

Questions & Answers

Webinar # 03: Resilience of local governments: A multi-sectoral approach to integrate public health and disaster risk management

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Presenters:

Dr. Peter Williams, IBM Distinguished Engineer, Retd.

Dr. Benjamin Ryan, Clinical Associate Professor at Baylor University in Waco, Texas, United States.

Commentator:

Dr. Rajib Shaw, Professor Graduate School of Media and Governance, Keio University, Japan.

#	Question	Answer(s)
1	<p>COVID19 and global pandemic cum global disaster affecting every country. Do you feel is there a re-look required to the Sendai Framework and WHO Framework? What changes you propose in SFDRR and your scorecard ?</p> <p>Are the four Sendai priorities going to be revised to integrate the public health as the very foundation of safety, stability and resilience in our societies?</p>	<p>Certainly. WHO is noting the country response and preparedness challenges, working with our research network, and will conduct after action review to bring in the necessary changes in the WHO framework which will be evidence base.</p> <p>For Sendai Framework - biological hazards are already included and emphasized in the framework. The scorecard - public health addendum is the extension of the original Scorecard to ensure health issues are addressed in disaster risk management and reduction.</p>
2	<p>- Could you share the link of the scorecard reports and examples of implementation? Also to showcase how it was used to minimize epidemiological impact?</p> <p>- Do you think any state or region applied this scorecard to respond to COVID19 successfully? If yes, can you make an example?</p> <p>- Kindly give examples of how score card helped cities?</p> <p>- I was wondering if there was any return on experience on the use of those score cards and the process. From what Dr. Benjamin Ryan was talking about, I had the impression that the case studies were pre-score cards. Any insights on the M&E phase?</p>	<p>See some case examples: https://www.unisdr.org/campaign/resilientcities/toolkit/article/disaster-resilience-scorecard-for-cities. There are also numerous examples of where the City scorecard has helped. However, we do not track who has used the scorecard or addendum, so we only hear anecdotally.</p> <p>In one US city, they had just create a policy of using schools as evacuation shelters for hurricanes - but the schools had just had a window-replacement program where the specified glass was not strong enough to withstand hurricanes of the predicted future strength. So basically the city would have directed people to shelters where they would then have been cut to pieces by flying glass. Time for a rethink!</p>
3	How many African cities are on this tool and how well have they fared under the current Covid 19 Pandemic	We don't know as the tool is in the public domain, so we don't necessarily know who has used it. I am aware that many cities including Kampala (Uganda), Kisumu (Kenya), etc. have used it. Luanda (Angola) also used it.
4	When was this public health addendum established? Because of COVID-19?	It was developed 2 years ago - in July 2018.
5	What does societal capacity mean in relation to public health?	It's about making sure that communities: a) know what to expect and not to expect from city or central government sources etc; b) know what they have to do for themselves; c) can do it - they have the right community leadership, engagement, resources etc. Being willing and able to execute social distancing, for example.
6	Mr. Peter answered that Essentials 8 and 9 address the involvement of municipal police, public security and crime control in building local resiliency to pandemics. Can you please elaborate how this is so? Thank you!	The City scorecard requires all key "systems" - including the law and order system - to be engaged in disaster resilience as they have a key role to play. Different parts of it assess whether they are engaged in the governance and management of disasters; that other stakeholders (including the community) understand what the police role is and how they will discharge it; that the police have the right resources to execute their role; and that other systems on which they may be dependent (eg communications) are robust and resilient.
7	How do the Public Health Addendum intersect with other facets of disasters, human, food and water security?	The PHA is designed to work with the City scorecard which addresses these issues. Important though - it only addresses them where they may arise in response to a disaster, not generally. So for example it addresses food security as it may arise after a disaster, not as a general issue.
8	Can "long term scenario" drills be built in the public health addendum?	Yes. In fact they are really essential to complete Essential 2.
9	How can you build in regular "long term scenario" drills in the public health addendum?	See above. You need to really do this on three levels - 1) the health impacts of other disasters such as floods; 2) health disasters such as pandemics; and 3) combined threats - such as a pandemic and a wildfire, which is what California is looking at right now, for example.
10	How do we convince the complacent authorities to make a strategic plan in advance, when there is no visible threat? As a citizen do we need permissions to use the scorecard and to collect info to fill it?	You need no permissions to use the scorecard. Have right at it! And then publish your results and use those to embarrass complacent authorities to act.
11	What resources can be used to review Essential 7: social and cultural resilience? this is after, most social activities and cultural spaces were the first to be shut down or closed.	It's a bit late to address Essential 7 for the current pandemic when everyone is locked down, I agree. Looking ahead, we have not created anything specific, but you have one really important resource on the sides of your head - your ears. It has to begin with understanding what communities need and don't need, and how they will react. That includes different ethnic groups within the same city.
12	What are some foreseeable setbacks in using the Scorecard and Addendum particularly for small island developing states?	Same as for cities - lack of buy in from all key stakeholders will be the main one. If resources are an issue, you will need to plan to become more resilient over time, rather than straight away, and how to finance that - and then how then to protect those funds so they don't get used for other things!
13	Could you explain a bit how the scorecard measures resilience to pandemics and compare the indicators used for other disasters like flood. Does it have specific indicators for each risk?	The general framework of the Scorecards does not differentiate between risks. You will need to decide for yourself what the main risks are to address, and the scorecard then assess how well you are prepared for them, whatever they may be.
14	How human behavioural aspects can be taken into consideration for scorecard?	Through listening, and careful planning - Essential 7 (Societal-capacity)
15	Is the scorecard a decision-support tool? If so, how flexible is it in terms of contextualizing it at the local level?	It is self assessment, and can skip any questions not relevant - quite flexible. You can also, if you choose, weight answers in some essentials relative to others. The whole idea is that you identify what your area needs to be more resilient. That will of course vary greatly from place to place.
16	What are the rudimentary assumptions should be in place before using the framework and scorecard?	None. :). Get stuck in and see where it leads.

