

Feature

DSHS teams up with federal, local partners to assess post-hurricane needs

Jo Horner, a DSHS epidemiologist at Region 2/3 in Arlington, was on special assignment in Galveston a couple of weeks after Hurricane Ike had swamped the island and damaged most of its homes.

Horner was one of 18 DSHS employees who, along with federal partners from the U.S. Public Health Service's Applied Public Health Team and the Centers for Disease Control and Prevention, were formed into 10 community-assessment teams. Each two-person team had one state partner and one federal partner. They interviewed randomly selected households in communities that had been hit by the storm, surveying residents about their public health needs.



Jo Horner, right, a DSHS epidemiologist from Arlington, takes a brief break with her federal partner while canvassing a neighborhood in Galveston.

"Our objective was to provide information about the impact of the hurricane and to identify the most important public health needs of the affected community, as reported by the people currently living in the area," says David Zane, an epidemiologist in the DSHS Community Preparedness Section in Austin and leader of the assessment teams.

Most of the storm survivors encountered by Horner maintained a positive attitude and lots of perseverance. "I learned that people are most interested in the basics," she says. "People look out for each other and are strong enough to face adversity."

Horner's work that day was one of three assessments carried out by the 10 teams over several days. The first teams were sent into Liberty on Sept. 25 and into Manvel on Sept. 26; a mostly different group of teams then canvassed Galveston on Sept. 30.



The teams conducted public health assessments in the towns of Liberty, Manvel, and Galveston. The assessment for the town of Liberty was requested by DSHS Region 6/5 South, which serves as its local health authority.

"This was a great experience," says Horner. "We need to work on letting communities know that these assessments are available and really worth doing."

The assessments were requested by DSHS Region 6/5 South, along with local officials and public health authorities from the Brazoria County Health Department and the Galveston County Health District. Greta Etnyre, deputy director of Region 6/5 South, helped facilitate communication with local officials. Jeff Taylor, manager of the DSHS Infectious Disease Epidemiology and Surveillance Group in Austin, helped facilitate communication with federal partners.

A one-page survey was developed in coordination with Dr. Vince Fonseca, the state epidemiologist, as well as the assessment teams, the CDC, and local officials. It included questions about security and safety, access to basic utilities, and hurricane-associated injuries, illnesses, medical care, and communications.

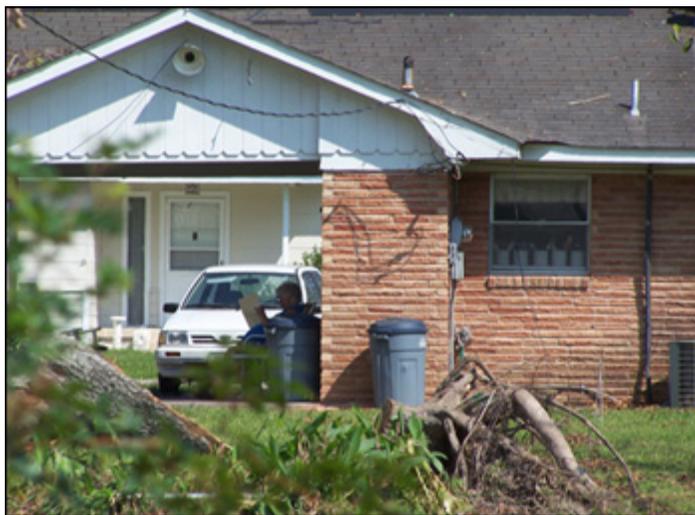
Teams also distributed health-education materials and information on local services.



The DSHS team members who conducted interviews in Liberty and Manvel were Vivienne Heines, left, David Zane, Rita Espinoza, Melissa Davis, Russ Jones, Sharyn Parks, Kristen Tolbert, Jo Horner, Carol Davis, Tracy Haywood, and Barbara Adams.



This house in Liberty was damaged during the storm by broken trees.



'It felt great to know that people were reading the materials we gave out,' says Carol Davis, an epidemiologist in Region 7 who conducted interviews in Liberty and Manvel. Above, a Liberty resident reads a DSHS handout.

Conducting the assessments in the three towns, teams visited almost 1,000 homes, interviewed nearly 500 people, and notified local authorities about 42 households that had specific health needs, such as prescription medicines, or urgent needs, such as shelter.

"Most DSHS team members were epidemiologists," says team leader Zane. "We also had one Geographic Information Systems analyst, a nurse, a health educator, a public health technician, and an Epidemiology Intelligence Service officer, Sharyn Parks, assigned to Texas by the CDC."

DSHS team members came from their normal assignments in Austin and three regions: Region 2/3, headquartered in Arlington; Region 7, headquartered in Temple; and Region 11, headquartered in Harlingen. "Our team also included one HHSC employee, Angela Tucker-Hamiyeh, from the Office of the Inspector General," says Zane.

"There was a lot of preparation," says Tracy Haywood, the GIS analyst in the DSHS Community Preparedness Section in Austin. "We used GIS tools and U.S. Census data to randomly select certain areas of the communities and certain households within these areas to interview. We also created maps to guide the teams to their assigned areas."



Areas in orange on this DSHS map of part of Galveston Island show the neighborhoods where assessment teams conducted interviews.

Local officials used the information to assist in their disaster response. For example, as follow-up action to the assessment in Galveston, the Galveston County Health District developed a one-page flier on information that the community needed; 6,000 were distributed.

"The teams in Galveston were extremely organized," says Dr. Dana Wiltz-Beckham, an epidemiologist and veterinarian who directs Diseases and Disaster Preparedness for the Galveston County Health District. "It was the most professional outfit that I have ever worked with."



Galveston residents were interviewed by a team whose DSHS members were David Zane, left, Tracy Haywood, Marcia Becker, Sky Newsome, Angela Tucker-Hamiyeh of HHSC, Leilanni Alaniz, Lesley Bullion, Peter Langlois, Kristen Tolbert, Jo Horner, Sharyn Parks, and Karen Moody.



The residents of this flooded home in Galveston removed their damaged belongings.

Barbara Adams, an epidemiologist at Region 11 in Harlingen, was on an assessment team. "It was a pleasure working with my counterparts in the state," she says. "We often meet to discuss public health issues, but we rarely work side by side. I thoroughly enjoyed this."



Hurricane Ike hit the Texas coast on Sept. 13.

Vivienne Heines, a Region 11 team member from Corpus Christi, recalls an elderly resident in Liberty, with a storm-damaged home and no power for 13 days, who was sleeping on a mattress on her living-room floor. When asked her greatest need, she reported none: "We were very lucky, not a scratch. But I sure feel for all of those people in Galveston."

"We were warmly received by local residents and officials," says Russ Jones, an epidemiologist at Region 7 in Temple. "Several residents told our teams, 'You're the first ones to come to ask us what we need.' People felt reassured that they were not being forgotten."

For more information about DSHS community assessments, go to <http://www.dshs.state.tx.us/compreg/rna/default.shtm>.

POSTED OCT. 24, 2008