



# Multisectoral Joint Risk Assessment of Priority Zoonotic Diseases in Kenya

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## Multisectoral Operationalization of One Health

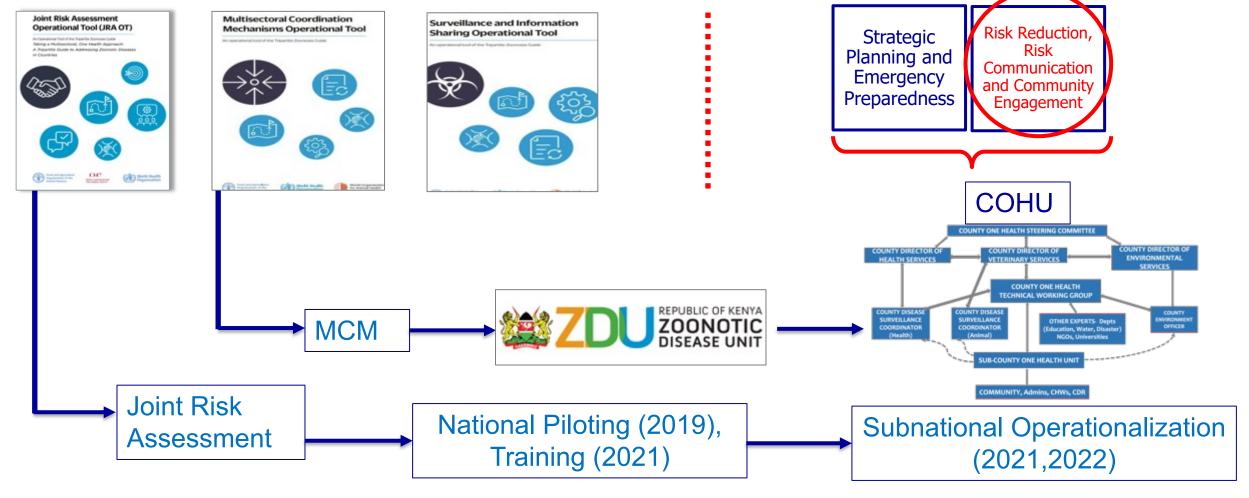




**OHDPZ** 

## Taking a Multisectoral, One Health Approach:

A Tripartite Guide to Addressing Zoonotic Diseases in Countries (TZG)

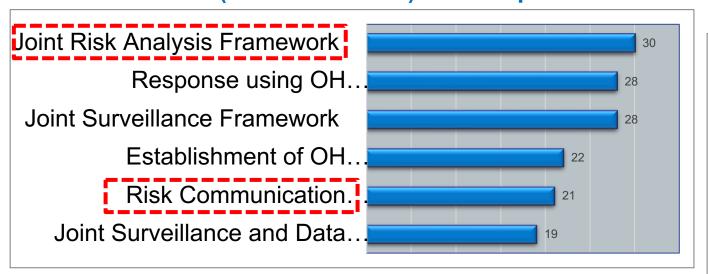


## **Joint One Health Priority Areas**





## IHR-PVS (Human –Animal) Roadmap





March 2022

June 2022



**MCM Action Plan** 

## 1. Coordinating Joint Risk Assessment

- > Strengthen JRA capacity at county levels
- > Strengthen RA for CHV &CDR
- > Prioritization of JRA at subnational level

## 2. Coordinating Risk Communication

> Risk reduction, risk communication and Community engagement (RCCE)

## Joint Risk Assesment (2019-2022)





Head, Veterinary Epidemiology and Economics Section (VEES)

