

Unexpected Challenges for Communities in the Recovery Phase of a Mass Violence Incident

When a mass violence or terrorism incident (MVI) occurs, the often-devastating impact affects not only individual victims, survivors, witnesses and first responders, but the community as a whole. MVIs can detrimentally affect a community's collective sense of order, safety and security. While there are often positive, heartwarming stories about how people helped each other in the aftermath of a MVI and built community resilience, there are also unforeseen conflicts that may emerge over time as the community seeks to recover and rebuild.

“Recovery” from a MVI is an often lengthy and ongoing process; there is no standard timeframe for recovery. The collective community trauma of a MVI can detrimentally affect the provision of and access to quality services for survivors; create conflicts related to choices and options about appropriate responses; and pose challenges to the creation of effective partnerships needed to build long-term community resilience.

Communities that have proactive plans to help them prepare for and respond to MVIs in the immediate, short- and long-term generally fare better than communities that do not have plans. In addition, the many “lessons learned” from the broad experiences of communities that have experienced a MVI are instructive to identify “unexpected challenges” that are increasingly becoming “expected challenges.” Below is a brief summary of common “unexpected challenges,” followed by a matrix that lists possible solutions to such challenges.

- 1. Individuals have their own unique responses to trauma.** Every crime victim/survivor is unique, and many factors affect their capacity to reconstruct their lives following an MVI. MVI victims who have experienced acute trauma from previous victimization or exposure to a violent event, or chronic trauma over their lifetimes within their family or community, may have unique reactions. These reactions might include heightened emotional reactivity, heightened anxiety or depression, avoidance of reminders of any traumatic event, among other reactions. Victims' degree of social support from family members and friends – and following an MVI, often from the community – can affect and enhance their recovery process. Survivor-centered and trauma-informed MVI policies, protocols, and programs can strengthen a community's response to identify and meet the unique needs of MVI victims.
- 2. The impact of historical trauma can have a profound impact on an individual's capacity to cope and/or access services.** MVI victims' experience with and exposure to historical trauma can affect the acute trauma resulting from the MVI. Historical trauma – resulting from one's culture, race, ethnicity, cross-generational family relationships, or faith – can affect a victim's level of trust in service providers or law enforcement/justice agencies. It can also impact their capacity to access

services and heighten feelings of being understood and validated by service providers. Historical trauma is *persistent trauma* that often underlies the acute trauma of becoming a victim of an MVI.

- 3. The ability of victims/survivors to access services may vary.** Just because victim services are *available* does not mean they are *easily accessed*. Many educational or therapeutic resources and strategies are embedded with victims' implicit cultural biases about family structure, gender roles, or their capacity to seek help. Victim support and psychoeducational resources – both on paper and online – are not always easy to understand, nor are always available in the primary languages spoken by members of the affected community. Victims who have never utilized social or victim/survivor services may feel uncomfortable seeking help. Victims with physical, intellectual or developmental disabilities may require additional assistance to facilitate their access to services.
- 4. Individual survivors and communities may feel overlooked or ignored.** Barriers that limit access to services (see above) can result in victims and entire communities feeling ignored. An individual MVI victim or community can find themselves inundated with support in the immediate aftermath of an MVI, but less so over time. And when a new MVI occurs, the focus on previous MVIs and victims often decreases. A commitment to strong community support for MVI victims requires planning for the sustainability of services that identifies and meets victims' long-term, ongoing needs.
- 5. There are different Federal definitions of what constitutes “mass violence.”** The Federal government has three different definitions of what constitutes “mass violence” (see <https://www.nmvvrc.org/learn/about-mass-violence/>). This variance in definitions affects states and local leaders' immediate- and long-term decision-making and planning, and Federal funding of recovery and resilience activities.
- 6. There are different laws and opinions regarding what constitutes a “victim or survivor.”** Every state and the Federal government have different statutorily-supported definitions of who is a “crime victim.” Such definitions can affect who is eligible for victim services (including crime victim compensation), the implementation of victims' statutory rights under the law, and who can participate in any criminal justice processes related to the MVI. In criminal justice cases involving dual-jurisdictions (i.e., Federal and state; Tribal and state), victims' rights and access to services may differ depending upon if someone is statutorily defined as a “victim.” If individual MVI survivors, witnesses, and first responders are not included within the scope of a definition of “victim,” they may be denied greatly needed services and support to help them participate in justice processes (when applicable), and to help them recover.
- 7. There are often different perceptions about how “community” is defined.** In the aftermath of an MVI, the “community” is often geographically defined. Yet many communities define themselves through their existing connections, including multi-faith institutions, cultural considerations, school affiliations, military affiliations, and places of employment, among others.

