

Bird Flu reaches Zealand

On March 14th H5N1 was identified in a common buzzard on the Zealand Island in Denmark. Sequencing of the cleavage site of the HA gene revealed that the virus is highly pathogenic for fowl. Not New Zealand this time and may it long remain so. However, the seemingly unstoppable spread of the virus continues. Depending on whether countries such as Northern Cyprus and Taiwan are accepted or not, a total of 41-43 countries have reported H5N1 outbreaks since 2004. The latest countries to join the "club" have been Myanmar, Sweden, Afghanistan, Denmark and Israel. Cambodia, India, Israel, Malaysia, Myanmar, Romania, Russia, and possibly Serbia have had outbreaks in domestic poultry. The spread of human fatalities has widened with the death of a young girl in Cambodia and a 29 year old woman in Shanghai. This is the first case reported in Shanghai and China's 16th case of human infection, 11 of them fatal.

Just to recap, here is a chronology of major bird flu developments in 2006.

Jan 18 - International donors pledge \$1.9 billion to combat the spread of bird flu at the end of a conference in Beijing.

Feb 8 - The first African cases of the H5N1 strain are detected in poultry in the northern Nigerian states of Kano, Kaduna and Plateau.

Feb 11/12 - Italy reports six wild swans found in Sicily and on the southern mainland have tested positive for H5N1. In Greece, three swans found south of Thessaloniki test positive for H5N1. These were the first known cases of the strain in the EU.

Feb 14 - Iran and Austria report cases of H5N1.

Feb 15 - Germany confirms two dead swans found on the Baltic island of Ruegen were infected with H5N1. More than 100 wild birds have since tested positive for H5N1.

Feb 17 - Egypt finds its first cases of H5N1 in chickens.

Feb 18 - India announces its first cases of H5N1, finding the virus in poultry in a western state.

Feb 22 - The EU approves plans by France and the Netherlands to vaccinate millions of hens, ducks and geese against bird flu.

Feb 25 - France confirms H5N1 at a farm in the east where thousands of turkeys have died. It is the first case of the virus in domestic farm birds in the EU.

Feb 27 - Domestic ducks from Niger test positive for H5N1.

March 6 - Poland confirms two dead swans had H5N1.

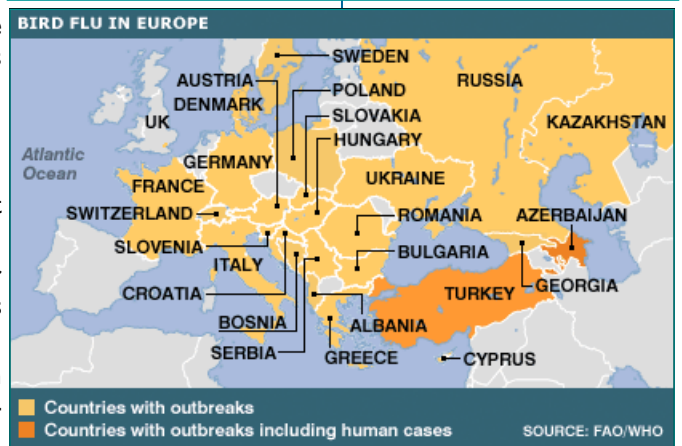
March 12 - Cameroon becomes fourth African state to report H5N1.

March 16 - Afghanistan, Myanmar and Denmark confirm their first cases of H5N1 in birds. The next day Israel confirms its first cases.

March 21 - Pakistan confirms bird flu, with H5N1 reported in two poultry flocks at farms in the North West Frontier Province.

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March 24 - WHO confirms a human death in China. The global toll stands at 105, with four victims in Turkey, 22 in Indonesia, five in Cambodia, 11 in China, 14 in Thailand, 42 in Vietnam, two in Iraq and five in Azerbaijan. Jordan confirms H5N1 after at least three dead turkeys at a domestic farm in Ajloun tested positive for the disease.