## NATIONAL STEERING COMMITTEE

**Head, Department of Disease** Surveillance, Epidemic and Response (DSER)

ADVISE

**RVF Technical Lead** 

**National Technical** Teams

ORDINATE

**County Technical** Teams

**Anthrax Technical Lead** 

CORDINATE

**National Technical** Teams

**County Technical** Teams

Rabies Technical Lead

EVIDENCE

**National Technical** Teams

**County Technical** Teams



## Stakeholders





















## Risk Framing for a Zoonotic Disease (RVF- 2019, 2021)



- Reports of death of humans after high fever, headaches, bleeding (2018, 2021,2022)
  - > Assessment of humans at risk
  - > Vaccination status
  - > Epidemiological shift hotspots
- JRA Steering committee (RVF TWG):
  - ➤ Joint outbreak investigation and surveillance
  - ➤ Risk mitigation and safety
  - > Risk communication
- Improved stakeholder knowledge
  - > Vector control
  - > Livestock vaccination

## Risk Assessment for a Viral Haemorrhagic Fever - RVF

## What is the likelihood and impact of...

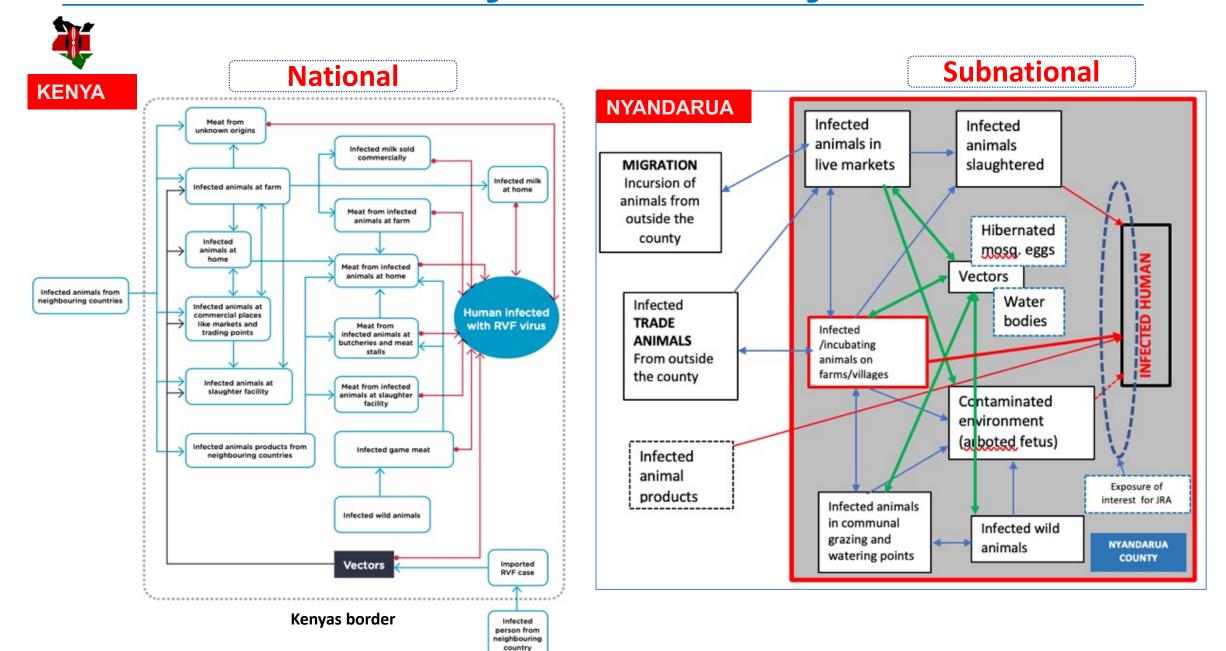
Specific, relevant, time-bound:

- The WHAT? i.e. Hazard and Event (as agreed during risk framing)
- The WHERE? i.e. Population and Location
- The WHEN? i.e. Timeframe
- The HOW? i.e. Source
  - > The source may be refined/decided/finalised later, after discussing the risk pathways

