

ACNM Disaster Preparedness and Response Caucus
Disaster Response Team (DRT) Preparation

Introduction:

Even the most experienced and proficient health care provider may not be prepared for living and working in a low-to-no-resource environment, where your co-workers are of variable quality and always changing, where there may be no electricity or running water, where the patients might have morbidities & cultural practices you are unfamiliar with, where the referral system is chaotic or non-existent, and where the ability to provide all the patients with the health care they need is often an impossibility. The following information, divided into 4 sections, is intended to assist you with being as prepared as possible before setting out on your volunteer activities. Reading this document and participating in the activities will prepare the midwife or student midwife to complete the Disaster Response Team registry application. If you are aware of other resources, please let the DPRC team know so we can improve this document!

Section 1: Education for working as a health professional in a disaster setting

Section 2: Health considerations for living and working in a disaster setting

Section 3: Practical and financial readiness to deploy to a disaster or crisis setting

Section 4: Personal preparation for leaving home

Section 1: Education for Working as a Health Professional in Disaster Settings

All potential volunteer health practitioners (VHPs) should participate in a standardized set of educational preparation so that the disaster agencies are assured that their VHPs are prepared for practice in a challenging setting. The educational activities listed below address various issues that pertain to living and working in a low-resource and unpredictable environment, often in an area where your co-workers and the community are of different backgrounds and cultures. Reading the following resources and participating in the activities should take the volunteer approximately 5-7 days, but of course can be worked on here and there for an hour or two over several weeks or months.

The following activities are either highly recommended or will be required prior to participating in the ACNM Disaster Response Team registry:

- Read the book *The Humanitarian Companion: A Guide for International Aid, Development, and Human Rights Workers* by John Ehrenrich (IDTG Publishing) [available new & used from online booksellers]. Much of the book discusses personal readiness to participate in humanitarian work, and is not exclusive to health care professionals. However, Chapter 5, 'Working with Survivors of Traumatic Experiences', is particularly important for volunteer health care workers. So, even if you only skim the rest of the book, do read Chapter 5 thoroughly. [Estimated time commitment: 1-3 days]
- Read the MISP (*Minimum Initial Service Package*) Modules and take the post-test to obtain the certificate from the Women's Refugee Commission (<http://misp.rhrc.org>). Free! [Estimated time commitment: 1/2 - 1 day]

- Familiarize yourself with content from the *Journal of Midwifery and Women's Health*, Volume 49, Issue S1: Special issue on Disasters available from www.midwife.org → Professional Resources (ACNM log-in then click on "ACNM Members Link"). [Estimated time commitment: 1/2 - 1 day]
- Obtain a (free) download of the *RHRC Emergency Obstetric Care* manual, and familiarize yourself with the contents, including the Tables & Checklists on pg. 18, 29-32, 34, 47-62, 63-65, 80-82. (<http://www.rhrc.org/resources/index.cfm?sector=safe>) Click on "Field Friendly Guide to Integrate Emergency Obstetric Care in Humanitarian Programs" to download the pdf. [Estimated time commitment: 1/2 day]
- Complete the MERET course modules on the following topics. (Note: \$35 charge for each topic.) (<http://www.cce.umn.edu/Minnesota-Emergency-Readiness-Education-and-Training/index.html>) [Estimated time commitment: 1-2 days]
 - Caring for Newborns
 - Caring for Postpartum and Breastfeeding Women
 - Caring for Pregnant/Birthing Women/Newborns during Disaster
 - Caring for Women Giving Birth
 - Transmission-Based Precautions
 - Applying Infection Control Principles: Case-Based Assessment
- Go to <https://breastfeedingusa.org/content/article/disaster-preparedness-breastfeeding-matters-during-emergency> . Download and read the Wellstart International *Infant and Young Child Feeding in Emergency Situations* pdf document; note the Triage algorithm on the last page. Also download and read the International Lactation Consultant Association's *Position on Infant Feeding in Emergencies*. Note the other references on this website. Free! [Estimated time commitment: 15 minutes]
- Complete the *Cultural Competency Curriculum for Disaster Preparedness and Crisis Response* (4 modules) from the Office of Minority Health, US Department of Health & Human Services and download the certificate of completion (<https://cccdpcr.thinkculturalhealth.hhs.gov/default.asp>). Free! [Estimated time commitment: 1/2 - 1 day]
- Download & read *Bridging the Cultural Divide in Health Care Settings: The Essential Role of Cultural Broker Programs* (pp. 1-17) by the National Center for Cultural Competence, Georgetown University (www.culturalbroker.info). Free! [Estimated time commitment: 1-2 hours]
- It is highly recommended that you sign up for your own state's emergency response program: <http://www.phe.gov/esarvhp/pages/registration.aspx>. By doing so, you will be invited to attend a workshop on the organizational structure behind disaster management (e.g., the incident command system), and will learn about triage in disasters. This information is invaluable so that you have some common understanding of what is going on in a disaster setting, and where you fit in. For those who want to volunteer for disasters in their own state or across state lines in the U.S.A., being registered with a state or federal program can offer some legal protection as well (like immediate licensure approval in other states, and release from professional liability).

