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RESPONSE

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A.I.E.S.

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NATIONAL EMERGENCY RESPONSE



Official Journal of the Australian Institute of Emergency Services

Summer 2020-21 • National Emergency Response

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(L-R) NSW RFS Mid North Coast District Coordinator and Acting District Manager Rachael Eggins and Captain Coramba Rural Fire Brigade and volunteer firefighter Rebecca Turnbull



NEW MEMBERS

The Australasian Institute of Emergency Services is pleased to announce the following emergency services people joined the AIES between April and July 2020.

NAME	ORGANISATION	DIVISION
Shane Barnes	SEQUEST	QLD
Anastasia Bougesis	Ambulance	SA
Rev. Peter Devenish-Mearns	Police, Army & St John Ambulance	QLD
Ali Lane	SES	QLD
James Logan	Police	NSW
Benjamin Pearce	Country Fire Service	SA
Bodie Rodman	St John Ambulance	TAS
Lisette Sophios	Police	NSW
Eane Watson	Fire & Emergency Services	QLD
Aaron Yeoward	Police	SA

Legend: Australian Defence Force (ADF); Country Fire Service (CFS); Rural Fire Service (RFS); Bush Search and Rescue (BSAR); Royal Flying Doctor Service (RFDS); St John Ambulance (STJA)



www.facebook.com/aies.online



<https://au.linkedin.com/company/australian-institute-of-emergency-services> or log in at au.linkedin.com and search for 'Australian Institute of Emergency Services' under 'Companies'.



Articles, photographs and short stories are sought for the *National Emergency Response Journal*. Please submit items for the next edition to editor@aies.net.au by **8 March 2021**. There is an annual award for the best article submitted by an AIES member.

Living with PTSD? We Can Help

Moving Beyond Trauma is a 5-day residential program at the Quest for Life Centre in Bundanoon, NSW designed to assist people with PTSD reclaim their lives.

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	15-19 March	12-16 April
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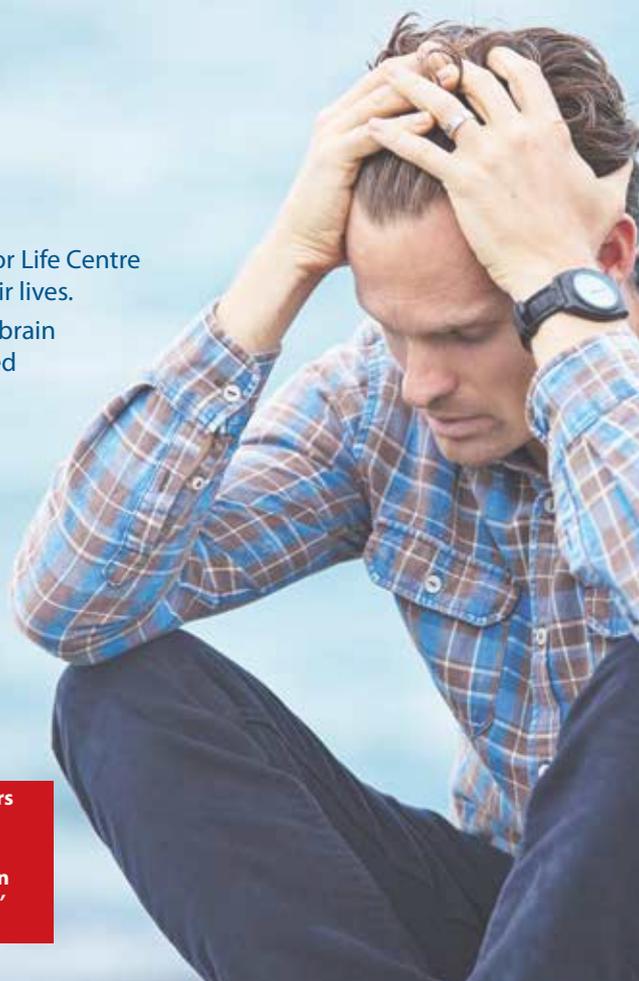
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FROM THE PRESIDENT'S DESK

Steve **Jenkins**, FAIES

National President

Firstly, I sincerely hope you, your families, friends and colleagues are all safe and well given the current situation with the pandemic. As we have seen with Victoria, Queensland, and now South Australia (20 November) this is a particularly virulent and contagious disease. Hopefully the success of trials for potential vaccines, as recently reported, will lead to a positive outcome globally.

Thank you to those who attended the virtual Annual General Meeting and/or submitted a proxy for the meeting. The minutes and my report will be available on the AIES website. A copy of the report has also been included in this edition of the journal.

The 2021 AGM will be held at the West Point Hotel in Hobart on Saturday 1 May. The original venue, the Best Western, has been commandeered by the Tasmanian Government as a COVID-19 quarantine hotel.

As reported at the AGM, the AIES is negotiating with Research Policy House to conduct a masterclass with former Queensland Police Commissioner Ian Stewart APM AO about his

experiences and learning from having held numerous senior emergency and disaster management roles, including being the inaugural State Disaster Coordinator for Cyclone Yasi and the Queensland floods. To assist Mr Stewart in preparing for the masterclass, and to ensure that he targets the issues relevant to AIES members, a survey will be circulated for members to complete. Completing the survey will only take a few minutes of your time.

Members would be aware the report by the Royal Commission into National Natural Disaster Arrangements (see page 14) was recently released. This report has significant implications for emergency and disaster management in Australia. Mr Stewart will include references to the Royal Commission's findings and recommendations in his masterclass.

The masterclass will be held at 10am (AEDT) on Tuesday 23 February 2021. Further details will be circulated in due course.

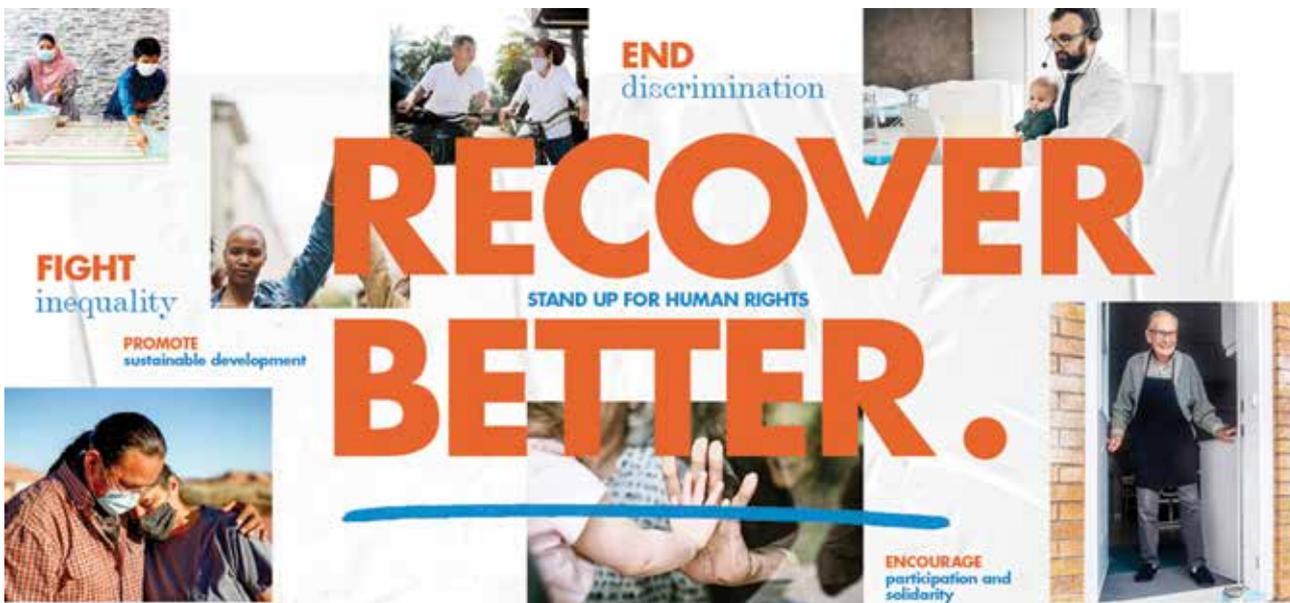
Congratulations to Kevin Perry (Victorian Division) for being awarded



the 2020 AIES Golden Pen Award for his article on the Victorian bushfires, and in particular, his personal experiences. Sadly, Kevin's residence was destroyed in the fires.

As 2020 is rapidly drawing to a close, I sincerely hope that there are no more disastrous events or significant outbreaks of COVID-19.

