

## What is One Health?

What exactly is One Health and what does it cover? These points are frequently debated. The OHHLEP definition of One Health (2021) has greatly helped, but discussions continue. Other fields do not have the same uncertainty about identity and membership, so why do we?

## Who is One Health?

### *One Health is not a profession*

Many delegates at One Health conferences come from professions such as veterinary or medicine. Professions have strictly defined membership criteria, x years training, pass the exam, register with the professional body, which then allows the professional to do expert actions others cannot legally perform. Some then look for the equivalent criteria for being a One Health expert, but none exist.

### *One Health is not a discipline*

Scientists are typically specialised experts within a specific discipline. Detail, rules and clarity are important for good science, and scientists look for that in the definition of One Health. But we find that it concerns all disciplines that play a role in the collective management of healthy humans, animals and environments. This covers a big, diffuse confederation of disciplines.

### *Does it matter?*

The position of an institute or individual within One Health can have big implications. We see Ministries and Departments cajoling for position to claim One Health funding and authority that may come with being centre stage for One Health.

### *One Health the Slogan*

One Health is certainly an effective slogan, capturing the buzz for oneness and harmony. These two words reflect the holistic connectedness of the health of the planet and those that live upon it. This is something that chimes with both systems scientists, and something more spiritual concerning how we increasingly see man's relationship with the world around us in the human dominated Anthropocene epoch, that man brought about but had not planned for.

### *Short-sighted with blind-spots!*

Traditional siloed approaches to global threats could be described as short-sighted with many blind-spots. Although not explicit, One Health champions the need for reform and new approaches given established discipline-specific approaches have left society unarmed when faced with the big, complex problems that increasingly affect our lives.

### *The One Health approach*

Beyond a slogan, the One Health approach is one where there is collaboration and coordination between the many disciplines and sectors that can influence the health of humans, animals and the environment. Initially applied by health professionals it previously focussed on inter-sectoral collaboration needed to better protect health, particularly human health. But the need for transdisciplinarity to effectively address more complex problems is universal, and an expanded definition of One Health is now used, working for healthy systems that can sustain healthy humans, animals, plants and ecosystems.

## When is a One Health approach needed?

A One Health approach is needed when different sectors need to work together for better results. This applies to the following:

- 1) Combined Economic Assessments - When a threat impacts in more than one sector a siloed approach only captures effects in a single sector, ignoring others. Unfortunately institutional structures have largely evolved to only consider their own sector. An example would be a crop mould, like fusarium or aflatoxin causing food and livelihood losses, as well as human and animal health risks through contaminated food and feeds. To make decisions in the interest of wider society, all impacts must be considered.
- 2) Coordinated Control - This is needed when control is more effective and cost-effective when implemented across sectors in a coordinated manner. Failings often arise due to budgets being allocated to the sector experiencing the impact, excluding other sectors that need to be engaged for effective control. Examples include the control of zoonotic diseases such as rabies, anthrax and many foodborne diseases, with control in food systems, animals and environment neglected, resulting in greater preventable human health burden and greater global costs.
- 3) Collateral Consequences - Changes in one sector can lead to changes in another. This interdependence of sectors through system-wide effects and connections must be considered when deciding on a plan of action. The anticipation of consequences in other sectors is a key aspect of good One Health governance. There are many examples, one being in food systems where intensification may improve productivity, livelihoods and food security, but may have collateral impacts on local ecosystems and conservation, and even increase socio-economic inequality.

Ultimately the inter-connectedness of systems may explain all the above, with sector divisions being a societal management construct superimposed upon a planetary continuum that calls for One Health.

