



2018 Symposium

LEADING AND MANAGING IN THE EMERGENCY AND TRAUMA SECTORS

Exploring the dynamics of interoperability before, during and after crises

Saturday September 15th 2018

Victorian Emergency Management Institute
601 Mount Macedon Rd, Mount Macedon VIC 3441

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System Psychodynamics/ Socioanalysis in Emergency Services

Opening Address: Susan Long (PhD) Director of Research and Scholarship

Welcome to the NIODA 2018 Symposium LEADING AND MANAGING IN THE EMERGENCY AND TRAUMA SECTORS: Exploring the dynamics of interoperability before, during and after crises.

The National Institute for Organisation Dynamics (NIODA) is an accredited tertiary education provider with a Master of Leadership and Management in Organisation Dynamics.

NIODA research is dedicated to a deeper understanding of organisation dynamics and their leadership and management. We focus on how organisational cultures develop, how they are able creatively to support the purpose of their organisations, and where and how they fail to do this. We are particularly interested in unconscious dynamics – that is those forces and situations that at a group level act subtly and out-of-conscious-awareness to influence the culture. We also pay attention to system dynamics; how members take up roles, how the organisation is structured, how strategy is formed, how authority is exercised and how accountability is taken up. We hope to bring these factors into awareness to enable leaders to develop engaged and motivated followers, and to enable managers to more effectively work with their teams

This is the second Symposium conducted by NIODA - the first being in 2017 titled *Getting the Policies we Deserve? The Dynamics of Making Policy*.

Since that Symposium, NIODA has become involved in working with sections of the emergency services. Given the seriousness of matters dealt with in the emergency and trauma sectors and given the risks involved both for the

organisations and society, it seems timely for us to come together to discuss and further learn about leading and managing in these sectors.

This Symposium includes papers that consider the operational and strategic practices and cultures of emergency and trauma services. They include research in these organisations and the more personal experiences of those who work in them. We are hoping to understand ways in which these organisations work together in order to discover the impediments and facilitators to this work. Working together means bringing together different organisational cultures – a challenging and complex endeavour.

Although there are many stimulating papers to guide us, an important part of the symposium will be the discussions following each of the papers. The NIODA organisers hope that as participants in the Symposium, together we all can bring our different perspectives to inform an exploration of interoperability before, during and after crises. We are a collection of researchers, consultants, managers, leaders, operatives and community members with a stake in the emergency and trauma services sector. We come from different perspectives and backgrounds, each steeped in different work cultures and languages for understanding the sector.

To aid us in our task, I will present here some of the ideas from a NIODA perspective to aid in the exploration. Other speakers will no doubt present other perspectives and each of you, as participants, will bring your own.

I will also give some time for a discussion at your tables about these ideas.

System Dynamics

One of the features of systems and psychoanalytic discussion is a quite dramatic vocabulary aligned to the vocabulary of psychiatry. We talk about schizoid or depressive behaviours. We talk about fear of annihilation and of saviours. It originates with the founding fathers of this science including Freud and his colleagues and their perspectives in psychiatry. Yet, as psychoanalysis and socioanalysis have grown this language has become helpful when thinking, not simply about individuals and their problems, but also in thinking about groups and their potentialities. If the language startles you, it may be helpful to

just dial the dramatic words down a few notches in your own translation. Schizoid and depressive behaviour becomes, say irrational versus grounded behaviour. Annihilation and saviours become threats and great hopes.

"There are few business activities more prone to a credibility gap than the way in which executives approach organizational life. A sense of disbelief occurs when managers purport to make decisions in rationalistic terms while most observers and participants know that personalities and politics play a significant if not an overriding role. Where does the error lie? In the theory which insists that decisions should be rationalistic and nonpersonal? Or in the practice which treats business organizations as political structures?' (Zaleznic 1970).

This quote from Zaleznic in 1970 is still relevant today. Although we know that rational and non-personal approaches to leading and managing (nowadays often based on research evidence) are best for the organisation's prosperity as a whole – that includes, having clear and transparent processes that are followed, clear roles, tasks and accountabilities, and collaborative leadership with engaged followers – we also know that power and political manoeuvring for personal interests get in the way. Moreover, increasingly we understand that these two perspectives – reasonableness and political ambition – strive against one another *within* people not just between people and often form the basis of ethical dilemmas for even the best of leaders. It is this field of contention *within* people – the ways they experience the tensions, the anxieties and psychological defences these tensions produce and the stories they tell in self-defence even to themselves when decisions are made – that is the ground of psychodynamics.

But again, it is not so simple (as if that were simple anyway). Social dynamics make the story more complex. The tensions *within* people become externalised. One way to resolve internal tension is to allow different people to take one or the other side of the tensions. For example, if I am conflicted about my wish for power, it helps to attribute that wish to someone else, who is seen to be even more desirous of power and then I can remain logical. Or is it that external tensions *between* people become internalised? If two people who I respect and care about are opposed, I start seeing the issue from both sides and the tension is in me. The social and personal dynamics are intertwined. There is no starting point in a linear sequence, only an ongoing interplay (Long 2000).

With those systemic dynamics in mind, I will present some ideas that attempt to understand those dynamics as they are played out: the dynamics of reasonableness, politics and psychodynamic processes – all of which we understand as systems psychodynamic or socioanalytic dynamics.

Basic Assumptions

Fire and other emergency services are predicated on fighting a disaster ***as if*** in a war zone with that disaster, hence the terms “fire fighters” or “emergency services”. They are sensibly geared up to do this. Bion (1970), a psychoanalyst who studied group dynamics, refers to this as working with a basic assumption of fight/flight. A basic assumption is a set of beliefs, attitudes and emotions that make up a group or organisational culture; held implicitly, without recourse to judgement; that is held unconsciously in the minds of group or organisational members. The fight/flight assumption holds that the group or organisation exists ***as if*** in order to fight or flee from an enemy or danger. The basic assumption dynamic in group culture is an ***as if*** assumption. Group or organisation members act as if the assumption holds in most situations.

Organisations with such a basic assumption often adopt command and control cultures with strong hierarchies. Like an army in times of war, they have a war mentality and operate on strict obedience to command so that large tactical manoeuvres can be successfully carried out. They also require small flexible units that work within tight guidelines, but with discretionary authority to tackle situations in the heat of the moment.

The unconscious or ingrained fight mentality in the culture looks for an ‘enemy’ even if there is no obvious enemy present. This is part of the vigilance required. These organisations, then, must take care not to carry the “war” mentality into peace times, lest interoperability between other organisations in the same field is compromised through the creation of the ‘other’ organisation as an enemy – in the mind - to be fought, rather than as a partner to collaborate with. A fire-fighting organisation, for example may be unconsciously keyed up to fight and may act as if other organisations are competitors rather than collaborators.

When the fight culture dominates, the dynamics that sometimes emerge are as follows:

- A “them” and “us” rather than a “we” mentality emerges, because things are done differently in different systems and organisations;
- This can occur even in different sections of an organisation, and opposing sub-systems and sub-cultures emerge;

- Purpose and roles are less clear when there is no external disaster to face;
- Territories become all important and sharing information is regarded as losing territory.

Emergencies also generate dependency – a deep wish to find someone, some group or a set of stringent rules that can take control and be depended upon, such that followers don't have to think too much for themselves or make difficult life depending decisions, lest they carry the blame if things go wrong.

In a basic assumption of dependency, group or organisation members act as if the leader alone holds all the knowledge and information needed. So, those lower down the hierarchy are often ignored, despite the fact that they are often on the front line of the work.

Recovery and prevention are important aspects of the emergency and trauma sectors and it is the sustainability of organisations and their interoperability in these “peacetime” periods that leads to even greater capacity to work in crisis because in ‘peace times’ the foundations for effective interoperability during the “fight” are put in place.

Projections, Introjections and Transference

Psychodynamic theory names a series of processes whereby thoughts and feelings originating in a person or a group become located in other persons or groups. This is not magical, but occurs through subtle communications, both verbal and non-verbal.

Projections are a process where thoughts or feelings in a person are attributed to others. A small child might attribute something that they themselves are feeling to an inanimate object – ‘my dolly is tired’ or ‘the truck got hurt’. Adults attribute their own unwanted thoughts and feelings to others – ‘he’s angry with me’ rather than admitting ‘I’m angry with him’. The other person may take up the projection (a process called introjection) perhaps because they have a tendency toward the thoughts anyway and then indeed have angry thoughts because the person projecting may subtly induce the angry thoughts in them. Sometimes there may not be a tendency to take up the projections, but they are forcibly given – as is the case in some race dynamics or cross-cultural attributions.

This can happen between groups at an unconscious level so that thoughts, feelings and characteristics are attributed to the 'other' group not only without real evidence – that is as the result of ignorance - but are attributed in order to dispel unwanted thoughts, feelings and attributes from the group. This can then escalate incorrect or induced attributions between groups, and hence heighten hostilities. The 'other' can become a dumping ground for what we don't want.

Transference occurs when a thought or feeling belonging to a situation in the past is re-activated onto a current situation. A very small cue may do this – a look, a word, a movement – and so a situation or person with nothing actually to do with the past – is treated **as if** (there's that idea or fantasy of as if again), is treated as if they are the person or situation in the past. 'He's just like my dad? Or 'She's the same as a boss I had in the past'. The recipient of the transference may be demonised or idolised because of a past experience, rather than due to any of their actions in the present.

Systems psychodynamics or socioanalysis examines how these unconscious processes occur in and between groups and organisations and how they become embedded in organisational cultures. Might we discover some in our discussions today?

Social defences

All work brings about some anxieties. Work in the emergency and trauma fields certainly faces people with dangers, anxieties and other sometimes almost unbearable emotions. Individuals have their own psychic defences to help them cope, but organisations also develop social defences against the unbearable and difficult. These defences get built into the structures and cultures of organisations. They include practices, rituals and structures that distance people from horrifying experiences, or harden them; that create stories and practices that 'turn a blind eye' or deny problems, that find scapegoats or victims and develop 'blame' cultures. They are intended to help people get through the bad experiences, but they often create deeper problems in so doing; secondary defences which are worse than the initial problems.

Linking Unconscious Dynamics to Emergency Services

Unconscious material and processes are out of our awareness for many reasons.

- We don't want to know. This is called motivated forgetting or repression of ideas and unwanted thoughts. Psychoanalysis specialises in exploring these. These thoughts return to consciousness in slips of the tongue, dreams and psychological symptoms.
- The ideas are not allowable in our society; they are unthinkable – who could think of gay marriage 100 years ago? Very few. This is linked to social ideologies and beliefs. For example, a flat earth; creation vs. evolution; not believing in climate change.
- The context does not allow the thoughts – sometimes you can't think certain things in the presence of certain people or situations. Imagine being in a job interview. You have rehearsed what you want to say the night before. You feel confident. But when you shut the door behind you after the interview, you think 'Oh, I forgot to say **that**' whatever the **that** was. You may blame yourself as forgetful, but it may well be that something in the room, some question, some look, some atmosphere, some person or role led to you forgetting to say what you wanted.
- The ideas are not available because technology has not progressed to allow them – could people of the past think of key-hole surgery or the internet or mobile phones?
- The ideas are yet to be thought by creative new thinkers.

These reasons that ideas are out of awareness show unconscious processes as belonging to the individual due to their personal biographies, due to societal beliefs, ideologies and knowledge and due to the potential of yet unthought ideas and possibilities. We do not know because in some cases we are afraid to know and the status quo is adhered to **and** in some cases because we are on our way to creative new ideas if we can find the circumstances that allow them to emerge.

In the discussions that emerge from today, I hope that we can share and understand more fully the dynamics that impede interoperability so that the factors that aid interoperability are also made clearer.

To begin, I would like, at your table, to choose one of the concepts we have just covered that interested you: System dynamics, basic assumption 'fight or flight', basic assumption "dependence", Projections, Introjections, Transference

or Social defences and discuss it – perhaps finding examples from your own workplaces, or workplaces where you have worked in the past.

Reference

Zaleznik, A. (1970) 'Power and Politics in Organizational Life" *HBR* May 1970



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**The social process induced by disasters, trauma, stress and other
disruptions**

Dr Rob Gordon

Dr Gordon's paper was delivered as a non-recorded speech. However, he has supplied details of the following paper on which his speech was based.

Community Process and the Recovery Environment following Emergency

Rob Gordon

**Victorian State Emergency Recovery Unit, Department of
Human Services**

On the basis of 20 years experience with emergency recovery, a model of community process inaugurated by emergencies and disasters is described. A model of community is presented based on the role of social communication in creating social bonds. Disaster impact causes a sudden, dramatic alteration in social structure with victims tending to "debond" from the social structure of their community under the threat. This is followed by a community-wide process of "fusion" bringing about a social system adapted to immediate needs but not to long-term recovery. With time, tensions develop leading to the appearance of "cleavage planes" between conflicting groups. An alternative form of constructive social differentiation follows with coordinated recovery interventions. Each stage of this process is analysed in terms of the alteration in social communication. Strategies are described to mitigate each aspect of this process using interventions in social communication.

Key words: *Disasters; Emergency Recovery; Victims; Community Processes; Social Communication*

Emergency Recovery and Environmental Health

Surviving emergencies is not just a matter of what happens at the impact, but also of how the environment supports the complex and protracted processes of recovery. The social environment of the aftermath is crucial in determining how well people adapt to stress, change and emergencies (Coman 2003; Gist & Lubin 1999). Traumatic events shatter essential assumptions for psychological health, which are formed in the context of community life (Janoff-Bulman 1992; Kauffmann 2002). Recovery from disaster and trauma involves not only personal psychological work, but also support for the reconstruction of these assumptions as part of the social system in which they live. It is a protracted environmental health problem and environmental factors that may compromise it are often consequences of social processes within which individuals' personal and family experiences are situated. People with access to a supportive

community (even if its services and resources are impaired) have for a long time been shown to recover better than those who leave have done (Haas et al. 1975; Milne 1977).

To provide the healthiest environment possible for recovery requires recognition of the social environment as a whole (Ursino et al. 1994). Social phenomena and the dynamics of affected communities provide the context for psychological recovery. This paper outlines a model that has been developed from first hand observations of Victorian and other Australian emergencies over the last two decades. It has been taught in the Australian Emergency Management Institute recovery courses for the last decade, where participants have found it an important framework for recovery management and validated its descriptive value in a variety of emergencies, ranging from the Port Arthur shooting to the Victorian drought of 2002-2003.

Phases of Emergency Recovery

Early research in emergencies consistently identified distinct community phenomena (Drabek 1986), usually described as an initial state of disorganisation or shock on impact, followed by a rebound or “heroic” phase in which the community demonstrates altruism and cooperation to organise itself for search and rescue tasks. Then follows a period of high morale, common action and organisation for recovery, often referred to as the “high” or “honeymoon”. This does not last, the unity is broken, and a period of conflict and discord between affected groups, government and recovery providers ensues. Morale falls, people become prey to depression, despondency and emotional exhaustion, leading to misunderstanding and alienation throughout the social fabric. Often those who develop psychological problems after emergencies are found to be casualties of the isolation common in this phase (Kaniasty & Norris 1999; McFarlane & Girolamo 1996). Eventually this period subsides as reconstruction proceeds and leads to a return to effective functioning.

The extent and duration of these phases vary, but their consistency suggests a community process initiated by the disaster. If this process can be understood, it may be predicted and better managed to mitigate the consequent psychosocial health hazards.

The social context of impacts on individuals

The incidence of psychiatric disorders caused by emergencies is usually similar to that expected in non-emergency circumstances, between 10-20% (Smith & North 1993), although terrorist bombings may cause elevated incidence (up to 45%) of posttraumatic stress disorder, depression, anxiety and substance abuse (North et al. 1999). However, there is widespread degradation of the quality of life and erosion of the fabric of relationships (Gist & Lubin 1999). While such problems are not easily identified as psychiatric illnesses (American

Psychiatric Association 1994), they have lasting effects, meaning that people are unhappy, go through the motions of life without enthusiasm, lose the heart of relationships and neglect goals that motivated them. Recent research has identified social embeddedness as a crucial characteristic related to impact, greater embeddedness associated with reduced psychosocial impacts (van den Eynde & Veno 1999). Such effects are part of the social environment formed by the emergency. People with identifiable psychological disorders can be referred to services, but degraded quality of life needs to be addressed by environmental social health interventions based on an understanding of the community processes within which they unfold. Social phenomena are more than the summation of individual problems; they are social dynamics. The community must be understood as a whole, composed of individuals and groups, bound together to respond collectively.

The community as a social system

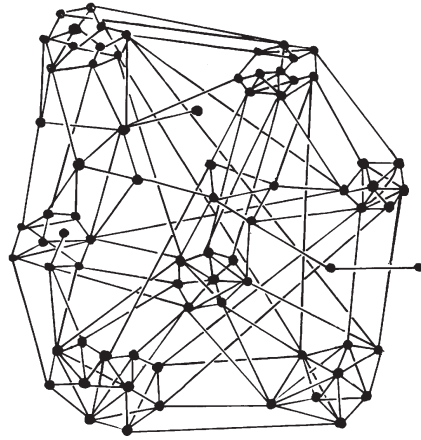
Although the idea of community is often criticised (Dyke & Dyke 2002), it is a necessary dimension of human existence (Miami Theory Collective 1991). Community is not a static entity, but a combination of open ended groupings defined by organising cultural beliefs and practices, constantly open to change (Masolo 2002). Members of communities are united by what they have in common as part of their identity and sense of self, in spite of their differences (Wiggins & Schwartz 2002). Loss of community threatens identity, and is distinct from the loss of primary relationships (Harré 1993). “Communal bonds” linking people to communities are dependent on communication and provide the interactional matrix for meeting the needs of daily life (Crittenden 1992). Dramatic change in community and living arrangements itself constitutes stress (Farley & Werkman 1990; Kaminoff & Proshansky 1982).

People speak about the groups and communities they belong to as entities (Sandelands & St Clair 1993) and media commentators often refer to the “common mind”, “the community”, or “rate-payers”, as though they are a collective entity. The present purpose of developing a model to predict and explain collective dynamics in post-emergency communities is served by the tradition of considering communities as communicational systems (Luhmann 1995).

