

Natural disasters and a Newborn Hearing Screening Programme: *maintaining services, quality and sanity*



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The World Health Organisation:

A disaster is a situation where the normal means of support and dignity for people have failed as a result of natural or man-made catastrophe (WHO 2002)

Here are some that can occur
Warning alarm about to sound this
is not an emergency

Earthquakes



Cyclones



Flooding



Tsunamis



Volcano eruptions



Man made disasters



All New Zealanders and Australians are encouraged to prepare for a natural disaster within the home and work environment, but are we really?



Legislation regards to disasters

- All District Health Boards (DHBs) in New Zealand have a legislative responsibility to act in a natural or man made disaster
- They are expected to be ready and have established systems and provide training to staff
- They have a responsibility to also keep staff safe in an emergency

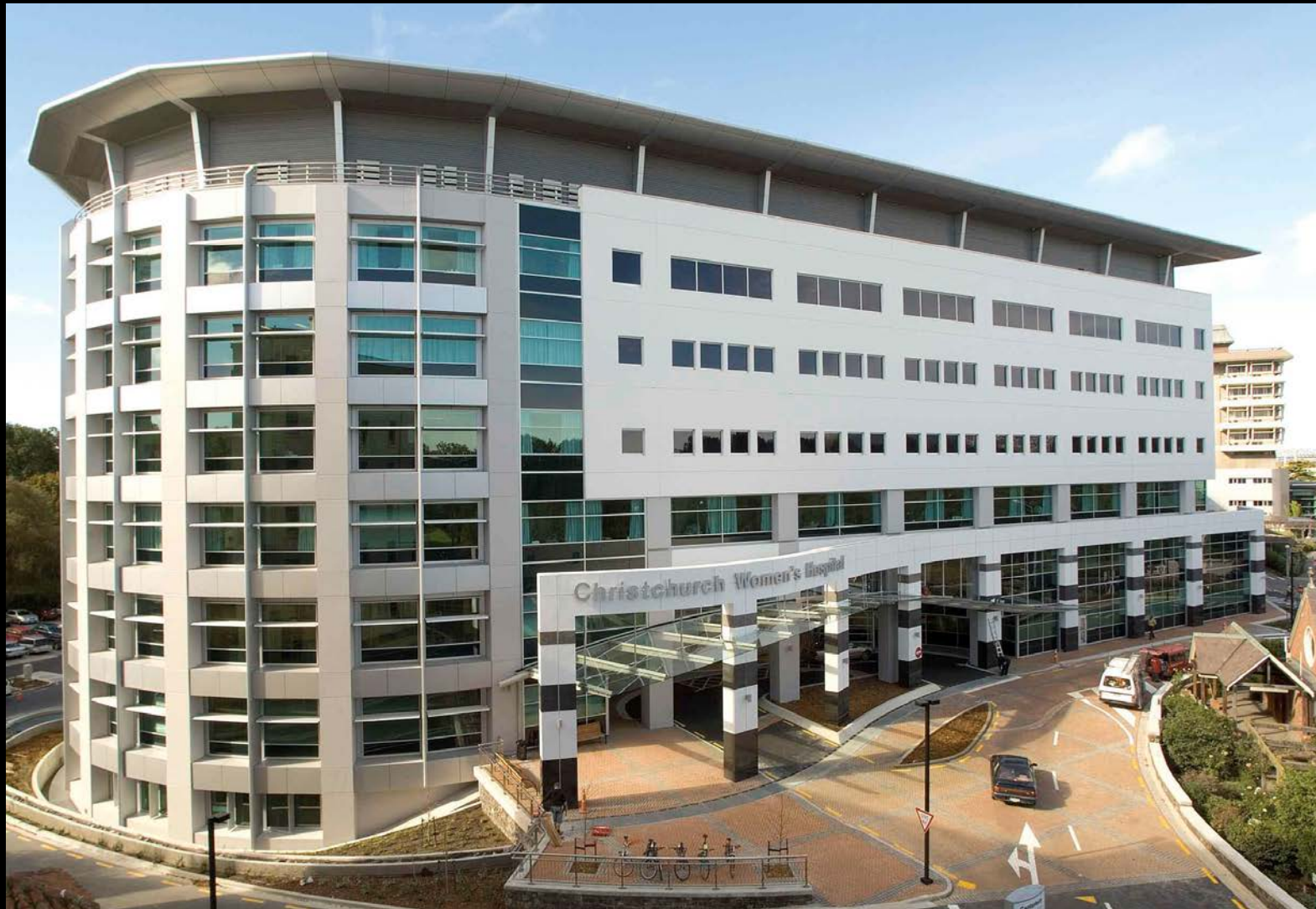
The events

- Sept 2010 magnitude 7.1 earthquake.
No fatalities, but damage
Screening stopped for a few days
- February 2011 magnitude 6.3 magnitude earthquake.
Significant damage and loss of life. Again screening stopped for a few days



- **The FEB 2011 Quake**, although lower on the magnitude scale, the intensity and violence and the shallowness and proximity of the epicentre made it worse
- 185 Named dead. 6659 injured. Some still missing
- 3 babies died who had been screened. One baby screeners remembered
- National state of emergency was declared as a result of loss of water, power and damage to sewerage systems. *This is the first time this has been invoked in NZ*
- 440 aftershocks in the first 24 hrs some almost as large
- 12,415 aftershocks to date

