2. TOOLS

2.13. Training for Emergency Health Management

2.13. Training for Emergency Health Management

Overhead Transparencies

2.13.1. To Train, Definitions
2.13.2. Training can be more than transmitting skills
2.13.3. Training is Essential Part of Capacity Building
2.13.4. Training for Emergency Health Management, Tasks
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2.13.6. Training for Emergency Health Management, figure 1
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2.13.11. Training for Emergency Health Management, Two statements
2.13.13. Training for Emergency Health Management, Focus
2.13.14. Training for Emergency Health Management, Policy Makers, Managers, Field Workers
2.13.15. Training for Emergency Management, Subjects and Audiences
2.13.17. Emergency Health Training, Modules
2.13.18. Training for Emergency Health Management, What and How?
2.10. Training for Emergency Health Management
Trainers' Guide

Objectives:
To clarify the role and limitations of training in EHM and to introduce a strategy and syllabus of EHTP; to illustrate how the curriculum for EHM fits with other medical and non-medical disciplines; to illustrate how different situations call for different types of training.

(Key-message/Attitudes)

Key-message:
Training is a component of Capacity Building, but Capacity Building is much more than Training only. Emergency Health Management is a complex discipline. Systematisation of the discipline is possible. People should be trained looking at where they stand (i.e. what they need to know) in the Disaster-Development Continuum. Training in Emergency Management cannot do without a certain background ("techniques").

2.13.1. To Train, Definitions
Present and discuss. Highlight the idea of guiding the growth.

2.13.2. Training can be more than transmitting skills
Present and discuss. Especially in the practice of Development Assistance, training often implies objectives that are more than just 'teaching skills'.

2.13.3. Training is Essential Part of Capacity Building
Present and discuss. Training is a key component of Capacity Building, but Capacity Building means much more than just Training. Capacity for emergency management is made of Information, Authority, Plans and Partnerships. Each one of these components requires to be supported by training, but it needs other inputs, too. E.g. to have ‘Information’ one needs training in data collection, etc, but also data-processing and telecommunication equipment, forms, norms to use them etc.

2.13.4. Training for Emergency Health Management, Tasks
Present and discuss. Training for emergency health management must explain what disasters and emergencies are and why they are relevant for health workers. It must also promote systems and elements that are essential for effective action in emergency. Finally, it must facilitate collaboration and Co-ordination by fostering a common language among those involved.

2.13.5. Contents
Present and discuss. Looking at the contents of training for emergency health management,
one can visualise a curriculum with four major groupings: ‘Overviews’, ‘Tools’, ‘Special Concerns’ and ‘Techniques’.

2.13.6. Training for Emergency Health Management, Figure 1
Present and discuss. ‘Overviews’ deal with what emergency health management is about and Why it is relevant for health workers. ‘Tools’ deal with the activities, functions and systems that can and must be applied in any emergency situation. ‘Special Concerns’ deals with What is relevant in different specific situations.

2.13.7. Training for Emergency Health Management, Figure 2
Present and discuss. Essentially, ‘Techniques’ deals with ‘How to a) better fulfil one’s responsibilities as health worker, and b) better collaborate with partners from other disciplines and sectors’.

2.13.8. Training for Emergency Health Management, Figure 3
Present and discuss. ‘Overviews’, ‘Tools’ and ‘Special Concerns’ usually constitute matter for one or more workshops. ‘Techniques’ are better dealt with as part of short courses.

2.13.9. Training for Emergency Health Management
Present and discuss. In order to be appropriate and effective training for emergency health management must take into account a large range of variables.

2.13.10. Disaster Management and Emergency Management
Present briefly. Use the drawing of the disaster-development continuum to illustrate the fact that emergency management must address many different situations.

2.13.11. Training for Emergency Health Management, Two statements
Present and discuss.

2.13.12. Training for Emergency Health Management, Knowledge, Attitudes, Skills
Present and discuss. There are different needs for training in each different phase of the Disaster-development Continuum. In certain situations, Knowledge will be more important than Attitudes and Skills. In others, the main focus will be on Attitudes or Skills.

Use the drawing to illustrate the message of the previous OHT. The knowledge, attitudes
and skills that are needed along the disaster-development continuum differ, and the methods for transmitting them differ too.

2.13.14. Training for Emergency Health Management, Policy Makers, Managers, Field Workers
Present and discuss. There are different training audiences that are more relevant in each different phase of the Disaster-development Continuum.