- 8. Local leaders may not be trauma-informed and often erroneously assume they know the needs of victims and their communities.** Planning for MVI readiness and response cannot always correctly anticipate the impact on and needs of survivors and communities. Local leaders must not rush to resume “life as usual.” They must work hand-in-hand with victim assistance and mental/behavioral health providers and crisis teams and, as appropriate, include communities of faith, educational systems, NGOs in the affected community, etc. These groups will be positioned to help leaders make survivor-centered, evidence-based decisions. Leaders should understand that each MVI is unique based on its location, scope, the number of physically injured and killed, the cultural values and mores of affected populations, and the quality of the initial crisis response. Leaders should not rush to quash services or downplay the impact of the MVI, which could be devastating to victims and survivors. Also, victim impact may relate to whether or not an alleged perpetrator is alive or deceased, and the existing communities most directly affected (see above), among other factors. While many of the “lessons learned” from previous MVIs are helpful in planning, it’s essential to recognize the unique aspects of the current MVI, and adapt all responses in a way that avoids making assumptions.
- 9. The process of conflict resolution is often, in and of itself, challenging.** Common reactions of people who experience a violent event such as an MVI are fear, chronic stress, and distrust of others, all of which are barriers to cooperation and often foundations for conflict. When decisions affect MVI victims/survivors without their input or consultation, conflicts will arise. When different victims and their communities have differing opinions about critical issues such as distributing funds, planning MVI anniversary observances and building permanent memorials, conflicts will arise. And too often, issues causing “conflict” are not clearly identified nor defined, creating a lack of clarity that adds to the communal conflict.
- 10. There are different views about what constitutes “recovery” and “resilience.”** The devastating impact of an MVI on individual victims and communities varies, with people’s lives profoundly changed. Victims may have a changed view of the world as a safe place, and their perceptions of justice may differ based upon their lifetime of lived experiences. For some victims, the term “recovery” connotes an end to their trauma and pain – a goal that may, at times, feel unattainable. The overall capacity of a community must be determined to effectively respond to victims’ needs and concerns relative to recovery and resilience, both individually and collectively.
- 11. Mass violence incidents driven by hate create critical, unique challenges to individuals and communities.** The goal and often result of hate-motivated crimes are to inspire persistent fear and terror in *all* members of the targeted group. When even relatively few individuals are targeted in an MVI driven by hate, the fear and distress can radiate through the entire local, national, and global community. Such crimes often cause those among the targeted community to change their lifestyles and behaviors; and can have both acute and long-term chronic, adverse effects. Prior personal or

vicarious experiences resulting from discrimination and hate can heighten victims' trauma responses and capacity for recovery.

- 12. Traditional and social media coverage of mass violence incidents may re-traumatize victims, survivors, and communities.** MVIs are almost always crimes of local, state, national, and international interest, resulting in heightened news media interest and coverage. Journalists' interest in interviewing MVI victims and survivors – when the MVI occurs, around criminal justice proceedings, and during anniversary observances – sometimes compounds victim trauma and serves as a negative "cue" or reminder of the initial trauma. The initial and ongoing social media interest in the MVI and its impact is a "double-edged" sword that can offer positive support for affected survivors and communities; or negative connotations that promote victim-blaming, unfounded conspiracy theories, and racial and cultural insensitivity.
- 13. Efforts to build sustaining community partnerships can be difficult.** Without planning and preparation, communities that experience an MVI often lack the crucial relationships among agencies and professionals involved in the immediate-, short- and long-term responses. Any conflicts that existed before the MVI might be exacerbated in its wake. Actual and perceived "turf" and "power" issues result in barriers to collaboration for response programs, policies, and protocols; and the prevention of the creation of permanent partnerships needed to sustain victim and community support over the long term.
- 14. Efforts to sustain services over time can be difficult.** While the initial impact of MVIs on victims and communities is evident and clear-cut, the longer-term impact is often less clearly defined. Awareness of the longer-term impact of MVIs is more limited. The outpouring of community support for victims usually subsides over time, while victims' needs for long-term services and support do not. Concurrently, governmental and private funding of services and support after an MVI tends to be time-limited, and fails to recognize the lingering effects of trauma that MVIs have on victims and their loved ones, first responders, and communities as a whole. Additionally, providing such services can be costly and might be best understood as a community investment.
- 15. Justice and other criminal justice outcomes might not be what victims expect or envision.** Considering what they experienced, victims and families are eager to see justice. However, justice is subjective and can create varying degrees of satisfaction or disappointment; and victims' unique perspectives of what personally constitutes "justice" for them vary considerably. Many victims or survivors want "their day in court," but that might not always be possible. For instance, if the perpetrator is killed, whether self-inflicted or by law enforcement, this might leave some victims feeling as though they missed their opportunity for justice. Some might be angry and upset, while others are relieved. When there is a plea agreement, a victim might feel it is less than acceptable. Forewarning them about the range of potential criminal justice outcomes can help ease their discomfort with related decisions.