On behalf of the Board, I wish everyone a Merry Christmas and happy New Year. Here's hoping 2021 will be a much better year. ●



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Juan Audish in her AV uniform.

MY NAME IS JUAN AUDISH AND THIS IS MY STORY

I remember feeling petrified, isolated and apprehensive.

Late 2001 is when my family and I arrived in Australia fleeing a war-torn country. Escaping war and its remnants was something indescribable, something unimaginable. It's a life experience that is hard to understand if you haven't lived it yourself.

Arriving in Australia was daunting but it was also the most positive change that could have happened to me. I started primary school in grade three but before that, education was a luxury. I didn't know my ABCs or simple numbers. I didn't know how to interact with anyone outside my family due to the isolation of war.

But, war... it teaches you something else.

It teaches you persistence, endurance and tenacity. It fractures you but also rebuilds you. A couple of years later, my brother was born with a rare congenital abnormality. This was what inspired me to become a paramedic.

As tacky as it sounds, I want to give back to a country that gave me the most

basic things; food, shelter, education. And some things which are not so basic: endless possibilities and a life without fear. I wanted to become a paramedic for my parents, for myself and most importantly for my brother and all those who have been involved in saving his life.

Working within the non-emergency sector as an ambulance attendant before becoming a paramedic taught me many great values. It opened my eyes to the individualised care we provide and enhanced my communication skills as well as my ability to adapt. It showed me that each case is different and how to deal with it both appropriately and professionally.

You tend to make friends with the patients in non-emergency. You know them by name, you know what they like and who their family is. You do your best to make them smile, make them laugh or even simple things like making funny jokes that really aren't funny but make them laugh anyway. These are the

values I will bring to work every day as a paramedic. These are the values that will make a difference treating someone who could be anxious or scared.

My experience in the non-emergency sector has helped to prepare me to deal with the COVID-19 pandemic. There have been many instances where I've had to suit up and provide treatment to those who are either confirmed or suspected to have COVID-19.

Yes, this pandemic has been challenging and has brought many changes to our work and the way we live.

But, this is why I wanted to be a paramedic and work alongside other highly trained individuals. I thrive in challenging situations and want to provide Best Care to every single patient and give back to the community that helped me grow and get to where I am today.

While that's my story it's a work in progress. There are many chapters still to be written and I am thrilled that they will unfold at Ambulance Victoria. ●



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AIES 2020 AGM

President's Report

Stephen Jenkins FAIES

National President

This year has been particularly challenging with the pandemic.

This AGM was not able to be held as originally scheduled due to cross-border travel restrictions and state-imposed quarantine requirements which prevented an 'in-person' AGM being held as required by the *Corporations Act 2001* (Cth).

The Government has introduced temporary legislation to allow AGMs to be conducted virtually, as we are now doing. It was also necessary to obtain a 'no action' agreement from ASIC as we were not able to hold the AGM by the legislated due date (this was obtained to 30 November 2020). It remains to be seen whether the same arrangements will continue in 2021 – this will be heavily dependent upon the COVID case numbers in Australia broadly, and in individual states and territories specifically, in the new year.

Welcome to over 40 new members throughout the year, including one in Hong Kong.

Doug Caulfield FAIES (Victoria Division) was appointed an independent director on the International Association of Emergency Managers Board.

Welcome also to the directors who were appointed to replace outgoing directors – Michael Young in Queensland, and Chris Miller in the ACT. Their formal appointment as elected directors is included later in the agenda for this meeting.

The Board held meetings almost every month throughout the year, and recently commenced using the Zoom virtual meeting platform for the meetings. Many thanks to Wayne Coutts for organising the meetings in Zoom. It has worked well, and we will be continuing to use Zoom.

Since the last AGM, the Institute has designed and produced challenge coins to present to people who provide the organisation a service worthy of recognition. Wayne Coutts was instrumental in having these coins designed and produced. Thanks Wayne.

Wayne Coutts was also responsible for taking the lead on designing and producing and distributing the Long Service pins that many of you would have received by now. Thanks to Wayne again, especially as he has achieved

all this whilst also managing responses to cyclones, bushfires and the pandemic.

Another casualty of the pandemic has been the *National Emergency Response Journal*. Ordinarily produced four times a year in print form, the frequency has reduced to three copies per annum and is now distributed as an eMag. Thanks to everyone who has contributed articles to the NER Journal. Please keep them coming, no matter how small they are, especially if they recognise the great work being performed by members of the emergency services and the agencies that support them.

The Australia & New Zealand Disaster & Emergency Management Conference is usually held annually on the Gold Coast – four members received complimentary passes in 2019, and one in 2020. Here again the pandemic impacted people's ability to attend, especially due to Queensland's border restrictions. Hopefully the pandemic will have passed by the time the 2021 conference is due to be held and we can have more attend.

New AIES t-shirts and caps were produced during the year. These are available for purchase. Thanks to NSW members (Luke Freeman in particular) for arranging their design and production, and Jenny Crump for taking orders and doing the distribution.

This year, the Golden Pen Award for the best article in the NER Journal by a member was awarded to Victorian member Kevin Perry. Kevin, unfortunately, was very severely impacted by the bushfires including losing his residence to the fires. Kevin wrote a very moving story about this experience.

The Institute also provided Kevin with replacement a membership certificate and badges, and an AIES t-shirt, cap, challenge coin and set of Huon pine coasters which were formally presented by Victorian member and Independent Director Doug Caulfield. Although not a lot by comparison to what he lost, we hope that it helps just a little.

I would also like to congratulate all the recipients of this year's AIES Awards:

- AIES National Medal of Excellence – Alan Marshall LFAIES (Victoria) – for outstanding and dedicated service to the AIES in numerous roles including National and State President over many years.

- AIES National Award for Excellence – David Parsons FAIES (NSW) – for his outstanding service to the Institute, in particular the NSW Division.
- AIES Commendation – Raelene Davis MAIES (NSW) and her daughter Chantelle Davis – both members of the NSW Rural Fire Service (Woodburn Brigade) for their outstanding firefighting efforts during the Busby's Flat fire which tore through Rappville near Casino in northern NSW as a fire storm on 8 October 2019 – their actions, under dangerous conditions, directly saved numerous structures.
- AIES Commendation – NSW RFS Mid North Coast Team (Coffs Harbour and Bellingen Local Government areas) – who, between August 2019 and February 2020, performed 656 missions or deployments throughout the season to many parts of NSW including Casino, Grafton, Kempsey, and Queanbeyan, contributing nearly 2,800 days of firefighting effort (people days) with many, if not the majority, being 10 to 14 hours or more in duration.

I would like to remind members that anyone can be recommended for an AIES award. With the exception of the National Medal of Excellence, which can only be awarded one a year, there is no limit on the number of awards that can be approved.

Finally, I am excited to announce that the AIES is in discussions with another organisation, Research Policy House, which is closely aligned to the Global Leadership Institute, to conduct masterclasses with prominent members of the emergency services community. The first is hoped to be scheduled shortly with former Queensland Police Commissioner Ian Stewart AO APM, who was also the State's inaugural State Disaster Coordinator in 2011 for the Queensland floods and Cyclone Yasi, and more recently the State Disaster Recovery Coordinator. Further information about this will be disseminated in the not-too-distant future.

With that, thank you for the opportunity to present this report, and I would like to move its adoption.

Thank you ●





AIES AWARD FOR NSW RFS MID NORTH COAST

The AIES proudly presented a Certificate of Commendation to the NSW RFS Mid North Coast – Coffs and Bellingen in recognition of the team’s outstanding commitment and service during the 2019/20 bushfires.





(L-R) District Administration Officer Maree Coonan, District Officer Jason Booth, Operations Officer Michael Brougham, District Coordinator and Acting District Manager Rachael Eggins (Representing Supt. Sean McArdle AFSM), Training Officer Darryal Luxford, AIES National President Steve Jenkins FAIES, and Captain Coramba Rural Fire Brigade and volunteer firefighter Rebecca Turnbull.

Read AIES President Steve Jenkins' letter to the team led by District Coordinator and Acting District Manager Rachael Eggins.



(L-R) NSW RFS Mid North Coast District Coordinator and Acting District Manager Rachael Eggins (Representing Supt. Sean McArdle AFSM) and Captain Coramba Rural Fire Brigade and volunteer firefighter Rebecca Turnbull.



