



COVID-19
RESPONSE



Making
Cities
Resilient

UNDRR GETI, UNOSSC, PAHO & WHO Joint Certificate Training

Transitioning to Complex Risk Management and Resilient Urban Futures: Harnessing South-South Cooperation and Learning from COVID-19

23 August – 13 September 2022



with support from:



EXECUTIVE SUMMARY

Jointly organized by the United Nations Office for Disaster and Risk Reduction (UNDRR) Global Education and Training Institute (GETI), the United Nations Office for South-South Cooperation (UNOSSC) under the framework of its Cities Project, the Pan American Health Organization (PAHO) and the World Health Organization (WHO), the “Transitioning to Complex Risk Management and Resilient Urban Futures: Harnessing South-South Cooperation and Learning from COVID-19” training workshop consisted of four online sessions and one end-of-course assessment and was held between 23 August and 13 September 2022.

The first session, on 23 August, focused on providing participants with an introduction to disaster risk reduction, public emergency preparedness, and South-South and triangular cooperation (SSTC). The second session, led by UNDRR on 30 August, focused on the utilization of the Public Health System Resilience Addendum (PHA) of the Disaster Resilience Scorecard for Cities in strengthening cities’ disaster risk reduction planning and implementation. The third session on 6 September, led by WHO and PAHO, introduced the whole of society and multi-sectoral/cross-sectoral approaches to all-hazard health emergency preparedness in urban settings. The final session took place on 13 September focused on cities’ innovative experiences in transitioning to living with COVID-19 and managing complex risk scenarios, featuring speakers from Bangladesh, Chile, and Thailand.

Overall, the training received over 2,700 registrations from 175 countries and territories, and more than 1,300 participants joined the sessions live from 590 cities and districts in over 140 countries and territories with close to equal gender participation. About 35% of participants were from national and local governments, 22% from academic and research institutes, 16% from NGO/CSOs, 12% from the UN and inter-governmental organizations, and 11% from the private sector. At the end of the course, 795 people responded to the online post-webinar survey. Among these respondents, 98% reported having gained knowledge on SSTC, disaster risk reduction (DRR) and public health applicable to their work, and more than 95% of participants would like to be part of the “South-South Cities Clusters” platform and collaborate with UNDRR, UNOSSC, WHO and PAHO on future activities. 360 participants passed final assessments and obtained the certificate of completion.

The training has been transformed into a [self-paced online course](#), which is available free of charge to anyone interested on WHO’s OpenWHO.org learning platform. The course takes approximately 4.5 hours to complete and participants have the opportunity to earn certificates and digital badges to share their achievements.

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INTRODUCTION

About UNOSSC

The United Nations Office for South-South Cooperation (UNOSSC) was established to promote, coordinate, and support South-South and triangular cooperation globally and within the United Nations system.

UNOSSC, hosted by UNDP since 1974, was established by the UN General Assembly with a mandate to advocate for and coordinate South-South and triangular cooperation on a global and UN system-wide basis. UNOSSC receives policy directives and guidance from the General Assembly and through its subsidiary body, the High-level Committee on South-South Cooperation. UNOSSC submits its strategic planning frameworks to the UNDP, UNFPA, and UNOPS Executive Board for approval and funding. The Director reports to the UNDP Administrator and has also been appointed Envoy of the Secretary-General on South-South Cooperation.

About the Cities Project

In 2017, the United Nations Office for South-South Cooperation (UNOSSC) initiated the SSTC among Maritime-Continental Silk Road Cities for Sustainable Development Project (Cities Project). [The Cities Project](#) aims to promote SSTC at the city level, leveraging the thematic expertise of UN specialized agencies and the strategic opportunities offered by the “Belt and Road Initiative” (BRI) in advancing sustainable development globally. The Cities Project aligns its support with the engagement and ownership of local authorities and stakeholders. It is designed to provide streamlined services which include demand-driven needs assessment, capacity development, advisory and advocacy, knowledge, expertise, and technology transfer and implementation and co-financing support to pilots for demonstration purposes.



The Cities Project. Source: UNOSSC

About UNDRR

The UN Office for Disaster Risk Reduction (UNDRR, formerly known as UNISDR) was established in 1999 and serves as the focal point in the United Nations System for the coordination of disaster risk reduction. It supports the implementation of the Sendai Framework for Disaster Risk Reduction 2015-2030, which maps out a broad people-centered approach towards achieving a substantial reduction in disaster losses from natural and man-made hazards and a shift in emphasis from disaster management to disaster risk management. Overseeing the implementation of the Sendai Framework, supporting countries in its implementation, monitoring, and sharing what works in reducing existing risks and preventing the creation of new risks, UNDRR brings governments, partners, and communities together to reduce disaster risk and losses to ensure a safer, more sustainable future. UNDRR also coordinates the Making Cities Resilient 2030 (MCR2030), a global coalition of practitioners, thought-leaders, financiers and donors, policymakers, technical agencies, and networks with a collective commitment to contributing towards strengthening local resilience and delivery of the 2030 Agenda, and the ARISE private sector network committed to risk-informed development, disaster risk reduction, and preparedness action.

