

INTRODUCTION TO DISASTERS AND MANAGEMENT

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1. <u>INTRODUCTION</u>

Whether naturally caused or man-made, disasters invariably produce casualties. When casualties occur, medical personnel are involved in their care. Disasters also produce uninjured victims who may require temporary shelter, food and water.

As victims crowd together seeking help, and sanitation may not be existent, epidemics of communicable diseases may occur further adding to the havoc already created by the disaster. Medical and Health personnel are required to organize and care for these victims.

2. **DEFINITIONS**

Disasters are part of the larger category of <u>collective stress</u>. A collective stress occurs when many members of a social system fail to receive expected conditions of life from the system. The term social system refers to a collection of human beings whose interaction maintains itself in identifiable patterns over a relatively long period of time.

Collective stress can arise from the following sources:

- a. External largely unfavorable changes in the environment of the system. This includes floods, earthquakes, drought etc.
- b. Internal various forms of massive social disorganization including economic breakdowns, riots, banditry etc.

In more <u>Practical terms</u>, disasters may be classed either as 'natural' or 'man-made', or according to their source, thus:

- 1. **Natural disasters** earthquakes, storms, floods, volcanic eruptions, drought etc.
- 2. Man-made disasters explosions, crashes, collapse of structures, riots, civil wars, terrorist acts, banditry etc.

Classification by source e.g.:

- Meteorological disasters (Weather)
- Topographical disasters (place, position, surface)
- Telluric/tectonic disasters (earth's structure)
- Accidents

3. **DIMENTIONS**

In order to study the totally of the disaster situation a number of factors are considered:

- a. Scope geographical extent
 - population involved
 - economic loss
- b. Speed of onset

- sudden, gradual or chronic
- c. Duration of impact short, medium or
 - short, medium or long
- d. Social preparedness low or high

4. **EFFECTS**

- Loss or damage to human and animal life.
 Damage to human lives includes physical injury and psycho-social effects.
- Loss or damage to food/cash crops.
- 3. Disruption of community services e.g. electricity, fuel supply, communication systems, water supply, sewage systems, food supply and distribution etc.
- 4. Damage of private and public property.
- 5. Spread of communicable diseases.
- Disruption of normal activities.

5. **REACTIONS**

Population passes through a number of stages.

Impact Shock

2. Frantic activity Rumour

3. Panic

4. Disillusionment

5. 'Emergency social system'

6. Organised effort

7. Return of morale

6. PHASES

- a. Warning phase a forecast of disaster being imminent. Various agencies are involved e.g. meteorological stations, information systems, police etc. If warnings are clear and timely, adequate preparations to face the disaster may be made. Communications are very important. Social preparedness and previous practice of reaction procedures play important roles.
- **b.** Impact phase very little can be done. May last a few seconds or maybe days or months. Population will react to the disaster.

- c. Rescue phase starts after the impact is over. Begins with amateurish attempts by population and continues until adequate organized professional rescue teams arrive and take over.
- d. Relief phase where there is proper assessment of needs, relocation of community and immediate aid and supplies are given. Depends much on social preparedness and resources available.
- e. Rehabilitation phase longest phase involving rebuilding, rehabilitation, replanting and restoration. This phase ends when normal/expected condition return.

7. ORGANISED RESPONSE

- a. Information is of at most importance as this is required to assess the situation after impact in order that needs can be met e.g. medical care, food, shelter, sanitation etc. Information is also needed so that clear and precise warnings and instructions can be given to the population.
- b. Communications are important for updating information and normal means e.g. telephone may not be functioning. Alternative means such as two way radios may have to be used.
- c. Resources for rescue, medical relief, feeding, camp construction etc. are required. The amount of resources available and their location must be

23 July known.

- d. Transport for victim and casualty evacuation, conveyance of rescue and relief personnel and equipment, clearing blocked roads etc. are necessary. Transportation includes land, water and air vehicles.
- e. Deployment resources should ideally be prepositioned and be located near to disaster prone areas.
- f. Pre-planning. Co-ordination and flexibility are processes which are required in any organized response procedure.

7.1 ACTIVITIES IN DISASTER M/M

Pre-impact period

- Prevention activities
- Mitigation activities
- Readiness activities

Impact period

- Rescue activities
- Relief activities

Post-impact period

- Further relief activities
- Recovery activities
- Rehabilitation

and Reconstruction

8. CASUALTY MANAGEMENT

In normal clinical practices, the casualty with the most critical injury is treated first no matter how poor the prognosis.

