



SITUATION AND PUBLIC HEALTH MEASURES ON JAPAN EARTHQUAKE AND TSUNAMI

Japan Public Health Association

The northeast coast of Japan was hit by a 9.0 magnitude earthquake on March 11. To date, the number of killed or missing people has amounted to around 30,000.

I very much appreciated the sympathy which President Ulrich Laaser and other members of WFPHA immediately showed to JPHA.

More than 400,000 people were evacuated, and more than 2,000 evacuation shelters were established for displaced persons. Many public health teams have been deployed to evacuation centers or public health centers in the affected areas. They have been cooperating with medical teams or mental health care teams to provide necessary health services for evacuees.

Lots of roads and railroads were damaged and relief efforts were hampered by a shortage of petrol for delivering vehicles. Supply of oil, water, food and medications have been running low. Tsunami seemed to claim lives of most victims. While the number of severe trauma patients was relatively small, several cases of hypothermia and aspiration pneumonia were observed in the acute phase. Many elderly persons lost daily medications for chronic diseases.

For controlling communicable disease in evacuation centers, public health teams distributed alcohol disinfectants and face masks. Through surveillance systems, several outbreaks of influenza and gastrointestinal infection have been reported. Cases of tetanus and Legionella were also reported.

In the Fukushima Daiichi power plants, the cooling system of nuclear reactors did not function properly: water levels of reactors dropped. Radiation leaks to air and sea water were detected and the melting of a portion of the reactor core is suspected. Radioactivity in the environment has been monitored. Residents were advised to evacuate from within 30 km radius from the plant.

Public health authorities have been monitoring radionuclide levels of Iodine and Cesium in foods and tap waters. Consumption of food including milk, vegetables, fish, and drinking water that exceeded the levels of regulation values was restricted under the Food Sanitation Act. Officers of local public health centers are engaged in checking the radioactivity for evacuees, and consultations for inhabitants on questions and unease regarding radiation.

JPHA established a website and a mailing list for local public health centers where members can obtain and exchange public health information about the disaster. They are useful for members of local health centers and deployed public health teams.

We very much appreciated that the global community is continuously supporting and providing aid for Japan. We could exchange more information in the future.

With best regards,

Tsuyoshi Ogata, Director, Chikusei Public Health Center, Ibaraki Prefecture

TWO DECADES OF PARTNERSHIP OF THE BALTIC COUNTRIES IN PUBLIC HEALTH TRAINING AND RESEARCH

Baltic countries, Estonia, Latvia, and Lithuania have rich history of collaboration for public health development. In the Soviet health care system (Baltic countries became independent in 1990/91), public health had rather weak position and scarce training, mainly oriented towards sanitary and hygiene. Transitional period from planned economy to market economy has resulted in the sharp deterioration of population health in countries of Eastern and Central Europe including Baltics. The former public health education system was not adequate to the new circumstances.

BRIMHEALTH as a major networking initiative. International European public health community and especially the Nordic Countries, have expressed concern on the new challenges and have offered the assistance program for the new liberated Baltic countries and partially for Poland and Russia. A project called BRIMHEALTH (Baltic Rim Partnership for Public Health) was launched in 1993. The project was financed by the Nordic Council of Ministers in 1993-2003 and by the Open Society Institute during last three years. The project was based on a "Memorandum of understanding" between Baltic ministries, other partner institutions and the Nordic School of Public Health as well as WHO/Euro. The main goal of this project was to foster the proper development of public health functions, through education, research and consulting activities and by supporting the national public health strategies through a Master's/Diploma program and later joint research and doctoral training programs. The project was aiming at development of the critical mass of public health leaders, public health professionals, and support of the Schools of Public Health in the Baltic region. The philosophy of the "institution building" and the training of trainers were crucial elements of the BRIMHEALTH strategy. This project has been very successful: many public health professionals gained excellent knowledge and skills in the new public health; the public health leaders, which were trained in the framework of that project, continued their leadership activities at the international, ministerial or institutional level (e.g. program graduate Ivars Eglitis was acting as the Minister of Health in Latvia during 2007-2009, dr. Jolanta Dickute from Lithuania was elected as a member of European Parliament in 2006-2009, professors Ramune Kalediene, Anita Villerusa, Raul Kiivet continue as the Deans of Schools of Public Health).

