

Psychosocial care to civilians affected by terrorist attacks in Norway (2011), France (2015), Belgium (2016), and the Netherlands (2019)

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The international terrorist threat commends for a deliberate planning of psychosocial care to efficiently respond to attacks in different countries and improve the public health preparedness. This presentation seeks to provide insight into the planned content, target populations and providers of acute and long-term psychosocial care to civilians affected by terrorist attacks in four European countries: Norway (Oslo & Utøya 22 July 2011), France (Paris 13 November 2015), Belgium (Brussels 22 March 2016) and the Netherlands (Utrecht 18 March 2019). Our main source of data was grey literature; such as governmental reports, policies, plans and guidelines on the content and organization of psychosocial care after the attacks under study as well as mass casualty incidents in general in the respective countries. Similarities and differences between the psychosocial care responses will be discussed in light of the countries' health systems and characteristics of the attacks. In spite of available international guidelines, the psychosocial care responses differed considerably between countries. In all cases, the registration quality influenced possibilities for follow-up contact with survivors and bereaved families, and an accessible health system formed the backbone of effective psychosocial care over time. More systematic monitoring, evaluation and research that can be compared across countries are requested to improve our preparedness and develop better practices for psychosocial care in response to terrorist attacks. Recommendations will be suggested to sustain lessons and make them available for future attacks and other mass casualty incidents.

Focus on human needs: Understanding good and bad practices in public health crises