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17	What is the time frame with run the scorecard?	Depends on the city, varies - could be done in a few weeks or less. We assume the Addendum will be used with the City scorecard. If it is, the short form version can be completed in a workshop setting and we have now published an agenda for such a workshop lasting 2-3 days. The long form will probably take some number of
18	Interagency dependency and capacity is critical for local resilience, this is considered in the scorecard?	Yes, especially Essential 1 (Governance), but also 6 (Capability - this addresses te data sharing aspect) and 9 (Response).
19	COVID19 Lockdown has shown us less pollution in cities, drastic reduction in carbon footprint, better ozone layers...all this has reduced heat, illness due to pollution that is breathing, asthma and others. It gives us a lesson that we can cut down humane interventions and have resilient eco system. Shouldnt these be taken into consideration in city score card ?	Yes, the environmental aspect is the essence of Essential 5 of the City scorecard which deals with ecosystem services that improve resilience.
20	Is there any evidences from the scorecards that underline a difference of resilience between countries with private and public health systems?	No evidence so far. And looking how the UK (my home country) and the US (where I live now) have fared, I would say that both public and private are equally capable of great things, and equally capable of screwing it up! (from Peter)
21	Does this scorecard asses a specific public health problem or it can be used for general public health problems?	It addresses the public health implications of disasters. Now of course we have a pandemic which is a disaster in its own right. It isn't intended to be tool for managing long run health outcomes but it may help you think about some of the factors driving those outcomes that may be wider than the health system alone.
22	What would be major differences between urban and rural local multisectorial planning? Could scorecards be used as a base also for rural areas)	The scorecards could readily be used in a rural context. I am not sure what specific differences in results would arise, although I imagine things like the redundancy/resilience of infrastructure may be more of an issue in rural areas, as well as response times. There again, people may be more self-reliant to start with because that is how rural living tends to work. But in principal, all of the scorecard questions apply equally to urban and rural areas.
23	Does that mean the Disaster Resilience Scorecard for Cities should be adjusted to meet the resilience enhancement to health addendum.	This is added, for those who want to increase health sector resilience. It may imply that you need to revisit your city scorecard scores and responses.
24	Hello, I'm from China. During the tough season of nCov-2019, our country proposed a strategic plan called "accurate prevention and control at different levels and for different regions". What do you think DSRC could do for that?	I am not familiar with the details of the program. If you have an English version of it I would be happy to take a look.
25	Just wonder that if we could really cover all kinds of disasters using one scorecard, or one scorecard for each specific kind of disaster is preferred.	The City scorecard covers any risks that a city may face. The Public Health Addendum just amplifies the consideration of public health issues. With multiple risks, by the way - don't forget to consider the possibility that two risks may coincide. As I mentioned above, California right now is considering how to deal with wildfires when fire-fighters have to keep their distance from each other, and when evacuation shelters may make social distancing imposible for evacuees.
