

that for various reasons had a significant delay in treatment with antivenom. This case will be used to highlight important aspects to snake envenomation and recommendations on dealing with consultants.

**Results:** In the end, our young patient was ultimately discharged from the Intensive Care Unit (ICU) with significantly improved central and peripheral nervous system symptoms.

**Conclusion:** Conflicting treatments and patient advocacy need to be carefully balanced, and even disagreements can be handled professionally.

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### Using the Epidemic Curve to Inform Social and Behavior Change at Scale During Epidemic Response.

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**Study/Objective:** The International Federation of the Red Cross and Red Crescent (IFRC) presents a model for Social Behavior Change in emergency contexts that supports local actors in low resources settings, and engage with communities and utilize the epidemic curve to help inform response. Using the epidemic curve at a granular level, allows national communication plans to be tailored in time and place in relation to the movement of the epidemic, ensuring messaging and activities are tailored to where and when communities are in the epidemic evolution and combines with local context

**Background:** The focus on community engagement and the role of ‘Social and Behavior Change’ (SBC) during development and emergency interventions is not new. Much work has been done in this area with a plethora of theories and models to support implementation across health topics and sectors, as diverse as obesity and STD prevention. These models, often based on social science, psychology and social marketing have a commonality that includes triggering motivation for change, supporting and maintaining the new behavior. They rely heavily on in depth assessments of root causes of the behavior, cultural contexts and reflective program design. However, how do these models interface in an epidemic, where time and resources can be limited, the motivation for change is often clear, the threat time limited and moving geographically?

**Methods:** The IFRC supports an average of 20 public health threats a year. Providing quality SBC programming at scale in low resources settings, remain a significant challenge, however new models of implementation are being field tested.

**Results:** A new model was developed.

**Conclusion:** Providing a clear link between the epidemic evolution in time, place and person allows specific targeting of interventions to support prevention, reduction and eradication of transmission to at risk groups. The combination of the improved utilization of social science to inform programming, needs to be a two-way dialogue, where epidemiological data is used to target and tailor SBC.

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### Nutrition Centers in Protracted Crisis Context: Field Study from Syria

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**Study/Objective:** The objective of this field study is to examine the effectiveness of implementing comprehensive nutritional services at the community level in the complex humanitarian crisis in Syria; and to disseminate this knowledge among other humanitarian actors.

**Background:** Syria is one of the largest and most complex crises, experienced by the international humanitarian system. Difficulties of access and transportation of goods have increased the prices and reduced the availability of commodities. Cases of Severe Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM) – both components of Global Acute Malnutrition (GAM), are on the rise in Syria. The Syrian Arab Red Crescent in cooperation with Canadian Red Cross are supporting 6 nutrition centers in Hama, Salamiyeh, Al Tal, Tartous, Aleppo and Swaida.

**Methods:** In Syria, the Community-based Management of Acute Malnutrition (CMAM) approach targets of acutely malnourished children under five, and pregnant and lactating women through community outreach, Supplementary Feeding Program (SFP) and Outpatient Therapeutic Program (OTP). The cases either come directly to the centers or referred by doctors or outreach mobile teams who conduct door-to-door nutritional assessments, using Mid-Upper Arm Circumference (MUAC) measurements. Quantitative and qualitative data are collected and analyzed on regular bases.

**Results:** Until the end of October 2016 the centers were able, collectively, to screen a total of 38,847 children and 8,434 pregnant and lactating women. We’ve identified and treated total of 254 SAM cases and 1,574 MAM cases amongst children, and 1,167 cases of MAM among pregnant and lactating women. With ensuring humanitarian principles are always respected, we consider various tactics to overcome evolving challenges that may include access, security, patients and family compliance and disruption of nutritional supplements.

**Conclusion:** Implementation knowledge generated from this project can model challenges and solutions in comprehensive nutritional services at the community level in complex humanitarian crisis.

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### Applying the Experience of Level-2 Military Surgical Teams to Disaster Medicine

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**Study/Objective:** The objective of the paper is to assess the options of using the experience of level-2 military surgical teams operating in military conflict in the context of treating mass casualty and disaster victims.