



Building Resilience and Rural Health System Capability for Pre-Disaster Planning and Preparedness CRTI No. 07-0135RD

The **2007 UN Global Risk Report** notes that response capability development for rural, remote and coastal communities (RRC communities) has been minimal. In Canada and internationally, emergency planning and response investments for CBRNE and all-hazard events are generally directed to urban centres. However, intentional/ unintentional attacks on humans, food, water supplies will directly impact rural, remote and coastal (RRC) communities. Additionally, CBRNE threats in urban centres will compromise RRC health care infrastructure through loss of supply systems and personnel. RRC communities have a triple jeopardy: fewer professional and financial resources, less emergency measures infrastructure, and they experience unique challenges created by geography, isolation and demographics.

In response to the social imperative for enhanced emergency planning in 'forgotten communities', the Justice Institute of British Columbia, in consultation with project partners and communities, will design, pretest and disseminate a suite of simple and effective indicators, tools, and training materials for decision makers/practitioners to assess the capability and resiliency of rural health care systems and communities. The JIBC team will develop an integrated risk assessment, communication and management framework (IRACM) to enhance organizational all-hazards response planning along with a set of rural community resiliency indicators (RCRI). The bilingual training curricula, tools, and web assisted networks will provide rural, remote and coastal (RRC) communities in Canada with fully operational protocols and resources to anticipate and mitigate risks. Federal Government partners, notably the Public Health Agency of Canada, Rural Secretariat, Agriculture and Agri-Food Canada and Public Safety Canada will undertake to integrate the tools, curricula, virtual Community of Practice (vCoP) and related deliverables into existing programs and projects, thereby extending the 'reach and saturation' of the dissemination process.

Using multiple primary and secondary data sources, engaged collaboration with key partners, needs assessments and pilot testing of curricula in 5 or more diverse communities, the JIBC will develop a set of accessible, web-assisted, user-friendly tools and training materials to





build capacity in rural, remote and coastal communities in Canada.. Content and process will include support to and enhancement of the Gender and Disaster Management Network of Canada (GDNC), the facilitation of communication linkages among diverse networks in support of a “Network of Networks”, and the provision and delivery of web assisted training, knowledge exchange and capacity building to the 5 or more pilot ‘communities of practice’ . The networks of networks will include, but are not limited to the Gender and Disaster Network of Canada (GDNC), the Ocean Management Research Network (OMRN), The World Association of Disaster and Emergency Management (WADEM Psychosocial Task Force), Public Health Agency of Canada (PHAC) Psychosocial InterAgency Working Group, Canadian Risk and Hazard Network (CRHNET), Canadian Women’s Health Network (CWHN), and links with the Pan American Health Organization (PAHO) and United Nations disaster management units.

To guide the work of JIBC and its partners, two expert reference committees will be convened: an Expert Reference Committee on Emergency Management and an Expert Reference Committee on Knowledge Translation. These committees will provide technology knowledge and will assist with quality control of educational products and internal peer review of project reports and publications.

Key partners, consultants, and advisors in this project include federal, provincial and territorial (F/P/T) agencies and departments in the Government of Canada e.g. Justice Institute of British Columbia; Public Health Agency of Canada (PHAC), Public Safety Canada; Rural Secretariat; numerous academic researchers in Canada, New Zealand and the United States, notably the University of Canterbury, NZ; McLaughlin Centre on Population Health Risk Assessment, Institute of Population Health,

University of Ottawa; and national and international non-governmental agencies (NGO’s) such as GPI Atlantic; the National Aboriginal Health Organization (NAHO), Canadian Women’s Health Network (CWHN), World Association of Disaster and Emergency Management (WADEM).



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