WHO Centre for Health Development

Biennium Achievements 2022–2023
The WHO Kobe Centre (WKC) is a global research centre focusing on health systems responses to service delivery, sustainable financing, innovations, and metrics and measurement to accelerate Universal Health Coverage in the context of population ageing, and health emergencies and disaster risk management. This biennium report covers the period from January 2022 to December 2023.

Vision
A global centre of excellence for universal health coverage (UHC) and innovation

Mission
To promote innovation and research for equitable and sustainable UHC, building on our comparative advantage in UHC, health financing, ageing and health emergency and disaster risk management, and drawing on lessons from Japan and the Asia Pacific Region and more widely to inform global policy development.
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Acknowledgements

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We deeply appreciate and thank the WKC Advisory Committee and the WKC Scientific Working Group for their engagement and support of the Kobe Centre, and our many partners including the Hyogo and Kobe communities and the Japan Ministry of Health, Labour and Welfare.
Our external research partners and collaborators over this period included:

Alabama Department of Public Health, United States of America
Australian National University, Australia
Bangladesh Ministry of Health and Family Welfare, Bangladesh
Baylor University, the United States
Belmont University, the United States
Catholic University of Korea, Republic of Korea
Centre for Environment and Population Health, Griffith University, Australia
Chiang Mai Rajabhat University, Thailand
Chiba University, Japan
Chinese University of Hong Kong, Hong Kong SAR
Chulalongkorn University, Thailand
City of Porto Alegre, Brazil
Curtin University, Australia
Dalhousie University, Canada
Duke Kunshan University, China
Duke-National University of Singapore Medical School, Singapore
Erasmus University, Kingdom of the Netherlands
European Centre for Social Welfare Policy and Research, Austria
European Observatory on Health Systems and Policies (London hub), United Kingdom of Great Britain and Northern Ireland
Evidence Aid, the United Kingdom
Gadjah Mada University, Indonesia
George Institute for Global Health, Australia
Global Development College, Australia
Health Policy Analysis, Australia
Harvard University, the United States
Hiroshima University, Japan
Hue University of Medicine and Pharmacy, Viet Nam
Hyogo Emergency Medical Centre, Japan
Hyogo Institute for Traumatic Stress, Japan
Institute for Research and Information in Health Economics, France
Institute for Health Sciences, Spain
Institute of Tropical Medicine, Belgium
International Health Policy Program and the National Health Security Office (NHSO), Thailand
International Health Transitions, Australia
International Longevity Centre Singapore, Singapore
Italian Society of Emergency Psychology Social Support – Emilia Romagna, Italy
Japan Agency for Gerontological Evaluation Study, Japan
Japanese Association of Disaster Medicine, Japan
Japan National Hospital Organization Disaster Medical Center, Japan
Japan National Institute of Mental Health, Japan
Juntendo University, Japan
Johns Hopkins University, the United States
Karadeniz Technical University, Türkiye
Keio University, Japan
KHANA Centre for Population Health Research, Cambodia
Kobe City Government, Japan
Kobe Gakuin University, Japan
Kobe University, Japan
Konan University, Japan
Kyoto University, Japan
Lao National Health Insurance Bureau, Lao People’s Democratic Republic
Lao Tropical and Public Health Institute, Lao People’s Democratic Republic
Lisbon School of Economics and Management, Portugal
London School of Economics and Political Science, the United Kingdom
McLennan County Medical Education and Research Foundation, the United States
Melbourne School of Population and Global Health, University of Melbourne, Australia
Mesylab SRL, Belgium
Monash University, Australia
Mongolian National University of Medical Sciences, Mongolia
Municipality of Pudahuel, Chile
**Nagasaki University, Japan**
**Nagoya University Graduate School of Medicine, Japan**
**National Center for Global Health and Medicine, Japan**
National Centre for PTSD, the United States
National Health Services England, the United Kingdom
**National Institute of Geriatrics and Gerontology, Japan**
National Research Council Institute of Neuroscience (CNR-In)/ WHO Collaborating Center for Longitudinal Health and Cross-Country Statistical Modelling, Italy
**Nihon Fukushi University, Japan**
**Okayama University, Japan**
Organisation for Economic Co-operation and Development (OECD), France
**Osaka University, Japan**
Phoenix Australia, Australia
Queensland University of Technology, Australia
Robin Moore and Associates, Australia
**Ritsumeikan Asia Pacific University, Japan**
Seoul National University, Republic of Korea
Singapore General Hospital, Singapore
Singhealth Centre for Population Health Research and Implementation (CPHRI), Singapore
**St. Luke’s International University, Japan**
Thailand Ministry of Public Health, Thailand
**Tohoku University, Japan**
**Tokyo Ariake University of Medical and Health Sciences, Japan**
**Tokyo Medical and Dental University, Japan**
**Tokyo Metropolitan Geriatric Hospital and Institute of Gerontology, Japan**
Trabzon University School of Applied Sciences, Türkiye
**Tsukuba University, Japan**
Università del Piemonte Orientale, Italy
Universitat Internacional de Catalunya, Spain
University College London, the United Kingdom
University of Gothenburg, Sweden
University of Hamburg, Germany
University of Health Sciences, Türkiye
**University of Hyogo, Japan**
University of Ljubljana, Slovenia
University of Malaya, Malaysia
University of Melbourne, Australia
University of Newcastle, Australia
University of New South Wales, Australia
**University of Occupational and Environmental Health, Japan**
University of Padova, Italy
University of Sydney, Australia
University of Technology Sydney, Australia
University of Texas Southwestern, the United States
University of the Philippines Manila, Philippines
**University of Tokyo, Japan**
University of Toronto, Canada
University of Valparaiso, Chile
Waco-McLennan Health District, the United States
World Bank
**Yodogawa Christian Hospital, Japan**
I am proud to present the WHO Kobe Centre’s Biennium Achievements Report, which showcases key activities from January 2022 to December 2023. During this biennium, we confirmed our position as a strong international research platform on Universal Health Coverage in response to population ageing, and health emergencies and disaster risk management (Health EDRM) by supporting new research and building the evidence base for policy-makers. Located in Kobe, Japan, WKC has a unique role in initiating research from local to global levels.

