One Health in Action: Balancing Livelihoods, Livestock, and Ecosystem Health in Central Asia

Stephane Ostrowski

WCS Temperate Asia Region





Founded in **1895**



Conserves habitat for ~50% of Earth's biodiversity



350+ protected areas WCS helped create since our founding



WCS works in 50+ countries



4,000+ scientists, conservationists, animal experts, and other dedicated staff



400+ peer-reviewed scientific publications each year



205 Indigenous community partners



2,000+ local community partners

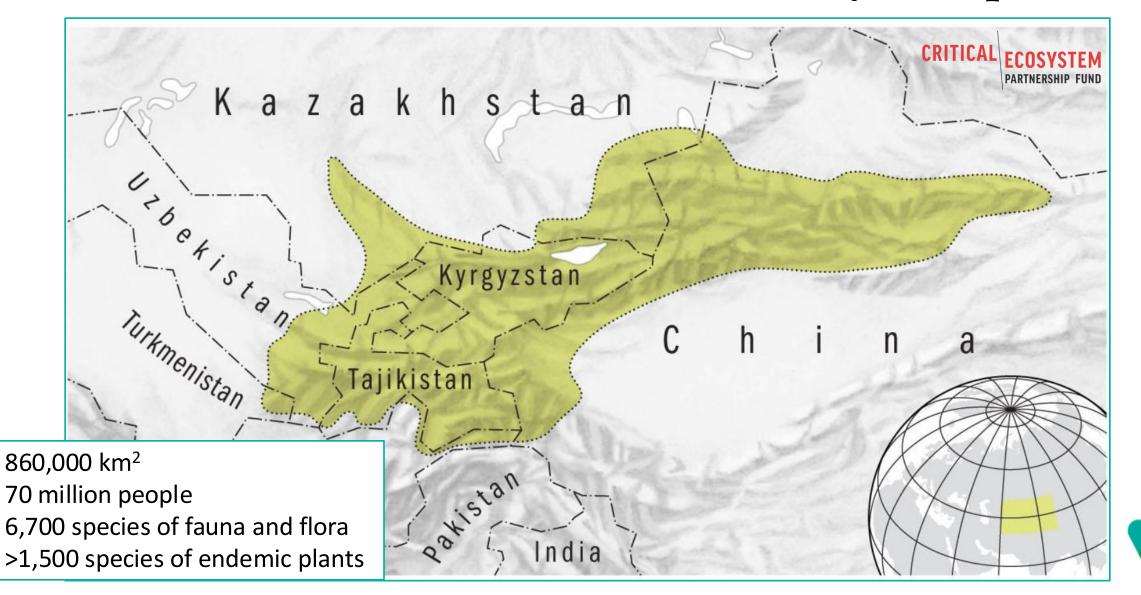


30X30 Partnering with governments, communities, and others to protect 30% of the planet by 2030

Where we work



Mountains of Central Asia Biodiversity Hotspot



Threats on biodiversity in Central Asia

OVERHARVESTING AND ILLEGAL TRADE: wild ungulates, reptiles, birds, plants.

