

Emergency and Humanitarian Action

1994 Activities



DIVISION OF EMERGENCY AND HUMANITARIAN ACTION
WORLD HEALTH ORGANIZATION
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This annual report summarizes activities carried out in 1994 by the Division of Emergency and Humanitarian Action (EHA), which during the reporting period included the following units: (i) Africa unit (AFU), (ii) Response for Africa and the Middle East (RAM); (iii) Response for Asia and the Pacific (RAP), (iv) Response for Europe and the Americas (REA); (v) Injury Prevention (IPR), (vii) Emergency Preparedness and Planning (EPP); and (viii) Emergency Information System (EIS). Also included in the report are some of the emergency-related activities of the WHO regional offices, as well as centres supporting the EHA Division such as the WHO Pan-African Centre for Emergency Preparedness and Response in Addis Ababa, Ethiopia and the WHO collaborating centres. It should be noted that the activities listed in this report are only those received by EHA at the time of writing and, hence, do not reflect all activities conducted in 1994.
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Abbreviations and definitions

Throughout this report the \$ sign denotes US dollars, unless otherwise indicated. Some of the abbreviations used in this report include the following:

AFRO	WHO Regional Office for Africa
AMRO	WHO Regional Office for the Americas
CEMEC	European Centre for Disaster Medicine, San Marino (WHO collaborating centre)
CETESB	Company for Environmental Health Technology, Sao Paulo, Brazil (WHO collaborating centre)
CDC	Centres for Disease Control and Prevention, Atlanta, GA, USA (WHO collaborating centre)
CIDA	Canadian International Development Agency
DGCS	Directorate General for Development Corporation, Ministry of Foreign Affairs, Rome, Italy (WHO
	collaborating centre)
DHA	United Nations Department of Humanitarian Affairs
DMT	United Nations Disaster Management Team
DMTP	United Nations Disaster Management and Training Programme
EEWS	Epidemiological Early Warning System (WHO/EHA)
EHA	WHO Division of Emergency and Humanitarian Action
EMRO	WHO Regional Office for the Eastern Mediterranean
EPI	Expanded Programme on Immunization (now known as the "Global Programme for Vaccines and
	Immunization", or GPV)
EPP	Emergency Preparedness and Planning Unit (WHO/EHA)
EURO	WHO Regional Office for Europe
FINNPREP	National Public Health Institute, Division of Environmental Health, Kuopio, Finland (WHO collabo-
	rating centre)

Hedip Health and Development for Displaced Populations
HEWS Humanitarian Early Warning System (DHA)

IASC Interagency Standing Committee
IAPSO Interagency Procurement Services Office
ICDO International Civil Defense Organization
ICRC International Committee of the Red Cross

IDNDR International Decade for Natural Disaster Reduction

IERRIS International Emergency Readiness and Response Information System
IFRC International Federation of Red Cross and Red Crescent Societies

IPR Injury Prevention Unit (WHO/EHA)

MOH Ministry of Health

NGO Nongovernmental organization
NIS Newly Independent States
OAS Organization of American States
OAU Organization of African Unity

OFDA Office of Foreign Disaster Assistance (USAID)

PAHO Pan-American Health Organization

PED Emergency Preparedness and Disaster Relief Coordination Programme (PAHO/WHO)
PROFERI Programme for Refugee Reintegration and Rehabilitation of Resettlement Areas in Eritrea

RAM Response for Africa and the Middle East (WHO/EHA)
RAP Response for Asia and the Pacific (WHO/EHA)
REA Response for Europe and the Americas (WHO/EHA)

RENAMO Resistencia Nacional Mozambicana

SEARO WHO Regional Office for South-East Asia

SEPHA Special Emergency Programme for the Horn of Africa

SUMA Medical Supply Management in the Aftermath of Disasters in Latin America and the Caribbean (PAHO/

WHO)

UN United Nations

UNECA United Nations Economic Commission for Africa

UNDP United Nations Development Programme

UNESCO United Nations Educational, Scientific and Cultural Organization UNHCR Office of the United Nations High Commissioner for Refugees

UNICEF United Nations Children's Fund

UNOHAC United Nations Office for Humanitarian Assistance Coordination, Mozambique

UNOMOZ United Nations Operations in Mozambique UNOSOM United Nations Operations in Somalia

UNRISD United Nations Research Institute for Social Development

WFP World Food Programme
WHO World Health Organization

WPRO WHO Regional Office for the Western Pacific

Definitions

Emergency: A sudden and usually unforeseen event that calls for immediate measures to minimize its adverse consequences.

