

Shelter & Health Learning Day

14th May 2020

Welcome fron	n Professor Cathrine Brun, Director of CENDEP, Oxford Brookes University				
ntroduction:	background and objectives of the day, the Global Burden of Disease, connection	s between	shelter a	and health,	self-recovery,
knowledge and evidence gaps.					
	Sue Webb. CENDEP				
	Niall Roche. Environmental health consultant				
	Bill Flinn. CARE International				
	Jamie Richardson. Catholic Relief Services (CRS)				
	Fiona Kelling. Humanitarian shelter consultant				
	Enrique Sevillano Gutiérrez. CRAterre				
Panel 1. Phys	sical health issues related to shelter/housing			Facilitato	r: Bill Flinn
(CARE Interna	tional)				
	Lucy Tusting. London School of Hygiene and Tropical Medicine				
	Elizabeth Berryman. Save the Children South Sudan				
	Andy Bastable. Oxfam				
	Jenny Lamb. CRS				
Panel 2. Mea	suring and mitigating health impacts in a variety of housing/shelter settings.			Facil	itator: Charles
Parrack (CEND	PEP)				
	Emily Nix. University College London and Liverpool University				
	Sarah Ruel Bergeron. ARCHIVE Global				
	Ronita Bardhan. University of Cambridge				
	Samuel Cai. University of Oxford				
Panel 3. Mer	ntal health issues related to shelter/housing in disasters and conflict.			Facilitato	or: Beth
Simons (CARE	International)				
	Jamie Richardson and Melissa Tucker. CRS				
	Olivia Nielsen Mivamoto International				

Guglielmo Schininà. International Organization for Migration (IOM) Jill Baumgartner. McGill University and Imperial College, London Panel 4. Game-changing crises? The implications of COVID-19 and the climate emergency for shelter, housing and health. Facilitator: Cathrine Brun (CENDEP)

Ilan Kelman. University College London Cecilia Schmölzer. International Federation of Red Cross and Red Crescent Societies Brett Moore. The United Nations Refugee Agency (UNHCR) Niall Roche. Environmental health consultant

Breakout group discussions involving all participants

What have we learnt? What are the gaps? What are the next steps?

Panel 4

Health and shelter in current crises, disasters and conflict.

- The climate emergency
- COVID-19
- Conflict
- Rapid onset disasters
- Clusters and inter-sectoral working

Facilitator: Cathrine Brun (CENDEP)



Ilan Kelman

University College London University of Agder









Health & Shelter Forum Presentation 14/05/20

SHELTER, HEALTH AND COVID 19: GAME CHANGER?

BRETT MOORE • CHIEF, SHELTER AND SETTLEMENTS • CO-LEAD GLOBAL SHELTER CLUSTER, UNHCR







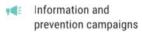
- 1. Sectoral approach to vulnerability "first aid vs. emergency shelter?"
- 2. Adequate Shelter "live-saving" or "nice to have"?
- 3. Shelter and COVID-19, which interventions really deliver the desired health outcomes?
- 4. Value for money and return on investment?

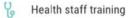
GLOBAL HRP FOR COVID-19) MAY UPDATE

Key achievements



HEALTH





Distribution of medical supplies

Reproductive and maternal healthcare



Air bridges for medical cargo and staff

Shipment of personal protective equipment (PPE) and laboratory supplies





Set up of handwashing stations

Distribution of water supplies

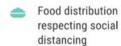
Installation of toilets



Temporary learning spaces

Educational radio programmes

FOOD AND AGRICULTURE



Vouchers distribution

Containment of desert locust upsurge

Cash assistance



Psychosocial support

Child friendly spaces

Training for caregivers

Support for survivors of gender-based violence



SEE MORE RESPONSE ACHIEVEMENTS ON: WWW.UNOCHA.ORG

Find the missing sector...

Self-isolation and social distance – is it feasible everywhere?



Image from: WB, 2020, GPURL Online Learning Series: "Cities and Contagion Rapid Deployment Tool to Identify COVID-19 Exposure Hotspots"





- 1. Shelter, Health and Conflict: crisis and recovery
- 2. Vulnerability and Risk: local messages and reality
- 3. Climate, Conflict Displacement: compounding effects
- 4. Long term issues, short term response?







5 ways **Shelter and Settlements** programs **help mitigate** the spread of **COVID-19**



Distributing essential humanitarian assistance in a way that avoids spreading the disease.



Inadequate shelter can increase respiratory diseases which aggravate the impact of the virus.



Decongesting and reducing human density in settlements to maintain social distancing and reduce transmission.



Expanding the shelters of vulnerable households to reduce overcrowding and mitigate the spread of the virus.



Planning and building isolation areas and medical facilities according to health criteria.

