

# AFTER EFFECTS OF DISASTER AND MANAGING REHABILITATION

**This session will be an exposure towards the after effects including Psycho-social behaviour of the people; TRAUMA OF THE HAVOC.**

# Forms of experience

- Terror, horror of threat ones own life or of loved ones, exposure to grotesque sights.
- Traumatic bereavement.
- Reaction to disruption of normal living.



# Death Bereavement and Grief after Disaster

**Human survival and health are  
the objectives and the measures of  
success of disaster reduction  
and humanitarian assistance**

# Stages

- Body recovery
- Storage
- Identification
- Disposal
- Information, Logistics and communication
- Support for families
- Security
- Liaise with international partners and embassies

# Requirements

- Search for corpses.
- In situ **identification** of the body.
- Transfer to facility that serves as a **morgue**.
- Deliver body to family members.
- Final disposal of the body as per the wishes of family and religious and cultural norms.
- Repatriate dead foreigners to their home country.



# Coordination

- Public health and infectious diseases risks / surveillance.
- Body recovery, Storage including long term storage.
- Identification of dead bodies.
- Information management.
- Disposal of the dead.
- Support to families and relatives.
- Management of Missing Person List.
- International cooperation and repatriation of the dead bodies.

# Planning

- **Logistic** resources and materials.
- Possible **emergency scenarios** for mass casualty.
- **Access to resources** at the time of the emergency; **volunteers** for the recovery of bodies; Refrigerated containers to serve as temporary morgues.
  - Space for burial of the dead.
  - Availability of extra-budgetary funds.



# PARTICIPATIVE AND FORESIGHTED

- **Institutions and officials** to be involved in decision-making.
- Special committee to oversee **management of dead bodies**.
  - *Expect the unexpected 'Allow for improvisation*
  - *Subdivide plan into **independent components***
  - *Circulate plan widely.*

# Body Recovery

- Recovery of bodies should not divert resources away from helping survivors.
- Focus on **rapid retrieval** of bodies for identification.
- Personal belongings, jewelry and documents should not be removed **during recovery**, but during **identification stage**.
- Note place and date where body was found: helps identification process, record along with other details of the deceased.

# Methods and procedures of body recovery

- Follow basic health and safety procedures.
- Record **location and date of recovery** of each body.
- Treat **each body part as individual corpses** and collect separately with separate reference numbers. Do not match with bodies.
- Body bags used if available. If not; plastic sheeting, bed sheets or any other **locally available material**

# Safety precautions

**Use gloves. Wash hands** with soap and water after handling bodies and before eating.

Avoid wiping face or mouth with hands. **Wash and disinfect all equipment**, clothes and vehicles.

**Recovery of bodies from confined unvented spaces:** approach with caution. **Confined spaces** be given time for fresh air to enter.

- Strengthen **personal hygiene** measures of workers and the community.
- **Disinfect bodies** with a chlorine-based solution.
- Prevent direct contact between the corpse and family members.
- **Deliver body** to the family members in airtight boxes. Avoid **exposure** of the dead bodies to animals.
- Monitor **transport** vehicles.

# Identification of victims

- A family liaison focal point set up to support relatives.
  - Families should be informed about findings and the identification of their loved ones before anybody else;
- Families of the dead and missing must be given realistic expectations of the process, including recovery and identification of remains, methods and timeframes.



## •Speedy Identifications

- The need for relatives to view the bodies of their loved ones as part of the grieving process should be respected.
- The visual identification of corpses not by children
- Once identified, bodies should be released as swiftly as possible to their next of kin.

# Release of body to relatives

- Release body only after **certain identification**.
- Confirm **visual identification** by other information e.g. clothing or personal effects.
- Missing people information used to **cross-check** visual identification.
- Only **responsible authority** to release body by, provide documentation of release (a letter or death certificate).

- Record name and contact details of person/s who claim the body + body's unique reference.
- Bodies that can not be recognized by visual identification, should be properly stored until forensic specialists can investigate.
- Carefully release the bodies which are not whole as this may complicate subsequent management of body parts.

# Bereavement and grief

- **Bereavement**: fact of loss through death
- **Grief**: feeling and behavior accompanying irrevocable loss
- **Grieving process**: Changing emotional states over time.
- **Mourning**: Social and cultural expression of grief.

# Support to families and relatives-I

- Deceased and bereaved should be respected at all times;
- Priority is to know the fate of their missing loved ones.
  - Honest and accurate information always!
  - Sympathetic and caring approach throughout.
  - Mistaken identification should be avoided;
  - Psycho-social support for families and relatives.
- Cultural and religious needs should be respected.



# Support to families and relatives -II

- Families are anxious and undergoing difficult times.
- Will not always behave rationally.
- Preferential treatment to all family members of presumed victims. Family to be given information regularly even if may not directly apply to their loved one.



# CONVEYING DEATH OF A LOVED ONE

- Separate the family members from others in a quiet, private place.
- Have the person (s) sit down, if possible.
- Make eye contact and use calm, kind voice.
- Try following words to tell family members about death: “I’m sorry, but your family member has died. I am so sorry.”

# What To Avoid

- “ I understand
- Don’t feel bad. Don’t cry.
- You’re strong/ You’ll get through this. It’s God’s will.
- It could be worse. At least you still have ...”

**Such statements may elicit negative response or distance the survivor - apologize if the survivor reacts negatively.**

# MANAGING FAMILY MEMBERS AT SCENE OF DEATH OF A LOVED ONE

- Cover the body; treat it with respect. Wrap mutilated bodies tightly.
- Have one family member look at the body and decide if the rest of the family should see it.
- Stay close by, but don't watch—try to distance yourself emotionally somewhat.
- Let the family grieve. Don't try to comfort them out of a need to alleviate your own discomfort.

# Mourning and rituals in disaster situations

- When rituals cannot be conducted the family is sentenced to a second death, the symbolic death of their loved one, and this for the lack of a tomb that perpetuates his or her name and confers social worth to the deceased and his or her inclusion in the generational continuity of a family.

# Key factors in Helping traumatized victims or groups

- Catharsis of the feelings.
- Empathy
- Social cohesion, social support, traditional network by Community help traumatized victims
- Funerals valued for their personal, religious, and social meaning,

# TREAT WITH RESPECT