And that leads the biggest talking point in the rush to identify the spreaders of H5N1. Is it wild fowl or domestic flocks?

Wendy Orent, the author of "Plague: The Mysterious Past and Terrifying Future of the World's Most Dangerous Disease." has no doubts. She believes the virus is a product of the industrial poultry trade. She states her case in an article which originally appeared in the Los Angeles Times.

Is the H5N1 virus an unwanted product of the industrial poultry trade?

Chicken has never been cheaper. A whole one can be bought for little more than the price of a cup of coffee from Starbucks. But the industrial farming methods that make ever-cheaper chicken possible may also have created the lethal strain of bird flu virus, H5N1, that threatens to set off a global pandemic.

According to Earl Brown, a University of Ottawa flu virologist, lethal bird flu is entirely man-made, first evolving in commercially produced poultry in Italy in 1878. The highly pathogenic H5N1 is descended from a strain that first appeared in Scotland in 1959.

People have been living with backyard flocks of poultry since the dawn of civilization. But it wasn't until poultry production became modernized, and birds were raised in much larger numbers and concentrations, that a virulent bird flu evolved. When birds are packed close together, any brakes on virulence are off. Birds struck with a fatal illness can easily pass the disease to others, through direct contact or through fecal matter, and lethal strains can evolve. Somehow, the virus that arose in Scotland found its way to China, where, as H5N1, it has been raging for more than a decade.

Industrial poultry-raising moved from

the West to Asia in the past few decades and has begun to supplant backyard flocks there. According to a recent report by Grain, an international nongovernmental organization, chicken production in Southeast Asia has jumped eightfold in 30 years to about 2.7 million tons. The Chinese annually produce about 10 million tons of chickens. Some of China's factory farms raise 5 million birds at a time. Charoen Pokphand Group, a huge Thai enterprise that owns a large chunk of poultry production throughout Thailand and China as well as in Indonesia, Cambodia, Vietnam and Turkey, exported about 270 million chickens in 2003 alone.

Since then, the C.P. Group, which styles itself as the "Kitchen of the World," has suffered enormous losses from bird flu. According to bird-flu expert Gary Butcher of the University of Florida, the company has made a conscientious effort to clean up. But the damage has been done.

Virulent bird flu has left the factories and moved into the farmyards of the poor, where it has had devastating effects. Poultry may represent a family's greatest wealth. The birds often are not eaten until they die of old age or illness. The cost of the virus to people who have raised birds for months or years is incalculable and the compensation risible: In Thailand, farmers have been offered one-third of their birds' value since the outbreak of bird flu.

Sometimes farmers who don't want to lose their investments illicitly trade their birds across borders. In Nigeria, virus-infected chickens threatened with culling are sold by the poor to even poorer people, who see nothing unusual in eating a sick bird. So the birds — and the bird flu virus — slip away to other villages and other countries.

The Southeast Asian country without rampant bird flu is Laos, where 90 percent of poultry production is still in peasant hands, according to the U.S. Department of Agriculture. About 45 small outbreaks in or near commercial farms from January to March 2004 were quickly stamped out by culling



birds from contaminated farms.

Some researchers still blame migratory birds for the relentless spread of the bird flu virus. But Martin Williams, a conservationist and bird expert in Hong Kong, contends that wild birds are more often victims than carriers. Last spring, for instance, about 5,000 wild birds died at Qinghai Lake in western China, probably from exposure to disease at commercial poultry farms in the region, according to Grain. The virus now in Turkey and Nigeria is essentially identical to the Qinghai strain.

Richard Thomas of Birdlife International, a global alliance of conservation organizations, and others dispute the idea that wild birds carried the flu virus from Qinghai to Russia and beyond. They point out that the disease spread from Qinghai to southern Siberia during the summer months when birds do not migrate, and that it moved east to west along railway lines, roads and international boundaries — not along migratory flyways.

