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Disasters and Public Health: Implementing the Sendai Framework

Panel Discussion

Yasmin Khan **Virginia Murray** **Ngoy Nsenga** **Jonathan Abrahams**

Why discuss Sendai implementation?

Source: National Post

Source: Twitter

Objectives

1. To describe principles of disaster risk reduction (DRR) relevant to public health
2. To contribute to the development of strategies for implementation of the Sendai framework
3. To share knowledge on the development of the World Health Organization (WHO) Thematic Platform and opportunities for collaboration

Panelists

- Yasmin Khan, Chair, Public Health Ontario
- Virginia Murray, Public Health England
- Ngoy Nsenga, WHO Office for Africa
- Jonathan Abrahams, WHO Headquarters

Questions for plenary discussion

- What are the opportunities and challenges in using the Sendai Framework for disaster risk reduction for population health gain?

- How can the Sendai Framework improve research to build public health evidence for the implementation of the Framework?

Public Health England

Protecting and improving the nation's health

UNISDR
The United Nations Office for Disaster Risk Reduction

World Health Organization

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Thursday 26 April 2017

Disasters and Public Health: Implementing the Sendai Framework

Professor Virginia Murray, Public Health England

Public Health Consultant in Global Disaster Risk Reduction,

Vice-Chair UNIDSR Scientific and Technical Advisory Group

Member of the WHO Collaborating Centre on Mass Gatherings & Global Health Security

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The United Nations Office for Disaster Risk Reduction