Unfortunately, this concept may not be practical in a disaster situation and priority must be given to the needs of many at the expenses of a few.

In order to carry out the procedure of prioritizing care to be given to casualties, a **Triage** procedure is implemented. Triage is a French word meaning 'to pick out or to sort'. It was first used in the English language during World War I when mass casualties were often met with when poison gases were used.

The modern meaning of the word has two components :

- 1. Sorting of victims according to the severity of injury/illness and
- 2. Assigning priorities of treatment.

TRIAGE CATEGORIES

- Immediate Treatment (Immediate, send first)
 Casualties for whom the available medical care can be expected to save life or function if performed as soon as possible.
- 2. <u>Delay Treatment</u> (Urgent, send next)
 Casualties who, after emergency medical care incure little increased risk by limited delay in future treatment.
- 3. <u>Minimal Treatment</u> (Non-urgent, can wait)
 Casualties who do not require in patient treatment and can be discharged following first aid.
- 4. Expectant treatment (Dying, Hold)
 Casualties so critically injured that only complicated and prolong treatment offers any hope of improving life expectancy.

A triage situation exist temporarity when there is a need to priorities critical care to casualities in the face of limited resources. Triage solutions are usually anticipated and planned for hospital and emergency care systems.

In **Disasters**, the <u>Primary Triage</u> taking place at the site of the disaster area. Usually first aid, resuscitation and stabilization done.

The <u>Secondary Triage</u> taking place at the hospital casualty area. Treatment, admit or discharge done.

The <u>Tertiary Triage</u> taking place at the operating theatre. Whom to operate first.

PREPAREDNESS

TRIAGE CATAGORIES

TRIAGE CATEGORIES



IMMEDIATE TREATMENT
 (IMMEDIATE, SEND FIRST)

Casualties for whom the available medical care can be expected to save life or function if performed as soon as possible.

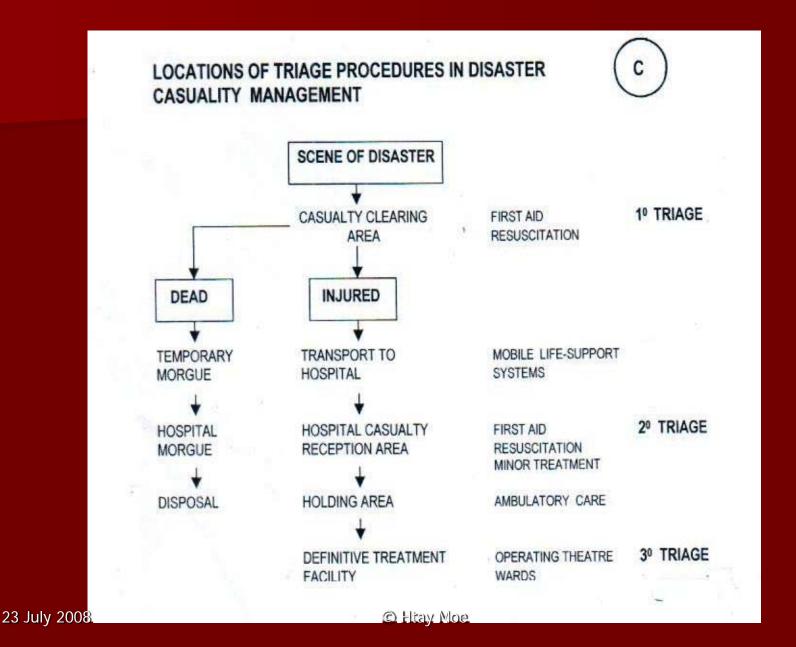
 DELAYED TREATMENT (URGENT, SEND NEXT) Casualties who, after emergency medical care incur little increased risk by limited delay in further treatment.

 MINIMAL TREATMENT (NON-URGENT, CAN WAIT) Casualties who do not require in patient treatment and can be discharged following first aid.

 EXPECTANT TREATMENT (DYING, HOLD) Casualties so critically injured that only complicated and prolonged treatment offers any hope of improving life expectancy.