Our achievements in this biennium include a total of 103 publications including four WHO books and nine reports, 70 journal articles, eight WHO case studies, and nine policy briefs. We completed 14 multi-year research projects and eight are ongoing. All this would not be possible without our collaborations with over 110 research partners across the globe, including 15 partnerships with Kansai-based institutions. Our local engagement with Kansai regional partners has increased significantly. We launched a new Summer School programme for local and national high school and university students, and our eight WKC Fora attracted over 1200 local participants.

We highlight several major, multi-year research agendas that were completed during the biennium. The first on the health systems response to population ageing in Asia was started in 2017 and all eight country studies were completed, and the results were published in a special journal issue of BMC/ Springer’s Health Research Policy and Systems on health systems responding to population ageing. The Kobe Dementia Study also started in 2017 and resulted in five papers and
conference presentations in Japan, Austria, and Switzerland, and contributed to the Kobe Ordinance for Dementia-Friendly City and multiple journal articles.

During this biennium, WKC led two WHO global flagship products on long-term care financing and purchasing arrangements for quality services for chronic illnesses, which resulted in 24 WHO publications in 2023 disseminated to policy-makers and researchers in countries. Our work on metrics and measurement resulted in a global analysis of financial protection and equity in access and was published in the 2023 WHO-World Bank Tracking Universal Health Coverage: Global Monitoring Report. WKC also spearheaded the establishment of a global research consortium for measuring unmet health and social care needs of older people involving over 60 researchers from 30 countries to support WHO regions in their efforts to measure unmet needs for UHC and long-term care.

We continue to expand collaborative initiatives in Health EDRM. WKC manages the WHO research network for HEDRM, which now includes 278 researchers globally. Notably, nearly 30 experts in Japan helped to translate the WHO Guidance on Research Methods for Health EDRM into Japanese, and the updated Guidance now has a chapter on COVID-19. Serving the local community by sharing information and research remains a priority. During COVID-19, we translated and disseminated over 300 WHO COVID-19 guidance and public information documents for Japanese professionals and the public.