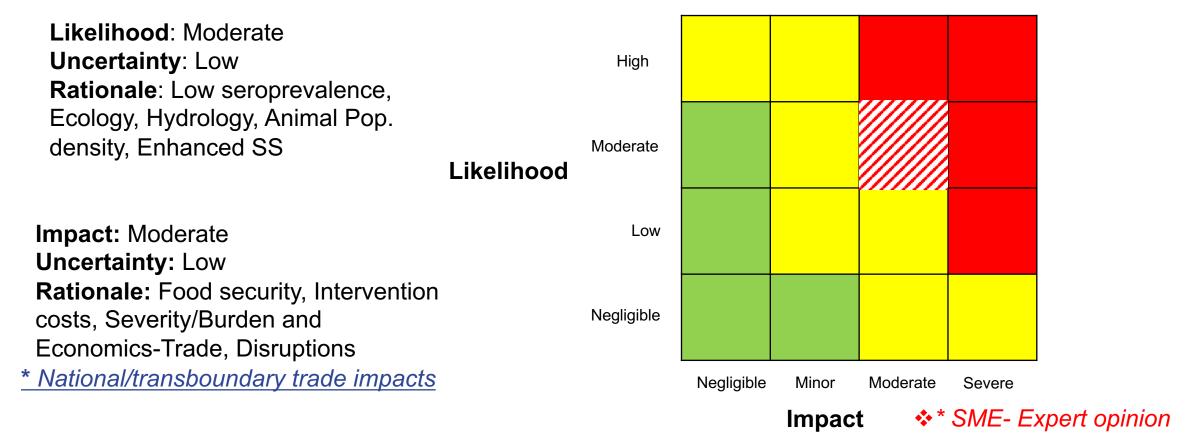
## **Question:**

What is the likelihood and impact of occurrence of a human case of RVF a village in Nyandarua due to livestock trade within next 2 years?

# Risk Pathway for Rift Valley fever



# Risk Matrix for Estimating Likelihood and Impact



### Linking risk assessment results with risk management

Recommendation: Increased/Enhanced surveillance strongly suggested

# **Risk Management and Communication**

- Data review in health facilities Differentials for Acute febrile illnesses
- RVF forecasting and Update the RVF risk map
- One Health sentinel surveillance sites
- Strengthen laboratory diagnostic capacity- infrastructure and human capacity.
- Training of animal and human health officers in diagnosis of RVF
- Multisectoral Simulation Exercises and After-Action Review COHU (2022)
- Communication: Enhance community sensitization on RVF (causation, transmission, prevention, signs) – IEC, media

DAILY NATION | Wednesday, February 13, 2019

Nyandarua > Fever lasting over 48 hours to be reported

# County on alert as two positive for Rift V. Fever

Four other suspected cases are under probe and the focus now is on prevention

BY WAIKWA MAINA

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he Nyandarua Agriculture and Health departments have sent an alert over Rift Valley fever (RVF), after two human cases were confirmed.

Heath Chief Officer Joram Muraya said four other suspected cases were under investigation.

For more suspected livestock cases, county Agriculture executive James Karitu said samples had been sent to the Nakuru and Kabete Veterinary Research Institutes for testing.

The cases have been confirmed in Rurii and Kaimbaga wards, both in Ol Kalou constituency.

These are the first cases of RVF in the region recently. The disease usually occurs after every 10 years in areas where it has been reported.

"We have already alerted the national government in case things get out of control. But our main focus, for now, is prevention.

We have directed our public health officials to carry out random meat inspections in all outlets," said Dr Muraya.

The two departments have a joint technical committee for prevention measures, which include community sensitisation and surveillance. "We have directed animal health providers to carry out surveillance and report cases of abortion in sheep and cattle and death of calves and lambs to

veterinary officers. The disease's mortality rate for lambs and calves is 100 per cent and up to 70 per cent for adult livestock," said Dr. Karitu.

Movement of animals and meat in and out of the affected areas has been banned, while all livestock and meat to and from Nyandarua County must have a valid permit.

All livestock for slaughter must also be inspected, and movement permits verified at the slaughterhouse. All outlets must have their meat inspected, stamped and issued with a clearance certificate at designated abattoirs.

The first cases were reported in mid-January, but Dr Karitu says analysis results were unreliable, considering that Nyandarua is a low-risk area.

"The cases occur in prone areas and shortly after heavy rains. We are investigating to understand why the disease is in Nyandarua and during a period of drought. But we suspect these are effects of climate change," said Dr Karitu.

