

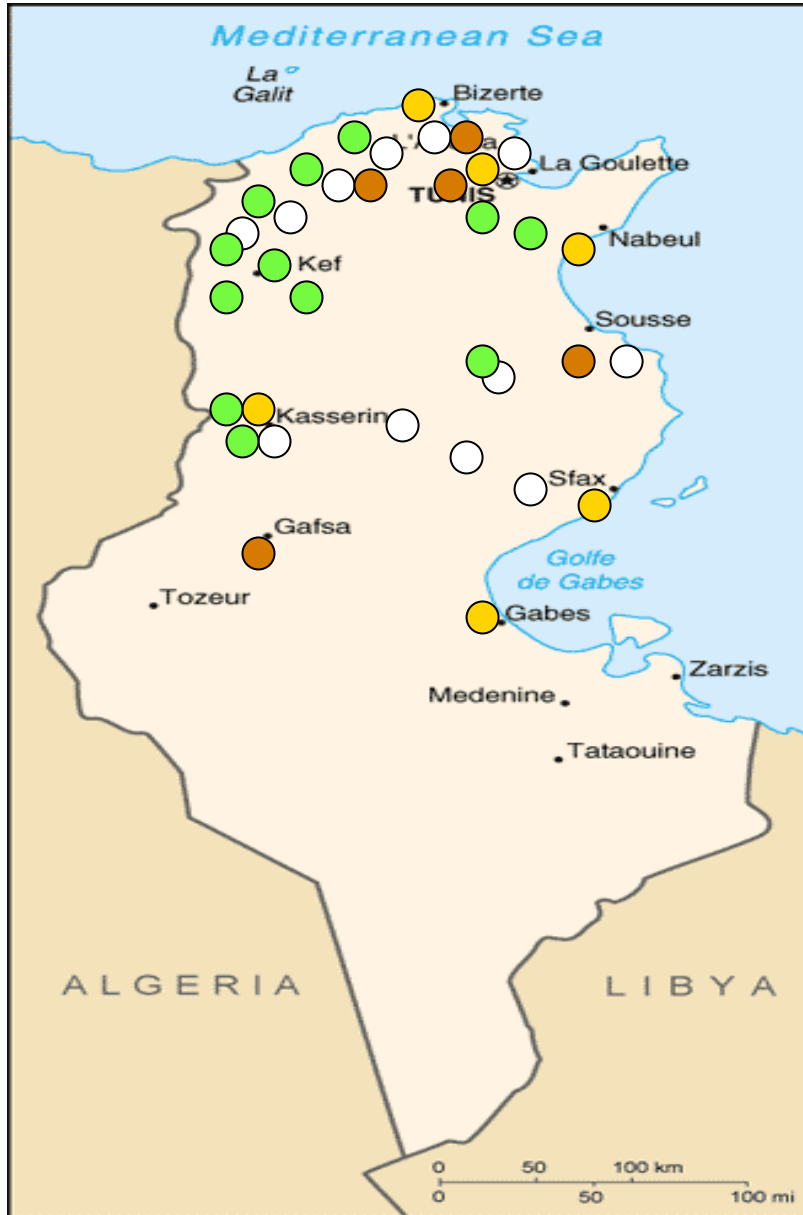


# **TUNISIAN HEALTH POLICIES IN DISASTER PREPAREDNESS**

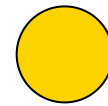
**Global Platform  
for Disaster Risk Reduction  
Third Session, Geneva, Switzerland  
8-13 May 2011**

# Introduction

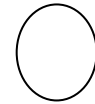
- **Disaster management is a strong and heavy task, and cannot be the responsibility of a particular organism;**
- **To optimize efficiency of planning and response, It is imperative to have the proper management;**
- **Due to limited resources, collaboration between governement, private participants and international agencies is highly required;**
- **In this stage or degree of collaboration, efforts must focus on establishing efficient coordination by organazing their interventions and making plans.**



