Pathways
of Change

PATHWAY 1
Governance, pollicies, legislation, financing, and advocacy

PATHWAY 3
Data, evidence, information systems, and knowledge exchange

PATHWAY 2
Organization and institutional developement, implementation, and sectorial integration

The One Health (OH) Theory of Change (ToC) was developed by the One Health High Level Expert Panel (OHHLEP) to ensure OH principles are put into practice. The ToC provides a common approach for programs through three Pathways of Change, guiding program actions in: (1) policy, advocacy, and financing; (2) organizational development, implementation, and sectoral integration; and (3) data, evidence, education, and knowledge exchange. The pathways untangle cross-sectoral aspects of OH and ensure clear actions at the national, local, and regional level.

Why does this Reference Guide matter
This reference guide was developed to support OH detection and surveillance programs to use the OHHLEP ToC. The guide helps align objectives across pathways and references standardized best practices to ensure a holistic approach for successful OH programming.

How to use this Reference Guide
We break down each pathway into two simple steps exploring how to plan and implement activities within pathways, and finally how to monitor activities collectively. Using this guide ensures projects incorporate multiple pathways for better program outcomes.

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Using the OHHLEP Theory of Change to Guide One Health Detection and Surveillance Programs: A Quick Reference Guide

Policy, advocacy, and financing

The implementation of a successful OH approach is achieved through three Pathways of Change. When aligned, the pathways complement each other for sustainable success. Pathway 1, governance, policy, legislation, financing, and advocacy ensures OH activities incorporate intersectoral governance and political buy-in into program efforts.

Step1: PLAN

One Health detection and surveillance programs face unique challenges since they cross sectors, industries, and ministries, and rely on coordinated support and resourcing. Political alignment is imperative to program success, however differing priorities and financing constraints can block progress. Addressing these gaps in support, resources, and political will, requires planning and political analysis to ensure program activities are supported with an enabling political environment.

Step 2: ACT

Aligning detection and surveillance with OH ToC Pathway 1, governance, policy, legislation, financing, and advocacy, helps foster an environment of support to ensure programs are sustained after a project's completion.

- Programs should complete a political analysis to understand the current political and social environment as it relates to OH. This includes, but is not limited to, a political economy analysis (PEA), stakeholder mapping, and capacity assessments.

- Based on the analysis, activities could include: advocating for the adoption of a OH approach, institutionalizing intersectoral governance, establishing sustainable funding mechanisms and investments, fostering political will, and supporting the development of policy and regulatory frameworks.

Strengthening Regional Collaboration: The USAID Prospect Project and the ASEAN One Health Network

Through the USAID PROSPECT project, DAI supported the development of the Association of Southeast Asian Nations (ASEAN) One Health Network which brings together leaders from ASEAN member states, and other key stakeholders, to work across sectors on region-specific One Health issues. The USAID PROSPECT project successfully built an enabling environment to develop the terms of reference for the ASEAN One Health Network and utilized the OHHLEP Pathways of Change to draft a One Health Joint Plan of Action (OH-JPA). The Pathways of Change provided a useful starting point to engage One Health strategic planning in complex environments.

Organizational development, implementation, and sectoral integration

Pathway 2, organizational and institutional development, implementation, and sectoral integration utilizes the supportive environment created in Pathway 1 to implement national, regional, and local level activities.

Step1: PLAN

Pathway 2 ensures that national, regional, and local interventions are strengthened and aligned to successfully carry out OH activities. Projects should develop the capacity of implementing partners and key personnel to strengthen the OH workforce. Without alignment to Pathway 2, programs may encounter workforce capacity limitations and knowledge gaps, which impact the response and resilience of health systems. Successfully planning around Pathway 2 includes addressing potential gaps in capacity, community engagement, and multisectoral collaboration.

Step 2: ACT

Aligning detection and surveillance programs with Pathway 2, organizational and institutional development, implementation, and sectoral integration, increases the capacity of key stakeholders to adequately implement OH activities.

- Programs should complete an analysis of the current capacity and technical gaps within key surveillance and detection partners, and workforce capacity, using tools such as key skills assessment.

- Based on the analysis, activities aligned with Pathway 2 could include: training, mentorship and engagement, better networking across sectors and levels of government, support for cross-sector learning, and improved frameworks for cross-sectoral surveillance systems.

Overcoming challenges:
Building leadership capacity to improve the OH workforce

Ensuring capacity in key personnel and enabling them to work collaboratively with other sectors is a key challenge and can lead to uncoordinated efforts if not addressed. Investing and planning on intersectoral leadership development ensures sustained momentum for achieving OH objectives. Creating a strong foundation through policy, advocacy, and financing sets Pathway 2 activities up for success.

Data, evidence, education, and knowledge exchange

Pathway 3 leverages the strengthened capacity of the OH workforce and encompasses data, evidence, information systems, and knowledge exchange. When a OH approach has been established and supported with the appropriate mechanisms, Pathway 3 ensures the evidence-use, ownership, and continuous collaboration for knowledge sharing and decision-making across sectors and at the varying levels of government.

Step1: PLAN

Planning activities for Pathway 3 includes reviewing the current systems which are used to share and disseminate knowledge and strengthening these systems. Activities which foster evidence production, institutional knowledge creation, and cross-sectoral sharing contribute to the success of Pathway 3.

Step 2: ACT

Aligning programs with Pathway 3, data, evidence, education, and knowledge exchange, ensures cross-sectoral collaboration for OH surveillance and detection, and continuous improvement for targeted interventions.

■ Similar to Pathways 1 and 2, an analysis should be completed to understand existing gaps in evidence, data and knowledge. Reviewing information and knowledge exchange systems will highlight the availability, quality, and use of data.

