



Preventing zoonotic
disease emergence



2021-2026

PREZODE ACTIVITY REPORT

One Health in Action — Outlook and Perspectives



TABLE OF CONTENTS

- 5. FOREWORD
- 6. EXECUTIVE SUMMARY
- 8. OVERVIEW: PREZODE, A GLOBAL STRATEGIC INITIATIVE FOR PANDEMIC PREVENTION
- 10. RESEARCH FRAMEWORK: BUILT ON SCIENCE, DRIVEN BY PURPOSE
 - 11. The Strategic Agenda, scientific framework
 - 12. The Pillar Working Groups at work
 - 14. Webinar series: Sharing knowledge, advancing science
 - 16. Scientific publications
 - 17. Policy brief: One Health in action -From institutional commitment to Effective Prevention
- 18. PROGRAMS: RESEARCH IN THE FIELD, IMPACT ON THE GROUND
- 19. PREACTS key achievements
 - 21. Senegal: Community animal health workers for veterinary service
 - 22. Cambodia: From assessment to strategy for risk reduction
 - 23. Madagascar: Preventing vector-borne diseases through spatial modelling
 - 23. Fevers in rural Guinea: on the trail of zoonoses
 - 24. Southeast Asia: Bridging science and trust, a long-term fieldwork
 - 25. Costa Rica: Bringing science closer to the real needs of the people
- 26. From understanding to prevention: PEPR PREZODE's integrated research strategy
 - 27. Three calls, three strategic priorities
 - 28. ZOLA: Rethinking zoonotic risk in live animal markets
 - 29. CAVICOR: Tracking bat-borne viruses
 - 30. ZOOCAM: Understanding zoonotic risks in the Camargue
 - 31. ARCHE: Assessing the risk of a tick-borne threat
- 32. COLLABORATIVE NETWORK: LOCAL ROOTS, GLOBAL REACH
 - 33. A global One Health community rooted in local partnerships
 - 34. Joint interview: Prevention is an act of responsibility
 - 36. Voices from our members, partners, and stakeholders
 - 40. PREODE's regional and national engagement
 - 40. OHANA: a One Health community in Oceania and the Pacific
 - 41. The Belgian PREZODE Group
 - 41. Growing connections with our members in India
 - 41. Focus on the Cameroon One Health platform
 - 42. Global efforts with Bangladeshi organizations
 - 44. Standing for a permanent dialogue between science, Society and Policy
 - 46. PREZODE on the world-stage: International recognition through high-level engagement
 - 49. Pandemic Agreement: A sustained commitment to prevention and One Health
- 52. STRENGTHENING DATA: BREAKING SILOS, BUILDING BRIDGES
 - 53. The One Health initiatives and governance online databases
 - 54. Labelling: Focus on COHESA
 - 55. The PREZODE international data platform
- 56. GOVERNANCE: ONE VISION, COORDINATED ACTORS
 - 56. The General Assembly, the strategic anchor
 - 57. The Steering Committee, The strategic engine
 - 57. Behind the scenes, three institutes
 - 59. The Executive Committee and the Secretariat: the operational backbone
 - 60. The regional focal points
- 61. PERSPECTIVES: BUILDING A WORLD RESILIENT TO HEALTH THREATS, A ONE HEALTH IMPERATIVE
- 63. APPENDIX AND CREDITS

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Science must light the way
for public action.

This shared responsibility
rests on renewed trust:

between scientists and citizens,
between States and communities.

PREZODE stands as living proof." //

FOREWORD



On 11 January 2021, at the One Planet Summit for Biodiversity, France made a clear commitment to the international community: to make pandemic prevention a strategic priority. The COVID-19 pandemic had revealed, with unprecedented force, the vulnerabilities of a world insufficiently prepared for global health risks. It was out of this commitment that we launched the international initiative PREZODE (PREventing ZOonotic Disease Emergence), alongside the Director-General of the FAO and the President of the European Commission.

Infectious diseases of animal origin represent potential health threats. They emerge at the interface between humans, animals and the environment. Guarding against them requires combining knowledge, breaking down institutional silos, and reconnecting what we have kept separate for too long. Preserving ecosystems is also a way of protecting ourselves.

Guided by this conviction, France has elevated the *One Health* approach to a cross-cutting priority for several years, and hosted the One Health Summit in Lyon from 5 to 7 April 2026 — bringing together world leaders in an unprecedented gathering to accelerate the implementation of the *One Health* approach. The major role of PREZODE was widely acknowledged there.

PREZODE embodies the choice of science-based prevention, rooted in local realities, driven by dialogue between the peoples of the North and South. It creates the essential link between research, society and public decision-making.

Five years on, the time has come to assess what has been built — and to shape what lies ahead.

In five years, words have become action. Across five continents, thirty governments and more than two hundred and eighty institutions from ninety countries, the initiative unites thousands of stakeholders — researchers, public decision-makers, international and non-governmental organisations, and local communities — to implement ambitious prevention actions on a global scale. Six hundred priorities have been identified. Numerous international working groups have been established. A shared data platform is being deployed. A label guarantees the scientific rigour and integrity of this collective endeavour.

Through France's unwavering commitment, PREZODE has rolled out prevention actions across Africa, Asia, Latin America and Europe, strengthening *One Health* governance, integrated community-based surveillance, training of field agents, raising awareness among thousands of people, and supporting both fundamental and applied research.

PREZODE has also engaged in multilateral fora, contributing to debates around the Pandemic Agreement led by the World Health Organization, alongside numerous partners and States, including France, which co-chaired the negotiations. PREZODE carried a clear message: the integrated *One Health* approach must become a structural pillar of global health governance, to prevent today the new disease emergences that could become the pandemics of tomorrow.

Science must light the way for public action. This shared responsibility rests on renewed trust: between scientists and citizens, between States and communities. PREZODE stands as living proof.

Primum non nocere — first, do no harm. Nature, as Hippocrates taught, is the first physician. The threats we face know no borders. Our destinies are one — and so must be our action.

The pages that follow bear witness to the ground covered and chart the horizons yet to be built. It is our collective responsibility to pursue this commitment to prevention, to the health and well-being of present and future generations. For the health of all living beings. For the health of our planet.

Emmanuel Macron
President of the French Republic



EXECUTIVE SUMMARY

PREZODE, ACTING TOWARDS RESILIENT SOCIO-ECOSYSTEMS

In the span of five years, the initiative has grown into a worldwide community of practice uniting 280 member institutions from 90 countries. Its participation in high-level events and in negotiations for the WHO Pandemic Agreement demonstrates that preventing the emergence of zoonotic diseases is not a technical challenge alone—it is a matter of political will, international solidarity, and long-term investment.

Most sanitary crises—including pandemics—erupt with the emergence of infectious diseases of animal origin. They occur when the interface between the environment, animals, and humans is disrupted. Preventing them requires a sustained, coordinated, and science-driven global effort, built long before an outbreak. This is the founding conviction of the international scientific initiative PREZODE—PREventing ZOonotic Disease Emergence.

📌 Global community, One Health network

Founded on a paradigm shift from response to prevention and grounded in the One Health approach, PREZODE was established to create a worldwide community of practice and knowledge dedicated to preventing zoonotic disease emergence at its source. It brings together research institutes, universities, governments, civil society, the private sector, and international bodies under a shared mission.

As of March 2026, PREZODE counts over 280 members from 90 countries, including 32 governments, mobilizing more than 1,500 experts alongside WOA, FAO, WHO, and UNEP.

PREZODE was built on the combined expertise of three leading French research institutes—CIRAD, INRAE, and IRD—which drew on decades of international field experience in One Health to demonstrate that the absence of robust prevention mechanisms contributed directly to the COVID-19 pandemic.

📌 Research framework: Built on science, driven by purpose

The initiative's scientific framework is the result of a participatory process involving 27 workshops conducted around the world. The Strategic Agenda defines the knowledge gaps and operational priorities for the next decade, and is organized around three interconnected pathways: Strengthening the knowledge base to enable targeted, locally adapted prevention; building collaboration that starts with communities; and creating enabling conditions through data governance, ethical standards, and sustainable financing. To deliver on these pathways, the framework is structured around five pillars: Understanding zoonotic risks; Co-designing solutions to reduce these risks; Strengthening early warning systems;

Prototyping a global information system for surveillance; And engaging stakeholders in One Health networks and policies. The Pillar Working Groups—composed of 86 experts from 36 countries—are translating this agenda into concrete scientific outputs, further fuelled by a webinar series generating substantive content.

➤ **Programmes: Research in the field, impact on the ground**

The scientific goals are grounded in two complementary flagship programmes. The Priority Research Programme and Equipment (PEPR) PREZODE supports 11 projects focused on the primary prevention of zoonotic pathogens prior to spillover to humans. The programme is also conducting a prospective study to move from responding to the emergence of pandemics to primary prevention actions.

The PREZODE Action in the Global South (PREACTS) programme encompasses three projects across Africa and Asia that are targeting epidemic hotspots. Covering 16 countries and involving more than 75 partners, the programme has already delivered measurable results.

➤ **A sustained commitment to prevention and One Health**

Since its inception in 2021, PREZODE is now recognized as an influential voice in primary prevention at the highest international levels, and has advocated for One Health to be embedded in global health governance. This commitment culminated in May 2025, when the WHO Pandemic Agreement was adopted by the 78th World Health Assembly, after more than three years of multiple rounds of negotiations. PREZODE and its members and partners have worked tirelessly, bringing sustained scientific advocacy and evidence-based engagement, to ensure that primary prevention and the One Health approach were foundational pillars of the Agreement.

➤ **Collaborative network: Local roots, global reach**

Scientific knowledge alone cannot ensure effective prevention in the field—it must reach policymakers and local communities. PREZODE was designed to bridge this gap through sustained dialogue across disciplines, sectors, and regions. Through workshops, participatory meetings with communities, and joint expert working groups with international organizations, these efforts reflect a model in which evidence is systematically translated into actionable recommendations and concrete policy outcomes.

PREZODE has actively contributed to global health governance through sustained high-

level engagement—from the Paris Peace Forum and the World Health Summit to the One Forest Summit and multiple UN Climate COPs. Beyond these international stages, PREZODE is grounded at regional and national levels through diverse forms of engagement, such as the OHANA programme in the Pacific, national working groups in Belgium and India, and a labelling scheme that allows projects sharing PREZODE's core values to join its community.

➤ **Strengthening data: Breaking silos, building bridges**

PREZODE serves as a resource centre for evidence-based prevention, facilitating information exchange across scientific communities, institutions, and decision-makers. A cornerstone of this effort is the online database mapping One Health initiatives worldwide—an interactive tool that visualizes the geographical distribution of activities and programmes aimed at preventing zoonotic risks. Complementing this tool, PREZODE has conducted a comprehensive global study on the governance and institutionalization of One Health at the national level, recently published as a policy brief. These findings provide essential evidence for guiding policy action and strengthening One Health systems globally.

In parallel, PREZODE is developing an international data platform to connect prevention actors worldwide and support informed decision-making. A result of a rigorous collective process led by a working group of 60 international experts, the platform is designed to make prevention efforts visible and bridge data silos across sectors and regions.

➤ **Challenges and perspectives**

PREZODE is actively contributing to return-on-investment evidence in collaboration with the Quadripartite, making the case that prevention is not a luxury—it is a cornerstone of global equity and health security. PREZODE calls for long-term, flexible, and intersectoral financing mechanisms adapted to national contexts, with sustained investment in animal and human health systems, environmental surveillance, and community-based action.

By advancing research, capacity-building, and operational action in service of a coherent, scalable response to pandemic risk, PREZODE contributes directly to the achievement of the Sustainable Development Goals. Investing in the prevention of zoonotic disease emergence is inseparable from the broader pursuit of a sustainable, equitable, and resilient world.

PREZODE: A GLOBAL STRATEGIC INITIATIVE FOR PANDEMIC PREVENTION

PREZODE (Preventing ZOonotic Disease Emergence) is an international initiative designed to provide a scientific and operational framework to prevent the emergence of zoonotic diseases. By shifting the global focus from reacting to crises to preventing them at their source, PREZODE represents a critical implementation of the One Health approach.

⬇ We must act now

Zoonoses are infectious diseases that spread between animals and humans. They include rabies, Severe Acute Respiratory Syndrome (SARS), Nipah virus, Influenza viruses, Zika disease, Yellow fever, Chikungunya, Ebola, Middle East Respiratory Syndrome (MERS-CoV), Rift Valley fever, SARS-CoV-2, and COVID-19, among many more. In recent decades, the frequency and number of zoonoses have increased exponentially, and today account for more than two-thirds of emerging human diseases.

Zoonoses pose a major threat to public health and the global economy. Around the world, endemic and epidemic zoonoses cause approximately one billion cases of illness and millions of deaths each year. Beyond the human tragedy, the economic impact is staggering:

- Over the past 20 years, zoonoses have caused damage amounting to hundreds of billions of \$US.
- The cost of the COVID-19 pandemic alone has been estimated to exceed US\$11,700 billion.
- The number of emerging infectious diseases has quadrupled since the 1940s, and 75% of emerging pathogens are transmitted from animals to humans.
- Since 2009, the World Health Organization has declared several Public Health Emergencies of International Concern: H1N1 influenza, Dengue, Ebola, Zika, COVID-19, Mpox, Marburg, MERS-Cov.

Recent studies, including a 2022 World Bank analysis, indicate that reducing risks is 100 times less expensive than responding to pandemics like COVID-19. To avoid the recurrence of a pandemic with similarly devastating consequences, it is crucial to develop effective, integrated prevention strategies informed by collaborative research adapted to local actions (bottom-up approaches).

⬇ Understanding the drivers of zoonotic disease emergence

The rise in zoonotic threats is not accidental; it is largely driven by human impacts on nature. Key drivers include:

- Environmental changes: land-use change, deforestation, and unsustainable agricultural practices disrupt ecosystem balances.
- Global connectivity: rapid urbanization, international trade, and transboundary animal movements facilitate the spread of pathogens.



“ Through international cooperation and the empowerment of local communities, PREZODE is turning the One Health concept into a practical, life-saving reality. ”

- Climate change: as the planet heats up, infectious diseases once confined to warm latitudes are expanding into new areas.

Risk reduction and prevention require a genuinely multidisciplinary approach, one that bridges human health, animal health, and environmental science under the One Health framework, while also integrating social sciences, economics, and local knowledge systems.

📌 Implementing the One Health approach

PREZODE embeds the One Health concept, an integrated and unifying approach that enables a comprehensive understanding of the complex processes underlying emerging health risks – from prevention and early detection to preparedness, response, and disease management – while promoting health and sustainability.

Recognizing that the health of humans, domestic and wild animals, plants, and the broader environment are closely interconnected and interdependent, the One Health approach “mobilizes multiple sectors, disciplines, and communities at different levels of society to work together to foster well-being and address threats to health and ecosystems. It also responds to the collective need for clean water, energy and air, safe and nutritious food, climate action, and sustainable development” (as defined by the One Health High-Level Expert Panel (OHHLEP), 2021).

To strengthen the management of health threats and help prevent future pandemics, the initiative has aligned its Strategic Agenda with the One Health Joint Plan of Action (OH JPA) developed by the Quadripartite Alliance, which brings together WHO, FAO, UNEP, and WOA. H.

📌 A strategic paradigm shift: primary prevention

The core innovation of PREZODE lies in a paradigm shift. While current global health dogma focuses on post-spillover preparedness – or, in other words, controlling zoonotic diseases once they have already spread into human populations – PREZODE focuses on primary prevention. This means acting before a disease occurs in animals or humans, and it requires:

- Systems thinking: understanding all factors that allow pathogens to emerge, be transmitted, and jump the species barrier.
- Comprehensive scope: addressing all types of pathogens on all continents, from wildlife to domestic animals, and all transmission pathways, including direct contact, vector-borne, foodborne, and waterborne routes.

📌 Co-design and bottom-up approaches

Infectious agents do not respect borders, so preventing the emergence of zoonotic diseases requires international collaboration. However, one size does not fit all: prevention only works when grounded in local realities. This means that strategies must be developed using a bottom-up approach that actively engage local communities and frontline actors and takes into account local contexts, constraints, and needs.

A global community of practice

PREZODE is a coalition of members sharing the same values, as stated in its Declaration of Intent.⁴ Membership involves recognizing the complexity of the link between biodiversity pressures and infectious diseases and the importance of local community engagement. The initiative brings together a broad range of stakeholders, including:

- Research and academic institutes
- Governments and decision-makers from local to global
- Civil society organizations and field operators
- Private companies and foundations
- International organizations and other initiatives

Through this community, PREZODE enhances coordination, promotes synergies, and facilitates the sharing of lessons learned and best practices across borders (read more about our members on page 33).

Mission and Vision

PREZODE’s main objectives are to develop a reference scientific framework to understand the macro- processes and drivers behind the emergence of zoonoses in a context of global change, and to co-design relevant solutions to reduce these risks and enable their early detection.

Its work revolves around several key areas:

- Knowledge and innovation: strengthening the research framework to understand the macro-processes leading to zoonotic emergence in a context of global change, and co-developing solutions to reduce the risks.
- Surveillance and early warning: co-developing surveillance systems to enable the rapid detection of threats from local to global scales, and strengthening One Health networks.
- Evidence-based policy: serving as a resource centre to provide decision-makers with the tools and information needed to enact scientifically sound public policies.
- Sustainable development: promoting sustainable agriculture, food systems, and landscape management that respect the One Health approach while ensuring food security and livelihoods for the poorest communities.

By 2030, PREZODE will have contributed to reducing the upward trend of emerging zoonoses and foster international One Health collaboration. The initiative foresees a world where the risk of new pandemics is significantly reduced, land management is sustainable, and global food security is preserved through coordinated research and efficient operational policies.



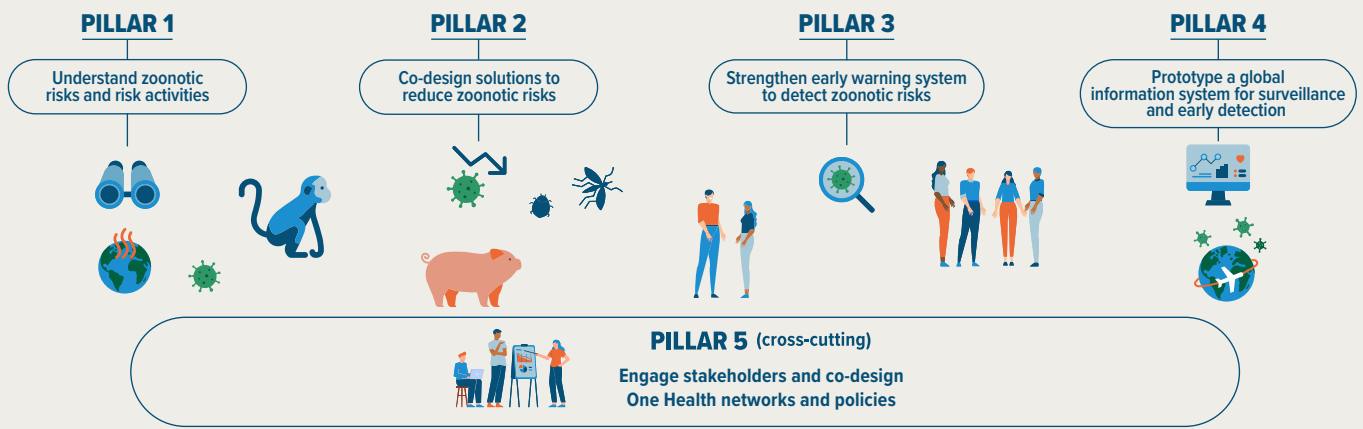
RESEARCH FRAMEWORK

BUILT ON SCIENCE, DRIVEN BY PURPOSE

The COVID-19 pandemic revealed the profound vulnerabilities of a world still largely organized around reacting to health crises rather than preventing them. At the same time, growing scientific evidence has highlighted that the majority of emerging infectious diseases originate at the interface between humans, animals, and ecosystems, driven by factors such as land-use change, biodiversity loss, and climate change. These complex and interconnected dynamics call for a fundamental shift: from fragmented approaches to a holistic, science-based prevention strategy.

Initiatives such as PREZODE have emerged to address a critical gap in global health governance. Their ambition is to build a robust, interdisciplinary understanding of the drivers of disease emergence, grounded in the One Health approach. By fostering systems thinking and integrating knowledge across disciplines and regions, such initiatives aim to provide the scientific evidence necessary for more informed, anticipatory decision-making. At PREZODE's heart lies a commitment to co-construction, dialogue, and partnership—particularly through strengthened collaboration between countries of the Global South and the Global North.

By promoting coordinated research, shared data, and locally grounded actions, PREZODE seeks not only to advance scientific knowledge but also to translate it into concrete strategies for reducing the risk of zoonotic disease emergence. In doing so, it contributes to a broader vision: one where health, environment, and development policies are aligned to anticipate and mitigate global risks before they escalate into crises.



