

Not Reached, Not Ready

Why early warning systems miss people living with non-communicable diseases in flood-prone Nepal

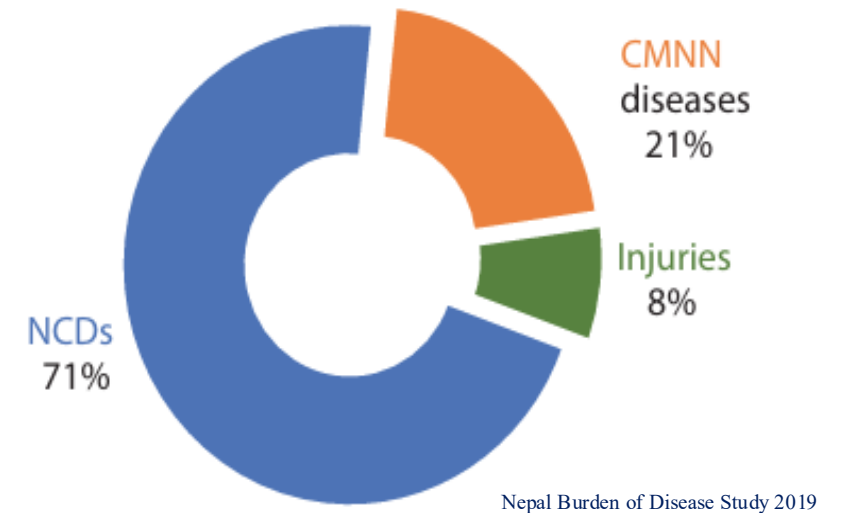
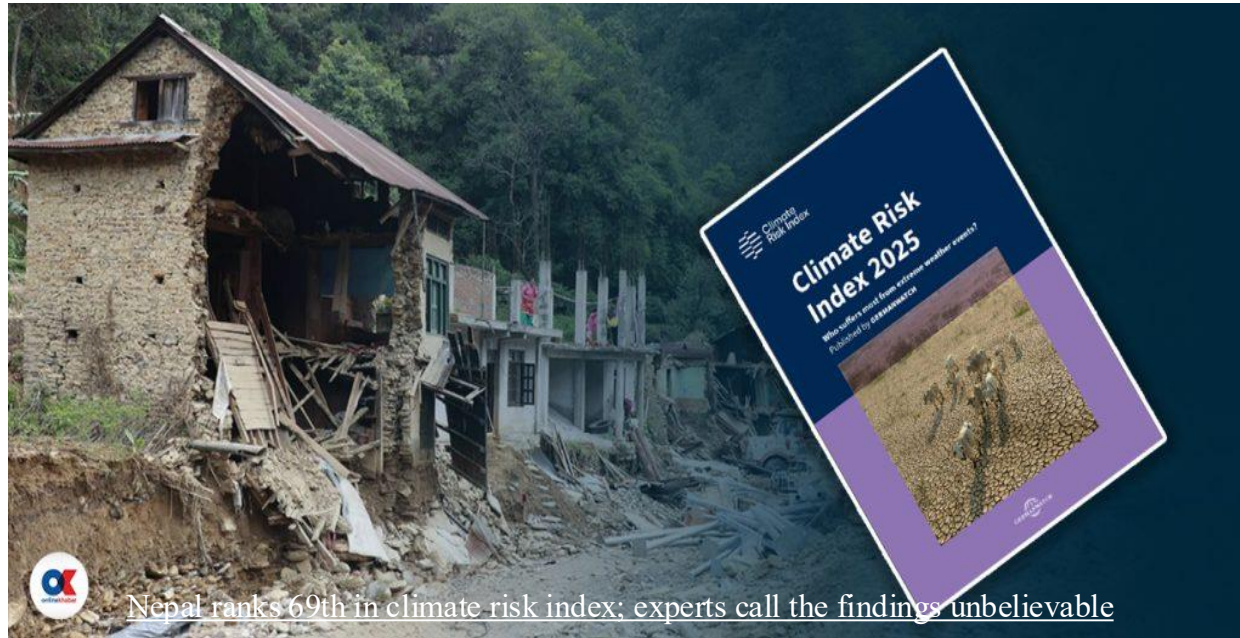
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Why people living with NCDs need different warnings?



