

GEO HEALTH Community of Practice
Annual Meeting 2021 – Day 2

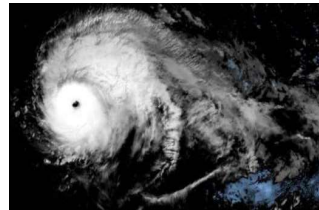
**HEALTH CARE INFRASTRUCTURE –
The impact of **acute** extremes.**

December 14, 2021

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John Balbus, NIEHS/NIH

Are these **rare** extremes?

- Earthquakes, floods, atmospheric events (e.g. **Kentucky Berkshire**) landslides are regular **natural** extremes with significant effects on population.
- **Man-made** caused toxic releases and radioactive accidents are rare, but with large population exposures.
- These are “**time** depending events” with health emergencies for which the status and operational capabilities of HCF is important (**critical infrastructure**).
- Epidemics (and the ongoing **pandemic**) are causing escalating demands for hospitalizations that can raise acute needs beyond the normal capabilities.



GEO Earth Observations for Health (EO4HEALTH 2020-2022)

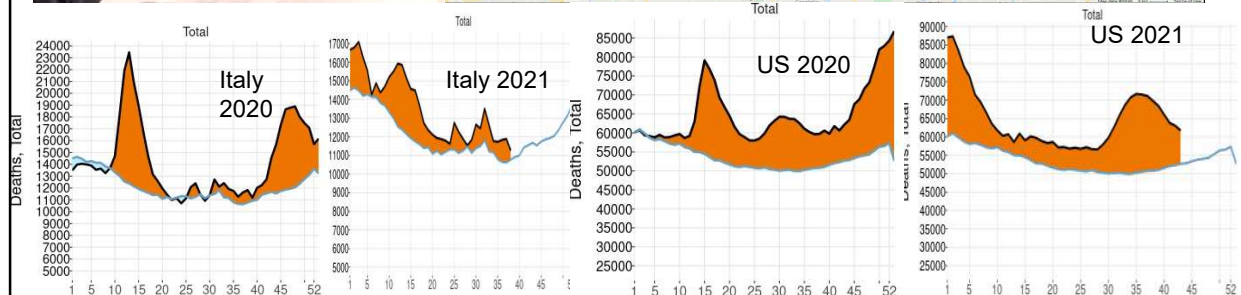
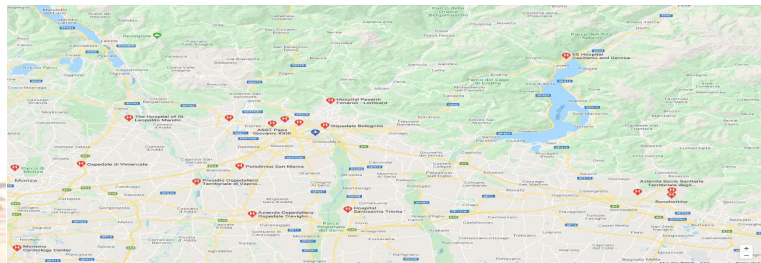
Goals for this Area:

E. Health Care Facility **Infrastructure** and **Status**

1. Develop a **partnership** with UN agencies (WHO, UNISDR, UNEP) and governmental agencies (Australia, Canada, China, European Union, India, United Kingdom, United States) that share an interest in better identifying health care facilities at risk from environmental stressors and extreme weather events.
2. Integrate **EO datasets** (existing in open and possibly commercial sources) in order to develop an informational resource that assesses the vulnerability of health care facilities,
3. To assess their infrastructures **risks to local environmental stressors** (during seasonal loads and local population needs).
4. Develop methods to assess the **adequacy** of these facilities under regional acute catastrophes or during escalating chronic pandemics.
5. This has implications of their **functional status** both real-time operations and for long-term health adaptation planning.

Slide 2

Geolocation: Covid-19 **Short-term Mortality Fluctuations**



Data credit of: <https://mpidr.shinvaops.io/stmortality/>

Particularly thankful to:

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[Rensselaer Polytechnic Institute],

Balbus, John [NIH/NIEHS]

[National Institute of Health] to the new ...

