



Improving interaction between First Responders and Civil Society in CBRNe Incidents:

Guidelines for Policymakers

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Summary

EU Member States lack an approach to enhance **societal preparedness and response policies to CBRNe** (Chemical, Biological, Radiological, Nuclear, and explosive) events that take into account the **management needs of First Responders (FR)**. Based on preliminary results from the EU H2020 funded PROACTIVE project (Preparedness against CBRNe threats through cOmmon Approaches between security praCTitioners and the Vulnerable civil society), these **Guidelines for Policy Makers** recommend developing solid and long-term collaboration with First Responders and Civil Society Organisations (CSOs) and facilitating the advancement of coherent, evidenced-based emergency procedures that address the mitigation and management policies in three stages: before, during and after the event. With this aim in mind, the document provides critical recommendations for Policy Makers on how to address FR's needs.

Problem

Many major cities worldwide have faced **critical CBRNe-related incidents** over the past few decades¹. Furthermore, with terrorism threat levels high across the EU, using chemical agents by terrorist organisations has shown to be a significant risk also on European soil (EUROPOL, 2019). All involved stakeholders, including FR - such as public health officials, emergency management personnel, or even clinicians-, public authorities and CSOs may need clear, context-adaptable and well-structured guidelines and technologies to ensure their duties' efficacy. However, the literature has underlined the need for intergovernmental coordination in Europe and harmonizing responses and actions to ensure their efficiency ([D1.1](#), [D1.2](#)).

FRs are a key asset for the mitigation and management of CBRN-related incidents. It is therefore essential that they are supported by policymakers and that they collaborate with CSOs at all stages.

¹ Examples include the explosion of a large amount of ammonium nitrate stored at the Port of Beirut (2020) which killed 220 people, instantly injured over 6,500 more, and severely damaged the densely populated residential and business districts nearby (Al-Hajj et al., 2021) or the ongoing Covid-19 pandemic (2019 - 2023). One well-known case in Europe is a Tunisian couple's attempt to attack with ricin in Cologne, Germany, using an improvised explosive device.

Issues and recommendations

FR are key actors in the deployment of protocols and the use of technologies throughout CBRNe events. Based on PROACTIVE preliminary results and the literature, this section identifies vital aspects to consider. Recommendations are organised according to the three critical stages of intervention: **preparedness, response, and recovery**.

For each point we indicate the related PROACTIVE deliverables and recommendations.

A Mitigation and management of CBRNe incidents preparedness

Issue	How to tackle by policymakers	Action point for policymakers to support FRs
<p>#1 The special needs of vulnerable persons are not always sufficiently taken into account in pre-incident information material. This concerns both the content and the format of the communication (D3.4)</p>	<p>In cooperation with FRs and CSOs, policymakers could aim to develop a culture of prevention, response, and dissemination of knowledge concerning emergencies that promote an active role for civilians, including vulnerable groups, facilitating FRs' interaction with the public.</p>	<p>#1 Pre-incident information should be provided to FRs to be delivered to the public based on the diversity and inclusion of all people. This means multiple sources (D1.1) and language formats (audio language, Braille, sign language, simple language and pictorial language), (D1.3). In addition, information materials should be offered in languages other than the local language (D3.4) or translated and trained in nonverbal communication (D3.3).</p>
<p>#2 Pre-incident information and CBRNe education can have the potential to induce anxiety and catastrophizing thoughts (D1.3) that need to be overcome.</p>	<p>Policymakers could elaborate and disseminate, in collaboration with FRs and CSOs, pro-active social media campaigns and get people to know where to go for good information during events, facilitating FRs' interaction with the public.</p>	<p>#2 To reduce the potential for anxiety and catastrophic thoughts, civilians could be trained on where to go for support and further information in the event of an incident (D2.2). To this end, pre-incident information should be culturally appropriate and respectful of religion and religious values (D1.3), be easy to understand, and be noncomplex, thereby allowing the information to be accessible to all (D1.1).</p>
<p>#3 Poor or outdated information leads to a lack of public commitment to follow FR instructions (D1.3).</p>	<p>Policymakers could request for detailed explanations to FRs, primarily, and to CSOs, secondly, about their responsibilities and strategies on crowd management and include this information in CBRNe preparedness tools.</p>	<p>#3 Pre-incident information should meet the needs of the intended audience, incorporate factual proof and use a credible spokesperson (e.g. a specialist) to account for the preference for information received via higher sources (D1.1). Positive perception of pre-incident information and its effectiveness at influencing knowledge, understanding and confidence in undertaking recommended behaviors (D5.2).</p>
<p>#4 There is a need to harmonise the communication, cooperation and multi-agency approach regarding the preparedness protocols (D8.2).</p>	<p>Policymakers – together with national Data protection agencies – could co-responsabilise FRs to act as data controllers and managers of the PROACTIVE technologies in most cases.</p>	<p>#4 FRs need to ensure a comprehensive set of technical and organisational protocols before the system is operational and promote the development of a data management crisis plan, with a focus on information sharing. During the entire CBRNe preparedness process, communication, cooperation, and the multi-agency approach need to be harmonised in order to maintain a consistent and coordinated plan (D8.2).</p>

