

NATURAL DISASTERS: Protecting the Public's Health

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CONTENTS

Preface	vii
Introduction	ix
Acknowledgements	xi
Chapter 1. General Effects of Disasters on Health	1
Health Problems Common to All Natural Disasters	2
Immediate Health Problems Related to the Type of Disaster	5
Myths and Realities of Natural Disasters	9
Chapter 2. Structuring Health Disaster Management	11
National Disaster Management Agencies	12
National Health Disaster Management Program	13
Health Disaster Coordinator	13
Assessing Risk	14
Training	14
Evaluation of the Health Disaster Management Program	16
Chapter 3. Disaster Preparedness	17
Preparedness in the Health Sector	17
Risk Analysis and Development of Realistic Scenarios	17
Health Policy and Legislation on Disasters	18
Preparation of Disaster Plans	18
Coordination Mechanisms	19
Relations with the Media	20
Technical Health Programs	20
Chapter 4. Disaster Mitigation in the Health Sector	24
Health Sector Disaster Mitigation Programs	24
Vulnerability Analysis in Health Facilities	25
Disaster Mitigation in Health Facilities	26
Disaster Mitigation in Drinking Water Supply and Sewerage Systems	27
Chapter 5. Coordination of Disaster Response Activities and Assessment of Health Needs	30
National Emergency Committee	30
Health Emergency Committee	31
Assessment of Needs	31
Methods of Gathering Information after Hazard Impact	34

Chapter 6. Mass Casualty Management	38
Prehospital Emergency Care	38
Hospital Reception and Treatment	40
Redistribution of Patients between Hospitals	40
Chapter 7. Epidemiologic Surveillance and Disease Control	43
Risk of Outbreaks Following Disasters	43
Setting Up a Disease Surveillance System	44
Presentation and Interpretation of Collected Data	46
Laboratory Services	46
Vaccination and Vaccination Programs	47
Transmission of Zoonoses	48
Chapter 8. Environmental Health Management	50
Priority Areas for Intervention	50
Water Supply	53
Food Safety	55
Basic Sanitation and Personal Hygiene	55
Solid Waste Management	56
Vector Control	56
Burial of the Dead	57
Public Information and the Media	57
Chapter 9. Food and Nutrition	59
Expected Consequences of Disasters on the Food Chain	59
Possible Adverse Effects of Large-Scale Food Distribution	60
Setting Priorities	60
Immediate Relief	61
Estimating Food Requirements	61
Procurement	62
Surveillance	63
Chapter 10. Planning, Layout, and Management of Temporary Settlements and Camps	64
Planning Settlements and Camps	64
Setting Up Camps and Settlements	64
Site Selection	65
Camp Layout	65
Camp Services	66
Chapter 11. Communications and Transport	67
Telecommunication	67
Transportation	73
Chapter 12. Managing Humanitarian Relief Supplies	75
Basic Principles	75
The Logistical Supply Chain	76
Supply Management	76

List of Essential Drugs	80
Requesting International Assistance	80
Chapter 13. International Humanitarian Assistance	82
Humanitarian Agencies	82
The Armed Forces	86
Obtaining International Disaster Relief	86
Coordinating International Humanitarian Assistance	88
Chapter 14. Reestablishing Normal Health Programs	91
Long-Term Health Effects Caused by Disasters	91
Reestablishing Normal Health Services	92
Assessment, Repair, and Reconstruction of Damaged Facilities and Lifelines	92
Annex I. Implementing a National Disaster Mitigation Program for Hospitals	95
Annex II. SUMA—A Humanitarian Supply Management System	97
Annex III. International Health Humanitarian Assistance	100
Annex IV. External Agencies Providing Health Humanitarian Assistance . . .	102
Selected Bibliography and On-line Information Sources	111

PREFACE

Two decades have passed since the Pan American Health Organization published the first edition of these guidelines. In the intervening years, disaster prevention, mitigation, and preparedness has evolved in important ways. Clearly, it was time for us to revisit this publication.

Twenty years ago, disaster management was simply left to a few dedicated professionals. Roles were clear: rescue workers rushed to help victims and certain agencies stepped in to provide temporary shelter and food. And society at large, a while after the impact, erased the disaster from its memory—until the next one came to wreak new destruction.

Unfortunately, disasters in the Americas and throughout the world have provided ample opportunities to test the policies and recommendations set out nearly twenty years ago. Over time, the approach has changed.

Today, the management of humanitarian assistance involves many more and different players, and disasters are recognized as public health priorities in which the health system plays a significant role. Today, prevention, mitigation, and preparedness are part of the vocabulary of disaster administrators in national and international organizations and, more importantly, they are used to advance the cause of disaster reduction. Today, society's involvement in disasters both precedes the impact and remains alive long after. Finally, the interrelationship between human development and disasters is better understood today—how disasters can permanently damage a country's economy, but, at the same time, how the path toward development may put a country at greater risk to the destructive consequences of natural disasters.

We are pleased to offer these updated guidelines. They include all the principles and recommendations that have withstood the test of time and new concepts and understanding gleaned along the way. May they strengthen disaster prevention, mitigation, and preparedness in our countries. May they save lives.

George A.O. Alleyne
Director

INTRODUCTION

This publication echoes the 1981 *Emergency Health Management after Natural Disaster* (Scientific Publication No. 407), but it is a whole new book, with a fresh organization and much new content. It sketches the role the health sector plays in reducing the impact of disasters and describes how it can carry it out.

These guidelines aim at presenting a framework that an administrator can rely on to make effective decisions in managing the health sector's activities to reduce the consequences of disasters. It does not pretend to cover every contingency. In fact, some of the suggested procedures may need to be adapted to fill some local needs. We hope that this book will help to develop manuals that can be tailored to local conditions.

The book's 14 chapters and 4 technical annexes describe the general effects of disasters on health, highlighting myths and realities. Although every disaster is unique, there are common features that can be used to improve the management of humanitarian assistance in health and the use of available resources.

Chapter 2 is one of the main innovations. It summarizes how the health sector must structure itself and work with other sectors to cope with disasters. The chapter covers the health sector's activities for reducing the consequences of disasters that affect response, preparedness, and mitigation phases, pointing out where these are interdependent.

Chapter 3 deals with disaster preparedness—its multisectoral nature and its specific application in the health sector. It sets forth guidelines for preparing health sector plans, means of coordination, and special technical programs that cover every aspect of normal operations before a disaster hits.

Chapter 4 also includes new material. It deals with the disaster mitigation activities that the health sector must promote and put in place. Mitigation measures are designed to reduce the vulnerability to disasters in health establishments (including drinking water and sewerage systems) and to reduce the magnitude of the disaster's effects. Mitigation activities complement preparedness and response activities.

Chapter 5 deals with the response to disasters, as well as its coordination and the evaluation of health needs. Chapters 6 through 11, and Chapter 14, retain the organization of the 1981 guidelines, but they have been updated. Chapter 12, dealing with humanitarian supplies, and Chapter 13, dealing with humanitarian assistance also have been revised in-depth.

Finally, two of the four annexes—the one dealing with the management of supplies and the one dealing with the national mitigation program—are entirely new; the remaining two have been updated.

This book is aimed primarily at health sector professionals who participate in disaster preparedness, response, and mitigation. The intersectoral perspective is now so essential, however, that anyone interested in disaster reduction will find here a useful primer. Public health students and professors also can rely on this book as a manual for formal or informal courses.

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