

# PROFESSIONAL HELPERS IN

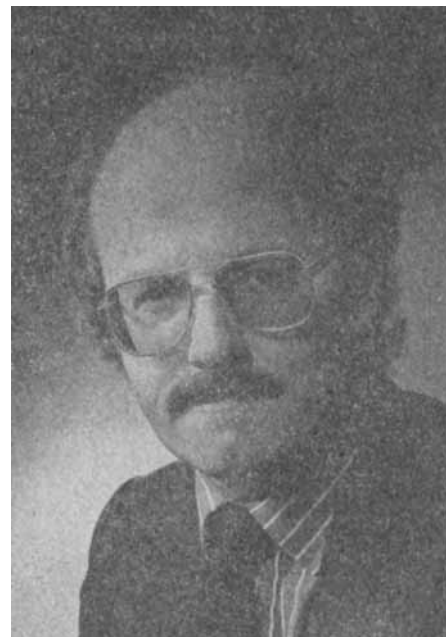
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It is in the nature of disasters that they overstretch services which have been designed to cope with less overwhelming crises. When this happens there is a danger that the members of these services will themselves become victims. In this paper Douglas Duckworth reports on the consequences for police who did their best to help in the face of the fire which swept out of control in the Bradford Football Stadium. He suggests that for people affected by post-traumatic stress disorders, non-directive counselling is of limited value.

Editor

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Disasters seem to be an inescapable part of the human condition. Each passing year leaves a fresh legacy of human devastation arising from earthquakes, floods, major fires, volcanic eruptions, hurricanes, terrorist attacks, explosions, transportation accidents, structural failures, and so forth. This year, of course, the Zeebrugge ferry disaster has sharply refocused our minds on the problem.

From the earliest times men have exercised themselves over how to avoid potential disasters, and how to cope with their disruptive consequences should they occur. In recent years, there has in addition been a growing awareness that something needs to be done about the *psychological* adjustment problems that can be faced by survivors. As a result, increasingly sophisticated mental health care programmes have been and are being developed at both local and national levels in various countries. Given this developing awareness of the potential psychological impact of disasters, it is interesting to see just how comparatively little attention has been given in the literature to the problems that can be faced by the many *professional helpers* involved in a disaster situation and its aftermath—the firemen, policemen, medical and paramedical personnel, and emergency transport staff. Perhaps this is because people have assumed that professional helpers are ‘experienced’ in such matters, and are quite used

to carrying out their tasks with professional detachment. Whatever the reasons, it takes only a moment's reflection to realise that although disasters appear to occur quite regularly when viewed from a national perspective, any particular group of helpers is unlikely ever to become ‘practiced’ at dealing with them. In every disaster situation, there will in fact probably be a majority of professional helpers present who, whatever their prior experience, will never before have encountered death, suffering and devastation on such a scale.

If you want to look into some of the recent studies that have concentrated on the problems of professional helpers in disaster situations, the four examples listed in the bibliography will give you a good starting point. They cover an air crash in Antarctica,<sup>1</sup> a railway accident in which a concrete bridge collapsed on to a commuter train,<sup>2</sup> the mass suicide by members of the People's Temple at Jonestown, Guyana,<sup>3</sup> and an explosion in an apartment building.<sup>4</sup> The conclusions were broadly the same in each instance: that a significant proportion of professional helpers experienced adjustment problems of one kind or another.

What I would like to do in the rest of this article is briefly to review the events surrounding the Bradford fire of May, 1985, looking in particular at the psychological adjustment problems it caused for some of the policemen who were

involved, and at how their Police Force responded. If you are interested in further details of this case, a more formal account of it has already been published.<sup>5</sup>

## THE BRADFORD FIRE

The fire began shortly after 1530 hrs. on Saturday, 11th May, 1985. It started beneath the floorboards at one end of the main stand during an end-of-season match. This stand was 76 years old, mostly made of wood with a tarpaulin and asphalt roof, and 3,740 spectators were sitting or standing in it. Though the fire looked insignificant when it was first noticed, within about four minutes it had engulfed the entire stand in flames. Fleeing spectators found themselves blinded and choking in the dense smoke, with molten asphalt dripping on to them from the roof. Once the roof had caught fire it created a grill-like effect radiating such an intense heat downward that a number of spectators literally burst into flames in full view of the crowds. Most deaths, though, took place out of view (though not out of hearing) in the corridor and turnstiles at the back of the stand, through which people had mistakenly thought they could escape.

