STATEMENT OF INTENT – COVID 19

The NDMO Directors of the Pacific countries ¹ are aware of the worldwide impact of COVID-19. COVID-19 declared by WHO as a pandemic is considered a biological hazard affecting the social, cultural and economic dynamics in all countries, prompting the activation of emergency operations procedures defined at country and regional level. Global risk assessment on COVID-19 has been declared as very high alert status, it is only appropriate to take definitive steps in mapping out clear strategies for our shared future.

Being mindful of the wide-ranging COVID-19 implications on government machinery, industry, livelihoods, culture, traditions and households, there is urgency to be vigilant about individual safety, well-being and stability of lives of the public at large in our communities.

At the UNDP Disaster Resilience for Pacific SIDS(RESPAC) 5th Project Board meeting held at the Pearl South Pacific Resort, Pacific Harbour, Fiji on the 18th of March 2020, in the margins of our deliberation, we, the NDMO Directors are committed to:

- Activate the national emergency response coordination committees as well as the sector working groups/clusters in order to promote a coherent and effective multisector interventions.
- Working together with the Ministries of Health in assessing the humanitarian needs and collectively prepare a response plan to cope with the potential impact of the COVID-19.
- Support the dissemination of user-friendly messaging to all population tailored to their culture and language.
- Enhance active and permanent channels of communication and information sharing between the national disaster/emergency management offices within the Pacific region for informed decision making.
- Working with the Joint Incidental Management Teams (IMT) for COVID-19 established by the Pacific Humanitarian Team (PHT) for information exchange, deployment of Emergency Medical Teams (EMT) and promote resource sharing particularly COVID-19 testing of suspected case and supply of personal protective equipment (PPE) when there is availability.
- Working with the Private Sector through the Chamber of Commerce to avoid business disruption, continuity of supply-chain logistics and early mitigating interventions for key sectors driving economic activity across the region.
- Place emphasis on BOE Declaration Strategic Focus Area 2: Human Security and Humanitarian Assistance given the heightened vulnerability of our region to the impacts of increasing frequency and intensity of weather-related hazards and the need to improve coordination and effectiveness of humanitarian assistance/disaster response.

¹ fourteen countries and one self-governing territory: Cook Islands, Federated States of Micronesia (FSM), Fiji, Kiribati, Nauru, Niue, Palau, Papua New Guinea (PNG), Republic of the Marshall Islands (RMI), Samoa, Solomon Islands, Tokelau (territory), Tonga, Tuvalu and Vanuatu
- Reiterating the WHO Director-General's opening remarks at the media briefing on COVID-19 on the 16th March 2020, "We have a simple message for all countries: test, test, test. Test every suspected case”.

We are confident that by working together, we would be able to restrain the spread of the COVID-19 in the region. This statement of intent was adopted in the spirit of regionalism being cognisant of the seven recommendations of the ‘Bangkok Principles for the International Conference on the Implementation of the Health Aspects of the Sendai Framework for Disaster Risk Reduction 2015-2030(see Annex 1).
Annex 1

The seven recommendations of the ‘Bangkok Principles for the International Conference on the Implementation of the Health Aspects of the Sendai Framework for Disaster Risk Reduction 2015-2030’ are as follows:

1. Promote systematic integration of health into national and sub-national disaster risk reduction policies and plans and the inclusion of emergency and disaster risk management programmes in national and sub-national health strategies.

2. Enhance cooperation between health authorities and other relevant stakeholders to strengthen country capacity for disaster risk management for health, the implementation of the International Health Regulations (2005) and building of resilient health systems.

3. Stimulate people-centred public and private investment in emergency and disaster risk reduction, including in health facilities and infrastructure.

4. Integrate disaster risk reduction into health education and training and strengthen capacity building of health workers in disaster risk reduction.

5. Incorporate disaster-related mortality, morbidity and disability data into multi-hazards early warning system, health core indicators and national risk assessments

6. Advocate for, and support cross-sectoral, transboundary collaboration including information sharing, and science and technology for all hazards, including biological hazards.

7. Promote coherence and further development of local and national policies and strategies, legal frameworks, regulations, and institutional arrangements.

https://www.preventionweb.net/files/47606_bangkokprinciplesonhealthriskagreed.pdf