THE AUSTRALASIAN INSTITUTE OF EMERGENCY SERVICES

Unit 102 / 141 - 143 Elizabeth Street, Sydney NSW 2000

4 November 2020

Rachael Eggins
NSW Rural Fire Service
Mid North Coast Fire Control Centre
Aviation Drive
Coffs Harbour NSW 2450

Ref: AIES Commendation – NSW Rural Fire Service, Mid North Coast Team

Dear Rachael

It gave me much pleasure today to present the AIES Commendation to you on behalf of the staff and volunteers of the NSW RFS Mid North Coast District in recognition of their significant and extraordinary efforts during the 2019-2020 fire season now known as "Black Summer". The AIES is pleased to acknowledge such a significant effort. For your information and dissemination throughout the District, the Citation for the AIES Commendation is as follows:

From the beginning of August 2019 to the end of February 2020, members of the Mid-North Coast District of the NSW Rural Fire Service (Bellingen and Coffs Harbour local government areas), assisted with out-of-area fire-fighting operations in many other areas of the state, including the local government areas of: Clarence Valley, Northern Rivers, Queanbeyan-Palerang, Kempsey, and Nambucca, and the RFS Districts of Lower North Coast and Cooma Monaro.

Specifically, some of the more major fires that MNC District members assisted with were: Andersons Creek (20 days), Kaloe Mountain (21 days), Liberation Trail (20 days), Busby's Flat (Rappville area) (20 days), and Charley's Forest (20 days). There were numerous other deployments, many single days (and nights) closer to home, such as the Bees Nest fire which impacted parts of the Dorrigo Plateau, one of the first in the season, and the Liberation Trail Fire near Nana Glen.

Collectively, MNC District members performed 656 missions or deployments throughout the season, during which they contributed 2,796 days of fire-fighting effort (People days) with many, if not the majority, of those days being 10 to 14 hours or more in duration. This effort was performed across 102 calendar days throughout the season.

Yours sincerely

Stephen Jenkins FAIES
National President
Australasian Institute of Emergency Services



Sam Mooy/Getty Images

HELPING AUSTRALIA'S FIRST RESPONDERS DEAL WITH THE TRAUMA THEY SEE DAILY

By **Brendan Nicholson**

Executive editor of The Strategist

Australian first responders dealing with fires, crimes, crashes and pandemics are in danger of being overwhelmed emotionally and they are three times more likely than other Australians to consider suicide.

That statistic has long worried former Victoria Police Chief Commissioner Graham Ashton, who was announced on 15 October, 2020 as chairman of Fortem Australia, a not-for-profit organisation providing mental health support to members of first responder agencies and their families.

Agencies include state and territory paid and volunteer emergency services,

such as fire and rescue, police, ambulance, and rural and community-based firefighting services, along with national organisations such as the Australian Border Force and the Australian Federal Police.

Ashton headed Victoria Police from 2015 to 2020 after a long career in the AFP.

During his 40 years in law enforcement, Ashton developed a strong concern about the need to address mental health issues in policing. He ordered a major review of the adequacy of mental health and wellbeing services in Victoria Police, which was followed by

a series of reforms within the police and the start of efforts to improve support for police veterans.

Ashton retired on 1 July and was asked to join Fortem to use his experience to help develop and expand services for a broader range of first responders and their families.

Fortem, which means 'strong' in Latin, was established by John Bale, co-founder of the Soldier On mental health support group for defence personnel. "Graham was instrumental in leading mental health reform with Victoria Police and brings to Fortem this understanding of how vital connection and support



“First responders are living their lives like everyone else, but on top of that they are working in a stressful environment where their safety can be at risk and where they are often dealing with very traumatic things. That amplifies the operating environment they’re in beyond that which we all have to deal with on a daily basis.”

are for wellbeing and mental fitness,” Bale says.

For a time, Soldier On broadened its orbit to take in first responders confronting mental health issues but found that those issues and the levels of support already available were significantly different.

“Defence is a massive organisation,” says Ashton. “What will emerge from the work of Fortem is that the issues in the first responder area are so significant that they need their own focus, not just to be part of, or pinned to, Defence.”

He says the whole concept of mental health and other support for law enforcement personnel and other first responders is not as mature as it is in the military sector.

Ashton says that everyone in the community will at some stage have issues with mental health, major physical health issues, death of loved ones or workplace issues.

“First responders are living their lives like everyone else, but on top of that they are working in a stressful environment where their safety can be at risk and where they are often dealing with very traumatic things. That amplifies the operating environment they’re in beyond that which we all have to deal with on a daily basis.

“It’s an area that has needed attention for decades and it’s very pleasing that Fortem exists with a dedicated focus to address these issues. Fortem has come along at the right time and I think it can make a big impact.”

Bale says that every day more than 300,000 first responders are at work keeping communities safe. They are backed up by their families – partners, children and parents. All of them hold vital, challenging roles. “We help them

to be well, and stay well, through mental fitness support services and wellbeing activities.”

Fortem connects with first responder communities to have a positive impact on their overall wellbeing. “We support first responder families to improve and protect their mental fitness, we connect families to strengthen family bonds, we activate community and individual awareness and education, we collaborate with organisations to foster a collective effort to improve wellbeing, and we deliver evidence-informed, community-based health and wellbeing support programs specifically designed to address the unique challenges faced by the first responder community.”

These programs are delivered virtually as well as in person. A team of psychologists works in person, by phone and online to help first responder families, assessing and triaging needs. The specialists also run group programs on mental fitness designed for first responder families.

Ashton says a significant first step for Fortem is to provide independent clinical support to agencies and the workers within those agencies. “Sometimes there is not the trust between the employee and the employer in relation to mental health so that they’ll seek support or treatment. But they may be attracted to an independent agency.”

Another vital role for Fortem is in raising awareness and acceptance of mental ill-health.

“In the first responder world, the culture has long been that you are the person who is expected to cope. So when things become difficult, you are not culturally encouraged to speak up.”

Ashton says that in the first responder community, that stigma is alive and well.

“It’s a stigma in terms of their workmates, in the workplace. It’s a stigma in the community, and some of them think it’s a stigma within their family as well.”

“Fortem can work on its own and also with other organisations to address that stigma issue in our sector so that we can get people more willing to seek support earlier for difficulties they may be encountering.”

Police work can be extremely stressful, as is working in fire or ambulance or in rescue services, says Ashton. “You’re often dealing with people at the most vulnerable time in their lives. You are trying to bring some sense of normality and order and progress to the issue that they are suddenly trying to deal with.”

Someone involved in a car accident resulting in death or injury will remember that for the rest of their life, he says.

A police officer attends that event and then they go to the next one, and the next one. They do that as a matter of course, but it can have a cumulative effect. The stress builds up and it can be challenging in terms of maintaining good mental health.

“My own experience is of having been a first responder and then being in charge of first responders as a senior police officer, and also in having some lived experience in relation to good mental health,” Ashton says.

“I suffered a period of burnout in 2017 and I was very public about that. I’ve got lived experience. I’ve been managed and I’ve taken a strong interest in managing and leading employees who had difficult times in their own mental health and more broadly for members of families.”

Fortem’s initial focus has been helping the recovery of personnel and families from the Black Summer bushfires.

“It’s good that Fortem has both a clinical and a wellbeing focus,” says Ashton. “It’s able to provide on-the-ground clinical support, which is locals helping locals, and it’s very much also about ensuring that it can look after wellbeing and do the proactive work as part of that.

“As a new agency, we’ll also learn a lot from this work that we’ll be able to apply in the years to come.” ●



NEW CAMPAIGN URGES ACTION AS BUSHFIRE SEASON OFFICIALLY BEGINS

Survivors of last summer's horrific NSW bushfires are sharing their experiences in a new public awareness campaign launched on 1 October 2020.

NSW Rural Fire Service

NSW Rural Fire Service Commissioner Rob Rogers and Fire and Rescue NSW Commissioner Paul Baxter have officially launched the \$2m 'How fireproof is your plan?' campaign at the start of the 2020/21 Bush Fire Danger Period (BFDP).

The campaign has been developed by the NSW Rural Fire Service (RFS), featuring people who lost their homes last season telling their experiences so that others can learn ahead of this season.

Minister for Police and Emergency Services David Elliott said that while this year will not be as extreme as last year, with plenty of grass around after a wet winter, people still need to be very

careful when using fire and observe the rules around total fire ban days.

"The rain has brought with it fire danger conditions with increased pasture growth. As the grass dries out, there's a very real potential for fires, particularly across western NSW and later in the season," Mr Elliott said.

NSW RFS Commissioner Rob Rogers encouraged residents to make and discuss their bushfire survival plan.

"Our new public awareness campaign this year features personal accounts from people who lost their homes in last year's devastating bushfires. People need to understand the risk and prepare for it – and do it now. You can never be too prepared," he said.



