An Organizational And Culturally Sensitive Approach To Managing Air-Traffic Disaster: The Gulf Air Incident

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The Gulf-Air incident that took place in 2000 in Manama, Bahrain supported the need for adopting innovative strategies to deal with the consequences of air disaster. Due to the nature of the incident, an ad-hoc team was formulated at the Cairo Airport and its major objective was to address the critical needs for the upkeep of the regular operations at the airport, as well as considering the cultural, religious and human needs of individuals, families and communities affected by the disaster. The ad-hoc emergency team was successful in applying immediate and flexible strategies that were effective in achieving the objectives of the emergency management plan. Contrary to the belief in the need to rely solely on the Command and Control Approach in disaster management, this study provides evidence of the effectiveness of emergency management strategies that are based on the Human Relations Approach.

Introduction

Incidents of airline crashes have been on the rise during the last 10 years and have become part of our daily lives (Denis, 1997; Osborn, 2002). Factors contributing to this type of disaster include the dramatic increases in air traveling (Donnelly, 2001; Learmount, 2002; Osborn, 2002); technological failures and pilot errors (Gouhua et aland, 2001; Knight, 2002; Nanaum, 2001; Wiegmann, and Shappell, 2001); gaps in safety and security measures (Bennett,
Air traffic disasters are characterized as sudden and highly unpredictable events with severe consequences in terms of losses for the community, especially in human lives, and in material and financial terms, and in the creation of an overwhelming state of chaos (Denis, 1997; Garner, 1996; Gibbs, Broska, and Ducher, 1996). This condition makes it difficult for emergency management respondents to deal with post-disaster consequences.

Following a plane crash, relatives and friends of the victims rush to the airport searching for news about the fate of loved ones. Lack of consistent information on names and number of casualties can trigger various forms and levels of emotional reaction including frustration, anger and desperation. The focus of emergency respondents is “to put new order into a chaos generated by both the impact itself and the demands imposed by responding to the event” (Denis, 1997, p. 293).

In dealing with such a condition, disaster managers are in need of innovative ideas to help maintain structure and stability of the situation at hand (Stuphen, and Waugh, 1998). This study discusses an air-traffic incident where creative administrative and cultural strategies were used to minimize posttraumatic effects caused by the event. A study question was formulated as, “What are the factors involved in a successful recovery of an air-disaster incident for which emergency officials had no prior knowledge or experience?”

The purpose of this study was to review an air disaster experience and the process of recovery that took place in the airport where the “disastrous plane” originated. A number of hypotheses were drawn based on existing disaster recovery models and were examined using a field research approach. These hypotheses are:

1. Response to air-disaster events using innovative strategies can be successful even if no specific plans to handle a particular situation are found.
2. Considering cultural factors in disaster management is necessary in order to maximize the outcomes of social intervention and to minimize confusion and extreme emotional responses.
3. Human relations can be considered as an important aspect in formulating effective disaster plans and in executing them.
4. Involving and managing community support and establishing quick and informal networks are valuable assets in air-disaster recovery.

Theoretical Framework

Because of the dramatic increase in air disaster incidents, the need for theoretical frameworks and models to help explain the nature, the magnitude and the complexity of such events has presented itself. Researchers and emergency managers are also looking for practice models that can be used to effectively handle disasters and post—disaster consequences. The basic challenge, however, is to realize the multidimensionality of any disaster and to consider all factors involved. For example, Denis (1997) identifies three aspects of disasters that are often interwoven. These are technological, structural, and cultural dimensions. In detail, Denis (1997) explains the meanings of each factor, “Technology can be reflected in such matters as equipment purchases and engineering expertise while organizational design (structure) involves management decisions about responsibilities, both at the organizational and metaorganizational levels” (p. 293-294). Finally, Denis asserts that, “Culture addresses more profound human issues such as perceptions, values and beliefs” (p. 294.)

The review of the literature has helped in identifying two major theoretical frameworks for disaster management. The Command and Control Approach (CCA) for disaster management is known for its ability to maintain standard operating procedures using a pre-established division of labor (Schneider, 1992). Advocates of this approach assume a total societal breakdown and the need for strong leadership. “Authorities see ad hoc or emergent behavior as counterproductive, and attempt to prevent it. Under (CCA), decision-making and communications become centralized” (Neal and Phillips, 1995, p. 327).

