

# Psychological Aspects of Repairing or Rebuilding in the Aftermath of A Terror Attack

To The Norwegian Government,  
specifically

To The Norwegian Directorate of Public Construction and Property  
**[Final Report]**

By

Jeffrey T. Mitchell, Ph.D.

Clinical Professor

Emergency Health Services Department

University of Maryland Baltimore County

(UMBC)

November 24, 2011

## **Executive Overview**

The catastrophic terror bombing attack on the capital city of Oslo, Norway on July 22, 2011 and the subsequent brutal and senseless murder of so many of Norway's youth left the nation and the world in a state of profound shock. It also left Norway's government with a dilemma as to whether to tear down the government buildings damaged in the attack, design new buildings, and build from the ground up or to repair and refurbish only the damaged portions of the existing buildings. A discussion regarding the use of some of the space in and around the government buildings for a fitting memorial to those who lost their lives or were wounded in the attack has been on going for several months now. This report provides information on the common short and long-term psychological reactions to terror attacks and the methods that might reduce the psychological turmoil in the populations most exposed to the tragedy.

This report attempts to provide as much information as possible to assist Norwegian Government officials in making difficult, but crucial decisions as they work their way through the dilemma mentioned above. The report attempts to answer a series of complex questions generated by Norwegian Government officials and offer the best practices for responding to Oslo's psychological concerns. It also offers pertinent advice on the alternatives under consideration by government officials.

It is the primary objective of the author of this report to provide information and guidelines that will assist the Norwegian Government in making its ultimate decisions. The author cautions the readers to understand that a terror attack generates enormous psychological distress and a host of complex problems that require a combination of intensive thought, open discussions, the capacity to make challenging decisions, and meticulous planning. Government officials will require humility, integrity and personal strength to arrive at decisions that may not please every person in Norway. In the end, the people of Norway will need to trust that their government made the best decisions possible given the information available through this process.

## Site Visit November 21, 2011

This consultant was escorted to the site of the bombing by Paul from the Public Information office of Statbygg in the early afternoon of November 21, 2011. Paul presented a great deal of interesting and useful information regarding the damage done to the government's buildings. The severe level of damage to the interior of the buildings was particularly important for my report. The privilege afforded to me of a site tour was extremely important in light of this final report on the issue of psychological reactions to the terror attack on July 22, 2011. Additional comments and suggestions were generated by actually visiting the site and seeing the magnitude of the destruction.

My first reaction to the terror bombing site was sadness for the people of Norway for the loss of life as well as the pain inflicted by the injuries to people in close proximity to the terror attacks. I was certainly in awe of the physical space impacted the explosion and the substantial damage sustained by the buildings near the site of the detonation. The damages are far more severe than any of the news footage portrays.

My visit raised an additional concern about the welfare of those exposed to the explosion. That concern is "Traumatic Brain Injury" (TBI). The shock waves from an explosion can substantially damage the brain. The rapidly expanding shock wave from the explosion causes the brain tissue to vibrate or, if one is thrown about by the explosive forces, it can bruise and damage the tissue of the brain. Results include bleeding in and around the brain, concussion, and direct damage to brain cells and a wide range of physical and psychological reactions.

The longer a period of unconsciousness lasts after an explosion, the greater the level of damage to the brain. Mild damage occurs when unconsciousness is less than 30 minutes. Moderate damage to the brain is assumed when the person is unconscious for between 30 minutes and 6 hours. Any period of unconsciousness in excess of 6 hours indicates severe brain damage.

A mild TBI's effects include mental confusion immediately after the explosion as well as memory dysfunction, unexplained fatigue, headaches, visual distortions, impaired attention span, dizziness, loss of balance, emotional depression, and, sometimes, seizures. In some cases, the onset of symptoms may be delayed for several weeks.

Symptoms of a moderate TBI include nausea, loss of smell, sensitivity to light, increased moodiness, frustration, slowed thinking and decision making, getting lost in familiar areas, impaired problem solving.

A severe TBI causes disruption to one's cognitive mapping and sense of direction, and difficulties in concentrating. Victims become easily distracted. They experience difficulties in learning and remembering new information, slowed thinking processes, increased impulsiveness, loss of language skills, slurred speech, problems in reading and writing, and repeating the same information again and again. There may be many other negative effects of a TBI.

Emotionally, people with a TBI may experience a loss of motivation, increased emotional sensitivity, irritability, aggressive feelings, dependency feelings, and lack of appropriate emotions. Some people lose the ability to appropriately respond in social situations.

Victims of the explosion experiencing the symptoms of TBI described above should be evaluated by medical and psychological personnel. Some symptoms may be resolved spontaneously over time without professional intervention. But, persistent and disturbing symptoms will, most likely, require professional treatment. There are several treatments which have demonstrated some effectiveness in assisting people with traumatic brain injury. The choice of treatment will depend on the severity of the TBI, the rate and level of recovery, the types of resources available, the areas of the brain that were undamaged, and a number of factors.

## Norway Government Question 1:

*What are the most common after effects of a terrorist attack?*

### **Acute Reactions to Terrorist Attacks**

Terror attacks have an immediate, intense, and intrusive psychological impact on individuals, family members, and, often, on entire communities. The range of human reactions is impressive. In the first moments immediately following an attack, people are generally stunned, in shock, denying, fearful, emotionally overwhelmed, and mentally confused. Intense anxiety immediately rises and many people experience considerable difficulties in decision-making and problem solving. Some may be so bewildered by the attack that they become immobile and unable to take any actions to protect or care for themselves. Some enter a stuporous or trance-like state and may actually endanger themselves further by wandering into hazardous areas. A few appear to give up entirely, cease to function in any meaningful way and they await death.