“By taking the simple steps you can prepare your property – for example, removing flammable materials from their yards, clearing leaves from gutters, checking hoses can reach all around the house.

“The single most important thing every family can do is have that five-minute conversation about important decisions like when to leave and what to take if a fire threatens your home. You can check how fireproof your bushfire plan is in just five minutes at www.myfireplan.com.au,” Mr Rogers added.

Last season, with 26 people killed and more than 2,000 homes destroyed across NSW, there were many stories which emerged which show the importance of being ready.

One such story featured in a heartbreaking TV advert is that of Jim Hughes, who lost his home at Catalina near Batemans Bay on New Year’s Eve. Jim is a local school bus driver who had just completed renovations on his house where he lived with his daughter Raeden when the fire struck. Jim reflects on how he wished he had done more to get ready.

Fire and Rescue NSW Commissioner Paul Baxter said it was important to never leave a fire unattended.

“If a fire does escape, it is essential to call Triple Zero (000) immediately so that emergency services can respond accordingly and minimise the damage,” he said.

Commissioner Baxter also urged people to consider the risk of bushfires

when traveling around the State.

“As we move into summer and the holiday period, and especially given the travel restrictions with COVID-19, many people will be visiting bushfire-prone areas. While they might not typically live in an at-risk area, it’s important they have a plan for the area they are visiting,” he added.

During the BFDPA anyone wishing to light a fire for pile burning or hazard reduction will require a permit, which is free to obtain from your local Fire Control Centre. On days of Total Fire Ban all fire permits are automatically revoked.

To check the Fire Danger Ratings for your area visit www.rfs.nsw.gov.au or contact your local Fire Control Centre. ●



ROYAL COMMISSION REPORT FINALISED

The report is published on the Royal Commission's website.

The Royal Commission into National Natural Disaster Arrangements has published its report, which makes 80 recommendations to improve Australia's national natural disaster arrangements and make our nation safer.

Commission Chair, Air Chief Marshal Mark Binskin AC (Retd) said there was an important role for all levels of government in relation to managing natural disasters.

'While state and territory governments have primary responsibility, and accountability, for emergency management, we have concluded that Australia needs a national approach to natural disasters. This calls for the Australian Government to play a greater role than it currently does.

'Effective national coordination will be a critical capability in managing natural disasters on a national scale or with national consequences. Arrangements need to be clear, robust and accountable.

Over 35 days of hearings, the Chair and fellow Commissioners, Dr Annabelle Bennett AC SC and Professor Andrew Macintosh, heard from more than 270 witnesses, including:

- individuals directly affected by natural disasters;
- current and former representatives of state and territory fire and emergency management agencies;
- experts in a broad range of fields – for example, climate science, fire prediction, and the health impacts of bushfire smoke;
- representatives of charities, industry peak bodies, and consumer groups; and
- senior officials from the Australian, state, territory and local governments.

'We have taken a principled approach that entrusts the implementation of our recommendations to the respective stakeholders. This approach ensures those who are best placed to effect improvements can do so.

'There are lessons for all of us arising from our inquiry. Governments, essential services providers, insurers, charities, communities and individuals should consider what steps they must take across all phases of natural disasters to improve national natural disaster arrangements.

'Progress on implementing our recommendations should be monitored, transparent and communicated nationally. Australian, state and territory governments need to commit to action and cooperate, and hold each other to account.' ●

FIRST NATIONS PEOPLE AND FIRES KEEP TRADITIONS ALIVE TOGETHER

CFA Media

Traditional Owners, firefighters, vegetation management officers and other stakeholders have come together to preserve culturally and ecologically important traditions in West Wimmera.

The Western Victorian Woodlands three-year project is a partnership between Barengi Gadjin Land Council, CFA, Forest Fire Management Victoria, Trust for Nature, Greening Australia, Bank Australia, and Wimmera Catchment Management Authority, which provided a \$25,000 grant to fund it.

The project culminated in a traditional burn led by the Wotjobaluk Nation at Minimay in West Wimmera in July this year.

As Australia celebrated the history, culture and achievements of Aboriginal and Torres Strait Islander peoples as part of NAIDOC Week (8-15 November 2020), CFA Acting Chief Officer Gary Cook said the project was a perfect symbol for how we can work together to learn from one another.

"We recognise that First Nations people have occupied and cared for our continent for over 65,000 years and we have a lot to learn from their culture," he said.

Supporting cultural burns is part of CFA's Koori Inclusion Action Plan, and CFA works with Indigenous communities across Victoria to promote and conduct the practice.

"By better looking after the landscape together, we can also improve bushfire safety," Acting Chief Officer Cook said.

While fire agencies conduct planned burns for fuel reduction purposes, traditional burning uses 'cool burning' with minimal flame height that clears excess fuel, eradicates introduced species and allows native flora and fauna to return.

The burn was made possible by Bank Australia purchasing a 598-hectare block of land featuring culturally significant trees to establish a conservation reserve.

CFA West Region vegetation



Traditional Owners, firefighters, vegetation management officers and other stakeholders have come together to preserve culturally and ecologically important traditions in West Wimmera.



Traditional Owners Damien Skurrie and Peter Haridene led the Minimay burn.

management officer Ian Morrison visited Cape York in 2015 to learn more about cultural burning and return the practice to Victoria's south and west where important knowledge and experience has been lost.

"It's so important for the Indigenous culture to continue on, and a good opportunity for us all to work together to learn about their history and how we can re-introduce traditional burning. This is only the start of the journey," Mr Morrison said.

Traditional Owner and Parks Victoria Ranger Damien Skurrie, who led the Minimay burn along with fellow Traditional Owner Peter Haridene, said:

"We deem ourselves as fire practitioners. We're very much in the learning journey to understanding the implementation of fire management in landscape and I feel the time's right for us as Traditional Owners to start influencing our use of fires in landscape.

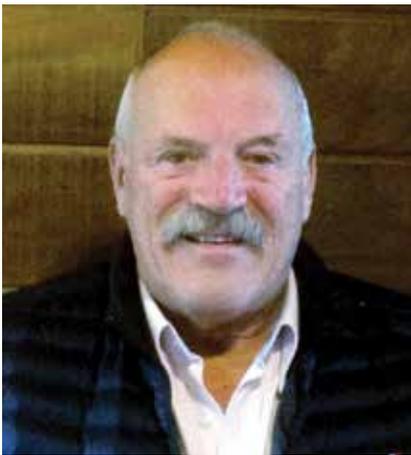
"We're starting to build a platform now that we can go out as a group and manage country, in fact it's customary lore and we see it as our responsibility to care for country.

"Trying to change people's perception of fire – when you use it correctly at the right time of year, it's not scary, it's something we use to help manage the landscape." ●

MEET THE AIES NATIONAL BOARD

All state divisions are represented on the AIES National Board.
Meet Grant (Vic), Chris (ACT) and Doug (Vic).

For a full bio visit aies.net.au



GRANT COULTMAN-SMITH OAM, VA, BJ, JP, MEmergMgt, BSocSc, DipBus, FBIA, MAIES

Grant Coulman-Smith was born in Hobart in 1949 and joined the CMF (Army Reserve) on his 17th Birthday while still in high school.

In 1968, he joined the Australian Regular Army and served in Malaysia and Vietnam as an infantryman.

For just over a decade, Grant served as a professional soldier before joining Victoria Police in 1979.

Grant retired as a Sergeant in 2009 having given 30 years of service to the police force while also serving in the Army Reserve as a Company Sergeant Major.

He was the Deputy Chair of the Victoria Police Blue Ribbon Foundation and passionate about furthering the aims and ideals of the Foundation.

Grant is currently President of the

AIES Victorian Division and a National Director.

He is a presenter with the Vietnam Veterans' Education Team, immediate past President of the Beaumaris RSL and current member of Mentone RSL.

A trauma counsellor for veterans and emergency responders, Grant is also a Justice of the Peace and Bail Justice (after hours Magistrate).

His work has been acknowledged with many awards included the Order of Australia (2016) and the Victoria Police Valour Award (1984).

He is also the recipient of a Fellow of the Bravery Institute of Australia.

In retirement, Grant is enjoying pastimes such as writing, travelling, reading and fishing.



CHRIS MILLER MAIES

Chris Miller is a consultant working in emergency business continuity and management.

Before setting up her practice, B4Crisis, she began her career in emergency management as a Queensland Police Cadet working on response during the 1974 Brisbane Floods.

