

A Low cost, Anticipatory and Sciences-Based Approach to Reduce Heat Health Impacts on Outdoor Workers in Vietnam

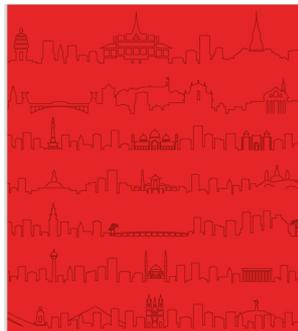


Red Cross Red Crescent Perspective on Heatwaves



Francesco Rocca – IFRC President defines heatwave as a “silent emergency”,

“that is unacceptable about this silent emergency is that simple, low-cost actions can save lives during episodes of extreme heat”



[Heatwave guide for Red Cross and Red Crescent Branches](#)

CITY HEATWAVE GUIDE FOR
RED CROSS RED CRESCENT BRANCHES

Vietnam Case study – A low cost, anticipatory and sciences-based approach

OUTLINES

Rational

Our Standing point & Approach

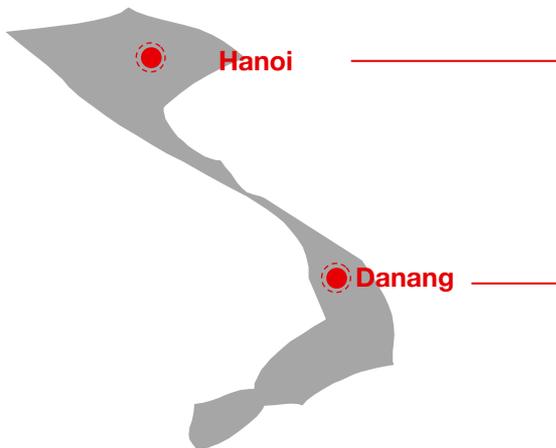
Tests

Results

Learnings

Conclusion and Reflection

Rational – Literature Review & Stakeholder Analysis



IMPACTS & AWARENESS:

- Heatwave events are associated with 20% increase in hospitalization for all causes and 45.9% for respiratory diseases

- Less than 1% of outdoor workers have sufficient knowledge on heat stress

POLICY & GAPS:

- Vietnam Disaster Management Authorities list *heat wave as a disaster*
- Vietnamese Ministry of Health regulations to protect workers from extreme heat: *rarely enforced in the informal economy*
- Key stakeholders: interest in working on the issue of heat and health but *no major program*

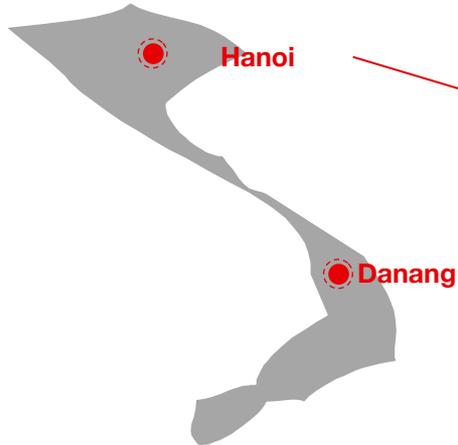
Rational – Knowledge Attitude and Practice Surveys

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Rational – Knowledge Attitude and Practice Surveys

RESULTS: outdoor workers are very exposed to heatwave risks (long working hours, no access to air conditioning during day and night, inappropriate insulation of their housing)