16. Communities are eager to get back to normal without due consideration of the long-term needs of victims. Some community members and leaders can be eager for life to get back to normal. They may be concerned about the community's image of being labeled negatively as a "victim" and how it might impact their social and financial recovery. To them, resuming "business as usual" is how to "get over it" and put the MVI behind them. At whatever point they determine is reasonable, they believe that victims should move forward with their lives – a belief that is difficult or impossible for many victims to achieve.

17. Some MVIs have met with cruel disbelief and taunting by hoaxers, deniers, and conspiracy theorists. Some families have met with outrageous claims from people who refute the mass violence incident and the subsequent deaths and injuries. The behavior of these hecklers and hoaxers is hurtful and adds inexplicable insult to injury. This can attract attention throughout the recovery time period, especially at times of the court proceedings, anniversary events, and memorials.

**Challenges and Possible Solutions to
Unexpected Challenges for Communities in the Recovery Phase of a Mass Violence Incident**

Challenges	Possible Solutions
1. Individuals have their own unique responses to trauma.	<ul style="list-style-type: none"> • Provide training about the impact of crime and MVIs on victims, and evidence-based, trauma-informed responses to personnel and programs involved in MVI responses. • Conduct assessments of victims that identify their needs and level of social support, and develop case planning to meet their needs and strengthen their social support systems. • Help every victim complete an application for crime victim compensation that can provide long-term mental and behavioral health support and assistance, as needed.
2. The impact of historical trauma can have a profound impact on an individual's capacity to cope and/or access services.	<ul style="list-style-type: none"> • Provide education and training about what historical trauma is and how it may affect some MVI victims. This can improve and appropriately diversify individual and community responses. • Diversity in responders and service providers that aligns directly with MVI victims can help build trust and validate the different levels of trauma they may experience. • Include, when possible, trusted persons from the impacted cultural community, such as civic and faith leaders.
3. The ability of victims/survivors to access services may vary.	<ul style="list-style-type: none"> • Concerted outreach to leaders of traditionally marginalized communities who can become liaisons to victim services is helpful to improve survivors' access to and comfort with receiving the services. • Establish contact early on with community agencies that know and work with marginalized, underserved populations. Offer to work with them to provide services within the community to ensure a broad outreach. • Working with respected local agencies helps to establish trust and makes contacting victims easier. • Resources for victims – on paper and online – should respect and reflect the diversity of populations served by language, age, culture, language, disability, educational levels, developmental status, or sexual orientation.
4. Individual survivors and communities may feel overlooked or ignored.	<ul style="list-style-type: none"> • Develop MVI response plans that take into consideration the long-term needs of affected survivors and communities; and regularly update such plans. • Offer in-person and online support groups to victims as long as they are needed.

