

Zoonoses and Food Hygiene News

Vol. 10 No.1, January 2004

His Majesty's Government of Nepal, Registration Number: 148/049/050

This issue has been supported by Urban Eco System Health Project Phase - II, IDRC, Canada.

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Zoonoses and Food Hygiene News, published four times a year, provides a medium for disseminating technical information on matters related to zoonoses and food hygiene generated in the world, particularly in Nepal. The editors welcome submissions on these topics with appropriate illustrations and references. The views and opinions expressed in the News are those of the authors.

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URBAN ECOSYSTEM HEALTH PROJECT PHASE-II IN WARD 19 AND 20 KMC:

Dr. Durga Datt Joshi, Director, NZFHRC & Project Coordinator

The first phase project team together with the various stakeholders concluded that there should be a follow-up work to build on the project outcomes. First, the detailed information on the ecosystem and public health status of the communities living in the inner city of the Kathmandu Metropolitan City (KMC) generated by the project should be widely shared for planning at various levels including community, NGOs, government, KMC and other development agencies.

Second, there is a need to support local community based organizations and stakeholders to implement their action plans and participatory research activities. There is a need to continue technical research; monitoring and support on water quality, epidemiological problems, zoonotic disease control and slaughtering to effectively combine the scientific technical work and local capability to address the issues.

Third, the project team stressed that, special emphasis should be placed to address the problems of poverty and powerlessness of urban poor, especially renter population, unorganized wage laborer and the sweepers (especially the women at the bottom of the sweeper hierarchy) impinging upon the ecosystem health.

Fourth, the project should extend and further develop innovative methodology tested during previous project on ecosystem approach to human health. This methodological approach incorporates gender-sensitive participatory methods and an integrated, systemic view of sustainability, to understand the

health of the ecosystem and its human populations, to select appropriate interventions for improving it and to establish mechanism for monitoring of the situation.

Based on the above background, a three-year (October 2003-September 2006) follow-up project on Urban Ecosystem Health Phase-II with communities in the Kathmandu city is proposed. The follow-up project is now started and implemented primarily in the inner city neighborhood within ward 19 and 20 where previous project was implemented.

Drawing from experience of working collaboratively in the past years, the project is implemented by NZFHRC. National Zoonoses and Food Hygiene Centre has history of conducting epidemiological research on human and animal health in urban areas and expertise in Echinococcosis and urban ecosystem health approach. It has strengthened its sociological aspect of research in social mobilization for ecosystem health.

The primary beneficiaries of the project are the men, women and children, with particular focus on the marginalized poor including renter population, day wage laborer, and sweeper women of Wards 19 and 20. The project will place greater emphasis on understanding and improving situation of urban poverty in relation to ecosystem health. The stakeholders will be involved in developing the plan and the tools to monitor the progress of their plan. A variety of alternative skills to intervene or make improvements their urban ecosystem will be shared with a view to enable them to act on their own initiative.

PROJECT OBJECTIVES:

The overall objective of the research project is to further enhance the ability of the communities in Kathmandu City to set in place sustainable processes to better understand and improve the management of socio-ecological systems and ultimately human health.

The specific objectives of the project are as follows:

1. Disseminate and share the findings of research from the first-phase project with different stakeholders, from communities, through policymakers for planning and implementation of environmental and health programs and policies.
2. Support and strengthen on-going community actions, KMC initiatives and advocacy efforts that emerged from the first-phase project, including monitoring and evaluation of these works.
3. Generate in-depth understanding and possible actions to address problems of poverty and powerlessness of urban poor specially, unorganized wage laborers, and women sweepers, in the study Wards and in relation to urban ecosystem health.
4. Reflect on and synthesize the conceptual and methodological approaches based on the project experience for wider sharing and dissemination.

A newsletter published by National Zoonoses and Food Hygiene Research Centre (NZFHRC)

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METHODOLOGY:

General Framework:

Building on the previous experience, the project will be implemented using Ecosystem health approach. The central feature of this approach is that it combines transdisciplinarity, gender integration and community participation. Further, this methodology enables for a systematic view of the sustainability to understand the health of the ecosystem and its human population, to select appropriate interventions for improving it and to establish mechanism for monitoring of the situation.