During the fire, police and firemen were involved in rescuing spectators, which resulted in 41 police and 3 firemen getting injured. Police were also involved in

# DISASTER SITUATIONS

the multitude of other administrative, investigative and supervisory tasks that go with managing a disaster. Immediately after the fire, they worked with firemen for about 12 hours to locate and then remove the bodies from the stand, and later, another group of officers were each assigned one of the severely damaged bodies in the mortuary in order to pursue identification procedures.

1967. As some of those reactions had been quite serious, the Chief Constable, acting on the advice of the Police Federation, decided to set up a confidential screening and counselling programme.

An estimated 399 police officers had had something to do with the fire disaster, and so a confidential screening programme was judged to be the only practical way of

problems quite unrelated to the fire, and still others as a reaction to the fire which came on top of existing problems. After the screening phase, 34 officers decided to come forward for counselling. It is interesting to note that their average age was 34, and their average length of service 11 years. This indicated that it was not necessarily the youngest and least experienced officers who were suffering most. Another point is that only about two-thirds of these officers were actually at the scene of the fire when it was at its worst. The remainder were involved in post-fire activities.

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## SCREENING PROGRAMME

Even officers with extensive experience of ‘traumatic’ situations found the Bradford fire peculiarly tragic. So much so, in fact, that some of those on duty found themselves openly weeping. What had started out as a relaxed, festive, family occasion had within the space of a few minutes turned into a nightmare, with innocent spectators being indiscriminately destroyed by the fire. Many of the officers had been supporters of the club, and some knew people who were bereaved or injured, or who had been killed.

As an incident, it was also unusually difficult and frustrating. In contrast to more normal operations where they would receive a briefing and then arrive at a scene ready to assume control, the officers found themselves in an unstructured situation which escalated in a way that they least expected. In addition, they were subject to a particularly unpleasant form of helplessness: finding themselves powerless to reach people who were obviously trapped and about to be burned.

The immediate response of certain officers to the disaster, even though somewhat unusual, was at least understandable. What was puzzling, and of some concern to senior police, was the fact that after a week or ten days a number of their men were still behaving out of character. Some remained quiet and almost weepy, others were unduly tense and irritable, while others seemed “shell-shocked”. In seeking to comprehend this phenomenon, senior police noticed parallels with the reported reactions of some of the officers who had worked at the scene of the Stockport aircraft disaster of 4th June,

identifying those with potential problems. Approximately one month after the fire, therefore, the Chief Constable distributed an explanatory letter to each officer, along with a screening questionnaire which I supplied. Those officers (59%) who completed the questionnaires returned them directly to me, under confidential cover.

## SIGNIFICANT FACTORS

There seemed to be three factors which influenced the overall response. The first was *confidentiality*. Many officers, including some of those who returned their screening questionnaires, could not bring themselves to believe that strict confidentiality would be maintained. They were highly concerned about the possible damage to their careers should they admit to any problems. The second factor was the *novelty* of it all. Was it going to be psychoanalysis on a reclining sofa, or what? The final factor related to *self-image*. Far from there being a flood of officers who wanted a shoulder to cry on, many of those who thought about coming had to wrestle with the potentially humiliating fact that, for the first time in their lives, something was happening that they could not manage on their own. In a profession where self-reliance and toughness are highly valued, that took some swallowing.

The screening questionnaire provided a fairly straightforward way of dividing officers into ‘likely non-cases’, ‘likely cases’, and ‘likely serious cases’. Of the officers who returned their questionnaires, about one-quarter were identified as having possible problems. As anticipated, some of these cases were best understood as a reaction to the fire, others as a reaction to

## COUNSELLING PROGRAMME

The counselling programme had a very specific aim: to locate the experiences the officers were getting upset over, and to help the officers come to terms with them so they could start getting back to normal functioning at home and at work. It was therefore consistent with the *crisis intervention* model.