What evidence there is for migratory birds as H5N1 carriers is contained in a study published in the Proceedings of the National Academy of Sciences. Researchers examined 13,115 wild birds and found asymptomatic bird flu in six ducks from China. Analysis showed that these ducks had been exposed earlier to less virulent strains of H5 and thus were partly immunized before they were infected with H5N1. On this slender basis, coupled with the fact that some domestic ducks infected for experimental purposes don't get sick, the study's authors contend that the findings "demonstrate that H5N1 viruses can be transmitted over long distances by migratory birds."

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Even so, the researchers conceded that the global poultry trade, much of which is illicit, plays a far larger role in spreading the virus. The Nigerian government traced its outbreak to the illegal importation of day-old chicks. Illegal trading in fighting cocks brought the virus from Thailand to Malaysia in fall 2005. And it is probable that H5N1 first spread from Qinghai to Russia and Kazakhstan last summer through the sale of contaminated poultry.

But an increasingly hysterical world targets migratory birds. In early February, a flock of geese, too cold and tired to fly, rested on the frozen waters of the Danube Delta in Romania. A group of 15 men set upon them, tossed some into the air, tore off others' heads and used still-living birds as soccer balls. They said they did this because they feared the bird flu would enter their

village through the geese. Many conservationists worry that what happened in Romania is a foreshadowing of the mass destruction of wild birds.

Meanwhile, deadly H5N1 is washing up on the shores of Europe. Brown says the commercial poultry industry, which caused the catastrophe in the first place, stands to benefit most. The conglomerates will more and more dominate the poultry-rearing business. Some experts insist that will be better for us. Epidemiologist Michael Osterholm at the University of Minnesota, for instance, contends that the "single greatest risk to the amplification of the H5N1 virus, should it arrive in the United States through migratory birds, will be in free-range birds ... often sold as a healthier food, which is a great ruse on the American public."

The truly great ruse is that industrial poultry farms are the best way to pro-

duce chickens — that Perdue Farms and Tyson Foods and Charoen Pokphand are keeping the world safe from backyard poultry and migratory birds. But what's going to be on our tables isn't the biggest problem. The real tragedy is what's happened in Asia to people who can't afford cheap, industrial chicken. And the real victims of industrially produced, lethal H5N1 have been wild birds, an ancient way of life and the poor of the Earth, for whom a backyard flock has always represented a measure of autonomy and a bulwark against starvation.

Well, that is one view. One that sounds plausible and will appeal to "conspiracy theorists." The reality may be that there are a number of causal agents behind this scourge. Nature is ever inventive and viruses have been able to adapt without human intervention since time immemorial. #

Some other contretemps to keep an eye on

An Indian human rights organisation is appealing for help for 46,000 people uprooted by a Maoist rebellion in the central Indian state of Chhattisgarh. Politicians and police have prodded tribesmen to forsake their villages for crude refugee camps and join a new campaign against guerrillas who have added misery and terror to their crushing poverty.

The Forum for Fact-finding Documentation and Advocacy (FFDA) says the Adivasi villagers from 644 villages in Dantewada district are living as internally displaced people in 27 camps. A new report by the Asian Centre for Human Rights describes conditions as "deplorable" and "sub-human" and says villagers remain vulnerable to the threat of Maoist attack.

A Russian TV report raised the alarm on a brewing humanitarian crisis in Moldova's breakaway Dnestr region. But Russian news network RIA Novosti quotes a senior EU mission official as saying there's no ground for such an emergency.

Earlier this month, Moldova asked neighbouring Ukraine to introduce new customs regulations requiring all Ukraine-bound exports from Dnestr to have a Moldovan stamp — a move some

Russian politicians have said amounts to an economic blockade of the unrecognised republic, with consequences for the flow of goods into Dnestr as well. Critics said Dnestr faced shortages of vital supplies of food, fuel and medicine as a result.

But RIA Novosti quotes Ferenz Banfi, chief of the EU's mission on the Moldova-Ukraine border, as saying supplies were flowing freely into Dnestr, including some 1,800 tonnes of poultry in the past few days.