I am sincerely grateful to the WKC Advisory Group for its strategic guidance, the WKC Scientific Working Group for assistance in research quality assurance, and especially to the Kobe Group and the Hyogo and Kobe communities which make our work possible. I look forward to working together even more as we strive to realize better health for all.

Dr Sarah Louise Barber
Director
WHO Centre for Health Development
Achievements

at a glance
Research

110+ research partners and collaborators

8 ongoing projects

70 journal articles

29 other policy publications

4 books

14 completed projects

Health EDRM Research Network

Health EDRM Knowledge Hub

CARETRACK consortium for unmet needs

PASH simulator

Biennium Achievements 2022-2023
Local engagement

- 2 WKC Summer Schools
- 8 WKC Fora with >1200 participants
- >36 student lectures
- Participation in 30 local and global events
- Participation in 11 local technical committees
- 15 research partnerships with Kansai-based institutions
Communication

- Migration of website to Sitefinity
- 5 press releases
- 42 YouTube videos
- >70 website news stories
- 9500+ Twitter followers
- 270 LinkedIn followers
- 360 YouTube subscribers

Biennium Achievements 2022-2023
Service Delivery, Sustainable Financing, and Innovations

Madam Chong Yue in her home, Singapore, 2021. The population in Singapore and the Western Pacific Region is ageing rapidly. To prepare, society and healthcare systems are evolving to support people throughout their life with long-term care and social services integrated at the community level.
**Summary of achievements**

In the thematic area of service delivery, sustainable financing and innovations, in 2022-2023, we produced 43 publications, collaborated with over 50 different partners, and concluded six multi-country projects, with five ongoing.

Our research findings about health systems’ response to population ageing featured 10 papers in a special supplement of *Health Research Policy and Systems*.

WKC’s collaboration with Kobe University and other local institutions on the ‘Kobe Dementia Study’ contributed to policy implementation through the Kobe Ordinance for Dementia-Friendly City. The success of this collaboration led to new research started in 2023 about analyzing the behavioural responses to COVID-19 among the residents of Kobe, Japan.

The success of the innovative PASH global simulator, which models policy choices in sustainable financing of health services to address population ageing, is contributing to a new simulator that projects long-term care workforce needs globally.

WKC completed one WHO global flagship product focusing on a series of 24 WHO publications about ‘Purchasing instruments to strengthen quality health services for chronic illnesses’ and WKC continues to implement a second on ‘Sustainable financing in the context of population ageing.’

We are committed to translating our research for policy and health impact. Notable achievements are the summaries and video interviews of the ‘WKC policy series on long-term care’, and the series of policy briefs for policy-makers from our report “*Purchasing for quality chronic care*”. These included lessons learned about purchasing and payments to improve the quality of chronic care, with implications for low- and middle-income countries.
KC conducts research on health systems and financing innovations to provide evidence for policy options that will accelerate progress toward Universal Health Coverage (UHC) in the context of population ageing, particularly for low- and middle-income countries (LMICs).

Our work in 2022-23 focused on evaluating resilient and innovative service delivery models for population ageing and studying the impact of population ageing on revenue generation and expenditures for health. This research emphasizes practical actions that countries can take to address the challenges of population ageing.

Two research agendas in our service delivery portfolio were completed in 2022-23. In 2022, we completed the final study in a series on health service delivery adaptations to population ageing in eight countries in Asia. A special supplement of BMC/Springer’s *Health Research Policy and Systems* published a compilation of ten papers on our research findings about health systems’ response to population ageing. We disseminated this work at a WKC Forum for local Kansai audiences in November 2022 during the 37th Annual Congress of the Japan Association for International Health and produced a series of video summaries by the authors for global audiences in July 2023.

