Appendix G

Literature Review of Responses to Other Types of Crises

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The response to an accident that results in a fatality or injury is multiphased and multifaceted. It requires both an immediate crisis response that may involve multiple branches of law enforcement and emergency responders, as well as the media and public officials. This response must be followed up with more long-term community support for bereaved individuals. This second-phase response usually begins within hours of the accident, and may last for several months or years.

Immediate Crisis Response

In *Community Resilience as a Metaphor, Theory, Set of Capacities, and Strategy for Disaster Readiness*, Norris et al. (2008) discuss the factors that contribute to community resilience. They define resilience as “a process linking a set of adaptive capacities to a positive trajectory of functioning and adaptation after a disturbance.” Because resilience is a process instead of a stable state, communities that are not resilient can take measures to increase their resilience. Increasing resilience requires creativity and flexibility. A crisis is essentially “what happens when a surprise reveals a failure of the rules, norms, behaviors or infrastructure that is used to handle that type of surprise” (Norris et al. 2008), and thus response measures developed before a crisis may be entirely unhelpful once the crisis occurs. Communities must be ready to abandon inappropriate measures and react to the situation at hand. However, this does not mean that communities cannot take pre-disaster measures to increase their resilience. In fact, Norris et al. propose five steps that communities can take to enhance their ability to deal with crises.

1. *Communities must develop economic resources and reduce resource inequality.* According to conservation of resources theory, people strive to obtain, retain, protect, and foster resources. Distress ensues when resources are
lost or when people fail to gain resources after a significant investment. Because people must invest resources in order to protect their existing resources, this creates a sort of “rich get richer” situation in which those with more resources are more able to protect themselves. Because disasters affect the resource-poor more adversely than the resource-rich, reducing resource inequality will reduce the overall adverse effects that a disaster can have on a community. Similarly, in disaster situations, resources are sometimes distributed according to the rule of relative advantages instead of the rule of relative needs. Communities should develop methods to channel resources to those who need them most, because this can increase community resilience overall.

2. Local people must be engaged in the disaster mitigation process. Non-indigenous actors can play an important role in recovery by providing resources, but it is important that the affected community itself utilize these resources to implement change. By doing so, community members can alleviate the feeling of powerlessness that disasters often generate.

3. Preexisting organizational networks, relationships, and plans should be utilized in responding to disaster, although communities should not rely too heavily on plans and organizations developed before a disaster. The Marine Emergency Response plan developed by Monroe County is an example of an effective emergency response plan because it is detailed, yet allows for flexibility.

Monroe is a county in New York that borders Lake Ontario. In case of a Marine Emergency, potential responders include the US Coast Guard, the US Boarder Control, US Customs, the Monroe County Sheriff, land-based fire departments, EMS providers, a corporate fire department, the NYS Police, the City of Rochester Police Department, the NYS Park Police, the NYS Department of Environmental Conservation, and the Monroe County Parks Department. Because none of these agencies has the capacity to cope with a major marine emergency on their own, they must be able to coordinate quickly and efficiently when an emergency occurs. Monroe’s emergency plan (2008) eliminates confusion by pre-assigning roles and responsibilities to different agencies. Most of these positions and responsibilities are outlined in Appendix A. At the same time, the plan retains flexibility because it allows actors to assume multiple and different roles as the situation requires. This prevents the entire system from being undermined if one organization is unable to respond to the incident. For example, although the Coast Guard should ideally assume command of the Water Branch, the report directs the first commander to do so until the Coast Guard’s arrival, which allows the operation to proceed if the Coast Guard is delayed.

4. Interventions are needed that protect naturally occurring social supports, including social networks. Social networks, which will be discussed in more depth in the next section, often provide a large amount of support immediately after a disaster, but the support given and the networks themselves may dwindle with time. Norris et al. argue that naturally occurring social supports are important because they allow members of the affected
5. **Communities must be prepared to react to the unknown.** Disasters almost always cause confusion and uncertainty. It is thus important for communities to build trusted channels of communication for the distribution of information. It is furthermore important that they react to new information and adjust their strategies to the situation. Norris et al. promote a problem-solving approach over a command-and-control strategy as the most effective framework for disaster response.

### Long-Term Support and Response

The immediate crisis response is focused on stabilizing the crisis situation, taking action to save lives, and rebuilding the community. However, it does not address in depth the trauma experienced by those who witness or who are affected by an accident. More detail on social, emotional, and psychological support is provided by bereavement literature. Bereavement literature differentiates between the experience of children and adults, as well as between people who had different relationships with the deceased, such as coworkers or family members. These different groups of people may require different forms of support or intervention.