In 2010, the UNDRR Global Education and Training Institute (GETI) was established to develop a new cadre of professionals in disaster risk reduction and climate change adaptation to build disaster resilient societies. GETI has a global mandate to provide capacity building support to mainstream disaster risk reduction and climate change adaptation into sustainable development; convene and support inter-city learning to strengthen resilience (Making Cities Resilient); and to provide capacity building and best practice sharing support to national training institutions working on resilience issues. Based in Incheon, the Republic of Korea, UNDRR GETI is also the global secretariat of the Making Cities Resilient 2030 (MCR2030).



UNDRR GETI. Source: UNDRR

About PAHO

The Pan American Health Organization (PAHO) is the specialized international health agency for the Americas. It works with countries throughout the region to improve and protect people's health.

PAHO engages in technical cooperation with its member countries to fight communicable and non-communicable diseases and their causes, to strengthen health systems, and to respond to emergencies and disasters. PAHO is committed to ensuring that all people have access to the health care they need, when they need it, with quality and without fear of falling into poverty. Through its work, PAHO promotes and supports the right of everyone to good health.

To advance these goals, PAHO promotes technical cooperation between countries and works in partnership with ministries of health and other government agencies, civil society organizations, other international agencies, universities, social security agencies, community groups, and other partners. PAHO promotes the inclusion of health in all public policies and the engagement of all sectors in efforts to ensure that people live longer, healthier lives, with good health as their most valuable resource.

In the emergency area, PAHO Health Emergencies Programme works with countries to increase the health sector's resilience to emergencies and disasters. PAHO's priority is to deliver rapid, predictable, and comprehensive support to the Member States in terms of prevention, risk reduction, preparedness, surveillance, response, and early recovery in case of any threat to human health, including outbreaks or disasters caused by natural phenomena, biological, chemical or radiological agent, human activities, conflicts or any other hazard.

In the urban health area, the Health Promotion and Social Determinants of Health Unit work with countries and local level governments to consider the impact that policies from other sectors such as education, employment, and transport, among others have on health. At the same time, PAHO works towards the implementation of a health promotion approach into technical cooperation in urban health and by promoting governance for health and well-being at the local level.

PAHO wears two institutional hats: it is the specialized health agency of the Inter-American System and also serves as the Regional Office for the Americas of the World Health Organization (WHO), the specialized health agency of the United Nations.

About WHO

Founded in 1948, WHO is the United Nations agency that connects nations, partners and people to promote health, keep the world safe and serve the vulnerable – so everyone, everywhere can attain the highest level of health. WHO leads global efforts to expand universal health coverage, we direct and coordinate the world’s response to health emergencies, and we promote healthier lives – from pregnancy care through old age. Our goal is to ensure that a billion more people have universal health coverage, to protect a billion more people from health emergencies, and provide a further billion people with better health and well-being.

For universal health coverage, we focus on primary health care to improve access to quality essential services, work towards sustainable financing and financial protection, improve access to essential medicines and health products, train the health workforce and advise on labour policies, support people’s participation in national health policies, and improve monitoring, data and information. For health emergencies, we prepare for emergencies by identifying, mitigating and managing risks, prevent emergencies and support development of tools necessary during outbreaks, detect and respond to acute health emergencies and support delivery of essential health services in fragile settings. For health and well-being, we address social determinants, promote inter-sectoral approaches for health and prioritize health in all policies and healthy settings.

About [OpenWHO.org](https://openwho.org/)/OpenWHO. Open to all anytime, from anywhere.

OpenWHO is WHO’s interactive, web-based, knowledge-transfer platform offering online courses to improve the response to health emergencies. OpenWHO enables the Organization and its key partners to transfer life-saving knowledge to large numbers of frontline responders. OpenWHO is the first WHO platform to host unlimited users during health emergencies. It provides you with a fast and free way to obtain the latest scientific and operation know-how. With a dynamic interface, accessible through your computer and mobile device, OpenWHO offers offline downloads, peer discussion boards and live briefings from ongoing health emergencies.