26	I would like to ask respected speakers about Standardization of Score Card and Comparison how score card performed in different cities... Also would like to know if score card has use beyond planning? Since planning is easy... but implementation is very difficult...	We very deliberately do not encourage city-to-city comparisons, because if cities think they are going to do poorly they won't use the scorecard at all - it would put people off from thinking about resilience. That is quite apart from whether comparisons would be meaningful - Mumbai and Delhi, just to take two random examples, could have the same average scores but they would mean totally diferent things. However if cities want to compare among themselves, then that is up to them - we can't stop them. To your second question - scorecards are great at showing where you are now, but less good at figuring out how to move forward. That's why we created the workshop methodology on how to create the Resilience Agenda (now on UNDRR website). Scorecard could be useful if a city wants to compare progress overtime. Conduct a scorecard assessment to know where you are now, then do the planning and
27	How does this tool integreate climate change? Is this tool to be used inconjunction with vulnerability an adaptation assessments or is it an alternative tool to consider?	The city scorecard strongly encourages users to consider the impact of climate change in Essential 2 (risk understanding)
28	How can this Scorecard work in Regions which face Mass Migrations	Pre planning. You would want to address this as a risk in the scenarios, I would think.
29	Passing through the Corona pandemic/disaster across the World and with the adoption of most efficient and viable strategy of social distancing, the only available mechanism to connect to people, to coordinate with departments/agencies and to orgnize effective DRR/DRM plans..... is the usage of IT infratructure. So, why not to take it as independent 11th essential for post-corona resilience score card???	IT infrastructure (both communications, and processing) is part of Essentials 6 and 8 in the city scorecard.
30	Is this Scorecard accepted by WHO and could WHO & UNDRR advocate to the National Government to include this in the natioanl Govt Health Policy? And also in the existing National Response Plan by the national Govts?	The tool is publicly available for use: https://www.unisdr.org/campaign/resilientcities/toolkit/article/disaster-resilience-scorecard-for-cities & https://www.unisdr.org/campaign/resilientcities/toolkit/article/resilience-scorecard-public-health-addendum
31	Furthermore, is there any action plan for implementing this proposed framework?	local government can develop an action plan using the scorecard
32	How is the importance of a continuous clean energy supply considered in the framework?	Essential 5. This is reflected strongly in the new building scorecard, by the way: https://www.preventionweb.net/publications/view/69845
33	(Question to Rajib S.) Regarding Domestic Violence, Child Protection, etc. issues what sort of planning should be in place before declaring a lock down or as Rajib said about declaring National Emergency in Japan?	A complicated and private issue, which is often protected by privacy Law in most country, at least in Japan. Unless people come out with the complaint on DV, it is hardly anything the government can do in Japan. But these are very important issue, so possibly 1) neighborhood level safety net, 2) awareness campaign in mass media, 3) pro-active counselling by the local governments are some of the key
34	(Question to Rajib S.) One more thing I would like to add that is Contextuality. Otherwise we will miss many socio cultural issues.	Absolutely. When I say "pandemic is global and its response are local", the "contextuality" is a key issue. We need to keep in mind local socio-economic condition, capacities, and cultural context very specifically. Social capital in many cases play a strong role in the context.

