Module 6 Week Six

Population Health Emergency Preparedness

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Introduction

Emergency Community Preparedness Basics: Get Ready. Be Safe. Stay Healthy\

I decided to pursue this topic because I was surprised that the professor suggested this topic and because I knew I needed to be recertified.

Hurricane Katrina, which occurred in August 2005, took the lives of approximately 2,000 people and caused 125 billion dollars in damages. The day before Katrina hit, New Orleans Mayor Ray Nagin issued the city’s first-ever mandatory evacuation order. He also declared that the Superdome, a stadium located on relatively high ground near downtown, would serve as a “shelter of last resort” for people who could not leave the city. (For example, 112,000 people in New Orleans, nearly 500,000, did not have access to a car.) By nightfall, almost 80 percent of the city’s population had evacuated. Some 10,000 had sought shelter in the Superdome, while tens of thousands of others chose to wait out the storm at home. Neighborhoods that sat below sea level, many of which housed the city’s poorest and most vulnerable people, were at great risk of flooding.

After Hurricane Katrina, many states, including Massachusetts, were forced to review their emergency disaster plans because it was realized that Massachusetts did not have a good plan in place for its residents, especially the minority community.

I received a phone call from one of the nurses at the BPHC office stating that the department was looking for volunteers to be trained on the Emergency Preparedness Disaster Plan who would be willing to present the training to other organizations in the community. The Boston is Preparing. Are You training was established by BPHC.

A lecturer did the training, and a video was also a part of the training presented by the Del Valle Training Institution. An emergency backpack included a first aid kit, a flashlight with batteries, and a large waterproof zip-lock envelope for important personal documents, insurance papers, bank information, medical information, and family contact information. Fire blanket, rain poncho, instruction advised, non-perishable food items, dry cereal, fruit bars, four bottles of water, and one changing of cloth.

If the people who ended up at the Super Dome had an emergency preparedness backpack with some of the bare essentials or had some idea of what to pack upon evacuation, such as life-saving medications, a few bottles of water, non-perishable food, like granola bars, important medical papers, a flashlight, one set of changing clothes, and a portable radio, maybe the morbidity and mortality rate would have been lower.

After my training, I presented the program Boston is Preparing. Are you? to some of the community churches. BPHC provided bags that included some items I listed above and printed informational documents. I also did an awareness presentation on our neighborhood radio station and my TV show, Nurses Corner, on the Boston Neighborhood Network Community Television station.

The 2010 Haiti earthquake was a catastrophic magnitude 7.0 M earthquake that struck Haiti on Tuesday, January 12, 2010. The epicenter was near the town of Leogane, Quest department, approximately 25 kilometers west of Port-au-Prince, Haiti’s capital.

After hearing of the earthquake on the news, I immediately called my friend from Haiti, who I met in nursing school at Laboure; we remained friends throughout the years to ask her if her family in Haiti was okay. Unfortunately, she did lose a few family members, and so did my neighbor; he lost his nephew and his nephew's wife, who was only married a week before the earthquake struck.

A week or two after the earthquake, I received a call from my friend stating that Partners In Health (PHI), founded by Dr. Paul Edward Farmer, was looking for volunteers to travel to Haiti to work in the hospital for one week. They were sending teams of ten to twenty nurses per week. I was on my way to Haiti. All I can say is that I was devastated because what you saw on TV was just that: what the news people covered in a ten to fifteen-minute coverage. Working in the hospital

was challenging due to the language barrier and lack of supplies. During my week stay I prayed to God to give me the strength to give the best care I could to the patients I was assigned to. I also promised God that I would never complain again about what we need or do not have at the hospitals or clinics where I work in the United States.

shortness of breath and fever occurring in Wuhan, China. All initial cases seem connected

to the Huanan Seafood Wholesale Market.

COVID 2020: Were we ready? No!

* December 12, 2019

A cluster of patients in China’s Hubei Province, in the city of Wuhan, begin to experience the symptoms of an atypical pneumonia-like illness that does not respond well to standard treatments.

* December 31, 2019

The World Health Organization (WHO) Country Office in China is informed of several cases of a pneumonia of unknown etiology (cause) with symptoms including

When you are called and asked to serve, if you are physically, emotionally, and spiritually able and ready, you must serve. I was asked to help during the COVID crisis in our city, working with. The [Boston Medical Reserve​ Corps](https://www.boston.gov/government/cabinets/boston-public-health-commission/office-public-health-preparedness/boston-medical-reserve-corp) (Boston MRC) is a community-based volunteer program that prepares for and responds to emergencies.

Boston MRC volunteers prepare for and respond to emergencies to support the City of Boston's public health infrastructure. Members of the Boston MRC organize and train to address a wide range of challenges from disaster response to public health education. Boston MRC members from both the medical and nonmedical fields are leaders in their communities. They donate time and expertise to ensure all Bostonians, especially the most vulnerable, have access to the help they need during a public health emergency.​ We were asked to help by creating COVID-19 supply bags with COVID testing kits, masks, hand sanitizers, disinfected wipes, soaps, emergency flyers, monitoring crowds at vaccine sites, etc. Picking up supplies and delivering them to churches and food pantries, I made up bags with COVID testing kits, masks, and hand sanitizer and delivered them to my neighbors on my street.

The first case of COVID-19 was confirmed by state health officials on February 1. Massachusetts became the fifth state in the U.S. to report a case of COVID-19.[[1]](https://en.wikipedia.org/wiki/Timeline_of_the_COVID-19_pandemic_in_Massachusetts#cite_note-Burke-1) The individual, a [University of Massachusetts Boston](https://en.wikipedia.org/wiki/University_of_Massachusetts_Boston) student, had returned to Boston from [Wuhan](https://en.wikipedia.org/wiki/Wuhan), China. Upon returning to Boston he began experiencing symptoms and sought medical care.[[2]](https://en.wikipedia.org/wiki/Timeline_of_the_COVID-19_pandemic_in_Massachusetts#cite_note-Wertheim-2)[[3]](https://en.wikipedia.org/wiki/Timeline_of_the_COVID-19_pandemic_in_Massachusetts#cite_note-3)

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