

Improving procedures and minimising distress:

issues in the identification of victims following disasters

This paper is based on a submission by the author to the public inquiry (held during 2000) into the Marchioness Riverboat Disaster of 1989 in which 51 people died¹. It covers issues arising from the second and third terms of reference of the inquiry into the identification of victims. Reflecting on previous and current practices and experiences, it draws on the procedures followed in the UK when establishing the identity of victims following disasters and highlights the differing needs, interests and issues arising for both professionals and the bereaved. The aim of discussing such post-disaster relationships is to highlight the need for sensitivity, careful planning and proper training in dealing with issues of bereavement, identification and relative liaison following a major disaster. Some attention has started to be paid to these issues, but it is argued here that training needs to be more systematically developed and delivered if distress surrounding a range of post-disaster procedures is to be mitigated for both responders, the bereaved and survivors.

While it is sometimes suggested that cost is a prohibitive factor in considering better training and awareness-raising in the field of trauma and disaster management, it is suggested that planning and preparation for dealing with disaster is cheaper economically, socially and morally than dealing with the effects of poorly managed incidents after the fact. Further, these issues must also be considered in the legal context of the duty of care owed to responders and the increasing emphasis on the rights of the dead and bereaved (IBCA 1996) as well as the general public (as incorporated in human rights legislation) in relation to expectations and treatment following traumatic death.

The practical implications of this paper are presented in italics. The paper concludes with a summary of suggestions about what the bereaved need following a disaster.

Thinking from the perspective of the bereaved

Thinking from the perspective of the bereaved seems a good and obvious place

by Dr Anne Eyre, Consultant,
Radford Semele, Lamington Spa,
Wars, UK.

to start. However many of the manuals and guidelines for disaster management have developed instead from the perspective of responders' needs in terms of plans, procedures and protocols. Dealing with the physical and logistical demands of disasters has been an important priority but, as will be shown forthwith, may inevitably conflict with the needs and interests of the bereaved. In the past such conflicts of interest do not appear to have been understood resulting in insensitive liaison or lack of communication with next of kin. Today awareness and understanding of the needs of the bereaved are improving but there is still much to be gained by considering disaster management from the perspective, needs and interests of the bereaved. Experience has shown that getting it wrong may have devastating effects on the bereaved, compounding the loss, grief and anger associated with sudden death. Pam Dix, of *Disaster Action*² reflects the sentiment of many of those bereaved by disasters in the 1980s. Her brother Peter was one of the 270 people killed in the Lockerbie air crash over Scotland on December 21 1988. His body was identified 11 days after the disaster by means of fingerprints and dental records. Pam states:

'How my family was treated during those 11 days remained with me and influenced my life ever since.'

(*The Lancet* (1998, p. 1061)

As I have argued elsewhere (Eyre 1998), for many bereaved by disaster in the 1980s, the way they were dealt with in the days and weeks following disaster has, in their view, had as devastating an effect as the fact of the deaths themselves. This is a sobering testimony on how we dealt with disasters in the past and highlights why it is important to work through all the processes involved in managing disaster as sensitively as possible in future. *Adopting approaches which consider, take account of and respond to the*

needs, interests and concerns of the bereaved at every stage is an important priority.

Dealing with the body: multi-agency perspectives

This is, however, easier said than done. It partly arises from the fact that there are many facets of disaster management which are complicated by the sheer number of agencies and organisations involved in responding (take for example the basic practical difficulties simply in communication, a factor which is often identified as being a key problem not only across but within organisations in the heat of disaster response). The fact that such agencies all bring with them their own assumptions, priorities, needs and interests to the disaster site can lead to some inevitable differences in opinion and actions. In many respects, the different organisations represent complementary tasks and duties; otherwise they would not be present at all (one would hope!). However, as I shall go on to show, the disaster site (by which I mean not just the literal physical site of an incident but the broad context of disaster response,

Notes

1. The public inquiry into the collision between the Marchioness pleasure boat and the Bowbelle dredger on the River Thames in August 1989 commenced in 2000 after a broader inquiry into safety on the River Thames. The inquiry into the disaster was achieved largely as a result of continuing campaigning by the Marchioness Action Group over the previous decade. The terms of reference for the non-statutory inquiry into the disaster were as follows:

- To consider and report on the procedures followed to establish the identity of the victims of the collision between the Bowbelle and the Marchioness
- To review and report on the procedures currently followed when establishing the identity of victims following similar accidents
- In the interest of minimising distress to the families of victims:
 - (a) to advise on what additional procedures should be followed, if any, when the need to identify victims arises following similar accidents
 - (b) to consider and advise on procedures for the notification and involvement of the next of kin in cases when it is necessary to establish the identity of such victims (Clarke 2001: 7-8)

2. Disaster Action is a UK charity set up in 1991 in response to a series of major incidents in the UK in the late 1980s. Its members are all survivors and bereaved from disasters. It provides support, training and campaigning on issues including the rights and needs of disaster 'victims' and corporate responsibility.

management and decision-making) is inevitably one of potential conflict in terms of interests, needs and perspectives. Herewith the bereaved may become just one of a number of stakeholder groups.

So what organisations are we talking about when it comes to issues surrounding body recovery, storage, identification, release and disposal? Consider the differing command/authority structures, personnel, assumptions and priorities of the following organisations, which may be called on in the aftermath of disaster:

- police
- fire and rescue services
- emergency medical services
- body recovery companies
- social services
- debriefing and counselling organisations
- coroners
- funeral directors
- local authority emergency planning staff
- voluntary bodies
- representatives of faith communities
- action groups
- media.

The bereaved may need to deal with some or all of these at some stage or another. In the past these have been uncoordinated by any single agent with the effect that, for example, giving basic information has had to be repeated many times over.

Today with the development and extension of the role of trained police family liaison officers in major incident response in the UK³, the police may play an important part in negotiating such contacts and support, working as they do with the needs of the bereaved as a central consideration. However this does not detract from the fact that some agencies will have priority regarding decisions and protocols which need to be followed. In terms of dealing with the dead, for example the coroner has ultimate authority in deciding what protocols shall be followed after a disaster; others are responsible to them with regard to the manner in which body recovery, identifi-

cation and release takes place. The fact that this is traditionally a very male-dominated profession, exclusive of specialist training in dealing with the bereaved from disasters, has historically had implications for the rights and opportunities afforded the bereaved.

In a major disaster, as with any death, the coroner has responsibility for the body until such time as it is released to the relatives. He must arrange for the body to be recovered from the place of death and for it to be kept in a proper place. He must ensure that there are suitable facilities for such examinations, that the body is properly identified and that any evidence of crime is preserved for the police to deal with further. There must be liaison with the relatives. Eventually the body, and connected property, must be released for disposal to those lawfully entitled' (Dorries 1999:251).

Dorries, (1999) himself a practicing coroner, acknowledges that other organisations, such as those mentioned above, inevitably want to have input into decisions that the coroner must take, while still respecting that he will make the ultimate decision. However, he states, once disaster has occurred it is far too late for these views to be expressed and discussed in a meaningful way. Dorries thus suggests 'it is incumbent on both parties to take an opportunity in calmer circumstances, even if this involves much opposition' (1999:253). The implication here, then, is that *pre-planning, discussion and multi-agency training is needed before disasters occur*. A key question for representatives of disaster response teams reading this then is: do you currently know the policy your coroner will take on issues such as viewing, release and identification? Might relatives be looking to you for advice and guidance on legal technicalities and will you be competent to respond? Might you anticipate interagency confusion and conflict and might this be resolved? As Dorries states:

Building sound relationships with the other major players in the disaster scenario (updating these contacts as those personnel change) and educating them as to the coroner's responsibilities is a vital part of preparing for a major disaster' (1999:253).

Person, property of public interest? Post-disaster perspectives on the body

In order to illustrate the various stakeholders active in the foray of disaster

management, let us now examine differing assumptions, perspectives and priorities relating to the body. Post-disaster relationships reflect the fact that individuals and organisations sometimes have conflicting needs and interests arising from these perspectives and priorities. *Figure 1* illustrates this in terms of the perspectives of the coroner ('property'), the bereaved ('person') and the media ('public interest') in relation to the body.