■ Based on the analysis, activities aligned with Pathway 3 could include: improvements in monitoring and response systems to improve response and detection times, and improving documentation and dissemination systems and procedures.
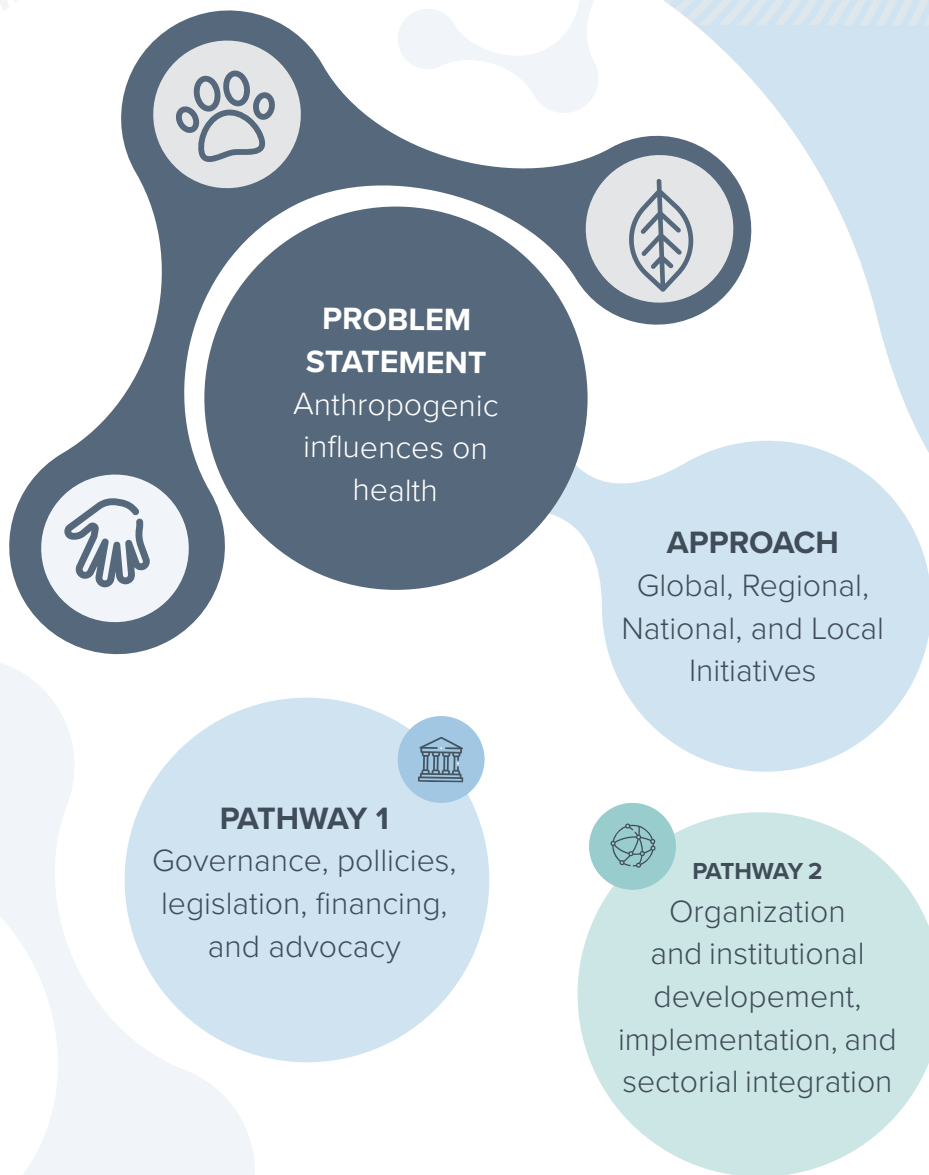
Step 3: MEASURING

As the final step, a robust monitoring, evaluation, and learning (MEL) plan should be established. Indicators should align with the appropriate pathways to ensure overall sustained success of programs. Initial program assessments can inform baseline indicators. Aligning indicators to the International Health Regulations (IHR) Joint External Evaluation (JEE) or Performance of Veterinary Services (PVS) can support standardization across projects as well, as demonstrated through IHR-PVS Bridging activities.

Putting Pathway 3 Into Practice: Exploring Cross-Sectoral Health Threats Through FEWS NET HTE to Improve OH Programming

Through the USAID Integrated Natural Resource Management (INRM) Activity, DAI supported the FEWS NET Health Threat Extension (HTE) pilot in Somalia and Mozambique. FEWS NET HTE explores complex, cross-sectoral health threats through the compilation of relevant data sets, and the development of forecasting models. The pilot activities focused on using climate and health data to strengthen cross-sectoral collaboration to malaria and measles responses.

One Health Theory of Change

PROBLEM STATEMENT
Anthropogenic influences on health

APPROACH
Global, Regional, National, and Local Initiatives

PATHWAY 1
Governance, policies, legislation, financing, and advocacy

PATHWAY 2
Organization and institutional developement, implementation, and sectorial integration

PATHWAY 3
Data, evidence, information systems, and knowledge exchange

Other Resources

- One Health High Level Expert Panel One Health Theory of Change

- A guide to implementing the One Health Joint Plan of Action at national level.

- Joint external evaluation tool: International Health Regulations (2005) - 3rd edition

- Handbook for the integration of Performance of Veterinary Services (PVS) results into the Joint external evaluation (JEE) process

- OIE Tool for the Evaluation of Performance of Veterinary Services

- INRM USAID HEARTH Monitoring and Evaluation Toolkit

- IHR-PVS National Bridging Document Library