She continued her policing career for nearly 17 years, serving in the Brisbane Traffic Branch for seven years where she completed her Bachelor of Arts. Soon after commencing her Master's studies, Chris was transferred to the Commissioner's Office to work on a number of projects.

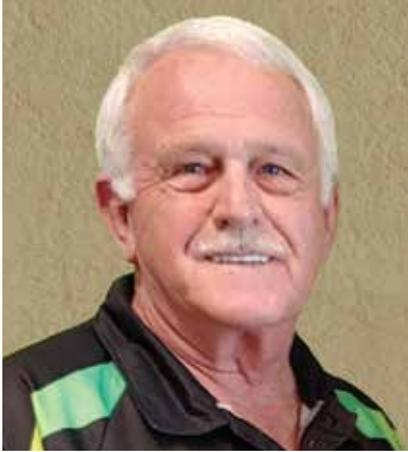
Chris left policing to become Queensland's first woman Workplace Health and Safety Inspector.

In August 1990, she moved to Canberra working with ACT and the Commonwealth Attorney-General's departments on community safety and counter-terrorism.

Chris has received two Australia Day Achievement Medallions for crime prevention, community safety and tsunami recovery and a Secretary's Certificate for pandemic business continuity planning.

She helped establish the Australian Women in Security Network (AWSN) and remains one of AWSN's Canberra Chapter Co-Leads.

Chris has been Member of the Australian Institute of Emergency Services since 1990 and the AIES ACT Vice President since 2015.



DOUG CAULFIELD, OAM, MIAEM, FAIES, Adv Dip Public Safety (EM)

Doug Caulfield has been involved in human resource and emergency management in Victoria for 30 years.

He was the Regional Emergency Management Coordinator for the Department of Health and Human Services in Gippsland and is experienced in operational, theoretical and training aspects of emergency management practices.

In 2010, Doug received the Medal of the Order of Australia for service to the Gippsland community.

In parallel to his civilian career, Doug served more than 40 years in the Australian Defence Force as a reservist, having attained the rank of Lieutenant Colonel. He was awarded the Reserve Force Decoration and a First and Second Clasp to that award.

In 2011 he was awarded the National Emergency Medal for work in the Victorian bushfires of 2009.

Recently Doug received a Regional Commendation from Victoria Police for his work in training Victoria Police members in various aspects of emergency management across the region.

Doug is practiced and experienced in the design and delivery of emergency management.

He has presented papers at the Australian & New Zealand Disaster and Emergency Management conference many times and his work has been published in this Journal.

In 2019 he was admitted as a Fellow of the AIES and is an independent director on the International Association of Emergency Managers Board.





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POOR SLEEP: THE BIGGEST ROBBER OF ALL

Dr Anne-Maree Cole

B.D.Sc MScMed (Sleep Medicine)

Is snoring disrupting more than your partner's peace and quiet?

Do you wake feeling refreshed every morning?

Are you feeling more stressed and tired than you used to?

Any of these signs and many more, could be indicative of compromised breathing while you are asleep. This is known as sleep-disordered breathing or obstructive sleep apnoea (OSA). Good quality sleep is the foundation of all health. Without it your health and wellbeing and enjoyment of life will eventually suffer. Sleep is now recognised as one of the three pillars of health, alongside diet and exercise.

WHAT IS SLEEP?

Scientists used to think that sleep was simply a switching off of consciousness from the world, but it is actually when the brain and the body get on with the daily maintenance of keeping you well. Without good quality restorative sleep, your health and wellbeing will start to suffer. It can creep up insidiously. You may not even notice the changes, or you may conclude that you are just stressed or getting older. Then again, you may be so used to feeling subpar that you think it's normal.

WHAT IS SLEEP-DISORDERED BREATHING OR SLEEP APNOEA?

Sleep apnoea occurs when a person's airway closes during sleep. When we go to sleep, the normal muscle tone that keeps us upright and functioning during the day switches off and gravity takes over. Some people have airways prone to collapse during sleep due to poor jaw development, a large tongue, bad posture, or weight gain. These people have a higher risk of suffering from sleep apnoea.

Sometimes airway collapse, partial or complete, can occur more than 40 times an hour. If it happens more than five times an hour, it is indicative of sleep apnoea.

As you can imagine, not being able to breathe is extremely stressful to the body. Blood pressure and heart rate see-saw throughout the night. The brain gets roused out of the deeper, restorative sleep, and sleep turns into a battle of survival rather than rest and recovery. This can markedly affect how you feel during your waking hours. Sleep should be a time for calming the heart and blood vessels, but untreated sleep apnoea causes cardiovascular stress all night.

CONSEQUENCES OF POOR SLEEP

Sleep apnoea doesn't simply mean you're tired and you snore. It is implicated in a great number of medical conditions plaguing society, including:

- High blood pressure
- High cholesterol
- Heart disease
- Diabetes
- Cancer
- Headaches
- Depression
- Tiredness and sleepiness
- Difficulty concentrating
- Loss of enjoyment of life
- Weight gain/difficulty losing weight
- Gastric reflux
- Frequent night time urination and bed-wetting among children
- Erectile dysfunction and loss of libido
- Glaucoma and macular degeneration
- Alzheimer's disease and dementia
- ADHD and autism
- Chronic pain.

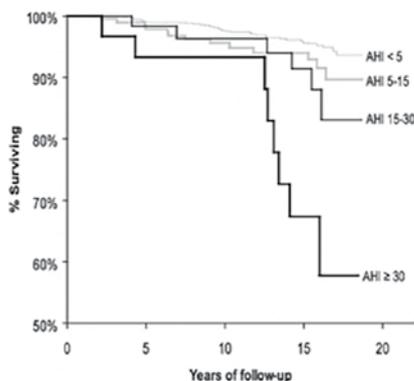
Untreated sleep apnoea has significant health consequences. The most serious damage is to the heart and blood vessels.





There are many forms of compromised breathing while you sleep. The most common one is snoring. Snoring is a sign of loaded breathing – difficulty getting the air from the outside, into your lungs. Snoring can occur alone (known as primary snoring) or as a sign of obstructive sleep apnoea.

Even primary snoring is detrimental to your health and has been shown to lead to obstructive plaques developing in the carotid arteries in the neck. Snoring can also have very serious consequences during pregnancy leading to premature birth and life threatening pre-eclampsia in the mother. Snoring in children is never normal and needs immediate attention. If you hear snoring in either an adult or a child, the air is struggling to get into the lungs. It is not normal and it is not healthy but the good news is it can be treated. Your dentist with special training in treating sleep breathing disorders is a good place to start.



SLEEP, Vol 31, No. 8, 2008

- People with sleep apnoea are at high risk of sudden death from heart attack or stroke.
- Severe sleep apnoea increases your risk of death from any cause 3.8 times. Sleep apnoea is a proven cause of high blood pressure.

The chance of premature death over a 16-to-18 year period worsens with sleep apnoea. This is demonstrated in the chart above.¹ The study found that people with severe sleep apnoea had a much higher risk of dying of any cause than people with no sleep apnoea:

- No sleep apnoea: 5% death rate
- Mild sleep apnoea: 10% death rate
- Moderate sleep apnoea: 15% death rate
- Severe sleep apnoea: 42% death rate

PERVASIVENESS

Even if one can't personally relate to these symptoms, police encounter the consequences of them every day. In fact the police force may be unique in this pervasiveness into all facets of life. From personal health and wellbeing, to enjoyment and quality of life, to the quality of family and workplace relationships. Most people are subject to those challenges but very few encounter the unpredictable, life-affecting incidents thrust into the working life of police.

PREVALENCE

A study undertaken in 1993 demonstrated that 9 per cent of women and 24% of men had enough airway collapses every hour of sleep to be diagnosed with obstructive sleep apnoea,² a sleep-breathing disorder. A more recent 2015 study found that number had increased to 83% of men and 60% of women between the ages of 40 and 70.³ Of these, 50 per cent of the men and almost 25% of the women fell into the more significant moderate to severe OSA categories.

How many times should one's airway collapse during sleep? In reality, none, however less than 5 is considered normal. It isn't normal, it's just that the health consequences of less than 5 are usually less impactful. On the other hand, how many airway collapses does it take for someone to die from it? Only one – the one they didn't wake up from.

OBSTRUCTIVE SLEEP APNOEA (OSA)

Snoring can also be a sign of obstructive sleep apnoea, although you can have sleep apnoea and not snore. For people with OSA, their airway is completely or partially collapsing repeatedly while they are asleep. This stops the exchange of oxygen and carbon dioxide leading to oxygen depletion and carbon dioxide accumulation, both of which have very serious immediate and long-term health consequences. Essentially people with OSA are suffocating in their sleep.

