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Background Disaster and Health Information Systems have been designed and used separately. Disaster management systems provide information on hazards as well as relief management which are usually public information. Public health information systems provide information on individual patient profile as well as community health profiles. In disaster situations, however, aside from hazard information, human security information and health information of individuals and communities provide relevant information in disaster response, specifically in reducing mortality and morbidity.

Objectives The objective of the study is to design, develop and test the feasibility of interface between three systems: eBayanihan (a nationwide participatory disaster management system for the Philippines), SHEREPO (shelter reporting human security system from Japan) and SHINE OS+ (an electronic medical and referral system).

Methods We conduct training on use of systems with participants from two groups: first responders and health officers. A simulation of using systems in parallel is conducted to gather user behavior. Feedback is also done through focus group discussions.

Result Findings show parallel dimensions or factors relevant in integrating health systems with disaster systems. Specifically, location, time, health status are significant factors in interfacing of systems.

Conclusion There is a need to confidentiality and data privacy at the policy level for communities to adopt the technology.