Causes of death in Nepal

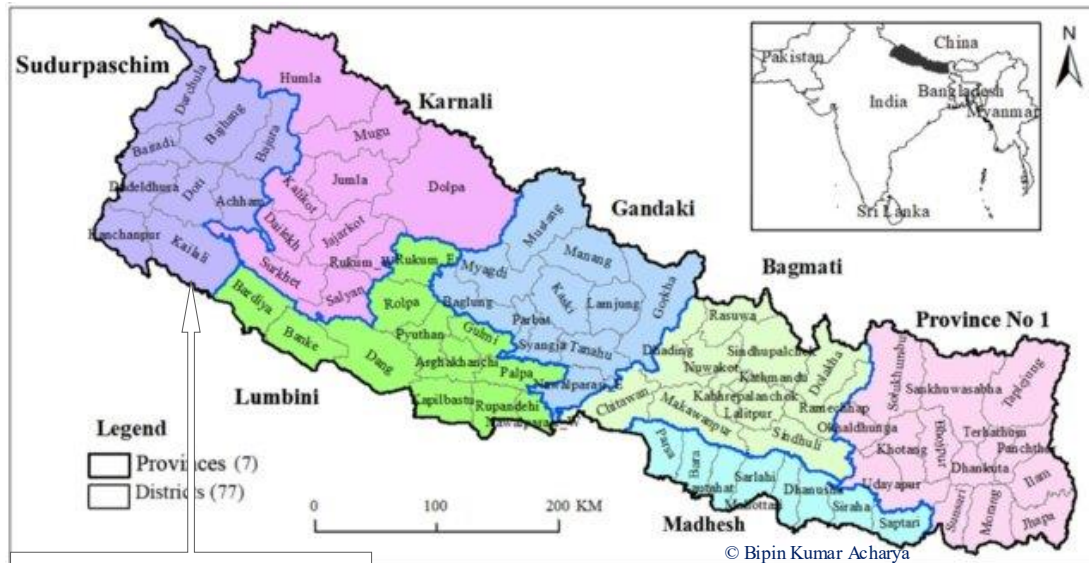
People living with NCDs may need more time and support to act because they depend on:

- ❖ Regular medicines and prescriptions
- ❖ Mobility and caregiver support
- ❖ Access to health workers and follow-up care
- ❖ Clear advice before roads, homes and services are disrupted

Generic warnings are not enough when people need health-specific early action

Study setting and evidence base

Purpose: To understand how people living with NCDs receive, understand and act on early warning messages during floods.



Laljhadi (Kanchanpur) and Bhajani (Kailali)

