

Tulane receives CDC grant to improve emergency preparedness & response

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The [Tulane School of Public Health and Tropical Medicine](#) was recently awarded a Public Health Emergency Preparedness & Response (PHEPR) grant from the Centers for Disease Control and Prevention (CDC), intended to improve emergency preparedness and response throughout the region.

The 12-month, \$330,000 grant will assist the existing mission at the [Region 6 Public Health Training Center](#) and Tulane Center for Applied Environmental Public Health (CAEPH).

The project aims to increase awareness, availability, and access to effective evidence-based strategies and interventions (EBSIs), work with regional state and local partners to increase the ability of the state and local health departments to implement EBSIs, and to advance new approaches, training, and translation activities.

Dr. Stephen Murphy, director of the Disaster Management MPH Program in the [Department of Environmental Health Science](#), will serve as the principal investigator, working with a team including Dr. LuAnn White and other personnel at the Region 6 Public Health Training Center. The team will also partner with Dr. Jeffrey Elder, medical director for emergency preparedness at University Medical Center and LCMC Health.

“This is a short grant,” Murphy said. “A planning phase grant of sorts, to establish priority PHEPR areas that would benefit from additional translation, identify additional evidence-based strategies and interventions across the region, and ultimately inform the operational elements in the form of a five-year workplan for future regional public health emergency preparedness and response centers.”

In 2020, the National Academies of Science, Engineering and Medicine (The National Academies) provided a scoping review of communities characterizing the evidence for PHEPR. Since the release of the National Academies report, health departments have had to address multiple large-scale infectious disease outbreaks and natural disasters.

“The COVID-19 pandemic stressed all systems to their limit, identifying major gaps in public health practice knowledge,” Murphy said. “The results of these reviews show great breadth in the PHEPR field as it relates to knowledge available to support current practice and highlights the need to expand knowledge to address specific gaps.”