The Strategic Agenda, scientific framework

The Strategic Agenda details the knowledge gaps in research to be filled and the operational activities to be targeted over the next ten years to achieve PREZODE's vision: a world of healthy ecosystems, free of pandemics. It provides a global impact pathway on how PREZODE will contribute to this vision in preventing emerging zoonotic diseases and how its impact will be assessed, including solutions required to settle political and socio-cultural issues. The PREZODE scientific framework is based on five pillars. The Strategic Agenda details research gaps and operational needs for each pillar, which are summarized in the main categories below:

↓ Pillar 1: Understand zoonotic risks and risk activities

- Defining zoonotic emergence risks and a risk interface
- Identifying the players (bugs, hosts, and their environment) and mechanisms involved in zoonosis emergence
- Identifying the main drivers and risk practices leading to zoonotic disease emergence
- How can zoonotic disease emergence risks be anticipated?

↓ Pillar 2: Co-design solutions to reduce zoonotic risks

- Using ecosystem conservation to reduce pathogen circulation between wildlife and domestic animals
- Regulating and tracing activities related to wildlife
- Innovative livestock management and agriculture systems
- Design of urban space
- Interconnection between all the different approaches and actor engagement.

↓ Pillar 3: Strengthen early warning systems to detect zoonotic risks

- Assessment of current surveillance systems and practices
- Context-specific and user-based surveillance systems

- Innovative surveillance protocols and diagnostic tools
- Community-based prevention and early warning systems.

↓ Pillar 4: Prototype a global information system for surveillance and early detection

- Interoperability and sustainability of surveillance systems and global standards
- Definition of the type of surveillance and objectives of global surveillance, and identification of relevant indicators and data
- Action plan related to global surveillance
- Infrastructure
- Optimizing efforts to avoid duplication.

↓ Pillar 5 (cross-cutting): Engage stakeholders and co-design One Health networks and policies

- Community engagement
- Policy engagement and awareness of stakeholders
- Dialogue between science, civil society, and policy makers
- Co-development and coordination of health networks
- Promoting One Health approaches and intersectoral collaboration
- Ethics, sustainability, policies, and implementation frameworks
- Sustainable financing and return on investment methodologies.

▾ The Agenda impact pathways

To achieve PREZODE's vision by 2030, its global community must come together to put in place sustainable strategies for preventing zoonotic diseases. To that end, by 2030, PREZODE should have:

- Contributed to reducing the upward trend of emerging zoonoses through preventive actions designed jointly with all relevant stakeholders.
- Enabled the implementation of efficient early warning systems to detect and rapidly respond to counter emerging diseases from the local level to the global scale. These early warning systems will have been developed through a bottom-up "One Health" approach; as a result, they will be interoperable and involve all stakeholders and communities, thereby raising awareness.
- Promoted the development of scientific methodologies to characterize innovative strategies for managing societies and their ecosystems, aiming to reduce the risk of zoonotic disease emergence and make them more resilient while ensuring food security.
- Developed and promoted synergies with regional and international initiatives focusing on the prevention of zoonotic diseases.

- Provided information, sustained, and supported a resource centre available for decision makers to enable the implementation of public policies - including strengthening science-society-policy dialogue.

This Strategic Agenda is intended to evolve through a re-evaluation process conducted by the PREZODE Steering Committee. The next version will highlight priority activities to achieve the desired impact. It will also provide information on how this agenda will be synchronized with other strategic agendas on related topics, such as climate change, food security, and biodiversity loss.

A co-designed approach

The strategic agenda is the result of a broad, multi-disciplinary participatory consultation involving an impact-based approach and the co-development of a theory of change. It is the largest international co-design process to date, targeting the prevention of emerging zoonotic disease risks. It was conducted between January 2021 and June 2022, with the participation of nearly 1,500 professionals (i.e., researchers, stakeholders, policy makers, NGOs, and CSOs) from over 128 countries in 10 world regions.



Science, policy, and prevention: The Pillar Working Groups at work

Launched in 2024, the Pillar Working Groups of PREZODE embody the initiative's scientific ambition: to strengthen research and translate knowledge into concrete, operational pathways for preventing zoonotic disease emergence.

Bringing together 86 experts from 36 countries, the groups were established to advance the five pillars of PREZODE's Strategic Agenda through an integrative, collaborative, and cross-cutting One Health approach. Each working group therefore addresses a key dimension of zoonotic risk prevention.

The work of the Pillar Working Groups (PWG) is organized through regular online meetings enabling experts from different regions and disciplines to collaborate on a regular basis under the coordination of PREZODE's Science Officers, **Dr. Elsa Léger** and **Manon Lounnas**. The experts work in

close collaboration with PREZODE Science Focal Points and members of the Steering Committee, who help guide discussions, ensure alignment with the Strategic Agenda, and support the development of collective deliverables.

▾ Objectives and work plans

In their first task, the five groups identified priorities, refined objectives, and structured their collective work plans. This foundational phase directly supported one of PREZODE's core missions for science: "building a systemic research framework that deepens understanding of the drivers

of zoonotic emergence while supporting countries and international organizations in developing effective, evidence-based prevention strategies” - prioritizing PWG tasks according to the most pressing needs (e.g., supporting the Pandemic Agreement negotiations).

Across the groups, experts are producing high-level scientific outputs, including opinion papers, analytical reports, and strategic documents designed to clarify concepts, synthesize current knowledge, and identify priority actions. They contribute to strengthening shared understanding of zoonotic risks, enhancing early warning and surveillance strategies, promoting co-designed prevention approaches, and supporting the operationalization of One Health at national and international levels.

Dr. Aitor Nogales González, researcher at the Center for Research in Animal Health (CSIC), CISA-INIA (Spain), and former member of the Steering Committee, emphasizes his contribution: *“Serving on the Steering Committee allows me to help shape Pillar Working Group 1’s priorities and plan impactful activities. It is a valuable opportunity to collaborate with diverse experts, enrich decision-making, encourage innovative solutions, and support PREZODE’s prevention-focused mission. As a virus researcher studying infectious diseases, contributing to efforts that reduce zoonotic emergence is deeply meaningful.”*

→ Co-writing of a policy brief

Among the flagship outputs, Pillar Working Group 5 experts contributed to a policy brief, “One Health in Action: Key Factors for National Adoption and Implementation,” which outlines enabling conditions for translating One Health principles into effective governance and practice. This work was supported by an international study led by the group to document One Health governance and operationalization status in countries worldwide in support of the Pandemic Agreement negotiations.

The PREZODE Glossary is another collective effort involving all of the working groups and will provide harmonized definitions of key terms and concepts related to zoonotic emergence and One Health; it is scheduled for publication in 2026.

→ Focus on equity and inclusivity

Following the January 2025 webinar on equity issues in zoonotic disease prevention, a dedicated group has reflected on how equity and inclusivity can be better integrated into prevention strategies. Their work proposes a stepwise approach to embedding these principles within the PREZODE framework and addressing



The work of experts builds on field expertise, analysis literature, discussions...

“We demonstrate that preventing zoonotic emergence requires integrated, equitable and prevention-focused action”

Dr. Robyn Alders, Honorary Professor at the Development Policy Centre, Australian National University, Adjunct Professor at the Department of Infectious Disease & Global Health, Cummings School of Veterinary Medicine at Tufts University (USA), Lead of the OFFLU Socio-Economic Working Group, reflects on her contribution to the working groups:

“My involvement with PREZODE, particularly within Pillar 5 on One Health, has been professionally rewarding and intellectually uplifting. Our geographically and disciplinarily diverse team has prioritized strategic advocacy to strengthen the integration of One Health principles across pandemic governance frameworks.

A major focus was contributing to an Op Ed in Le Monde in April 2025, calling for explicit incorporation of prevention-centred One Health within the WHO Pandemic Agreement. In parallel, we developed a One Health governance policy brief arguing that formal institutional recognition does not ensure effective operationalization. The adoption of the Pandemic Agreement by the World Health Assembly in May 2025, particularly its explicit reference to One Health in Article 5, represents a significant global milestone.

Within Pillar 5, we formed a subgroup that continues to focus on equity in zoonosis prevention. A global webinar in early 2025 examined structural barriers to participation in prevention efforts, leading to a manuscript outlining practical guidance for embedding equity and inclusivity across PREZODE’s workstreams.

Collectively, our Pillar 5 activities demonstrate that preventing zoonotic emergence requires integrated, equitable, and prevention-focused action. A robust One Health approach remains essential to safeguarding human, animal, and environmental health in an interconnected world, aligning with PREZODE’s vision of reducing zoonotic risk through sustained, collaborative prevention.”

structural, epistemic, and institutional barriers that can hinder prevention efforts (opinion paper under preparation).

Dr. Amelie Desvars-Larrive, associate professor of infectious disease epidemiology at the University of Veterinary Medicine Vienna, (Austria), and resident scientist at the Complexity Science Hub Vienna, who is involved in both Pillar Working Group 4 and the Equity Working Group, shares her experience: *“This dual role matters because preventing zoonosis emergence requires equitable solutions. I deeply value how PREZODE experts collaborate and co-learn*

across disciplines to build early warning systems that are both scientifically robust and fair”.

In addition, PREZODE has partnered with QUAE-Publisher to release an **“Atlas of solutions to prevent zoonotic disease emergence”**, a major collective deliverable led by working group experts and involving the broader PREZODE community. This forthcoming resource will map and showcase One Health prevention strategies worldwide, providing a practical and strategic reference for decision-makers, researchers, and partners (expected by the end of 2026).



Webinar series: Sharing knowledge, advancing science

Progress depends not only on scientific research but also on the active circulation of expertise, insights, and evidence across disciplines, regions, and sectors. The webinar series embodies a core belief shared across PREZODE: preventing the next pandemic requires not only excellent research, but also the willingness—and the infrastructure—to share knowledge widely and work together across borders and disciplines.

A mission driven by knowledge exchange

Since June 2024, PREZODE has organized a series of webinars that bring together key stakeholders, researchers, policymakers, civil society organisation, private actors, and representatives from PREZODE’s diverse community around the world. Each webinar is organized to address pressing challenges at the intersection of human, animal, and environmental health, reflecting the One Health approach that underpins all PREZODE’s work.

The discussions, presentations, and exchanges taking place during these sessions serve a dual purpose. They provide open access to high-level scientific dialogue for the extended PREZODE community and beyond, and they generate valuable insights and high-quality content that feed directly into the initiative’s scientific working groups, helping to refine research priorities, identify knowledge gaps, and strengthen collaborative outputs.

Two FORMATS TO FOSTER DIALOGUE and Scientific Insight

PREZODE offers two complementary webinar formats, each designed to meet specific scientific and community engagement objectives.

The Panel Discussions bring together speakers with diverse expertise and perspectives to address complex topics related to zoonotic disease prevention. Through 1.5-hour moderated roundtable conversations, experts from different backgrounds share insights, experiences, and actionable recommendations for overcoming systemic challenges. Questions that have been addressed include “The One Health approach to tackle highly pathogenic avian influenza”, “What lies behind the concept of prevention”, “Equity and inclusivity in zoonotic diseases prevention”, and “How climate change is driving disease emergence”. The most recent event, in March 2026, “How to assess impact and added-value of One Health prevention strategies,” explored the challenges of measuring prevention when success often means that nothing happens, and the need for credible indicators to capture risk reduction and justify long-term investment.

The Science Talks and Lectures sessions offer a deeper dive into specific scientific questions at the frontier of PREZODE’s research agenda. These one-hour webinars feature keynote



presentations from leading scientists and domain experts, often accompanied by case studies and targeted presentations that illustrate particular methodological, technical, or epidemiological challenges. The format provides up-to-date, rigorous knowledge to PREZODE’s scientific community—and to the broader public of students, professionals, and policymakers who follow the initiative’s work. The webinars have covered the following topics: “Gender perspectives in zoonosis prevention” in support of the Pandemic Agreement negotiations attended by many WHO member state representatives, “One Health governance and the operationalization of prevention activities” and, the most recent one in September 2025, “Community-based and integrated surveillance systems”. Drawing on field experience from Madagascar and Peru, speakers explored how digital tools, participatory monitoring, and spatial modelling can strengthen early warning systems for zoonotic diseases.

📌 **Shaping the future of prevention**

More than a series of online events, the PREZODE webinars, co-organized by **Catherine Dornis**, Communication Delegate, and **Dr. Elsa Léger**, Science Officer, are a cornerstone of the initiative’s commitment to open science, inclusive dialogue, and collaborative action.

By facilitating meaningful exchanges between scientists, policymakers, and operational actors, the webinar series strengthens the global network working to prevent zoonotic disease emergence, ensuring that the PREZODE community remains at the forefront of scientific knowledge and practical solutions for zoonotic disease prevention. **Prof. Natalia M. Cediel Becerra**, Associate Professor and Researcher, Veterinary Medicine

Programme, Universidad de La Salle, who participated in the Science Talks and Lectures session “Gender perspectives in zoonosis prevention” appreciated *“the strong panellist involvement and respectful co-creation with the organization team”*. She highlighted that *“the selection of panellists, question design and live facilitation allow to deepen the topics and create balanced participation. As a panellist, I also valued the genuine interest in advancing gender equity and environmental integration into One Health implementation, which are topics usually neglected. As an audience member, I treasure the high-level and qualified speakers, global and regional representation, and consistent gender parity”*. An opinion shared by **Dr. Dien Thi Nguyen**, panellist in the webinar on “Highly pathogenic avian influenza: She appreciated that the discussions included socioeconomic and gender perspectives, noting, *“Prevention requires better integration of gender considerations, reflecting the different practices of male and female individuals and professionals”*.

“ **By making these exchanges widely accessible and bringing high-level scientific expertise within everyone’s reach, PREZODE ensures that knowledge on zoonotic disease prevention reaches everyone—from policymakers shaping global health strategies to researchers and practitioners working on the front lines. ”**

The growing engagement of the audience reflects the relevance of these conversations. Since the launch of the series, eight webinars have attracted between 150 and 400 participants per session, with hundreds more accessing the replays available on the PREZODE YouTube channel.



Scientific publications

Papers laying out the scientific framework of PREZODE, authored by scientists and experts involved in the initiative, are being published.

From its launch, PREZODE gained international visibility through a letter published in *The Lancet*, which set out the scientific foundations of the initiative and the core values uniting its members. These principles are further formalized in the Declaration of Intent, endorsed by a growing coalition of institutions and countries committed to a One Health approach: “Grounded in the recognition that nearly 75% of emerging infectious diseases are zoonotic and driven by human pressures on ecosystems, PREZODE promotes an integrated understanding of the links between biodiversity loss, land use, food systems, and health. It emphasizes that preventing pandemics requires going beyond preparedness by addressing the root causes of emergence through science-based, systemic, and preventive action.

The initiative is built on key principles: strengthening knowledge through research and innovation; developing robust, participatory surveillance and early warning systems; fostering inclusive, bottom-up approaches that engage local communities and stakeholders; and ensuring that prevention strategies contribute simultaneously to food security, climate adaptation, biodiversity conservation, and poverty reduction. PREZODE also upholds values of international cooperation, transparency, equity, and the sharing of data, tools, and experience. It calls for coordinated

action across sectors and scales, mobilizing public and private actors alike, and aligning efforts with global agendas such as the Sustainable Development Goals. Through this collective commitment, PREZODE aims to transform how the world anticipates and prevents zoonotic disease emergence.”

A recent publication in *Nature Health*, titled PREZODE: a global co-designed One Health initiative for zoonotic spillover prevention, examines the impact pathways of the PREZODE strategic agenda.

In this paper, **Dr. Manon Lounnas** and co-authors (see appendix p. 63), all part of PREZODE’s scientific community, present in greater detail the scientific foundations and strategic framework of PREZODE.

Despite the growing threat of zoonotic diseases—driven by environmental degradation, land-use change, and intensified human–animal–ecosystem interactions—health strategies remain largely reactive. Cost-effective primary prevention of zoonotic spillover remains systematically underimplemented.

Between 2021 and 2023, the PREZODE strategic agenda was developed through a rigorous mixed-methods approach: a review of international reports, ten regional theory-of-change workshops engaging participants from 128 countries, and two international scientific workshops involving 129 experts.

The authors propose a strategic framework organized around three interconnected pathways: **(i) strengthening the knowledge base to enable targeted, locally adapted prevention; (ii) building collaboration that starts with communities; and (iii) creating enabling conditions through data governance, ethical standards, and sustainable financing.**

This paper demonstrates how a transdisciplinary, co-designed prevention framework can be implemented at scale across diverse geographical and institutional contexts, offering a replicable model for transitioning from pandemic preparedness to structural, upstream risk reduction.

A second paper, in *Scientific Data*, presents the open-access database underpinning these impact pathways: **“PREZODE. data: a comprehensive public database of operational needs and knowledge gaps to prevent zoonotic disease emergence”**. PREZODE.data compiles 1,539 operational

Deforestation is one of the major drivers of ecosystem disruption and habitat loss, which can lead to the emergence of zoonoses.



needs and knowledge gaps extracted from the participatory workshops, representing the collective assessment of what is essential for preventing zoonotic emerging infectious diseases. Entries are organized according to PREZODE's five thematic pillars and a set of cross-cutting categories, providing a structured and navigable resource. Co-constructed at an international scale through an inclusive, multi-stakeholder process, the database offers a uniquely broad and representative foundation for guiding research priorities, informing public policy, and strengthening evidence-based prevention strategies. It is freely available in Excel format.

ONE HEALTH IN ACTION: FROM INSTITUTIONAL COMMITMENT TO EFFECTIVE PREVENTION – A POLICY BRIEF

PREZODE conducted a global study mapping the governance and operationalization of One Health at the national level. The study has just been published as a policy brief, available on our website.

Based on a literature review, an international survey with more than 260 respondents from 80 countries, and expert interviews, the study provides one of the most comprehensive overviews of One Health governance worldwide. The results show that many countries—including low- and middle-income countries—have already institutionalized One Health through national platforms, policies, or scientific committees. However, institutionalization alone does not guarantee effective implementation.

Based on this work, the policy brief, ***“One Health in Action: Key Factors for National Adoption and Implementation”***, developed with contributions from experts of PREZODE's Pillar Working Group 5, highlights the key factors needed to move from commitment to action. These include: 1) national One Health platforms to target national priorities based on local realities, beyond international zoonotic threats alone; 2) quality intersectoral collaboration based on strong partnership best practices; 3) engaging “One Health champion” countries to further accelerate progress and foster collective learning; 4) seed funding or blended funding to invest in cross-sectorial collaboration that is integrated into national budgets to ensure sustainability; and 5) using scientific evidence, such as this work, to better inform decision-making.



This work was made publicly available in a collective op-ed published in *Le Monde* in April 2025—signed by PREZODE and its international partners including Four Paws, the Johns Hopkins Center for Health Security, IPBES, Action for Animal Health, CIRAD, IRD, INRAE and the Wildlife Conservation Society—calling for the full integration of One Health prevention measures in the international Pandemic Agreement negotiations.

The adoption in 2025 of the Pandemic Agreement has reinforced the importance of embedding operational One Health governance into national and global frameworks. Strengthening prevention today—through coordinated, science-based and adequately funded strategies—is not a luxury but a necessity to reduce the risk of future pandemics and protect human, animal, and ecosystem health.



PROGRAMS

RESEARCH IN THE FIELD, IMPACT ON THE GROUND

PREZODE develops its scientific framework through dedicated research programmes and collaborative field projects. The initiative currently relies on two major ones: PREACTS (PREZODE in Action in the Global South), focused on research for development and support to countries of the Global South, and the PEPR PREZODE programme, which strengthens research efforts in France and across partner countries in Europe and the Global South. Together, they represent a total investment of €50 million.

PREACTS is an operational research-for-development programme dedicated to preventing the emergence of diseases of animal origin in the Global South. It mobilizes a wide range of local, national, and international actors across sectors—including academia, civil society, and public institutions—to co-develop prevention strategies adapted to local contexts.

PEPR PREZODE focuses on structuring French research consortia and advancing research on potential zoonotic threats affecting France, its overseas territories, and other PREZODE partner countries. The programme aims to strengthen scientific knowledge and preparedness to better anticipate and prevent emerging infectious diseases.



PREACTS key Achievements

The PREACTS programme builds upon and synergizes with other health and One Health projects in targeted countries. Funded by the Agence Française de Développement (AFD) for a total of 25 million euros, it includes three projects: AfriCam (Africa- Cambodia, 2023-2026), ASAMCO (Asia-America-Congo, 2024-2028), and ASEACA (Africa -South East Asia- the Caribbean, 2025-2029). These projects are established in selected countries (within PREZODE country members) and regions identified as epidemic hotspots, providing a diverse landscape for PREACTS' One Health approach.

PREACTS projects are currently active in 16 countries across Africa, Asia, the Caribbean and Latin America, mobilizing more than 75 institutional, scientific, and operational partners.

Those projects already contributed to the establishment or strengthening of more than 22 One Health platforms at national and regional levels, and the deployment of six integrated community-based surveillance systems linking human, animal, and environmental health.