To recover from the collapse, the brain has to partially rouse, disrupting the restorative function of sleep and this process is repeated anywhere from five to 100 times every hour, all night long, every night, while they sleep. No wonder people with OSA usually do not wake feeling refreshed! Blood pressure and heart rates surge up and down in response to these collapses. No wonder OSA can lead to high blood pressure.

If you suffer from any of the above conditions or symptoms, obstructive sleep apnoea should be ruled out. Diagnosis is determined by a sleep physician and by undergoing a sleep study, known as a PSG (polysomnogram). This study is usually

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done overnight in a sleep centre but may also be available to be done in your own bed at home, if necessary. If you suspect that you have sleep apnoea, a referral to the sleep physician via your GP can be arranged. If you doubt that you have sleep apnoea, a sleep screening, which is done in your own bed and may be available through your dentist with advanced training in treating sleep breathing disorders, may be possible as a first step. The purpose of the sleep screening would be to rule out sleep apnoea or identify you as being at possible risk to having sleep apnoea.

The sleep screening and/or the PSG will quantify the number of times your airway collapsed every hour while you are asleep. It calculates the total number of collapses then divides it between the number of hours of sleep to come up with the apnoea-hypnoea index – AHI. The perfect AHI number is 0, however less than 5 is considered normal. With an AHI >5, a sleep breathing disorder is likely. If it is >30, this is considered severe sleep apnoea and your health risk is likely to already be compromised. An AHI between 5 to 15, and 15 to 30 is demarcated as mild and moderate sleep apnoea, respectively.

The terms mild and moderate can infer a lesser need to act upon the diagnosis however the opposite is true. An AHI >5 means that you already have sleep apnoea. The good news is that the lower the score, the more chance there is that the problem can be managed successfully to significantly decrease your risk to developing the serious health consequences that accompany having severe sleep apnoea. It also means that more treatment options are open to you.

UPPER AIRWAY RESISTANCE SYNDROME AND INSOMNIA

Another group of people can be highly symptomatic of having poor sleep but when you test them for sleep apnoea, their AHI comes back <5 and their sleep study comes back 'normal'. Common symptoms include:

- Significant tiredness yet difficulty falling to sleep or staying asleep (insomnia)
- Headaches
- Chronic pain

- TMJ pain and temporo-mandibular disorder (TMD)
- Difficulty concentrating
- Irritability
- Brain fog
- Highly stressed and feeling on edge
- Depression
- Previous diagnoses of
 - Fibromyalgia
 - Irritable bowel syndrome
 - Chronic fatigue
 - Migraine syndrome
 - Tension headache syndrome.

More subtle signs of physiologic stress during sleep can be detected in the sleep screening or PSG and may leave clues, along with the symptoms that UARS is a possible cause. Your dentist with advanced training in the physiologic approach to treating sleep breathing disorders may be able to provide assistance in the management of possible UARS and substantially eliminate these symptoms.

In UARS, the sympathetic nervous system (the stress mechanism of the body) is on such high alert that it does not permit the collapse of the airway when it detects that the airway is under threat. Instead, it causes the partial arousal from sleep before the airway collapses, hence significantly fragmenting the restorative function of sleep. This leaves sufferers highly symptomatic (and miserable) yet without an obvious organic cause of their disability. Left untreated, patients with UARS suffer needlessly and often lose hope of ever feeling normal again.

TREATMENT OPTIONS

The CPAP machine has been the primary treatment for sleep apnoea since 1981. It was invented by Australian doctor and researcher Professor Colin Sullivan from Sydney. It has saved and improved the quality of many thousands of lives around the world.

It is the first line of care for severe sleep apnoea and for patients with serious health issues, and is a very effective treatment. Some people have difficulty adjusting to and managing the CPAP. In these instances, a dental sleep appliance is much better than no treatment at all.

Sleep breathing disorders are endemic in society and the sleep fragmentation they cause has serious health consequences, yet they are both

largely under-diagnosed and under-treated. At least 80 per cent of people with sleep apnoea are unaware of it. Sleep-disordered breathing affects men, women and children, the young, middle-aged and elderly. The only way to be sure is to be tested and if it comes back positive, effective treatment options are available.

The treatment needs to be tailored to the individual, and needs to be well tolerated and comfortable. One of the many possible options and one with excellent comfort and compliance (continuous nightly use) and treatment outcomes is a custom-made dental sleep appliance to support your jaw and airway. Speak to your dentist with advanced training in the physiologic approach to treating sleep breathing disorders to see if this option may be suitable for you.

SCREENING QUESTIONS

- Do you snore?
- Does your snoring bother others?
- Has anyone told you that you stop breathing during your sleep?
- Do you often feel tired, fatigued, or sleepy during daytime?
- Do you wake and not feel refreshed?
- Do you fall asleep as soon as your head hits the pillow?
- Do you have trouble getting to sleep or staying asleep?
- Do you get up to use the bathroom during the night?
- Do you frequently fall asleep in front of the television?
- Do you have or are you being treated for high blood pressure or diabetes or high cholesterol?
- Have you ever had angina, a heart attack or stroke?
- Do you have or are you being treated for depression?
- Do you have gastric reflux?
- Do you ever wake with a headache?
- Does your jaw click or did it in the past?
- Do you get neck pain?
- Have you been told that you grind your teeth?

IN CONCLUSION

Unfortunately people are going to continue to fall asleep while driving, overreact to incidents and perpetrate violent acts, make poor decisions and mix drugs and alcohol. Nothing less than a huge national awareness campaign on



the importance of great quality sleep will make an indent into this carnage, leaving police to mop up the all too often, tragic outcomes. The aftermath, sadly, is inherent in the nature of the job.

What you do have moderate control over, though, is your own health and wellbeing, your family and work relationships, the quality of your executive functioning, decision-making and coping abilities. Sleep apnoea robs you of both the quality and quantity of

your life. And seeing as we only have one life to live, and that we spend one-third of that asleep, optimising the quality of that sleep should be a high priority. Restorative sleep ranks on an equal par for good health with diet and exercise. In fact, good quality sleep is the foundation of all health.

Optimum sleep can restore and enhance your personal daily outcomes. And, in case you have any doubt, you are worth it! ●

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This is written with gratitude and respect for the importance and dedication of our Australian Police Force by Dr Anne-Maree Cole B.D.Sc MScMed (Sleep Medicine)

Anne-Maree Cole, BDS, MScMed

Graduated from the University of Queensland, Australia, with honours in dentistry in 1982. In 2014, she completed a master's degree in sleep medicine from the University of Sydney. Her practice in Brisbane, Australia, is limited to the treatment of patients with craniofacial pain, TMD, obstructive sleep apnoea and sleep-disordered breathing, and the prevention and treatment of these problems through various techniques including arch development and orthopaedic orthodontics using a balanced physiologic approach. Dr Cole lectures nationally and internationally on sleep-disordered breathing, TMD and jaw development orthodontics. The dentists at James Street Dentists are qualified in treating sleep breathing disorders and can take care of all your dental needs.

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JAPAN EARTHQUAKE AND TSUNAMI 2011

– A TALE OF TWO SCHOOLS

Hasmukh Chand

Reprinted from The Volunteer Magazine with courtesy of the NSW SESVA

On March 11th, 2011 at 14:46, an earthquake occurred off the east coast of Japan. At magnitude 9, it is one of the most powerful earthquakes ever recorded. The shaking lasted roughly six minutes. Twenty minutes later, a powerful tsunami made landfall. In some areas, the tsunami washed almost 10 kilometres inland. With peak wave heights of between 10 and 14 metres, the tsunami repeatedly inundated communities causing wide-spread destruction and loss of life. According to the United States Geological Survey, the earthquake was so powerful that it shifted the main island of Japan – Honshu – roughly 2.4 metres east of its original position.

The human cost of the disaster was truly tragic. Eighteen-and-a-half-thousand people were killed as a result of the earthquake and tsunami. A vast majority of the deaths (up to 90 per cent) were due to drowning. Further, 50 per cent of those who died were over the age of 65. To this day, 3,000 people are still reported as missing. The March 11th disaster has been labelled the 'world's costliest disaster' by the World Bank (the estimated cost to the Japanese economy was over US\$200 billion).

Japan is often referred to as the 'most prepared' country in the world when it comes to natural disasters. Despite this, the human, economic and social cost of the March 11th disaster was incredibly high. As such, examining this case study may provide vital insights in regards to future natural disaster management for emergency service agencies, staff and volunteers. Of particular interest is the planning and preparedness framework that has become common in natural disaster management.

