



HIGH LEVEL PLENARY PANEL 4 Concept Note

"Safer Hospitals and Schools"

Thursday, 18 June 2009 09:30-11:00





Outline of panel

- A shared understanding of the critical factors required to effect a change in policy and practice at national and local level (drawing on the successes and challenges presented during the session)
- The identification of regional, national and local mechanisms (including cross-sectoral collaboration) or modalities that can be supported by Governments and National Platforms for Disaster Risk Reduction or the wider ISDR System and partners
- A set of suggested targets up to 2015





Safer Hospitals and Schools

- Structurally sound and should not collapse and kill school children, patients and/or staff
- Should be able to function and provide services as critical community facilities
- Should have contingency plans
- Should provide training in emergency response for school children, patients and/or staff





Key principles for agreement - 1

- Health and education are critical elements of a holistic, all hazards, and risk-based approach to disaster risk reduction. Both of them underpin the work of the disaster reduction community, and are reliant on the contribution of many other sectors.
- Critical services and infrastructure such as health facilities and schools must be safe from disasters.

 Damaged infrastructures cause injuries and death, increase the vulnerability of affected populations to the environment, cause disruptions to education and health services and exacerbate poor health and pre-existing disease. The principle approach must consider structural and non-structural elements of schools and hospitals, as well as emergency preparedness, including issues such as evacuation and sheltering and health and safety of teachers, children, health workers and patients.





Key principles for agreement - 2

- Education on all levels, comprehensive knowledge management, and greater involvement of science in public awareness-raising and education campaigns is needed.
- The broad range of physical and mental health consequences from disasters can extend from the immediate impact to long-term health effects. These health effects need to be addressed in policies, programmes and supporting research of health and other sectors which contribute to the health of communities.





Key principles for agreement - 3

ISDR partners and ISDR Scientific and Technical Committee member organisations are well placed to lead on developments in the following area:

• In health and in education, as well as other sectors, it is essential that scientific information be shared and translated into practical know-how that can readily be integrated into policies, plans and practice. Case studies of the effect of disasters on health facilities and schools, as well as effective risk reduction projects, are needed for this research. All members of the ISDR system should prepare and develop internationally valid research strategies, drawing upon the human capital resources of the ISDR system and the support of the ISDR Scientific and Technical Committee.





- Dr Carmencita Banatin, Director of Health Emergency Management Staff in the Department of Health, Philippines
- M. Gerard Bonhoure, General Inspector, Ministry of National Education, France
- Lic. Laura Gurza Jaidar, National Coordinator, National Civil Protection System Mexico
- Mr. Sulton Rahimov, Head of Environment and Emergency Situation, Department of the Executive Office of the President of Tajikistan
- Dr. Eric Laroche, WHO Assistant Director-General, Health Action in Crises





Dr Carmencita Banatin,
Director of Health Emergency
Management Staff
Department of Health,
Philippines



HOSPITALS SAFE FROM DISASTER INITIATIVES IN THE PHILIPPINES

CARMENCITA A. BANATIN, MD, MHA

Director III
Health Emergency Management Staff
Department of Health



SAFE HOSPITALS

- Hospital Assessment Tool developed tested
- Initial assessment of hospitals at NCR to be expanded to the whole country
- 3. Evidence based research as inputs for decision making
- 4. Capability building of major players nationwide
- 5. Partnership with academes, special societies and civil organizations
- 6. Funding

"



10 P'S INITIATIVE IN HEMS

- 1. POLICIES AND GUIDELINES
- 2. PLAN
- 3. PROTOCOLS AND PROCEDURES
- 4. PEOPLE
- 5. PROMOTION AND ADVOCACY
- 6. PRACTICES
- 7. PHYSICAL FACILITIES
- 8. PROGRAM DEVELOPMENT
- 9. PARTNERSHIP AND NETWORKING
- 10. PESO AND LOGISTICS
 - □ PERFORMANCE