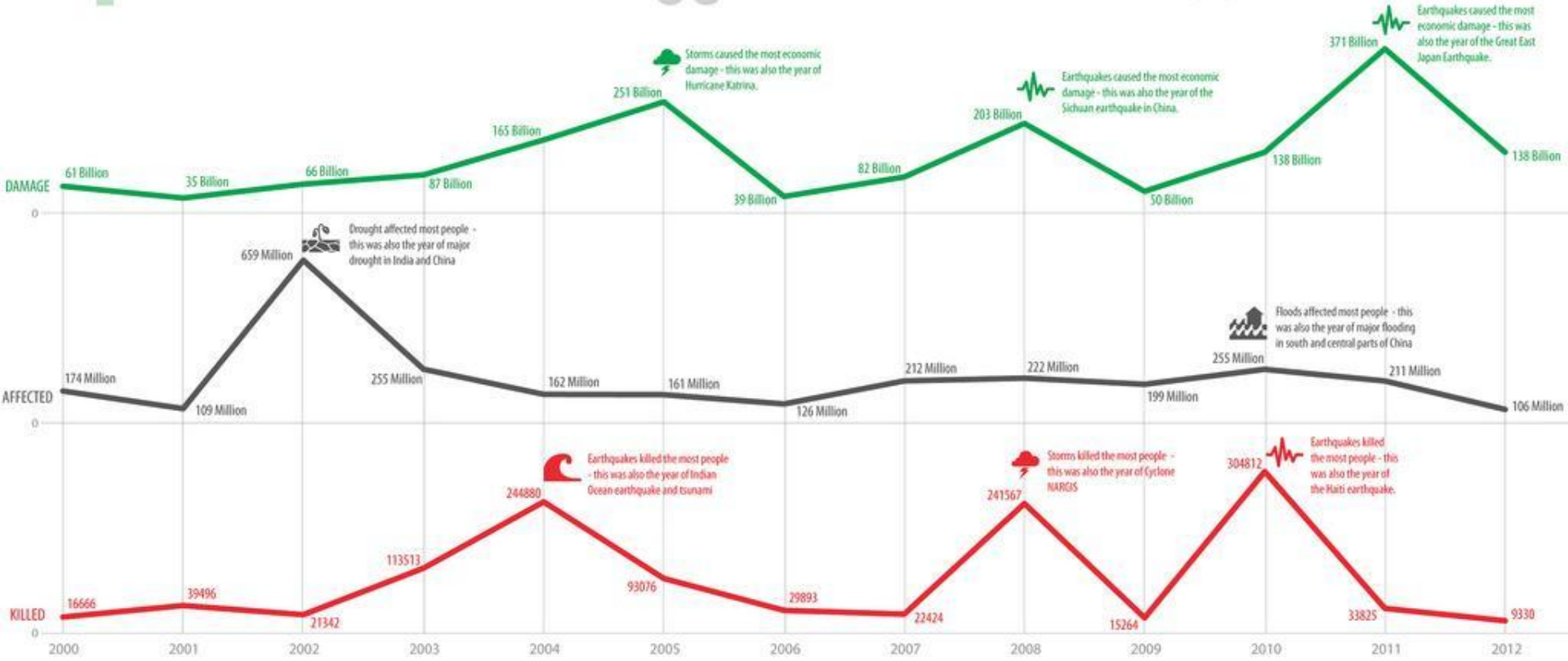
DISASTER IMPACTS / 2000-2012

*Disasters refers to drought, earthquake (seismic activity), epidemic, extreme temperature, flood, insect infestation, mass movement (dry & wet), storm, volcano, and wildfire / Data source: EM-DAT: The OFDA/CRED International Disaster Database / Data version: 12 March 2013 - v12.07
OCHA Humanitarian Symbol (2012): http://reliefweb.int/map/world/world-humanitarian-and-country-icons-2012 / **Find out more about UNISDR: http://www.unisdr.org**

$1.7 TRILLION DAMAGE (USD)

2.9 BILLION AFFECTED

1.2 MILLION KILLED



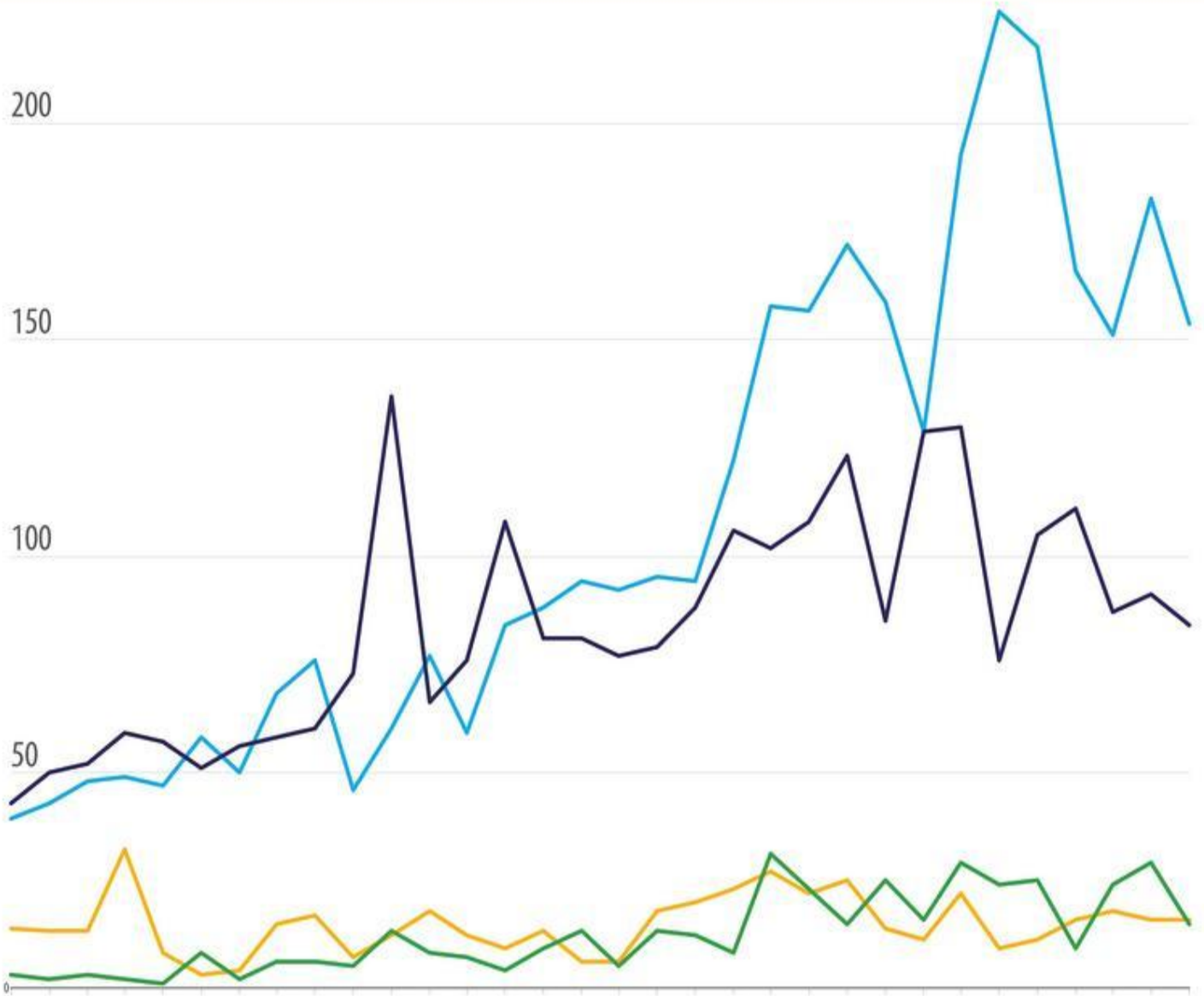
Number of Climate-related Disasters Around the World (1980-2011)

