

through the project's training courses; (2.) the ASEAN I-EMT coordination platforms have been set up to the extent that the progress of developing the toolkits such as the Standard Operating Procedures for the Coordination of EMT in ASEAN is at its eighty percent, while the Database of the EMT and their Minimum Requirements and Qualifications are now at its ninety percent; and (3.) Standard reporting forms (medical record and health need assessment form) for all ASEAN member state (AMS) has been developed and fully completed.

Discussion: The ARCH Project has been facilitating the strengthening of the ASEAN disaster health management through its capacity building endeavors and the creation of collaborative mechanisms for operations and coordination. These activities should be maintained either under the existing or newly created mechanisms in order to build a sustainable collaborative framework.

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Introduction: Collaboration between Foreign Medical Teams (FMT) and Host Health Personnel (HHP) is a core standard for healthcare in a medical response to disaster,¹ but descriptions of its application from recipient nation HHP are rare. This paper details the findings from a qualitative study on the experience of collaboration between International Foreign Teams (IMT) and HHP in Gorkha, Nepal since the 2015 earthquake.

Aim: To present findings from a study that explored the experience of collaboration by Nepal health workers working with IMT since the 2015 earthquake.

Methods: A qualitative study design using semi-structured interviews regarding the experiences and perspectives on collaboration of 12 Nepali health workers was used. The interviews were transcribed, translated, and collated using Nvivo software by QSR international, and themes regarding collaboration were identified.

Results: Data collection is not yet complete. However, preliminary results from early analysis indicate that collaborative practice is not uniformly applied by IMT. HHP Satisfaction with IMT appears highly dependent on collaboration. Emerging themes are that rigid organizational procedures, language and cultural barriers, and intimidating leadership inhibit collaboration. Objectives were assumed to align immediately post-disaster, with evidence of objectives increasingly diverging over time. IMT leadership that was experienced, responsive to suggestions, and regularly involved HHP in planning, implementing, and reviewing activities were highly appreciated.

Discussion: Emerging themes indicate the time-critical nature of many disasters, along with cultural/institutional/administrative barriers, make the building of collaborative relationships difficult despite being foundational for successful missions. Participants in IMT must proactively involve HHP in the objectives setting, planning, implementation, and reviewing of activities. Successful IMT participation is not only clinically competent but actively seeks collaborative relationships with HHP throughout the mission.

References

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