M. Gerard Bonhoure General Inspector Ministry of National Education France





Lic. Laura Gurza Jaidar, National Coordinator, National Civil Protection System Mexico





Mr. Sulton Rahimov, Head of Environment and Emergency Situation,

Department of the Executive Office of the President of Tajikistan





Dr. Eric Laroche WHO Assistant Director-General Health Action in Crises





Draft main proposals for supporting these principles and adoption of targets paving the way for subsequent implementation of commitments for Safer Schools and Hospitals

On safer hospitals
On safer schools
On safer schools and hospitals





On Safer Hospitals:

Damage to health systems from disasters are human tragedies, resulting in devastating impacts on health and health services, huge economic losses, causing significant blows to development goals and shaking of community confidence. Making hospital and health facilities safe from disaster is therefore a health imperative and an economic requirement, as well as a social and ethical necessity.

In 2008/2009, the biennial World Disaster Reduction Campaign focuses on 'Hospitals Safe from Disasters'. Its aims are to:

- Protect the lives of patients and health workers by ensuring the structural resilience of health facilities;
- Make sure health facilities and health services are able to function in the aftermath of emergencies and disasters; and
- Improve the risk reduction capacity of health workers and institutions, including emergency management.





ISDR system member organizations, especially governments, should consider:

- 1. Ensuring that the **health sector** is represented on all national and regional platforms for disaster reduction by 2011.
- 2. Establishing a **global technical platform for health risk reduction** by 2011.
- 3. Conducting national assessments of the safety of existing health facilities and establishing a schedule for retrofitting the most critical and vulnerable ones by 2011.
- 4. Adopting comprehensive national multisectoral **Safe Hospital policies and programmes** by 2015 to ensure:
 - 1. health facilities can withstand the risks they are exposed to,
 - 2. health workers and patients are protected and
 - 3. health facilities can provide health services in disasters.
- 5. Ensuring that health facilities develop **disaster and emergency risk management programmes by 2015**, including emergency response plans, exercises to test these plans, and training of health workers for their response roles and for their personal protection.
- 6. Establishing **regional and global strategies** among health, finance, building, infrastructure, academic and donor partners to achieve multisectoral, international support for national actions





On Safer Schools:

- Children are among the most vulnerable groups during a disaster, especially those attending school at the time of the catastrophe. In recent years, disasters destroyed large numbers of schools, taking away the precious lives of children and teachers and stalling access to education activities. Protecting schools and children is a political, social and moral responsibility of all governments. Governments, with support of UNISDR partners, should consider:
- Developing a comprehensive national plan for disaster risk reduction to secure that:
 - Buildings of school and universities can withstand the risks they are exposed to,
 - All students and teachers have adequate information, knowledge and capacity to protect themselves from potential disasters when a disaster occurs by 2011.
- Integrating disaster risk reduction into the educational system, from primary education to high education, in order to make sure that disaster risk reduction is an integral part of our future leadership, education and socio-economic development by 2015.





On Safer Schools and Hospitals:

ISDR partners, supported by the ISDR Scientific and Technical Committee and other Thematic Platforms should consider:

- Developing and implementing internationally-valid risk reduction research strategies for health and education, giving priority to assessing and reducing climate change effects, by 2011
- Developing and implementing **research**, case-studies, guidelines and projects to increase the effectiveness of emergency evacuation and sheltering in communities, with an emphasis on the role of health facilities and schools, by 2011

Governments, supported by ISDR partners should consider:

- Elaborating comprehensive national strategies and policies and result based action plans for integration of DRR in the Health and Education sectors by 2015.
- Resources to achieve these targets and implementation of national, community and global commitments for Safer Hospitals and Schools should be considered. As well as financial support via sustainable funding mechanisms for project implementation, further capacity development strategies, such as face-to-face and e-learning training courses, research, exchanges of personnel and experience-sharing forums, should be considered





Ms. Zoubida Allaoua, Director, World Bank to launch

'Guidance Notes on Safer School Construction'

developed jointly with Inter-Agency Network for Education in Emergencies