ToA Final Version
Risks
Assumptions
Emergence & re-emergence of diseases and other disasters (e.g. collapse of mines)
Inconsistent funding
Conflict between the key players
Ikolomani community will change their culture, behaviour and attitude towards anthrax
There will be political goodwill
There will be real-time reporting of suspected anthrax cases
Low community engagement which may lead to low participation in vaccination campaigns (behavious change)
Environmental risk/climate change could increase anthrax spore survival and transmission and thus overwhelm surveillance and outbreak response team
Movement of livestock & wildlife across sub-county/county may introduce new cases of anthrax in Ikolomani
Funds will be available to implement the various activities to achieve the set milestones
There will be active coordination among the various sectors within the COHU (Human, animal & environmental health) for effective One Health approach
Regime changes that may negatively affect the implementation of the COHU
Outbreaks and emergencies that will result in funds diversion e.g. drought, floods, diseases, e.t.c.
There will be sustainable funding for the resource mobilisation team
Political goodwill will be available
TRANSFORM IKOLOMANI INTO A MODEL SUBCOUNTY BY ELIMINATING ANTHRAX, RESULTING IN HEALTHY & WEALTHY COMMUNITIES By 2030
Farmers and community groups manage anthrax risk along beef & dairy value chains
Strengthened Anthrax Surveillance & Reporting Systems, and Enhanced Outbreak Response Capacity
Strengthened Resource Mobilisation & Partnerships for Anthrax Prevention & Control
Behaviour & Attitude Change
Training of Farmers/ Community Target Groups
CHPs & AHAs Capacity on Training of Anthrax Prevention & Control Enhanced
Conducting Mentorship & Support Supervision
CONTINUOUS CAPACITY BUILDING
Identifying & Training of Health Care Workers (HCWs) (including human & animal health, and lab technicians) using available human resource for ToTs
Training of Media Partners
Training of Environmental Specialists
Capacity Building of HR
Develop & Domesticating Training Manual, Materials and Tools Focusing on:
Biosafety and Biosecurity (including carcass disposal, vaccination)
Cultural Behaviour
Disease Diagnosis and Management, Joint Disease Surveillance & Reporting
Sample collection & referral
Risk Communication & Community Engagement Plan & Framework Developed
2026
Contingency Plan Developed
Stakeholder Engagement Meetings to Develop Risk Communication & Community Engagement Plan & Framework
Baseline Report Produced (including needs & gaps assessment)
Baseline Survey Conducted
Behavior Change Expert Engaged
Design KAPS Survey
Farmer Target Groups Mapped
Community Target Groups Mapped
Media Partners Mapped
Year 1 2025
Mapping of Farmers
Mapping of relevant community groups (including opinion leaders/ school clubs) along the beef and dairy value chain
Mapping of media partners especially those in human, environmental and animal health reporting
Engage with COHU
Reach Out to Media Partners
MEL Framework
Behaviour & Attitude Change
Reduction in homeskinning/ consumption
Increased disease reporting by farmers & community groups
Increased accurate disease reporting by media partners esp. during outbreaks
x% Reduction in Anthrax Cases in Animals & Human Beings
Lessons, Best Practices and Operational Research Documented (from other Counties, NGOs etc)
Inform the development of a coordination mechanism to allow COHU to gain agency to leverage their ressources need based
Monitor ongoing initiatives to identify synergies and potential threat to ToA deployment
Trainings for Farmers/ Stakeholders/ Media Partners
Training Materials Developed and Disseminated
ICE Materials Printed and Disseminated
Key Messages Developed and Translated into the Local Language
Baseline Metrics Established
Number of Surveys Conducted
Review & Feedback Sessions Conducted
Feedback Mechanism Developed
Current Status of Home Skinning/ consumption
Level of Disease Reporting
Accuracy of Media Reporting
On-farm Biosafety/ Biosecurity Practices established
Capacity Needs Mapped
Policy gaps Documented
MEL Framework Developed
MEL Objectives
Situational Analysis
Annual Reviews
Mid-Year Reviews
Quarterly Performance & Reflections
Quarterly Community Sensitization (CS)
Operational & Responsive County Zoonotic Technical Committee within the COHU
Linkage to National Surveillance System (Human and Animal)
Coordinate policy development, disease response and reporting
Coordinate Monitoring and Evaluation
2026
Increase animal vaccination coverage to 70%
Strengthened county surveillance and reporting system (linked to IDSR & KABS)
Rapid county detection & response to anthrax outbreaks