Complex emergency: A form of man-made emergency in which the cause of the emergency as well as the assistance to the afflicted are bound by intense levels of political considerations.

Disaster: A serious disruption of the functioning of society, causing widespread human, material, or environmental losses which exceed the ability of affected society to cope using only its own resources. Disasters are often classified according to their cause (natural or man-made).

Disaster management: The body of policy and administrative decisions and operational activities which pertain to the various stages of a disaster at all levels.

Disaster response: A sum of decisions and actions taken during and after a disaster, including immediate relief, rehabilitation and reconstruction.

Mitigation: Measures taken in advance of a disaster aimed at decreasing or eliminating its impact on society and the environment.

Preparedness: Activities designed to minimize loss of life and damage, to organize the temporary removal of people and property from a threatened location and facilitate timely and effective rescue, relief and rehabilitation.

Prevention: Encompasses activities designed to provide permanent protection from disasters. It includes engineering and other physical protective measures, and also legislative measures controlling land use and urban

planning.

Relief: Assistance and/or intervention during or after a disaster to meet the life preservation and basic subsistence need. It can be of emergency or protracted duration.

Natural disaster record for 1994

Month	Affected country/ region	Disaster		Cas	sualties			
			Dead	Injured	Missing	Homeless	Total population affected	Amount of damage as reported to DHA (US\$)
January	Philippines	Tropical storm "Akang"	45	26	17	10 795	49 159	2 900 000
16	Ukraine	Floods	1	0	1	145	230 000	42 500 000
и	Indonesia	Earthquakes	7	40	0	1000	п/а	n/a
4	Argentina	Fires	24	0	0	0	24	n/a
u	Madagascar	Cyclones "Daisy" & "Geralda"	231	267	73	356 951	5 423 119	n/a
February	Colombia	Floods	0	0	2	8660	24 806	n/a
и	Mauritius	Cyclones "Hollanda" & "Ivy"	2	n/a	n/a	1500	n/a	135400 000
п	Uganda	Earthquake	8	0	0	п/а	n/a	60 000 000
vi .	Iran/Sistan province	Earthquake	9	n/a	n/a	n/a	n/a	n/a
и	Indonesia	Earthquake "Lampung"	207	1439	n/a	n/a	140 000	170476 190
16	Peru	Floods	106	25	0	2374	111 903	59 673 000
March	Iran/Fars province	Earthquake	43	78	0	9097	37 540	3 359 4074
	Kyrgyzstan	Landslides	111	n/a	n/a	13 200	45 000	36 000 000
и	Madagascar	Cyclone "Litanne"	n/a	n/a	n/a	n/a	n/a	n/a
1	Bolivia	Landslides/floods	12	n/a	п/а	165	41 137	n/a
16	Madagascar	Cyclone "Nadya"	4	8	0	76 000	n/a	n/a
st	Mozambique	Cyclone "Nadya"	240	128	n/a	15000000	n/a	n/a
April	Philippines	Tropical storm "Owen"	11	20	7	0	426 519	13110659
t	Ecuador/Galapagos Islands	Forest fire	0	0	0	0	0	n/a
	Indonesia/East Java	Floods	33	n/a	n/a	n/a	187 131	18 145 022
May	Bangladesh	Cyclone	133	3559	0	0	450 000	75 000 000
и	Myanmar -	Cyclone	17	54	n/a	714	38 132	300 000
и	China	Rainstorms	86	579	15	0	1 980 000	200000 000
п	Afghanistan	Earthquake	160	330	n/a	n/a	n/a	n/a
n	Cuba	Floods	14	1	0	25 143	25 500	n/a
June	Indonesia/East Java	Eartnquake/tsunami	222	440	17	n/a	151 521	n/a
	Colombia	Earthquake	271	118	1700	n/a	25 000	n/a