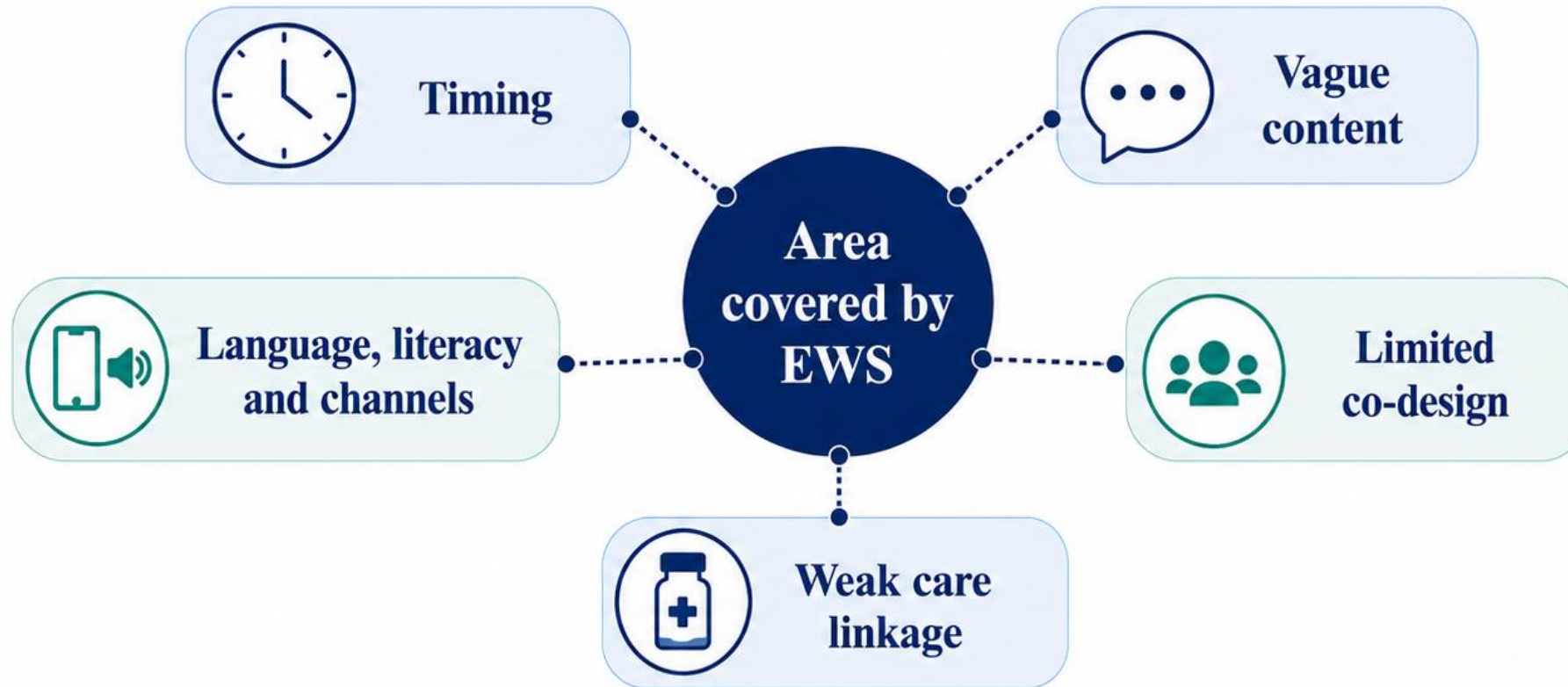


Qualitative study, October 2024

- 96 participants
- 9 focus group discussions
- 10 in-depth interviews
- 9 key informant interviews
- Participants: PLWNCDS, health workers, local officials and disaster-response actors

Five ways people living with NCDs are functionally excluded

Coverage does not guarantee action



Covered by the system \neq able to receive, understand, trust and act

Excluded by timing and vague messages

Warnings messages often arrive too late or without clear action guidance



For people living with NCDs, this means little time to:

- collect medicines and prescriptions
- arrange transport or caregiver support
- reach safer places before roads are blocked

“The messages arrive after the rain has already started. I have not received a message before the rainfall yet.”

IDI-07

A warning is only useful if it arrives early enough for people to act.

Excluded by language, literacy and channels

Warnings are often delivered through Nepali-language SMS.

This can exclude people who:

- ✓ speak local languages or dialects
- ✓ have low literacy
- ✓ are unfamiliar with mobile phones
- ✓ miss SMS alerts among routine phone messages

“I do not know how to use a phone and read the message.” - FGD-03 (P7)



An accessible warning must match people's language, literacy and trusted communication channels.

Excluded from design and trust-building

People living with NCDs are rarely involved in designing, testing or delivering early warning messages.

This weakens:

- ✓ message relevance
- ✓ trust and ownership
- ✓ awareness of what to do
- ✓ willingness to act

“I have never heard or seen community people getting involved in the discussion regarding EWS.” - KII-03



Trust grows when warnings are designed with communities, not only delivered to them.

A warning without continuity of care is incomplete early action

During floods, PLWNCDs may lose access to:

- ✓ health posts and hospitals
- ✓ regular medicines
- ✓ follow-up care
- ✓ transport and referral
- ✓ health workers

For chronic conditions, even short interruptions can worsen health.

“People with NCDs face significant challenges during floods. They cannot reach hospitals due to road blockages.”

FGD-07, P1



Early warning should trigger health action, not only evacuation advice.

Excluded by weak system credibility

Trust is weakened when warnings are:

- ✓ inaccurate or inconsistent
- ✓ too frequent without clear relevance
- ✓ not followed by visible support
- ✓ not specific enough to guide action

“We stopped paying attention after hearing the same warning that never matched what happened.” - (IDI-09)



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Trust is built when warnings are accurate, specific, timely and followed by action.

Impacts of Early Warning Message Failure for People Living with NCDs

Late or unclear warning



No time to prepare medicines or evacuate safely



Blocked roads, closed services and medicine shortages



Missed doses, missed follow-up and worsening symptoms



Fear, stress and reduced trust in the system



For people living with NCDs, early warning failure can become a continuity-of-care failure.