Dr Muraya has advised residents who develop fever lasting above 48 hours to seek medical attention. He warned farmers to use protective gear when handling sick animals.

#### In brief

### FACTS ON RIFT VALLEY FEVER

Rift Valley fever is a viral disease that primarily affects animals but can also infect human beings.

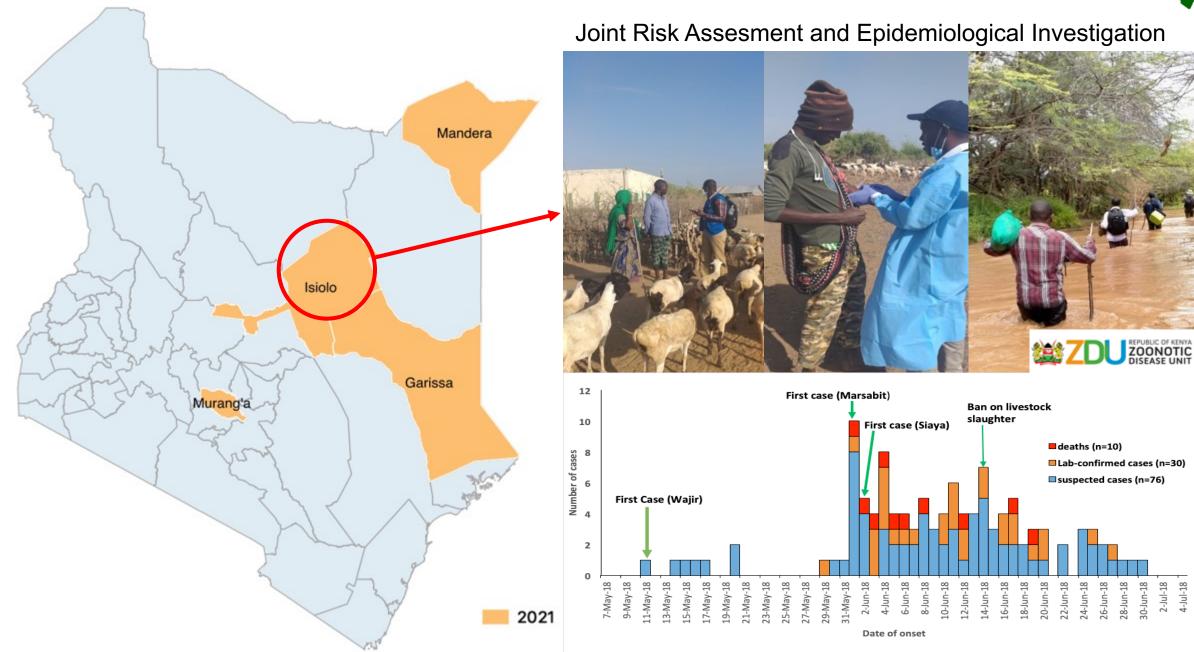
A majority of human infections result from contact with the blood or organs of infected animals.

Human infections have also resulted from the bites of infected mosquitoes.

Outbreaks of RVF in animals can be prevented by a sustained programme of animal vaccination.

## Rift Valley fever Outbreaks -2018, 2021

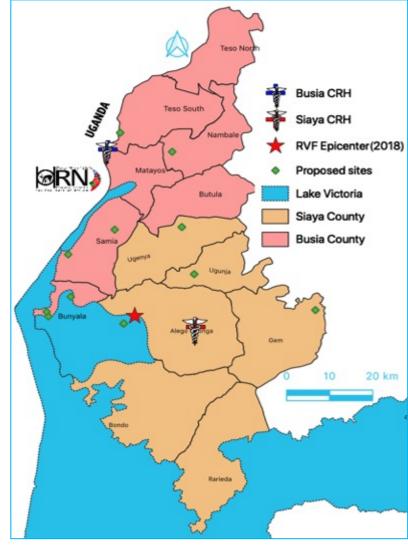




# **RVF One Health Surveillance in Kenya, 2022**







# **RVF Decision Support Tool (DST) 2022**

- Integrates near real-time RVF risk maps with relevant geospatial products, expert knowledge, risk assessment and categorization, recommended actions to guide appropriate response to RVF at country level
  - OH guideline document for RVF Preparedness, response and contingency plans for the target countries
- Pilot countries: **Kenya, Uganda, Tanzania** (interest from other countries):
  - Routine Enhanced Surveillance System
  - National Emergency Response Incident Coordination Group (ICG) activated
  - Use of risk maps produced to target field activities in Kenya to conduct a RRA
  - Targeted Livestock vaccination
  - Joint FAO-IGAD alert messages (Feb 2022)