In this view, a community is a large, relatively stable collection of groups and individuals, organised with coherent relationships on multiple dimensions (represented in the members’ minds with surprising consistency (Woelfel & Fink 1980), and occupying a common locality with a relatively stable social structure of authority, power and prestige and a common culture (Alperson 2002). Its members are interdependent, with networks enabling them to meet each other’s needs and provide security. Threats to survival are delegated to subsystems such as police, fire, medical and other agencies. Although all these characteristics can be debated, they form the basis of a model that can be adapted to the features of actual communities. In this model, a community can be likened to a crystalline structure with social units and subsystems bonded to each other in patterns of varying strength and distance as shown in Figure 1.

The complexity of social systems includes not only multiple dimensions of formal systems, but other dimensions of informal systems such as friendship, acquaintanceship and family networks. Social elements close to each other on one dimension may be distant on another. Neighbours may have occupations remote from each other in terms of their social relatedness; colleagues in the same workplace may have religious, cultural or political affiliations that distance them from each other. Yet as a whole, the structure provides a complex texture of affiliations where close and distant social bonds complement each other on different social

Figure 1: The community as a structure of social units bonded to each other with differing closeness on a variety of dimensions.



dimensions, ensuring each individual has a niche conferring a unique identity, and members divided on one dimension have bonds of mutual interest on others. Conflict is also an inherent part of social life and structure, and can be considered as a different form of bond to cooperation. The fact that communities meet the needs of their members and enable them to lead their lives indicates that close bonds on one dimension compensate for weak, distant or conflictual ones on another so that it does not break up when tensions or conflicts occur.

Social bonds as communication

Since the community is the environment for personal and family life, it is necessary to define the bonds that provide its texture. A central concept which forms the basis for interventions in community processes is that communication is the material expression of social contact and social bonds are expressed as communicational relationships (Harré 1993; Luhmann 1995; Sigman 1987). Social structure is reflected in the structure of communicational relationships; communication between social units creates a relationship between them regardless of its content, which affects the nature and

quality of the bond rather than its existence. A functioning community has social bonds reflected by the full range of modes of communication from personal verbal and non-verbal, proximity, movement and mass media, among others, each modality making its own contribution to the social fabric. There is a direct connection between the bonds that hold communities together and members in the structure and their communicational relationships. Social interventions that work with communicational opportunities have direct consequences on the social fabric of those brought together by the communication.

Social processes as the environment of personal health

Social relationships provide more than emotional support and comfort to individuals. People only function effectively when part of a functional social system. Emotion, cognition, attitudes, identity and other essential aspects of personal functioning are inherently social (Harré 1993). The integrity, organisation and processes of the social environment comprise the greatest resource for personal recovery, mediate the impact of stress and trauma and determine the effects on health and wellbeing following disaster (Freedy et al. 1992). The informal social system is most important in this process, but is often overwhelmed and people have to draw on their neighbourhood and the formal social systems of their community, often for the first time. It is crucial to their recovery that the social system is adapted to these needs, which means specific communicational relationships and opportunities. To provide these, the social process needs to be understood and managed.

The Impact of the Emergency

Debonding

At impact, danger makes people highly aroused and they respond to the specific demands of the situation. Panic, in the sense

of the breakdown of social ties and self-preservation without regard for others is almost non-existent (Cornwell et al. 2001; Johnson et al. 1994; Mileti 1999). The normal social system is set aside because the immediate threat requires they act as individuals or with those who happen to be near, regardless of previous relationships. Roles are discarded in favour of improvised responses to the immediate threat. Individuals or small groups act alone and feel isolated. Emotional responses are usually suppressed in favour of highly aroused, rational action, which may or may not be appropriate given the knowledge, experience and understanding of the situation, but it is not panic. Only where the entire physical and social environment is destroyed (e.g. Hiroshima) are people shocked, dazed, wandering aimlessly and become dependent on outsiders (Mileti 1999).

While survival is uncertain, victims focus on themselves and are out of communication with others in their networks. The priorities of usual social life recede in favour of survival tasks. Because of its importance, this situation means the purpose of social life, which for this model can be characterised as to remove threats of survival, fails, and the community is temporarily irrelevant. The accompanying separation or loss of communication means those involved fall out of the complex, multidimensional social system. They become “debonded” from each other and from the social system, since communicational relationships are the expression of social bonds, and plunged into the uniqueness of their own individual lives.

Debonding may be partial or pervasive, depending on the severity of the threat. It may be (i) predominantly psychological as when a person expects to die and readies her or himself by detaching from loved ones and their own future, (ii) predominantly interpersonal as when a person is changed by their experience so that the assumptions on which their relationships have been based

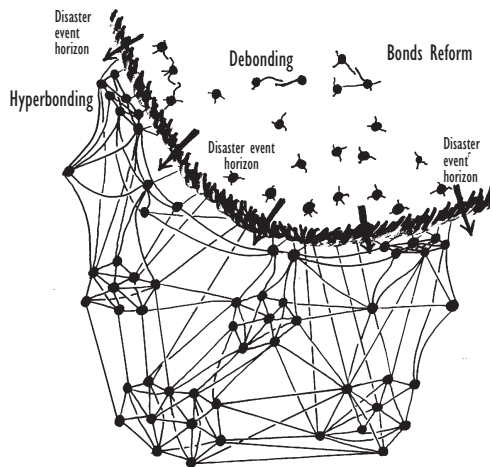
no longer seem important, (iii) predominantly social as when isolation or lack of knowledge means other people or the community is not available or cannot be relied on, or (iv) some combination of all three.

Wherever communication is disrupted there exists an “event horizon” marking the impact zone separating victims from the rest of the community. Event horizon is a term borrowed from black holes in space where the gravitational field is so strong as to prevent the escape of any light or other radiation and nothing can be known about them. At a critical distance from the star, the gravitational field is weak enough for light to escape, and events can be detected; this line is called the event horizon. In disasters, the event horizon is where communication between victims and the rest of the social system is disrupted, such as behind the fire front, within the flooded area, inside the siege building, or in the area cordoned off by police where a gunman is active. For a period, those in the intact social system do not know what is happening or the fate of those inside, nor do the latter know what those outside know or whether they will arrive in time.

Debonding is disconnection from the social system. However, at the time, it is often submerged for the victims in the priority of survival, which makes their immediate environment the focus of their attention. Its consequences are felt later, when they become aware of how difficult it is for those outside the disaster to appreciate their experience. At the time, the focus on survival makes available the totality of their resources in dealing with the crisis and debonding is adaptive. When debonding occurs to the members of a group or a locality, the social system described in Figure 1 undergoes a loss of structure. Instead of a multidimensional crystalline structure of interlinked social elements bonded together by communication, there are two zones of change. The first immediately precedes impact, where warning produces a

tightening and multiplication of communicational bonds as people attempt to come to terms with the threat and decide what to do; this can be considered as “hyperbonding”. The second zone is behind the event horizon where the threat leads to debonding as those affected battle the crisis, out of contact with each other and the larger social system. This situation is portrayed in Figure 2 below.

Figure 2: Disaster Impact. The disaster event moves across the community.



There is increased communication in the warning process producing “hyperbonding;” then communicational bonds are severed at impact as people confront the survival threat individually, creating a communicational event horizon beyond which members are “debonded.”

Debonding is evident within organisations as authority and normal communication lines are suspended and responses improvised unless there has been previous planning and training. Consultation is reduced, autonomy increased and decisions are made at lower levels. People alone in a disaster are likely to be more severely affected, while those in small groups have enhanced functioning; group factors such as a sense of interpersonal attachment to present or absent loved ones, modelling appropriate behaviour for each other, and maintaining hope for others improve survival (Drabek 1986).

Debonding initiates the social process that occurs during the recovery period. It represents a drastic alteration in the social environment and in its capacity to support its members (Gordon & Wraith 1993). But isolation and disconnection from others, if too pronounced or lasting, seriously undermine a person's wellbeing (Kaniasty & Norris 1999). Early intervention in the form of social contact and support as components of "psychological first aid" is crucial to their recovery (Gordon 1997). Debonding initiates a compensatory search for connectedness as soon as the threat is removed, and this leads to the next process to be described.

The Immediate Aftermath

Fusion

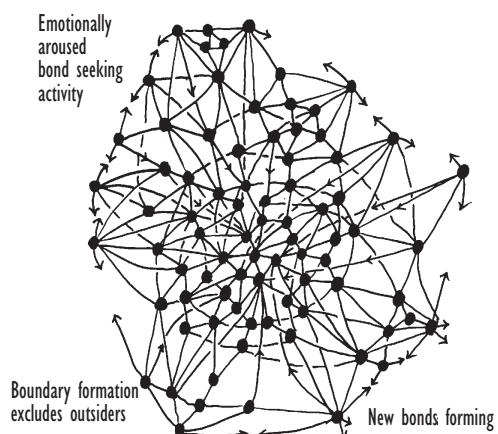
As soon as the threat has passed, the state of high arousal and debonding motivates intense social connectedness as people reestablish communication, bursting into action, setting about search, rescue and stabilisation. They are usually controlled and rational, providing or seeking help with skill, competence and effectiveness (Mileti 1999). There is much to do and a lack of organisation. High levels of commitment to the common good, altruism and self-sacrifice are common in most disasters. Up to 75% of healthy survivors engage in rescue activities without waiting for official guidance, making their own way to medical or other resources, using their initiative and local knowledge (Drabek 1986). Large numbers of people gather in the affected area and milling by those not directly affected is common. Pre-existing and emergent social networks are strengthened with common values of sacrifice and altruism, and barriers between them tend to disappear (Leiversley 1977).

Fusion as compensation for debonding

Much behaviour in the immediate aftermath is communicational, information seeking

and contacting loved ones or community members. However, available information may be incorrect or inconsistent. Contact with those they seek often fails, sustaining isolation and uncertainty, prolonging debonding. But those affected respond actively to these problems, improvising a new social system as soon as possible, which is energised by survival excitement and designed for immediate tasks. The new system has multiple communication channels, little hierarchy and involves everyone in a common process. It serves personal support functions as well as the practical tasks. It is a social system defined by the survival task, but lacks the differentiation of the crystalline structure in Figure 1 because it dispenses with the formality and functions of pre-emergency social life. It can be likened to a state of "fusion" where bonds reform out of the communication required and constitute a relatively homogeneous network illustrated in Figure 3.

Figure 3: The Fused Community. Following impact, debonded community members join in intense indiscriminate social bonds based on the common experience of the disaster and the tasks required.



Bonds formed under the pressure of these circumstances are present oriented, task-focussed, uni-dimensional around the disaster experience, hyper-aroused because of the danger and unusual situation, indiscriminate as people attach to whomever is available, stereotypic around the common experience, and differences are viewed as irrelevant. The social system rapidly becomes overloaded in that everyone needs more than is available and it is unstable because of the rapidly changing emotional state.

Fusion as mobilisation of recovery resources

Affected people are sensitive to others who do not share the experience, and tend to form a boundary around the affected community for protection and to facilitate their own organisation. This excludes or treats outsiders with suspicion, even when they have legitimate roles and contributions to make. There is a centripetal orientation to the fused community around their common problem, and the intensity of their relationships risks them debonding from the larger society on which recovery depends. Recovery agencies and service providers present in the community as it fuses are welded into the system and become part of it. However, if they are delayed, tension may develop as they endeavour to insert themselves into the fusion and restructure the system to serve recovery needs. Community cohesion in the fusion is favoured by external threat, high consensus about priorities, urgent common problems, focussing attention onto the present, levelling social differences and strengthened community identification (Drabek 1986).

As community resources reorient towards recovery, some functions are reduced, such as not enforcing regulations and laws irrelevant to the situation, while there is likely to be reduced crime (Siegel et al. 1999). Formal channels of social participation are replaced by informal mutual support functions. Disaster-specific

norms and principles organise activity. While there is continuity of social resources and culture, there is discontinuity of functions not suited to the emergency situation as new groups, organisations and leaders emerge (Drabek 1986). Emergent roles are filled because of people's experience, skills or other relevant qualities rather than their formal position.

There is heightened community solidarity, intolerance of outsiders and temporary reduction of social distance, especially across class boundaries. Inter-group differences are lessened, cooperation is increased and conflict reduced. Unification of the community compensates for reduced organisation. Social inhibitions and formalities subside and people are bound by a common bond of intimacy called the "altruistic community," "therapeutic community", or "democracy of common disaster." However, only a proportion of members may sustain this structure while the remainder continue with their own lives. Temporary suspension of pre-emergency social regulations may encourage some disadvantaged people to exploit the situation to improve their position by seeking more assistance than they are entitled to or otherwise taking advantage of the relative availability of resources not previously accessible (Drabek 1986).

The presence of others sharing the same fate helps individuals evaluate the impact and validates their judgements, but it also encourages them to make light of their own problems in comparison with those of others. Mobilisation of community support and sharing the experience allow assumptions that may have been shattered by the event to be reestablished by the collective experience. Where affected people are dispersed from the scene, the formation of a sense of community may be prevented. However, if all members are affected, support providers may be unable to meet the needs owing to their own condition (Kaniasty & Norris 1999).

Fusion as a threat to community integrity

The fusion breaks the continuity of normal community structures in a highly energised reorganisation of the communicational system. It is a secondary source of disruption after debonding and is a threat to the pre-emergency structure that provides for long term needs. The quality of communication between the victims and helpers meets people's needs and provides comfort from contact. The intensified involvement often results in loss of privacy and erosion of normal roles and boundaries between individuals, families and groups. Provision of short-term emergency needs may be at the expense of long-term recovery and return to pre-emergency modes of function. Tension develops between these trends, which reverse the fusion state, often within a month (Sweet 1998). Established social tensions associated with ethnic or group solidarity in disaffected groups cause conflict between groups rather than encourage solidarity with the community; this is particularly observed in technological disasters (Mileti 1999). The fusion state is unsustainable and relatively brief, leading to the next process.

Breakdown of Fusion

Differentiation

As the emergency and its consequences subside and other demands of life accumulate, the unity of the fusion breaks down. The fusion's temporary arrangements must give way to the reemergence of the multidimensional crystalline structure of Figure 1. Compared to the homogeneity of the fusion this involves a process of "social differentiation" as social units and subsystems previously unified around the common values and priorities of the emergency, reorganise themselves around differences of role and relationships into a complex system. Ideally, this is a planned transition from the highly energised, improvised collective state to the

preestablished community. However, lack of planning, inexperience, conflicting agendas and social inequality make it likely to produce tensions and conflict. While the differentiation process itself is necessary and inevitable, how it proceeds differs according to the emergency and community. Two pathways can be described: (i) uncoordinated resurgence of differences causing differentiation through conflict, and (ii) coordinated development of social complexity integrating emerging needs into the existing system.

Uncoordinated differentiation through negative emotion: Cleavage planes

Pre-existing divisions and conflicts that are overridden by the initial high solidarity, common emotions and altruistic cooperation begin to reappear. Social fault lines of political, ethnic, cultural and economic differences reassert themselves. This often occurs at a precise turning point, marking the beginning of a conflict phase, which is most likely to occur when effects of various forms of deprivation begin to be felt. Experiences and emotions are communicated in the close interdependence of the fusion, where social interaction and emotional contagion exacerbate stress and increase the sense of aloneness rather than alleviating it. Observations of numerous emergencies and extensive reports in the literature (Drabek 1986) indicate that in these circumstances, rumours thrive, amplifying conflicts and inequalities. Personal relationships reflect these qualities as couples find their partner is unable to be supportive and listen to problems because of their own stress (Drabek 1986; Kaniasty & Norris 1999).

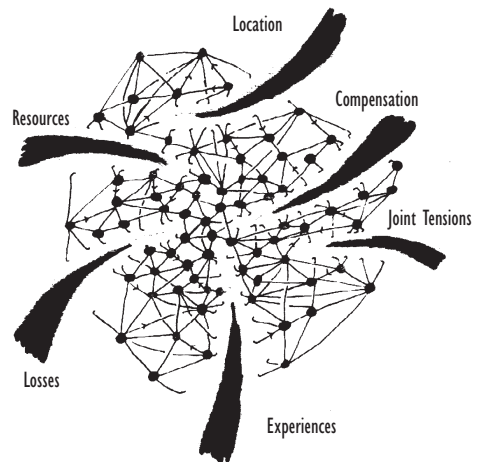
The emergence of differences in the unified experience of the emergency comes into conflict with stereotypic assumptions engendered by the focus on external circumstances of the emergency. Preexisting differences and those deriving from the complex impacts of the emergency, with

their many and varied effects are set aside by the fusion. But they become important with time. The emotionally charged communication of the fusion promotes rumours about the actions or responsibilities of community groups. Tensions are amplified since fused social structures have inadequate systems to evaluate information or manage emotions and they develop into conflict and rivalry. They are expressed personally, but represent different effects of the disaster on various groups. Emotion and hostility are evoked at the boundaries between these groups as their representatives meet in public forums (Drabek 1986).

In a flood or bushfire, the groups may comprise those who lost houses versus those who lost other possessions, those who are insured versus those who are not, those eligible for assistance versus those who are not, those who remained during the emergency versus those who did not, those who intend to rebuild versus those who do not. The boundaries between these groups generate animosity, competition and conflicts. A public meeting, in which a politician announces aid measures, splits those who are advantaged from those who are not. This can be likened to "cleavage planes" in a crystal that represent structural weaknesses in a unified structure and enable it to split. The apparently unified social system of the fused community has multiple differences embedded in it, and when brought into salience by recovery processes, splits into bitterly competing groups. Differences cut across existing bonds and sever their connections as they battle with intense emotions. The fusion breaks up as shown in Figure 4.

Cleavages are defined by emergency and recovery circumstances including how arrangements unify or differentiate community members. They are circumstantial and inconsistent with preemergency attachments or structures and destructive to personal support networks. Families may be close friends and provide

Figure 4: Cleavage Planes develop in the fused community on the basis of divisions between groups affected differently by the disaster or recovery factors.



support to each other, but if one is insured and the other not, it is likely to interfere with their ability to assist each other. Cleavage planes disrupt the fusion's tendency to unify people, diminish their group or personal resources and assert what they share with subgroups or their uniqueness. They fracture support structures and may be independent of pre-disaster social structures. They tend to remodel the community system so that it incorporates the disaster effects into its structure. New identities, systems of communication, common values and boundaries, are formed and maintained at the expense of earlier systems. Bonds are not broken and reformed by social affiliation itself, but out of the sufferings brought on by recovery.