On the other hand, opponents of the (CCA) believe that innovative and less restrictive approaches do more to encourage the creative thinking process (Michael, Lurie, Russell and Unger, 1985). In a criticism of the (CCA) Dynes (1994) stated that such an approach assumes certain conditions to take place during a disaster including
social chaos, reduced capacity of individuals and organizations to cope or respond to the incident, a level of deep mistrust in the process of decision-making, and a weak view of civil society.

Supporting the assumption of the inadequacy of the (CCA), Comfort (1985) states:

“Even the most carefully devised emergency plan is unlikely to anticipate all of the requirements for action in any given disaster. Repeatedly, decision makers have acknowledged the shortcomings of their prepared plans, if they have them, in actual emergencies. More serious is the charge that rational planning, well-intentioned, but ill-conceived plans may actually inhibit the problem-solving process in the dynamic, uncertain conditions of disaster” (p. 348).

In disaster management, there is an emphasis on the need for flexibility and less structure in processes and procedures (Dynes, 1983; Banerjee, and Gillespie, 1994). Neal and Phillips, (1995) state, “In disaster, bureaucracies face challenges to business-as-usual. Also, no such creature as a perfect disaster plan or response is possible. Therefore, emergency managers should anticipate, plan for and include ad hoc configurations to improve emergency response” (p. 325).

The second major theoretical framework focuses on the human aspects of disaster management. Michael, et al., (1985) presented an intervention model that concentrates on rapid response to an “event”, natural disasters or potential social crises. The authors used the term “event” to indicate that an actual phenomenon may produce a variety of impacts, but it also would create a “community of sufferers.” Michael, et al., (1985) presented two types of events: Centripetal and Centrifugal. As the authors indicate, centripetal events affect the preexisting social system or institution from which the community of sufferers emerges. For this reason the authors believe that those sufferers may come from areas that were not affected by the actual event. Obviously, those events include different types of physical disruptions including train accidents, airplane crashes and large scale fires (Michael et al., 1985).
The significance of this approach is in its focus on the perceptions of humans and their interpretations of the disastrous event. The human approach seems to go beyond including the perceptions of humans during the planning stage to utilizing their views, opinions, and resources as part of the disaster management and recovery process. It is clearly stated that disasters can create new forms of human groupings on various levels and those can be of great importance if identified and utilized in a positive way. Michael et al., (1985) state, “At times, a congruence existed between more or less natural groupings, such as the family, social service organizations, or neighborhoods, at other times, largely in response to centrifugal events, a new community is created from the shared experience of survivors participating in the groups” (p. 249).

As part of the work on understanding disasters and identifying new ways of dealing with them, research has focused on integrating cultural aspects into disaster management (Quarantelli, 1985; Wenger, and Weller, 1973). This aspect is crucial in explaining how individuals and families view a disaster incident and how they would be willing to make critical decisions related to the recovery and mitigation process (Webb, Wachtendorf, and Eyre, 2000). For example, in Islamic societies, searching for the bodies of victims is important; however, quick and respectful burial of victims is expected. In the meantime, victims of disasters are considered, according to the Islamic teachings, as martyrs, since they were pursuing their life tasks or on their way to do so. Conducting peaceful life tasks is viewed as a means of worshiping God, hence dying during a state of worshiping makes the individual a martyr. Meanings and ideas of death have been influential in determining people’s views and perceptions and responses to disasters.

To understand the influence of religious belief on the way people respond to disaster, Muslims are expected to accept death with conviction based on the belief that people die due to their fate, which is decided by God; therefore accepting the death of a family member means accepting God’s will. On the contrary, acting in disbelief or extreme anguish is perceived as resisting God’s will and refusing one’s fate. This view, which is part of the Islamic instructions, helps families and relatives deal with grief in a rational way within the context of religious belief. Accordingly, in disaster management, recovery efforts
that take into consideration cultural and religious beliefs and are not in conflict with them, can facilitate the recovery processes.

It is important to understand that emergency management plans are developed within formal and informal organizations and are also influenced by general cultural domains and traditions of the society. Emergency management personnel, therefore, should integrate both cultural and religious views of survivors and their families into their plans. Aside from cultural domains, however, it is important to recognize cultural aspects as part of an organization’s philosophy and integrate that clearly within the emergency management processes.