Strengthened Disease Diagnostics
CONTINUOUS DISEASE SURVEILLANCE, RESPONSE & REPORTING
Vaccines & Delivery Infrastructure Strengthened
Carry Out Joint Disease Outbreak, Response & Reporting
Conduct Simulation Exercises for Anthrax
Collection of Samples & Referral
CONTINUOUS INFRASTRUCTURE STRENGTHENING
Develop inventory of necessary tools and supplies for an emergency response
Purchase of Lab Equipment & Consumables
Infrastructure Development
National Strategy for the Prevention and Control of Anthrax, Guidelines & Case Definitions domesticated
Consolidate review and contextualise National Strategy for the Prevention & Control of Anthrax in Humans & Animals in Kenya, Guidelines & case Definitions
COUNTY OH POLICY FOR CONTROL OF ZOONOTIC DISEASES
Operationalization of the Kakamega OH Policy
County policy, strategy & guidelines incorporated into county processes
County Assembly Approval
Validation of the (draft) Kakamega OH Policy
Approval by Cabinet
OH Policy formulation
Draft Kakamega OH policy developed, in partnership with ZDU
County policy & gaps review
Lack of National OH policy
Long-Term(4-5yrs) Policy Engaging Stakeholders Domesticated
Advocacy for the COHU process to leverage ressources autonomously
COHU have the agency to secure ressources to deploy their strategy
2026
COHU have a pool of ressource provider (social capital) to provide ressources
COHU can explicit their need to ressource provider
COHU can approach to ressource provider and convince them to invest
COHU have the legal mechanisms to receive external funding
lasting partnership with stakeholders collaborating
strenghtened coordination and efficiency between the different actors working to prevent Anthrax
Parternship management and sustainability
Regular exchanges (quarterly meetings) between resources mobilizer and partners and reporting
Neutral third party to maintain a complaint mechanism and to protect partners in case of litigious situation
Steering committee - ZTWG? with representatives from Ikolomani local community - governor
Signed MoU/contract between COHU and partner(s)
Develop MoU/agreements for Partership (bilateral or collective) with clear roles and responsibilities for the action plan
Legal mechanism to contract external partners is available for COHU
WARM opportunities management (engage ad-hoc partners)
Immediate (1 Year) An Action Plan to Engage ressources providers is Developed (collective or bilateral) ressources allocated defined (fund or in kind)
Meeting to Develop an Action Plan (collective or bilateral) stating the Specific Roles of the Stakeholders in the partnership
Immediate (1 Year) Interested Stakeholders for collaboration Identified
Match-making stakeholder - COHU demand to implement ToA
Analysing Relevant Stakeholders according to influence, interest, & capabilities, synergies to create
Hold Sensitization Fora of the Stakeholders - present COHU need regarding ToA implementation
Deliberate visits to partners for Negotiations - Pitch COHU anthrax solution in bilateral
Prioritize stakeholders to approach first
Develop an annual Budget for Stakeholders Activities
Identify budget gaps where external funding are needed to implement Anthrax ToA
Stakeholders mapping - identifying potential partners and documenting common synergies between their action plans and this Anthrax ToA by leveraging the COHU+ network. Look for creative solution (e.g. working with development partners, insurance, bank, private sector...)
COLD opportunities monitoring (grant)
Follow up on submitted proposals
Constantly Develop and send out proposals for to seek funds
Constantly Monitor Funding opportunities such as Grants
Leveraging public budgeting for ToA
County awareness, advocacy on anthrax (and other zoonotic diseases) prioritized
Participate in stakeholder foras to pitch the ToA
Identify and engage in opportunities to lobby for the ToA
Develop communication ressources such as ToA brochures and flyers - building on partners synergies
Build communication strategy between COHU and the county communication office
Engage a resource mobilizer deputised by one of the Directors and in coordination with the Chief Officer - Resource mobilization & Grant management from the county
Explicit the mission of the ressource mobilizer and its supervision by the COHU
Enhanced Capabilities of Farmers & Community Groups SP
Disease Surveillance & Reporting Systems, and Outbreak Response SP
Resource Mobilisation & Partnerships SP
Today's reality MORBIDITY AND MORTALITY OF LIVESTOCK ARE HIGH AT FARM LEVEL IN IKOLOMANI DUE TO ANTHRAX
TIME
Legend
High Level Outcomes
Original Milestone
New Milestone
Original Activity
New Activity
Strategic Pathway
Grouped objects
MEL Pathway
Problem Statement