In general, the bereaved receive social support both from their social network and from professionals. The social network can be one of the most important forms of support, but can also be unhelpful and even detrimental if members of the social network do not act sensitively. Most people in the social network do not have personal experience with the death of a loved one or training on how to interact with the bereaved. They may give well-meaning advice that lacks empathy or respect, or make inconsiderate, thoughtless, and even cruel comments regarding the deceased or the grieving process (Dyregrov and Dyregrov 2008). In one study, Lehman et al. (1986) found that bereaved individuals find 80 percent of the statements intended to help them to be hurtful or unhelpful. Interestingly, the majority of hurtful and unhelpful support strategies came from close members of their support network, such as family (54 percent) and friends (17 percent). Lehman et al. propose that this may be because individuals who are close to the bereaved have a vested interest in seeing the bereaved return to normal and resuming normal relationships with them. They may thus become frustrated with the length of the bereaved’s grieving process, or apparent resistance to help (Lehman et al. 1986). The strategies identified as most unhelpful were giving advice, encouragement of recovery, minimization of loss or forced cheerfulness, and identification with feelings of loss.

On the other hand, the same group of bereaved individuals identified several strategies that were almost unfailingly helpful, which included contact with people who had gone through a similar situation, expressions of concern from the support network, having the opportunity to vent their feelings,
involvement in social activities, and being with other people (Lehman et al. 1986).

In Effective Grief and Bereavement Support: The Role of Family, Friends, Colleagues, Schools and Support Professionals, Dyregov and Dyregov (2008) propose several support strategies that are similar or the same as those identified by Lehman et al. (1986). For example, they note that the most effective means of support are generally emotional support, conversation, and practical assistance. Giving emotional support can be as simple as baking a cake, sending a card or flowers, or verbally expressing love and support for the bereaved. Members of the social network should demonstrate calmness, patience and empathy when giving emotional support. It is important for network members to continue to give emotional support to the bereaved over time. It is common for the bereaved to receive an immediate outpouring of emotional support that eventually dwindles. Although conversation can be one of the most important forms of emotional support, it may not be appropriate at first. However, when the bereaved are ready, it is important for them to be able to verbalize their thoughts and memories about their loved ones, or their thoughts about death. At first, it may be helpful for members of the social network to simply listen to the bereaved. Later, they can engage in meaningful conversation. Finally, practical assistance is highly valued by the bereaved, who often lack the energy to complete routine tasks, like cooking, or contacting public officials or other organizations to request information or services.

The bereaved also appreciate efforts of those in their social networks to bring them back to normal life by calling them, taking them to social events, and encouraging them to go back to work. They add that it is not sufficient to tell a bereaved person, “If you need anything, just say the word.” Many bereaved people find that they do not have enough energy to take the initiative to reestablish social relationships. They may not be able to interact with their friends and family in the way that they previously did. Instead of waiting for the bereaved to reach out, those in a support network must be attentive to the needs of the bereaved. They should, however, refrain from making assumptions about what they need. For example, it is common for those in the social network of a bereaved person to try to protect that person from any memories or thoughts of the deceased by avoiding the subject. In reality, the bereaved often want to talk about the deceased, and would prefer if they were mentioned when it is natural to do so.

On the other hand, Dyregov and Dyregov concur with Lehman et al. that advice is the trickiest form of support to provide. If the bereaved are not close to those who give them advice, they may interpret the advice as a form of meddling in their lives. Furthermore, even when advice comes from close members of their social network, it can be detrimental because it changes relationships of equality to ones that lack reciprocity. Advice is judged by the bereaved based not only on its objective value, but also on its timing and
on who it comes from. Advice is best received when it comes from those who are professionally trained to deal with loss or from those who have gone through a similar situation. It is also better received if given when the bereaved request it.

Finally, the bereaved can also receive support from other bereaved individuals. Peer support is not plagued by the problems that sometimes occur with social network support because the bereaved generally don’t suffer from discomfort around another person’s grieving. With their peers, the bereaved don’t feel like they have to hide their true feelings, which allows them to cry or express sadness without fearing that they are making others uncomfortable, but also allows them to laugh and be happy without fearing that it will be perceived as inappropriate. While peer support is in some ways more natural than social network support, it is not without difficulties. For example, ideal peers, including family members or other members of the community who were close to the bereaved, may not be ready to provide other bereaved individuals with support. Grieving can actually push family members away from each other if they do not understand that everyone grieves differently and may not be able to support each other in the desired ways. When members of the family or close community are not available, the bereaved may turn to support groups to interact with their peers. Again, support groups may be extremely useful, or inappropriate depending on the person. Many support groups are moderated in different ways, and it may be helpful to seek out a support group for people who are in a similar situation (i.e., specifically for people who lost a spouse or people who lost a child; Dyregrov and Dyregrov 2008).