As the need for incorporating cultural aspects in disaster management continued to develop, the term organizational culture was viewed as “a combination of traditions, collective values, frame of reference, and management styles of the individuals participating in disaster recovery efforts” (Pidgeon, Turner, Taft and Blockley, 1992, p. 296). In support of the recognition of cultural aspects as part of understanding disaster dynamics and process, Webb, Wachtendorf and Eyre, (2000) indicated, “Cultural representations of disaster play an essential role in transmitting knowledge between individuals, groups, and generations” (p. 7).

In essence, the perceptions, values and beliefs of disaster respondents do influence the way in which they prepare, respond and communicate as a means to reach recovery. This idea goes with the various aspects that motivate people within the community to provide help to survivors of disasters: “Once the physical and material needs of the survivors are addressed, the community provides social support, through church and civic groups (that is, the sphere of the “protective membrane”) (Michael. et al., 1985, p. 246).

In disaster management, utilizing existing resources in addition to the establishment of community networks can be used as assets for effective disaster response. These prospects include both material and social support available within the community. Webb, et al., (2000), believe that the disruption of routine functioning of the affected community tends to bring people together in their effort to collectively define the event and adapt to the new circumstances.

It is important to state that two major theoretical bases have been found in the disaster literature. The structural functioning perspective focuses on describing and explaining how social units such as
households, organizations, and communities prepare for respond to and recover from disasters (Drabek, 1986). On the other hand, the symbolic interaction perspective emphasizes the importance of symbols, actors’ definitions of the situation, and the emergence of new patterns of social interaction (Nigg, 1994). The same view was supported by Webb et al., (2000) as they state, “The influence of symbolic interactionism on disaster studies can be seen in the emphasis that scholars have placed on behavioral improvisation, organizational flexibility and adaptation, and structural emergence during the emergency period” (p. 11).

Considering the focus of this study, it seems that integrating the ideas presented in the symbolic interaction perspective in explaining the importance of cultural meanings in disaster makes a good logical linkage.

Methods Of Data Collection

This study examines the experience of officials in a Cairo airport who were faced with the news of the crash of a plane that originated from their airport during its attempt to land in Manama International Airport, Bahrain. The “Review of Event Technique” was used to collect the data for this study. This technique included: 1) review of documents and records of the minute by minute progress in the recovery operation; 2) six in-depth interpersonal interviews with members of the emergency management team (EMT), a representative of the Gulf Air Office at Cairo Airport, and the top official in the Cairo Airport Authority; 3) four interviews with relatives and friends was conducted to gather their perception and assessment of the recovery experience; and 4) a review of files containing articles of newspaper, letters from agencies and organizations that participated in the experience and from F&R s expressing their gratitude of the efforts presented by the EMT. These interviews and review of documents are considered, in this study, as both first and secondary sources of data of the recovery process.

The Gulf Air Incident

Around 9:30 a.m. on Wednesday 23rd of August, 2000, Gulf Air flight number 572 crashed three kilometers away during its attempts
to land in Manama Airport-Bahrain. The accident caused the death of the entire group of passengers and the crew—a total of 266 persons. The flight, which originated in Cairo Airport-Egypt, included 66 Egyptians and other nationalities. Following the announcement of the accident on the Egyptian national television, hundreds of relatives and friends rushed to the Cairo Airport searching for information about the accident. The crowd in front of the airport had grown bigger as relatives and friends arrived from other parts of the country, and was accompanied by extreme expressions of fear, sadness, and shock.

The airport authority was faced with an experience different from a common emergency situation, as it had no specific procedure to deal with the aftermath of air-traffic accidents that occur on foreign soils. Consequently, it became imperative for the airport authority to deal with the event because it developed rapidly, and important decisions had to be made to minimize the impact of the accident on the airport operation, on the relatives and friends and the public.