As stated earlier, in terms of decision-making around the body, the coroner has the authority to make key decisions regarding the manner and timing of release. Technically no one *owns* the body, but the coroner's responsibility for the body (see Dorries' statement above) may operationally mean that access to the dead is denied relatives arriving at a disaster site. There may be good and sensitively considered reasons why access to the dead at this point should be so restricted. However there are ways of communicating this to the bereaved. An inappropriate statement would be to communicate directly to relatives that the 'body' is the 'property of the coroner' as allegedly happened after the Hillsborough Disaster (personal communication). In this instance the understanding and language of the coroner's officer reflected not only huge insensitivity but also an emphasis on the coroner's needs and interests. He could have considered and expressed himself more sensitively simply by taking account of the needs and perspectives of the bereaved parent addressing him.

In contrast to the coroner or pathologist, from the point of view of the bereaved, the body represents a loved one, a life and a relationship. Obvious though it may seem, it follows on from this that the use of language such as 'this body', 'cadaver', 'reconstruction' etc. can cause serious affront and dismay if employed in direct communication with next of kin. *Thinking from the perspective of the bereaved may require practitioners to rethink their use of language and tone when addressing the next of kin.*

Furthermore, while disasters, by definition, may involve mass casualties, it needs to be remembered that the bereaved are only interested in their loved one and need to be responded to in terms of that one person. This needs to be borne in mind even though the reality for the practitioner might be that they are dealing with the complications associated with fatalities on a large scale and might wish to state this as an expression of the degree of strain under which they may be operating. This again illustrates the point

Notes

3. The role of trained police family liaison officers in disaster management is a dynamic one. Although relative liaison has historically been practised as laid down in police guidelines for dealing with major incidents, in the past they were not given specialist training in this function. More recently, however, and following on from practices developed with families of murder and road death victims, a number of forces are extending their training to cover major incidents. Notwithstanding this, complex issues remain to be resolved in relation to the resourcing of such a response should a major incident occur. A number of working groups in the UK are examining the development of this function.

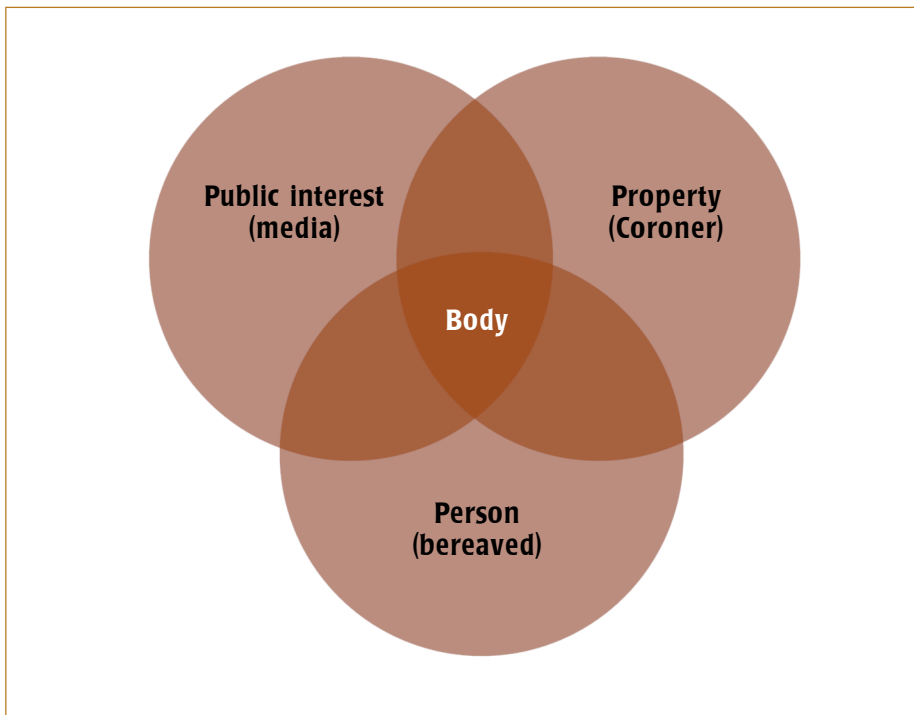


Figure 1: Post-disaster perspectives on the body.

that in preplanning and in the actual event of disaster management, thinking from the perspective of the bereaved might make a difference in terms of the interaction with and treatment of those already traumatised by the impact of sudden death.

