Intersectoral Collaboration In Outbreak Management



Emerging Problem of Dengue

- Population migration.
- Population pressure leading to development of satellite towns
- Haphazard and unplanned growth of towns resulting in "urban slum" with poor civic amenities
- Restricted water supply leading to faulty water storage practices
- Excessive use of Plastics & disposables
- Improper solid waste management
- Lack of support from community members

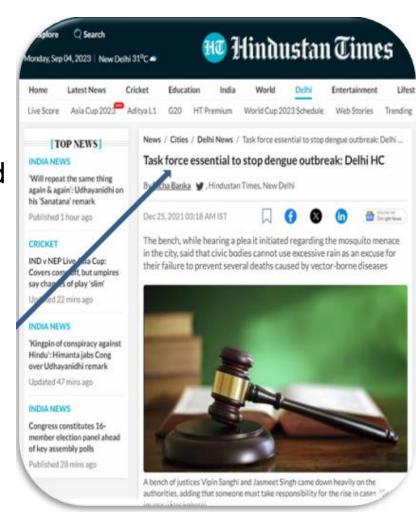




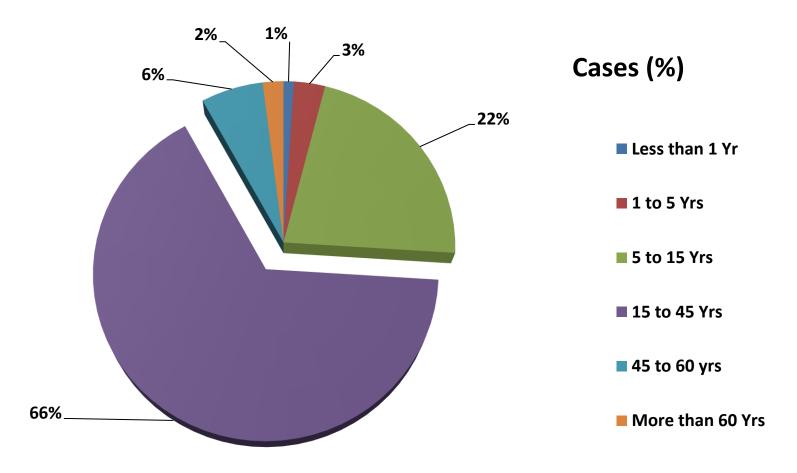


Why Intersectoral Collaboration?

- Alma Ata Declaration: Need to align all sectors together with health sector
- Vector Borne Diseases are multicausal in nature with factors beyond purview of health sector alone f
- Need to build partnership with actors in the health and non health sectors and work in integrated way
- No definitive list of partners and number may vary.
- Strong coordination decreases morbidity and mortality & gives economic and social benefits

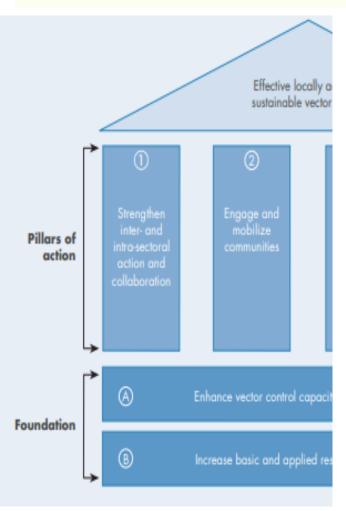


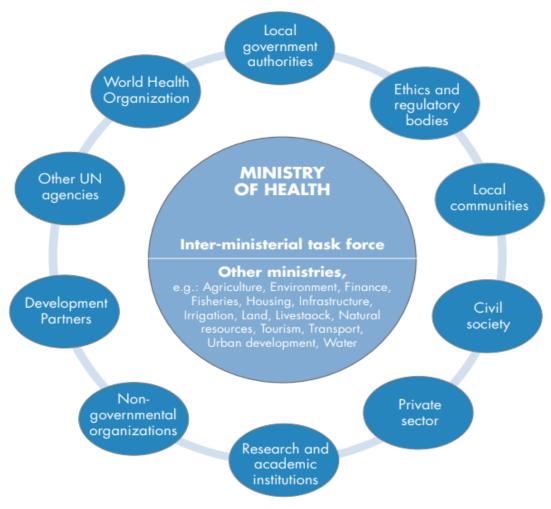
Age wise distribution of Dengue cases(%) in Delhi



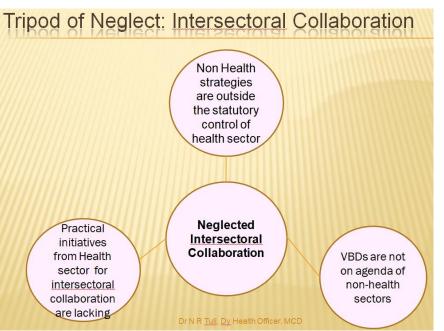
Global Vector Control Response

National inter-ministerial task force for multisectoral engagement in vector control established and functioning





Challenges!