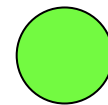
## MAIN COUNTRY HAZARDS



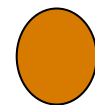
Chemical



Flood



Forest Fire



Earth quake

Référence : office national de la protection civile, 2005

# Past Events in Tunisia

- **Earth Quakes:**

- 410: Utique
- 854 : Kairouan (13 villages destroyed)
- 856 : Tunis (45.000 deaths)
- 1758 : Tunis, Gabes, (hundred of deaths)
- 1887 : Medjez El Bab, magnitude 6
- 1888 : Sened, magnitude 4,2

- **Floods :**

- 23 floods : 861 – 1980
- 1982 : Sfax, 68 deaths and severel hundreds homeless
- 2000: Bousalem, Jendouba, Manouba
- 2003: Tunis city

- **Others:**

- Hammam Chott 1985 : many deathes and injuries
- Train crash Sousse : 1994 ( 27 Deaths , 85 injuries)
- Plane crash Egypt air: 2002 (14 deaths )



# Events of major concern

« because of their impact per event »

- **Floods**
- **Forest fire**
- **Work and household accidents**
- **Road traffic accidents : more than 1400 deaths and about 15.000 injuries/year.**



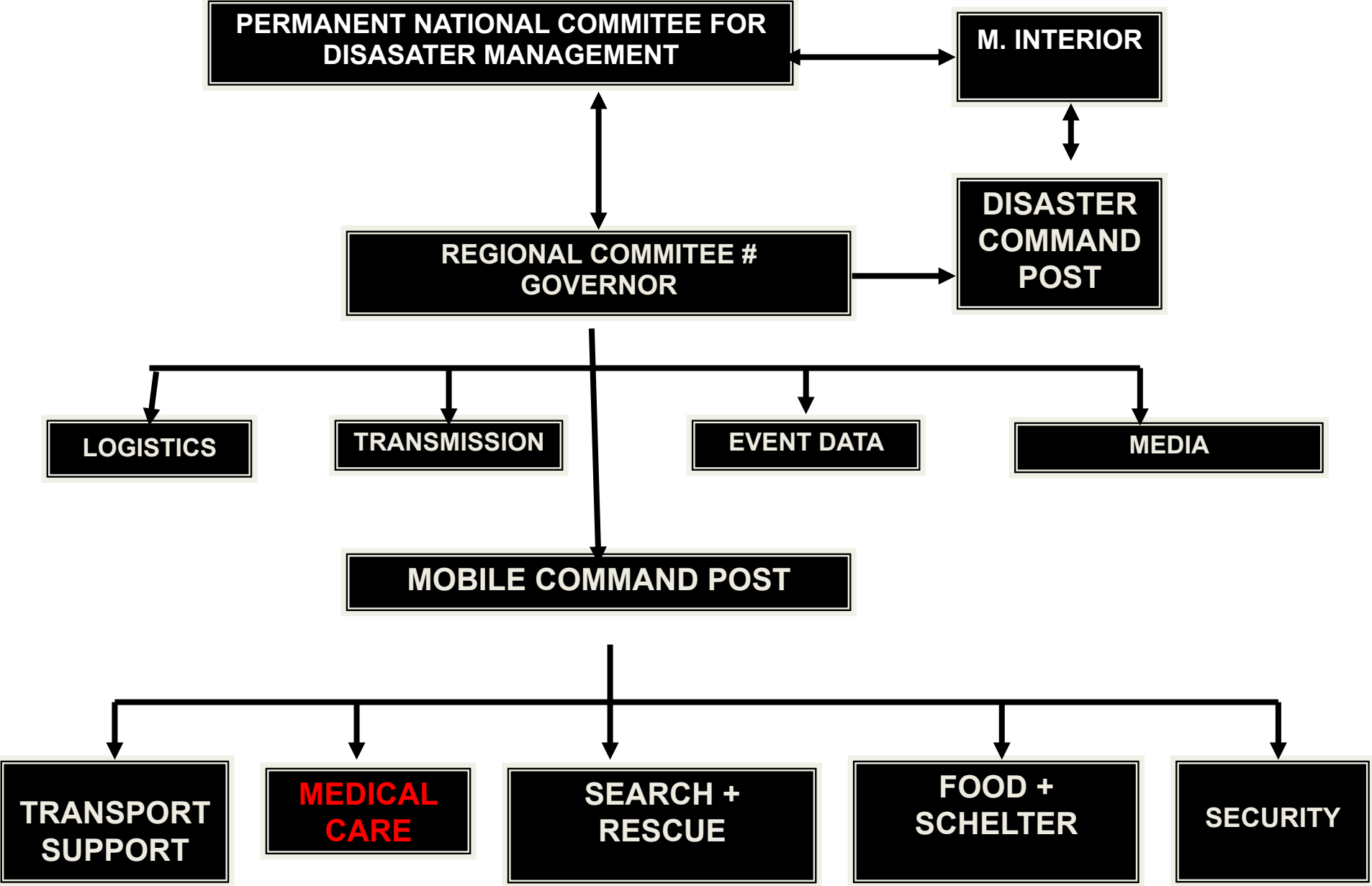
# Disaster Management

## Legislation

- Law 39 voted in 1991
- Decree 942 / 1993.
- 13 partners / Ministry of Interior
- Purpose:
  - \*Prevention
  - \*Vulnerability reduction
  - \*Research & rescue.



# DISASTER MANAGEMENT STRUCTURE



# Disaster preparedness

- **Disaster mitigation policies and measures will not stop occurring and persisting disaster, especially if it is a natural one.**
- **Disaster preparedness is defined as a continuous and integrated process involving a wide range of activities and resources from multisectoral sources;**
- **Tunisian MOH in collaboration with its partners, is already engaged in a process aiming at strengthening the National Health Emergency Preparedness and Response Program.**

•

# HEALTH POLICIES IN DISASTER MANAGEMENT

« realisations »