As a final illustration of the different players and their respective perspectives on the body, consider the media. Their entry into the disaster is in relation to a potential headline news story. Newsworthiness rests partly on immediacy rather than accuracy. They want a story and they want it now!

'The media will inevitably hear of a disaster event, will report that news, and will search for more information both by telephone and by sending reporters to the scene. If the event is judged newsworthy enough the media may descend on the scene en masse... Once on site, the media will make extensive demands on local disaster managers, often using pack pressure (media tend to operate in groups) to force the holding of news conferences and to demand answers to specific questions, questions to which there are seldom satisfactory answers in the immediate post-impact period.' (Scanlon et al 1985, p. 124).

For many journalists 'public interest' as a legitimisation for such intensive inquiry overrides concerns about sensitivity for the bereaved and even responding personnel. For them then, the body takes on a very different meaning than for the

bereaved. They want to know how big a story this is, which is partly defined in terms of the number and scale of deaths. The media response to the Paddington train crash in October 1999 illustrates this. Not only was immediacy of story illustrated by the arrival of a Sky News representative within 20 minutes of the crash (Williams and Harrison 2000); regular bulletins on the television news throughout the day also kept this headline news. As well as gaining camera access to the crash site 24 hours a day during the body recovery period, media personnel continuously speculated on the numbers of dead, even to the extent of having a dramatic impact on decisions and actions taken by professionals managing the response. While it is increasingly self-evident that the different types and technologies of media communication must be taken account of in disaster planning, training and response, their impact on the nature of that response, the timing and way it is broadcast and

analysed is broadening with each disaster. However the needs and interests of the bereaved do not appear in the main to be taking any higher priority in media coverage of tragedy. This area deserves further research and action.

I have suggested so far that there are differing needs and interests relating to perspectives on the dead after disaster. It is also suggested here that these may inevitably produce irreconcilable demands and situations of conflict in the post-disaster scenario. Focusing on the particular perspectives of the coroner and the bereaved, consider which of the needs in Table 1 is a priority?

Removing the body from the place of death

This may not be a priority for the coroner from whom permission is needed before the dead are removed from a crime scene. Indeed Dorries suggests that, from the coroner's perspective, once death is established there is nothing to be gained by rushing to recover the bodies. He discusses the potential impact of premature removal on forensic evidence and efforts to establish the identity of the deceased for forensic purposes (1999, p. 263).

For the bereaved however, a common cause of upset is that the deceased are left in situ for some time. For them a common wish is to know details of their loved ones' final moments before and after death and a desire to know that their dignity was not affronted. The following quotes from two bereaved relatives illustrate this:

'I also made contact eventually with the doctor who found my brother and pronounced life extinct. It was extremely important to me to hear a straightforward, firsthand description of how Peter had been found' (Dix 1998, p. 1062)

'There was always this searching to find out where she lay, who came in contact with her, what did they say to her the last time they saw her... all these things were important to me

	coroner?	bereaved?
	(yes, no, maybe)	
Removing the body from place of death		
Explaining procedures to relatives		
Allowing relatives to view the body		
Involving relatives in formal visual identification of body/body parts		
Facilitating prompt release of the body		
Cleaning personal property before return		

Table 1: Differing needs and interests relating to perspectives on the dead following a disaster.

to try to fabricate those last few times in her life'. (*Lockerbie: My Trial*, Channel 4 Television May 2000).

Explaining procedures to relatives

In terms of mitigating the effect of having to leave bodies in situ, an important issue is communication with the bereaved to explain why such procedures are followed. As mentioned earlier, the UK police are now extending and developing the role of family liaison officers whose role includes liaison between the bereaved and other organisations, and facilitating explanation and understanding of such details.