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35	(Question to Rajib S.) So yes, correct info is important. but due to "novel" coronavirus situation, our predictions are failing. i follow some scientists and epedimiologist but their ideas collide. even WHO is criticized for they censor/use nonneutral words. who/what defines the "correct infos"?	Rather than saying predictions are failing, I would like to emphasize predictions are evolving. Scenario planning is precisely for that with a set of different parameters and with different boundary conditions. Based on reduction of people's contacts by 80%. 60%. 40%, and 20%, four different scenario can be predicted. But, now there comes lots of other uncertainties, which are possibility associated with the new and "unknown" risks. For example, we presume that the older age group is more vulnerable (as per the statistics), but a low immune 20s, 30s or 40s can also be affected. Scenario planning is for government's internal thing, and it is used for countermeasures. Based on this, certain specific measures are prescribed for the citizens. Correct information comes there, what to do by the citizen and their changing responsibilities, not on the projections/ predictions.
36	(Question to Rajib S.) What would be the Risk communications for rural areas specially where the internet and other services is not available?	Many of the rural areas in developing countries have good penetration of mobile phones. So, specific text messages can be provides. For any disaster early warning, we call this as "last mile communication". The same here, we can use the traditional early warning system (like loud speakers, from religious institutions like mosques, sending volunteers (with proper protection) etc.
37	(Question to Peter W.) Does Mismanagement of COVID19 crisis come from our loss of eco resilience and..memory (learning from past and others crises)	To some degree, yes. But I think COVID 19 is also unprecedented, so it was always going to be a whole new level of problem. The key now is to learn from COVID 19 for the next pandemic!
38	(Question to Ben R.) I have a question related to the communities' post-epidemic reaction to maintain public health. How can this be done effectively (checking water sources, alerts etc) without inducing a certain "paranoia" amongst the population and state governors due to the "trauma" induced by such a rapid full fledged epidemic like the one we are living in now and it's massive socio-economic consequences ?	I suggest engaging the environmental health workforce. For example, in the United States this is the second largest public health workforce behind nursing. There is often a lack of awareness and engagement of professionals in this field. This is a function of many local and state/provincial governments around the world. The role includes addressing risks and enforcing legislation relating to drinking water, hazardous waste, general waste, sanitation, food safety, communicable diseases, vector issues and mass gatherings. The role post COVID-19 could be adapted, and build on existing skills and tasks to check water sources, collect samples, monitor
39	(Question to Ben R.) The entire process of making a city resilient is a very long process. Is there any way that we can speed up this process if we face a pandemic, like we are currently facing?	For a pandemic this process could be rapidly applied. I suggest a two-day workshop would be enough to rank and prioritize areas for improvement/strengthening and develop an action plan.
40	(Question to Ben R.) Is the weak link in disaster management the capacity to seal everything and protect safe areas and persons from contagion	Good question. Novel outbreaks are often unpredictable. I suggest the area for improvement is understanding and ensuring a multisectoral approach to outbreak preparedness, response and recovery.
