

the reality of their loss; the tragedy of the event was re-experienced; and the feelings of anger as a psychological reaction after the traumatic loss were expressed. Those families who were not able to find the remains of their loved ones had longer denial and mourning processes. News coverage consisted of daily, detailed and repetitive visual coverage of the jet crash as well as in-depth reporting of details of the private lives of the families who had lost a member or members. Data and statistical analysis of the calls to the "Hot Line" indicated that less than 10% of the calls were from the families of the victims while the remaining 90% were from the general population.

Mass media, and in most of the cases, television reporting, can have a powerful influence on the development of post-traumatic reactions, not necessarily disorders.

**Keywords:** airplane; Armenia; media; reporting; trauma  
*Prehosp Disast Med 2007;22(2):s138-s139*

### Developing, Implementing, and Evaluating a Comprehensive, Statewide Disaster Mental Health Training Program

*J.H. Herrmann*

University of Rochester, Rochester, New York USA

The terrorist attacks on 11 September 2001 and the catastrophic aftermath of Hurricane Katrina in the Gulf region of the United States have raised considerable concern about the country's readiness to respond and recover from disasters of a large magnitude. More recently, the growing threat of a pandemic influenza caused the federal government to strongly encourage, and in some cases mandate, a higher level of public health preparedness.

While sophisticated surveillance and detection equipment and metropolitan disaster evacuation plans are being developed, the psychological and psychosocial consequences of disasters often are overlooked or marginalized. Communities across the US are unprepared to face the significant public mental health crisis resulting from large-scale human and naturally caused events.

The state of New York has made tremendous strides in preparing mental health and spiritual providers to address myriad reactions experienced by disaster victims, their families, and relief personnel, and to provide individual and community-based resilience interventions. A statewide training curriculum and dissemination model has been developed and initiated over the past 16 months, resulting in >1,200 trained professionals to-date.

This presentation will describe the processes involved in developing a statewide disaster mental health training program with implications for other states and countries. Issues to be discussed include: (1) how to foster collaborations with state and local stakeholders to develop and sustain a training program; (2) constructing evidence-based training curricula and competencies; and (3) methods for evaluating the satisfaction and efficacy of training.

**Keywords:** disasters; public health; mental health; preparedness; United States

*Prehosp Disast Med 2007;22(2):s139*

### Session 2: First Aid

*Chairs: Carol Amaratunga; Gloria Leon*

#### Psychosocial Assistance during Emergencies: The Current Situation in the Czech Republic

*S. Vymetal; J. M.G.R. Malikova*

Ministry of Interior, Prague, Czech Republic

With the increasing number of emergencies (floods, traffic accidents with a large number of casualties, and fires) and potential threats (terrorist attacks, natural, and industrial accidents), the need to provide psychosocial support to its citizens has grown during the last few years in the Czech Republic.

This presentation will discuss the main principles, stages, and forms of psychosocial assistance as well as the development of psychosocial assistance in the Czech Republic. This includes the systematic development of psychosocial assistance by the Ministry of the Interior of the Czech Republic, non-governmental organizations, Czech Airlines, the Ministry of Health, the Ministry of Foreign Affairs, and the Medical Rescue Service. The networking of psychosocial assistance providers during large-scale emergencies, disasters, and acts of terrorism abroad, a central system of management of psychosocial assistance, and the exercises of the Integrated Rescue system also will be discussed.

This presentation also will review psychology in crisis management and the myths and realities of situations as related to the affected population and the principles of providing valid information to the public.

This discussion will conclude with the objectives for psychosocial assistance in the Czech Republic in view of new threats. Intermediate objectives include: (1) developing standards; (2) improving cooperation; (3) creating and implementing intermediate and long-term assistance-oriented policies; (4) developing psychosocial assistance systems; (5) focusing on the specifics of mass-casualty incidents and chemical, biological, radiological, nuclear, and explosive-related incidents; (6) creating and implementing culture-sensitive programs and policy; (7) developing cooperation with the media; and (8) creating an umbrella organization for disaster and crisis psychology.

Long-term objectives include: (1) creating and implementing a public awareness campaign; (2) creating community development; (3) working with schools; (4) enhancing international cooperation; (5) conducting research in the field of emergency situations and crisis management; and (6) making efforts to unify terminology.

**Keywords:** crisis management; Czech Republic; disasters; emergencies; psychosocial assistance

*Prehosp Disast Med 2007;22(2):s139*

#### Psychological First Aid

*F. Deignan*

State of New Hampshire, Concord, New Hampshire USA

Psychological First Aid is an intervention that has been embraced by the Red Cross movement, the Institute of