Background & Purpose

Background: The Haiti earthquake of 2010 was a watershed moment for emergency management and demonstrated the need for increased standardization and organization of global disaster response. Minimal emergency management and demonstrated the need for increased teams consisting of PTs globally.

Purpose:
To initiate a conversation with PTs, who have participated in the response phase of a natural disaster.
To uncover minimal or potential competencies required for effective clinical care during these events.
To stimulate further investigation and, ultimately, the development of research or expert consensus has resulted in an absence of formally identified clinical competencies necessary for a physical therapist to effectively provide patient care in the response phase of a natural disaster. The necessity of PTs on disaster response teams is clearly stated. The demands of a disaster setting are mentally, physically, and emotionally unique and require either extensive professional experience or mentoring during the event. Advanced preparation and training is recommended. This study also highlighted the great need for professional advocacy regarding the role of PTs in disaster response.

Subjects

Eight United States-licensed PTs were identified through APTA-related listservs, a literature search, and word of mouth. Five participated, two refused, and one was unavailable to participate. Participants’ ages ranged from 47-56 years old at the time of their response to the 2010 Haiti earthquake. On average, participants had 27.4 years of work experience as a licensed PT at the time they responded.

Methods

A mixed-methods approach using a survey and a qualitative, phenomenological, in-depth interview methodology was used for this study. A literature review to identify clinical competencies in global health, disaster response, and emergency medicine resulted in five common domains used to frame the interview: logistics, environment, culture, communication, and ethics. After third-party transcription, three investigators coded each interview for a thematic analysis of data.

Results

Thematic analysis confirmed the applicability of five common domains in identifying clinical competencies necessary for effective physical therapy care during disasters and highlighted common themes within each. Additional domains were not identified. Each domain contributes significantly, frequently, and rarely in isolation to clinical decision making.

Conclusions & Limitations

Conclusions: This pilot study identifies five potential domains which can be used as a framework for future investigation of clinical competencies necessary for a physical therapist to effectively provide patient care in a disaster response phase of a natural disaster. The necessity of PTs on disaster response teams is clearly stated. The demands of a disaster setting are mentally, physically, and emotionally unique and require either extensive professional experience or mentoring during the event. Advanced preparation and training is recommended. This study also highlighted the great need for professional advocacy regarding the role of PTs in disaster response.

Limitations: Sample size was small and consisted of subjects who are not considered “experts” in disaster response or global health. Additionally, the 2010 earthquake in Haiti was the only disaster that was analyzed in this study.

References


"It’s like, what could I do that didn’t put this patient at risk, but could get them up off the ground?"