41	How do we co-ordinate and bring together so many stakeholders at local level without intervention of higher levels of government?	If there is no higher level authority then it has to be done by persuasion and negotiation - logically, that's the only other option. You will need to think about the proposition for having people collaborate: who gets what and who gives what?
42	How can we harness the 'space of opportunity' that opens with a disaster to address structural inequities (E10) at the root of vulnerability? "Never waste a crisis!" - Rahm Emmanuel	Absolutely! That's the essence of Essential 10 (Recovery).
43	Planning is essential but how local government can sufficiently plan for unknown or emerging health risks?	Local governments need to have sufficient scenario identification and ensure that biological risks are included - focus of Essential 2 (Understanding Risk)
44	How can we integrate more advocacy for & action /attention developing , testing & improving health-related 'impact-based forecasting' methods combining epidemiological & vulnerability/exposure datasets to help accelerate becoming increasingly more timely, targetted and proactive w/DRR?	Issue is prioritization, before a disaster happens. It is also the issue of understanding risks (Essential 2)
45	How do you establish what is the 'greater' risk?	Most would use a scenario generation technique and calculate economic and human impacts. Essential 2.
46	How is the importance of a continuous clean energy supply considered in the framework?	Essential 5. This is reflected strongly in the new building scorecard, by the way: https://www.preventionweb.net/publications/view/69845
47	What are the mechanisms to reach the vulnerable population when the country is observing lockdown?	Map them before the disaster.
48	What about decentralization? Even with organized Emergency attention systems, like the case of Costa Rica, when you rise the emergency level some national institutions don't know what they have to do. For pandemic/disaster response we use to face same problems. Communities are first responders, local officials are unclear on procedures and there is broken communication most of the times, specially if attention should be giving to a large area. When emergencies happen on smaller areas, "central officers" take over without following current contingency plans of those localities and without fulling understanding local dynamics which results in inadequate response of the emergency during crucial moments	Community is involved - hear Ben. It's part of Essential 7 (Societal Capacity); See also the City Scorecard, Essential 6 (training and skills); and Essential 9 (drills and preparation).
49	Considering pandemics are cross boundaries events, how do we engage societies with different cultures but living the same disaster? Thanks from Chile	Ideally, in advance! Mutual expectations, languages, capabilities to offer each other etc need to be clear as soon as possible. You can get the problem in microcosm in a single city, by the way. My wife used to be a social worker in London, and she was always amazed at the different relationships she had with people in the different ethnic communities she worked with - Indian, West Indian (Caribbean), Somali, Ethiopian, Chinese, Pakistani, Bangladeshi ...All these different communities will need to be engaged to deal with the pandemic or other disasters.
50	Hi, I would like to suggest to give more focus on community participation/engagement; during the resilience assessment these are major factors. An example form Nepal earthquake, where a woman lost her life due to wrong perception of "Drop cover and hold" that affect the nearby school is now stopping to do the drills in school. We can see the similar situation in pandemic too. Hence proper citizen disaster science education have to placed for effective DRR. More details are available here: https://geoenvironmental-disasters.springeropen.com/articles/10.1186/s40677-020-00150-2	Absolutely. This is a key component of Essential 7 (Societal Capacity).