Month	Affected country/ region	Disaster		Cas	sualties			
			Dead	Injured	Missing	Homeless	Total population affected	Amount of damage as reported to DHA (US\$)
June	Bolivia	Earthquake	0	0	0	0	0	0
14	China	Typhoon/floods	1259	22065	32	253 000	73 360 000	7270000000
0	Iran	Earthquake	2	100	n/a	n/a	n/a	n/a
и	Philippines	Tropical storm "Gading"	3	0	0	0	56 112	0
u	India	Floods	895	n/a	n/a	n/a	12022000	n/a
July	Pakistan	Torrential rains/floods	443	n/a	n/a	n/a	1032714	92 000 000
ıt	Vanuatu	Earthquake	0	0	0	0	n/a	n/a
ıı	Iran	Floods	24	n/a	n/a	n/a	n/a	n/a
u .	Philippines	Typhons "Tim" & "Vanessa"	6	6	9	n/a	90 300	n/a
August	Philippines	Tropical storm "Yunya"	68	3	2	39 254	274 474	2 800 000
и	Cambodia	Floods	n/a	n/a	n/a	12 000	n/a	n/a
ıı	Mongolia	Floods	n/a	n/a	n/a	n/a	n/a	n/a
**	Algeria	Earthquake	171	654	n/a	12 500	n/a	n/a
n .	Niger	Floods	60	0	0	61 992	61 992	n/a
46	Moldova	Floods	47	0	0	25 000	25 000	90 000 000
September	St Lucia	Tropical storm "Debby"	4	24	6	n/a	150	n/a
u .	Cameroon	Floods	6	n/a	n/a	n/a	n/a	n/a
u	Philippines	Tropical depression Welling"	7	n/a	n/a	n/a	54 674	3 900 000
11	Papua New Guinea	Volcanic eruption	4	n/a	n/a	53 000	100 000	n/a
	Sudan	Floods	8	n/a	n/a	n/a	70000	n/a
н	Benin/Borgou district	Floods	0	0	0	20 000	20 000	n/a
u	Nigeria	Floods	30	n/a	n/a	400 000	n/a	n/a
	Russian Federation	Floods	3	n/a	15	529	n/a	200 000
u.	Philippines	Lahar	20	1	3	22 977	45 762	390 000
October	Kurit Islands	Floods	310	n/a	n/a	n/a	n/a	177 000 000
16	Indonesia	Earthquake/tsunami	n/a	n/a	n/a	n/a	n/a	n/a
	Bhutan	Flash floods	22	n/a	n/a	n/a	600	n/a
· · · · · · · · · · · · · · · · · · ·	Zaire	Floods	39	n/a	n/a	n/a	n/a	n/a
	Philippines	Typhoon "Teresa"	7	n/a	16	n/a	90 000	16 000 000
	Iran	Floods	3	n/a	n/a	n/a	n/a	n/a
	Russian Federation	Oil spill	0	0	0	0	n/a	n/a
	Pakistan	Earthquake	n/a	n/a	n/a	n/a	n/a	n/a
11	Senegal/St Louis region	Floods	n/a	n/a	n/a	17 500	n/a	n/a
1	Indonesia	Earthquake	0	0	0	0	0	n/a
November	India	Cyclone/floods	208	n/a	n/a	520 000	550 000	n/a