3455 FLOODS

2689 STORMS

470 DROUGHTS

395 EXTREME TEMPS



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http://www.unisdr.org

Version: 13 June 2012

DATA SOURCES

EM-DAT - http://www.emdat.be/ - The OFDA/CRED International Disaster Database; Data version: 13 June 2012 - v12.07

Humanitarian Symbol Set (2008): http://www.ungiwg.org/map/guideline.php

	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
FLOOD	39	43	48	49	47	58	50	68	76	46	60	77	59	84	88	94	92	95	94	122	158	157	172	159	129	193	226	218	166	151	183	154
STORM	43	50	52	59	57	51	56	58	60	73	137	66	76	108	81	81	77	79	88	106	102	108	123	85	129	130	76	105	111	87	91	84
DROUGHT	14	13	13	32	8	3	4	15	17	7	12	18	12	9	13	6	6	18	20	23	27	22	25	14	11	22	9	11	16	18	16	16
EXTREME TEMPERATURE	3	2	3	2	1	8	2	6	6	5	13	8	7	4	9	13	5	13	12	8	31	23	15	25	16	29	24	25	9	24	29	15

25 years of international commitment to Disaster Risk Reduction

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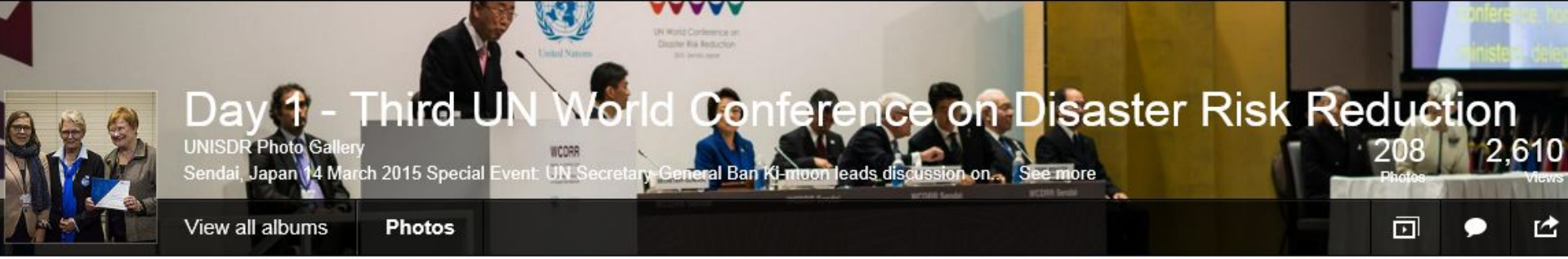

Day 1 - Third UN World Conference on Disaster Risk Reduction

UNISDR Photo Gallery

Sendai, Japan 14 March 2015 Special Event: UN Secretary-General Ban Ki-moon leads discussion on... See more

208 Photos

2,610 Views

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Sendai Framework for Disaster Risk Reduction 2015 - 2030

United Nations

Sendai Framework for Disaster Risk Reduction 2015-2030

- 1 Global Outcome
- 13 Guiding Principles
- 4 Priorities for Action at all levels
- 7 Global Targets

UNISDR

Sendai Framework for Disaster Risk Reduction 2015-2030

Main result of the 3rd UN World Conference on DRR, Sendai, March 2015

Outcome:

The substantial reduction of disaster risk and losses in lives, livelihoods and health and in the economic, physical, social, cultural and environmental assets of persons, businesses, communities and countries.

