

Summary of Fourth Panel Discussion

Topic

Partnerships and the role of stakeholders

Moderator

- Ms. Margareta Wahlström, Former Special Representative of the Secretary-General for Disaster Risk Reduction

Panellists

- Mr. Azizul Haque, Deputy Chief (Planning), Ministry of Disaster Management and Relief, Bangladesh
- Dr. Roderico Ofrin, Director Health Security and Emergency Response, Regional Office for South-East Asia, WHO
- Dr. Dennis Carroll, Director, Global health Security and Development, U.S. Agency for International Development (USAID)
- Mr. Thavirap Tantiwongse, Director of Public Affairs, GlaxoSmithKline (Thailand), Ltd.
- Dr. Herath Hema, National Coordinator for Health sector disaster management, Sri Lanka

Summary of Discussion

Participants highlighted that the Sendai Framework recognizes the role of stakeholders in Disaster Risk Reduction (DRR). It also emphasized that while States have the primary responsibility to reduce disaster risks, they cannot act alone. Collaboration and engagement from stakeholders at all levels is necessary. Such collaboration could enhance innovation and new ideas. Moreover, it must be done through a whole-of-society, people-centred, all-hazards and multi-sectoral based approach.

Participants highlighted the need for responsibility and institutional arrangements in order to enable the relevant personnel and bodies to act in an organized manner in disaster risk management at all levels. Also, training, simulation exercises and drills are important to maintain competencies of stakeholders for effective coordination.

Panellists highlighted that collaboration across levels and sectors can contribute to successful implementation of DRR plans and policies. Additionally, effective cross-border collaboration can lead to improved surveillance activities. Nevertheless, it was noted that sometimes there

could be difficulties arising from differences among stakeholders. The biggest risk emerges between sectors when it is not clear who is responsible. Also, while a lot of partnerships are forged during emergencies, especially at the national level, there is still a lack of partnership in disaster risk prevention and reduction and preparedness and during the recovery stage. It can also be less cross-sectoral.

Participants noted that strategic public-private partnership can be of mutual benefit. Also highlighted was the importance of multi-sectoral partnership for successful preparedness for effective response, which requires comprehensive preparedness addressing all hazards, and should be accompanied by systems, human resources and research capacities as well as sustained financing during peacetime.

Experiences of partnerships including with the private sector point to the need to understand gaps that have to be addressed, identify clear roles and responsibilities of partners and to develop more cross-sectoral partnerships and partnerships at the sub-national level for disaster risk prevention, recovery and reconstruction.

The discussion was elaborated around 4 issues through the presentations made by the panelists;

1.1 Strengthen cross-sectoral coordination, including civil-military coordination for reducing and managing health disaster risks

The importance of multi-sectoral and multi-stakeholder DRR platforms, supported by legal framework, written guidelines and appropriate institutional arrangements was highlighted. Identification of all hazards and risks is critical. It is also essential to identify clear roles and responsibilities as well as authorities of agencies and stakeholders to work together before, during and after disasters. Regular capacity building of human resources through training, exercise/drills programmes is important for developing and maintaining competencies of stakeholders for effective coordination. EOC systems should also be put in place to ensure common understanding of procedures and effective coordination during an emergency. Engaging communities and volunteer groups is essential for early warning, planning and implementation of effective preparedness and response at the local level. Each stakeholder group has their own risks, capacities and interests. Therefore, analysis of stakeholders' interests, mandate and comparative advantage is important to develop shared goals and mutual benefits. National planning and mechanisms for achieving health goals of Sendai Framework are instrumental in this regard.

1.2 Lessons learned and areas for strengthening partnership including Public-Private Partnership

Experiences from partnerships show that there are more partnerships at national rather than sub-national level. Partnerships should focus more on prevention, recovery and

reconstruction than preparedness and response. More partnerships across sectors are needed which require the health sector to work more closely with the disaster risk management community. Strengthening partnership requires trust building, measuring partners' strengths and gaps objectively and engaging other expertise formally. Improving evidence through research and enhancing cooperation across similar hazards are important areas require greater attention and investment.

The private sector plays an important role in disaster risk management. They do not just provide goods but work with governments and other stakeholders to ensure correct use of their products, and train frontline workers to help save lives. For private sector partnership, for example in vaccine development, long-term commitment and planning versus ad-hoc approaches is important. Understanding the needs and identification of the partners is critical.

1.3 The importance of multi-sectoral partnership for successful preparedness

Threats from health emergencies, especially infectious diseases such as Ebola, MERS, and SARS, have increasing global impacts. Effective response requires comprehensive prevention and preparedness that addresses multiple hazards. It should be accompanied by systems, human resources, research on anticipated disasters and have sustained financing during peace time. Multi-sectoral partnership and engagement of stakeholders therefore are critical for successful preparedness.

1.4 Strengthen transboundary collaboration and information sharing for all hazards, including biological hazards

The management of biological hazards such as epidemics and pandemics must be cross-sectoral and is very often, cross-border. Information gathering and sharing is needed and this should be done with cross-sectoral and cross-border cooperation as shown in the example of polio-free certified region in the borders of India with neighbouring countries. Successful collaboration mechanisms at national and district level as well as among countries, involving health authorities, local governments, border authorities, foreign affairs as well as international organizations led to effective exchange of information and high vaccination coverage on both sides of the borders.

Standby agreements, such as under the ASEAN Disaster Management and Emergency Management Agreement (AADMER) to deploy personnel and materials to respond to crisis, cluster approach or networks of experts and supplies are important for successful preparedness. Written agreements are required for clear roles and responsibilities and mechanisms. Such agreements should correspond to each country's plans and policies which can be national, local, sectoral, or hazard-specific. Technology and tools can be

useful in managing information flow and products tracking/replacing (like the system used by Thailand's medication tracking and replacement).

Key Messages

- A strong partnership is based on trust which can be built through shared vision, mutual interest and clear roles and responsibilities based on partners competencies.
- The Sendai Framework makes it clear that progress cannot be made if we keep working in our own systems and siloes. Human resources need to be strengthened and capacities built to work across sectors and communities, including for surveillance and immunization at national and sub-national levels.
- Effective cross-border collaboration leads to improved surveillance and immunization especially for infectious diseases.
- Health facilities provide critical services. However, they may create risk to the environment from wastes if not managed properly. Therefore they have an important responsibility for reducing and managing those risks.

Recommendations

- Emphasize the role of multi-sectoral and multi-stakeholder DRR platforms with enhanced collaboration between the health sector and disaster risk management as well as climate change community
- Strengthen partnerships that focus more on prevention, recovery and reconstruction, especially at sub-national levels, as well as cross-sectoral and cross-border collaboration
- Faith-based and indigenous groups should be included in disaster risk management.
- Strengthen partnership with the private sector, including on research, health promotion and preventive medicine
- The capacity of nurses and nursing schools should be tapped on for DRR, especially, for health emergency preparedness and response.

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