

FOREWORD

Asia, with a total of 160 disasters in 2008, remained the most affected continent as in previous years. Nine of the top 10 countries with the highest number of disaster-related deaths were in Asia. Four (China, the Philippines, Vietnam, and Australia) of the top ten countries most hit by reported events belong to the Western Pacific Region.

The World Health Organization (WHO) has been working for many years to strengthen the capacity for emergency preparedness and response in the Western Pacific Region. Through the Emergency and Humanitarian Action (EHA) unit, emphasis has been on appropriate action depending on the needs, collaboration with governments and other partners, and preparedness activities in order to enhance management of emergencies. WHO has provided technical support to varied emergencies and disasters over the past few years including the Asian tsunami in 2004, the Wenchuan earthquake in 2008 and the Philippine floods in 2009.

Training programs and resource materials have been produced in order to enhance capacity of countries in reducing risks and managing emergencies. These were achieved through partnership with national governments as well as with international health agencies.

These developments have not underscored the need to produce new knowledge on the broad area of health emergency management. As new approaches and actions are implemented, there is a need to document and share experiences in order to benefit societies and nations who are frequently challenged by various hazards.

Once again, WHO has collaborated with the Southeast Asian Ministers of Education Organization – Tropical Medicine and Public Health (SEAMEO-TROPMED) Network in order to produce this special issue of the Southeast Asian Journal of Public Health and Tropical Medicine. Through their experts in public health, both agencies have collaborated in the past to produce resource materials and enhance human resource development at the national and international levels for disaster preparedness and risk reduction. These materials and training activities included the Mass Casualty Management and Hospital Preparedness, the Regional Training Course on Disaster Risk Communication and the Advocacy Manual for Safe Hospitals.

The authors of the journal issue are health emergency experts from Western Pacific who have vast experiences in the area of preparedness, response, capacity building, and disaster risk management. Their experiences are based on actual work through Ministries of Health, universities and health agencies. These accounts serve as valuable insights from people in the field especially at the national level.

This special issue aims to strengthen scientific evidence summarizing experiences from the field and describing valuable lessons to further enhance disaster risk reduction and risk management strategies. This special issue walks the reader through various areas of health emergency management. After an overview of the regional status and challenges, it gives examples of implementation from Malaysia, Mongolia and Tonga. The issue also includes specific emergency activities and concerns namely rapid health assessment, mass casualty management and psychosocial issues. The Mental Health and Psychosocial Support Rapid Assessment Tool and Traditional Medicine Disaster Kit are new areas that show promise in emergency response. The issue also includes the value of a regional emergency and disaster

network. Training courses and outputs on Mass Casualty Management and Public Health Emergency Management in Asia and the Pacific are described.

The main challenge in studying emergency response and preparedness efforts is inherent to the nature of hazards themselves. One cannot simply run actual emergencies in a laboratory but instead find opportunities from actual events. Nevertheless, public health experts and managers, having been trained in applied sciences, follow a rational pattern in every emergency.

The approach closely mirrors the scientific method. What is the problem? How deep is the problem? What are hypothetical solutions? What was done in previous experiences? How are solutions planned and implemented? Which strategies work and which do not? What are the gaps, challenges and restraining factors? How can we learn from this experience? How should actions and strategies be further improved?

The framework of managing risk is not purely based on natural or medical sciences, but is also influenced by the social sciences. In this issue, the reader will appreciate the interplay of hazards within human society. Responses of communities to emergencies are intertwined with customs, traditions and beliefs. Activities at the national and local level are based on formal and informal political set-up and way of operations. These are further complicated by social determinants such as poverty, education, economic status, human capacity, resources, and the timing of an event within a year. Furthermore, these socio-cultural factors play a huge role on the effectiveness of preparedness and response activities in the long term.

Vast experiences in the Western Pacific Region have surely contributed to the rapidly growing science of health emergency management, disaster risk reduction and risk management. By sharing our experiences and reflecting on our gaps and achievements, we foster the way forward to a future that is secure and safe from emergencies and disasters.

Emergency and Humanitarian Action
World Health Organization
Regional Office for the Western Pacific