The role of the family liaison officer in explaining clearly and sensitively in the aftermath of disasters, has the potential to resolve the conflicts generated in the past by a lack of communication and provision of information to the bereaved. One relative bereaved by a 1980's disaster, states:

'What we wanted was information about exactly how and why people died, why we were being dissuaded from viewing the crash site, how the identification process worked and why we were not allowed to see the bodies. This would have helped far more than counsellors telling us how we should feel' (quoted in Dorries 1999, p. 254).

An important point to be made here is that the practices often followed in disaster management deviate from the principles, plans or recommendations laid down. By way of example, though it is true that relatives have a right to know about the conduct of post-mortems and the right to view the deceased, in practice after disasters including Lockerbie and the Marchioness, relatives were denied such opportunities. As I have discussed elsewhere (Eyre 1998), their grief was subsequently compounded by anger at the responding authorities. Hence while useful explanatory literature exists, such as leaflets produced by the Home Office on coroners and inquests, (Home Office 2000), *local authorities need to ensure they have such resources available and built into their plans and practices in the aftermath of disasters.*

Allowing relatives to view the body

Our instinct in dealing with bereaved people is often to seek to protect, with the effect that when it comes to decisions such as viewing the deceased in Britain the attitude has traditionally been to discourage it. Coroners and others may wish to encourage relatives to remember the deceased as they were rather than take

the opportunity to view. Such a view is now changing and the need to offer informed choice is recognised as important by many bereavement professionals and by disaster action groups. From the coroner's perspective viewing may not be a priority at an early stage, but Dorries suggests that there is little point in preventing families from viewing the body since when it is released they are entitled to decide to view anyway. Considerations such as the state of the body need to be taken into account, but the notion of informed choice about the state of individual bodies as opposed to blanket decisions (made on behalf of all the dead and regardless of the state of individual bodies) has been promoted by organisations such as Disaster Action. Their membership includes relatives who have had personal experience of bereavement through disasters. As one member states:

'It is important to see the body for the relatives in most cases. Many relatives are told that they can open the coffin much later when the body is released and have a look at the body there if they want to. What I say to that is that it is not the same. I still can't really explain why, but it is important for many relatives that I have spoken to, not just in disasters but in road traffic accidents as well, to see the body as soon as possible after death. It's sort of like being as close as possible in time as to being there with them when they died. And being told that you can, a week later, or a couple of weeks later, you can open up the coffin is just not the same at all... It's not the same way of actually having the information that they are actually dead because that is really all you want to know. Are they really dead? Half of your brain is still considering 'well it could be a mistake, there could be somebody else', particularly in the Kings Cross fire where anybody could have been there at that particular time.' (Tarra-senko 1999).

An important implication for the role of support workers arises from this consideration. Suggesting that social services and others owe a duty of care to relatives to ensure that they understand what they will find if they insist on viewing the remains, Dorries states:

'Perhaps one of the best ways forward is to offer a facility for trained clergy or social workers accompanying the relatives to see the body first so that they can realise

for themselves the terrible traumas that have occurred. They are then better placed to assist the families in their own decision' (1999:266).

Issues arise here in relation to the training and preparation of social workers and others on trauma support teams as well as the care and support made available through debriefing etc.

Involving relatives in formal visual identification of body/body parts

This may or may not be a priority for either coroners or relatives. In some disaster contexts damage to bodies may be such that visual identification is impossible and for the suddenly bereaved visual identification may anyway be unreliable. With the increasing development of technologies such as DNA, identification may be carried out in alternative ways; indeed DNA was largely the method used in the aftermath of the Paddington rail crash where the impact of the train crash and intense heat of the ensuing fire caused severe mutilation and disfigurement. For identification purposes, personal items such as toothbrushes, combs or fingerprints may be requested from relatives. An important issue for the bereaved here is sensitivity in terms of explaining and conducting potentially intrusive home visits. Those coordinating inquiries and family liaison in the aftermath of the Paddington Disaster have highlighted the priority that was placed on an open, honest and sensitive approach to questions surrounding lineage etc. in pursuing identification methods and inquiries (Williams and Harrison 2000). Anecdotal feedback from relatives (personal communications) has suggested that this was much appreciated, though this needs to be systematically researched. The Emergency Planning Society's Welfare Subgroup (1998:4.4.4) gives further useful guidance on information relatives need during identification procedures.

