WELCOME!!!

I am writing this on February 22, the 4-year anniversary of the Christchurch and Canterbury major earthquake. In yesterday’s newspaper there were moving stories from those who survived the quake or were involved in some post-quake response. One was a newspaper reporter who interviewed victims some time ago and was so affected that she has moved to another country leaving family behind to start a new job and build a new life. Another was a New Zealand teacher based at a language school in Japan who was in Christchurch at the time with students on a study trip. Many of the students perished in a building collapse, the parents blamed him and the school for their deaths and he was dreading have to face them at a memorial service.

In summary, this event and the many others like it around the world are life changers, who copes and rebuild their lives in situ, others relocate to rebuild, and alas, others struggle without the means or support necessary to do either. These are the ones health services need to be aware of.

Also this weekend, Queensland and the Northern Territory are experiencing major cyclones along with flooding and property damage, thoughts are with those involved there.

On a positive note, a number of members are preparing to attend WCDEM19 in Cape Town, which is promising to be a successful, interesting and challenge creating conference. One key item for discussion there will be how to develop and further encourage student participation in WADEM. Today’s students are the future of this organisation; already we have a mentoring programme which links students to those experienced in the fields they are seeking to study. WADEM sections are also seeking to encourage student involvement. Does the organisation need a student coordinator to link students with prospective contacts? Hopefully that question and others will be developed and answered in Cape Town.

Finally, congratulations to Frank Archer for his work in establishing the WADEM section on Disaster Metrics.

Cheers

Graeme

WADEM Oceania Chapter Newsletter Aims

The aims of the WADEM Oceania Chapter newsletter are to:

- provide communication for regional members
- encourage a collegiate relationship amongst regional members
- update members on news and events such as health issues in the region
• provide a forum for discussion on emergency medicine/health issues
• give encouragement and support for research papers
• allow publication of basic case studies
• support exchange of information and work programmes
• publicise coming events
• support the aims and activities of WADEM within the region

**WADEM Oceania Chapter Newsletter Editorial Committee**

<table>
<thead>
<tr>
<th>Name</th>
<th>Email Address</th>
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<tbody>
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<td><a href="mailto:penny@sandyburns.com.au">penny@sandyburns.com.au</a></td>
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**OCEANIA NEWS**

**Oceania Chapter Committee Report.**

Members of the Oceania Chapter attending WCDEM in Cape Town include:

Oceania Members presenting papers at WCDEM Cape Town are:

Paul Arbon, Malinda Steenkamp, Jamie Ranse, Alison Hutton, Karen Hammad, Sue Ann Bell, Wendy McKenzie, Tener Venema-Goodwin and Sheila Turris from Flinders University.
Frank Archer, Caroline Spencer and Diana Wong from Monash University
Linda Winn from NSW Ambulance service
Lev Zhurasky from Christchurch Hospital
Bella Donna, Madelina Ariani and Oktomi Wijaya from Universitas Gajah Mada Yogyakarta in Indonesia.
Joe Cuthbertson from Western Australia Ambulance service.

Others Attending
Hendro Wartatmo, Yogyakarta; Julie Zarifeh, Christchurch; Graeme McColl, Christchurch.

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**Oceania Bid for WCDEM 2019.**

A committee has been formed to promote this bid and develop the conference should the bid be successful.

Gerry Fitzgerald. Chair
Lidia Mayner
Peter Aitken
Rowena Christiansen
Vivienne Tippett
Graeme McColl
Megan Dwyer (Queensland Brisbane Convention Centre)

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Monash researchers have received a Resilient Australia Award for their groundbreaking work with communities affected by the Black Saturday bushfires in 2009.

PhD candidates Ms Debra Parkinson of the School of Social Sciences and Ms Claire Zara of the Monash Injury Research Institute (MIRI) were awarded under the category ‘National Significance’ for a joint project with Women's Health Goulburn North East and Women's Health in the North.

The collaboration examined and revealed what happens to women, men, and their relationships during and after a catastrophic disaster. It resulted in two reports: The Way He Tells It: Relationships after Black Saturday and Men on Black Saturday: Risks and opportunities for change.

Sponsored by the Attorney General's Department, the Resilient Australia Awards recognise and promote initiatives that support and strengthen communities across the nation.

Professor Lesley Day, the acting director of MIRI, said Ms Parkinson and Ms Zara’s work demonstrates how research has the potential to engage the community and influence policy and practice.

“This work is truly translational, leading to major policy changes in how authorities and other support services respond to emergency situations,” Professor Day said.