Baltic research conferences and collaboration projects. Baltic collaboration in public health area has transformed into further initiatives and projects after BRIMHEALTH project was finished. The tradition of the Baltic research conferences has started with the support of BRIMHEALTH network and the organizational, financial assistance from the Nordic School of Public Health.

The First Conference on Public Health Research in the Baltic Countries was carried out in Tartu, Estonia on 17-20 September, 1998. More than 100 researchers and public health professionals from Denmark, Estonia, Finland, Latvia, Lithuania, Poland and Sweden took part in this event. The main topics of the conference were health promotion and behaviour, environmental and occupational health, health economics and health care management.

The Second Conference on Public Health Research in the Baltic Countries was conducted in Kaunas, Lithuania on June 15-18, 2000. It was organized by the Faculty of Public Health of Kaunas University of Medicine, with the assistance of BRIMHEALTH project. This conference was attended by more than 120 participants and covered the major public health research topics.

In the middle of the first decade of the recent century, the tradition of common Baltic research conferences was replaced by the smaller workshops and research projects. One of these activities - BALTIC HEALTHTRAIN (Baltic Sea Public Health Training Network, 2004 – 2007) was financed by European Commission in the framework of Public Health Program. This project was based on the network of Public Health Schools in Estonia, Latvia, Lithuania, Poland, Germany, Finland, Sweden, Denmark, and Norway, and was aiming to improve the society's capacity to prevent and control serious health threats, with particular emphasis on communicable diseases like HIV/AIDS and tuberculosis. At the same time, this project had the purpose to initiate and develop continuous education in the field of public health by promoting cooperation between educational institutions, focusing on the training needs of mid-career professionals with the emphasis on HIV/AIDS.

Baltic countries have continued their tradition of collaboration in two major health behaviour research projects for almost 20 years. The first was FinBalt Health Monitor collaboration project, which was initiated by Finland and three Baltic countries and has started in 1992. Close collaboration is continued among researchers of Estonia, Latvia and Lithuania in WHO coordinated project Health Behaviour Study in School Aged Children, since 1994.

Department of Public Health of Tartu University made the initiative to revive the idea of Baltic Research conferences in 2010, and the **third Baltic Public Health Conference** was conducted in Tartu, Estonia on September 23-25, 2010. This event assured that the traditions of Baltic Research conferences will be continued, since common public health challenges require further networking and partnership among the countries around the Baltic Sea. Baltic collaboration should further aim at coordinated strategies in public health training and research, as well as development of evidence-based health policies and public health practice.

Ramune Kalediene, Linas Sumskas,

Faculty of Public Health, Lithuanian University of Health Sciences, Kaunas, Lithuania

Last Issue of the Federation's Pages of the JPHP

« Public health: How much evidence is needed to support our policies?»

Samia A. Hurst, Bettina Borisch, Alex Mauron



http://www.palgrave-journals.com/jphp/archive/categ_fp_012010.html

The WFPHA and its members got involved

New website and newsletter PHASA



The Public Health Association of South Africa has recently launched its new website (www.phasa.org.za) and send out the first issue of the new online newsletter highlighting the 2010 conference. It is the aim of the newsletter to provide subscribers every quarter with interesting articles and news on public health in (South) Africa, including news of PHASA itself. Furthermore, the website will continuously be updated. Information on PHASA itself can also be found there: the mission, executive committee, special interest groups, the conference, and membership.

Please contact us (<http://www.phasa.org.za/contact-us>) if you have any questions about the association, would like to be involved in our activities, or write a contribution for the newsletter. And you can follow

us on Twitter (PublicHealthSA) and Facebook (PHASA) as well.

