

How disease ecology research influences infectious disease policy

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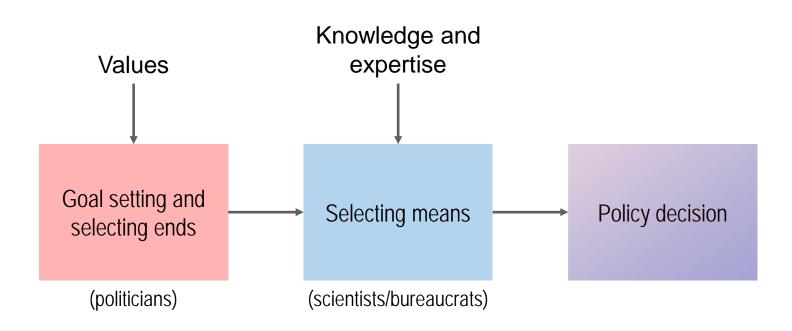


Overview

- Some models of the role of scientific evidence in policy-making
- Where disease ecology research fits into the policy process
- An example: the campylobacteriosis story

Definition: policy = commitment to a particular course of action with broad implications

Decisionist model: bureaucracy (& science) subordinated to democratically-elected representatives

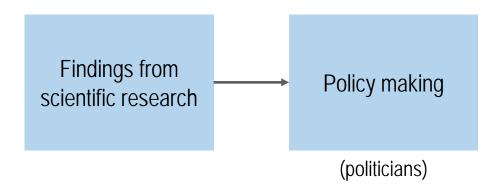


reference: Millstone E. Research Policy 2009; 38: 624-636.

Difficulty with the decisionist model

In a rapidly changing society, goal setting requires scientific input

Technocratic/linear model: policy should be allocated to scientific and technical experts

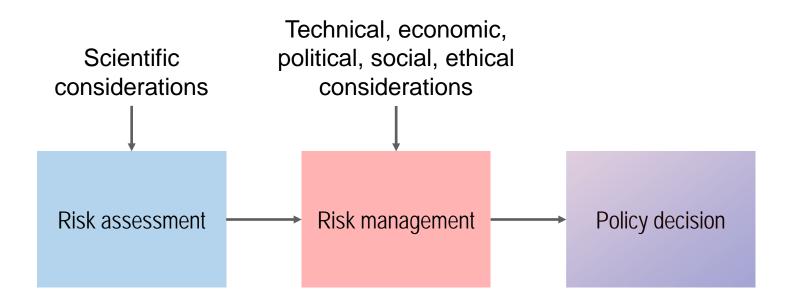


reference: Millstone E. Research Policy 2009; 38: 624-636.

Difficulties with the technocratic model

- Science may result in an assessment of probabilities, not absolute answers
- Adjudication of trade-offs between acceptable risks and anticipated benefits cannot be decided with facts alone

Red Book model: scientific risk assessment precedes and is separate from risk management

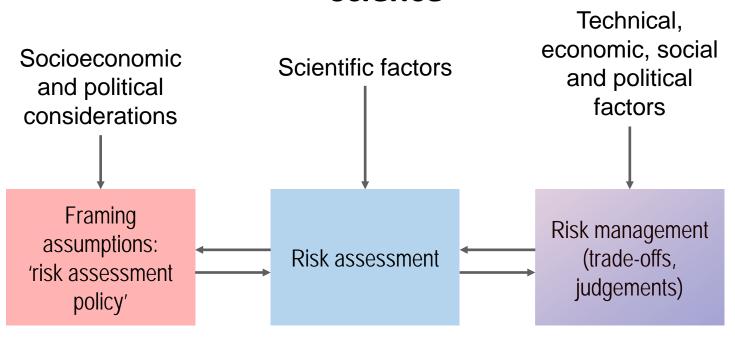


Adapted from: Millstone E. Research Policy 2009; 38: 624-636.

