

of Haiti - in terms of exposure to hazards, losses, and life changes - were created specifically for this natural disaster (with salient anthropogenic elements).

Results: Psychological risk characteristics of this event included compounding exposures to: deluging rains that triggered mudslides along steep, deforested terrain; battering hurricane winds (Category 4 winds in the “eyewall” at landfall) converting the built environment into projectile debris; flooding “storm surge” moving ashore and submerging areas along the Tiburon peninsula; and piling wave action destroying infrastructure along the coastline. Many coastal residents were left defenseless to face the ravages of the storm. Hurricane Matthew’s slow forward progress as it remained over superheated ocean waters added to the duration and degree of the devastation. As an overlay to the havoc of the storm itself, the risks for infectious disease transmission were exacerbated, particularly in relation to the ongoing epidemics of cholera and Zika.

Conclusion: Hurricane Matthew was a ferocious tropical cyclone whose meteorological characteristics amplified the system’s destructive force during the storm’s encounter with Haiti. TSIG analysis facilitates an accounting of the prominent risks to Haiti’s mental health.

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Training Community Health Workers to Promote Psychosocial Health and Resilience among Children in Haiti

Amy Nitza

Institute for Disaster Mental Health, State University of New York at New Paltz, New Paltz/NY/United States of America

Study/Objective: The purpose of this project was to train community health workers in Haiti to facilitate psychoeducational groups with children exposed to trauma. Twenty undergraduate students were trained in group facilitation techniques and worked in collaboration with the author to develop a group counseling model to be implemented in elementary schools. Teachers in these schools were trained to recognize signs of trauma in children in their classroom and to identify and refer children who could use the additional support offered by the groups.

Background: Trauma exposure among children is common in Haiti due to multiple natural disasters, political violence, abuse, and domestic servitude. At the same time, there is a lack of available resources to provide children the psychosocial support they need. This project was designed to address that need by training a cadre of community health workers to design and implement group counseling intervention for traumatized children. The specific goals of the group counseling intervention were to assist children to: (1) cope effectively with symptoms associated with past traumatic experiences, (2) developed efficacy and skills for dealing with barriers that impede their success, and (3) develop a safe and supportive peer network for managing present and future challenges.

Methods: Evaluation has been built into each phase of the project. The variables being evaluated include: (1) effectiveness of the training in group facilitation skills for the community health workers, (2) effectiveness of the teacher training,

(3) process issues related to implementing the group intervention in schools, and (4) outcomes of the three goals of the group intervention itself.

Results: Initial evaluation results, both qualitative and quantitative, will be presented for each variable. Lessons learned from the implementation of the project will also be discussed.

Conclusion: The results of this project can be used to inform others of the development of locally-based projects to train community workers as first-line service providers.

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Disaster after September 11, 2001: the Long-term Impact on Responding Medics

Erin Smith¹, Cameron Anderson²

1. School Of Medical and Health Sciences, Edith Cowan University, Perth/WA/Australia
2. Queensland Ambulance Service, Edith Cowan University, Walkervale/WA/Australia

Study/Objective: To explore the long-term physical and psychosocial health impacts of September 11th on responding medics 15 years after the terrorist attacks.

Background: One of the painful legacies of September 11th (9/11) is the lasting impact on the physical and psychosocial health of thousands of individuals who survived the attacks - including the first responders. The 15th anniversary marked an important milestone in our collective remembrance of 9/11. First responders and their families reflected on the unique impacts experienced by this group. This research explores the ongoing consequences of responding to the terrorist attacks amongst medics at the 15th anniversary, a critical data-gathering milestone.

Methods: This research employed qualitative methods to compile and review 54 first-person accounts from 9/11 medics, and their families, who recounted their experiences of 9/11 on the 15th anniversary.

Results: Fifteen years after 9/11, responding medics continue to be plagued by nightmares, vivid recollections of Ground Zero, posttraumatic stress disorder, anxiety, depression, problems sleeping, negative impacts on relationships, addictive behaviors, and suicidal thoughts. They are experiencing a range of health issues such as respiratory disorders, eye problems, and cancers. Medics reported having access to a range of peer-support services, but most delayed in seeking help. Of note, medics and their family members identified considerable negative follow-up consequences for their families; they highlighted that partners, spouses, and children of medics should have access to the same support services as the responders. The ongoing impact of 9/11 has shattered families and destroyed lives in a never-ending reverberation of pain and suffering.

Conclusion: These findings suggest that 9/11 medics and their family members need ongoing monitoring to protect their physical and mental health. The testimony of this research is to ensure that an important voice is not lost, and that the deeply personal and richly descriptive experiences of the 9/11 medics and their families are not forgotten.

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