EPIDEMIC CONTROL FOR RESPONSE MANAGERS

CYCLONE / HURRICANE / TYPHOON				
Role profile	Competencies	Gaps in competencies	Gaps in information they need	
National Society emergency response staff	Deployment of volunteers, activation of existing NS emergency response systems, tools and programmes	Specific adaptations needed for health emergencies, exposure to response approaches, tools, needs outside of sudden-onset natural disasters	Understanding of health impacts of natural disasters and understanding of how/when/why to engage health colleagues in emergency response	
Key facts	Cyclones (hurricanes and typhoons) are associated with damage to infrastructure from high winds and storm surges and flooding.			
Main health impacts	Trauma (injury) is most likely during a cyclone/hurricane/typhoon, or in the immediate aftermath. In the days, weeks (and sometimes months) following a cyclone/hurricane, the main health concerns are:			
	Health issues	Mechanism		
	Diarrhoeal diseases	1.1	Contamination of water supplies by flood water, damaged or destroyed sanitation facilities and poor hygiene practices	
	Vector-borne disea	ses Flooding or stagnant water the sites for vectors	Flooding or stagnant water that increases the risk of breeding sites for vectors	
	Respiratory illnesse and vaccine- preventable disease	normal services and impactir	Destruction and damage to health facilities and stock, disrupting normal services and impacting NCD treatment, and maternal and child health services	
	Disruption to norm health services		nealth facilities and stock, disruptinging NCD treatment, and maternal and	
Risk factors leading to an outbreak/ epidemic	 Poor WASH conditions Displacement of affected populations, especially if prolonged Inadequate or crowded shelters Lack of access to steady, appropriate food supplies Lack of access to health care facilities 			
Other Movement tools that may be relevant	 CBS ECV training manual CBHFA training manual ERUs (clinical and public health) – there is an annex for this 			