At a discussion evening in London, medical charity Médecins Sans Frontières highlighted the plight of 92,000 civilians known to have been forced from their homes by violence in the north and central Katanga province of eastern Congo. MSF put out a good briefing paper on the subject in February.

The U.N. Office for the Coordination of Humanitarian Affairs puts the number of displaced in Katanga at at least 150,000 and warns of "critical" food shortages and lack of protection. The U.N.'s mission in Congo calls the international response to the humanitarian crisis woefully inadequate.

Sabre-rattling continues in Sri Lanka despite the approach of a new round of peace talks in Switzerland. Sri Lanka's army chief says both the military and Tamil Tiger rebels are re-arming, and that a 2002 ceasefire has too many loopholes.

Both sides repeatedly say they want to avoid a return to Sri Lanka's two-decade civil war, which killed more than 64,000 people. But the rebels have warned that unless concessions are made, war may be around the corner.

More violence in Pakistan as government security forces kill up to 20 militants in the restive tribal area of North Waziristan. Around 200 tribesmen were killed in clashes with the army in the semi-autonomous region earlier this month as they answered a call to arms by militant Muslim clerics following a special forces assault on an al Qaeda camp in the area bordering Afghanistan.

And finally, U.S. officials say another Katrina-strength storm could swamp low-lying areas of New Orleans again, even as Mayor Ray Nagin says he's confident that \$770 million of levee repairs will protect most of the city this hurricane season. Residents remain wary. #

What's in a word?

From Robert Patton

There is always potential for confusion in an emergency response when military and civilian organizations work together. What does the word 'sector' mean? This question was asked at the United Nations 55th Civil Military Coordination course held recently in the Philippines which I attended. The numerous military personnel at the training responded that a sector was a "defined area of ground". Those who work in the humanitarian arena thought of a sector as being a "group of related activities", for example the health sector or the education sector.

Another word that created some confusion (and some smirks on military faces) was the word 'cluster'. This word has become part of the CDEM nomenclature in New Zealand and is being used in a similar context within the UN system. In this context, a cluster is a grouping of agencies that have similar objectives. When there is a multi-agency response to a major disaster it is much easier to coordinate if 'clusters' are formed. While I never heard it actually enunciated but my guess is that whenever the military personnel heard the word 'cluster', what came to their mind was an explosive device. Maybe they were not far off the mark...

Without pre planning and understanding, Sector Clusters have a pyrotechnical potential.

The objective of the course was to provide basic knowledge about international United Nations-led humanitarian operations; overall humanitarian coordination at various levels (headquarters, regional, field); as well as liaison and coordination between responders offering military and civil defence assets (MCDA) on the one hand, and civil authorities and humanitarian agencies involved in disaster response on the other. I found the course extremely beneficial for the international disaster response work I do and also for stimulating my thinking around what the likely situation would be in New Zealand in the event of a

major natural disaster. About 18 months ago I attended a major exercise in Christchurch where a UN disaster response team was involved. Following Hurricane Katrina in the United States, many international organizations responded, including foreign military. There are clear indications that following a major disaster in New Zealand there will be a need to coordinate a large humanitarian response that will include the UN and foreign governments offering both civil defence and military assets.

In the space of a few lines it is impossible to outline the content of an intensive, one week course, so I have chosen to highlight some components of the course that might be of interest to readers. Due to space constraints, I will provide introductory information only. To access further information I suggest doing a bit of research via the internet.

The Oslo Guidelines

In January 1994 the Government of Norway hosted an international high-level conference on the use of military and civil defence assets in disaster relief operations in times of peace. The outcome of this conference was a document titled "Guidelines on the Use of Military and Civil Defence Assets in Disaster Relief" or better known as the "Oslo Guidelines". The aim of these guidelines is to establish the basic framework for formalizing and improving the effectiveness and efficiency of the use of foreign military and civil defence teams and expertise in international disaster relief operations.

