

## **Policy Brief: One Health Policy Implementation in the U.S.**

### **1. Problem Context**

With biological and social forces continuing to change our environment, the foundations of infectious diseases have also adapted. Currently, more than 60% of emerging infectious diseases are attributed to animals and vectors, and that number is predicted to grow with expanded globalization, severe climate change, increased environmental contamination, and denser human populations<sup>1</sup>. The One Health approach is an innovative technique in addressing these emerging infections through the collaboration of public health, environmental health, animal health, and ecological specialists<sup>2</sup>. The involvement and awareness of these specialists on emerging threats is necessary in preventing the spread zoonotic and vector borne diseases to ensure that all perspectives are accounted for in intervention measures<sup>3</sup>. As beneficial as this method is, concrete implementation of the One Health approach has yet to succeed due to the politics of global health governance and the diverse interests of involved stakeholders<sup>4</sup>.

### **2. Policy Options**

Although renown global health organizations approve of the One Health approach<sup>5</sup>, these organizations have no responsibility in setting policy at the national or subnational jurisdictions. Thus, the United States must act as a role model in integrating One Health methods into its own environmental health policy. One option that can lead to One Health implementation is utilizing the funds from environmental health policies that protect against environmental degradation and that also generate funds from compliance issues. Rajesh Bhatia declared that funding will catalyze a fundamental change that expedites One Health incorporation<sup>5</sup>. Our next option includes building a national collaborative between human, animal, and environmental health experts by allowing them the space to learn how to collaborate most efficiently. Currently, there is no practice of this collaborative effort and no data to compare these efforts<sup>6</sup>. The establishment of this collaborative will drive further attention and awareness to the innovation and closer to a solution to some of public health's most challenging issues. The next option focuses on incorporating a One Health statement or clause into relevant existing and new environmental health policies. This will force regulated entities and enforcers to engage wholistically in recognizing the effects of continued business and anthropogenic actions. This further promotes the responsibility of One Health to not only be at the governmental level but also at the individual level. The last option specifically builds on established emerging infectious diseases laws in the United States. Many state laws exist that consider the intersection of human and animal health<sup>7</sup>; however, these laws do not incorporate environmental factors that have the capability of exacerbating the outbreaks and infections. This option calls for revising existing emerging infectious disease policies to incorporate climate and environmental risk factors to better control and limit outbreaks.

### **3. Policy Recommendations**

While all of the policy options are necessary for the field of One Health to flourish and achieve the public's greatest health outcomes, the only option currently fit for our political and social environment is the option to source funds from other environmental health policies to begin building One Health capacity. For the United States to serve as a global leader in One Health, the nation must act as a model in devoting funds that will eventually allow for further capacity, public awareness, and surveillance systems to protect against emerging infections.

## References

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