DEAD

LOCATIONS OF TRIAGE PROCEDURES

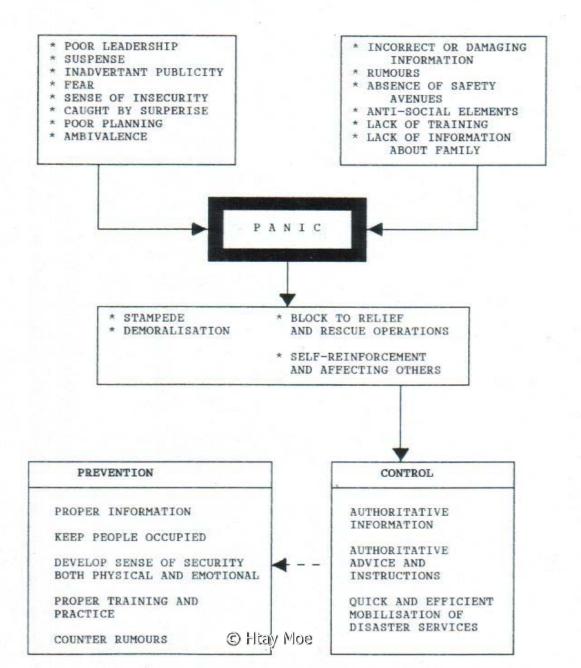


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9. SOCIAL PREPAREDNESS

It is an organized community which prepare for the situation in case of disasters. The community needs to set up a good effective and organize response system to meet with disaster situations particularly elaborate warning system based from the past experience. The community must have a good communication for dissemination of information and clear role for individuals, families and relief agencies.

All denote <u>High Social Preparedness</u>. The opposites are <u>Low Social Preparedness</u>.



10. NATIONAL SECURITY COUNCIL DIR. 20.

<u>Directive 20</u> aims to put in place a comprehensive emergency management programme which seeks:

- 1. To response to emergencies and provide assistance
- 2. To mitigate the effects of various hazards
- 3. To prepare measures which preserve life and minimize damage to the environment
- 4. To establish a recovery system, ensuring quick return to normalcy for affected communities

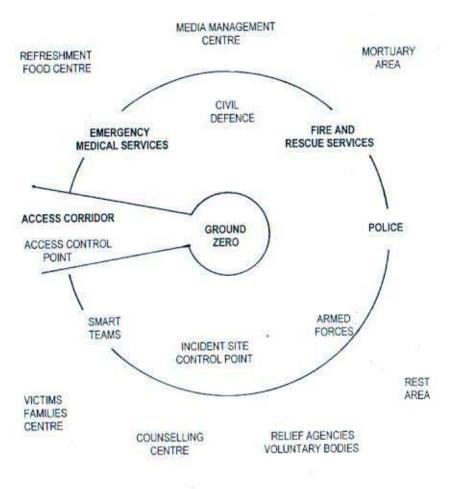
It defines **Disaster** as an emergency situation of some complexity that will cause the loss of lives, damage to property and the environment and hamper local social and economic activities.

Directive 20 identifies the main players and their functions during emergencies. The leading agencies being the <u>Police</u>, <u>Fire and Rescue Department and Medical Emergency Service</u>, <u>supported by the Special Malaysian Disaster Assistance and Rescue Team (SMART) and the Armed Forces.</u>

There are **3** disaster management **levels**: District, State and National. The directive also outlines the chain of command at each level. This is because it is the district or State-level authorities which will have to cope with the crisis within the first few hours of it happening.

Catastrophes covered by Directive 20 include natural disasters, major industrial accidents, extensive fire involving large areas, dam and building collapse and nuclear and radiological mishaps.

LOCATIONS OF RESPONDING AGENCIES (after ARAHAN 20)