Additional Resources:

Websites

WHO	http://www.who.int/en/ http://www.who.int/topics/infant_newborn/en/ http://www.who.int/topics/maternal_health/en/
UNICEF	http://www.unicef.org/
UNFPA	http://www.unfpa.org/public/
ENN online	http://www.ennonline.net/
CDC	http://emergency.cdc.gov/
CRED & EM-DAT	http://www.cred.be/ http://www.emdat.be/
PreventionWeb	http://preventionweb.net/english
ReliefWeb	http://reliefweb.int/
Disaster Center USA	http://www.disastercenter.com/
Cochrane Evidence Aid	http://www.cochrane.org/cochrane-reviews/evidence-aid-project
Global Health eLearning Center	http://www.globalhealthlearning.org/login.cfm
Institute of Medicine: Crisis Standards of Care	http://www.iom.edu/Reports/2012/Crisis-Standards-of-Care-A-Systems-Framework-for-Catastrophic-Disaster-Response.aspx
American Nurses Association (ANA)	http://www.nursingworld.org/MainMenuCategories/WorkplaceSafety/DPR

Print

<i>Battlefield and Disaster Nursing Pocket Guide</i> by Elizabeth Bridges (Ed.) ©2009, Jones & Bartlett
<i>Cultural Health Assessment Pocket Guide</i> by Carolyn Erickson D'Avanzo ©2008, Mosby
<i>Disaster Nursing</i> by Robert Powers & Elaine Daily (Eds.) ©2010, Cambridge University Press
<i>Disaster Nursing</i> by Deborah Adelman & Timothy Legg ©2009 Jones & Bartlett
<i>Humanitarian Charter and Minimum Standards in Humanitarian Response</i> by The Sphere Project ©2011
'Emergency Preparedness & Disaster Response Core Competency Set for Perinatal & Neonatal Nurses' JOGNN ©2010, V39, pp 450-467.

Professional Medical Organizations

WADDEM – World Association for Disaster and Emergency Medicine	http://www.wadem.org/
DERA – the International Association for Preparedness and Response	http://www.disasters.org/

Section 2: Health Considerations for Living and Working in Disaster Settings

Consider your physical, dental, and mental health status. Although not all of the following situations will be demanded of you in every volunteer experience, it is important to anticipate certain challenges before deploying to a disaster zone. Discovering that you cannot live and work in the conditions after you arrive is problematic for you and for your team members. See the Ehrenrich book *The Humanitarian Companion: A Guide for International Aid, Development, and Human Rights Workers*, Chapters 3 & 4.