B Mitigation and management of CBRNe incidents response

Issue	How to tackle by policymakers	Action point for policymakers to support FRs
<p>#5 Lack of public compliance and cooperation due to the limited public perception of trust and legitimacy during CBRNe events. These behaviours may all contribute to an increased risk of physical exposure to agents, toxins, and other hazards (Bartenfeld et al., 2014).</p>	<p>Policy makers could cooperate with FRs and CSOs need in order to design strategies to enhance public compliance and cooperation. It is essential to carry out effective communication strategies among these actors and be aware that the way in which FRs manage an incident will impact the way the public behaves</p>	<p>#5 FRs could focus on ensuring the protection of the public's health and could aim to influence the perceived efficacy of recommended behaviours (D1.1). To this end, FRs could maximise information sharing. The more information made available to the public during an incident (e.g. how and why official instruction should be followed), the higher the rate of compliance (D1.1). FRs could communicate openly and honestly about the nature of the incident and provide regular updates about actions being taken. A key emphasis is on giving clear, precise, and true information that is conveyed to people at the incident site, those who have evacuated, and the general public, in a practical, empathetic, and sensitive way. Factors associated with compliance (e.g. information should seek to inform the public about family, friends, and pets) (D1.2).</p>
<p>#6 Missing or insufficient outlining of clear responsibilities in the Standard Operating Procedure (SOP)'S and cooperation agreements between Law Enforcement Agencies (LEA)s and FRs organisations which need to be continuously adapted based on the learning outcomes of the exercises (D2.3).</p>	<p>Policy makers could ensure that FRs meet the needs of the public, especially those of vulnerable groups.</p>	<p>#6 Communication is essential for transmitting responsibilities. Communication during an incident could be delivered by a trustworthy spokesperson, present useful and needed information, and incorporate facts or proof to provide robustness (D1.1). The use of FAQs could be incorporated into communication efforts to reduce stress on authorities (D2.2). The compilation of all group needs should be reflected in an up-to-date way in the guidance documents and SOPs (D1.3).</p>
<p>#7 Outdated assumptions in the CBRNe incident response regarding the psychosocial aspects of crowd management strategies have prefixed ideas of controlling the public, rather than communicating with it (Carter et al, 2013).</p>	<p>Apps can be a channel to facilitate communication between policy makers, FRs CSOs and LEAs with members of the public (and vice versa) during CBRNe emergencies.</p>	<p>#7 Policy makers could convey the importance of FR management on the effects of public behaviour, the effective communication with members of the public, and the understanding and preparation of the needs of vulnerable groups. Providing adequate information about CBRNe events about undertaking actions rapidly can reduce their impact (Carter et al., 2020). The scope is to maximise public compliance with official communication in order to provide information to enhance self-efficacy to avoid the likelihood of maladaptive behaviour (D1.3).</p>