The Tampere Convention

In 1998 an Intergovernmental Conference on Emergency Telecommunications (ICET-98) was held in Tampere, Finland. At this conference a legally binding international convention was finalized and given the title "Tampere Convention on the Provision of Telecommunication Resources for Disaster Mitigation and Relief Operations". The Tampere Convention facilitates the use of communications equipment by humanitarian agencies and disaster response units in emergency situations. The convention empowers countries

to request that normal licensing and importation fees covering communications equipment be waived following disasters. This then allows the latest communications equipment to be moved across borders and deployed at the scene of a disaster without complicated legal constraints and lengthy delays. As of the end of March 9th 2006, 70 countries have signed, and 30 countries have ratified the Tampere Convention. New Zealand, Australia and the United States have yet to sign.

Disaster Management Training Programme (DMTP)

DMTP is a learning platform addressing crises, emergencies and disasters for the UN Member States, the UN System and international and non-governmental organisations.

DMTP's long-term development objective is to:

- reduce incidence and impact of crisis and disaster occurrences in programme countries;
- eliminate risks and vulnerability to such events; and
- promote effective national and regional strategies in crisis and disaster prevention, preparedness, mitigation, response and recovery, and encourage efficient co-ordination and collaboration at all phases of crisis and disaster management, between and among national and international partners.

On the DMTP website there are training modules in various disaster management topics. Although these training modules are somewhat dated, there is still some quite useful information. See www.undmtp.org/modules.htm

Virtual OSOCC

This is probably as good a time as any to mention the confusing plethora of acronyms one encounters when engaging with the UN. This course was no exception! Thankfully a list (consisting of many pages) was distributed with the main acronyms. So, what is the Virtual OSOCC, or Virtual On-site Operation Coordination Centre? It is

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a website that facilitates the sharing of information about new and ongoing emergencies. The main purpose of the Virtual OSOCC is to facilitate decision-making for international response to major disasters through real-time information exchange by all actors of the international disaster response community. Access to the website is restricted and application must be made to the website moderator. The site is primarily sponsored by OCHA (Office for the Coordination of Humanitarian Affairs).

Coordination and Communication

The key factor in coordination is communication. The UN identifies three key factors for coordination: information sharing (or communication); task division; and planning. Earlier I identified how different understanding of words or terms can lead to confusion. This is essentially miscommunication through misinterpretation. At the opening of the course an exercise was run, which involved the giving of some information. Subsequent activities were planned on the basis of that information. At the end of the exercise we found that the initial data was incorrect. This highlighted that you cannot always believe information you are given and that data must be continually verified.

Rather sadly, as the course took place there was the rescue mission in the Philippines for people caught in the massive mudslide on the island of Leyte. One evening we were privileged to spend some time at the Philippines National Disaster Coordinating Centre to see and hear how they were coordinating the rescue. A couple of the people on the course were from the Philippines and so took an extremely



A Philippine rescue team member carrying a body bag wades through mud at the buried Guinsaigon village in southern Leyte. Two weeks of heavy rain triggered the mudslide

close interest in what was happening and throughout the course shared information with the group as it came to hand. One afternoon they excitedly shared with the group that 50 people had been rescued from the buried school, which was the main focus of rescue attempts. The next day we found that this information was not correct. The media had been told that there was a 50% chance of survival for people in the school and had interpreted and reported this as 50 people being found alive and rescued. This highlighted, in a very real way, the dangers of miscommunication. A lesson none of us will ever forget. #

£1,000 fines for threats to NHS staff

'Having a go' at healthcare workers seems to be a world wide sport. At least one government seems prepared to do something about it. People who abuse or threaten NHS doctors and nurses face fines of up to £1,000.

The English Department of Health said its new "zero tolerance" approach would reduce the rising level of antisocial behaviour suffered by NHS staff. It said almost a quarter of doctors had faced swearing, harassment, bullying or threats from patients and their relatives.

