Public information and support after disasters: a research project

This paper summarises key findings from a research project commissioned by Essex County Council's Crisis Support Scheme, which co-ordinates the crisis support response to those affected by a major incident or disaster. The project focused on various forms of public information offered by the scheme and made available through its website (www.crisissupportessex.org/) and through its crisis support workers. The research was conducted with members of Disaster Action, all of whom have direct personal experience of disaster as bereaved people and/or survivors. A short questionnaire and focus groups were used to gather information and feedback based on their own experiences and views of the information and support available through the scheme. The results highlight the meaning and significance of information during, and after, disasters, as well as the importance of proactive planning and response in meeting people’s psychosocial needs in disasters.

This research project, commissioned at the beginning of 2008, forms part of the ongoing development of the Crisis Support Team for Essex, which provides a multi-agency support service to people affected by major incidents within Essex or residents of Essex affected by a major incident abroad. The kind of support the service offers includes immediate practical and emotional support, telephone support, advice and guidance, through a series of information leaflets and support to bereaved families.

The scheme has trained and currently supports over 60 volunteers who are on standby to respond in the event of a major incident or disaster. Examples of such incidents include transport accidents, terrorist attacks and flooding outbreaks. In recent years the scheme has responded to the needs of people affected by the terrorist attacks in London on July 7, 2005 and the Lebanon evacuation in 2006.

Aims
The aim of the project was to receive feedback from people with direct experience of being affected by emergencies in order to develop the content, methods and value of the public information and support currently provided by the CSTE. This paper focuses on the feedback gathered as a key part of the review process. The project is in keeping with the scheme's aspiration to best meet people's practical and emotional needs (or psychosocial) needs in an emergency through public information.

A sociologist specialising in psychosocial aspects of disasters and their management was brought in as an independent consultant in order to meet the project's aims. A project plan and timetable was scoped and agreed on, which included using a short questionnaire and focus groups to gather information about the needs and experiences of people directly affected by emergencies and obtain their feedback on the scheme’s information sources.

Data collection

Questionnaires
The charity Disaster Action agreed to distribute the questionnaire among its members and helped organise the focus groups. Founded in 1991, this organisation is run by bereaved people and survivors from UK and overseas disasters (www.disasteraction.org.uk/). It provides an independent advocacy and advisory service that represents the interests of those directly affected by disaster.

The questionnaire was distributed in February 2008 and sought feedback on:
- people’s personal experiences of disaster aftercare
- the sort of information they wanted/received after disaster
- whether the information they received was helpful or not and why.
The questionnaire was sent to 45 people with 17 responses (a 37.7% response rate). The respondents’ answers reflected the experiences of both bereaved people and survivors of 14 different disasters from the 1980s up until the present day.

As expected, the personal views and experiences of the respondents varied, reflecting in part the nature of the incidents, their own involvement and relationship to the disaster, and the particular arrangements in place (or not) for emergency response and aftercare support available to them at the time.

The limitations of this study are that both the sample population and the number of questions included were small. The sample population inevitably reflected the size of the group participating in the study, while the questionnaire was kept deliberately brief in order to increase the response rate. The author was mindful that researchers often target the participants, and aware that the focus group setting would provide the best opportunity for detailed examination of information and support issues related to the CSTE material.

**Results**

Although the results of this small-scale study cannot be generalised and the respondents are clearly not representative of all people affected by disasters, they do give useful insight into experiences across disasters from those directly involved and demonstrate their views of what can be helpful and unhelpful in the aftermath of traumatic events. Common themes, reinforcing those identified by larger scale studies, emerged in relation to these respondents’ fundamental needs with regard to information and support after disaster. The findings highlighted:

- the real and urgent need for information and support after disasters:

  ‘[We needed] practical information with someone to get us to the disaster site, put us up in a hotel and keep us informed about events as they unfolded.’

  ‘Police Family Liaison Officers were magnificent in medium and long term … gave us details of Disaster Action and counselling information.’

  ‘Initially leaflets were available in public places in the town.’

- that information and support comes through a variety of sources, both formal and informal, with some being regarded as more helpful and accessible than others:

  ‘In my disaster there was a lot of confusion between the different agencies involved, a lot of duplication between services. I would have appreciated a more summarised leaflet.’

  ‘[I needed] someone neutral to talk to about my emotions and an idea of any peer support groups being set up’.

- that the way support is provided – including who offers it and how – can make a significant difference:

  ‘[I needed to know] what happened to my daughter, who can give me the information in an honest way.’

