



International Strategy for Disaster Reduction



ISDR-BIBLIO

3

January 2008

Health, Disasters and Risk



United Nations



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ISDR-Biblio 3: Health, Disasters and Risk is in line with the theme of the 2008-2009 World Disaster Reduction Campaign on Hospitals Safe from Disasters: Reduce Risk, Protect Health Facilities, Save Lives. The World Health Organization (WHO) and its regional offices with some support from the Global Facility for Disaster Reduction and Recovery of the World Bank are partnering with the secretariat of the International Strategy for Disaster Reduction (UN/ISDR) on this campaign and on the preparation of the ISDR-Biblio 3.

ISDR-Biblio 3 addresses a more broader area than the campaign which focuses on the protection of health facilities in order to ensure they can function during and in the aftermath of disasters. It contains additional literature on health and disaster risk; disaster and emergency management; health facilities and services; environment: impact on health; climate change effects on health; mental health; mitigation and preparedness; public health; water and sanitation; and gender and health.

ISDR-Biblio 3 reflects one of the five priorities of the Hyogo Framework for Action 2005-2015:

- “ (ii) Social and economic development practices*
- (e) Integrate disaster risk reduction planning into the health sector; promote the goal of “hospitals safe from disaster” by ensuring that all new hospitals are built with a level of resilience that strengthens their capacity to remain functional in disaster situations and implement mitigation measures to reinforce existing health facilities, particularly those providing primary health care.”*

A CDROM complements ISDR-Biblio 3 with its compilation of key publications and documents available in PDF.

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**DRR10438****Annual disaster statistical review: numbers and trends 2006**

By P. Hoyois, J-M. Scheuren, R. Below, D. Guha-Sapir
Centre for Research on the Epidemiology of Disasters (CRED); UN/ISDR, 2007
52 pages

Every year, the Centre for Research on the Epidemiology of Disasters (CRED) reports on the effects of disasters on human populations. This first annual disaster statistical review is an analysis of the disaster figures in 2006 compared to 2005 and 2000-04. CRED has been publishing statistics on disasters every year since 1998 thanks to the generous support of the United States Agency for International Development Office of Foreign Disaster Assistance (USAID/OFDA). This support has allowed to maintain CRED's Emergency Events database, EM-DAT, which contains essential core data on the occurrences and effects of disasters in the world from 1900 until today. The main objective of EM-DAT is to inform humanitarian initiatives at national and international levels. It also rationalizes decision-making for disaster preparedness, as well as provides an objective base for vulnerability assessment and priority setting.

**DRR10462****Caring for kids after trauma, disaster and death: a guide for parents and professionals, second edition**

By Harold S. Koplewicz, Marylene Cloitre
New York University Child Study Center, 2006
64 pages

This guide has been prepared for use with all children and adolescents following a traumatic experience, but users should be particularly sensitive to the reactions of those children who are more likely than others to be at risk for developing problems. This would include children who had physical exposure, who witnessed the event, who were near the location of the disaster or incident, who had a preexisting mental health issue, whose caregivers experienced emotional difficulty, who had preexisting or consequent family life stressors such as divorce or loss of job, previous loss or trauma experience or those who have a limited support network.

**DRR10491****Cuba, weathering the storm: lessons in risk reduction from Cuba**

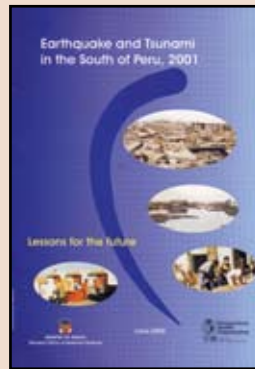
By Martha Thompson, Izaskun Gaviria
Oxfam America, 2004
64 pages

This report hopes to present a comprehensive overview of the Cuban model of risk reduction in disaster mitigation, preparedness, response and recovery and explore what may be adapted from this model in other countries. This report focuses on specific recommendations for Central America. The final section of this report draws out several mechanisms from the Cuban model that might be adapted to Central America based on that region's rich history of grassroots experience in social organization. Although the report aims for a complete explanation of the Cuban model, it does not pretend to provide an exhaustive review of risk reduction in Central America. The goal of "Weathering the Storm: Lessons in Risk Reduction from Cuba" is to provide information, offer ideas and provoke discussion to improve strategies of risk reduction at the community level in Central America, contributing to a culture of prevention.

**DRR10529****Disaster medicine**

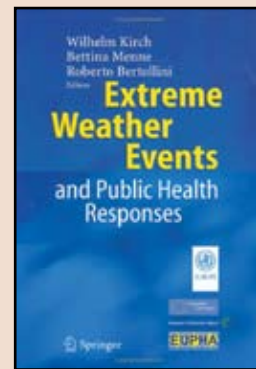
Edited by Gregory Ciottono
 Mosby, 2006
 984 pages
 ISBN 0323032532

This book offers comprehensive yet succinct guidance on the preparation, assessment, and management of a full range of disasters, both natural and man-made. More than 200 contributors carefully outline the basics of disaster management and provide guidance on more than 100 specific disaster situations. Part 1 offers an A to Z source for information on every aspect of disaster medicine and management. Part 2 features an exhaustive compilation of every conceivable disaster event, organized to facilitate fast reference in a real-time setting. The second part of the book also serves as a quick consult on disaster medicine.

**DRR8851****Earthquake and tsunami in the South of Peru, 2001: lessons for the future**

By the National Civil Defense System, Peru (INDECI), Pan American Health Organization (PAHO)
 INDECI, 2005
 4 pages

The book shows the damages and effects on the population and infrastructure of the southern regions of the country, caused by the most recent earthquake in Peru. Besides, the book summarizes the experience of the Ministry of Health delivering care for victims and population affected by the earthquake of June 23rd, 2001. From this point of view, it becomes a radiograph of health sector working to deliver care in emergencies and disasters, identifying weaknesses of the system as well as many strengths and examples of solidarity in the personnel of the Ministry of Health. The research yield twenty lessons, that can be grouped in three areas: planning, operation, and communications.

**DRR10524****Extreme weather events and public health responses**

By W. Kirch, B. Menne, R. Bertollini
 Springer, 2005
 303 pages
 ISBN 3540244174

Extreme weather events are those events which society is unable to cope with. They are by definition rare stochastic events. Europe has experienced on unprecedented rate of extreme weather events in the last 30 years. Heat waves occurred in France, Italy, Portugal, Russian Federation, Hungary and Bulgaria between 2000 and 2003. The annual number of warm extremes increased twice as fast as expected based on the corresponding decrease in the rate of cold extremes. On the other hand cold waves brought serious health problems to Northern Europe, Russian Federation and even Bosnia Herzegovina. In 2002 Romania suffered deleterious windstorms and public health responses were necessary. Last but not least, in recent years severe flooding occurred in many European countries like United Kingdom, Poland, Czech Republic, Austria, Italy and Germany causing enormous damages, e.g. in August 2002. On the basis of current predictions on climate, more extreme weather events have to be faced in the coming years and they are likely to be more severe. Thus appropriate actions have to be undertaken in order to protect the population and the countries affected.

**DRR10512****Facing hazards and disasters: understanding human dimensions**

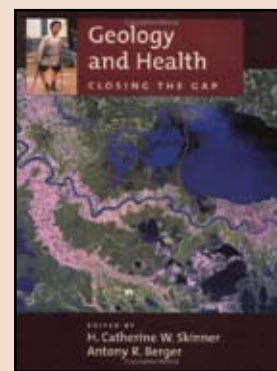
Committee on Disaster Research in the Social Sciences: Future Challenges and Opportunities, National Research Council (NRC), United States National Academies Press, 2006
408 pages; ISBN 9780309101783

Social science research conducted since the late 1970s has contributed greatly to society's ability to mitigate and adapt to natural, technological, and willful disasters. However, as evidenced by Hurricane Katrina, the Indian Ocean tsunami, the September 11, 2001 terrorist attacks on the United States, and other recent events, hazards and disaster research and its application could be improved greatly. In particular, more studies should be pursued that compare how the characteristics of different types of events—including predictability, forewarning, magnitude, and duration of impact—affect societal vulnerability and response. This book includes more than thirty recommendations for the hazards and disaster community.

**DRR10032****Flood hazards and health: responding to present and future risks**

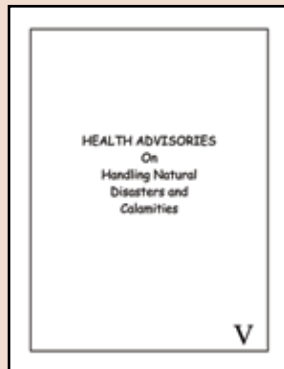
By Roger Few, Franziska Matthies
Earthscan, 2006
219 pages
ISBN 1844072150

With the tragedy of New Orleans still the focus of the world's media, this highly topical book combines rigorous analysis of the human health impacts of flooding with an appraisal of individual and societal response to those risks, and sets these findings in light of potential future increases in flood hazard as a result of climate change. Findings from epidemiological, environmental, social and institutional studies are brought together, with analysis rooted in an approach that emphasizes the developmental as well as environmental causes of flood risk and the socially differentiated nature of vulnerability and coping capacity. A detailed discussion of the global health impacts of floods and the nature of human response to the health risks posed is reinforced by new research evidence on specific health aspects of floods covering mental health, water and sanitation, local level responses and the responses of health systems.

**DRR10520****Geology and health: closing the gap**

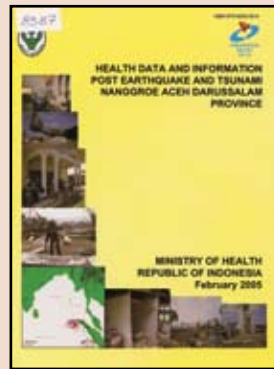
By H. Catherine W. Skinner, Antony R. Berger
Oxford University Press, 2003
192 pages
ISBN 0195162048

Geology and Health is an integration of papers from geo-bio-chemical scientists on health issues of concern to humankind worldwide, demonstrating how the health and well-being of populations now and in the future can benefit through coordinated scientific efforts. International examples on dusts, coal, arsenic, fluorine, lead, mercury, and water borne chemicals, that lead to health effects are documented and explored. They were selected to illustrate how hazards and potential hazards may be from natural materials and processes and how anthropomorphic changes may have contributed to disease and debilitation instead of solutions.

**DRR7041****Health advisories on handling natural disasters and calamities, V**

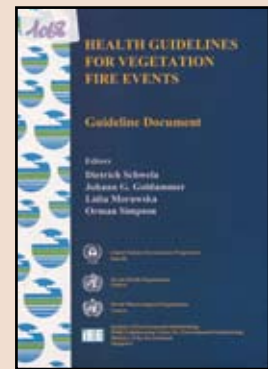
By the Department of Health (DOH),
Philippines, 1998
16 pages

The Department of Health's mission is to ensure accessibility and quality of health care to improve the quality of life of all Filipinos, especially the poor. This document addresses accessible advices on health care facing natural disasters and calamities through facts sheets on forest fires, infectious diseases, and El Niño and La Niña phenomenon, in English and Filipino languages.

**DRR8987****Health data and information post earthquake and tsunami Nangroe Aceh Darussalam province**

By the Ministry of Health,
Republic of Indonesia, 2005
27 pages
ISBN 979925406X

In order to develop a more comprehensive plan of action to overcome problems of the post earthquake and tsunami, many health assessments were conducted by various parties, including the Ministry of Health, WHO, World Bank, Universities, NGOs, and other health institutions. Nevertheless the obtained data/information were still scattered and segmented, unable to be formulated into a comprehensive policy option. In order to establish a policy action plan to execute post-tsunami rehabilitation and reconstruction, the Ministry of Health commanded analysis to the various health assessment results in providing useful basic data/information for the Ministry of Health and related parties.

**DRR1068****Health guidelines for vegetation fire events: guideline document**

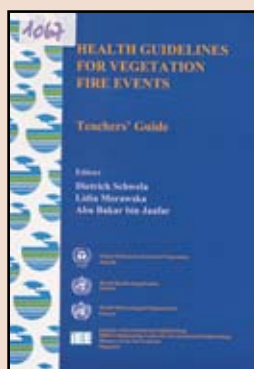
By Dietrich Schwela,
Lidia H. Morawska,
Johann G. Goldammer,
Orman Simpson
WHO/UNEP/WMO, 1999
219 pages

To some extent, many countries have already established policies, legislation and emergency response measures to control and combat vegetation fires and air pollution, and to minimize their impacts. For this reason, the development of a common set of health guidelines for the interest of all the countries involved is most timely. These guidelines help to greatly reduce the burden of excess mortality and preventable disability suffered by the poor. They also counter potential threats to health resulting from economic crises, unhealthy environments and risky behaviour. In this sense, the guidelines contribute to meeting two of the key challenges that were highlighted in the 1999 World Health Report and, thus, they contribute to making health a fundamental human right.

**DRR1066****Health guidelines for vegetation fire events: background papers**

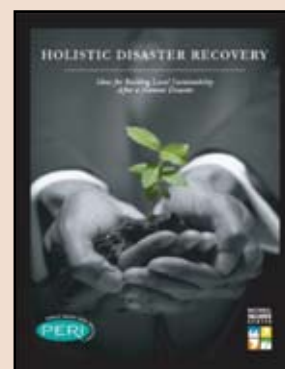
By Kee-Tai Goh, Dietrich Schwela, Johann G. Goldammer, Orman Simpson
WHO/UNEP/WMO, 1999
492 pages

This document forms a set of three publications which provide global advice and guidance on the management of vegetation fire events. The document of Background Papers contains background papers, prepared by experts of the different scientific communities, which cover the issues: ground based and remote monitoring of vegetation fire events; assessment of health impacts of vegetation fires; case studies of health effects of vegetation fires; and management of vegetation fire emergencies.

**DRR1067****Health guidelines for vegetation fire events: teachers' guide**

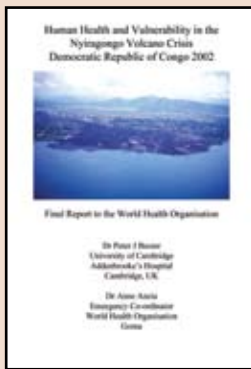
By Dietrich Schwela, Lidia H. Morawska, Abu Bakar bin Jaafar
WHO/UNEP/WMO, 1999
108 pages

This teachers' guide compiles educational materials that can be used in training courses on the health guidelines for vegetation fire events. The goal of this guide is to enable national trainees of the guidelines become trainers, and disseminate the information in the guidelines to the staff of national agencies, fire fighters and other stakeholders involved in the fighting, suppression and prevention of vegetation fires. It contains the complete set of slides used in three training courses and may serve for further training courses in all regions around the world, after appropriate updating and revision with respect to scientific and technological development.

**DRR10523****Holistic disaster recovery: ideas for building local sustainability after a natural disaster**

Produced by the Natural Hazards Center with funding from the Public Entity Risk Institute (PERI), 2006
140 pages

This handbook was originally produced in 2001 as a guide for local practitioners on how to build sustainability into a community during the recovery period after a disaster. In the fall of 2005, after witnessing the catastrophic devastation of the Gulf Coast of the United States from Hurricanes Katrina and Rita, and as the nation was embarking on a recovery period of unprecedented scale in its history, the Natural Hazards Center took a second look at Holistic Disaster Recovery and how it could be improved to help communities take a comprehensive and long-term approach to recovery. The new version contains updated resources, including a more specific focus on the Hurricane Katrina recovery, and new examples of recovery success stories. Holistic Disaster Recovery encourages communities to incorporate as many of the principles of sustainability into the recovery process as possible, including environmental quality, economic vitality, quality of life, social equity, citizen participation and disaster resiliency. It is intended for local government officials and staff, state planners, activists, emergency management professionals, disaster recovery experts, mitigation specialists, and others who help communities recover from disaster.

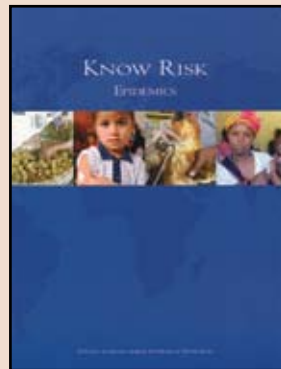


DRR10437

Human health and vulnerability in the Nyiragongo volcano crisis, Democratic Republic of Congo, 2002: final report to the World Health Organisation

By Dr Peter J Baxter, Dr Anne Ancia
World Health Organisation (WHO),
2002; 60 pages

This document reports a vulnerability assessment of the Nyiragongo volcano crisis at Goma undertaken for the World Health Organisation (WHO), based on an analysis of the impact of the eruption on January 17/18, 2002. The relatively small loss of life in the January 2002 eruption (less than 100 deaths in a population of 500,000) was remarkable, and psychological stress was reportedly the main health consequence in the aftermath of the eruption. A cholera outbreak was prevented by the rapid intervention of NGO's and other agencies to provide chlorinated drinking water from Lake Kivu. This report is a contribution for health sector preparedness and the involvement of the health sector in the on-going risk management of this crisis. Some important findings on the vulnerability of the population have emerged which relate to the eruption occurring in a region already affected by a complex humanitarian emergency and these should be considered in emergency planning and preparedness.



DRR9312

Know risk epidemics

By Sean Nicklin
Tudor Rose, 2005
95 pages
ISBN 0953614042

Know Risk Epidemics specifically addresses the ways that regional, national and local authorities can increase preparedness for emerging infectious diseases. The book draws on the extensive knowledge of the scientific and academic community to identify future pandemic threats and suggest ways of combating them successfully. It contains a wide range of reports, policy documents and case studies from individual United Nations agencies, public authorities, non-governmental organisations and commercial specialists in the field of emerging infectious diseases.



DRR9614

Moving beyond the tsunami: the WHO story

By the World Health Organization
(WHO), 2005
143 pages

Some dates and events are stamped forever in the world's collective memory. 26 December 2004 is one such date, when hundreds of thousands of people were killed, and millions were affected, by a severe earthquake and tsunami. Among the countries affected were six Member States of WHO's South-East Asia Region. The scale of devastation and the large number of people affected, across so many countries, was unprecedented. The disaster left in its wake formidable public health challenges which needed immediate response. These challenges, however, have been used as opportunities to improve health systems to address the needs of the people in the long term. As we move from the emergency phase to the rehabilitation phase, local health capacity and infrastructure have been fortified, and people trained to serve their communities better. "Moving beyond the Tsunami: The WHO story" narrates how the health needs of the affected people are being met. This book enables us to keep in mind the lessons learnt from the disaster, so that we may serve the people better.



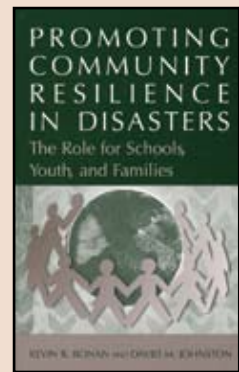
DRR8214
Natural disasters and the impacts on health
 By Gerard March
 University of Western Ontario, 2002
 18 pages

This report will attempt to catalogue and briefly discuss the immediate medical and long-term health effects of a natural disaster. Other topics such as the disruption of a community's critical infrastructure, vulnerable groups within populations, and common misconceptions in disaster response will also be reviewed. Finally, mitigation and loss reduction strategies will be introduced in the context of injury prevention and promotion of health benefits.