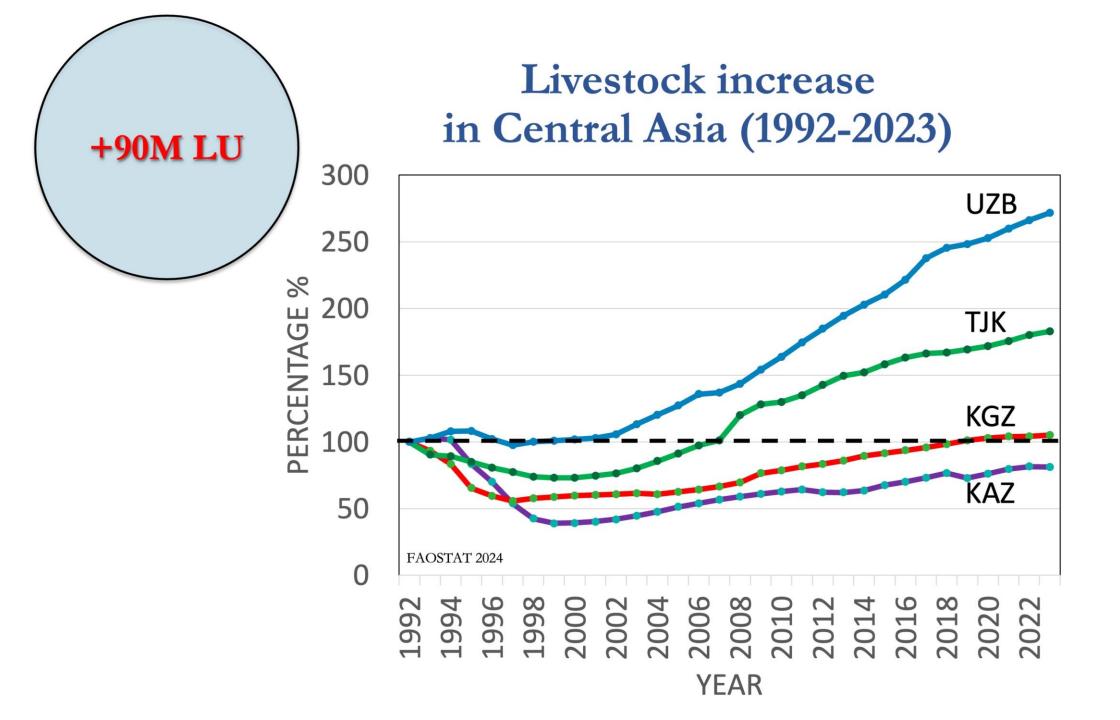
INFRASTRUCTURE DEVELOPMENT AND EXTRACTIVE INDUSTRIES: fences, roads, railways, powerlines.

HUMAN-WILDLIFE CONFLICT: Affects carnivores, scavengers, alien species or disease control.

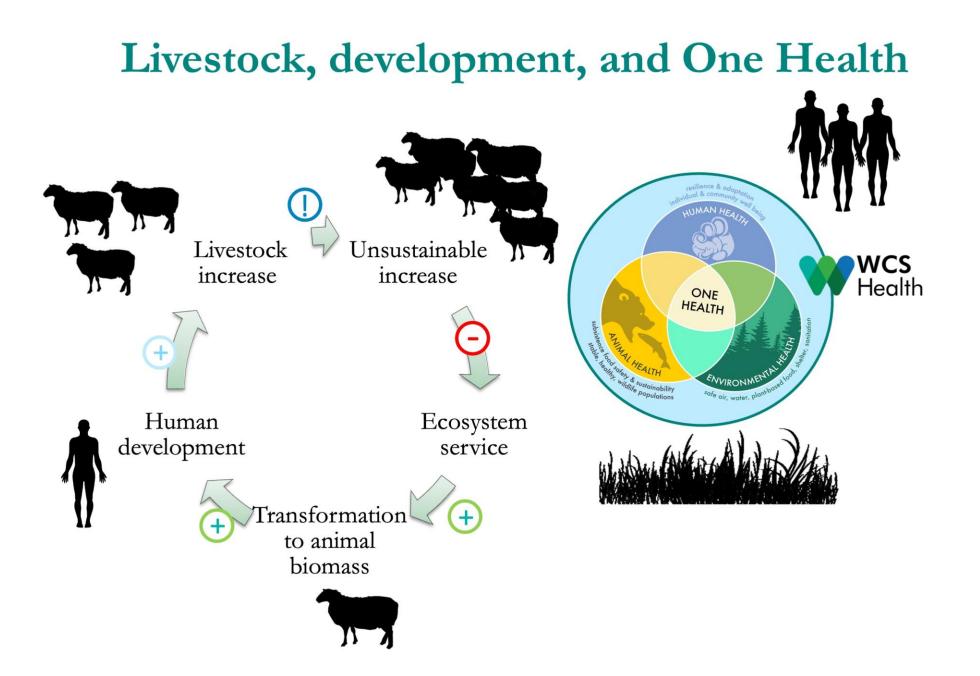
ANIMAL DISEASES: mass die off events, spillage from domestic animals, increase risk of extinction.

CLIMATE CHANGE: A multiplier on all other threats, glacier melting, water shortage, wildfires.