Newborn Hearing Screening programme headquarters



Universal effects in a disaster: lives change significantly

- Nothing can really prepare you for disasters and no one knows how they will react no matter what role they have or the expectations of that role
- Initial safety concerns, do we need to evacuate, is the building ok??
- OH NO NOT AGAIN
- Safety concerns for family, friends, pets and homes
- Acute stress disorder and post traumatic stress disorder
- Sleepless nights
- Hypervigilant/anxiety/paranoid feelings
- Ongoing financial issues
- Mental health issues. CHCH has prescribed twice as many antidepressants in the last year than the whole of Auckland

Universal effects in a disaster: lives change significantly

- Guilt they weren't affected that much as others - my home is ok
- Grief over a lost city
- Alcohol and smoking rates increased
- Fatigue/disempowerment
- Low energy, feeling stuck, hopeless, despair, stress, low motivation
- A lower quality of life
- Relationship issues divorce rate increased
- More health issues for all
- Double blow of stress not just the earthquake but insurance issues
- Issues with government in rebuilds eg school closures and merges

Working Life

- They were conflicted between family and work commitments
- Quality of work and concentration affected at times. eg you had to check on yourself several times to make sure you had done the job
- Staff didn't want to come to work especially with school closures and not wanting to leave children
- Stress from continual emergency alarms which continued all afternoon on the day of the Feb quake
- Staff felt uncomfortable working in multi-storey buildings. Staff even resigned over this in the DHB
- Screeners felt they had to be strong in front of mothers during after shocks and not be tearful or fearful. At times had to reassure women if they were frightened or help them to get to cover in large aftershocks
- Need to support other screeners in each individuals roller coaster of events emotionally and mentally including effects of ongoing insurance and govt agency interactions

Effects on women

- Some women who were inpatients on the day of large earthquakes wanted to leave and go home. Some wouldn't come back in and stayed by exits
- Some didn't want to come into the building due to fear of collapse which has continued throughout the last 2 years
- When screening restarted some women felt it was a unwanted distraction as did some midwives particularly with ongoing aftershocks
- Women were emotional and wanted to talk to anyone about their experiences including screeners so screening took longer
- Women became upset when asked "where they were going home to": "I don't have a home anymore" or "I don't know yet"

Effects on women

- Many left the area and were screened elsewhere
- Women appreciated outpatient options including caravans in the community
- Difficulty with transport to outpatient appointments due to road damage
- Women still stressed today as houses are damaged and cold or they have issues with insurance and govt agencies in regards to repairs or rebuilds
- Huge financial stress
- Job losses and unemployment as businesses have closed or moved
- Mental health issues for all citizens in Canterbury

**IT'S
ALL
RIGHT
IF YOU FEEL
FRUSTRATED
AT TIMES**

Canterbury has changed
a lot and we all see things
a little differently.
And that's all right.



**IT'S
ALL
RIGHT
TO FEEL
OVER-
WHELMED
SOME DAYS**

Canterbury has changed
a lot and we all see things
a little differently.
And that's all right.



**IT'S
ALL
RIGHT
IF YOU'RE
A TAD ON
EDGE THIS
MORNING**

Canterbury has changed
a lot and we all see things
a little differently.
And that's all right.



Sad

It's all right to grieve for the loss and the changes we are experiencing. Take care to remind yourself of the positive things in your life and create moments of gratitude and joy. Here are some other things you might try:

- Reach out - invite someone to catch up for coffee. Connecting with other people and sharing how you're going can really help.
- Keep a gratitude diary by writing down three things for which you are grateful on a daily or weekly basis.

How are you feeling?

Frustrated

Really Not All Right

Our lives have changed and many of us are having a tough time. It's all right to ask for help. You are not alone.

If you are finding it hard to cope and need support you can ring the Canterbury Support Line on **0800 777 846**

When you call this helpline, someone will talk with you and help work out what kind of support you may need.

They can connect you with free counselling services or organisations that can offer you practical support, information or advice.



TRIED SOMETHING A LITTLE DIFFERENT LATELY?

Having a go at something
new builds confidence
and a healthy mind.

*all
right?*
alright.org.nz

www.alright.org.nz



HAD A GOOD BOOGIE LATELY?

Everyone needs to let their
hair down now and then.

*all
right?*
alright.org.nz

www.alright.org.nz



WHEN WAS YOUR LAST MATE DATE?

Catching up with mates
is awesome - even when
times are tough.

*all
right?*
alright.org.nz

www.alright.org.nz

WHEN DID YOU LAST SHOW A LITTLE LOVE?

It's the little things that
really make a difference
to our family and friends.



all
right?
allright.org.nz

What made staff want to come to work?

- It is not realistic for organizations to assume staff would be willing to work but it is an expectation that they do.
- Once staff knew family, homes and pets were OK they felt they could come to work. Cell phones were a saviour as the network remained active.
- Management that were caring and compassionate and accounted the emotional needs of staff
- Contacting each staff member to ensure they were OK
- Communication was regular and up to date from senior management to local management
- The CDHB made facebook available at work for communication and acceptable to carry mobiles around during work
- Earthquake leave was paid for those who could not come to work
- Free access to counselling or psychologist care

What made staff want to come to work?

- Supportive and flexible colleagues
- Nationally we had huge support from other DHBs and even got morning tea packs sent. This helped a lot.
- A strong organizational image and connectedness having a work family
- Understanding of roles during a disaster: report to either coordinator or if out in a birthing unit the charge midwife, assist as directed, if sent home need to be on call for other roles such as runners, administration staff, assistance with evacuations. This is documented in the emergency plans
- If they had experienced a disaster before seemed to cope better
- Most important is communication, communication, communication.

Be supportive, patient, non judgemental, kind and generous to each other and creative in your screening!



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