First virtual meeting of the One Health High-Level Expert Panel  
17-18 May 2021

Note for the Record

DAY 1 – 17 May 2021 – 12:30-15:30

Introductions

Zsuzsanna Jakab, Deputy Director General of the WHO welcomed participants to the first meeting of the One Health High-Level Expert Panel on behalf of the convening organizations, FAO, OIE, UNEP and WHO, and then handed the floor to the DGs of each organization to provide brief introductory remarks.

Dr Qu Dongyu, Director General of the Food and Agriculture Organization of the United Nations outlined FAO’s commitment to a One Health collaborative approach and congratulated the Secretariat for the timeliness of the selection process and the experts for their selection.

Dr Monique Eloit, Director-General of the World Organisation for Animal Health expressed OIE’s support to the establishment of Panel and confidence that the work of the group will play a key role in promoting and implementing a One Health approach based on the best scientific advice, thus meeting the expectations of partner organizations and their member countries.

Dr Inger Andersen, Executive Director of the United Nations Environment Programme sent her apologies at being unable to join today’s session. Her remarks were presented by Doreen Robinson. UNEP wishes to congratulate the experts on their selection for this highly competitive panel, which is a fundamental step in addressing the issues at the human, animal and environment interface. UNEP is counting on the expertise of the OHHLEP as we continue to understand the role of ecosystem health in complex One Health issues. UNEP is ready to support the panel with its internal structures and strong networks.

Dr Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization thanked his colleagues from the three partner agencies, and the governments of France and Germany for their leadership and support in establishing this panel, which fulfils a commitment made at the Paris Peace Forum last November. Dr Tedros highlighted that the intimate links between the health of humans, animals and our planet have been exposed by the COVID-19 pandemic, and that by working together within a One Health approach, we can better prepare for and prevent future disease outbreaks,
building a healthier and more resilient world for all. Dr Tedros thanked every panellist of the OHHLEP for agreeing to share expertise and critical support to this mission.

**Dr Francesco Branca, Director of WHO’s Nutrition and Food Safety department** introduced in alphabetical order the 24 members of the panel present on Day 1 of the meeting and gave them the floor to provide a short introduction and to indicate what they expect from the panel and what their contribution might be.

**Election of Co-Chairs and a Rapporteur**

Two Co-Chairs of the OHHLEP were proposed by the Secretariat for the first year of work, Prof Thomas Mettenleiter, from Germany and Prof Wanda Markotter, from South Africa. Prof Mettenleiter and Prof Markotter are available to play this role and were approved by the panel without objections.

Professors Mettenleiter and Markotter were congratulated on the appointment and thanked for their commitment to the panel.

The Secretariat proposed Dr Dominique Charron, from Canada as the panel’s official Rapporteur. Dr Dominique Charron was approved by the panel without objections.

Dr Charron was congratulated on the appointment and thanked for her commitment to the panel.

**First Panel Session**

**Dr Francesco Branca** launched a general discussion on the panel, its functions and expected outcomes, using the terms of reference as a starting point to discuss the key issues that the panel may address and outlined potential contributions and outputs of the panel. Dr Branca outlined the panel’s advisory role to the convening organizations, with an initial focus on providing policy relevant scientific assessment. This included highlights of the purpose, initial focus and key functions of the OHHLEP.

**Purpose:**

- The One Health High-Level Expert Panel provides guidance on One Health-related matters that support improved cooperation among governments.
- The OHHLEP has an advisory role to the convening organizations, FAO, OIE, UNEP and WHO, and is expected to provide advice to support their provision of evidence-based scientific and policy advice to address the challenges raised by One Health.

**Initial Focus:**

- Provide policy relevant scientific assessments on the emergence of health crises arising from the human-animal-ecosystem interface;
- Guidance on development of a long-term strategic approach to reducing the 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.
The OHHLEP’s advice will contribute to enhancing strategic orientations and coordination, and to providing high political visibility on the subject of One Health.

- Provide advice on the analysis of scientific evidence on the links between human, animal and ecosystem health, and contribute to foresight on emerging threats to health;
- Provide advice on understanding better the impacts of food systems (including agriculture, livestock farming and trade, wildlife hunting and trade, aquaculture, animal products processing, handling, distribution and consumer practices) as well as ecological and environmental factors that may be contributing to zoonotic disease emergence/re-emergence and spillover events;
- Contribute to the One Health research agenda setting and propose, advise on and review approaches and specific studies relevant to the development of a global approach to reduce the risk of zoonotic pandemics;
- Provide advice by invitation on One Health policy response in relevant member countries; and
- Provide recommendations on specific issues identified by the convening organizations in the areas of highest concern for attention and action, and future directions, in One Health.