Signs of this loss of solidarity include: disorientation about the recovery situation; leaders' and organisations' failure to respond to needs effectively; agencies clinging to pre-disaster modes of functioning; reduction in social controls; weakening of the system of rights and obligations defining members' community roles; disruption or breaking down of traditional groupings or social forms that provide the framework for interpersonal loyalties; practical or

emotional inability to plan for the future; and reduced openness to innervations (Klinterberg 1979). Conflict is amplified by politicising recovery, bringing political allegiances into salience, by ideological values (e.g., equal opportunity or anti-discrimination) that do not reflect loss patterns, or by vested interests being inconsistent with emergent community needs (Drabek 1986).

However, cleavage planes are not just a function of differences in recovery; they also dismantle the fusion and allow community members and groups to reestablish their identity. The same principle is evident in individual or family development where relationships that do not allow enough independence lead to conflict as a means of creating the required separation. Cleavage planes have an adaptive function in the absence of more constructive processes of differentiation and separation. They are not just a function of real differences, but also of how they are perceived. Observations of disasters indicate their potency can be reduced if an active program to support early differentiation of community groups begins before the fusion breaks down. Coordinated differentiation beginning as soon as possible is the basis for an alternative process to the destructive dynamics of cleavage planes.

Coordinated differentiation through planned recovery

Plans to manage recovery using adaptations of pre-emergency community systems can be activated, and by incorporating emerging groups into a broad system of communication, the existing community processes and structures can reorganise themselves to adapt to recovery needs. As long as the complexity of subgroup and individual differences is acknowledged and equitable relief measures backed by appropriate support provided, the need for cleavage planes as social organisers is diminished. But rigid reassertion of pre-emergency relations of power and control will not recognise emergency needs and will

motivate cleavages. Coordination depends on adequate information about all parts of the community and differentiating groups around their legitimate needs and differences. This can be seen as a complex communication task ensuring that interest groups are validated and integrated into a larger coordinating group.

The ideas that the community is a system of communication and social bonds are products of communicational relationships provide a technique to transform the fusion into a new crystalline structure. New bonds need to form to serve the changing affiliations of community members as issues and differences arise breaking up the fusion. New communication channels facilitate opportunities for new bonds, which lead to new structures, and in turn establish new post-disaster identities. These structures will be recovery adapted if communication is focused around identifying and communicating needs and difficulties within the community. Each issue needs to be related to the whole so there is scope for a new sense of community that can integrate the disaster into its history and facilitate development of new support networks among those who have new disaster-related issues to bring them together.

The constructive differentiation process is illustrated in Figure 5, as an intermediate step towards the establishment of a new crystalline structure. A central coordinating group in the centre (usually with a combination of managers, service providers and community representatives) facilitates communication between the emerging groups so that as concerns become evident they are communicated throughout the system and acknowledged (even if not necessarily remedied). These ordered relationships promote a social environment in which individuals and groups can find new relationships around new needs; they also preserve pre-disaster support networks, by ensuring that rumours and myths are detected and corrected by effective communication, consultation and decision making.

Figure 5: Constructive differentiation through coordinated development of interest groups and building active communicational relationships between them and the coordinating body, leading to the establishment of new social bonds.



Research shows support networks and help patterns are extensions of pre-emergency personal relationship and community systems, indicating the therapeutic community is not purely emergent, but an enhancement of the pre-disaster community. Those with trust in the community and its structures are more likely to provide help to others. Cohesion and mutual support protect against longer-term deleterious effects. However, in large scale or highly traumatic disasters, emerging needs often outstrip resources leading to disappointment and disillusionment. Support mobilised is often insufficient to compensate for the gradual deterioration in personal and community relationships as social networks and relationships become fractured and overloaded (Drabek 1986; Kaniasty & Norris 1999).

New organisations create new links and associations with each other and established services forming a “synthetic community” (Thompson & Hawkes 1962). The community is restructured with a modified network of organisational relationships that

may involve new and more extensive agencies. As stability is attained and normal relationships are restored, the synthetic community gradually loses its function with the return to more complex, pluralistic decision making and allocation of resources.

Strategies for Managing Post-disaster Community Process

A number of strategies mitigate the social process described of debonding, fusion, cleavage planes and differentiation. It is tempting to see them as discrete phases, but the complexity of emergencies and their impact on social systems suggests that this is simplistic. It is more accurate to consider them as interlinked processes initiated when an emergency threatens a social system that is unable to respond. It is a matter of assessing when and how much debonding has occurred and to whom; how much fusion occurs in consequence and how the fusion responds to the need for differentiation as opposed to forming cleavages. Using the principle that social bonds are constituted by communication relationships, strategies can be developed to mitigate each of these processes.

Prevent debonding

Anything that prevents or reduces the phenomenon of debonding will intercept the process at its start. The following are some strategies to assist with this:

- plan and prepare to ensure survival actions are well rehearsed and do not require suspension of community systems;
- provide roles and tasks related to the emergency to preserve social organisation;
- preserve pre-disaster organisation by adapting it to the emergency;
- preserve continuity of social systems, community norms and availability of personal support;

- curtail the event horizon by establishing communicational continuity with victims as soon as possible;
- preserve communication links to affected people; and
- provide relevant, accurate information about all aspects of the emergency to the community as a means of promoting common understanding and collective identity.

Reduce fusion

Anything that can be done to reduce the intensity and disruptiveness of the fusion and begin differentiation at the earliest opportunity by reasserting normal roles and processes will reduce its disruption of the normal crystalline community structure. Strategies to promote this include:

- preserve or reestablish pre-disaster roles and communication systems;
- integrate new disaster-related tasks and roles into existing systems by extending and adapting them to emerging needs;
- provide information about all aspects of the situation to combat naive ideas, myths and rumours;
- encourage checking and validation to discourage emotional contagion;
- provide opportunities or media for structured communication to activate community processes;
- promote emergent groups and coordinate formal and informal networks;
- encourage community advocacy and self-efficacy; and

- assist in defining the membership of interest groups and work with inclusive identities.

Anticipate and intercept cleavage planes

Since cleavage planes come into operation because of perceptions of difference as much as the differences themselves, there is scope to reduce their effect by engaging with the issues that form their basis:

- constitute a community “sense organ” by convening groups to identify differences as they emerge before they become cleavages;
- support this with outreach programs to affected people to consolidate information and encourage representation of all interests in the coordinating system;
- view all anecdotes of tension and conflict as potentially inter-group events and identify whether the problems would be present for other members of groups involved;
- map pre-disaster cleavages and differences and anticipate the effect of the disaster on them;
- identify information lacks and inequalities, and
- take the initiative with community consultation and representation.

Mitigate cleavage planes

Since the destructive consequence of cleavages is to sever bonds, information about what people have in common, in spite of their differences can “suture” the split by providing a new basis for communication. Strategies to bridge cleavages include:

- provide facts to actively manage rumours and myths;

- repeat important information as people vary when they are able to absorb it and when it is relevant to them;
- provide overview information about events and actions so the context is evident, especially for decisions and policies;
- provide media to encourage inter-group communication and exchange, provide anecdotes that disrupt simplistic assumptions about effects;
- provide or facilitate symbols and rituals of an embracing community identity;
- contrast backward and forward looking issues and place these all in the context of recovery;
- promote a concept of a new inclusive future for the community; and
- meet practical needs and provide care as the medium for communicating inclusion and respect.

Promote constructive differentiation

Recovery from disaster means the formation of a new community social system that preserves continuity with the past, but recognises it will never be the same for those who were affected. A new community fabric needs to be developed with a new communicational infrastructure to promote new patterns of social bonds. A principle to promote this is that circulation of information promotes communication, communication promotes the formation of social bonds, social bonds promote the formation of groups and support structures, groups promote common action and common action creates constructive

differentiation. Some strategies to assist this are:

- facilitate new, self-determined community structure and advocacy groups;
- work through community structures where possible, including forming community reference and advisory groups in conjunction with recovery managers;
- encourage self-management with advice and resource support to enable people to make their own decisions;
- assist community communication in all its forms as the precondition to coordination;
- establish disaster-specific communication media to complement existing channels; and
- establish integrated social systems around the developing tasks of recovery.

Conclusion

Community life is usually taken for granted not only as the context of social life, but also as providing the conditions for maintaining many aspects of personal and interpersonal functioning. In disasters and emergencies, the integrity of community life is affected leading to a sequence of processes initiated by the usually sudden and extensive changes in the integrity of community members' bonds to each other at impact. This "debonding" leads to a compensatory "fusion" state, which is effective for initial recovery, but is unsustainable in the long term. The intensity of the psychosocial forces aroused by high threat mean that reconstruction of the social environment must be actively facilitated or the high-energy state begins to form "cleavage planes"

and splits. This destructive recovery environment can produce lasting social and psychological problems.

These dynamics and the role of communicational processes in mitigating and managing them provides a theory to intervene in the psychosocial environment which is as important as environmental interventions to maintain physical health. This theory has been found helpful in managing many events in Victoria over the last decade where the phenomena and strategies described here have been observed. Two recent examples involving consultations by the author illustrate its use. In Canberra following the bushfires in January 2003, the establishment of a consultative committee with representation by residents and active promotion of community process strategies has been successful in managing complex potential cleavages. Recent consultations in the Goulburn Valley in Victoria to communities recovering from the 2002-2003 droughts

illustrate that in this type of event without a discrete start point, the same phenomena occur, but are concurrent. After a presentation of this model to a community group, a dairy farmer who had at first appeared highly sceptical remarked at the end: "What you have presented here exactly describes all of what is happening in our community". Once affected community members and service providers have a common understanding of the process and a set of general strategies, their local knowledge and creative capacities are harnessed for recovery, since they know their community best and will live with the results. Recognising general social processes helps to depersonalise as typical post-emergency phenomena what otherwise would be painful uncertainties and disappointments, reduces personal hurt, and provides a common framework for cooperative reconstruction of the community.

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Correspondence to:

Rob Gordon

Victorian State Emergency Recovery Unit

Department of Human Services

32 Arnold Street

Box Hill, Victoria, 3128

AUSTRALIA

Email: rgordon@bigpond.net.au

Tel/Fax: +61 3 9890 0598,



2018 Symposium

LEADING AND MANAGING IN THE EMERGENCY AND TRAUMA SECTORS

Exploring the dynamics of interoperability before, during and after crises

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The shadow side of learning and culture in emergency services organisations

Dr Christine Owen

Dr Owen's paper was delivered as a non-recorded speech. However, she has supplied the power point presentation slides on which this speech was based.



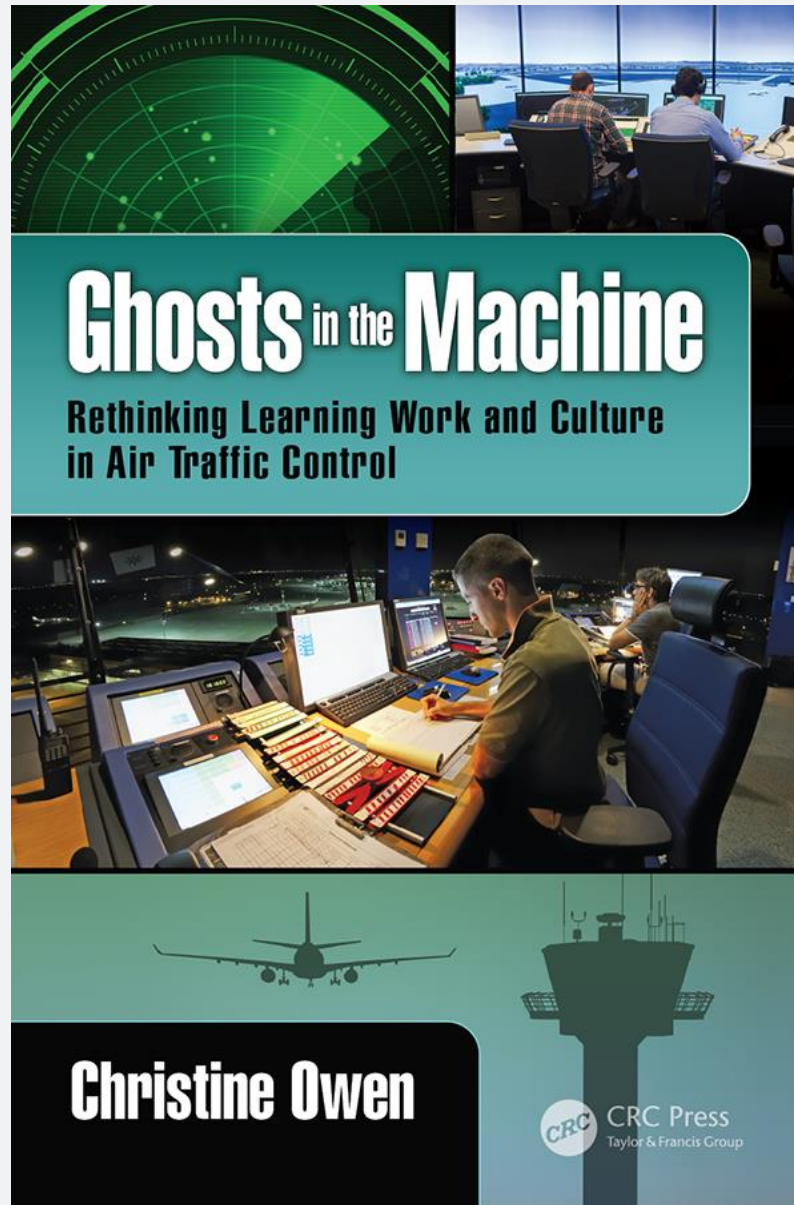
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The shadow side of learning and culture in emergency services organisations

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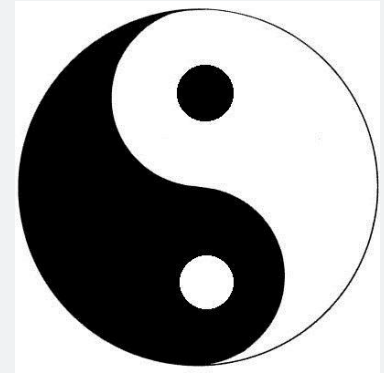
Dr Christine Owen

Australasian Bushfire CRC, University of Tasmania, Hobart



Learning, culture and change

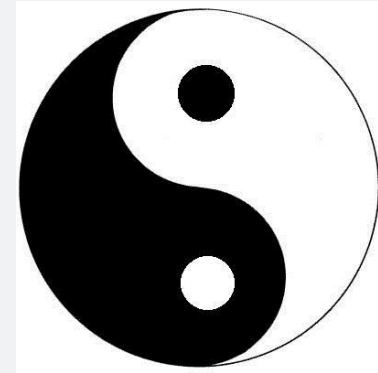
- Formal learning (e.g., on the job training)
- Informal vicarious learning
- Informal collective learning



Shared histories of experience:
ace approach and *sector wogs*

Language used: *training as war* and *the rules of engagement*,

Stereotypes/archetypes *Gun controllers*, *adrenalin junkies*,



“Pushing tin”

A figured world is peopled by the figures, characters, and types ... and projected as part of social identity (Holland et al, 1998,)

Social
identity

Presentation of self in everyday life (Goffman)

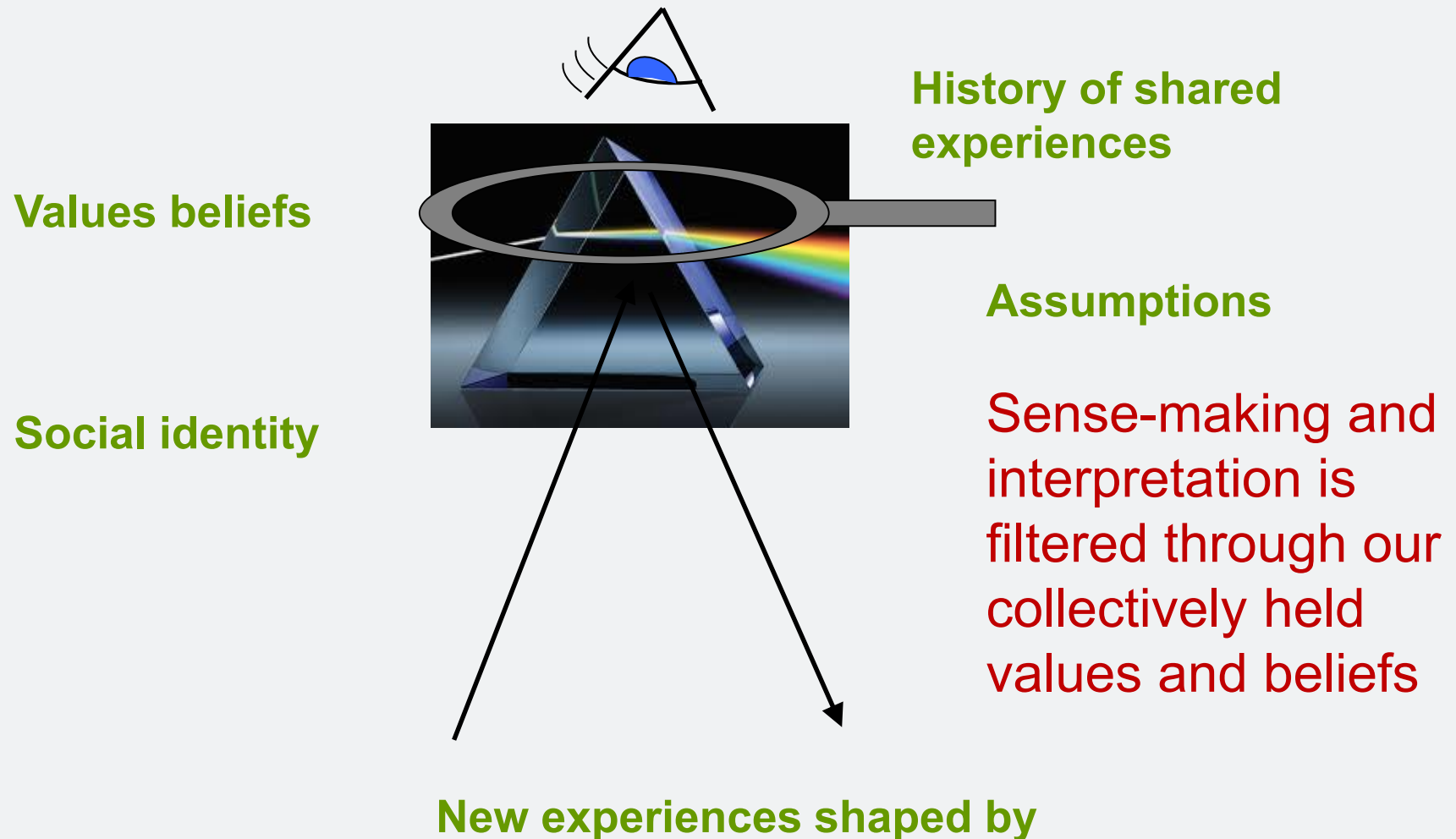
... projected... visions ... organisational culture

Learning is inevitably implicated in the acquisition of knowledge, but it is also implicated in the acquisition of identity.