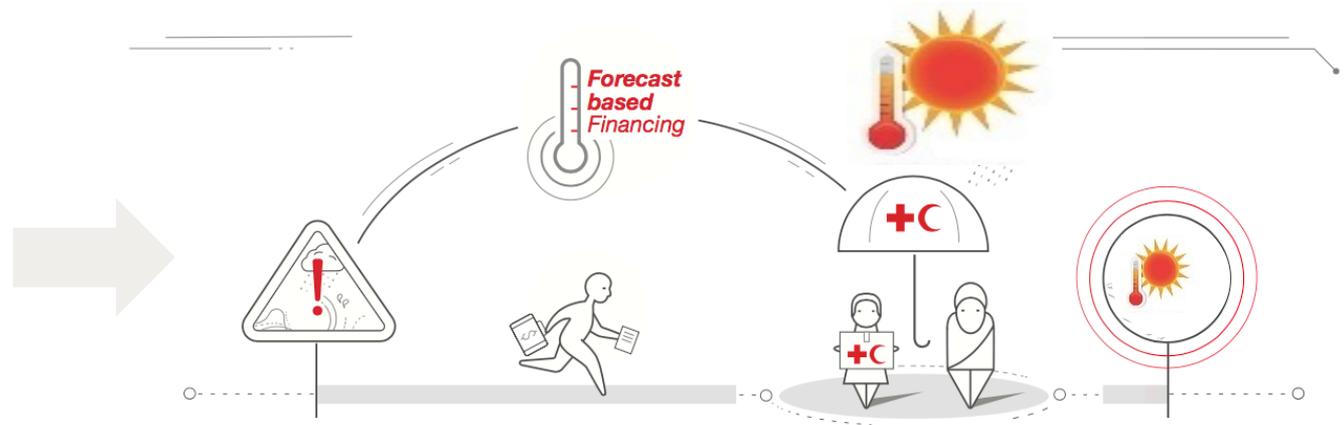


- 66% of the target population experienced from 4 to 7 symptoms of heat exhaustion during a heatwave
- Average number of symptoms = 5.3
- 21.5% of the target population go to doctor during heatwave and their healthcare expenses amount to 2 days of their daily income

Our Approach:

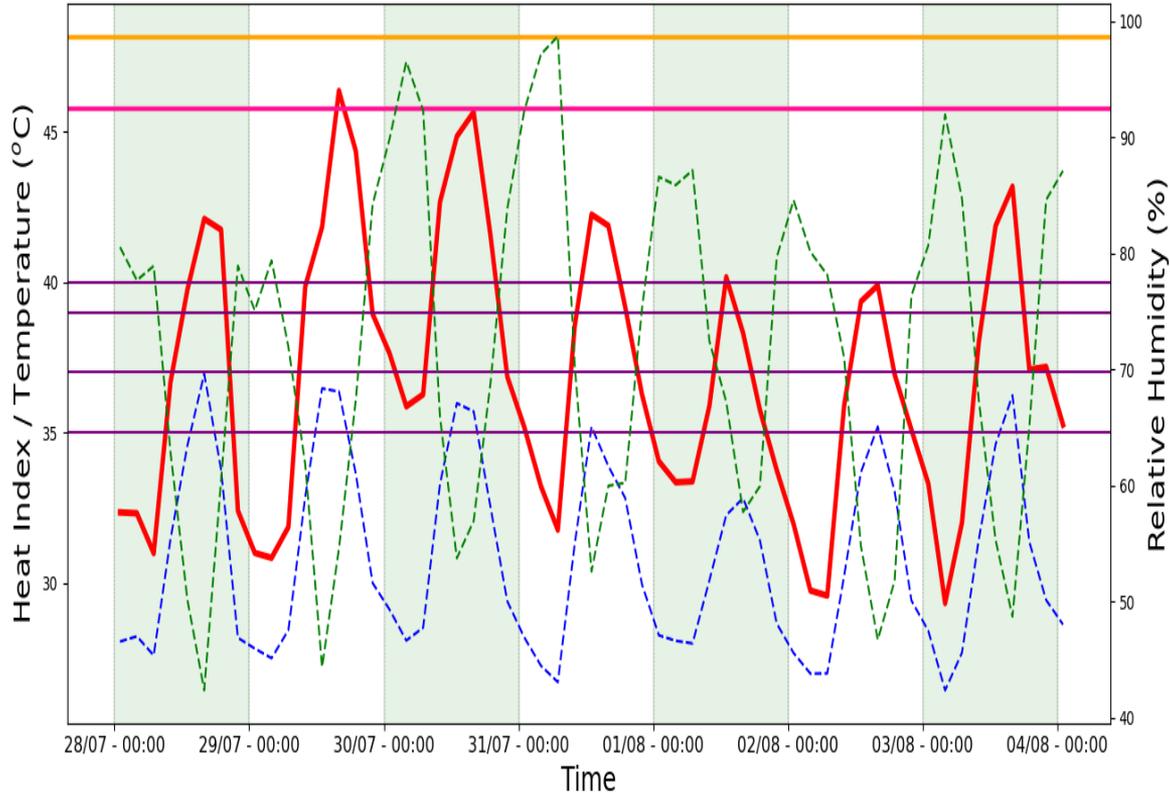
Our Standing Point:

- Efficient, low cost and rapid actions
- Anticipation rather than post disaster response



[Forecast-Based-Financing \(FBF\) approach](#) automatically releases funding when an extreme heat wave is forecasted allowing the activation of Early Actions (EA).