Women’s Health Goulburn North East (WHGNE) initially funded and resourced the project, instigating a 2009 study examining women's experiences during and after Black Saturday. The work resulted in Women's Health in the North and the Australian Domestic and Family Violence Clearinghouse joining WHGNE to hold a national conference called “Identifying the Hidden Disaster: The First Australian Conference on Natural Disasters and Family Violence”.

In partnership with MIRI, WHGNE then funded and resourced the research into men’s experiences, with additional funding from the National Disaster Resilience Grants Scheme (NDRGS). A second national Conference “Just Ask: A Conference on the Experiences of Men after Disaster” was held in November 2013.

Emeritus Professor Frank Archer, MIRI, who chaired the steering group for the men’s study, congratulated all those involved.

“This award acknowledges not only the quality and ethical conduct of the research, but also the care, compassion and insight demonstrated by the lead researchers in what was considered risky research,” Professor Archer said.
The reports, which included recommendations for improved practice, led to the creation of Australia’s first Gender and Disaster Taskforce. Co-chaired by the Victoria Emergency Management Commissioner Mr Craig Lapsley and WHGNE Executive Officer Ms Susie Reid; the taskforce brings together senior leaders of key emergency service organisations, government departments, academics, women’s health sector, and community representatives.

The taskforce operates under the auspices of Emergency Management Victoria, which, in partnership with the Victoria Department of Human Services, has committed to substantially fund the work of the two women’s health services, to ensure ongoing outcomes.

Further information on MIRI’s disaster resilience programs is available from Dr Caroline Spencer, MUDRI academic co-ordinator, at caroline.spencer@monash.edu.

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Disaster rebuild, the Japanese way.


On March 11, 2011 a tsunami ravaged many parts of Japan, destroying homes and businesses and killing 15,900 people with 2,600 reported missing. The tsunami was generated by a 9.0 earthquake, the fourth largest ever recorded.

The tsunami overwhelmed the village of Onagawa, 400K north of Tokyo, as well as nearby towns and cities. Onagawa lost 827 people from a population of about 10,000, or 1 in 12 residents. At that rate Christchurch would have lost 30,000 people instead of the 185. 75% of the buildings were destroyed in Onagawa. Before the tsunami there were 12 inns in Onagawa, the disaster destroyed them all, meaning that when volunteers came to help there was nowhere for them to stay. Two hours travelling was required each day before any work could commence. One enterprising inn-keeper has opened a trailer hotel to accommodate workers.

Also covered in the report is the situation of Kobe, 20 years after destruction from the 7.3 Great Hanshin-Awaji Earthquake the city has been substantially rebuilt. Of interest is that scientists knew about and studied a fault near Kobe that was the cause of the damage but hardly anyone in Kobe was apparently aware of it or thought an earthquake was possible. Did these scientists not warn the city and people of the dangers this fault posed? The authorities in Kobe say the population is now much better prepared for an earthquake with advice about emergency kits and Shakeout drills.

EVENTS/PROJECTS / PROGRAMMES / RESEARCH / COURSES REPORTS

Canterbury Health Post-Earthquake.
Report by David Meates CEO Canterbury District Health Board on hospital situation January 2015.

It's coming up to four years since the February 22nd quake, and in one sense the time has flown by, yet in other ways the time has dragged on, as many are still battling to get resolution on insurance claims and quake repairs. Whole areas of the red zone are now empty and people have dispersed throughout Canterbury - many of you have moved to areas around Rolleston and Lincoln and in North Canterbury areas like Rangiora are seeing a boom in population growth.

We've also welcomed new people to Canterbury - there's the rebuild population - many of whom
have travelled from overseas live in Canterbury and work on the rebuild projects. There's also the FIFOs - they're the people who Fly In and Fly Out on a weekly or monthly basis - all of these additional people - estimated to be around 25,000 by mid 2015 - need health services; some more than others.

Stats indicate that the 25-29-year old population has increased by 9%, but emergency department use has grown by 46% post-quake; and the 20-24-year old population has increased by 4.2%, but ED use by this group has grown by 27% post-quake.

Canterbury DHB is closely monitoring demand for mental health services and we are experiencing unprecedented increases. A 30% increase in adults, more than 50% increase in child and youth, and a 37% in emergency mental health presentations. These increases are not being experienced by other DHBs and are unique to Canterbury.

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Research: Quake claims result in health problems. The Press Christchurch 20/2/2015

Cantabrians with unsettled quake claims are more likely to argue with their partner, have health issues and experience financial problems, new research shows.