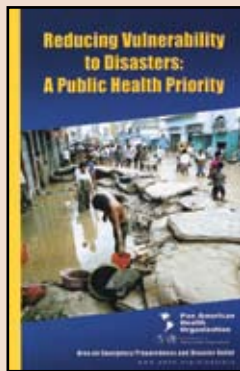
DRR10421
Natural disasters, coping with the health impact: disease control priorities project
 By the DCCP, Fogarty International Center of the U.S. National Institute of Health, World Bank, WHO, United States PRB, Bill and Melinda Gates Foundation, 2007; 4 pages

According to the International Federation of the Red Cross and Red Crescent Societies, in 2002, international disasters affected 608 million people and killed more than 24,000. Disasters are unusual public health events that overwhelm the coping capacity of the affected community. A public health approach to disaster risk management should focus on decreasing the vulnerability of communities through prevention and mitigation measures and increasing the coping capacity and preparedness of the health sector and community. This fact sheet will focus on cost-effective solutions to address natural disasters.



DRR9866
Promoting community resilience in disasters: the role for schools, youth, and families
 By Kevin Ronan, David Moore Johnston
 Springer, 2005
 XII-212 pages
 ISBN 0387238204

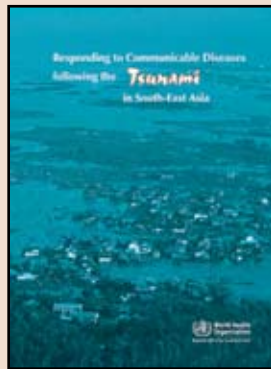
When large-scale disasters occur, they typically strike without warning—regardless of whether the cause is natural, such as a tsunami or earthquake, or human-made. And immediately following a hazardous event or mass violence, two of the most vulnerable groups at risk are a community's children and their family members. This book offers both clinicians and researchers guidance on hazard preparation efforts as well as early response and intervention practices. It emphasizes an evidence- and prevention-based approach that is geared toward readiness, response, and recovery phases of natural and human-made disasters. This book is specifically geared toward assisting those who work in school or community settings—including school psychologists and counselors, emergency managers and planners, and all mental health professionals—not only to increase resilience after a disaster, but to respond and intervene as quickly as possible when catastrophe strikes. It will assist those charged with the responsibility for helping others respond to and rebound from major traumas, especially clinicians and other professionals who work with children and their family members.

**DRR8729**

Reducing vulnerability to disasters: a public health priority

By the Pan American Health Organization (PAHO), World Health Organization (WHO)
6 pages

Disasters are, first and foremost, a social and health issue. In the last decade, more than 24 million persons in Latin America and the Caribbean have lost their lives, loved ones, homes, workplaces and possessions to natural or man-made disasters. Disasters have damaged or destroyed hospitals and health facilities, leaving many without access to health services.

**DRR9765**

Responding to communicable diseases following the tsunami in South-East Asia

By the World Health Organization (WHO), 2005
40 pages

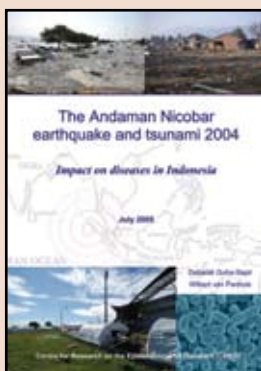
Communicable diseases, especially those that are epidemic-prone, are the most significant health threat to the internally displaced population after a catastrophe like the Tsunami. It is a document that highlights the challenges faced and describes the key technical activities that were carried out by WHO and national counterparts in all the six tsunami-affected countries to detect prevent and control the communicable diseases.

**DRR3809**

Should disaster strike... Health in the International Decade for Natural Disaster Reduction

By the World Health Organization (WHO), 1991
24 pages

The document lists WHO's programmes and activities for the International Decade for Natural Disaster Reduction. Contents: Disaster myths and realities – Interview with Hiroshi Nakajima, M.D., Ph.D. – Natural disasters from Pompeii to Krakatoa 1179 – Natural disasters in our time – Man-Made disasters – What everyone should know about disasters – How children perceive disasters – Disasters and response 886 – Economics of disaster – Opportunities and challenges in natural disaster reduction 1195 – Health and natural disaster reduction – Disaster preparedness in health 1049 – How preparedness works: Three scenarios drawn from the field 569 – WHO's role in the international decade for natural disaster reduction 1087 – Technology's role in disaster preparedness – WHO's emergency kit – A WHO preparedness checklist 821 – Thinking the unthinkable.

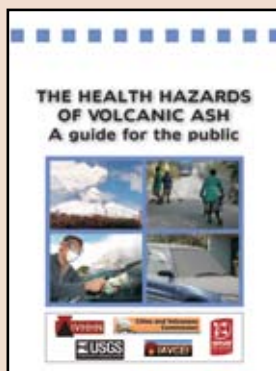


DRR9450

The Andaman Nicobar earthquake and tsunami 2004: impact on diseases in Indonesia

By Debarati Guha-Sapir, Wilbert Van Panhuis
Centre for Research on the Epidemiology of Disasters (CRED), 2005; 24 pages

The human impact of the tsunami on December 26 2004 was enormous. Indonesia, Sri Lanka, India and Thailand were worst hit with Indonesia bearing the greatest burden with nearly three-quarters of all dead and over half the homeless. Communicable disease outbreaks were foreseen in the aftermath of the disaster and the large number of dead bodies gave rise to widespread fear of epidemics. Evidence from previous natural disasters however, has shown that disease outbreaks are a very rare occurrence and it is well established that dead bodies do not pose a health threat. The objectives were 1) to describe the patterns and relative importance of major diseases as a consequence of the tsunami, 2) to compare these to the pre-existing disease profiles in Aceh before the disaster, 3) to identify key recommendations for improvement of disease control and surveillance after disasters.



DRR10476

The health hazards of volcanic ash: a guide for the public

By the International Volcanic Health Hazard Network (IVHHN), Cities and Volcanoes Commission, GNS Science and the United States Geological Survey (USGS)
15 pages

This document has been prepared to promote the safety of those who experience volcanic ashfall. This guide explains the potential health effects of volcanic ash and gives details on how to protect yourself and your family in the event of a volcanic ashfall.

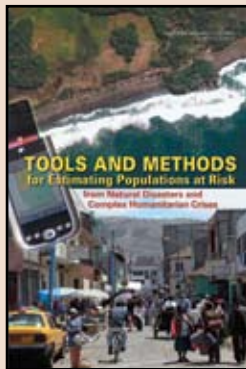


DRR9887

The social contours of risk, volume 2: risk analysis, corporations and the globalization of risk

By Jeanne X. Kasperson, Roger E. Kasperson
Earthscan, 2005
326 pages

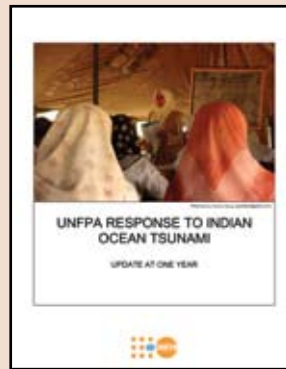
Volume 2 centres on the analysis and management of risk in society, in international business and multinationals, and globally. The 'acceptability' of risk to an individual depends on the context, whether the larger society or in, say, a corporate framework. Their work clarifies the structures and processes for managing risks in the private sector, and the factors that produce or impede effective decisions. Corporate culture is crucial as they show in determining risk management. They analyse the transfer of corporate risk management systems from industrial to developing countries, and how globalization is spreading and creating new kinds of risk –the combination of traditional and modern hazards presented by climate change, technology transfer and economic growth. They describe the new priorities and capacities needed to deal with these enhanced vulnerabilities around the globe.

**DRR10513**

Tools and methods for estimating populations at risk from natural disasters and complex humanitarian crises

By the National Research Council (NRC), United States
National Academies Press, 2007
264 pages; ISBN 0309103541

Worldwide, millions of people are displaced annually because of natural or industrial disasters or social upheaval. Reliable data on the numbers, characteristics, and locations of these populations can bolster humanitarian relief efforts and recovery programs. Using sound methods for estimating population numbers and characteristics is important for both industrialized and developing nations. Ensuring that the data are geographically referenced for projection onto maps is essential. However, good data alone are insufficient. Adequate staff training and strong organizational and political desire to maintain and use the information are also required. This book, reviews the main methods and tools for making estimates of subnational populations and makes several recommendations to improve the collection and the use of population data for emergency response and development.

**DRR10426**

UNFPA response to Indian Ocean tsunami: update at one year

By the United Nations Population Fund (UNFPA), 2006
37 pages

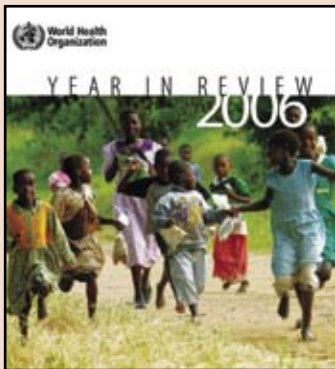
This report marks the year-end update on UNFPA's activities following the massive devastation caused by the Indian Ocean Tsunami on December 26th 2004. Thanks to the outpouring of generous donor support, UNFPA has been part of the initial relief and recovery process and is now focused on the reconstruction phase, together with its wide network of partners, sister UN agencies, non-governmental organizations (NGOs) and community based youth, women and religious organizations. A year after the Indian Ocean Tsunami, work is ongoing to restore reproductive health services and address psychosocial needs in affected communities. Although much has been achieved, the humanitarian needs and challenges are still enormous and many complex issues (issues relating to equity, land tenure, sustainable livelihoods, planning, intersectoral and district level coordination etc) still need to be resolved.

**DRR10478**

What parents can do: helping children and adolescents cope with violence and disasters, for parents of children exposed to violence or disaster

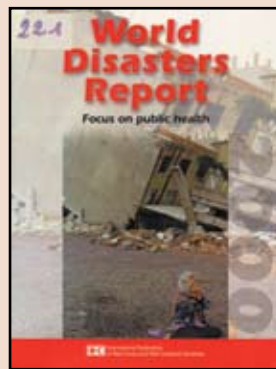
By the U.S. Department of Health and Human Services, National Institute of Mental Health (NIMH), 2006; 15 pages

Violence or natural disasters can cause trauma in young people. Trauma is hurt or harm. It can be hurt to a person's body. It can be harm to a person's mind. The National Institute of Mental Health (NIMH) works to help children who experience trauma. Other Federal agencies also provide help. Parents and family members play important roles. They help children who experience violence or disaster. They help children cope with trauma. They help protect children from further trauma. They help children get medical care and counseling. They also help young people avoid or overcome emotional problems. These problems can result from trauma. This fact sheet provides steps parents can take.

**DRR10429****WHO year in review 2006**

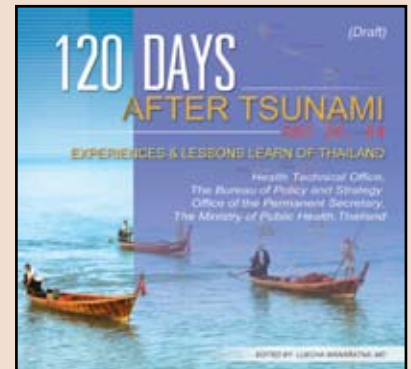
By the World Health Organization (WHO), 2007
38 pages

The year saw some important achievements and some setbacks, some steady progress and some surprises requiring emergency action. The work of many people helped to propel the momentum to reach the health-related goals set out in the Millennium Declaration. These goals aim to reduce childhood and maternal mortality and lower the number of deaths caused by the major infectious diseases: HIV/AIDS, tuberculosis, and malaria. Above all, when we look back over the year, we see the huge diversity of challenges – from the dramatic rise of chronic diseases to the looming threat of an influenza pandemic, from persistent malnutrition in Africa to an epidemic of childhood obesity in Europe. The World Health Report 2006 drew attention to a critical shortage of health workers that is jeopardizing the delivery of essential care in 57 countries. This problem combines with the weakness of delivery systems, especially in reaching the poor, to define one of the greatest obstacles to progress in public health.

**DRR221****World Disaster Report 2000: focus on public health**

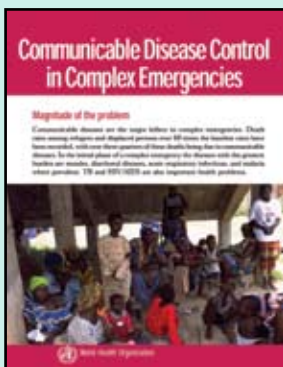
By the International Federation of Red Cross and Red Crescent Societies (IFRC), 2000
240 pages

Published annually since 1993, the World Disasters Report brings together the latest trends, facts and analysis of the world's evergrowing humanitarian crises. The 2000 edition examines: Chronic public health disasters, Assessing and targeting public health responses, AIDS in Africa - from disease to disaster, Democratic People's Republic of Korea - where aid can make a difference, Chernobyl - cancers still rising 14 years on, Kososo - the long road to recovery, Surprise upturn in aid budgets, Steps towards an international disaster response law, A comprehensive disasters database, Overview of 1999 International Federation operations, National Red Cross and Red Crescent society contacts.

**DRR9079****120 days after tsunami Dec 26, 04: experiences and lessons learn of Thailand (draft)**

By the Health Technical Office, Bureau of Policy and Strategy, Office of the Permanent Secretary, Ministry of Public Health, Thailand (MOPH), 2005
48 pages

This report was prepared by reviewing documents from various organizations both public and private agencies in Thailand that publicized after the occurrence of Tsunami Disaster. The Ministry of Public Health organized a technical conference on Tsunami Disaster in Phuket Province during February 23rd – 24th, 2005. This conference aimed at setting up a forum for experts and health care personnel to share their experiences and opinions on Tsunami Disaster. More than 300 participants from various organizations attended this conference. They were health personnel from MOPH, universities, professional societies, Royal Thai Police Bureau, the Thai Red Cross Society and private organizations. Evidence-based data and information from the conference had been presented in this report.

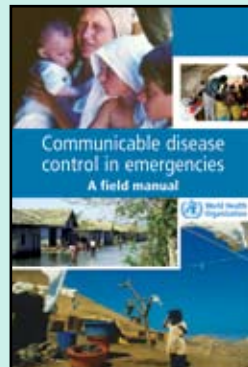


DRR7431

Communicable disease control in complex emergencies

By the World Health Organization (WHO), 2003
6 pages
ISBN 9241546166

Communicable diseases are the major killers in complex emergencies. Death rates among refugees and displaced persons over 60 times the baseline rates have been recorded, with over three quarters of these deaths being due to communicable diseases. In the initial phase of a complex emergency the diseases with the greatest burden are measles, diarrhoeal diseases, acute respiratory infections, and malaria where prevalent. TB and HIV/AIDS are also important health problems.

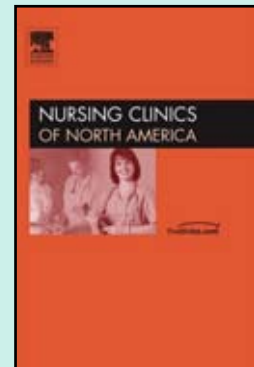


DRR10375

Communicable disease control in emergencies: a field manual

By M.A. Connolly
World Health Organization (WHO), 2005
295 pages

This manual is intended to help health professionals and public health coordinators working in emergency situations prevent, detect and control the major communicable diseases encountered by affected populations. Emergencies include complex emergencies and natural disasters (e.g. floods and earthquakes). The term "complex emergencies" has been coined to describe "situations of war or civil strife affecting large civilian populations with food shortages and population displacement, resulting in excess mortality and morbidity".



DRR10527

Disaster management and response, an issue of nursing clinics

By Judith Stoner Halpern, Mary W. Chaffee
Saunders, 2005
240 pages
ISBN 1416027386

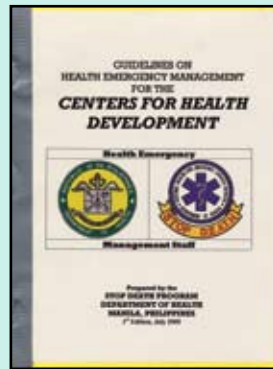
As our nation becomes more vigilant with regard to possible threats on our security, our health care system must become more prepared to handle crisis and disaster on a large scale. Similarly, forces of nature such as hurricanes, earthquakes, and tsunamis demand the preparedness of our health care providers and nurses in particular. The book addresses the changes in nursing practice with regard to homeland security, emergency preparedness, and disaster care. The issue contains articles on a national curriculum in emergency preparedness for nurses, the impact of the disaster experience on culture, self, and identity, providing pediatric care in a mass casualty incident, and the human factors in a disaster.

**DRR10446**

Guidelines on best public health practices in emergencies for district health workers

By the Epidemiology and Disease Control Division (EDCD), Ministry of Health, Department of Health Services, Nepal, and World Health Organization (WHO), 2003; 51 pages

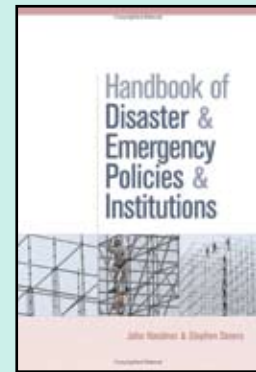
The Guidelines target District Rapid Response Teams and outline the best practices and standards for public health response during emergencies. Apart from outlining the common hazards and threats in Nepal and the responsibilities of the rapid response teams in emergencies, the Guidelines also highlight key standards and indicators from the SPHERE project.

**DRR7065**

Guidelines on health emergency management for the centers for health development

By the Department of Health (DOH), Philippines, 2000
62 pages

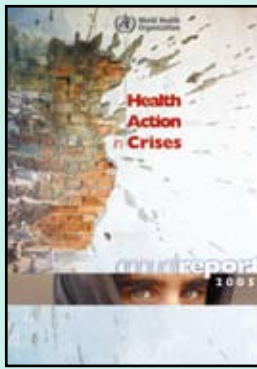
The Center for Health Development is responsible for field operations of the Department in its administrative region and for providing catchment area with efficient and effective medical services. It is tasked to implement laws, regulation, policies and programs. It is also tasked to coordinate with regional offices of the other Departments, offices and agencies as well as with the local governments.

