



CONNECTING THE DOTS

Civil Society Maps a Path for One Health in Asia-Pacific

March 31, 2026
Bangkok, Thailand

APCASO, in collaboration with CIRAD and PREZODE, convened a landmark One Health Festival side event “Mapping Community-Led One Health Interventions for Prevention” in Bangkok. The event brought together civil society partners from across Asia and the Pacific to map community-led One Health interventions and explore their integration into HIV, TB, and malaria responses and the upcoming Global Fund Grant Cycle 8 (GC8). Held at the Faculty of Veterinary Medicine, Kasetsart University, the event drew 30 participants from seven countries, joining both in person and online.

Centering Civil Society and Communities in One Health

The event opened with a shared conviction that civil society and communities are not merely beneficiaries of One Health framework, but essential drivers of them. APCASO Executive Director RD Marte noted that while CSOs within the APCASO partnership have already begun implementing One Health approaches in their work, the field has largely remained within the realm of academics and researchers and that this must change. The issues One Health seeks to address, she argued, are the very same issues disproportionately affecting the communities APCASO serves.



"We want to see more community and civil society organizations coming into the One Health movement, not as beneficiaries or sources of data, but as equal, important, and strategic partners in the response and in the implementation."

- RD Marte, Executive Director, APCASO

This was echoed by Dr. Soawapak Hinjoy, President of PREZODE, who stressed that sustainable One Health programs cannot rely on top-down government mandates alone. She stated that the future of the One Health approach depends not only on coordination across sectors, but on trust and partnership with communities.

Benjamin Bechaz, Global Health Advisor at the Embassy of France in Bangkok, framed the broader political moment, noting that Southeast Asia has been paving the way on One Health for all regions of the world, and that science-based, community-grounded approaches are more critical than ever at a time when science-based decision-making is increasingly under pressure globally.

Connecting What Already Exists

Shreehari Acharya of the CSO Platform, a network of over 60 civil society and community organizations across five Mekong countries, illustrated with concrete examples how HIV, TB, and malaria programmes already embody One Health principles, often without being named as such. Community health workers already live alongside livestock. Cross-border surveillance networks are already in place. Trusted relationships with vulnerable populations are already built.



"We don't need new systems. We need to connect existing ones."

- Shreehari Acharya, CSO Platform

Nguyen Kim Dung of SCDI brought this principle to life. Rather than building new structures, SCDI mobilized existing HIV, TB, and malaria community systems in Viet Nam to begin implementing One Health approaches. Through a practical checklist used during community health outreach visits, workers began observing and documenting One Health risks alongside their existing work. The data gathered then informed the design of communication and information materials tailored to what communities actually needed.



“The intervention must be developed by the community, implemented by the community, and led by the community.”

- Nguyen Kim Dung, SCDI

The discussion within a civil society panel featuring representatives from Viet Nam (SCDI), the Philippines (ACHIEVE), and Indonesia (Jaringan Indonesia Positif) surfaced that while integrating One Health into HIV, TB, and malaria programming is not straightforward, opportunities remain — the Resilient and Sustainable Systems for Health (RSSH) module within GC8, social contracting mechanisms, and the growing push toward domestic financing all present real entry points. As RD Marte reflected in closing the panel, civil society’s eyes are wide open to the challenges ahead and the same resourcefulness that has driven progress on HIV, TB, and malaria will carry the One Health agenda forward.

APCASO’s Tools for One Health Engagement in GC8

The afternoon surfaced a candid tension: One Health is named as a strategic priority in the Global Fund’s framework, yet concrete guidance on how to integrate it into funding requests does not yet exist. David Lowrance of the Global Fund joined online to outline GC8’s strategic shifts and note that community systems strengthening, integrated service delivery, and pandemic prevention and preparedness all offer genuine pathways for One Health integration.

This is precisely the gap APCASO’s ENGAGE 8 Strategy is designed to fill. Rather than waiting for top-down guidance, APCASO is working to equip civil society partners across 17 countries with the tools, information, and practical how-to resources they need to integrate One Health, pandemic preparedness and response (PPR), and gender justice and sexual rights (GJSR) into their GC8 engagement.

One such resource is the One Health Intervention and Network (OHIN) Mapping Tool, currently in development by APCASO consultant RJ Naguit. The tool is designed to identify and document community-led One Health interventions across Asia-Pacific, map the relationships between key stakeholders, and generate evidence to inform GC8 advocacy and grant writing. As Flavie Goutard of CIRAD noted in the discussion, the tool’s greatest value lies not just in describing what exists, but in viewing existing interventions through a One Health lens by recognizing that many organizations are already doing One Health work without calling it that.

A Door Open to Collaboration

As the day drew to a close, participants left little doubt about what needs to happen next. While civil society and communities are already doing the work, governments too must make a decisive shift to integrate One Health vertically within disease-specific programs and horizontally across integrated, cross-disease responses, ensuring coordinated action across human, animal, and environmental health systems. Participants also called on the Global Fund to issue clear, actionable guidance on how One Health will be operationalized within GC8, noting that naming it as a priority without providing implementation guidance risks reducing it to little more than language on paper.



"This might be a closing speech, but it is also a door open to many more collaborations."

- Flavie Goutard, CIRAD

APCASO is an Asia-Pacific regional civil society network organisation that serves as a catalytic platform for advocacy and community systems strengthening for health, social justice, and human rights for key, vulnerable, and marginalised communities in Asia and the Pacific. We work with civil society and community-led organisational partners in Bangladesh, Bhutan, Cambodia, Indonesia, India, Japan, Lao PDR, Malaysia, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Thailand, and Vietnam.

PREZODE (Preventing Zoonotic Disease Emergence) is an international collaborative initiative, bringing together a community of members, to provide a scientific framework for pandemic prevention. It aims at enhancing prevention, early detection, and resilience to avoid or rapidly respond to emerging infectious diseases of animal origin that can turn into pandemics.

CIRAD (French Agricultural Research Centre for International Development) works with its partners to build knowledge and solutions and invent resilient farming systems for a more sustainable, inclusive world. It mobilizes science, innovation and training in order to achieve the Sustainable Development Goals. Its expertise supports the entire range of stakeholders, from producers to public policymakers, to foster biodiversity protection, agroecological transitions, food system sustainability, health (of plants, animals and ecosystems), sustainable development of rural territories, and their resilience to climate change.