Facilitating prompt release of the body

The timing of release of bodies highlights a further potential difference in needs and interests between the coroner and the bereaved. In mass disasters, the coroner will generally prefer not to release a single body for funeral until it is firmly established that each victim has been properly identified (Dorries 1999:269). This is to prevent difficulties such as the release and disposal of a wrong body to the wrong family. For the bereaved however, cultural and religious requirements (such as timely disposal for Jews) may lead to requests irreconcilable with the demands

of the coroner. Here it is important for those working with the bereaved to recognise a key theme in this paper—that there will be some needs and desires that it may not be possible to satisfy. *Support for staff managing difficult negotiations is important if a sense of personal responsibility and failure is to be avoided.*

Cleaning personal property before return

Individual coroners and relatives may take different views on this question. This highlights a further important point, which is the need to be aware that, just as individual professionals and volunteers may have different experiences and feelings regarding the same disaster, so it is with bereaved relatives and survivors. It is sometimes assumed that relatives will wish for personal effects to be cleaned and repaired prior to return but this is again an area where informed choice should be exercised. Items returned clinically clean or repaired when they had been cherished as damaged pre-disaster may be upsetting as may personal effects, which are soiled. One bereaved relative highlights the emotional significance of the return of her daughter's property after disaster:

'I remember the day that the package arrived. I knew what it was... they put it in the front hall and I left for the day. We all came back that evening and the house was filled... with this smell, and it was a combination of disinfectant, jet fuel and mildew, very distinctive smell that in some ways was offensive but in another way it was filling the house with whatever was left of Alexia in some way' (*Lockerbie: My Trial* Channel 4 Television May 2000).

Conclusion

This paper has discussed a number of the procedures followed after death in disaster with a view to highlighting how procedures can be adopted in a manner that is more sensitive to the needs and feelings of the bereaved. Discussions with colleagues involved in responding to the Paddington Disaster have highlighted the potential *extension of the role of the family liaison officer* as a step forward in developing and improving procedures for the notification and involvement of the next of kin in matters relating to the body after death. While there are some complex issues to work through further here regarding the concept, training and impact of family liaison officers, this seems to be a good way forward. Inter-

tingly, and to positive effect, Disaster Action was consulted by the coroner at Paddington for advice and feedback with a view to learning from those with direct experience of bereavement through disaster. In terms of being a grass-roots organisation, the *further involvement of organisations such as Disaster Action* in training and consultation regarding disaster planning and response is recommended. Their members offer unique perspectives to disaster experience and management as complementary to practitioners' viewpoints.

As others gathering evidence for the Marchioness Inquiry will have noted, disaster management in the UK is fragmented, dispersed and inevitably multidisciplinary, such that evidence for the inquiry was drawn from a wide variety of sources, organisations and individuals. There are historical reasons for this relating in part to the evolution of emergency management from Civil Defence and the priority that has been placed on local rather than national planning. What this means on the ground is that opportunities to share information, develop discussion and dialogue in the manner encouraged by the inquiry have previously been limited and the opportunity for lessons to be more effectively pooled, centralised and shared has been lost. One theme highlighted by the current national review of emergency planning⁴ is the strong general opinion among emergency management professionals that disaster planning should become a statutory responsibility. *A broader recommendation, then, is for more discussion and support for such initiatives by the Cabinet Office and others.*

As an academic specialising in Disaster Studies and Management, I have worked alongside and with those involved as practitioners in planning, preparing and responding to major incidents. At the same time I have been privileged as a disaster survivor to work with relatives and survivors of many UK disasters through Disaster Action, and hence appreciate the role they too can play in informing, educating and training. I have tried to embrace all three approaches to disaster, from academic, practitioner and relative/survivor perspectives in my work and in the *Study Group on Disasters* recently founded through the British Sociological Association. The focus of the Study Group is primarily the psychosocial or human aspects of disaster. Clearly this sort of approach complements the more procedural approach that has predominated historically within disaster management.

In an era when the concepts of human rights, duties of care and community-based approaches are becoming prioritised, it is suggested here that this approach has much to offer in developing and improving disaster management in the coming years.