Others may react with altruism and immediately set about rescuing, protecting, and assisting others. They may engage in heroic actions, sometimes at great risk to themselves, to come to the aid of others. In the attack on US congresswoman, Gabrielle Giffords, in Arizona in January 2011, the gunman was disarmed by an unarmed 74-year-old retired [US Army Colonel](#), Bill Badgeran, who was among those wounded by the attacker. Comparable altruistic and heroic actions on behalf of others were described in connection with the July 22 terrorist attack in Oslo, Norway. Surprisingly, even when events cause great chaos, some people are able to quickly and accurately assess the situation and take appropriate actions to reduce the threats to themselves and others.

It should be noted that mass panic is generally rare in disasters. Mass panic is described as large groups or crowds of people whose members lose the ability to think clearly and they

respond to stimuli in an emotionally charged manner that may threaten public safety as well as the safety of the members of the group or crowd itself. The crowd responds to actual or perceived threats as if it was united in its movements or behaviors. Panic may cause large numbers of people to blindly follow others in a completely irrational manner. Ultimately, the crowd members lose self-control in a disaster situation and they may run away entirely or they may run about wildly or engage in behaviors that they would never choose as individuals without the presence of the crowd. Mass panic has been noted in only about 10% of disasters and is most likely to occur when people are entrapped, threatened, in imminent danger, and when they cannot perceive any visible means of escape.

As noted above mass panic is a somewhat rare phenomenon in disasters, but more individuals may experience feelings of panic in the midst of a disaster event. Some may actually have a panic attack. As a result, their behaviors may appear irrational, hysterical, uncontrolled, self-focused, and self-destructive to observers. Individuals experiencing a panic attack during a disaster may suffer difficulties in breathing, feel as if they were about to suffocate, have a racing heart rate, feel dizzy, develop numbness and tingling sensations in their fingers and toes and feel overwhelmed and unable to control themselves. Panicked individuals may pose a threat to themselves or others because of their irrational and, sometimes, dangerous behaviors.

### **The Next Few Hours to Days After the Attack**

Human emotions do not exist in a static condition. Instead they change, intensify, or decrease as information and circumstances change. Some psychological reactions such as denial and intense anxiety remain fairly powerful for several days after an attack. It is not unusual for the disbelief associated with denial and a state of heightened anxiety to linger for several weeks. Other psychological reactions become less prominent over time. Shock, for example, may decrease as people become more aware of the facts of a situation. Reality eventually forces people

to let go of the surprise elements of a terrorist attack and to engage a different set of emotions.

Emergency response personnel, hospital staffs, and government officials should be alert to the potential for vicarious traumatization in the populations they serve. This condition is also known as “vicarious rehearsal.” People not directly involved in the actual event and even those at some distance from the actual situation may “try on” aspects of the event as if they were playing roles in stage play. Although uninjured and unexposed to the disaster, they may present themselves, as if they were injured or ill, to emergency or medical personnel seeking the same treatments or interventions that are being given to actual injured victims. Some disaster experts call these people the “worried well” or even “armchair victims.” It is not uncommon to find these vicarious victims in a wide range of disaster events including terror attacks. In the Tokyo Subway Sarin gas attacks, for example, nearly four times as many “worried well” showed up in hospitals than did actual victims.

Shortly after a terrorist attack, as people become aware of the fact that the attack was a deliberate and malicious act, their anger intensifies. Sometimes that anger escalates to rage toward those believed to be responsible for such horrible acts of murder, maiming, and the enormous destruction of property. People often feel resentment, wish for revenge, and feel betrayed and vulnerable.

During this period of time, people often feel stigmatized by the tragedy as if everyone will always know that the individual survived the attack. They do not see survival as a badge of honor. Frequently, people feel strong feelings of guilt for having inexplicably survived when others next to them succumbed to their injuries. Some may feel guilt for taking actions that ultimately allowed them to survive while others failed to act and perished.

Many people withdraw from contact with others and feel hopeless and helpless in the few hours after a terrorist event. They fear that another attack is imminent. Their fear contributes

to avoidance of places, people and circumstances that they associate with the attack.

## Question 2:

### *For how long will the effects of a terror attack last?*

#### **Long Term Psychological Effects of Terror Attacks (weeks, months and sometimes years after the terror attack)**

As the weeks and months pass, most people who were directly involved in the terror event, gradually recover as their symptoms decrease. They usually resume normal life experiences and responsibilities, although they maintain clear, uncomfortable memories of the terror attack.

For others, however, the emotional turmoil created by the terror attack persists. Denial and intensified anxiety sometimes continue well beyond expected time frames. In one documented case in Texas City, Texas, elevated blood pressure levels, indicating heightened anxiety in the general population, remained high for more than six months after a powerful chemical explosion in 1947.

Some victims of a terror attack develop an aversion to the scene of the attack and find it difficult or impossible to return to the site for any reason. They may also avoid other people they know and who were also victims of the attack. They do not engage in discussions of the event and avoid looking at video or photographic images of the scene. New warnings of other potential threats raise intense feelings of anxiety and fear that may escalate to phobic reactions and panic attacks. Some victims return to the confused mental states they had experienced in the acute reaction phase shortly after the attack. Recurrent nightmares about horrifying aspects of the event are a disturbing reminder of how close to death or injury someone may have come.

As people struggle with their feelings of fear, severe depression, and emotional turmoil, they may experience hopelessness, helplessness, haplessness, and worthlessness. Those feelings may subsequently lead to the death of a few individuals by suicide. Such losses obviously add dramatically to overall trauma generated by the terror attack. Suicides after terror attacks are not very common, but the potential should never be disregarded because unresolved and untreated depression in the aftermath of a terror attack may drive a person to seriously consider taking their own life.

