

# HEALTH DISASTER RISK MANAGEMENT TRAINING IN THE PACIFIC



## The Problem and Current Situation

Studies have identified serious deficiencies in the Pacific related to health, the medical workforce, and health facilities. The lack of certified / qualified Health Disaster Risk Managers magnifies regional, national, and community vulnerability to both natural and man-made disasters. Currently, there are no formal training programs to train certified / qualified Health Disaster Risk Managers in the Pacific.

## Overall Project Goal

The overall goal is to train Health Disaster Risk Managers (HDRM) for the Pacific. The HDRM will provide the leadership role through an all-health hazards approach including prevention, mitigation, preparedness, response, and recovery. In developing this project, every effort will be made to utilize existing Pacific institutions and agencies to achieve training goal and objectives. The Secretariat of the Pacific Community (SPC) will take the lead institutional role to conduct an initial organizational workshop to bring together the School of Public Health & Primary Care / Fiji School of Medicine (SPH&PC) and its counterpart Francophone Educational Institutions (FEIs: local universities or extension educational programs in New Caledonia and French Polynesia). The Anglophone and Francophone counterparts will collaborate to develop a core regional curriculum to train regional Health Disaster Risk Managers. These institutions will also recruit and hire faculty and trainers, and train up to 440 students from 22 Pacific Island countries over a seven-year period. The method of instruction will follow a flexible learning process (face-to-face learning and, where possible, a mix of distance learning techniques) appropriate to the different educational needs and available communications technologies of the target countries. The SPH&PC will conduct both undergraduate and postgraduate training courses leading to a formal Public Health Certificate in HDRM and beyond (Diploma, Bachelors, and Masters Degree) in 18 Anglophone countries. The counterpart FEIs will conduct HDRM training through fixed period training programs (one-month per year) in four Francophone countries over a seven-year period. An initial workshop at SPC will provide

the venue and commence the process for direct and ongoing communications between SPH&PC and FEIs to share curricula, teaching methods, and continuing training successes and challenges. Thereafter, a yearly annual workshop at SPC will provide a face-to-face venue for educators to formally discuss and share their ongoing training activities and respond to annual formative evaluation of the project.

## Objectives, Activities and Indicators

The concept of developing a HDRM training program was endorsed by the Ministers of Health attending the Second Disaster Risk Management Summit in Fiji June 2005 and forwarded to the Round Table Meeting at the WHO Regional Health Ministers conference in Noumea, New Caledonia in September 2005 for broader endorsement. By the end of this seven-year project, 440 Health Disaster Risk Managers from 18 Anglophone and 4 francophone Pacific Island countries will have been trained. This will be done by the following:

**Objective 1:** Workshop to initiate framework and communication process between SPH & PC, and FEIs.

1. Within three months of funding, SPC will sponsor a workshop in Noumea to bring together a small group of medical / public health educators, and administrators from the SPH&PC and counterpart FEIs to select HDRM experts to initiate a regional institution-to-institution framework and communication process and develop a regional core HRDM curriculum.
2. Between subsequent annual workshops, participating institutions will, on an ongoing basis, directly share their curriculum and implementation progress with each other.
3. A formative evaluation process of the project will be agreed upon by SPC and the participating institutions. The evaluation will be conducted annually and shared with the participating Ministries of Health. Thereafter, SPC will sponsor annual workshops to formally discuss, in a face-to-face fashion, project successes and challenges and report on annual formative evaluation of program progress.

**4. Expected Outcomes:**

- 1) List of participants of the initial meeting.
- 2) Yearly formative evaluation produced by SPC

**Objective 2:** A regional core curriculum will be developed

1. Within 6 to 12 months of the initial SPC sponsored workshop
  - 1) a regional core curriculum will be developed by the participating institutions
  - 2) the curriculum will be shared electronically and discussed by conference telephone. The unanimous adoption of a common regional curriculum is not necessarily the goal of the project. The curriculum can be adapted to meet local educational needs and availability of communication technologies of the participating countries.
- 3) The SPH&PC will develop an undergraduate and postgraduate curricula leading to a formal Public Health Certificate in HDRM (five courses / 10 credits). The opportunity to continue on academically to higher qualifications (Diploma, Bachelors, and Masters Degrees) will be available.
2. In years one through three, a six-week training process will be initiated in six new PICTs per year. Thereafter, in years 2 though 7, one two-week course will be conducted in each country so that, by year seven, 360 health and emergency workers in 18 PICTs will have completed a Public Health Certificate in HDRM.
3. The counterpart Francophone educational institutions will develop a curriculum and process which will be taught annually over a one-month period to 80 or more health and emergency workers. Adaptation of this process into a larger educational framework, like that of the SPH&PC will be left up to FEI educators and participating Francophone Ministries of Health.
4. Within 6 to 12 months of the initial workshop, the teaching process will commence. Over a seven-year period, a minimum 440 health care workers and emergency managers will receive basic HDRM training in order to provide the leadership roles in their respective communities to deal with both environmental and man-made disasters.
5. SPC and participating educational institutions will agree to implement a formative evaluation process and format to assess whether the program is living up to its goals and objectives and is of merit and worth. These formative evaluations will be shared with the Ministries of Health of the participating countries.