Each practitioner gradually develops his or her own preferred approach to psychological problems, and my own procedures have been strongly influenced by certain *cognitive restructuring* techniques. A useful source book of such techniques is given in the bibliography.<sup>6</sup> Three of the most important assumptions underlying them are as follows. Firstly, that a person’s psychological responses (e.g. feelings, decisions, actions) to a situation are heavily determined by ‘cognitive factors’. These are the person’s explanations and evaluations of the situation, along with the assumptions, goals and needs, and personal moral philosophies, on which the explanations and evaluations are based. Secondly, there is the assumption that when certain responses (e.g. strong resentment) are sustained for a period, a variety of secondary symptoms can begin to appear (e.g. disturbed sleep; headaches). Finally, there is the assumption that—if caught early enough— aspects of both primary and secondary responses can be *changed* by a deliberate restructuring (i.e. altering) of dysfunctional aspects of these cognitive factors. Cognitive restructuring, therefore, is not just about changing cold and detached thought processes, as its name might imply, but is in fact more often about changing aspects of

*continued overleaf*

the highly charged judgments a person makes about what is and is not a problem, and what should and should not have been done in a situation. This means that whether or not a person with an adjustment problem seems to be misunderstanding his situation, it is still vitally important to check up on what kind of *evaluations* he is making, and why. If, for example, he is bitterly objecting to something, or condemning himself for some failing, then that can be critically useful additional information when it comes to planning counselling interventions.

Appointments were duly made with each officer for an initial assessment session lasting one hour, and these took place approximately two months after the disaster. Further sessions were then scheduled where necessary. In cases where officers had minimal disturbance, the first sessions provided enough time to check that they were proceeding along the right lines. For average cases, two or three sessions were enough to start reversing the problems, but in a few instances up to five sessions were required. All of the sessions were conducted in a straightforward, business-like fashion, in a normal office setting—but with plenty of coffee available.

### KEY PROBLEM AREAS

The psychological impact of the fire disaster can be described in a number of ways. For example, in terms of the range and severity of the symptoms experienced, or in relation to the diagnostic criteria for *post-traumatic stress disorder*. One of the most interesting ways of describing the impact, though, is simply in terms of the problems that officers were most commonly concerned about. On this basis, five problems stood out, and these will briefly be described. Some officers were bothered by just one of these problems, but others by several or even all of them.

**Performance guilt.** Guilt is a response that is experienced by people when they judge that they have done something 'wrong' (or questionable) in relation to their personal standards or ethics. Several officers had significant problems in this area, mainly in connection with their rescue operations—even though by any reasonable criteria they had obviously performed to the limits of their abilities. These officers had all been faced with what they could

have construed as less than completely satisfactory outcomes from their rescue activities. For example, some had seen spectators burning to death in the areas where they had been trying to co-ordinate the rescue attempt. It thus became all too easy after the event for an officer to slip into blaming himself for some of the deaths and injuries, particularly if with hindsight he could imagine that different actions or instructions might just have resulted in a better outcome.

**Reconstruction anxiety.** Anxiety is an emotion people experience when they anticipate the possible occurrence of something which would be very unpleasant. Events can be anticipated from two different stances though, each of which can generate strong feelings of anxiety. They can be anticipated from the present, or, from a point in the past which can be remembered. In the second case, people reconstruct in their imaginations an alternative history from the one which actually took place, and experience anxiety as they consider what might have happened to them had events taken that slightly different turn. The horrifying experiences and narrow escapes associated with a disaster provided an abundance of material for the creation of anxiety-generating, alternative scenarios, and some officers found it very hard to stop thinking in that way. Such reconstructions can be so vivid that people may suffer periods when it is difficult to distinguish between reality and reconstruction.

**Focused resentment.** Resentment is experienced when people go on strongly believing that something which has been done by one or more other people was 'wrong' and should not have been done. A number of officers felt bitterly resentful about specific events and actions that had taken place around the time of the fire: for example, the behaviour of certain journalists and the management of the victim compensation fund. Among other things, this set them up for furious and near violent exchanges if other people failed to agree with them.