People do not simply learn about; they also learn... to be.” (Brown , 2000, p. 200)



“Pushing tin”





Three leadership archetypes in emergency services organisations

- The autocrat
- The strong and silent type
- The hero
- The host

Cam 1

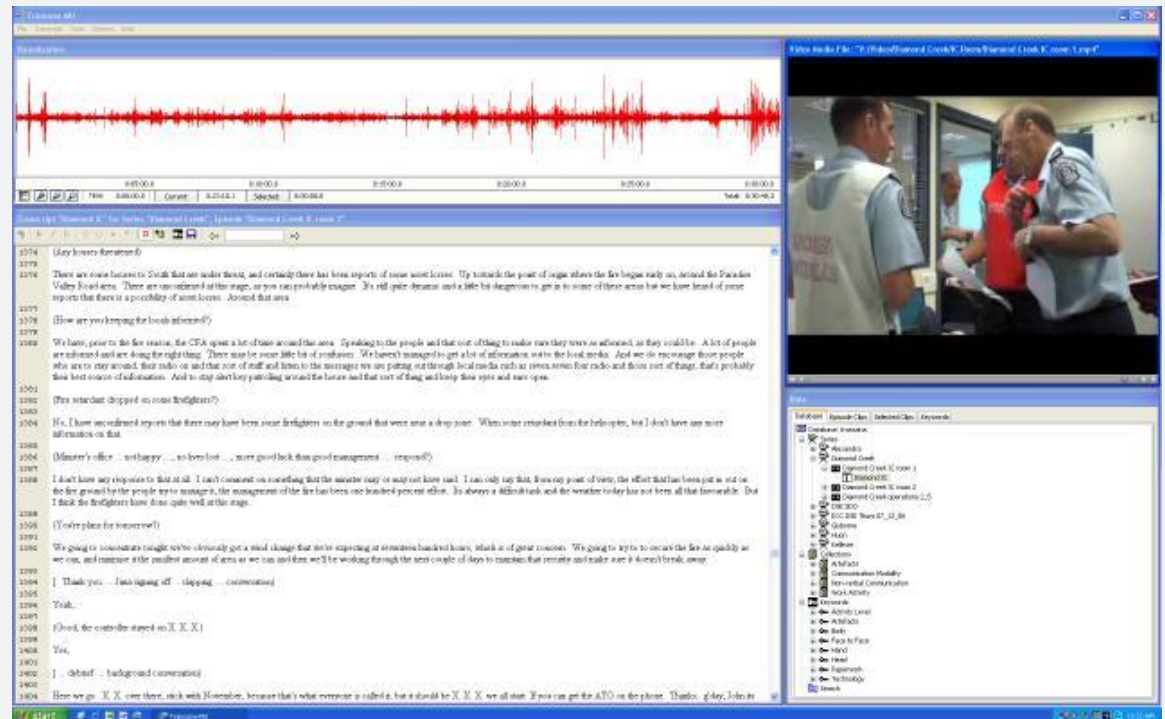


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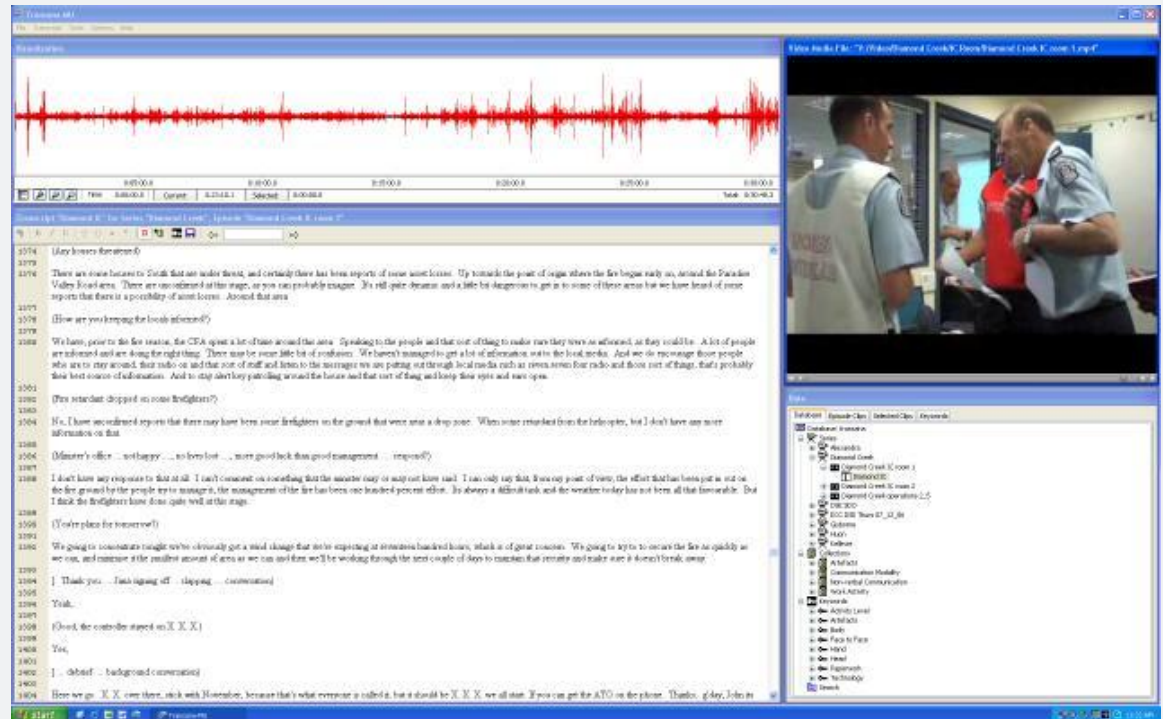
The research used (Observations)



After



Before



*“A bulldog of a man....
A real curmudgeon”*

“A BULLDOG OF A MAN”

ROBERT HOSKINS AS GEORGE IN “MONA LISA”



“A BULLDOG OF A MAN”

Like Edward G. Robinson,
he's a bulldog of a man:
short of stature, with a
shorter fuse.

Get on his bad side and
he'll butt you with his
head, slug you or blast
you with profanity in his
harsh, cockney accent.

"I can't help it!" he barks.
"God made me this way!"



“A BULLDOG OF A MAN”: REBEL TRAIN



A BULL DOG OF A MAN: REBEL TRAIN

The train was travelling faster than it should have, but Greer had always been reckless when it came to speed.

He knew what his locomotive could do... ... **A bulldog of a man.**

Even with a limp, Greer looked as if he could back up the authority in his voice. When he gave an order aboard his train, crew and passengers alike did as they were told.



“A REAL CURMUDGEON”

“A REAL CURMUDGEON”

*“ an irritable and a bad tempered
person”*

LEADERS IN EMERGENCY MANAGEMENT ARE PEOPLE WHO ARE LIKELY TO

1. Head butt, slug or blast
2. Use profanity
3. Bark orders at people - who then do as they are told, and is
4. Bad tempered and irritable

SOMETIMES WE NEED BULLDOGS



Team Members:

- **Inhibition:** may feel inhibited in contributing information but instead only offer *information that is already shared*
- **Decision-making climate (hostility):** There may be lack of cooperation; trust; *withholding of information*
- **Status (power-distance):** higher status members *may reject or disregard* information offered by a lower status team member



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The research used (Observations)

from imagination to impact



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Self-reflections: Incident Controller Simulation

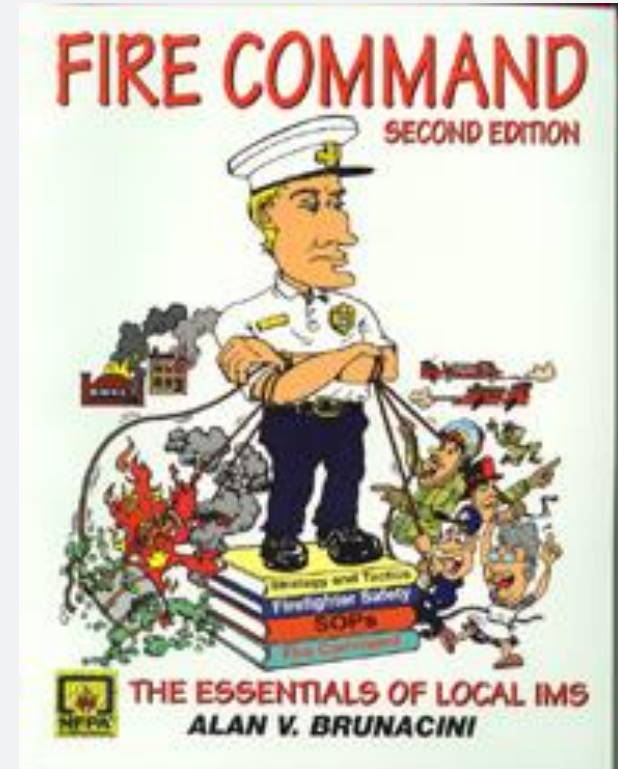
(Phase 3 observations)

bushfire CRC		
IC <input checked="" type="checkbox"/> Ops <input checked="" type="checkbox"/> Planner <input type="checkbox"/> Logistics <input type="checkbox"/>		
Time	Level	Words (3)
9:30	4	Calm / Relaxed Happy.

Til

Impression Management

- convey (and shape) an interpretation of the situation
- “Commander “presence”



THE STRONG AND SILENT TYPE COMMUNICATION CLIMATES

Team Members:

- **Failure to challenge/test assumptions:** *assume* share similar goals, false consensus and collective ignorance
- **Poor communication/shared experiences:** thinking along similar lines but still be incorrect. Assumptions about *sharing meaning* (e.g. Risk, threat, likelihood)

EMERGENCY MANAGEMENT LEADERS:

“It is important that a leader has credibility with those he/she seeks to lead and that they have confidence and trust in the leader’s capacity to do what is needed to be done.”

“One way that such confidence could be facilitated is by the use of body language.”

EMERGENCY MANAGEMENT LEADERS:

“When I have been in command at an incident

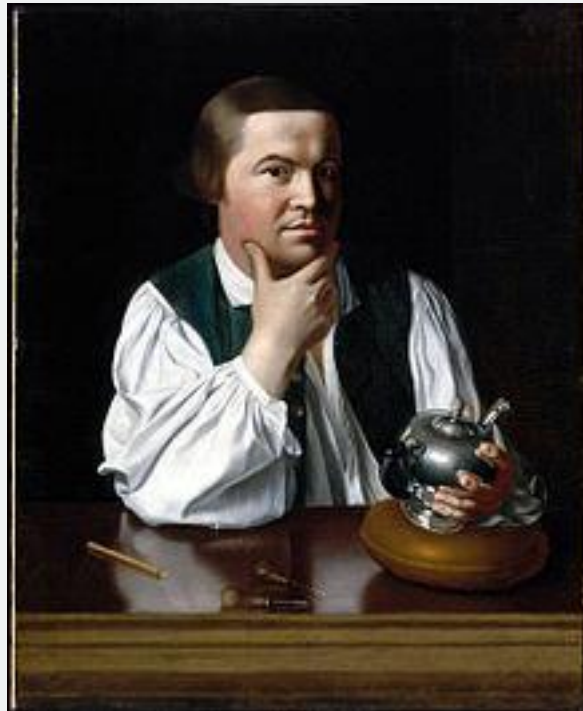
I would adopt a pose which was designed and intended to convey my capacity as a confident and capable leader

EMERGENCY MANAGEMENT LEADERS:

“When I have been in command at an incident I would adopt a pose which was designed and intended to convey my capacity as a confident and capable leader.

*I place one hand **across my chest** while I use the other to **stroke my chin**. And I stand **very still**.”*

PAUL REVERE; “THE BRITISH ARE COMING”



ABRAHAM LINCOLN



MAGGIE THATCHER- THE IRON LADY



THE LEADER'S POSE OF “COMMAND PRESENCE”

*“I place **one hand**
across my chest while I
use the other **to stroke**
my chin. And I stand
very still.”*



Leader as hero



THE PYGMALION EFFECT

We become who we think we are

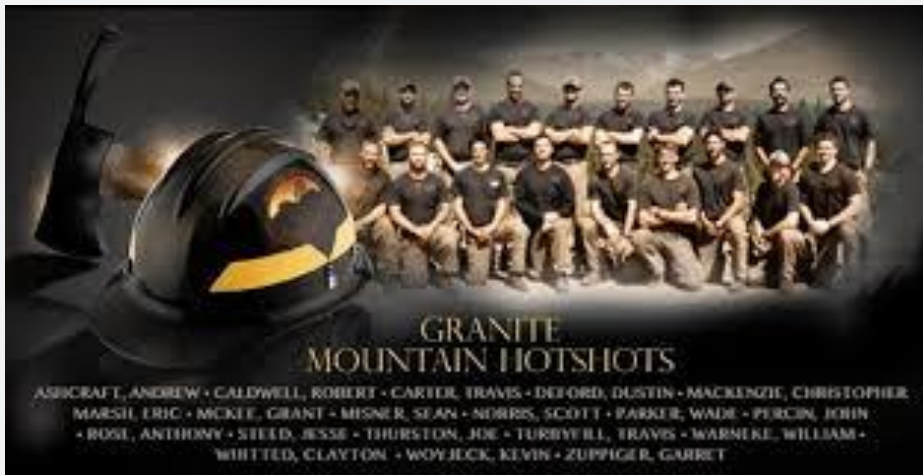
We buy into cultures and identities sometimes without questioning and testing assumptions



HOW DID WE GET HERE?

1. Our expectations
2. Acknowledgement of risk taking (e.g., Dunalley)
3. Social need for “strong” leadership norms

UNDERSTANDING THE YARNELL FIRE AND THE GRANITE MOUNTAIN HOTSHOTS



Host Leadership

(McKergow / Bailey)

6 Roles:

- Initiator
- Inviter
- Space Creator
- Gatekeeper
- Connector
- Co-Participant

*always:
stepping
forward
back*

*Does this
metaphor
apply to
your culture
??
SHOULD
IT?*

4 Positions:

- spotlight
- with guests
- gallery
- Kitchen

HERO TO HOST

HERO - UNITARY COMMAND

- Has the answers
- Don't admit mistakes
- Take control
- Omnipotent hero
- Has authority
- Embody courage
- Superior expertise
- In charge

HOST - SHARED LEADERSHIP

- Ask good questions of others
- Admit what they don't know
- Trust others to get the work done
- Shared leadership "we" not "I"
- Leader as teacher
- Listen to and develop followers
- Provide moral leadership
- Genuine stakeholder engagement
- Make achievements visible
- Offer unequivocal support



IMT Higher Performing Teams

“I hear you”

Effective teams

- more explicit confirming statements;
- checking out assumptions

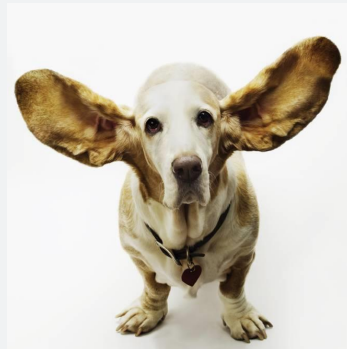


Detecting gaps and inconsistencies: Team members **actively** look for and fill gaps in the team's information base to identify and manage **inconsistencies** or contradictions

Low performing teams

“It’s all good to go”

“ Great”



High performing teams

“It’s all good to go”

“ So you’re fully loaded and you’ll be there by ...”

IMT Higher Performing Teams “I see you”

- Shared observations
- Active monitoring (without meddling)
- Asks for assistance;
- Accepts assistance
- Offers Assistance
- Brokers assistance



**“they’ll do that
but you need to
spell out xxx”**

IMT Higher Performing Teams

“I Get you”

- Dynamic focusing - time

Low performing

“Are you ready for the teleconference?”

