

utilizing and maintaining ships during peacetime, and 3) establishing access to ships that are unable to dock at a port.

**Conclusion:** Hospital ships in Japan are considered to utilize existing vessels rather than building new ones. However, there are unresolved issues, such as how to operate the ships during disasters, the cost of maintenance, and transporting patients from land.

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### Assessing Local Community Resilience Through Co-design Processes by an Australian Primary Health Network

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**Introduction:** The Sydney North Health Network (SNHN) covers an area of 350 square miles in Eastern Australia. It is one of 31 Primary Health Networks (PHNs) across Australia. The purpose of PHNs is to improve access to primary healthcare particularly those at risk of poor health outcomes. During disasters these vulnerable groups may be even more disadvantaged. As part of SNHN's role in enhancing the wellbeing, resilience, and preparedness of communities and primary healthcare providers during disasters, SNHN is focusing on recovery and resilience initiatives that build on local strengths, while addressing challenges.

**Method:** The aim of this community engagement research was to determine the impact of recent extreme weather events on the community, and identify strategies to improve wellbeing, resilience and preparedness. The research was approached through a co-design process to explore assets, strengths and vulnerabilities within vulnerable community members during disasters, and to ascertain their perspective on their needs during disasters. SNHN funded a well-established local community organization to conduct surveys and focus groups with the SNHN community to inform future community-led programs to support individuals and communities in disasters.

**Results:** Participants considered impacts on mental and physical health, children, the environment, and property as key challenges. Equally, they acknowledged they didn't start as a "blank slate", but came to the disaster with considerable individual and community strengths and assets, that enabled their resilience, including numerous resources to support social capital. Person-centered, community-inclusive planning, preparedness, and connectedness was seen as key solution.

**Conclusion:** In order to promote and enhance the wellbeing, resilience, and preparedness of communities and primary healthcare providers, successful recovery and resilience initiatives should build on local strengths, while addressing challenges. Individuals and communities should be integral in designing programs to build their local resilience and wellbeing, as they know their attributes and strengths, and their needs.

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### Assessing the Preparedness for a Cyanide Poisoning Mass Casualty Incident in Brooklyn

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**Introduction:** Urban communities are under constant threat of numerous potential disasters, including cyanide exposure events. Exposure can occur in settings such as structure fires, industrial accidents, or even intentional acts of terrorism. The typical treatment modality for cyanide toxicity employs the antidote, hydroxocobalamin. While studies regarding antidote availability have been conducted in Korea and Hong Kong, a literature search did not reveal any such studies in any part of New York City.

The borough of Brooklyn has a population of 2.57 million people. In the setting of a mass casualty incident (MCI) involving cyanide toxicity, such as a large structural fire or a chemical attack, it is uncertain of the region's capability to provide hydroxocobalamin. The objective of this study is to assess the stockpile of hydroxocobalamin across acute care hospitals in Brooklyn.

The amount of hydroxocobalamin required to treat a cyanide-related MCI was based on recommendations from the 2018 US Expert Consensus Guidelines for Stockpiling Antidotes. Ten grams of hydroxocobalamin are needed for each 100-kg patient. Theoretically, a minimum of 50 grams of hydroxocobalamin would be required for a mass casualty incident (5 patients).

**Method:** Fifteen acute care hospitals within Brooklyn were identified as potential treatment sites for cyanide exposure. Each site's emergency manager was sent a survey identifying hydroxocobalamin availability in both their pharmacy and their emergency department.

**Results:** All 15 hospitals responded to the survey. Two of the 15 hospitals had at least 50g of hydroxocobalamin in their inventory, however, no hospital had 50g stored in their emergency department. The median amount of hydroxocobalamin stored was 20g or two doses.

**Conclusion:** Should a mass casualty incident involving cyanide exposure occur, only two hospitals in the borough of Brooklyn would be prepared to treat five or more patients presenting to their hospital.

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### Worldwide Impact of COVID-19 on Frontline Pharmacists' Roles and Services: INSPIRE International Questionnaire

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**Introduction:** Pharmacists have been recognized as essential healthcare professionals during the COVID-19 pandemic. However, evidence of the challenges that were faced by the profession and the way pharmacists adapted their roles throughout the pandemic are largely unknown. This study aimed to describe the impact of COVID-19 on pharmacy practice around the world.

