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'For reasons of taste and decency and to speed investigation, disaster scenes should be "off-limits" to victims' relatives'. Discuss.

Introduction

Disasters often strike without warning and leave a trail of destruction in their wake (Stein, 2011). Few persons in this lifetime may never experience the overwhelming effects of a disaster but sadly, the unfortunate will look up to the authorities and experts to return their lives to normalcy. The essay topic states, "For reasons of taste and decency and to speed investigation, disaster scenes should be "off-limits" to victims' relatives. Discuss."

The essay will discuss disaster scenes in the context of disaster response and recovery planning to address the needs of the diseased, associated relatives and by extension the community. It will be argued that disaster scenes should not be off limits to victims' relatives. The first section will focus on the definition of theories and key terms like, risk management, disaster management, victims and victims' relatives. The second section will provide a brief discussion of a case study while the third section will seek to link the case study with the theories and the essay question. The essay will then conclude with a summary of the discussion presented in relation to the question.

Conceptual framework

Disasters are amendable to different constructions and these constructions may be incommensurate and cannot be measured by the same standards particularly for the various players, the pathologist, law enforcement and the victims' relative who have different constructions of the event (Institute of Lifelong Learning (2006) Module 5, Unit 1: 1-8). Each individual with varied interest in the disaster; thus feel that they have certain rights to the disaster. It is their disaster as they are one way or another directly or indirectly affected by the situation.

The World Health Organisation (WHO, 2002) asserts that a disaster occurs when the hazard encounters the vulnerability. The hazard is therefore the catalyst that ignites the disaster. In very simple terms, Hood and Jones (1996: 11) observe from the anticipationist point of view, that in hindsight, disasters are events waiting to happen. Hood and Jones' statement suggest that the hazard is a component of risk and no activity is risk free. Dembrowsky (1995) on the other hand states that a disaster has ephemeral significance; it is a trigger, a flag, which stimulates a specific reaction. According to Dembrowsky's (1995:242) analysis, "disasters are not the cause of the effects, but rather, the effects of the situation is called the disaster". Drawing from Dembrowsky's definition, the consequences or effect of the situation for the victim's relative is chaos and social breakdown among others.

Theoretically, however, disasters are not ubiquitous and are not measurable by the same standards; therefore, response is not a, "one size fits all" situation. In any case, the effects of

the event is inherently unpredictable and may require a response from local to national or even international level. Additionally, the disaster may result from natural disasters, technological disasters, terrorist attacks, pandemics and other hazards. Considering the limited word count in this essay, it is not feasible to have a detailed discussion regarding the various types of disaster and levels of response. For this reason, a disaster scene requiring intervention at national and international levels with multiple deaths and numerous victims' relatives is the scenarios considered. Additionally in this scenario, the term victims are the ones directly affected (injured, missing and diseased) by the disaster while victims' relatives are the ones indirectly affected.

For any nation, disaster prediction, mitigation and response mechanisms will reflect, in some degree, current cultural expectations and circumstances (Institute of Lifelong Learning (2006) Module 5, Unit 6: 6-3). When a disaster occurs variable amounts and types of losses are experienced; it leaves in its wake total chaos and disruption in the social balance of a community or nation. Albeit the numerous challenges in dealing with the victims and their relatives further compounds the response and recovery. The perception of risk, which is essential in decision-making, varies for each stakeholder regarding the scene.

According to Toft and Reynolds (1997) no specific accident occurs twice, notwithstanding accidents do appear to have similar features at some levels of analysis. Morgan et al. (2006) also notes that management of the dead is one of the most difficult aspects of disaster response regardless of the numerous disaster management manuals and plans, which have been prepared over the years. Oftentimes irrational fear among response personnel, policy makers, and the general public, that corpses are widespread transmitters of infectious diseases guide some of the critical decisions (Morgan et al. 2006). Historical evidence and scientific analysis, however, have repeatedly shown that this is not the case, particularly if the mortality resulted from the onset of a natural disaster (Kalis, 2005). Kalis (2005), also states that there is no evidence that, following a natural disaster, dead bodies pose a risk of epidemics.

Terms like, risk, risk perception and risk management are often defined in disaster management literature. Risk management means different things to different people, for the politician it means financial provision, while for the politician it is dealing with issues that may threaten the government (Hood and Jones 1996: 6). For public policy, risk management refers to an analytical technique for quantifying the estimated risks of a course of action and evaluating those risks against likely benefits Hood and Jones (1996:6). In disaster management, it includes regulatory measures, public policies and social interventions to eliminate or mitigate the risks (Hood and Jones, 1996).