“Yeah”



High performing

“this [teleconference] is going to be intense – you need to be ready for that”

Three leadership archetypes in emergency services organisations

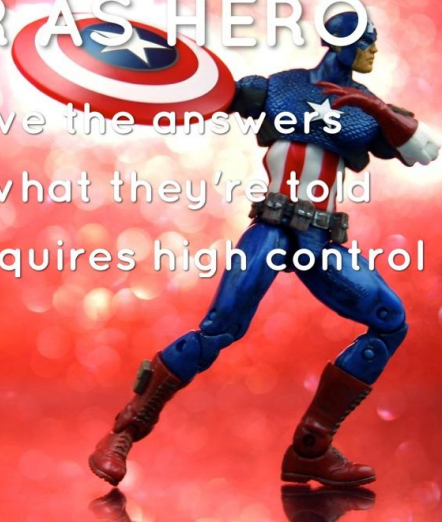
Autocratic Leadership Style

- A style of leadership that keeps all decision-making at the center of the organization.
- Features
 - Leader makes all decisions
 - Supervises workers closely
 - Workers have limited information



LEADER AS HERO

- Leaders have the answers
- People do what they're told
- High risk requires high control



Strong Silent Type

Male Stereotypes

In charge

In control

Acts decisively

Successful with women

Doesn't need to discuss feelings

HERO TO HOST

HERO - UNITARY COMMAND

- Has the answers
- Don't admit mistakes
- Take control
- Omnipotent hero
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2018 Symposium

LEADING AND MANAGING IN THE EMERGENCY AND TRAUMA SECTORS

Exploring the dynamics of interoperability before, during and after crises

Saturday September 15th 2018

Victorian Emergency Management Institute 601 Mount Macedon Rd, Mount Macedon VIC 3441

**From recovery to preparedness: The story of one community
impacted by the 2009 Black Saturday bushfires**

Dr. Janelle Morgan



Dr Morgan's presentation is available on YouTube at the following link:

<https://youtu.be/GdVfPWQsVHk>



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3441

From Recovery to Preparedness: The story of one community impacted by the 2009 Black Saturday bushfires

Dr Janelle Morgan

Good afternoon. Thank you for the opportunity to speak today.

Today I would like to tell you the story of one small community and its journey of recovery following the 2009 Black Saturday bushfires. It is the story of what we did (and in fact are still doing to this day) and something of how I think we did it.

Clonbinane is a small, sparse pastoral community in north central Victoria, located about 80 kilometres north of Melbourne.

Geographically, it lies east of the Hume Freeway and at the northern

foot of Mt Disappointment. The original township of Clonbinane was established on the back of pastoral and goldmining endeavours but now lacks a distinctive township precinct. The 2016 census reported a population of 523.

Background - The Lead Up

By way of background, ahead of Black Saturday we had experienced twelve years of unrelenting drought; each year worse than the one before. Diminishing rainfall, crippling water restrictions and talk of worse to come. And fear - always triggered by the local fire siren. Days spent watching the CFA website, checking to see which direction the fire trucks went as they drove past our place. And praying 'please don't let it be the mountain'. Living at the foot of Mt Disappointment means living with the fear of fire every summer.

And just when you thought it couldn't get any worse - that dreadful week of high 40 degree days. Unrelenting heat and an increasing sense of unease as everything around us became tinder dry. On the day before the fires we recorded a temperature of 47.6 degrees at home. It was so hot the white cockatoos were falling dead out of the trees.

Saturday 7th of February arrives – low humidity, rapidly rising temperature and a punishing north wind. We initiated our fire plan. At about 11.50am the fire siren went off. The starting point of the Kilmore East fire was Saunders Road, about two kilometres away from us. From our back verandah we watched the billowing smoke as the fire raced through a pine plantation on the outskirts of Clonbinane on its way to Wandong.

As we watched, the smoke plume grew and grew; looking like a nuclear blast. At about 1.00 pm the ABC Emergency Radio told us the fire had hit Wandong about eight kilometres to the South of us. We knew that if the South Westerly change predicted for later that afternoon came through, the fire would turn back on us and we would be in trouble. We ramped up our fire plan and we waited. And the siren went on and on and on. It was both comforting and chilling.

By mid afternoon Mt Disappointment was fully involved in fire and as we all know now, the fire moved quickly on to Strathewen, Kinglake, Kinglake West and many other communities with devastating consequences. The predicted wind change came through Clonbinane at about 6.00pm and as a consequence we lost dozens of homes, sheds and farm buildings, innumerable stock and miles of fencing. The sound of my neighbor shooting his injured cattle in the early evenings on the days after the fires stays with me to this day. Clonbinane's losses weren't on nearly the scale of many of the other townships impacted that day, but in such a small community it none-the-less felt overwhelming.

What we did - Relief and Recovery

The local relief effort started within 24 hours - just as soon as it was possible to move around the local roads. The recovery process started maybe four weeks later and was initiated by Mitchell Shire when it called for community volunteers to participate in local community recovery advisory committees. The Clonbinane Community Advisory Committee grew out of that request, and was at the heart of the

recovery process in Clonbinane for the next five years. That's not to say that lots of other individuals and groups didn't also assist with recovery activities because they did. But this story is about the long haul.

Initially the Advisory Committee was a rag tag sort of affair made up of self-selected participants and with no real structure or processes. Its primary task was to advise Council on what the local recovery needs were and to devise and run programs and activities to assist local people in their recovery. Over the next couple of years we ran youth art programs, men's welding programs and woodworking programs where they made bookshelves and gave them (and donated books) to people who had lost everything. We planted trees to improve the park, rebuilt fences and started a local newsletter to let people know what was going on, what services were available and where to get advice. We ran first the of many community events including community dinners, family fun days and a movie night. We advocated for the community and continued to provide advice on recovery matters. We learnt too, to work as a group and became more sophisticated in our operations.

Along side these activities, another critical task during the first two years after the fires was to act as the Project Control Group for the building of a new community hall.

Until the fires the only public assets in Clonbinane had been the fire station and the local park. Within a day, it became obvious that you couldn't run relief and recovery activities from a working fire station. As we worked together people started saying 'we need a hall'. At the same

time, some of us were also starting to wonder if there wasn't an opportunity for us in all the millions of dollars coming into the Bushfire Appeal Fund. We started work with Mitchell Shire to put together a proposal for funds and lo and behold, got a million dollars to build a hall that hadn't existed before the fires!

What we did – Resilience and Preparedness

Around the time of the fifth anniversary of the fires I recall quite clearly leading a conversation in the Advisory Committee about it maybe being time for us to reconsider our role. While we recognized that many individuals and families were still trying to recover from the impact of the fires, maybe it was time for us to think about our future task. In 2014 we held a planning workshop and agreed that while still supporting recovery where we could, and in addition to managing the hall, our primary focus would now be on advocacy and building capacity and resilience in the community. At that time we became the Clonbinane Community Action Group, which is now an incorporated association and since then, have raised close to \$100,000 through grants, all of which goes back into the community.

Among other things we have used that money to continue to run community events like the dinners, short certificate courses, school holiday activities, community markets, arts activities and improving the amenity of the hall by installing a projector, sound equipment, wi-fi and blinds etc. We now have a facebook page which I have to say is very popular with the locals with regard to lost dogs and we have facilitated

the establishment of a number of groups including playgroup, yoga and Open Mic which is a monthly jam session for local musicians.

The decision to focus on building community resilience led us down the preparedness pathway. While Patel et al (2017) found no evidence of an agreed definition of community resilience, for our purposes, we define community resilience as the sustained ability of a community to use available resources to respond to, withstand, and recover from adverse situations. While the idea of community resilience has come to the fore recently in the context of recovery from disasters such as floods and fires, for us it also means psychological shock. We recently found ourselves in the situation where we had to deal with the shockwaves associated with the discovery that the man who murdered Kylie Maybury in 1984 had been hiding in our community for nearly thirty years.

Patel et al (2017) report that preparedness is a key element of community resilience. Those of us who were in Clonbinane on Black Saturday never want to experience another day like it. As a community we want to be safe and well, connected, inclusive and empowered, culturally rich and vibrant, democratic, engaged, reflective and aware; all identified as resilience characteristics in Emergency Management Victoria's Community Resilience Framework (2017).

I think we do this by reference to what Patel et al (2017) refer to as nine core elements of community resilience - local knowledge, community networks and relationships, communication, health, governance and leadership, resources, economic investment, preparedness, and mental

outlook. I have to admit that as a small community committee, we are unlikely to be able to directly influence some of these elements (for example health and economic investment) but we do have the local knowledge, and have been working for some years on community networks and relationships, communication, governance and leadership, resources and mental outlook. That leaves preparedness.

Our efforts towards preparedness so far have included the development and publication of the Clonbinane Neighbourhood Emergency Plan, which provides practical advice in preparing for, during and after an emergency. We have just published the second edition of this plan. We also obtained grant funds to the value of \$27,000 to purchase and install the biggest generator I have ever seen at the hall - to be used in the event that we lose power during an emergency or on extreme heat days. We have also just received grant funds to asphalt the driveway and car park at the hall, which is linked to the idea that the hall will be used as our emergency hub if necessary. Finally, we are working with the CFA, Mitchell Shire and DWELP on a Community Based Bushfire Management project. We were invited to participate in this project because of our high fire risk, and because our committee was recognised as existing infrastructure that could support the project.

We always try to involve as many community members as possible in all of our projects. For example, when we developed our Neighbourhood Emergency Plan we identified 12 key community members that had expert or critical local knowledge that could inform the plan and we went and interviewed each of them. The purchase of the generator

came out of that interview process when we asked people what sort of things could we do to make ourselves safer. The Community Based Bushfire Management project will involve conducting a Clonbinane bushfire scenario (scheduled for next month) to hopefully generate enough interest to establish a small project group who will be tasked with coming up with ideas for practical things that can be done to reduce our bushfire risk. Things like targeted burning, better communication channels etc. Finally, the facebook page has moved on from lost dogs, upcoming events and sunset photos. Now we also use it to let people know about things like serious weather events, power outages, rescue operations etc.

How we did what we did

So how have we achieved what we have done? As I said earlier, when we first got together we were a rag tag sort of bunch - a group of practical people with a diverse set of skills. I sometimes find myself wondering how it is we have achieved so much and continued to work together so successfully for nearly ten years and I think this can be explained by some of the fundamental tenets of the systems psychodynamics theory.

The first I think is the importance of the task to each of us. In its simplest form, the idea of primary task is that which an organisation must undertake to be what it says it is. Chapman (1999) extends the work of Rice and others by defining the primary task of an organisation as 'that one thing the system needs to do in order to survive as itself' (p. 130).

Bion (1961) held that every group meets to do something, that is, carry out a task. Understanding how a group, organisation or system carries out its task, how it feels about the task and how it organises itself to carry out its task is key to understanding organisations and as such, is a critical concept in the theory and practice of systems psychodynamics. Because a group or organisation comes together primarily to carry out a task, the idea of task is intrinsic to the definition of any group.

Long (2000) is of the view that the dynamics of task are best understood by focusing on how role holders carry out and experience their tasks in the wider work system. Task starts as an idea about what might be done and in the doing of it, becomes a realisation. Tasks can be conscious or unconscious, can be experienced as present or absent, can be loved or hated, can be rewarding or persecutory and the carrying out of tasks may in themselves provoke anxiety in the role holder or the whole task system. Tasks change over time and may need to be re-negotiated. Discovering the value of the task says Long, (2000) 'comes through a careful process of engaging with the task and encountering the meanings it has held over the years' (p. 92). It is only by close examination of our 'doing, thinking and feeling' a task can we understand its value.

In summary, the idea and realisation of task is fundamental to an organisation's survival. Understanding how a system organises itself around the carrying out of its primary and associated tasks is a useful strategy for understanding organisational dynamics. Task is best

understood by studying how an organisation engages with its task, how it is experienced and what it has come to mean.

Our task has evolved over time and how we go about our business has become much more sophisticated but the underlying value of our task has always remained the same. For each of us the task is simple and yet compelling. We all want to make sure the Clonbinane community is as safe as possible and strong enough to recover quickly in the event of another disaster. And every time the fire siren sounds, there is a serious car accident or damaging storm or Sunday Creek floods we are reminded about how important our task is to us.

A second factor is that of role. Role is a significant concept within systems psychodynamics and is closely linked to the idea of task. In an organisational context, it is the role holder whose endeavours are directed towards realisation of the task. Reed and Bazalgette (2006) define role as a 'mental regulating principal, based on a person's lived experience of the complex interaction of feelings, ideas and motivations, aroused in working to the aim of a system, integrated consciously and unconsciously and expressed in purposive behaviour' (p. 45). Role is that dynamic place where the individual and the system intersect.

Reed and Bazalgette (2006) suggest that to understand the idea of role in the workplace, one must think about it from the perspective of the person, the system and the context within which the role is located. They explain this in terms of the psychological, the sociological and the contextual aspects of role. The psychological aspects of role come about

as the role holder 'constructs a set of behavioural patterns so that [the person] can act on the situation to achieve a desired goal' (Reed, 1988 p.1).

The sociological aspects on the other hand, are expressed as the expectations of the person in role by the other role holders in the system; the 'boss', the colleagues and the customers for example. The contextual aspects include the internal environment and the 'external, social, political and economic conditions' (Reed, 1988 p.1). Reed and Bazelgette (2006) suggest that the sociological and contextual elements influence the way the person defines the role but that ultimately it is the person who finds, makes and takes the role.

Each of us has found, made and taken up a role, or in some instances, multiple roles within the committee. Some of these roles are formal and necessary as a requirement for incorporation like the President, Secretary and Treasurer. Others are less formal but more important in terms of us getting the work done. We have the fixer-handyman who can fix just about anything; the writer who writes all the correspondence, grant applications and the newsletter; the party organiser who organises all of the school holiday activities; the printer-designer who arranges all of our printing and designs flyers and posters; the event facilitator person who thinks up and organises all sorts of wild and crazy events and finally, the leader-manager who tries to hold it all together.

The management of boundaries is another key factor in understanding how we work and the role of role leader-manager is important in the context of boundaries. It is critical that leaders and managers of organisations maintain the boundaries of their groups and organisations, thus ensuring the 'integrity and standards of effectiveness and efficiency' of the group (Diamond, Allcorn, & Stein, 2004 p. 34).

Boundary maintenance is a difficult task. Boundaries can become filled with anxiety and defensive responses elicited by the potential for boundary crossing from the resultant efforts to work with other parts of the system through integration or collaboration (Diamond, Allcorn, & Stein, 2004). Effective leaders and managers spend increasing amounts of their time working at the boundary, representing their organisations and negotiating with other parts of the system (Czander, 1993). Czander (1993) believes that boundaries between all systems offer opportunities for either collaboration or conflict.

Managing the boundaries in our context has been challenging at times over the years. One example of this was when we first started the recovery process; our relationship with Mitchell Shire was good. The Community Development people working for the Shire were local people, very much involved in the recovery process and they worked well with community groups. They understood the pain people were struggling with, were consultative and worked hard to minimise administrative barriers.

Unfortunately after a couple of years some of these key people moved on. This corresponded with Mitchell Shire going through a significant

period of turbulence and associated high staff turnover in which all of the organisational history was lost. All previous agreements had to be re-prosecuted and this was seriously compounded by the fact that the new council officers had little or no experience of the fires, no understanding of the impact they had on people and were not at all consultative. They just swooped in and started telling us what they were going to do for us. Or was that to us? This was a very difficult time.

It is true to say that for a few years, our boundaries become filled with anxiety and defensive responses elicited by potential boundary crossing and it felt like we were at war with Mitchell Shire. As you might expect, we dug our heels in and were engaged in many battles with the Shire during that time. I am pleased to report for the record, that our relationships with the Shire have improved significantly over the last couple of years since the employment of a new CEO at Mitchell and a much more settled staffing profile.

The idea of containment was critical during that time. Bion has been attributed with the development of the concept of containment, which has a central place in the theory and practice of systems psychodynamics (Bain, 1999). Bion originally used it in the context of individual psychotherapy but later extended it to groups and organisations. Hoggett and Thompson (2002) attribute Bion as using the idea of a mother comforting a distressed child as a metaphor to describe the relationship between the container and what is being contained.

Hoggett and Thompson (2002) point out that containment allows for the transformation of emotion, not its suppression. Once adequately

contained, the energy derived from the transformed emotions can be used for socially constructive purposes in a safe way.

The concepts of container and contained go hand in hand and relate to what is contained within the container. Effective containment is about “holding’ the group and the emotions or anxiety within the group and through repeated experiences of safety and support, the group learns to transform its emotions into constructive energy for creativity.

My sense during our struggles with Mitchell Shire is that containment worked in exactly the same way it is described by Hoggett and Thompson (2002). During lots of committee meetings, an agenda item relating to the Shire would surface all of our anger and frustration about the Shire. Thankfully the containment was ‘good enough’ (in Winnicottian terms) and safe enough to allow us to express our anger and frustration, work through it in some way and then come up with a strategy to progress the matter further. Being able to express our feelings of anger and frustration reduced the risk that these feelings would unconsciously subvert our task (Long and Newton, 1997).

Over the long haul our container or our safe space has worked well for us. Even during the most turbulent of times we have been able to ‘hold’ our place in the system, never lose sight of our task, grow as individuals and as a group and as Hoggett and Thompson (2002) suggest, learn to transform our emotions into constructive energy for creativity.

In conclusion, I think the fundamental systems psychodynamic concepts of task, role, boundaries and containment go some way to explaining why we have achieved what we have and how we have worked together successfully for nearly ten years. Somehow they are the glue that hold us together or the oil that helps the wheels turn. I don't know what the right metaphor is but somehow for it works for us; and largely unconsciously. The group is not at all reflective. We are only inclined to work in the business, not on the business, so it just happens.

Every community impacted by the Black Saturday fires has its own story of recovery. These stories are different and yet the same. How they differ is determined by scale; the extent of the losses, both human and built and the ferocity of the fires as they came through.

How they are the same is in terms of the emotional and physical impacts, the bravery or sometimes desperation of people, the coming together of communities and the lessons learned. I only really know the Clonbinane story but it is one of growth out of recovery and taking its future in hand through preparedness.

Thank you.

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Shared responsibility: the challenges

Ms Kristina Karlsson

Ms Karlsson's paper was delivered as a non-recorded speech. However, she has supplied details of the following paper on which this speech was based.

Shared responsibility: the challenges

Kristina Karlsson

1. Introduction

One of the questions that is posed at this symposium seeks to explore the dynamics at play when responsibility for keeping communities safe is shared with those communities?

What I want to do today is introduce some of the challenges that I see as arising in making the concept of 'shared responsibility' a successful reality in Australia. If citizens are required to take more responsibility for their safety, what might this mean for the role and authority of a member of the emergency services and the organisation she or he serves? What anxieties might the shift in roles produce?

My approach will be informed by some of the ideas in the systems psychodynamics tradition, such as an **adequate containing environment** and Freud's idea of '**magical thinking**' and the idea of a '**social defense**'.