The research will adapt to the methodology applied during previous project period that involves key stages as described in following chart. The follow-up project gives an opportunity for further testing the methodology in ward 19 and 20. Follow-up activities in these wards will be crucial in generating deeper insights on the ecosystem, further strengthening the community groups, policy advocacy and monitoring of the change in public health and environment.

These project activities will be implemented by NZFHRC. NZFHRC is rich experience working on zoonotic diseases and technical aspect of ecosystem and public health are very much complementary. NZFHRC has its own social component which will contribute in making the technical processes more inclusive and participatory, in addition to this NZFHRC adds scientific/technical content in the social processes. Team composition itself, therefore, has made multidisciplinary in nature with professionals from different backgrounds including, gender, anthropology, public health epidemiology, environmental science, sanitation as well as veterinary science. In order to overcome previous challenges to integrate technical and social aspect, the project team will work very closely with local researchers.

In order to ensure the community participation from the inception, local community researchers – both male and female- are supported to carry the participatory investigation of the situation with various stakeholders. In many cases, specific research questions will be decided on the spot in dialogue with the community researchers and participants. Findings of this research subsequently provide basis for developing action plans addressing the needs of urban poor, marginalized, women and broader community issues related to ecosystem and health. Women's equal participation will be ensured at all levels of the project activities.

Participation of local researcher is critical in ensuring ownership of data by the users. NZFHRC will provide training to the community researchers in collecting and in some cases analyzing the data for synthesis. Most of the data collected on the problems and needs of the various groups will be publicly shared and discussed for raising awareness.

Three Pillars of Research Methodology:

Transdisciplinarity:

The principle of transdisciplinarity will be one of the central methodological strategies for the project. Expanding further on the previous experience of project to bring the technical and social experts together, the research aims to attain transdisciplinarity through involvement of people from wide variety of backgrounds and disciplines. First, it will bring all stakeholders with differing concerns and perspectives together in

the whole process of action research from the beginning. Second, the research process will be facilitated by the team of researchers coming from multiple educational and experiential background which include; environmental scientists, veterinarians, health technicians as well as educationist, anthropologist, gender specialist, nutritionist, trainers and community organizers. Third, working together of different institutions which include NZFHRC, KMC and Health Ministry enable project to bring different perspectives in the research and attain transdisciplinarity.

The second phase has a major component of dissemination of results and education campaign. In order to further enrich the understanding and attain transdisciplinarity, the following steps are planned:

- An initial set of meetings & workshops with the expanded project team (NZFHRC project team, consultants and key members from collaborating government and community partner organizations) to develop an overall project methodological framework and plan.
- Work together with different institutions on a collaborative approach to bring different perspectives in the research and attain transdisciplinarity. Key institutions include:
 - National Zoonoses and Food Hygiene Research Centre (NZFHRC)
 - Public Health Department of KMC.
 - Epidemiology and Disease Control Division of the Department of Health Services, Ministry of Health, HMG, Nepal.
 - Sociology Department of Tribhuvan University, Kathmandu.
- With the input from the expanded project team, develop a project strategy for social & stakeholder analysis and action plan related to lobbying efforts and influencing policies/ regulations (see objective 1); and an overall Monitoring & Evaluation strategy for the project involving the participation of key stakeholder groups.
- Periodic meetings/ workshops with community-based organizations participating in the project to review progress of activities, draw lessons learned and adjust plans of action.
- Presenting research results to multi-disciplinary/ multi-sectoral forums and go beyond the individual disciplines in terms of interpreting the relationships between urban eco-system and human health.
- Similarly, research results will be presented in customized way to different stakeholders in the wards; reactions, validation and views of the participants will form materials for further research.

