Clinical opinion

Humanitarian crises due to natural disasters and armed conflict

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SUMMARY

The authors of this timely review work for the Centre for Health and Human Rights at Harvard University and the WHO Collaborating Centre for Research on the Epidemiology of Disasters at the University of Louvain. They draw attention to the massive scale of humanitarian crises due to natural disasters and armed conflict. They note that the immediate response to these crises has improved in recent decades with the development of standardised methods for rapid assessment of needs. These data have informed a needs-based approach to short term response but also the planning of subsequent bridging actions to give support in post-conflict/post-disaster settings. Systems such as the Standardized Monitoring and Assessment of Relief and Transitions (SMART) provide data that help assess the severity and need for emergency relief. These data also guide planning to improve resilience and preparedness for future events and to improve the effectiveness of responses to future crises.

The authors argue strongly for action to address the underlying causes, rather than merely tackling the aftermath of such disasters. The marked increasing trend in natural disasters is fuelled by climate change and associated higher temperatures, more extreme rainfall and more severe wind and water storms. The antecedents of armed conflict often lie in entrenched and increasing inequity, availability of weapons and an increasing struggle for natural resources.

OPINION

The UN High Commission for Refugees (UNHCR) published its Global Trends 2013 report in June 2014. This revealed that the number of refugees (16.7 million), asylum-seekers (1.1 million) and internally displaced people (33.3 million) worldwide has exceeded 50 million for the first time since the Second World War. The response to these challenges of course transcends health and is rooted in human rights and conflict resolution: more than 50% of current refugees in December 2013 were from Afghanistan, Syria and Somalia.

Important lessons have been learned in tackling recent humanitarian crises: the disease burden from internal armed conflicts is not directly combat-related but is multifactorial and due to malnutrition, communicable diseases and breakdown of healthcare systems. After natural disasters the main short-term needs are water, food, sanitation and shelter but chronic needs can persist due to secondary problems such as food insecurity and long-term malnutrition.

Tackling the root causes of these crises requires a joint human rights and public health based response. It stands as a challenge to the UN system to lead and coordinate the global response from international agencies and national governments. Expertise in public health planning and administration is a key skill required at the core of both relief efforts and of preparedness planning. There are relatively few specialist doctors engaged in the efforts to address
these enormous and increasing challenges; there is an urgent need for more specialists to tackle these multi-dimensional challenges as an essential part of national and international multi-disciplinary teams.

Training this cadre of experts requires more exposure to global public health within public health training schemes and also requires more resources to support the establishment of further centres of expertise in this field, for training, education, research and influence on policy. The authors of this article come from Centres that serve as exemplars of what is required.

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