Due to the uniqueness of the situation, an emergency team was formulated under the direction of the chairman of Cairo Airport Authority. The team, which consisted of a number of the airport’s employees, included trained administrators, engineers, and a group of assistants from other units such as the public relations office and airport security department. The team managed to develop an emergency plan that included a number of specific objectives:

- To acquire information about the progress of the events, and appropriately feed the information to involved parties.
- To respond to relatives and friends’ requests and concerns.
- To create an atmosphere of calm, order and organization, in order to minimize the impact of the incident on the airport’s regular operation.
- To minimize the confusion, which might arise as a result of the growing tensions and complex network of interactions among parties, security departments and agencies.
- To reduce the tension caused by the eagerness of the media representatives to hunt for news that might cause disregard and disrespect for the relatives and friends’ feelings.
- To establish communication processes with important parties, such as Gulf Air and formal and informal organizations.
concerning the facilitation and implementation of the recovery process.

- To accommodate cultural and religious aspects relevant to the recovery process and become responsive and sensitive to the unique needs of responsible parties (based on personal discussion with the Chairman of the Board of the Cairo Airport Authority, January 9, 2001).

In order to achieve the presented objectives, the emergency team divided the plan into two separate parts: a) immediate reactions to the incident that had started after news of the accident was presented to the public; and b) arrangements and preparation for the arriving plane carrying the bodies of the victims.

**Immediate Reactions To The Air-Disaster Incident:**

Following the news about the accident, Cairo airport officials chose Horus Hall, located in terminal II as a private area for the relatives and friends of the victims in order to provide them with information on the status of the plane. Dealing with the emotions caused by the incident, EMT talked with relatives and friends regarding certain arrangements related to the recovery process. Another important task was to discuss with family members and help them select two persons from each family to fly to Bahrain to identify the victims and claim personal belongings and documents. These selected individuals were informed about available resources and a contact person from the EMT in order to facilitate the communication between them and the EMT.

The EMT opened another channel of communication with various organizations that stated their willingness to participate in the recovery efforts. Those organizations included the Red Crescent, the Ministry of Health, the Ministry of Interior, the Ministry of Social Affairs and Social Security, the Egyptian National Television and Radio stations and a number of community support groups.

As the story developed, officials of Gulf-Airline in Bahrain informed the EMT of their decision to send a plane from Bahrain to transport relatives and friends of victims to Manama. This development created specific tasks for the EMT of preparing relatives and friends for traveling, including the issuing of passports, obtaining visas and
preparing materials that are needed for identifying victims’ bodies, such as personal photos and copies of x-rays. The EMT requested the approval of Gulf-Air officials to include a group of professionals and specialists who would accompany relatives and friends in that flight to help facilitate the recovery process. The group consisted of 2 medical doctors, 4 nurses, 3 clergy members, 4 custom officers, 6 representatives from the media and 6 administrative assistants (The EMT Records, Cairo Airport Authority).

The EMT had to work expeditiously to collaborate with a number of agencies to organize the identified tasks that required the organization of meetings, press conferences, and the creation of a communication station. The government’s top officials organized a visit by the EMT to meet with relatives and friends at Horus Hall to deliver their condolences and solve any problem that the relatives and friends may present. Other important professionals were brought to Horus Hall to help relatives and friends during that critical time such as religious specialists, medical doctors, and counselors. A number of logistic services were made available to relatives and friends such as meals, telephone contact, money exchange, and means of communication with other relatives and friends who waited outside the airport (The EMT Records, Cairo Airport Authority).

Furthermore, the EMT arranged interviews for a small number of media representatives with relatives and friends and EMT members on a limited basis with the focus on preventing intensification of emotions causing emotional pressures for relatives and friends. The purpose of those interviews was to help the public learn about relatives and friends’ reactions to the incidents, as well as the process of recovery planned and implemented by the EMT.

On Thursday, August 24th around 11:52 a.m., Flight number 7051 (Boeing 767) arrived from Bahrain, and a total of 124 tickets were issued by Gulf-Air officials to family members, 2 tickets for each family. An additional 25 tickets were issued to the group of officials and specialists who were selected by the EMT to accompany relatives and friends to Bahrain and were also considered as part of the recovery process.

A number of duties and tasks were clearly delineated to the professionals who accompanied relatives and friends in their flight to Bahrain. Those tasks included the following: a) medical doctors
were asked to monitor the health of the passengers and issue burial permissions to victims when their identity was identified; b) clergy representatives were to provide guidance and encouragement to family, as well as to initiate the burial ceremonies; c) media representatives were given permission to cover the event and describe to the public the recovery efforts; and d) customs officers were authorized to finalize the visa entry to victims and the accompanying persons.

