

Ecumenicalism and Cultural Diversity: A US Christian Physician Joins a Muslim and Hindu Medical Team in a Buddhist Country

J. Lambert

Allegheny General Hospital, Pittsburgh, Pennsylvania USA

The 2004 Southeast Asia tsunami disaster produced an enormous response from hundreds of different countries and NGOs—each with its own objectives. The sudden onset, catastrophic nature and size of the disaster forced many agencies to build their teams in piecemeal fashion with any available candidates. Several groups discovered rich cultural diversity within their own members. On very short notice, the author (a US physician and Christian) was invited to join a medical team from the United Kingdom (comprised of Asian and Middle Easterners of Muslim and Hindu faith) and work in refugee camps along the eastern coast of Sri Lanka, one of the most devastated areas following the tsunami. An expected cultural difference was found in the fact that the majority of Sri Lankans are Buddhist (70%), with Hindus (15%), Christian (8%), and Muslims (7%) comprising the remaining 30%. Other challenges to working in this country included language barriers and the civil unrest between the Sinhalese majority and Tamil minority, which was complicated even more by their own cultural and religious differences. The author analyzes and critiques his mission team's successes and failures in its humanitarian efforts, in addition to discussing some of the biased religious viewpoints among different relief workers.

Moreover, insight is given as to how other non-US and non-Christian relief workers view the policies of the US. A personal account shows how the group bonded and used open discussions to overcome some of the difficulties in fulfilling its fundamental commitment.

Keywords: barriers; civil unrest; faith; medical team; mission; non-governmental organization; relief; religion; tsunami

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Free Papers—Theme 13: Disaster Planning-1

The Myth of Crisis Management versus Consequence Management

P.F. O'Meara;¹ M. Mitchell²

1. Charles Sturt University, Bathurst, New South Wales, Australia
2. Charles Sturt University, Manly, New South Wales, Australia

Introduction: Those involved in disaster management are drawn from all levels of government, and specialist agencies in law enforcement and security, firefighting and rescue, prehospital care, and health. This inevitably draws together professional disciplines who have different priorities, knowledge, skills, and worldviews. This is most clearly seen in the division between those in the uniformed or disciplined services and those in the health system. This inter-agency and inter-disciplinary research will directly address the need to develop more flexible and integrated services to

improve the safety and security of all Australians based on research evidence.

Objectives: To: (1) Identify the differences that have developed in the organizational structures, processes, and the culture between emergency health services and the uniformed emergency services that impact their interaction with each other in the event of major disasters; (2) Develop innovative models which will enhance effective teamwork and cooperation between agencies at both strategic and operational levels; (3) Use small and major disaster exercises to test new inter-agency approaches to major disaster management; and (4) Recommend more effective multi-agency approaches to major disasters that strike an informed balance between the objectives and needs of the health and emergency systems.

Methods: The research project will be submitted to the Australian Research Council and be undertaken in partnership with the emergency management agencies with responsibility for disaster management in New South Wales in the fields of police and fire services, emergency management, emergency medicine, and prehospital care.

Soft systems methodology will be used to develop alternative models to increase teamwork and cooperation between agencies. Data will be drawn from: (1) official reports; (2) interviews with participants; (3) piloting during "small" incidents; and (4) application as part of disaster exercises.

Discussion: The output and outcomes of this research will have significant social, economic, cultural, and intellectual benefits across Australia, and in the Asia-Pacific region. At a local level, the work will have economic and social impacts by contributing to the better management of public service organizations, and improved local and national services.

Conclusion: Interdisciplinary sharing and multidisciplinary efforts are essential for advancing knowledge in disaster management. This research collaboration will make recommendations that bring together perspectives from a wide range of academic disciplines and emergency management agencies.

Keywords: collaboration; consequence; crisis management; disaster; health systems; management; models; myths; process; soft systems; structures

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Applying Management Science to Emergency Medical Planning for Mass-Casualty Incidents in the City of Munich

M. Kay;¹ K.G. Kanz;² T. Vogel;² W. Schaeuble³

1. Plansafe Emergency Preparedness Consulting, Germany
2. Department of Trauma Surgery, Medical Center and School of Medicine, Germany
3. Munich Fire Brigade, Germany

Introduction: In Germany, civil protection and multiple casualty management was based largely on the Cold War scenario. After the fall of the Berlin Wall, the existing civil protection program was decentralized and responsibilities were assigned to regional authorities. The increasing threat of terrorism and high kinetic energy incidents, combined with a lack of funding and organization, has led to a deficit