CALLS TO ACTION

WHO Kobe Centre's Call to Action on Urban Health and Health Equity

Dear colleagues,

With the last Newsletter you have received extensive information about the Call to Action on Urbanisation and Health from the WHO Kobe Centre (WKC), Japan. In the meantime I agreed with the Director Dr. Jacob Kumaresan to arrange for short courses on the Urban Health Equity Assessment and Response Tool "Urban Heart" at our next conferences in Bali, Indonesia (November 17-19, 2011) and Addis Ababa, Ethiopia (April 21-29, 2012).

Even more important is the interest of the WHO Kobe Centre in ongoing projects to improve proposals from PHAs on urban health and health equity, implemented by you or your partners. Therefore I want to encourage you to send me descriptions/reports of any such projects in your environment. I shall communicate this information to Dr. Kumaresan and discuss with him possibilities of supporting your activities. Especially welcome are proposals coming from resource poor countries in Africa, Southeast Asia and Latin-America.

Yours,
Ulrich Laaser

The «**Kobe Call to Action**» is a statement by and for national and local leaders to address health and health equity in cities. This policy commitment originated in the discussions and conclusions of the Global Forum on Urbanization and Health, 15-17 November 2010, Kobe, Japan, where Ministers, Governors and Mayors from over 80 countries shared their experiences and recommendations to better the urban environment.

Kobe call to Action http://www.who.or.jp/index_files/Kobe%20Call%20to%20Action%20FINAL_4p.pdf



GAPA Action Alert:

In May 2010 the UN General Assembly (GA) passed Resolution 64/265 which called for the convening of a high-level meeting of the GA in September 2011 in New York on the prevention and control of non-communicable diseases. This resolution reflects the growing recognition of NCDs as a major threat to development in developing countries. It is essential that the Outcomes Statement of the UN High Level Meeting should be a declaration with clear, binding commitments, measurable targets and long-term agreements and programmes. Alcohol has been recognised as one of four major common risk factors for NCDs. GAPA urges that this reality be factored into the Outcomes Statement. The preparation for the UN meeting is under way in many countries and regions and one major international event in the lead up to the UN High Level Meeting is the "First global ministerial conference on healthy lifestyles and noncommunicable disease control" to be held 28-29 April in Moscow.

Please find below a link to a GAPA brief, "Addressing harmful use of alcohol is essential to realising the goals of the UN Resolution on non-communicable diseases (NCDs)." We ask you to send this brief to your Health Minister or Health Ministry, with a cover note where you summarize the main point. You may want to write/translate the cover note into your vernacular. We also ask you to forward this action alert in your network, or inform us who else we should contact.

http://www.ias.org.uk/resources/publications/theglobe/globe201101/gl201101_p11.html

Find more information about the UN High Level Meeting here:

http://www.who.int/nmh/events/2011/ncd_summit/en/index.html (WHO) and about NGO response here:

<http://www.ncdalliance.org/> (NCD Alliance). If you want to be put on a mailing list to be updated on this issue, please contact GAPA-secretary, Øystein Bakke (oystein.bakke@forut.no).

Chronic Disease Action Network

Global action against the injustice of chronic diseases.

<http://www.ncdaction.org/>

Share your initiatives in support of the United Nations Conference on Sustainable Development, Rio+20 - 29 Mar 2011

If your initiative does not fit neatly in the major groups categories (it's multistakeholder or a different type of groups), sign in to the Rio+20 Conference website and share your initiatives in support of the Conference to be held 4-6 June, 2012 in Rio de Janeiro, Brazil.

To request for a username/password to the Conference website, please send a message to the Rio+20 Secretariat from the following page on CSO Net - the Civil Society Network:

<http://esango.un.org/irene/?page=viewProfile&type=un&nr=11§ion=9>

More information: <http://www.uncsd2012.org/rio20/index.php?page=view&type=12&nr=198&menu=54>

The Joint WHO/ILO/UNAIDS Policy guidelines for improving health workers' access to HIV/TB prevention, treatment, care and support services have recently been published. Implementing this guidelines would ensure that those providing health services are themselves healthy and consequently contributing to their retention in the context of global human resources for health for improved quality services and population health outcomes.