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Sendai Framework for Disaster Risk Reduction 2015-2030

Four priorities for action

1. Understanding disaster risk;
2. Strengthening disaster risk governance to manage disaster risk;
3. Investing in disaster risk reduction for resilience;
4. Enhancing disaster preparedness for effective response, and to “Build Back Better” in recovery, rehabilitation and reconstruction.

i) *at **National and Local Levels***
ii) *at **Global and regional levels***

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Priority 1 Understanding Disaster Risk

- To strengthen technical and scientific capacity to capitalize on and consolidate existing knowledge and to develop and apply methodologies and models to assess disaster risks, vulnerabilities and exposure to **all hazards**;

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Primary Categories of Macro-Threats

1 Financial Shock

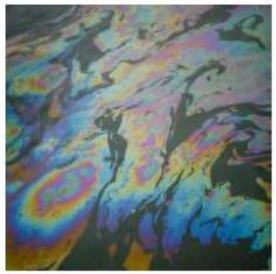
2 Trade Dispute

3 Geopolitical Conflict

4 Political Violence

5 Natural Catastrophe

6 Climatic Catastrophe



7 Environmental Catastrophe

8 Technological Catastrophe

9 Disease Outbreak

10 Humanitarian Crisis

11 Externality

12 Other Shock

(k) In the post-disaster recovery, rehabilitation and reconstruction p the creation of and to reduce disaster risk by "Building Back Be education and awareness of disaster risk;

(l) An effective and meaningful global partnership and the international cooperation, including the fulfilment of respectiv development assistance by developed countries, are essential management;

(m) Developing countries, in particular the least developed countri States, landlocked developing countries and African countries, and other countries facing specific disaster risk challenges, need timely provision of support, including through finance, technol building from developed countries and partners tailored to th identified by them.

IV. Priorities for action

20. Taking into account the experience gained through the impl Framework for Action, and in pursuance of the expected outcome ar focused action within and across sectors by States at local, national, r the following four priority areas:

Priority 1: Understanding disaster risk.

Priority 2: Strengthening disaster risk governance to manage disa

Priority 3: Investing in disaster risk reduction for resilience.

Priority 4: Enhancing disaster preparedness for effective response in recovery, rehabilitation and reconstruction.

21. In their approach to disaster risk reduction, States, regional and i and other relevant stakeholders should take into consideration the each of these four priorities and should implement them, as appropriat respective capacities and capabilities, in line with national laws and r

22. In the context of increasing global interdependence, concerted int enabling international environment and means of implementation ar contribute to developing the knowledge, capacities and motivation fo all levels, in particular for developing countries.

Priority 1: Understanding disaster risk

23. Policies and practices for disaster risk management should be b of disaster risk in all its dimensions of vulnerability, capacity, expos hazard characteristics and the environment. Such knowledge can be of pre-disaster risk assessment, for prevention and mitigation and implementation of appropriate preparedness and effective response

National and local levels

24. To achieve this, it is important:

(a) To promote the collection, analysis, management and use of r information and ensure its dissemination, taking into account the n of users, as appropriate;

(b) To encourage the use of and strengthening of baselines and p risks, vulnerability, capacity, exposure, hazard characteristics a effects at the relevant social and spatial scale on ecosyst circumstances;

(c) To develop, periodically update and disseminate, as appropriate, information, including risk maps, to decision makers, the gene at risk of exposure to disaster in an appropriate format by usi information technology;

(d) To systematically evaluate, record, share and publicly accou understand the economic, social, health, education, environm impacts, as appropriate, in the context of event-specific hazard information;

(e) To make non-sensitive hazard-exposure, vulnerability, risk, disa information freely available and accessible, as appropriate;

(f) To promote real time access to reliable data, make use of spa including geographic information systems (GIS), and use inform technology innovations to enhance measurement tools and dissemination of data;

(g) To build the knowledge of government officials at all levels, civ volunteers, as well as the private sector, through sharing ex good practices and training and education on disaster risk red existing training and education mechanisms and peer learning;

(h) To promote and improve dialogue and cooperation among communities, other relevant stakeholders and policymakers in policy interface for effective decision-making in disaster risk m