To this date, more than 20,000 people have been directly sensitized to zoonotic risks and locally adapted prevention practices. At least 180 community agents have been recruited, trained, or mobilized to anchor prevention efforts at the local level. More than 30 context-specific awareness tools were developed, including a community theatre play, visual materials, and educational resources. Field activities have documented over 30 sites where risk practices are being analyzed to guide targeted prevention actions, and more than 22,000 samples and 14,000 laboratory analyses have already been carried out to support integrated and sustainable surveillance systems.

PREACTS projects also contribute to strengthening human capacities at scale, with more than 450 professionals, technicians, and future decision-makers trained in One Health approaches so far.

By combining governance, surveillance, and community engagement, PREZODE demonstrates that pandemic prevention can be operational, measurable, and sustainable.

AFRICAM

Launched in 2023, the AfriCam project is implemented in Cambodia, Cameroon, Guinea, Madagascar, and Senegal, and has entered its final implementation phase. It embraces a flexible approach: while its objectives and structure remain consistent across all countries, specific activities were defined with national partners in line with local contexts, priorities and needs.

In **Cambodia**, activities focus on water-borne diseases, from risk characterization to advanced modelling using real-time satellite data, community-level risk reduction strategies, and pilot surveillance systems. In **Cameroon**, the project identifies and mitigates emerging infectious risks in two socio-ecologically distinct areas. It also supported the creation of a One Health Master's programme at the University of Dschang, growing from 7 students in 2024 to 30 in 2025, and awareness-raising activities reaching approximately 10,000 people through the national OH platform. In **Guinea**, the project strengthens village-level OH committees and develops community-based surveillance systems, while supporting post-elimination monitoring of Human African trypanosomiasis (sleeping sickness) in Forest Guinea, including risk reduction actions with local communities. In **Madagascar**, the project supports and integrates existing community-based surveillance systems for human, animal, wildlife and environmental health, and collaborates with national authorities to scale up the AfriCam One Health surveillance model. In **Senegal**, the pilot 3S platform was the first to detect Rift Valley Fever animal cases in Saint-Louis two months before the official outbreak in 2025. The project also supports the establishment of an interdisciplinary OH collective at Gaston Berger University to strengthen Science-Society-Policy dialogue.

In several countries, serological and molecular biology activities have identified the circulation of zoonotic pathogens previously undocumented locally.

ASAMCO

Characterized by its regional approach, the ASAMCO project started in mid-2024 in **Central and Latin America (Mexico, Costa Rica, and Haiti), Southeast Asia (Laos and Thailand), and Africa (Democratic Republic of Congo)**.

In Central and Latin America, implementation is grounded in field-based socioecological



PREZODE in action in the global South



PREZODE in action in the global South



PREZODE in action in the global South



PREZODE in action in the global South

investigations informing participatory prevention and surveillance strategies. In Southeast Asia, where One Health coordination mechanisms are already in place, efforts have focused on consolidating knowledge, reviewing governance frameworks, and identifying gaps to inform «smart surveillance» systems. In the DRC, field-driven biological and ecological investigations are closely linked to capacity strengthening and national surveillance platforms. These differentiated approaches reflect contextual adaptation within a unified upstream prevention strategy grounded in One Health principles.

In Latin and Central America, Costa Rica initiated field implementation through rapid socioecological assessments in the Osa Peninsula, generating baseline data on land use, wildlife interactions and risk perception. In Mexico, significant progress was made in site selection, protocol development and regulatory authorizations despite a delayed start. In Haiti, field activities were constrained by the security context, though coordination with national partners and capacity-strengthening planning continued.

In Southeast Asia, expert workshops on viral zoonoses, governance and tick-borne diseases helped define operational priorities. Provincial risk assessments and community-based surveillance initiatives were launched at the wildlife–livestock interface in Thai and Lao border provinces.

In the **Democratic Republic of Congo,** field activities were rapidly deployed in Équateur and Tshopo provinces, with several thousand human and wildlife samples collected and laboratory analyses ongoing at INRB. Preparatory work for Prevention and surveillance activities is advancing toward structured implementation in 2026.

In 2026, ASAMCO enters a phase of accelerated implementation and policy-oriented translation of results, fully aligned with PREACTS' objective of strengthening evidence-based prevention of zoonotic disease emergence.

↓ ASEACA

The third project, ASEACA, co-designed its theory of change, including its specific objectives and activities in each country with all relevant actors (government, civil society, decision makers, etc.) in 2024, with a grant provided by AFD before the project submission. Activities have started at the end of 2025 in three regions: Eastern and Southern Africa (Tanzania, Mozambique, Zimbabwe), South East Asia (Philippines, Vietnam) and in the Caribbean (Cuba).

Sky view of the Osa Peninsula, in Costa Rica, where ASAMCO implements one of its programs.



SENEGAL

COMMUNITY ANIMAL HEALTH WORKERS FOR VETERINARY SERVICE

In the department of Kédougou, located in southeastern Senegal near the borders with Guinea and Mali, a region rich in forest resources and wildlife where interactions between domestic animals, wildlife, and human populations are frequent, AfriCam has developed a veterinary health training and support programme.

The landlocked, mountainous department of Kédougou covers 6,000 sqkm and has a Sahelian climate. It has only one veterinary clinic serving an estimated livestock population of 34,000 cattle and 44,000 small ruminants, owned by 6,600 agropastoral households.

Covering such a vast area is therefore impossible, despite the significant efforts made by the departmental public livestock service. The AfriCam Senegal teams, together with Agronomes et Vétérinaires Sans Frontières (AVSF) Senegal and in collaboration with the department's veterinary services, have established a programme to improve access to local animal health services by training community animal health workers, in collaboration with local professionals and authorities.

The objective is to raise awareness of detectable zoonotic diseases (rabies, haemorrhagic fevers, anthrax, avian influenza, etc.), increase awareness of the associated risks, and facilitate livestock vaccination and access to basic veterinary care. The project also aims to strengthen the vaccination of domestic carnivores, particularly against rabies. With AFRICAM's support for vaccine procurement and the involvement of community workers, a large-scale community vaccination campaign was organized, resulting in the vaccination of 1,000 dogs and raising local awareness of the risks of rabies transmission to humans. This approach also contributes to strengthening the detection and early warning of diseases at the interface between wildlife, domestic animals, and human populations.

"For the project to succeed, it was essential that these community workers come from the livestock communities they serve. This is a central issue of trust, key to AVSF's methodology," says **Dianna Mane**, Project Officer at AVSF.

To date, 81 community workers—many of whom are livestock farmers themselves—have been trained and equipped to provide basic care and support vaccination coverage under the supervision of departmental health authorities. This collaboration is now strengthening the network of actors involved

in animal health surveillance. Thanks to their involvement, vaccination coverage for small ruminants in the department has doubled, while coverage for cattle increased by 20% between the national livestock vaccination campaigns of 2023 and 2025.

In 2024, the World Organisation for Animal Health (WOAH) recognized the role of community animal health workers (CAHWs) as the foundation of the veterinary health pyramid worldwide.

The community workers—many of whom are livestock farmers themselves—have been trained to support vaccination coverage.



CAMBODIA

FROM ASSESSEMENT TO STRATEGY FOR RISK REDUCTION

Knowledge, Attitudes, and Practices (KAP) studies are effective tools for identifying knowledge gaps, behaviours, and perceptions that may increase the risk of disease exposure. In April 2025, a KAP survey was conducted in Aek Phnom district, Battambang province. It forms a key component of AfriCam's overall risk reduction strategy in Cambodia.



Led by Agronomes et Vétérinaires Sans Frontières (AVSF) in collaboration with local authorities and AfriCam partners, the study primarily targeted villagers, with 444 individuals interviewed across 12 villages in the district. A parallel survey targeting animal and human health professionals included 15 village animal health workers (animal health professionals who provide services in rural areas) and 13 village health support groups (human health professionals who serve as a bridge between communities and human health services).

The survey covered a wide range of topics: livestock practices, biosecurity practices (such as the management of carcass disposal and sick animals), dietary habits, household hygiene, exposure to wildlife (consumption, hunting, trade), and interactions with water in the context of agriculture or fishing. The goal was to understand the knowledge, attitudes, perceptions, and practices of local communities in order to identify knowledge gaps, risk perceptions, and unsafe practices that could be targeted by appropriate prevention strategies. Two additional topics were assessed: gender equity and climate change impacts.

Initial findings highlighted several areas of concern regarding zoonotic risks

Uneven knowledge and contrasting perceptions: While 91% of respondents cited rabies as a zoonotic disease, fewer than 10% had heard of other infections such

as brucellosis or leptospirosis. 57% were unaware that slaughtering animals could pose a risk to humans, and 7% acknowledged having slaughtered sick animals to feed their families.

Gaps in risk perception: Almost all respondents were aware that zoonotic diseases can be harmful to humans, yet nearly half believed that such diseases were unlikely to occur within their own community.

Risky human-animal interaction practices: Close cohabitation with animals remains common: in rural areas, people often share their living space with poultry or dogs, increasing the risk of cross-transmission.

Zoonotic risk among human-animal health professionals in the rural area: 50% of village animal health workers knew that not recapping needles is a preventive measure; village health support groups are primarily involved in addressing communicable diseases in the community.

Gender equities and inequities: Exposure to zoonoses, access to healthcare, and contribution to health decisions were perceived as equitable for both women and men. In contrast, the management of large animals (such as cattle) and the provision of animal health services were activities predominantly performed by men, whereas human health care workers were mainly women.

Climate change: Climate change is perceived as a major threat already affecting daily life, yet most respondents feel they lack the capacity to act or to meaningfully influence its trajectory.

These findings guided the design of a tailored programme combining training, awareness-raising, and support for local communities, aimed at strengthening biosecurity practices and small-scale poultry farming, with a primary focus on avian influenza. The programme also seeks to expand formal training opportunities for village health support groups.

MADAGASCAR

PREVENTING VECTOR-BORNE DISEASES THROUGH SPATIAL MODELLING

Mauricianot Randriamihaja is working on the design of a spatial modelling system that can prevent mosquito outbreaks, complementing community surveillance in Madagascar.

Dr. Mauricianot Randriamihaja has just completed his thesis on spatial modelling. His research, integrated into AfriCam as part of the partnership with the NGO Pivot, was supervised by Dr. Andres Garchitorena (PREACTS pilot for IRD) and Michelle Evans (Pivot).

Using a system that combines field surveys, satellite images, and algorithms, his work facilitates decision-making to optimize active surveillance programmes at the community level and reduce mosquito larval habitats in the Ifanadiana district of southeastern Madagascar, thereby preventing the risk of malaria and other emerging mosquito-borne diseases (e.g., arboviruses) within communities.

↪ What is the background of your research?

The climate in the Ifanadiana region is conducive to rice cultivation, with two harvests per year—in March/April and September/October. These seasons coincide with heavy rains, which are particularly intense in this part of the island. Flooding, especially in rice fields, encourages the proliferation of mosquitoes, which find suitable breeding grounds there; their population threatens farmers, rice growers, and neighbouring communities with infectious vector-borne diseases.

With climate change, rising temperatures, and increased frequency and intensity of rainfall, the regularity of the seasons and episodes of field flooding are also being disrupted... Mosquito behaviour is changing, and they are becoming more resistant to insecticides. It is therefore difficult to know when they will proliferate. The risks of malaria

and arboviral disease transmission are further increased by human activities, such as the use of unprotected water resources, the lack of drainage of stagnant water, and inadequate or non-existent use of mosquito nets (sometimes converted into fishing nets).

↪ What does your research work entail?

My work is about spatial modelling. It integrates diverse fields of study, encompassing data collection, organization, and interpretation. For this modelling, we first conducted a large-scale monitoring of flooded rice fields using a participatory mapping approach (17,000 rice fields, 20,000 km of footpaths, and 100,000 buildings). This enabled us to perform an integrated spatial analysis, which entailed cross-referencing environmental, demographic, socio-economic, and serological data to identify the factors associated with the emergence of infectious diseases.

The second phase involved the detection and modelling of vector habitats using satellite radar images. When combined with field data, this technology allows us to create detailed models of flooded areas conducive to mosquito breeding.



Fevers in rural Guinea: on the trail of zoonoses

In Guinea, as in much of West Africa, fever is one of the most common reasons people seek medical care. Malaria is often suspected, but it is not always the cause: bacterial, viral, or parasitic agents—sometimes zoonotic—frequently go undiagnosed.

The doctoral research of **Dr. Alpha Kabiné Keita**, a lecturer and researcher at the Gamal Abdel Nasser University of Conakry, is taking place in this context, under the co-supervision of Aix-Marseille University. His work focuses on the molecular screening of microorganisms responsible for febrile infectious diseases. He conducted a study involving 797 people across three rural districts—Boffa, Madina-Oula, and Kalinko—where farming communities live in close contact with animals under conditions that favour the transmission of zoonoses.

Preliminary results suggest that some fevers may be linked to pathogens circulating in domestic animals. Within the AfriCam framework, these findings will help guide diagnoses by healthcare workers and support the adaptation of local protocols. The collaboration with **CERFIG** and the One Health Platform will help strengthen integrated zoonosis surveillance and inform public health policy in Guinea.

SOUTHEAST ASIA

BRIDGING SCIENCE AND TRUST: A LONG-TERM FIELDWORK

Dr. Serge Morand is a researcher and professor at Kasetsart and Mahidol Universities in Bangkok. He is a Principal Investigator for the ASAMCO programme in Thailand and Laos, and an international coordinator for PEPR PREZODE. He is also a member of the One Health High-Level Expert Panel (OHHLEP). Interview.



📍 **Your career has taken you from ecology to virology, and from France to Southeast Asia. Can you trace that journey?**

My PhD was in ecology at the University of Rennes — an eclectic mix of parasitology, systematics, and modelling. Very quickly, one question drove me: why are there so many parasites on Earth, and how does this diversity affect the rest of the living world? A key turning point came through CIRAD, where I coordinated research on disease emergence. Working alongside a sociologist opened my eyes to the essential role of social sciences. Around 2007–2008, two landmark papers¹ identified Southeast Asia as the most critical region for biodiversity under threat and the number of zoonoses. That was my revelation. I have been based in Thailand ever since, affiliated with CNRS.

📍 **What does your research focus on, and how does One Health shape your approach?**

Rodents are my central model. They are the single largest source of zoonoses, well ahead of bats, and have lived alongside us for thousands of years. Over nearly 20 years, we have sampled 7,000 individuals from 40 species along the Mekong, identifying 500,000 different virus strains across 100 viral families. We have to distinct danger from risk. Risk combines danger, exposure, and vulnerability. Take leptospirosis: the same pathogen and the same rat species are present in both Paris and Manila, yet while there are annual outbreaks in Manila, there

are virtually none in Paris, because exposure and social resilience are entirely different. One Health, for me, means working at these interfaces — between ecosystems, wildlife, livestock, and communities.

📍 **What is your role in PREZODE?**

PREZODE is becoming genuinely important for capitalizing on decades of accumulated fieldwork. Its programmes create a framework for connecting research in a way no single programme could achieve alone. My role is to bridge these scientific communities and ensure that long-term fieldwork in Southeast Asia feeds into the broader international research agenda. I bring an expertise enriched by the confidence and trust I have built with local communities: like them, I know how to hunt and trap animals.

📍 **Can you describe the ASAMCO project in Thailand and Laos, and your collaboration with Dr. Soawapak Hinjoy?**

ASAMCO works across border provinces of Thailand and Laos — provinces that already had bilateral health agreements, a considerable asset. My collaboration with Dr. Soawapak Hinjoy, from Thailand's Department of Disease Control, has been decisive. She brings direct access to One Health coordination structures connecting the Ministries of Health, Agriculture, and Environment, and that institutional anchoring is what makes genuine prevention possible.

The first axe of the project, addresses wildlife trafficking and associated zoonotic risks. The second focuses on forest ecosystem interfaces: a striking contrast between ongoing deforestation in Laos and active reforestation in northern Thailand, where community-managed forests are allowing wild predators to return — which in turn reduces synanthropic rodent populations and transmission risk. The third axis follows domestic cattle, which cross the Thailand-Laos border freely during the rainy season. We are placing GPS collars on cattle, tracking tick-borne diseases, and mapping the entire value chain from field to slaughterhouse. The innovation will consist of supporting eco-pastoralism while improving livestock health.

COSTA RICA

BRINGING SCIENCE CLOSER TO THE REAL NEEDS OF THE PEOPLE

Launched in 2024, the ASAMCO project in Costa Rica operates in the Osa Peninsula — one of the most biodiverse regions in Mesoamerica. Dr. Andrea Chaves, an ecologist and researcher, at CENIBiot serves as the country's ASAMCO Project Coordinator. She shares insights into her work and the project's implementation.



Can you tell us about your background and activities?

I am a disease ecologist working within a One Health framework in the Mesoamerican region. I currently serve as a researcher and the director of the National Center for Biotechnological Innovations (CENIBiot) at the National High Technology Center in Costa Rica. I am also affiliated with the School of Biology of the University of Costa Rica.

Throughout my career, I have conducted research in Mexico, Guatemala, El Salvador, Nicaragua, and Costa Rica, studying the circulation of diverse infectious agents—including viruses, bacteria, and parasites—at the interface between wildlife, domestic animals, and human populations. Much of this work has focused on key species within tropical ecosystems.

Through my current activities, I promote interdisciplinary research that integrates molecular biology, environmental genomics, and disease ecology to strengthen surveillance of health risks and generate knowledge that contributes to prevention. A central component of my work is the development of participatory processes with local communities, particularly rural women, integrating scientific and local knowledge to build more inclusive and sustainable prevention strategies.

What are the context and challenges of the ASAMCO project in Costa Rica?

The ASAMCO project in Costa Rica is implemented in a context where land-

use change, the expansion of productive activities, and the transformation of natural landscapes may increase the risk of emerging zoonotic diseases.

The project focuses on the Osa Peninsula, one of the most biodiverse regions in Mesoamerica, where rural communities, productive systems, wildlife, and highly dynamic tropical ecosystems coexist. These interactions create complex conditions that require integrated approaches to better understand and prevent health risks.

ASAMCO combines ecological research, pathogen surveillance, biodiversity assessments, and analysis of socio-environmental factors.

One of its central aspects goes beyond merely generating scientific knowledge. ASAMCO also seeks to bring science closer to the real needs of the people in these territories. The project works directly with rural communities, including women leaders, farmers, and local organizations, promoting participatory processes that strengthen local capacities in health, environment, conservation, and risk prevention. These activities help build trust, integrate local knowledge, and develop solutions that are better adapted to the realities of the territory.

In this way, ASAMCO demonstrates how the One Health approach can be applied in real-world contexts, integrating science, communities, and ecosystems to advance more inclusive and sustainable prevention strategies.

How does PREZODE add value to Costa Rica's existing prevention efforts?

Costa Rica is a highly biodiverse country, internationally recognized for its conservation policies. However, it also faces increasing challenges associated with land-use change, the expansion of productive activities, and growing interactions among humans, domestic animals, and wildlife.

In this context, PREZODE provides an international framework that promotes scientific cooperation, knowledge exchange, and the development of tools to anticipate and prevent the emergence of zoonotic diseases.



From understanding to prevention: PEPR PREZODE's integrated research strategy

The French acronym PEPR stands for Programme et Équipements Prioritaires de Recherche — Priority Research Programme and Equipment. PEPR PREZODE is funded by the French government under the France 2030 programme to support innovative academic research focused on emerging or re-emerging zoonotic pathogens with pandemic potential, representing a threat to Europe and French territories.

Launched in March 2022 to build on lessons learned from the COVID-19 pandemic, the French Acceleration Strategy established two complementary PEPRs — both grounded in One Health — to understand the mechanisms of infectious disease emergence, develop prevention strategies, and prefigure innovative surveillance and diagnostic countermeasures, while systematically integrating social sciences and humanities. Both programmes are complementary, as they focus on different stages of the disease emergence continuum (**pre-spillover for PEPR PREZODE and post-spillover for PEPR MIE**).

PEPR PREZODE, carried out by IRD, INRAE, and CIRAD, and funded by France 2030 via ANR (the French national research agency), focuses specifically on the primary prevention of emerging or re-emerging zoonotic pathogens with pandemic potential (any pathogen that could emerge or re-emerge, including pathogen X), prior to spillover to humans. With a budget of €25

million over five years, 11 projects were selected from 45 eligible proposals, each granted between €1 and €3 million, spanning life sciences, public health, and social sciences, with strong community involvement. Eight institutions coordinate the selected projects: Institut Pasteur, Institut Pasteur Guyane, ANSES, INRAE, IRD, CNRS, Université des Antilles, and Université de Corse. In addition, the programme conducts a prospective study on the paradigm shift needed to move from responding to the emergence of pandemics to primary prevention actions, upstream of the emergence.

PEPR MIE (*Maladies Infectieuses Émergentes*), carried out and funded by ANRS MIE, with a provisional budget of €70 million, focuses on developing new tools for preventing and controlling infectious diseases (e.g., vaccines, diagnostics, therapeutics) that may emerge or re-emerge in human populations and on preparing for epidemic and sanitary crises (post-spillover).