The newly appointed Co-Chairs took the lead for the remainder of the meeting, thanking their fellow panellists for their confidence in supporting their nominations as Co-Chairs. They expressed the importance for the panel to remain agile and flexible within these guidelines due to the nature of the discipline.

A point of discussion arose around the role of the panel to provide advice to the convening organizations on One Health matters related specifically to the COVID-19 pandemic. After some deliberation, the feedback from the convening organizations was that while this was not specifically out of scope, it was not the main purpose of the OHHLEP. The focus should be on the future and understanding what more can be done to avoid or better respond to threats arising at the human-animal-environment interface.

The Co-Chairs presented the group with the following three questions to fuel the discussion ahead of the next day’s working meeting:

1. In the context of the OHHLEP, what is your definition of One Health?
2. What are the major gaps and challenges in current One Health approaches?
3. What are three key issues you think this panel should address in the first year?

Written answers to the questions were submitted to the Co-Chairs during and after the meeting.

Dr Francesco Branca closed Day 1 of the meeting, thanking all participants. The panel will reconvene tomorrow, 18 May 2021.
Second Panel Session
Scope and initial focus of OHHLEP

Prof Wanda Markotter (Co-Chair of the panel) led the first part of the discussion, outlining again the role of the OHHLEP as an advisory group providing evidence-based guidance to the four convening organizations. Prof Markotter summarized the points discussed in the previous day’s meeting as well as the inputs received from panellists. Major points are outlined below:

1. *In the context of the OHHLEP, what is your definition of One Health?*

For consideration of a working One Health definition for the panel, Prof Markotter reminded panellists of the definitions used by the convening organizations, including one used by FAO, WHO and OIE through their long-standing tripartite collaboration on issues at the human, animal and environmental interface (hereafter referred to as the Tripartite).

The panellists concurred that the panel should agree on a working One Health definition based on the core principles of One Health and drawing on the definitions used by the convening organizations.

- Aspects of the debate touched on the need for a strengthened environmental dimension of One Health, such as plant health, climate change, ecosystems and human behaviour.
- Linking One Health theoretical concepts to implementation in the daily practice of the different sectors (health, agriculture, environment) in all countries. The panel debated aspects of how this can be done, as well as barriers and obstacles, such as organizational mandates, lack of institutionalization.
- Panellists raised the need for improved communication and interconnection between agencies and experts working on different thematic areas that contribute to One Health.
- Members were committed to a common vision but were wary of engaging in a potentially unproductive wordsmithing exercise toward a shared definition. There was agreement to start with the definitions used by the convening organizations and refine them for the purposes of the OHHLEP.
- There was some support to elaborate a theory of change for how One Health may contribute to reducing the risk of zoonotic disease threats and crises arising at the human-animal-ecosystem interface. This would help in communicating not only the definition of One Health, but also how it works and why it is useful.

2. *What are the major gaps and challenges in current One Health approaches?*

Grouped for simplicity of presentation, panellists discussed the following gaps:
Implementation and enhanced intersectoral, interdisciplinary practice

- Discussion of need for more examples of One Health effectiveness, clear pathways for long-term sustainability and scaling-up. Need and opportunities to strengthen One Health application routinely and not just during emergencies such as epidemics.
- How One Health approaches may be cascaded down to the working levels and communicated for actionable programmes with lasting impacts. How tools can be better connected and build on each other.
- A need for collecting and making available examples, tools and options for translation of One Health from concept to application in the field, particularly to the local context in different regions and populations.
- Opportunities to strengthen One Health considerations in environmental impact assessment methodology and practice.
- Disproportionate attention to some sectors vs others in the application of One Health to zoonotic threats; opportunities were discussed to foster greater interdisciplinarity and knock-on benefits across sectors of investments in system strengthening in any given sector.
- Better engage private sector actors, such as the agri-food industry, in implementing One Health approaches.
- Continued and strengthened international collaboration for One Health.
- Need for better standardized data formats and efficient reporting structures.
- Need for strengthening socio-cultural aspects, gender equality, behavioural aspects in One Health implementation, yet in many One Health interventions. Social and behavioural sciences are under-represented to achieve this.

Capacities

- Gaps in the One Health workforce, from insufficient interdisciplinary expertise for research, lack of sufficient understanding among key decision makers in human and animal health, and environment sectors; insufficient engagement and understanding of One Health potential for achieving aims of other sectors (trade, finance, security, employment), and importantly, in the key departments and agencies responsible for implementation.
- Lack of capacities and resources for One Health implementation and early detection of emerging threats in certain regions; need for innovation and tools to support and strengthen local response in lower resource settings.
- The challenge of mainstreaming and institutionalizing One Health, including dealing with turnover of key personnel.
- Gaps in One Health training structures, institutions, and resources, including for education of the public.

