**Method:** Program Evaluation

**Evaluation theory and practice blossomed in the United States over the past 60 years; significant influences:**
- U.S. defense forces vast expansion in response to perceived Soviet threats (1950s)
- Proliferation of new laws protecting civil rights of minorities and persons with disabilities (1960s)
- Movement to hold educational and social reforms accountable for resource utilization and meeting objectives (1970s)
- Government response to catastrophic events/disasters (e.g., Hurricane Katrina) (2000s)
- Current climate of accountability across organizations (present)

**Defined as “assessments of any coordinated set of activities directed at achieving goals.”** (Stufflebeam, 2001, p.10)

- Training for disaster response preparedness is one piece of the “set of coordinated activities directed at achieving the goal” of disaster response preparedness
- Paraphrased: the human condition is to be vulnerable to the disasters that naturally occur in every corner of the globe. Every nation has some form of disaster response preparedness. Military forces tend to be more readily available resources to respond; robust training is part of the military culture. Gaining knowledge and understanding of how respective member nations in the APMHE train for disaster response preparedness lent itself to a capabilities assessment, or program evaluation
- Method that informs decision-making for a specific program; in this case, evaluation of:
  - Disaster response preparedness training and capabilities of member nations of APMHE
  - Specifically investigating stakeholders’ report of their own disaster response preparedness training
  - Perceptions of greatest disaster preparedness training need
- Essential component of program evaluation is engagement of various stakeholders and communicating results back to them

**Results:** Quantitative

**Respondents:**
- Converse sample
- n = 49
- Responded to emailed link invitation (49, 100%)
- Attended APMHE 2016 (21, 43%)
- Did not attend APMHE 2016 (26, 53%)
- More than 10 years military service (34, 69%)

No significant differences were found between those that did and did not attend APMHE 2016 for questions 1-10 (p>0.05) using Fishers exact test. A trend was found in responses to question 11: “On average, how many weeks have you served in the military?” There was no difference in responses to question 12: “How many years have you served in the military?” (p=0.362). The breakdown is as follows:

- Less than 5 years: 3, 6%
- 5-10 years: 10, 20%
- 11-15 years: 14, 28%
- 16-20 years: 14, 28%
- More than 20 years: 12, 24%

**Conclusions:**
- **Knowing our counterparts train, identifying common areas of disaster response training needs, and formulating concrete plans to close gaps will build international collaboration and improve the likelihood of saving lives**
- **Program evaluation is one research framework for conducting this type of capabilities assessment**
- **Networking and collaborating with multinational military partners open the door to much richer knowledge and understanding of each other’s capabilities**

**Recommendations:**
- Repeat the survey inquiry with European and African partners to determine what differences, if any, exist
- Conduct literature review to explore existing state of the science on disaster response preparedness training best practices
- Conduct training that integrates multiple types of healthcare providers (physicians, nurses, medical service administrators and leaders) and assures opportunity to work together to safely evacuate casualties
- Inform future training efforts with input from stakeholders who participated in this study

**References:**