The health secretary, Patricia Hewitt, said "We want to send a clear message to the public that this will not be tolerated, and anyone who threatens or verbally abuses our staff will be removed from the premises and could face a fine of up to £1,000."

The most recent NHS staff survey, carried out by watchdog group the Healthcare Commission, found 14% of staff had been physically attacked in 2004. A further 27% reported being bullied or harassed by patients or their relatives, with the results representing a small reduction from 15% and 28% respectively the previous year. There had been a 15-fold increase in the number of people prosecuted for attacking NHS staff since the establishment of the NHS Security Management Service in 2003. During 2004-05 there were 759 prosecutions, compared with 51 in 2002-03.

New Flu Prophylaxis

Miss Beatrice, the church organist, was in her eighties and had never been married. She was admired for her sweetness and kindness to all.

One afternoon the pastor came to call on her and she showed him into her quaint sitting room. She invited him to have a seat while she prepared tea.

As he sat facing her old Hammond organ, the young minister noticed a cut-glass bowl sitting on top of it. The bowl was filled with water and in the water floated, of all things, a condom! When she returned with tea and scones, they began to chat.

The pastor tried to stifle his curiosity about the bowl of water and its strange floater, but soon it got the better of him and he could no longer resist. "Miss Beatrice", he said, "I wonder if you would tell me about this?" pointing to the bowl.

"Oh, yes," she replied, "Isn't it wonderful? I was walking through the Park a few months ago and I found this little package on the ground. The directions said to place it on the organ, keep it wet and that it would prevent the spread of disease. Do you know I haven't had the flu all winter."

Chikungunya fever flourishing

“The media is over-reacting to a crippling mosquito-borne disease currently sweeping across the Indian Ocean region,” said World Health Organisation (WHO) Director General Lee Jong-Wook, speaking at a Port Louis news conference. “I think it is exaggerated. It is less alarming than what is being painted in the media,” the disease is rarely fatal.

“If it was a real issue, we would go in the hospitals and see people are dying.” Lee, visiting Mauritius to launch a global report on chronic diseases, said he did not believe the chikungunya virus was generally fatal. But he urged local populations to protect themselves by using repellent and removing mosquito breeding areas such as stagnant water pools and rubbish.

Locals in the region might not go along with Lee’s assessment. “Chikungunya” fever, a painful disease for which there is no cure or vaccine, has infected more than 180,000 people, mostly in Reunion but also in Mauritius, Seychelles, Mayotte and Madagascar, all located off the southeast coast of Africa.

The tropical virus, first recognized in Tanzania in 1952, is marked by high fever and severe rashes and can be extremely painful, leaving its victims in a stooped posture. Symptoms can last from seven days to a few months. The French volcanic island of Reunion has reported 186,000 cases and government officials say there have been 93 deaths which may be partly linked to the virus. The tropical virus can weaken the immune system, allowing other deadly diseases to set in.

Neighbouring Mauritius has so far reported 1,500 cases and around 6,000 suspected cases and is awaiting the test results after a 33-year-old man died last month. Officials say the numbers of new cases are declining.

Seychelles has had over 1,000 cases, the French island of Mayotte has had 2,000 cases and Madagascar has confirmed one case of the virus.

The Indian Ocean islands are concerned the impact the outbreak will have on their vital tourism sectors, but

Chikungunya-Fieber-Verbreitung

Gelenkschmerzen nach Afrika/Südostasien-Urlaub

Chikungunya: „der gekrümmt gehende“ (Kiswaheli)

- Starke Gelenkschmerzen
- Fieber
- Schüttelfrost
- Muskelschmerz
- Hautausschlag
- Bindehautentzündung

Chikungunya-Fieber wird nur selten diagnostiziert

Länder mit Ansteckungsgefahr

A German view that does not seem to be an over reaction. The red gives some indication of the spread

Lee said the WHO would issue a statement to reassure people planning to visit the region.