**DRR10503**

Handbook of disaster and emergency policies and institutions

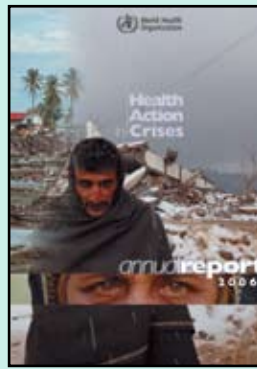
By John Handmer, Stephen Dovers
Earthscan, 2007
160 pages
ISBN 1844073599

From the Asian tsunami to hurricanes Katrina and Rita to the recent earthquake in Pakistan, disasters both natural and human-induced are leading to spiralling costs in terms of human lives, the destruction of homes, businesses, public buildings and infrastructure and the resulting financial and human crises that inevitably follow in the wake of such catastrophes. Yet the failures in planning for, and responding to, such disasters can often be traced to poor disaster policies that are unsuited to the emerging scales of the problems they confront and the lack of institutional capacity to implement plans and manage disasters when they happen. This handbook seeks to overcome this mismatch and to guide the examination and development of a policy and institutional framework and associated strategies. In particular, for the first time it brings together into a coherent framework the insights of public policy, institutional design and emergency and disaster management, stressing the cognate nature of policy and institutional challenges between disasters and sustainability.

**DRR10112****Health action in crises: annual report 2005**

By the World Health Organization (WHO), 2006
22 pages

The number of people affected by disasters continued to rise in 2005. The year began with the response to the South East Asia tsunami and finished with the response to the South Asia earthquake. Each year, one in five WHO Member States experiences a crisis that endangers the health of its people. Estimates indicate that more than 150 million people were directly affected by natural disasters. Moreover, for each major emergency that is reported by the media and recorded in international databases, there are dozens of smaller-sized emergencies that strike local communities, affecting the development and the health of their populations with little or no external assistance to help in relief and recovery operations. Investing in community capacity-building for emergency preparedness and response is the only sustainable answer to this situation.

**DRR10424****Health action in crisis: annual report 2006**

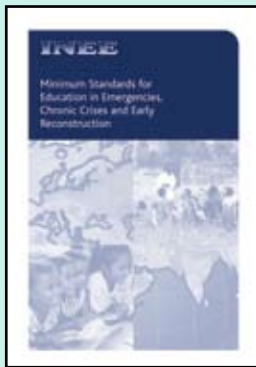
By the World Health Organization (WHO), 2007
34 pages

The year 2006 saw major developments in the emergency and humanitarian arena. Rarely has health and humanitarian action been so high on the international agenda. In St Petersburg in July 2006, G8 Heads of State and Government reaffirmed the importance of the coordinating role played by the United Nations in emergency and humanitarian operations, and pledged to further enhance the UN's effectiveness. G8 leaders explicitly recognized the central importance of health in emergencies and welcomed WHO's efforts in strengthening its operational capacity in crises. They also declared their support for emergency preparedness programmes to help the health sector meet the challenges posed by emergencies. This document describes WHO's emergency activities throughout 2006.

**DRR9832****Humanitarian medicine: a compilation of the leading articles in the Journal of Humanitarian Medicine, 2000-2004**

By S. William A. Gunn, Michele Masellis
International Association for Humanitarian Medicine
Brock Chisholm, 2005, 255 pages

Disaster unfortunately, and help fortunately, are as old as humanity. As long as man has had a beating heart, some adrenaline, and a reflex for protection, he has had compassion and an urge to assist those in distress. Historically, assistance in emergencies has evolved from early wound dressing and pain relief, to specialized techniques like emergency medical services and Disaster Medicine; to institutionalized mechanisms like the Red Cross to concepts, like disaster prevention, and socio-political arrangements, like Humanitarian Medicine. Humanitarian Medicine is a compilation of the leading articles in the Journal of Humanitarian Medicine in its first four volumes, December 2000 to December 2004, and marks the Twentieth Anniversary of the Association. It is offered to the international and humanitarian health community.

**DRR10444**

Minimum standards for education in emergencies, chronic crises and early reconstruction

By the Inter-Agency Network for Education in Emergencies (INEE), 2004
78 pages
ISBN 1580300340

The minimum standards for education in emergencies, chronic crises and early reconstruction are both a handbook and an expression of commitment, developed through a broad process of collaboration, that all individuals – children, youth and adults – have a right to education during emergencies. They echo the core beliefs of the Sphere Project: that all possible steps should be taken to alleviate human suffering arising out of calamity and conflict, and that people affected by disaster have a right to life with dignity.

**DRR9774**

Protecting and assisting older people in emergencies: network paper, number 53, December 2005

By Jo Wells, Humanitarian Practice Network (HPN)
Overseas Development Institute (ODI), 2005
30 pages; ISBN 0850037794

This paper summarises the major policy and practice issues affecting humanitarian protection and assistance for older people, and recommends measures to ensure that older citizens caught up in humanitarian crises enjoy equal rights and a fair share of humanitarian resources, and are included in decision-making in programmes that affect their lives. It aims to add to the small body of work relating to protection and assistance issues specific to older people. HelpAge International is one of the few international organisations that works for older people, and its emergency operations are limited. Therefore, the paper highlights gaps in knowledge and areas where further research and work are required, in the hope of stimulating further progress in this important area.

**DRR10473**

Reducing the impact of crises on health

By the World Health Organization (WHO), 2006
20 pages

In 2004, WHO launched a three-year initiative to dramatically scale up Health Action in Crises (HAC) operations. The strategy will make the entire Organization more reliable and effective in supporting health stakeholders in crises. The Three Year Programme (TYP) aims at harnessing the resources of the many specialized technical and administrative programme of WHO and catalysing organizational change for improved, predictable health action in emergency preparedness, response and early recovery. It focuses on improving WHO's capacity for delivering its core functions in crises settings and aims at ultimately minimizing death and suffering in emergencies.

**DRR7589****Reducing the impact of crises on people's health**

By the World Health Organization (WHO), 2004
14 pages

During the last few years, the international response to food shortages in crises has greatly improved through a combination of better specifications of what is required, focused leadership, effective coordination, responsive delivery mechanisms and careful monitoring. We need to achieve the same results for the health aspects of crises. The challenge is substantial. The international community is scaling up its work for people at risk of crises. This brochure describes the contribution of the World Health Organization (WHO) to this endeavour.

**DRR7068****SUMA: Integral Humanitarian Supply Management System Practices version 5.2**

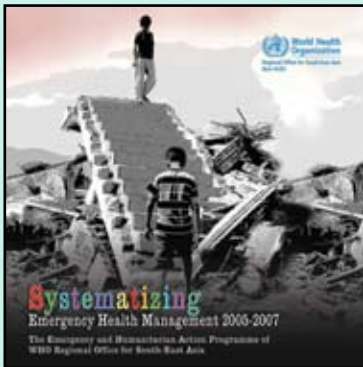
By the Pan American Health Organization (PAHO), World Health Organization (WHO), 2000
40 pages

The Humanitarian Supply Management System (SUMA), started as a joint initiative of the Latin American and Caribbean countries that, with the technical cooperation of the Pan American Health Organization, the Regional Office of the World Health Organization, developed with the financial support during 8 years from the government of the Netherlands and the support of other governments like England, United States, Canada, Germany and the European Community Office for Humanitarian Affairs, ECHO. Its principal objective is to improve the management of humanitarian assistance, by strengthening the national capacity for the effective management of the humanitarian supplies, so that these supplies arrive at time and effectively to the affected population. SUMA helps to manage the incoming supplies, to classify them at the point of entry into the country, with the aim to assign priorities for the distribution of the items, according to the needs of the affected population. The system makes it possible to generate information about the flow of donations and the type and characteristics of the supplies.

**DRR7056****SUMA: the WHO/PAHO Supply Management System**

By the Pan American Health Organization (PAHO), World Health Organization (WHO), 2001
6 pages
ISBN 9275123446

The massive influx of donations that pours into a disaster-stricken country often overwhelms national authorities, causing logistical and management problems. Whether local or foreign in origin, much of the aid that arrives is neither requested nor appropriate for current needs. SUMA is a computerized supply management system initially targeted health-related supplies in the aftermath of a disaster. At the urging of most Latin American countries, the scope of SUMA was broadened to include all relief items.

**DRR10450**

Systematizing emergency health management 2005-2007: the Emergency and Humanitarian Action Programme of WHO Regional Office for South-East Asia

South East Asia Regional Office (SEARO), WHO, 2007
36 pages; ISBN 9789290223115

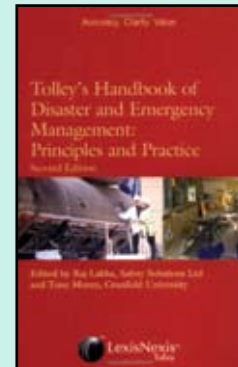
Clearly, in terms of disasters, the South-East Asia region has been particularly hard-hit in the recent past. The earthquake and tsunami of 26 December 2004, which affected more than six countries of this part of the world, was one of the worst natural disasters in recent history. Recovery efforts are still on today, more than two and half years after the waves swept the shorelines of the region. The earthquake in Yogyakarta, floods in Indonesia, India, Thailand and Nepal, and regular monsoon events in countries such as Bangladesh and Myanmar emphasize that there are risks and hazards to contend with regularly. The booklet *Systematizing Emergency Health Management 2005-2007* highlights key events and developments in the Emergency and Humanitarian Action programme in the last three years, and outlines the strategic directions of the programme in the coming years.

**DRR7432**

The role of laboratories and blood banks in disaster situations: a practical guide developed at the workshop held in Managua, Nicaragua, on 7 June 2001

By the Pan American Health Organization (PAHO), WHO, 2002
27 pages; ISBN 9275123802

Recent disasters in Central America, such as Hurricanes Mitch and Georges in 1998 and the El Salvador earthquake in 2001, have underscored the importance of including the activities of public health laboratories, clinical laboratories, and blood banks in the health sector's emergency plans. The purpose of this guide is to sensitize and orient health authorities, laboratory directors, laboratory technicians, and blood bank personnel to the identification of responsibilities and functions of laboratory and blood bank services in disaster situations, taking into account priorities, needs, and the local capacity for immediate response. The response of health services to disaster situations will be improved when activities to mitigate and reduce vulnerability and to restore and reorganize laboratory and blood bank services are incorporated in emergency plans.

**DRR10528**

Tolley's handbook of disaster and emergency management, second edition: principles and practice

By Raj Lakha, Tony Moore
Butterworth-Heinemann, 2003
688 pages
ISBN 0406972702

As a result of recent high-profile disasters the area of disaster management is becoming increasingly significant and recognises within both the public and private sectors, spanning the areas of health and safety, occupational health and risk and facilities management. A growing number of organisations are undertaking measures to protect themselves against potential disaster, and many find themselves faced with this daunting responsibility. This book collates all the key components of Disaster and Emergency Management in one handbook. Written specifically for professionals with responsibility for health and safety, crisis, disaster and emergency management and incident prevention, it is designed to help readers understand and formulate a disaster and emergency management policy for their workplace. It will also help organisations plan to ensure business continuity and safeguard the health and safety of their staff in the event of a Disaster.

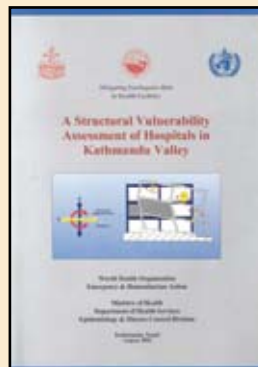
**DRR10542**

A practical tool for the preparation of a hospital crisis preparedness plan, with special focus on pandemic influenza

By Enrico Davoli

World Health Organization, Regional Office for Europe (WHO/EURO), 2006
34 pages

The usefulness of drafting a Crisis Preparedness Plan (CPP) is now undisputed. This document aims to offer a practical tool for planning appropriate measures to be adopted by a hospital and/or more generally a health facility in order to be better prepared to face a critical situation. The tool is the result of concerted contributions of various experts in the field of emergency services management. The recommendations provided are tailored to a medium-to-large hospital with various specialties included, and should be adjusted as appropriate at the different levels of health care of the health facility. This document provides a list of issues that are considered by the contributors as essential themes that must be tackled in all CPPs for hospitals. Each issue represents concepts and problems that are likely to be universally present in all critical situations, emergency or disasters and cannot be set aside when drafting the CPP. The document provides specific measures and hints for preparedness in the event of communicable disease epidemic, such as the possible influenza pandemic.

**DRR10445**

A structural vulnerability assessment of hospitals in Kathmandu Valley

By NSET Nepal, WHO, Epidemiology and Disease Control Division (EDCD), Ministry of Health, Department of Health Services, Nepal
110 pages

This report from the National Society for Earthquake Technology (NSET) summarizes the study and assessment of the structural vulnerability of 14 hospitals in Kathmandu Valley and outlines recommended mitigation measures to improve resilience and performance.

**DRR10497**

"Build back better": reconstruction and rehabilitation strategy, health sector

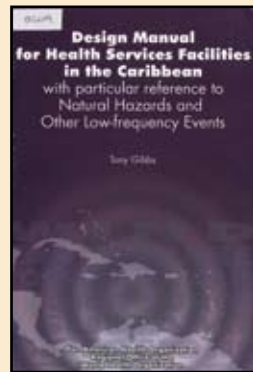
By the Earthquake Reconstruction and Reconstruction Authority (ERRA), Government of Pakistan (GOP)
52 pages

ERRA's health policy delineates guiding principles, guidelines and strategy for reconstruction in the earthquake-affected districts. The health component of Government's 'Build Back Better' policy is based on the humanitarian charter for minimum standards for health care, including the right to 'health for all' and respect of the dignity of the population affected by the disaster. The health strategy has been constructed on the key principles of equity, access to essential health care, timeliness, results, accountability, placement of strong local leadership and strategic coordination of the effort. The strategy also envisages addressing the special needs of vulnerable population, especially women and children who are the major clients of the health system, and the needs of persons with disabilities and psychological trauma.

**DRR10485****Building better health: a handbook of behavioral change**

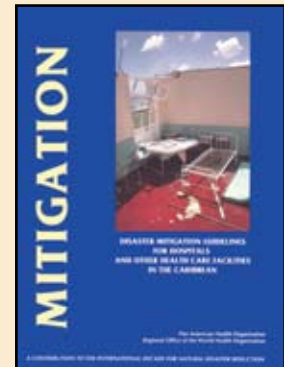
By C. David Jenkins
Pan American Health Organization (PAHO), 2003
378 pages
ISBN 9789275115909

This handbook blends tried-and-true disease prevention practices and behavioral science principles into a hands-on manual for health workers, community health promoters, nurses and family physicians. Many others, such as social workers and teachers, can also see here how to promote health and prevent disease. The book offers step-by-step instruction in behavioral change techniques to use at the society, community, family, and individual levels.

**DRR8209****Design manual for health services facilities in the Caribbean: with particular reference to natural hazards and other low-frequency events**

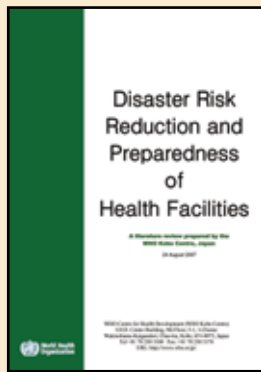
By Tony Gibbs
PAHO/WHO, 2003
26-xviii pages; ISBN 9768080558

This handbook is the result of experience and expertise painfully gained during and after natural disasters in the Caribbean. It emphasizes the importance of assessing the vulnerability of health facilities in order to reduce the adverse effects of future events. It also strives to include specific measures for disaster mitigation and preparedness when planning healthcare facilities. The manual focuses on the physical vulnerability of health facilities to strong winds, seismic events, torrential rains and other low-frequency phenomena. It is aimed at the owners and administrators of health facilities and those in charge of designing and building such projects.

**DRR10486****Disaster mitigation guidelines for hospital and other health care facilities in the Caribbean**

By the Pan American Health Organization (PAHO), World Health Organization (WHO), 1992
92 pages

This booklet has been prepared for non-engineers, such as building owners, health care officials, managers, and maintenance personnel. Its twofold purpose is to inform those officials involved in the planning, operation and management of health care facilities of the potential magnitude of the impact caused by natural hazards, and to provide a useful tool to assist them in the risk mitigation of existing facilities and in the reliable design of new constructions.

**DRR10416****Disaster risk reduction and preparedness for health facilities**

By the World Health Organization Centre for Health Development (WHO Kobe Centre), Japan, 2007
25 pages

Health facilities, including hospitals, are facilities exposed to natural hazards. Considering the critical need for these institutions in the aftermath of disasters, priority should be put on identifying and reducing the weaknesses of existing facilities and on improving the building standards for new construction. When it comes to disaster resiliency standards, the bar is inevitably raised in the case of health facilities: not only should they remain structurally viable but they must also allow the continuity of healthcare activities. This literature review was prepared to assess the extent of our knowledge on health facility disaster risk reduction and disaster preparedness to better achieve the goals of the Hyogo Framework for Action by identifying the priority areas of action for the WHO Kobe Centre.

**DRR8927****Field hospitals in the aftermath of sudden-impact disasters, a help or a hindrance?**

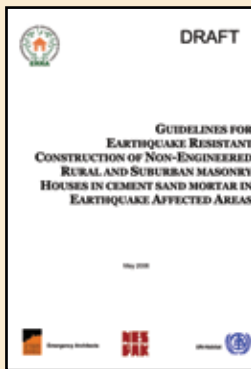
By the Pan American Health Organization (PAHO), World Health Organization (WHO), 2003
8 pages

This leaflet is an abstract from the WHO/PAHO Guidelines adopted at the international meeting of "Hospitals in Disasters-Handle with Care", San Salvador, El Salvador 8-10 July 2003. At the WHO/PAHO-sponsored meeting, the pros and cons of the use of foreign field hospitals in the aftermath of natural disasters were discussed and draft Guidelines were examined and approved. The guidelines propose conditions that field hospitals and their staff should meet according to the length of time they will remain in a disaster-stricken country. They also outline issues that authorities in donor countries should consider before mobilizing a field hospital. This document is a summary brochure of the guidelines. It was developed to promote their use by decision-makers.

**DRR10417****Field manual for capacity assessment of health facilities in responding to emergencies**

By the World Health Organization (WHO), 2006
186 pages
ISBN 9290612169

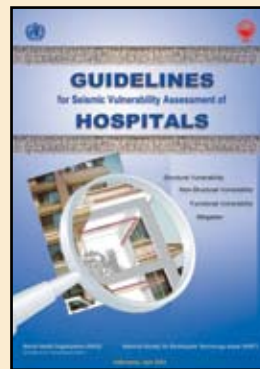
This manual serves as an updated second edition to the publication Protocol for assessment of health facilities in responding to emergencies published by WHO in 1999. This updated second edition is a management tool for health professionals evaluating the preparedness of their respective health facilities for dealing with disasters. The needs of professionals who manage health facilities, including national and provincial emergency coordinators and regional emergency focal points, were kept in mind during revision of the original manual. The book is divided into three main parts. The main questionnaire found in the first part and presented in a checklist format will provide an overview of the health facility's present capabilities. The second part, Assessment of general emergency preparedness, deals with aspects of preparedness in any level of emergency. The third part, Assessment of preparedness for specific emergencies, is the major addition to this updated edition. This section tackles specific emergencies that are becoming increasingly relevant. Definitions, evaluation checklists and relevant case studies are provided whenever possible.

