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Building the ISRPM disaster acute rehabilitation team program

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Program/Project Purpose: Rehabilitation response following a natural disaster has been progressively documented as an essential strategy for recovery and relief. In order to respond quickly, rehabilitation professionals, policy makers, relief volunteers and health officials need adequate training. The International Society for Physical and Rehabilitation Medicine arranged a directive to improve rehabilitation after disasters by creating a training program built off of the first hand documentation of past disasters around the world.

Structure/Method/Design: After putting together a preliminary online framework for the Disaster Acute Rehabilitation Team curriculum, three University of Michigan students travelled to China, Chile and Taiwan individually to conduct interviews with disaster victims, doctors, health officials, nurses, volunteers and hospital administration in post-disaster areas to assess their personal post-disaster rehabilitation experiences. Dozens of interviews were conducted and over 20 hours of video and over 2,000 photographs were collected. The student/physician team consolidated this information in the form of training videos for rehabilitation physicians, online quizzes, tutorials, disaster photography, and realistic disaster scenarios. We organized all of this information into a framework for initial trials as a PowerPoint presentation.

Outcomes & Evaluation: The framework for the core curriculum consists of 3 modules: a module for training rehabilitation professionals who will respond immediately to a natural disaster, another module for training rehabilitation professionals who will be team leaders and a third for rehabilitation professionals who will coordinate with national emergency planning organizations and NGO's. All of the modules have been successfully completed and edited by international disaster experts from the International Society for Physical Medicine and Rehabilitation. The next step consists of making the modules internet friendly and inviting physicians to become trained in disaster rehabilitation.

Going Forward: It is imperative that the rehabilitation response be rapid and efficient to improve survival rate following natural disaster. The DART curriculum provides a method for rehabilitation professionals who are involved in disaster work to plan and respond more effectively. The first-hand experience gained through interviews with rehabilitation professionals and tours of the disaster sites allowed for the production of a core curriculum and the preemptive planning for acute rehabilitation response during a natural disaster. The next challenges includes finalizing our curriculum into website format and recruiting rehabilitation physicians from around the world to become trained in Natural Disaster Response.

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Community health workers understanding and attitudes regarding intimate partner violence in the dominican republic

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Background: Intimate partner violence (IPV) is prevalent in Latin America and is a leading cause of death for women. A population survey of Latin American and Caribbean countries reveals that 17-53% of women in the region have experienced physical or sexual violence by an intimate partner, and many women do not seek help or report abuse. Health care providers may not have the knowledge or education regarding IPV to be a resource for affected women. Our objective is to explore the understanding and attitudes surrounding IPV among community health workers (cooperadores) in the Dominican Republic.

Methods: Five focus groups were conducted, totaling thirty-five cooperadoras, representing 9 regions in the Dominican Republic and 110 distinct rural communities. Focus groups included both male and female adult participants. Only community health workers were included. They were verbally consented for participation in survey research. Privacy was protected in that no private or protected health information was collected. To protect confidentiality, participants were asked to refrain from discussing responses outside of focus group. Nine open-ended questions were asked regarding domestic violence within their communities, including knowledge of and attitudes toward IPV in the community, understanding of causes and available resources, and the relationship between healthcare and affected women. Answers were recorded in order to obtain general and common themes as well as assess for concordant information.

Findings: Five common themes emerged from these focus groups. Cooperadores consistently believed IPV was a social issue, not a medical concern. They often stated that women were at fault and felt that conflict between partners was due to poor communication. They agreed that IPV was prevalent and that death was frequently an outcome. There also was a lack of understanding of appropriate resources for affected women. Ultimately, the community health workers largely did not feel they could or knew how to help affected women and do not currently serve as a resource to women affected by intimate partner violence.

Interpretation: Community health workers in the Dominican Republic could be a potential resource for women affected by IPV, but currently do not view themselves as such, as they have limited knowledge of the issue and how it should be addressed. Limitations of the study include self-selected participation and the possibility for recall and/or cultural biases. Strengths are that this study offers insights into the beliefs of cooperadores in an area where little research has been done and will inform future research. Future public health outreach approaches include education for health care workers to identify and advocate for women, appropriately referral of women to resources, and discussions with community members themselves regarding management and prevention of intimate partner violence.

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Violence towards Tanzanians with albinism: A CHW program to improve awareness and prevent discrimination

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Program/Project Purpose: People with albinism (PWAs) in Tanzania face overwhelming health and social challenges including high susceptibility to skin cancer and widespread discrimination. Tanzanians with albinism have also become targets of violent outbreaks. This violence is fostered by superstitions including