Shelter and Health: multi-sectoral learning day Panel 4: Current Emergencies

14th May 2020

Niall Roche
WaSH/Environmental Health Consultant
roche.niall@gmail.com

Climate Change/Climate Action – SDG 13

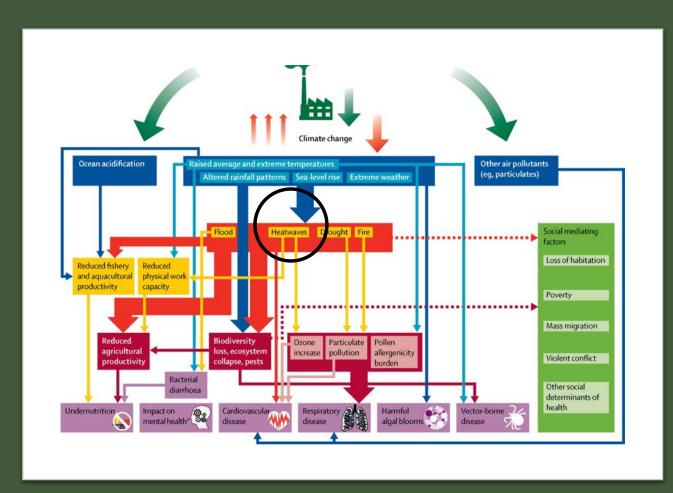
"climate change is the greatest global health threat of the 21st century"

source: Managing the Health Effects of Climate Change, The Lancet, Volume 373, Issue 9676, Pages 1693-1733, 16th May 2009

Frumkin et al describe climate change as

'an environmental health hazard of unprecedented scale'

Frumkin, Howard and McMichael Anthony, Climate Change and Public Health: Thinking, Communicating, Acting, American Journal of Preventive Medicine, 35 (5), p.403-410

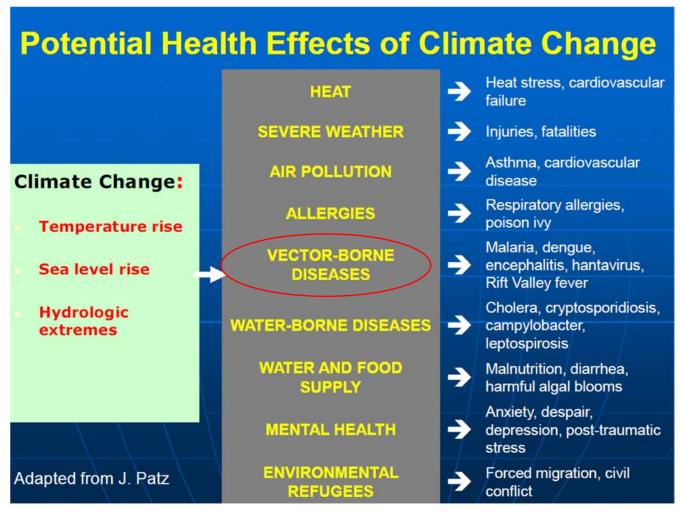


Climate
Change Health
Threats

Lancet Countdown
Tracking Progress
on Health and
Climate Change

https://www.lancetcountdown.org/

http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)32124-9/fulltext



Source: CDC EPA Region 2 Webinar, The Public Health Effects of Climate Change. Oct. 2011



SDG 7: Affordable and Clean Energy

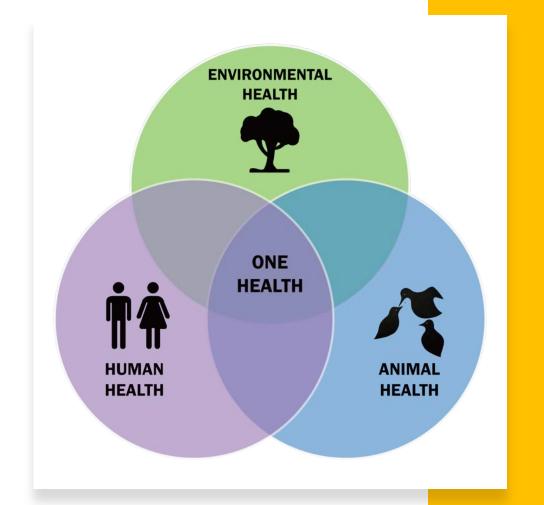
SDG 11: Sustainable Cities And Communities -

Opportunity for Health Co-Benefits through Mitigation!

- The Lancet Series of November 09 refers to health benefits related to
- 1. Household energy emissions(reduce GHGs, raise finance on the voluntary carbon market for verified reductions and reduce particulate matter (PM 2.5) which if reduced enough can have a health impact)
- 2. Urban Land Transport
- 3. Low-carbon electricity generation
- 4. Agriculture and food



and links to Zoonotic Infections (e.g. CCHF in Afghanistan, Trachoma in SNNPR, Ethiopia)





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