Public Health and Humanitarian Systems Training

Neil Boothby, Allan Rosenfield Professor and Director Program on Forced Migration and Health

October 20, 2015
Professionalizing Humanitarian Assistance

- Historically: Rapid response—staff turnover—absence of learning—institutional memory
- 1994 Rwanda Genocide Tipping Point
- 1997: Spheres Standards (set of minimum standards in core areas of humanitarian assistance)
- 1977: ALNPA (Agency Learning Network) established
- 1998: Mellon Foundation, Bilaterals and others: funds to engage the academy – Including the PFMH
Support for Creating An International Humanitarian Aid Profession Among Survey Aid Worker Respondents, 2008

• Do you think that humanitarian work should be professionalized?
  – Yes 91.9
  – No 8.1

• Which of the following categories would you like to see it being possible to obtain an internationally recognized competency certificate in?
  • Master’s degree 51.2
  • Mid-career level 27.3
  • Entry level 21.5
Key Humanitarian Values, Skills, And Knowledge Areas Listed By Survey Respondents, 2008

- **Top 3 humanitarian values**
  1. Respect for victim and community
  2. Independence from political, financial, religious, and other pressures
  3. Accountability to beneficiaries
- **Top 3 skills**
  1. Multitasking
  2. Negotiation and mediation
  3. Team building
- **Top 3 knowledge areas**
  1. Needs assessment
  2. Security and safety issues
  3. International humanitarian law
Program on Forced Migration and Health Graduate Training Programs

- Senior Leadership
- Skilled Responders
- Coordination and Technical Assistance
- Long Term Engagement
FACULTY LEADERSHIP

Neil Boothby, UNHCR Senior Coordinator for Refugee Children; USG Special Adviser on Children in Adversity

Les Roberts, Senior Adviser, WHO, West Africa Ebola Crisis

Richard Garfield: Senior Advisor, CDC-WHO, MENA Region

Lindsay Stark, Director CPC Network

TECHNICAL ASSISTANCE COORDINATION

Rachel Moresky: Global Health Cluster

Michael Wessells: SPHERE Standards and IASC Guidelines, Mental Health

Jamie Eliadas, Senior Adviser, Pathfinder-PMI (Malaria)

MPH STUDENTS AND ALUMNI: AGENCIES

• UNICEF
• WHO
• OCHA
• USAID
• Save the Children
• International Medical Core
• International Rescue Committee
• Red Cross /Federation and Committee
• Care International

LONG TERM ENGAGEMENT

• MOUs with UNICEF, UNHCR, CDC, WHO and US Government
• Co-Developed Research Centers and Training Programs in Indonesia, Cambodia, Uganda, Liberia, Jordan and OPT
• Recovery and Systems Development
Public Health and Humanitarian Response

MISSION: We seek to professionalize the field of public health and humanitarian response and place it on a strong evidence-based foundation.

Why a school: We combine academic excellence, innovative research and public policy development with substantial experience in humanitarian assistance.

We have a long-term commitment to promoting humanitarian assistance and health systems science in emergency, recovery and development phases of crises.
We Pursue our Objectives in Four Interrelated Ways:

- Specialized curriculum in humanitarian issues, grounded in field realities and cutting edge research, to equip our students who will become tomorrow's leaders in humanitarian response and health systems development action.
  - MPH: Public Health and Humanitarian Response
  - Dual MPH/MS Degree: Public Health and International Relations (SIPA)
  - DRPH: Global Health and Humanitarian Systems

- Interdisciplinary technical competencies and expertise in partnership with organizations engaged with vulnerable communities affected by crises.

- Research and evaluation

- Synergy between practice and academia to ensure impact of the former and sharpen the latter.
Co-Creation of Academic and Training Programs in Africa, Asia and the Middle East

• Center on Child Protection: University of Indonesia (Jakarta)

• Center for the Study of the African Child: Makerere University (Kampala, Uganda)

• UNICEF Regional Training/Capacity Development Program: CUMERC ((Amman, Jordan))
Health Protection Continuum

VULNERABLE STATE:
• Vulnerability & affliction do not occur randomly
• Risk reduction
• Systems strengthening

HUMANITARIAN EMERGENCY:
• Ecological thinking & causal mapping
• Duality of response to vulnerability and systems building

RECOVERY AND DEVELOPMENT:
• Plausible futures & democratic public work
• Governance models
• Civil society role in health systems
• Sustainable livelihoods
Thought Leaders - Systems Science

Mailman School of Public Health:

Confronting Health Problems in a holistic manner

- Surveillance
- Communicable Disease
- Nutrition
- Water and Sanitation
- Child, Maternal and Family Health
- Vulnerable populations
- Protection
- Social Resilience
- Mental Health
- Environmental Science
- Health Policy
- Systems & Management
- Others
Disaster
The lifecycle of disaster prevention, response and recovery

Failed State:
Humanitarian Crisis

Functional State:

Disaster