As this region is not a common tourist destination for New Zealand holiday makers we can ignore this far off occurrence – or perhaps we can’t. The first cases of chikungunya have been confirmed in French Guyana (in northern South America). Madagascar mosquitoes have not developed long range fuel tanks, two women from Guyana went to Madagascar for family reasons and had visited a town in the east of Madagascar which has been affected by dengue fever and where two cases of chikungunya have been recorded and presumably had been infected there.

The mosquito which transmits dengue fever can also transmit chikungunya, according to the Pasteur Institute in Cayenne, which confirmed the case of chikungunya. French Guyana is current affected by its worst outbreak of dengue since

the beginning of the 1990s.

Our vectors are not known for transmitting dengue fever. Others in the Pacific region are. As the rapid spread of West Nile virus across North America shows, the risk of vector spread diseases is on the increase. How long will it be before chikungunya becomes a phrase to drop into your barbecue conversation? #



In tropical areas, spraying in full protective equipment is a sweaty business

Not If, But When: Adapting to Natural Hazards in the Pacific Islands Region

The World Bank released this January a Policy Note on Pacific Island countries. In doing so they drew attention to the three 'I's' of risk management of natural hazards: Incentives, Institutions and Instruments. The Policy Note targets high-level decision makers in the Pacific Islands region, regional organizations and major development partners.

Pacific Island countries rank among the most vulnerable in the world to natural disasters. Since 1950, natural disasters have directly affected more than 3.4 million people and led to more than 1,700 reported deaths in the region (outside of Papua New Guinea). In the 1990s alone, reported natural disasters cost the Pacific Islands region US\$2.8 billion in real 2004 value.

Between 1950 and 2004, extreme natural disasters, such as cyclones, droughts and tsunamis, accounted for 65 percent of the total economic impact from disasters on the region's economies. Ten of the 15 most extreme events reported over the past half a century occurred in the last 15 years.

There has been a substantial increase in the number of reported natural disasters in the region since the 1950s, with a growing human impact per event. While this may be due to improved reporting, higher populations and increasing environmental degradation, there is no doubt that disasters in the region are becoming more intense and probably more frequent. Certainly, the number of hurricane-strength cyclones has increased in the southwest Pacific in the past 50 years, with an average of four events now occurring each year. Significant wave heights of recent cyclones have exceeded even climate change model projections.

With the climate trend for the Pacific pointing to more extreme conditions and increased climate variability in future, Pacific Island countries have little choice but to develop comprehensive risk management plans for the natural hazards they face.

As the required policy and technical responses are not particularly complex,

the economic, social and environmental benefits of managing these risks far outweigh their costs. What seems to have been lacking is the political will to mainstream risk management into national development planning and to ensure that policy and program responses to the challenges are sustained, relevant and effective.

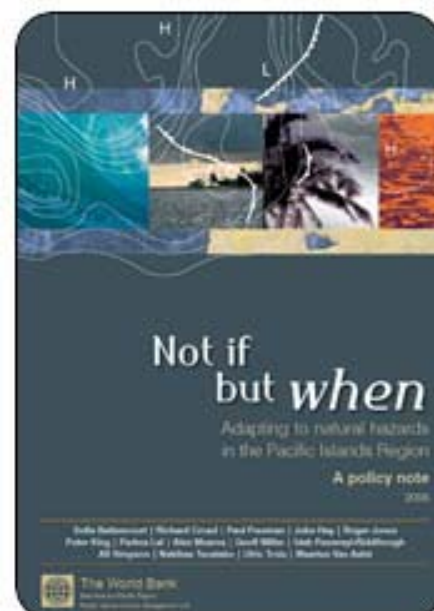
In order to address these concerns, this Policy Note advocates practical measures that countries can take to influence their national development policies and strengthen their programs. Importantly, it addresses factors which may constrain or limit collaborative action between communities, island leaders, experts and development partners. It suggests new institutional approaches, incentives, and instruments to promote risk management of natural hazards, including climate proofing capital investments.