THREE CALLS, THREE STRATEGIC PRIORITIES

PEPR PREZODE is organized around three successive calls for proposals (in 2023, 2024, and 2025), each addressing a distinct strategic priority. While selected projects were designed to align with the objectives of their respective calls, some naturally span multiple axes.

Understand Global changes, human practices, and mechanisms of emergence

- Axis 1. Characterisation of hosts, reservoirs, vectors, and their interactions in evolution, circulation, transmission, and emergence
- Axis 2. Sociological, economic, and environmental dimensions at the human–animal–environment interface
- Axis 3. Characterisation and quantification of cascading effects between human activities, global change, socio-economic dynamics, ecological community structuring, and risk of emergence

Development of strategies to reduce the risk of emergence

- Axis 1: Identify risk and resilience factors that can be targeted by prevention strategies
- Axis 2: Co-design prevention strategies and assess their epidemiological, sociological, cultural, and economic impacts
- Axis 3: Understand socio-cultural factors that may bias or hinder prevention strategies and assess their acceptability

Epidemiological surveillance and early warning systems

- Axis 1: Develop innovative methods for early detection of emerging threats
- Axis 2: Engage all stakeholders, ensure effective communication, and promote intersectoral collaboration within surveillance systems
- Axis 3: Improve dialogue between science, society, and public policy for surveillance



Collective effort, multistakeholder projects



The four PEPR coordinators. From left to right:
Dr. Andres Garchitonaera,
Dr. Christine Citti
Dr Manon Lounnas
Dr Thomas Balenghien

The 11 selected projects bring together teams from multiple institutions and are resolutely interdisciplinary — a collective intelligence that embodies the One Health philosophy in practice. This diversity of expertise allows each project to be driven with a wide-angle perspective, drawing on fields as varied as biology, virology, medical malacology, medical entomology, veterinary sciences, ecology, anthropology, data science, and modelling. Several projects also involve civil society participation (NGOs, local volunteers, etc.), reinforcing the connection between research and the communities directly affected by zoonotic risks.

List of projects selected by the programs and their leading research institutes:

1. **AMAZED:** AMAZonian Emergence Diseases (Institut Pasteur).
2. **ARCHE:** Assessing the Risk of Crimean-Congo Haemorrhagic fever Emergence in Southern France. (University of Corte).
3. **CARE:** Community Awareness and Response for Emerging zoonotic outbreaks (Institut Pasteur).
4. **CAVICOR:** From the cave to the villages: Understanding the circulation of coronaviruses infecting Cameroon's cave-dwelling bats and the risk of the emergence of new viruses in humans (IRD).
5. **HODAS:** Leveraging host population data for enhancing surveillance (INRAE).
6. **INSTEAD:** INnovative and integrated Strategies to EARly mitigate the risk of West Nile Virus and Usutu virus Diseases in France (ANSES).
7. **RATSWIM:** Rodent Assessment Through Sewers and Sewage Water Impact on Mammals Reservoir (Uni Lasalle).
8. **TALEDZ:** Typology of Antilles Livestock and Early Detection of Zoonoses (Université des Antilles).
9. **ZOOCAM:** Identification, characterization, and circulation of potentially zoonotic viruses in the Camargue (Rhône Delta) (CNRS).
10. **ZOOFU*:** Unlocking the emergence mechanisms of zoonotic highly pathogenic avian influenza viruses at the wildlife-domestic animal-human interface (INRAE).
11. **ZOLA:** Zoonotic risk mitigation in live animal markets, towards structural interventions (INRAE).

PEPR PREZODE also intends to take on a key thematic research area announced during the One Health Summit in 2026: Evaluating the added value of One Health prevention strategies through integrated approaches.

RETHINKING ZONOTIC RISK IN LIVE ANIMAL MARKETS

Live animal markets are well recognized hotspots for zoonotic disease emergence—environments where the density of animals, humans, and pathogens creates conditions favourable to viral transmission and spillover. Yet despite decades of interventions, from market closures and the modernization of meat processing to standardized hygiene protocols, risk mitigation efforts have achieved limited and uneven success.



Poultry market in South East Asia can be hotspots for avian flu spillover.

ZOLA is built on a critical insight: these failures stem not from a lack of technical solutions, but from an insufficient understanding of the local contexts in which stakeholders operate. The project's central hypothesis is that structures—social, economic, and institutional—must be understood and addressed for any intervention to succeed. Rather than transferring generic measures, ZOLA aims to co-create solutions tailored to each specific context, shifting the paradigm from individual behaviour change to systemic, structural transformation.

Study sites and teams

ZOLA works across four live animal markets in Bangladesh and Vietnam, two countries where avian influenza viruses circulate actively in market settings.

Methods

The project is structured around three interconnected work packages. The first characterizes epidemiologically relevant behaviours and their determinants through value chain mapping, ethnographic investigations, and in-depth analysis of roles, interactions, power relations, and

gender dynamics within markets. Customer preferences, capital structures, and policy frameworks are also examined to build a comprehensive picture of each market as a social and economic system.

The second work package assesses viral transmission dynamics through repeated sampling of chickens and ducks, with a focus on H5N1 and H9N2. Mechanistic modelling enables the estimation of key transmission parameters, the simulation of control scenarios, and the quantification of human exposure risks.

The third moves from diagnosis to action. Through system mapping, iterative co-construction with stakeholders, and experimental role-playing games, the team designs structural interventions that are feasible, sustainable, and locally owned—with implementation pathways led by the actors themselves.

Impact

In the short term, ZOLA aims to better inform stakeholders about zoonotic risks and co-construction approaches. In the medium term, field trials will test structural interventions and extend the methodology to other market contexts. The long-term ambition is sustained zoonotic risk mitigation—in the study countries and well beyond.

Led by Dr. Guillaume Fournié, the team project brings together eight research units combining expertise in epidemiology, veterinary science, ethnography, economics, participatory approaches, virology, and water management, from institutions including INRAE, CIRAD, IRD, VNUA, NIVR, CVASU, and BLRI—a genuinely international consortium built for interdisciplinary collaboration.

TRACKING BAT-BORNE VIRUSES

Dr. Ahidjo Ayouba is a researcher at IRD — initially a biologist, then an immunologist, and now a virologist. He began his career working on HIV and has never stopped: he continues to work on HIV alongside emerging infectious diseases such as Ebola and coronaviruses. For 20 years, he has studied what happens at the human–wildlife interface to understand the mechanisms driving disease emergence. He was part of the scientific team that investigated the zoonotic origin of HIV at the human–great ape interface and identified its four ancestors, all originating from southern Cameroon. *“What drives me is answering questions and solving problems in our societies”* — a motivation now being channelled into CAVICOR.

↘ A changing landscape, a growing risk

CAVICOR investigates how viruses carried by cave-dwelling bats spread to rural, peri-urban, and urban communities in a forested region of Cameroon. Over the past 15 years, this area has been profoundly transformed: an oil pipeline, a hydroelectric dam, and the expansion of agroforestry and oil palm plantations have reshaped interactions between humans, animals, and ecosystems. Combined with climate change and increasing population movements, these disruptions create conditions favourable to disease emergence. Moreover, the CAVICOR project will benefit from knowledge of the field gained through previous projects such as AfriCam, which was also supported by the PREZODE initiative through its PREACTS programme.

The study region harbours an extraordinary bat diversity — over 35 species identified in preliminary surveys. *“Every day, working with bats is still a wonder”, says Dr. Ahidjo Ayouba. “Of particular interest is the horseshoe bat — weighing no more than 20 grams — in which the team previously identified a sarbecovirus closely related to SARS-CoV and SARS-CoV-2. Coronaviruses will serve as key tracers throughout the project.”*

↘ An interdisciplinary team at the human–wildlife interface

What makes CAVICOR distinctive is the depth of its interdisciplinary approach. Virologists, ecologists, and biologists work alongside social scientists to build a comprehensive picture of viral transmission risks. On the biological side, the team samples ambient cave air to capture aerosolised viral particles, collects bat feces longitudinally to track seasonal variation, and GPS-tags captured bats to map their movements and contacts with human and animal populations. On the social science side, researchers conduct in-depth surveys with local communities — people who visit caves to catch bats or collect guano — to understand their

practices, proximity to potential pathogens, and perceptions of these animals. This human dimension is critical: serological analyses have already revealed traces of bat-borne viruses in nearby populations, confirming that exposure is not hypothetical but real and ongoing.

↘ Next steps

PEPR PREZODE funding provides critical long-term support. *“It allows us to work with PhD students whose entire thesis is dedicated to the project, plan ahead, and go deeper into our research”*. Beyond scientific challenges, the team also navigates a complex geopolitical context in the field.

CAVICOR involves researchers from 4 organizational units: IRD-TransVIHMI (Montpellier), CREMER (Yaoundé, Cameroon), Dynamicure - University of Caen-Normandie, and CIRI, VirPath (Lyon, France).

The CAVICOR project has identified 35 species of bats in preliminary surveys in the southern region of Cameroon.



ZOOCAM

UNDERSTANDING ZONOTIC RISKS IN THE CAMARGUE



Field sampling for freshwater biomonitoring within the ZOOCAM project.

The Camargue, a region of the Rhône Delta, is a hotspot for zoonotic disease emergence, where the combination of biodiversity, wildlife-livestock-human interactions, and environmental pressures creates ideal conditions for pathogens to emerge and spread. Addressing these risks requires a One Health approach; yet until recently, this

framework has been applied mainly in tropical and subtropical regions. ZOOCAM fills this gap by studying pathogens with zoonotic potential in this unique temperate environment, combining ecology, epidemiology, and social sciences. ZOOCAM involves nine partners, including CNRS, CIRAD, IRD, and IFREMER and relies on the contribution of volunteers who help the researchers collect samples in the field.

The ZOOCAM consortium brings together teams from several public and private research units and laboratories, including MIVEGEC, IHPE, ISEM, CEFE, SENS, MSH Sud, and La Tour du Valat. It also involves a wide range of partner organizations and institutions, including the University of Montpellier, Paul Valéry University Montpellier, and Aix-Marseille University; research institutes such as MIO and SoftMat; the Zones Ateliers Network; and several environmental management organizations, including the Camargue Regional Natural Park, the Syndicat Mixte de la Camargue Gardoise, the Scamandre Nature Reserve, the Camargue Biosphere Reserve, the Marais du Vigueirat and Meyranne reserves, SNPN, Domaine de la Palissade, the Pont de Gau Ornithological Park, and EID Méditerranée, among others.

AMAZED

WHEN THE FOREST BECOMES A RISK ZONE

Coordinated by **Dr. Jean-Bernard Duchemin**, the AMAZED project investigates the conditions and factors that could allow a pathogen to escape from the Amazonian forest of French Guiana—where viruses circulate but rarely spread beyond it.

At the heart of AMAZED is the study of arbovirus transmission by mosquito vectors: their ecological conditions, behaviours, and vector competence. If a pathogen does emerge from the forest, what are the risks of expansion, and through what mechanisms?

The project also has a strong human dimension. Researchers will quantify how often people come into contact with mosquitoes and viruses—through time spent in the forest for leisure, work, or illegal gold

mining. Social science field surveys are central to this approach, building on early results from a study on gold mining populations at the Cayenne hospital.

AMAZED brings together biologists, ecologists, and social scientists from Institut Pasteur, IRD, ANSES, and EHESP, working across French Guiana, Cameroon, New Caledonia, and Guadeloupe. “Accelerating research in these areas is vital, and the PEPR PREZODE programme itself seems very promising,” says Dr. Duchemin.

AMAZED brings together teams from Institut Pasteur and Pasteur Network IRD, ANSES, EHESP, CIRAD, IRD, and INRAE.

ASSESSING THE RISK OF A TICK-BORNE THREAT

Dr. Alessandra Falchi is an epidemiologist and associate professor at the University of Corsica Pascal Paoli and Aix-Marseille University, and deputy director of the Unité des Virus Émergents. She began her career in the Sentinelles surveillance network, tracking viral respiratory infections across Paris and Corsica—an experience that revealed the critical importance of bridges between healthcare professionals and researchers. A subsequent encounter with the Unité des Virus Émergents team proved decisive in discovering a scientific environment centred on zoonotic diseases. She obtained an Inserm Excellence Chair at the University of Corsica, focusing her research on vector-borne zoonotic diseases in both Europe and sub-Saharan Africa.

📌 A virus on the move

The ARCHE project focuses on the Crimean-Congo Haemorrhagic Fever virus (CCHFV), which is transmitted to humans and animals by ticks of the Hyalomma genus. Already active in Africa, Asia, and parts of Europe—including Spain since 2016—CCHFV has now been detected in France: infected ticks have been found in Corsica and the Pyrénées-Orientales, and seropositive animals identified, although no human cases have been reported yet. The study areas are Corsica and Occitanie, two regions where environmental and climatic conditions may favour tick expansion.

The project aims to identify the factors driving virus emergence and transmission risks, improve detection methods, estimate viral circulation, and model spatiotemporal transmission dynamics, one of the first major scientific challenges to tackle.

📌 A One Health Team Built for Complexity

What sets ARCHE apart is its commitment to co-constructing preventive actions directly with the communities concerned, using socio-ecological and participatory science approaches. One work package is

entirely dedicated to interactions with field actors: farmers, veterinarians, healthcare professionals, hunters, and more broadly the entire population of the affected zones. “We can co-construct and disseminate preventive actions with the communities concerned”, explains Alessandra Falchi. This participatory dimension is central: understanding the virus also means understanding the people who live alongside it.

PEPR PREZODE funding is decisive for two reasons, which she summarized: “It allows us to concentrate over five years on assessing the risk of emergence of tick-borne diseases. And it enables us to build a genuine network of researchers working on vector-borne disease emergence—a network that extends well beyond CCHFV to other vectors, including mosquitoes and sandflies, and to other diseases”.

The ARCHE consortium gathers teams from Università de Corsica, INSERM, IRD, CIRAD-ASTRE, INRAE, Bipar, UMR EPIA, iPLesp, CITIQUE, Interactions Arbres Microorganismes, AMU, LESC, Tour du Valat, UAB, SELMET, and ORS.

Linking the programmes

PEPR and PREACTS create links through data management, especially with the international data platform (see page 54), and through shared activities such as national and international events, webinars, and One Health advocacy via the PREZODE initiative. They also foster synergies between their projects and create a dynamic ecosystem of interdisciplinary research. For instance, CAVICOR (PEPR) and AfriCam Camroon (PREACTS), both led by Dr Ahidjo Ayouba, while different in scope, share a focus on understanding zoonotic risks and improving surveillance in the country, and mobilize some of the same teams and partners (see focus CAVICOR, p. 29). Similarly, ZOLA (PEPR) and ASEACA Asia (PREACTS, p. 20), as well as CARE (PEPR) and ASEACA Africa, while led by different researchers and consortia, share a common goal of reducing zoonotic risks in Southeast Asia and Austral Africa through improved knowledge and co-construction of solutions in close partnerships with local stakeholders (see focus ZOLA, p. 30).



INCLUSIVNESS

COLLABORATIVE NETWORK: LOCAL ROOTS, GLOBAL REACH

Infectious agents do not stop at borders. Zoonotic diseases—those transmitted from animals to humans—are by nature global threats. Reducing risks and preventing the emergence of diseases of animal origin require a collective, worldwide effort. PREZODE was designed precisely to build such a global community of practice (knowledge and action), bringing together research and academic institutes, universities, governments, decision-makers, civil society organizations, foundations, private companies, and other initiatives under a shared mission: preventing the next pandemic through One Health.



A global One Health community rooted in local Partnerships

Through its community of practice of 284 members, PREZODE strengthens coordination and synergies among stakeholders, facilitates the sharing of lessons learned and best practices, and integrates research, innovation, capacity building, and operational action.

As of 31 March 2026, the PREZODE community comprises over 284 signatory member institutions from 90 countries, mobilizing more than 1,500 experts, alongside major international organizations such as OMSA, FAO, WOAHA, and UNEP. Built from existing scientific networks of the founding institutions in just five years, this ever-growing community of practice constitutes a unique network that facilitates collaboration and coordination across institutions and sectors. It connects existing and emerging initiatives, projects, and programmes dedicated to promoting prevention action through a One Health approach. PREZODE's network is deliberately structured to operate across all levels—from local communities on the frontline of zoonotic risks to national health systems, regional One Health platforms, and international policy arenas. This multilevel architecture ensures that prevention strategies are informed by realities on the ground while contributing to global health security.

Multidisciplinary, inclusive, and prevention-focused

Across Southeast Asia, the Caribbean, Central Africa, and Latin America, PREZODE anchors its work in local realities, ensuring that global ambitions translate into concrete and meaningful action on the ground. The initiative's strength lies in its bottom-up approach: connecting grassroots knowledge and field experience with national, regional, and international governance mechanisms. Research activities focus on understanding the drivers of emergence which are closely linked to local contexts—including ecological balance and environmental degradation, land use changes, trade and mobility, and interactions at the human-animal-environment interface. Effective surveillance, monitoring, and prevention systems must therefore start and be supported at the local level, where risks emerge, before being integrated into broader national and global strategies.

Local communities, health professionals, researchers, and field practitioners are at the heart of prevention efforts. This bottom-



Sensitization workshop in Vietnam. Co-designing solutions adapted to local contexts are at the heart of PREZODE's approach.

up process is not only a guiding principle but also a strategic necessity. Sustainable prevention must be rooted in local realities, responsive to the needs and constraints of frontline actors, and capable of generating the long-term commitment required for global health security.

The initiative continues to grow through the ongoing enrolment of new members, further expanding and strengthening international cooperation. PREZODE members collaborate through joint research programmes, operational activities, and knowledge sharing activities, reinforcing synergies across the network and contributing to PREZODE's collective effort to prevent future pandemics.

32 country members.

PREZODE currently includes 32 Country Members. Belgium, Burkina Faso, Cambodia, Cameroon, Congo, Costa Rica, Chile, Cuba, Democratic Republic of Congo, Dominica, the Dominican Republic, El Salvador, Gabon, France, Guinea Conakry, Haiti, Laos, Libya, Madagascar, Mauritania, Mexico, Morocco, Panama, the Philippines, Senegal, Thailand, Trinidad and Tobago, United Kingdom, Uruguay, Vietnam, Zambia, and Zimbabwe.

The Initiative also includes two regional territories, Anguilla (United Kingdom) and St. Eustatius (the Netherlands).

Prevention is an act of responsibility: The making of a global One Health coalition

Dr. Jean-Luc Angot, former Special Envoy of the French Republic for PREZODE, Dr. Papa Seck, former President of the PREZODE General Assembly from 2023 to 2025, and Dr. Soawapak Hinjoy, current President, reflect on the building of PREZODE and the milestones they witnessed and shaped during their respective tenures. For all three, the defining achievement lies in the establishment of a truly effective and inclusive network — grounded in the One Health approach — that is capable of translating shared commitment into concrete action.

↘ **Jean-Luc, you were involved in the launch of PREZODE. What was your role in its early development?**

Jean-Luc Angot: Following the launch of PREZODE at the One Planet Summit in 2021, I was appointed Special Envoy by the President of the French Republic, with the mission to internationalize the initiative and secure political support from governments. The progressive involvement of countries made it possible to build appropriate governance and establish statutory bodies. Key early moments included meetings at the EU level and bilateral exchanges with ministries across different countries — most of which, given the COVID context, took place online, lending both accessibility and a sense of urgency to the process.

↘ **How did the initiative take shape and gain momentum in those first two years? What key moments stand out?**

Jean-Luc Angot: PREZODE was built through a series of co-creation workshops, working groups, and transdisciplinary meetings across the world, with a special emphasis on work conducted directly with local communities. It was initially grounded in international networks from its three founding French research organizations — INRAE, CIRAD, and IRD — and from the outset, local risk mapping and data exchange were central, because pathogens know no borders. A key achievement of those early years was a genuine shift in understanding: stakeholders began to recognize that investing in prevention is crucial from both a public health and an economic perspective.

↘ **Thailand joined PREZODE at an early stage. Can you give us the context?**

Soawapak Hinjoy: Thailand integrated One Health into its national institutions two decades ago and had long been engaged at the regional level. The COVID-19 pandemic reinforced our conviction that prevention is the most effective response to infectious disease threats — and PREZODE’s founding goals aligned directly with our national strategic priorities. The proposal was submitted at the highest level and received official endorsement from the Prime Minister.



“ PREZODE creates a forum for people from all sectors — including those whose voices are rarely heard — to work together toward a common goal. That is what makes it exceptional. ”

Dr. Soawapak Hinjoy,
current President of the General Assembly.

📌 **Senegal was one of the first countries to join PREZODE. Can you recall that journey?**

Papa Seck: Senegal established a national One Health platform in 2015 and engaged in the global health security agenda. For Senegal, joining PREZODE was an obvious choice. When Jean-Luc sent a letter co-signed with the French Ambassador, I engaged our government at the highest level, proposing endorsement by the Secretary General of the Government of Senegal, which was granted. Joining PREZODE was both a scientific opportunity and, from a diplomatic perspective, a meaningful step for our government. The time had come to move from One Health principles to concrete action.