OpenWHO.org

What? WHO’s free online learning platform to improve the response to health emergencies

Why? Launched in 2017 to facilitate knowledge transfer on a massive scale in anticipation of the next pandemic

Who? Serving frontline health workers, decision-makers and the public in outbreaks from Ebola to COVID-19



OpenWHO: Key figures



7.1 million total course enrolments	169 total course topics	46 COVID-19 courses	3.8 million certificates
65 languages	19.7 million words translated	193 000 digital badges	

Free of charge

Accessible

Self paced

Multilingual

OpenWHO. Source: WHO

Event Background and Introduction

Urbanization continues to rise at an unprecedented rate over the next three decades, from 56 percent in 2021 to 68 percent in 2050¹. While the future of humanity is undoubtedly urban where cities are hubs of jobs and opportunities, an increase in population density and informal settlement in high-risk urban areas are mounting challenges for urban populations.

Since 2020, cities around the world have faced even more challenges with the COVID-19 pandemic which exacerbates the vulnerabilities and brings tremendous impact on urban health and well-being. The virus has taken the lives of millions, causing an economic and social crisis that has exacerbated inequities. The COVID-19 pandemic reveals a new reality: cities are living with uncertainties and facing much more complex risks. In order to transition to resilient and sustainable urban futures, cities need to evolve to reflect the interconnectedness of people, the planet, and prosperity. Cities must transition to systematic risk governance with an enhanced understanding of systematic risks².

Business as usual will not lead to changes. Cities are at the forefront of opportunities to learn from the systematic impact of the pandemic and the complexity of risks amidst climate emergencies. Local authorities are in a vital position to ensure climate, health and other risks are integrated into the city planning and financing processes, allowing city stakeholders to collaborate and take collective actions to reduce risks. Equally important is the mutual learning and support among cities across countries with their tested and innovative experiences. Strengthening municipal governments' capacities in understanding the systematic nature of risks, disaster risk reduction, public health emergency response, as well as their abilities to collaborate and learn from each other's experiences remain critical to the success of cities in this transformed world.

The Buenos Aires outcome document of the second High-level United Nations Conference on South-South Cooperation (BAPA+40) in 2019 recognized that local authorities play a growingly indispensable role in South-South and triangular cooperation which can take different forms such as knowledge sharing, training, and capacity building, and technology exchange in various thematic areas including disaster risk mitigation and climate change. Such cooperation can support cities, especially in developing countries, in achieving sustainable development.

This training provides an opportunity for local authorities and urban development practitioners to mutually learn and share experiences in transitioning to managing complex risks and a resilient future. Jointly organized by the UN Office for South-South Cooperation (UNOSSC), the UN Office for Disaster Risk Reduction (UNDRR), the World Health Organization (WHO), and the Pan American Health Organization (PAHO), it builds upon the prior two editions which were held annually in 2020 and 2021.

1. [World Cities Report 2022: Envisaging the Future of Cities](#)

2. [The Global Assessment Report on Disaster Risk Reduction 2022](#)

The first edition held between 8 September and 6 October 2020 focused on “Making Cities Resilient: Developing and implementing local disaster risk reduction strategy to respond to COVID-19 and to better prepare for the future” was attended by over 2,500 participants from 150 countries and territories. The second edition entitled “Build Back Better: Harnessing South-South Cooperation and Risk Reduction Planning for Resilient and Healthy Cities in the Post-COVID-19 era,” was held throughout June 2021 with over 5,000 registrations and 2,979 live attendances from over 1,000 cities in 155 countries and territories with close to equal gender participation.

The third edition this year focuses on “Transitioning to Complex Risk Management and Resilient Urban Futures: Harnessing South-South Cooperation and Learning from COVID-19”. It was held from 23 August to 13 September 2022, in conjunction with the Global South-South Development Expo 2022.

Organizers:

- United Nations Office for Disaster Risk Reduction (UNDRR) Global Education and Training Institute (GETI)
- United Nations Office for South-South Cooperation (UNOSSC)
- Pan American Health Organization (PAHO)
- World Health Organization (WHO)

Course Objective:

This training serves as an introductory training for urban leaders, planners, and practitioners, aiming to a) increase the understanding and capacities to manage complex and systematic disaster risks and enhance public health emergency response preparedness, and South-South cooperation; b) better prepare city stakeholders for transitioning to living with COVID-19 pandemic, fostering collective collaboration, and making cities resilient for future crises - especially health emergencies and uncertainties; c) facilitate city-to-city partnerships in South-South and triangular cooperation (SSTC) towards sustainable development.

Targeted Audience:

Local and national government officials in charge of disaster risk reduction and management, urban development and planning, and public health emergency preparedness, national associations of municipalities, urban resilience and development practitioners, as well as civil society, private sector, and academia.