Month	Affected country/ region			Cas	sualties			
		Disaster	Dead	Injured	Missing	Homeless	Total population affected	Amount of damage as reported to DHA (US\$)
November	A gerja/Tindouf region	Floods	7	n/a	n/a	30 000	n/a	n/a
u	Egypt	Floods/fire	501	212	n/a	150 000	n/a	n/a
a .	Indonesia	Lahar	30	0	1	0	n/a	n/a
14	Costa Rica	Floods	4	n/a	6	n/a	2000	n/a
ii.	Haiti	Tropical storm 'Gordon"	1122	n/a	n/a	34 400	1 500 000	n/a
ıi	Cuba	Tropical storm	2	n/a	n/a	n/a	42 820	56 968 400
a	Philippines	Earthquake	74	171	7	298 715	n/a	n/a
ıı	Jamaica	Tropical storm	n/a	n/a	n/a	n/a	n/a	n/a
ď	Dribouti	Floods	105	n/a	40	3000	100 000	n/a
u	Indonesia/Mt Merapi	Volcanic eruption	58	85	20	6026	n/a	n/a
ıı	rran	Floods	12	n/a	n/a	n/a	n/a	64 000 000
December	Sr Lanka	Floods	n/a	n/a	n/a	n/a	500 000	n/a

Note n/a = data not available

Total number of natural disasters in 1994-75 (this figure includes only those countries that requested DHA assistance in the aftermath of a disaster)

Total number of international appeals 29

Contributions to natural disasters reported to DHA \$113 477 369 Contributions to natural disasters channelled through DHA \$7 546 013

DHA emergency grant \$870 500

Sasakawa emergency contribution \$140,000

Source United 'rations Department of Humanitarian Affairs (DHA)

Box 1. WHO constitutional mandate for humanitarian assistance in emergencies

The World Health Organization will "...act as the directing and coordinating authority on international health work" and "furnish appropriate technical assistance and, in emergencies, necessary aid upon the request or acceptance of Governments." WHO is also mandated "to provide, or assist in providing, upon the request of the United Nations, health services and facilities to special groups, such as the peoples of the trust territories;..."

WHO Constitution, Article 2 (a), (d), (e)

Introduction

The dramatic and continuing rise in the number and severity of natural and man-made disasters calls for a strengthened and more proactive WHO role in helping to mitigate their impact (Annex 1). It is estimated that in 1994, as many as 250 to 300 million people were affected by such disasters.

In any disaster, human health is invariably at risk. WHO, through its existing technical and managerial expertise in health care and development, is ideally placed to analyze needs in the health sector in crisis situations and thus to cooperate with governments and international agencies in the handling of health issues in emergencies.

Within the United Nations system, WHO's Division of Emergency and Humanitarian Action (EHA) helps coordinate the international response to emergencies and natural disasters in the health field, in close partnership with other member agencies of the United Nations Inter-Agency Standing Committee (IASC) and within the framework set out by the Department of Humanitarian Affairs (DHA).

In this context, WHO's vast technical network is utilized to provide expert advice to Member States on, among other things: epidemiological surveillance, control of communicable diseases, public health information and health emergency training.

The Division's emergency relief activities focus on the timely provision of assistance to governments atfected by major or complex emergencies through the WHO Representative's office in the country. This includes support in the assessment of emergency health needs, the fielding of technical teams to help coordinate the health response to the emergency and to deal with specific health problems arising therein, as well as the provision of specialized emergency supplies and equipment

Its emergency preparedness activities include coordination, policy-making and planning, awareness-building, technical advice, training, publication of standards

and guidelines, and research on emergency preparedness issues. The Division's main objective is to strengthen the national capacities of Member States to reduce the adverse health consequences of emergencies and disasters.

WHO is developing a new strategy to increase further the effectiveness of its operations in emergency and humanitarian action. This will mean a more focused application of WHO's normative functions in the emergency health field, the optimal use of its resources, and the enhancement of practical cooperative links with WHO collaborating centres, other organizations of the United Nations system, nongovernmental organizations and other "partners" (Annexes 2 and 3).

In follow-up to a number of United Nations General Assembly and World Health Assembly resolutions, some of which requested that WHO should play a more active role in responding to emergency health needs arising from complex emergency situations, the Organization has: (a) initiated a process of internal adjustment to strengthen its technical and administrative capacities for crisis management; (b) reinforced its cooperative ties with other organizations in the United Nations system, through the coordination framework provided by the United Nations Department of Humanitarian Affairs, and with nongovernmental organizations; and (c) forged new cooperative links with donor governments in the planning and implementation of emergency response activities (Annex 4).