The boarding of the plane was organized by the EMT as relatives and friends moved from Horus Hall to the designated gate in a group of 10 with the guidance of an EMT assistant. This arrangement was intended to reduce the chance for other passengers to recognize them as relatives of the crashed plane, which may have triggered fear of flying or emotional distress. Following the departure of the plane to Manama, Bahrain, the EMT started working on the next phase of the recovery plan (The EMT Records, Cairo Airport Authority).

**The Arrival Of The Plane Carrying Victims And Relatives And Friends**

Considering the psychological effects of the accident, the EMT had anticipated a large crowd of people who would come to the airport to witness the arrival of the plane carrying the victims. Such anticipation was also built on the traditions in the Egyptian society of sharing feelings and providing social support to families who experience emotional distress because of a crisis. Due to the sensitive nature of the airport as a place, the EMT developed a plan to facilitate the process of the plane’s arrival and the downloading of the boxes carrying the victims’ bodies from the plane to be delivered to the responsible parties. The plan also focused on strict guidelines to control for any confusion and chaos, and to manage the transference of the victims’ coffins outside the airport to be taken by relatives and friends to the final destination.

The plane was expected to arrive on Friday, August 26th, as it was announced by the media, which had broadcasted televised coverage on the story from Bahrain. As part of the preparation for the plane arrival, the EMT decided to: a) identify the VIP Hall as the operation management center for facilitating the coming task; b) establish a secured waiting area (20 meters length by 10 meter width) to
accommodate families and relatives of victims who would attend to receive the boxes of victims and take them to different provinces for burial; c) select a designated area to serve as an emergency center to provide medical, psychological services for families and relatives waiting outside the airport and staff the center with needed equipment; and d) identify a park area for 65 marked ambulance cars for transferring boxes from the plane to final destinations.

Following the landing of the plane in a designated area inside the airport, the operation of delivering the boxes of victims had begun. The main focus of the operation was to download coffins and deliver them to families in a speedy manner. Two persons from the EMT boarded the plane and ambulance cars moved to the designated area in groups of ten. As the coffins started to be downloaded, officials of the EMT identified each coffin and informed the EMT members on the plane about the name of the victim and identified relatives and friends were asked to leave the plane. In the meanwhile, EMT in the management center contacted the driver of the ambulance chosen to carry the coffin to drive close to the plane in order to carry the box. As family members left the plane, officials from the government and the airport authority were standing at the end of the stairs and delivered their condolences to them. The operation of downloading the coffins and transferring them to outside the airport was successful as it took only 75 minutes to deliver 55 coffins in an organized manner (The EMT Records, Cairo Airport Authority).

Results And Findings

The Gulf-Air incident that occurred in 2000 caused the death of 266 passengers and crewmembers, 66 of whom held Egyptian nationality. Although Cairo Airport Authority has a plan for handling air traffic accidents, the uniqueness of the Gulf-Air incident had required the establishment of new strategies and procedures.

Evaluation Of The Emergency Management Operation

Although the EMT has managed to develop an overall plan to respond to the Gulf Air disaster, new tasks and activities were
included later in the plan during the implementation phase. Some specific criteria that facilitated the recovery process can be seen in the following:

The ad-hoc emergency management team was formulated to include members who have human relations backgrounds that facilitate the process of addressing emotional and social needs of the relatives and friends, as well as the maintenance of the regular operation of the airport.

Considering the complexity of needs, procedures and tasks that the team had to address, it was important for the team to engage in a division of labor. For example, each member of the team was assigned to one major task which was part of the overall recovery operation and a freedom to make the decisions to achieve these tasks was granted: a) communication with the Gulf Air officials in Cairo and in Manama as well as officials from the Manama Airport Authority; 2) interaction with relatives and friends of victims; 3) contact with the public including formal and informal organizations; 4) facilitation of collaborative processes within the number of agencies and offices that are part of Cairo Airport; 4) continuous communication with the Egyptian government to acquire official permission that facilitated the recovery operation; and 5) the communication with the airport security and the aviation office.

The ability to gain the trust of both the airport authority as well as officials of the Egyptian government was helpful to provide the team with the confidence needed to conduct the recovery operation and to act as an independent entity responsible for the recovery process.

The ability to work with information channeled to the team and create a technique of prioritizing each piece of information and respond to it in a timely manner.