In a briefing to the United States Congress in June of 2010, the American Political Science Association, the American Psychological Association and the American Sociological Association presented a briefing entitled, “Reactions to Terrorism: Attitudes and Anxieties” concluded the following:

- 49% of American households indicated that the September 11, 2001 attacks shook their personal sense of safety and security either a great deal or significant amount
- The more personally shaken people were, the greater attention people paid to news reports of terror events
- Male respondents were less likely to be shaken than female respondents
- More than half of the respondents showed at least one depressive symptom following the attacks.
- The more shaken by the attacks on America, the more they supported a variety of counter terrorism measures.

**Note:** There is a great deal of individual variation in reactions to terror events. One person may be seriously distressed by a set of circumstances and another may take the same circumstances in stride. Likewise communities can demonstrate enormous variation in their short and long term reactions to a tragedy. For some the passage of time heals. The acute effects reside and hope arises and life returns to near normal levels. For others, time appears to have a reverse effect. Instead of healing, time may simply solidify the negative reactions to the terror attack.

## Psychological Conditions Resulting From Exposure to Trauma

1. The media frequently focuses on a painful and debilitating psychological condition called “Posttraumatic Stress Disorder” (PTSD) that affects many victims of traumatic events. PTSD has six major criteria:

- a) Exposure to a horrible, terrible, awful, threatening, terrifying, overwhelming, frightening, grotesque, or disgusting event
- b) Intrusive images (hear it, see it, smell it, taste it, feel it again and again in one’s mind)
- c) Avoidance (avoiding places, people, environments, conversations, or any reminders of the traumatic event)
- d) Arousal symptoms (sleepless, restless, hyper alert, “keyed-up”, ready for action, constantly expecting something else negative to occur)
- e) Symptoms must last longer than 30 days.
- f) The disorder causes significant changes to normal life functions.

PTSD is certainly one of the worst psychological disorders that may be caused by exposure to a terrorist attack, but it is, by no means, the only disorder that might arise. Here is a short list of some other psychological disorders and problems that might arise after such an exposure.

- Panic attacks / Panic disorder (when panic attacks become repetitive over time)
- Alcohol and other drugs of abuse
- Phobic reactions (extreme, irrational fears)
- Withdrawal from family and friends
- Avoidance behaviors

- Loss of self image /self confidence
- Depression
- Suicidal ideation / actions
- Brief Psychotic Reactions (usually in the acute stage)
- Marital discord
- Rage reactions
- Significant changes in personality
- Obsessive compulsive disorders
- Other conditions

### Norwegian Government Question 3:

*How will it be for a victim of a terror attack to return to the site of the attack?*

The return to the site where one's life has been threatened or where an individual has been injured or where one's relatives and friends have been maimed or killed is not an easy task for the majority of people. Most will react with an increase of anxiety and some degree of trepidation. This may be manifest by an uneasy stomach, headaches, stiff necks, lightheadedness, tingly sensations in the extremities, dry mouth, feelings of nervousness, racing heart, elevated blood pressure, dread, hesitancy, mental disorientation, sadness, and feelings of resentment, anger, and disgust for the perpetrator. These reactions will be most intense on the first several visits back to the facilities, but, with time, most people will regain confidence and experience a reduction in the distress of approaching, entering and working in the government buildings.

Those who cannot regain a sense of comfort in the work place and who suffer significant disruptions to their lives may need psychotherapy to reduce their elevated tension levels.

## **Factors Influencing the Level of Emotional Response When in Close Proximity to the Site of a Terror Attack**

- a) Having sustained a physical injury during the attack
- b) Having witnessed others dying
- c) Experiencing a near death experience during the attack
- d) Deaths of close friends as a result of the attack
- e) Being entrapped for a period of time after the explosion
- f) The death of one' own child as a result of the shooting attack
- g) The death of a known young person as a result of the attack
- h) The level of support provided by officials immediately after the attack
- i) The type and amount of early psychological support in the first days or weeks after the attack
- j) Personal resiliency
- k) Religious belief / faith
- l) Amount of change / improvements to the building structures
- m) Level of involvement in deciding on what changes are made
- n) Level of information shared during the repair, rebuilding or new construction process
- o) The type and amount of support services available for an employee returning to the site of the terror attack

### **Norwegian Government Question 4:**

**What are the tools available to reduce the negative connotations associated with the site of a terror attack?**

There are many “tools” and techniques available that may reduce the negative connotations associated with the site of the terror attack. Some of these were obvious in the earliest hours of the attack. In most cases, emergency responders carried out these supportive tasks within the first few hours of the attack. They will be mentioned here only for the sake of completeness. Please note that many of these tools are aimed at physical, social, and environmental services. These also provide psychological support.