Heat Index (in Celcius degree - red line)



TRIGGER 1 is reached (6 days lead-time) = the red line reaches the orange line for at least 2 consecutive days



EARLY WARNING:
Warning email automatically sent to VNRC Focal person



TRIGGER 2 is reached (3 days lead-time) = the red line still reaches the orange line for at least 2 consecutive days



TRIGGER TO ACT:
Warning email automatically sent to VNRC Focal person
Funds released
Early Actions Implementation

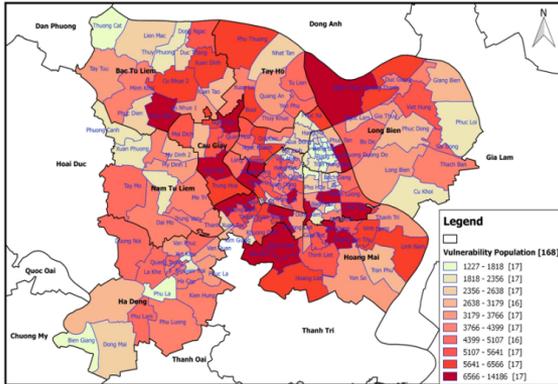
Targeting Beneficiaries – Impact Forecast Mapping

Vulnerability

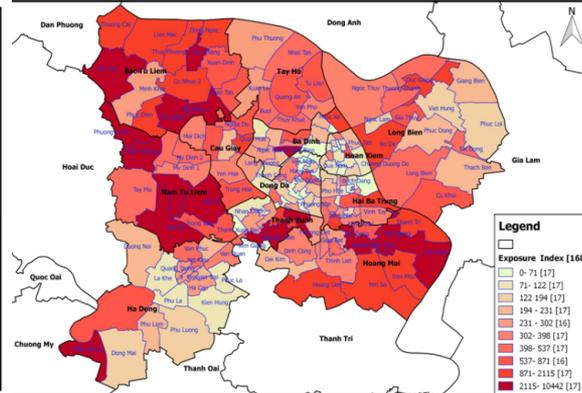
Exposure

Hazard

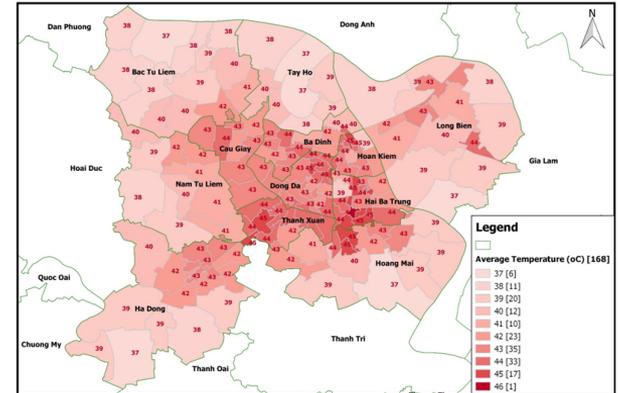
VULNERABILITY CLASSIFICATION BY WARD IN HANOI



EXPOSURE CLASSIFICATION BY POPULATION IN HANOI

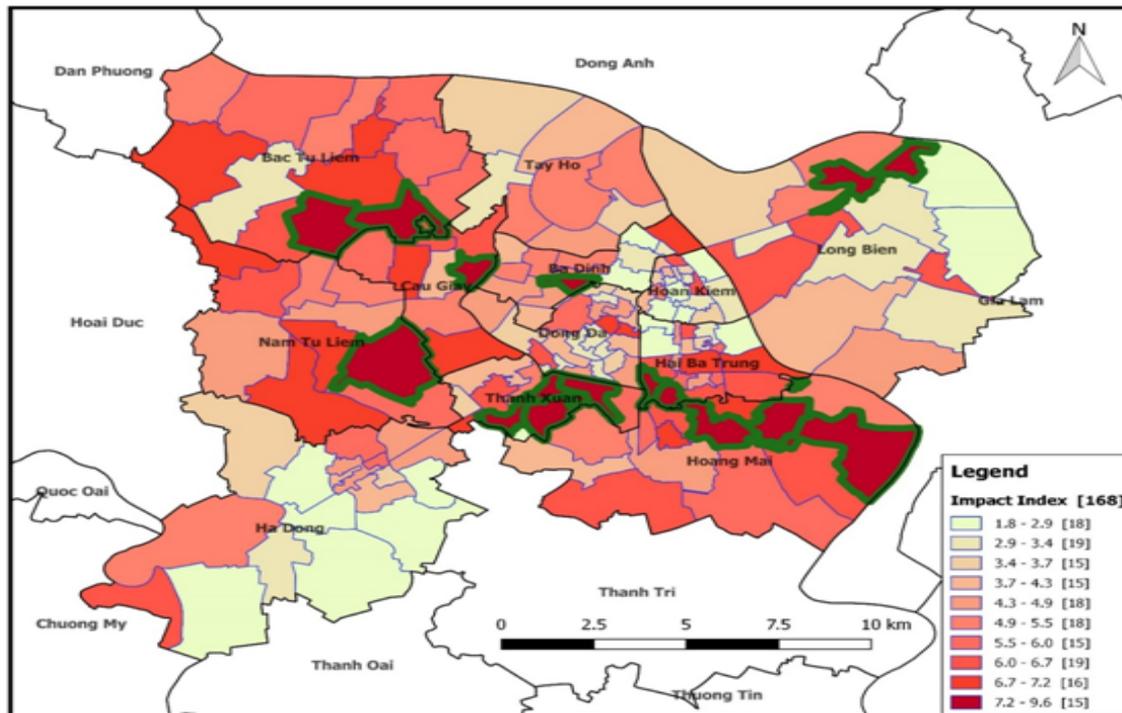


HANOI AVERAGE TEMPERATURE BY COMMUNE (degree Celcius)



Targeting Beneficiaries – Impact Forecast Mapping

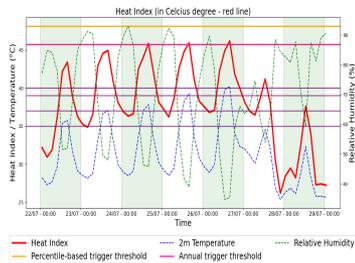
HEATWAVE IMPACT INDEX FOR WEIGHT OPTION 2



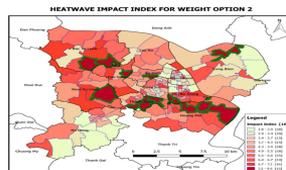
Hanoi's intervention map

In green the 10% most at risk wards (compilation of Exposure, Vulnerability and hazard layers)

Early Actions Selection



Identification of trigger with 6 and 3 days lead-time



Impacts Forecast Mapping



Impacts assessment
(KAP Survey) :
Health Impacts

Theory of Change

PROBLEM:

The slum dwellers and outdoor workers never have a chance to find relief from heat during day and night, due to their livelihood (in the streets) and the place they live in (slum)

SOLUTION:

WELL - ADAPTED EARLY ACTIONS

- **EA 1:** Operating community cooling centres during day
- **EA 2:** Retrofitting of habitations in slums

Early Actions Tests

RETROFITTING:

- Not feasible to retrofit habitations in informal settlements within a 6 days lead time
- Main challenge = access to slum and authorization for building temporary roof
- Socially accepted by the inhabitants but not by the authorities & owners

COOLING CENTRES:

- Two tests: 18th to the 21st of July and 11th to the 14th of August 2019, Hanoi
- Heat Indexes peaking at 47.5 °C and 48°C = 95th percentile reached
- 4 centres and 3 buses
- The tests looked at the Feasibility, Relevance, Effectiveness, Social acceptability and Value for money/efficiency