📌 **What motivated you to stand for the Presidency of the General Assembly?**

Papa Seck: I was Advisor to the President of Senegal on global health security and One Health, and served as Senegal's PREZODE focal point from the very beginning. I participated in the early regional consultation workshops and was convinced from the outset of the network's value. I believe prevention is more cost-effective and sustainable than crisis response, and PREZODE gave real momentum to that conviction. When the call for candidacies opened in 2023, I felt the time was right to take on an international role.

Soawapak Hinjoy: The human and economic cost of COVID-19 reinforced my conviction that prevention is the best way to mitigate future crises. From a national perspective, Thailand has invested for decades in zoonotic disease programmes, progressively expanding from livestock to wildlife and environmental health — truly embracing One Health in practice. We had much to share and much to learn. I wanted to contribute to that virtuous circle of knowledge exchange across countries and networks.

📌 **In early 2026, PREZODE brings together nearly 280 members across 90 countries. How would you describe this growing community?**

Jean-Luc Angot: PREZODE is a strong example of collaboration between science and society — connecting policymakers, communities, research institutions, and the private sector. Research remains central to prevention, and PREZODE has created the conditions for that research to be grounded, connected, and impactful.

Papa Seck: PREZODE is not simply a network — it is a committed coalition of actors that share a common vision: to prevent the next pandemic before it starts. Its strength lies in

“ PREZODE has earned a seat at the table where decisions about global health security are made. ”

Dr. Papa Seck,
President of the General Assembly
from 2023 to 2025



its diversity — geographical, institutional, and disciplinary. What makes it truly unique is a culture of co-construction: solutions are built together, with communities at the centre. This reflects a shift from big concepts to concrete, local actions.

Soawapak Hinjoy: I fully agree. PREZODE takes One Health beyond a concept and into real practice. It brings together not only scientists and public health professionals, but also social scientists, anthropologists, communities, and practitioners from very different sectors. This is unique. Most networks I know remain pathogen-centric, focused on familiar technical disciplines. PREZODE creates a forum for people from all sectors — including those whose voices are rarely heard — to work together toward a common goal. That is what makes it exceptional.

📌 **Looking back, what were the most significant milestones and challenges of your tenure?**

Papa Seck: Several milestones stand out. First, our growing engagement in global health diplomacy — ensuring that prevention and One Health remained central in the negotiations around the WHO Pandemic Agreement and other high-level international forums. PREZODE earned a seat at the table where decisions about global health security are made.

Second, the expansion of membership to 280 members across 90 countries. What struck me most was not just the numbers, but the depth of engagement — countries making PREZODE their own. At regional One



Health meetings in South Africa, Zambia, and China, I witnessed first-hand the recognition that PREZODE has earned.

Third, the consolidation of its governance — bringing the General Assembly, the Secretariat, and the Steering Committee into genuine interaction.

Jean-Luc Angot: The most significant milestone was succeeding in shifting mindsets — moving from a state of reaction to one of prevention. Stakeholders have come to understand that investing in prevention is not only a health imperative but an economic one. Beyond zoonosis prevention, PREZODE has also opened the conversation around prevention within sustainable food systems more broadly.

What do you see as the main challenges and opportunities for PREZODE in 2026 and 2027?

Soawapak Hinjoy: PREZODE is now five years old. The challenge — and the opportunity — is to shift focus from growth to quality: not just how many members we have, but what value PREZODE is delivering to each of them. This is the moment to reflect on what we have learned, identify the gaps, and define a strategic vision for the next five years. At the same time, we must remember that pathogens are dynamic — they evolve, migrate, and circulate. Our response cannot be static. PREZODE's strength is that it looks beyond the pathogen to understand the root causes of emergence, tracing problems back to their source rather than managing them at the end of the chain. This upstream, systemic approach is what sets us apart — and it is what we must continue to deepen.

“PREZODE’s key achievement is a genuine shift in understanding: stakeholders have begun to recognize that investing in prevention is crucial, both from a public health and an economic perspective.”

Dr. Jean-Luc Angot,
former Special Envoy of the French Republic
for PREZODE

From left to right: Dr. Soawapak Hinjoy, Dr. Papa Seck, with Dr. Zeev Noga, former secretary general of PREZODE, during the 2024 General Assembly.





Voices from our members, partners and stakeholders

Behind the scientific framework and strategic agenda of PREZODE are the people who built it. We asked some of our members and partners to reflect on what the initiative brought to them, and on how this collaborative journey unfolded. Here is what they shared.

Dr. Magda Robalo, public health physician and infectious disease specialist, is the President and co-founder of the NGO Institute for Global Health and Development. In her testimony, she highlights PREZODE's regional collaboration and its impact at country and local level.



"The Initiative brings together a unique set of talented experts with diverse knowledge and experience, to advance the One Health agenda, prevent zoonotic diseases and contribute to averting the next pandemic. I discovered the Initiative through my advisory activities for the Paris Peace Forum in 2022. I supported the early stages of its development when the initiative was selected for the Scale Up program. It has been a great pleasure for me to work with the team to help PREZODE grow. The Institute for Global Health and Development became a member, and I myself joined the Steering Committee in 2023.

As a multistakeholder and transdisciplinary network, it established itself as a recognized player in the interface between the health, environment and animal ecosystems, to galvanize global and regional collaboration with country and local impact.

Since joining PREZODE, the Institute for Global Health and Development has expanded its ability to interact with, learn from and share best practices with a large spectrum of countries, from developed, emerging and developing economies, academic, government and research institutions, that enriched its capacity to

intervene locally and shape the frameworks that direct implementation and strengthen accountability. My re-election in 2025 allows me to continue providing support toward making the initiative greater."

Communities around the world will continue to benefit from a strengthened PREZODE, as we build the foundations for a livable planet where people have equitable access to our shared ecosystem resources and the next generation have a decent world to live in and enjoy from."

ANSES Interim general director Gilles Salvat and Christophe Cordevant, Senior scientific advisor for Emerging Infectious Diseases at ANSES, and former member of PREZODE's Steering Committee, reflect on the collaboration and co-construction process within PREZODE.

"ANSES, the French agency responsible for the safety of human, animal, and plant health within their ecosystems, has been present since the onset of the PREZODE initiative in 2021 and supportive of its founding partners. We have actively contributed to the strategic agenda co-constructed through a wide consultation process (workshops involving 128 countries) to prevent zoonotic and pandemic risks, and have served on its Steering Committee until the end of 2025.

We are also fully engaged at the level of the PEPR PREZODE, which, together with the PEPR MIE, forms one of the two pillars of the national Emerging Infectious Diseases strategy. This strategy covers the continuum from pre-emergence to the spread of pathogens, aiming at preventing future pandemics by studying their possible genesis within planetary ecosystems disrupted by human activities. The international and One Health dimension of PREZODE is essential to building a body of knowledge that will provide reliable data on the mechanisms of pathogen emergence and pandemisation, and more broadly on the factors that lastingly affect population health."



👤 **Dr. Hung Nguyen-Viet, Regional Director for Asia, International Livestock Research Institute (ILRI)**



"I had the pleasure of contributing to PREZODE efforts in both East Africa and Southeast Asia, where livestock systems, ecosystems, and livelihoods closely interact. These regions are also the hotspots of emerging infectious diseases and zoonotic diseases. Preventing the next pandemic requires a shift from reaction to prevention. PREZODE embodies this vision by placing science, collaboration, and early action at the center of global health security with a special focus on co-construction of strategies and solutions in preventing the emergence of diseases with stakeholders, notably with communities and governments. Through partnerships with governments, researchers, and communities, we are strengthening surveillance and understanding the drivers of zoonotic diseases. I am glad to see the Initiative quickly became a global platform, though initiated by France, to connect science and policy, helping build resilient food systems and reduce pandemic risks. This aligns very much with the One Health approach work that my institutions, ILRI and CGIAR, pursue in the Global South.

👤 **Jeff Acaba, Programme Manager, APCASO.**

"APCASO is an Asia-Pacific regional civil society network organisation working on health, social justice, and human rights. We met PREZODE as part of our ongoing pandemic prevention, preparedness, and response work, particularly in building and strengthening the capacities of civil society organisations and community-led organisations in this field. We believe the importance of pandemic prevention as a crucial yet often neglected component of pandemic work; with PREZODE, our awareness and capacity in engaging in pandemic prevention through One Health have expanded. Being a member of PREZODE has enabled us to facilitate the integration of One Health within PPPR, as well as within TB, HIV, and malaria responses, both at the regional and national levels. We look forward to our continued partnership!"

👤 **Dr. Rico Ancog, Professor at the School of Environmental Science and Management, University of the Philippines Los Baños, and Deputy Director for Administration at SEAMEO**



"As an academic actively engaged with PREZODE in the Philippines, I have witnessed how collective intelligence and collaboration can transform the way we address emerging infectious diseases. PREZODE's strength lies in its ability to connect local realities with global expertise, ensuring that prevention strategies are both scientifically sound and socially inclusive.

In the Philippines, PREZODE has provided a platform to integrate research with community perspectives, particularly those of farmers and rural households who are most vulnerable to zoonotic risks. This participatory approach reflects PREZODE's values—prevention through partnership, resilience through inclusivity, and innovation through shared responsibility.

For academics, PREZODE is more than a research initiative; it is a movement that empowers us to translate evidence into policy and practice. It strengthens the science-policy interface and builds capacity for long-term resilience. As the world convenes at the One Health Summit, I am proud to stand with PREZODE in demonstrating that solidarity and co-creation are our best defenses against future pandemics."

👤 **Dr. Cécile Aenishaenslin, Associate Professor Faculty of Veterinary Medicine, Université de Montréal**

"PREZODE offers researchers and academic and non-academic institutions around the world an opportunity to come together and reflect on the future of One Health at various levels. This initiative allows me to stay connected with my colleagues in Europe and elsewhere, and to stay informed about recent developments and ongoing projects related to the global implementation of One Health."

Dr. Chadia Wannous, Head of One Health and Global Framework Department at WOAH



“As a representative of WOAH engaged with PREZODE, I have seen how this initiative brings together diverse partners around a shared One Health vision to help prevent future pandemics. Our co-led working group strengthens the OH science–policy interface and supports translation of knowledge into informed decision-making. Through collaboration, knowledge sharing, and collective action, we enhance capacity to detect, reduce the risk of, and prevent zoonotic diseases at their source to build a safer and more resilient future together.”

Dr. Kohei Makita, Head, the WOAH-Collaborating Centre on Food Safety at Rakuno Gakuen University



“Guided by its founding principles of sustainable agriculture and One Health, as expressed in Three Loves and Healthy Soil makes Healthy People, Rakuno Gakuen University recognizes that membership in PREZODE can significantly enhance the networking and collaborative opportunities available to our One Health research community at the regional and international level.»



IN VIETNAM, A MODEL FOR MULTISECTORAL COORDINATION

Vietnam joined PREZODE through its One Health platform, supported by the ASEACA project. Phuong Vu, Vietnam’s National Coordinator for One Health Partnerships, shares her perspective.

“A multisectoral and multi-stakeholder coordination mechanism, Vietnam’s One Health platform bridges the human health, animal health, agriculture, and environment sectors—without creating any new administrative structures. It operates through a formal agreement between ministries and development partners, serving as a neutral space for dialogue, coordination, and priority-setting. Its governance is participatory, and its operational backbone is an annual high-level One Health Forum. The platform plays a central role in coordinating One Health initiatives. Between

2021 and 2025, more than 100 initiatives and projects were mobilized and coordinated through it, strengthening the effectiveness and sustainability of actions on the ground. Civil society organizations are full partners of the platform, contributing through technical working groups, field data sharing, and scientific knowledge. Beyond advocacy, they play a key role in on-the-ground implementation, particularly in community-based surveillance and early warning, risk communication, behaviour change, wildlife conservation, animal welfare, and environmental protection.”



PREZODE'S regional and national engagement

At the regional and national level, PREZODE representatives initiate or build on existing research and action networks—such as the PREZODE community in the Pacific—organize scientific and science-decision meetings, and participate in thematic events. This engagement at the local level is PREZODE's strength and reflects our broader commitment to fostering science-society-policy dialogue and co-designing solutions from the ground up. The texts below illustrate some of these actions.



Beach of Vanuatu, one the 27 countries of SPC

PREZODE OHANA: A ONE HEALTH COMMUNITY IN OCEANIA AND THE PACIFIC

The PREZODE One Health Action in the Pacific (OHANA) aims to co-create with Pacific nations a shared impact framework for One Health research, rooted in the needs and priorities of the region, in close partnership with the South Pacific Community (SPC), the principal scientific and technical intergovernmental organization supporting development across the Pacific.

On 22–25 February 2026, OHANA held its first in-person workshop in Suva, Fiji, marking the official launch of the PREZODE regional hub. Government representatives in Animal and Public Health from six Pacific Island Countries and Territories—Fiji, French Polynesia, New Caledonia, Samoa, Tonga, and Vanuatu—gathered to map current One Health activities using the PREZODE One

Health Initiatives Platform and to co-create a shared long-term vision, identifying key actors and main barriers.

In early 2026, SPC and PREZODE signed a Memorandum of Understanding, formally establishing a framework for joint action across the 27 member states, covering collaborative research, infectious disease surveillance, pandemic preparedness, capacity building, knowledge exchange, and policy development. OHANA's objectives align with the SPC Strategic Plan 2022–2031 and the Blue Pacific 2050 framework.

OHANA is facilitated through the *Connecting Pacific Nations Towards the Development of One Health Impact Frameworks* project, led by the University of Queensland and funded by the French Embassy in Australia, under the leadership of **Professor Ricardo J. Soares Magalhães** (PREZODE Steering Committee co-chair) and **Dr. Léa Indjein**, and supported by **Dr. Flavie Goutard**, PREZODE regional focal point in South East Asia. The initiative was first presented to member state representatives at the Pacific Heads of Veterinary and Animal Production Services (PHOVAPS) Meeting in Noumea, New Caledonia, in November 2025.



Workshop of OHANA in February, conducted here by Dr. Léa Indjein (University of Queensland)

THE BELGIAN PREZODE GROUP

Belgian members of PREZODE hold regular working group sessions. Their recommendations, will be detailed in a national roadmap.

Created in 2021, the Belgian PREZODE working group brings together some 30 experts to assess how Belgium can better prevent zoonotic risks at their source. In 2023, the group worked on policy recommendations to guide action on pandemic risk reduction. A 2025 memorandum presents their recommendations across six priority areas: international movements, outdoor and recreational activities, animal handling, farming, land-use change, and international policy. The memorandum was presented at a workshop in June 2025 and shared with regional and federal ministers. The ministers endorsed these proposals and asked the working group to define detailed priority actions for a national roadmap.

The task is complex: it involves multiple pathogen types and requires aligning diverse fields of expertise and understanding within a shared framework, all within a federal state where authority is divided between federal and regional governments. Beyond scientific knowledge, the work must also integrate social sciences. The group has therefore decided to adopt a systemic, non-pathogen specific approach—except in the case of highly pathogenic avian influenza, for which targeted biosafety measures will be developed. **Maud Istasse**, chair of the Group emphasizes: *“Zoonotic risks and their drivers need to be better integrated into societal decisions, as they directly influence population well-being. Our goal is to pinpoint the highest-risk systemic choices and identify sustainable ways to reduce them.”*

➔ Assessing the drivers and factors

In 2026, the group will focus on three overarching systems that shape society, examining how policies on land use, trade and food/animal flows, and international policy may drive change and influence zoonotic risks. A policy assessment based on three axes—science, law and communication—will refine the 2025 recommendations to ensure their effective and realistic integration into sectoral policies through the roadmap. *“In view of the complex Belgian governance structure, collaborative efforts are key to reach our goals. Thanks to the experts from different fields and sectors involved in this exercise, we’re making steady progress,”* says **Dr. Dominique Vandekerchove**, One Health coordinator at Sciensano and the Belgian Biodiversity Platform. **Prof. An Martel**, from



Dr. Dominique Vandekerchove, One Health coordinator at Sciensano and the Belgian Biodiversity Platform, and Prof. Dr. Dirk Ramaekers, Président du Comité de direction SPF Santé publique, Sécurité de la Chaîne alimentaire et Environnement, during the PREZODE group workshop in June 2025.

University of Ghent, echoes: *“Chairing the animal handling theme within the Belgian PREZODE working group was a demanding yet rewarding process that highlighted the importance of integrating diverse scientific disciplines and policy perspectives to develop systemic, realistic strategies for preventing zoonotic risks in Belgium”.*

Prof. Nicolas-Antoine Moussiaux, from the University of Liège underlines that *“Belgium can play an important role by mobilizing its diplomatic missions and key partners to weave collaborations between sectors and across society around One Health and enable the deep prevention of zoonotic emergence, including through high-integrity ecosystems conservation”.* An ambition shared by **Arnaud Goessens**, director of policy and external affairs at Wildlife Conservation Society EU Office: *“Shaping robust and effective European and international policy on One Health and pandemic prevention at the source is key to safeguarding long-term global health security—and building a safer, more resilient future for all.”*



GLOBAL EFFORTS WITH BANGLADESHI ORGANIZATIONS

In 2025, several Bangladeshi institutions formally joined the PREZODE initiative, reinforcing the country's engagement in global efforts to prevent zoonotic disease emergence and strengthen One Health systems.

Over several months, these actors* gathered in weekly coordination meetings facilitated by PREZODE to jointly develop the Initiative Pandemic Fund proposal ENGAGE.

Dr. Nitish Debnath, National Coordinator of One Health Bangladesh and member of the PREZODE Steering Committee, emphasizes: *“Bangladesh contributes to PREZODE’s co-design process of bringing together scientists, policy makers and field actors to jointly identify needs, set priorities and translate them into operational pathways. This approach of designing prevention strategies is not only a theory of change but also used in jointly developing the Pandemic Fund proposal ENGAGE”*. The proposal, led by the PREZODE Secretariat and submitted in June 2025, aimed to align Bangladesh’s national priorities with the objectives of the Pandemic Fund. It focused on strengthening One Health systems—particularly surveillance and early warning mechanisms—while enhancing community-based detection capacities, stakeholder engagement, and governance frameworks to prevent and reduce epidemic risks. **Dr. Rafi Abul Hasnath Siddique**, Deputy Director of Health at Friendship NGO, acknowledges this effort: *“We thank the PREZODE initiative and our Bangladeshi partners for their support and engagement in strengthening community capacity to prevent epidemic risks. Local*

knowledge and practices must be recognized and scaled up, as communities are often the first to detect emerging threats and play a vital role in preventing and responding to zoonotic diseases”.

Although the proposal was ultimately not selected for funding, the coordination process itself generated significant and lasting outcomes. Most notably, the structured dialogue facilitated by PREZODE directly contributed to the organization of the Bangladesh preparatory conference for the One Sustainable Health for All Forum, held ahead of the global meeting in Lyon in November 2025. The International OSH Preparatory Conference – Bangladesh brought together 32 participants and was organized by Friendship as a direct continuation of the multi-stakeholder discussions initiated under the PREZODE Pandemic Fund process.

The workshop focused on four strategic priority areas: 1) integrating One Health into national systems; 2) strengthening NGO engagement in the One Health movement; 3) reinforcing multi-sectoral collaboration; and 4) addressing climate-linked health challenges. *“This engagement has come to stay for the future for strengthening the ongoing One Health movement in Bangladesh”*, concludes Dr. Nitish Debnath.

GROWING CONNECTIONS WITH OUR MEMBERS IN INDIA

From its first scientific meeting in New Delhi to joint funding proposals bringing together leading institutions from India and France, PREZODE has been actively deepening its engagement with its members in India.

On 28 November 2024 in New Delhi, PREZODE held its first scientific meeting with members in India. **Dr. Elsa Léger**, Global Science Officer, and former General Secretary **Zeev Noga**, participated in roundtable discussions focusing on region-specific challenges. Synergies were identified with the **National One Health Mission in India** regarding approaches for early detection of Disease X and the need for refining early-warning surveillance systems and developing infrastructure and intersectoral collaboration. The participants highlighted the necessity to address wildlife health and risks of spillover, strengthen biosecurity, but also to better engage communities through education, training, and capacity building. This meeting provided an opportunity to explore the involvement of Indian members to PREZODE's missions and activities.

📌 Involvement in PREZODE activities

Building on these discussions, the **Centre for One Health Education, Research & Development, Indian Institute of Public Health (IIPH), Gandhinagar, India**, provided inputs on the inter-country activities of our Pandemic Fund proposal ENGAGE.

Dr. Sandul Yasobant from the COHERD-IIPHG participated in the PREZODE webinar on equity and inclusivity and is involved in the PREZODE Equity Group established after this webinar. *"Collaborating with global*

experts through PREZODE has reinforced a key lesson: preventing zoonotic spillovers is not only a scientific challenge but also a shared responsibility built on collaboration, inclusiveness, and strong One Health systems. We at COHERD-IIPHG look forward to continued collaboration with PREZODE in building a sustainable global One Health community for preventing future pandemics" emphasizes **Yasobant**.