Constraints on One Health (OH) development in Central Asia

	4

Capacity: Low attractiveness, trainer's gap, rigid systems, no curriculum in OH, no centralized formal training systems. Policy, legislation, and governance: Existing legislation but lack of implementation. Limited institutionalization of OH across health sectors. Governance to be strengthened. Knowledge and awareness: Lack of solid cross-sectoral data sharing, no baseline, sometimes apathy or opposition between health agencies. Motivation: Affects mainly public health sector, resulting from low salaries, indifferent management, erratic decision making, low transparency.

Context

Response

Biodiversity:

1

2

3

- May increase hazard of EID.
- May decrease the risk of zoonotic pathogen spillover.

Economic development:

 Environment and especially biodiversity conservation are seldom prioritized.

Health system governance:

- Weak strategic policy framework.
- Ineffective oversight.
- Weak accountability.

3

Biodiversity:

- Target key biodiversity areas.
- Prioritize nature integrity.

Economic development:

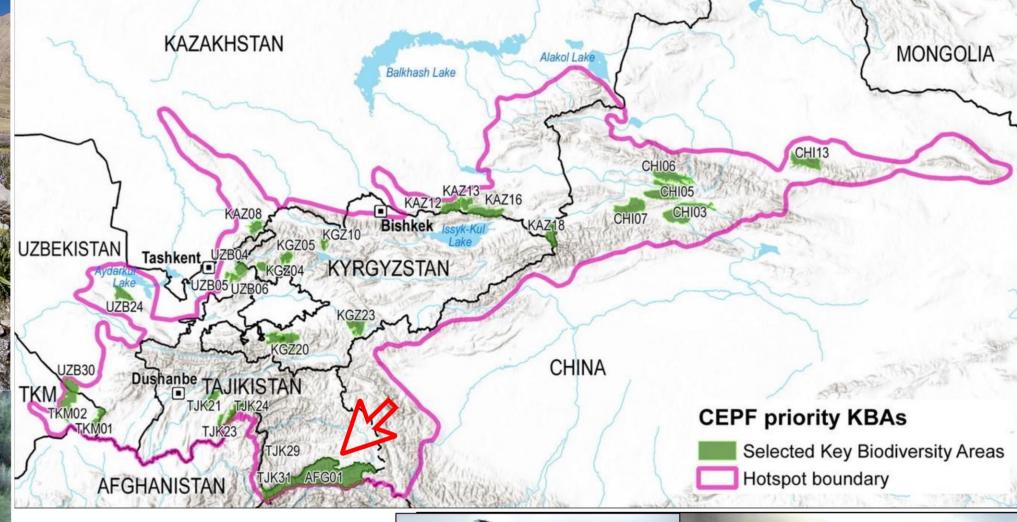
- Integrate conservation and development.
- Support alternative options.

Health system governance:

- Work « bottom-up ».
- Support local governance systems.