Postscript

Lord Justice Clarke's report was published in March 2001, twelve and a half years after the disaster. Among its recommendations was the adoption of four key principles after disasters: providing honest and accurate information at every stage, respect for the deceased and bereaved, a sympathetic and caring approach throughout, and the avoidance of mistaken identification. Other key recommendations included: a detailed review of the role and law relating to coroners, including consideration of their training; meetings between coroners and families to explain identification and other procedures; the development of formal protocols between coroners and the police and others in order to avoid confusion and consideration to placing the 'right' to view the body on a statutory basis. For fuller details of all the recommendations see Clarke (2001).

References

- Clarke, Lord Justice 2001, *Public Inquiry into the Identification of Victims following Major Transport Accidents*, HMSO Norwich.
- Dix P. 1998, 'Access to the Dead: The Role of Relatives in the Aftermath of Disaster', *The Lancet*, Vol. 352, Sept. 26, pp. 1061–1062.
- Dorries C. 1999, *Coroner's Courts: A Guide to Law and Practice*, John Wiley and Sons, Chichester.
- Emergency Planning Society 1998, *Responding to Disaster: The Human Aspects*, Brodie Publishing.
- Eyre A. 1998, 'More than PTSD: Proactive Responses Among Disaster Survivors', *Australasian Journal of Trauma and Disaster Studies*, TODO.
- Eyre A. 1999, *Calling for a Disasters Study Group: A Proposal* (unpublished).
- Family Support Workers Group 1998, *When Disaster Strikes: Supporting the Victims of Trauma and Loss*, Stirling Council Housing and Social Services, Stirling (phone: 01786 442000).
- Home Office 2000, *When Sudden Death*

Notes

4. National review of emergency planning has been initiated by the Home Office but was suspended in the run up to the general election, June 2001. The review remains on hold at the time of writing; meanwhile in the aftermath of the general election, responsibility for emergency planning has since passed from the Home Office to the Cabinet Office.

Occurs: Coroners and Inquests, The Home Office, London.

IBCA 1996, *Charter for the Bereaved*. Institute of Burial and Cremation Administration, London, (phone: 0208 989 9496).

Lockerbie: My Trial, Channel 4 Television May, 2000.

Scanlon J., Alldred S., Farrell A. &

Prawzick A. 1985, 'Coping with the Media in Disasters: Some Predictable Problems', *Public Administration Review Special Issue*, Vol. 45, pp. 123–133.

Tarrasenko S. 1999, Presentation on coroners to conference on *People's Rights, Organisational Wrongs*, London, April 1999.

Williams G. & Harrison R. 2000, 'Learning Lessons from Paddington', Presentation to conference on *After Disaster: Addressing Management Issues*, Coventry University, April 25–26, 2000.

This article has been refereed

Tape Review

Suicide Negotiation: An emergency response guide to dealing with suicide threats

by Gary Raymond

2 audio tapes

Produced by Emergency Support Network

ISBN 0 9579012 1 6

Reviewed by Simon Brown

Chief Executive Officer of Occupational Services of Australia

Suicide Negotiations: An emergency response guide to dealing with suicide threats is presented as a two cassette audio package with a brief written summary included.

The presenter is Gary Raymond, a NSW Police Inspector with a wealth of practical experience in responding to and managing suicide threats. The tapes are produced by the Emergency Support Network, a well known Australian provider of quality information and material in the broad area of critical incident management.

The tapes are based on a live presentation in late 2001 by Inspector Raymond with a lively and interactive audience of health, welfare and emergency response professionals.

After a somewhat slow start, Inspector Raymond warms to the task, and presents an interesting, knowledgeable and practical overview of the challenging task of negotiating with persons threatening suicide.

Using real life illustrations, Inspector Raymond deals with strategic and safe negotiation approaches with a strong emphasis on safety—for both the negotiator and the suicidal person. It is a little frustrating at times when audience responses are difficult to hear however, Inspector Raymond generally paraphrases relevant input.

It is important to note that Inspector Raymond approaches the subject very clearly from the perspective of an operational police officer, often talking about the 'back up' and support available to police in such high risk situations. The focus is firmly on safe rescue and retrieval, rather than on counselling, therapy, or mental health management.