📌 Coordinated and collaborative proposal

In early 2025, PREZODE facilitated a response to the **CEFIPRA** (Indo-French Centre for the Promotion of Advanced Research) High Impact Scientific Research Network call on One Health. The proposal entitled *"Establishing a knowledge network for surveillance, detection and prevention of emerging and neglected pathogens"* gathered institutions from India and France*. This collaboration highlighted the role of PREZODE in coordinating responses and leverage for funding opportunities.

Dr. Ishan Raval, from the Gujarat Biotechnology Research Centre, Department of Science and Technology, concludes: *"We sincerely appreciated the outstanding support and coordination from PREZODE during our meetings and proposal submission. The expert guidance was instrumental in shaping and successfully submitting our collaborative proposal"*.

FOCUS ON THE CAMEROON ONE HEALTH PLATFORM

In Cameroon, the need to better connect research, policy and communities in the prevention of zoonotic diseases has long been recognized. The Zoonotic Disease Program/One Health Platform was, therefore, the perfect stakeholder to collaborate with AfriCam in the country from the start. **Elisabeth Dibongo**, who served as the national focal point for the Platform remembers: *"When I first learned about the AfriCam/PREACTS project, what immediately stood out to me was the potential I saw in the initiative to connect scientific knowledge with decision-making and societal action. For many years, one of the major limitations of zoonotic disease prevention efforts in Cameroon has been the insufficient integration of research into public health strategies and decision-making processes. In that sense, the project represented a real opportunity to address a gap that had been recognized for years.*

A particularly significant moment was the launch of the AfriCam project. It brought together researchers, public health and veterinary experts, environmental specialists, policymakers, and representatives of civil society around a shared objective: better understanding health risks at the human - animal - environment interface. This moment clearly illustrated the essence of the One Health approach - not only producing knowledge, but ensuring that it is shared, discussed, and translated into action."

Since then, the project has contributed to strengthening capacities in surveillance, supporting doctoral research, and launching a One Health Master's programme at the University of Dschang. Just as importantly, it has helped create spaces for dialogue where scientific results can inform policies and where communities are recognized as key actors in prevention.



Standing for a permanent dialogue between Science, Society and Policy

From its inception, PREZODE has been driven by the conviction that science alone cannot prevent the next pandemic. Scientific knowledge must be heard clearly in policy arenas and translated into concrete action. Prevention requires sustained dialogue between researchers, policymakers, civil society, and local communities, supported by adequate investment. PREZODE was therefore designed to strengthen the role of science in decision-making, with research programmes that prioritize dialogue and the co-design of solutions with local authorities and communities.

The Science-Society-Policy dialogue is embedded in PREZODE's identity and is a crucial component of the One Health approach. Through numerous open letters, op-eds, roundtables, article and international forums, PREZODE has consistently championed this vision, urging governments and donors to back their words with concrete commitments. These were also reflected in and built on the discussions and outputs of webinars and pillar working groups organized by the initiative.

Follow the science

In November 2023, the initiative co-authored an open letter, **"To Prevent the Next Pandemic, Follow the Science"**, published on Project Syndicate and timed to coincide with the Paris Peace Forum. The letter outlined a sweeping vision for embedding scientific evidence into pandemic governance, noting: *"Science is crucial to improving pandemic preparedness and prevention. It not only deepens our understanding of pathogen transmission and containment but also provides us with the flexibility required to adapt to changing circumstances."* Co-authored by **Marisa Peyre** from the PREZODE consortium, **Justin Vaïsse** of the Paris Peace Forum, and **Peter Sands** of the Global Fund, it was signed by high-level international scientists, decision-makers, civil society organizations, private actors, and international donors.

The letter argued that while COVID-19 demonstrated the indispensable role of science-based decision-making, it also revealed the structural gaps between scientific knowledge and policy action. Its signatories called for the creation of interdisciplinary One Health committees at the national level, bringing together scientists from multiple disciplines, policymakers, and stakeholders to analyze evidence and guide decisions. They also called for country-level mechanisms to facilitate regular dialogue

among scientists, decision-makers, and the public. Crucially, the letter identified long-term, flexible funding as an essential precondition—investment in research, surveillance, and prevention had to be sustained over time rather than limited to crisis moments.

The Paris Peace Forum: a dedicated arena for science-policy convergence

Since its start, PREZODE has viewed high-level conferences like the Paris Peace Forum not merely as speaking opportunities, but as levers for change. By the 2023 Forum, PREZODE had progressed from participant to convener. Its proposed roundtable, **"From Science to Policy: How to Inform Decision-Making on Pandemic Prevention, Preparedness, and Response?"**, sought to bring government ministers, donors, scientists, and civil society organizations into direct conversation in order to produce actionable recommendations—a tribune in international newspapers, a policy brief, and a statement to be integrated into the negotiations on the Pandemic Agreement. This reflects PREZODE's model, namely using the convening power of prestigious forums to move Science-Society-Policy dialogue from aspiration to concrete outcomes.

The investment imperative: Prevention costs a hundred times less than response

Running through every PREZODE statement is an economic argument as much as a scientific one. In brief, prevention is not only the right approach, but also the rational one. According to research cited repeatedly in the initiatives' publications, investing in prevention strategies costs at least one hundred times less than the losses caused by a pandemic. COVID-19 alone resulted in cumulative global production losses estimated at over US\$ 13 trillion.

In June 2023, PREZODE published a tribune in *Le Monde*—timed to coincide with the Summit for a New Global Financial Pact in

Paris—making precisely this case. The text underscored that to prevent another COVID-19-scale event, research and development funding must be embedded in a holistic, intersectoral approach aligned with the Sustainable Development Goals and closely connected to climate action. It called for better coordination among international donors, greater flexibility in funding mechanisms, and a fundamental shift in awareness.

📌 **Pandemic Agreement: Prevention and One Health must not be left behind**

In April 2025, the initiative joined researchers, policymakers, and civil society organizations in a call published in *Le Monde*, arguing that the agreement must make prevention a concrete priority. The call emphasized that although the costs of One Health prevention measures are minuscule compared to the economic impact of pandemics, funding for prevention remained fragmented, siloed, and entirely disproportionate to the scale of the risk.

The signatories, including the CEOs of **CIRAD, INRAE, and IRD**, as well as the co-chair of **IPBES** and leaders from the **Wildlife Conservation Society, World Animal Protection, and Johns Hopkins**, called on member states to conclude the negotiations at the World Health Assembly in May 2025 with what they described as potentially the first internationally binding agreement grounded in the One Health approach. They also demanded sustainable funding, particularly for low-income countries, and called for decisions to be based on robust, up-to-date scientific evidence. Prevention, the signatories argued, is not a luxury or an optional extra—it is a cornerstone of equity and global health security.

📌 **PREZODE-WOAH Expert Working Group on science-society-policy dialogue**

To further operationalize this dialogue, PREZODE and the World Organisation for Animal Health (WOAH) established a joint expert working group dedicated to strengthening science-society-policy interfaces within the One Health framework. The group brings together scientists, policymakers, and practitioners to identify practical mechanisms for translating scientific knowledge into policy and field action, particularly in the areas of zoonotic disease prevention, surveillance, and risk management. By connecting research communities with veterinary authorities and decision-makers, the working group contributes to bridging the gap between evidence generation and implementation. It also provides recommendations to support countries and international organizations in building inclusive and effective science-



policy dialogue mechanisms aligned with One Health principles.

Science without dialogue is not enough; dialogue without action is impossible. PREZODE is committed to advancing both.

📌 **The local dimension of dialogue**

PREZODE's vision of science-society-policy dialogue is not limited to the corridors of international summits. At COP28, PREZODE co-organized a ministerial roundtable with Unitaid and the Global Fund to emphasize the critical importance of community engagement in this dialogue to prevent health and climate change risks. Communities are the heart of any health system, and a better understanding of local constraints is key to informing policy, ensuring adoption, and creating trust. The principle of thinking local and acting globally runs throughout the initiative's approach: local actions have ripple effects across borders, but their impact is felt most deeply at the community level.

Under PREACTS program, specific pilot activities are being carried out: AfriCam project, in collaboration with **Gaston Berger University (UGB)** in Saint-Louis, Senegal, supports the revitalization of inter-village committees (**CIV**) within the **Djoudj National Bird Park (PNOD)** as a way to improve the dialogue between PNOD authorities, surrounding communities and scientists involved in this area. This CIV will serve as a local platform to take collective actions on health issues affecting humans, animals and the environment in this fragile socio-ecological system.

Across all actions, publications, statements and forums, PREZODE has articulated a consistent position: that preventing the next pandemic demands not only scientific knowledge, but the institutional structures, public dialogue, and sustained financial investment to translate that knowledge into action.



PREZODE on the world stage: international recognition through high-level engagement

Since its launch in 2021 during the One Health Summit, PREZODE has rapidly become a leading voice in pandemic prevention and One Health at the highest levels. The breadth and prestige of the international forums linked to global health, climate, and biodiversity, where PREZODE has been invited to speak, reflect both the significance of its mission and the global community's trust in its scientific and operational expertise.



↘ A Strong presence within the One Planet Summit process

PREZODE has maintained close ties with the One Planet Summit process since its inception. The initiative was officially launched by French President Emmanuel Macron at the One Planet Summit for Biodiversity in January 2021, with the support of the European Commission and the Quadripartite organizations (FAO, WHO, WOA, and UNEP).

In March 2023, PREZODE was invited to lead a session at the One Forest Summit in Libreville, Gabon. The event provided an opportunity to present progress achieved by the initiative and to highlight the links between sustainable forest and ecosystem management and the prevention of emerging zoonotic diseases through the One Health approach, in the context of the implementation of the Kunming-Montreal Global Biodiversity Framework adopted at COP15. On this occasion, PREZODE joined scientists, NGO leaders, and artists in co-signing an op-ed published in *Le Monde* calling for stronger global action to protect forests.

In 2026, PREZODE returned to the One Planet Summit series for an edition dedicated to One Health, reflecting growing international recognition of the need to integrate ecosystem protection, climate action, and pandemic prevention. This participation provided an opportunity to showcase the progress achieved by the initiative and contribute to shaping the next phase of international cooperation on prevention.



↘ Integrating zoonosis prevention and one health into the COP climate-health agenda

Preventing the emergence of zoonotic diseases requires action across multiple sectors, including health, agriculture, biodiversity, and climate. Climate change and ecosystem

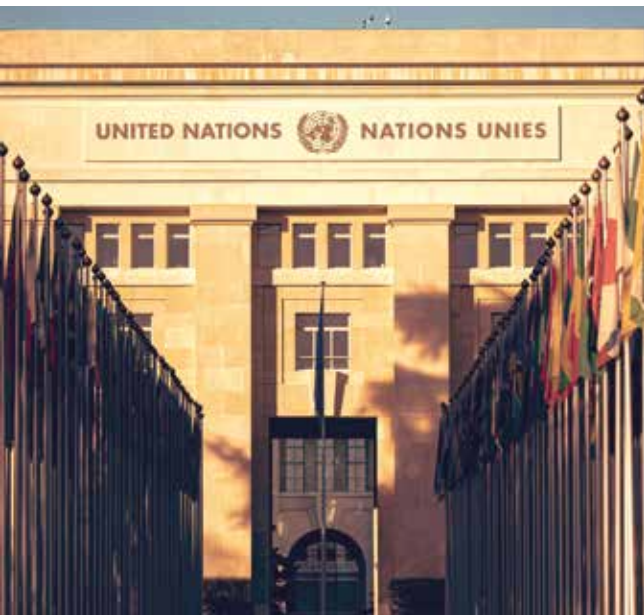
degradation are increasingly recognized as major drivers of emerging infectious diseases. In this context, PREZODE has strengthened its engagement in major multilateral forums, particularly the Conferences of the Parties (COPs) to the United Nations Framework Convention on Climate Change (UNFCCC) and the Convention on Biological Diversity (CBD). Since 2022, PREZODE has been present at several UN Climate Change COPs.

At COP27 (Sharm el-Sheikh, 2022), PREZODE organized a roundtable chaired by **Dr. Jean-François Soussana** (INRAE) that brought together scientists and policymakers to discuss the links between climate change drivers and zoonotic disease emergence, and to explore prevention strategies based on the One Health approach.

At COP28 (Dubai, 2023), PREZODE co-organized a high-level roundtable with Unitaid and the Global Fund. The event gathered national ministers, including France's Minister Delegate for Health and Malawi's Minister of Health, alongside representatives of major global health organizations such as WHO, FAO, PATH, and the UK's Director of Global Health. Discussions highlighted the importance of community-based surveillance and resilient One Health systems in addressing the combined challenges of climate change and emerging diseases.

PREZODE continued its involvement at COP30 (Belém, 2025), where it was represented at the French Pavilion **Dr. Papa Seck**, then President of the PREZODE General Assembly, delivered a keynote address on the food systems–health–climate nexus, highlighting PREZODE's operational work in Africa and Asia.

In parallel, PREZODE contributes to discussions under the Convention on Biological Diversity, supporting the integration of health considerations into biodiversity policies and the implementation of the Kunming-Montreal Global Biodiversity



Framework. These engagements reinforce the role of ecosystem protection and biodiversity conservation as key components of pandemic prevention.

World Health Assembly: Shaping global health policy

PREZODE has been actively engaged in the World Health Assembly (WHA), the governing body of the World Health Organization and the leading global forum for global health governance.

At the 76th WHA in Geneva (May 2023), PREZODE hosted an official side event titled “How to Reinforce One Health Prevention Mechanisms to Tackle Zoonotic Disease Emergence”, co-sponsored by France, Laos, and Madagascar. The event brought together government ministers, policymakers, and scientists to discuss practical approaches for strengthening primary prevention of zoonotic disease emergence through the One Health approach.

PREZODE continued its engagement at the 2024 WHA, contributing to discussions on pandemic prevention and preparedness. During the Assembly, the initiative presented the results of a major global survey on the institutionalization and operationalization of One Health across WHO Member States, providing evidence on existing capacities and remaining gaps.

Through these contributions and its broader engagement with Member States and international partners, PREZODE helped reinforce the importance of primary prevention and the One Health approach in the negotiations of the WHO Pandemic Agreement. These principles were ultimately reflected in the Pandemic Agreement adopted in May 2025, marking a significant

step toward integrating the prevention of zoonotic spillovers into global health governance.

World Health Summit, Berlin: From dialogue to prevention action

The World Health Summit (WHS) is a leading global platform that brings together science, policymaking, civil society, and the private sector to advance solutions to major global health challenges. PREZODE has been actively engaged since its launch in the Summit’s discussions on pandemic prevention and the operationalization of the One Health approach.

PREZODE’s engagement began early in the initiative’s development. In 2021, PREZODE was invited to contribute to a World Health Summit expert panel on pandemic prevention co-organized by the German Federal Ministry for Economic Cooperation and Development (BMZ), which highlighted the role of One Health approaches in addressing the drivers of zoonotic disease emergence.

At the 2022 World Health Summit, PREZODE organized a side event on “Lessons Learned from COVID-19: Preventing Zoonotic Disease Emergence.” The discussion brought together experts from the International Atomic Energy Agency (IAEA), the Lancet One Health Commission, the Pandemics Prevention Institute, and members of the One Health High-Level Expert Panel (OHHLEP) to examine lessons from the pandemic and identify priorities for strengthening prevention.

PREZODE returned to the 2025 World Health Summit with two major contributions. In partnership with FOUR PAWS, the German Ministry of Health and the German Interministerial Network for One Health,

Panelists of the high-level talk: “Beyond Symptom Control: One Health and the Transformation of Global Health Governance” at the 2025 World Health Summit in Berlin. From left to right, Wanda Markotter (OHHLEP and University of Pretoria), Unid, Marisa Peyre (PREZODE), Anne-Claire Amprou (French Ambassador for Global Health), Helen Clark (The Independent Panel for Pandemic Preparedness and Response, Former Prime Minister of New Zealand), Luciana D’Abramo (FOUR PAWS) Bjoern Kuemmel, (Federal Ministry of Health, Germany), Ethel Maciel (Ministry of Health, Brazil), Unid, Christian Drosten (Charité – Universitätsmedizin Berlin) and Nina Jamal (FOUR PAWS).

the initiative co-hosted a high-level panel titled “Beyond Symptom Control: One Health and the Transformation of Global Health Governance”. The discussion highlighted the need to move beyond reactive responses to pandemics and invest in upstream prevention strategies that address the environmental and socio-economic drivers of disease emergence. In addition, PREZODE co-organized a workshop designed to facilitate direct exchanges between scientists and operational actors on key implementation challenges, including surveillance systems, data sharing, and stakeholder engagement. Both events led to a correspondence published in *Nature* calling for stronger integration of prevention and One Health approaches in global health governance. Together, these engagements have helped position PREZODE as a key actor to international dialogue on operationalizing One Health prevention and translating scientific evidence into global health policy discussions.



📌 The Paris Peace Forum: Advancing science-based pandemic prevention

PREZODE has been actively engaged with the Paris Peace Forum, a leading international platform dedicated to strengthening multilateral cooperation and global governance. Participation in the Forum follows a competitive call for projects, through which PREZODE was selected to present its work on pandemic prevention and the One Health approach.

In November 2022, PREZODE was also chosen among ten initiatives worldwide for the Paris Peace Forum’s Scale-Up Program, which supports high-impact projects with strong potential to influence international policy and practice. During the Forum, France’s Minister of Higher Education and Research represented the initiative in

“Taken together, engagements in high-level events reflect PREZODE’s unique standing as a scientifically grounded and internationally recognized initiative capable of convening and influencing decision-makers at the highest levels of global governance.”

several high-level discussions, highlighting PREZODE’s role in advancing the prevention of zoonotic disease emergence.

PREZODE returned to the 2023 Paris Peace Forum to co-organize a high-level roundtable titled “From Science to Policy: Informing Decision-Making on Pandemic Prevention, Preparedness and Response”. The discussion brought together government ministers and senior representatives from the scientific community, civil society, and the international donor community to explore how scientific evidence can more effectively inform global health decision-making.

Through these engagements, the Paris Peace Forum has provided a key platform for PREZODE to promote science-based approaches to pandemic prevention and the operationalization of One Health within global governance discussions.

📌 EU Presidency Event: Joining forces to escape the era of pandemics

In February 2022, PREZODE organized a flagship event as part of the French Presidency of the Council of the European Union, highlighting the role of research and international cooperation in preventing future pandemics. The day-long conference, titled “Joining Forces to Escape the Era of Pandemics”, brought together presidents of major national research institutions, senior officials from the European Commission, and leaders of several European and international research organizations.

The event provided a platform to discuss how the One Health approach can strengthen global prevention strategies by addressing the environmental, animal, and human drivers of emerging infectious diseases. It also contributed to mobilizing the European research and policy community around the need to move from a reactive crisis response model toward anticipatory, prevention-based approaches to pandemic risk.

Through this high-level dialogue, PREZODE reinforced its role as a catalyst for European and international collaboration on pandemic prevention, aligning scientific expertise, policy priorities, and operational initiatives.

2023 Paris Peace Forum, at the Palais Brongniart in Paris.





Pandemic Agreement: A sustained commitment to prevention and One Health

On 20 May 2025, the 78th World Health Assembly adopted the WHO Pandemic Agreement with an overwhelming majority, a historic milestone in global public health governance. For PREZODE, this moment represented the culmination of more than three years of sustained scientific advocacy, evidence-based engagement, and coalition-building across multiple rounds of negotiations.

From the earliest sessions of the Intergovernmental Negotiating Body (INB) to the final plenary in Geneva, PREZODE along with its members, and especially FOUR PAWS and the Johns Hopkins Center for Health Security, worked tirelessly to ensure that primary prevention and the One Health approach were not treated as aspirational add-ons but as foundational pillars of the Agreement.

📌 The stakes: Why prevention and one health had to be in the agreement

PREZODE was established on the premise that the next pandemic is most effectively fought before it begins. The COVID-19 pandemic demonstrated, at a terrible cost, the consequences of decades of underinvestment in upstream prevention. Addressing the root causes of zoonotic disease emergence, including habitat destruction, unsustainable land use, and increased wildlife-human-livestock interfaces, requires a coordinated, intersectoral, One Health approach that links human, animal, and environmental health.

When the World Health Assembly established the INB in December 2021 to draft a global pandemic instrument, PREZODE identified this as a critical opportunity. If prevention and One Health were embedded in a legally binding international framework, the world would have both the mandate and the structure to act earlier — and more equitably — in the face of emerging pandemic threats.



📌 Gaining a seat at the table: a formal recognition

PREZODE’s engagement with the pandemic negotiations predates its formal recognition as a relevant stakeholder. As early as September 2023, during the UN General Assembly High-Level Meeting on Pandemic Prevention, Preparedness and Response, PREZODE participated in a high-level side event alongside FOUR PAWS and PPATS. Together with government representatives from France, Canada, Norway, Indonesia, and the Dominican Republic, they discussed how the commitments of the Political Declaration could be translated into concrete action, and agreed that a One Health approach to pandemic prevention must be embedded in the emerging pandemic instrument.