The guidelines can be adapted to workers in other sectors.

More information can be found on this link:

http://www.who.int/occupational_health/publications/hiv_tb_guidelines/en/index.html

On this link, you will find the Guidance note summarizing the guidelines (in English, French and Spanish), the full guidelines (in English), Frequently asked questions, a video from the launch of the guidelines, the systematic review of the evidence, and meeting report.

UPCOMING EVENTS



World Malaria Day April 25th 2011

The 25th of April is a day to commemorate global efforts to control malaria. This year we're taking stock of our progress towards zero malaria deaths by 2015. 2011 is an opportunity to focus on the remaining challenges to MDG targets on universal coverage, as called for by the UN Secretary-General, Ban Ki-moon.

World Malaria Day represents a chance for all of us to make a difference. Everyone in the malaria community – donors, implementers, the private sector and civil society – can help reduce the burden of this preventable and treatable disease.

This website is a platform for engaged activists in the north and south to share resources, and to contribute news, views and events of interest around World Malaria Day.

Help mark World Malaria Day by highlighting your own work and count the strides we collectively make towards eventually counting malaria out.

http://www.worldmaliaday.org/home_en.cfm



The global celebration of **World Blood Donor Day (WBDD)** will be held on 14 June 2011.

For more details visit, <http://www.who.int/worldblooddonorday>

The theme for World Blood Donor Day 2011 is, "**More blood. More life.**" This theme reinforces the urgent need for more people all over the world to become life-savers by volunteering to donate blood regularly. WHO and partners are encouraging communities in every country to join the World Blood Donor Day campaign and "**Paint the world red**", whether by symbolically colouring, covering or lighting monuments, popular landmarks and buildings in red; staging artistic, cultural or musical events with a red-coloured theme; or forming a "human blood drop" in prominent public places.



The Global Health Council is the world's largest alliance of organizations working in global health, with almost 500 organizational members and 5,500 individual members in more than 100 countries. We advocate for more resources and better policy for global health programs, both in the U.S. and globally, and represent and support our members to do the same.

The Global Health Council's 38th Annual International Conference on Global Health, "Securing a Healthier Future in a Changing World," will focus on the challenges of, and innovative solutions to address the demographic changes that have shifted the global burden of disease — from acute to chronic diseases, from infectious to non-communicable diseases, like cancer, diabetes, heart disease and acute respiratory disease. The conference, the world's largest global health conference not focused on a single disease or health area, will be held **June 13-17** at the Omni Shoreham Hotel in Washington, D.C.:

http://www.globalhealth.org/conference_2011/

**“HEALTH RESEARCH AND DEVELOPMENT
TO ADDRESS HEALTH INEQUITY”**

**THE 1ST INTERNATIONAL SYMPOSIUM ON HEALTH RESEARCH & DEVELOPMENT
AND THE 3RD WEST PACIFIC REGIONAL CONFERENCE ON PUBLIC HEALTH 2011**

by

National Institute of Health Research and Development (NIHRD)

Ministry of Health, Republic of Indonesia

IN COLLABORATION WITH

West Pacific Regional Liaison Office)

The World Federation of Public Health Associations (WFPHA)

AND

The Indonesian Public Health Association (IAKMI)

17- 19 November 2011

Bali, Indonesia



“Moving Towards Global Health Equity: Opportunities and Threats”

<http://www.etpha.org/2012/>

[Abstract Submission](#)

<http://wfpha.confex.com/wfpha/2012/cfp.cgi>

TO ALL MEMBER PHA'S : IF YOU HAVE INTERESTING INFORMATION TO SHARE WITH OTHER ASSOCIATIONS ; PLEASE SEND AN E-MAIL TO : geneva@wfpha.ch