One of the most useful elements of this presentation is the emphasis upon differentiating counselling from suicide risk management.

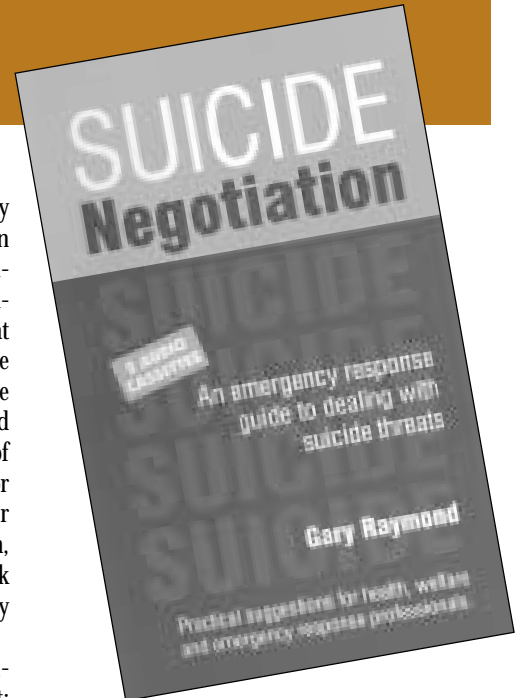
Inspector Raymond tactfully and consistently reminds the audience that dealing with a person at immediate risk of suicide is not about counselling or necessarily resolving their often considerable list of issues: rather he demonstrates that what is required is a firm directive style in a time critical situation. Unlike the counsellor, the suicide negotiator has a clear and predetermined acceptable, primary outcome—preservation of life. Counsellors may listen to some of Inspector Raymond's strategies and wonder about their longer term impact on the distressed person, however as he points out, the counsellors work often begins when the negotiator successfully finishes their task.

The tape follows a logical sequence, summarised in the brief accompanying document; starting with self-protection and assessment; moving through tactical communication; defusing dangerous or aggressive behavior and concluding with verbal contracts to resolve the situation.

The strategies are consistent with generally accepted best practice and are punctuated with common sense interventions in the context of a fundamental desire to preserve life. Some listeners may be surprised by a few of the anecdotes, analogies and self-disclosures used by Inspector Raymond to make his points. They do not detract from the overall message and simply serve to reinforce the obvious underlying motivation for Inspector Raymond's dedication to the task!

While the focus of the tape is primarily upon the immediate responder, it may have been useful to include additional material about broader incident management principles. From my experience, the skill of the negotiator is critical, but equally relevant is the response of those around, albeit less directly involved. Evacuation principles, crowd control and environmental management issues receive peripheral attention, but would be important factors for anyone listening to the tapes.

From my experience, the tapes are a useful adjunct for any person potentially involved in the management of a suicide threat. It would be useful as an additional training resource for Correctional Officers, Security Personnel, Human Service Workers and Residential Care Workers for example. It would be particularly useful for health



care practitioners in that Inspector Raymond consistently reinforces the importance of moving away from traditional client care practices when idealizing with high risk suicidal situations.

Listening to a recording of a live presentation has its difficulties, and I suspect that the audience had access to some form of PowerPoint display. This package might have been enhanced by a more detailed booklet, which followed the speakers content and allowed for revision and reinforcement of the key points.

Simon Brown-Greaves is the Chief Executive Officer of Occupational Services of Australia Pty Ltd, a National Psychological Services Company specialising in EAP; Critical Incident Response, Climate Surveys and Broad HR Solutions. He was formerly a Correctional Psychologist; Manager of the Victorian Police Psychology Unit between 1985–1989 and now consults to industry on high-risk hostage, siege and extortion management. He is a registered psychologist and sits on the advisory board of the Melbourne University Criminology Department and on the Board of the Australian Institute of Public Safety.

Occupational Services are contactable Nationally on 1300 367 008.

'Suicide Negotiations: An emergency response guide to dealing with suicide threats' is available from Emergency Support Network PO Box 106, Palmyra 6957 phone: 08 9430 4377; fax: 08 9430 5017 email: office@emergencysupport.com.au