

rifying events of 11 September (Dorn, Thomas, Wong, and Shepherd, 2004). Once they returned to their homes, the residents of lower Manhattan were reminded of the catastrophe as they waked through their neighborhoods or looked out their windows. Transportation into and out of lower Manhattan was difficult.

In an attempt to meet the needs of this directly affected community, a program was established to help children through psychosocial interventions directly offered to parents. Free, confidential, easily accessed services were offered. Parents sought information about typical post-trauma responses and how to manage their children's and their own stress and anxiety. A support group for mothers who were residents of Battery Park City was started and met weekly beginning 02 December 2001 in private rooms in local coffee houses (Madrid, Grant, Markenson, under review). This facilitated easy access while maintaining confidentiality. Initial client concerns were anxiety, marital discord, and how to discuss the event with their children. Within six months, anxiety was notably reduced and members reported a sense of having mastered skills to help their children. Following a disaster, psychotherapy delivered in non-traditional settings may help overcome barriers and resistance. It is essential to keep in mind that engaging parents in coping behaviors and understanding of issues impacting their children's well-being will positively impact their children. Providers should be flexible and prepared to meet emerging needs.

Keywords: 11 September 2001; children; coping strategies; disaster; New York; parents; psychotherapy

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Free Papers Theme 10: Resuscitation

Evaluation of the Effects of a National Disaster Life Support (NDLS) Preparedness Curriculum on 800 Participants in Dallas and Fort Worth, Texas

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Introduction: The National Disaster Life Support (NDLS) curriculum was developed by the American Medical Association with input from key academic and governmental institutions. The NDLS program emphasizes multidisciplinary, all-hazards training (e.g., for healthcare providers, emergency workers, first responders, and municipal workers), with a focus on the general improvement of public health preparedness and response infrastructures, operating at individual and system levels. Three stand-alone courses provide didactic and practical "hands-on" experiences using simulation and role-play. An evaluation component was designed according to Bloom's taxonomy of adult learning to assess the effects of this curriculum on knowledge base (via written exam), psychomotor skills base (via simulations and role-play), and level of engagement (increases in confidence, interest, and willingness to volunteer, e.g., in the National Disaster Medical Corps).

Methods: In a quasi, experimental, pre- and post-test, longitudinal, cohort design, 800 participants in the trainings were evaluated immediately before and after the training, and six months after the completion of the training.

Results: Knowledge base, as measured by scores on written examinations increased from 30 ±5% before the course to 68 ±20% at its conclusion. More than 80% of participants achieved satisfactory performance on psychomotor tasks such as ability to select and don appropriate protective gear properly. Self-ratings of confidence in knowledge base as "high or very high" increased from 5 ±4% before the course to 45 ±10% at its conclusion.

Conclusions: More detailed analyses, including the ongoing effects of receiving continued education via quarterly "booster" training sessions, and web-based programs must be assessed to permit evaluation.

Keywords: assessment; education; evaluation; National Disaster Life Support (NDLS); preparedness; training

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Prehospital First-Aid in Shanghai

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Shanghai is one of the biggest cities in the world, with a population of 13 million. The average density of the population is >1,000 persons per square kilometer. Deaths and the injuries from disasters in Shanghai from 1949 to 2003 are shown in Table 1.

The First-Aid Central Station of Shanghai (SFACS) has 173 ambulances and 517 specialists. The equipment of the new resuscitation ambulances, so-called "Movable ICUs", contains a cardiopulmonary monitor, ventilator, emergency drugs, and other resuscitative equipment. In the ambulance, there also is excellent communication equipment, which can connect with any part of the communication network in the city of Shanghai. In 1998, a total of 110,889 persons requiring first-aid were transported by the SFACS. The number injured in traffic crashes and other disasters during this time was 26,681, of which 318 died before hospitalization. All severe trauma patients should be transported to an identified hospital in Shanghai.

| Disaster | Occurrence | Death | Wounded |
|---------------|------------|--------|---------|
| Traffic crash | 600,000 | 19,391 | 286,117 |
| Fire | 31,101 | 517 | 1,053 |
| Earthquake | 19 | 9 | 92 |
| Typhoon | 102 | 2,086 | 2,672 |
| Rainstorms | 117 | 32 | 105 |
| Fog | 66 | 23 | 121 |
| Air crashes | 3 | 42 | 71 |

Table 1—Disaster-related morbidity and mortality in Shanghai from 1949 to 2003

Keywords: First-Aid Central Station of Shanghai (SFACS); pre-hospital; resuscitation; Shanghai

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