- Lack of perceived significance of stakeholder's role
- Partners not explained the objectives Roles & Responsibilities
- Partners do not perceive that disease burden due to lack of their support
- Lack of Political/administrative will leading to ineffective planning process
- Official hurdles in involving multiple stakeholders from the government f
- Discomfort with others entering one's domain which is looked as interference f
- Difficulty in involving stakeholders at senior levels

Steps for effective collaboration

- Mobilize political class & senior bureaucrat
- Define problem and inform, motivate to get commitment of all partners.
- Define roles and responsibilities of partners
- Build bridges between sectors through effective leadership.
- Use systematic approach based on scientific evidence and on experiences
- Conduct joint workshop & shared goal setting f
- Ensure sufficient resources i.e. dedicated time, qualified personnel and funding
- You may initiate a Pilot project







8th August 2023

Org by Public Health Department, Central Zone, Municipal Corporation of Delhi



List of Major Stakeholder

- Health & Family Welfare
- Housing & Urban development
- Home afairs
- Local Self Government
- Ministry of water
- Human resource Development
- Environment & Forest
- Ministry of Transport
- Railways
- Information and Broadcasting
- Fisheries
- Health research

- 1. Engineering Department,
- 2. Horticulture Department
- 3. Education Department
- Irrigation and Flood Control
- 5. Public Works Department
- 6. Water Department
- 7. Police
- 8. Railways
- 9. Hospitals
- 10. District Administrator

Challenging sites: Waste to wonders















Dr Naveen Rai Tuli, Dy Health Officer, MCD

Challenging sites: Construction sites



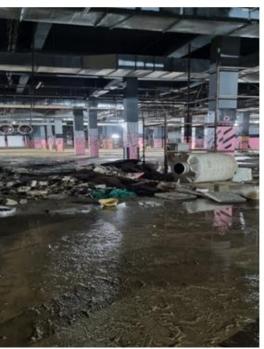












Challenging sites: Workshops & dumps













Challenging Sites: Police Stations



Challenging sites: Bus Depots













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Challenging sites: Fire Stations







Challenging sites: Parks and Nurseries









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Challenging site: Floods







Challenging sites: Schools













Challenging sites: Drains

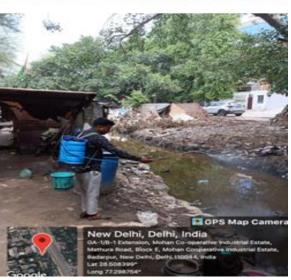












Challenging sites: Buildings designs



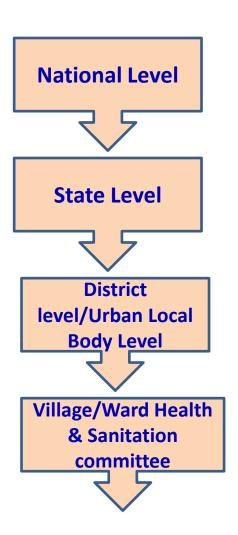
Way forward

- Intra-sectoral collaboration requires strong political commitment
- 2. National vector control programmes an integral part of national development plans
- 3. Roles and responsibilities to be component of their departmental action plan
- 4. Need for situational analysis of the available capacity and identification of potential stakeholders
- 5. After analysis transform policy action through inter-ministerial task force to oversight, coordinate and strengthen vector control.
- 6. The core decision-making members from high-level officers.
- 7. Policy needs to be framed to give legal sanctity so that stakeholder are responsible
- 8. Monitoring at all vertical levels, i.e. Centre, State, District, villages and Municipalities in urban areas.



Operationalising Collaboration

- National Task force
- State Task Force
- District Task force
- Village level Health and saniatation committee
- Terms of reference
- Identification of specific areas of collaboration and resource sharing
- Replicate Best Practices
- Partners must be involved from Planning, implementation and evaluation



Best Practices of MCGM



Status of Drain Previous Current





Pilot Project on Breeding Free IGNOU: Collaborative Project

Concept: Model of involvement of Stake holders i.e. University

GOAL: To Prevent Indigenous Transmission of Vector Borne Diseases in IGNOU Campus



Project on Breeding Free HIMSR: Collaborative Project

Concept: Model of involvement of Stake holders i.e. Medical College & University

GOAL: To Prevent Indigenous Transmission of Vector Borne Diseases in HIMSR Campus







Project on Breeding Hospital: Collaborative Project

Concept: Model of involvement of Stake holders i.e. Hospital



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Project on Breeding Hospital: Collaborative Project

Concept: Model of involvement of Stake holders i.e. Hospital





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Project on Breeding Free Jamia University: Collaborative Project

Concept: Model of involvement of Stake holders i.e. University

GOAL: To Prevent Indigenous Transmission of Vector Borne Diseases in Jamia University Campus



Awareness and Vector Control at Places of Community Gathering



Civil Military Cooperation





Dengue is Everybody's concern



