

Disaster Preparedness at the Primary Health Care Level: The Proposal of a New Framework

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Introduction: With the publication of the Health Emergency and Disaster Risk Management (H-EDRM) Framework in 2019, the World Health Organization (WHO) emphasized the need for disaster preparedness in all sectors of the health system, including primary health care (PHC). PHC disaster preparedness plays a crucial role in guaranteeing continuity of care and responding to the health needs of vulnerable populations during disasters. While this is universally acknowledged as an important component of disaster management (DM), there is still a severe paucity of scholarship addressing how to practically ensure that a PHC system is prepared for disasters. The objective of this study is to propose a new framework that describes key characteristics for PHC disaster preparedness and lays the groundwork to deliver operational recommendations to assess and improve PHC disaster preparedness.

Method: A systematic literature review including the following online scientific databases was performed: Cochrane Library, Embase, Medline, National Library of Medicine, PubMed, Scopus, and Web of Science. Gray literature was also found by searching in: Trove, Mednar, and OpenGray. A total of 145 records were analyzed.

Results: Twenty-five characteristics that contribute to a well-prepared PHC system were identified and categorized according to the WHO Health System Building Blocks to form a new PHC disaster preparedness framework.

Conclusion: The findings will contribute to the elaboration of a set of guidelines for PHC systems to follow in order to assess and boost their disaster preparedness. This will hopefully help to raise awareness among international policymakers and health practitioners on the importance to design interventions that integrate PHC into overall DM strategies, as well as to assess the preparedness of PHC systems in different political, developmental, and cultural contexts. The proposed framework is currently being used by our research group as groundwork for the creation of an assessment tool for evaluating all-hazards preparedness at the PHC level.

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Scoping Review of Exploring Primary Health Care Providers Services to Increase Vulnerable Population Disaster Preparedness

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Introduction: Primary healthcare providers (PHCPs) are uniquely positioned to evaluate and increase vulnerable patients' disaster preparedness, in that they have detailed information about their medical needs, resources, and limitations. Nevertheless, it is still unclear what their roles and services are in this field. This study aimed to review the literature on PHCPs services to prepare the vulnerable population for disasters.

Method: MEDLINE, Scopus, and PubMed databases were searched. Inclusion criteria include peer-reviewed articles published in English with no restriction on publication date. In order to obtain a broad perspective on the subject, the study type was not limited. The retrieved articles were imported into EndNote Reference Manager to manage duplications. Then, the reference lists of retrieved articles were checked for the relevance of the title and abstract. Lastly, fulltext articles identified were inspected against the inclusion criteria. Thematic analysis was performed to consolidate the commonalities in PHCPs roles and services for disaster preparedness.

Results: From the database search, 2193 articles were retrieved and 844 duplications were eliminated. Afterwards, 1349 articles were screened based on title and abstract, 49 full-text articles were assessed for eligibility, and 22 full-text articles were included. The six themes associated with services provided by PHCPs were emerged as follows: identifying vulnerable groups and assisting them in disaster planning, providing written materials and/or recommendations; protecting vulnerable population' records; educating staff, vulnerable clients, and their caregivers; coordinating disaster planning and response across agencies; routine assessment of disaster preparedness, and planning for evacuation.

Conclusion: This scoping review reveals that the literature on PHCPs services to improve vulnerable populations' disaster preparedness is limited. Consequently, there is a need for scientific research to increase the existing capabilities of PHCPs for vulnerable population disaster preparedness and identify barriers and facilitators affecting their coordination with disaster management agencies.

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