- Evacuate the danger zone (hot perimeter)
- Provide triage of the dead and wounded
- Provide emergency medical care
- Transport the wounded to the hospital
- Emergency Department care of the wounded
- Surgical support of the wounded
- Establish security zones / crime scene
- Surge police personnel into the site
- General support in the form of temporary shelter
- Provide food, fluids, rest
- Regroup unwounded people with family, friends or work groups as soon as possible
- Provide information, instructions and guidance as soon as possible
- Large group information sessions
- Individual support to those most seriously emotionally impacted
- Informational sessions for family and friends of the deceased and wounded
- Information to the general community
- Using the media to get government messages across to the public
- Small group support services to emergency response personnel
- Small groups support to homogeneous groups of workers as the needs arise
- Informational group sessions for emergency response personnel
- Informative media broadcasts to the nation
- Assignment of unwounded personnel to temporary facilities so that they can continue their work
- Enhanced security at other public buildings in the aftermath of the terror attack
- Allowing spontaneous temporary memorials to be established
- Funerals and public gatherings where grief is expressed

**In the days and weeks after the terror attack it is important that some of the following take place to reassure the public.**

- Site visits by key governmental people. King George of England and Prime Minister Winston Churchill had a very uplifting influence on the British people when they visited sites of bombings in London and elsewhere during the Second World War
- Representation by ranking members of the government and law enforcement and fire rescue services at funerals and memorial services
- Reassurance that the government is making decision and is functioning
- Identification and referral of those who need formal psychological support services.
- Informational updates from key law enforcement and other governmental officials
- Information about planning and decision making processes
- Recognition of the heroes of the event
- Reassuring news media stories about plans to keep the government functioning in the aftermath of the terror attack
- Announcements of the locations of temporary facilities in which routine government business will be conducted
- Additional group support services for those traumatized by the terror attack
- Publish contact information for people who may be seeking formal psychological care. This is especially important for victims of the tragedy
- Media presentations of information on the care of children or elders in light of the attack

**As repair or rebuilding is contemplated the following issues become very important.**

- Survey of public opinion on a the path forward
- Public hearings on the future of the site of the attack
- Informational bulletins about the steps to be taken
- News media coverage of meetings of decision makers

- Let the public know their opinions are valued and appreciated and that they are being taken seriously
- When plans are made, allow the public to have previews of overviews of the plans. This does not mean that the public should have access to plans of secure portions of the buildings or of security procedures. Just the general plans that do not compromise the future safety and security of the building.
- Once the public has had their say, the decisions makers must decide on their best course of action set off on that course. Someone in authority has to be in charge and responsible for the key decisions even if some will be unhappy about the decisions.
- The worst mistake is inaction on these important decisions. Leaving the damaged building as a scar does not help people to psychologically recover. Decisions, plans, action are necessary. Doing nothing is not an acceptable course of action for any government.

### **When the building is about to be occupied.**

- Keep the victims of the terror attack advised as progress is being made. Do this by newsletters, emails and work place announcements. Let people know the projected dates of completion of key aspects of a project.
- Group support sessions should be held in the weeks before the structure is complete.
- Individuals needing assistance should be offered individual therapy sessions.
- Advise people of the procedures to be employed as they move back into a repaired building or into a new one.
- Arrange times when groups of workers can tour the nearly completed structures. Let them see the changes and improvements that have been made to the structure they will be occupying or to the place they will be working if it is a brand new structure.

- On occasion, some individuals may be so distressed about moving into the repaired or new structure that they would benefit from a private, escorted tour.
- Announce in advance the dedication of a new building or the rededication of a repaired structure.
- Hold an opening day ceremony.
- Remember and honor the dead and wounded
- Thank people for the many sacrifices and inconveniences they endured while the buildings were unavailable.
- Present a hopeful, positive view for the future
- Hold tours for workers and their families and friends.
- The members of the Royal Family, the prime minister, and high level executives should be present
- The somber reasons for the need to repair or rebuild should be addressed, but avoid excessively dwelling on those losses.
- A strong police presence is recommended
- Likewise fire and emergency medical personnel should be on site for the dedication.
- In addition to the dignitaries who speak, a representative of the victims should also be selected to give a brief opening address to the spectators.
- Media should have considerable coverage of the bitter / sweet occasion. The emphasis, however, should be on new beginnings and not solely on the tragedy that befell Norway on July 22, 2011.

#### Norwegian Government question 5:

*What kind of effects do visible security measures have on employees used to less security procedures?*

The answer to this question depends greatly on the level of involvement in the terror attack. The closer to the explosion or loss of life, the more willing people will be to have enhanced and obvious security in the work place and in public areas. If there are renewed threats generated by national or international terror groups, the support for antiterrorism policies will increase. The

less safe people feel, the more they welcome the presence of armed police and more aggressive security measures. But there are limits there as well. In the US, anxiety levels that were uncomfortably high actually triggered greater support for isolation from the world community instead of armed protection at home.

In general, people are initially surprised and discomfited by the presence of increased security personnel and the screening instruments used on their bags and parcels. As time passes, people tend to grow accustomed to the security screenings and they grow more compliant and complacent. If new threats arise, people tend to be comforted by the presence of enhanced security measures. The general population has considerable tolerance for increased security measures if the security personnel perform their jobs with politeness and professionalism.

### Norwegian Government question 6:

**How will a victim of a terror attack experience a return to a building in the close vicinity of an attack?**

If the building the person works in is near the site of the attack, but not the target of an attack, there will be anxiety for some time as people have to go near the site of the attack. But, that anxiety decreases with repetitive visits to their own building. After awhile, they seem to be able to put aside their anxiety as they realize that their building was not the target of the attack.

If they are government workers whose building was not a target of the attack, they may have to contend with lingering fear that their building might still be on someone's target list and might be hit at any time. The passage of time and the fact that no attack takes place during multiple visits to the facility generally reduces anxiety and distress. People are also encouraged when they see some obvious signs that progress is being made on repairs and or on new construction. If a site appears to have been abandoned with no work going on, anxiety and discomfort tends to rise.

## Norwegian Government questions 7:

**If there are different schools of thought / scientific approaches involved, it is important that the presentation attempts to balance the different views.**

### *Military*

Different subpopulations react differently to a terror attack and have different expectations about rebuilding. The military, for example, wants the façade of a damaged building to be rebuilt to appear exactly as it did before the terror attack. They do not object to it being made stronger nor do they object to internal changes and improvements. But the fortress has to be restored.