These characteristics of the team were shown in the final analyses to be important since the EMT was able at the end of the operation to review the experience and identify lessons to be learned. For example, during the operation, the team leader decided to work with every member to monitor the progress of the tasks assigned and serve as a trouble-shooter. One member who was responsible for communication with the Gulf Air authority reported that as communication with the Bahraini authority started, he felt that his ability to make decisions was limited. These decisions required the
approval of the top official in the airport authority and the Egyptian government; “At this point I asked the team leader to take this task by himself and he understood my point, but he assigned me to a new task which we did not recognize at the beginning which was the communication with the media.” (Personal communication with G. Dia, EMT member, January 3, 2001)

Because the Gulf Air incident took place thousands of kilometers away from Cairo Airport, the focus on handling the specific needs of relatives and friends had to be considered. A number of guidelines were established by the EMT that focused on working with various agencies and organizations in order to proceed with the recovery process and to maintain the regular operation in the airport. From the beginning, the EMT members felt that they had to have total flexibility in order to manage the demands and tasks, and to be able to make critical decisions. Considering hypothesis 1, the EMT was an innovative emergency response to the Gulf-Air incident. The analyses of the records of the operations have shown that the team has adopted a flexible task-orientation methodology in order to achieve the intended goals and objectives.

The experience of the EMT was discussed later in a number of meetings, where members of the team and officials from the airport authority participated in providing their feedback on the Gulf-Air incidents. Comments made in those meetings highlighted important aspects related to the experience of the EMT. For example, EMT members viewed the pre-incident relationship among members of the team as an important factor in minimizing tensions and conflict. This goes to the formation aspect of the team members who had formal and informal daily interactions prior to their joining the team.

The existence of a social network among the departments within the airport boundaries was another aspect of the emergency management process. As the leader of the team explained:

“I guess we have been working together for years. During the crisis, it was very easy for me to call an administrator e.g., the head of the security office, and ask him to arrange a specific task for me, and I would hear him on the other side saying, “consider it done.”” (Personal communication with A. Saber, EMT leader, January 9, 2001).
Based on the observations and comments made by the team members, it can be stated that the team achieved levels of cohesiveness which facilitated the implementation of the recovery plan. The overall meaning of such experience helps in the understanding of team structure and function. Therefore, we can accept the premises of hypothesis 3 and relate the effectiveness of an ad-hoc emergency management team to the value of existing interaction and networking among members of the team prior to its formation. Finally, the presentation of the Gulf-Air incident and the utilization of an-ad-hoc emergency team can be understood within the context of community response.

Due to the nature of the accident, formal and informal agencies and organizations within the community were eager to participate in the disaster recovery process and were willing to provide support for relatives and friends. The EMT realized the importance of these efforts and the nature of resources that these organizations made available to the team. In this respect, the team worked closely with those organizations to identify and organize the services that could be used and then made the initial contacts with them. For example, many of those organizations expressed their readiness to provide ambulances and buses to carry the victims and their relatives and friends from the airport to their homes. The EMT made decisions about the ways to process the resources that were presented which were helpful in facilitating the implementation of the goals and objectives of the team. The focus on establishing and maintaining communications with the community can verify hypothesis 4 and it describes the process for effective collaboration between the emergency team and the community.

Normally, procedures for dealing with crisis are mandated and controlled by the emergency center, which is considered as part of the airport administrative structure. The need to formulate a new entity to handle the uniqueness of the Gulf-Air incident, however, has resulted in the adoption of this ad-hoc team that was different from the command and control management approach in terms of its structure and process. The EMT was built on the assumptions drawn from the human relations approach that varies from the bureaucratic approach as it has proven its ability to handle the complexity of the Gulf-Air incident. In this particular case and based on the review of
the file containing feedback from the public, participating agencies and relatives and friends, the EMT was able to achieve the goals and objectives in dealing with the social, psychological and cultural aspects related to the incident.

The difference in the application of the Human Relations Model and the Command and Control model was explained in a statement by a leader of the EMT:

While we were working hard and running all over the place trying to control the situation, an official from the national center for emergency management arrived. He asked us to find an office for him and furnish it with computers and telephone lines and channel all the information to him so he would be able to analyze the situation and give us the best alternative decisions that we can make. Obviously, we didn’t have the time to respond to his requests as we were working on so many issues some of which could not wait, so we decided to ignore him and he sat in an office for a while, then he left. (Personal communication with A. Saber, EMT leader, January 3, 2001).

