1. The need for evidence in disasters

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2. The need for (improving) evidence in disasters

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3. The need for improving evidence to manage the health risks of emergencies and disasters

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Outline

1. Evidence – WHO perspective
2. Disasters – scoping the field
3. Who is involved?
4. What evidence products?
Five Areas of WHO Core Business – 64th WHA

1. Health systems and institutions
2. Health and development
3. Health security
4. Convening for better health
5. Evidence on health trends and determinants

- Build institutional capacities; leadership of the health cluster; IHR
- Increase quality of knowledge base, evidence-based guidelines
- Bringing partners together on global initiatives, priorities and action
**WHO guidance – a transparent process**

- Search for and retrieve all available evidence
- Identify relevant systematic reviews
- Formally assess quality of evidence
- GRADE (systematic and transparent approach)
Neonatal vitamin A supplementation

Vitamin A deficiency is a public health problem in many countries. In infants, vitamin A is essential to support rapid growth and to help combat infections. Babies are born with low vitamin A stores and are dependent on external sources—most importantly breast milk—to receive this vitamin, but in areas where the availability of foods rich in vitamin A is low, breast milk does not have adequate concentrations of vitamin A.

Vitamin A supplementation during the neonatal period was initially proposed as a means to increase baby's vitamin A stores, and more recently as a strategy to improve infant survival. However, the clinical trials investigating the impact of this intervention on infant morbidity and mortality have so far provided inconsistent findings.

At this time, the WHO does not recommend neonatal vitamin A supplementation as a public health intervention. As there are four ongoing trials that are expected will help clarify the efficacy and safety of this intervention, the current recommendations will be reviewed in 2013.

WHO documents

Evidence:
- Cochrane review
- Other systematic reviews
- Current clinical trials in the International Clinical Trials Registry Platform

Scoping the field of "disasters"

2010 UN Secretary General Report

In 2009, 328 disasters associated with natural hazards, affecting approximately, 113 million people and causing more than 10,000 deaths, were recorded by the Centre for Research on the Epidemiology of Disasters.

http://reliefweb.int/sites/reliefweb.int/files/resources/0C16F87B47B5FAEC492577FC000F2882-Full_Report.pdf

What does this mean for health?
The quest for evidence begins with a question

- Information management: What types of hazards? How were disasters defined? Who collected and reported the data and how?


- Health system/health infrastructure questions?
Ultimately ... to achieve better health outcomes:

- What could have been done better?
- What can be done in the future to reduce health risks and consequences? In all contexts?

- reduce hazards
- reduce vulnerabilities and build resilience
- increase capacities (systems, skills, knowledge, attitudes, resources, relationships)

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<tr>
<th>(Draft) HEDRM Components</th>
<th>Health Cluster roles</th>
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<td>Monitoring, reporting and evaluation</td>
<td>Methodologies/indicators for measuring performance</td>
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Research priorities for health service delivery

Mental Health

1. What are the stressors faced by populations in humanitarian settings?

5. How can we best adapt existing mental health and psychosocial interventions to different sociocultural settings?


Sexual and Reproductive Health

- CDC/Inter-agency Working Group on RH in Crises: "Technical Workshop on RH in Crises: Setting Research Priorities"
- MSF: Emergency Obstetric Care Innovations
- NORAD: RH Kits
  (Research, Evidence, and Norms (REN) - Department of Reproductive Health and Research)
Who?

Health Labs
Transp
Police & Fire
Local Government
Health Risk/Disaster Risk
Individuals
Universities
NGOs
Health Surveillance
Media
Mental Health
Em Medical Svcs
Aviation
Finance
Labour
Civil society
Airforce
Disaster Mgt Orgs
RC/RC
Soc Welfare
Health workers
Army & Airforce
Meteorology
RC/RC
Health workers
Em Medical Svcs
Aviation
Finance
Labour
Civil society
Airforce
Disaster Mgt Orgs

...and many more

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What evidence products? For whom?

- Clinicians?
- Community health workers?
- Risk assessors?
- Technical guidance developers?
- Researchers?
- Media?
- Educators?
- Resource managers?
- Donors/financial institutions?
- Researchers?
- ...
WHO is committed to:

- Supporting development of country capacities
- Fulfilling our operational roles – IHR, the health cluster
- Building the evidence base

Develop a research agenda and build research community

Systematic reviews/Evidence Aid have a vital role

Need better evidence to improve health outcomes and reduce the consequences for people at risk of emergencies and disasters
Contact information

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