**Method:** A cross-sectional online questionnaire with pharmacists who provided direct patient care during the pandemic. Pharmacists were recruited through social media with assistance from national/international pharmacy organizations. The questionnaire was divided into three sections; 1) demographics, 2) pharmacists' roles/services during the pandemic, and 3) practice challenges. The questionnaire was adapted from the established, piloted, and published INSPIRE Canadian Survey. The data were analyzed using SPSS 28. Descriptive statistics were used to report frequencies and percentages.

**Results:** A total of 505 pharmacists practicing in 25 countries consented and completed the questionnaire. Only 26.4% (132/500) of participants were engaged with local disaster and public health agencies during the pandemic to coordinate pandemic response. The most common role that pharmacists undertook was responding to drug information requests (89.4%, 448/501), followed by allaying patients' fears/anxieties about COVID-19 (82.7%, 413/499), educating the public on reducing the spread of COVID-19 (81.3%, 409/503), and addressing misinformation on COVID-19 treatments/vaccinations (79.1%, 397/502). The most common services provided by pharmacists were performing medication reviews (78.5%, 391/498) and managing and/or monitoring patients' chronic diseases (72.3%, 362/501). Almost half of the participants reported administering COVID-19 vaccines (44.9%, 225/501). The most common challenge that pharmacists encountered was increased stress level (82.2%, 415/505), followed by medication shortages (72.3%, 360/505).

**Conclusion:** Despite the unprecedented nature of the COVID-19 pandemic and the various challenges associated with it, pharmacists around the world adapted their roles and services to continue to meet the needs of their patients and be their safe-haven for ongoing care.

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### Societal Disruption as a Disaster

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**Introduction:** This research aims to review the impact of drug addiction, domestic violence and suicide in Australia through the lens of disaster risk reduction. This study explores whether drug addiction, domestic violence and suicide can be considered as disasters according to established thresholds and definitions;

and whether contemporary health emergency and disaster risk management (HEDRM) practice can be adapted to support action to reduce the impact of these events and inform disaster risk reduction.

**Method:** A literature review was conducted to explore drug addiction, domestic violence and suicide as societal disruptions causing disasters. Key Australian government reports describing deaths associated with suicide, domestic violence and drug addiction were identified, following which a constrained snowball sampling was applied to the bibliography of each document to gather further key articles and inform the evolution of the impact of these themes in Australia over the period 2000–2018. The search strategy included both peer reviewed and grey literature. We used the search terms 'social disruption', 'non-traditional', 'drug addiction', 'domestic violence', 'suicide' and 'societal disruption' as key words and included articles if they demonstrated an analysis of the theme related to health impact related to disaster settings.

**Results:** Utilizing the Australian Disaster Resilience Knowledge Hub and the international CRED criteria for a disaster, the impact on human health of drug addiction, domestic violence, and suicide upon the Australian population each meet the criteria of a disaster.

**Conclusion:** Public health practice through the lens of the determinants of social disruption combined with activities that consider hazards, vulnerability, and exposure, can institute prevention, preparedness, response, and recovery programs to reduce the impact of drug addiction, domestic violence, and suicide.

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### Which Ethical Principles Guided the Ethical Decision During the COVID-19 Pandemic in the UK, Ireland, and the US? Findings from a Qualitative Systematic Reviews

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**Introduction:** With the Covid-19 pandemic impacting the world at such a quick rate and with many unknown variables and dangers, there was an immediate need for ethical guidance to ensure those in many different healthcare settings such as researchers and other professionals could perform ethically in this new and complex situation. This study aims to take existing research on those ethical guidance documents in the UK/Ireland and compare them with those from the United States.

**Method:** This study used a qualitative systematic review methodology with thematic synthesis to analyze the included ethics-related guidance documents, as defined in this review, published in the UK and Ireland between March 2020 and March 2022. The search included a general search in Google Scholar and a targeted search on the websites of the relevant professional bodies and public health authorities in the three countries. The ethical principles in these documents were analyzed using the constant comparative method (CCM).