**DRR10496**

Guidelines for earthquake resistant construction of non-engineered rural and suburban masonry houses in cement sand mortar in earthquake affected areas (draft)

By ERRA, Emergency Architects, UN-Habitat
ERRA, 2006; 34 pages

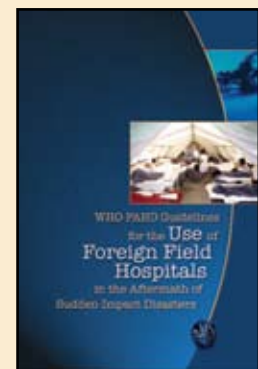
The objective of these guidelines from the Earthquake Reconstruction and Reconstruction Authority (ERRA) is to provide the necessary concept and know-how to the communities and local construction workers for earthquake resistant construction of non-engineered rural and suburban houses using locally available materials in earthquake prone regions of Pakistan. These guidelines are targeting government officials, partner organizations and trainers and may be used as technical reference. It will be the basis of training and capacity building.

**DRR10395**

Guidelines for seismic vulnerability assessment of hospitals

By the National Society for Earthquake Technology (NSET) Nepal, World Health Organization (WHO), NSET, 2003
122 pages

This Guideline is for assisting health-sector professionals and authorities to implement qualitative assessments of structural and non-structural earthquake vulnerability of hospitals and health institutions. Additionally, disaster risk managers, who are responsible for hospital emergency preparedness, may also use these guidelines as a tool for understanding the tasks and directing their implementation.

**DRR8730**

Guidelines for the use of foreign field hospitals in the aftermath of sudden-impact disasters

By the Pan American Health Organization (PAHO), World Health Organization (WHO), 2003
20 pages

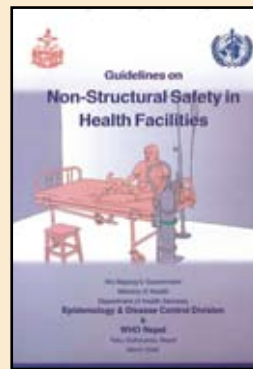
A field hospital is a “mobile, self-contained, self-sufficient health care facility capable of rapid deployment and expansion or contraction to meet immediate emergency requirements for a specified period of time. The field hospital may be temporarily dispatched with personnel or donated without personnel...Field hospitals are deployed only: a) following an appropriate declaration of emergency and a request from the health authorities of the affected country; b) when they are integrated into the local health services system; and c) when the respective roles and responsibilities for their installation and operational sustainment have been clearly defined.” Field hospitals are used to substitute or complement medical systems in the aftermath of sudden-impact events that produce disasters for three distinct purposes: to provide early emergency medical care (including Advanced Trauma Life Support; this period lasts only up to 48 hours following the onset of an event), provide follow-up care for trauma cases, emergencies, routine health care and routine emergencies (from day 3 to day 15), and act as a temporary facility to substitute damaged installations pending final repair or reconstruction (usually from the second month to two years or more).

**DRR7760**

Guidelines for vulnerability reduction in the design of new health facilities

By the Pan American Health Organization (PAHO), World Health Organization (WHO), 2004
106 pages
ISBN 9275125007

When struck by large-scale natural disasters, hospital services are interrupted temporarily or permanently, mainly due to damage to their infrastructure. The operational loss of these facilities signifies more than the loss of the capital investments. Far more importantly, it has a major negative impact on the wellbeing and the socioeconomic development of the population and the country. This publication, produced in conjunction with the PAHO/WHO Collaborating Center for Disaster Mitigation in Health Facilities at the University of Chile, puts forward three potential levels of protection from adverse events, or performance objectives: life safety, investment protection, and functional protection. It seeks to spread far a new vision of the conception and construction of public health infrastructure. It is directed to health-sector managers, professionals, and technical consultants entrusted with managing, designing, building, and inspecting new health facilities.

**DRR10449**

Guidelines on non-structural safety in health facilities

By the Epidemiology and Disease Control Division (EDCD), Ministry of Health, Department of Health Services, Nepal, and World Health Organization (WHO), 2004
24 pages

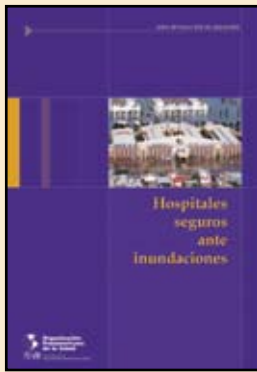
The guidelines contain a discussion of the essential role of health services immediately following a medium or large-scale earthquake, and an outline of the possible threat to lives and functionality of the health facilities stemming from damage to non-structural components. Most importantly, the guidelines contain a series of illustrated mitigation measures that are low-cost and easy to implement as part of the day-to-day maintenance of health facilities.

**DRR10467**

Health facility seismic vulnerability evaluation: a handbook

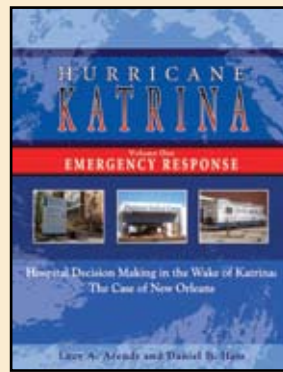
By the Disaster Preparedness and Response Programme (DPR), Division of Country Support, Country Policies, Systems and Services (DCS/CPS), WHO, Regional Office for Europe (WHO/EURO), 2006; 56 pages

Given the importance of an efficient response to emergencies and the need for a functional health care infrastructure in the aftermath of a disaster, hospital administrators must assess a facility's vulnerability to earthquakes and obtain estimates of existing risk levels in order to ensure a proper response to emergency needs. A reliable and comprehensive hospital assessment can be carried out only by taking into account all three main vulnerability categories – structural, nonstructural and administrative/organizational – in that order.

**DRR10541****Hospitales seguros ante inundaciones**

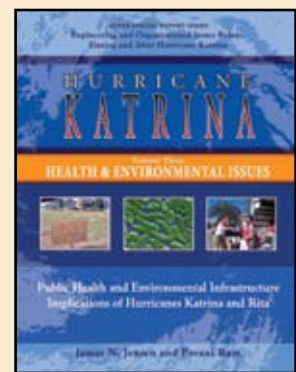
By the Pan American Health Organization (PAHO), 2006
98 pages
ISBN9275326274

Este documento expone los efectos más comunes de las inundaciones en los servicios de salud y brinda recomendaciones técnicas para aplicar en prevención, mitigación, rehabilitación y reconstrucción de la infraestructura de salud vulnerable a inundaciones. Estas intervenciones permitirán reducir el impacto, brindar una respuesta y atención oportuna y eficaz, y facilitar la continuidad en la prestación de los servicios de salud, justo cuando la demanda se incrementa a consecuencia del evento. Esta publicación es el producto del trabajo de un amplio número de expertos y equipos multidisciplinarios de profesionales de América Latina. Está dirigido al personal técnico y de gerencia del sector salud.

**DRR10531****Hurricane Katrina, volume one, emergency response: hospital decision making in the wake of Katrina, the case of New Orleans**

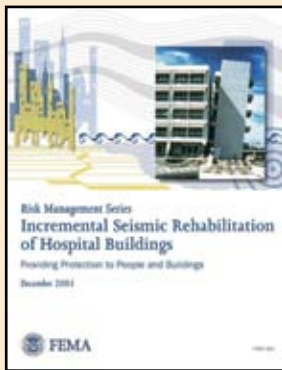
By Lucy Arendt and Daniel Hess
Multidisciplinary Center for Earthquake Engineering Research (MCEER), 2006
76 pages

The report is volume one in a series detailing post-Katrina field investigations by the MCEER team. The study examines New Orleans hospital decision-making as it relates to disaster preparedness and emergency response, and focuses on the 15 acute care hospitals that were the primary providers of patient care in the New Orleans area before the hurricane struck.

**DRR10532****Hurricane Katrina, volume three, health and environmental issues: public health and environmental infrastructure, implications of Hurricanes Katrina and Rita**

By James N. Jensen and Pavani Ram
MCEER, 2007
31 pages

The report is volume three in a series detailing post-Katrina field investigations by the MCEER team. The public health and environment reconnaissance team visited the Gulf Coast from October 17, 2005 to October 22, 2005. The team's efforts extended from New Orleans to the parishes north of Lake Pontchartrain to the Louisiana-Texas border. The primary study areas were Orleans, Jefferson, St. Tammany, Washington, Calcasieu, and Cameron parishes. The report provides information on the public health aspects of the site visit and reviews the environmental infrastructure observations.

**DRR10471**

Incremental seismic rehabilitation of hospital buildings: providing protection to people and buildings

By the Federal Emergency Management Agency (FEMA), 2003
87 pages

This manual provides healthcare organizations with the information necessary to assess the seismic vulnerability of their buildings and to implement a program of incremental seismic rehabilitation for those buildings. The manual consists of three parts: Part A, Critical Decisions for Earthquake Safety in Hospitals, is for healthcare organization senior executives, board members, hospital directors, vice presidents for facility management, and other policy makers who will decide on allocating resources for earthquake mitigation. Part B, Planning and Managing the Process for Earthquake Risk Reduction in Existing Hospital Buildings, is for hospital facility managers, risk managers, and financial managers who will initiate and manage seismic mitigation measures. Part C, Tools for Implementing Incremental Seismic Rehabilitation in Existing Hospital Buildings, is for facility managers, or others responsible for facility management, who will implement incremental seismic rehabilitation programs.

**DRR1190**

International Conference on disaster mitigation in health facilities: the earthquake in Mexico, September 1985

By Felipe Cruz Vega, Carlos A. Rojas Enriquez
PAHO, 1996
5 pages

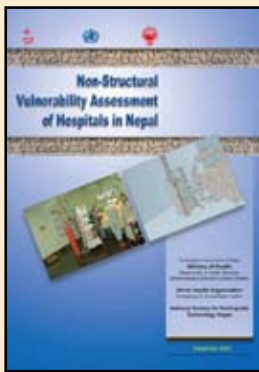
Mexico is a country with major seismic activity. More than 90 earthquakes per year are registered with a magnitude superior to grade 4 on the Richter scale. On September 19, 1985, at 7:19 local time, an intense earthquake with a magnitude of 8.1 on the Richter scale struck the country. The epicenter was located near the coast of the state of Guerrero, about 400 kilometers southeast of Mexico City, at 17.8 degrees north latitude and 102.3 degrees west longitude. The global area affected by the seismic shock waves was estimated at 800,000 square kilometers making this earthquake one of the most powerful of the present century. The main demand for medical care arose from trauma. An estimated 10,000 people suffered major injuries, and nearly 20,000, minor ones.

**DRR10389**

Mobile health units in emergency operations, a methodological approach

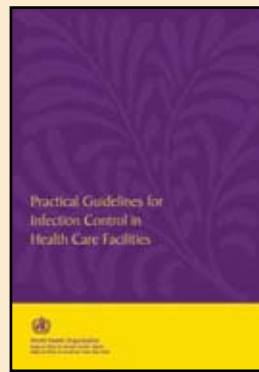
By Stéphane Du Mortier, Rudi Coninx, Humanitarian Practice Network (HPN), Overseas Development Institute (ODI), 2007
18 pages; ISBN 9780850038491

Mobile health units (MHUs) are often used to provide health care in unstable situations, such as armed conflicts, where fixed services cannot function for reasons of security. They are, however, a controversial way of providing health care, because of their cost, their irregular service provision and their logistical complexities. Drawing on the experience of the International Committee of the Red Cross (ICRC) and on the relevant literature, this network paper provides a decision-making framework for health care workers considering whether to use MHUs. The paper gives an overview of the place of MHUs in a health care system, and provides the theoretical background to the decision-making process around how and when to set them up. It also elaborates on the strengths and weaknesses of MHUs, and uses practical examples both from the literature as well as from the authors' own field experiences to illustrate its argument.

**DRR10394****Non-structural vulnerability assessment of hospitals in Nepal**

By the National Society for Earthquake Technology (NSET) Nepal; WHO; the Epidemiology and Disease Control Division (EDCD), Ministry of Health, Department of Health Services, Nepal NSET, 2003; 84 pages

Section 1 of this report presents the introduction of the study project and section 2 the objective, scope and approach while section 3 includes the methodology. The result on hospitals performance assessment and recommendations to improve seismic performance has been given in section 4. Section 5 presents examples of mitigating non-structural vulnerability of hospitals.

**DRR10440****Practical guidelines for infection control in health care facilities**

By the World Health Organization (WHO), 2004
103 pages
ISBN 9290222387

These guidelines, jointly prepared by the WHO Regional Offices for South-East Asia and the Western Pacific, should help countries to strengthen their infection control practices in health care facilities. This would help to prevent further spread of infection and to deal effectively with new infectious diseases like SARS as well as other hospital-associated infections. The guidelines address all aspects of an infection control programme with special attention being paid to SARS. Since information on SARS is still evolving, these guidelines will be updated as more specific information becomes available.

**DRR4262****Prehospital and disaster medicine: disaster terminology**

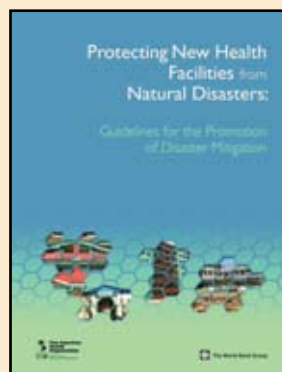
By M. Debacker, B. Domres, Walter Hays, J. de Boer
Glossary of New Concepts in Disaster Medicine, 2002
26 pages

The terms in this glossary are an alphabetical compilation of definitions from the "Health Disaster Management Guidelines for Evaluation and Research in the 'Utstein-Style'" that aims to develop a structural framework for investigations into the medical and public health aspects of disasters that could be used as for the appropriate design, conduct, and reporting of evaluation and research, those provided by Walter Hays, and Debacker, Domres, and de Boer's "Glossary of New Concepts in Disaster Medicine". They are in addition to those selected from the current volume of Gunn's Multilingual Dictionary of Disaster Medicine and International Relief.

**DRR8207****Principles of disaster mitigation in health facilities**

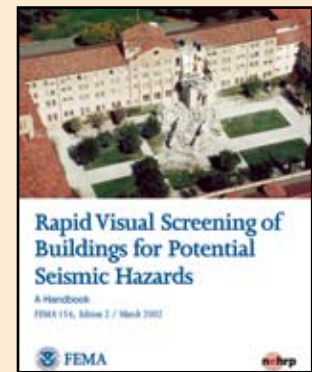
By the Pan American Health Organization (PAHO), 2000
123 pages
ISBN 9275123047

This book is an updated compilation of various documents on the topic already published by PAHO/WHO. Sections of previous publications have been revised to address the needs of professionals from a variety of disciplines, particularly those involved in health facility planning, operation and maintenance. It does not attempt to address the more technical and specialized aspects of disaster mitigation. Figures and photographs illustrate situations that can increase disaster vulnerability in health facilities. Examples are given of how countries in Latin America have conducted vulnerability assessments and applied specific disaster mitigation measures in their hospitals and health centers. The book focuses on problems encountered in areas at high risk for seismic events. It introduces the essential aspects of carrying out vulnerability assessments and applying practical measures to mitigate damage in hospitals, addressing structural and nonstructural aspects, as well as administrative and internal organization.

**DRR7481****Protecting new health facilities from natural disasters: guidelines for the promotion of disaster mitigation**

By the Pan American Health Organization (PAHO), World Bank, World Health Organization (WHO), ProVention Consortium; PAHO, 2003
52 pages; ISBN 9275124841

Hurricanes, floods, earthquakes, landslide and volcanic eruptions - and the devastation they inflict - are all too familiar to the countries of Latin America and the Caribbean. In the last decade, natural disasters have caused more than 45,000 deaths in the region, left 40 million injured or in need of assistance, and carried a price tag - in direct damage alone - of more than US\$20 billion.

**DRR10472****Rapid visual screening of buildings for potential seismic hazards: a handbook**

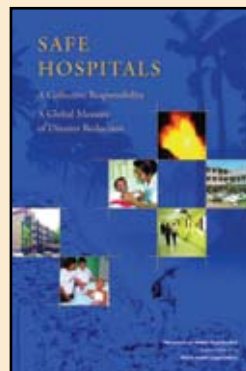
By the National Earthquake Hazards Reduction Program (NEHRP), Applied Technology Council (ATC), Federal Emergency Management Agency (FEMA), 2002; 140 pages

The procedure presented in this Handbook is meant to be the preliminary screening phase of a multi-phase procedure for identifying potentially hazardous buildings. Buildings identified by this procedure must be analyzed in more detail by an experienced seismic design professional. Because rapid visual screening is designed to be performed from the street, with interior inspection not always possible, hazardous details will not always be visible, and seismically hazardous buildings may not be identified as such.

**DRR10419****Safe hospital checklist**

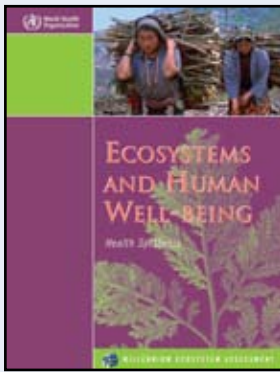
By the Pan American Health Organization (PAHO), World Health Organization (WHO)
6 pages

This checklist records elements relating to the geographic location of the health facility to be evaluated such as geological, hydro-meteorological, social, environmental sanitation, chemical and/or technological phenomena, and geotechnical properties of the soil; and structural safety of the building. Columns, beams, walls, floor slabs, etc., are structural elements that form part of the load-bearing system of the building. These elements should be evaluated by structural engineers.

**DRR9713****Safe hospitals, a collective responsibility, a global measure of disaster reduction**

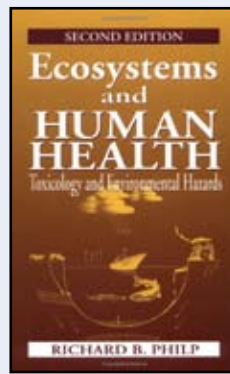
By the Pan American Health Organization (PAHO), World Health Organization (WHO)
PAHO/WHO, 2005
31 pages

Protecting critical health facilities, particularly hospitals, from the avoidable consequences of disasters, is not only essential to meeting the Millennium Development Goals set by the United Nations, but also a social and political necessity in its own right. This is the message that this publication, prepared by PAHO/WHO for the UN World Conference on Disaster Reduction, puts forth. The importance of hospitals goes far beyond the role they play in saving lives after disasters. They are powerful symbols of social progress and a prerequisite for economic development, and as such, special attention must be given to reducing their physical vulnerability.

