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COORDINATION OF INTERNATIONAL HUMANITARIAN ASSISTANCE IN HEALTH IN CASE OF DISASTERS: FINAL REPORT

Background

1. The purpose of this document is to inform the Governing Bodies of the Pan American Health Organization (PAHO) of the achievements made toward implementation of the resolution on the *Coordination of International Humanitarian Assistance in Health in Case of Disasters* (Resolution CSP28.R19) (1), adopted by the 28th Pan American Sanitary Conference in September 2012, in consideration of document CSP28/13 (2).
2. The purpose of this resolution was to facilitate health sector strengthening in the Member States and to improve coordination in receiving and sending health-related humanitarian aid during emergencies and disasters.

Update on Progress Achieved

3. This report is based on updated information received both from Member States at regional meetings of disaster coordinators of the ministries of health and from PAHO/WHO country offices, and on information obtained through direct coordination activities with subregional entities and organizations. It also draws on existing databases at the Pan American Sanitary Bureau.
 4. The resolution urges Member States to: *a)* establish a coordination mechanism for the health sector for receiving and sending international humanitarian assistance; *b)* provide ongoing reports to PAHO on their mechanism for coordination of humanitarian assistance in order to organize the response while respecting the needs and structure of the country's health sector; *c)* strengthen national systems for health sector response to emergencies and disasters; and *d)* establish systems to identify a roster of experienced professionals in the different fields of response to disasters and public health emergencies, and encourage their participation in the Regional Disaster Response Team administered by PAHO/WHO.
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Operative paragraph 1: Establish a coordination mechanism for the health sector for receiving and sending international humanitarian assistance	
Activity	Status
Establishment of the Inter-American Health Humanitarian Assistance Network (IHHAN)	Ten countries participate in the IHHAN, of which five have designated focal points to take part in the logistics network and share knowledge and skills, four have backup centers, and one has a current logistics agreement (3).
Establishment of procedures for receiving and sending emergency medical teams	Thirty-nine countries and territories received training in coordination procedures for receiving and deploying emergency medical teams, and a virtual platform (Virtual CICOM) was developed for use by Member States in receiving and deploying international teams. In addition, nine countries are integrating these procedures into their national mechanisms (4).
Establishment of agreements to facilitate international humanitarian assistance	Twelve countries have agreed to establish, facilitate, and expedite rules for the mobilization of international humanitarian aid and mechanisms for the implementation of the inter-American health emergencies network (5).

Operative paragraph 2: Provide ongoing reports to PAHO about their mechanism for coordination of humanitarian assistance in order to organize the response while respecting the needs and structure of the country's health sector	
Activity	Status
Monitoring of installed capacity in the ministries of health	Each year, the countries and territories report to PAHO on the status of the current capacities of their health sector, regarding aspects such as national emergency committees, emergency operations centers, safe hospitals, emergency response plans, or national response teams, among others. ¹

¹ According to monitoring data of the *Plan of Action for Disaster Risk Reduction 2016-2021* (Resolution CD55.R10) (6), updated to September 8, 2020 (Country Health Emergency Preparedness and IHR Unit, PAHO Health Emergencies Department).

Operative paragraph 3: Strengthen national systems for health sector response to emergencies and disasters	
Activity	Status
Strengthening of the capacities of the ministry of health to lead and coordinate the response, and of the health sector's response operations centers	Thirty-two countries and territories have a national committee for health-related emergencies and disasters. In addition, 33 countries and territories have an emergency operations center in place as a mechanism for coordinating humanitarian assistance. ²
Conduction of awareness-raising workshops for the implementation and strengthening of ministry of health coordination mechanisms	Eleven countries participated in the awareness-raising workshops (7). In addition, 175 experts from 30 countries participated in various workshops and training sessions to strengthen capacities to coordinate humanitarian assistance and emergency response (8, 9).

Operative paragraph 4: Establish systems to identify a roster of experienced professionals in the different fields of response to disasters and public health emergencies, and encourage their participation in the Regional Disaster Response Team	
Activity	Status
Several workshops have been conducted on national response teams, health clusters, logistical aspects, and the PAHO/WHO humanitarian supply management system (SUMA) in various countries where there are professionals in the field of public health with expertise in disaster and emergency response and future members of the Regional Disaster Response Team.	Overall, 158 public health professionals were identified, of whom 28 were reported to have skills in logistics, 25 in mental health, 25 in epidemiology, 23 in environmental health, and 24 in information and communication management, among others. ³
Development of a platform for the Regional Disaster Response Team to exchange inter-programmatic information among members and provide updates on new technical and communication materials	To date, 145 public health professionals (with expertise in mental health, logistics, environmental health, and coordination, among others) are part of the platform. ⁴

² According to monitoring data of the *Plan of Action for Disaster Risk Reduction 2016-2021* (6), updated to September 8, 2020 (Country Health Emergency Preparedness and IHR Unit, PAHO Health Emergencies Department).

³ According to the latest report of the roster of experts for the Regional Disaster Response Team, updated to June 2018 (Emergency Operations Center Unit, PAHO Health Emergencies Department).

⁴ According to the Regional Disaster Response Team platform, updated to 12 February 2021 (Emergency Operations Center Unit, PAHO Health Emergencies Department).

Lessons Learned

5. The main lessons learned during the implementation of this resolution are presented below.
- a) The coordination of humanitarian assistance in emergency situations is a continuous process, since, although there may be capacities in place at the national level, it is necessary to ensure that these capacities are transferred to and maintained at the different subnational levels in the country and are constantly updated and strengthened to ensure a joint, effective, and timely response to emergencies.
 - b) The high personnel turnover rates observed in countries of the Region of the Americas, compounded by changes in political administration that affect the structures of the health sector, requires constant effort to train human resources in the field of health, continuously update and disseminate knowledge, and prepare these professionals for coordination and decision-making in the event of emergencies.
 - c) Continued priority should be given to strengthening national capacities, training and developing national response teams, and strengthening the health sector's coordination and decision-making mechanisms. The goal is to ensure that countries are self-sufficient in their response to emergencies, that the spirit of Pan American solidarity is synonymous with synergy, and that Member States benefit from working together.
 - d) Procedures for the management of humanitarian assistance require high-level coordination, with clear, pre-established processes, trained personnel, and intersectoral dissemination.

Actions Necessary to Improve the Situation

6. The following are suggested as measures that could help improve the situation:
- a) Continue to promote the Emergency Medical Teams initiative in order to facilitate the training, application, and registration of both national and international medical teams, as well as the creation of medical information and coordination cells.
 - b) Move forward in strengthening the capacities of the ministries of health as the coordinators of emergency response, as well as those of the emergency operations centers, to ensure a coordinated response, effective decision-making, timely management of information, and organization across different subnational levels.
 - c) Continue to incorporate countries into the IHHAN, as well as to establish, harmonize, and disseminate procedures for mobilizing medical and other supplies (loans, donations, replacements, etc.).

Action by the Directing Council

7. The Directing Council is invited to take note of this report and provide any comments it deems pertinent.

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