector-borne diseases, i.e. zoonotic infectious diseases, have increased
- High-speed spread of infectious diseases due to environment-related causes

In short,

- The environmental dimension of zoonotic disease transmission to humans is important and can make the difference
- Resorting to a 'One Health' approach can reduce the risk of zoonotic pandemics

How is the 'One Health' approach?

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The 'One Health' Approach is

- Unitary
- Integrated
- Pro sustainable development
- Interinstitutional
- Multisetorial
- Interdisciplinary

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<https://www.izsvenezie.com/one-health-approach-video/>

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**Antimicrobial Resistance (AMR)
as One Important Reason
for the 'One Health' Approach**

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Antimicrobial Resistance

- is an emerging challenge due to the overuse and misuse of antibiotics in agriculture and medicine
- is due to the ability of microorganisms to resist antimicrobial treatments, especially antibiotics
- can be due to resistant bacteria arising in animals or the environment and spreading to humans through food, even when food is industrially made

Consequences of Antimicrobial Resistance

- Increasing healthcare costs
- Prolonged hospital stays
- Treatment failures
- Increasing deaths

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Prevention and Control of AMR

- The prudent use of antimicrobial agents in all sectors
- An appropriate regulatory system for their approval and licensing
- A reduction measure might be the ban of payments for vets.
No payment for prescribing antimicrobials

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International Responses to AMR

- United Nations, 'Political Declaration of the high-level meeting of the General Assembly on antimicrobial resistance' in 2016
- The WHO Assembly established a 'Global Action Plan on Antimicrobial Resistance' in 2015 (WHA68.7), in accordance with a collective coordinated approach
- 2007-2011: the Codex Alimentarius Commission established an *ad hoc* Intergovernmental Task Force on antimicrobial resistance to address risk assessment and risk management related to antimicrobial resistance associated with food

The 2016 WHO 'Global Action Plan on Antimicrobial Resistance'

- The need for a coherent, comprehensive and integrated approach
- The need for a coordinated and harmonized surveillance system
- The need for international standards
- A 'One Health' approach

A Few EU Responses to AMR

- The EU prohibited the use of all growth promoters from 1 January 2006
- Decision No. 2007/407/EC of the EU Commission (12 June 2007) on the harmonization of monitoring of antimicrobial resistance of *Salmonella* in poultry and pigs: the problem of resistant bacteria in animals and food

Increasing Relevance of the 'One Health' Approach during and in the aftermath of the Covid-19 Pandemic

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Why?

The Covid-19 Pandemic showed the need of

- Health crisis preparedness through resilient health systems and
- Adequate laboratory services
- Pharmaceutical innovation
- Epidemiological surveillance and monitoring
- Accurate risk assessment, management and communication
- Improving data reporting

From a procedural standpoint, there have been

- Enhancement of inter-institutional collaboration among WHO, FAO and OIE... and UNEP
- Establishment of 'One Health Quadripartite': 2022 with a MOU
- Establishment of the 'One Health High-Level Expert Panel (OHHLEP)', 1 December 2021 = a common scientific and strategic advisory body

OHHLEP

<https://www.who.int/groups/one-health-high-level-expert-panel/ohhlep-term-1>
(WHO, FAO, OIE + UNEP)

Goals

- Cooperation
- Coordination
- Capacity Building
- Communication
- However, effectivity is an open issue because of lack of:
 - Funds
 - Data

OHHLEP Main Objectives as a Common Advisory Body

- Provide policy relevant scientific assessment on the emergence of health crises arising from the human-animal-ecosystem interface, and research gaps
- Guide the development of a long-term strategic approach to reducing risk of zoonotic pandemics, with an associated monitoring and early warning framework, and the synergies needed to institutionalize and implement the One Health approach, including in areas that drive pandemic risk
- Political visibility on One Health