This case study will seek to firstly explore the general framework of



Tsunami waves breaching the sea-walls on March 11th. Japan has invested heavily in sea-walls to protect its coastal communities. The sea-walls are built to an average height of 10m. Once the sea-walls were breached, it slowed the water from draining back out to sea. Image credit; Mainichi Shimbun. Reproduced from War News Update, 2011.

planning and preparedness in Japan. It will then focus on two Japanese schools – Okawa Elementary School and Kamaishi East Junior High School – and their response to the March 11th disaster. Finally, this case study seeks to examine and compare both the 'knowledge oriented' and 'attitude oriented' approaches to planning and preparedness and community engagement in the disaster risk reduction space.

A HIGHLY PREPARED COUNTRY AND SOCIETY

Located on the junction of three major tectonic plates – the Eurasian, the Pacific and the Philippines, Japan has a long history of large and frequent natural disasters such as earthquakes, tsunamis, landslides, cyclones and volcanic eruptions. Due to the exposure to such hazards, planning and preparedness has become second-nature in Japan. For example, since 1960, September 1st has been designated National Disaster Prevention Day in memory of the Great Kanto earthquake which occurred in

1923. On September 1st, everyone, from the Prime Minister, to business, teachers, students, emergency agencies and local communities, is encouraged to plan, prepare, update emergency manuals and practise evacuation drills.

Natural disaster planning and preparedness is also embedded in the Japanese school curriculum from kindergarten through to high school and teachers practise evacuation drills frequently with their students. Japanese schools need to have robust planning and preparedness measures in place as 90 per cent of schools in Japan are designated evacuation centres for students, teachers, parents and members of the local community. It is often said that one of the safest places to be during a natural disaster is a Japanese school. Of the 18,500 people who died on March 11th, 351 were school-aged children (a large number of them died because they were not at school that day).

The Japanese government and local authorities have also invested heavily in infrastructure to protect vulnerable





The tsunami was so powerful that it washed debris up to 10 km inshore. At places, the peak wave was as high as a two-storey building. Here, the tsunami deposited a ferry on top of a building. Image credit; Asahi Shimbun. Reproduced from The Sunday Times (2012). <https://www.thetimes.co.uk/article/million-victims-from-next-tsunami-japan-disaster-experts-warn-gc3tx7vpw8s>



Okawa Elementary School that was devastated by the tsunami. Note the hill immediately behind the school where the children could have easily evacuated to for safety. It would have taken the group less than five minutes to climb to the top of the hill. Image credit; Carsten Knoche. Reproduced from Flickr 2011. <https://www.flickr.com/photos/carstenknoche/5876774520/in/photostream/>

communities. New buildings, like those in Tokyo and Kyoto, are built to strict earthquake and fire codes. Additionally, a network of sea walls (with an average height of 10 metres) have been built to protect coastal communities against tsunamis. The largest sea wall was built across the channel in the port city of Kamaishi. This sea wall measured 1.4 kilometres in length (made in two sections, 660m and 770m in length) and stood in water 63 metres deep. It took three decades to complete at an estimated cost of £1.1 billion.

Underpinning this high level of preparedness is a very sophisticated detection network that operates across Japan. This network has a large number of State-owned seismic devices (for detecting earthquakes and volcanic eruptions) that are supplemented by devices that are privately owned by businesses. The privately owned devices help to overcome any 'blind spots' in the network. They also provide businesses with advance warnings to allow for shut-down protocols to be initiated as early as possible. This helps to minimise

damage and protect staff and members of the public. The Shinkansen (bullet train), for example, can be automatically slowed down in the event of large-scale earthquakes.

Further, a series of tidal gauges have been deployed off the coast of Japan to provide warnings against approaching tsunamis round out the natural disaster surveillance network. Both the State and private devices feed information to the Japanese Meteorological Agency (JMA) which is responsible for issuing alerts, warnings and evacuation orders when seismic activity (above a certain threshold) is detected. Due to Japan's high level of geological activity, the computer algorithms used by the JMA need to be accurate and fast enough to mitigate against false warnings.

In the event of a natural disaster, there are a number of different ways in which the authorities can issue alerts, warnings and evacuation orders to at-risk communities. The JMA can send notifications within 60 seconds of a confirmed event such as an earthquake directly to special computers in schools

and community centres. Warnings are also broadcast over loudspeakers which have been installed in public spaces such as tall buildings, parks and beaches. In many areas, volunteers and local officials have access to cars mounted with loudspeakers to help broadcast warnings. Complementing the loudspeakers are SMS push notifications that JMA can send to every phone within an at-risk area. Further, the national broadcaster NHK, as well as other media agencies, are required by law, under the *Meteorological Services Act* (1952), to issue alerts and warnings to their audience. Many of the television and radio broadcasts are done in multiple languages to ensure that as many people as possible receive these warnings.

A TALE OF TWO SCHOOLS OKAWA ELEMENTARY SCHOOL

When the earthquake occurred at 14:46, students at Okawa Elementary School (OES) were getting ready to finish for the day. As soon as the shaking started, the teachers activated their emergency training and ushered the students under their desks. However, routine rapidly gave way to panic and then terror as soon as the students and teachers realised that this earthquake was different. The shaking lasted longer than normal and seemed to gain strength the longer the earth shook.

When the shaking finally stopped, the teachers escorted the students out onto the school grounds as per their training. It is far safer to be outside after an earthquake in case of aftershocks. On March 11th, aftershocks were recorded at 14:51, 14:54, 14:55, 14:58, 15:03, 15:06 and 15:12. While outside, the students were lined up and their names checked off by their respective teachers as per the emergency protocols.

At 14:49, the JMA issued the first tsunami warnings for the north eastern coast of Japan, including the prefecture where OES is located. "Super-tsunami imminent; Evacuate! Evacuate!" could be heard broadcast throughout the local area over the loudspeakers (both from buildings and vehicles). The next part of the story has been pieced together from interviews with students, teachers, parents and locals months and years after the

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March 11th disaster; specifically, what happened in the time (approximately 51 minutes) between the students and teachers evacuating to the school grounds and the tsunami reaching the school.

Evidence suggests that as the students and teachers stood out in the open, the teachers started to consult their school manual, referred to as The Education Plan, on next steps. The Education Plan is a national template that is provided to all schools across Japan and is adapted to the local context and regularly updated. Among other things, The Education Plan acts as the emergency manual for schools and sets out appropriate protocols for steps to follow during a natural disaster. The OES manual stated:

“Primary evacuation place; school grounds. Secondary evacuation place in case of tsunami; vacant land near school or park etc”

While the teachers consulted and debated the vague instructions for ‘secondary evacuation’ in The Education Plan, a few students got scared and ran up the hill immediately behind their school to get to higher ground. Years of evacuation drills and the knowledge of natural disasters had taught the students that a tsunami was highly likely after a powerful earthquake. This had been confirmed by the warnings broadcast through the loudspeakers and by the parents and locals who had converged at the school to seek shelter and collect their children.

However, the runaway students were asked to return to the main group by their teachers who then returned to their debate. Several other factors made it incredibly difficult for the teachers to decide the next best steps. Some believed that the school was safe as it was far enough from the coast to be out of the reach of the tsunami. Local hazard maps did not help with the decision-making process. The maps showed that the school was located in a safe area. Others pointed to the fact that there had been an earthquake two days prior – a magnitude 7.2 – and that there had been no large-scale tsunami. They also argued that the hill immediately behind the school may be too dangerous for the students to climb in the snowy dark conditions. This was despite the fact that



This photo was taken on March 11th. It shows students from Kamaishi assisting younger students as well as adults to evacuate to higher ground after deciding that the aged care facility (initial evacuation site) was not safe enough. Image credit; Unknown 2011. Reproduced from Katada (date unknown). https://www.jst.go.jp/ristex/en/e_example/example.html

the students had climbed the hill many times before to forage in the pine groves as part of their regular classes.

The decision-making process and the chain of command was further complicated by the members of the local community. Community elders, mostly older men, pointed out that historically, a tsunami had never reached the location where OES was located. Their involvement reflected an undercurrent of cultural norms where the concerns of parents who had arrived to collect their kids, predominantly mothers who had heard the warnings on the car radio, were ignored by the older men.

