

## Five years post-Sendai: where is the Sendai Framework for Disaster Risk Reduction in the COVID-19 response?

Human health and well-being are an integral part of achieving the goals of the Sendai Framework for Disaster Risk Reduction (SFDRR). March 2020 marked the fifth year of adoption of the SFDRR while the world is baffled about the impacts of the novel coronavirus disease 2019 (COVID-19). COVID-19 clearly reveals not only the interconnectedness of the world but also reminds us of the most vulnerable populations being affected the most (time and again). The SFDRR places emphasis on biological hazards, health and resilience. In responding to the COVID-19, individual countries such as India and South Africa are invoking powers from the National Disaster Management acts. However, globally, the SFDRR does not seem to have a place or a role in the COVID-19 response (Djalante *et al.*, 2020). This editorial discusses two main aspects in relation to the SFDRR missing in the COVID-19 response dialogue – the lack of addressing vulnerability and human rights; and vulnerable populations such as migrants, refugees and people living in informal settlements; and the need for a transboundary approach to the pandemic.

As COVID-19 affects different sections of society differently, the fundamental concept of vulnerability and respect for human rights seems to be missing in the response. Over many decades, social science disaster research has proven how vulnerability and risk play a central role in disasters. However, globally, the majority of responses to the COVID-19 has ignored vulnerability and a discussion on “who is potentially impacted the most”. Measures such as physical distancing and hand washing are shown to be key in reducing the risk of COVID-19 infections. These measures are not within the affordable reach of many people as in many parts of the world, people live in dire conditions without basic access to clean water and in densely populated areas (for example – slums and informal settlements). Working from home is not a possible option for many people living in slums or informal settlements. In India, for example, as soon as the lockdown was announced, migrant workers started walking long distances to return home. There are reports in some places of people collapsing due to the heat and exhaustion. In Uttar Pradesh, migrant workers were sprayed with disinfectant not meant for human beings as they were returning home. However, the response towards migrants working in cities, refugees and people living in slums, and informal settlements across the world have received negligible attention in this regard (Raju and Ayeb-Karlsson, 2020).

There has already been a push to address human rights issues in the context of the SFDRR and disasters in general (Raju and Costa, 2018). Unfortunately, the COVID-19 response has seen a marginal mention of human rights. The SFDRR states “Policies and practices for disaster risk management should be based on an understanding of disaster risk in all its dimensions of vulnerability, capacity, exposure of persons and assets, hazard characteristics and the environment” (UNISDR, 2015, p. 14). Are we leaving people behind? What happened to the Sendai Framework slogan of “leaving no one behind”? Although many media opinion pieces have highlighted the grave consequences of what could happen in places such as slums and refugee camps when the COVID-19 erupts in a large scale (see for example, Fallon, 2020) there seems to be very less emphasis on people living in these dire conditions.

Furthermore, the SFDRR places emphasis on the need for cooperation in transboundary disasters. Pandemics can be called “moving disasters”. The COVID-19 has cut across national and administrative borders, yet again proving that “disasters know no borders”. One of the characteristics of transboundary disasters such as the COVID-19 is the lack of political boundaries (spanning across many countries) (Ansell *et al.*, 2010).



COVID-19 has shown again (as with many disasters in the past) the transboundary character of disasters as the impacts are seen globally and increasingly given the interconnectedness of the world. It is high time to revisit the global frameworks and guidelines to discuss better – how do we approach transboundary disaster governance?

Let us not forget that during this time, countries are wrecked with earthquakes (in Croatia in March) and cyclones (for example in the Solomon Islands and Vanuatu in April) making the COVID-19 response even more challenging. These multiple disasters reveal that we need to address disasters not with a single hazard approach but with a solid systemic risk understanding (Mizutori, 2019).

In responding to the COVID-19, transboundary decisions such as closing borders (however inevitable) will have human rights implications. This is a call to not forget refugee populations who may be stranded due to closed borders without basic resources for immediate survival. Moving forward, as governments and international actors continue to respond to the COVID-19, it is crucial to immediately address the needs and concerns of the socially excluded people with a human rights lens. The large emphasis on healthcare with a vertical-systems approach must move towards a more comprehensive health systems approach addressing inequities and the needs of different vulnerable populations (Aitsi-Selmi *et al.*, 2015). Further, there needs to be recognition of and importance given to health in disaster risk reduction strategies and policies as emphasized in the Bangkok principles on implementation of the health aspects of the SFDRR (UNISDR, 2016; Chan and Murray, 2017). In order to “leave no one behind”, it is high time to draw out a plan of action for synergies between different global frameworks (Sendai Framework, The Paris agreement and the Sustainable Development Goals) and beyond national borders to ensure health and well-being and reduce disaster risk.

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Editorial