- Set up of **Emergency Unit department** in MOH (since 1997)
- Set up of **SNDU** (National Strategy of emergency sector development) (since 1998)
- Set up of **National comitee of Emergency medicine** (since 1999)
- Set up of the **Shoc Room** (strategic health operation center) in MOH (since 2010)

# **HEALTH POLICIES IN DISASTER MANAGEMENT**

**« fundamental axis »**

- 1. National strategy of emergency sector development (SNDU)**
- 2. Hospital preparedness for mass casualty**
- 3. Medical transportation**
- 4. Education and public awareness**
- 5. Strategic health operation center (Shoc Room)**

# 1. SNDU

- Established since May 1998 (under way)
- 3 axis :
  - Pre hospital emergency :
    - SAMU/SMUR
    - Phone communication
    - Coordination with other Departements
    - Medical transportation
  - Hospital emergency:
    - 4.500.000 patients in 2010
    - 182 emergency departments
  - Emergency Training:
    - University Education
    - Continuing Education

## SNDU

**Pre hospital Emergency**  
(first responder teams)

**Actually :**

- 6 SAMU / 17 SMUR
- 70% population
- 50% area
- New technology for communication (set up)
- Ambulance renovation
- Coordination: emergency number call

**Next Step:**

- One SMUR / Governorate
- Internet, visioconference
- Ambulance renovation
- More coordination



# SNDU

## Hospital Emergency

- **182 Emergency Department** ( more than 4.500.000 patient in 2010)
  - **20 ED in teaching hospital (third level),**
  - **33 ED in regional hospital (second level)**
  - **129 ED in local hospital (first level)**
- **New Bulding constraction and renovation for many emergency departements**  
( the first trauma and burn center since 2008, the second one by the end of 2011)
- **New emergency equipements with new technology**

