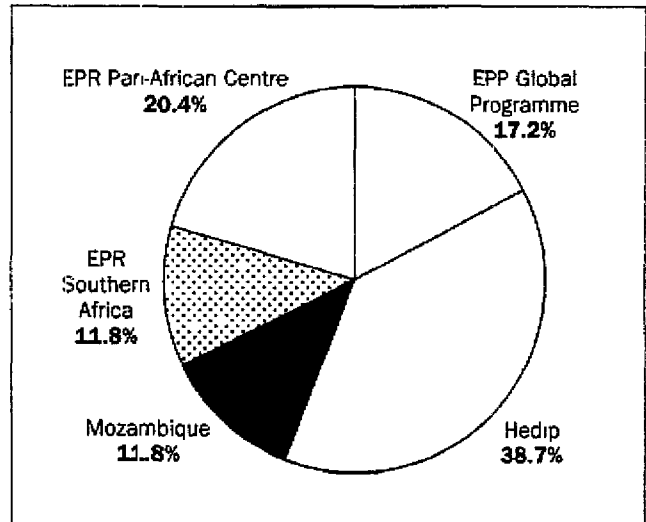




Mozambique. The Government has been able to resume health services in this Hedip project area in Milange District.
(N. Kuam)

district inter-institutional steering committee, development of a plan of action for the extension of the project, to be endorsed by provincial and district authorities, and organization of a provincial workshop.

Percentage of extrabudgetary contributions to EPP activities in 1993
(Total US \$3.32 million)



3. Emergency Information System

WHO's Emergency Information System (EIS) unit was created in April 1992. To avoid duplication of efforts and resources, information is being collected on similar information systems. An initial inventory of health information software is also being established, and data on the most vulnerable countries is being collected. A roster of all persons specialized in emergency management is being compiled in cooperation with DHA.

EIS participated in discussions on the formulation of the International Emergency Readiness and Response Information System (IERRIS), and continues to participate in monthly consultations, chaired by DHA, on early warning of refugee influx. WHO early warning information on disasters, at present, is obtained on an *ad hoc* basis from other United Nations and bilateral agencies, as well as the media and NGOs.

To avoid duplication of information during collection, EIS has introduced many EPR information components into the *Third Monitoring of Progress on the Common Framework*, which was developed by the Division of Epidemiological Surveillance and Health Situation and Trend Assessment (HST), with input from all WHO divisions. By the end of 1994, a global report will be available on the implementation of strategies for "health for all by the year 2000". An EPR profile of all WHO Member States is being developed, which will be further upgraded in the future and will serve as an important tool for data collection at field level.

EIS has supported the introduction of the Geographic Information System (GIS) as a tool for analysis and presentation of health data. A working map of health services in the West Bank and Gaza Strip has been compiled.

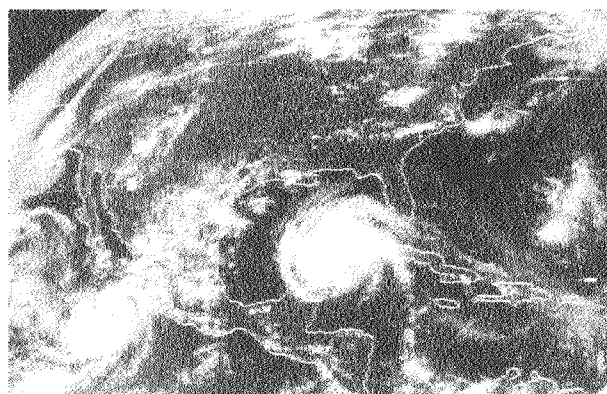
EIS has developed a work plan for a global early warning emergency information system, and is supporting the upgrading of a national emergency information system in Member States. In this framework, EIS has provided expertise to the Centre for the Development of a Disaster Management Information System in Zagreb, Croatia.

The WHO global early warning system project has been developed and is in the process of being institutionalized. It consists of joint activities and networking with NGOs and WHO collaborating centres, and of harmonizing existing WHO information systems and integrating them into the United Nations infor-

mation system. In addition, upgrading the "connectivity" of telecommunications of disaster-prone countries is being planned.

A model national early warning emergency information system is also being developed. It consists of upgrading of information processing at district level as part of primary health care services. Analysis of disease incidence by district will provide acceptable risk levels and early warning indicators for "slow-onset" disasters. Immediate reporting of disease outbreaks will also be facilitated as part of early warning for acute-onset health disasters. All this will take place within the framework of strengthening national surveillance systems. These projects are dependent however on external funding.

The development of a viable WHO emergency information system will profit from the Organization's efforts to facilitate national surveillance as a basis for



High tech in action; a satellite image of a hurricane and a cyclone. (UNDRP)

a global surveillance system. It will also profit from the Organization's efforts to strengthen communication system support of primary health care in remote areas.

The WHO emergency information system will also benefit from follow-up of progress in the development of the satellite network to improve health conditions, particularly for enhanced communication support in rural areas. It will also benefit from the use of low-orbit satellite services such as SatelLife and the use of electronic mail (E-mail) among some Member States in Africa, the WHO Regional Office for Africa and WHO headquarters in Geneva.