Study/Objective: The project goal is to increase dissemination of trainings in Psychological First Aid (PFA) for health care and public health workers who may become involved in the disaster responses. PFA is a universal early intervention and core preparedness competency for response agencies and widespread PFA training can promote workforce and community resiliency.

Background: A survey of health care organizations found that only 8% had a PFA-specific training policy. Reported barriers included lacking expertise in training content and online course selection appropriate for their staffs, and lacking subject matter experts to help implement face-to-face, interactive practice sessions.

Methods: Program elements include:

- PFA Training Coordinator Guide evaluates 14 online PFA training courses, with recommendations based on each course's audience, skill level, length, and other attributes so a training coordinator can select an appropriate course for their audience.
- Detailed instructions about facilitating interactive sessions so participants can supplement online courses with in-person practice, including 10 different response scenarios (hospital, POD, emergency shelter). Participants rotate through acting as Helper, Client, and Observer.
- Train-the-trainers have been held throughout New York State to equip Training Coordinators to use the guide and facilitate the roleplays, with support available from trained Technical Assistance Providers with a mental health background who can assist with roleplays.

Results: Participants' confidence in practicing PFA was measured after they took an online course, and again after they participated in live practice; average confidence increased by 23.7%. The statistical increase was supported by unanimously positive participant comments such as "I liked the on-line course but being able to have the interactive learning was beneficial."

Conclusion: Results support our belief that strictly didactic training in PFA is less-effective than incorporating practice opportunities. While the project is ongoing, we hope to disseminate early results as a model for building community resilience by encouraging widespread training in Psychological First Aid.

Victorian Compendium of Community-Based Resilience Building Case Studies

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Study/Objective: The 'Victorian compendium of community-based resilience building case studies' represents an Australian first in compiling a comprehensive resource for promoting resilience building activities to strengthen capacity, should unexpected events occur. A key Compendium tenant enables people to share examples and expertise by explaining how they overcame challenges or discovered unexpected findings.

Background: The Compendium complements several Victorian resilience initiatives. The Rockefeller funded, Resilient Melbourne Strategy incorporates the Compendium to bring together people from across sectors, council boundaries and community groups to deliver a series of distinct, yet connected actions that help make Melbourne a more viable, sustainable, liveable and prosperous city, today and long into the future. Sharing resilience case studies reduces program duplication and saves valuable resources.

Methods: From 2012-2016, community groups received Expressions of Interest (EOIs), requesting presentations about community-based resilience building activity for the 'Advancing Community Resilience Forum'. Each year, fifteen activities were selected for presentation and authors were invited to submit their presentation for consideration into the Compendium, using a standard template. A steering committee selected quality resilience building activities for inclusion into the Compendium.

Results: There were 123 EOIs received and 72 were accepted and invited for presentation. All 72 authors accepted invitations to present and subsequently received another invitation to submit their activity for consideration into the Compendium. Thirty-five accepted; of these, 15 have been accepted for inclusion into the Compendium, 5 are under consideration by the steering committee and 15 authors are preparing for submission

Conclusion: While projects revealed uniqueness and valuable learnings, authors were often surprised that their projects embodied these qualities. Authors expressed concerns over sharing information, identified challenges when using the Compendium template which resulted in significant modifications. Lastly, authors voiced difficulty reflecting on their challenges and critical factors for success. This model provides an exemplar to replication in other countries.

The Trauma Signature of 2016 Hurricane Matthew and the Psychosocial Impact on Haiti

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Study/Objective: Examine the mental health and psychosocial dimensions of Hurricane Matthew's impact on Haiti using Trauma Signature (TSIG) analysis.

Background: Hurricane Matthew was the most powerful tropical cyclone of the 2016 Atlantic Basin season, bringing severe impacts to multiple nations including direct landfalls in Cuba, Haiti, Bahamas, and the United States. Haiti experienced the greatest loss of life and population disruption.

Methods: Trauma Signature (TSIG) analysis was used to examine the psychological consequences of Hurricane Matthew in relation to the distinguishing features of this event. TSIG analysis described the exposures of Haitian citizens to the unique constellation of hazards associated with this tropical cyclone. A hazard profile, a matrix of psychological stressors, and a "trauma signature" summary for the affected population