And I will also talk about the idea of '**authority**' and the changing nature of authority between government and citizens. I suggest that there are challenges to making shared responsibility a reality and I am curious about what leaders can do to boost its success.

What I really want to emphasize is that these ideas might serve as useful launching points for further testing and exploration today and in the future.

2. Shared responsibility

I will begin by talking about the concept of 'shared responsibility'.

After the horrendous events of the Black Saturday Bushfires it became clear that the fire services could no longer put out every fire, and could not save

everyone. Australian governments and emergency services have realised that they have finite resources and that they are insufficient, on their own, to address the growing fire risk. Responsibility for reducing harm had to be shared.¹

And this is the definition of shared responsibility in Victoria's Emergency Management Manual² (Part 1, p. 1-7) describes shared responsibility in this way:

The management of emergencies is a shared responsibility involving many people and organisations in the community. It is not something done by one sector of the community to or for the rest of society, although some organisations have specialist roles.

What I find interesting is that this is clearly a wish towards a collaborative, interdependent approach between emergency services and the community. We might want to call the shift to 'shared responsibility' a shift from a role relationship of **hero/dependency** to **partnership**.

¹ According to the 2009 Bushfires Royal Commission, "the concept of shared responsibility recognises that individuals, authorities and all levels of government are responsible for preparing for fire and improving people's safety" (Teague et al., 2010, p.xxviii).

While the concept of 'shared responsibility' came to prominence in the findings of the Royal Commission report, it has its origins in the 1990's when there occurred a paradigm shift in Australian emergency management. This shift marked a change from an agency-centred approach towards shared responsibility with the community. For example, the 2009 Royal Commission notes (Teague et al. (c) 2010, Vol. II, p.4) that as early as 2005, the Australasian Fire and Emergency Service Authorities Council stated in its position paper on bushfire and community safety that one of the fifteen key elements was "managing risk and reducing loss is a shared responsibility between government, householders and land managers."

² The Emergency Management contains policy and planning documents for emergency management in Victoria, and provides details about the roles different organisations play in the emergency management arrangements.

In introducing the idea of a shift from hero to partner, I want to acknowledge the ideas and contributions of Margaret Wheatley and Deborah Frieze³ who argue that the idea and practice of leadership needs to shift from a hero to host model.

3. The context of shared responsibility

But what is the broader context to this shift to shared responsibility? And I want to suggest that it is part of a broader shift, certainly in Western societies, in authority relations between governments and citizens. Where flatter, networked structures are replacing hierarchies.⁴

This shift is linked to a growing distrust of public institutions, including governments. And, as the definition of shared responsibility recognises, the old ways of doing things just aren't adequate for the challenges that we face in today's world. Instead, we must develop **collaborative, 'joined up'** arrangements to find solutions.

4. Organisational and personal authority

And now to authority. A hero demands a certain type of authority that comes from a certain type of role. What should that **authority now look like, and how should it be exercised under shared responsibility?**

Before I explore this question, I want to briefly remind ourselves what authority is. As Hannah Arendt has written (1970, p.45) "Authority requires respect for the person or the office." Authority might also be thought of the element that persuades someone else to do something. It requires that other

³ See Margaret Wheatley with Debbie Frieze. (2010). 'Leadership in the Age of Complexity: From Hero to Host', Resurgence Magazine, Winter 2011. Also Margaret Wheatley and Deborah Frieze. (2011). *Walk Out Walk on: A Learning Journey Into Communities Daring to Live the Future Now*. Berrett-Koehler Publishers.

⁴ This has been widely discussed and written about.⁴ For example, Laloux (2014) wrote a book suggesting that the West is experiencing a new form of organising authority relations, and suggests that we are moving from vertical to flatter structures.

person (or entity) to believe in the source of the authority and to submit to it (Verhaeghe, 2017).

We can also say that there are **different sources** of authority: from one's self, and from the role that one holds. These have been called 'personal' and 'organisational' authority (Gould, 1993).

Personal authority is the authority that comes from within an individual: what can be described as **"one's 'right-to-be'...[and] one's enduring sense of self no matter what role one may occupy"** (p.51).

Organisational authority is the authority that one exercises as a response to the **role** one holds. As Lawrence Gould said it is **"one's 'right-to-work'"** (Gould, 1993, p.51).

5. Processing these changes

I want to now turn to the impact on institutions from these paradigmatic changes to the authority of institutions. It has been argued that organisational life is becoming more **unstable, chaotic, and turbulent** (Trist; Gould, 1993; Hirschhorn and Gilmour). And people are likely to feel anxious by these changes. New roles need to be understood, negotiated with others in the system, and new expectations need to be set. Capability becomes a question too. And it also means that the authority of emergency services and trauma personnel may be seen in a different light.

It requires thinking about roles in new ways; an ability to think about these thoughts. And it requires patience to process all of this change.

How is this thinking and transformative work to be done? What is the right type of supportive environment? This is a key responsibility of leaders and managers. And this is the next aspect that I am curious about.

In systems psychodynamic terms, we would call this ideal supportive environment an **adequate containing environment**, a special phrase and concept that Wilfred Bion, a Twentieth Century psychoanalyst used in his work.

What is an adequate containing environment? It is simply an environment where everyone is helped to grasp and think through the reality of **what is**, so that they can develop new understanding and so be able to take up their new roles.

For those of you who are not familiar with Wilfred Bion and his work, he was a British psychoanalyst who, as a twenty-year-old man, served as a tank commander at the Western Front. He ended up being awarded a Distinguished Services Order.

I mention Bion for **two reasons**. **First**, because his experiences on the battlefield and the insights it gave him in developing the concept of an adequate containing environment are relevant for our work in the emergency and trauma sectors. His horrific experiences on the battlefield gave him “searing insight into what a person needs when in extremity: the sympathetic presence of another mind” (Souter, 2009, p.802). That is, another mind who would “[take in]⁵, harbor, and so modify the baneful force of emotion” (Bion, 1993, p.108, cited in Souter, 2009, p.802).

Rather like a parent holding **reverie** with an infant, such a sympathetic presence has the capacity to sense (and make sense of) what is going on inside a colleague or even a whole organisation.⁶

My **second** reason for introducing Bion is that an adequate containing environment means that, I think that we still need heroes.

I believe that creating an adequate containing environment is an act of heroism.

Because for a manager or leader to do this takes **courage and generosity** – as expressed by Kay Souter in her wonderful paper about Bion published in 2009. As she reminds us, “Mothers who produce non-psychotic infants are heroes:

⁵ “introject” in the original.

⁶ https://en.wikipedia.org/wiki/Wilfred_Bion

they repeatedly open themselves to interpersonal terror, process it, and do it all over again.” (Souter, 2009, p.805).

But what if containment for change is inadequate? What happens then? Role holders are likely to feel overwhelmed, ambivalent and unsupported. Our people may feel powerless, a lack of agency or a sense of futility in their work. Their organisational authority may fall away and they may become more individualistic, because they have access to **personal** rather than organizational authority from which to assert themselves (Gould, 1993, pp.50-51; Hoggett, 2006, p.185).

6. Defenses by the public

And now, to our communities. How do we think that communities are responding to the task of taking up their roles as partners and not dependents?

We know that when groups of people feel anxiety, they may unconsciously **defend against** the reality of the anxiety and develop other types of ritualistic behaviour to cope with that anxiety (Menzies, 1975).⁷ They may avoid reality, deny it, displace it and so on.

If **citizens** are now expected to be more accountable for their own actions in responding to bushfire risk (Gould, 1993, p.51), how are they to be supported to do it? Might we have **members of the community** who feel powerless, ambivalent and ill-equipped to take up their new role? And how confronting might this be when the traditional relation between community and emergency services is one of hero and dependent?

I am curious about how easy we think shared responsibility is to **do**.⁸

⁷ **Social defenses** – are also unconscious group ways of avoiding the anxieties of work by creating ritualistic processes in the workplace which contain the split off, unwanted anxieties from the employees (Hirschhorn, 1990, p.2). We owe the concept of social defense to Menzies’ (1975) study of nurses in a hospital. There she hypothesized that a number of processes “facilitate[d] the evasion [of the anxiety] but contribute[d] little to its true modification and reduction” (Menzies, 1975, p.308). Social defenses will not be the focus of this paper, although are worthy of further investigation.

⁸ The Black Saturday Royal Commission found that the warnings that were issued by the authorities to the public assumed a narrow audience who had reasonably sophisticated knowledge of bushfire

It is suggested that one of the core functions of public service institutions is to hold the unresolved social anxieties from the public (Hoggett, 2006). To take up a role of partner, the public would need to reclaim deeply embedded projective material and enter a fundamentally different relation to the emergency services.

This means that the projections onto authority figures to whom they had previously looked for containment and direction, or whom they had idealized, envied or denigrated, would need to be dismantled (Huffington et al. 2004, p.72). Seeking a collective change to an embedded societal defense mechanism such as this strikes me as an enormous challenge.

So, how can we assess the community's capacity to take up its new role as a partner in the shared responsibility project? To my knowledge, there is little data available to assess how communities are responding. However, historical trends suggest that taking up this responsibility may be fraught. In fact, history tells us that the way that Victorian citizens relate to authority with respect to bushfire risk is, generally, one of **dependency**.

Current research suggests that the Victorian public, over many generations since white settlement, has remained **complacent** about preparing for the risks of bushfire. The research suggests that the public tends to overestimate its ability to plan and prepare (Boura, p.xxxx, cited in Ginnivan and Handmer, 2014, p.4).

risk and behaviour and well-thought out fire plans – such knowledge would not ordinarily be possessed by the public.

The Commission found that the warnings did not take into account the lack of ability of the public to think and act in high stress situations. In such situations, the Commission argued, humans have a “[tendency] to wait and see and leave the area, only when they receive a clear indication ‘trigger’ that they are in danger” (Teague et al., (c), p.2).

The Commission also found that the warnings did not take into account the low level of the community's knowledge of bushfire behaviour. In the shift to the new roles of ‘shared responsibility’, it is also apparent that the emergency management sector has assumed too much about the knowledge and capacity of the public to participate as a partner.

This complacency can be traced at least as far back as to Black Friday in 1939. In that series of fires, seventy-one people died. Millions of acres of fine forests were destroyed and small townships were obliterated.⁹

Judge Stretton, who presided over the Royal Commission into the Black Friday fires, wrote that the people who lived in the forests of Victoria had “not lived long enough” (Stretton, 1939, p.5). In relation to one wood mill whose community was wiped out he wrote: **“The full story of the killing of this small community is one of unpreparedness, because of apathy and ignorance and perhaps of something worse.”** (Stretton, 1939, p.5). Professor Tom Griffiths (2009) an Australian environmental historian argues that the “something worse” was a denial of the risks of fire and complicity by the community of deferring responsibility for understanding risk and preparing for it.

I’m curious about whether this denial might come from a very deep seated fear of the bush – at least in the unconscious collective minds of non-Indigenous Australians. It is argued, for example, that until this current century at least, the Australian bush has been the source of great anxiety that has been captured in the works of many non-Indigenous artists and writers: as Hickey (2017) recently wrote, “children went missing, men went mad, and women suffered what Henry Lawson called the “maddening sameness” in *The Drover’s Wife and Other Stories...*”.

And I wonder if such fear affects our ability to take up a more responsible role as a partner in emergency management. Perhaps this fear of the bush gives rise to dependency.

The final point I make here is that the Black Saturday Bushfires Royal Commission found that the emergency services had also overestimated the public’s ability to understanding warnings, bushfire behaviour.

7. Magical thinking

⁹ Victoria was reliant on the timber industry at that time, and a large number of small mills were dotted through forested areas. Communities had sprung up near the mills.

Sigmund Freud and others talked about primary and secondary forms of thinking. One basic form of thinking has been called “magical thinking”. This is where I believe that my thoughts, actions, or words will influence the course of events in the world (Encyclopedia Britannica, entry for magical thinking) **or**, Freud himself put it, “mistaking an ideal connection for a real one” (Freud, 1962/1939, p.92).

More sophisticated thinking uses reality as a guide for more rational thinking. This allows for a more adaptive response to the world.

I am curious whether the desire for shared responsibility might constitute magical thinking.¹⁰

Because I wonder whether we have adequately taken into account what we have to work through – **what adequate containing environments we need** - to make shared responsibility successful.

As I have briefly painted here, shared responsibility needs to consider the shifts in roles, changes to authority and the capabilities that are required. And, what projections need to be reclaimed by communities and how might this be done?

8. Conclusion

So to conclude, I have suggested that the shift in policy to shared responsibility might be thought about as a desire to shift from a hero/dependency relationship to a partnership. Clearly, the shift in roles is necessary. But, as I have briefly set out, shifts of this scale are not without their challenges.

So, we might wish to ponder these questions:

- How do we continue to navigate changing roles in our work?
- How might we locate and work through unconscious forces that are likely to be at work to make these role transitions successful?

¹⁰ Sigmund Freud (among others) wrote about the concept of magical thinking in *Totem and Taboo* published in the year that the second world war broke out. (Freud, 1962/1939).

- What sorts of adequate containing environments might we need to do this?
- And how difficult is it to do this 'slow' work in organisations whose mode of operating seems to be characterized by fast pace and adrenalin.

The challenges that arise from such major role shifts need to be addressed. If they are not, then the promise of safer communities through collaboration between government and community may not be fulfilled.

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2018 Symposium

LEADING AND MANAGING IN THE EMERGENCY AND TRAUMA SECTORS

Exploring the dynamics of interoperability before, during and after
crises

Saturday September 15th 2018

Victorian Emergency Management Institute 601 Mount Macedon Rd, Mount Macedon VIC 3441

The Organisation Development Role in Emergency and Trauma Services: Heroes and healers and the psychodynamics within these environments

Susan Long

Fiona Martin

Michelle O'Sullivan

Alison Smith

Karen Sovitslis

Gabrielle Wolski

"There are few business activities more prone to a credibility gap than the way in which executives approach organizational life. A sense of disbelief occurs when managers purport to make decisions in rationalistic terms while most observers and participants know that personalities and politics play a significant if not an overriding role. Where does the error lie? In the theory which insists that decisions should be rationalistic and nonpersonal? Or in the practice which treats business organizations as political structures?" (Zaleznic 1970).

This quote from Zaleznic in 1970 is still relevant today. Although we know that rational and non-personalised approaches to leading and managing (nowadays often based on research

evidence) are best for the organisation's prosperity as a whole – that includes, having clear and transparent processes that are followed, clear roles, tasks and accountabilities, and collaborative leadership with engaged followers – we also know that power and political manoeuvring for personal interests get in the way. Moreover, increasingly we understand that these two perspectives – reasonableness and political ambition – strive against one another within people not just between people and often form the basis of ethical dilemmas for even the best of leaders. It is this field of contention **within** people – emotional experiences in the work, the ways they experience the tensions, the unconscious factors and biases that influence them, the anxieties that these tensions produce and the stories they tell in self-defence even to themselves when decisions are made – that is the ground of psychodynamics.

But again, it is not so simple (as if that were simple anyway). Social dynamics make the story more complex. The tensions **within** people become externalised. One way to resolve internal tension is to allow different people to take one or the other side of the tensions. For example, if I am conflicted about my wish for power, it helps to attribute that wish to someone else, who is seen to be even more power-hungry and I can remain seemingly logical. Or is it that external tensions **between** people become internalised? If two people who I respect and love are opposed, I start seeing the issue from both sides and the tension is in me. The social and personal dynamics are intertwined. There is no starting point in a linear sequence, only an ongoing interplay (Long, 2000).

These known and unknown (unconscious) tensions can only be accessed by examining the psychodynamics within individuals and groups - small and large. Techniques of role analysis, reflective practice, data triangulation and examination of parallel processes are useful methodologies. These approaches provide some objectivity to a subjective context. They allow discoveries through curious exploration.

So, with those systemic dynamics in mind, we will present some ideas about emergency and trauma or acute health services. We will draw on our collective experiences and provide some case studies to provoke your curiosity into what might be happening in these important public sectors. We have chosen to look at organisations from within, with the pivotal perspective of trying to understand what the role of organisational development is in these sectors. What is its function? How does considering this help us to understand dynamics as they are played out: the dynamics of reasonableness, politics and psychodynamic processes – all of which we understand as socioanalytic dynamics.ⁱ

Basic Assumptions

Fire and other emergency services are predicated on fighting a disaster as if in a war zone with that disaster, hence the term “fire fighters”. They are sensibly geared up to do this. Bion (1970), a psychoanalyst who studied group dynamics, refers to this as working with basic assumption of fight/flight. Organisations with such a basic assumption often adopt command and control cultures with strong hierarchies. Interoperability in such situations requires clarity of authority across organisations.

In addition, these organisations must take care not to carry the “war” mentality into peace times. This is because, while command and control is effective at times in acute situations, it

interferes with collaborative cross-organisational work in non-emergency times. Command and control styles tend to reduce follower commitment in everyday work, whereas follower engagement is nowadays seen as more likely to improve productive work. Moreover, command and control leadership across inter-organisational collaborations runs into the difficulty of followers being confused by conflicting loyalties. If differing messages come in, which authority holds? This must be resolved collaboratively for crisis situations in times of non-crisis, so that in crisis times, everyone is less confused.

The consensus seems to be not either/or, but both and, when it comes to these differing styles of leadership ([https://hbr.org/2012/02/is-command-and-collaborate-the new](https://hbr.org/2012/02/is-command-and-collaborate-the-new)), depending on the situation.

When command and control is inappropriately used in “peace” times, the dynamics that sometimes emerge are as follows:

- A “them” and “us” rather than a “we” mentality emerges between different organisations, because things are done differently in different systems and organisations; Sometimes the “them” and “us” mentality is strong in organisations close to each other – the tension of neighbours – called the narcissism of minor differences. This “is the thesis that communities with adjoining territories and close relationships are especially likely to engage in feuds and mutual ridicule because of hypersensitivity to details of differentiation”. (Wikipedia) Freud chalked it up to the innate human proclivity for aggression and the desire for distinct identity. To see one’s neighbours reflect and mirror oneself too much, threatens a person’s unique sense of self, and superiority. It’s what political scientist Stephen Brooks calls the “uncomfortable truth of resemblance.” To alleviate this injury to one’s ego, one downplays their similarities with others and emphasizes their divergences — which can be amplified into seemingly unbridgeable rifts.
<https://www.artofmanliness.com/articles/the-narcissism-of-minor-differences/>
- This can occur even in different sections of an organisation, and opposing sub-systems and sub-cultures emerge, to the extent that the overall organisational purpose is jeopardised;
- Purpose and roles are less clear because there is no external disaster to face;
- Territories become all important and sharing information is regarded as losing territory.