Short movie on Early Action Test

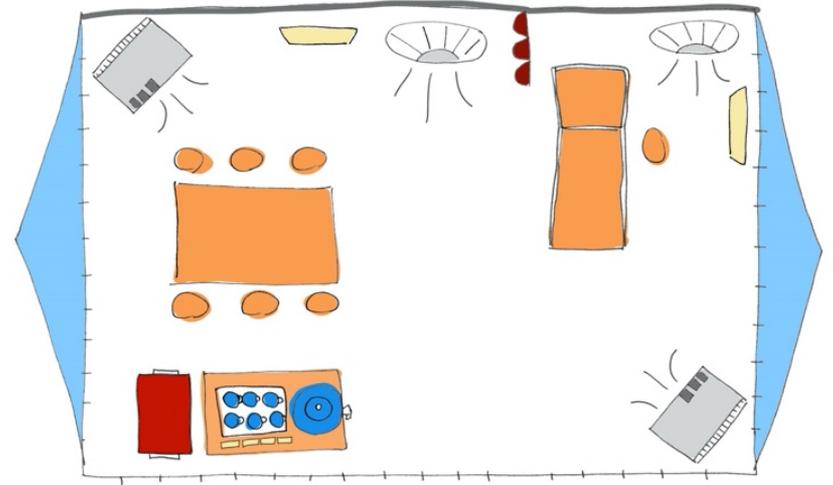


Early Actions Tests - Results

COOLING CENTRES:

- *Feasibility*: 100% of activities implemented within timeframe.
- *Relevance*: 80% of the visitors were outdoor workers experiencing symptoms of heat exhaustion.
- *Effectiveness*:
 - Outcome 1: Outdoor workers had good rest against a long day of exposure to heat:
 - ✓ 10°C cooler in centres than the outside
 - ✓ 1787 visits: between 70.5% and 95% of visitors feel better after their visit
 - Outcome 2: Outdoor workers understand the importance of resting during the heatwave event:
 - ✓ 73% visited the centres for the right purpose
 - ✓ 67% stayed at least 10 minutes
 - ✓ More than 40% of the beneficiaries returned to the centres
- *Social acceptability*:
 - ✓ Media coverage & Broad social acceptability
 - ✓ Well accepted by the authorities
- *Value for money/efficiency*: The cost per visit was small (around 7 euro per visit).

Learnings



OUTSIDE
Temperature



INSIDE
Temperature

1

Invite the beneficiary to seat



2

Invite the beneficiary to open/ loosen clothes, fold up the sleeves, remove hat



3

Offer water, tea
Give cold towel to the beneficiary, demonstrate how to use the towel (face, neck, armpit...)



7

Guide the beneficiary to the volunteer surveyor: sign the beneficiary list, complete the questionnaire, invite to follow Facebook page



German
Red
Cross

Standing
Operating
Procedure for
Cooling Centres

6

Give the water container (filled with cool water) to the beneficiary



5

Distribute the IEC fan, explain the symptoms of heat-related illness, how to deal with and prevent them



4

Assess the beneficiary Health status using assessment card



Symptoms:



Feeling dizzy or giddy
Feeling faint, 'seeing stars'
Feeling weak
Cramps in lower limbs
Numbness

Beneficiary

Has symptom(s)?

Has emergency sign(s)?