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51	One of the keys to response in epidemics is the first level of the system, the primary care level. Without this level, only the curative part of the response is assured and the consequences are treated. This is what we are seeing in Spain. Where we thought we had one of the best systems in the world. I would like to know your opinion and how you see the tool you are presenting in the response of the first level of primary health care.	Good question. This tool would help identify the needs and requirements for primary care, epidemiology, environmental health and other public health areas vital for controlling an outbreak. The tool would provide multisectoral mechanism to rank and prioritize areas for strengthening from a whole-of-society perspective. Also, the discussions generated may identify weaknesses that were previously unknown.
52	The UNDRR framework for EWS (Early Warning Systems) promotes the '4 pillar' approach that integrates user/beneficiary engagement to ensure warning info is Actionable = tailored so that all different segments of society understand and are motivated to take appropriate risk reduction, preparedness & response action - how can we elevate this people-centred dimension across cities frameworks?	This needs to be explored further.
53	Where do early warning systems / services fit into these frameworks?	Essential 9 (Response)
54	How does this take into account the multilevel and multinetwork governance issues such as different levels of governments having to coordinate and not always agreeing...?	You absolutely need to deal with multiple jurisdictions. One example will be Federally-organized countries (USA, Canada, Germany, Australia, Brazil, for example); another example is where there are separate cities or counties making up a single overall urban area. The only way to do that is to engage each jurisdiction in dialog and try to get them in the same room to discuss their assumptions, build shared understanding, and let any incompatible ideas or assumptions emerge.
55	Health is a human right. What more UN can do in countries where rights are suppressed, with 0 governability? My question is more related to miscommunication between different levels of response (local, regional, national)	On questions of multiple jurisdictions - see answer to question above.
56	There was an Earth Quake in North Eastern parts of India with a low magnitude. But at this point if we face an EQ with 6+ magnitude what should we do. Otherwise also in Bangladesh and in the Eastern Coast it's time for cyclone, which is seasonal. What should be the preparedness?	Use the Scorecard! Both the city one and the Public Health addendum!
57	How about chronic stress as urban agriculture and food security?	Absolutely. And how much worse will it get if there is a pandemic affecting the people who grow and distribute food?
58	How do you collect the information on a local level? Do you include mixed methods (household surveys, expert interviews, focus groups etc.) Or are the indicators available in the city agency?	Will have to be mixed sources. It varies hugely around the world. Various resources in various places.
59	Post-Disaster Needs Assessment (PDNA) can also be a tool in filling the gaps or addressing the risk management options as regards this COVID-19 pandemic but guidelines from UNDRR and WHO on this regard is important.	There are various tools that can be used. PDNA can help identify the immediate needs during the crisis/disaster. The scorecard supports a long-term planning for resilience before disaster.
60	COVID19 Response in most hi tech cities like New York was found crumbling vis a vis Mumbai/ Shanghai . This was mainly due to public behaviour and political leadership. So, Political leadership and public behaviour should also be considered in Health resilient of city. Whats your view ?	Yes!!! Yes, leadership is important as well
61	such structuralization from local to state is possible with strong centralized countries. for example, europeans with san papier seem to have problems controlling ppl and identifying the range of "local" because ppl are just moving around. so is this structure have to compromise with individualism or democratic values?	True, but can be handled if communities are involved before the crisis, in scenario planning. The Scorecard is not prescriptive in this respect.
62	wanted to ask how much of medical infos should be open to the society? like in Korea, where infectants have been was totally opened and was morally judged and humiliated by other ppl	Great question - and to what extent is that shaming counter productive? The scorecard is not prescriptive in that respect and I think each country will find its own answer.
63	though you said, it must be conducted multisectorially, which office / dept of the government leads the implementation of the scorecard since it leans toward health emergency management.	That will vary. It may be a city mayor or a provincial governor; it may be an office of emergency management; it may be a health department. It will depend on the particular government structures in place in each location.
64	What about the fear which cause irresponsible action from citizens during distasters?	education before disaster, or as part of recovery
65	a) Se considera necesario y pertinente realizar una articulación y coordinación supranacional en el marco de la Respuesta? b) considera necesario aplicar la herramienta de autoevaluación pero integrando el globo en regiones interconectadas, ya que COVID demuestra ausencia de fronteras. (a) Do you consider it necessary and pertinent to carry out a supranational articulation and coordination within the framework of the answer? b) considers it necessary to apply the self-assessment tool, but integrating the globe in interconnected regions, as COVID demonstrates the absence of borders.)	Clearly, with a thing like a pandemic, or where a flood or earthquake crosses national boundaries, some form of collaboration between countries is needed. That may be through organizations like WHO; or regional dialogs; or other less formal means.
66	I want to know the impact of wrong leadership management in the covid-19 and the difference and actions between urgency medicine and disaster medicine a	Bad leadership will potentially be as fatal to people as the virus itself.
67	first step is understanding the 'web' of interconnections but what we need are user-friendly weighted dynamic tools that enable complex risk planning - e.g. Deltares has developed a 'circle tool' for risk planning that enables visualisation of cascading impacts	We aren't prescriptive about which tools to use. Deltares' tool is an excellent one, but there are others too, eg from Rockefeller.
68	IFRC recently revised new Enhanced vulnerability & capacity assessment (EVCA) to better address gender, climate & ecosystem-related dimensions of strengthening resilience - how can we ensure CAPACITIES are leveraged (whether rural or urban:)?	I'd like to look at this more. Do you have a reference?
69	How do you think the UN Sustainable Development Goals could add to the resilience of the communities?	Yes. Risk reduction is cross cutting, especially in SDG11 - resilient and sustainable cities