Coworkers of the Deceased or Injured
Coworkers of the deceased or injured are particularly susceptible to feelings of worthlessness and guilt in the aftermath of an accident. They may blame themselves for the accident’s occurrence or because they were unable to save the victim. These feelings of worthlessness can cause alcohol and drug abuse as a coping mechanism (Law 2012). Furthermore, those who witness accidents may suffer from posttraumatic stress disorder (PTSD) that hinders their ability return to work in the dangerous conditions where the accident occurred.

For example, in two papers based on his study of perceived risk, safety status, and job stress amongst injured and noninjured employees on offshore petroleum installations in the North Sea, Torbjorn Rundmo (1992) discusses the relationship between accidents and future worker safety.

In the first of these studies, Rundmo concludes that employees who have experienced an accident (been injured) develop an unrealistically high perception of risk. He compared the perceived risk, safety status, and job stress of workers on high-risk installations (which experienced more accidents
than statistically predicted) and low-risk installations (which experienced less risk than statistically predicted). Each of these factors was comprised of several dimensions. For example, “safety status” is really a measure of an employee’s satisfaction with measures to ensure safety, including protective measures (such as the availability and use of personal protective equipment and order and cleanliness at place of work), instructions given, and training (including contingency training, first aid, and safety training). Similarly, “job stress” is comprised of “time independence” and “participation and cooperation” and ultimately measures the extent to which an individual feels he has autonomy and control over his working environment. In the comparison amongst noninjured employees, those on high-risk installations reported a higher degree of perceived risk and job stress and a lower safety status (meaning a lower satisfaction with safety measures) than their counterparts on low-risk installations. This indicates that noninjured employees have a realistic perception of risk. On the other hand, no difference existed between injured employees on high-risk and low-risk installations, indicating that injured employees develop an unrealistic perception of risk. In particular, Rundmo proposes that injured employees on low-risk installations overestimate risk.

In his second paper, “Risk Perception and Safety on Offshore Petroleum Platforms – Part II: Perceived Risk, Job Stress and Accidents,” Rundmo analyzes the relationship between perceived risk, job stress, and accident or near-accident frequency. He concludes that risk perception and strain contribute considerably to the frequency of human errors. Therefore, individuals whose previous injury has caused an elevated risk perception are at higher risk of experiencing another accident than their noninjured colleagues. The author also identified several other factors that increase risk perception, including physical working conditions, safety and contingency aspects, and individual characteristics. Safety and contingency aspects were defined to include employee evaluations of inspections and audits, safety instructions, training, evacuation possibilities, and personnel equipment. Counterintuitively, good safety and contingency conditions caused an increase in perceived lack of safety. However, the more satisfied employees were with safety conditions, the fewer accidents they actually experienced. Bad physical working conditions lead to increased probability of accidents. Overall, Rundmo argues that physical, organizational, and other factors affect accident frequency indirectly though their effect on risk perception and strain. Factors that increase perceived risk and job stress increase the probability that a human error or accident will occur. In order to improve employee safety, Rundmo (1992) proposes (1) reducing job stress by increasing “participating influence in actual job execution and the predictability of what can be expected from others”; (2) improving safety and contingency aspects; and (3) evaluating physical working conditions.

An article published by the American Psychological Association also notes the importance of treating miners who had witnessed or experienced an
accident. Miners are much more likely to suffer from PTSD, depression, and other forms of psychological distress than the average American, but are much less likely to seek psychological help, possibly because of the ‘culture of fatalism’ prevalent in the mining industry. However, psychological intervention has proven effective for miners; for example, one particularly successful program provided miners with occupational therapists, psychologists, and rehabilitation counselors. It used exposure-based rehabilitation, which ensured that miners were comfortable performing the activity they were engaged in when they experienced (physical or mental) trauma. In addition to the program’s comprehensive services and understanding of the mining industry, the social support provided by other miners was an extremely important factor in recovery: by “hanging with their buddies,” miners were able to rediscover a sense of self-worth (Rundmo 1992).

Similarly, the experience of those in law enforcement highlights the importance of grief leadership by upper management. People are used to turning to their superiors for direction in normal times, and may be comforted if they can also do so in times of trauma. Leaders may feel that they should remain strong, objective and emotionally detached (Massachusetts Coalition 2006). However, grief leadership does not require acting stoic and in control. If a leader expresses grief normally, they can remind others that grief is not a sign of weakness, and that showing honest feelings in a dignified way is a sign of respect for the dead (Miller 2007). Furthermore, evidence from the medical profession indicates that it is very helpful if colleagues can provide support for each other. In some circumstances, it may be appropriate to institute peer-counseling training to enable workers to support their colleagues (Massachusetts Coalition 2006).