This advocacy bore institutional fruit in March 2024, when the INB Bureau formally recognized PREZODE as a relevant stakeholder, granting it observer status and the right to make official statements at successive INB sessions. This recognition was not ceremonial — it opened the door to eight formal statements delivered across multiple rounds of negotiations, each carefully crafted to reflect the latest scientific evidence and to address the evolving concerns of Member States.

Dr. Tedros Adhanom Ghebreyesus, WHO Director-General, celebrating with member state representatives after the adoption of the Agreement. He emphasized: “Step by step, you moved from red lines to green text; From entrenched positions to landing zones; And from contradiction to compromise, convergence and consensus. You began your work in the middle of one crisis, and you have reached this milestone in the middle of another. And today, we celebrate. Today, you have sent a loud message that multilateralism not only works, but is the only way to find shared solutions to shared threats.”



World Health Organization Member States, meeting in Committee A of the 78th World Health Assembly on Monday, 19 May 2025, approved a resolution that calls for the adoption of an historic global compact to make the world safer from future pandemics.

Tracing PREZODE's engagement through the INB sessions

At INB 9 in March 2024, **Dr. Papa Seck**, the President of the PREZODE General Assembly at the time, delivered the initiative's first formal statement, calling for proactive and integrated prevention strategies alongside preparedness measures. The statement came at a critical juncture, as some language on the One Health approach had been weakened in the draft text, and PREZODE sounded the alarm about this step backwards.

At the resumed INB 9 in April 2024, PREZODE continued to press for stronger surveillance coordination and reiterated its concern about the dilution of One Health language. At INB 10 in July 2024, Dr. Seck recalled that PREZODE and a WHO expert group had recently published a series of indicators for assessing the risk of zoonotic disease emergence — a concrete scientific contribution that could support the operationalization of the very prevention provisions under negotiation. In its statement, PREZODE underscored the fundamental importance of understanding the root causes of zoonotic emergence, evaluating the likelihood of emergence events, and ensuring that countries receive the support they need to implement prevention measures. Delivering the statement, Dr. Seck emphasized: *“With the current high pandemic risk pressing upon us, we are hopeful that the negotiations will promptly conclude and result in a strong and proactive commitment from all stakeholders—governments, academia, civil society, communities, and the private sector—to take concrete measures for prevention, preparedness, detection, response, and resilience against pandemics.”*

As negotiations moved into a more difficult phase in late 2024, PREZODE maintained its presence and its pressure. At INB 12 in November 2024, **Dr. Elsa Léger**, PREZODE's Global Science Officer, emphasized the necessity of incorporating prevention into the legal framework itself, not as a soft commitment, but as a core obligation. Moreover, she stressed the importance of empowering communities to shape national prevention strategies through a One Health approach.

At the resumed INB 12 in December 2024, PREZODE urged all Member States to seek compromise on the articles most directly relevant to prevention, expressing concern about the limited progress being made. At INB 13 in February 2025, **Dr. Marisa Peyre**, PREZODE Co-founder and Science leader, delivered a statement that distilled three years of scientific engagement into a clear policy message: prevention strategies must

align with national health priorities and be grounded in bottom-up approaches. *“Local stakeholders and communities, as frontline responders, must be actively involved in the co-development of the national PPR strategies. Research performed by PREZODE has shown that top-down measures are often ineffective, as they may not be practical or relevant at the local level. PREZODE calls Member States to strengthen the legal text to reflect more of this bottom-up approach in order to enhance its impact.”* She called for stronger legal language requiring continuous dialogue between policymakers and scientists, and for greater emphasis on South-South collaboration to strengthen decision-making and preparedness in developing countries.

Building coalitions: The final push for inclusion

PREZODE's advocacy was never a solitary effort. In the final months of negotiations, the initiative worked alongside key partners — **Four Paws, the Johns Hopkins Center for Health Security, and the Geneva Peace Institute** — to amplify the case for prevention and One Health. In early April 2025, PREZODE co-organized a public webinar to showcase existing One Health governance structures and operational prevention activities already functioning across the globe, demonstrating to negotiators that the provisions they were debating were not theoretical aspirations but practical realities in many countries.

On 7 April 2025, PREZODE co-hosted an in-person side event in Geneva, inviting negotiators directly to build consensus around prevention and One Health. This event took place just days before the final INB session, which concluded on 16 April 2025 with WHO Member States reaching consensus on the draft agreement — a draft that, crucially, included a commitment to the One Health approach and a dedicated article on pandemic prevention.

A historic adoption

On 20 May 2025, the WHO Pandemic Agreement was adopted by the World Health Assembly in Geneva. The adoption was celebrated as a landmark achievement: for the first time in the history of global health governance, a legally binding international instrument placed pandemic prevention measures including a One Health framework at the centre of collective global responsibility. **WHO Director-General Dr. Tedros Adhanom Ghebreyesus** described the moment as evidence that nations can still work together to find common ground and respond to shared threats. He noted that the agreement, *“establishes the foundation for more equitable resource allocation,*



Trees near the ocean
(Banten, Indonesia).

including data, production capacity, and access to medical countermeasures such as vaccines and treatment...” and that it “stands out for integrating cross-cutting strategies, including the One Health approach, which highlights the interdependence of human, animal, and environmental health.”

The adoption vindicated years of evidence-based advocacy. The inclusion of One Health and prevention in the Agreement reflected not just PREZODE’s statements, but the broader scientific consensus that PREZODE had helped to build, document, and make visible to decision-makers around the world.

What comes next: From adoption to implementation

Adoption is only the beginning. The Agreement will enter into force 30 days after 60 countries have ratified it. Before that can happen, an Intergovernmental Working Group (IGWG) must negotiate the Annex to the Agreement, specifically the Pathogen Access and Benefit-Sharing (PABS) system under Article 12. Once the Annex is adopted by the World Health Assembly, the Agreement will be opened for signature and ratification. Countries are already meeting in successive IGWG sessions — with meetings convening through early 2026 — to work through the complex technical and political dimensions of the PABS system.

PREZODE remains a key stakeholder in this ongoing negotiation and implementation process. Implementation will require translating the Agreement’s commitments on prevention and One Health into concrete national policies, multisectoral plans, and funded programmes — precisely the terrain where research, convening capacity, and global network of members add the most value. The work continues, and PREZODE stands ready to accompany it every step of the way.

“ The WHO Pandemic Agreement is a historic milestone for protecting global health. Jointly advocating for One Health advanced the concept to a foundational pillar of global health governance and achieving health for all humans, animals and the environment. Our evidence-based voice has reshaped the future of global health. ”

Nina Jamal, International Head of Pandemics
& Campaign Strategies
at FOUR PAWS International.



STRENGTHENING DATA

BREAKING SILOS, BUILDING BRIDGES

One of PREZODE's core missions is to serve as a resource centre, facilitating exchange within the scientific community, promoting information sharing between communities, scientists, and institutions, and providing decision-makers with tools and information to enable evidence-based public policies. Through these data-sharing tools, PREZODE intends to highlight local examples of ecosystem management strategies to reduce the risk of zoonotic emergence and encourage economic sustainability.



The One Health initiatives and governance online database

PREZODE has developed an online database that maps One Health initiatives worldwide promoting zoonosis prevention and One Health approaches. It also provides information on One Health governance mechanisms and their operationalization status, offering a unique and interactive global database.

Mapping One Health Initiatives

The One Health initiatives database displays the geographical distribution of activities, projects, programmes, and initiatives aiming to prevent or reduce emerging health risks through a One Health approach, which connects human, animal, and environmental health.

The database provides an interactive map and a global directory of One Health initiatives, with key information for each programme, including its location, objectives, sector involved and partners. It is participatory and updated through the project leaders' contributions.

The initial dataset of projects, programmes, and initiatives was compiled through an extensive literature review, mapping work in regions through the PRACTS programmes and the 27 regional workshops organized during the PREZODE co-design process.

Mapping One Health Governance

The database also includes a governance interface that allows users to visualize countries according to different categories of One Health governance.

By selecting a country, users can access detailed information on existing governance mechanisms, such as formal One Health platforms, intersectoral coordination systems, and national policies related to One Health. The mapping also highlights situations where collaboration mechanisms exist but are not yet formally institutionalized.

It is maintained through a participatory process. Countries can update their own information in real time, with all updates moderated before publication.

The initial dataset was collected between January and September 2024 through an international study conducted by PREZODE researchers using a mixed-methods approach, combining a literature review, quantitative and qualitative questionnaires, and individual semi-structured interviews with experts.

The PREZODE Endorsement (Labelling) Process

The portal also hosts the PREZODE endorsement scheme. Finalized in 2025, this labelling process promotes collaboration among initiatives while avoiding the duplication of efforts.

Applications are reviewed by PREZODE Scientific Focal Points and must align with PREZODE's objectives, comply with safeguarding principles (including human rights, animal ethics, and environmental protection), and respect biosecurity standards.

To be endorsed, initiatives must meet nine criteria. They must contribute to the prevention of zoonotic disease emergence; promote gender equality, diversity, and open science; support at least one relevant Sustainable Development Goal; advance research, innovation, or education on zoonotic risks; implement the One Health approach across human, animal, and ecosystem health; share results with the PREZODE community; encourage evidence-based, bottom-up policy development; adopt an inclusive, multi-level engagement approach; and commit to participating in PREZODE activities.





Labelling: Focus on COHESA

COHESA, an acronym for Capacitating One Health in Eastern and Southern Africa, was one of the first programmes to be labelled by PREZODE. Overview.



Representatives of COHESA institution members during a conference at the ministerial level from the 14 SADC member states, held in Lusaka in December 2025.

Launched in 2021, the COHESA project was designed to strengthen One Health capacity across 12 countries in Eastern and Southern Africa — Ethiopia, Kenya, Rwanda, Tanzania, Uganda, Botswana, Namibia, Malawi, Mozambique, Zambia, Zimbabwe, and Somalia. COHESA addresses health threats at the intersection of human, animal, and environmental health through an integrated, country-driven approach.

The programme operates through three interconnected components: **“Governance”** supports governments in institutionalizing One Health — developing national strategic plans, fostering cross-sectoral collaboration, and building interministerial coordination mechanisms; **“Education and research”** equips universities, research institutes, and vocational training centres to train the next generation of professionals, integrating One Health into curricula at secondary, tertiary, and postgraduate levels; and **“One Health delivery”** enables public and private actors to implement concrete One Health solutions on the ground, strengthening public-private partnerships and operational models within each country.

International consortium and local multipliers

Led by **ILRI** with the support of **CIRAD** and the **ISAAA AfriCenter**, and funded through the **OACPS Research & Innovation Programme with European Union support**, COHESA is implemented by local multipliers — leading national institutions — supported by consortium coordinators with deep country knowledge, and backed by

development partners including **WHO, FAO, WOA, the African Union, CDC Africa**, and the World Bank.

Key results to date are significant: national One Health platforms have been supported, including their creation in four countries; national strategic plans have been developed or updated in eight countries; benchmarks for a MSc in One Health has been developed by the Inter-University Council for East Africa, and One Health MSc programmes have been launched in Zimbabwe, Rwanda, Tanzania, Zambia, and Ethiopia; 16 One Health country projects have been implemented by local stakeholders; and over 450 professionals have received in-service training across the region — thanks to a partnership with FAO. An international One Health network is now growing, enabling countries to share expertise, documents, and multi-country funding proposals.

Country-level achievements illustrate the programme’s concrete impact

In Rwanda, for example, COHESA strengthened the One Health ecosystem through stakeholder netmapping, science communication, and student training at demonstration sites, with field interventions targeting zoonotic disease surveillance, climate resilience, and food security in an integrated approach. In Zambia, COHESA’s support proved critical when the country faced multiple anthrax outbreaks at the wildlife-livestock-human interface in 2023, linking national actors to expert laboratory capacity and building the coordinated response needed to manage recurrent health emergencies. Another example of COHESA’s work is the facilitation of the drafting and formalization of the Namibia’s first national One Health Framework in 2024 — a landmark cross-ministerial agreement marking a pivotal step towards coordinated responses to health and environmental risks.

2026 marks a pivotal moment for COHESA: as the first mandate draws to a close, the consortium is demonstrating the breadth of results achieved and making the case for a second phase to consolidate, sustain, and scale the progress made.



PREZODE international platform: Connecting knowledge for zoonotic disease prevention

The PREZODE International Data Platform aims to make prevention efforts visible, connect the people working on them, and enable better-informed decisions before emergencies arise.

A global information system, the PREZODE platform is designed to improve coordination, visibility, and decision-making capacity for zoonotic disease prevention within a One Health approach. It is the result of a multi-year strategic process.

This work builds on four years of analysis conducted within the PREZODE initiative, including the synthesis of 27 international workshops, targeted expert interviews carried out in the PEPR PREZODE programme, and the operational experience of international experts in health information systems.

The platform concept was developed through a rigorous, collective process led by the International Data Working Group, initially composed of 25 international experts and later expanded to 60 members. This work was further strengthened by a benchmarking exercise of 100 existing platforms, allowing identification of complementarities and avoiding duplication of efforts. The concept articulates three modules around a simple but powerful vision: Visualize, Connect, Act:

Module 1: Global Cartography of Prevention (Visualize)

A living global cartography of prevention based on projects, designed not only to map initiatives but also to generate actionable insights on prevention dynamics. It enables the identification of expertise, collaboration opportunities and supports rapid mobilization of relevant actors during health events.

Module 2: Science–Society Interface (Connect)

A multilingual collaborative interface connecting communities, scientists and institutions. The core ambition is to shift the research paradigm — from an extractive model where science goes to communities to collect data, toward a collaborative one where communities actively contribute information and co-design solutions with researchers.

Module 3: Data Integration and Analysis (Act)

Data today are dispersed across sectors, formats, institutions, and countries. This module brings them together in one integrated environment, saving time during health events, enabling more accurate

situation assessments, strengthening early warning capacities and enabling evidence-based decision-making.

Impact emerges from combining complementary functions, leading to the design of this modular architecture.

Next Steps

In 2026, a call for tenders will support the development of a prototype. In parallel, an international user committee and a global engagement strategy are being implemented to ensure a community-driven and scalable development process.

This work positions the PREZODE platform as a global information system at the heart of prevention, connecting knowledge, actors and data to turn the PREZODE vision into action.

What do our experts say?

Dr. Christina Pettan-Brewer: *“A shared global map creates a living picture of prevention in action. It is essential to make existing work visible, reveal collaboration opportunities, and reduce duplication. As an example, during the recent avian influenza spillover from North to South America, One Health networks shared crucial information—and when HPAI reached Brazil, the country was ready, helping to prevent human cases.”*

Dr. Sarah Olson: *“Trust and relationships are crucial for building knowledge. The platform shifts the paradigm from extractive to collaborative research—from science going to communities, to communities bringing information to researchers. Prevention only works when grounded in local realities, with communities able to express their needs in their own terms. As shown by the Wildlife Conservation Society’s work in Pakistan and Alaska, spending time with communities to understand their perspectives is key to tracing coronavirus transmission between humans and animal hosts.”*

Dr Paolo Tizzani (WOAH): *“Although data exist, they are scattered. Integrating multi-source data in one place will save time and provide a more complete picture of health risks. The data integration and analysis module will strengthen early warning capabilities and enable decision-makers to act earlier and with greater confidence.”*



GOVERNANCE

ONE VISION, COORDINATED ACTORS

As of 2026, the initiative is a well-established international coalition with a three-tier governance structure. This oversight framework, adopted in October 2022, is designed to ensure international cooperation, scientific excellence, and operational agility.



The General Assembly: the strategic anchor

The General Assembly (GA) is responsible for reviewing and adopting the initiative's strategies and deliverables, which are developed based on proposals from the Steering Committee. Its core responsibilities are to adopt the Strategic Agenda, annual work plans, and budgets. It also reviews the progress of the initiative, provides high-level guidance, and manages membership applications.

Composed of one representative from each member organization, the GA is led by a President and a Vice President, each elected to a two-year term. The current president,

Dr. Soawapak Hinjoy, assumed office in November 2025, following the presidencies of Dr. Papa Seck (2023-2025) and Dr. Jean-Luc Angot (2021-2023). For the 2025–2027 tenure, the vice-presidency is held jointly by Dr. Nivian Montes de Osca Martínez from Cuba and Dr. Jean-Médard Kankou from the Republic of Congo, following a tied election. Operating on a «one member, one vote» principle, the GA prioritizes consensus to ensure that the diverse perspectives of its members' community are reflected in crucial decisions.



The Steering Committee: The strategic engine

The Steering Committee is responsible for proposing strategy, overseeing the implementation of activities, and making key decisions on project endorsements. It is structured around colleges to ensure balanced representation from science, geography, and civil society, with the most recent addition being the International Organizations College. Following the end of the first SC's term (2023-2025), a new committee of 14 experts from diverse regions was elected, and includes a high proportion of women (nine out of fourteen).

The 2025-2027 Steering Committee brings together:

👉 **Science College:** Dr. Sukanta Chowdhury, Pr. Dien Nguyen Thi, Pr. Christina Pettan-Brewer, Pr. Duangporn Pichpol, Dr. Jamie K. Reaser

👉 **Regions' College:** Pr. Prisca Mugabe (Africa - second tenure), Pr. Gerardo Suzán (The Americas - second tenure), Pr. Nitish Debnath (second tenure) and Dr. Tongkorn Meeyam (both representing Asia), Dr. Marta Martínez Aviles (Europe), Pr. Ricardo Soares Magalhaes (Oceania - second tenure)

👉 **Civil Society College:** Dr. Lucy Keatts (WCS - second tenure), Manon Lelarge (AVSF), Dr. Magda Robalo (IGHD - second tenure)

👉 **International Organizations College:** Dr. Asma Saidouni (WHO) and Dr Chadia Wannous (WFOA)



Members of the Steering Committee elected for the 2025-2027 mandate. On the picture, from left to right: Marta Martínez Aviles, Christina Pettan-Brewer, Manon Lelarge, Chadia Wannous, Prisca Mugabe, Asma Saidouni, Dien Nguyen Thi, Jamie K. Reaser.



Members of the 2023-2025 Steering Committee tenure. From left to right: Ricardo Soares Magalhaes, Lucy Keatts, Casimiro Vizzini, Sarah Olson, Gerardo Suzán, Prisca Mugabe and Neil Vora. The SC also brought together Christophe Cordevant, Nitish Debnath, Juan Luboth, Manuelle Miller, Gabriel Magezi, Musso Munyeme, Aitor Nogales, Waraphon Phimpraphai, Vannaphone Phouthana Magda Robalo and Wim van der Poel.



Behind the scenes

CIRAD, INRAE and IRD, three French research institutes at the starting point.

The functioning of PREZODE is grounded in the deep involvement of three French research institutes: CIRAD (Centre de coopération internationale en recherche agronomique pour le développement - Centre for International Cooperation in Agronomic Research for Development), INRAE (Institut national de recherche pour l'agriculture, l'alimentation et l'environnement - National Research Institute for Agriculture, Food and the Environment), and IRD (Institut de recherche pour le développement - Research Institute for Sustainable Development).

The establishment of PREZODE was driven by the combined expertise, knowledge, and commitment of CIRAD, INRAE, and IRD. These three leading French research institutes played a pivotal role in shaping the initiative, from identifying early warning signals to proposing concrete, science-

based solutions. Drawing on decades of international partnership and field experience across diverse ecosystems and regions, they provided compelling evidence that the absence of robust prevention mechanisms directly contributed to the catastrophic emergence of COVID-19, with devastating health, social, and economic consequences worldwide. Their collective vision laid the foundation for a proactive, integrated, and internationally coordinated approach to preventing future zoonotic disease crises.

Elisabeth Claverie de Saint-Martin, President and CEO of CIRAD, **Philippe Mauguin**, President and CEO of INRAE and **Valérie Verdier**, President and CEO of IRD, share their perspectives on what PREZODE has accomplished and the path it has travelled.

"From the creation and even the idea of PREZODE, we were convinced that only a



Elisabeth Claverie de Saint-Martin, President and CEO of CIRAD, Philippe Mauguin, President and CEO of INRAE and Valérie Verdier, President and CEO of IRD at the first PREZODE General Assembly on 11 October 2022

science-based One Health approach could drive the transformative changes required to effectively prevent future pandemics. We knew that our three research organizations could build on their complementary expertise (human health, animal health, environmental health, agriculture, biodiversity, etc.) and on their international partnerships to launch this coalition. Five years later, we are proud of the work accomplished. PREZODE has reached a

global scale, with international governance, involving stakeholders from 90 countries and the commitment of 30 countries at the ministerial level, working at the interface between science and decision, implementing high level research and development projects with concrete results. The initiative is recognized internationally, has developed common activities with WHO, WOA and FAO, participates in high level meetings and negotiations (e.g., the Pandemic Agreement), and provides a database on One Health projects and One Health platforms. Several countries and regions have set up their own PREZODE groups, while the PREZODE scientific community is now actively involved in numerous conferences and projects.