2.13.15. Training for Emergency Management, Subjects and Audiences
Use the drawing to illustrate the message of the previous OHT. All along the disaster-development continuum the subjects that are more relevant for emergency health management change, and the audiences of the training too.

Present and discuss. The framework shows one possible way to systematise the training. Looking at the five components of Capacity for emergency management (Authority, Plans & procedures, Institutions, Partnerships, and Information) one can identify five medium-term objectives. These can become six if one considers that also the WHO country office must grow, in order to support the process. For each of these objectives, it is possible to identify the audience, the format, the specific objectives and the topics of the training.

2.13.17. Emergency Health Training, Modules
Present and discuss. A summary of the modules that are more relevant for different audiences. All these modules are available at PTC/EHTP.

2.13.18. Training for Emergency Health Management, What and How?
Present and discuss. If one wants the training to be relevant, he/she must develop appropriate training materials and set realistic objectives. Training institutions must work continuously at developing their own capacities.

Stand-alone. It can be integrated by presentations and/or discussions on the Selections of Trainees (2.15) and on Advanced Training for Emergency Health Management (also by PTC/EHTP).

Essential Reading:
- Training Guidelines for Disaster Management, WHO/PTC, 1994
Training for Emergency Health Management

To train:
to teach a specified skill,
especially by practice
(Oxford Pocket Dictionary, 1992)

and also
bringing to efficiency by exercise
and

 guiding the growth
2.13.2. Training can be more than transmitting skills

TRAINING FOR EMERGENCY HEALTH MANAGEMENT

Training can be more than transmitting skills.

Training can

• promote awareness of why those skills are needed,

• foster the policies or programmes where they can be put to use.

Training can be the first step towards new strategies and structures.
Training is essential part of capacity building for emergency health management.

Capacity for emergency management requires:

- Information on the problems to be tackled
- Authority to act
- Plans, resources and procedures
- Partnerships
Training for Emergency Health Management must

1. cover:
   • the concepts of disaster and emergency
   • the health aspects of different emergencies

2. promote:
   • systems for the collection, analysis & dissemination of information
   • legislation, strategies and structures
   • plans and procedures

3. facilitate:
   • the mobilisation of related disciplines
   • co-ordination with partners
   • public education, awareness & participation.
TRAINING FOR EMERGENCY HEALTH MANAGEMENT

CONTENTS

• **Overviews:**
  e.g. definitions, the role of Health, etc.

• **Tools:**
  Activities: information co-ordination, etc
  Systems: national and international

• **Special Concerns:**
  Nutritional Emergencies: e.g. drought relief
  Complex Emergencies: e.g. health priorities in War
  Medical/Civil Emergencies: e.g. epidemic control, mass casualty management

• **Techniques:**
  sectoral: e.g. Triage
  inter-sectoral: Search & rescue, logistics
Training for Emergency Health Management

1. OVERVIEWS
   concepts & definitions; epidemiology of disasters;
   the role of the Health sector in emergency management

   What this is all about and
   why it is relevant for the Health workers

2. TOOLS
   What you can & must apply in any situation

   Emergency management
   ACTIVITIES
   Information management;
   Planning;
   Assessment;
   Coordination;
   Community mobilization;
   Training

   Emergency management
   SYSTEMS
   National structures;
   Logistics;
   Communications;
   Civil protection;
   Lifelines;
   International relief system;
   WHO & the UN;
   CAP

   Nutritional emergencies
   food & emergencies;
   managing food relief;
   drought;
   famine

   Complex emergencies
   Definitions & epidemiology;
   IDPs & refugees;
   PHC in emergency settlements;
   Health & Peace;
   Humanitarian principles

   “Medical” emergencies
   Epidemic preparedness;
   Mass casualty management;
   Hospital preparedness
Training for Emergency Health Management

1. Inter-sectoral
   to better collaborate with partners
   - Search & rescue
   - Safety procedures
   - Building triage critical incident Management
   - Procurements, Guidelines for donations, Logistics, Stock
   - Training & Communications skills
   - Data management, Hazard and Vulnerability Assessment, Planning techniques, Project formulation, Monitoring, Evaluation, Reporting

2. Health
   to better fulfil your responsibilities
   - First Aid, Casualty, Triage, Resuscitation and Stabilization
   - War Surgery, PCM management, Stress management
   - Biostatistics
   - Anthropometry
   - Epidemiology of specific hazards
   - Disease Control
   - Environmental Health Site planning
   - Emergency H. Kits Cold Chain Health logistics