No

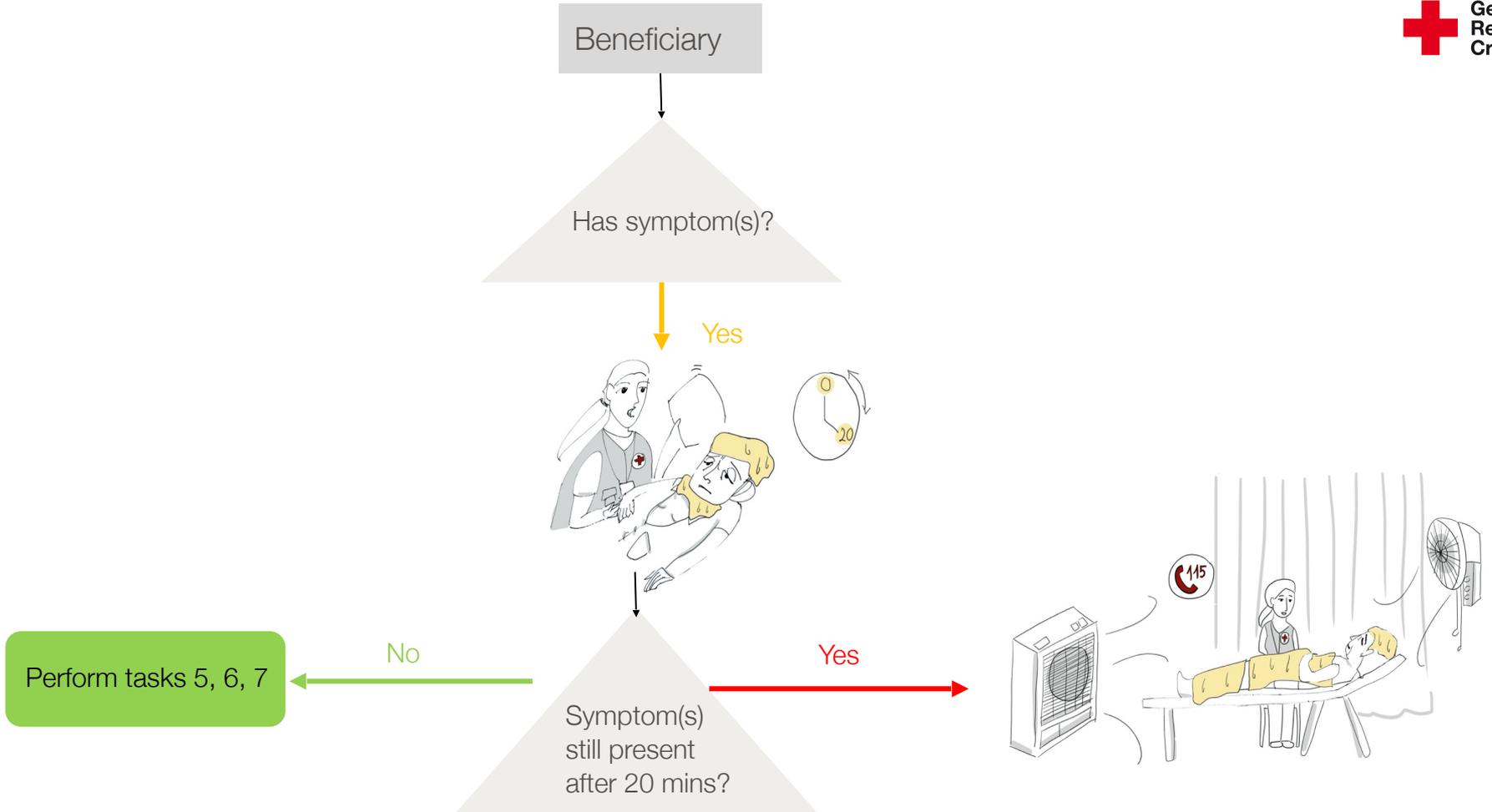
No

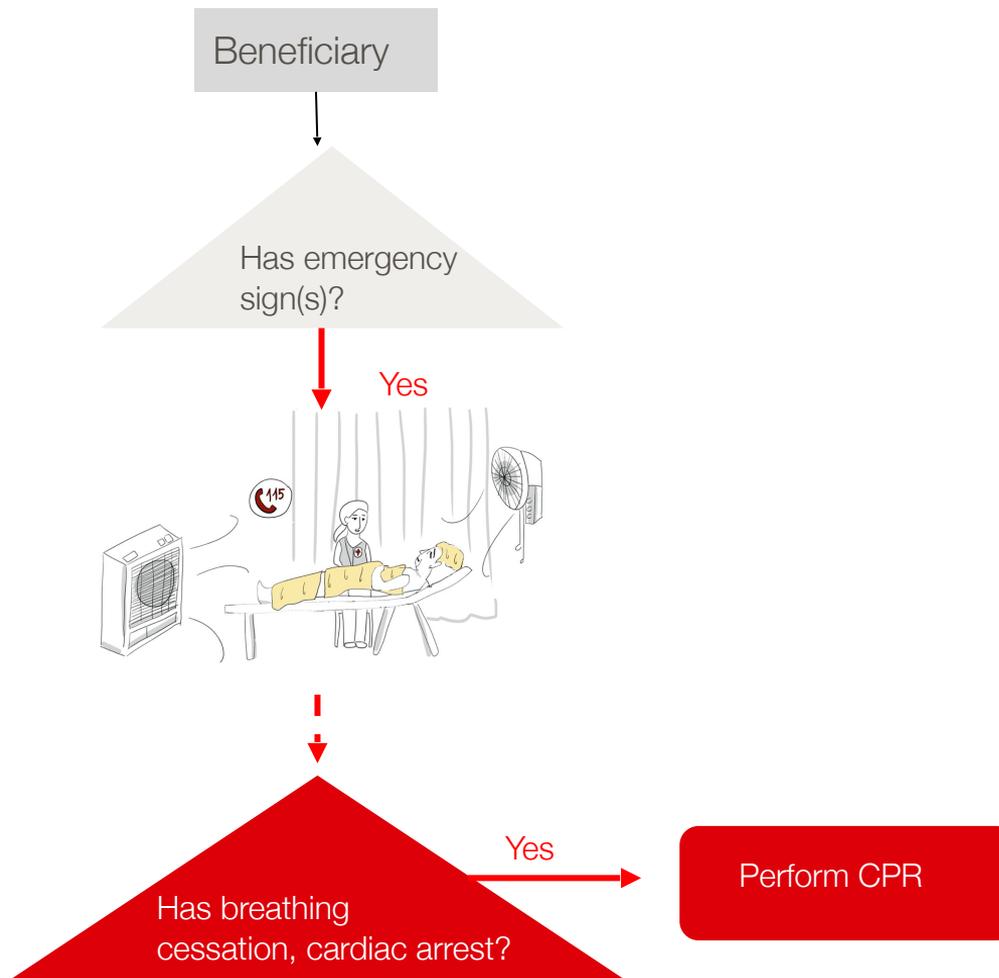
Perform tasks 5, 6, 7

Emergency Signs:

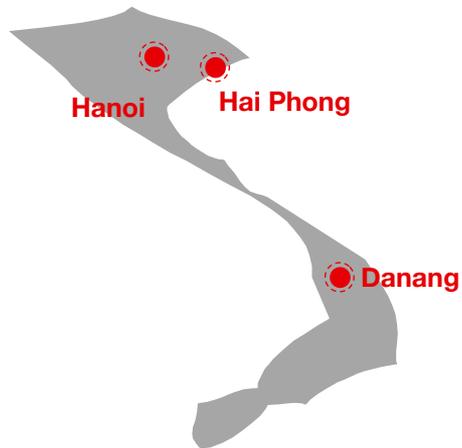


Loss of movements control,
Coma,
Confusion,
Convulsion,
Vomiting and stomach pain,
Chest pain,
Difficulty to breath,
Hyperventilation





Scaling Up



- *Feasibility Study in 12 cities of Vietnam*
- *3 cities selected: Hanoi, Hai Phong, Danang*
- *29 centres, 15 buses, visit of 4 slums*
- *Up to 25,000 beneficiaries*

Conclusion / Reflection:

Key outcomes

- *Sciences / forecasting capacity enhancement in Vietnam: Heat Index Vs Tmax*
- *Efficient Collaboration sciences / humanitarian sector:
VNRC, GRC and IMHEN for trigger development ([1 publication in Climate Services Journal](#))
GRC and National University of Singapore for Standing Operating Procedure development*
- *Replication / Approach Integration into local VNRC branch*
- *Acceptability / Visibility: media coverage & increased visibility on H&H issues*

Reflection

Red Cross Movement

- End-users of scientific knowledge on Heat and health and Forecast: put knowledge into practice

AND

- Key contributor to the global learning on H&H

Ability to reach the most vulnerable

Knowledge of local context

Collect disaggregated data



Marga und Walter
Boll-Stiftung

VOLKSWAGEN
AKTIENGESELLSCHAFT



THANK
YOU



www.forecast-based-financing.org
“FbF ready” Newsletter