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Medical Conditions and Treatments in a Transit Camp in Serbia for Syrian, Afghani and Iraqi Migrants

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Study/Objective: This study describes the health conditions, treatments and demographic correlations of migrants from Syria, Afghanistan and Iraq, treated in a transit camp clinic in Serbia, on their way to Europe.

Background: Europe faces waves of migrants from war-torn countries. Many have multiple health conditions. To help camp clinics use scarce resources effectively, it is crucial to map the health problems and their correlates.

Methods: A total of 3,723 migrants visited an Israeli-German clinic between December, 2015 and February, 2016 in Preshevo, Serbia. Complete data was available for 2,981 patients. The equipment at the clinic was basic, eg. a sphygmomanometer, glucometer, a pulse oximeter, gynecological ultrasound machine, thermometers, etc.. Diseases were grouped into eight categories: Chronic diseases, pain, infection, trauma, obstetrics and gynecology, dental problems, environment related and psychiatric. Beyond descriptive statistics, we examined the associations between diagnostic and treatment groups with age, gender and country of origin.

Results: The most prevalent diagnosis was infections followed by pain. While the most prevalent treatment was analgesics, these were prescribed for pain and fever. Concerning specific types of diagnoses and age, the diagnosis of pain among infants (2.5%) and pre-school children (3.9%) was considerably lower compared with their percentage in the study sample (7.7%, $p < 0.001$ for infants, and 15.4%, $p < 0.001$ for pre-school). In contrast, 79.3% of patients diagnosed with pain were adults, considerably higher than their percentage in the sample (59.9%; $p < 0.001$). Finally, while a higher proportion of men had upper respiratory infections than women, an equal proportion of men and women had gastrointestinal infections.

Conclusion: Infections and pain were most often diagnosed, disproportionately more in adults than children. Gender differences were observed in types of infectious diseases. Medical teams should be aware of demographic differences in health conditions, and increase sensitivity to children's health conditions.

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Spontaneous, Self-Organized, Non-Professional International Disaster Response in the European Refugee Crisis - The Case of Chios, Greece

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Study/Objective: To research the dynamics, advantages, and flaws of non-governmental, non-professional humanitarian aid through the perspective of the European refugee crisis.

Background: It is impossible to disregard the widespread phenomenon of young people leaving their lives behind for a significant period of time with the purpose of aiding refugees and with no apparent incentive (monetary or other) or having previously dedicated their lives to a related profession. This has the potential to encompass significant value in a crisis, but it also holds risk of actual harm. This research was aimed at understanding the dynamics of non-professional aid and its formation into the NGO environment in a crisis situation.

Methods: A qualitative, descriptive, exploratory study was developed. The researcher travelled to Chios, Greece to accompany young groups of international, non-professional "aid workers" to discuss their motivation and observe their handling – absorption, first aid, further treatment – of 100s of daily refugees arriving from Turkey. In addition to using observation as a research method, 15 in-depth interviews were conducted in March/April 2016. Further, 20-30 surveys and interviews shall be conducted by March 2017 to strengthen and validate the initial results.

Results: Initial results show that while these young, untrained responders were quickly and remarkably well organized, they struggled meeting organizational challenges and obstacles. A significant amount of time was spent in meetings between different groups to discuss, even fight over, the allocation of resources and responsibilities. Furthermore, interesting results have been obtained as to their motivation for their involvement. While all responders mentioned the will to help as their motivation, further questioning revealed "finding oneself" and "hopes for better career options" possibly serving as "postponed" material incentives.

Conclusion: Next to serious responsibility and accountability concerns, major obstacles in operating non-professional humanitarian aid teams lie in the scaling up into a comprehensive system that includes intra-relations and contact between different organizations.

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