



Psychological reaction in members of medicine rescue team for Wenchuan earthquake in 2008 and its management

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Received 11 February 2010; accepted 25 March 2010

Abstract

This paper reviews the rescue experience of our medical rescue team during the relief of Wenchuan earthquake in 2008 in Sichuan province, China, and analyzes the psychological reaction of team members. Based on the rescuers' distinctive psychological reaction in different phases of the rescue operation, we aims to propose measures for administration of the team in order to better fulfill the rescue duties and provide references for future medical service in non-war operations such as an earthquake relief.

Keywords: Earthquake relief; Medical service; Psychological reaction; Managerial strategies

1. Introduction

On the next day after May 12th Wenchuan earthquake in 2008 in Sichuan province, China, our hospital selected 65 members to establish a relief team; and at 2 p.m. on May 14th 2008, carrying the whole set of medical equipment, our team was sent to Shifang City, Sichuan province by a helicopter. At the end of the rescue mission (July 21st), no team member was injured

or killed in our group. When facing a sudden disaster, the medical team members were under enormous psychological pressure, which may lead to a variety of physiological and psychological reactions. We summarized the psychological responses of medical teams in different stages, and we also analyzed the organizing and managing measures of the team for the field medical staff, hoping to provide useful references for future medical support in non-war operations.

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2. Rescue operation

Our team set up a field medical center after we had arrived at our area of mission. Till 4 p.m. July 19th, 2008, we treated 13,733 patients (including 1,738 soldiers), performed 38 major operations, and hospitalized 271 patients. A total of 591 batches of rescuers (3,832 person-times) were sent to the 8 most devastated towns and 32 villages of Shifang City. And the medical relief covered a total of 12,276 km² and treated a total of 31,152 earthquake victims. Meanwhile, we also provided medical service to 2,200 officers and soldiers, printed 13,000 health handbooks, and held health-related lecture for 1,200 soldiers. Totally we provided 20 kinds of medicines worth of 470,000 RMB.

3. Psychological reactions in three rescuing phases[1]

The medical relief operation could be roughly divided into three phases according to the change of cases with external injuries or wound disease. The first phase: from the beginning of the earthquake to the seventh day after earthquake; the second phase: from the eighth day to the thirtieth day after earthquake; the third phase: a month after the earthquake. We mainly focused on the emergent rescue in villages and at the victims' homes in the first phase, on epidemic prevention in the second phase, and the third stage was to provide medical support for the army. The psychological reactions of the medical team members

in these phases are distinctive.

3.1. The first phase

3.1.1. Sense of responsibility

Sense of responsibility was the instinctive psychological reaction after our rescue team landed on the struck area. When the rescuers realized the severity of the devastation, they were all willing to work in the most dangerous areas, and some even wrote volunteering letters with their own blood to the command department to show their determination.

3.1.2. Sense of shock

Collapsed houses, dead bodies and severely injured victims could be seen everywhere, which greatly shocked the rescuers. The rescuers were moved to tears when they were watching the live show of the most strong-minded boy ever in Sichuan.

3.1.3. Sense of guilty

Due to transportation limitations, we were not able to rush to the heavily devastated areas in the first time even though we tried to get there by helicopter, thus we missed the best rescuing time. After we arrived at our task area, we found some victims had already died due to delayed rescue. Meanwhile, the medical team arrived earlier was not very professional, which caused cases of medical malpractice. A sense of guilty rose in our team members, which made us greatly dismayed and

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