[Office of Climate Change and Health Equity](#)

within the Department of Health and Human Services.

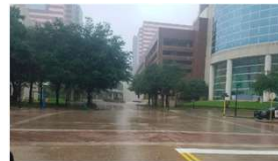
Slide 5

Stories of Success: Healthcare Facility Resilience *Texas Medical Center in Houston, Texas*

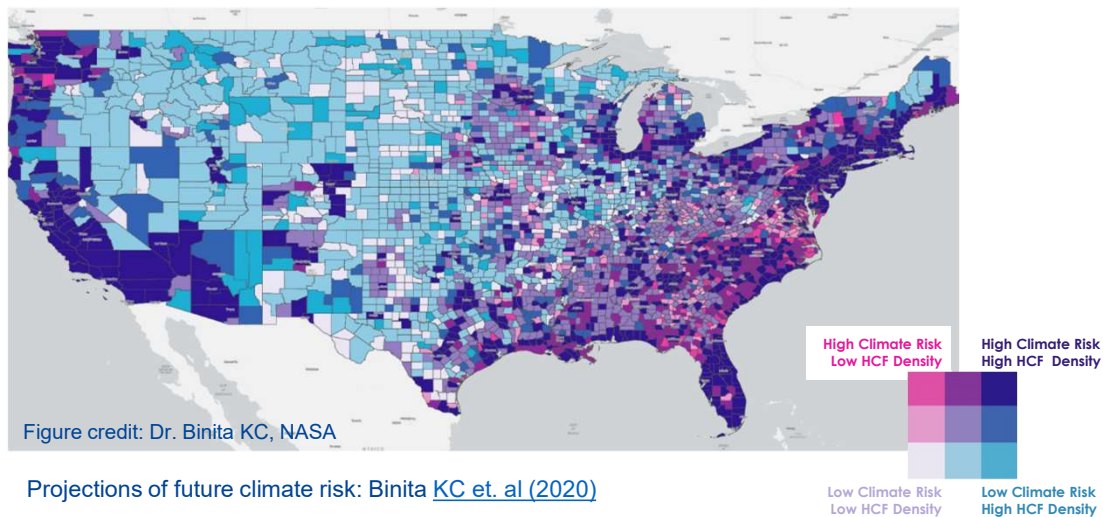
Tropical Storm Allison, 2001



Hurricane Harvey 2017



Projected Future (2040s) Climate Risks for HCF



The automation process ...



Footprint of the residential structures,
Using deep learning models from the imagery,
Image segmentation and
...no trivial GPU or CPU capacity.

Big-data for efficient handling of emergencies

- Assessment of **population** health care capabilities associated with environmental exposure.
- **Adequacy** of their infrastructure status under usual and acute events.
- Testing of health infrastructure needs during **emergency interventions**.
- Coupled remote sensing with static ground observations for facilitating the **real-time** extraction processes.
 - In the future integrate:
- **Moving** population densities (with e-passports) and
- Assessment and **adaptation** of health needs (intelligent with **on-site** technologies).

Current HCF (all levels) Italy:

In Italy 3816.
In Lombardy 737 and in the counties:

- Milano **260**;
- Brescia **77**;
- Bergamo **76**;
- Monza 63;
- Varese 57;
- Pavia 50;
- Mantova 49;
- Cremona 31;
- Como 30;
- Lecco 26;
- Lodi **10**;
- Sondrio 8.

Some final remarks ...

- 3d generation of handling data sources for "**static**" **geo-located** data (with pilot studies)/
- Describe the flow of data necessary for conducting the **monitoring** and assessment process.
- Covers the observations needed for assessing **vulnerability** of health care facilities and
- This process could identify the areas where **additional** humanitarian **facilities** will be necessary or the resources that could be borrowed from neighboring areas and
- Can assist in the **optimization** of relief capabilities during emergencies.
- Target to specific **vulnerable** population **groups** (child, elderly or ...) and
- This is the **starting** work and the initial efforts for developing an operational collaboration for health-care resilience,