

Closing Keynote

Presenter:

Arthur L. Kellermann, MD, MPH, Professor and Dean, F. Edward Hébert School of Medicine, Uniformed Services University of the Health Sciences (USU)

Session summarized and reported by:

Lauren Walsh, MPH, Senior Research Associate, NCDMPH

Overall Key Session Points:

1. The speaker brought together the concepts from the preceding two days by drawing attention to the challenges inherent in disaster research and practice while simultaneously acknowledging the advancements that have been achieved over the last decade.

Session Summary:

The closing keynote opened with a discussion of the difficulties inherent in doing disaster research as compared to traditional medical research and the need for a better system for conducting planned, controlled research in the wake of disaster. Dr. Kellermann warned of the danger of complacency on the part of policy makers and the general public, and cautioned that successful responses (such as after the Boston bombings) should not lull us into a sense of false security. Policy makers must understand that while we have improved our capacity to respond to mass casualty events since the terrorist attacks of September 11, 2001, there is still a lot of work to be done to ensure that we, as a nation, are ubiquitously capable of responding effectively to future events. Despite the relative successes of the Boston Marathon bombing response, we cannot assume that every American city is equally as prepared as the city of Boston. We must also prepare for the potential reality of more advanced terrorist attacks and more severe weather events. While attention to these issues has waned in the last decade, it is the responsibility of academics, practitioners, and scientists to help policy makers refocus on these issues and help move the country to a higher baseline of preparedness.

Dr. Kellermann offered the following recommendations for further enhancing our preparedness.

- Create a mechanism for quality rapid response research comprehensive in scope and well coordinated among the various federal agencies with a stake in disaster preparedness.
- Hospitals and other health care facilities must participate in more realistic, no-notice drills and exercises that truly illuminate the strengths and vulnerabilities in disaster plans.
- A certification and recertification process for disaster response personnel should be developed to hold the potential response workforce to a standard and consistent level of education and training.
- The nation as a whole should be better prepared to take care of themselves and others in a disaster.
- All must work together to overcome obstacles to effective risk communication to the public and to better engage citizens to be part of the solution when an event occurs.

The keynote closed with a charge for the attendees of the workshop to leave the meeting with new ideas, new contacts, and a renewed sense of purpose and strategy because disaster medicine and public health preparedness work is important and nationally significant, and we can all play a role in better preparing our nation.

Supplementary material

To view supplementary material for this article, please visit <http://dx.doi.org/10.1017/dmp.2014.145>