The multi-year research project, the *Kobe Dementia Study*, demonstrated the potential value of three simple questions to identify people at risk of long-term care needs linked with cognitive decline. The study analysed the health data of Kobe citizens over 70 years old collected by a letter-based survey and the respondents’ long-term outcomes at two to four years. By September 2023, five papers had been published or were pending in peer-reviewed journals, and presented at conferences in Japan, Austria, and Switzerland. The findings were publicized through a press release, WKC’s website, and social media, and shared with Japanese local municipalities to demonstrate a successful public health collaborative study between a local municipality and a local university. This work contributed to the Kobe Ordinance for Dementia-Friendly City, and discussions on further application of the findings for LMICs are underway.
This collaboration with Kobe City led to a new research initiative, *Analysing the behavioural responses to COVID-19 among the residents of Kobe, Japan: secondary analysis of administrative healthcare databases*, which aligns with our local public health priorities and WKC’s global research agenda. The project was launched in August 2023 and publicized through a joint press release with WKC, Kobe City, and the Japan Agency for Gerontological Evaluation Study in November 2023.

In terms of sustainable financing, our collaboration with the WHO EURO Observatory on Health Systems and Policy and WHO’s Regional Office for the Western Pacific (WPRO) is continuing on the innovative *Population Ageing financial Sustainability gap for Health systems (PASH) Simulator* which demonstrates policy choices in financing health services for countries to respond to population ageing. The simulator is being updated for further application in countries in cooperation with WHO regional and country offices.

As populations age more rapidly, countries at all levels of development are exploring options in how to deliver and finance long-term care (LTC) to meet the increased demands for appropriate health and social care for older persons. A new simulator projecting LTC workforce needs is being developed, which will produce estimates of the gap in demand and supply, and the associated costs of the LTC workforce and filling the gap.

During 2022–23, WKC commissioned studies to describe how, as populations age, countries of all income levels are adapting health and social service delivery configurations to the needs and demands of older persons, especially through building sustainable systems of LTC. In November 2023, WKC, the EURO Observatory, and the WHO Regional Office for the European Region (EURO) announced the launch of a book on *The care dividend: why and how countries should invest in long-term care* by Cambridge University Press. It presents the components and policy options for LTC and demonstrates the benefits of investing in quality LTC for economies and society for countries at all income levels.
Closely related to this, a research project is addressing Sustainable financing in the context of population ageing, one of two WHO global flagship products. Global collaboration among three HQ technical departments and academic institutes produced four WHO technical papers to study gender aspects of LTC, public LTC financing, a rapid review of innovations, and intergenerational financing of LTC in Japan. This research aims to inform a series of eight WHO briefs that focus on LTC financing implications for low- and middle-income countries.

Our five-year collaboration with the Organisation for Economic Co-operation and Development (OECD) has generated substantial work about how countries set prices for health services and invested to institutionalize pricing as a policy instrument for better coverage and financial protection in health and long-term care. We published the WKC Policy Series on Long-Term Care accessible through summaries and video interviews.

Purchasing for quality chronic care is becoming increasingly important as countries want better value for health spending. We built on this body of work to explore the role of Purchasing instruments to strengthen quality health Services for chronic illnesses. This is the second of two WHO global flagship products we led. Together with the OECD, in September 2023 we produced a report, “Purchasing for quality chronic care” which included lessons learned about purchasing and payments to improve the quality of chronic care, with implications for LMICs, and eight case studies. A 9-part policy brief series was also published to make the findings user-friendly to policy-makers.
Elderly people queuing for registration at the Nan Kou Community Health Center, China.

- 17 journal articles
- 2 books
- 24 policy publications
- 50+ research partners
- 5 ongoing projects
- 6 completed projects
- Biennium Achievements 2022-2023
UHC Metrics and Measurement

Cashier at Mahosot Hospital, Lao People’s Democratic Republic.
In the thematic area of metrics and measurement, WKC completed four local and multi-country projects in 2022-2023, working directly with over 15 different partners, and has two ongoing projects. Five new studies will begin in 2024 in collaboration with WHO Regional Offices. We generated 13 publications over this period.

