## DAVID'S STORY

We first heard of the Tsunami on the afternoon of the 26th December while travelling to Sydney to see Phe (my sister-in law) and her husband Sandy off to Sri Lanka the next day. Friends Bruce and Laura were already in the air and Robbie, my wife, was leaving on the 2nd of January. It was an anxious 12 hours as frantic phone calls were made backwards and forwards to Colombo to Sandy's nephew Thamby to see, firstly, if family and friends were okay and secondly, should they go?

In the end the availability of accommodation in Colombo, Sandy's desire to see his family and Phe's belief that as a Registered Nurse she could be of assistance helped them make the decision to go. Back here, like everyone else, we watched helplessly as the trickle of information turned into an avalanche of tales of awesome destruction. I went to my partners who readily agreed to cover me in what was a particularly busy period here in Kiama in January.

Robbie and I converted her tourist bags into first-aid kits with the generous help of people like Bobbie East (who does regular trips to New Guinea as a theatre nurse) and Gerry McInerney, the local pharmacist, as well as staff from Shellharbour and Wollongong Hospitals.

New Year's Eve was spent sorting donated aid and despite the airline's generous allowance of 40kg each, we still ended up with a 4 wheel drive full of medicines and equipment which luckily a Sri Lankan friend in Sydney was able to get airlifted to Colombo.

I learned that Phe, Bruce and Dr Sandy Gale from Tasmania (who had been injured in the Tsunami) volunteered with the Sri Lankan Red Cross and in a car commandeered from Thamby and a van loaded with medication driven by an interpreter set off down the south-west coast through Galle and Matara, as one of the first SLRC assessment teams. Speaking with Phe on her return to Colombo brought home to us the tragedy and horror of those early days in more personal terms.

Laura, Pat and Sandy and later Robbie when she arrived, made day trips to camps in nearby Negombo and Kalutara, assisting with first aid and bringing essential items they bought from nearby markets including soap, toothbrushes, toothpaste, sanitary napkins, underwear, sleeping mats and toys for the children - purchases made possible by the very generous donations from friends of Bruce and Laura's in Sydney and ours in Kiama.

The Government, international NGO's and local NGO's had been very quick to provide, where needed, tents, food, water and sanitation but in the early days, it was mainly individuals who provided these other essential items.

When I arrived on the 4th, Thamby, as a board member of Apollo Hospital, took me to meet the Director of Clinical Services, Dr Rana Mellta. The hospital had been sending out teams of doctors and medicines at regular intervals to camps all over the island in a co-ordinated effort with other medical groups. Unfortunately for me the next camp was to a Muslim village in the east coast area of Ampara and was for women doctors only. As my first camp was not to be until the next Sunday, Robbie and

I joined the others in a trip to the northeast port of Trincomallee.

This involved travelling through the heart of the cultural triangle along what is laughingly called "highway A6". Uncertain of the availability of accommodation in Trincomallee we stopped at a hotel resort at Habarana. There we discovered that although the Tsunami had only physically damaged the coastal areas, its impact was countrywide. All the staff at the hotel had lost relatives, friends and property and the hotel was almost empty in what was the peak period.

The next day, after again shopping at the markets for similar previously purchased items, as well as cooking utensils, mosquito nets and coils and shovels (items we had been told were in short supply in the camps) we set off for the coast.

The port itself seemed relatively spared but the surrounding villages were devastated! We visited Nilaveli to see rubble strewn across fields over 300 metres from the demolished structures of which it had been part. We then visited a whole village of 1200 people who had been transported 3 km inland. The Village Headman told us that 80 had definitely died and 40 were missing from the 1200 – they were mainly children and the elderly. He and other volunteers would go from tent to tent (which had been donated by the Chinese) to see what the refugees did or didn't have and would issue vouchers to be redeemed at the storage facility where they kept all the clinical aid. This ensured a fair and equal distribution of aid and was the blueprint for donated aid distribution in all the camps we visited. What struck us most was how grateful the refugees were for the little that we brought and how even more touched they were by our concern for their plight.

We then travelled south, stopping at the new International Cricket Stadium at Dhambulla (where the Aussies played). The car park had been turned into a tent city awaiting more refugees from the east. This ten-hour trip was made more bearable by the spectacular scenery and countryside as we passed through the beautiful city of Kandy and the Nurawa Eliya high country.

We again stayed at a town short of the coast at Uda Oya and the next day after a regulation market stop we visited the devastation in Hambantota. From the double decker bus lying 400 metres in the inland lagoon, to the Market Place where on that busy morning more that 90% of the market-goers perished, it was a sobering experience.