Self-Assessment and Self-Reflection:

Consider some of the following questions to think about how your health might impact your work and how your work might impact your health when serving as a disaster volunteer health practitioner (VHP):

- Do you have any chronic conditions that require daily medication or other attention? Is it feasible to manage your situation while working long hours? Do you have medications or supplies that require electricity (refrigeration)? ...which might not be available.
- Can you tolerate extreme heat or cold?
- Can you walk 2-3 miles carrying a 30 pound pack?
- Is your ability to work limited by eyesight or hearing issues? If so, do you have extra glasses, hearing aid batteries, etc.?
- Can you skip meals and keep on working, or do you need to plan ahead to have snacks nearby?
- If you take medication for an emotional/mental health issue, does it also work for you when you are fatigued, stressed, and over-worked?
- Have you suffered from a recent personal loss (divorce, death, etc.) for which you are still grieving? How might additional stress & fatigue impact your recovery and coping abilities?
- Are your immunizations up-to-date (Typhoid, Meningococcus, Hepatitis A&B, Influenza, Polio, Yellow fever, MMR, & TDaP. JEV, Rabies)? See the CDC website: <http://wwwnc.cdc.gov/travel/page/vaccinations.htm> .

Sometimes travel medicine clinics or health departments do not have what you need in time for your departure. Be sure to always have a copy of your Yellow Fever vaccination tucked into the back of your passport in case immigration and border control agents require confirmation.

- Do you have emergency travel evacuation insurance? See <http://www.travelinsurancereview.net/travel-medical-insurance>
- Does your health insurer reimburse you if you need to pay for medical care overseas?
- Can you emotionally function in a situation with insecure/reduced levels of security and protection?
- Are you aware that you may be working in a situation with damaged or absent infrastructure, including availability of food, water, lodging, and transportation, &/or health services?
- Pre-deployment education and training are essential, because your personal preventable illness or injury burdens the community and the agency the midwife has come to serve. Are you willing to participate in the educational activities recommended by the ACNM Disaster Response Team and the disaster agency you will volunteer with?

Section 3: Practical and Financial Readiness to Deploy to a Disaster or Crisis Setting:

Below are some considerations for readiness. See also the Ehrenreich book Chapter 1.

Be sure your passport has at least 6 months left before expiration and that there are sufficient pages empty for visas (some country's visas take 1-2 pages).

Have the resources set aside to pay for travel, room/board, and basic supplies for 1-4 weeks of deployment to a crisis area (often approximately \$1500-2500, but difficult to predict). Some organizations pay travel, room, and board, but many do not.

[Note: credit, debit, or ATM cards & traveler's checks often cannot be used in disaster settings. U.S. currency is exchangeable almost everywhere; Euros are the next best option. Also, some countries will not accept small (<\$20) dollar bills for exchange, or \$100 bills earlier than 2006. Coins are never exchangeable.]

PACKING FOR LIVING:

You might need to bring your own "housing" and even your own food when you go into a disaster zone. Do you have (own or can borrow) essential items for living and working in a very low resource setting?

[See also the Ehrenreich book and many other 'what to pack' travel lists.]

- Nametag with your name, the organization's name, and identity as a nurse-midwife in English & in the local language(s) – wear it always [Note: it is recommended to not identify yourself as an American – not all people in other countries initially feel comfortable with Americans]
- Nametags for your luggage with name of your organization & their location/address at the site
- Safety and Security: money belt; cash (don't expect credit/debit or ATM cards to work); candles, matches, lighter, photocopies of passport & visa in a ziploc bag
- Small fannypack or neckpurse to carry passport, money etc. at all times (some organizations require this in case of urgent evacuation)
- Tent or free-standing mosquito net (depending on conditions)
- Sleeping bag/mat/travel pillow
- Water purification system: pump, tablets, drops (be sure they remove viruses)
- 2 water bottles minimum (they get lost, & you'll need 2 at all times with potable water)
- Nonperishable food items, gum, non-melting candies, etc.
- Durable flashlight/headlamp (minimum 2) plus extra high-potency batteries
- Knife + multi-tool, such as Swiss Army knife or Leatherman (pack in check-on luggage)
- Personal medications kit (including antibiotics for common infections; analgesics; sleeping pills; topical hydrocortisone; motion-sickness meds; anti-retrovirals for body fluid exposure; eye drops; anti-diarrheals, snake bite kit,)
- Personal first aid kit for minor injuries
- DEET for skin; permethrin for clothing to repel insects
- Clothing that is appropriate for working conditions and weather (Long-sleeved shirts & long pants; long loose-fitting dresses for modest cultures)
- Breathable sturdy shoes or boots (no open toes or high heels) plus shower shoes (eg, flip-flops)
- Weather-specific clothing: rain gear, hats for weather/sun, gloves, thermal underwear & thick socks (for cold weather)