**Children**

An unexpected death can undermine assumptions and expectations of life for anyone affected, but especially children. When a parent dies unexpectedly, children often fear that they will be abandoned by their remaining parent. They may find death irrational, and difficult to both understand and talk about. They may develop unhealthy beliefs or fantasies about death. (Fantasies differ from beliefs in that they are tied to intrapsychic conflicts and are more difficult to address than beliefs. They often take the form of seeing or hearing the deceased.)

Children require extra support when one of their parents dies because their remaining parent may be unable to provide the necessary support as they deal with their own grief. Children’s support groups can help children cope with loss by reducing risk impact and negative chain events, establishing self-esteem and self-efficacy, and opening up opportunities. Reducing risk impact involves exposing children to stress in a controlled environment favorable to coping or adaptation. For example, in a support group, children may be prompted to talk about their experience with death, knowing that
they have the support of their peers and the group leader. Similarly, children's support groups can reduce negative chain events by giving children a steady source of support and leadership that their parents may not be able to provide. If children do not have other adults to turn to, interacting with a grieving parent may have negative effects for both the parent and child. Finally, children's support groups establish self-esteem and self-efficacy and open up opportunities as children interact with their peers, provide each other with support, and develop a new understanding of death. Children's support groups often use methods including bibliotherapy and art therapy, as well as group discussion (Zambelli and De Rosa 1992).

Schools can also be an important source of support for bereaved children. In order to deal effectively with a bereaved student, the school must take a number of proactive steps. First, the school must maintain open communication with parents, and encourage parents to notify them of any significant incidents in the student's life. The school cannot respond to a student's loss if they do not know it occurred. Once a school receives the news of a death in a student's family, all staff should be notified so that they can monitor the student's behavior and act sensitively (Holland 2008). In particular, staff should be trained to recognize signs of complicated grief or Childhood Traumatic Grief (CTG), both conditions in which grief is prolonged because children cannot move through the normal grieving process. If adults in the school system notice symptoms, they can alert the children's parents and refer the children to their primary care doctor for proper treatment. If properly trained, school nurses can also provide children with the necessary support themselves (Auman 2007).

Even when a student is grieving normally, the school can support them in several ways. Many bereaved children report feeling ignored, isolated, embarrassed, uncertain, and different. Teachers can inform other children about their classmate's loss, provide them with as much information as age-appropriate, and give them guidance about how to help the bereaved student. It is important that teachers maintain a stable environment for bereaved children, and do not exempt them from rules. However, they should make some provisions for the bereaved student, such as allowing them to leave the classroom without explanation if feeling overwhelmed, establishing a “special person” (an adult in the school with whom the student feels particularly comfortable) with whom the student can speak, or designating a “safe space” where the student can go. In the long run, schools should integrate loss integration into their curriculum, regardless of whether or not a student has been affected. Loss education can help all children develop an understanding of death as a natural phenomenon and remove some of the taboos that surround the topic of death (Holland 2008).
Notes on the Review of Other Crises’ Responses

The table below summarizes some of the relevant positions and responsibilities. Please note that it is incomplete; a more comprehensive description of involved agencies and tasks is available in Monroe County’s Marine Emergency Plan:


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<tr>
<th>Role</th>
<th>Responsibilities</th>
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<tr>
<td>Incident Commander</td>
<td>Assess scene, including magnitude and severity; Designate emergency site boundary and landing site perimeter; Control and direct emergency response; Establish a command post and staff the Incident Command System; Coordinate utilities (i.e., lighting of the area)</td>
</tr>
<tr>
<td>Chief Executive</td>
<td>Coordinate volunteer agencies, state and federal authorities, and other support agencies; Brief municipal officials about emergency; Designate a municipal spokesperson to communicate with the media in conjunction with the Incident Commander and the Public Information Officer</td>
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<tr>
<td>Coast Guard (Water Branch Director)</td>
<td>Coordinate and lead emergency response on the water</td>
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<tr>
<td>Fire Service (Land Branch Director)</td>
<td>Coordinate landing-site operations</td>
</tr>
<tr>
<td>Law Enforcement</td>
<td>Limit access of unauthorized persons to the emergency scene and landing site; Establish perimeter at emergency and landing site and vehicle ingress and egress</td>
</tr>
<tr>
<td>Emergency Medical Services</td>
<td>Direct all triage, treatment, and transportation activities; Coordinating medical supply and resupply and hospital destination for patients</td>
</tr>
<tr>
<td>Command Post</td>
<td>Direction and control of all emergency response operations at the scene of the emergency (under supervision of Water Branch Director); Serve as on-scene headquarters and central communications center</td>
</tr>
<tr>
<td>Public Information Officer</td>
<td>Coordinate media interface through the Joint Information Center; Disseminate news releases as appropriate and coordinate media requests for info</td>
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References


