

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

solutions to be pursued or implemented. All qualitative data sources (verbal and written data from large- and sub-group activities) were analyzed through a content analysis.

Results: Several themes (i.e. potential solutions) emerged from the analysis: common venue, diversified activities, communication, collaboration, involvement, support for at-risk youth, intergenerational component, etc. Participants agreed on four priorities for action: 1) creating a gathering place, 2) establishing a Youth Committee, 3) supporting adults working with youth, and 4) fostering a better flow of information.

Discussion: Several positive outcomes of the collective reflection half-day were observed, including the mobilization of the participants who greatly appreciated the event, and many promising ideas launched by stakeholders. A social worker is now fully dedicated to supporting youth wellbeing and engagement in Lac-Mégantic. A Youth Committee has been established and projects by and for youth are being implemented. Bottom-up approaches to identify solutions to complex situations are not only effective but also respectful of the local culture.

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Tailoring Disaster Risk Reduction for Adolescents: Perspectives from China and Nepal

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Introduction: More than half of the world's youth live in the Asia Pacific region, yet efforts to reduce disaster risk for adolescents are hindered by an absence of age-specific data on protection, health, and engagement.

Aim: China and Nepal have faced a recent escalation in the number of climatic and geological hazards affecting urban and rural communities. We aimed to examine disaster-related threats experienced by adolescents and their caregivers in China and Nepal, determine the scope for adolescent participation, and elicit recommendations for improving disaster risk reduction.

Methods: Sixty-nine adolescents (51% female, ages 13–19) and 72 adults (47% female, ages 22–66) participated in key informant interviews and focus group discussions in disaster-affected areas of southern China and Nepal. Using inductive content analysis, several themes were identified as key to adolescents' needs.

Results: Security and protection emerged as a central issue, interlinked with preparedness, timely and equitable disaster response, psychosocial support, and adolescent participation. The mental health risks emerging from trauma exposure were substantial. Adolescents made extensive contributions to disaster response including involvement in rescue efforts and

delivering first aid, rebuilding homes and caring for family members. Participants forwarded a number of recommendations, including investing in psychological support, skills training, and stronger systems of protection for those at risk of family separation, trafficking, or removal from school.

Discussion: The findings informed a multilevel, interconnected model for disaster risk reduction tailored to adolescents' needs. Supporting adolescents' recovery and long-term resilience after humanitarian crises will require coordinated efforts in preparedness, security, and mental health care.

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Towards Practical Guidelines for Mental Health and Psychosocial Support after Emergencies in the Western Pacific Region

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Introduction: The Western Pacific Region, comprised of 37 diverse countries and areas, is one of the world's areas most prone to be affected by disaster. Seven of the top ten countries most at risk of a natural disaster are in this region. The Regional Agenda for Implementing the Mental Health Action Plan 2013–2020 in the Western Pacific identifies mental health in disasters and emergencies as a priority area and calls for a social movement for action on mental health and well-being. To increase understanding of and need for mental health and psychosocial support in emergency situations, regional guidelines are necessary. It is unclear to what degree international guidelines are applicable in this region.

Aim: To synthesize the contents of available evidence-based guidelines and assess their potential to address the mental health and psychosocial needs of people in emergency settings in the Western Pacific Region.

Methods: A systematic literature review of existing guidelines for mental health and psychosocial support in disasters and emergencies was conducted. Using the Appraisal of Guidelines for Research and Evaluation II instrument, the quality of each guideline was determined covering the following: (1.) scope and purpose, (2.) stakeholder involvement, (3.) rigor of development, (4.) clarity of presentation, (5.) applicability, and (6.) editorial independence.

Results: The results provide an overview of the quality, number, and specificity of available guidelines. A framework was developed to categorize these guidelines on each stage of the disaster management cycle (prevention, preparedness, response, and recovery) while considering their guidance regarding coordination, monitoring, communication, human resources, and connection with regular health services.