The 2018 MOU and the 2022 MOU at Glance

- The 2018 MOU (Tripartite): underlines the importance of multi-sectoral collaboration, coordination, partnerships and sharing responsibilities, in relation to public health risks arising from zoonoses, AMR and animal diseases having an impact on food security
- The 2022 MOU (Quadripartite): an enhanced formal framework for complex health challenges, like newly emerging diseases

Quadripartite's One Health Joint Action Plan (2022-2026) providing for six 'actions tracks'

- Action track 1: Enhancing One Health capacities to strengthen health systems
- Action track 2: Reducing the risks from emerging and re-emerging zoonotic epidemics and pandemics
- Action track 3: Controlling and eliminating endemic zoonotic, neglected tropical and vector-borne diseases
- Action track 4: Strengthening the assessment, management and communication of food safety risks
- Action track 5: Curbing the silent pandemic of AMR
- Action track 6: Integrating the environment into One Health

AMR in the aftermath of the Covid-19 Pandemic: from an international standpoint

- The UNGA is organizing a high-level meeting on AMR as this is a challenge to public health (A/78/L.50, 12 March 2024)
- 2022: the Quadripartite established the 'AMR Multi-Stakeholder Partnership Platform' (https://ec.europa.eu/assets/sante/health/amr/docs/amr_20240229_co02_en.pdf)

AMR in the aftermath of the Covid-19 Pandemic: from a EU standpoint

- In accordance with the 2023 Council Recommendation on AMR, the European Health Union relies on the 'One Health' approach and a monitoring framework implementing the '2017 EU AMR Action Plan'
- The goal is still «making the EU a best practice region»
- The European Commission aims at establishing an integrated surveillance system on AMR (to be launched after Summer 2024) (https://ec.europa.eu/assets/sante/health/amr/docs/amr_20240229_co01_en.pdf)

Interinstitutional Cooperation for One Health Chronology of Developments

- 2010: Tripartite (WHO, FAO and OIE) Concept Note
- 2017: Tripartite (WHO, FAO and OIE) Commitment
- 2018: Tripartite MOU (WHO, FAO and OIE)
- 2021: OHHLEP (WHO, FAO and OIE + UNEP)
- 2022: MOU for collaborative OH work
(Quadripartite: WHO, FAO, OIE and UNEP)

ACTORS

- States
- International organizations
- Multinational enterprises
- Non-governmental organizations

Main Issues for International Organizations

- A common definition
- A common 'language'
- Participatory decision-making processes (socio-political and multicultural parity): inclusion, engagement of communities
- Mitigation of divisions among their scopes, sectors and competences, arising from the typical principle of specialization
- Equity among sectors and disciplines; Socio-ecological equilibrium

Looking for a definition

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The international relevant definition of health is not enough, on account of the complexity of infectious diseases

- «Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition. The health of all peoples is fundamental to the attainment of peace and security and is dependent upon the fullest co-operation of individuals and States»
(WHO Constitution, preamble)

Looking for a common definition

- According to WHO website, «One Health is an approach to designing and implementing programmes, policies, legislation and research in which multiple sectors communicate and work together to achieve better public health outcomes. The One Health approach is critical to addressing health threats in the animal-human-environment interface»
(Tripartite's Commitment, 2017)