# alert ()

### FAO AND IGAD ALERT COUNTRIES IN EASTERN AFRICA TO REMAIN VIGILANT FOR RIFT VALLEY FEVER

15 February 2022

#### Key facts

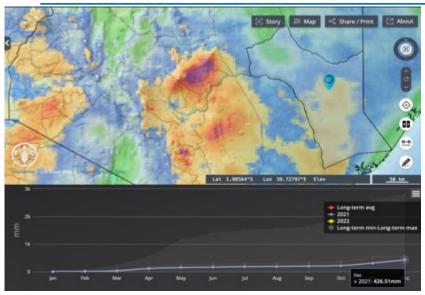
- RVF is an acute, vector-borne, viral and aconotic disease that has severe impacts on livelihoods, national and international markets, and human health.
- The disease has been observed in sheep, goats, cattle, buffaloes, camels and humans and is spread primarily by mosquitoes and the movement of animals.
- Heavy rains and protonged flooding increase habitat suitability for vector populations, determining massive habiting of fluf competent mosquitoes (e.g. Andes and Culled, thus influencing the risk of REF emergence, transmission and spread.
- The dynamic prediction model calibrated by IRAD builds upon the work by Anysmba et of, (2009; 2008), which utilizes vegetation and rainfall anomalies as a proxy for ecological dynamics to map areas at potential risk of RVE in eastern Africa.
- The FAO RVF Early Warning panel of experts verifies the risk areas with the experts on the ground and assesses if conditions warrant an RVF alert (FAO 2019, 2021).
- 6. RVI outbreaks can drougt the Eventock sector by depicting the future generation of affected hends and therefore constitutes an important socioesonomic and food security threat to unineside households. In addition, it can also affect the funds directly available to households through their animals and impact their capacities to access health care and child education. Moreover, it can result in stadie bans and affect national and certainal enrounds.

Rift Valley fever (RVF) is an endemic vector-borne zoonotic disease that represents a threat to human health, animal health and livestock production in the eastern Africa region. The epidemiology of RVF is complex, making monitoring of RVF risk and carrying out efficient and timely control measures challenging. To increase knowledge on RVF epidemiology and inform disease management policies, the Food and Agriculture Organization of the United Nations (IAO) has developed and maintains a web-based RVF Early Warning Decision Support Tool (RVF DST) for near real-time RVF forecasting based on precipitation and vegetation anomalies, among other environmental factors. To this end, FAO, in partnership with the intergovernmental Authority on Development (IGAO), has been alerting the countries in the region through joint alert messages about the increased risk and what needs to be done to miligate the risk.

On 26 January 2022, the FAO Animal Health Service, based on the analysis of data available through the FAO web-based RNF DST, Global Early Warning System (GGLWS+), Global Animal Disease Information Systems (EMPASS-) and expert knowledge, predicted that there is a risk of RVF occurrence in the region both in animals and humans in the next three months (February-April 2022), either due to favorable environmental conditions and/or through potential movement of infected animals, and highlighted the urgent need to ensure adequate preparedness for potential disease outbreaks, through One Health coordination.

Despite pensistent and prolonged dryness in the eastern part of the region, above-average, heavy rainfall and floods occurred in some areas of the region, creating suitable environmental conditions for vector dynamics. New hotspots are forecasted in western Kerwa and South Sudan, while pensistent hotspots are predicted in the eastern areas of the Sudan, Eritera, Djibouti, small areas of Ethiopia, large parts of South Sudan, parts of Uganda, the United Republic of Tanzania, Revanda, Burundi and western Yemen. Suitable areas are predicted in preasinity to irrigated lands, swamps and/or high density of susceptible livestock (Figure 1). The rainfall forecast for the period February-April 2022 highlights above-average rains in the region, particularly in April, suggesting that the risk remains high in those countries.