Our work exploring financial protection in healthcare for older people was included in the 2023 global monitoring report on UHC by WHO and the World Bank. Linked with this, two local studies were completed that produced specific implications for the Kansai region of Japan which is informing local policy.

WKC was instrumental in forming CARETRACK, a global research consortium to advance methods for measuring unmet health and social care needs of older people. Our research on unmet health care need is contributing to global policy.

Through an article in the *British Medical Journal*, we advocated for improving global data on unmet health care needs to track UHC progress more accurately. This contributed to the Political Declaration of the high-level meeting of the United Nations General Assembly on UHC on 21 September 2023, which echoed the 76th World Health Assembly Resolution in 2023. These give WHO the mandate to consider using unmet need for healthcare services as an additional indicator to monitor UHC.
WKC focuses on understanding how countries monitor UHC and measure their health system responses to the needs of population ageing and an older person’s right to health. Our key research areas over the past two years were to analyse current research on the measurement of essential health services, financial protection, quality and equity for older populations; and to support the development of metrics and measurement tools that enable countries to monitor UHC in the context of population ageing.

In 2022, WKC organized a special supplement of BMC/Springer’s *Health Research Policy and Systems*, which included results of metrics and measurement research projects on Measuring financial protection for older persons in Viet Nam and Adaptation and validation of tools for monitoring the health of older people in Myanmar and Malaysia.

Local Japanese studies in the Kansai region contribute to WKC’s global research agenda on financial protection in healthcare. The project Financial protection of older persons in health care in the Kansai region of Japan: Barriers to effective implementation of financial protection policies and programmes, was completed in 2022. The study across all six prefectures identified several barriers preventing people from using some financial protection programmes to access healthcare. These include fragmented services, complicated administrative processes, and complex physical, mental/cognitive and social/family problems of the older patients. We presented the findings at an online WKC Forum in July 2022 to nearly 150 participants including local government officials, health and social care workers, and academics in the Kansai area, and shared the results with the Kobe Group. Journal publications and book chapters are being developed.

A second Kansai-based study exploring financial hardship due to excessive health spending and unmet care needs of older people in Japan with implications for the Kansai region found that, over the period of 2004 to 2020, out-of-pocket spending on health was consistently higher among households with older persons 65 years and above, while the incidence of self-reported unmet need due to forgone care was higher among younger people (64 years and under). Out-of-pocket spending was lower than in other regions, while forgone care tended to be higher in Kansai than elsewhere. These findings were published in the *Global Monitoring Report on...*
Financial Protection in Health 2021. We prepared a special research brief in Japanese for local health officials to inform policy development. Journal publications are underway as well as plans for a WKC Forum to disseminate the research findings.

Measuring unmet needs for health and social care in older people is key to evaluating progress on UHC and the Sustainable Development Goals. Our project on Multi-country cross-sectional and longitudinal studies to quantify unmet needs for health and social care among older people produced country estimates of the prevalence of this unmet need through secondary analysis of survey data from 83 countries. In adults 60 years and older, unmet healthcare need due to forgone care ranged from less than 2% to over 50%, while estimates for unmet social care and support for older people with functional limitations varied from less than 4% to over 40%. These findings contributed to the 2021 and 2023 editions of the WHO-World Bank Tracking Universal Health Coverage: Global Monitoring Report. An article was published in Population Health Metrics in September 2023 and a second one is under review.

In 2023, we expanded this work by analyzing the European Health Interview Survey Wave 3 data from 2019 to investigate unmet healthcare needs of those aged 15 and older in 27 countries, and unmet social care needs among people aged 65 and above in 28 countries. Nearly a quarter (24.4%) of people reported unmet healthcare needs, mostly due to waiting time, cost, and transportation/distance. In all countries, unmet social care needs occurred more often in those aged 70 than those under 70. Key findings were published on our website and journal articles are being prepared.

