

Future Directions: SFA has been launched as an online training course and a cell phone “app” is in progress. SFA has recently been trained in South America and Europe. Experiential components of SFA are being refined and expanded.

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(P1-93) Apathy Syndrome

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Summary Apathy syndrome is the apathy attribution of persons, foundations, nations or global world against the preparations and arrangements to avoid progression of disaster. In this article, it is aimed to review the collected opinions of authors who are studying causes of apathy syndrome. The factors of avoiding to be prepared against natural disasters can be classified under three main topics; personal, social and cultural. The personal factors or the factors depending on persons are discussed in three sub topics, respectively emotional factors, mind-related factors and behavioral factors. Particularly “resistivity against changes” and “unwilling to abandon habits” are emphasized as the major reasons. The topic, social factors, can be sorted out as insufficient administrative/political volition acting against disaster and being undeveloped among the cultural factors preventing disaster preparations, believing and mystical meaning giving onto “disaster” expression have been reserving spectacular space. Individuals and society are perceiving disaster as a divine punishment and this perceive makes meaningless to get prepared. Consequently, it is evaluated that sensitive to country conditions, culture, sexual discrimination of society, age and special disability circumstances, and also versatile, deep and penetrating, keeping continuity, analytically approaching formal education can resolve disaster troubles of countries. Authors of this article have emphasized crucially to establish an academy of disaster contributed every kind of disciplines as soon as possible in the world.

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(P1-94) Psychosocial Care for Children Affected by Tsunami - Through Child Care Activity Centers

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Psychosocial Care For Children Affected By Tsunami-Through Child Care Activities Centers Kavitha. P*, Sekar Kasi** Tsunami of 26 December 2004 shattered the lives, hopes and dreams of the people living in the coastal belts especially that of children where 37-39% of total death reported were children. Sad faith of children continued as many became orphans, single parented, lost their friends, school and happy environs where they enjoyed their life with their parents and friends. Displacement to the

temporary shelters snatched away the emotional from family members, the unhygienic conditions resulted in the epidemics beyond their coping. A need assessment conducted among 1120 children in Kanniyakumari, Nagapattinam and Karaikkal revealed that impact is seen in all the children survived, 2/3 parents reported of probable problem behavior and conduct problem in children, 1/10 children were identified by teachers to have conduct problem, 1/10 children were identified by parent and child to have emotional problem due to the impact, 1/100 children impacted were behaviorally disturbed, 1/ 100 children is definitely behaviorally disturbed and has a probability of mental health problem. Children are young and in experienced to understand, comprehend or verbalize the trauma. An integrated approach model was initiated through community level workers using art as a medium. Psychosocial care was provided to children through seven mediums: Facial expressions, Thematic cards, Drawing, Family portrait, Writing, Story and Clay, in stages repeatedly. The results of the intervention revealed that the intervention was effective in reducing the trauma among children as mean for the impact has reduced from 31 to 26 after the intervention. The behavior problem reported among children reduced from 65% to 45% after intervention confirming the effectiveness of psychosocial mediums in reducing trauma among children affected by disaster. *Ph.D. Scholar, Department of Psychiatric Social Work, NIMHANS, Bangalore, India **Professor, Department of Psychiatric Social Work, NIMHANS, Bangalore, India.

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(P1-95) Clinical Effectiveness of Psychological First Aid Training among Emergency Responders in Chinese Population: Preliminary Results of 3-Month Follow-Up

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Background: Psychological First Aid (PFA) has become the choice of mental health intervention and integration with the current disaster relief protocols during emergencies by the Institute of Medicine, NIMH and the WHO. It can be used during or immediately after disaster. People without mental health specialized training, including public health practitioners and emergency responders can learn and apply to everyone in need. Whilst being used extensively, few studies have evaluated the effectiveness of PFA and its field applicability.

Methods: A prospective randomized controlled study. 800 emergency medical responders were recruited. Participants were randomly assigned to the control/intervention arms to receive a one-day training of PFA based on the protocol developed by the National Child Traumatic Stress Network (2006). A pilot study was conducted to evaluate the screening tools and training material and all training was provided by trained clinical psychologist. Repeated measures analysis of covariance was used to evaluate the efficacy of PFA program in changes in various outcome measures between PFA intervention and control group. All analyses were conducted on the intent-to-treat and completer groups. Ethical approval was approved by the CUHK-NTEC Clinical Research Ethics Committee.