**DRR10439****Ecosystems and human well-being: health synthesis**

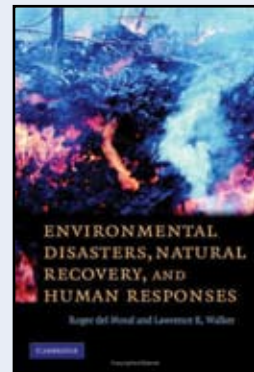
By the Millennium Ecosystem Assessment
World Health Organization (WHO), 2005
ISBN 9241563095
53 pages

It is becoming increasingly clear that population growth and economic development are leading to rapid changes in our global ecosystems. In recognition of this, the United Nations' Secretary-General Kofi Annan, in a 2000 report to the General Assembly entitled: "We the Peoples: The Role of the United Nations in the 21st Century," called for the Millennium Ecosystem Assessment to be undertaken. Since 2001, the Millennium Ecosystem Assessment has worked to assess the consequences of ecosystem change for human well-being, and establish the scientific basis for actions needed to enhance the conservation and sustainable use of those systems, so that they can continue to supply the services that underpin all aspects of human life. This report represents a call to the health sector, not only to cure the diseases that result from environmental degradation, but also to ensure that the benefits that the natural environment provides to human health and well-being are preserved for future generations.

**DRR7773****Ecosystems and human health: toxicology and environmental hazards**

By Richard B. Philp
Lewis Publishers, 2001
328 pages

Ecosystems and Human Health: Toxicology and Environmental Hazards, Second Edition explores the broad range of environmental and human health aspects of chemical and biological hazards. The author covers the basic principles of pharmacology and toxicology as well as risk analysis, air and water pollution, and various toxicants, hazards, and poisons. He presents numerous examples of the intimate relationship between ecosystem health and human health and of the need to consider this relationship whenever human activities are likely to have a significant environmental impact.

**DRR10504****Environmental disasters, natural recovery and human responses**

By Roger del Moral,
Lawrence R. Walker
Cambridge University Press, 2007
220 pages
ISBN 0521677661

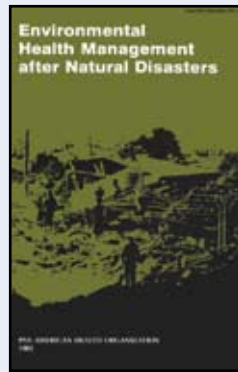
Natural disasters destroy more property and kill more people with each passing year. Volcanic eruptions, earthquakes, hurricanes, tsunamis, floods, landslides, fires and other natural events are becoming more frequent and their consequences more devastating. This book provides a comprehensive summary of the diverse ways in which natural disasters disrupt humanity and how humans cope. Burgeoning human numbers, shrinking resources and intensification of the consequences of natural disasters have produced a crisis of unparalleled proportions. Through this detailed study, the authors provide a template for improving restoration to show how relatively simple approaches can enhance both human well-being and that of the other species on the planet. This book will appeal to ecologists, land managers as well as anyone curious about the natural world and natural disasters.

**DRR10432**

Environmental health in emergencies and disasters: a practical guide

By B. Wisner, J. Adams
World Health Organization (WHO), 2002
252 pages
ISBN 9241545410

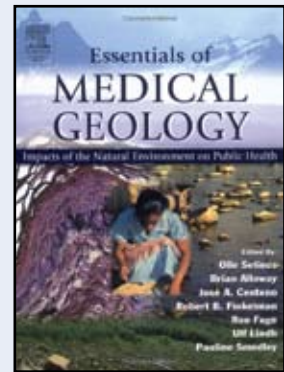
This book deals not only with emergency response, but also with measures designed to reduce the impact of disasters on environmental health infrastructure, such as water supply and sanitation facilities. It also aims to strengthen the ability of people to withstand the disruption of their accustomed infrastructure and systems for environmental health (e.g. shelter, water supply, sanitation, vector control etc.) and to recover rapidly. This book is intended to serve as a practical guide, calling attention to the need to link emergencies, disasters and development, not only in policy statements, but in practical ways. The book identifies physical and social factors and processes determining disaster vulnerability and offers the reader a range of vulnerability-reduction options in development and disaster mitigation. The book covers the main relief and response technologies for a range of natural and technological disasters, and deals with community participation, health education, training and other social aspects relevant to the protection of health and the environment in emergencies and disasters.

**DRR10470**

Environmental health management after natural disaster

By the Pan American Health Organization (PAHO), 1982
58 pages
ISBN 9275114307

This document is intended to serve as a guide for those who may be called upon to make emergency decisions after disaster strikes. The recommended environmental health measures have been listed in the order of priority in which they should be taken during an emergency. However, each natural disaster is unique in the degree or type of emergency it poses. In response to any given disaster, decision makers may find it necessary to change the priority assigned to any particular measure. This document is divided into several parts. The first section primarily addresses the effects of natural disasters on environmental health conditions and services. In the second section, environmental health measures are described that should be undertaken in each of three time frames: the predisaster, disaster, and postdisaster periods.

**DRR10519**

Essentials of medical geology: impacts of the natural environment on public health

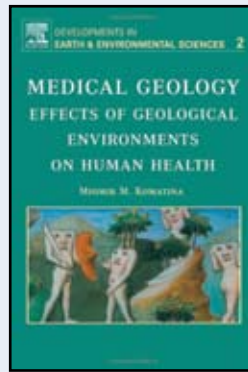
By Olle Selinus
Academic Press, 2005
832 pages
ISBN 0126363412

This authoritative reference volume emphasizes the importance and interrelationships of geological processes to the health and diseases of humans and animals. Its accessible format fosters better communication between the health and geoscience communities by elucidating the geologic origins and flow of toxic elements in the environment that lead to human exposure through the consumption of food and water. For example, problems of excess intake from drinking water have been encountered for several inorganic compounds, including fluoride in Africa and India; arsenic in certain areas of Argentina, Chile, and Taiwan; selenium in seleniferous areas in the U.S., Venezuela, and China; and nitrate in agricultural areas with heavy use of fertilizers. Environmental influences on vector borne diseases and stormflow water quality influences are also featured. Numerous examples of the environmental influences on human health from across the globe are also presented and discussed in this volume.

**DRR10459****Europe's environment: the fourth assessment, Executive summary**

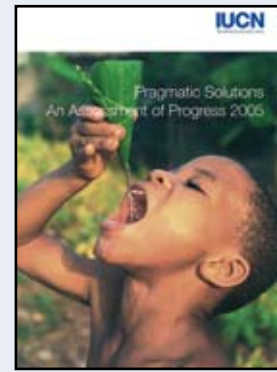
By the European Environment Agency (EEA), 2007
27 pages

The 'Environment for Europe' process now brings together 56 countries across three continents to jointly address environmental challenges. In support of this process, the European Environment Agency has prepared a series of assessments of the environment for the pan-European region to provide policy-relevant, up-to-date and reliable information on the interactions between the environment and society. This is the fourth report in the series. Where possible the report evaluates progress, primarily against the objectives of the Sixth Environment Action Programme of the European Community and the Environment Strategy for Countries of Eastern Europe, Caucasus and Central Asia.

**DRR10518****Medical geology, 2: effects of geological environments on human health (Developments in earth and environmental sciences, 2)**

By M. M. Komatina
Elsevier Science, 2004
502 pages
ISBN 0444516158

The main objective of the book is to show how the geological environment affects human health and to explore preventative methods for improvement. This monograph consists of the following five segments: Introduction; Geological and other factors and their influence on the human health; Subject, tasks and methods of geomedical discipline; Regional medical geology; Applied medical geology. The topics covered in this book will be of interest to a wide circle of readers, including geologists, doctors, biologists, ecologists, planners and many others who are dedicated to the quality and protection of human health.

**DRR10054****Pragmatic Solutions: An Assessment of Progress 2005**

By Elroy Bos, Cindy Craker, Deborah Murith, Jean-Yves Pirot
World Conservation Union (IUCN), 2006
76 pages

The World Conservation Union unites those who recognize the scale and complexity of our collective impact on the earth's natural resources. People know of the rising risks, and ask for pragmatic solutions. This report measures our ability to deliver those solutions. It shows how we explore options and help make decisions to transform our economies and societies. It assesses our capacity to make a difference in a world that is still defining its common future, and to shift the relationship between people and nature onto a sustainable and equitable trajectory.

**DRR10516****Risk assessment for environmental health**

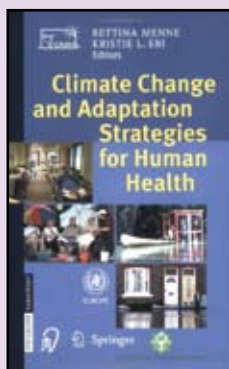
By the Association of Schools of Public Health (ASPH), Mark G. Robson, William A. Toscano
 Jossey-Bass, 2007
 664 pages
 ISBN 0787983195

Understanding risk to humans is one of the most important problems in environmental public health. Risk assessment is constantly changing with the advent of new exposure assessment tools, more sophisticated models, and a better understanding of disease processes. Risk assessment is also gaining greater acceptance in the developing world where major environmental problems exist. Developed in partnership with the Association of Schools of Public Health, this comprehensive text offers a thorough survey of risk assessment, management, and communications as these practices apply to public health. Written by experts in the field, this important book provides an introduction to current risk assessment practices and procedures and explores the intrinsic complexities, challenges, and controversies associated with analysis of environmental health risks.

**DRR10517****Quantitative environmental risk analysis for human health**

By Robert A. Fjeld, Norman A. Eisenberg, Keith L. Compton
 Wiley-Interscience, 2007
 390 pages
 ISBN 047172243X

Environmental risk analysis is complex and interdisciplinary; this book explains the fundamental concepts and analytical methods in each essential discipline. With an emphasis on concepts and applications of quantitative tools plus coverage of analysis of both chemical and radioactive contaminants, this is a comprehensive resource. This reference also relates risk analysis to current environmental laws and regulations. An ideal textbook for graduate students and upper-level undergraduates in various engineering and quantitative science disciplines, especially civil and environmental engineering, it is also a great reference for practitioners in industry, environmental consulting firms, and regulatory agencies.

**DRR10509****Climate change and adaptation strategies for human health**

By Bettina Menne, Kristie L. Ebi
Springer, 2006
449 pages
ISBN 3798515913

The book represents the results of the cCASHh study that was carried out in Europe (2001-2004), co-ordinated by WHO and supported by EU Programmes. The flood events in 2002 and the heat wave of August 2003 in Europe had given evidence in a rather drastic way of our vulnerability and our non preparedness. The project has produced very important results that show that the concurrent work of different disciplines in addressing public health issues can produce innovative and useful results, providing an approach that can be followed on other public health issues. The project has shown that information on potential threats can be extremely useful in preparing the public for adverse events as well as facilitating the response when the events occur. This is a new dimension for public health which reverses the traditional thinking: from identifying and reducing specific risk factors, to taking action on the basis of prediction and early warning to prevent health consequences in large populations.

**DRR10428****Climate change and human health: impact and adaptation**

By R. Sari Kovats, Bettina Menne, Anthony J. McMichael, Carlos Corvalan, Roberto Bertollini
World Health Organization (WHO), 2000
48 pages

Concern for human health is one of the most compelling reasons to study the effects of global climate change. Health is a focus that will reflect the combined impacts of climate change on the physical environment, ecosystems, the economic environment and society. Long-term changes in world climate may affect many of the requisites of good health – sufficient food, safe and adequate drinking water, and secure dwellings. The current large-scale social and environmental changes mean that we must assign a much higher priority to population health in the policy debate on climate change.

**DRR9931****Climate change and human health: risks and responses**

By A.J. McMichael, D.H. Campbell-Lendrum, C.F. Corvalan, K.L. Ebi, A. Githeki, J.D. Scheraga, A. Woodward, WMO, WHO, UNEP
WHO, 2003
322 pages; ISBN 924156248X

This report describes the context and process of global climate change, its actual or likely impacts on health, and how human societies and their governments should respond, with particular focus on the health sector. It argues that climate change is responsible for 2.4 per cent of all cases of diarrhoea worldwide and for 2 per cent of all cases of malaria, according to the most recent figures available. Moreover, an estimated 150,000 deaths and 5.5 million Disability-Adjusted Life Years (DALYS) were caused in the year 2000 due to climate change.

**DRR10430****Climate change futures: health, ecological and economic dimensions**

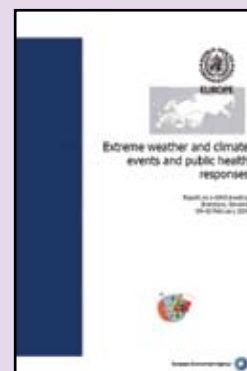
By the Center for Health and the Global Environment, Harvard Medical School, Swiss Re, United Nations Development Programme (UNDP), 2005
138 pages

While no one event is conclusive evidence of climate change, the relentless pace of severe weather — prolonged droughts, intense heat waves, violent windstorms, more wildfires and more frequent “100-year” floods — is indicative of a changing climate. Although the associations among greater weather volatility, natural cycles and climate change are debated, the rise in mega-catastrophes and prolonged widespread heat waves is, at the very least, a harbinger of what we can expect in a changing and unstable climate. This report examines a wide spectrum of physical and biological risks we face from an unstable climate. It also aims to further the development of healthy, safe and economically feasible energy solutions that can help stabilize the global climate system. These solutions should also enhance public health, improve energy security and stimulate economic growth.

**DRR10423****Climate variability and change and their health effects in the Caribbean: information for adaptation planning in the health sector**

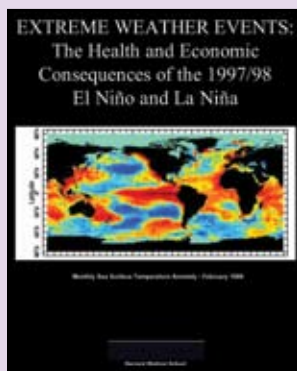
By Joan L. Aron, Carlos F. Corvalán, Harry Philippeaux
WHO, 2003
53 pages; ISBN 9241590718

Small island states are particularly vulnerable to the effects of climate variability and change. As exemplified in the quotations above from keynote speeches, the Barbados Conference, May 21-22, 2002, and Workshop, May 23-25, 2002, on Climate variability and change and their health effects in the Caribbean addressed the seriousness of health-related consequences and the inter-sectoral nature of possible responses. The overall objectives of the conference and workshop were to: inform health scientists, practitioners, and officials of the impacts of climate variability and long-term climate change in the Caribbean region; integrate health-relevant sectors (e.g., water resources, agriculture and fisheries); introduce strategies in coastal zone management as they relate to sewage disposal and other health issues; foster joint interdisciplinary research projects among local participants, as well as developed/developing nation scientist partnerships; and promote the incorporation of global, regional and national climate information into planning for public health services at the national level.

**DRR10465****Extreme weather and climate events and public health responses: report on a WHO meeting, Bratislava, Slovakia, 09–10 February 2004**

By the World Health Organization, Regional Office for Europe (WHO/EURO), European Environment Agency (EEA), WHO/EURO, 2004; 48 pages

This expert meeting was organized by the WHO Regional Office for Europe and the European Environment Agency and hosted by the Ministry of Health of the Slovak Republic to exchange information and develop recommendations on public health and environmental responses to weather and climate extremes, specifically floods, heat-waves and cold spells. The 54 participants included representatives of 20 countries from the European region, as well as of the European Commission, European Environment Agency, Red Cross, World Meteorological Organization, World Health Organization and scientists from around the world.

**DRR10434**

Extreme weather events: the health and economic consequences of the 1997/98 El Niño and La Niña

By the Center for Health and the Global Environment, Harvard Medical School, 1999
42 pages

Extreme weather events (EWEs) often create conditions conducive to outbreaks of infectious diseases. The upsurge of insect, rodent and water-borne diseases following Hurricane Mitch in Central America in October, 1998 highlights this connection. Heavy rains can produce new breeding sites for insects, drive rodents from burrows and contaminate clean water systems. Conversely, flooding followed by drought can spread fungal spores and spark fires. The 1997/98 El Niño-related extreme weather events spawned "clusters" of disease outbreaks in many regions of the globe. In the Horn of Africa extensive flooding led to large outbreaks of malaria, Rift Valley fever and cholera. In Latin America, extreme weather was associated with outbreaks of malaria, dengue fever and cholera. In Indonesia and surrounding island nations, delayed monsoons - and the compounding effects of local farming practices - led to prolonged fires, widespread respiratory illness, and significant losses of wildlife.

**DRR10490**

Floods, health and climate change, a strategic review: working paper 63

By Roger Few, Mike Ahern, Franziska Matthies, Sari Kovats
Tyndall Centre for Climate Change Research, 2004
138 pages

The objectives of this report are: to present findings from a wide-ranging review of global literature on health impacts, adaptation processes and policies relating to flood risk; to make a critical assessment of the existing knowledge base and identify key opportunities and challenges for intervention and research; to assess the implications of climate change and future flood risk for health impacts, adaptation processes and policies. Following preliminary discussion of global flood risk issues (chapter 2), the main sections of the report comprise an epidemiological review of the evidence base for health outcomes of flooding (chapter 3) and a review of literature analysing mechanisms of response to health risks from floods (chapter 4). Though the scope of the report is global, the material discussed in these sections is fairly narrow in thematic focus: the intention has been to maximise the added value of the work by concentrating as closely as possible on issues connected with health and flooding. The final section (chapter 5) then discusses the key findings in the wider contexts of social differentiation, development, hazard management, climate change and adaptation.

**DRR10530**

Health and climate change: modelling the impacts of global warming and ozone depletion

By Pim Martens, Tony McMichael
Earthscan, 1998
208 pages
ISBN 1853835234

A study of the potentially enormous and devastating health impacts of the global atmospheric changes which are under way. The author uses available knowledge to model future health impacts, including: vector-borne diseases such as malaria, dengue fever and schistosomiasis; marine-borne diseases such as cholera and toxic algae; cancers and cataracts from ozone depletion; and cardiovascular and respiratory disorders from higher temperatures and air pollution. The projections in this book, on the global and sub-global scale, as well as the methods used to reach them, are designed to provide information for researchers, policy makers and a wider public.

**DRR10522****Health sector response to the Bam earthquake: lessons learnt**

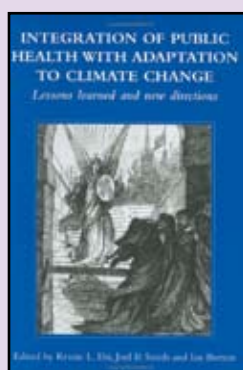
By the World Health Organization

(WHO), 2005

40 pages

ISBN 9290213914

After any major disaster it is critical to assess the efficiency and effectiveness of humanitarian relief. The delivery of medical supplies, provision of basic medical equipment and establishment of monitoring systems all require streamlined coordination and collaboration of relief partners. In its support of national authorities the international community plays a central role in both managing and delivering relief supplies and technical assistance. The earthquake in Bam in 2003 affected more than 50 000 persons living in the area. Many of those injured or killed were health workers which had a significant impact on the delivery of health services. Humanitarian assistance was mobilized within hours of the earthquake to treat the injured, care for survivors and bury the dead. After the acute emergency phase, the World Health Organization in collaboration with the Ministry of Health and Medical Education, Iranian Red Crescent Society, UNICEF, UNFPA and the Iranian Petroleum Industry Health Organization facilitated a collective exercise whereby all stakeholders discussed and evaluated their inputs to the health sector as part of the overall humanitarian response to the earthquake.