This series of research on unmet need contributed to a special session on measuring forgone care as part of WHO training workshops for measuring financial protection for UHC in the WHO Regions of the Western Pacific and South-East Asia (SEAR). WKC and research partners led the SEAR training session in November 2023 in Jakarta, Indonesia, to build the capacity for measurement in countries.
To further measure, understand and monitor unmet need for health and social care, WKC supported the organization of a global research consortium to advance methods for measuring unmet health and social care needs of older people. This project engaged over 60 individuals in all WHO Regions with diverse expertise in the care of older people to identify the main research priorities and methodological challenges for addressing the unmet care needs of older persons globally. The work culminated in a global research consortium, CARETRACK, hosted by the London School of Hygiene and Tropical Medicine in the United Kingdom, to advance research and evaluation to track the unmet health and social care needs of older populations. WKC will continue to support the activities of the consortium as a technical advisor and mobilize its expertise to address relevant research priorities of WHO.

To advance unmet need on the political agenda, we published an article on our research on unmet need and the importance of improving global data on unmet health care needs to track UHC progress more accurately in the *British Medical Journal*. Co-authored by WKC Advisory Committee Chair, Dr Viroj Tangcharoensathien, and research partners Dr Paul Kowal, Dr Mizanur Rahman, and Dr Shohei Okamoto, this article contributed to the Political Declaration of the high-level meeting of the United Nations General Assembly on UHC on 21 September 2023. A statement was included “to ensure the statistics used in the monitoring progress can capture the actual progress made on the ground, including on unmet health needs, for the achievement of universal health coverage, in line with the 2030 Agenda for Sustainable Development.” Similar text was included in the 76th World Health Assembly Resolution in 2023. This gives WHO the mandate to review the importance and feasibility of using unmet need for healthcare services as an additional indicator to monitor UHC, further strengthening the global policy relevance of WKC’s research on this topic.
4 completed projects

2 ongoing projects

13 publications

15+ research partners

1 global consortium for unmet needs

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Health Emergencies and Disaster Risk Management (Health EDRM)

Aftermath of the April 2016 earthquakes which damaged Kumamoto Castle in Japan after earthquakes measuring 7.0 and 6.2.
In the thematic area of Health Emergencies and Disaster Risk Management (Health EDRM), during 2022-23, WKC had research collaborations with over 40 partners, completed four projects, started a new one, and produced 47 publications.

We generated learning materials for each of the 44 chapters of the WHO Guidance on Research Methods for Health EDRM and included a new chapter on conducting research in the context of COVID-19. WKC led the development of the Japanese version of the Guidance with 28 experts from leading research institutions and academic associations.

Two research projects on Health EDRM in the context of COVID-19 contributed new information on managing health workforce strategies, and using smartphone-based cognitive and behavioural therapy to prevent depression in students.

WKC continued to act as Secretariat of the WHO Health EDRM Research Network which promotes collaboration among nearly 300 experts from 48 countries. We host the WHO Health EDRM Knowledge Hub and support the development of the WHO Health EDRM Research Agenda.

A new research project will explore evidence to mitigate the mental health impacts of disasters and improve tools for effective disaster risk reduction among vulnerable groups.
KC manages the WHO Thematic Platform for Health EDRM Research Network (Health EDRM RN), which strengthens scientific evidence for improving Health EDRM practices globally. We are uniquely placed to engage with Japanese and global experts with extensive experience in prevention, preparedness, response, and recovery from health emergencies and disasters.

Our research priorities are to address research gaps and information needs to enable standardization and ethical issues; to strengthen standardization of health data collection and management for comparative analysis of health impact across different phases of disasters; to conduct research that supports effective disaster response addressing the health needs of survivors; and to study the specific health needs of vulnerable sub-populations, including older adults.