### Training in Emergency medicine

- **Since 2002: paramedic specialty in emergency medicine**
- **Since 2005: medical specialty in emergency medicine**
- **Training courses in collaboration with international experts /WHO**

## 2. Hospital preparedness for mass casualty

- **BASED ON THE DAILY UTILIZED PROCEDURES**
    - **MANAGED BY SKILLED PERSONNEL**
      - **IN ORDER TO**
    - **MAXIMIZE THE USE OF EXISTING RESOURCES**
  - **PROVIDE PROMPT AND ADAPTED CARE TO THE VICTIMS**
- 
- **Circular : n° 50/2002 : hospital plan for mass casualty**
  - **Training courses and testing simulation exercise;**
  - **Annual Data collection from hospitals of existed equipments, the activities and health work force;**
  - **Setting up blood and drugs banks (in many governorates);**



## Mass casualty : second level hospital (Djerba Bombardment 2002)



## Simulation Exercise : mass casualty hospital plan



### 3. Medical Transportation

- **SAMU/SMUR**
- **Private**
- **Fire services (civil protection)**
- **Others (military..)**





### 3. Education and public awareness



- MOH, PC, ONG (CRT.....)
- We hope to unify programs

## **4- Strategic health operation center (Shoc Room)**

### **« Preparedness and response »**

- **Instantly Communication with the regional health departments using new technology (visioconference, internet,..)**
- **Ensure real time reception and management of health alerts**
- **Ensure information exchange and coordination among all partners during crisis situation : ministries and international organisation/WHO** (refugee crisis at tunisian- libyan border)

# **HEALTH POLICIES IN DISASTER MANAGEMENT**

## **« next steps »**

**Enhance the capacity of MOH to face emergency situation:**

- Updating Disaster legislation ;**
- Provide more training for health work force to improve their skills in emergency management;**
- Developing public awareness;**
- More collaboration between the actors in the field of disaster**
- The shock room will be able not only to support the national health response, but also to help reduce risks and integrate the international security scheme.**

# REFUGEE CRISES MANAGEMENT AT THE TUNISIAN-LIBYAN BORDER (SINCE 20 FEBRUARY 2011)





More than 70 nationalities fleeing Libya towards Tunisia following the intensification of conflicts in this neighboring country. As a result, Tunisia, which was neither accustomed nor prepared to handle this kind of event, suddenly faced the obligation and the duty to assist these migrants and refugees.



# First step: Tunisian army camp and field hospital (7 km away from the border)





## Camp logistics: civil society and local NGO (CRT)



## Local and regional health support to the camp



# International support (NGO and Organisations)



## National coordination for medical transport of injuries









# MEDICAL TRANSPORTATION OF INJURIES TO REGIONAL HOSPITALS



# Hospital mass casualty



## Coordination with International NGO and organisations



## **Maintenance and strengthening of the current frontline system**

- **The current system is already functioning and has proven its efficiency, demonstrated many strong points and has attracted the admiration and the gratitude of the national and international community.**
- **It also has some weaknesses and shows certain signs of fatigue.**
- **It is therefore essential to maintain and strengthen it to compensate for its weaknesses by taking stocks of lessons learned during this first phase and more supporting for the next phases.**

# Conclusion

- **In Tunisia The health care system is a priority;**
- **Significant investments in this area is stated;**
- **Disaster management needs more Collaboration between the actors in this field;**
- **Well drawn up and organized plan will increase disaster response;**

# THANKS FOR ATTENTION



**Dr HENDA CHEBBI**  
**SERVICE UNIT CHEF**  
**EMERGENCY UNIT DEPARTMENT**  
**GENERAL DIRECTION OF HEALTH**  
**MINISTRY OF PUBLIC HEALTH OF TUNISIA**  
Bab saadoun - 1006 tunis/ tunisia  
TEL/FAX/ +216 98 468 839/ +216 71 567 588  
email: [henda.chebbi@rns.tn](mailto:henda.chebbi@rns.tn)