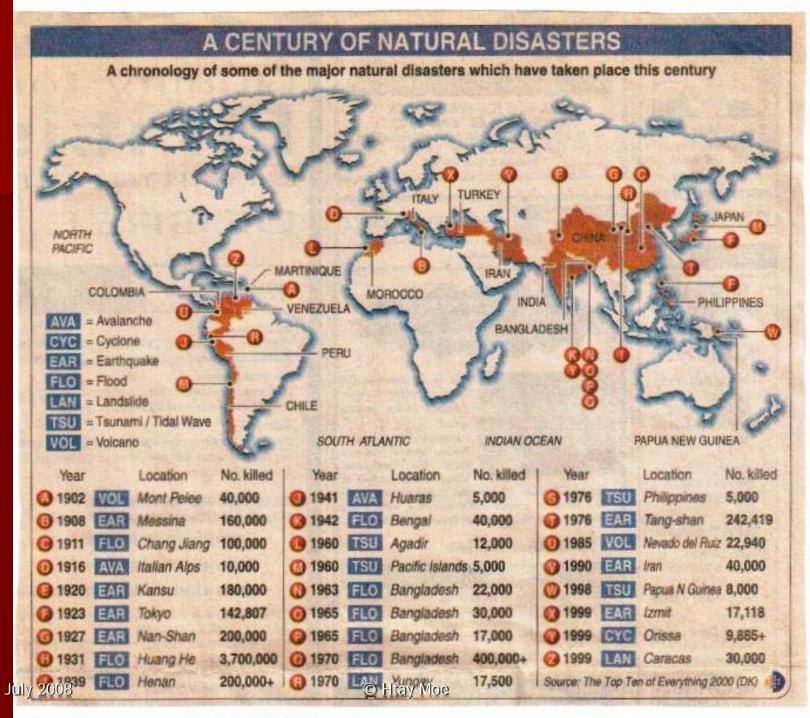


INCIDENCES OF DISASTERS IN MALAYSIA 1988 - 1998

DATE	DISASTERS	CASUALTIES	LEVEL OF DISASTER*
31 July 1988	Collapse of Sultan Abdul Halim Jetty, Butterworth, Penang	2 dead; 1,674 injured	A COME IN TARGET
7 May 1991	Fire and Explosion of Bright Sparklers Fireworks Factory, Sg. Buloh, Selangor	22 dead; 103 injured	Н
5 April 1992	Fire at Sultan Abdul Aziz Shah International Airport	3 dead	
20 Jun 1992	Choon Hong III Ship, Explosion and Fire, Port Klang, Selangor	13 dead	E
11 Déc 1993	Collapse of Highland Towers Condominium, Hulu Klang, Selangor	52 dead	m
30 Jun 1995	Landslide, off Genting Highland Road, Pahang	20 dead, 22 injured	1
15 July 1996	Tourist Bus Accident, Ravine, Km 15, Genting Highland, Pahang	17 dead	I
29 Aug 1996	Mud Slide, Natives Resettlement Village, Pos Dipang, Kg Sahom, Kampar, Perak	44 dead	11
+26 Dec 1996	Tropical Storm GREG (Typhoon), West Coast of Sabah	230 dead; 4,925 houses damaged	II
1-30 Apr 1997	Enteroviral Outbreak, Sibu, Sarawak	25 dead	II
20 Sept 1997	Haze Emergency in Sarawak and Peninsular Malaysia	Environmental damage, health problems & economic losses	ni .
24 Dec 1997	Fire and Explosion, SMDS, Bintulu, Sarawak	5 dead; property damage	11
Feb-May 1998	Forest and Peat Fires Throughout the Country	-	111

SOURCE: Fakhru'l-Razi Ahmadun, Universiti Putra Malaysia

^{*} based on Directive 20 criteria





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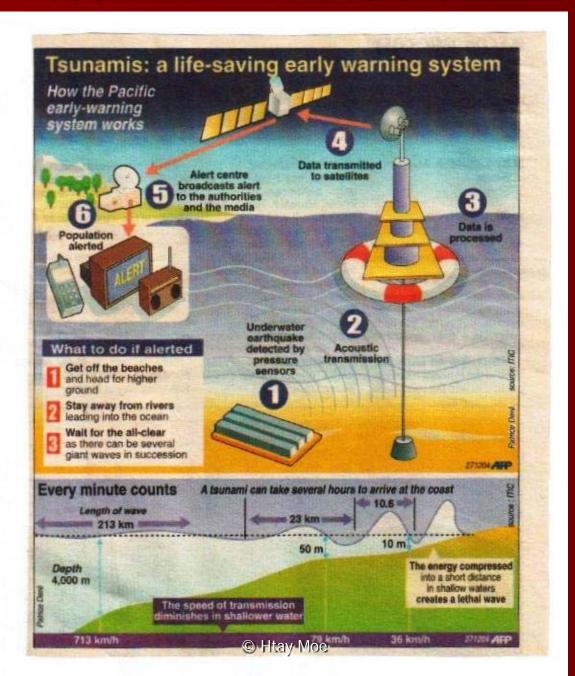
Sources: UN, wire agencies

© GRAPHIC NEWS

Dead or missing

Middle East

TSUNAMI WARNING SYSTEM



FLOOD



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Opening of swollen dams & ground saturation led to overflowing rivers, causing floods to

MST Graphie () Fred Mah

low-lying areas affecting Perlis worst

Strong northeasterly winds of 40-50kph & rough seas with

waves up to 3.5 metres

Situation: Floods receded and no sign

23 July 2008

of heavy rain

FLOOD

☐ BY SIRA HABIBU, MANJIT KAUR, EMBUN MAJID, IAN MCINTYRE, STEPHEN THEN, CHAN LI LEEN and LEONG SHEN-LI

One dead and 20,000 affected

JITRA: Floods in Perlis and Kedah worsened as almost 20,000 people were forced to leave their homes.