In 2022, WKC worked with Evidence Aid to produce learning materials such as video lectures and slide sets for each of the 44 chapters of the WHO Guidance on Research Methods for Health EDRM to promote dissemination of the Guidance. The first revision in October 2022 added a chapter on how to conduct research in the context of COVID-19. This was launched via a webinar co-organized with the WHO Regional Office for the Eastern Mediterranean (EMRO) and the WHO Regional Office for Europe (EURO) in July 2023 for its use in regions and countries. Further revisions are underway, and workshops for regions and countries are planned in 2024 and beyond. As part of WKC’s local engagement, the Japanese translation of the Guidance was completed with 28 experts from 15 leading research institutes and multiple academic associations in Japan. The translation into Japanese of the Guidance was published on 1 September 2023, National Disaster Prevention Day, and a campaign to disseminate it in Japan is under discussion.
Two research projects on Health EDRM in the context of COVID-19 were completed in 2022-2023. **A scoping review of countries’ responses to human resource management during the COVID-19 pandemic** identified several common strategies to manage human resource challenges in countries. Five case studies described countries’ policies and programmes to manage health workforce strategies, including recruitment of volunteer workers, and strengthening quality assurance and operational sustainability. This work resulted in 15 publications and conference presentations.

Physical distancing policies to prevent infection during the COVID-19 pandemic may have exacerbated social isolation, especially among youth such as university students. The [Healthy Campus Trial](#) investigated the potential effect of smartphone-based cognitive and behavioural therapy (CBT) for depression prevention using a randomized controlled trial to offer different types of smartphone-based CBT for students in the Kansai Region from 2018 to 2021. It demonstrated both short-term (eight weeks) and long-term (one year) effects of digital CBT for preventing depression. We promoted the findings in a news release and plan to present them to Japanese universities and local governments and globally.

WKC is the Secretariat of the WHO Health EDRM Research Network (RN) and promotes collaboration within the Network of 278 experts from 48 countries. The Centre organized two Core Group meetings in October 2022 and November 2023 to discuss the strategic direction of the Network’s activities. The Core Group, comprising representatives from WHO’s six Regional Offices, HQ’s Disaster Risk Reduction and Recovery (DRR) Unit, and two co-chairs from the RN, supported the establishment of the WHO Health EDRM Knowledge Hub and the WHO Health EDRM Research Agenda.
Multi-sectoral collaboration is important for enhancing community resilience to mitigate the impact of emergencies and disasters, or pandemics such as COVID-19. To systematically identify and evaluate strategies for strengthening community resilience, 175 local municipality officials and healthcare professionals in Australia, Bangladesh, Slovenia, Türkiye, and the United States of America attended workshops to complete a survey to identify and prioritize public health actions for stronger community resilience and public health systems. A journal article was published.

Research completed in 2022 on determinants of long-term mental health outcomes after disasters and health emergencies showed a high prevalence of mental health issues among disaster survivors, and persistent mental health symptoms after the event regardless of the type of disaster. Taking this further, in 2023 WKC launched a new research project on Mitigating mental health impacts of disasters: Evidence to support more effective disaster risk reduction tools for better mental health and psychosocial support (MHPSS). It aims to provide evidence for future policies and practices by mapping and assessing existing policies, programmes and interventions to reduce mental health risks, promote protective factors, and mitigate the impacts of disasters on mental health.
15 February 2023, Türkiye-Syria earthquake. A family, who is displaced after losing their home in the earthquake, finds shelter in the tent camp established by AFAD in Antakya.
Local Engagement
WKC is a department within WHO's Headquarters with a global mandate and also has a local role in contributing knowledge and information to the local community in Kobe and Hyogo Prefecture. WKC’s local engagement plan aims to share lessons learned and encourage collaboration across countries as they strive to attain the Sustainable Development Goals (SDGs); to communicate and disseminate information about WKC’s research activities; and to contribute to the community in Kobe and Hyogo prefecture for awareness-raising and health advocacy.