(i) To ensure the use of traditional, indigenous and local kn appropriate, to complement scientific knowledge in disaste development and implementation of policies, strategies, plans sectors, with a cross-sectoral approach, which should be tailo context;

(j) To strengthen technical and scientific capacity to capitalize knowledge and to develop and apply methodologies and mod vulnerabilities and exposure to all hazards;

(k) To promote investments in innovation and technology develo hazard and solution-driven research in disaster risk managemen interdependencies and social, economic, educational and env disaster risks;

(l) To promote the incorporation of disaster risk knowledge, inc mitigation, preparedness, response, recovery and rehabilitatio education, as well as in civic education at all levels, as well as in training;

(m) To promote national strategies to strengthen public education risk reduction, including disaster risk information and know social media and community mobilization, taking into account needs;

(n) To apply risk information in all its dimensions of vulnerability persons, communities, countries and assets, as well as hazard and implement disaster risk reduction policies;

(o) To enhance collaboration among people at the local level t information through the involvement of community-base governmental organizations.

Global and regional levels

25. To achieve this, it is important:

(a) To enhance the development and dissemination of science-based methodologies and tools to record and share disaster losses and relevant disaggregated data and statistics, as well as to strengthen disaster risk modelling, assessment, mapping, monitoring and multi-hazard early warning systems;

(b) To promote the conduct of comprehensive surveys on multi-hazard disaster risks and the development of regional disaster risk assessments and maps, including climate change scenarios;

(c) To promote and enhance, through international cooperation, including technology transfer, access to and the sharing and use of non-sensitive data and information, as appropriate, communications and geospatial and space-based technologies and related services; maintain and strengthen in situ and remotely-sensed earth and climate observations; and strengthen the utilization of media, including social media, traditional media, big data and mobile phone networks, to support national measures for successful disaster risk communication, as appropriate and in accordance with national laws;

(d) To promote common efforts in partnership with the scientific and technological community, academia and the private sector to establish, disseminate and share good practices internationally;

(e) To support the development of local, national, regional and global user-friendly systems and services for the exchange of information on good practices, cost-effective and easy-to-use disaster risk reduction technologies and lessons learned on policies, plans and measures for disaster risk reduction;

(f) To develop effective global and regional campaigns as instruments for public awareness and education, building on the existing ones (for example, the "One million safe schools and hospitals" initiative; the "Making Cities Resilient: My city is getting ready" campaign; the United Nations Sasakawa Award for Disaster Risk Reduction; and the annual United Nations International Day for Disaster Reduction), to promote a culture of disaster prevention, resilience and responsible citizenship, generate understanding of disaster risk, support mutual learning and share experiences, and encourage public and private stakeholders to actively engage in such initiatives and to develop new ones at the local, national, regional and global levels;

(g) To enhance the scientific and technical work on disaster risk reduction and its mobilization through the coordination of existing networks and scientific research institutions at all levels and in all regions, with the support of the United Nations Office for Disaster Risk Reduction Scientific and Technical Advisory Group, in order to strengthen the evidence-base in support of the implementation of the present Framework; promote scientific research on disaster risk patterns, causes and effects; disseminate risk information with the best use of geospatial information technology; provide guidance on methodologies and standards for risk assessments, disaster risk modelling and the use of data; identify research and technology gaps and set recommendations for research priority areas in disaster risk reduction; promote and support the availability and application of science and technology to decision-making; contribute to the update of the publication entitled "2009 UNISDR Terminology on Disaster Risk Reduction"; use post-disaster reviews as opportunities to enhance learning and public policy; and disseminate studies;

(h) To encourage the availability of copyrighted and patented materials, including through negotiated concessions, as appropriate;

(i) To enhance access to and support for innovation and technology, as well as in long-term, multi-hazard and solution-driven research and development in the field of disaster risk management.