We are proud of this collective effort and glad to have committed human resources, scientific expertise, and funding to the initiative. We are also very proud to have established a global network of men and women dedicated to PREZODE's mission and thankful to all PREZODE members who have contributed their time and expertise. We are grateful to all the funding bodies, including the French government. We look forward to PREZODE's continued expansion in the coming years for the benefit of all and the planet."

PREZODE'S COFOUNDERS ARE SCIENTISTS WITH COMPLEMENTARY BACKGROUNDS



• **Dr. Thierry Lefrançois**
Special advisor on One Health to the president of CIRAD, Interim secretary general of PREZODE.

• **Dr. Jean-François Soussana**
Chair of the French High Council for Climate since 2024 and former international vice president of INRAE.



• **Dr. Yves Martin-Prével**
Epidemiologist and nutritionist, research director at IRD.



• **Dr. Marisa Peyre**
Epidemiologist deputy director of the integrated research unit ASTRE at CIRAD.



• **Dr. Gwenaél Vourc'h**
Research director at INRAE.

• **Dr. Benjamin Roche**
Biologist, research director at IRD, and associate professor in Mexico.





The Executive Committee and the Secretariat: The operational backbone

Based in Paris, the Secretariat manages daily operations and coordinates between working groups, with vital support from the Executive Committee. Their activities are funded by the three founding institutes.

The Executive Committee (ExCom)

The Executive Committee is formed by PREZODE's three founding French institutes: CIRAD, INRAE, and IRD. It provides essential in-kind support and strategic assistance to the Secretariat, ensuring the initiative remains grounded in robust scientific leadership while facilitating the smooth execution of operations. As of April 2026, the ExCom brings together representatives of the founding institutes: **Dr. Julio Benavides**, **Vincent Brenier** (who took office after **Murielle Trouillet**), **Dr. Thierry Caquet**, **Dr. Eric Delaporte**, **Dr. Thierry Lefrançois**, and **Dr. Marisa Peyre**.

The Secretariat

The Secretariat coordinates and implements the day-to-day activities of PREZODE, acting as the interface between the GA and the SC. Led by a General Secretary and composed of project managers and administrative staff, it manages elections, organizes meetings, and ensures effective communication across the international network. As of June 2025, the Secretariat has gained a specific legal status (Association Loi 1901), empowering it to access funding and organize strategic collaborations.

The Secretariat brings together a variety of profiles: **Servane Beaufumé** is the science-for-policy officer, in charge of international affairs and the global political agenda; **Dr. Paula Caçeres Soto**, a veterinarian epidemiologist, is the chief data officer; **Catherine Darnis**, a media and political sciences specialist, is the communication delegate; **Cécile Grimaldi**, a health economics specialist, is the partnership officer; **Dr. Elsa Léger**, an epidemiologist, is the chief science officer; **Dr. Manon Lounnas**, a researcher specializing in the ecology and evolution of infectious diseases, global science officer, coordinates field programmes; **Laura Rouvet** is the global science officer membership officer; and **Natacha Rousseau**, **Kapitolina Synytsina**, and **Sari Tanikawa** provide support for several activities.

The Secretariat benefits greatly from the support of the scientific focal points: **Dr. Elena Arsevska**, a researcher and epidemiologist; **Dr. Anne-Laure Bañuls**, a senior researcher specialized in ecology and evolution of infectious diseases; **Dr. Christine Citti**, a senior researcher specialized in animal infectious diseases; and **Dr. Daan Vink**, a veterinary epidemiologist.

Members of the Secretariat and Excom. From left to right: Thierry Lefrançois, Kapitolina Synytsina, Elsa Léger, Manon Lounnas, Laura Rouvet, Christine Citti, Vincent Brenier, Paula Caçeres, Catherine Darnis.



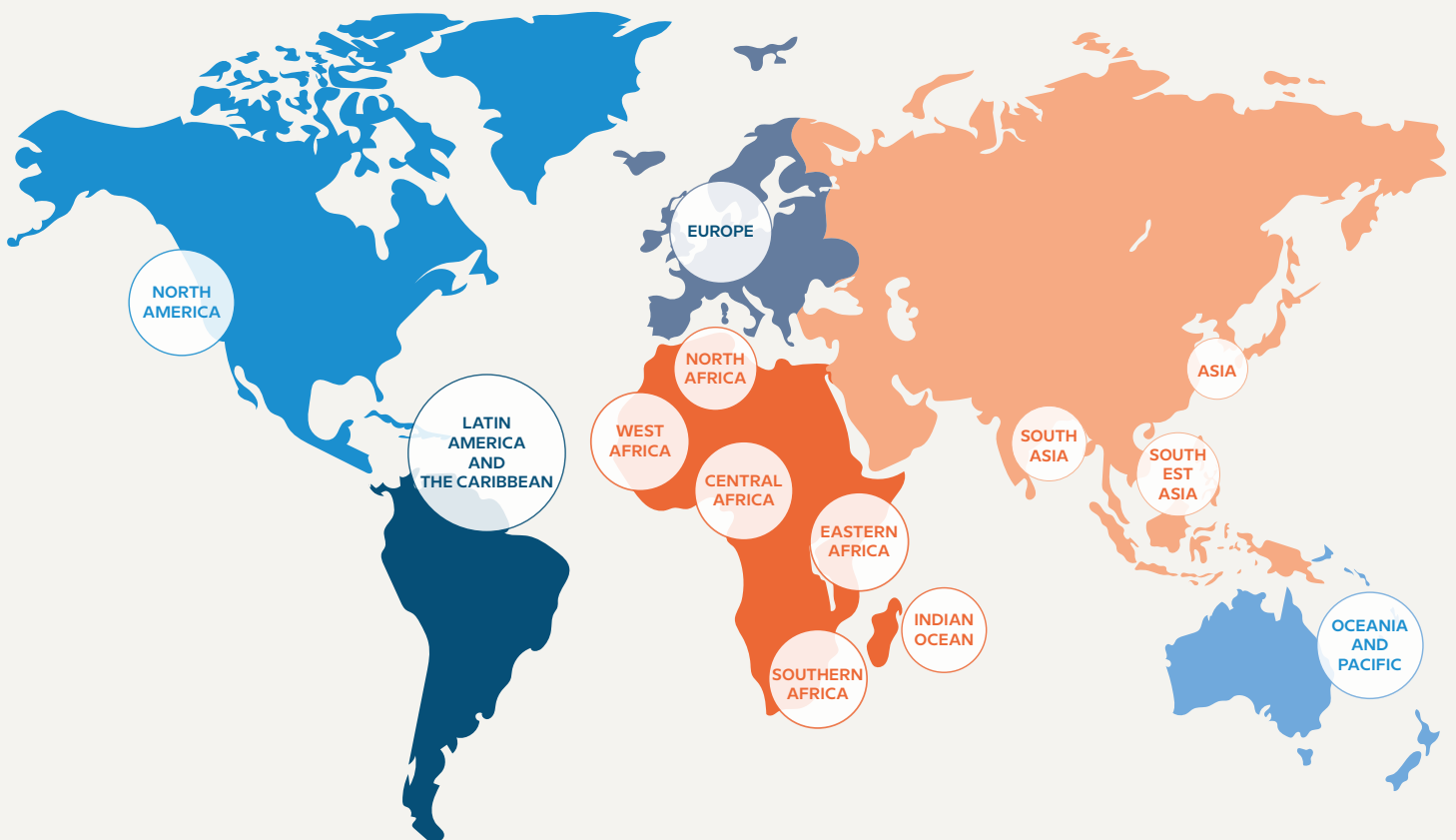
Members of the Secretariat present at the 2024 PREZODE GA: from left to right: Stéphanie Signoret, Paula Caçeres, Manon Lounnas, Elsa Léger, Emma Gomez, Zeev Noga, Murielle Trouillet, Natacha Rousseau.

THE REGIONAL FOCAL POINTS

The International Secretariat is supported by regional focal points across the PREZODE world regions: **Florent Chazarenc** and **Zheng Li** (Asia); **Laurent Ruiz** (South Asia), **Anne Laure Bañuls** and **Flavie Goutard** (South East Asia); **Véronique Chevalier** and **Harena Rasamolelina** (Indian Ocean); **Vladimir Grosbois**, **Eve Miguel**, **Hélène de Nys** (Southern Africa); **Alexandre Caron** and **Hung Nguyễn** (Eastern Africa); **Ahidjo Ayouba**, **Alexis Delabouglise**, **Martine Peeters** (Central Africa); **Jean-Hugues Caffin**, **Marion Bordier**

and **Tom Collet** (West Africa); **Thomas Baleinghen** (North Africa); **Livio Casella Colombeu** and **Renata Servan** (Europe); **Eric Etter** and **Gema Herrero** (Latin America and the Caribbean); **Cécile Aenishaenslin** and **Clara Hollick** (North America); **Jean-François Hocquette** and **Sophie Molia** (Oceania and Pacific).

They play a crucial role in linking local partnerships and actions with global PREZODE advocacy. They facilitate communication, coordination, and the sharing of knowledge between member institutions, governments, and PREZODE governance and the Secretariat.





PERSPECTIVES

BUILDING A WORLD RESILIENT TO HEALTH THREATS: A ONE HEALTH IMPERATIVE

The next pandemic is not a distant hypothesis—it is a foreseeable risk, shaped by forces already in motion. Preventing it requires acting upstream: addressing the biological, ecological, and social drivers that create the conditions for pathogens to emerge or to spill over from animals to humans. This is the core of primary prevention under a One Health approach. Protecting one demands protecting all. It must become the organizing principle of how science is designed, surveillance is structured, and resources are allocated.

Preventing health risks cannot be undertaken in isolation. Prevention sits at the intersection of climate change, biodiversity loss, food system transformation, antimicrobial use, demographic pressure, and degraded sanitation infrastructure. Intensive livestock production drives biosecurity risks and antimicrobial resistance while reshaping the ecological interfaces through which pathogens circulate. Deforestation, urban encroachment into wildlife habitat, and animal trade are not peripheral concerns—they are the upstream engines of pathogen emergence. To address health threats, we must examine production models, consumption patterns, land use governance, and the economic incentives that drive these. Building long-term One Health resilience means investing in capacities and governance across all three sectors—human, animal, and environment—and ensuring that they can communicate, share data, and act collectively. The chronic under-resourcing of the environmental sector and persistent silos between sectors are fundamental gaps that technical solutions alone cannot fix. Political will, co-construction of interventions with communities, sustained financing, and institutional structures capable of crossing sectoral boundaries are all required. PREZODE's activities, from local to global levels, are designed to provide expertise for these multisectoral strategies.

📌 Measuring what we cannot always see

One of the most persistent obstacles to prevention is paradoxical: Success is invisible. When prevention works, outbreaks do not happen—there are no headlines, no emergency response, and no political

recognition. To overcome this prevention paradox, how impact is measured and communicated must be reconsidered.

Indicators cannot be limited to disease outcomes. A layered framework is needed to capture changes in risk trajectories and system resilience, and should cover: ecological drivers such as weather forecast patterns, deforestation rates and biodiversity loss; system readiness indicators such as local capacities and cross-sectoral integration; and behavioural and governance signals including biosecurity practices and wildlife trade regulation. Co-benefits—gains in biodiversity, climate resilience, food security, and animal productivity—offer an additional avenue for demonstrating the value of One Health prevention beyond the health sector. These returns must be made visible, modelled, and communicated consistently to decision-makers. PREZODE is already actively contributing to return-on-investment development and evaluation in close collaboration with the Quadripartite, and will further scale up its scientific support to structure and solidify this critical evidence base.

📌 The case for investment — and the urgency to act now

The economic argument is unambiguous. Estimates show that investing 10 to US\$ 31 billion dollars each year on primary pandemic prevention could avert losses measured in tens of trillions—a potential return on investment of up to 10,000-fold. Yet, prevention remains chronically underfunded, structurally sidelined in national health budgets, and hostage to political

panic/neglect cycles that reward response over foresight.

The structural barriers are real. Health budgets are skewed toward curative care. Animal health systems—the first line of defence against zoonotic threats—are vastly underfunded. Environmental surveillance, critical to early warning, receives even less resources. Donor funding is often siloed, short-term, and misaligned with the long-term, cross-sectoral investments that prevention requires.

The time to act is now. Waiting for the next pandemic to mobilize investment is a strategy the world can no longer afford. Donors and governments must push prevention as a strategic investment—one that protects economic stability, food systems, and geopolitical security. One Health financing mechanisms must become intersectoral, flexible, and adapted to national and local contexts. The Pandemic Fund is a step in this direction; its scale and dynamic must be replicated across relevant instruments without delay.

PREZODE's growing engagement with major international and development finance institutions—including the World Bank and the Islamic Development Bank—opens new project opportunities, complementing the ongoing partnership with the French Development Agency.

Science must be heard

The COVID-19 pandemic exposed the fragility of the relationship between science, policy, and public trust. For more than two decades, the scientific community warned about the growing risk of emerging pandemics—yet these warnings remained largely unheard. Once the crisis unfolded, communication was inconsistent, decisions were made under pressure, and the social and economic dimensions of the crisis were often addressed in isolation from their biological and ecological drivers. These failures came at a high cost and cannot be repeated.

Preventing the next pandemic requires a continuous and structured dialogue between science-policy-society—not an emergency channel activated only in times of crisis. Policymakers must be equipped with a genuine understanding of science. Scientists must translate evidence into clear, actionable insights. Communities must be engaged not merely as beneficiaries but as active agents in health systems, prevention, and local adaptation. This dialogue must be institutionalized through One Health platforms, scientific advisory committees, participatory risk assessments, cross-sectoral briefings, and transparent data-sharing platforms. PREZODE's experience in strengthening these sustained spaces for

dialogue and in co-designing One Health surveillance and early warning systems with communities illustrates how this approach can be effectively implemented in practice.



From commitment to action: PREZODE's path forward

The adoption of the WHO Pandemic Agreement in May 2025 is a historic milestone. For the first time, prevention and the One Health approach are embedded in a legally binding international instrument. The forthcoming 2026 UN Political Declaration on Pandemic Prevention, Preparedness, and Response offers an opportunity to translate these commitments into concrete national and multilateral actions. The 2026 One Health Summit was as a decisive milestone in advancing this agenda.

Yet global frameworks can only deliver if they are grounded in operational realities. This is where PREZODE's role becomes critical. The next phase of its work must deepen the collective effort on three fronts: expanding collaboration across disciplines, sectors, institutions, and regions; sustaining and consolidating existing field programmes that have demonstrated measurable impact while documenting and showcasing their results; and developing new programmes in emerging risk areas, using lessons learned from ongoing programmes. The overarching objective is to contribute to building healthy and resilient socio-ecosystems.

Five years after its launch, PREZODE has demonstrated a tangible impact in fostering international collaboration and advancing prevention-oriented, One Health interventions from local to global scales. Its integrated approach to prevention contributes directly to multiple Sustainable Development Goals—notably SDG 3 (Good Health and Well-being), SDG 15 (Life on Land), SDG 13 (Climate Action), and SDG 17 (Partnerships for the Goals). Its expanding membership—with new countries and strategic partners actively joining—continues to bring fresh expertise, resources, methodologies and toolboxes relevant for field implementation and global application. Beyond this growth, PREZODE gained recognition from major international donors and organizations as a structuring initiative within the global health landscape, contributing to shaping agendas and mobilizing collective action around pandemic prevention.

APPENDIX

ENDNOTES

P. 8-9: Data references

- Ecology and economics for pandemic prevention (Dobson, A.P., Pimm, S.L., Hannah, L., Kaufman, L., Ahumada, J.A., Ando, A.W., Bernstein, A., Busch, J., Daszak, P., Engelmann, J., et al. (2020). *Science*, 369(6502), 379–381. DOI: 10.1126/science.abc3189
- Workshop Report on Biodiversity and Pandemics. Intergovernmental Science-Policy Platform on Biodiversity and Ecosystem Services (IPBES), Bonn, Germany. DOI: 10.5281/zenodo.4327122
- Infectious disease and economics: The case for considering multi-sectoral impacts. (Smith, K.M., Machalaba, C.C., Seifman, R., Feferholtz, Y. & Karesh, W.B. (2019).) *One Health*, 7, 100080. DOI: 10.1016/j.onehlt.2018.100080
- <https://www.who.int/emergencies/situations>

P. 12: The regional workshops leading to the co-design of the Strategic Agenda took place in the following regions: Central Africa, Europe, Indian Ocean, Latin America and the Caribbean, Northern Africa/Middle East, Southern Asia, Southeast Asia/ East Asia and the Pacific, Southern and Eastern Africa, USA/ Canada, Western Africa.

P.16: Publications

- **One Health Atlas:** François Roger (coordination scientifique), Marie-Marie Olive (coordination scientifique), Marisa Peyre (coordination scientifique), Dirk Pfeiffer (coordination scientifique), Jakob Zinsstag (coordination scientifique) - <https://www.quae-open.com/produit/336/9782759240265/one-health-atlas>
- **PREZODE: preventing zoonotic disease emergence.** Peyre, M., Vourc'h, G., Lefrançois, T., Martin-Prevel, Y., Soussana, J.F. & Roche, B. (2021). *The Lancet*, 397(10279), 1prevent. DOI: 10.1016/S0140-6736(21)00265-8
- **PREZODE: a global co-designed One Health initiative for zoonotic spillover prevention** - *Nature Health*, Dr. Manon Lounnas and co-authors Helena Ladreyt, Ahidjo Ayouba, Xavier Bailly, Anne-Laure Banuls, Julio Benavides, Maryem Ben Salem, Elisa Bohin, Gwenalan Blandin, Marion Bordier, Alexandre Caron, Paula Cáceres, Eric Cardinale, Julien Cappelle, Nathalie Charbonnel, Scott Chiossi, Véronique Chevalier, Christine Citti, Valentin Le Coint, Nitish Debnath, Hélène De Nys, Alexis Delabougliuse, Eric Delaporte, Adama Diallo, Raphael Duboz, Mariette Ducatez, Eric Etter, Andres Garchitorea, Claire Guinat, Flavie Goutard, Rodolphe Gozlan, Annemarie Käsbohrer, Emmanuel Laury, Thierry Lefrançois, Elsa Leger, Eve Miguel, Serge Morand, Prisca Mugabe, Marie-Marie Olive, Marisa Peyre, Bethan Purse, Benjamin Roche, Emma Ross, Alessandra Scagliarini, Radi Shafiq, Gerardo Suzan, Tarja Sironen, Jean-François Soussana, Murielle Trouillet, Hung Nguyen Viet, Gwenaël Vourc'h, Chris Walzer, John Ward. DOI in process.
- **PREZODE.data: a comprehensive public database of operational needs and knowledge gaps to prevent zoonotic disease emergence**, *Scientific Data* – publication in process as of March 30, 2026.

P. 24: Serge Morand refers to the following articles: **Global trends in emerging infectious diseases.** Jones, K.E., Patel, N.G., Levy, M.A., Storeygard, A., Balk, D., Gittleman, J.L. & Daszak, P. (2008 *Nature*, 451, 990–993. nature.com/articles/nature06536 -**The status of the world's land and marine mammals: diversity, threat, and knowledge** Jan Schipper and al., *Science* 2008 Oct 10;322(5899):225-30 -doi: 10.1126/science.1165115.

P.25: ZOOFLU benefits from cofinancing by both PEPR PREZODE and PEPR MIE

P. 42: Bangladeshi members who joined PREZODE included Chattogram Veterinary and Animal Sciences University (CVASU), Friendship Bangladesh, and the Bangladesh Livestock Research Institute (BLRI). They joined One Health Bangladesh, the International Centre for Diarrhoeal Disease Research (ICDDR), and the Institute of Epidemiology, Disease Control & Research (IEDCR).

P.43: Organizations and Institutions involved in the CEFIPRA project proposal: Gujarat Biotechnology Research Centre; NCBS-Tata Institute of Fundamental Research; Institute of Bioinformatics and Applied Biotechnology, Bengaluru; Bengaluru Science and Technology Cluster; PREZODE; ANSES; INRAE; CIRAD; Sorbonne University; the OBEPINE+ platform; and Vet-Agro Sup.

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ACRONYMS

CIRAD: Centre de Coopération Internationale en Recherche Agronomique pour le Développement (French Agricultural Research Centre for International Development)

FAO: Food and Agriculture Organization

INRAE: Institut National de Recherche pour l'Agriculture, l'Alimentation et l'Environnement (National Research Institute for Agriculture, Food and the Environment)

IRD: Institut de Recherche pour le Développement (Research Institute for Development)

PEPR: Programme et Équipements Prioritaires de Recherche (Priority Research Programme and Equipment)

PREACTS: PREZODE in Action in the Global South

OHHLEP: One Health High-Level Expert Panel

SADC: Southern African Development Community.

UNEP: United Nations Environment Programme

WOAH: World Organisation for Animal Health

WHO: World Health Organization

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