- Safety glasses & work gloves
- Sunglasses
- Extra pair of glasses (if you wear corrective contacts or glasses; might be unable to wear contacts in dusty, gritty conditions)
- Cell phone, extra battery, & solar charger
- Waterproof watch with alarm
- Travel plug adapters for electronics if you bring any
- Personal care items (biodegradable shampoo, soap, manual toothbrush, toothpaste/floss, biodegradable laundry detergent, small clothesline/pins, sewing kit, toilet paper, menstrual supplies, earplugs, hand sanitizer ...)
- Towel (quick-dry, highly absorbent); sarong or shawl (to hang up for bathing/toileting privacy prn)
- Bandana/handkerchief/washcloths x 3
- Zip-lock bags: large, medium, and small
- Small dictionary/language book for local language(s) [nice gift to your interpreter when you leave]
- Map of the country, & ideally the local area, where you will be volunteering
- Stress-reducing reading or music [Note: may not be electricity to recharge electronic devices. Also, keep in mind high risk of theft or damage so do not bring anything you aren't willing to lose.]
- Something you can use for a garbage receptacle (like the emesis bag from the plane) [Note: plan to take your garbage home with you – trash disposal systems are generally not functioning & you shouldn't burden the country with your garbage, especially toxic waste like batteries.]

PACKING FOR WORKING:

Midwifery supplies and equipment to bring (buy or borrow). [Don't expect the disaster organization to have planned for prenatal or postpartum care or births, or to have what you like to work with.]

- LED headlamp with long-lasting batteries
- Fetoscope / doppler (for early detection is helpful)
- Stethoscope, manual BP cuff, tape measure (for pregnant abdomens & measuring babies)
- Medication book or cheat sheet (maternal & neonatal) [Note: basic medications should be included, not necessarily the newest most expensive drugs that won't be available onsite]
- Newborn feeding chart based on gestational age and kilograms (in case breastfeeding not possible for orphaned or high-risk newborns)
- Handbook on emergency obstetrics & Emergency Obstetric Care
- MISP laminated card for Reproductive Health in Crisis Settings
- Emergency birth kit (can be purchased from Cascade Health Care Products & others)
- Metal pan for sterilization of instruments by boiling
- Birth & suture instruments (minimum 2 sets each; minimize nonreusable items)
- PPH medications: misoprostol (Cytotec) preferred; oxytocin (Pitocin) & methylergonovine (Methergine) if you will have syringes & can refrigerate in hot climate
- Magnesium Sulfate: 4-5 (or more) vials

- Suture for obstetrical lacerations
- 2-3 speculums (that can be reused & disinfected or sterilized)
- Personal protective equipment: gloves, safety glasses, masks (cloth/reusable preferred), consider a pair of impermeable galoshes or clogs for births
- Hand sanitizer or antibacterial wipes
- Chlorine tablets for making decontamination solution for instruments
- Neonatal ambu-bag (at minimum bring a neonatal size mask – you can blow into it)
- Portable oxygen saturation / pulse device – maternal & neonatal probes (optional)
- Hand-held or other portable ultrasound (optional) [if you know how to use it & are not financially responsible for it if it gets lost or broken]
- Vacuum extractor with reusable cup [if you are competent in its use]
- Urine pregnancy test dipsticks (lots!)
- Contraceptives: condoms, Plan B (for rape victims) if religiously okay with the disaster organization you are deployed with
- Do NOT bring medical abortion medications unless you are trained in their use, it is ethically and religiously okay with you and your organization, & is legal in the country
- Linens of all sizes – for sheets, to hang for privacy, to make a ‘clean’ surface for birth & for medical equipment, for newborn drying, to make diapers & maxi-pads, ...
- Plastic or aluminum tray (small cookie sheet) for a flat clean surface to put equipment on
- Bringing IV supplies/solution is usually not practical – check with the disaster organization to see if they will supply what you need
- Pen & notebook – to make ‘chart’ notes & keep patient information in case there is no charting system (written data may be needed later for reports & evaluation)
- Tape (with high-quality stickiness) that can be written on – for making signs & labels; may need to label patients for transport because loose paperwork can get lost
- Permanent marker – for making signs & labels; may need to write on skin to identify people eg, unconscious persons or babies if transported away from family members
- AVOID bringing lots of disposable and one-time use items, like chux, maxi-pads, bulb syringes, drapes, masks/shoe covers, etc. There is usually no decent garbage-management system in the early, or sometimes even later, stages of disasters. Pack out your own garbage (esp. toxic things like batteries).
- AVOID complex items like breast pumps, newborn intubation equipment, & other items that are only needed rarely & are difficult to keep clean. Better to bring more of what you’ll need commonly than to plan for every possible medical contingency.