**Motivational changes.** Under normal conditions, people learn to value and desire certain states of affairs in their lives, and they work more or less purposefully to achieve them. After the fire, some officers found to their consternation that their values and goals seemed to have been thrown into disarray. This meant that they found great difficulty in performing some of their tasks at home or at work. Renovation activities seemed pointless, holidays lost their meaning, career plans seemed farcical, and paperwork in the office seemed so utterly inconsequential that they could hardly muster the energy to do it.

### LESSONS

Many things can be learned from this exercise, a few of which I will briefly describe here. First of all, it confirms that in a disaster situation a proportion of the professional

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**Generalised irritability.** When people become irritable and bad tempered, they show less tolerance of the actions and attributes of those around them. Increased irritability was one of the most common, persistent changes experienced after the fire. It was 'generalised' in so far as it manifested itself indiscriminately over a wide range of issues at home and/or at work. It turned out to be a very insidious problem, because not only did it make the officers feel bad, but it also upset relationships with family, friends and/or work colleagues at the very time that such supportive relationships were most needed.

helpers are likely to experience psychological adjustment problems. Some of these reactions will follow a 'normal' course, and start to fade over a period of weeks as a person comes to terms with his experiences. Others, however, will evolve into disorders if left untreated, and such post-traumatic disorders can go on for a very long time, wreaking havoc with a person's career and family life in the meantime. It is interesting to note that during the two years since the disaster, several more officers have come forward for help. Recurrent nightmares and extreme irritability have been the commonest presenting symptoms in these cases.

Secondly, it reminds us that each professional group has its own culture and conventions, and that the police are no exception. Anyone invited to assist with problems in such groups, therefore, must be prepared to tread carefully and design an intervention which is not only satisfactory from a technical point of view, but also from the viewpoint of the client organisation. People who naively assume that their qualifications or titles will give them licence to do as they please will be in for a rude awakening, as will people who treat professional helpers as if they were the same as any other group of disaster 'victims'.

Thirdly, it suggests that while pre-incident training and experience will have their place, they are unlikely ever to be sufficient on their own. Post-incident training (counselling) is also going to be required. With our present state of knowledge, it is almost impossible to predict just how a particular individual will react to the subtle psychological processes that can trap him in difficult situations, and

on that basis to try and prepare him in advance. However, if he is picked up at the point where he *begins* to have problems, not only does it then become possible to see what the internal components of his problems are, but typically the person can sense his needs and so is highly motivated to learn how to deal with them. Further, if the counselling is done in the appropriate fashion, not only does the person get to grips with his present problems, but he is also prepared for future problems of a similar kind.

Finally, the exercise confirms to me the importance for post-traumatic problems of counselling techniques which go far beyond the 'non-directive' approach. Just as with certain kinds of bereavement problems, post-traumatic problems can be eased to some extent if a person describes them to a skilled listener: the person can begin to put a structure on his experiences and reactions, and thus feel to have more control of them. However, merely recounting events over which one feels, say, resentment or

guilt, can serve to make one feel even more convinced that those reactions are justified. Empathic listening on its own, therefore, can under such conditions actually exacerbate psychological problems. This is not implying that a counsellor should be *directive*. Rather, that he should understand the problems well enough to be able to offer the client *clear directions* about what needs to be done if they are to be resolved satisfactorily.

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## The Brown Envelope

On the brown envelope  
Someone had written  
ELIAS WACHENJE  
1 Wooden Cross  
41 pence  
5 library tickets.

At first it seemed stark—  
Allen—detached from the  
Actual man I had loved  
And who had loved me.

But then a friend  
Said that each item  
Was a clue to Elias—  
because—

The cross comforted him  
In his suffering.  
The money—well, rich or poor,  
Health—life—  
They are priceless  
Because we shared something  
Money could never buy.

And the library tickets—  
His passport to the  
Tree of knowledge,  
Seductive to the last.

The envelope of death  
Encompasses a man of faith,  
Generosity and wisdom—  
A man so very brave,  
And rich, and humble—  
And forever sealed within my heart.

VIVIENNE WACHENJE

1st August, 1984

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