Cultural Aspects Of The Disaster Recovery Operation

The Gulf-Air recovery operation has its unique features that mainly focused on acknowledging the values, traditions and religious beliefs of the relatives and friends and the public. This reflects the ability of the ad-hoc emergency team to understand these values and incorporate them within the emergency plan. It may be safe to say that the formation of the team included professionals with public relations background who understood such an issue. From the beginning, the actual translation of such an issue came in the form of allocating a private hall (Horus Hall) for the families and friends to provide them with the opportunity to grieve and enhance their abilities to make decisions regarding the recovery operation. Accordingly, the team had determined to inform the relatives and friends about the details and allowed them to participate in the recovery process. In Horus Hall, religious recitation of Koranic verses had helped relatives and friends deal with the emotional
aspects of the loss. This was helpful as one family member stated to decrease the intensity of emotions. The hall became a place to receive condolences from the government officials who were invited to pay their respects and support family members. A similar scenario was conducted for the relatives and friends who gathered outside the airport in a designated area that was erected to allow all the attendants to express their feelings within the acceptable religious context related to the acceptance of God’s will.

The EMT realized the needs of family members to travel to the accident site to identify the victims and gather their materials. The EMT was also aware of the need to integrate religious aspects concerning the traditions in the Islamic faith into the emergency plan, which can be seen in the focus of achieving speedy burial for victims. Accordingly, personnel accompanied families to Bahrain to work on initiating burial procedures and finalizing paperwork on the plane to help families receive the coffins carrying victims as soon as the plane arrived at Cairo Airport. It seems that hypothesis 2 was supported with regard to the actual realization of cultural aspects related to disaster recovery, which was a core function of the EMT in handling the aftermath of Gulf-Air incident.

Finally, perceptions of the public regarding the emergency operation were positive as it was reflected in letters, journal articles and verbal statements made by relatives and friends:

“From the beginning to the end we were treated with respect and full understanding of our needs and concerns. Everything was communicated to us and all the arrangements were made quietly. In our way to Manama, the religious members talked to us about our mission and how we should be strong to handle our responsibilities. We knew that everything was right from the moment we arrived to Manama Airport and found out that all the information was sent to them by the officials in Cairo Airport and we traveled to the location of the accident and visited the morgue to identify the bodies of our relatives. The only concerns some of us had was the way they put the bodies of mothers and children in one coffin, but the explanation was to make sure to
have every family together to prevent any mistakes in transferring the victims to their final destinations. When we arrived back to Cairo Airport, everything was planned and the downloading of bodies into the ambulances and the departure from the airport were conducted in a very organized way (Personal communication with H. A. F&R, January 15, 2001).

**Implications For The Field Of Emergency Management**

Circumstances surrounding the Gulf-Air accident in 2000 supported the importance of forming ad-hoc teams to deal with the consequences of air-disaster. Justification for the reliance on such a team rather than existing disaster response centers reflects the need for contemplating the nature of air-disasters and the human and cultural aspects related to the recovery process. Building on the human relations model, the EMT developed goals and objectives that address the nature of the incident and the circumstances associated with the aftermath of the disaster. Specific characteristics of the team appear in its structure and the process which was used to facilitate the accomplishment of tasks relevant to disaster recovery. This idea was obvious as the ad-hoc team had incorporated cultural and religious aspects within the context of the recovery process.

Implications of this study highlight the importance of the match between the nature of the disaster and the characteristics of the emergency team. For example, the reliance on a command and control model for disaster management may not be effective in dealing with the human and cultural aspects of the disaster. However, based on the findings of this study we may see a combination of both approaches (the Command and Control Approach, and the Human Relations Approach), especially when the airline incident happens in the airport and the need for recovery and investigation is conducted by experts and technicians while the human aspects are handled by human service professionals who are part of the team.

In general, this study provides evidence to support the ability of the ad-hoc emergency team to develop innovative strategies. These strategies are needed to address cultural and human elements of the disaster. Ad-hoc emergency teams can benefit from existing
relationships that the members have prior to the disaster and focuses on maintaining effective networks with community groups and formal and informal organizations.

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