Eventually, the decision was made to evacuate. However, it was in the wrong direction. Instead of evacuating up the hill behind the school and away from the tsunami (a climb that would have taken less than five minutes to complete), the group headed towards a car park located next to the Kitakami River. By now, the tsunami had surged up the river, gaining speed as the river funnelled the rushing mass of water. Sadly, by the time the teachers and students realised their mistake, it was too late. They were swallowed by the raging tsunami.

Seventy-four students and ten teachers perished that day (there were 78 students and 11 teachers at school that day), largely due to a vague evacuation manual, the time that was wasted in decision-making, a messy chain of command and trust in local hazard maps. The tragedy at OES stands in stark contrast to the ‘miracle’ of Kamaishi East Junior High School (KEJHS).

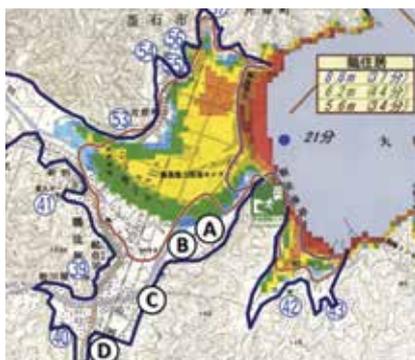
THE MIRACLE OF KAMAISHI

Just like the students at OES, the students and teachers at KEJHS sheltered under their desks during the earthquake. When the shaking stopped, the students and teachers began to assemble outside. By now, the JMA had started to issue its tsunami warnings through the different channels. As the warning was being broadcast at KEJHS, the school’s loudspeakers failed due to a power outage. Regardless, the students at KEJHS evacuated themselves as they had practised as part of their planning and preparedness measures. The difference was that the teachers did not stop to consult their Education Plan.

As the high school students evacuated to higher ground, they encouraged everyone around them to do the same. Across the road, teachers and students at Unosumai Elementary School (UES), who had initially taken shelter on the third floor to escape the tsunami, also evacuated with the high school students. The designated evacuation site was an aged care facility up the hill from both schools.

When the evacuees reached the aged care facility, the high school students noticed that the site was not safe. The tsunami could be seen surging up the hill towards them and the earthquake had caused a landslide near the evacuation site (which was at risk from further aftershocks). Based on their safety assessment, the high school students encouraged everyone to evacuate once more to another location. Along the way, the older students





Hazard map of the port city of Kamaishi. A = Kamaishi East Junior High School, B = Unosumai Elementary School, C = first evacuation site, D = second evacuation site. Circled blue numbers = designated evacuation sites. Red line = extent of inundation by last tsunami. Blue line = extent of inundation on March 11th. Image credit; unknown. Reproduced from Katada and Kanai, 2016.

assisted people from the aged care facility and a nursery school to reach the new, safer location.

Further, many of the school-aged children who were not at school on March 11th also managed to save themselves and their family members. Of the 3,000 school-aged children in Kamaishi that day, only five died. Many people believe that University Professor Toshitaka Katada was responsible for laying the foundation for this 'miracle'. Through his research, Professor Katada has found that when it came to disaster response, many people were relying more and more on local and State agencies, rather than on trusting their own judgement. Further, he found that children were more likely to evacuate during natural disasters if an adult member of the family was present and willing to evacuate.

Professor Katada's work has led him to believe that the long-standing 'knowledge oriented' approach to natural disaster planning and preparedness, such as increased community information about local hazards and hazard maps, might actually be unhelpful. He argues that while these resources serve as good engagement tools, they may also be underpinned by a set of assumptions that is eventually proved false and could thus be detrimental to the community. He argues that there needs to be a shift towards an 'attitude oriented' approach to disaster planning and preparedness. This attitude oriented shift is based on three principles (as championed by the Professor):

1. Do not trust the experts, evacuation maps or warnings
2. Adapt to the situation
3. Take initiative.

KEJHS and UES are both located roughly 1 kilometre from Otsuchi Bay. Kamaishi and Otsuchi Bay were both protected by the world's largest sea wall. Further, hazard maps available at the time indicated that both schools were beyond the reach of a tsunami. Had the students trusted the hazard map and the biggest sea wall in the world, they would most likely have perished on March 11th. The sea wall failed as soon as the first tsunami wave struck it and the hazard map that had been prepared by local authorities was based on the Meiji Sanriku tsunami which occurred in 1896.

Rather, the students trusted their own instincts, evacuated to a safe area outside of their school and encouraged members of their own community to head to as high ground as possible. Inspired by the actions of the students of KEJHS, schools across Japan have started to adopt more of an 'attitude oriented' approach to disaster planning and preparedness.

CONCLUSION

Japan is one of the most geologically active countries in the world. Earthquakes, tsunamis, volcanic eruptions, landslides and cyclones are all part of the nation's identity and are ingrained into its culture. As such, Japan is considered the most 'prepared country and society' in the world. However, despite the high level of community vigilance towards natural disasters, the human and economic cost of the March 11th disaster was staggering. Two days prior to March 11th a magnitude 7.2 earthquake occurred off the east coast of Japan and caused minor disruption to local communities. On that day, the students of Okawa Elementary School activated their emergency plan and returned to class when it was safe to do so. The 7.2 earthquake did not cause a large-scale tsunami and communities along the coast remained safe behind their 10-metre high sea walls.

The March 11th disaster resulted in a re-examination of the high level of planning and preparedness that has been adopted throughout Japan. On that day, 90 per cent of the sea walls failed (they had been designed based

on the 1896 Meiji Sanriku tsunami) and so did much of the early warning systems as power went out and buildings collapsed. Communication channels such as SMS push notification systems became flooded with people calling and texting loved ones immediately after the large earthquake. This delayed updated safety information from being relayed by authorities to affected communities. In some instances, people simply did not believe that a tsunami would follow as there was no past history of tsunami where they and generations of their family members had lived. Further, despite having the most sophisticated detection devices in the world, the JMA was also criticised for issuing incorrect tsunami warnings (the waves were higher than JMA predictions) which added to the false sense of security.

March 11th also calls into question the 'knowledge oriented' approach to planning and preparedness that is common among emergency service agencies. As this case study shows, access to a high level of information, a very sophisticated detection and early warning network and repeated evacuation drills failed to protect the lives of the students at Okawa Elementary School. By contrast, the students from Kamaishi East Junior High School not only survived, but also saved the lives of people around them. Largely, this was because they were taught to disregard warnings, maps and manuals and to simply trust their instincts. Simply put, instinct or an 'attitude oriented' approach to natural disasters saved their lives and the lives of those around them. This so-called Kamaishi miracle is now inspiring schools and local agencies in Japan to adopt new approaches to their emergency protocols to help prepare for the next big event. ●

I would like to thank Philip Huynh, Peter Foster, Julie Powell and Isabel Cornes for their help in proof-reading this submission. I hope that it inspires discussions within Units about planning, preparedness and community engagement. If you have any comments or feedback, feel free to email me here: hasmukh.chand@member.ses.nsw.gov.au

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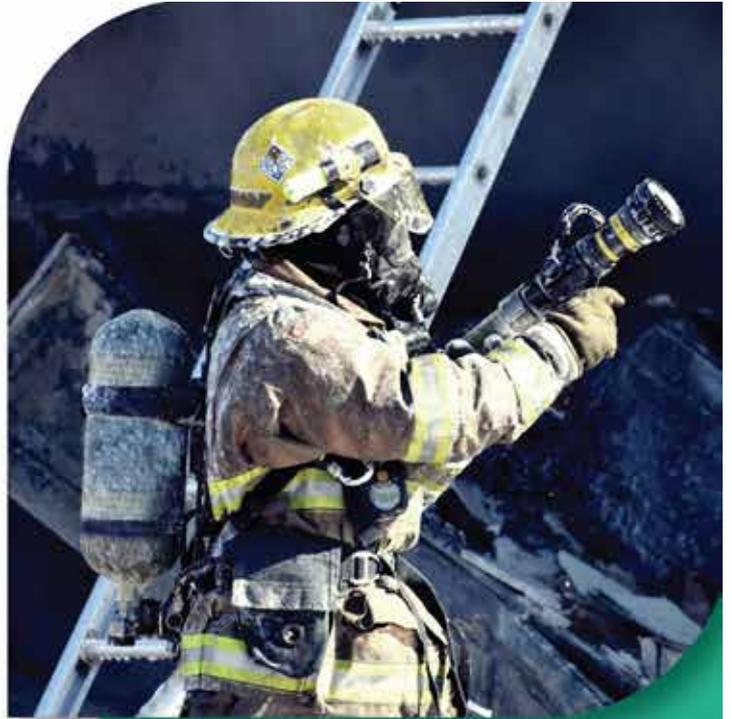
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