Gender Sensitivity:

Gender balance and inclusion will be a cross cutting theme and will be an inbuilt part into all the phases and aspects of the PAR program. Inclusion of women specially, the marginalized, disadvantaged and low caste women in the prioritization of issues will be the main concern of this project. The process of integration with them, experiences and lessons learnt would be fed back to all aspects of the project. The research and other program interventions will look at gender phenomenon in terms

of resource access and control and its implications for ecosystem approach to human health. Beside tools of gender analysis, separate meetings with stakeholders, specific stakeholders from different socio-economic groups and mixed group meetings will be organized to ensure the gender balance in research. The social scientists of the team (gender specialist, community training specialist, and socio-cultural anthropologist) will work closely with their health and environment counterparts to ensure that data collection strategies, tools and analyses include gender, social and cultural considerations.

Participation:

Complementary to above, community participation is another crucial pillar of research methodology. The project has foreseen the participation of the key stakeholders from the very stage of proposal development and carrying out the action research process to drawing conclusions from the process, disseminating the findings and mobilizing them to realize the goals mentioned in this proposal. Participation of individuals, families, gender segregated community groups, school children and teachers, various stakeholders, Ward, KMC body will be taken as critical aspect in the research process.

For ensuring participation of concerned, the project will employ various strategies and mechanism. Partnership with local community partners specially, existing local clubs like Maruhity Yought club of ward 19 and Nhu Pucha club of ward 20, will be continued in the action research and post-research process to monitor the changes. An effort will be made to mobilize the youths and intellectuals in the participating wards to take the research process as an educational campaign. Community researcher and community research advisor will be hired and integrated as part of the core research team.

As part of educational campaign, the REFLECT process will be employed for ensuring participation of the most deprived. REFLECT stands for Regenerating Freirean Literacy through Empowering Community Techniques. Freirean approach gives tools and approaches for making the local people aware of the surroundings through participatory approaches. This approach combines the empowering adult literacy with tools and methods of Participatory research and action. REFLECT will be focused on working with illiterates and semi-literates especially among the low case and disadvantages women (see objective 3)

List of Stakeholders of Wards 19 and 20 of KMC:

Their action plans and capacity building activities will be developed during their participation in the project.

- Butchers
- Meat sellers
- Tea shops
- Squatters
- Sweepers
- Hotel/ restaurant
- Street vendors
- Local leaders of household
- Ward committee
- Local clubs
- Local clinics
- Teachers
- GUTHI (Local Trust).

EXPECTED OUTPUTS FROM THE PROJECT:

Objective 1:

- a. Community stakeholders groups are able to use the information on ecosystem health situation in action planning and awareness raising programs.
- b. KMC ward bodies are informed of research findings and are able to respond to the ecosystem health needs of the community as indicated by the research
- c. NGOs and schools operating in the area are aware of the research findings are able to incorporate them into their educational and other activities
- d. Animal Slaughtering and Meat Inspection Act and Food Quality regulations formulated are reinforced in practice

Objective 2:

- a. Action plans formulated by the stakeholders during previous project period are implemented
- b. Capability of local clubs are strengthened for carrying out participatory research and supporting stakeholders for action plan implementation
- c. Local Clubs and community members acquire technical skills needed for environmental and health improvement activities
- d. Community groups are enabled to approach KMC and concerned government bodies for necessary public facilities when necessary
- e. KMC Ward clinic laboratories are well equipped and functional for regular testing of quality of water, human blood, stool and urine to provide assistance and monitor relationship between environment and health
- f. Transmission rate of zoonotic diseases is minimized
- g. Public health status is evaluated against the base line data collected during the first phase of project

Objective 3:

- a. Situation, concerns and needs of the renter population including those in squatter is assessed, documented and action plan for improvement made
- b. Problems and concerns of unorganized wage laborers are identified are organized for improvement
- c. Health and social status of low caste women sweepers are documented and improvements made
- d. Advocacy materials developed for influencing policies of KMC and government authorities to regulate the renter urban interactions

Objective 4:

- a. A validated synthesis of lessons in applying an ecosystem health approach in urban communities
- b. A consolidated guideline containing conceptual framework and methodology on ecosystem health developed for urban Nepal.