Investment

- Relatively low level of investment in One Health Research, noting this gap in particular in relation to COVID-19.
- Need for greater coordination among research funders active on One Health, and the need for a platform for sharing this information.
• Disproportionate focus by One Health funders on the emergent and new problems relative to endemic zoonoses, which tend to be a higher priority locally and remain underfunded.

3. **What three key issues should this panel address in its first year?**

The following key issues were discussed by panellists for consideration. They were consolidated into a draft proposal for four working groups described below.

• Establish or develop a mechanism or platform for communicating One Health information widely and efficiently.
• Provide guidance and tools for implementing One Health in routine of relevant agencies and actors, even when no outbreak occurs. It should be a practical approach that is effectively communicated and actionable – this is a key aspect of prevention and readiness for dealing with zoonotic threats.
• Identify existing gaps/challenges to implementing One Health approaches. This should also include mapping of all current activities of the convening organizations, and key centres of excellence world-wide. The need for connecting initiatives with OHHLEP was stated.
• Building on existing summaries and reports, conduct review of literature and existing One Health tools and best practices already developed globally. Discussion by several members around ensuring the OHHLEP does not duplicate work of others, in particular of the four convening organizations. Identify other key One Health global initiatives and build bridges between them.
• Identify critical points for intervention in strengthening One Health action on zoonotic threats (in the near and medium term).
• Identify factors causing spill over events and how to improve risk assessments. Opportunities to apply Hazard Analysis and Critical Control Point (HACCP) methodology used in food safety and expand this to incorporate One Health elements (environment, gender, human behaviour).
• Improve global systems for reporting and analysing surveillance results in real-time, early warning systems.
• In addition to discussion of improving One Health dimensions of risk communication, there was considerable discussion on the need for knowledge sharing platforms and better linkages between them.
• Consider better practice in the transfer of technology and innovations to lower resource settings.

**Work planning**

The four convening organizations suggested some ways of working for the OHHLEP. These recommendations included:

• The establishment of working groups within the panel to facilitate intersessional work
• Commissioning of papers to members of the panel or to other academic groups
• Reflecting on and connecting with existing One Health projects and initiatives
• Linking to the broad community of One Health experts
• Developing a strategy for communicating to the public
The Secretariat, coordinated by WHO from 2021 to 2024, outlined their role in supporting and facilitating the work of the OHHLEP. The Secretariat will support the convening of the meetings, the preparation of the reports and background papers, the commissioning of science documents and any other tasks required by the OHHLEP. The Secretariat can also help to set up communication platforms such as chat groups to facilitate the free exchange of ideas. Dr Peter Ben Embarek was identified as the current Secretariat focal point for the panel.

Working groups
Prof Thomas Mettenleiter (Co-Chair of the panel) presented a proposal for four working groups within the panel to facilitate the first year of work and to address the gaps and issues discussed by panel members over the two days.

- One Health definition/ implementation
- Inventory/ best practice
- Surveillance and early warning
- Spill over/ HACCP

There was a discussion around the potential limitations of, and overlaps among these proposed working groups, particularly around prevention of zoonotic threats and strengthening the One Health workforce, but it was agreed that in order to start work as quickly and efficiently as possible, these working groups will provide a good starting point and can be later unpacked and modified if necessary. The Co-Chairs, Rapporteur and Secretariat integrated inputs from panellists and refined the working groups outline and initial scope. The working groups will develop detailed Terms of Reference during their first meeting and share with all panellists and the Secretariat.

The OHHLEP plans to meet again by end of July 2021 to confirm terms of reference for the working groups and in September to present the work done so far.

Closing remarks
Zsuzsanna Jakab, Deputy Director General of the WHO closed the first meeting of the One Health High Level Expert Panel. On behalf of the four convening organizations, the DDG thanked the whole panel for their commitment, particularly the Co-Chairs Prof Mettenleiter, Prof Markotter, and the Rapporteur Prof Charron for their efficient work so far. DDG appreciated that the panel was already able to identify elements of a workplan, including potential key deliverables, and that the panel will review the concept of One Health and explore how the panel’s work can complement existing initiatives. The work of the panel will be important to reduce the risk of future pandemics and it will inspire policy makers as well as the whole society to understand and change harmful practices that are not only depriving future generations but affecting all of us now. FAO, OIE, UNEP and WHO will provide all necessary support to make this a successful endeavour and to help translate these messages into concrete action on the ground.