There is usually an overlap in disaster management and risk management where informed decisions are required. For many authors risk management refers to the identification, assessment and control of potential threats Hood and Jones (1996). The assessment of risk usually looks at the scientific aspects of things where as the management deals with the policies, politics and decision. One ought not to make decisions based on a prescriptive plan or traumatic stress, notwithstanding learning from hindsight allowing for judgement calls. Supposedly, where urgent, critical decision must be made, the acceptable risks are considered.

In relation to disaster response, Module 5, Unit 7 comments that the response should not only accommodate the needs of the victims and the victims' relatives. Addressing issues associated with mass fatalities is an extremely important and integral part of emergency preparedness, response, and recovery (Kalis, 2005). Toft and Reynolds (1997), further argues that the isomorphic features of an accident is the reason for the creation of identical disaster situations. Thus, allowing disaster managers to obtain important observations, lessons, and best practices from case studies. Essentially, lessons learned may lead to more effective and efficient preparedness, response, and recovery planning in the proper management of disasters. Toft and Renolds (1997), further suggest that incorporating preventative and/or mitigative measures is active learning.

Bonner (2010: 255) shared a similar view that despite apparent dissimilarities, disasters have enough in common to provide great learning opportunities. Likewise Morgan et al. (2006) affirmed that disaster management is a very practical affair and lessons learned from the past, can present strategies and plans in the form of handbooks and detailed procedures to manage the survivors and the dead. PAHO as well as the Cabinet Office Civil Contingencies Secretariat have developed manuals and documents, which serve as planning and guidance tools. Some of these manuals serve national, regional, state, and local authorities and professionals from public institutions that have roles and responsibilities in mass fatality planning, response, and recovery (Kalis, 2005).

Case Study

Lockerbie Disaster: Experience of a victim's family

'On 21 December 1988, the crash of the Pan-Am jumbo jet 747 was the hazard that affected the vulnerable Scottish town of Lockerbie. Two hundred and seventy (270) people died. The Police immediately assumed overall control of the investigation and set up an incident control room. The need to preserve all evidence was emphasized, particularly with respect to the bodies and debris from the aircraft, which was not to be disturbed until recorded by the official accident investigation team.

The decision was taken that there would be no visible identification; relatives were not allowed to see the bodies irrespective of their condition. The body of the victim's relative was identified eleven (11) days after the disaster by means of fingerprint. Despite the fact that the deceased was intact and recognisable, the relatives were denied viewing privileges. After months of requests, relatives were allowed to view photographs of the deceased. Above all, relatives should be allowed to feel that they are part of what is going on.'

(Dix, 1998:1061-1062)

Analytical section

The Lockerbie disaster is an excellent example of the management of a disaster scene and the inconsiderate treatment of the victims' relatives. Like Pamela Dix, other relatives have expressed their experience of dissatisfaction in writing. Regardless of who tells the story, a parent, a sibling or significant other, they all had the same things in common, a hunger for information and a desire to view the body of their loved one. As stated in the conceptual framework information is a very sensitive issue and for the bereaved, honest, accurate and timely information is required. Alongside physical comfort and safety, an urgent and significant need for the relatives of the victims is information (Eyre and Dix, 2014). Those providing information should ensure that it is forthcoming and legible (Eyre, 2002).

Albeit, there should be restricted control to a disaster scene, which is the responsibility of the authority. Notwithstanding, there must be a friends and relatives' reception centre staffed by the police, local authority and suitably trained voluntary organisations. If viewing is arranged at the temporary mortuary, suitable support from trained personnel should be available before, during and after; for this reason the authorities should also consult and involve representatives of faith organisations when appropriate (Cabinet Office, 2003).

After a traumatic experience, it is common for affected persons to lose their sense of purpose or self-worth and taking away their right of informed choices compounds their ability to cope with their loss. Even those who had strong family and religious support were diagnosed with Post Traumatic Stress Disorder stated a victim's father who also had this to say;

"...the Procurator, the Pathologist the police – decided that none of the relative would be allowed to view the bodies...it was in the interest of the families not to view the mutilated corpses...anyone with the slightest knowledge of coping with grief will know...this is absolutely contrary to best practices in grief counselling. For many, the lack of contact...remained a source of anguish through the years"

(Institute of Lifelong Learning (2006) Module 5, Unit 7: 7-12)

It is extremely important to differentiate viewing a body for identification from viewing a body for grieving purposes (Cabinet Office, 2003). Eyre and Dix (2014) also reiterated, in the aftermath of the Lockerbie disaster, the coroner made the decision that irrespective of the condition of the bodies viewing was not permitted by the families. His intentions may have been good at the time; nonetheless, the decision to view the body should be that of the family, not the police or any other individual/agency. At Lockerbie, the victims' relatives felt that it was their right or duty to see the deceased as part of the grieving process.