WKC has established partnerships with 15 Kansai-based research institutions to encourage collaboration towards common global health challenges focusing on UHC and the SDGs. As the Secretariat of the WHO Thematic Platform for Health EDRM Research Network, WKC establishes collaborations between Kansai-based institutes and the global research community on research for disasters and health emergencies. WKC linked teams of Kansai-based researchers and international academia, contributing to locally relevant challenges and expanding our Kansai-based research network while contributing to our global research programme. In 2022-23, new joint research projects with academics from abroad were started with Kobe University, Kobe Gakuin University, University of Hyogo, Osaka University, Kyoto University, Hyogo Institute for Traumatic Stress, and Hyogo Emergency Medical Center.
The COVID-19 pandemic necessitated online and hybrid meetings which reduced costs and increased participation. **Notable online and hybrid meetings** in 2022-23 included the 4th and 5th Core Group meetings of the WHO Thematic Platform for Health EDRM RN; a book launch, "The care dividend: why and how countries should invest in long-term care" involving research partners from the European Observatory for Health Systems and Policy, Kobe University, Kyoto University, the National Institute of Geriatrics and Gerontology, and representatives of the Kobe Group and local government, with online participation of global collaborators; and the 4th Annual Internal WHO Meeting of DRR Focal Points with HQ’s DRR Unit.

Communicating and disseminating information about WKC’s research activities occurs through regular WKC Fora and contributes to the local community. In 2022/2023, WKC organized **eight fora**.

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<td>Annual High School Students’ Forum</td>
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<td>Systems of financial support in healthcare for families with complex challenges and marginalized populations, to overcome the challenges of ‘leaving no one behind’</td>
<td>Kyoto University</td>
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Each research project has a communication plan identifying how activities and results will be disseminated. This includes journal articles, updated website research descriptions, initial and final research briefs in Japanese and English, interviews with researchers, media releases sent to local and national press clubs, and social media tweets, LinkedIn posts, and videos about specific research projects and collaborators. In 2022/2023, we published over 70 news stories in both Japanese and English on WKC’s website. As the COVID-19 pandemic waned towards the end of 2022, WKC reduced the frequency and volume of COVID-19 communication in agreement with the local donors but kept the COVID-19 dedicated section on our website. This section represented a large share of the page views, positioning WKC as a trusted information source. In December 2023, WKC’s website moved to WHO’s global, user-friendly platform.

Dissemination on social media is integral to our strategy. On Twitter (X), we continued to leverage our broad base of 9,500+ followers to disseminate information about research.
programmes and partners’ activities, extending our visibility across the Kansai region, Japan and globally, which continued beyond COVID-19. We used our YouTube channel to provide more information on technical activities such as metrics and HEDRM Guidance research activities, and launched a LinkedIn account for international English-speaking audiences while concentrating our Twitter activities on Japanese-speaking audiences.

WKC contributes to health awareness in the community through lectures for students in primary schools, high schools, and universities, remotely and face-to-face. In 2022/23, WKC staff delivered over 36 lectures, mostly for local schools and universities. Following the successful completion of a series of high school fora since 2016, we started the “WKC Summer School” in 2022. This two-week training programme for local and national high school and university students includes the history as well as current and future challenges of global health. Participants created presentations on global health issues using literature reviews and interviews with WKC staff and external experts. The presentations were shared in the “WKC Student Forum” as the deliverables of this event, with support from local student groups including the inochi WAKAZO Project.

WKC staff contribute to local technical committees and meetings to improve population health. In 2022-23, WKC participated in 11 committees ranging from infectious diseases, tobacco control, and health emergencies, to strategy and planning meetings with Hyogo Prefecture, Kobe City, as well as Board and Steering Committee meetings. In serving the local community and disseminating our results, staff participated in 30 local and global events in Japan, Griffith University (Australia), Queen Mary College of the University of London (UK), the government of Viet Nam, and discussions with academics in Singapore.
WKC and the Kobe Group have worked to **strengthen their regular communications**. The annual programme review was conducted in July 2023 to discuss progress made and plans for future research and local engagement. WKC and the Japan Cooperating Committee (JCC) Secretariat also met regularly to review WKC’s progress. Regular meetings were held to discuss local engagement activities and strengthen communications among other topics. The Kobe Group also participates in the annual WKC Advisory Committee (ACWKC) meeting in November every year.
For more information:

🌐 wkc.who.int
𝕏 x.com/WHOKobe
🎧 www.YouTube.com/c/WhoKobeCentre
linkedin www.linkedin.com/company/who-centre-for-health-development/