

pharmacist must demonstrate, working in emergency humanitarian interventions.

Background: In the last decades many influential international humanitarian organizations had strengthened and enlarged their capacity to deliver humanitarian aid, and have realized the need to employ more professionals in the field of humanitarian assistance. Pharmacists have crucial importance in health care related interventions of assuring the use of quality drugs, disease prevention and health promotion. The World Health Organization (WHO) recommends that pharmacists should be adequately represented in the staff of international health agencies. Appropriate competencies and skills of pharmacists working in international humanitarian aid are essential in successful implementation of health interventions.

Methods: A literature search was conducted to identify the main essential health services provided by humanitarian organizations and internationally accepted functional, technical and personal competencies required for pharmacists. Semi-structured interviews were conducted with expatriate pharmacists and expatriate medical coordinators, all of whom have worked in the fields of humanitarian aid missions. The interviews are recorded, transcribed and analyzed using a content analysis and discourse analysis methodology.

Results: Six participants were interviewed, three pharmacists and three medical coordinators. The interviewees had worked in (overall) 32 humanitarian missions. The main functions of the pharmacists were focused on stock management and supply of medicinal products. However, pharmacists in humanitarian fields do not perform many functions related to the provision of effective Medication Therapy Management (MTM). Interviewees highlighted that the personal competences related to working under pressure, adaptability and flexibility, cultural sensitivity and teamwork skills are essential for the humanitarian aid pharmacist.

Conclusion: This study highlights the critical competencies required for humanitarian aid pharmacists. Moreover, identifies the absence of these professionals in key activities related to MTM, which may lead to health related risks.

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Changing Hearts and Minds, using Virtual Reality to Improve Empathy towards Refugees

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Study/Objective: Xenophobia is growing ever more present globally, in response to the influx of refugees from various conflicts. Families that have made the harrowing journey from their war torn nations have been met, not with open arms, but border fences and hostile populations. The best way to improve these conditions is to create more empathy from the host country populations towards the refugees.

Background: Studies using virtual reality have been performed before, and have shown that they have the ability to change a person's emotions toward an act. For example, the use of virtual reality was able to make people more empathetic to cows, and

the viewers actually reduced their meat consumption after the VR session.

Methods: With the use of a 3D recording camera, a person will document their journey from the streets of a city gripped by violence, such as Aleppo, and follow them as they exit the country and make the perilous journey on an overcrowded boat into Europe. From there, the filming will continue and include their experiences in migrant camps, along with the living conditions and hostilities they faced daily from the native populations. From the footage, a short 20-30 minute video will be compiled and shown via VR to volunteers to determine if they have any change after the viewing. Follow-up with volunteers could last several months to determine if any lasting effects occur.

Results: This is only a proposal, but the hope is that the results would show an increased empathy for refugees and assist in reducing the xenophobia currently gripping host countries.

Conclusion: Changing the minds of the populous will take time, but with the use of VR, perhaps leaders could be swayed to change their policies to be more refugee friendly. If this study works, the field of humanitarian relief could be altered forever.

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Mobile Health in Complex Emergencies: Preliminary Results from a Workshop, Lebanon, March 2017

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Study/Objective: The objective of this workshop is to identify the essential components of establishing, managing, and sustaining mobile health services at the community level, within conflict context based on experiences in the Middle East and North Africa (MENA) region.

Background: The MENA region from Syria, Palestine to Libya is characterized by instability, conflict, and growing humanitarian needs. Humanitarian interventions are increasingly taking place in complex and protracted crisis that severely affect healthcare systems. The mobile health services are flexible, adaptable to the local context and needs, and critical in this environment where primary health care is not available or accessible. In order to adapt to the complex environment in their countries, the Red Cross Red Crescent Movement societies in the MENA region has been widely deploying mobile health teams to provide essential primary health care in remote and hard to reach areas to most vulnerable populations.

Methods: The Canadian Red Cross with other partners will conduct a workshop in Lebanon in March 2017, involving key implementers and researchers in the mobile health field. We've drafted and shared a structured survey with main stakeholders to collect vital data regarding their mobile health experiences. Moreover, technical documents will be drafted using existing mobile health guidelines to be discussed and approved during the workshop. Evidence-based medical practice, case studies, and experts' opinions will be combined to reach consensus about the effective models of delivery, packages of services, best practices, and key challenges and solutions of mobile health services.