In hindsight learning, The CABINET OFFICE, 2003 stated that information should enable relatives to make informed choices, and responding professionals should not make decisions on their behalf. Moreover, the main reasons why victims' relatives wish to visit the scene is for information and closure. It is essential that the handling of issues surrounding fatalities is both efficient and sensitive. Dealing with fatalities during disaster, one must recognise the conflict between trying to satisfy: the emotional and information needs of the bereaved relatives or friends of the deceased (Cabinet Office, 2003).

Taste and decency for the relatives refers to sensitivity and respect from those who are in charge, notwithstanding the experts in the Lockerbie disaster were merely concerned with the investigation. The relatives were not concerned with how the bodies looked or that they were contaminating evidence. The deceased were treated as evidence in an investigation and not as someone's loved one. The coroner's office should give consideration to privacy for the relatives and protection from media and public access suitable information on the processes involved so that relatives know what to expect (Cabinet Office, 2003).

The psychosocial needs of individuals affected by a disaster must be a prioritized activity by all responding organisations. Additionally, there should be integration of agencies while conducting interviews, or investigations. Cooke et al. (1992) likewise, that accident and emergency departments need to integrate their services with the community when dealing with the bereaved. This will limit the number of times the victims' relatives have to answer the same question regarding the deceased. For reasons of taste and decency, again arrangement should be made to ensure that the body is presented in a manner which takes account of the wishes of the relatives with regard to the preservation of dignity for the deceased (Cabinet Office, 2003 39). Anyone involved in responding to the needs of bereaved relatives should have an awareness of cultural, faith or religious sensitivities (Cabinet Office, 2003). Moreover, an appointed family liaison focal point should give support to relatives during this difficult time. There should be a sympathetic and caring approach to the families throughout the process and mistaken identification should be avoided (Morgan et al. 2006).

Cohen (1987), following the Armero, Colombia, earthquake in 1985, observed that bereavement is delayed by lack of formal confirmation of the deaths hence causing many victims' relatives to remain in a state of "expressed tension," hence, they are unable to dispel the belief that the missing person could be found. For reasons of taste and decency, relatives can view photographs of the deceased if it is too difficult to view the body. However, this should be their decision to make (Cabinet Office, 2003).

Deaths from disasters results in sudden and untimely losses, hence, according to Woods (2014) an important duty for any society is to manage the deaths of its members efficiently. Identification of victims should take priority since knowing the fate of their loved ones is of high priority for the affected families (Morgan et al. 2006). Additionally, Morgan et al. (2006) noted that the victims' families should be among the first to receive information about findings and the identification of their loved ones before anyone else. Additionally, Walter (2012) recognized that in most cases there are highly evolved social and cultural traditions, as well as civic procedures, which informs the management routine. The loss of a loved one through disaster is one of the most traumatic events a person can experience and can often lead to negative long-term effects on mental health (Norris et al, 2002). Cohen (1987), following the Armero disaster in 1985 where a volcanic eruption buried 22,000 residents, observed that the initiation of bereavement was delayed by lack of information and formal confirmation of the deaths.

The absence of specialist advice or mass fatality planning, often result in the mismanagement of human remains (Morgan et al. 2006). It is the duty of the affected state to

assume the leading role in the management of dead bodies (Kalis, 2005). Many different people or groups are involved in body recovery. Communication and coordination with them is often difficult (Morgan et al. 2006).

Albeit, the responsibility to manage the dead lies within the jurisdiction of the impacted society, some of the victims may not be members of that society, for instance victims of a plane crash. There may also be religious and cultural rites that would require the relatives to gain access to the disaster scenes and the body of the bereaved. In such situations, it is common to make decisions based on assumed risks. Grieving and traditional individual burial are important factors for the personal and communal recovery or healing process therefore, allowing relatives to view the bodies of their loved ones should be respected (Morgan et al. 2006). The aim of those caring for relatives should be to provide support through the early stages of bereavement and build a foundation for recovery (Cooke et al. 1992). The welfare and support for those dealing with or affected by events, including the relatives and friends of those killed, injured or traumatised (Cabinet Office, 2003:21) is equally important.

Cohen (1987), report indicated that persons who were centrally involved in a disaster-displayed ambivalence about learning the details of the event. Cooke et al. (1992) indicated that not knowing the fate of their loved one has caused many victims' relatives to remain in a state of "expressed tension," and an inability to abandon the belief that the missing person could be found. Lacey (1972) cited in Kohn and Levav (1990:62) and Raphael (1979) cited in Kohn and Levav (1990:62) made similar observations of the need to confirm death by viewing the body of the deceased. Information must be accurate, clear, timely and current to reduce unease and the spreading of rumours by the affected communities (Morgan et al. 2006). Drawing from these authors observations it is important that all relatives should have confirmation of the death. Ideally, verbal and written information to relatives should be part of the routine process (Cooke et al. 1992). Additionally, they suggested that information should be available in locally relevant languages.