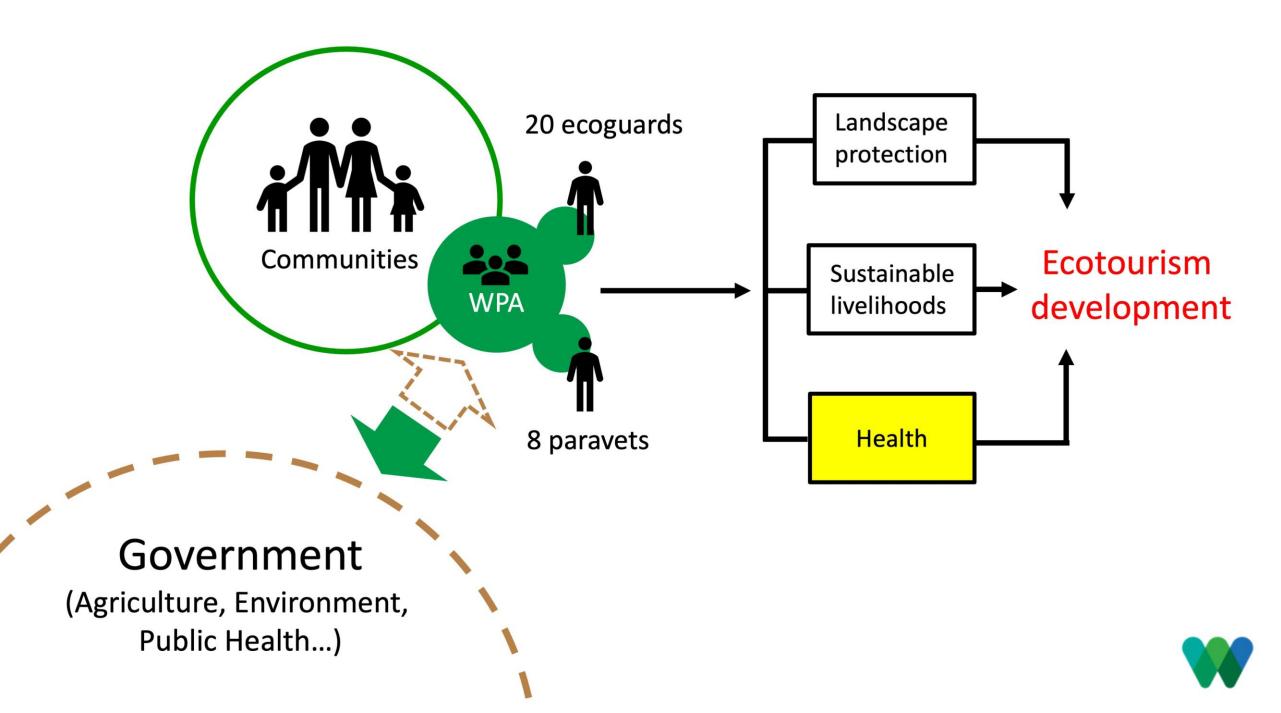




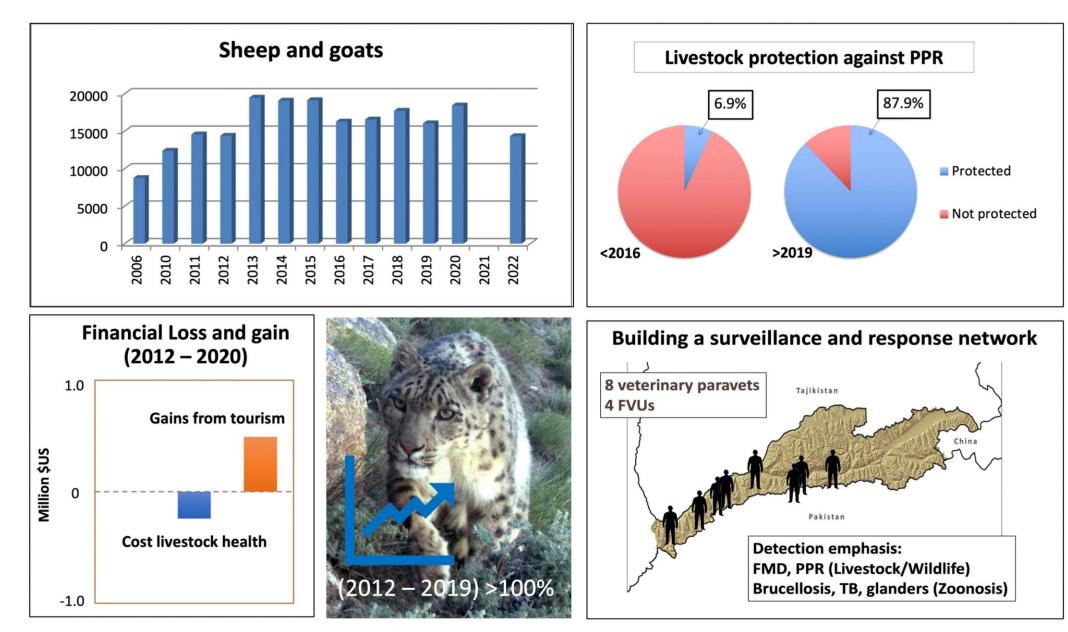


KBA Wakhan, Afghanistan