The research, commissioned by the All Right? well-being campaign, included interviews and surveys with nearly a thousand people in Christchurch, the Waimakariri and Selwyn.

All Right? manager Sue Turner said there were good signs of psychological recovery, but major concerns for homeowners who were yet to settle their insurance or Earthquake Commission claim.

There had been a drop in the number of Cantabrians worrying about another big earthquake, fewer said they struggled to cope with all that happened as a result of the earthquakes and more felt connected to greater Christchurch.

Canterbury District Health Board public health specialist, Dr Lucy D'Aeth said clearly progress has been made but the mental health and wellbeing of those with unsettled insurance and EQC claims was a major area of concern.

"Clearly the challenges go beyond living in a broken house. Unsettled claims are impacting on people's physical and mental health, relationships and finances."

In 2012, 69 per cent of Cantabrians All Right? surveyed had an unsettled insurance claim. The figure had dropped to 29 per cent at the end of 2014.

She said Cantabrians who were in a better situation should do "little things to help give them a boost. Things like going out for coffee, catching up for a walk, picking some flowers from our garden or a phone call to check they're all right".

"It's all about ensuring we don't permanently become a tale of two cities and that all our people recover from the devastating effects the earthquake has had too."

Survey findings
- 63 per cent said life was much worse than before the earthquakes
- 46 per cent report health issues
- 44 per cent said their current living situation was getting them down
- 19 per cent said they argued with their partner more than before the earthquakes
I do have some concerns with the reports of PTSD in Children and do wonder if this is a Media angle on the report and research.
The Third UN World Conference on Disaster Risk Reduction will be held from 14 to 18 March 2015 in Sendai City, Miyagi Prefecture, Japan. Several thousand participants are expected, including at related events linked to the World Conference under the umbrella of building the resilience of nations and communities to disasters.

http://www.wcdrr.org/conference/programme/publicforum

WHO organises the Public Forum “Protecting people’s health from disaster risks” at Tohoku University Kawauchi-kita Campus

Multimedia Hall on 17 March 9am to 5pm. Please keep eye on the website!
Online Research Repository
WADEM has developed an online Research Repository for members to access information about current disaster health research projects. Members are able to provide information about projects they are presently working on, as well as connect with other researchers around the world who are conducting similar types of research.

The Research Repository can be accessed by clicking on the following link – http://research.wadem.org
The Nursing Section of WADEM is currently undertaking a review in partnership with the International Council of Nurses of the use of the ICN Disaster Nursing Competencies. The competencies were released in 2009 and this work will consider how the listed competencies are being utilised across nursing associations and organisations internationally.

**RESEARCH ASSISTANCE REQUIRED**

Consider becoming part of the WADEM Mentoring Ship programme. You can provide mentoring guidance and advice from your training and experiences or for those studying or working to gain knowledge they can become a ‘mentee’ and seek help from a mentor.

Contact graeme.mccoll@ilsogno.info for initial advice.

Lev Zhuravsky a nurse manager at Christchurch Hospital is interested in collaboration partners for research on Crisis leadership in health. He has a paper published in latest PDM. Contact lev.zhuravsky@cdhb.health.nz

**WISDOM**

Taken from the email details of a nursing lecturer and PhD candidate, advice to live by:

*Never try anything you wouldn’t want to explain to an emergency nurse.*

**WADEM COMMUNITIES of INTEREST**

The following WADEM Sections provide contacts and information for members interested in the specific area/skills. More such areas of interest are likely to be established in the future.

**Nursing Section**
Contact: alison.hutton@flinders.edu.au

**Osteopathic Physician Section**
Contact: William Bograkos irisbo@comcast.net

**Psychosocial Section**
Contact: Limor Aharonson-Daniel limorad@exchange.bgu.ac.il

**Mass Gathering Section**
Chair is Paul Arbon.
Contact paul.arbon@flinders.edu.au

**Emergency Medical Response Section**
Contact: joecuthbertson@hotmail.com

**Disaster Metrics Section** (Newly established)
Contact frank.archer@monash.edu

**CALENDAR OF EVENTS**

<table>
<thead>
<tr>
<th>2015</th>
<th>19-20 March</th>
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<tr>
<td></td>
<td>Black Swans: Resilience and the Unthinkable. Flinders University <a href="mailto:information@torrensresilience.org">information@torrensresilience.org</a></td>
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<tr>
<td>Date</td>
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<tr>
<td>22 May</td>
<td>Australian Institute of Emergency Management Conference.</td>
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**A COFFEE WITH**

In this section members are invited to introduce themselves to other members in an informal manner.