The course is open to all applicants from both developed and developing countries, especially young experts and officials. Participants from Least Developed Countries (LDCs) and Small Island Developing States (SIDs) are highly encouraged.

Date & Time:

23 August – 13 September 2022; Total of 4 online sessions (90-120 mins) and 1 end-of-course assessment.

Workshop Language:

English, with simultaneous interpretation provided in Arabic, Chinese, French, Portuguese, and Spanish.

SESSION 1

- Recording available at youtu.be/lqqRafiqOrY
 - Slides available at <https://www.undrr.org/event/undrr-unossc-who-paho2022>
(under attachment, drop down on the right hand side)
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Opening Messages



Loretta Hieber Girardet
Source: UNDRR

LORETTA HIEBER GIRARDET

Chief, Risk Knowledge, Monitoring and Capacity Development Branch (RKB), UNDRR

“We need today a decisive shift towards disaster prevention. And to achieve this, we need to work across silos to understand systematic and complex risks. And we need to be able to assess these risks when we design and develop the cities, the infrastructure, the power supply, water, transport systems, as well as schools and hospitals.”

Health emergency preparedness in urban environment and South-South Cooperation

DR. CELSO BAMBAREN

Unit Chief, Country Health Emergency Preparedness and International Health Regulations, PAHO/WHO

Dr. Bambaren highlighted from the experience during the COVID-19 pandemic that local governments have a critical role in responding to health emergencies and they must ensure an equitable recovery to achieve universal access to health.

“To protect and improve the lives of the population of cities and ensure development progress promote resilience, cities must invest in strengthening health infrastructure and services by adopting integrated policies and plans that take into account vulnerable groups by age, gender, and disability, with a focus on marginal settlement areas, and that promote health inclusion before, during and after an emergency or disaster.”



Dr. Celso Bambaren
 Source: PAHO/WHO

South-South and triangular cooperation: trends, policies and its role in public health and disaster risk reduction

XIAOJUN GRACE WANG

Trust Fund Director, UNOSSC

Ms. Wang introduced the principles and modalities of South-South and triangular cooperation (SSTC) and the significant contribution of South-South Cooperation in COVID-19 response, public health, and disaster risk reduction.

She highlighted that peer-to-peer learning can play a significant role in supporting local governments to become resilient: “The ability to share knowledge and apply good practices is crucial for cities to optimize their responses and build resilient futures. The exchange of knowledge, mobilization of expertise and research resources, training, and capacity development are becoming more and more important in the changing world that has been significantly impacted by the pandemic and challenged by complex risks at all levels.”

Sample Projects: COVID-19 Response

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Ms. Wang presenting during Session 1. Source: UNOSSC

Introduction to Disaster Risk Reduction (DRR) and the Making Cities Resilient 2030 (MCR2030)

SANJAYA BHATIA

Head, Global Education and Training Institute (GETI), UNDRR

Making Cities Resilient 2030 (MCR2030) is a global coalition of urban resilience partners aiming to support local governments improve their resilience to risk. Mr. Bhatia underlined local authorities can shape new and innovative policies that strengthen health systems, improve social protection, pursue climate-friendly solutions, and continue on the pathway towards resilience.

“Cities need access to different types of tools, partners, and services. Vertical integration between national and local governments is very important, and the partnership with the private sector, with universities is also very key.”



Mr. Bhatia presenting during Session 1. Source: UNOSSC

SESSION 2

- Recording available at youtu.be/qe-8KtMGuW
- Slides available at <https://www.undrr.org/event/undrr-unossc-who-paho2022>
 (under attachment, drop down on the right hand side)

Introduction to the Disaster Resilience Scorecard for Cities – Public Health System Resilience Addendum

MUTARIKA PRUKSAPONG

Programme Management Officer of Global Education and Training Institute (GETI), UNDRR

Cities are complex and are made up of different systems that have multiple connections and interactions: causal, resources, and data. Failure of one system may impact other systems and create cascading failures.

Ms. Pruksapong emphasized that a systematic approach must be taken in order to make a city resilient: “When we talk about resilience building, we have to look at not only the emergency preparedness and responses to these acute shocks, but also to take a more integrated angle. We need to get our city development to embed risk information and make sure we reduce the chronic stresses and all underlying factors of the cities at the same time.”