The rising waters also claimed its first victim in Perlis when villagers found the body of Desa Md Arshad, 65, who refused to move out of his house in Tambun Tulang, Kangar, yesterday, according to Bernama.

Many spent the night in cars while others ignored pleas from the authorities to move out in the worst floods to hit the two northern states in three decades.

In Kedah, 11,700 were forced to leave their homes, and in Perlis 10,000.

In **Kedah**, water levels at Sungai Kepala Batas, Sungai Pantai Johor and Sungai Baru reached their danger point.

All flights into and out of the Sultan Abdul Halim Airport have been cancelled until further notice.

Malaysia Airlines Alor Star district manager Ahmad Nasruldin Ahmad Mahayuddin said water from Sungai Kepala Batas had flooded parts of the runway.

It was learnt that the Royal Malaysia Air Force College at Kepala Batas was also flooded.

Sources said 21 Pilatus PC-7 planes used by college students for training were moved to the Butterworth RMAF base, while another seven were moved to the new Sultan Abdul Halim Airport.

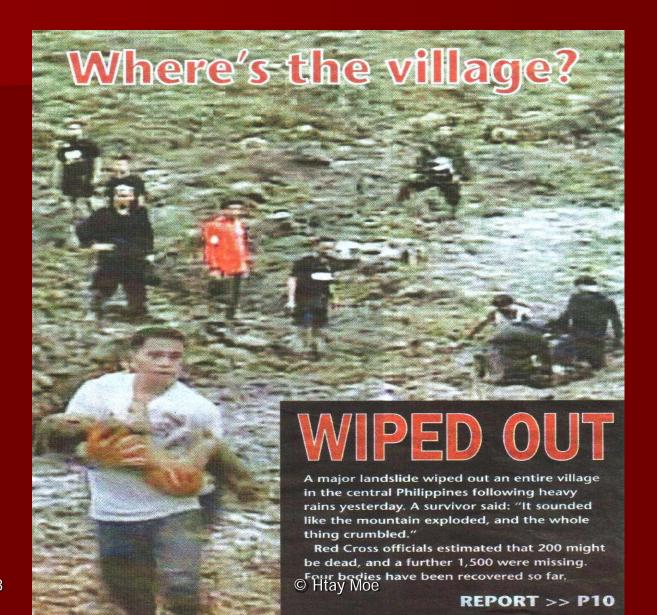
Deputy Prime Minister Datuk Seri Najib Tun Razak visited several flooded areas in the state and Perlis yesterday. 23 July 2008



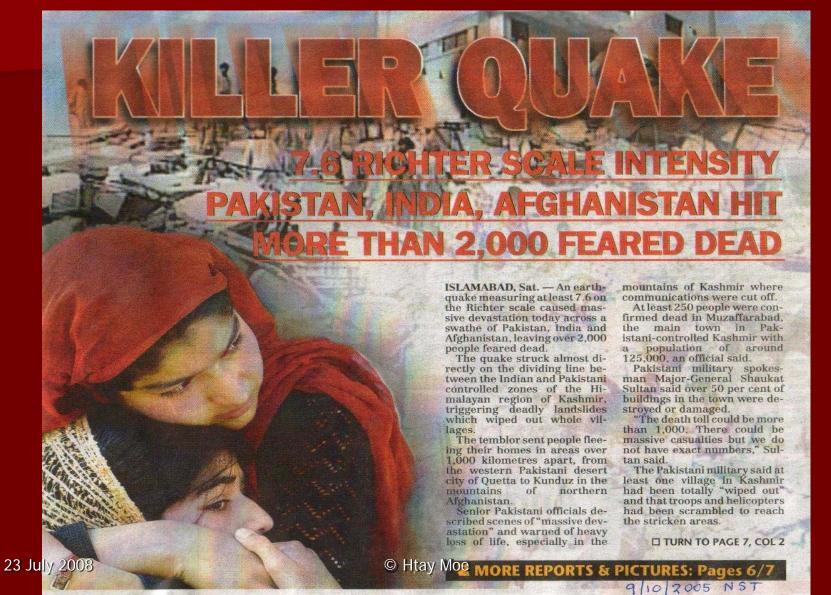
UNDER WATER: Aerial view of a partially submerged Jitra and its surrounding areas in Kedah yesterday. — Bernamapic Hitay Moe

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LANDSLIDE



EARTH QUAKE



TSUNAMI



THANK YOU