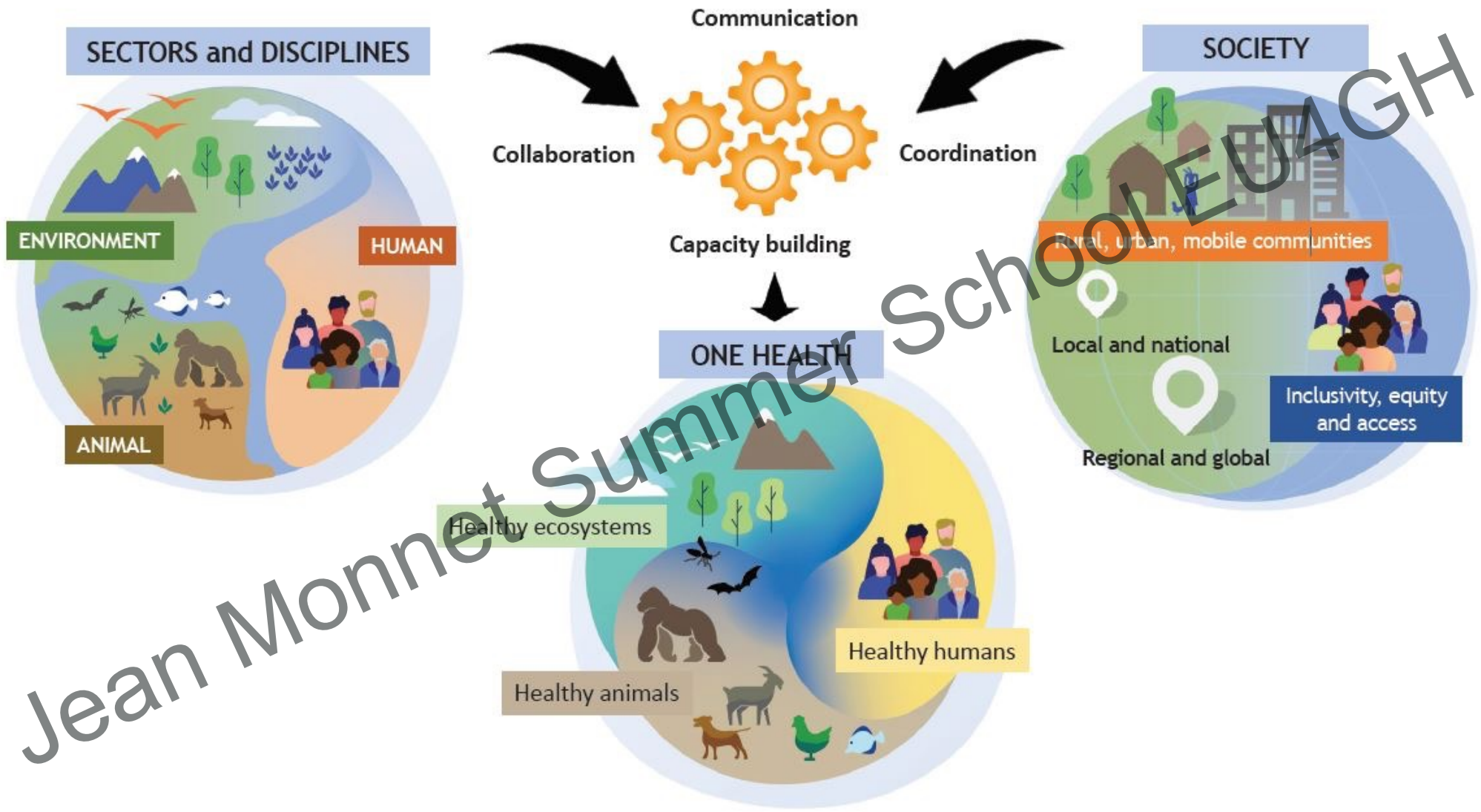
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Operational Definition by OHHLEP (December 2021): detailed

- **One Health** is an integrated, unifying approach that aims to sustainably balance and optimize the health of people, animals and ecosystems. It recognizes the health of humans, domestic and wild animals, plants, and the wider environment (including ecosystems) are closely linked and interdependent. The approach mobilizes multiple sectors, disciplines and communities at varying levels of society to work together to foster well-being and tackle threats to health and ecosystems, while addressing the collective need for clean water, energy and air, safe and nutritious food, taking action on climate change, and contributing to sustainable development.