Understanding the 10 Essentials for Making Cities Resilient

1. ORGANISE FOR DISASTER RESILIENCE
2. IDENTIFY, UNDERSTAND AND USE CURRENT AND FUTURE RISK SCENARIOS
3. STRENGTHEN FINANCIAL CAPABILITY FOR RESILIENCE
4. PURSUE RESILIENT URBAN DEVELOPMENT AND DESIGN
5. SAFEGUARD NATUREL BUFFERS TO ENHANCE THE PROTECTIVE FUNCTIONS OFFERED BY NATURAL CAPITAL
6. STRENGTHEN INSTITUTIONAL CAPACITY FOR RESILIENCE
7. QUANTIFY AND STRENGTHEN SOCIETAL CAPACITY FOR RESILIENCE
8. INCREASE INFRASTRUCTURE RESILIENCE
9. ENSURE EFFECTIVE DISASTER RESPONSE
10. EXPEDITE RECOVERY AND BUILD BACK BETTER

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 Learn more about the 10 Essentials at: <https://mcr2020.undrr.org/en/ten-essentials-making-cities-resilient>

Ms. Pruksapong presenting during Session 2. Source: UNOSSC

Using Public Health System Resilience Addendum to support city moving towards complex risk management: case example from Campinas, Brazil

SIDNEI FURTADO

Director of Civil Defense, Campinas, Brazil

Mr. Furtado introduced that Campinas is recognized as an international leader in building resilience and is committed to working to integrate various municipal agencies, the community, and the private sector to implement public policies for disaster risk reduction. Campinas was the first city to establish the Resilient City Committee, a collegiate body for the deliberation and coordination of the Making Cities Resilient Campaign. On 21 December 2021, the city was recognized for its commitment to support peer cities as a “Resilience Hub” of the MCR2030 initiative.



Mr. Furtado presenting during Session 2. Source: UNOSSC

Quiz & Discussion

The Quiz session included 5 questions for participants to discuss. The key takeaways include:

1. The Public Health Scorecard Addendum can help cities understand the baseline and identify actions to improve resilience. **2.** Resilience is a long-term investment, even if the city scores high in the Scorecard today, the situation may change in the future. **3.** Building consensus and working relationships between the different government sectors and departments is one of the objectives of the Scorecard. **4.** Using the Scorecard is a key step towards developing bankable projects and financing for risk reduction and resilience building. **5.** The high-risk population to be considered for risk reduction planning are not only the elderly and children, but can include people with disabilities, caregivers, people with multiple medical conditions, the poor, people with temporary health needs such as pregnancy, etc.

SESSION 3

- Recording available at youtu.be/5sgjRoO88Ns
- Slides available at <https://www.undrr.org/event/undrr-unossc-who-paho2022>
(under attachment, drop down on the right hand side)

Key concepts of Health Emergency and Disaster Risk Management related to resilient cities

DR. KAI VON HARBOU

Technical Officer, Disaster Risk Management and Resilience, WHO

Dr. von Harbou highlighted the need to better understand and manage systemic risks, as evidenced in the pandemic as well as recent climate change-related emergencies, and introduced different tools that WHO developed to operationalize risk-informed, multi-sectoral approaches through Health Emergency and Disaster Risk Management at national and sub-national levels, such as the Strategic Tool for Assessing Risks (STAR) and the development of national health emergency response operational plan (NHEROP).

He finished his presentation outlining key concepts to establish and institutionalize whole-of-society and whole-of-government mechanisms for risk management and emergency preparedness in the urban context with a particular focus on community-level functions as key factors to build the resilience of health services and protect populations from the impacts of all types of health emergencies.



Risk reduction and resilience in the urban context

- By 2050 68% of world population living in urban areas
- Most future urban growth in low and middle income countries
- Subnational and community levels (including cities) implementation of the Sendai Framework and HEDRM has the greatest impact
- Target E for the Sendai Framework promotes local practices through the development and adoption of local disaster risk reduction (DRR) strategies/plans
- SDG 11: To make cities and human settlements inclusive, safe, resilient and sustainable
- Unplanned urbanization, high population density, vulnerable populations, informal settlement
- Governance

11 SUSTAINABLE CITIES AND COMMUNITIES

World Health Organization

Dr. von Harbou presenting during Session 3. Source: UNOSSC

Resilient hospitals in cities

DR. ALEX CAMACHO

Regional Adviser, Emergency Preparedness and Disaster Risk Reduction, PAHO/WHO

Dr. Alex Camacho delved into the topic of how to reduce the disaster damage to critical infrastructure and disruption of basic services, especially health services. He strengthened the importance of four priorities in the Sendai Framework: understanding disaster risk; strengthening disaster risk management to better manage disaster risks; investing in disaster risk reduction for resilience; improving disaster preparedness for effective response, and recovery.

He also introduced the basic concepts of prospective, corrective, and compensatory disaster risk management, the foundation and impacts of hospital resilience, as well as the strategic toolkit for assessing risks. The Smart Hospitals project is one of PAHO's largest partnership initiatives. It builds on the Safe Hospital Initiative and focuses on improving hospitals' resilience, strengthening structural and operational aspects, and reducing carbon footprint. PAHO has been providing technical assistance to Caribbean countries for its implementation.