Results: The synthesized preliminary results of the workshop will be presented, highlighting the essential components,

standard operating procedures, and recommendations to overcome the common challenges within conflict contexts.

Conclusion: The outcome document will be used as a reference guide to build on existing knowledge in mobile health service delivery in complex emergencies.

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Prevention and Risk Management from Nature to Society: How can Medicine Help Reduce the Refugee Crisis in Mexico?

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Study/Objective: To sensitize Mexican doctors on preventing immigrant disease complications.

Background: Mexico serves as a halfway point for immigrants seeking safety and a better life. Many of these refugees carry severe diseases that complicate matters. These complications could be prevented by proper and timely treatment. Currently, there are no programs targeted at immigrant health. Doctors should be sensitized to the current situation and the need to prevent health complications.

Methods: Retrospective, observational, longitudinal study of refugee patients found in Mexico City; 200 refugee patients (ages 11 to 55) found in immigrant homes and hotels working with the Responde A.C. Foundation were included.

1. Three different sites were selected, where there was a higher density of patients.
2. Specialized and experienced doctors enrolled the patients through a weekly triage.
3. A clinical file was created for each patient containing a full medical history and background on the patient.
4. Patients were given a weekly follow-up for 2 months, during these follow-ups they were asked about their recovery progress. A clinical consult was given to monitor their progress.

Results: We found that there is a constant need for general and specialized medical care among refugees in Mexico. Providing timely and appropriate care showed improvement in the patients perceived quality of life. The 130 patients showed good progress, 20 patients developed complications, and 50 patients were lost during follow-up. At the present time, the statistical analysis will conclude by the end of 2016.

Conclusion: There is an immigrant crisis in Mexico, and health-care providers should be aware of this problem and action should be taken to prevent this crisis from continuing to grow. This study shows the importance of timely and accurate medical care, and the impact it could have in preventing complications and improving the quality of life of refugees in Mexico.

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The Educational Challenge in 2017: Providing Emergency Care to Migrants and Vulnerable People

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Study/Objective: The aim of the study was to explore and describe problems and difficulties in situations with migrants in emergency care in order to plan for an appropriate and effective teaching program for emergency care providers.

Background: In 2016, there were many posed threats to emergency medicine practitioners all over Europe. Terrorism, climate changes, and seasonal diseases could be sufficient to challenge emergency medical systems; they add to the hardships facing the thousands of migrants who continue to cross into Europe with the never-ending conflict in Syria and Iraq. In those settings, emergency medicine must play its key role of being the last resort for people with no primary health care and no alternative.

Methods: An explorative study was carried out using a sample of 67 emergency care providers, 15 physicians, 52 registered nurses, 46 women, and 21 men experienced in emergency care. They documented their experiences of problematic situations.

Results: The health care professionals' experiences of problematic situations with migrants in emergency care were described as: (1) language barriers; (2) reliance on authorities; (3) different behavior; (4) contact with relatives; (5) complicating logistic factors; (6) gender roles; (7) patient's earlier experiences of violence; (8) use of natural remedies; and (9) lack of knowledge on specific health care problems of migrants.

Conclusion: Results showed the main problem was related to communication difficulties, including language barriers and cultural dissimilarities. Another key factor is the lack of knowledge on specific health care problems of migrants. In order to mitigate the problems, the use of adequate interpreters is a theoretical chance, whereas using language-free communication tools (cartoons and vignettes) could be a financially effective alternative. Training programs for emergency care providers must include sessions to improve knowledge about the care of migrants from different parts of the world. The importance of searching for the unique individual perspective is stressed.

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Evidence: Aid Special Collection for the Health of Refugees and Asylum Seekers

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Study/Objective: To build collections of health care evidence, to provide those addressing the health of refugees with some guidance, collections divided between Evidence Aid and Cochrane.

Background: In 2015, over one million people arrived in Europe by sea, mostly originating from Syria. In the same year, 3,771 people went missing or died attempting to reach safety in Europe. In 2016, people continue to make the hazardous journey across the sea, and at the beginning of February, 67,072 people made it across, while 357 were reported dead or missing.

Methods: Both collections focus on some of the most relevant medical conditions, as perceived by experts involved, either in