Priority 3. Investing in disaster risk reduction for resilience

(i) Enhance the **resilience of national health systems**, including by integrating disaster risk management … especially at the **local level**; ….; and promoting and enhancing the training capacities in the field of **disaster medicine;** and **supporting and training community health groups in disaster risk reduction approaches in health programmes,** in collaboration with other sectors, as well as in the implementation of the **International Health Regulations (2005)** of the World Health Organization

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Priority 3. Investing in disaster risk reduction for resilience

- People with **life threatening and chronic disease**, due to their particular needs, should be included in the design of policies and plans to manage their risks before, during and after disasters, including having access to life-saving services;

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Priority 4: Enhancing disaster preparedness for effective response and to "Build Back Better" in recovery, rehabilitation and reconstruction

- Establish a **mechanism of case registry** and a database of mortality caused by disaster in order to improve the prevention of morbidity and mortality;
- Enhance recovery schemes to provide **psychosocial support and mental health services** for all people in need;

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Priority 3. Investing in disaster risk reduction for resilience

- **Enhance cooperation between health authorities and other relevant stakeholders** to **strengthen country capacity for disaster risk management for health**, the implementation of the International Health Regulations (2005) and the building of resilient health systems;

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Priority 4: Enhancing disaster preparedness for effective response and to "Build Back Better" in recovery, rehabilitation and reconstruction

- Promote the resilience of new and existing critical infrastructure, including water, transportation and telecommunications infrastructure, educational facilities, **hospitals and other health facilities**, to ensure that they remain safe, effective and operational during and after disasters in order to provide live-saving and essential services;

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INTERNATIONAL CONFERENCE ON THE IMPLEMENTATION OF THE HEALTH ASPECTS OF THE SENDAI FRAMEWORK FOR DISASTER RISK REDUCTION 2015 – 2030

10 - 11 MARCH 2016 | BANGKOK, THAILAND

Bangkok Principles for the implementation of the health aspects of the Sendai Framework for Disaster Risk Reduction 2015-2030

The International Conference on the Implementation of the Health Aspect of the Sendai Framework for Disaster Risk Reduction 2015-2030, held on 10-11 March 2016, in Bangkok, Thailand, recommended the following measures that could assist countries in implementing the

Ensure coherence and alignment of national, regional and global DRR frameworks and those related to **emergency and disaster risk management for health** such as the International Health Regulations (2005) and the Global Health Security Agenda.

manage health risks of emergencies and disasters with appropriate levels of resources to support implementation.

- Increase the participation of health sector representatives in multi-sectoral emergency and disaster risk management committees and platforms at all levels

http://www.preventionweb.net/files/47606_bangkokprinciplesfortheimplementati.pdf

‘Bangkok Principles for the International Conference on the Implementation of the Health Aspects of the Sendai Framework

- Promote **systematic integration of health** into national and sub-national disaster risk reduction **policies and plans** and the **inclusion of emergency and disaster risk management programmes**
- Stimulate … **investment in emergency and disaster risk reduction, including in health facilities and infrastructure**
- **Integrate disaster risk reduction into health education and training and strengthen capacity** building of health workers in disaster risk reduction

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Pacific Platform for Disaster Risk Management 2016

Outcome Statement

ACKNOWLEDGE the need for the region to follow International Health Regulations and support the WHO Safe Hospital Programmes.

Islands region in the context of sustainable development;

http://www.unisdr.org/files/50790_ppdrm2016outcomestatement.pdf

Development Agenda and the Paris Agreement on Climate Change, as well as related

EFDRR
EUROPEAN FORUM
FOR DISASTER RISK REDUCTION
Turkish Chairmanship

2017 European Forum for Disaster Risk Reduction Open Forum

Istanbul Outcomes

12. Ensure that standards for disaster risk reduction such as the **International Health Regulations** and the **Safe Hospital Initiative** are implemented at European country level.

The 2017 EFDRR Open Forum provided the opportunity of shaping up views on disaster risk reduction in Europe as preparation and contribution to the Global Platform for Disaster Risk Reduction (22-26 May 2017, Cancun, Mexico)

1. Request authorities to include representatives of communities considered under UN

http://www.preventionweb.net/files/52532_2017efdrroutcomesfinal.pdf

UN backs accountability on disaster losses

Ambassador Cristián Barros Melet of Chile introduces the resolution at the United Nations General Assembly (Photo: UNISDR)

2 February 2017, NEW YORK/GENEVA – The United Nations General Assembly today adopted a resolution containing indicators for measuring global progress in reducing disaster losses.