  ‘Could have benefited from non-judgemental health information on possible consequences.’

  ‘At the mortuary I needed a cup of tea and some heating. We waited an hour in an unheated room in November. Everyone was shaking with cold and fear.’

  ‘It was never clear which [internet] site is the central one with the most reliable and accurate information’

- that leaflets on aftercare support provide an important form of support, alongside other means. The following quotes illustrate how leaflets were regarded as helpful.

  ‘… they helped clarify that I was not going mad, and my crisis presented usual symptoms to an unusual situation.’

  ‘It told us in writing that, a) we were normal, and b) our physical and mental symptoms were recognised, known and were normal. This was very cheering.’
‘Disaster Action [leaflets] were especially good because [they made] more specific reference to the issues involved with disasters – full of specific practical issues.’

Other comments highlighted the value of other forms of support alongside leaflets:

‘I am not a leaflet person; I work face-to-face with people.’

‘Leaflets quite helpful… but I found that the immediate and personal help of family and friends was more useful.’

‘I do not feel that leaflets are in themselves the best solution. I was so involved in this crisis that what I required was immediate psychological first aid, with ongoing interventions.’

Focus groups
For the second phase of the project two focus group meetings were held with 12 members of Disaster Action, consisting of six members in each group. Each focus group lasted for one and a half hours. A further Disaster Action member offered feedback via a telephone conversation. A semi-structured agenda was used to gather feedback on:

- the content of existing public information associated with the Essex scheme
- how public information is issued through the scheme
- the useability of the website
- gaps in public information.

The focus group schedule was designed to encourage participants to discuss in detail the nature of information and support available through the CSTE in future emergencies. At the same time it was moderated to allow for participants to actively draw on their own personal, collective and comparative experiences in relation to this agenda. The allocation of participants to the two groups was carefully planned to enable a variety of experiences across different disasters (both recent and more historical) and perspectives (including those of both bereaved people and survivors) to be included in each group. The role of the researcher in moderating the session was important to enable all to have an opportunity to contribute, to maintain the structure of the discussions, while at the same time allowing for new points of interest to emerge. The main limitation of the focus groups was the lack of further time. Having said this, at the conclusion of both sessions, comments were made about the value of the opportunity for mutual sharing of experiences, the chance to constructively contribute to future planning, and the general usefulness of the focus group structure.

The collation and analysis of the results from both the questionnaire and the focus groups formed the basis of the project report, which has enabled the CSTE working group to review and improve its website, leaflets and training. Rich data, including extracts from focus group participants speaking in their own words, was incorporated in the report and will be especially valuable in future training sessions. Detailed practical suggestions for changes to the website and leaflets were included in the report, with particular relevance to current plans and arrangements in Essex.

Feedback
More generally, of particular value in this project was the qualitative feedback from the research participants, who were willing to share from their own personal, often painful, experiences of disaster. Their motivation comes from the desire to improve psychosocial responses and support offered to those affected by future disasters. Through their experiences and in their own words they reinforced the findings of other research studies (Eyre, 2006), which emphasise the crucial significance of information during, and after, disaster strikes, as well as the value of proactive outreach support.

They suggested such information and aftercare support is helpful when it is:

- non-judgemental
- sensitive
- appropriate
- responsive to those in shock (offers a simple/ABC approach)
- given with tenderness and care.

It is unhelpful when it is:

- uncoordinated
- confusing (in form, content or availability)
- when promises are not kept
- when those in authority are over-defensive about aspects of disaster response
- when it makes the recipient feel patronised.

Immediate or short-term information needs related to getting basic answers about: who, what, where, when and how the disaster happened. For instance, people needing confirmation on whether loved ones were involved, opportunities to view the body and disaster site if so, and guidance on organising funerals.
Longer-term information needs tend to focus on issues, such as why the disaster happened, whether it might happen again, and whether lessons have been learnt. These issues are often pursued through legal processes, public inquiries, inquests, criminal trials and civil prosecutions.

Such research findings are relevant to all those responding to disasters and particularly those preparing psychosocial response plans. This includes, among others, emergency responders, GPs, health and social care providers and longer term caregivers, such as trauma specialists. The research also highlights the importance of integrated emergency management across all organisations responding to the needs of people, and how the mental health consequences of disaster cannot be separated from the broader practical, financial, political and legal aftermath of these kinds of events.

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REFERENCES