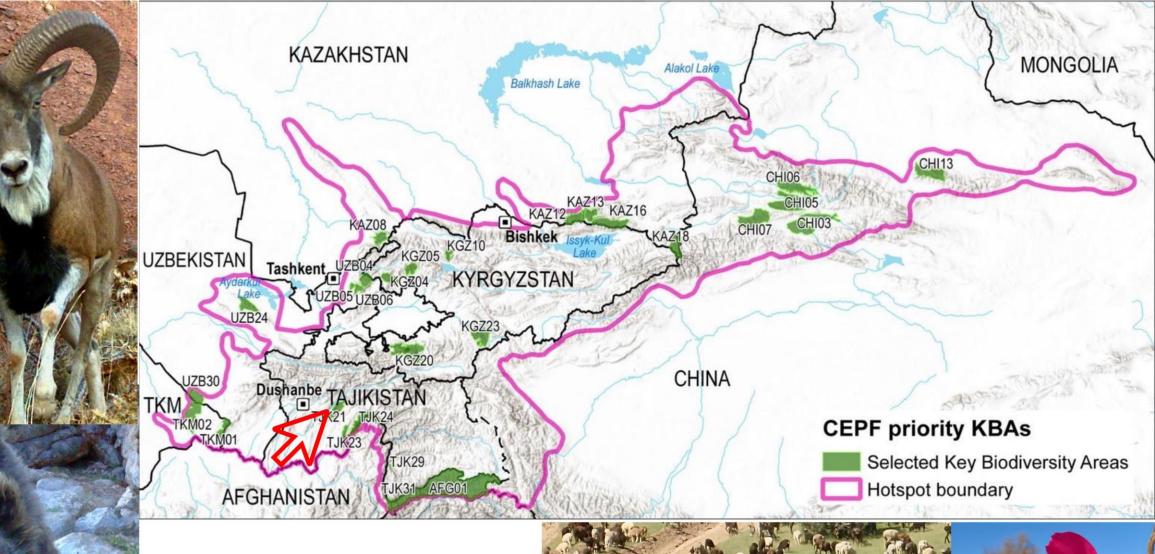




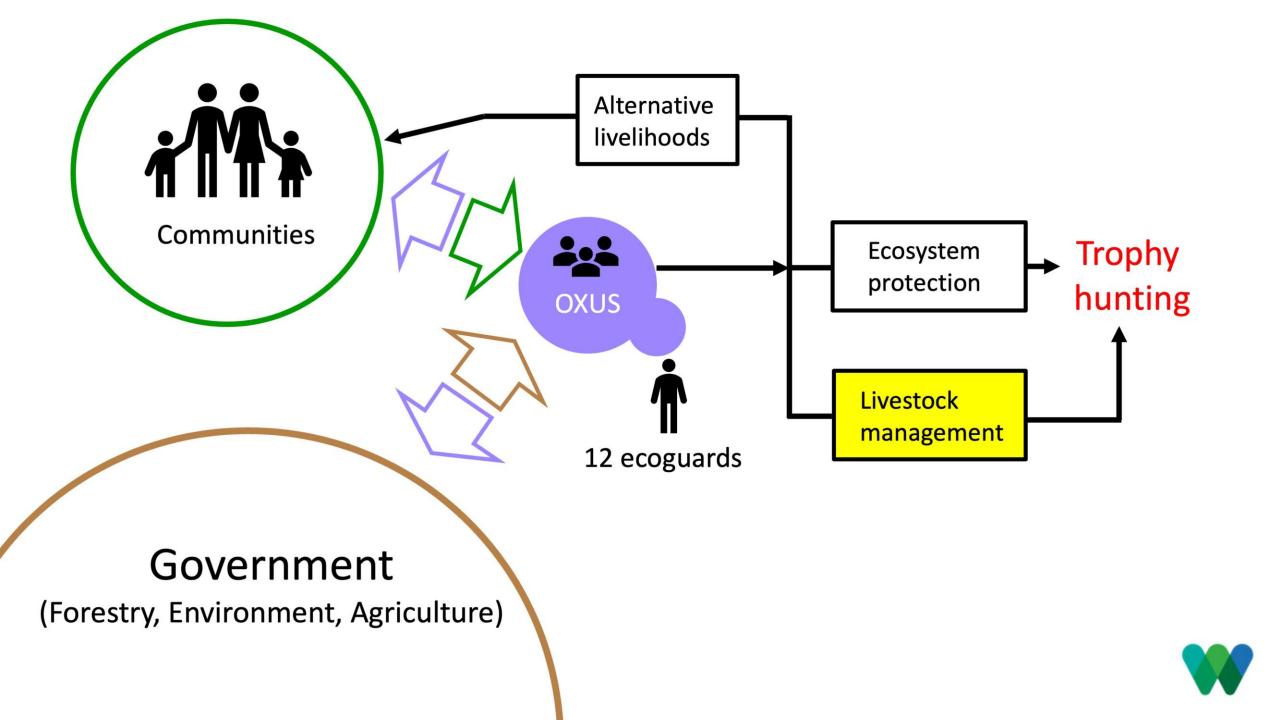
Main results:



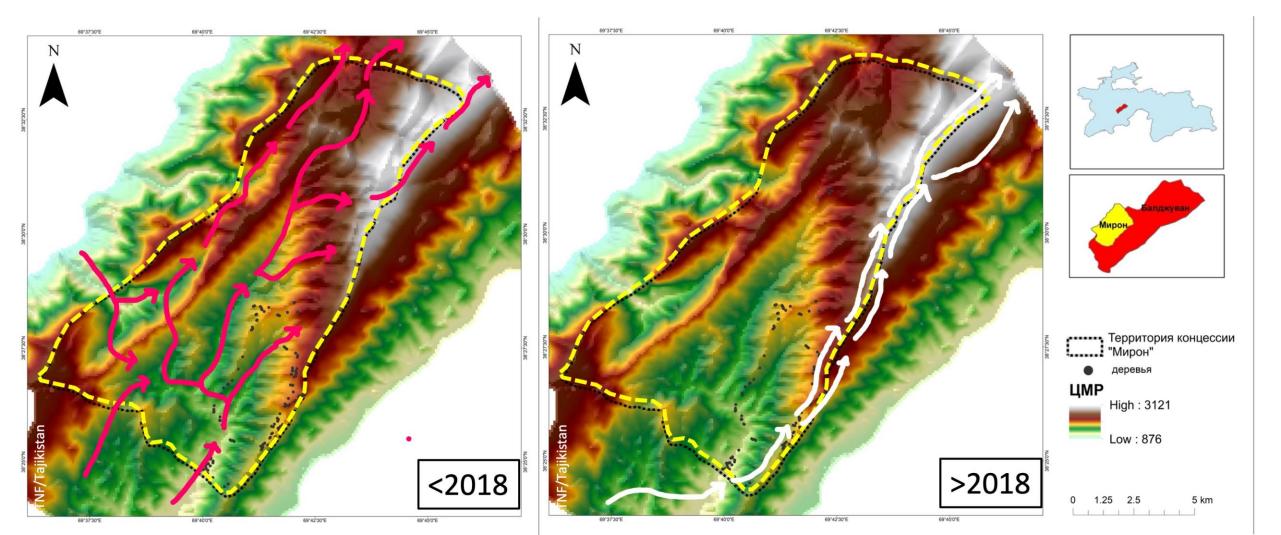




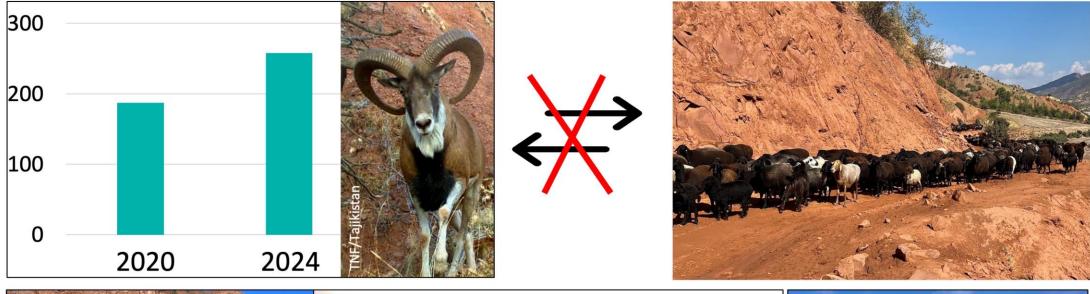
KBA Baljuvon, Tajikistan



Main results: Livestock transhumance patterns modified rangeland restored + wildlife/livestock interface reduced reduced sanitary control of livestock



Main results





Lessons learned from Central Asia:

Bottom-up approaches enable One Health action when the public institution is failing.

One Health actions become more effective when linked to positive socio-economic development for people.

By gaining visibility, the One Health approach supports biodiversity conservation actions.

Conclusion: What does success look like?

When people in the most valuable natural areas proactively engage in REDUCING BIODIVERSITY LOSS, thereby directly or indirectly reducing the risk of the spread of pathogens.







RITICAL ECOSYSTEM