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| Humanitarian Emergencies TAG Meeting  ICP 2013  Melbourne, Australia  August 25, 2013 |

Meeting Summary

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| An introduction by TAG Chair Karen Olness provided the backdrop for current activities of the TAG and past accomplishments. Those present in the room introduced themselves. Those attending included:   |  |  |  | | --- | --- | --- | | **Name** | **Country** | **Email** | | Nicki Murdock | Australia | [nickim6@gmail.com](mailto:nickim6@gmail.com) | | Helen Mead | Australia | [helen.med@health.wa.gov.au](mailto:helen.med@health.wa.gov.au) | | UfuomaOvwigho | Nigeria | [Ufuoma.ovwigho@shell.com](mailto:Ufuoma.ovwigho@shell.com) | | Myrto Schaefer | Australia | [myrto.schaefer@sydney.msf.org](mailto:myrto.schaefer@sydney.msf.org) | | Alexandra Brown | Australia | [alexandra.brown@sydney.msf.org](mailto:alexandra.brown@sydney.msf.org) | | Christian Harkensee | Singapore | [C.Harkensee@gmx.net](mailto:C.Harkensee@gmx.net) | | Daniel Martinez Garcia | Mexico/Australia | [daniel.martinez@sydney.msf.org](mailto:daniel.martinez@sydney.msf.org) | | Mao Meng | China | [dffmmao@126.com](mailto:dffmmao@126.com) | | SriviengPairojkul | Thailand | [srivieng@kku.ac.th](mailto:srivieng@kku.ac.th) | | Marisa Herran | USA | [mherran2000@yahoo.com](mailto:mherran2000@yahoo.com) | | Ejaz Ahmed | Pakistan | [dr.ejaz999@gmail.com](mailto:dr.ejaz999@gmail.com) | | Saleh Alsalehi | Saudi Arabia | [sssnm3@hotmail.com](mailto:sssnm3@hotmail.com) | | Marie-Claude Bottimeau | Switzerland | [marie-claude.bottimeau@genera.msf.org](mailto:marie-claude.bottimeau@genera.msf.org) | | Joshua A. Owa | Nigeria | [jaowa2001@yahoo.co.uk](mailto:jaowa2001@yahoo.co.uk) |   In the past three years, the TAG has organized four workshops including one at ICP2013. The TAG also has a long list of teaching modules which can be shared and implemented globally. Participants emphasized that the special needs of children in disasters are still not sufficiently recognized. They provided several examples related to their observations in Pakistan and in Nigeria during disasters. Dr. Herran also summarized the current plans for professionalization of relief workers. This is led by a group in England and by a university consortium in the US. |

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| **Discussion after the introduction, participants identified the following needs of the TAG:**   * More support from IPA (e.g. administrative and financial) * A list serve to share information around to TAG members. * More resources from IPA to lead workshops and trainings on a regular basis. * Need to promote education about children in disasters to all organizations involved in disaster management. * Standby teams of child health professionals with expertise in how to help children in disasters.   **Ideas for future activities of the TAG were discussed keeping in mind the needs identified above:**   1. Identify a strategic plan for the TAG, including having two annual workshops with a stable and reliable budget source. Note: TAG has requests to do workshops in the Philippines and Iran in 2014. Colleagues in both countries are in the process of identifying funding to support them. 2. Request that IPA provide support for one workshop each year. 3. Engage more with in-country support for workshops (e.g. MOH, WHO or other in-country organizations). Although we believe that training on the special needs of children in disasters is needed in every country, we should first focus on resource poor areas and/or high population areas that are at greatest risk for disasters. 4. Professional training of relief workers (publication provided). The publication did not mention children specifically – IPA is the only group that focuses on children specifically. This is a significant problem and points out again that pediatricians need to advocate locally and globally for more focus and attention to children and their families. 5. It was suggested that the TAG should identify a new name for the training program and a relaunch of the program may garner more global interest. Possibility: CHERISH – Children Humanitarian Emergencies Rescue Improve Support Health Note: Dr. AlSalehi suggested we should reconsider this and discuss it as a group when we have a list serve. 6. Request permission from the IPA to engage in social media (Facebook and twitter) and create a list serve. Note: Participants in this meeting volunteered to organize these communication activities. 7. Develop a system for identifying and maintaining an expert pool of child health professionals to assist in disasters. Note: Dr. Mao Meng agreed to investigate this possibility. 8. IPA to sponsor a one day workshop during the Vancouver Congress in 2015. 9. Dr. Ejaz agreed to write a chapter on preventing disasters with a focus on preventing short and long term harm to children. |