WHO's emergency and humanitarian action is almost exclusively financed from extrabudgetary resources raised by the Organization mainly through participation in consolidated interagency humanitarian assistance appeals, launched by the United Nations Department of Humanitarian Affairs. Funds are also raised through appeals launched by the Director-General to meet specific emergency humanitarian needs stemming from health emergencies, or as requested by Health Assembly resolutions (Annexes 5,6,7).

During 1994, the WHO components of the appeals

launched by DHA amounted to \$158.5 million, of which the Organization raised \$26.18 million. This figure represents 17% of the funds required to deal with the health problems created by emergencies which affected some 43 countries and territories.

An additional \$12.43 million were raised against earlier appeals made in 1993, or by other fund-raising mechanisms adopted by the Organization. Of the total \$38.61 million raised, \$6.69 million are in the form of pledges, and not yet available for use in humanitarian work (Annexes 8 and 9).

A majority of appeals remain severely underfunded. This is of major concern since these resources are needed to help meet the minimum basic needs of vulnerable populations affected by emergencies. The rate of success in meeting these needs range from over 100% in the case of Rwanda to 6% or less in the case of Iraq, Tajikistan and Yemen. EHA is taking steps to strengthen its resource mobilization procedures, although increased donor support should come about with the realization that WHO's enhanced participation in complex emergency response programmes adds to their humanitarian value and overall effectiveness.

While a more vigorous effort is needed to ensure that funds are raised, the international donor community should also be reminded that pledges need to be converted into funds as expeditiously as possible, since these funds are required for urgent life-saving activities which WHO needs to undertake in response to emergencies affecting Member States.

The year 1994 was a year of "transition" for EHA, in that it underwent a restructuring, while at the same time it had to deal with some very serious and rapid onset major complex emergencies around the globe. Indeed, coordination and partnership were never more crucial than during this period. This document is the second annual report issued by the EHA Division, and while it is by no means comprehensive, it does clearly summarize the major collaborative activities of WHO in the field of emergency and humanitarian action during the reporting period.

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Dr F. Bassani Director Division of Emergency and Humanitarian Action

Highlights of WHO emergency activities in 1994

In 1994, WHO was involved in emergency and humanitarian action in about 43 countries, ranging alphabetically from Afghanistan to Zaire. The following are some brief examples of WHO's work.

Afghanistan. WHO helped organize campaigns against cholera and other diarrhoeal diseases, malaria, tuberculosis and acute respiratory infections. It was instrumental in helping to obtain a cease-fire between warring factions in order to organize an intensive one-week immunization campaign in November 1994, during which almost one million children were vaccinated against poliomyelitis. Also, almost 350 000 children were vaccinated against measles, and 320 000 women of childbearing age received anti-tetanus vaccination.

Ethiopia. WHO participated in the control of malaria and tuberculosis epidemics by providing essential drugs and medical supplies. This was due to collaboration with the United Nations Department of Humanitarian Aftairs and a donation from the Government of the Netherlands. In collaboration with the Ethiopian Ministry of Health, WHO completed a \$2.5 million project, also funded by the Netherlands, which rehabilitated two hospitals, four health centres and 41 health stations damaged during the civil war.

Former Yugoslavia. Under the overall coordination mandate of the Office of the United Nations High Commissioner for Refugees (UNHCR) for humanitarian assistance and support, WHO is the "lead agency" for all health-related matters in the former Yugoslavia. With the help of over 80 international and local staff, WHO continued to assess health needs, advise health authorities, provide medical and other supplies and help in the physical and psychosocial rehabilitation of war victims.

Rwanda. WHO joined in international relief efforts in 1994 to bring assistance to Rwandan refugees as well as to displaced populations within Rwanda. As a consequence of the mass exodus from Rwanda WHO deployed teams of epidemiologists, primarily along the Zairian border. WHO identified the precise strain of

cholera and other pathogens that had been decimating the refugee population; and in the refugee camps at Goma, Zaire, helped to bring rapidly under control epidemics of cholera, dysentery and meningitis.

