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Social fortitude impacts on decision-making during emergencies, and should be integrated in response plans based on: (1) ongoing evaluation of the status of the healthcare system; (2) up-to-date information regarding risks and potential consequences; (3) mechanisms for supporting decision-making; (4) supervision over-implementation of decisions made; and (5) flexibility for modifying decisions according to the evolving situation. The Israeli MOH's position is that all measures should be taken to avoid evacuation of medical institutions during emergen-

Keywords: civilian population; evacuation; hospital; Ministry of Health; staying power

Prehosp Disaster Med

Coping with Emergency Situations during Operation Cast Lead—Nurses at Soroka Hospital Z. Nir, PhD;¹ P. Shlepher, MA,² I. Placht, PhD¹

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Introduction: During the conflict of the Cast Lead offensive, life in much of southern Israel, including Beer-Sheva, the Negev capital, was paralyzed. Thousands of Israelis were within the striking range of Hamas rockets. Schools and universities closed temporarily due to rocket threats. Residents, especially mothers and children, left their homes. The ambiguity of the situation caused episodes of anxiety and depression. During the situation, wounded soldiers and injured civilians were evacuated to hospitals. Nurses worked intensively around-the-clock, and were exposed to numerous stresses.

The objectives of this prospective study were to identify and compare changes in staff anxiety and depression levels during and following the war period over a two month period during and following the crisis. In addition, the effect of the hospital's organizational climate on nurses' emotional and physical state was examined.

Methods: A total of 314 nurses with a mean age of 42.2 years were studied. The generalized anxiety disorder and depression screening tests were used twice as study instruments.

Results: For approximately 25% of the hospital nurses, the war period was their first confrontation with an emergency stress situation at work. Approximately 68% were requested to work overtime. A total of 59% appreciated the hospital's ongoing, updated information about its security and safety arrangements. The correlations between a sense of organizational solidarity (SOS) were strong (ρ <0.0001) and highly negative with anxiety and depression. In turn, the correlations between SOS with a sense of physical and mental relief were strong and highly positive. The anxiety and depression levels were moderate and were decreased significantly two months later.

Conclusions: The war situation affected the nurses' emotional and physical state. Constant updates of hospital data enhanced a sense of cohesion, reduced stress, raised motivation, and improved a sense of belonging.

Keywords: coping; emergency; nurse; Operation Cast Lead; stress Prehosp Disaster Med

Consolidating a Resilience Network to Boost Civilian Resilience during Emergencies

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Introduction: Israel's current security conditions could endanger the Israeli home front to the point that it would face a "national crisis". Such a crisis would expose the majority of the population to severe physical danger and shortages and compromise the resources and capacities of governmental agencies attending to the needs of the population. Therefore, Israel must consolidate a network of thousands of civilian nodes in order to enhance local and national resilience. Developed within the Israeli context, this model can be adapted to any global situation that calls for community-led emergency preparedness.

Methods: This strategy is the outcome of a joint research project between the Reut Institute and the Israel Trauma Coalition, under the sponsorship of the UJA-The Federation of New York. The research was based on meetings with dozens of Israeli experts in all relevant sectors, including government, local authorities, businesses, non-governmental organizations (NGOs), media, and academia. In addition, the Israeli home front performance during the 2nd Lebanon War and Operation Cast Lead, and comparative international research of approaches to resilience in the US, Singapore, Japan, South Korea, Australia, Sweden, and the UK was reviewed.

Results: The strategy for coping with national crises is based on organizing society—individuals and households, corporations, NGOs, and educational and public institutions—as a Resilience Network that is based on a "Culture of Preparedness". The Resilience Network can be mobilized quickly and at low cost, since most of the required resources already exist within the aforementioned sectors of society. A Resilience Network can contribute to the successful response to emergencies in Israel and worldwide.

Keywords: civilian; emergency; network; resilience Prehosp Disaster Med

Information Systems in Mass-Casualty Events and Disasters

OSIRIS C3—On-Site Instant Report and Information System

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Introduction: Disaster management and emergency response can reveal the best and the worst of any organization. As links in a chain, if one could pinpoint five critical areas with major impact in disaster outcome, most people would name: (1) planning; (2) training; (3) command; (4) control; and (5) communications. Internationally, governments and emergency managers rely on a multitude of systems to provide for these critical processes.

Methods: Four major, leading companies in their fields of expertise collaborated on an idea to innovate and develop a tool for 21st century emergency management and disaster response. The solution had to incorporate lessons learned