They also want the building to be reconstructed as quickly as possible. To do otherwise is to show signs of surrender or weakness to the “enemy”. The Pentagon is a classic example of this viewpoint. As soon as the investigative aspects of the 2001 terror attack were completed, contractors were brought in to shore up the weakened structures within the building. Clean up of the debris was completed in record time and the damaged portions of the building were made stronger and were reconstructed in less than the expected or allotted time frames. The builders were hailed as heroes and the military was quick to point out that they successfully eliminated the Taliban government of Afghanistan before the building reconstruction was complete. The military has a need, in its reconstruction after a terror attack, to show power, control, and defiance.

### *Schools and Places used by Children*

When children have been the victims, the reigning wisdom is to make the reconstructed building very different than it had been during the terror event or the natural disaster that damaged the building. This was clearly the decision made in the Coldenham, New York Tornado Disaster in November 16, 1989. Nine children were killed as a direct result of the tornado strike on the school.

Forty one children were injured in the event and a tenth child died the next day in an auto accident that occurred when the driver of one vehicle was looking over his shoulder at the damaged school and struck another vehicle carrying the tenth child in the school to die within 22 hours. The expert psychological advice that was given and followed was to make the building as different as possible so that the children would have little to remind them of the tragedy that had occurred within the walls of the school. There were insufficient funds to build a whole new building, so repairs and improvements were made to both the exterior and interior of the school building. The faculty and administrators reported that advice was sound and that the children were not reactive to the memories of the traumatic event

In the terror attack on the Columbine High School in Jefferson County, Colorado, the school authorities listened to the advice offered by child psychiatrists who specialize in trauma and made the two rooms in which most of the murders took place very different than they had been before. The two rooms were the cafeteria and the library. Besides repainting and some cosmetic alterations to the interior of the school, the rest of the school remained mostly as it had been before the terror attack.

**IMPORTANT NOTE:** The predominant theme in the available literature on this subject suggests that even when adults are the primary population to occupy a building, it is best to change aspects of the building sufficiently to reduce reminders of the traumatic event. People maintain intense uncomfortable memories of a traumatic experience and alterations to the sites where tragedies occurred can go far to reduce the turmoil associated with working in those environments. I believe that we should accept the general premise that some alterations and improvements to a location where a terrorist event occurred is quite helpful in assisting people to return to their normal duties in an area where they experienced an emotionally overwhelming event.

## *Historical Preservation / Reconstruction*

When a building is historically significant or when it has some important cultural features, there is usually a very strong desire, on the part of the citizens, to have such a building restored as close to its previous appearance as possible. These historical or culturally significant buildings are viewed as important symbols of one's nation and of its society. The loss of such a building is seen as a deep psychological wound so people ordinarily exert substantial pressure on their government to restore the structure.

In the Puerto Rican Terror attack in the US Capital Building in 1954, five congressmen were shot by automatic gunfire while they were engaged legislative processes on the floor of the House of Representatives. Some damage was caused by the gunfire. The congressmen all recovered and returned to Congress. The nation wanted all signs of damage to be removed from the building. Likewise when the weather underground movement bomber the US Capital Building in 1968 over \$300,000 was caused to the building. Some paintings were damaged in the explosion. Repairs eliminated all signs of the attack.

Allied bombing during the Second World War heavily damaged the city of Rothenberg, Germany. The city was eventually restored to its prewar appearance. Some of the damaged structures took several decades to restore.

### *When Restoration is not Possible*

Some important historical structures are so badly damaged that, for a number of reasons, restoration is not possible. One example is Coventry Cathedral in England. German bombing of the structure thoroughly destroyed the magnificent building and there were few people, who survived the war, who had the technical and artistic skills to restore it. The expense of restoration was prohibitive in the poor economic conditions after the war. Its remains were incorporated into the building plan of the new cathedral and parts of the original structure were

preserved as a memorial to the many who died during the bombing.

### Norwegian Government questions 8:

There are four government buildings damaged. The main options we are facing concerning the buildings are as follows: (1). Demolish all the buildings and build up new buildings. In this situation the question would be whether to keep a part of one of the buildings as a monument / memorial, or erase all traces of the terror attack. (2). Restore all buildings and remove all traces from of the terror attack from the buildings, or restore the buildings, but preserve for example one damaged façade as a memorial / monument.

What we would like to know, is how this question has been dealt with in other comparable situations internationally, what is the sound scientific advice concerning this, and how would the different options be perceived by the victims of the attack, both the workers in the affected buildings, and by the nation as victim.

The answers to these questions are complex because the question is complex in itself. The Norwegian Government must consider several key factors.

