

USG John Holmes Speech

International Day for Disaster Reduction 2008

“Saving Lives: hospitals and schools safe from disasters”

Excellencies, Ladies and Gentlemen,

Let me first welcome all of you to this event which marks the International Day for Disaster Reduction, and let me also thank our co-host, Pakistan, - particularly appreciated as we mark the third anniversary of Pakistan earthquake. I wish to congratulate the Government of Pakistan on what has been, by general agreement, a successful response in very difficult circumstances, as well as our guest speakers who have travelled to New York from far away places, China, India and British Virgin Islands, to be able to share with you their experience and knowledge on this topic. I am also very thankful and encouraged by the strong collaboration, and partnership with the WHO/PAHO and the World Bank in promoting the safety of critical infrastructure, which we will hear more about today.

Let me say a few words on these issues from a global perspective before we hear the views from the ground from my fellow panellists.

We face greater risks – action is urgently needed

The sheer scale and cost of disasters cannot be ignored. According to the latest figures by CRED (and just released yesterday), the first half of 2008, was one of the worst ever, since records began in the 1980s. Once again, the world witnessed the extreme vulnerability of our society to natural hazards. Cyclone Nargis and the Sichuan earthquake, two historic events, resulted in the death of 225,000 people. From January to the end of June 2008, 101 disasters killed more than 229,000 people and affected more than 130 million others, causing over 34 billion \$US of damage.

Such staggering losses strike home the message that disaster risk reduction is not only crucial, but also everyone’s responsibility. It needs to become a top priority for Governments, municipalities, NGOs, business leaders and local communities, which is the message of the **Hyogo Framework for Action (2005-2015)**. Climate change will lead to increased disasters, making this task ever more urgent. Last week, **Secretary-General BAN Ki-moon** and **Deputy Secretary-General Asha-Rose Migiro** showed their commitment on this issue by convening a high-level meeting on “Reducing Disaster Risks in a Changing Climate”. He urged Governments to give high priority to implementing disaster risk reduction measures to achieve the goals set by the Hyogo Framework for Action (2005-2015). The

meeting demonstrated clear evidence of increased collective commitment to speed up the implementation of the Hyogo Framework, to recognise the scale and magnitude of weather related hazards and the scale of melting glaciers, as well as to finding innovating, robust solutions to address the increasing disaster risks. There is also a pending recruitment of Assistant Secretary-General for ISDR Secretariat in Geneva, which is another sign of increasing commitment of the system.

Making hospitals, schools and other critical public infrastructure safe from disasters brings a double benefit: saving lives and helping to achieve the MDGs

We know that health facilities and schools are sanctuaries for society's most vulnerable people – the sick, the young, the elderly. Schools and hospitals are a symbol of the responsibility of care that governments have towards their people, and their failure or collapse during disasters costs the lives of those who most need protection, costs social morale, and can increase political dissatisfaction.

The 2-year campaign to make Hospitals Safe from Disaster, launched in January 2008, which I was glad to take part in the margins of WEF in Davos, rightly emphasizes that safe and resilient health facilities and well prepared health workers, can make a difference not only between life and death during disasters, but to how quickly a nation achieves Millennium Development Goals like improving maternal health and fighting child mortality. Disaster-safe health facilities are investments that reap returns in saved lives, in better infrastructural development, and in more sustainable human development. Moreover, when health facilities are built vulnerable to disasters, huge infrastructural investments can be lost simply through oversight. Developing countries just cannot afford this. No one can afford this, least of all developing countries.

The health sector, like the education sector, needs to be an integral part of wider disaster risk reduction policies and programs, both from a humanitarian and a development perspective.

Making the necessary investments: The investment in risk reduction needs to be substantially increased, both in national budgets and in international funding for sustainable development or as part of humanitarian work

One of the best arguments for risk reduction is the simple fact that “an ounce of prevention is worth a pound of cure”. Building disaster-safe hospitals or schools is not expensive, and the cost is practically negligible when included in early design considerations. According to experts, for the majority of new health facilities, incorporating comprehensive safety standards from earthquake and weather events into early designs will only add 4% to the cost. When we consider what is at stake, and echoing the simple slogan of today, the most expensive hospital is indeed, the one that fails.

A number of countries are already investing in making schools and hospitals safe, such as **Iran**, which allocated USD \$4 billion for the reconstruction and strengthening of more than 250,000 class rooms within five years. I am sure we will hear more examples today from our panellists on national investments in health.

Let me conclude by stressing three key needs for the future.

- The need for strong political commitment – making hospitals safe from disasters is more than just a health sector issue, as vulnerable health systems impact all parts of society. It is a wider issue for governments as a whole.
- The importance of designing all new health facilities and schools safely from the very beginning and the importance of assessing and improving their own resistance.
- The need to innovate – to develop new tools like the Hospital Safety Index to help countries in protecting this critical infrastructure can help countries to analyse where they are standing, as well as to make full use of the existing tools and experience, already available.

I look forward to listening to the experiences and expertise that the speakers and panellists will bring about challenges in making hospitals or other critical infrastructure, such as schools, safer from disasters.