Dr. Camacho presenting during Session 3. Source: UNOSSC

Strengthening health emergency preparedness in cities and urban settings

ADAM TILIOUINE

Technical Officer, Health Security Preparedness, WHO

Mr. Tiliouine briefly presented tools and guidances developed by WHO on urban health emergency preparedness, including two overarching documents based on discussions of a global technical working group, COVID-specific guidance and checklist, as well as other tools that can be adapted to urban settings, such as REMAP, STAR, and others.

The [WHO Urban Preparedness Framework](#) identifies 8 key areas of focus to be addressed in cities and urban settings:

- Governance and financing for health emergency preparedness
- Multi-sectoral coordination for preparedness
- High population density and movement
- Community engagement and risk and crisis communication
- Groups at risk of vulnerability
- Data, evidence, and information
- Commerce, industry, and business
- Organization and delivery of health and other essential services

For the next steps, Mr. Tiliouine highlighted the importance of knowledge sharing and transfer, enhancing existing and developing new partnerships, and leveraging relevant networks to encourage global and regional commitment to urban preparedness.

The image shows a presentation slide on the left and a video feed of Mr. Adam Tiliouine on the right. The slide is titled "Context: Urban Health Emergency Preparedness" and lists several key points:

- Urban environments have **unique vulnerabilities and risk profiles**, given their characteristics including high population density and associated congestion, as well as being hubs for travel and trade
- **Urban environments and their design, building local level capacities, and integrating local/municipal authorities into national level health security preparedness activities** are critical in mitigating these risks
- Given their importance to health security, **national health security and emergency preparedness** cannot be achieved without an enhanced focus on cities and urban settings
- COVID-19 has highlighted the **unique challenges and opportunities** that cities and urban settings face in preparing for, and responding to, health emergencies
- A **high proportion of COVID-19 cases, deaths and community spread** has occurred in highly dense environments and cities

The video feed shows Mr. Tiliouine speaking, with the World Health Organization logo and name visible in the top left corner of the video frame.

Mr. Tiliouine presenting during Session 3. Source: UNOSSC

SESSION 4

- Recording available at youtu.be/h_Du5BqvCm8
- Slides available at <https://www.undrr.org/event/undrr-unossc-who-paho2022>
(under attachment, drop down on the right hand side)

Facing the COVID-19 pandemic in the Municipality of Santiago de Chile

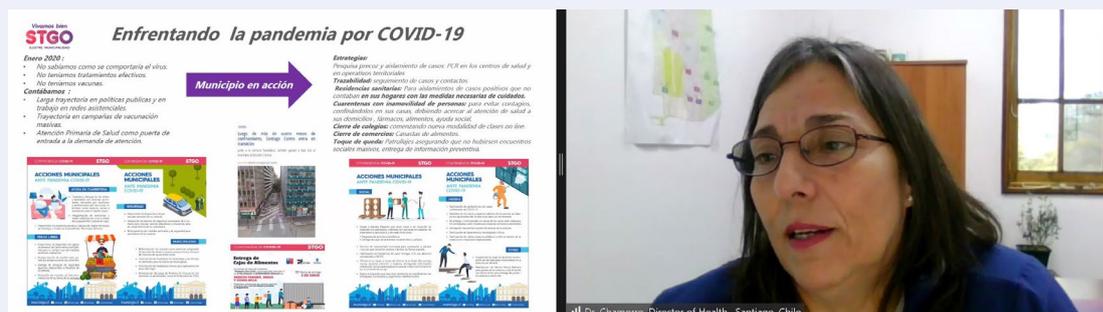
DR. BEATRIZ CHAMORRO

Health Director, Municipality of Santiago, Chile

Dr. Chamorro outlined how Santiago's public health sector, with a long history of health care networks based on primary health care, redirected the work into actions to deal with challenges emerging during the COVID-19 pandemic. For example, with a floating population of around 1.9 million people from different communes of the Metropolitan Region passing through the city daily, the mass vaccination processes were a huge effort, and it was necessary for the city to manage its vaccination data registration differently.

Facing the post-pandemic situation, she emphasized the five aspects below:

- Adapt Mental Health Care.
- Rehabilitation physical and psychological sequelae of post-COVID users.
- Return to classes of students after two years of confinement.
- Reactivate the economy, respecting self-care measures.
- Reconnect with the community.



