Objective: To describe the integration of psychologists with emergency medical teams at football games in Portugal during the European Football Championship (EURO 2004).

Methods: The integration of psychologists into 31 emergency medical teams comprised of physicians, nurses, and emergency medical technicians at 31 football games at 10 stadiums in nine Portuguese cities during the European Football Championship (EURO 2004) in June–July 2004 were analyzed.

Results: Up to four psychologists were integrated into each team. Medical assistance was provided to 2,003 patients, of which 190 received psychosocial care. Patients who received psychosocial care suffered from panic attacks, agoraphobia, general anxiety, or anxiety related to a medical condition. Psychosocial assistance included: (1) emotional stabilization of patients and occasionally their families; (2) psycho-educational information and techniques regarding managing their condition; (3) assistance with problem-solving; (4) information about referral services; and (5) telephone follow-up regarding outcomes at a later stage.

Conclusion: Psychologists may be successfully integrated into emergency medical services at mass-gathering events. The provision of prehospital, psychosocial care at mass-gathering events may reduce the number of people with psychological emergencies who require hospital-based, psychosocial care.

Keywords: care; emergency medical technician; mass-gathering event; Portugal; prehospital; psychosocial

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Integration of a Psychologist into Prehospital Emergency Medical Teams for Early Psychological Intervention: Two Case Reports
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Background: Prehospital emergency medical care workers involved at the scene of a traumatic event are susceptible to a variety of stress-related psychological and emotional sequelae, especially when the victims are children. Although early psychological intervention, including diagnosis and treatment, may improve long-term psychological outcomes, psychologists have yet to be integrated into prehospital emergency medical care teams on an everyday basis.

Objective: To examine the feasibility of integrating a psychologist into prehospital emergency medical teams for early psychological intervention.

Methods: Two case reports of house fires that produced on-scene deaths of children, in which a psychologist was integrated into the prehospital medical emergency care team, were analyzed. In the first case, the victims included a two year old who died on-scene and a five year old with smoke inhalation. In the second case, the victims included a seven-month-old infant who died on-scene, and five other victims with smoke inhalation (ages one, two, three, five, and 67 years old).

Results: In both cases, a psychologist provided early psychological interventions for the survivors and their families, families of the children who died, and the prehospital emergency medical care workers. Psychological interventions for prehospital emergency medical care workers were aimed at ameliorating symptoms of acute stress reaction, maximizing functionality, providing emotional stabilization, and preventing overload and “burnout”.

Conclusion: The integration of a psychologist into the prehospital emergency medical care team in order to provide early psychological intervention is feasible. It also may improve the immediate and long-term well being of the prehospital emergency medical care team and the community.

Keywords: children; emergency medical care team; interventions; prehospital; psychological; stress; traumatic events

Role of the Press in the Psychosocial Impact
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Argentina has encountered a number of emblematic events, including two terrorist events, floods, and a plane crash. In each case, journalists became improvised sorceresses, doing a bad job, in some cases, looking for "the impact of the news". Reporters forgot their primary function: to inform the public precisely about what was going on, establishing a link between the authorities that manage the risk and the most urgent necessities of the community. The Reporter Emergency News Agency (RENA) is the only Latin-American agency specialized in reporting emergencies and catastrophes.

The RENA sends information in electronic format to >1,000 users each week. In a two-year period, 580 reports of investigation relating to the possible prevention of human-made or natural disasters were researched. The RENA reviewed 3,800 articles on 1,710 topics, and journalists conducted research before the occurrence of catastrophes, traveled to damaged areas, and identified experts to obtain relevant information. Journalists sought humanitarian assistance and maintained contact with specialists in
order to develop "prevention measures" to avoid new events.

The periodical covers catastrophes, emphasizing that it not only is necessary to know "what" and "how" to recognize the unfortunate facts, but also how to prevent the media personnel from experiencing psychological damage when being exposed to the misfortune first-hand, and has proposed psychological assistance in stress. It also is necessary to respect the discretion while selecting the news, which fits the specific criteria adjusted to the ethics and common sense of the population. Inconsistent information is self-defeating for the population affected. It is essential to coordinate the work between the coordination center and the person in charge of the press.

Keywords: events; media; news; psychological; Reporter Emergency News Agency (RENA)

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Paramedic Practice in Mental Health and Mental Illness: A Study of Paramedic Clinical Judgment and Decision-Making

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The provision of appropriate mental health services for all is an urgent national and international health priority. The National Mental Health Report (2000) cites that almost one in five (18%) Australians suffers from a mental disorder, and that 3% of the total population live with a serious psychiatric disorder at any one point in time. Fundamental changes to healthcare policy in Australia and around the world have led to an increase in the extent to which emergency personnel come into contact with patients experiencing mental health problems. Mainstreaming of services is a central feature of these changes, by shifting the provision of traditional psychiatric care from dedicated institutions to integration and co-location with mainstream general health services and community settings. Changes to mental health service delivery have been problematic for healthcare workers from many disciplines, with many of these workers perceiving themselves as lacking the skills and expertise to provide appropriate care and treatment to this client group. An emphasis on care for patients with psychiatric disorders and a society that is placing increased demands on the vulnerable has meant that healthcare workers, particularly community health and emergency personnel, increasingly are required to manage patients who experience a variety of mental health problems. The introduction of new mental health legislation in Australia precipitated widespread concern within the Queensland Ambulance Service (QAS), emphasizing that it is self-defeating for the population affected. It is essential to coordinate the work between the coordination center and the person in charge of the press.

Keywords: events; media; news; psychological; Reporter Emergency News Agency (RENA)

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Psychological Trauma following Motor Vehicle Crashes

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In April 2004, the World Health Organization (WHO) projected 50 million injured individuals and 1.2 million deaths worldwide following motor vehicle crashes. Approximately 24–33% of injured persons report pain three years following whiplash injury. Twenty percent of moderately/seriously injured have at least one psychiatric diagnosis one year following the injury. Psychological treatment following motor vehicle crashes is an effective method of reducing the trauma associated with crashes and facilitating recovery from physical injury. Brief treatment methods and outcome are reviewed.

Keywords: follow-up; psychological; recovery; road traffic crashes; trauma; treatment


Clinical Decision-Making in Ethnic Cleansing and Genocide

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This presentation will take a case-based approach to illustrate clinical issues facing health providers responding to ethnic cleansing and genocide. The presentation will examine the context of issues in the work environment including: (1) hierarchy of human rights violation; (2) type of military operation; (3) phase of humanitarian assistance; and (4) extent of authority dysfunction. The presentation will illustrate security complications arising from low triggering thresholds, convergence behavior, competing authorities, and child soldiers. The presentation will culminate in 10 trans-national lessons learned by international agencies.

Keywords: assistance; child soldiers; ethnic cleansing; genocide; humanitarian; military; public health