**DRR10508****Integration of public health with adaptation to climate change: lessons learnt and new directions**

By Kristie L. Ebi, J. Smith, I. Burton

Taylor & Francis, 2005

295 pages

ISBN 9058096866

Overall, the negative health impacts of global climate change are anticipated to significantly outweigh positive impacts. Furthermore, global climate change will continue for decades, even after the effective implementation of mitigation measures. By exploring cases in public health and prior lessons learned, this valuable title identifies the key adjustments necessary for public health systems to effectively adapt to this inevitable climate change. Touching on broader aspects of integrated assessment and environmental studies as well as climatic alterations and public health, this book is an essential resource for those involved in these fields at all levels.

**DRR9954****Methods of assessing human health vulnerability and public health adaptation to climate change**

By the World Health Organization, Regional Office for Europe (WHO/EURO), WMO, UNEP, Health Canada

WHO/EURO, 2003

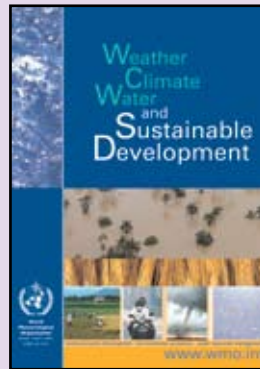
111 pages; ISBN 9289010908

This publication provides practical information to governments, health agencies and environmental and meteorological institutions in both industrialized and developing countries on how to assess vulnerability and adaptation to climate variability and change at the regional, national and local levels. Flexible methods and tools are described to achieve better understanding of the risk of climate change for current and future generations and to enable policy-makers to plan for measures, policies and strategies to cope with climate change. The methods will be further developed and adapted in pilot testing in countries in the next two years.

**DRR10441****Using climate to predict infectious disease epidemics**

By Katrin Kuhn, Diarmid Campbell-Lendrum, Andy Haines, Jonathan Cox
World Health Organization (WHO), 2005
54 pages; ISBN 9241593865

This document was written to provide guidance for the Department of Communicable Diseases Surveillance and Response (CSR), the Department of Protection of the Human Environment (PHE) and the Roll Back Malaria Department (RBM) on the potential of early warning systems (EWS) based on climate variations to enhance global surveillance and response to epidemic-prone diseases. This document evaluates the potential of climate-based disease early warning as a means of improving preparedness for, and response to, epidemics. On the basis of the history of the development of EWS to date, the authors develop a conceptual framework for constructing and evaluating climate-based EWS. They identify the climate-sensitive diseases of major public health importance and review the current state of the art in climate-based modelling of these diseases, as well as future requirements and recommendations. This document lays the foundation for future development of EWS that capitalize on new knowledge about interactions between climate and infectious diseases, as well as improved capabilities for assessing vulnerability, monitoring the environment and climate and producing seasonal climate forecasts.

**DRR10065****Weather, climate, water and sustainable development**

By the World Meteorological Organization (WMO), 2004
28 pages

Weather, climate and water influence virtually all human activities, so almost every sector of the economy-health, energy, transport, food security, management of water, tourism-needs meteorological and hydrological services. This booklet shows how the application of weather-, climate- and water-related information can contribute to the socio-economic development of nations-especially those of the developing world-and the well-being of their populations.

**DRR10425****A guide to managing stress in crisis response professions**

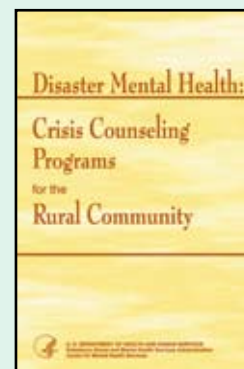
By the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), 2005
viii-27 pages

The ongoing threat of both natural and human-caused disasters makes it imperative that we support and encourage the brave men and women who prepare for and respond to these events—our crisis response professionals. These professionals include first responders, public health workers, construction workers, transportation workers, utilities workers, volunteers, and a multitude of others. This easy-to-use pocket guide focuses on general principles of stress management and offers simple, practical strategies that can be incorporated into the daily routine of managers and workers. It also provides a concise orientation to the signs and symptoms of stress.

**DRR10464****Developing cultural competence in disaster mental health programs: guiding principles and recommendations**

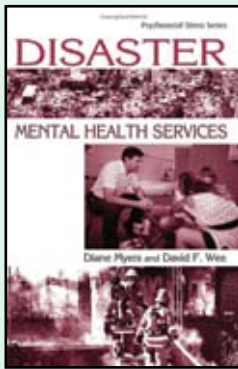
By Jean Athey, Jean Moody-Williams
U.S. Department of Health and Human Services, SAMHSA, 2003
60 pages

Peoples' reactions to disaster and their coping skills, as well as their receptivity to crisis counseling, differ significantly because of their individual beliefs, cultural traditions, and economic and social status in the community. To respond effectively to the mental health needs of all disaster survivors, crisis counseling programs must be sensitive to the unique experiences, beliefs, norms, values, traditions, customs, and language of each individual, regardless of his or her racial, ethnic, or cultural background. Disaster mental health services must be provided in a manner that recognizes, respects, and builds on the strengths and resources of survivors and their communities. The purpose of this guide is to assist States and communities in planning, designing, and implementing culturally competent disaster mental health services for survivors of natural and human-caused disasters of all scales.

**DRR10463****Disaster mental health: crisis counseling programs for the rural community**

By Glenn Jackson, Charles G. Cook
U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), 1999; 62 pages

The Federal Emergency Management Agency (FEMA) and the Center for Mental Health Services (CMHS) of the Substance Abuse and Mental Health Services Administration (SAMHSA), Department of Health and Human Services (DHHS), brought together six Midwest flood States for a conference to discuss lessons learned. The results of the conference and a review of reports from past crisis counseling projects clearly show that implementing crisis counseling services in rural areas raises challenges and opportunities for innovative outcomes. This publication shares these challenges and outcomes with those who play a role in providing crisis counseling services after a disaster in a rural area. It provides an overview of key points for consideration in planning and implementing rural crisis counseling services.

**DRR10521**

Disaster mental health services: a primer for practitioners (Series in psychosocial stress)

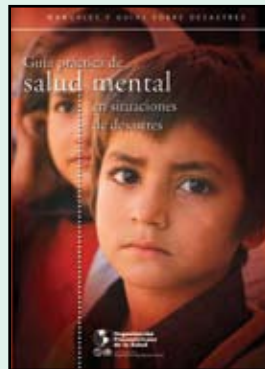
By Diane Myers, David F. Wee

Routledge, 2005

285 pages

ISBN 1583910646

Disaster mental health is a growing field of practice designed to help victims and relief workers learn to effectively cope with the extreme stresses they will face in the aftermath of a disaster. The goal of disaster mental health is to prevent the development of long-term, negative psychological consequences, such as PTSD. This book assists clinicians and traumatologists in “making the bridge” between their clinical knowledge and skills and the unique, complex, chaotic, and highly political field of disaster. It combines information from a vast reservoir of prior research and literature with the authors’ practical and pragmatic experience in providing disaster mental health services in a wide variety of disasters.

**DRR10474**

Guía práctica de salud mental en situaciones de desastres: serie manuales y guías sobre desastres no.7

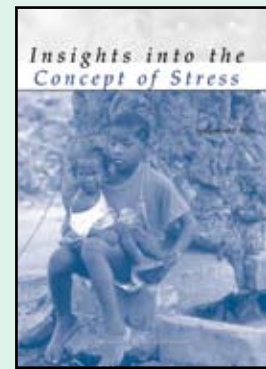
By Jorge Rodríguez, Mônica Zaccarelli

Davoli, Ricardo Pérez

PAHO/WHO, 2006

191 pages

Los efectos de los desastres sobre la salud física suelen ser bastante conocidos, con secuelas a corto, mediano y largo plazo. En cambio, no siempre se han reconocido de igual manera los efectos sobre la salud mental, a pesar de haberse demostrado que, en situaciones de desastres y emergencias complejas, se produce un incremento de los signos de sufrimiento psicológico, como la aflicción y el miedo; se puede aumentar en cierta medida la morbilidad psiquiátrica y otros problemas sociales. Se estima que entre una tercera parte y la mitad de la población expuesta (según la magnitud del evento y otros factores) sufre alguna manifestación psicológica; aunque debe destacarse que no todas pueden calificarse como patológicas, la mayoría debe entenderse como reacciones normales ante situaciones de gran significación o impacto. También, se ha demostrado que, después de la emergencia propiamente dicha, los problemas de salud mental en los sobrevivientes requieren de atención durante un periodo prolongado, cuando tienen que enfrentar la tarea de reconstruir sus vidas.

**DRR10482**

Insights into the concept of stress

By Cyralene P. Bryce

Pan American Health Organization

(PAHO), World Health Organization

(WHO), 2001

77 pages

ISBN 9275123594

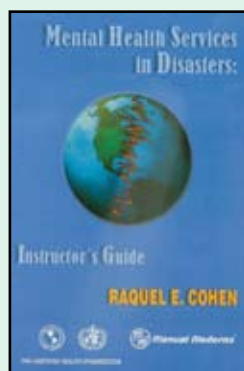
The Stress Management in Disasters (SMID) Program is a comprehensive, peer-driven, multi-component stress management program which is administered on a volunteer basis and was designed to prevent and to mitigate the psychological dysfunction which exposure to traumatic situations like disasters may cause in emergency response personnel. The program is based on the principles of crisis intervention and critical incident stress management and it is not intended to take the place of professional therapy. Instead, it seeks to provide persons with the knowledge and skills to better understand, recognize and manage their emotional responses to traumatic situations. While the SMID Program was developed with emergency response personnel and disaster workers as its primary target group, the principles of the program, with appropriate modification, can be readily extended for use in the broader community, including with children and adolescents, to prevent and mitigate traumatic stress. This workbook, *Insights into the Concept of Stress*, and the companion workbook, *Stress Management in Disasters*, were designed to provide the basic training material for persons who will be providing such a service.

**DRR10418****Mental health all-hazards disaster planning guidance**

By the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), 2003

64 pages

Better planning can help make available appropriate interventions to those in need, and help promote resiliency and recovery. It also provides an opportunity for a more efficient mental health response. It is possible, with sound, integrated planning, to fill the new, complex roles of identifying disease outbreaks, integrating health and mental health response, and conducting epidemiological surveillance—all of which are necessary in the new age of bioterrorism threats. To that end, the Center for Mental Health Services (CMHS), within the Substance Abuse and Mental Health Services Administration (SAMHSA), collaborated with the National Association for State Mental Health Program Directors (NASMHPD) to assess the status of disaster mental health plans in the country, and provide guidance to States regarding important components in the planning process as well as potential content and organization of viable plans. This document is the result of that process. Along with the comprehensive matrix for planners found in Appendix A, this document is intended to help guide State and local mental health agencies create or revise plans for response to human or natural disasters and emergencies.

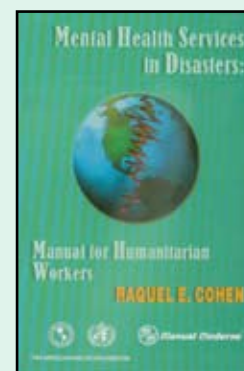
**DRR10487****Mental health services in disasters: instructor's guide**

By Raquel E. Cohen
Pan American Health Organization (PAHO), 2000

176 pages

ISBN 9275122741

This book is composed of a noteworthy summary of the most updated knowledge in this field, in a world in which the effects from natural disasters are increasingly more dramatic - be they hurricanes, earthquakes, volcanoes, or floods, etc. Crucial aspects in the management of different disaster victims are emphasized, with special attention to those most vulnerable: children, the aged, HIV patients, individuals with substance abuse problems and their interaction with other victims.

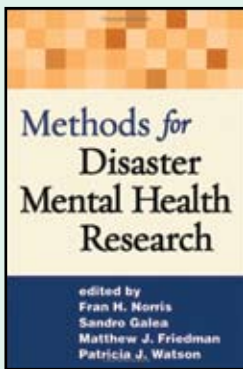
**DRR10488****Mental health services in disasters: manual for humanitarian workers**

By Raquel E. Cohen
Pan American Health Organization (PAHO), 2000

96 pages

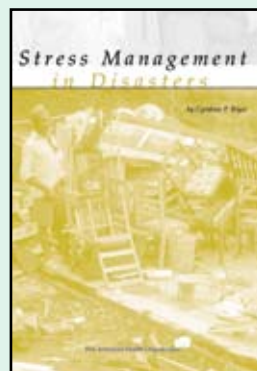
ISBN 9275122733

The manual is written in a simple and easy-to-read format for those persons who, in some way, are involved in providing relief to an effected population, as well as in the short and long-term psychosocial and psychophysiological repercussions from the disaster. Its main objective is to provide an orderly, immediate and efficient flow of relief, training public mental health elements and preventing already-identified adverse consequences.

**DRR10510****Methods for disaster mental health research**

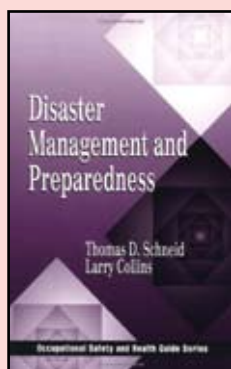
By Fran H. Norris, Sandro Galea, Matthew J. Friedman, Patricia J. Watson
 Guilford Press, 2006
 326 pages
 ISBN 1593853106

This authoritative book will be of interest to anyone involved in studying the mental health consequences of large-scale traumatic events or in measuring the effectiveness of postdisaster interventions. The book considers disasters from different perspectives and translates their chaotic aftermath into feasible research ideas and approaches. Contributing authors, all experienced researchers and practitioners, present a wide range of methods and strategies used in epidemiology, program evaluation, and public mental health planning in the aftermath of natural or technological disasters and terrorism. Descriptions of exemplary studies bring to life the associated logistical and scientific challenges and show how these challenges can be addressed using high-quality research designs.

**DRR10483****Stress management in disasters**

By Cyralene P. Bryce
 Pan American Health Organization (PAHO), World Health Organization (WHO), 2001
 135 pages
 ISBN 9275123586

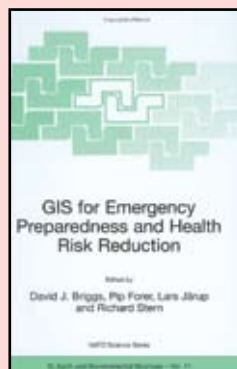
Emergency response personnel are unique in that they dedicate their time and energy in assisting persons during stressful times of their lives, for example, after disasters such as hurricanes, volcanic eruptions, earthquakes, etc. By doing this however, they are themselves repeatedly exposed to very stressful situations. Even though their training prepares them to deal with such situations, the reality is that they have a higher than normal risk for developing post-traumatic stress syndromes, including post-traumatic stress disorder (PTSD). Despite all of this having been well documented and the Caribbean's repeated exposure to natural disasters, the vast majority of Caribbean countries do not have a comprehensive stress management program in place to preserve the psychological well-being of their emergency response and disaster workers. The Office of Emergency Preparedness and Disaster Relief Coordination Program of the Pan American Health Organization, Regional Office for the Americas of the World Health Organization, took the initiative of bringing resource persons from throughout the region together in late 1998 to develop the Stress Management in Disasters in the Caribbean (SMID) Program.

**DRR10507**

Disaster management and preparedness (Occupational safety and health guide Series)

By Thomas D. Schneid, Larry R. Collins
 CRC Press, 2000
 264 pages
 ISBN 156670524X

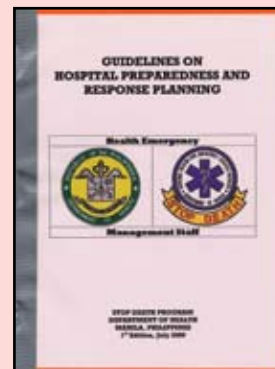
By watching the daily news or reading a newspaper, we quickly understand that disasters happen regularly. They take many forms, ranging from natural disasters such as tornadoes, to man-made disasters such as workplace violence. No matter what type, the results are usually the same: substantial loss of life, money, assets, and productivity. This book details a new and innovative method for preparing companies and organizations to address the substantial risk of disasters in the workplace. It encompasses not only the tried and true tactics used by safety experts for decades but also focuses on areas often overlooked during the reactive and post disaster phases. Technological progress and terrorist activities has forced safety professionals to rethink their modus operandi for disaster preparedness and expand their proactive measures to safeguard assets on all levels and at all times. From natural disasters to acts of terrorism, you never know when something catastrophic will happen to your organization. But once it does, it is too late to go hunting for a plan of action. Be prepared. Be proactive. Make your disaster management plan before disaster strikes.

**DRR10526**

GIS for emergency preparedness and health risk reduction

By David J. Briggs, Pip Forer, Lars Järup, Richard Stern
 Springer, 2002
 340 pages
 ISBN 1402007981

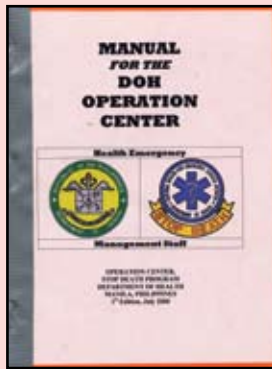
Geographical Information Systems (GIS) have developed rapidly in recent years and now provide powerful tools for the capture, manipulation, integration, interrogation, modelling, analysis and visualisation of data - tools that are already used for policy support in a wide range of areas at almost all geographic and administrative levels. This holds especially for emergency preparedness and health risk reduction, which are all essentially spatial problems. To date, however, many initiatives have remained disconnected and uncoordinated, leading to less powerful, less compatible and less widely implemented systems than might otherwise have been the case. The important matters discussed here include the probabilistic nature of most environmental hazards and the semi-random factors that influence interactions between these and human exposures; the effects of temporal and spatial scales on hazard assessment and imputed risk; the effects of measurement error in risk estimation and the stratification of risks and their impacts according to socioeconomic characteristics; and the quantification of socioeconomic differences in vulnerability and susceptibility to environmental hazards.

**DRR7064**

Guidelines on hospital preparedness and response planning

By the Department of Health (DOH), Philippines, 2000
 97 pages

This manual is a guide for the disaster managers and staffs in the hospital in their preparation of a hospital disaster preparedness and response plan appropriate to their organization. This is a generic guideline that can be applied to any type of hospital regardless of size or type. This was developed after a series of meetings and workshops with the Stop Death Coordinators of the 38 hospitals initially called to review the draft. The primary objective of this manual is to guide all coordinators in the crafting of their plan to include the important ingredients of a good and effective preparedness and response plan during emergencies and disasters. Furthermore, it includes hospital preparedness in case of internal disaster, external disasters as well as a combination of both internal and external disasters.