In short,

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SECTORS and DISCIPLINES

SOCIETY

ENVIRONMENT

HUMAN

ANIMAL

Communication

Collaboration

Coordination

Capacity building

ONE HEALTH

Rural, urban, mobile communities

Local and national

Inclusivity, equity and access

Regional and global

Healthy ecosystems

Healthy humans

Healthy animals

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Definition in the last draft Pandemic Agreement (22 April 2024): less detailed

- «One Health approach means an integrated, unifying approach that aims to sustainably balance and optimize the health of people, animals and ecosystems. It recognizes that the health of humans, domestic and wild animals, plants and the wider environment (including ecosystems) is closely linked and interdependent» (Art. 1, letter *b*)

A Challenge: Deep prevention by Identifying Situations at the Root of Pandemics and Other International Health Emergencies

- Environmental sustainability: decrease in air pollution, deforestation, water pollution
- Climate change mitigation
- Avoidance (*ex ante*) of zoonotic spill over and spillbacks
- Improvements in anti-microbial resistance
- Appropriate education and information programs

2023 OHHLEP

White Paper on Zoonotic Spillover Prevention

- From relying on response to reducing the risk at source, in particular spillover risks
- Need of sustainable investment in spillover prevention

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**What about the 'One Health'
Approach within the Negotiations of a
Pandemic Agreement?**

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In light of a comparison among the draft texts approved respectively on 1 February ('Zero Draft') and 30 October 2023, 13 March and 22 April 2024, one may infer that

- 'One Health' is defined as above
- A specific article (art. 5) is provided, but its text has been shortened
- It is much less detailed: no reference to OHHLEP, specific education and information campaigns
- AMR and zoonotic spill over and spillbacks are mentioned without any specification and in the article on 'pandemic surveillance and prevention' (art. 4), rather than in that on 'One Health'

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**What about the 'One Health'
Approach within the Negotiations of
the Revision of the IHRs?**

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But, the Proposed Bureau's Text for Eighth WGIHR Meeting, 22-26 April 2024

(IHR revision was adopted on 1 June 2024 by the WHO Assembly)

- ... does not provide for such provisions
- ... does not mention One Health as such
- ... nor the name of the international organizations that are members of OHHLEP
- ... neither human-animal-environmental interface including zoonotic spills and Anti-microbial resistance as specific elements and risks of a public health event

Looking at the 'Article-by-Article Compilation of Proposed Amendments to IHRs' by the WGIHR

- One health as such is not mentioned
 - However,
 - its Art. 6 specifies that «if the notification received by WHO involves the competences» of one organization of the OHHLEP [...], WHO shall immediately notify it
 - among «Core capacities requirements for disease detection, surveillance and health emergency response», its Annex 1 includes «collaborative surveillance networks to quickly detect public health events at human-animal-environmental interface including zoonotic spills and Anti-microbial resistance within the territory of the State Party» under consideration

Concluding Remarks

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Open Issues

- There is no international comprehensive regulatory measure on One Health
- Is cooperation among international organizations really coordinated? There is a sort of reluctance towards limitations on each organization's own autonomy
- WHO leadership, as 'the place' of negotiations for the IHR revision and the Pandemic agreement
- The WHO's mandate is related to human health
- As a result, human health protection has appeared to be the chief topic under consideration (a weak holistic approach in reality)
- Emerging need of stewardship and the responsibility of humans to change behaviour

At present, by looking at the international and EU regulatory framework on health, one gets

- The need of a stronger connection between international and domestic laws to pursue effectivity
- Still legal diversification
- Negotiations for a special international treaty on One Health: unlikely
- Harmonization through non binding acts: achievable

What international regulatory responses (in light of economic, technical and environmental changes) Might Be Designed?

- 1. Non-binding regulatory responses: like, recommendations, technical reports of working groups, guidelines, standard, codes of conduct
- 2. Non-binding harmonization through best practices/benchmarks and monitoring processes
- 3. Later on, a specific framework convention providing for basic principles and rules. Additional protocols, annexes and related non binding mechanisms could be negotiated, if scientific knowledge/technology upgrade and/or further priorities come out

Health Protection through Governance Is Stronger than through Regulation

- Flexibility
- Variety of actors, interests, goals and expectations
- Relevance of non-binding (regulatory) acts

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THANK YOU

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