Rapid Need Assessment
The Consolidated Appeal Process
Training in Emergency Health Management

Themes & Formats

OVERVIEWS
Definitions, etc

Themes for one or more workshops (2-4 days)

TOOLS
Activities
Systems

SPECIAL CONCERNS
Nutritional emergencies
Complex emergencies
‘Medical’ emergencies

The workshops may stimulate short refreshment courses

The background is needed for effective implementation of the above

TECHNIQUES

INTER-SECTORAL
Search & rescue,
Risk-assessment,
Planning,
Logistics, etc.

HEALH
Search & rescue,
Risk-assessment,
Planning,
Logistics, etc.

Rapid Need Assessment

The Consolidated Appeal Process

Best administered as modules in short courses (2-4 weeks)
Training for emergency health management must

- Address different hazards, vulnerabilities and capacities
- Suit different levels of development
- Deal with complementary activities
- Link with complementary activities
- Proceed in unison with partners
- Encompass the national, sub-national and international scopes
- Take advantage of lessons learnt and national experiences
Disaster Management and Emergency Management

Pre-disaster: risk reduction

Mitigation/Prevention

Response/Relief

Rehabilitation

Reconstruction

Post-disaster: Recovery

DISASTER MANAGEMENT

DEVELOPMENT

RELIEF
Training
for Emergency Health
Management

The
Disaster- Development Continuum
needs a holistic approach.

Nonetheless,
training priorities and methods
change along the continuum.
Training for Emergency Health Management

Disaster Prevention demands knowledge of the Continuum.

Training can be done through formal presentations.

Preparedness and Readiness are attitudes.

Training is best done through participatory planning and simulations.

Response requires skills.

Skills are best transmitted through briefing and supervision.
2.13.13. Training for Emergency Health Management, Focus

**FOCUS**

**Preparedness**

**Response**

**Rehabilitation**

**Reconstruction**

**Disaster**

**“KNOWLEDGE”**

- aims: Awareness & Capacity
- Policies
- Institutions
- Structures
- Long-term planning
- HEALTH
- PROMOTION & PREVENTION
- Method: Formal Training

**“ATTITUDES”**

- aims: Readiness
- Systems
- Contingency plans
- Information
- PUBLIC HEALTH MANAGEMENT
- Method: Participatory planning

**“SKILLS”**

- aims: Performance
- Techniques
- Operations
- Projects
- Assessment & monitoring
- DELIVERY OF SERVICES
- Method: Briefing, supervision & de-briefing

**Method:**

**Formal Training**
2.13.14. Training for Emergency Health Management, Policy Makers, Managers, Field Workers

For Disaster Prevention, policy makers must be
  aware of hazards and vulnerabilities
  able to manage risks

This is important also for the new generations, e.g. for medical students.

For Preparedness, managers must know
  the causes of disasters
  how relief systems work

For Response, field workers must
  understand the vital needs of the population,
  know what to do against different hazards,
  know how to co-ordinate with partners
Training for Emergency Management, Subjects and Audiences

SUBJECTS and AUDIENCES

Disaster

Preparedness

* Epidemiology of Disasters
* Risk-assessment
* Early warning systems
* Contingency planning
* The national and international relief systems

Managers, at Central & District levels

Response

* Vital needs
* Rapid-assessment
* Hazard-specific health management e.g.: Mass Casualty Management
* Nutrition in emergencies
* Epidemic Control
* Health in refugee camps
* Information systems and coordination
* Emergency appeal processes

Managers and field workers

Rehabilitation

* Prevention

* Hazard
* Vulnerability
* Capacity
* Public Health and the Disaster-Development Continuum
* Definitions and language of Disaster & Emergency Management
* The preparedness Planning Process

Managers, at Central & District levels

Medical students

Reconstruction
## Capacity building for Management: a framework of the relevant training activities