- a) The age of the buildings and the infrastructure
- b) Life expectancy of the buildings going forward
- c) The positioning of the building and whether there is sufficient natural light entering the building during normal work hours. Would changes be contemplated because of the lighting issues or other such factors?
- d) The intensity of psychological resistance to working in the buildings. That will require brief surveys from the people who would work in the buildings.
- e) The stability and structural integrity of the building
- f) Level of damage to the building's infrastructure

- g) Whether or not the buildings have some unique architectural features
- h) Economic cost of repairing and reconstructing vs. completely new structures.
- i) Extent of alterations to the internal design of the building to accommodate the needs of special projects within various governmental agencies
- j) Availability of alternative temporary buildings to house the various government agencies during new construction or reconstruction
- k) Public pressure to construct quickly
- l) Space availability for a separate memorial near or attached to a building
- m) Needs of the families who lost loved ones
- n) Health considerations (Is there too much asbestos present to allow the buildings to be reopened? The violence of the explosion shook the interiors and loosened the asbestos and possibly fiberglass particles.)
- o) Current age of the building and expected utilization into the future. Are the buildings still suitable for what the government wants them to achieve?
- p) Services to be housed in the building and their specific needs
- q) History and traditions associated with the building
- r) Blend of the buildings into the architecture of the community
- s) The time it will take to properly clean, and restore the buildings as opposed to tearing down and building anew. The view of this consultant is that either of the main choices sets Norway on a multi-year project. It will take time to tear down and build up new buildings. It will also take time to repair and refurbish the buildings
- t) Other considerations not known to this consultant at the time of this writing

## **Comments to Specific Options Available to the Norwegian Government**

- 1) **“Demolish all the buildings and build up new buildings. In this situation the question would be whether to keep a part of one of the buildings as a monument / memorial, or erase all traces of the terror attack.”**
- 2) **Restore all buildings and remove all traces from of the terror attack from the buildings, or restore the buildings, but preserve for example one damaged façade as a memorial / monument.**

Demolishing all four buildings and building up new buildings, on first glance, seems like an easy solution. Decision makers must, however, seriously consider the factors listed above. Not to do so will be viewed by the public as irresponsible behavior. If a decision is made to tear down the buildings, engineering reports, surveys, assessments records, consultant reports, and economic projections as well as other records must be archived. Some Norwegians will question any decision made by the government and the records should show that decisions were not arbitrary and capricious.

In the view of this consultant, some type of memorial should be placed at the site. Whether that is blended into a building or erected in a square or plaza between the buildings is yet to be determined. A decision to have no memorial whatsoever will be seen as insensitive and uncaring on the part of the government. People need memorials to grieve over their losses and to be warned about the future by echoes from the past. And, mostly, people need to remember those who paid such a dear price for the open society that Norway is today.

There is a museum being completed within “ground zero” at the World Trade Center in New York. In that museum, there are several parts of the building that have been preserved as reminders of the lives lost and the horrific destruction of September 11, 2001. Those parts are not part of the new building being constructed on the site. They are a separate display

altogether. It is very tastefully done. Then there are the memorial waterfalls in the plaza with the names of the deceased etched upon them. Overall, a very substantial area has been preserved for the memorials at “ground zero.” In the two months since these memorials have opened hundreds of thousands of people have come to see them. The number of visitors is expected to dramatically increase in the years to come.

As I have researched the literature on disaster memorials and building new or refurbishing older facilities, the consensus appears to be that memorials are extremely important for a variety of reasons. There is less support for maintaining parts of the building as part of new or refurbished buildings. On that issue there appears to be no consensus. Where it has been achieved there is a wonderful blend of the old architecture and the new. Coventry Cathedral, destroyed by German bombings in WWII, in The United Kingdom is one brilliant example.

Although some monument on the island where the young men and women were killed would be fitting memorial, I think it is important that those people should also be recognized in the memorial at the government buildings in Oslo. The events in Oslo were certainly connected to the mass murders on Utoya Island. Therefore, the two events should be merged into one memorial. Many more people will be able to visit the Oslo site since the island is more isolated from the mainstream of life in and around Oslo.

Government officials should also consider if all of the buildings are about equally damaged. Or should the focus be on one or two of the buildings? In other words repair some, build new for the others? These kinds of decisions will depend on engineering reports about the integrity of the buildings and the financial costs of repair and rebuilding as opposed to completely new construction.

With the proper information and the right combination of psychological resources, the majority of the population of Norway

can be assisted in adapting to whatever of the alternatives that the government decides is in the best interest of Norway and its people.

There is no evidence that suggests people will be psychologically harmed by the tearing down of the current buildings and the building of new buildings. Likewise, evidence does not support a negative outcome if the current buildings are repaired. Much of the reaction of the population will depend on how well the government keeps people informed. If people understand the rationale for one decision or another, they are more likely to support such decisions.

### Key Guidelines for Decision Making Regarding the Damaged Government Buildings in Oslo

- If there is one overriding principle in the aftermath of a terror attack, it is to *make some things different* when reconstructing a building or making a new building. The historically based exceptions are described earlier under the section on the various schools of thought.
- Definitely have a memorial placed on the site in Oslo.
- The world news outlets always connected the Oslo bombing with the murders on Utoya Island. In all likelihood, the same views of the attacks were presented within Norway. Norway was attacked in two connected incidents. The perpetrator was the same person and the motivation, no matter how bizarre, was the same in both incidents.
- Consider all factors before making final decisions
- Invite public input, but let the Government be the prime decision maker.
- Make the key decisions before the end of 2011 if possible. What is the primary strategy for the buildings? New York City invited into the discussion a high percentage of victims' families and lost control of the discussions. They could not make decisions and a hole remained in the ground for nearly ten years. That, in and of itself, caused enormous

pain for the people of New York and for the nation. There was much infighting and disgruntled feelings. Every believed that the government was inept and unable to handle the challenges. Frustrations ran high. The perception was that the enemy had won. Avoid this condition at all costs. The negative psychological reactions in many people were exacerbated by the unnecessary and fruitless delays.

