While globalisation has generated many benefits for society, it has also created many new challenges, particularly with regard to human, animal, and environmental health. Neglected Zoonotic Diseases (NZDs) are common where poverty, reliance on livestock or wildlife for social and financial capital and the close proximity of people and their animals favour transmission. These features also raise a growing challenge to the life sciences to understand how these pathogens crossing species barriers are interwoven into non-linear and multifaceted biosocial dynamics that mediate their spread and control. Several of the more cost-effective NZD control strategies involve reducing disease prevalence in the animal reservoir, and such control approaches often profoundly impact on the prevalent culture, livelihood and socio-behavioural patterns of the affected communities, including the social relations and social practices that mediate porous boundaries between humans and animals. We studied three NZDs in specific endemic settings: cystic echinococcosis (Morocco), Taenia solium taeniasis-cysticercosis (Zambia) and rabies (South Africa). This thesis aimed to illustrate and demonstrate the importance of including the socio-anthropological approach to contextualise the dynamic of disease transmission among livestock owners and their community and to support efforts to control NZDs that operate in challenging circumstances and with marginalised populations in order to finally better fit community needs.

Fitting well with the mantra of “One Health” (OH), present NZDs control challenges require new ways of linking disciplines, expertise, local authorities and populations in animal and human health.

In the first chapter a general review of the literature on the different components of the PhD project is presented. Divided into three sections, the chapter begins by considering existing work done on NZDs and medical anthropology by starting with the general context of NZDs and the OH concept; next with the clarification of the current epidemiological situation and existing control measures for each of the three studied NZDs, and ends with the review of the actual role of medical anthropology in NZDs integrated control and the OH movement.

Following this chapter, the rationale and objectives of the thesis are given. The objectives consist of (1) identifying the socio-cultural determinants of transmission of specific NZDs, including knowledge and perception of the zoonoses; (2) identifying barriers to NZDs control options and added value of inter-sectoral collaborations between health, veterinary and other relevant sectors; (3) contributing to the elaboration of recommendations for a more adapted and sustainable integrated control of NZDs; and (4) sharing and disseminating these anthropological research findings in cross-disciplinary dialogues and constructive collaborative efforts.

Before presenting the results of the three socio-anthropological studies (chapters three to six), we introduce what is qualitative research and the methods used to collect our data, including ethical considerations and researcher’s reflexivity.

Finally, the results of our studies and their limitations are discussed following a cross-case analysis allowing us to highlight how complex social, cultural,
political, economic and environmental determinants influence interventions to control endemic zoonoses, how transmission dynamics are rather biosocial than purely biomedical and how cultural beliefs and broader understandings of health and well-being might affect knowledge regarding zoonoses. The questions and challenges raised about the interdisciplinary dialogue between social and medical rationales are also discussed.