Chronogram of Activities: October 2003 to September 2004.

Objective 1:

- ◆ Stakeholder/ Social Information System (SSIS) workshop
- ◆ Develop/test dissemination materials to comm. & decision-makers
- ◆ workshops with community stakeholders to plan & use the information and learning generated to lobby decision-makers
- ◆ workshops comm. & government authorities to present results Ph I, disseminate research findings, present Ph II
- ◆ Publish and share advocacy materials widely
- ◆ Lobby concern authority for formulation of appropriate policies/regulations in favor of urban poor
- ◆ Monitor implementation of Animal Slaughtering and Meat Inspection Act/Regulations

Objective 2:

- ◆ Comm. Action Plans - first review meeting
- ◆ Comm. Action Plans - Meetings with stakeholder groups
- ◆ Comm. Action Plans - Comm. Grants.
- ◆ Community workshops on action research & health risks mitigation
- ◆ Rabies control/ prevention campaign
- ◆ Training of health clinics on biomarker tests
- ◆ Training of health clinics on water quality testing
- ◆ Design & test survey tools and database
- ◆ First health survey
- ◆ Second health survey
- ◆ Parasitic infestation study on humans
- ◆ Blood and stool testing of dogs
- ◆ Community workshop on testing results & health promotion
- ◆ Slaughtering & Food Inspection Monitoring
- ◆ Water quality testing survey
- ◆ Water treatment/ hygiene/ sanitation

Objective 3:

- ◆ Social-Ecological Mapping & Participatory Urban Action Research:
 - Renter population
 - Un-organized wage labourers
 - Low-cast women sweepers
- ◆ Community action plans & local capacity building (3 groups)
- ◆ REFLECT workshops

Objective 4:

- ◆ Synthesis of concepts & methods
- ◆ Dissemination of project results

Monitoring & Evaluation:

- ◆ M& E planning workshop
- ◆ End-of-project evaluation study
- ◆ End-of-project workshop
- ◆ Preparation of Final report

JAPANESE ENCEPHALITIS OUBREK CASES DURING 2003:

Japanese Encephalitis (JE) outbreak cases are published here which were recorded and reported by different News Media in Nepal during the year 2003. JE morbidity and mortality cases are presented in the following table. The highest mortality 33% and in Nepalgunj and lowest 0.4% in Janakpur were recorded.

District	Morbidity		Mortality		Total	
	Cases	%	Cases	%	Cases	%
Kailali	96	13	30	13	126	13
Kanchanpur	25	3	18	8	43	4
Bardia	120	16	45	20	165	17
Nepalgunj (Banke)	409	54	75	33	484	49
Biratnagar	46	6	10	4	56	6
Kavre	-	-	3	1	3	0.3
Dang	22	3	30	13	52	5
Rupandehi	25	3	15	7	40	4
Janakpur	12	2	1	0.4	13	1
Total	755	100	227	100	982	100

News:

1. Humane Society International (HSI) Washington DC, USA has approved and agreed to support five regional training workshop on "Humane Slaughtering Management & Meat Inspection Training in Five Development Regions of Nepal" for junior technicians of District Livestock Offices and Municipalities of each region.
 - Fourth and fifth Training in Far Western and Mid Western Development Region will be organized during the month of January 2004.
2. K.D.M.A. Research Award for the year 2060 (2004)

Please kindly submit your research work paper on allergy for trust award consideration by the end of March 2004 to KDMART office Tahachal, G.P.O. Box 1885, Kathmandu, Nepal, Phone: 4270667 and Fax 4272694. This award was established by Dr. D.D. Joshi in 2049 B.S. on the memory of his wife, the late Mrs. Kaushilya Devi Joshi. The award includes a grant of NRs. 10,001 with certificate.

**From: Zoonoses & Food Hygiene News, NZFHRC
P.O. Box 1885, Tahachal, Kathmandu, Nepal.**

TO:

Dr/Mr/Ms

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