- Norway may need a multi-year plan for the repair or new construction projects.
- People can be much stronger than we believe. They do have natural resistance.
- Norwegians are a strong people. They suffered through a hostile occupation in World War II and survived some pretty horrible tragedies. They can rally again and recover from the terrible events of July 22, 2011.
- Keep people informed of what is being done and why.
- Much of the efforts going forward will require a strong public information effort.
- Inform people as important milestones are reached.
- Let people know when the completion of the project is in the foreseeable future.
- Show broad drawings of what the buildings will look like. Do not distribute floor plans. To do so could invite future attacks and additional problems.
- Maintain an up-to-date “progress” website that helps people to be informed of decisions and of progress to date.
- Prepare special ceremonies for the dedication of the repaired or new buildings. Additional comments on this issue were offered earlier in this report.

## Conclusion

There are many challenges for Norway in the months and years to come. The government must develop an overall strategy and develop a series of steps to carry out the strategy. Decisions must reflect the best thinking available under the circumstances. All factors in the decision making process must be evaluated. The

task is a complex one and I wish the government good fortune as they contemplate the various issues and make decisions.

Thank you for the opportunity to consult with the Government of Norway. I hope these remarks are helpful in the decision making process.

I offer you my condolences for the suffering Norway has endured and my hope for a positive future.

Please feel free to contact me if you have additional questions.

Jeffrey T. Mitchell, PhD

- Certified Trauma Specialist
  - Traumatic Stress Consultant
  - Clinical Professor of Emergency Health Services
- University of Maryland Baltimore County

November 25, 2011

### **Selected References**

American Psychological Association. (2003). *Fostering Resilience in Response to Terrorism: For Psychologists working with older adults, Fact Sheet*. Washington, DC: National Mental Health Services Knowledge Exchange Network

- Consortium of Social Science Associations (COSSA) (2010).  
Reactions to terrorism: Attitudes and Anxieties.  
Congressional Briefing June 18, 2010.  
<http://www.cossa.org/seminarseries/terrorismexecsum.htm>
- Frey, B.S. and Rohner, D. (2007). Protecting Cultural Monuments  
Against Terrorism. *Defense and Peace Economics*, 18 (3),  
245-252.
- Gibson, M. (2006). *Order From Chaos: Responding to Traumatic  
Events*. Bristol, England: The Policy Press, University of  
Bristol.
- History Channel (2011). 9/11 Memorial and the Rebuilding of  
Ground Zero. *The History Channel website*. Retrieved 6:55,  
November 13, 2011, from [http://www.history.com/topics/9-11-  
memorial](http://www.history.com/topics/9-11-memorial)
- Huddy, L., Feldman, S., Taber, C., and Lahav, G. (2005). Threat,  
Anxiety, and Support of Antiterrorism Policies. *American  
Journal of Political Sciences*, 49 (3), 593-608.
- Mansdorf, I.J. (2008). Psychological Interventions following  
terrorist attacks. *British Medical Bulletin*, 88 (1), 7-22.
- Mitchell, J.T. (2009). Crisis Intervention in Disasters and Other  
Large-Scale Incidents. In D.A. Polk and J.T. Mitchell  
*Prehospital Behavioral Emergencies and Crisis Response*
- Mitchell, J.T. (in press). Memorial Architecture: Lest we Forget.  
*Encyclopedia of Trauma*. Austin, Texas: Sage Publications.
- New York City Department of Health and mental Hygiene. (2011).  
Terrorism and Mental Health. *Public Health Emergency  
Preparedness*. Informational brochure. New York: NYC  
department of Health and mental Hygiene.
- Njenga, F.C., Nicholis, P.J. et al. (2004). *British journal of*

*Psychiatry*, 185, 328-333.

Oakridge Institute for Science and Education. (2010) Psychology of a Crisis – How Knowing This Helps Communication.  
<http://www.orau.gov/cdcynergy/erc/Content/activeinformation/essent...>

Port Authority, New York Mass Transit Administration.  
Remembering and Rebuilding after 9-11. Information sheet.  
<http://www.mta.info/news/stories/?story=102>

Schelnger, W.E., Caddell, J.M. et al. (2002). Psychological Reactions to Terrorist Attacks: Findings from the National Study of Americans' Reactions to September 11. *Journal of the American Medical Association (JAMA)*, 288 (5), 581-588.

United States Department of Defense (DoD). (2011) *Pentagon History – September 11, 2001*. Informational website.  
<http://pentagon.osd.mil/september11.html>

Wessely, S. (2007). London can take it – psychological reactions to terrorism from blitz to Bin Laden. Lecture by Simon Wessely published by Gresham College.  
<http://www.gresham.ac.uk/print/2103>

Zeidner, M. (2006). Individual differences in psychological reactions to terror attack. *Personality and Individual Differences*, 40 (4), 771-781.

## **Executive Summary**

# **Psychological Aspects of Repairing or Rebuilding in the Aftermath of A Terror Attack**

**By**

# **Jeffrey T. Mitchell, Ph.D.**

**Clinical Professor**

**Emergency Health Services Department**

**University of Maryland Baltimore County**

The July 22, 2011 bombing of Norwegian Government buildings in Oslo and the connected murder of innocent young men and women on Utoya Island caused severe psychological stress for the victims, their families, government workers, and the citizens of Norway in general. A wide range of immediate, short-term psychological reactions occurred in close time-proximity to the tragic events. There are also intense, prolonged psychological reactions for many who were exposed to either the explosion or the shooting. These after-effects continue to this day and are likely to continue well into the future. Government decisions to repair and refurbish or to demolish and rebuild must address these sensitive psychological issues or there will be a substantial chance of worsening the psychological status of many of Norway's citizens. This report provides important information regarding the psychological reactions to terrorism. It should prove helpful to Norwegian Government decision makers as they plan a way forward in the aftermath of the terror attacks of July 22, 2011.

Extensive coverage of the short-term and long-term psychological effects and symptoms of a terror attack can be found in the main body of the report. There is no need to repeat them in this summary.