## **RVF Decision Support Tool (DST) 2022**



Cumulative precipitation indicating the Dec 2021 rainfall amounts (Scenario 2)



EVI and current vector amplification monthly forecast (Scenario 4)

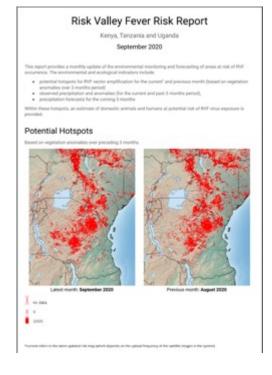


EVI for Dec 2021 and Analysis report for risk of vector amplification , Jan 2022 is high (Scenario 3)



Multifactor radar analysis 8.95% risk in humans

- RVF outbreaks
- RVF risk maps
- Rainfall anomalies
- Livestock
- Roads
- Protected areas
- Markets
- Livestock routes
- Soil
- Water bodies



# Simulation Exercises (SIMEX) and AAR- (RVF, EVD)

# \*

### December 2020, July & Nov 2022

- Different sectors have specific risk assessment approaches that can be synergized by a One Health Approach.
- Conducting multisectoral, multidisciplinary SIMEX - Risk assessment, identification of critical gaps RVF & EVD contingency plans (Functions areas of surveillance communication and collaboration).
- County One Health Cluster Tabletop Simulation exercises- Review the "Human/Animal" emergency response structures (, PHEOC etc.),











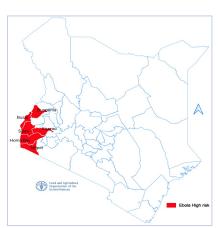






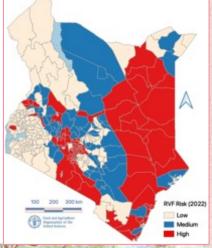






# Risk Communication & Community Engagement (RCCE)

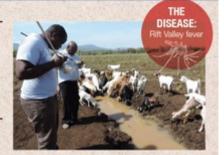
- Policy and legislation involving the community
- Community feedback meetings
- Behavioral Change Communication (BCC)
- Risk mapping
- PHFIC FVD





TDR-IDRC RESEARCH INITIATIVE ON VECTOR BORNE DISEASES IN THE CONTEXT OF CLIMATE CHANGE FINDINGS FOR POLICY MAKERS RIFT VALLEY FEVER IN KENYA

Enhancing responses and community resilience to RVF in Kenya



### **Executive summary**

This policy brief provides recommendations based on evidence emanating from findings of a multidisciplinary collaborative research project titled "Improving Human Health and Resilience to Climate-Sensitive Vector Borne Diseases in Kenya", which was conducted in Baringo County between 2014-2016. The aim of the project was to assess factors predisposing local communities to Rift Valley fever and develop strategies to improve their resilience. The brief complements Kenya's Rift Valley Fever Contingency Plan (2014) and RVF Decision. Support Tools (2010). Successful adoption of the recommendations in this brief requires public education and awareness, effective vector control, enhancement of community early warning systems and strategic livestock vaccination, as well as coordinated response between the health and veterinary departments.

### About the project

This policy brief forms part of the research project on Early warning systems for improved human health and resilience to climate-sensitive vector borne diseases in Kenva.

This programme is implemented by TDR-WHO, with funding support from the International Development Research Centre (IDRC) and in technical collaboration with WHO's Department of Public Health and Environment (WHO-PHE), WHO's Regional Office for Africa (WHO-AFRO), and the International Research Institute for Climate and Society (IRI), Columbia University, New York, USA.

The Principal Investigator of this project is Professor Benson Estambale, Jaramogi Oginga Odinga University of Science and Technology, Kenya, bestambale®jooust.ac.ke