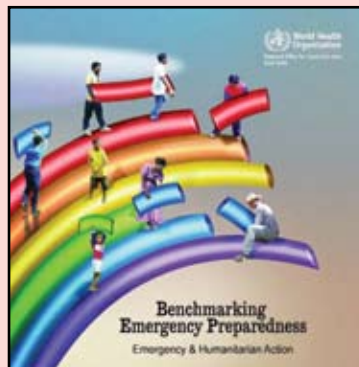


DRR7066

Manual for the DOH Operation Center

By the Department of Health (DOH), Philippines, 2000
95 pages

This manual was designed as a reference guide for those directly involved in the response mechanism during emergencies, disasters, calamities. It also aims to provide a practical guide for quick action when disasters strike and for pre-disaster preparedness planning. It will be very useful for the regions and hospitals who under the aegis of the Department of Health are mandated by law to provide health services as support mechanism in the event of disasters, emergencies, calamities. This manual is intended for all those going on duty at the Operation Center (OPCEN) of the Department of Health. As the OPCEN monitors all emergencies and disasters, this would give all Staff's on duty on monitoring situations, getting and verifying information, analyzing and collating them and utilizing them for purposes of making decisions such as mobilizing responding teams, coordinating these emergencies and lastly for documentation and reporting.

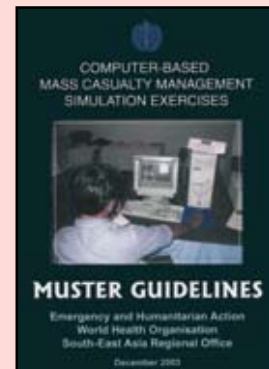


DRR10435

Benchmarking emergency preparedness: emergency and humanitarian action

By the World Health Organization (WHO), 2007
ISBN 9789290223122
19 pages

Benchmarking is a strategic process often used by businesses to evaluate and measure performance in relation to the best practices of their sector. The Emergency and Humanitarian Action Programme (EHA) of the WHO South-East Asia Regional Office (SEARO) and its partners have applied the process of setting benchmarks as a tool to increase performance in emergency preparedness and response. The publication introduces the SEARO benchmark framework, which consists of benchmarks, standards and indicators and a checklist. It also outlines the process behind the conception and the intended use in and by the countries.



DRR10447

Computer based mass casualty management simulation exercise: MUSTER guidelines

By the Emergency and Humanitarian Action (EHA), World Health Organization (WHO), 2003
44 pages

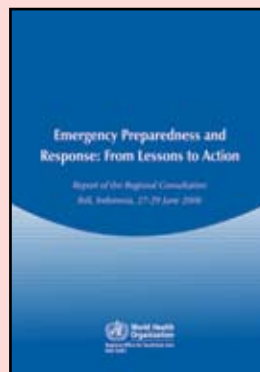
The 2003 guidelines are based on experiences gained in Nepal in using a computer-based training approach to mass casualty management trainings. The guidelines can be used by trainers to plan and implement similar trainings using the MUSTER software, or other similar types of simulation tools.

**DRR10461**

Conclusions and recommendations: meeting on evaluation of preparedness and response to hurricanes Georges and Mitch, 16-19 February 1999, Santo Domingo, Dominican Republic

By PAHO/WHO, 1999
39 pages; ISBN 9275122636

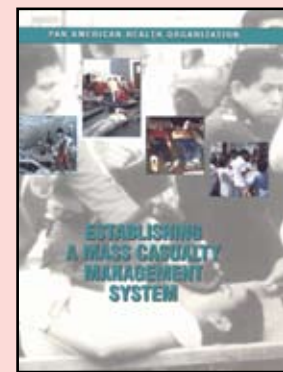
More than 400 professionals from 48 countries met at this meeting to identify lessons learned with regard to the preparedness for and response to two of the most devastating hurricanes of the last decades: Georges and Mitch. The recommendations in this document were drafted in 20 working group sessions that were coordinated by one or several of the co-sponsoring international organizations: the Pan American Health Organization, UNICEF, the United Nations Development Program, the Office of Coordination for Humanitarian Affairs and the Secretariat of the International Decade for Natural Disaster Reduction. In presenting these recommendations, the document maintains the original format of the meeting so that readers can easily identify specific areas of interest. At the end of the document is a summary of the evaluation of the meeting made by the participants.

**DRR10436**

Emergency preparedness and response: from lessons to action report of the regional consultation, Bali, Indonesia, 27-29 June 2006

By the World Health Organization (WHO), 2007
70 pages

Even for veteran emergency health experts, the tsunami was a unique experience, as one of the worst natural disasters in recent history, and one that affected six countries of the WHO South-East Asia Region simultaneously. The event marked a watershed in the history of disasters in the Region. It highlighted many critical issues, and enabled comparisons between different approaches to disaster management in different countries. After the response and early recovery phase, the current period has provided an appropriate time to reflect on the work done and strategies undertaken in the past, and learn how the lessons from this experience can be applied to future disasters all over the world. The regional consultation focused on how to act on and incorporate the lessons learnt from the tsunami into disaster management policies and plans of every nation, so that they could be implemented to strengthen emergency preparedness and response at every level in every country in the region. The emphasis was on action.

**DRR7433**

Establishing a mass casualty management system

By the Pan American Health Organization (PAHO), World Health Organization (WHO), 2001
58 pages
ISBN 9275123462

Many lives have been lost in mass casualty situations because resources were not mobilized efficiently. The challenge we face is this: the more scarce the resource, the more efficient the organization must be. This publication describes the steps in designing a mass casualty management system that will ensure the highest possible survival rate. It focuses on the involvement of police, firefighters, Red Cross volunteers, and health center and hospital staff. If these professionals form part of the structure that we refer to as the mass casualty management "system" in this publication, they can contribute enormously to saving lives.

**DRR10480**

Guía de preparativos de salud frente a erupciones volcánicas: módulo 2, protección de los servicios de salud frente a erupciones volcánicas

By the Pan American Health Organization (PAHO), Humanitarian Aid Office of the European Commission (ECHO), 2005; 80 pages

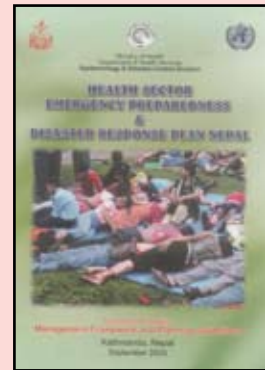
La mayor parte de los volcanes activos en el mundo están en América Latina y el Caribe, y millones de personas viven en pueblos y ciudades situados en los alrededores. A través de la historia, varios de estos volcanes han demostrado su gran capacidad de destrucción. La nueva Guía de Preparativos de Salud Frente a Erupciones Volcánicas brinda material de apoyo para la preparación de planes de contingencia del sector de la salud para enfrentarse a estas emergencias. La preparación de esta Guía involucró un largo proceso de recolección, sistematización y validación de la información, durante el cual fueron consultados más de 100 expertos, especialmente de Colombia y Ecuador. Esta Guía describe estrategias para diagnosticar el riesgo volcánico, analizar la vulnerabilidad e los establecimientos de salud y planificar la respuesta en caso de erupciones volcánicas. Incluye una guía para la formulación del plan hospitalario de contingencia para eventos volcánicos.

**DRR10477**

Guidelines on preparedness before, during and after an ashfall

By the International Volcanic Health Hazard Network (IVHHN), Cities and Volcanoes Commission, GNS Science and the United States Geological Survey (USGS)
14 pages

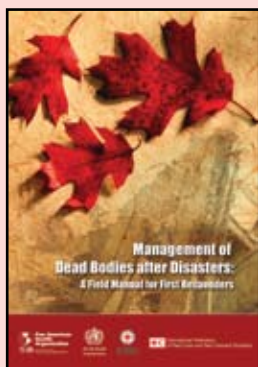
This document has been prepared to promote the safety of those who experience volcanic ashfall. It details procedures to follow if warning of a volcanic ashfall is given, recommends what to do during ashfall, and what methods are most effective for cleaning up volcanic ash after the event.

**DRR10448**

Health sector emergency preparedness and response plan Nepal: disaster analysis, management framework and planning guidelines

By EDCD; Ministry of Health, Department of Health Services, Nepal; WHO, 2003; 40 pages

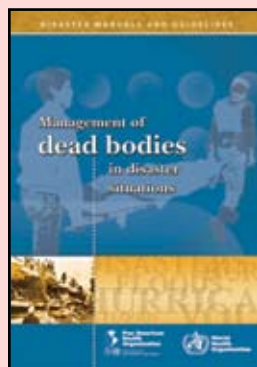
The health sector plan from 2003 presents the various disaster scenarios that confront Nepal along with policy recommendations on how to respond to emergencies. It is the outcome of an on-going planning process to prepare the health sector for future emergencies.

**DRR10388**

Management of dead bodies after disasters: a field manual for first responders

Oliver Morgan, Morris Tidball-Binz, Dana Van Alphen
By PAHO, WHO, IFRC, 2006
47 pages
ISBN 9275126305

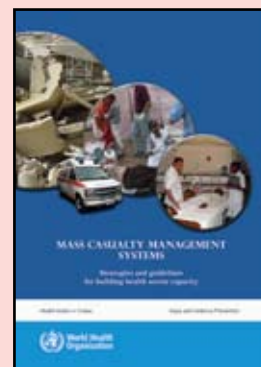
This field manual presents simple recommendations for non-specialists to manage the recovery, basic identification, storage and disposal of dead bodies following disasters. It also makes suggestions about providing support to family members and communicating with the public and the media. This manual will be useful during the immediate response to a disaster and where forensic response is unavailable. Furthermore, it will be useful for those preparing mass fatality disaster plans. The recommendations are relevant for local, regional and national authorities as well as for non-governmental organizations.

**DRR9324**

Management of dead bodies in disaster situation

By the Pan American Health Organization (PAHO), World Health Organization (WHO), 2004
176 pages
ISBN 9275125295

This manual provides the technical information needed to support State authorities in the proper management of dead bodies, taking into account the following principles: the body of a person killed as a result of a disaster does not pose a risk for infection; mass graves should never be used for burying disaster victims; under no circumstances should mass cremation of bodies take place when this goes against the cultural and religious practices of the affected population; finally, it is necessary to exhaust every effort to identify the bodies, and as a last resort bury unidentified corpses in individual niches or graves. This is a basic human right of surviving family members. This manual should be of interest to specialists in disasters and in management of human remains, and especially national or local authorities who are responsible for ensuring that bodies are treated in a dignified manner and that the human rights of those affected by disasters are respected.

**DRR10443**

Mass casualty management systems: strategies and guidelines for building health sector capacity

By the World Health Organization (WHO), 2007
34 pages

The common gaps in health system preparedness around the world are generally well understood, but they are often not addressed in a comprehensive and systematic way. In particular, many countries have not yet developed Mass Casualty Management Plans, and communities are too often left alone to develop preparedness and response plans without guidance from higher levels. In September 2006, a Global Consultation on Mass Casualty Management was held in Geneva at WHO headquarters. The Guidelines set out in this document are the direct result of the consultation. They are designed to help policy makers, decision makers and emergency managers at all levels, especially at community level, to overcome the gaps in health system preparedness for managing mass casualty incidents.

**DRR6992****Mitigation of disasters in health facilities: general issues, volume 1**

By the Pan American Health Organization (PAHO), World Health Organization (WHO), 1993
43 pages
ISBN 9275120994

This document aims to present a series of reflections on the criteria governing design and construction of health infrastructure and puts forward recommendations about ways to mitigate risk to the population and to the investment made in construction of health infrastructure.

**DRR6993****Mitigation of disasters in health facilities: administrative issues, volume 2**

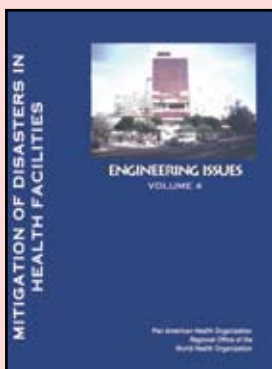
By the Pan American Health Organization (PAHO), World Health Organization (WHO), 1993
71 pages
ISBN 9275121001

The hospital system constitutes one of the fundamental components of the health sector. Although the primary health care level has received special attention in recent years, this document refers essentially to infrastructure of the second and third level.

**DRR6994****Mitigation of disasters in health facilities: architectural issues, volume 3**

By the Pan American Health Organization (PAHO), World Health Organization (WHO), 1993
80 pages
ISBN 927512101X

This document aims to present a series of considerations on the criteria governing architectural design of health infrastructure and offers recommendations that should be discussed by participants representing various disciplines on ways to mitigate risk both to the population and to the investment made in construction of health facilities.

**DRR6995**

Mitigation of disasters in health facilities: engineering issues, volume 4

By the Pan American Health Organization (PAHO), World Health Organization (WHO), 1993
84 pages
ISBN 9275121028

It bears noting that many of the damaged hospitals have been designed in accordance with standards of seismic-resistant construction. This suggests that the structural design of hospitals should be carried out with much greater care than in the case of more conventional designs and that it may not be enough to simply plan the structural design for forces greater than those used in calculations for residential or office buildings. The structural design should include decisions on safety, resistance, and ductility, not only with regard to the purely physical aspects that earthquakes entail but also with regard to social, economic, and human criteria that bear on the planning of the hospital.

**DRR2818**

“Reconstruction and mitigation programs in Jamaica: post hurricane Gilbert” international conference on disaster mitigation in health facilities (Mexico city, 26-28 February 1996)

By Africo D. Adams
PAHO, 1996
19 pages

This paper briefly describes the island's exposure to hurricanes and earthquakes, and the impact of Hurricane Gilbert, 1988, on Jamaica. It describes the then existing disaster mitigation strategies, and identifies the major areas of damage and failure. It lists the steps taken immediately after the hurricane, to identify the deficiencies and set new strategies for repair, retro-fitting and mitigation.

**DRR8218**

Report on the consultation on health disaster preparedness, mitigation and response in the Eastern Mediterranean Region, Syria, 2003

By the World Health Organization (WHO), 2003
16 pages

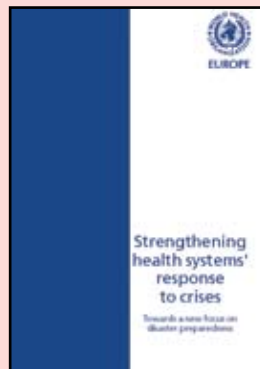
The WHO Regional Office for the Eastern Mediterranean (EMRO) held a consultation on health disaster preparedness, mitigation and response in the Eastern Mediterranean Region in Damascus, Syrian Arab Republic, on 1–4 December 2003. The objectives of the meeting were to define regional/country vulnerability and needs for disaster mitigation; build consensus on all aspects of a 5-year draft regional strategy for disaster preparedness; and provide guidance for the formulation of a 5-year preparedness mitigation, prevention and response workplan. The consultation was attended by representatives from 11 countries of the region: Afghanistan, Egypt, Jordan, Islamic Republic of Iran, Iraq, Morocco, Pakistan, Sudan, Syrian Arab Republic, Tunisia and Republic of Yemen. Active participation from UN agencies (UNICEF, UNDP and ISDR), the European Union and the International Federation of Red Cross/Red Crescent Societies enriched the debates and promoted an interagency and intersectoral approach to this important topic.

**DRR10422**

Risk reduction and emergency preparedness: WHO six-year strategy for the health sector and community capacity development

By the World Health Organization (WHO), 2007
20 pages

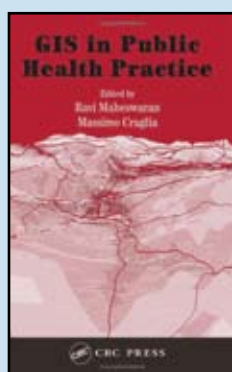
The World Conference on Disaster Reduction, held in January 2005 in Kobe, Japan, adopted the Framework for Action 2005–2015: Building Resilience of Nations and Communities to Disasters and provided and promoted a strategic and systematic approach to reducing vulnerabilities and risks to hazards. WHO will partner the United Nations International Strategy for Disaster Reduction (ISDR) and other UN and non-UN agencies in the 2008–2009 Safe Hospitals Initiative, which aims at building the resilience of hospitals and other health facilities to disasters, both structural and functional, so that they would still be functional under emergency situations. Under the aegis of international policies, including WHO resolutions, and as part of its mandate as the international health lead agency and the IASC global health cluster leader, WHO intensified its work during 2006 in the field of emergency preparedness and response. Beginning with the definition of its global strategy and moving gradually into the implementation of the main directions highlighted in the strategy. This strategy is based on the recommendations of a global consultation held by WHO in February 2006 that brought together experts in emergency preparedness and response from around the world.

**DRR10466**

Strengthening health systems' response to crises, towards a new focus on disaster preparedness

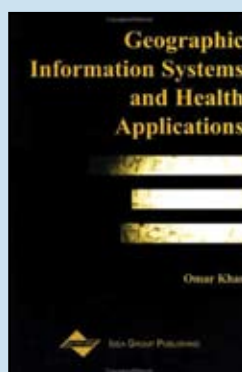
By the World Health Organization, Regional Office for Europe (WHO/EURO), 2004
41 pages

Disasters have enormous consequences, socially and economically, and have long-term detrimental effects, especially on vulnerable societies and population groups. The people affected have a right to receive adequate help. Support and appropriate assistance should be provided according to their specific needs. Disaster preparedness is primarily the responsibility of national authorities and provides an excellent opportunity for community involvement. This report is a result of a three-day workshop on strengthening national disaster preparedness capacity of health systems to respond to crises in the WHO European Region. The workshop was attended by representatives of 12 Member States of the European Region, laying the ground for further collaboration to improve effective partnerships between all Member States and the WHO Regional Office for Europe in the field of disaster preparedness and response.

**DRR10514****GIS in public health practice**

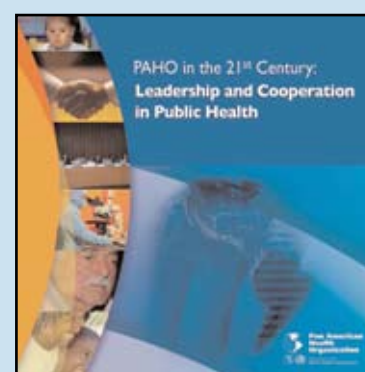
By Ravi Maheswaran, Massimo Craglia
 CRC Press, 2004
 304 pages
 ISBN 0415306558

Significant advances in the evaluation and use of geographic information have had a major effect on key elements of public health. Strides in mapping technology as well as the availability and accuracy of health information enable public health practitioners to link and analyze data in new ways at international, regional, and even street levels. This geographical perspective generates new approaches in the study of communicable disease control, environmental health protection, health needs assessment, planning and policy, operational public health management, and many other areas. GIS in public health practice includes contributions from the leading researchers in the field who participated in the First European Conference on Geographic Information Sciences and Public Health. This event promoted the use of GIS within the realm of public health. Specifically selected and expanded contributions illustrate particular areas of application and address issues of major importance. Many of the chapters have a UK or European focus, but examine issues, principles, and methods that are relevant worldwide.