**This issue:** Gerry Fitzgerald

**Q.** Nickname?

**A.** Gerry

**Q.** Where are you working?

**A.** Queensland University of Technology, Brisbane Australia. I lead the health management programs here and am Director for the Centre for Emergency and Disaster Management

**Q.** What three words best describe you?

**A.** Quiet, strategic, egghead

**Q.** What is your best disaster experience?

**A.** Can you have “best” disaster experience? They are disasters. The response to the bus crashes at Mt Tamborine were handled reasonably well.

**Q.** What is your worst disaster experience?

**A.** Trying to organise a reasonable response from QLD to the South Asian Tsunami. Too many people wanted to interfere without understanding the principles of effective response.

**Q.** Which 3 people would you most like to share your ration pack, cold pizza and instant coffee with?

**A.** Barak Obama, the Pope and Melinda Gates

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And **Dr Bella Donna**

**Q.** Nickname?

**A.** Donna

**Q.** Where are you working?

**A.** I'm working in Faculty of Medicine, University Gadjah Maga, Yogyakarta, Indonesia.

**Q.** What three words best describe you?
A. Happy, fighting, smiling

Q. What is your best disaster experience?
A. When earthquake in Padang, we helped the Hospital in Padang Pariaman with medical support and management support

Q. What is your worst disaster experience?
A. In Banjarnegara Landslide, when the Faculty asked our team to go Banjarnegara, even though many medical volunteers from other districts were there.

Q. Which 3 people would you most like to share your ration pack, cold pizza and instant coffee with?
A. My children, my friend and my sisters.

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Volunteers wanted to introduce themselves in ‘Coffee with’.

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ASK AUNTIE

This section is an advice column where readers can submit their questions and ‘Auntie’ will draw on many years of experience to provide reasoned advice and counselling.

Dear Auntie

I live in an area that a few years ago was hit by a disastrous event, causing the deaths of many people and destroying houses, commercial buildings and infrastructure. So much so that we are still in a state of demolishing homes and other buildings and many are struggling to cope with life.

It was with dismay when visiting a lawyer in another area some distance away to be told that ‘your area is booming and must be getting closer to normal’. This was a change from another frequent comment to ‘get over it’, and ‘you should be moving on now’.

I have managed, just, to keep calm in these situations, in some cases explain what has happened and is still happening, in others simply walking away.

Can you please give some advice to those who haven’t been affected by such events on how to talk to people who have.

Sincerely

John.

Dear John

That is so sad that people are so insensitive. My lovely nephew Graeme, he was in the Police you know, has strong opinions on many lawyers, he even makes me blush to listen. So just ignore them, they live in a sheltered world. It is a fact of life that many people who haven’t been affected by disasters don’t understand what others who have are going through.

When a disaster like this happens it is a shock to everyone, even if you think you are used to them. If you are okay but others have had a really bad time its often hard to know what to say. Maybe
just listen or stay quiet, and be respectful. If they want to talk, it can be helpful to say something like “this must have been hard for you, and your family, going through such a tough time... is there anything that I can do to help?” If you are a neighbour or a friend you can offer a hot meal or something that shows you care and are keeping in touch. Most people try to be independent, and while they may need help, they don’t want to be seen as helpless. For some the effect can be felt for years. Community events where folk come together for bbqs or shows helps people share their experiences. It can help to recognise the strengths people have shown in getting through the disaster, their courage, compassion and concern for others.

Unfortunately we will always have disasters, even this last week my adopted, or is that adapted, grandson Peter was in Geneva at a WHO meeting, while others were coordinating a health response to those horrible cyclones in Queensland. (That is normally his job, he is so clever). People affected in the damaged areas of Queensland will also need sympathetic approaches to support them as they rebuild their homes and livelihoods.

Auntie is hoping that some of our health and emergency professionals will read this and seize the opportunity to spread the message on how to respond in such circumstances.

In Kindness

Auntie

CALL FOR MATERIAL

Material is required for any of the sections listed, or under a new category, if that is appropriate. Personal experiences, case and research reports are especially welcome and we ask that these are limited to no more than 1,000 words. The subject matter can be aspects of a disaster or response that is unusual because of its type, location or effects. Material is welcome from WADEM members and even non-members internationally.

Any suggestions regarding material for content, or suggestions to improve this Newsletter, are welcome.

Please forward contributions to Graeme McColl at graeme.mccoll@ilsogno.info

DISCLAIMER

The comments, opinions and material in this newsletter are those of the respective authors and not necessarily those of WADEM or the WADEM Oceania Chapter.