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70	Re: Peter Williams' presentation, and scorecard design/implementation. There is a geospatial science element crucial to such assessment that seems to be overlooked. Experts need a seat at the table. Spatial data sets are dynamic, and lend themselves well to addressing what is clearly an interdisciplinary assessment tool, especially in terms of interpretation of both data and analytical results (e.g. modelling prevalence of covid19, predictive factors, assessing preventive measures.	Fully agree. We don't call out geospatial data specifically (although it is referenced in the notes for the City scorecard), and we should.
71	It has been observed that human perception towards COVID and their behavioural aspects are important in managing pandemic. Is there any standard variables for measuring these tangible aspects and incorporate into scorecard for cities?	No standard methods that I know of.
72	Is there any Gender Analysis in the Making Cities resilience report 2019?	Not specifically, unfortunately. Would be happy to talk about how that might be achieved.
73	Without women's resilience it must be difficult to achieve a resilience society.	I agree.
74	When National level DRR Plans are prepared they are made without much local consultations, but when it comes to manage any disaster like the current covid it is the local level institutions (Local governments or Local communities etc) which have to manage the disasters at local level. This is also true for local dimensions of mega frameworks such as SDGs, New Urban Agenda and Climate Change. We really need to focus more on local contexts of these mega frameworks.	Very correct. And once we have both National and Local plans we need to make sure that they "join up" - they use compatible assumptions, they have clear division of responsibility and they don't leave any gaps with key issues, or any communities, omitted.
75	In developing countries disaster management planning or even standing order largely excluding health sector or even in policy level public health experts are excluded (to some extent)	Agreed. The scorecard tries consciously to address this
76	Is there a component of these disaster response protocols that exist to mitigate upticks in human trafficking and / or exploitation during and after natural disasters?	No. Happy to consider.
77	I don't see public security and crime control as an essential in such situations? The role of municipal police also?	Essentials 8 and 9
78	The degree of trust of the public regarding health advices given is mentioned in the scorecard. When it comes to the current COVID-19 situation, is there something that could be done with public health education to eliminate the public's negative impression of wearing a mask? Since wearing masks is indeed a crucial measure to limit the spread of COVID-19.	Huge question - especially here in the US right now. I don't have an answer. I think it reflects a growing mistrust of science in general, which is just tragic.
79	So you propose a bottom-up approach. As we've seen for example in the lockdown in north-Italy this might lead to mass travel. Which can drastically accelerate the spread. Is there a place for some top-down (from national to local) guidelines in this as well?	bottom up before the crisis top down once the crisis has started. It's both - it can't be either-or. Both national and local responses have to be aligned and consistent. See response to question 85 above.
80	Dr. Benjamin Ryan mentioned that disaster and pandemic risk reduction need not be expensive. But it becomes so due to lack of timely focus on risk reduction and prevention aspects. It is becoming evident even with Covid-19. There are nearly 120 countries which are in pre-surge stage – where prevention and risk reduction/management measures need to be scaled up to prevent their moving into surge stage. So, what should be done by Governments, UN agencies, WHO and other stakeholders to emphasize timely interventions in these countries at an early stage? This will make risk and pandemic management less expensive than it currently is due to our usual activation during the response and recovery phase?	Prevention saves lives. Countries need to start planning before disasters.
81	Is a Common Alerting Protocol (CAP) generalization all over the world necessary to prevent and reduce the impact of disasters?	it helps
82	(Question to Rajib) The pandemic is global but the response is local: Do you think underdeveloped countries, mainly in Africa, have no choice than strengthening their eco resilience than fighting disasters with costly budgets particularly when they see how the developed world reacted to Covid19?	In long run yes, eco resilience is very much related to the core of public health. For immediate measure, I think citizen behavior is very important.
83	How can we strengthen the urban immune system, articulated to a change of relationship with nature, thinking that the pandemic could be one of the many consequences of climate change?	One way is thinking about the ecosystem services that confer resilience - tree cover, wetlands, rivers, bees, etc etc. How do you protect and enhance those?
84	I think the appropriate word is physical distancing because we are referring to geographical space between two or more persons. We may be physically distant but we should remain socially connected. This is Marlon Era, Philippines	good point. I agree! Thank you. yes indeed WHO is also using the word physical distance.
85	Tegucigalpa, Honduras. I would like to know if in the framework of the campaign My city is being prepared, we should have support from UNDRR, this Pandemic a multi-risk scenario that produces more poverty. Will UNDRR continue to support the cities of the My City Campaign is being Prepared?	We can help to roll out the health scorecard in your city - contact Johanna. https://www.unisdr.org/campaign/resilientcities/about/article/about-the-campaign
86	Does my country, Ecuador have someone working with UNDRR?	In Panama, UNDRR Regional Office for the Americas and the Caribbean. Raul Salazar who did the webinar opening as the Head of Office.

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