B Mitigation and management of CBRNe incidents response

Issue	How to tackle by policymakers	Action point for policymakers to support FRs
<p>#8 Need to review discrepancies in guidance documents to ensure consistency both within and between countries (D1.3).</p>	<p>Policymakers could facilitate FRs' contribution to the incorporation of up-to-date evidence-based advice in guidance and policy across Europe to reflect the importance of recognising psychosocial aspects of CBRNe response.</p>	<p>#8 Although guidance on the overall response strategy during a CBRNe incident has the same management strategies (evacuation, disrobing, wet decontamination, dry decontamination, re-robing, commencing life-saving treatment prior to decontamination, shelter in place), the guidance and recommendations were not necessarily consistent, even within a country (e.g. decontamination duration (D1.3). Countries compare their CBRNe procedures with one another to enable a 'best practice' blanket approach to CBRNe incidents (D2.2). This guidance and policy must have a clear strategy on how to manage vulnerable groups and must be uniform in instruction, particularly when released in the same country (D1.3).</p>
<p>#9 Need to handle immediate practical training as awareness-raising measure to demonstrate practicalities associated with CBRNe incidents during the undressing and decontaminated processes (D1.3).</p>	<p>Policymakers could provide FRs and CSOs with the necessary means to offer training programmes to build CBRNe public awareness and knowledge.</p>	<p>#9 Policy makers could allow FRs lead practical training and let them identify and delegate urgent tasks to CSOs', which contribution to training and CBRNe awareness should promote the availability of shielded areas where the undressed can wait and physical privacy is guaranteed. For instance, the Involvement of women CBRNe responders to address ethical needs during decontamination (e.g. disrobing) in Lebanon (D2.5). In sum, FRs could emphasize why disrobing is imperative (health hazard due to contaminated clothing, etc.) (D3.4).</p>

C Mitigation and management of CBRNe incidents recovery

Issue	How to tackle by policymakers	Action point for policymakers to support FRs
<p>#10 Low reporting of CBRNe-related information materials available to the public. There is a need to provide and spread information on infection control and post-event disease transmission among the general public (Bartenfeld et al., 2014).</p>	<p>Policy makers could provide FRs with all the necessary means to ensure that they can ensure physical, mental health and psychosocial support in the immediate aftermath of CBRNe events.</p>	<p>#10 There could be a stronger development of systems of joint cooperation: joint-threat assessment and joint-coordination centres (D2.5) with PSAB, CSO, discussions/consultations with the CSAB members (D3.3). In Addition, Aide Memoire can be useful to identify and handle the ever-changing needs, expectations and challenges of vulnerable groups (D3.4).</p>
<p>#11 In the return to normal activity, there is a need to assess the design improvements and technology advancements (Kapur and Smith, 2011:8) (D8.2) as well as the ethics of the response operations (D6.4).</p>	<p>Policymakers could enhance that the recovery preparedness practices in charge of the FRs could be improved by using the PROACTIVE toolkit.</p>	<p>#11 FRs and LEAs could exchange knowledge about communication procedures with other national relevant practitioners to create joint communication strategies, as well as with practitioners from other countries. In addition, they could use networks with other practitioners and interested/relevant CSOs to exchange “lessons learned” and “best practices” (D2.3). These should become ‘lessons implemented’ as part of a dynamic process to constantly update SOPs (D2.4). Later on, they need to be further adapted by the respective practitioners in their respective countries according to their needs (D2.5).</p>

Conclusion

These Guidelines integrated into the PROACTIVE Policy Toolkit are intended to provide policymakers with tools to improve their coordinated action and governance with FRs in mitigating and managing CBRNe incidents. Building on our findings, we outline the following recommendations in each phase.

- During the preparedness, to deliver pre-incident information based on diversity and inclusion, in an accessible manner and considering the needs of the audience, especially the vulnerable groups.
- During the response, by protecting public health by maximising information sharing, transmitting responsibilities with adequate information, clear strategy and practical training.
- Finally, during the recovery, developing systems of cooperation to identify the ever-changing needs and expectations of the civilians, and transforming these lessons learned into lessons implemented in the return to normal activity.

Limitations

The recommendations included herein may be updated without prior notice if the PROACTIVE consortium and other entities develop new standards and guidance.

As PROACTIVE is an ongoing project, more empirical work involving first responders is still expected to be produced.

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