<table>
<thead>
<tr>
<th>Objective</th>
<th>Audience</th>
<th>Format of Training</th>
<th>Working Objective</th>
<th>Main Topics</th>
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</thead>
<tbody>
<tr>
<td>to develop national legislation and policy for emergency management</td>
<td>a) political decision makers&lt;br&gt;b) senior MOH staff and other partners</td>
<td>national conference</td>
<td>to assess the country’s situation and raise political awareness</td>
<td>Disaster-development continuum&lt;br&gt;Preparedness planning process&lt;br&gt;Emergencies</td>
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<tr>
<td>to develop plans and procedures for emergency management, co-ordinated at international, national &amp; sub-national levels</td>
<td>MOH managers, of national &amp; sub-national levels national &amp; international</td>
<td>technical meetings/workshops</td>
<td>to draft technical documents for political endorsement &amp; follow-up</td>
<td>Hazard, vulnerability, capacity prevention, preparedness, response&lt;br&gt;Early warning and relief systems&lt;br&gt;Preparedness &amp; contingency planning&lt;br&gt;Project formulation&lt;br&gt;According to needs &amp; circumstances e.g. disasters &amp; emergency management&lt;br&gt;Complex emergencies&lt;br&gt;Mass casualty management&lt;br&gt;Epidemic control, etc.</td>
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<td>to strengthen institutional and human resources for emergency management</td>
<td>MOH personnel NGO personnel&lt;br&gt;other operational partners&lt;br&gt;medical students&lt;br&gt;medical school teachers</td>
<td>national conference&lt;br&gt;technical meetings/workshops</td>
<td>to identify relevant message and appropriate audiences and media &amp; media to draft plans of action for political endorsement and follow up to plan for community mobilisation</td>
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<tr>
<td>to develop programmes for public education, awareness and community participation</td>
<td>Education and Information from MOH and other national partners:&lt;br&gt;National Emergency Commission, Information, interior, education, NGOs District Health Management staff</td>
<td>technical meetings/workshops&lt;br&gt;workshop</td>
<td>to identify available indicators to facilitate networking to make compatible parallel systems to identify sources and systems to promote community programmes</td>
<td>Hazard, vulnerability, capacity prevention, preparedness, response&lt;br&gt;Early warning&lt;br&gt;Preparedness &amp; contingency planning&lt;br&gt;Project formulation</td>
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<td>to promote the collection, analysis and dissemination of information related to emergencies and disasters</td>
<td>MOH epidemiologists &amp; nutritionists&lt;br&gt;NGO epidemiologists &amp; nutritionists Information officers from other relevant sectors of Government, UN agencies and other partners</td>
<td>technical meetings/workshops&lt;br&gt;at country &amp; inter-country levels</td>
<td>to raise awareness and consolidate experiences to promote country programmes to facilitate co-ordination of efforts</td>
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<td>to provide administrative support for WHO/EHA activities in the country</td>
<td>WHO regional and country staff&lt;br&gt;MOH senior staff and representatives of international partners</td>
<td>technical meetings with RO’s focal points country workshops/briefing sessions country UN inter-Agency meeting technical meetings with other WHO programmes</td>
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<td>The D/D continuum and public health WHO resolutions/strategies for EHA Approaches to preparedness planning Co-ordination techniques</td>
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<td>Emergency Health Training: Modules</td>
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<tr>
<td>1.</td>
<td>Emergency health management for WHO staff and MOH senior staff</td>
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<td>Emergency health management for MOH district staff</td>
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<td>Risk/Need assessment Contingency planning Early Warning Response system</td>
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<td>3.</td>
<td>Emergency health management for post-graduate</td>
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<td>Principles Risk/Need assessment Response systems Multi-disciplinary approach</td>
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<td>4.</td>
<td>Special courses:</td>
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<td>4.1 Mass casualty management Triage, Critical incident management, Treatment of war injuries.</td>
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<td>4.2 Nutrition in emergencies Assessment and surveillance, Food aid mgt. of acute malnutrition.</td>
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<td>4.3 Supplies and logistics Principles, Inventories and tracking systems, stockpiling.</td>
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<td>4.4 Psychosocial traumas Diagnosis and treatment, stress management.</td>
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<td>4.5 Documentation, security, &amp; communications Info/documentation systems, security assessment and procedures.</td>
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<td>5.</td>
<td>Basic emergency health management for CHWs</td>
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<td>First aid Information from other modules tailored to existing CWH syllabus</td>
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TRAINING FOR EMERGENCY HEALTH MANAGEMENT

WHAT?

• Stay abreast of situations & programmes:
  by clearing information
  by developing documentation
  by study and research
  by networking with partners

• Stimulate appropriate demand
  (i.e. a 4-days workshop CANNOT produce a Preparedness Plan)

HOW

• by building human capacities
• by working on teaching aids
• by practising training
• by feedback and evaluation