Emergencies also generate dependency – a deep wish to find someone, some group or a set of stringent rules that can take control and be depended upon, such that followers don’t have to think too much for themselves or make difficult life depending decisions, lest they carry the blame if things go wrong.

Recovery and prevention are important aspects of the emergency and trauma sectors and it is the sustainability of organisations and their interoperability in these “peacetime” periods that leads to even greater capacity to work in crisis because the foundations for the “fight” are in place. That is, collaboration can increase the clarity and authorisation processes that are developed during strategic interoperability and needed in times of “war”.

The OD Function

An important function at these times is that of organisation development. Organisation development (OD) can be loosely understood as that function that examines the systemic issues in organisational structures and cultures and facilitates change in persons and organisational systems to promote the capacity of the organisation to carry out its purpose. Yet often the OD function is given little authority within the organisation. The reasons for this are complex.

The complexity lies in the multiplicity of co-existing dynamics occurring within organisations. For instance, gender balance and political power. Each factor will have different implications for how organisations function in war and in peace times.

- OD is a service function rather than a frontline function and thus has less power and authority in a hierarchical, quasi-military structured organisation. Consequently, it has little control over organisational resources, information and legal prerogatives. OD has to gain its organisational power through expertise, understanding of organisational dynamics and gaining the respect of those in power and authority.
- OD is not part of the basic assumption “fight” that sustains much of the organisation. Hence it is often at odds with a command and control culture. If we are to understand the model of basic assumptions, OD is more likely to work from a pairing (one on one helping) or perhaps dependency (helping the organisation) model. This tends to translate into collaborative cultures with flatter management.
- OD has a noticeable gender bias. It is often the province of female practitioners. Emergency services are very masculine organisations. This may help to create the difference in gender cultures.
- OD consultants (and women) are often relied upon to be nurturing rather than challenging in their support. What would OD be like if it was not nurturing?
- OD can be understood within the general rubric of “helping professions”. Such professionals are expected to be in the background and their success is linked to facilitating others who are seen to ‘do’ the work; hence, their work is often devalued because less visible. It’s impact is less tangible.

Each of the above points indicate that OD is a function with a culture quite different from the fight-flight, command and control cultures of emergency services. How then can it gain influence in order to support the organisational purpose?

We offer some brief vignettes in our examination. These do not give any definitive answers to issues within the services. They raise many questions worth exploring.

Vignette 1

This vignette sits in the context of societal expectations that emergency and trauma services will protect citizens from horrific events and the associated expectation of infallible leaders; whereas these services are simply human. The Victorian Black Saturday Royal Commission (VBRC) can be thought of as an example of society’s expectations that it could call to account in a rational way that which is irrational; a belief that a rational solution or answer

could be located in fire management, as if that would stop a wall of flame. These were environmental conditions never seen before and a complex spectrum of issues contributed to the disaster.

One of the recommendations was improvement to leadership capability. To say that we need to improve is, at the same time, to say that we are not good enough. That is really hard to hold for individuals and organisations and all the more so when it is emergency and trauma services who take on and themselves believe in such high expectations to provide infallible leaders. For this reason, it is understandable that our organisations may find it difficult to enable the OD work attending to improvement to organisational leadership capability.

This is the brief story about the experience of an OD practitioner arriving into the sector just a few short years after the events of the VBRC and asked to take up the task of working first with one organisation and then with a group within the sector to enable leadership capability development.

The work has been rewarding, interesting, challenging, enjoyable and frustrating. So many talented and committed people have made significant contributions. There is much that is still to be processed, thought about, reflected upon. Parts of the story are not ready to be told just yet. But there are aspects for which the forum of this Symposium provides a timely place to speak about and consider together if better use is to be made of OD capability in the sector.

Given the challenge that the work presents it has been surprising that some people and their organisations (but not all) have taken up this work and in relatively short timeframes. It is with curiosity that the following experiences are shared.

- Extraordinary process delays occurred at significant points for no logical reason. It is as if the system is seeking to 'bog down' the work so it is stuck in the mire.
- The real lived role of the practitioner has never been formalised within an organisational structure. The work does not have authority within the organisation. It is as if the role operates 'incognito'. One might ask what purpose this is serving in a system that is dominated by hierarchy.
- There is no allocated desk in any of the organisations involved in the work. It is as if the work is everywhere but nowhere.

This experience raises the question, are OD roles integrated and partnered or are they held separate within our sector? If OD practice is held separate and tightly contained it may be useful for people to consider why those who undertake OD work (OD types) are contained rather than enabled? OD is about enabling organisational transformation. If an organisation embraces OD it is embracing the need for transformation. Is this perhaps not a tolerable thought?

And then we might ask ourselves what might happen if OD were truly integrated?

Vignette 2

Fire, flood, motor vehicle accidents, storms or severe weather can create a sense of great anxiety. They can cause untold damage – to person, to property, to loved ones, to sense of self. Each of these is outside of our control – largely – and we can seek refuge or shelter within the safety of a system or hierarchy.

As an OD practitioner, I have worked in two organisations that function within the emergency services realm – one as a direct provider of services and one as an insurer of those involved in the events. In both organisations I have worked on key pieces such as values, transition, restructures and culture change. These themes are central to an organisation's life – how it functions, how its people behave, how they traverse change and transition. All of this requires trust and collaboration or partnering with the OD practitioner. Where that trust or collaboration is impeded, then the work with OD is much harder.

In a fire organisation this partnering or collaboration was difficult. To partner or collaborate, you first need to relinquish, or share, power. If everyone relies on the hierarchy to deliver or make all decisions rather than having well delegated practice, then working together becomes something to defend against. How such defences play out is both an opportunity and a conflict for the OD practitioner.

Determining how to work in partnership is the basis upon which this work can be done. In my experience, trust is not easily achieved and does not stand firm. I wonder why the trust ebbs and flows. I believed it was due to the lack of consistency (of leadership roles) within the organisation at the time. However, this did not explain why organisational development activities or exploration were always difficult. Exploring the fabric of an organisation that is built on hierarchy and traditional values makes progress to a contemporary organisation almost impossible when the challenge is explored as a technical challenge only. Such work requires an adaptive approach – one where we can explore and ask questions together (Heifetz 1994). Where we can be vulnerable and see the issues through multiple lenses. While technical problems have tried and true known answers *'Adaptive challenges can only be addressed through changes in people's priorities, beliefs, habits and loyalties'* (<https://www.mayersonacademy.org/blog/diagnosing-adaptive-vs-technical-leadership-challenges>).

Emergency services organisations tend to conceptualise their challenges in technical terms, while OD must work with adaptive challenges.

In another setting where the work was on the periphery of emergency service, organisational development practice was achieved. I have experienced this in a transition role during a time of great change and loss. What was experienced there was a deep sense of co-commitment to a positive outcome for all staff. There was a focus on how to understand the work and deliver the work rather than how to defend against it. Was this more possible because of the distance from the "front line" of the emergencies? Is there more opportunity for reflection and vulnerability if you are not delivering in a service role?

An opportunity exists for emergency services if a willingness to embrace internal interoperability was undertaken. This may provide the platform from which to explore, be vulnerable together and grow.

Vignette 3

With a background in tertiary public health care (acute, community and mental health) predominantly in Australia and the United Kingdom, my perspective is slightly different. My teams are often recipients of OD programs, engaged to assist the organisation adapt to change at a behavioural level (such as adopting organisational values, developing leaders, responding to clinical transformation agendas, etc.). At times, these changes are imposed, unilaterally; the unintended consequences are that leaders feel that their leadership and efforts have failed. There is a constant adjustment to new visions, directions and expectations (some of which are covert rather than overt).

In public health, there are strong trauma contexts. There are parallels with those in traditional Emergency Services - the work is often about survival and rescue. Frequently, saving lives could be considered the main task in such acute health organisations, especially for those working in hospital settings. This focus often conflicts with a preventative health approach or an improved quality of life approach when resources are slim (which can contrast with community health and rehabilitation or preventative health models and services). It should be noted that across all these fields of health care, monitoring and improving quality does feature strongly.

The nature of government funding of health services might be seen, or experienced, as punitive. There is often a sense of inadequate resources or time to do the work for so many patients. Community expectations are at odds with the capacity of services to respond to their needs – people want to live longer and do more than just survive; they hope for the superhuman to rescue them, but also to transform their state of illness to wellness in many instances (at one level they believe in miracles and the fantasy of omnipotent healers).

Large public health organisations, generally speaking, have strong hierarchies and typically operate with a command-and-control style of leadership, processes and principles. Those that can rescue others have a notably different status and level of power and influence. The effects of this system within the organisation may be seen through the cognitive and emotional responses of staff. There can be a conflict between autonomy, choice, coercion and compliance. Inadvertently, there is at times a suppression of thoughts and feelings. Staff suppress information (consciously or otherwise), and in certain circumstances, appear to find it difficult to think clearly and independently. There is a sense of what is politically correct in behaviour and that to speak out can result in being 'shut down'.

Menzies-Lyth (1988), in her seminal work about the nursing profession, identified a number of de-humanising behaviour patterns that were hypothesised as defences against anxiety in the face of death and pain. There are other works that also speak to hospital dynamics that exist in trauma contexts (see Armstrong and Rustin 2015 and Hinshelwood and Skogstad

2000). These are ways that I see front line staff coping in these large hospital networks to manage the emotional response to their work. , Although this is not true for all staff, such as OD staff. This sets up a difference and perhaps plays out unconsciously. Could there be envy underlying this sense of ‘the other’ for OD and front-line staff?

OD programs, in my experience, are often used to facilitate different styles of behaviour. Leadership, for instance, that is more nurturing and reflective. However, it seems to me from my observations in different health organisations, in practice this is a less favoured style than the dominant authoritative model. It does not seem to be sustained. This puts the work of OD into question – for whom is it important to change the behaviour and attitudes of staff within organisations?

Perhaps these observations and patterns are all defences against attending to the trauma inflicted within staff from their work with people who are sick and dying, where demand for healthcare leads to feelings of being overwhelmed and not being able to treat everyone who needs help from what I am noting. There are potentially feelings of guilt, shame and impotence just below the surface. How do these impact on the intent of OD programs in these environments?

Funding restrictions result in the need to do more with less. Cycles of change and transformation to better use limited resources and improve efficiencies have their place and are often seen at the change of commanders-in-chief, or when old systems are no longer tolerated. OD practitioners and teams often function in these spaces as well, in my view, with mixed success.

I have begun to question how much of the work at the public health leadership level is an indication of avoidance of the traumatic nature of the work. Does the OD program assist with a hopeful feeling that something can be done about the distress in the organisation? Patterns of multiple committee meetings may be another example.

I am curious. What all this is pointing to? How do public health organisations reflect on their experiences? Why do they find it hard to think? I surmise that the command-and-control features foster large group basic assumptions of dependency but also fight, flight and fright.

Data from State-wide public health People Matters Surveys and Patient Experience surveys are perhaps indicators of the dynamic tensions experienced by staff and felt by patients. When morale in staff is low, patient experience is also low.

Cumulative trauma at an organisational level is not spoken of in the circles I move in until I started to raise it in my current organisation. However, should this be an operating theory, it is possible that staff individually and collectively are projecting their intense feelings onto others. Are patients “the other” to professionals in order to help them cope? Do OD practitioners and programs also fulfil this at an unconscious level. Could that be why they have limited authority and a small profile?

Vignette 4

At a recent meeting with OD and learning and development (L&D) practitioners, the topics raised included seeking funding for a research project to explore how we implement a leadership capability framework within the emergency services (particularly fire services). A discussion emerged about the disconnect between theory and practical application of leadership capabilities within the emergency services. Parallels were drawn between OD (theory) and L&D (practice) and how we can learn and work together to achieve an outcome.

This poses some challenging questions as to how organisation development can best link theory to practical application. How do we embed the leadership capability framework in a practical organisation? When thinking about the emergency services it was observed there is a tension when seeking to connect strategy and practical application.

A member of the group raised a question. 'What is the vested interest in keeping the organisation stuck'?

This drew my attention to the question while checking my own experiences, using the internal data that I held. My main hypothesis (*in a fire service context*) "Do we need crisis to maintain heroism?"

If we constantly manufacture crises this maintains the status quo. The challenge for Fire Services is that these manufactured crises are so numerous that the organisation has no capacity to learn from them. Thus, maintaining the status quo is again enforced.

It can also be said that the emergency services are a receptacle for the anxiety of the community. Does the story of the 'hero' allow the organisation/s to tolerate the anxiety placed within?

Why do we need to maintain heroism?

It makes us feel good. Employees in fire service organisations find ways to continue self-gratification by generating stories from events that can be told and retold about our heroism. (Note: These efforts of heroism occur both on the fire ground and in an organisational setting).

As an organisational development practitioner within a fire service I have found that trying to implement any OD practice is very difficult due to its strategic nature – which challenges the status quo. I find myself and other employees kept busy with tasks of an administrative nature or tasks/projects that are seen as one-off event (mini crises) with no lasting outcome. My observation is that there is no place for reflection or learning. There is no accountability for the self – yet the contradiction is that usually stories told are about the self (good) and others (bad).

Where do we tell our stories?

Fire service organisations seem adept at storytelling and find opportunities to share stories during idle times between crises. There is no concept of confidentiality and everyone knows each other's business (a symptom of a family culture). Metaphorical campfires are created

within the organisation to tell stories around. For example, the Mess, offices – my office, hallways, etc.

Campfires usually require an 'elder' - someone who has been within the organisation for a long period of time (preferably over 15 years as employees within the fire services are fixated on tenure for credibility) or have found authority through some other means to convene, contain campfire activities and hold a place for members to share, listen and contribute to the story telling.

I recently became conscious of my own internal data that I find I take great pleasure in creating spaces for employees to talk about what is occurring within the organisation. I am able to take employee stories, make connections and see the broader picture and be philosophical about what occurs to make meaning for them.

Employees share stories around the 'campfire'. These stories are often 'thrown onto' the campfire and burn like kindling into the ether. The learning or moral of the story is never examined to create meaning, therefore a learning is never had. Sometimes a large log (a very scandalous story) is placed on the fire which is slow burning and creates great pleasure to watch. What is obvious is that the nature of the story does not necessarily need to be about heroism on the fire ground. Some stories are about heroism in the office where a colleague has stood up for something they believed in. The stories usually demonstrate heroism against poor work practices and poor behaviour. The stage is set every day for a comedy of errors, a tragedy, triumph, etc...

The symbolism of the campfire and the need for fire has not gone unnoticed. Which leads to a further hypothesis - is there a primitive need to maintain the status quo? For example, the traditional role where men protect women and children. What does this tell us about the highly masculine culture of the brigade and men and fire? There is an image of the legend of Prometheus (which is represented as the large mosaic outside MFB headquarters, 456 Albert Street, East Melbourne) represents the European ideal of fire – death, destruction, fear, technology. This has also brought to question the diversity profile of Victorian fire services: homogenous, male, Anglo. How many other cultures does this symbol represent? How would an Indigenous Australian relate to this mosaic or an Indian? Or would they perceive fire in a different way? What do their cultures teach them about fire? Does the European perspective of fire support the notion of heroism?

Parallel practices between fire service organisations and group coaching.

Professor Susan Long was the facilitator for the organisation development emergency services group coaching/supervision sessions. Therefore, did Susan play the role of 'elder' at the campfire?

During our sessions each member was able to purge themselves of their own experiences or retold stories. At some point did we each feel a degree of heroism at working in these environments?

I found each member's stories entertaining. The reflective space created a place for group therapy and a place to gain perspective about my own and experiences of the 'other' in the

workplace. It was an opportunity to throw some stories on the campfire in lieu of not knowing what else to do with them. To feel powerless as they burn, yet, satisfaction in keeping warm.

Within the group, there was also difficulty identifying a meaningful practical task and at various times group members acknowledged that they would like to engage in some 'work'. The group never seemed to be able to get to the 'work' and I wonder if this is a symptom of hero storytelling?

What can we learn about telling stories? How can we harness this practice in fire service organisations as OD practitioners to move theory to practice?

As emergency services OD practitioners should we find or enable reflective spaces to create metaphorical campfires? Is it our role to bring together the collective to make meaning of the internal workings of the organisation? Is it our role to transform stories in a graspable 'teaching' or 'lesson' from which we can further build upon our own practice and engage employees within the organisations that we work with to be more accepting of organisational development interventions?

Conclusion

In these vignettes, we have touched on the impact of society's expectations of protection from the horrific. To meet this expectation, our services ask of themselves heroic ability and omnipotence. The wish is for control of events that are irrational as well as having the ability to plan for those events that can be influenced. But an inability to control the irrational leads to feelings of impotence. Where then is the natural experience of impotence held within emergency service and trauma organisations? Is the reverse of impotence a story of the hero?

In face of this, our vignettes show evidence of:

- High reliance on strict command and control leadership and hierarchy which is not always appropriate in times when adaptive change is needed and inter-organisational collaboration is imperative;
- Practices that disable rather than enable creative and adaptive organisation development – such as numerous delays to the work, not having a space for OD, unconscious organisational defences against adaptive cultures;
- Relying on OD to solve interpersonal problems through nurturing practices and keeping these in the background (a stereotyped feminine role), rather than bringing OD more centrally into organisational strategy planning and system change;
- Dynamics of impotence of the community in face of disasters and stories of heroism to overcome the impotence and the save the community.

We believe that the questions we have raised and the observations made are worth exploring as part of the culture of emergency services. Most importantly, actions that lead to an inclusion of reflective practice as part of emergency services training would enable a deeper understanding of the cultural forces at play. This is especially the case in leadership and management training across the services. Interoperability needs attention across the services and understanding and sharing cultural attributes is a first step in greater collaboration.

