

### Education and Training in Disaster Medicine: The Role of CEMEC (European Center for Disaster Medicine)

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In case of a disaster, the affected community expects effective relief. Medical involvement is necessary not only in the planning, in the response, and the coordination, but also in the evaluation of disaster plans. The management of the medical effects of a disaster is one of the most difficult tasks to be performed by medical personnel. It requires specific knowledge, the ability to organize an emergency medical system adapted to the disaster situation, and the professional skill to provide medical care of high quality even in a hostile environment. Therefore, education and training in all aspects of Disaster Medicine are essential and should be harmonised and standardized.

The European Center of Disaster Medicine, sited in the Republic of San Marino and founded in 1986, was charged as an educational and training center under the auspices of the Open Partial Agreement of the Council of Europe, and has organised a large number of educational courses.

The project for the next academic year is the organisation of a post-graduate Masters program (one academic year of duration) intended to provide participants with a clear picture of current concepts and developments in the medical management of disasters. We expect the participants to be able to evaluate risks, participate in planning for disaster preparedness, direct the medical response team in case of disasters, organize and manage evaluation and debriefing sessions, and to provide an introduction to disaster management for medical response teams.

**Keywords:** CEMEC; degree; disaster; education; management; Masters; medical; training

### Strengthening Epidemiological Studies through Research

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This paper focuses on strengthening epidemiological methods and techniques through research and effective data collection in areas such as: 1) development of case definitions of disaster; 2) related morbidity and mortality; 3) generation of baseline information; 4) development of standard methods and indicators to determine the needs of disaster victims and beneficiary capabilities; 5) behaviour modification through educational programmes; 6) criteria for community evacuation; 7) severity measures of disasters and subsequent environmental impact; 8) adaptation of new technologies to reduce adverse health impact; and 9) systematic studies on the sensitivity, quality, and utility of information collection by various surveillance systems. The existing data system should provide for descriptive data about human and environmental factors and analytical data about risk factors should be designed and conducted.

All these factors can be facilitated by way of collaborative efforts with disaster-based research organizations enabling finding for directed research, fellowship opportunities, and awards for outstanding contributions in research.

**Keywords:** behavior modification; data, collection of; definitions; disasters, epidemiological studies; research

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