Difficulties with the Red Book model

- Suggests that scientific experts take responsibility for selecting policy ends and goals
- Scientific deliberation on risk in a policy-making context never works in a policy vacuum

Co-production model: Political considerations both precede and follow science



Inputs of disease ecology and pathogen evolution research into the policy process

Inputs to risk Inputs to risk assessment management **Forecasting emerging Deciding on risk** risks management actions Consultation with stakeholders: Measuring size and community, industry, distribution of impacts international **Identifying and Gaining political** partitioning sources and approval transmission pathways **Determining Evaluating impact of** interventions and interventions estimating likely effect

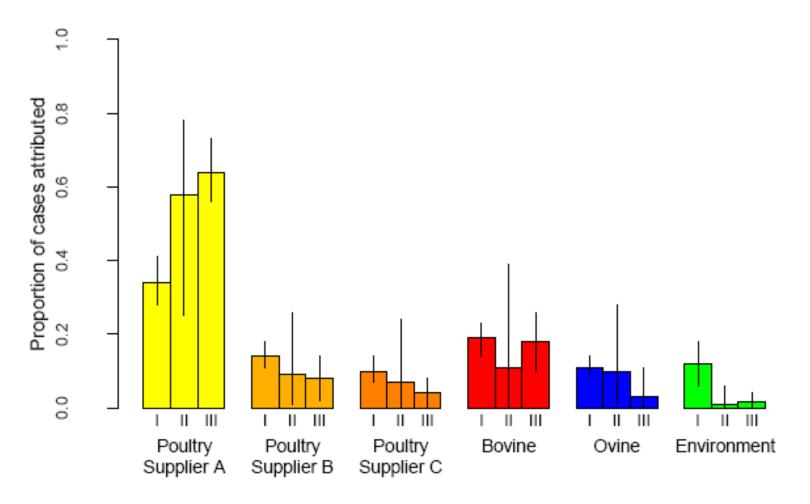
The Campylobacter example: background

- High and increasing levels of campylobacteriosis in New Zealand through 1980s-2000s
- Epidemiological studies in 1990s showed association with poultry, but with some ambiguous findings
- Lack of clarity of relative roles of transmission pathways

The research initiative

- Sentinel surveillance site established in Manawatu
- Collection of Campylobacter isolates from animal reservoirs, vectors, environment, human cases
- Systematic subtyping of isolates, followed by mathematical modelling
- Estimation of attribution of cases to reservoirs and poultry suppliers

Research findings



Mullner P, et al. Assigning the source of human campylobacteriosis in New Zealand: a comparative genetic and epidemiological approach. Infect Genet Evol 2009; 9: 1311-9.

Science input to risk management

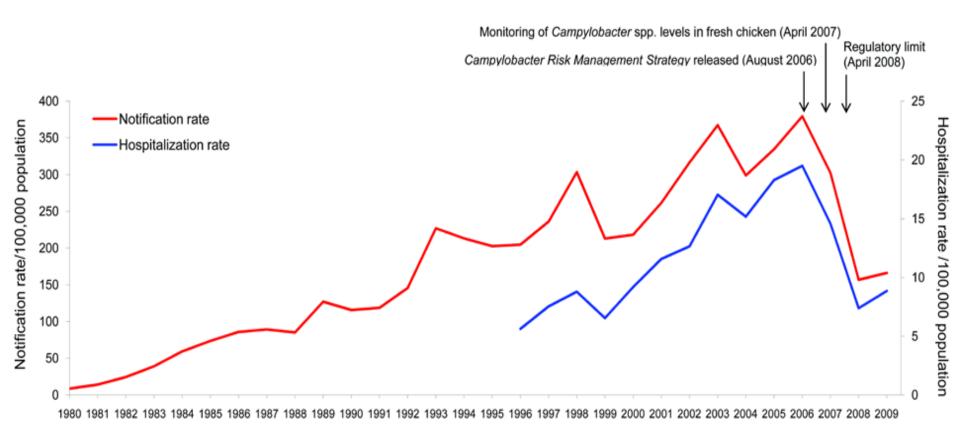
"I think at that point we realised that we were [...] a big part of the problem ..."

Poultry industry representative

"I think one of the realisations for me with [the attribution work] was that it wasn't necessarily outside influences of campy ... it was the same strains going round and round [...] and that is what lead us to take actions to break the cycle"

Poultry industry representative

Outcomes



Sears A, et al. Marked campylobacteriosis decline after interventions aimed at poultry, New Zealand. Emerging Infectious Diseases 2011; Jun: DOI: 10.3201/eid1706.101272

Summary

- Science is but one contributor to the policy process
- Disease ecology and pathogen evolution research can have multiple inputs to both risk assessment and risk management
- The campylobacteriosis story is a good example of the value of this research in supporting the entire trajectory of the policy process

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Questions?