

COVID-19: The time is now to prepare for people affected by humanitarian crises

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With over 300,000 COVID-19 cases across the globe, including recent cases in Syria and the Gaza Strip, the data continues to demonstrate how the disease has no borders. A new Dartmouth-led commentary in the



International Journal for Equity in Health highlights how people affected by humanitarian crises are especially vulnerable to COVID-19.

According to United Nations estimates, in 2020, "over 168 million worldwide will need humanitarian assistance and protection." Many people experiencing humanitarian crises, often due to conflicts or natural disasters, lack access to basic needs, including food, shelter and healthcare. As the co-authors point out in their commentary, these communities do not have "the infrastructure, support and health systems" to institute a comprehensive, public health response. These are places, which may have very little, if any health infrastructure— communities, which may not have any trained medical personnel or personal protective equipment.

"The World Health Organization's basic protective measures against COVID-19, include washing your hands frequently; yet, access to soap and <u>clean water</u> is not typically an option for people living in <u>humanitarian crises</u>," explains lead author Danielle M. Poole, a Neukom fellow in the department of geography at Dartmouth. "These are populations that do not have adequate water, sanitation and hygiene (WASH) tools."

Past research however, has demonstrated how making soap available to households in humanitarian settings can increase handwashing by 30 percent.

"Regarding COVID-19, maintaining social distancing or one meter (three feet) from someone coughing or sneezing, may also prove challenging for crises-affected populations, who typically live in overcrowded conditions," added Poole. "With overcrowded living conditions, separating the exposed from the healthy and creating spaces for quarantine, will also be especially difficult without critical humanitarian assistance."



To prepare for COVID-19 in humanitarian crisis areas, the co-authors call on national governments and <u>international organizations</u> to develop mitigation strategies and draw on best global practices from evidence-based approaches to fighting respiratory viruses.

Danielle Poole is available for comment at: dani.poole@dartmouth.edu. She has observed the complexities of addressing public health in a humanitarian crisis, as she spent time the past four years leading research to improve health among displaced populations in refugee camp and urban settings in Greece, Kenya, Italy, and Turkey.

More information: Danielle N. Poole et al, Responding to the COVID-19 pandemic in complex humanitarian crises, *International Journal for Equity in Health* (2020). DOI: 10.1186/s12939-020-01162-y

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