Notes about Air Travel:

- Bring some food in your carry-on bag, & fill your water bottle after you pass through security. Flights into disaster zones can be late, delayed on the tarmac, rescheduled, or cancelled.
- Some disaster organizations require you to reserve all of your check-on luggage for medical supplies, therefore you must fit your personal items into your carry-ons (except tent, sleeping bag, Swiss Army knife, birth instruments).
- Carry on items you cannot live without (medications, money, iPod, contact solution, etc.) – luggage problems (lost, misplaced, stolen) are common in the chaos of a crisis setting.

- Most international airlines allow 1-2 pieces of check-on luggage weighing no more than a strict 50 lbs at no extra charge. One to two pieces of carry-on luggage is also permitted at no charge – there is sometimes a weight limit (usually 20-40 lbs) & there is always a size limit. Sometimes airlines make exceptions for disaster volunteers (ask ahead of time). Air travel within the U.S. has variable rules – check the airline website. If you need to bring more stuff, calculate the over-weight charge vs. the extra piece of luggage charge then pack strategically; be prepared to pay cash at the airport for the extra luggage charges (tuck an envelope of the correct amount of cash in an outside zipper of the overweight or extra luggage).
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Section 4: Personal Preparation for Leaving Home

Think ahead about what it would take for your family, your co-workers, your business, your community, and your home to survive without you temporarily (disaster deployments are usually for 1-3 weeks, but this can vary). Then think about what might need to get done in order for you to be able to leave with fewer than 1 or 2 weeks' notice.

- Can your dependents (kids, pets, significant others, parents, ...) fend for themselves in terms of eating, bathing, transportation, etc.? If not, is there someone who is willing to support your humanitarian efforts by stepping in on short notice to help out?
- Can someone else pay your bills, mortgage, car payment, etc. if they come due while you are away? Or if they are on auto-pay, do you have enough money in your account to cover the withdrawals?
- Are you on a schedule at work that offers a lot or very little flexibility? Would the other midwives in your practice (if you are in group practice) or in your area (if you are in solo practice) willing to take your clinic and on-call hours for 1-2 weeks as their contribution to the humanitarian effort?
- Would your clients / patients understand – especially those with imminent due dates – if you suddenly took off for parts unknown to help out women you have never met?
- Would missing work be financially devastating to you and your family?
- If you participate in committees, boards, or other activities where your attendance and participation is required, are your colleagues able to function without you?
- Do you have a variety of clothing options readily available for packing that could work for different climates and cultures (i.e., some long dresses, loose-fitting long pants, long sleeved shirts, headscarf for Islamic countries? warm jacket, socks, and boots for cold climates? modest yet thin breathable clothing for hot climates?)
- Do you keep a supply of medication, eyeglasses, and copy of eye prescription, extra contact lenses and lens cleaner, hearing aid batteries, and other items you require on a daily basis sufficient to last for the length of your deployment?
- For international travel, it is recommended that you register your trip with the U.S. State Department at <https://step.state.gov/step/>. This way the U.S. embassy or consulate in the country you are working in will have your information in case emergency evacuation is required. If your family needs to inquire about you the U.S. government has advanced permission from you to release information. Do this yourself - don't depend on the disaster agency to take care of these things for you.