There are numerous psychological and psycho-physical conditions that can result from a terror attack. They include Traumatic Brain Injury, Posttraumatic Stress Disorder, panic attacks and panic disorder, substance abuse, depression, withdrawal from contact with others, rage reactions, elevated blood pressure, and mental confusion and disorganization.

Norwegian government officials presented 8 primary questions to the consultant. Every effort was made to answer the question based on a site visit and upon the available current research in the field of disaster psychology.

**Question #1** *What are the most common after effects of a terrorist attack?*

A substantial portion of the main report answers this question. The common psychological reactions are listed by categories such as immediate reactions and reactions over the next few days. Then the long term reactions are discussed.

**Question 2:** *For how long will the effects of a terror attack last?*

Reactions to a traumatic experience are very individualistic. Some have the immediate reactions and they recover from these fairly quickly. Others have delayed reactions that may not begin for days to weeks after the event. For some people the reactions become ingrained in the person's mind and they can last for years or even a lifetime. Psychotherapy may be very helpful for those people reduce the psychological tension.

**Question 3:** *How will it be for a victim of a terror attack to return to the site of the attack?*

For the majority of people this is a manageable stress. For some, it presents a major challenge. There are numerous procedures that may alleviate distress for people returning to buildings that were damaged and repaired or to new building near the site of the terror event. A combination of personal resiliency and the availability of a variety of supportive resources can help people to return to their work with a much lower level of anxiety than might be expected without those supports. Accurate, complete and timely information appears to be the best tool available to reduce distress as people re-enter areas that are associated with the terror attack.

**Question 4:** *What are the tools available to reduce the negative connotations associated with the site of a terror attack?*

The answer to this question is divided into several segments. They address the immediate care taken of traumatized people during and shortly after the attack. There is a great deal of emphasis in this section to providing ample information to people regarding the current status of the buildings. Other tactics that are helpful are enhanced security procedures, group discussions led by a mental health profession who is specially trained to manage groups of normal people and opening ceremonies.

**Question 5: *What kind of effects do visible security measures have on employees used to less security procedures?***

As long as people are given a good rationale for the increased security, they tend to adapt to it. They grow compliant and complacent with security measures and generally recognize that these measures assure the safety of average people as well as government officials.

**Question 6: How will a victim of a terror attack experience a return to a building in the close vicinity of an attack?**

Initial apprehension gradually gives way to increasing comfort as an individual makes repeated trips to and from the buildings close by the site of the attack.

**Question 7: If there are different schools of thought / scientific approaches involved, it is important that the presentation attempts to balance the different views.**

Several different schools of thought were presented in the report. The first was the military thought process that usually demands as immediate rebuilding as possible. Military personnel want the building to be stronger than before. They do not mind improvements, but they want the fortress restored. Delays in getting on with the rebuilding are seen as signs to the enemy that the military is defeated and uncertain as to what to do.

When children are involved the common practice is to make the building different to avoid generating uncomfortable memories of the traumatic event. The building does not have to be torn

down and built from the ground up. But refurbished areas of the building should be different enough to help children not focus on the traumatic experience.

The “make it a bit different” school of thought also applies to most people in the general population. If a building has to be kept, then people prefer that the areas most associated with the terror attack be modified to reduce the focus on the areas where the terror attack had its primary impact.

The historical preservation school of thought is normally applied only when a building holds deep historical or cultural significance. It is an expensive approach and requires a meticulous repair and restoration so that the appearance of the building is as nearly as it used to be in the past as is humanly possible.

The last school of thought discussed in the report is when an important historical building cannot be restored and parts of it are incorporated into a new building.

**Question 8: There are four government buildings damaged. The main options we are facing concerning the buildings are as follows: (1). Demolish all the buildings and build up new buildings. In this situation the question would be whether to keep a part of one of the buildings as a monument / memorial, or erase all traces of the terror attack. (2). Restore all buildings and remove all traces from of the terror attack from the buildings, or restore the buildings, but preserve for example one damaged façade as a memorial / monument.**

**What we would like to know, is how this question has been dealt with in other comparable situations internationally, what is the sound scientific advice concerning this, and how would the different options be perceived by the victims of the attack, both the workers in the affected buildings, and by the nation as victim.**

Before these decisions can be reached there are numerous factors that must be addressed by government officials. They include age of the current buildings, structural integrity, condition

of the infrastructure, historical value, projected longevity or life expectancy going forward, expense of new versus repair of buildings.

From a psychological perspective, people will be able to adapt to whatever decisions are made as long as they receive adequate information and justification for the government's decisions.

### Key Recommendations

- *Make some things different* when reconstructing a building or making a new building.
- *Construct a memorial at the Oslo site.*
- *Incorporate the Utoya Island terror attack into the Oslo site memorial*
- *Make sure the memorial is placed in a non secure area so that average citizens can have access to it without having to clear through elaborate security checks.*
- *Invite some public input, but keep the government in control of the decision making process.*
- *Develop a primary strategy for the buildings before the end of 2011 if possible.*
- *View this project as a multi-year, multi-phase project.*
- *Norwegians are very resilient people who can adapt to many things as long as they are adequately informed as to what decisions were made and why those decisions were made.*
- *Develop a strong public information approach.*
- *Develop a “progress” website.*
- *Open the buildings when ready with a rededication ceremony or a dedication if it is a new building.*

Respectfully submitted,  
November 25, 2011

Jeffrey T. Mitchell, Ph.D.

-Certified Trauma Specialist  
-Clinical Professor of Emergency Health Services  
University of Maryland Baltimore County