

Emergencies, Disasters, and Catastrophes

James D. Bales, Jr., MD, FACP, FACPM

As we wade through the seemingly endless changes to our work, community, and lives, many have questions about the novel Coronavirus pandemic including the inevitable “Why weren’t we ready?”

Unlike what an “unprecedented” label would suggest, pandemics are as old as humanity itself. The second century Antonine plague, sixth century Justinian plague, fourteenth century “Black Death”, nineteenth century London cholera, twentieth century pandemics of influenza and HIV, and the twenty first century avian flu, novel coronaviruses SARS (severe acute respiratory syndrome), MERS (Middle East respiratory syndrome), Marburg, and Ebola should be ample background for what can be described as inevitable.

Dr. Paul Caulford, who was instrumental in fighting the first SARS epidemic in Canada, wrote in December 2003:

“SARS must change us, . . . forever. Will we be ready when it returns? . . . Without substantive changes to the way we manage the delivery of health care, both locally and on a worldwide scale, we risk the otherwise preventable annihilation of millions of people, either by this virus, or the next. “(1)

Planning for response efforts includes everyday emergencies, disasters, and more recently catastrophes (2). These entities are different and require different kinds of planning and response at the individual, community, and government levels. In catastrophes most of the community structures are involved and may not function as expected. Local officials may be victims and everyday community functions interrupted. Adjacent communities are also responding at home and may not be able to assist.

A catastrophe such as a pandemic requires different kinds of thinking, planning, and responding than everyday emergencies or even major disasters. It is unlikely that logistical planning for emergencies or disasters would include the running out of protective supplies such as masks or commodities such as toilet paper or flour. While individual responses may be similar regardless of category, community and governmental responses will be different.

When I reflect on preparation for emergencies, disasters, or catastrophes, I ask “Am I prepared?” Unfortunately, the answer is “No”. Individual preparation has been emphasized by innumerable entities, organizations, and governmental agencies over the years. This includes being prepared for lack of supplies, medications, utilities, commodities, and care for pets. If evacuation is recommended, am I ready and know where and how to go?

Why have I not spent the time, money, and effort to be prepared? Frank M. Snowden’s book *Epidemics and Society* (a book that began as an undergraduate lecture series at Yale University) has an explanation after the SARS and Ebola outbreaks and includes my own individual failure to prepare called “Societal Amnesia”:

“ . . . as the emergency receded and fear subsided, citizens and governments reverted to business as usual. Funds pledged to emergency response through WHO and the Centers for Disease Control (CDC) in the United States and its sister agencies abroad, and through health departments, governments, and private laboratories, were slashed. Agencies charged with

coordinating the response at international, federal, and state levels were disbanded and their leaders removed.”

A lecture series available for streaming, download, or DVD purchase called “*When Everything Fails – Surviving Any Disaster*” (2020) is produced and marketed by The Teaching Company as one of its Great Courses. It is timely and provides a foundation for personal emergency thinking and planning. Personal, community, and governmental emergency preparation is ongoing and not stagnant. We have had governmental and community pandemic emergency response plans such as the WHO *Global Influenza Preparedness Plan* (2005) and the US government *National Strategy for Pandemic Influenza* (2005) but these remind me of a quote attributed to former President Eisenhower that “Plans are useless, planning is indispensable”. Identifying and responding to the unique problems associated with an emergency, disaster, or catastrophe is not paper gathering dust in a departmental office or a personal plan that I will get to “someday”. It is the thinking involved in planning that pays dividends when an emergency, disaster, or catastrophe occurs.

Another emphasis of the lecture series is that an overwhelming personal response to emergencies, disasters, and catastrophes is “What can I do to help?” Effective volunteering is not a spontaneous event. You cannot just show up and say, “I’m a doctor” and expect to start practicing. Volunteering through an organization requires credentialing of some type that can allow for temporary licensing and recognition as an emergency worker at local and national levels. If you are considering emergency, disaster, or catastrophe response, it will pay to work with a known organization that can orchestrate your response. The National Voluntary Organizations Active in Disaster (N-VOAD) lists multiple such organizations on their web site.

The Medical Reserve Corp (MRC) is a national network of volunteers, organized locally to improve the health and safety of their communities. It is sponsored by the Office of the Assistant Secretary for Preparedness and Response in the US Department of Health and Human Services and is one of the simpler ways to volunteer and be a recognized at the state or federal level as an emergency worker. The Tacoma/Pierce County Health Department (TPCHD) sponsors a Medical Reserve Corp chapter that has been nationally recognized for its contributions to the current pandemic as well as ongoing disasters in more local outbreaks and emergencies. Volunteering as a medical professional for the TPCHD MRC allows response to governmental declared emergencies with credentialing for responding effectively. Volunteering can also promote the “substantive change” to how we manage a response that benefits from the two-way street between personal and public healthcare through knowledge and experience of both.

1. Caulford, Paul (2003): “SARS: Aftermath of an Outbreak,” *Lancet* 362, s2-s3.
2. Quarantelli, EL (2000): *Emergencies, Disaster and Catastrophes are Different Phenomena*, Preliminary Paper #304, University of Delaware Disaster Research Center.
<http://dspace.udel.edu/bitstream/handle/19716/674/PP304.pdf?sequence=1&isAllowed=y>.

Recommended Reading:

Barry, John M. (2005): *The Great Influenza: The Story of the Deadliest Pandemic in History*, Penguin Books. With a 2017 updated “Afterword” that is both provocative and predictive.

Quammen, D. (2012): *Spillover – Animal Infections and the Next Human Pandemic*, W.W. Norton & Co. Inc.

Snowden, Frank M. (2019): *Epidemics and Society from the Black Death to the Present*, Yale University Press. With a 2020 updated “Preface” that includes discussion of the current Pandemic.

Recommended Watching:

Armstrong, Dorsey (2016): *The Black Death: The World’s Most Devastating Plague*. Course Number 8241, The Great Courses by The Teaching Company.

Owen, Stephen (2020): *When Everything Fails: Surviving Any Disaster*. Course Number 9794, The Great Courses by The Teaching Company.

Recommended Web Sites:

“Medical Reserve Corps.” <https://mrc.hhs.gov/HomePage>. Overview of the national Medical Reserve Corps program.

Tacoma/Pierce County Health Department Medical Reserve Corps. piercecounnymrc.org – Local MRC site with instructions for joining.

“NDMS Teams.” <https://www.phe.gov/Preparedness/responders/ndms/ndms-teams/Pages/default.aspx>. Overview of voluntary response teams that may be activated in disasters.

Ready.gov. <https://www.ready.gov>. Website for issues related to disaster preparedness both generally and for specific disaster types.

National Voluntary Organizations Active in Disasters. <https://www.nvoad.org>. National VOAD promotes cooperation, communication, coordination, and collaboration, and fosters more effective delivery of services to communities affected by disaster.

Federal Emergency Management Agency. <https://training.fema.gov>. National Preparedness. Online Course Catalog