Unlike in most forms of sudden death, however, those bereaved by a disaster often have to cope with multiple deaths and material losses (Kohn and Levav, 1990). Bereavement is one of the most painful experiences of life (Shear, Monk, Houck, et al, 2007, cited in Bergh Johannesson, 2010, p.16). Deaths occurring in the accident and emergency department are mostly unexpected and often cause prolonged grief and psychological morbidity (Cooke et al. 1992). The psychological and social impacts on those affected by major emergencies are many and varied (Eyre, 2006). All accident and emergency staff should have regular training in bereavement care. Grief after the death of someone close is a natural reaction, although its expression is highly variable. The privacy of victims and relatives must be respected as compassionate care of bereaved people is of great importance (Morgan et al. 2006).

An efficient response plan should discuss the potential victims, the extent of care post disaster appropriate internal and external resources to deal with relatives and the bereaved. The care of those involved in a major emergency and the way they are treated lie at the heart of the response (Coyle et al., 2007).

No single organisational arrangement will be appropriate to deal with every type of major emergency; nor will a single organisational planning blueprint meet every need (Cabinet Office, 2003). There is need for an integrated plan for the effective and efficient management of disaster scenes.

“...an effective disaster response will accommodate not only the needs of those directly affected (victims) but also the needs of those indirectly affected (victims’ relatives, friends acquaintances and careers)...it is no longer acceptable that the effectiveness of a disaster response is judged only on... how quickly ‘normal service’ is restored. A comprehensive and holistic assessment requires that a disaster response also be judged on whether those indirectly affected are treated humanely, sensitively and with equanimity”

Scarman Centre for the Study of Public Order cited in (Bonner, 2010: 213)

It is also clear that restricting access aims to allow rescue services to carry out their work unhindered and to preserve evidence during investigations (Cabinet Office, 2003). Notwithstanding the circumstances, preventing the relatives to visit the scene or to view the body may not only be unlawful but may seriously affect the grieving process (Cabinet Office, 2003 39).

Visual identification is not a scientific approach and mistakes have been made in the past. Therefore, the decision by the authorities to identify the bereaved by other methods like fingerprints and DNA profiles is respectable. It is best, therefore, to ensure accurate identification prior to releasing body. Families should never be allowed to view numerous bodies in the hope that they will make an identification. Releasing the wrong body can lead to increased trauma for the families involved, legal difficulties and embarrassment for professional individuals and/or agencies (Cabinet Office, 2003).

Conclusion

Good emergency plans now include arrangement for outreach programmes and support for those affected by disaster (Eyre and Dix, 2014). Disaster response ought to assess the needs of all persons affected by the situation, reduce suffering, and by extension limit the consequences of the disaster. Dix (1998) in her personal experience after her brother’s sudden death indicated that catastrophic death or injury destroys the lives of the victims’ family to the point where they feel that they are no longer in control of their affairs. In the Lockerbie disaster, family members had no access to the scene in order to prevent contamination of evidence.

To manage a disaster scene, one must first understand the disaster situation, know the consequence of the impact and affected persons (directly and indirectly). The location of the disaster and the nationality, culture and social wellbeing of persons involved is also very important. Addressing issues associated with mass fatalities are extremely important and ought to be an integral part of emergency preparedness, response, and recovery (Morgan, 2005). All

identified dead bodies should be released to relatives or their communities for disposal according to local custom and practice (Morgan et al. 2006). After a disaster, the collection of dead bodies is not an urgent task for the response team; the priority is to care for survivors (Morgan et al. 2006).

Today there is a paradigm shift in the having no access to disaster scenes to the victims' relatives being told, "We think it's good for you to visit". Most of this change, owed to disaster action Committees. Individual like Anne Eyre, Pam Dix and other relatives of disaster victims who come together to seek information, humanitarian rights and to just be with others who understand the trauma because they too have suffered loss. The Disaster Action Committees continue to raise awareness in terms of the needs of the victims' relatives.

The effect of dealing with a disaster is profound and again in hindsight advice from others is invaluable. At the disaster site the victims who have been affected indirectly could come together and support each other, there is always strength in numbers.

Families of the dead and missing must be given realistic expectations of the process, including the methods used and timeframes for recovery and identification of remains (Morgan et al. 2006). The dead and the bereaved should be respected at all times.

Verbal and physical contact in whatever way should be encouraged; persons grieve differently and may consider it appropriate (Cooke et al. 1992). The bereaved treats the body as a loved one rather than an inanimate object, as sometimes occurs with adults, and a photograph is taken as a final lasting memory (Cooke et al. 1992). A strong recommendation for persons managing disaster scenes is to improve planning to incorporate all types of risks in the process (psychosocial, financial, political, etc.). This is everyone's disaster and the scene should not be off limits to those affected, the victims' relatives need closure to move to carry on.

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