Occupational Stress Among Japanese Emergency Medical Technicians
Naoki Okada; Akira Takahashi; Yutaka Omori; Shinnichi Nakayama; Noboru Ishii
Wyogo Prefectural Nishnomaya Hospital, Nishnomaya, Japan

Background: Currently, prehospital emergency care is playing an important part in the healthcare system in Japan. The number of calls and transports of emergency patients increases year-by-year, and disasters are variform. Therefore, it is important to evaluate occupational stress in Emergency Medical Technicians (EMTs) in order to identify problems in the prehospital field.

Methods: This study examined the somatic and mental stresses among EMTs using questionnaires. Results: Somatic stress tends to focus on the lumbar region, shoulders, and cervix. This seems to be correlated with posture during their duty. The EMTs bear mental stress when they must meet national qualifications, and when they have many dispatches (calls).

Conclusions: There is a need for more investigation regarding posture, and instruments are needed to reduce somatic burdens. Nationally qualified EMTs have been assigned successively to the emergency fleet after the technical education. When assuming these responsibilities, they are exposed to more stressful situations, but have sensed the work doing the work to a greater degree than do other technicians. Given these increased levels of stress, management for the PTSD or burnout syndrome, like Critical Incidents Stress Management (CISM) is important. And, the ambulance arrangement in proportion to the population may need to be reconsidered.

Keywords: critical incident stress management (CISM); emergency medical technicians (EMT); post-traumatic stress disorder (PTSD); posture; somatic burdens; stress


Assessment of Psychological-Psycho-therapeutic Program for Treatment of Post-Traumatic Stress Disorder in Children and Adolescents
I.P. Briazgounov; I.A. Larkova; A.N. Mikhailov
Scientific Center of Child Health, Moscow, Russia

A psychological-psychotherapeutic program of treatment of children and adolescents suffering post-traumatic stress disorder (PTSD) has been developed. The special psychological tests for the assessment of the results of this treatment have been chosen using the results of clinical research. The completion of these tests takes only 35 minutes. The tests are clear, standardized, and easy to administer.

For the diagnosis of traumatic images, the following methods are used:
1. The method of determination of submodalities of remiscent post-traumatic image (visual, audio, kinesthetic, smell, and taste);
2. The method of "inductive-deductive signs";
3. The scale of "assessment of efficacy of image change"; and
4. The method of evaluation of buffer system on the basis of measuring tear and saliva acidity during traumatic reminiscence.

The results of the assessment of psychological-psychotherapeutic program of post-traumatic stress disorder treatment in children and adolescents proved to be highly efficient.

Keywords: adolescents; children; post-traumatic stress disorder (PTSD); psychological-psychotherapeutic treatment; tests; treatment


Task Force Session: Refugees and Displaced Persons – Children and Women
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Health Unit, International Rescue Committee, New York, New York, USA

Battir Delivery Clinic: A Response to Impeded Access to Medical Treatment
Lisa Edward; Ibrahim Ibrahimgheth; Dr. Majed Nassar
Union of Health Work Committee Palestine

Since the outbreak of the al-Aqsa intifada (Palestinian uprising) in September 2000, Israel has imposed various forms of movement restrictions through siege, curfews, and internal/external closures. One of the more serious consequences is the impediment to access to medical treatment. Pregnant women, the elderly, the chronically ill, and Palestinians living in rural areas (70% of the population) are particularly affected, since they are dependent on secondary and tertiary healthcare facilities in urban areas. Numerous human rights organizations have reported many cases in which soldiers delayed wounded, sick people, and women in labour on their way to hospitals, or prevented them from crossing through checkpoints.

To date, 73 Palestinians (26 men, 22 women, and 16 children) have died at checkpoints awaiting access to medical care (e.g., kidney dialysis or treatment for heart attacks); 43 Palestinian women gave birth at checkpoints due to delays or were refused permission to reach medical facilities or ambulances to reach them; of which nine were stillbirths. In total, 27 babies died either at home or at checkpoints due to siege.

In response, World Vision in partnership with Health Work Committees (HWC) set-up a delivery clinic as part of the HWC Battir Medical Clinic, west of Bethlehem. This clinic is staffed by HWC, who provide obstetric services to women who are prevented from reaching Bethlehem or Jerusalem maternity hospitals (10, 25 kilometres away respectively). Since the establishment of the delivery clinic in April 2002, 90 women have delivered their babies safely.

Keywords: access; clinic; chronically ill; deliveries; elderly; medical care; pregnancy; restrictions; stillbirths