Dr. Chamorro presenting during Session 4. Source: UNOSSC

Thailand disaster and emergency management

TAVIDA KAMOLVEJ

Deputy Governor of Bangkok, Thailand

Ms. Kamolvej introduced the “Ratchapipat Sandbox Model” in Bangkok, which aims to strengthen the primary care service system in communities by increasing access and outreach to the last mile. Technology is used to support operations and enhance quality and ensure inclusiveness for equal access to all. The model aims to increase the quality of life of the urban population and make Bangkok a livable city for everyone.

She also summarized what the city has learned from disasters and public health emergencies: “We need to continuously learn from mistakes and prepare for a better future... Faster detection and better responses require robust national health surveillance and an improved national pandemic information gathering system. Clearer and more coordinated scientific advice would facilitate policy decisions and public communication.”

Thailand | What have we learned from disasters so far? Lessons for locals

2004 Indian Ocean earthquake and tsunami

- the importance of building strong institutional coordination and adequate financing mechanisms
- putting resources into hazard mitigation and emergency preparedness is perhaps the best investment a country can make
- the need to put communities at the center of the reconstruction process
- inadequate research and development on earthquake and tsunami sciences in Thailand
- a lack of proper maintenance of the critical facilities for the earthquake and tsunami mitigation
- it is very difficult to maintain the level of the awareness of the people about the great danger of the earthquake and tsunami

2011 Thailand Mega flood

- the urgent need for institutional reforms. Neither the government nor public could take ultimate responsibility
- Various authorities had different views on flood management and various authorities had different. Contradictory statements came from different institutions, which confused the public. There must be a consistent and realistic strategy for the Thai authorities to manage floods effectively and promptly
- Real-life problems cannot always be simulated on computer. Simulating floods and building evacuation plans that take into relevance indicates a failure from a societal and scientific perspective

2014 Mae Lao earthquake

- Our warnings to us led to show our experience of being disaster in their aftermath, community memory and historical accounts of earthquakes can provide useful information to supplement scientific studies
- the local building regulations is needed which provide for locally-specific earthquake protection and engaging the local engineering community to gain local knowledge of risk reduction with measures a design for long-term investment
- We need to provide funding for critical facilities should remain functional after an earthquake. A clear emergency management plan should be drafted and practiced to prepare in locally for crisis mitigation at each mass evacuation
- the need to allocate authorities and responsibilities for implementing local level DRR action, capacity development necessarily follows as local empowerment promotes DRR action.

THAILAND Disaster & Emergency Management

Tavida Kamolvej, Deputy Governor, Bangkok, Thailand (UNDRR)

Ms. Kamolvej presenting during Session 4.
 Source: UNOSSC

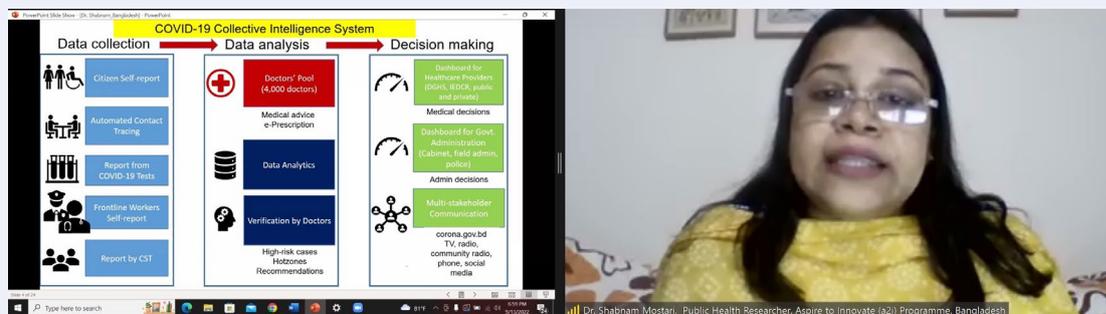
Country on a mission: the remarkable story of Bangladesh in national COVID-19 response

DR. SHABNAM MOSTARI

Public Health Researcher, Aspire to Innovate (a2i) Programme, Bangladesh

Dr. Mostari introduced how a2i contributed to health service delivery and risk monitoring in Bangladesh and provided advice on collective intelligence for improved policy making, including:

- Supporting vaccine registration and repurposing assets/initiatives
- Reporting Adverse Effect Following Immunization (AEFI) and integrating with telemedicine service
- Issuing international travel certificates to prevent reinvention of the wheel and deploy quickly and sustainably
- Supporting policy decisions with big data analysis
 - Integrating the COVID-19 dashboard, vaccination dashboard, and AEFI dashboard
 - Analyzing vaccination LNOB issues
 - Analyzing telemedicine data for COVID patients
 - Analyzing socio-economic recovery data from multiple data sources



*Dr. Mostari presenting during Session 4.
Source: UNOSSC*

Key Messages & Wrap-up



Source: PAHO/WHO

Dr. Godfrey Xuereb

Head, Country and Subregional Coordination, PAHO/WHO

Territories provide unique opportunities for innovation and inter-sectoral action for achieving the goals of the 2030 Agenda, which requires good local governance. For example, in the region of the Americas, the movement on Healthy Cities, Municipalities and Communities has over 30 years of experience, promoting health at local level and working with a Health in All Policies approach. Other regions have similar examples to learn from, which brings an opportunity for promoting South-South Cooperation, exchanging good practices and knowledge among cities.