While it is now accepted that different leadership styles are appropriate for different situations, it is very hard for managers adept at one style to move to another when the situation demands. Leadership programs should include helping leaders to understand why this is necessary and helping them deepen their observation skills to discern when this is the case. While this is a matter of looking at personal capabilities, considering and changing the group and organisational dynamics that allow such learning to be desired is imperative.

The small coaching/supervision group process across sectors could be a useful model for others to consider. The group's work, while perhaps unclear initially, resulted in us identifying the organisation's psychodynamics by comparing and contrasting across organisations, adding more data and helping us confirm patterns within similar sectors. Taking the viewpoint from a role perspective (OD) provided a similarity for comparison. This group found, once we could articulate these dynamics, ideas of what the next stage of dynamic facilitation could include. There is a sense that this will assist a process of repair and restoration. Growth and new life can spring from the ashes.

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2018 Symposium

LEADING AND MANAGING IN THE EMERGENCY AND TRAUMA SECTORS

Exploring the dynamics of interoperability before, during and
after crises

Saturday September 15th 2018

Victorian Emergency Management Institute 601 Mount Macedon Rd, Mount Macedon VIC 3441

We work as one. But it doesn't come easy.

Exploring inter-organisation dynamics in emergency management and trauma response organisations.

Deb Martindale

Abstract

Interoperability, collaboration, integration, safer together. We work in an age of working together to build resilience, respond to and recover from emergencies.

Frameworks, strategies, working groups, steering committees, terms of reference, careful branding of documents, JSOPs (Joint Standard Operating Procedures) and lots and lots of meetings are just some of the tactile instruments used to help us to succeed. And while reform in Victoria over the previous decade has been significant, there are nevertheless tales of setbacks, confusion about who is doing what (and why), and rebels who won't play nicely with others.

The study of inter-organisation dynamics has occurred for many decades. In this paper a two-part hypothesis explores some of the unconscious drivers for why we simultaneously

strive to work together and hold our separate stance. I argue that the task of 'saving lives' is overwhelming and drives a desire to work together to share this responsibility. This however, gives rise to a sense of risk or danger, as boundaries become unclear, tribal cultures are challenged and identity is blurred.

Whilst only a short introduction to some of the related concepts and ideas, it aims to introduce leaders to a deeper framework from which to understand and support multi-agency ventures.

Introduction

For me, viewing organisations through a systems psychodynamics lens is like looking through a telescope to see a galaxy of stars and colours that I had previously not seen. Every organisation is swimming in interesting dynamics and tensions.

I am a former employee of the Country Fire Authority, Victoria Police and the Victorian Government. Since 2011 I have worked as a management consultant, moving in and out of emergency management organisations, locally and nationally on a diverse range of projects. In 2009 I completed my masters degree thesis in organisation dynamics via a year-long action research project with the Australasian Fire and Emergency Services Authorities Council (AFAC), an emergency services peak body. Together, we explored the nature of collaboration, its motivators and inhibitors.

To this day, I continue to reflect on the dynamics at play across the emergency management and related sectors. Only on rare occasions am I asked to share that view with my clients. I remember vividly a senior executive exasperatedly saying, 'Deb, they all come to the table, they all nod their heads and agree, and then they go back and they do nothing!' This paper offers me the opportunity to share just a little of my reflection.

We work as one: A working hypotheses

I wish to explore the following working hypothesis:

1. The task of 'saving lives' is overwhelming. This task generates defensive behaviours in organisations that play out in various forms. One practical form of action or defence is to band together. To work as one, share the burden and disperse any potential blame.
2. And while emergency management organisations want to and need to work together to improve their ability to save lives, this simultaneously gives rise to a sense of risk or danger, as boundaries become unclear, tribal cultures are challenged and identity is blurred. As a result, irrational responses occur. Teams can live in a perpetual 'half in, half out' state, both wanting to belong to the bigger solution, and rejecting it at the same time.

To explore, I'm going to outline some essential theoretical concepts and then explore some other specific ideas.

Some theory

Systems, not individuals

The first thing to keep in mind is that systems theory is focused on systems, not individuals. Indeed, it contends that the behaviour of individuals is an enactment, at least in part, of a group's unconscious needs. Further still, John Newton has recently reminded me that

systems are by definition more than the sum of their parts. Systemic behaviours cannot be understood by a simple linear analysis of individual parts.

This is important to my hypothesis because of course not all *individuals* within the system are frontline life savers. But the *system* is perceived by society as life-saving. More on this later.

Identity

We each belong to many groups. At work, we often belong to a team, embedded within an organisation. That's two groups. We also bring our background, our gender, our age group, our education, our interests, our faith, our expertise, our lived experience with us. Each group that we identify with calls upon us to take up particular roles well beyond those described in any official position description or organisation chart. Within the emergency management sector and in my work I often feel my female-ness and my consultancy-ness being activated. A long family history in this sector also contributes to my sense of belonging.

Just as individuals form an identity, so too do organisations, communities and systems. Our need to be unique however, cannot be achieved without constant comparison to what we call the 'Other'. That which is not us. Them. They.

And so identity is developed and maintained in a dynamic process of being separate (as 'I' or 'we') and then connected within a bigger system. We can only experience and develop our identity and uniqueness through exposure to Others.

Boundaries

Boundaries are an important concept in systems theory. From a systems psychodynamics perspective we can assess systems as being optimally bounded, over-bounded or under-bounded. Each state can be expected to prompt (or be caused by) different unconscious behaviours.

Boundaries can be physical or tangible, and less tangible. For example, *within* organisations we establish formal boundaries around discrete teams – think of your organisational chart, use of uniforms, or geographic borders. *Between* organisations we establish shared boundaries through instruments like JSOPs (that's a Joint Standard Operating Procedure) or MoUs (Memorandums of Understanding). Interpersonal relationships traverse or help to form boundaries.

Clayton Alderfer has written extensively on boundaries and their effect on system dynamics (Alderfer 1987, 2011). He explains that systems fortify or close their boundaries if they experience too much (real or perceived) threat from their environment. This can help them survive while under threat, but if boundaries remain too closed or if the threat is not real (a paranoid threat), we call this an over-bounded system. Stillness and isolation will ultimately lead to death for any living system.

Conversely, when a system perceives its environment as one with positive aspects or opportunities it will tend to open its boundaries to pursue growth and new connections. In this process it becomes more complex and a new identity starts to take shape.

If system boundaries are allowed to be *too* open, then our old identity can be washed away. Or at least we can feel as though it is being washed away. These under-bounded systems can be experienced as unstable and distressing.

Boundaries shift dependent on which group is in play. A sector specific example: Anyone who has worked in an incident management role will know that the incident management system is temporary, and clearly prescribed. For those unfamiliar, there is a common framework in Australasia setting out how to structure teams when responding to a significant emergency. Each person takes on a well-defined role, wearing a tabard or top with their role title emblazoned across it. Each person has undertaken prescribed training in their role and has set tools and processes. An incident management team is most often filled with people from different disciplines, departments or organisations. What this system makes possible is for usual boundaries to be forgotten and temporary boundaries to 'take over'.

Theory on boundaries extends to explaining how groups and sub-groups inter-relate. We can hypothesise which of your teams are likely to be under or over-bounded using a clear framework of intergroup theory (Alderfer, 2011).

The primary task and the survival task

'The task' of the group is central to exploring systems psychodynamics. We define a *primary task* as the practical, rational purpose of a group. When all is well so to speak, groups are focused on delivering or achieving their primary task. However, with constant dynamics at play other ideas distract us from our task, and groups can work unconsciously to avoid their task. When a group feels the need to protect or defend itself from imagined or real threats, it may spend more energy on what we call the *survival* task. The survival task is focused on ensuring that the *group* survives. (Chapman 1999)

Once the concept of task avoidance is understood, it is easy to see it occurring in groups. Jane Chapman has an excellent paper on Hatred and Corruption of task that greatly assisted my learning. I think in an era of reform task avoidance is natural. It is only natural that defensive survival behaviours escalate. And our social defences can be quite sophisticated: we even embed them as 'good practice'. Wastell (1996) writes about the layers of bureaucracy we can wrap ourselves in, in order to delay or avoid pursuit of the primary task. At the other end of the spectrum, Marris (1996) outlines the use of apathy as a defence, where the best defence against having little control of a situation, might be to have no feeling about the situation at all.

Basic assumptions and 'as if' behaviours

Basic Assumption behaviours are core to exploring unconscious system dynamics and describe the 'as if' behaviours that help us to escape or manage the anxiety of our primary tasks. In a **fight/flight** position the group will behave *as if* it is under attack and must be defended. The unconscious mission of the group, far from that of its primary or stated task, is to survive. Enemies are sought and found, territory is defended, and knowledge is a protected asset.

A second Basic Assumption behaviour is **dependency**. In a dependency position, group members act *as if* a leader holds all of the strength and wisdom needed to protect them from harm. The leader is raised up, made omnipotent, and is doomed ultimately to disappoint their followers. Others in the system feel unable to take responsibility or control of their behaviour, or feel ignored.

Another basic assumption (there are five, kind of, it's a long story), is that of **oneness**. Proposed by Pierre Turquet, a psychoanalyst and Olympic fencer on the side, oneness offers 'a feeling that as a [collective] we are good, whole and right' (McMillan 1981, p483). In this state 'one can escape, albeit temporarily, from the reality of his individual responsibilities and reality' (Turquet 1974 p371).

Basic assumption behaviours are very much a dynamic state. Groups can move frequently between various 'as if' states. Further, while basic assumption behaviours are rooted in the primitive, there is no aim to eliminate them, but we can observe and work with them.

Discussion

Let's return to the working hypothesis. To recap:

Part 1: The task of 'saving lives' is overwhelming. This task generates defensive behaviours, *one* of which is to band together.

Part 2: Banding together paradoxically gives rise to a sense of risk or danger, as boundaries become unclear, tribal cultures are challenged and identity is blurred. As a result, irrational responses occur and teams can live in a perpetual 'half in, half out' state, both wanting to belong to the bigger solution, and rejecting it at the same time.

Saving lives

So, to part one: Saving lives is overwhelming. Remember, we are talking about systems, not individual responders. Emergency services are portrayed by communities as organisations full of heroes, saviours, and courageous people who will 'save them' in their hour of need. Indeed, similar mythical or heroic imagery has been cultivated and used by societies for centuries to serve their primitive desires. In reality, genuinely life-saving events are a small percentage of day-to-day work. Yes, agencies respond when called, but savage bushfires cannot be easily tamed. Flood waters cannot be held at bay. A cardiac arrest is sometimes

not reversible. In addition to response, emergency management organisations also educate people, mitigate risks, and pay accounts and manage IT systems like every other business.

The super hero image in the community's mind is actually pretty irrational. But through my research, I have come to believe that it serves a great purpose. I argue that communities cannot live day-to-day with the idea of so many threats and risks to their lives and the lives of those they love. They need a strong, reliable place to put these fears. Visible, dependable, heroic emergency services and trauma responders are that place. If we think about these organisations as part of a broad community system, they are playing a role on behalf of that bigger system, and that role includes the holding and allaying of fears.

In theoretical terms I am talking here about projection and introjection, which I won't elaborate upon here. Is it possible however, that society as a whole can project their unwanted anxieties? Absolutely. Pierre Turquet played a pioneering role in the study of large group dynamics. He argued that systems psychodynamic theories can be applied at a global scale and proposed that given the right interpersonal relations and the right task, groups can take on a mythical quality. 'As myths they have such universality that major sections and institutions of a community...represent and embody those myths on behalf of society.' (Turquet, 1974 p359). Others too, write about the phenomenon of these dynamics occurring at a very large, inter-country scale (Chattopadhyay 2003, 2004, Alford 1989, Segal 1995).

In any case, my argument is that our emergency services sector is playing a particular role for society, holding projections of intolerable anxiety around the very real life and death scenarios that emergencies can present. This anxiety, introjected, then becomes something which must be managed by the whole sector.

And although there is not a conscious acceptance of this unusual responsibility, it follows that emergency services, trauma response and other similar frontline organisations are then designed to withstand this heavy load, and operate or behave *as if* they must. One very practical way to do this, is to band together. To design and work within an inter-operable system. To collaborate in order to spread or share the load. To disperse any particular pressure points or risks across a much larger system.

The danger of working as one

We are called to work together. As you have heard, that call is both compelling and logical. Unfortunately, I have some bad news. Elizabeth Loughran explains that 'establishing the identity of an inter-organisation is a far more difficult task at the inter-organisational level than it is [within] organisations' (Loughran, 1986, p9). As I have said, identity, boundary and a clear primary task are all essential elements to the work of any group. And while this is true of any group, it is even more challenging in inter-organisations because people are generally being asked to bring their other identities or memberships with them – to wear more than one hat (Alderfer 1987).

Let's talk about the 'we work as one' ideal as it relates to inter-organisational theory. For those unfamiliar, #weworkasone is a humble hashtag used by emergency service agencies in Victoria on social media channels when describing or promoting inter-organisational success.

From a systems perspective, I have thought a lot about this little hashtag. Is there a fantasy that the sector might actually be 'one'? Perhaps a more realistic argument is that the term 'as one' neatly reinforces the status quo that we are separate entities working together.

When we ask people from different organisations to come together and effectively become a new, additional group within the system, there are obvious complexities. The task had better be very compelling if you want me to take the risks involved.

Janelle Morgan presents a framework for inter-agency collaboration with two key stages. In stage one, 'groups maintain strong allegiance to their parent organisations. The only factor that holds the two groups together long enough for a collaboration to emerge is the importance of the task to the wider system. In the event that this importance diminishes, the collaboration is likely to fail.' (Morgan 2009). In stage two, collaboration is facilitated through the establishment of a safe space and structure which allows for reflection on the collaboration itself, both positive and negative. (ibid)

Loughran supports this idea, and explains that 'inter-organisations have less 'glue' than organisations, and therefore it is essential that the group be able to identify a concrete problem that they are committed to resolving' (Loughran, 1986, p12).

In short, the challenge for leaders is to make sure that the task of every inter-organisational group is clear and compelling, and that conviction to its achievement does not dwindle, for this is the most effective glue.

This alone won't be enough though. Let's come back to identity and those strong tribal behaviours.

I touched on the 'Other' earlier and the fact that we form our identity by constant comparison with others. If 'they' don't exist, then there is indeed no 'we'. The respective tasks, histories, uniforms and stories of each agency help to galvanise a strong identity. We also use the 'Other' to project our unwanted thoughts about our own selves elsewhere. 'They don't understand this stuff' implies that 'we' do, for example.

And so, to be asked to collaborate with the 'Other' is to apparently seamlessly form a new 'we', which is messy when just yesterday, they were a 'they', and quite likely the home of things we didn't want or like.

As leaders, what can we practically do with that fact? One simple action is to facilitate and foster the creation of a shared 'we', to make time for this: not as a trivial ice-breaker, but as a core function for lasting success. This should include providing the inter-organisational group with a bigger, scarier 'they'. A shared common enemy if you will. It sounds almost childish,

and indeed, Freud and his colleagues would call it primitive behaviour, but it works. (See Chattopadhyay, 2003 for more on this)

Aspiring for a mature state of inter-organisation behaviour is to aspire to mutual recognition. Mutual recognition, in simple terms (and I apologise to those with a deeper understanding) is the ability to acknowledge that we need the other. Not in a completely dependent way – for this is typically one-sided, but in a productive, mutual way – we need each other to be ourselves and to do our work. It is more challenging than it sounds because to acknowledge that we need another is to be vulnerable. Mark Crossweller, Head of the Commonwealth Government's National Resilience Taskforce used a recent keynote address to argue for the need to allow vulnerability to be acknowledged at a system level. He reasoned that the emergency management sector's narrative of stoic strength, paradoxically produces a vulnerable, over-confident state.

A note on neutrality and leadership in inter-organisations.

I want to touch on neutrality just briefly, because it is a prevalent challenge. In any inter-team or inter-organisational arrangement, Laurence Gould (Gould et al 1999) argues that whoever leads the inter-organisational group will be seen as first and foremost a representative of their home agency. There is no *neutral*. And people will not be trusted to be neutral. In fact, demonstratable evidence or action may well be required to earn basic trust. Until such evidence is provided, other group members effectively have a licence to minimise their participation, scape-goat or delay the project, or reveal deep scepticism in the task and its likely success. In fact people may experience “serious difficulties in giving anything more than lip service to the task” (ibid).

Sound familiar?

This issue could be the subject of its own dedicated discussion. Suffice to say for now, that attention to establishing clear boundaries, nurturing the inter-organisation identity and maintaining a compelling task are key to effective combat of the above. Leaders can also assist their inter-organisational groups to more openly discuss doubts about representation, shared values and allegiances.

Concluding remarks

How can we more effectively work as one? We can start by encouraging leaders across the sector to acknowledge the idea that inter-organisation dynamics aren't just rational constructs that can be managed through a decent 'terms of reference'. Unconscious influences are at play, sometimes really big ones. They *are* predictable, and they have been studied for eighty years. Once recognised, they can become a very constructive feature of your work.

Persisting with the rational and failing to acknowledge the unspoken and unknown doesn't see those dynamics thwarted. They don't disappear. Instead, they attack the primary task, they delay the result, they distract everyone, sometimes I would argue, for decades on end.

Leaders can consider every multi-agency committee, team or project they are a part of. Does the inter-organisational group have a clear and compelling primary task? Are the roles and boundaries for this group clear? Does the group have sufficient authority to carry out their primary task? If the answer to any of these questions is no (or not really), then they are almost certainly going to be in a survival mode of sorts, avoiding the actual task you have set them and for good reason.

Finally, we can remember that great courage is required if fortified boundaries and rusted-on identities are to be inter-twined. We naturally crave certainty. Uncertainty generates energy – either electric and exciting, or terrifying and debilitating. Leaders can learn to observe and attend to defensive behaviours that naturally arise, to allay fears and establish a safe operating environment for everyone.

I have offered here just a smattering of ideas in the deeply studied discipline of inter-organisation dynamics. I hope it whets an appetite for further discussion and reflection.

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