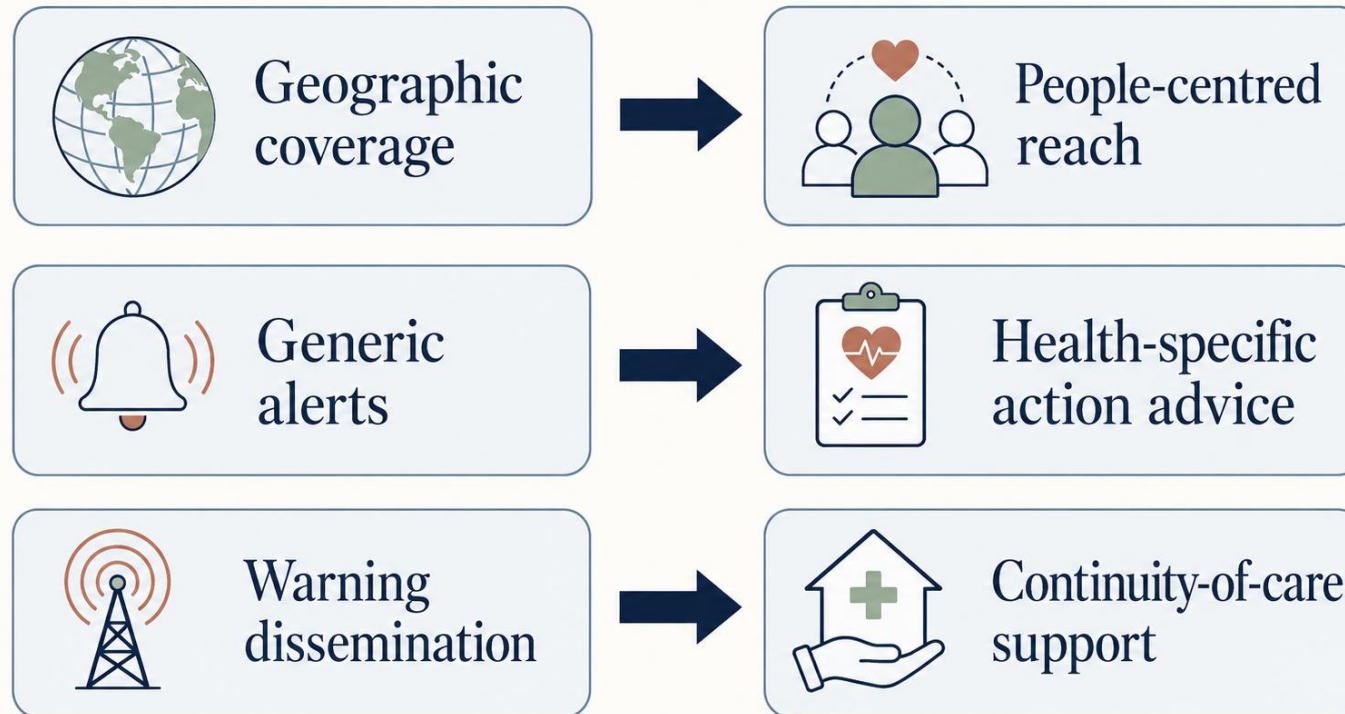
Practical actions for inclusive early warning system

- 1. Identify PLWNCDs who may need extra support**
Medicine, mobility, caregiver, transport or follow-up needs.
- 2. Make warnings earlier, clearer and locally adapted**
Use local languages and simple formats.
- 3. Include health-specific action advice**
Prepare medicines, prescriptions, health documents and emergency contacts.
- 4. Use trusted and multiple channels**
SMS, FM radio, loudspeakers, direct calls, FCHVs, Red Cross volunteers and local leaders.
- 5. Link warnings with health services**
Medicine stocks, health posts, mobile outreach, referral and follow-up.



A warning is effective only when people can understand, trust and act on it.

Towards People-Centred Early Warning and Early Action



Early warning is inclusive only when people most at risk can act on it.

Acknowledgements

- ❖ Community members, health workers, and local leaders in Kailali and Kanchanpur
- ❖ People living with NCDs, who shared their experiences and insights



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Study report

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