Somalia. WHO has been involved in emergency relief operations in Somalia since January 1992. In collaboration with *Pharmaciens sans Frontières*, it established the Somali central warehouse in Mogadishu, which has provided over 80 per cent of medical and surgical supplies and equipment utilized by the national health services and nongovernmental organizations. WHO also set up and maintains an epidemiological surveillance system, which operates through a network of nongovernmental organizations, to monitor communicable diseases, such as acute respiratory infections, tuberculosis and malaria. In 1994, WHO played a key role in containing the spread of cholera outbreaks in parts of Somalia.

Armenia, Azerbaijan and Georgia. In 1994, WHO assisted local authorities in implementing cost-effective strategies in an effort to combat communicable diseases, develop national drug policies, establish health information systems and epidemiological surveillance systems. Tuberculosis control programmes were also initiated in all three countries, as well as joint WHO/United Nations Children's Fund (UNICEF)/International Federation of Red Cross and Red Crescent Societies (IFRC) projects to control acute respiratory infections and diarrhoeal diseases. Training was an essential element in each of the projects, and emphasis was placed on normative and technical guidance functions with long-term benefits.

Zaire. During the last four months of 1994, in relation to the crisis involving Rwandan refugees in Goma and Bukavu, Zaire, WHO provided technical advice to UNICEF in strategies for immunization; and supported the UNHCR in medical coordination of the control of tuberculosis, acquired immunodeficiency syndrome (AIDS), diarrhoeal diseases and acute respiratory infections. It also extended its regional epidemiological surveillance system to these two camps and adjacent areas.

Injury Prevention (IPR). Among the achievements of EHA's Injury Prevention unit in 1994 were: the SAFECOM demonstration project, where countries in four regions participated in demonstration projects on community safety promotion. As a result of this and other research, WHO is now preparing guidelines for injury control and safety promotion. A critical review of existing injury surveillance systems was also carried out by a WHO collaborating centre, which is also preparing a specific injury classification to be annexed to the WHO International Classification of Diseases. Furthermore, the WHO Initiative for Neurotrauma Prevention and Management gave rise in 1994 to: a joint WHO/Centres for Disease Control and Prevention (CDC) protocol for epidemiological assessment of traumatic brain injury; (ii) expansion of the WHO Safety Helmet Initiative; (iii) launching of a WHO Initiative on Spinal Cord Injury Prevention, and (iv) preparations for the First World Congress on Brain Injury. Last but not least, simple guides on burn prevention and management were produced by WHO in collaboration with the International Society for Burn Injuries.

Emergency Preparedness and Planning (EPP). In 1994, the EPP unit continued to support the national emergency preparedness programme in Bangladesh, where an agreement was reached between WHO and the Government of Bangladesh to establish a national Centre for Emergency Preparedness and Response. The Health and Development for Displaced Populations programme,

known as Hedip, which was initiated by WHO/EHA/ EPP in 1991 with financial support from the Italian Government, continued to carry out activities in Croatia, Mozambique and Sri Lanka. EPP continued to lend its support to emergency relief operations by (i) embarking on an interagency process to standardize all relief items, (ii) expanding the use of SUMA, the supply management software tool developed by the Regional Office for the Americas, to the global level; and (iii) producing protocols for rapid assessment of health needs in emergencies (which is expected to be published in 1995), as well as revising or finalizing other joint publications and emergency preparedness manuals. EPP also participated actively in the World Conference on Natural Disaster Reduction (Yokohama, Japan, 23-27 May 1994) and organized one of the conference's "main committee" sessions, entitled "How the public sector, private sector and voluntary organizations can work together". EPP continued preparations in organizing an interagency "International Diploma Course in Emergency Preparedness and Crisis Management", which will be held in Geneva in June 1995.

Emergency Information System (EIS). Plans continued in 1994 for EHA to develop a viable emergency information system with an epidemiological early warning component, to help in dealing with the increasing worldwide need for WHO humanitarian assistance. Realization of this project will be subject to donor secondment and funding.