

Abstracts of Oral Presentations-WADEM Congress on Disaster and Emergency Medicine 2019

PSYCHOSOCIAL

Challenges and Opportunities for Interprofessional Collaboration within the Post-disaster Psychosocial Support Network in a Terrorism Scenario in the Netherlands: A Network Analysis

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Introduction: Post-disaster psychosocial support (PSS) is an indispensable element of disaster management. A variety of studies contributed to the development of guidelines, information about guideline implementation, and evidence-based practice, as well as the status of local PSS planning and delivery systems in different European regions. However, the multi-disciplinary nature of the organization of post-disaster PSS requires interprofessional and inter-organizational collaboration, but is presently insufficient institutionalized on individual, organizational, and governmental levels, locally, within the region, and nationally.

Aim: Objective of this research is to map the existing post-disaster PSS network in the Netherlands in the context of a terrorism scenario, and to identify probable collaboration problems rooted in weak ties and lack of alignment between actors at different levels.

Methods: Focus groups were organized in Belgium, France, Norway, and the United Kingdom to learn from the inter-agency response to recent terrorist attacks. Next, social network analysis methods were used to analyze the structure of the collaborative network for post-disaster PSS in the Netherlands. A scenario-based questionnaire was distributed amongst relevant stakeholders through snowballing methods. Respondents were asked to identify organizations they collaborate with on different PSS activities during the preparedness, acute, and recovery phase.

Results: The international focus groups resulted in valuable lessons for the Dutch PSS network. Data collection for social network analysis is currently in progress. Based on previous research we expect limited ties between disciplines during the preparedness phase and during the “registration of affected persons” in the acute phase. Most of the interactions between agencies will be linked to one-stop-shop service delivery, and less to commemorations and health monitoring.

Discussion: Lessons from the focus groups, verification of whether or not the expectations are supported by the social

network data, and reflections on opportunities for improvement will be presented at the conference in Brisbane.

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Code Orange: A Systematic Review of Psychosocial Disaster Response

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Introduction: Survivors of mass casualty incidents are vulnerable to both physical and psychological injuries. Hospitals need to triage the walking wounded victims, their loved ones, and witnesses for symptoms of emotional distress to ensure that those who are traumatized benefit from proactive psychological treatment. Hospitals must also manage the influx of searching family and friends, and be able to reunite them with their loved ones, to reduce chaos and prevent hospital skipping.

Aim: To analyze previous research on institutional psychosocial disaster response, what has or has not worked, and lessons learned in order to develop evidence-based future planning suggestions.

Methods: A literature search was conducted on the following electronic databases: (Medline 2007 to July 2018), (Embase 2007 to July 2018), (PsycInfo 2007 to July 2018). A combination of subject headings and free text keywords were used to perform the searches. After removing duplicates, abstracts were screened independently by two reviewers for the following inclusion criteria: 1) crisis intervention (in a disaster situation), 2) mention of psychosocial response or lack thereof and lessons learned, 3) relevant outcomes, 4) OECD countries, and 5) journal articles published 2007–Present. Review articles were excluded. Primary and secondary reviewers are in the process of discussing discrepancies. Data extraction will be conducted from all articles that meet the inclusion criteria. Key themes to be analyzed include psychological casualties, searching family and friends, and family reunification plans.

Results: The initial search yielded 6,267 results. 5,294 articles remained after duplicates were removed. Of the 4,890 reviewed thus far, 269 articles met inclusion criteria.

Discussion: Although a wealth of existing literature notes the need for an effective psychosocial response in mass trauma and disaster situations, no prior study has analyzed the efficacy of such interventions or laid out an evidence-based plan. This study will fill this much-needed gap in the literature.

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Recent Unprecedented Wildfires in British Columbia, Canada: Progression of a Grassroots Disaster Psychosocial Program

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Introduction: Psychosocial needs related to disaster are increasingly identified as a significant concern for both communities and responders. In response to the needs of travelers suddenly unable to leave Vancouver immediately after 9/11 in the United States, a network for the provision of volunteer mental health response at the time of a disaster was developed through the Provincial government within British Columbia (BC). Starting from less than 20 individuals primarily located within the Vancouver area, Disaster Psychosocial Services (DPS) now encompasses a network of over approximately 200 providers throughout the Province.

Aim: To showcase a successfully functioning DPS program modeled after a volunteer-based mental health network, the evolution undergone, its present operational framework, and future goals.

Methods: In response to the observed need for trained psychosocial intervention, we developed a framework for recruitment, education, deployment, and support of a volunteer network of mental health professional and paraprofessional providers.

Results: This approach has been found to be effective, significantly increasing our volunteer base and opportunities for deployment.

Discussion: This presentation will detail the grassroots development of BC's DPS Program as well as the current model in practice. It will provide an overview of how BC's DPS network of providers was stimulated and managed; issues related to volunteer management, including the selection of volunteers; methods of specialized training; and deployment. Multiple settings in which DPS is now utilized with increasing regularity will be described, including Emergency Operations Centers, Reception Centers, and Town Hall Meetings. Lastly, there will be a focus on the lessons learned, as well as future goals highlighting a focus on culturally-sensitive support, specifically with respect to British Columbia's indigenous populations for building community resiliency and knowledge across the province.

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Responding to Disasters: More Than Economic and Infrastructure Interventions

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Introduction: Natural disasters confront individuals, communities, and governments with the challenge of rebuilding and addressing psychosocial sequelae. With the increasing number of natural disasters, it is pertinent to evaluate the efficacy of interventions and strategies to address the mental health needs of individuals and the community.

Aim: The presentation will highlight the effectiveness of interventions post-disaster, and continued adverse outcomes five years post-event.

Methods: An evaluation of literature related to the psychosocial impact of natural disasters, treatment efficacy, and government strategies to confront the social and psychological impact of natural disasters for the period 1983 – 2016 was undertaken.

Results: Epidemiological studies following natural disasters, despite the use of differing psychological measures, demonstrate significant psychological morbidity – anxiety (7–42%), complicated grief (28–41%), depression (6.5–38%), post-traumatic stress disorder (11–89%), and substance misuse (1.3–24%). Intervention studies post-disaster demonstrate efficacy capability.

Discussion: The increase in the number and impact of meteorological and hydrological events since the 1980s and the psychological, social, and economic consequences of these events have resulted in the development and implementation of government policies to confirm the immediate and long-term adverse outcomes. The focus is typically on resources and infrastructure redevelopment with less focus on social and mental health interventions, with long-term evaluation of interventions uncommon. The consequence of natural disasters emphasizes the importance of developing strategies to ensure effectively evaluated psychosocial interventions are available across at-risk communities.

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Supporting and Accompanying Young People After the Lac-Mégantic Train Derailment (Quebec, Canada)

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Introduction: In July 2013, a train transporting oil derailed and exploded in Lac-Mégantic, causing major human, environmental, and economic impacts. A community-based survey of people aged 10–25, conducted in 2017, revealed that many young people suffer in silence and report feeling isolated. These observations led to the conclusion that we must make room for young people, and that opportunities for engagement and participation must be provided within the community.

Aim: The Public Health Direction of Estrie aimed to identify strategies to promote health and wellbeing for young people living in and around Lac-Mégantic.

Methods: A collective reflection half-day was hosted with sixty key stakeholders (school board, other education institutions, health and social services, community sector, municipal/political sector, parents, youth). Throughout the event, participants were invited to build on and learn from accomplishments and experiential knowledge, and develop a common vision of the