The camp we visited was in a school and as school was due to re-open, most of the displaced persons had been farmed out to friends and relatives, so of an original 500-600 in the school less than 50 remained. But again the locally appointed volunteer in charge of the store and its contents distribution explained how all the displaced persons received the benefit of the aid we and others brought in, for which we had to sign and get a receipt.

Our trip back to Colombo was made memorable by the appearance of a large wild bull elephant which we tentatively photographed without a flash, not willing to trust the flimsy electric fence separating our road from the Uda Walawe National Park.

Preparing for one of the medical camps I attended we assembled 13 doctors from Apollo, 5

foreigners, four high school students acting as interpreters for those that didn't speak Tamil or Sinnhalese, 1 pharmacist, 2 pharmacist assistants and a child psychologist (Lisa who specialised in working with traumatised children). We met outside the Apollo Hospital at 4.00 am and drove 4 hours south to a camp near Tangalle where we set up in a local hall.

We had our Doctor's bag (mine was a carry-on suitcase filled with medicines, dressings, a script pad and medical instruments (stethoscope, etc) and a chair. Two doctors shared a table. The patients waited up to 2 hours to see us; they had no privacy.

At our second camp that afternoon closer to Hambantota everything was happening at once-UNICEF had just been, another well known international NGO had just concluded a "fact finding" tour and a truck load of clothes had been dumped in the middle of the camp and gratefully ransacked by the Displaced Persons.

We had tables out in the open and the pharmacy set up under a tree. Generally speaking we saw both physical and psychological trauma from the tsunami, chronic conditions such as asthma, eczema and respiratory problems exacerbated by the tsunami and general chronic conditions like diabetics, hypertension etc where patients had lost everything, including their medication. It was challenging as often the medications we brought didn't exactly match the medication they were taking and we could only give five days to two weeks worth of medication. We were relying on the system organising another medical camp for these people within two weeks, as it would be many months before a regular service could resume.

We were transported there by a van owned by the Suriya Foundation, a local charity organization that particularly focuses on children in trauma. Medicines were supplied from a budget provided by Impact, a UK based charity/medical organization and the Apollo Hospital Ambulance that carried the goods and the pharmacist and assistants.

My interpreter Sarith was the high school son of one of the Apollo doctors. His maturity for his age, natural compassion and empathy for the patients reinforced my view of the Sri Lankan people, as did the patience, politeness and demeanour of the patients after all they had been through.

Our last camp that second afternoon was outside a Buddhist commune which ran until 9.30 pm as the monks had set up temporary lights in a fashion that made me think that electrocution was to be our next treatment.

The images I carry of those camps is of the patients we couldn't help. Like the middle aged woman half carrying, half dragging her elderly mother who had had a severe stroke 2 days before the Tsunami. With the hospital destroyed we couldn't offer her the physiotherapy, occupational therapy and other rehabilitation she needed; just "aspirin" to try and prevent a further stroke. Or the 14 year old girl for whom we were the fourth group of doctors she had seen that week with a simple problem - a tick lodged deep in her right ear. Without the correct instruments all we could offer was an introduction letter to the nearest operational hospital at Galle, over 100 km away.

That weekend we visited an orphanage which Sandy's sister Ruckmani had help set up the previous year. Ever mindful of the now pressing need for funds, we donated \$1000.00 towards the building of a new storey to take more orphans. It costs 80 rupiahs a day to keep an orphan there - one Australian dollar!

We also visited the Lasallian Community Education Service which had for over ten years been providing education and a trade for displaced persons from the civil war. They had a conference centre with a kitchen run by the apprentices and when the Tsunami devastated the low lying peripheral areas of Colombo they geared up to provide 1000 meals twice a day. This severely depleted their budget and we again made a donation to Brother Emanuel, the Director of the LCES.

In my last two days there I flew with Sandy to Jaffna to witness the devastation in the north. We visited a camp in Valvedittura, near Point Pedro, run by the TRO and in which the German Red Cross was running a camp very similar to the ones I had attended down south.

The Jaffna library was destroyed in the Civil War and, now rebuilt, stands like a beacon in this long suffering city that was once the heartland of education in Sri Lanka. It is hopefully a symbol of the co-operation that might now come out of this disaster, as both sides work to rebuild the whole of Sri Lanka.

What did our group get out of our journey? Well!

Bruce and Laura got Dengue, some Malaria and a touch of Giardia.

Sandy - the worst drug allergy reaction I've seen!

Phe needed some counselling for those early days down south and Robbie and I are insomniacs now- often found trawling the Sri Lankan web sites for the latest information.

But one thing we all share is a determination to be involved in the reconstruction of a village in the east. Why the east? Because the westernized, developed South and southwest will be rebuilt quickly but the isolated east, with its poor infrastructure from years of neglect due to the civil war, will be a much greater challenge.