Source: UNDRR

Sanjaya Bhatia

Head, Global Education and Training Institute (GETI), UNDRR

We're in a world where we have to deal with complex risks, not only looking at the hazards themselves but also the drivers of risk, and how all these risks are becoming interconnected and increasing the challenges in dealing with them.

The only way to deal with this is with the system of systems approach, understanding that all sectors are interrelated and we need all of them to be resilient. The toolkits available can help in determining the gaps in your systems and developing a plan of action to enhance your resilience.



Source: WHO

Heini Utunen

Head a.i., Learning and Capacity Development Unit, Health Emergencies Programme, WHO

There needs to be learning and adaptation work to make evidence-based decisions that keep people safe in public health emergencies. With most of the global population now living in cities and urban settings, the cities are really at the heart of the efforts to understand and manage the health risks that are more complex than ever before.

South-South Cooperation is all about learning from each other and this is what this program has been for us. It's learning, experimenting together, and taking responsibility collectively.



Source: UNOSSC

Denis Nkala

Chief, Inter-governmental and UN affairs, UNOSSC

We're at a point in our time where indeed there are complex emergencies and disasters. It is important to see that what will take us out of this is the ideas underpinned by South-South Cooperation, which is solidarity and working together.

The "[South-South Cities Clusters](#)" brings cities, networks, and institutions to interact with UN Specialized agencies and experts in order to facilitate more horizontal cooperation and SDG investments on the ground.



Click to watch introduction video of South-South Cities Clusters. Source: UNOSSC

Closing Remarks



Dr. Qudsia Huda
Source: WHO

DR. QUDSIA HUDA

Head, Disaster Risk Management and Resilience, WHO

"Complex risk management approach should be able to protect the workforce and the health infrastructure in the cities through a whole of society approach. This warrants a robust and risk informed governance with a strong leadership at all levels. Governors/mayors play that vital role in the cities, and we count on you."

SURVEY FINDINGS

Overall, the training received over 2700 registrations from 175 countries and territories, and **1313** participants joined the sessions live from **over 590 cities in 142 countries and territories** with close to equal gender participation (female 41% and male 58%).

The Philippines, India, Brazil, Costa Rica, Nigeria, and Quezon (the Philippines), Hargeisa (Somaliland), Nairobi (Kenya), Kathmandu (Nepal), and Lima (Peru) were the five most represented countries and cities among the attendance. About **35%** of participants were from national and local governments, **22%** from academic and research institutes, **16%** from NGO/CSOs, **12%** from the UN and inter-governmental organizations, and **11%** from the private sector.

Top five countries among the attendance

	Total	Female	Male
The Philippines	125	68	55
India	89	30	59
Brazil	78	35	43
Costa Rica	64	41	23
Nigeria	64	18	46

Following the workshop, the project team distributed an online post-webinar survey for assessment. The survey was completed by **795** people. By the end of the course, **360** participants successfully passed the final exam and obtained certificates of completion.

According to the post-webinar survey responses:

98% of participants gained **new knowledge and concepts** of disaster risk reduction (DRR), public health emergency response and South-South and triangular cooperation (SSTC) that will be applicable to their work.

97% have the knowledge to **find health emergency and disaster risk resources** and to use them into the local context.

98% gained a greater understanding of the **critical link between equity, health, and resilient societies** and it will inform their future actions.

95% of participants would like to be part of the “South-South Cities Clusters” platform and collaborate with UNDRR, UNOSSC, WHO and PAHO on future activities.

In general, respondents found this training **most useful in:**

**48%**

Case Studies

**48%**

Tools Provided

**41%**

Practical Knowledge

**36%**Conceptual Frameworks on
DRR/Urban Health/SSTC**25%**Network Opportunities
and Activities

Among these respondents, **disaster and risk reduction, water and sanitation, and waste management** are their top three development priorities in the cities or organizations. It was also identified that knowledge sharing, capacity development, partnership building, and resource mobilization are respondents' most expected support to be given by the UNOSSC Cities Project.



United Nations
Office for South-South Cooperation

The Cities Project:

- Email: southsouth.cities@unosscc.org
- Project [webpage](#)