The goal of this Policy Note is to influence policy makers and development partners in the Pacific Islands region to undertake risk management of natural hazards and minimize the future impacts of natural disasters, climate change and sea level rise.

In the short run, the Policy Note aims to review the disaster trends and lessons learned from pilot risk management of natural hazards initiatives, and recommend a strategic way forward. Particular attention is paid to the three 'I's' of risk management of natural hazards: Incentives, Institutions and Instruments. These are seen as constraints to the adoption of natural hazard risk management.

Perverse Incentives

- For many Pacific Island governments it is a rational decision not to reduce risk as long as donors respond generously in disasters, whether or not preventive efforts have been taken.
- The benefits of prevention may not become visible for years and may unfavourably compete with other short term domestic priorities.
- Donors face strong public pressure to respond rapidly to disasters and



often mobilize funds outside their normal budgets for this, whereas funding for preventive action is often constrained.

Poor institutional arrangements

- Risk management of natural hazards (RMNH) has not been adequately mainstreamed into national economic planning.
- Many RMNH efforts have been undermined because they are located in junior or weak ministries that have proven ineffective in influencing key ministries, such as public works, finance or health.

Instruments

- There is inadequate emphasis on awareness raising, behavioural change and enforcement - all of which are as important as physical investments.
- There is inadequate support for instruments such as vulnerability mapping which can help communities and government come to agreement on ways to minimise public and private asset risk.
- There is inadequate exposure of people working on national risk management of natural hazards efforts to international monitoring.

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HEMNZ Bulletin

The HEMNZ Bulletin is published monthly by the Risk Management Unit of St John Northern Region for all those interested in emergency management in health care settings

Articles and comment on emergency management issues are welcomed

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Check out our Web site at
www.hemnz.org.nz

Up coming Events

19 - 20 April 2006

Enterprise Wide Risk Management

Spencer on Byron, Takapuna,
Cost: \$2195 + GST

More information from;
www.conferenz.co.nz

15 - 16 May 2006

Innovations in the Clinical Management of Patients Involved in Disasters

Carlton Crest Hotel,
Brisbane

Cost Aus\$650

Brochure available from;

www.changechampions.com.au



An American ponders over the behaviour of the natives



Editor's soapbox



For me, the opportunity to interact with over 50 people interested in progressing the practice of emergency management was the highlight of HEMNZ2006.

My special thanks go to the presenters who freely gave of their time and expertise to deliver a quality programme. And of course without an enthusiastic audience prepared to share their own knowledge and experiences, those words of wisdom would have fallen on fallow ground.

The particular challenges I have taken from the conference were the need to identify and make contact with the myriad of NGOs delivering services under the health umbrella; and to find ways to communicate with the many ethnic communities who have difficulty communicating in English.

Listening to Skip Burkle as he offered an insider's view of the different objectives driving the invasion and occupation of Iraq one could not but be reminded of the mire we sink into once we sideline ethical principles when seeking a solution to a problem confronting us.

Our response to an influenza pandemic will require quite different triage and treatment (or non treatment) of the ill than is the case in "normal times." As long as the way we manage the healthcare workforce and deliver services to those in need of care is based on ethical principles, we will be able to look at ourselves in the mirror when it is all over. Our Ministry is having a set of ethical guidelines prepared by the National Ethics Committee. The guidelines are scheduled to be released for consultation in late April. Unless they have a practical application they risk becoming dust collectors on some high shelf. Take the time to read the draft and engage in the feedback process (even if only to say you think they are wonderful and can not be improved)

Over the next month most of us will be going through the peer review process of our pandemic plans. The plans I have seen so far are impressive and a far advance on what was in place just six months ago. Regional plans have a little further to go to reach a similar level but are starting to take shape. Your hard work is paying off.

Bruce Parkes



Keynote speaker Skip Burkle in full flight at HEMNZ2006