**6. Expected Outcomes:**

- 1) English and French regional core curricula will be developed.
- 2) By the end of the project, the English curriculum will have been taught to 360 health and emergency workers and the French curriculum will have been taught to 80 health and emergency workers.
- 3) A formative evaluation form will have been developed.

**Collaborating Agencies**

A number of agencies and organizations at various levels of government will be involved in the effort as follows:

- \* Ministries of Health of Pacific Islands
- \* Universities in New Caledonia, French Polynesia, and Wallace and Futuna
- \* School of Public Health & Primary Care / Fiji School of Medicine
- \* University of the South Pacific
- \* Other Training & Technical Assistance Agencies

**Monitoring/ Evaluation Methodology**

At the beginning of the project and throughout its life, SPC and the participating educational institutions will agree on a format and process for formative evaluation to be conducted by external donor organizations. Donor organizations will be provided annual progress reports by SPC and the participating institutions. This formative evaluation report will be presented at the annual workshop sponsored by SPC. Stakeholders to receive the annual formative evaluation reports will include:

- \* Ministries of Health of Pacific Islands
- \* Western Pacific Regional Office / WHO
- \* Secretariat of the Pacific Community
- \* Participating Educational Institutions: SPH&PC / FSM, Counterpart French Educational Institutions (FEIs)
- \* Pacific Emergency Health Initiative / Centers for Disease Control and Prevention
- \* SOPAC

**Concept Proposal Contacts**

- \* Secretariat of the Pacific Community: Dr. Tom Kiedrzyński, tomk@spc.int
- \* School of Public Health & Primary Care / Fiji School of Medicine: Dr. Sitaleki Finau, s.a.finau@massey.ac.nz
- \* Francophone Representative: Dr. Dominique Marghem: dominique.marghem@sante.gov.pf
- \* Pacific Emergency Health Initiative / Centers for Disease Control & Prevention: Dr. Mark Keim, mkeim@cdc.gov
- \* U.S.-Associated Pacific Islands: Dr. Gregory Dever, gdever@palaunet.com

## Budget Summary

The total cost of the project over seven years is estimated to be \$4,531,560 USD with a small component of in kind contribution from the existing organizations. Funds are

needed for the project to commence since the existing regional organizations do not have the financial capacity to meet these costs.

Category	Project Expense (US\$)	In-kind Contribution	Total Budget
<b>1. Validation</b>		WHO/SPC	
<b>2. Annual SPC Meeting costs</b>			
<b>2.1 Organizational Meeting</b>	100,000 / yr		Y 1-7 \$700,000
<b>3. Curriculum development &amp; teaching</b>			
3.1 Consultant (fees & travel) SPH&PC:Yr 1: \$25, 000 FEIs: Year 1-7: \$80,000 / yr x 7	25,000 560,000		\$585,000
3.2 New faculty FTEs SPH&PC:Year 1-7:1 FTE (\$100,000) x 2 / year x 7yrs	1,400,000		\$1,400,000
3.3 Tuition – SPH&PC (\$500 per person per 2 credit course) -Year 1 – 20 persons /country x 6 countries -Year 2 – 20 persons per country x 12 countries -Year 3-5 – 20 persons per country x 18 countries -Year 6 – 20 persons per country x 12 countries -Year 7 – 20 persons per county x 6 countries	Y1 60,000 Y2 - 120,000 Y3-5 -180,000 Y6 - 120,000 Y7 - 60,000		Y1-7 \$900,000
3.4 Operational cost of faculties		Y1-7 50,000 / yr	Y 1-7 350,000
<b>4. Faculty &amp; trainer Travel and per diem</b>			
4.1 Travel & per diem – <b>SPH&amp;PC</b> Year 1 – 1 six-week session (\$9,300) x 6 new countries Y2 – 1 six-week session (\$9,300) x 6 new countries - 1 two-week session (\$5,100) x 6 countries Y3 – 1 six-week session (\$9,300) x 6 new countries - 1 two-week session (\$5,100) x 12 countries Y4-5-1 two-week session (\$5,100) x 18 countries Y6 – 1 two-week session (\$5,100) x 12 countries Y7 – 1 two week session (\$5,100) x 6 countries	Y1 - 55,800 Y2 - 86,400  Y3 - 117,000  Y4&5 - 91,800 Y6 - 61,200 Y7 - 30,600		Y1-7 534,600
<b>Sub Total</b>			4,119,600
Contingency 10%			411,960
<b>Total Project Expenses</b>			<b>4,531,560</b>

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