Public Health s197

Evaluating the Health Impact of Disaster Inquiries in Australia Joseph Cuthbertson

Monash University, Melbourne/VIC/Australia

Study/Objective: The aim is to evaluate contemporary Australian disaster practice.

Background: The evolution of disaster practice has displayed that the management of disasters extends beyond immediate response needs, and that effective recovery from these events requires a broad, coordinated capacity building perspective, rather than a traditional short term response effort. The concept and practice of reducing disaster risk can be achieved through systematic efforts to analyse and manage the causal factors of disasters, rather than apply current, operational, response designed risk management actions. It is therefore timely to assess the relationship of proposed strategies, and the social determinants of health as a holistic approach to disaster practice.

Methods: Contemporary Australian disasters inquiries were to determine what, if any recommendations support action on the causal factors of health and wellbeing as described by the World Health Organization (WHO), using the Social determinants of health as a reference standard. The intent was to examine whether the recommendations undertook action on improving public health, and thus improved community resilience and reduced vulnerability.

Results:

- Seven post disaster inquiries were reviewed.
- Although the scope and Terms of Reference of reports were broad enough to be inclusive of risk, risk factors and resilience, the recommendations focused primarily on emergency management structure and practice, and demonstrated low engagement in health, health equity, and/or health protection as drivers or outputs.

Conclusion: The National Strategy for Disaster Resilience has also identified that disasters are increasing in their complexity and frequency. Priorities of prevention and mitigation have been firmly embedded within this strategy, to mitigate the effects of disasters upon the community. There is an opportunity to further engage public health practice with disaster management professions and examine:

- what role does disaster health practice play in shaping the social environment in ways conducive to better health and,
- how interventions can assume wider responsibility for creating more healthy, resilient societies

Prehosp Disaster Med 2017;32(Suppl. 1):s197 doi:10.1017/S1049023X17005155

The Expert Group Health Research and Care after Disasters and Environmental Crises: An Analysis of Research Questions Formulated by Dutch Health Authorities for the Expert Group between 2006 and 2016 Dianne Alting¹, Michel L.a. Dückers², Joris Yzermans³

1. Centre For Environmental Safety and Security, The National Institute for Public Health and the Environment (RIVM), Bilthoven/Netherlands

- 2. Healthy Communities, NIVEL, Utrecht/Netherlands
- 3. NIVEL, Utrecht/Netherlands

Study/Objective: The aim of this study is (1) to examine developments in the research questions, submitted to the Expert Group Health Research and Care after Disasters and Environmental Crises between 2006 and 2016, and (2) to explore implications of the research questions for the nature of advice given to national and local health authorities.

Background: After the Bijlmermeer plane crash (1992) and the Enschede fireworks disaster (2000), the need to rapidly enclose available knowledge on disaster health research and psychosocial support in crisis situations was broadly recognized in the Netherlands. A decade ago the Dutch ministry of health installed the Expert Group to assist health authorities in addressing complex issues raised by (potential) public health crises.

Methods: Questions submitted to the Expert Group were categorized along their possible knowledge objectives: (1) health care provision in practice, (2) policy-making, (3) public interest, and (4) scientific interest. Stakeholders were interviewed to gain a better understanding of the advice and its implementation in relation to the crisis context.

Results: Despite notable variation in cases and type of questions, most of the 24 questions were aimed at practical health care provision, policy-making and public interest. In practice, the Expert Group recommended approaches that could be more passive or active. Regardless of the proposed attitude, a safety valve should be embedded in the process to guard public health interests. For instance, a possible lesson to verify (learned from a long-lasting soil remediation of a former tarmac construction site), is that a more proactive attitude by the Expert Group in future cases might prevent unnecessary hiccups in addressing health hazards (i.e. reduce exposure of citizens to stressful circumstances).

Conclusion: Discussion: Several practical recommendations were formulated based on the material. Evaluation of advice and its implementation is important for quality improvement.

Prehosp Disaster Med 2017;32(Suppl. 1):s197 doi:10.1017/S1049023X17005167

Conceptualizing the Essential Elements of Public Health Emergency Preparedness in Canada

Yasmin Khan¹, Tracey O'Sullivan², Jennifer Gibson³, Adalsteinn Brown⁴, Bonnie Henry⁵, Melissa Genereux⁶, Sarah Nayani¹, Shannon Tracey¹, Brian Schwartz¹

- 1. Public Health Ontario, Toronto/ON/Canada
- 2. Interdisciplinary School Of Health Sciences, University of Ottawa, Ottawa/ON/Canada
- 3. Joint Centre For Bioethics, Dalla Lana School Of Public Health, University of Toronto, Toronto/ON/Canada
- 4. Institute Of Health Policy Management And Evaluation, University of Toronto, Toronto/ON/Canada
- 5. British Columbia Ministry of Health, Victoria/Canada
- 6. Département Des Sciences De La Santé Communautaire, University of Sherbrooke, Sherbrooke/QC/Canada

Study/Objective: This research aims to conceptualize the essential elements of public health emergency preparedness in Canada.