standard operating procedures, and recommendations to overcome the common challenges within conflict contexts.

Conclusion: The outcome document will be used as a reference guide to build on existing knowledge in mobile health service delivery in complex emergencies.

Prehosp Disaster Med 2017;32(Suppl. 1):s86-s87

doi:10.1017/S1049023X17002266

Prevention and Risk Management from Nature to Society: How can Medicine Help Reduce the Refugee Crisis in

Mexico? Joanne Joloy

Ya Respondiste A.C, Ciudad de México/Mexico

Study/Objective: To sensitize Mexican doctors on preventing immigrant disease complications.

Background: Mexico serves as a halfway point for immigrants seeking safety and a better life. Many of these refugees carry severe diseases that complicate matters. These complications could be prevented by proper and timely treatment. Currently, there are no programs targeted at immigrant health. Doctors should be sensitized to the current situation and the need to prevent health complications.

Methods: Retrospective, observational, longitudinal study of refugee patients found in Mexico City; 200 refugee patients (ages 11 to 55) found in immigrant homes and hotels working with the Responde A.C. Foundation were included.

1. Three different sites were selected, where there was a higher density of patients.

2. Specialized and experienced doctors enrolled the patients through a weekly triage.

3. A clinical file was created for each patient containing a full medical history and background on the patient. 4. Patients were given a weekly follow-up for 2 months, during these follow-ups they were asked about their recovery progress. A clinical consult was given to monitor their progress.

Results: We found that there is a constant need for general and specialized medical care among refugees in Mexico. Providing timely and appropriate care showed improvement in the patients perceived quality of life. The 130 patients showed good progress, 20 patients developed complications, and 50 patients were lost during follow-up. At the present time, the statistical analysis will conclude by the end of 2016.

Conclusion: There is an immigrant crisis in Mexico, and health-care providers should be aware of this problem and action should be taken to prevent this crisis from continuing to grow. This study shows the importance of timely and accurate medical care, and the impact it could have in preventing complications and improving the quality of life of refugees in Mexico.

Prehosp Disaster Med 2017;32(Suppl. 1):s87 doi:10.1017/S1049023X17002278

April 2017

The Educational Challenge in 2017: Providing Emergency Care to Migrants and Vulnerable People

Alessandro Barelli, Camilla Naso

European Center for Disaster Medicine, San Marino/San Marino

Study/Objective: The aim of the study was to explore and describe problems and difficulties in situations with migrants in emergency care in order to plan for an appropriate and effective teaching program for emergency care providers.

Background: In 2016, there were many posed threats to emergency medicine practitioners all over Europe. Terrorism, climate changes, and seasonal diseases could be sufficient to challenge emergency medical systems; they add to the hardships facing the thousands of migrants who continue to cross into Europe with the never-ending conflict in Syria and Iraq. In those settings, emergency medicine must play its key role of being the last resort for people with no primary health care and no alternative.

Methods: An explorative study was carried out using a sample of 67 emergency care providers, 15 physicians, 52 registered nurses, 46 women, and 21 men experienced in emergency care. They documented their experiences of problematic situations.

Results: The health care professionals' experiences of problematic situations with migrants in emergency care were described as: (1) language barriers; (2) reliance on authorities; (3) different behavior; (4) contact with relatives; (5) complicating logistic factors; (6) gender roles; (7) patient's earlier experiences of violence; (8) use of natural remedies; and (9) lack of knowledge on specific health care problems of migrants.

Conclusion: Results showed the main problem was related to communication difficulties, including language barriers and cultural dissimilarities. Another key factor is the lack of knowledge on specific health care problems of migrants. In order to mitigate the problems, the use of adequate interpreters is a theoretical chance, whereas using language-free communication tools (cartoons and vignettes) could be a financially effective alternative. Training programs for emergency care providers must include sessions to improve knowledge about the care of migrants from different parts of the world. The importance of searching for the unique individual perspective is stressed.

Prehosp Disaster Med 2017;32(Suppl. 1):s87 doi:10.1017/S1049023X1700228X

Evidence: Aid Special Collection for the Health of Refugees and Asylum Seekers

Claire Allen¹, Jeroen Jansen², Tony Aburrow³

- 1. Evidence Aid, Evidence Aid, Oxford/United Kingdom
- 2. Evidence Aid, Oxford/United Kingdom
- 3. John Wiley and Sons Limited, Chichester/United Kingdom

Study/Objective: To build collections of health care evidence, to provide those addressing the health of refugees with some guidance, collections divided between Evidence Aid and Cochrane.

Background: In 2015, over one million people arrived in Europe by sea, mostly originating from Syria. In the same year, 3,771 people went missing or died attempting to reach safety in Europe. In 2016, people continue to make the hazardous journey across the sea, and at the beginning of February, 67,072 people made it across, while 357 were reported dead or missing. **Methods:** Both collections focus on some of the most relevant medical conditions, as perceived by experts involved, either in

s87