Global Assessment of National Health Sector Emergency Preparedness and Response



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PREFACE

The number of disasters around the world over the past 30 years has doubled. In October 2007, over 40 countries incorporating more than 1.3 billion people were subjected to emergencies and humanitarian crises. This has prompted increasing demands from Member States to strengthen WHO's emergency response operations.

Their expectations are articulated in recent World Health Assembly resolutions WHA58.1 and WHA 59.22.

One of the key planks of resolution WHA58.1 is the need to help member states to develop and strengthen their national strategies for emergency preparedness and response.

This survey, arising particularly from resolution WHA59.22, asks member states to assess the status of their health-sector emergency preparedness. It is designed to help inform initiatives to support the development and strengthening of those national strategies.

The survey was designed to yield information on the status of health sector emergency preparedness in Member States; to identify preparedness gaps; and to assess the need for technical support to establish or strengthen national emergency preparedness strategies and plans.

I am pleased that the Survey was based on contributions from each of the 62 countries that participated, specifically from the Ministry of Health and health sector partners. All WHO regions, focal points and several emergency preparedness and response experts were involved in designing the survey.

This survey has yielded significant recommendations for action at the country, regional and global levels. It provides Member States and, consequently, the international community and WHO, with valuable information that allows for situation analysis at country, regional and global level and for helping the decision-making process for programme development and budgeting. Its findings will also help in monitoring trends and progress in fostering intersectoral and inter-disciplinary collaboration and in advocating for funding allocations.

For the first time, Member States, humanitarian organizations, NGOs and all stakeholders in the health sector can overcome the lack of adequate data on the state of emergency health preparedness and develop strategies and plans based on an accurate situation analysis.

WHO will assist Member States in ensuring that these recommendations, where reasonable and practicable, are acted upon. All elements of WHO, and the health sectors of Member States, take seriously their responsibility to ensure that all reasonable steps are taken to protect the health and well-being of people and communities. This survey will provide essential information to help achieve that aim.

Dr Ala Alwan Assistant Director General Health Action in Crises

SUMMARY

GLOBAL ASSESSMENT OF NATIONAL HEALTH SECTOR EMERGENCY PREPAREDNESS AND RESPONSE

Context

The Fifty-Eight World Health Assembly urged WHO to increase its role in risk reduction and emergency preparedness in the health sector. This prompted an Expert Consultation on Emergency Preparedness in February 2006 which proposed a global survey to assess and monitor the status of emergency health preparedness and response in Member States.

The resulting Global Assessment of National Health Sector Emergency Preparedness and Response is intended to inform strategies for assisting Member States in developing and strengthening national approaches to health emergency preparedness and response.

The detailed report of the Assessment follows this summary.

The survey

The survey included an assessment and analysis of the current national health sector capacities for emergency preparedness and response in selected countries. It was an observational, cross-sectional survey.

Following a pilot study, ten Member States from each WHO region were selected to participate. Selection criteria included one or more of the following:

- prior or current experience with hazards (natural, biological, technological, social) resulting in emergencies (e.g. famines, earthquakes, tsunamis, political conflicts associated with internal displacement);
- risk of potential hazards resulting in emergencies;
- presence of a national health focal point/unit for emergency preparedness and response;
- currently receiving funds for emergency preparedness and response from UN or other international agencies.

The data collection tool was a self-administered questionnaire. Ministry of health officials with emergency management responsibilities made up 85% of the respondents from the 60 surveyed countries

The response rate to the survey was high: more than 90%.

Figure A —
Countries reporting emergency/disaster experience in the past five years, by WHO region

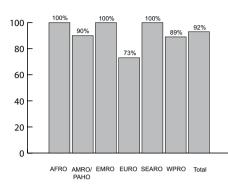


Figure B —
Reported presence of national emergency
preparedness and response policy, by WHO region

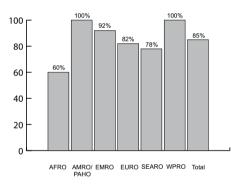


Figure C –

Reported health emergency preparedness
and response plan development, by WHO region

Results

The majority of respondents reported having direct personal experience with emergencies or disasters.

The majority of countries in each region (ranging from 73% in EUR to 100% in AFR, EMR and SEAR) have experienced an emergency or disaster in the last five years (Fig. A). This demonstrates the vital importance of effective national health emergency preparedness and response programmes in all countries.

The most common types of emergencies in surveyed countries were caused by floods, earthquakes, and severe storms, including snowstorms. Yet more than half of the respondents did not recognize the near-universal exposure of human populations to technological hazards in the 21st century. This suggests a need to adopt an 'all hazards' approach to national health emergency preparedness and response policies and programmes, utilizing generic arrangements that are suitable to any type of emergency or disaster.

Most countries (85%) reported the existence of a national emergency preparedness and response policy (Fig. B). However, only two-thirds of countries reported a policy on health sector emergency preparedness and response programmes at the national and provincial levels, and policy on health sector emergency preparedness and response plans.

A number of ministries of health lack any form of institutional arrangement to ensure the development and maintenance of health emergency preparedness and response programmes.

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