United Nations A/71/644

General Assembly

Distr.: General
1 December 2016

Original: English

Seventy-first session
Agenda item 19 (c)
Sustainable development: disaster risk reduction

Report of the open-ended intergovernmental expert working group on indicators and terminology relating to disaster risk reduction

Note by the Secretary-General

The Secretary-General has the honour to transmit herewith the report of the open-ended intergovernmental expert working group on indicators and terminology relating to disaster risk reduction established by the General Assembly in its resolution 69/284 for the development of a set of possible indicators to measure

Target A

Global target A: Substantially reduce global disaster mortality by 2030, aiming to lower average per 100,000 global mortality between 2020-2030 compared with 2005-2015.

A-1 (compound)	Number of deaths and missing persons attributed to disasters, per 100,000 population.
A-2	Number of deaths attributed to disasters, per 100,000 population.
A-3	Number of missing persons attributed to disasters, per 100,000 population.
	The scope of disaster in this and subsequent targets is defined in paragraph 15 of the Sendai Framework for Disaster Risk Reduction 2015-2030 and applies to small-scale and large-scale, frequent and infrequent, sudden and slow-onset disasters caused by natural or man-made hazards, as well as related environmental, technological and biological hazards and risk.

Public Health England

World Health Organization

Collaborating Centre for Oxford University and CUHK for Disaster and Medical Humanitarian Response
CCOUC 災害與人道救援研究所

WHO Thematic Platform for Health Emergency and Disaster Risk Management

Sharon Tsoon Ting Lo[1], Emily Ying Yang Chan[1, 2, 3], Gloria Kwong Wai Chan[1, 2], Virginia Murray[4, 5, 6], Jonathan Abrahams[7], Ali Ardalan[8], Ryoma Kayano[9], Johnny Chung Wai Yau[10]

1. Collaborating Centre for Oxford University and The Chinese University of Hong Kong for Disaster and Medical Humanitarian Response
2. Nuffield Department of Medicine, University of Oxford
3. FXB Center for Health & Human Rights, Harvard University
4. Public Health England
5. UNISDR Scientific and Technical Advisory Group
6. Integrated Research on Disaster Risk (IRDR) Scientific Committee
7. World Health Organization
8. Tehran University of Medical Sciences
9. WHO Kobe Centre for Health Development
10. The Faculty of Medicine, The Chinese University of Hong Kong

With contributions from:

Alistair Humphrey (Canterbury District Health Board, New Zealand), Olivier Hagon (Geneva University Hospitals), Diana Wong (Monash University), Ada Fong (The Chinese University of Hong Kong)

Public Health England

World Health Organization

CCOUC

Collaborating Centre for Oxford University and CUHK for Disaster and Medical Humanitarian Response
CCOUC 災害與人道救援研究所

WHO Thematic Platform for Health Emergency and Disaster Risk Management

For those who would like to get engaged in this development of the WHO Thematic Platform for Health-EDRM Research Group please contact the current co-chairs
Emily Ying Yang Chan at emily.chan@cuhk.edu.hk and
Virginia Murray at Virginia.Murray@phe.gov.uk.

Disasters and Public Health: Implementing the Sendai Framework

- The Sendai Framework provides a **method to enhance capabilities to plan and prepare for, respond to, and recover from disasters and other public health emergencies.**
- Offers **an opportunity to engage at a global level with stakeholders on guidance and policy issues that could impact state and local preparedness**

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#MEXICOGP2017

2017 Global Platform for Disaster Risk Reduction

22-26 May 2017 - Cancun, Mexico

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Implementing the Sendai Framework: AFRO Perspective

WCDEM 2017

Toronto, April 2017

Dr. Ngoy Nsenga
WHO/AFRO

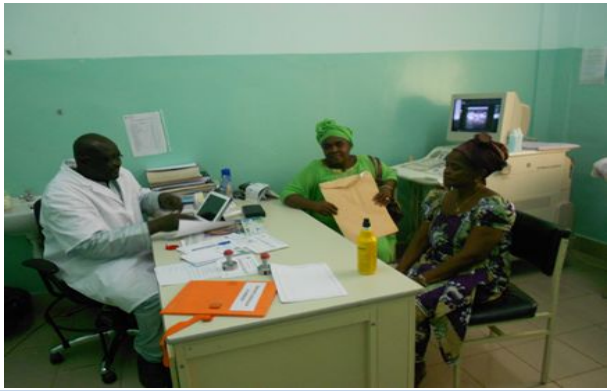
Disaster Built-in Environment in AFRO Region

Conflicts and Social Unrests

Climate change

Rapid urbanization

Social Vulnerability



Weak Health Systems

Limited DRM-H Governance

Paradigm Shift

From Hazard-based…..