**DRR10515****Geographic information systems and health applications**

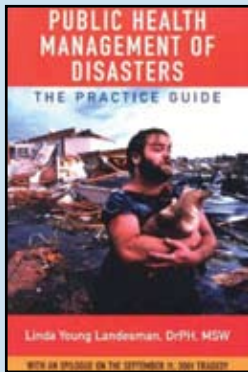
By Omar A. Khan, Ric Skinner
 IGI Global, 2002
 343 pages
 ISBN 1591400422

The use of Geographic Information Systems (GIS) in the health sector is an idea whose time has come. The current applications of GIS in health are diverse and extensive. The present GIS environment is heavily driven by technology and such an approach is indeed logical for the most part. However, the needs of less-developed countries in utilizing the concepts and technologies of mapping should not be neglected in the continuing evolution of GIS. Geographic information systems and health applications presents a sampling of the many applications utilizing GIS in the field of health.

**DRR10479****PAHO in the 21st Century: leadership and cooperation in public health**

By the Pan American Health Organization (PAHO), 2006
 54 pages
 ISBN 9275173249

Strengthening cooperation in public health is critical to providing a better response to countries' needs and promoting Health for All, tackling the unfinished agenda, protecting achievements, and facing new challenges. PAHO has turned this priority into concrete action for the mobilization of greater resources for health, efforts that made it possible for budgetary income to reach record levels of voluntary contributions in the 2004-2005 biennium. This priority can also be seen in the design of the regional program budget policy, in the support to the countries to gain access to the growing resources available in global initiatives, and in the development of partnerships with other entities and organizations.

**DRR10506****Public health management of disasters: the practice guide**

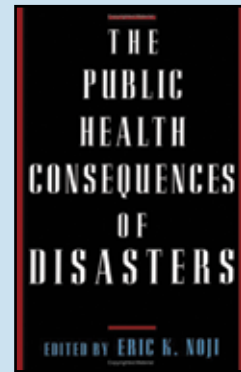
By Linda Young Landesman
American Public Health Association,
2001
273 pages
ISBN 0875530257

Emergency response and public health preparedness has gained a heightened awareness in our consciousness because of the tragic events of September 11, 2001. Because of these events and of the increasing number of natural disasters that have struck across the United States, there are concerns that the public health infrastructure is not sufficient to meet the need from the threats of bioterrorism or weapons of mass destruction. This book is the first comprehensive public health text for public health practitioners in this relatively new practice area as public health leaders begin the comprehensive nationwide integration of health departments into the emergency response of communities. This book can serve as a quick reference for either public health practitioners or public safety personnel who need quick information about disaster response for natural, man-made, and weapons of mass destruction (AKA bioterrorism).

**DRR10469****Public health response to extreme weather and climate events, working paper**

By the World Health Organization,
Regional Office for Europe (WHO/
EURO), 2004
6 pages

Severe floods, windstorms, heat-waves and cold-waves have caused dramatic political, social, environmental and health consequences in Europe over the past few years. In response to these events, ministries of health and other public health authorities, along with national and international meteorological services and organizations, are focusing increased attention on developing appropriate strategies and measures to prevent health effects from extreme weather and climate events in the future. Efforts are being made to understand the lessons learnt from recent events, to evaluate the effectiveness of the measures taken and early warning systems in place, and to use the knowledge gained to target future activities. The recent events have also increased interest in whether the intensity and frequency of future extreme weather and climate events could be expected to change as one result of a changing climate.

**DRR10505****The public health consequences of disasters**

By Eric K. Noji
Oxford University Press, 1997
486 pages
ISBN 0195095707

Illustrated with examples from recent research in the field, this book summarizes the most pertinent and useful information about the public health impact of disasters. It is divided into four sections dealing with general issues, geophysical events, weather-related problems, and human-generated disasters. Throughout the book the focus is on the level of epidemiologic knowledge about each aspect of disasters. Exposure-, disease-, and health-event surveillance are stressed because of the importance of objective data to disaster epidemiology and effective decision-making. In addition, the contributors pay particular attention to prevention and control measures, and provide practical recommendations in areas in which the public health practitioner needs more useful information. The text advocates stronger epidemiologic awareness as the basis for better understanding and control of disasters.



DRR10433

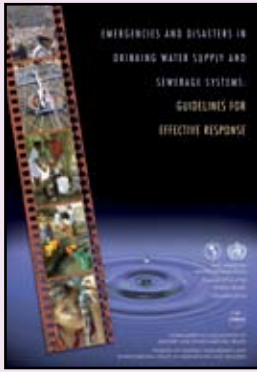
The world health report 2007: a safer future, global public health security in the 21st century

By the World Health Organization (WHO), 2007

72 pages

ISBN 9789241563444

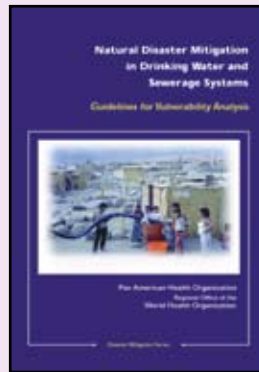
The World Health Report 2007 is dedicated to promoting global public health security – the reduced vulnerability of populations to acute threats to health. This year's World Health Day, celebrated in April, launched WHO's discussion on global public health security. Around the world, academics, students, health professionals, politicians and the business community are engaged in dialogue on how to protect the world from threats like pandemic influenza, the health consequences of conflict and natural disasters, and bioterrorism. The World Health Report 2007 addresses these issues, among others, in the context of new tools for collective defence, including, most notably, the revised international health regulations (2005). These Regulations are an international legal instrument designed to achieve maximum security against the international spread of diseases. They also aim to reduce the international impact of public health emergencies.

**DRR7228**

Emergencies and disasters in drinking water supply and sewerage systems: guidelines for effective response

By PAHO/WHO, AIDIS
PAHO/WHO, 2002
90 pages
ISBN 9275123675

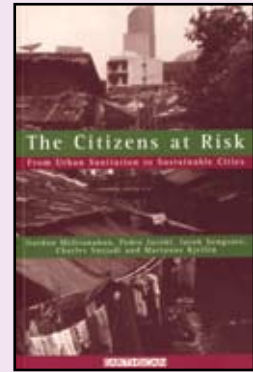
This book was prepared jointly by PAHO and the International Division of Sanitary engineering and Environmental Health in Emergencies and Disasters (DIEDE), a technical division of the Inter-American Association of Sanitary and Environmental Health (AIDIS). It is a practical guide for developing emergency and disaster plans for these systems, and it stems from a detailed knowledge of the threats and existing vulnerabilities. The guide reviews and surpasses other technical documents published in the past by PAHO and is an essential complement to the book *Natural Disaster Mitigation in Drinking Water and Sewerage Systems*, published by PAHO in 1998. This book is aimed at managers, administrators, planners and designers, as well as personnel who operate and maintain these systems. It will assist in the adequate planning of disaster response, ensuring the quality and continuity of the services, and in this way, protect and preserve the health of the affected population.

**DRR8347**

Natural disaster mitigation in drinking water and sewerage systems: guidelines for vulnerability analysis

By PAHO/WHO, 2001
86 pages
ISBN 9275122504

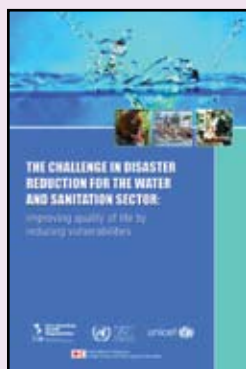
Vulnerability analysis, the topic of this publication, provides a simple approach for assessing the vulnerability of system components to the impact of hazards in a particular area. The outcome of the analysis will define the necessary mitigation measures and emergency response procedures should a disaster occur. These guidelines are meant to be used as an analytical tool by engineering and technical personnel working with drinking water and sewerage services to diagnose the behavior of these systems in the event of natural disaster.

**DRR10362**

The citizens at risk: from urban sanitation to sustainable cities

By Gordon McGranahan, Pedro Jacobi, Jacob Songso, Charles Surjadi, Marianne Kjellen
Earthscan Publications, 2001
240 pages
ISBN 1853835617

Local environments such as cities and neighbourhoods are becoming a focal point for those concerned with environmental justice and sustainability. *The Citizens at Risk* takes up this emerging agenda and analyses the key issues in a refreshingly simple yet sophisticated style. It analyzes how environmental and health risks arise in cities, who has to bear them and why, focusing on cities in Asia, Africa and South America. On the basis of this understanding it explains how conditions can be improved for those living in these rapidly growing cities and argues that environmental justice provides a more meaningful measure and goal for urban environmental improvement than "sustainable development. Taking a comparative look at cities in Africa, Asia and Latin America, the book examines: the changing nature of urban environmental risks; the rules governing the distribution of such risks and their differential impact; how the risks arise and who is responsible.

**DRR10489**

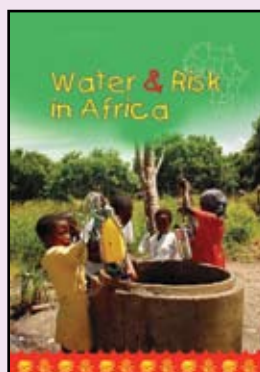
The challenge in disaster reduction for the water and sanitation sector: improving quality of life by reducing vulnerabilities

By PAHO, UNICEF, IFRC, UN/ISDR, 2006

37 pages

ISBN 9275126291

This joint publication (PAHO, UNICEF, ISDR, and IFRC) was introduced at the 4th World Water Forum that took place in Mexico in March 2006 to draw attention to the importance of ensuring that water and sanitation systems remain fully operational in the aftermath of natural disasters. This is critical if countries are to ensure there are no setbacks to the hard-won achievements in terms of access to these services. Additionally, it will allow countries to meet, by the year 2015, the goal of reducing by half the proportion of people without sustainable access to drinking water and basic sanitation. Risk management is an important tool for the fulfillment of global challenges to provide water and sanitation services to all at all times.

**DRR10272**

Water and risk in Africa: a school's guide

By the Inter-Agency secretariat for the International Strategy for Disaster Reduction (UN/ISDR), 2004

31 pages

Water and Risk... These two words may look strange one next to the other. Indeed, water is generally helpful. But it is also true that water can be harmful: too little water is risk of drought, too much water is risk of flood, water - too scarce - is risk of conflict, water - impure - is risk of disease. Worse, these risks can lead to disasters. They can destroy property and ... life. Yet, this should not always be the case. There is much we can do. Each of us, teachers and students, we can take action. In fact, we should take action because when it is a matter of life and death, we should not expect others to do it for us. It is in the light of the above concern that the present booklet entitled Water and Risk in Africa - A School's Guide has been produced. This booklet seeks to help you to know more about risks and disasters related to water, and also about what to do to protect lives and property. It seeks to help you, as a teacher, to help your students to be risk aware and learn to protect their own lives and property. Still better, it also seeks to help you, as a school student, to help your family, your relatives and your friends to protect their own lives and property.

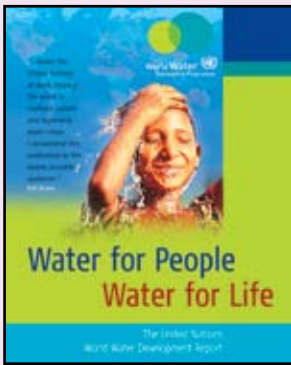
**DRR10451**

Water for health: taking charge

World Health Organization, 2001

34 pages

Long before the advent of modern medical care, industrialized countries decreased their levels of water-related disease through good water management. Yet, even in these countries, outbreaks of water-borne disease continue to occur, sometimes with lethal consequences. In developing countries, preventable water-related disease blights the lives of the poor. Diseases resulting from bad hygiene rank among the leading causes of ill-health. This report on water and sanitation has been issued by the World Health Organization to coincide with the World Water Day 2001. The report says that more than a billion people drink unsafe water each day and that 2.4 billion, or 40 percent of the world's population, are without adequate sanitation.



DRR6102

Water for people, water for life: the United Nations World Water Development Report

By the World Water Assessment Programme (WWAP)

UNESCO, 2003

576 pages

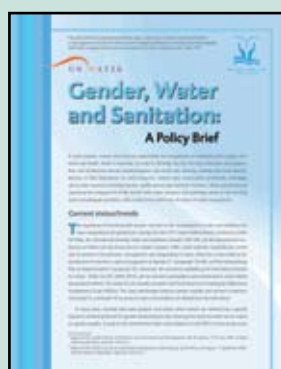
ISBN 1571816275

This first edition of the World Water Development Report, *Water for People, Water for Life*, is the main outcome of the World Water Assessment Programme, a long-term project started in response to decisions of the General Assembly and the Commission on Sustainable Development. A joint project involving twenty-three United Nations specialized agencies and other entities, it provides a comprehensive view of today's water problems and offers wide-ranging recommendations for meeting future water demand. This coincides with the International Year of Freshwater, which is being observed throughout 2003. Finally, it shows the United Nations at work, helping the world to confront current and impending water crises.

**DRR10420****Gender and health in disasters**

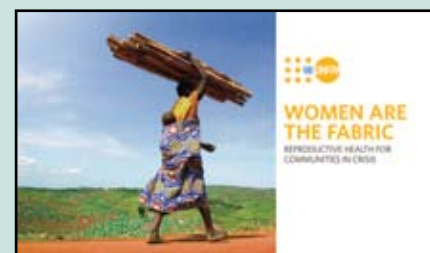
By the World Health Organization (WHO), 2002
4 pages

There is a general lack of research on sex and gender differences in vulnerability to and impact of disasters. The limited information available from small scale studies suggests that there is a pattern of gender differentiation at all levels of the disaster process: exposure to risk, risk perception, preparedness, response, physical impact, psychological impact, recovery and reconstruction.

**DRR10158****Gender, water and sanitation: a policy brief**

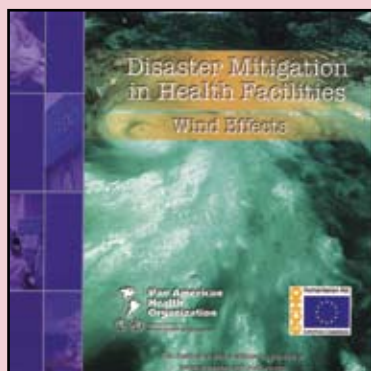
By UN-Water, 2006
16 pages

In most societies, women have primary responsibility for management of household water supply, sanitation and health. Water is necessary not only for drinking, but also for food production and preparation, care of domestic animals, personal hygiene, care of the sick, cleaning, washing and waste disposal. Because of their dependence on water resources, women have accumulated considerable knowledge about water resources, including location, quality and storage methods. However, efforts geared towards improving the management of the world's finite water resources and extending access to safe drinking water and adequate sanitation, often overlook the central role of women in water management.

**DRR10117****Women are the fabric: reproductive health for communities in crisis**

By the United Nations Population Fund (UNFPA), 2006
16 pages
ISBN 0897147847

Women form the backbone of families and communities. When emergencies strike, their important contributions become even more vital. But in times of crisis, the particular strengths and vulnerabilities of women are often overlooked in the rush to provide humanitarian assistance. This booklet describes the ways in which UNFPA works with partners to ensure that the specific needs of women are factored into the planning of all humanitarian assistance and addresses urgent reproductive health needs that are sometimes forgotten.



Disaster mitigation in health facilities: wind effects

By the Pan American Health Organization (PAHO), World Health Organization (WHO), Humanitarian Aid Office of the European Commission (ECHO)
PAHO/WHO, 2006
CD-ROM

The purpose of this CD ROM is to guide planners of health infrastructures (hospital administrators, engineers, architects, technicians, etc.) on the effects hurricanes can have on health facilities, as well as to serve as an instrument of training and dissemination of the basic aspects of disaster mitigation, as they relate to hurricanes. It includes PowerPoint presentations with scripts, several technical publications on the subject of disaster mitigation in health facilities, and posters that can be reproduced and disseminated.



Health library for disasters (Helid)

By PAHO/WHO, IFRC, UNHCR, SPHERE Project, UNICEF
PAHO/WHO, 2003
CD-ROM
ISBN 9241590688

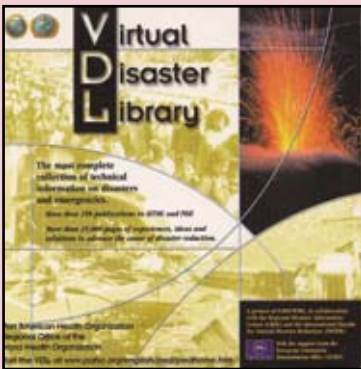
The virtual health library for disasters incorporates the works of many new partner organizations and consequently offers a much broader variety of information. The virtual health library for disasters is now truly a global collection. It is the result of a process of consultation and exchange among the disaster and emergency programs of WHO and PAHO, all WHO technical divisions, other United Nations agencies such as UNHCR, UNICEF, the ISDR, the International Committee for the Red Cross, Project SPHERE, NGOs such as OXFAM and national organizations such as Costa Rica's National Emergency Commission. Thanks to support from these organizations, the new virtual disaster library contains more than 400 scientific and technical documents including the most important works published by these agencies on disasters and emergencies. It also has an easy-to-use powerful and improved search engine that allows searching by topics, country, keyword, title, publisher or any other word.



Safe hospitals from disasters

By the Pan American Health Organization (PAHO), World Health Organization (WHO), 2007
DVD

PAHO has produced a new video, in DVD format, to promote the concept and strategy of Safe Hospitals. It makes it clear that this issue is of universal concern, extending beyond the health sector. The video explains what a safe hospital is and why we must safeguard these critical facilities. It highlights examples of best practices in the region, destroying the myth that it would be too expensive or even impossible to build hospitals with safeguards to ensure they continue to function after disasters.



Virtual Disaster Library (VDL)

By the Pan American Health Organization (PAHO), World Health Organization (WHO), Humanitarian Aid Office of the European Commission (ECHO)
PAHO/WHO, 1999
CD-ROM

The Virtual disaster library is the most complete electronic information tool for disaster reduction. It incorporates the works of many new partner organizations and consequently offers a much broader variety of information. It is the result of a process of consultation and exchange among the disaster and emergency programs of WHO and PAHO, all WHO technical divisions, other United Nations agencies such as UNHCR, UNICEF, the ISDR, the International Committee for the Red Cross, Project SPHERE, NGOs such as OXFAM and national organizations such as Costa Rica's National Emergency Commission. In addition to being available on the Internet, free of charge worldwide, the collection is on CD-ROM to facilitate its use, especially in areas where the access to Internet is still limited. The CD-ROM is distributed primarily in developing countries through institutions where a single copy can be used by groups.



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