To RISK-BASED PLANNING

World Health Organization
REGIONAL OFFICE FOR Africa

Strategic approach

Policy

Tools

Impact

World Health Organization

Progress…

- Induction Briefing conducted for 43 countries
- First phase of Country Capacity Assessment (CCA) conducted in all 47 countries
- Second phase of Health Sector CCA conducted in 11 countries: Sierra Leone, Tanzania, Kenya , Uganda, Ethiopia, DRC, Angola , Eritrea, Cameroon, The Gambia , CAR
- Multi-hazard VRAM conducted in three countries: Tanzania, Uganda, South Sudan,
- Hazard-Specific VRAM conducted for cholera in Tanzania
- Training curriculum implemented in two Teaching Institutions: University of Pretoria, Makerere University,

Next Steps

- Integrate DRM-H Assessment and M&E Framework with IHR-JEE
- Conduct 2nd phase of CCA in the remaining countries
- Develop DRM-H Training Package, based on the existing curriculum
- Institutionalize DRM-H training in collaboration with Teaching Institutions
- Revise DRM-H Guidelines and Tools: VRAM

THANK YOU


CCA
VRAM
HSI
Disaster
Risk
Management
Core
Competencies
SOPs
Recovery
KK

WS27: Public Health - Implementing the Sendai Framework
Thursday, 27 April 2017, 12:05PM - 12:55PM

WHO HQ perspective of success factors and challenges to the implementation of health emergency and disaster risk management

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World Health Organization

Further information

More information at:
http://www.who.int/hac/techguidance/preparedness/en/

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Challenges or facing the facts?

- Number of people affected & exposure – increasing?
- Health effects = death, injury, disease, disability, and other societal outcomes
- High demands on the health system
- Moving the focus from health events to health outcomes using a risk management approach

Barriers to implementing Heath EDRM

- Weak national multisectoral DRM systems
  - Health sector interaction?

- Weak national health systems in parallel universe to health emergency management systems
  - Risk assessments missing
  - multisectoral/interdisciplinary action needed
  - Where to focus? Communities or institutions?

Barriers to implementing Health EDRM

- Capacity development may not address priorities

- Limited focus – re hazard, latest disaster, parallel systems

- Health workers
  - part-time, response oriented, high turn over
  - technical training available, but few trained in Health EDRM with a managerial focus

- Body of knowledge and evidence is weak
  - Research/academic capacity (except in USA) is limited

Barriers to implementing Health EDRM

- People's health has not been an explicit primary purpose of multisectoral DRM
  - Saving lives and health in "social" outcomes – BUT
  - injury, illness, disability, continuity of services missing
- Health is seen as a sector :
  - Rather than: universal outcome, human right, source of vulnerability
  - Epidemics/pandemics not usually addressed within DRR
- Response and conflict/violence missing from DRR
- 3.03 trillion dollars on international aid
  - USD13.5 bn (0.45%) on disaster prevention and preparedness (GFDRR)

Key Success Factors for Health EDRM

- Sustained investment in long-term programmes with committed champions
  - stable EDRM-H unit in MoH – all hazards
  - full-time professional staff and defined budget.
- Health well-coordinated and respected by multisectoral actors
- Window of opportunity after major emergencies and disasters
- Leveraging resources for one hazard for all-hazards systems
- Long-term WHO support to countries makes difference - (Latin America & Caribbean, Bangladesh, Indonesia, Iran, Nepal, Philippines, Viet Nam)

Some advances

- All the work that you all do!
- Health in the Sendai Framework
- National, regional and global strategies
- WHO Policy framework on emergency and disaster risk management that links:
  - All-hazards approach
  - Linking prevention, preparedness, response and recovery
  - Bridging Health EDRM with health systems, IHR, resilience
  - All sectors contributions to health outcomes
- WHO Thematic Platform on EDRM including research

Questions for plenary discussion

- What are the opportunities and challenges in using the Sendai Framework for disaster risk reduction population health gain?

- How can the Sendai Framework improve research to build public health evidence for the implementation of the Framework?

Thank you