Challenges	Possible Solutions
	<ul style="list-style-type: none"> • Provide training to traditional (non-MVI-specific) victim service programs and professionals who can offer ongoing support to MVI survivors. • Maintain a consistent presence through local and social media for how to reach victims and survivors. There is no wrong door!
<p>5. There are different Federal definitions of what constitutes “mass violence.”</p>	<ul style="list-style-type: none"> • State and community leaders should become educated about the different definitions of “mass violence,” and how each definition can affect funding and service planning and provision. • Having a single, consistent Federal definition of a “mass violence incident” would be beneficial for all.
<p>6. There are different laws and opinions regarding what constitutes a “victim or survivor.”</p>	<ul style="list-style-type: none"> • All MVI readiness and response efforts should include education about the relevant Federal, Tribal, state, and sometimes local definitions of "victim" within statutes, state constitutional amendments, and agency policies. • Consideration can be given to expanding the definition of "victim" for the purpose of providing services based upon and validating the specific needs of MVI survivors, witnesses, and first responders.
<p>7. There are often different perceptions about how “community” is defined.</p>	<ul style="list-style-type: none"> • By recognizing <i>existing connections</i> and <i>communities</i>, leaders of MVI responses can build upon enduring community bonds and strengths that offer a strong foundation for resilience. • Responders can provide options and opportunities for affected communities to define themselves within a more personalized, extensive definition of "community."
<p>8. Local leaders may not be trauma-informed and often erroneously assume they know the needs of victims and their communities.</p>	<ul style="list-style-type: none"> • Plans must be fluid and flexible, based upon the scope and impact of the MVI. • Individual victim/survivor needs assessments, and broader community needs assessments can help clarify individual and collective needs to meet them.
<p>9. The process of conflict resolution is often, in and of itself, challenging.</p>	<ul style="list-style-type: none"> • Having an openness and willingness to listen and learn from <i>all</i> stakeholders in MVI responses can provide a solid foundation to identify and address any conflicts. • The actual sources of conflict must be <i>clearly defined</i> before they can be addressed and resolved.

Challenges	Possible Solutions
	<ul style="list-style-type: none"> Trained and skilled mediators are available in most communities to facilitate conflict resolution and problem-solving.
<p>10. There are different views about what constitutes “recovery” and “resilience.”</p>	<ul style="list-style-type: none"> Ultimately, resilience and recovery are not something that can be “achieved.” Rather, agreed upon benchmarks that depict the progress of community recovery can be collectively established and periodically assessed and measured. The process of one’s individual recovery should be assessed by working with a mental or behavioral health specialist. Community partners and providers should be trained in trauma-informed practices and recognize that mass violence has changed community and individuals, therefore its impact should be incorporated within a recovery journey of helping people learn how to live with the event and manage future adversities.
<p>11. Mass violence incidents driven by hate create critical, unique challenges to individuals and communities.</p>	<ul style="list-style-type: none"> Community responders and providers need to be well-informed of the cultural and historical context of the targeted population of victims of hate-motivated MVIs. Consultation with and input from individuals within the targeted community are essential.
<p>12. Traditional and social media coverage of mass violence incidents may re-traumatize victims, survivors, and communities.</p>	<ul style="list-style-type: none"> The designation of one trusted source of initial and ongoing information about the MVI can ensure the timeliness and accuracy of public information. Media education about sensitive coverage of MVIs and victimization can help improve traditional news media coverage of MVIs (see NMVRC, “Resources for Journalists,” at https://www.nmvrc.org/media/resources-for-journalists/) Victim/survivor awareness about media interactions can help improve their media relations and reduce potential trauma (reference tip sheets). The creation of a singular #hashtag for social media helps unify messaging and public outreach
<p>13. Efforts to build sustaining community partnerships can be difficult.</p>	<ul style="list-style-type: none"> Identify shared values, and issues of common ground and concern, before tackling conflict. Recognize the long-term benefits of collaboration required for a sustained and effective response to victims and communities. All organizations involved in the response to the MVI should validate and play to their strengths. Everyone should play well in the sandbox!

Challenges	Possible Solutions
<p>14. Efforts to sustain services over time can be difficult.</p>	<ul style="list-style-type: none"> • Learn from the experiences of other communities that have experienced MVIs, about the longer-term needs of victims, service providers, and communities. • Conduct periodic assessments or surveys of MVI survivors and stakeholders that identify their ongoing needs and services required to meet them. • Think and plan beyond the duration of the initial Federal and state funding for MVI response and resilience, with an eye on longer-term sustainability.
<p>15. Justice and other criminal justice outcomes might not be what victims expect or envision.</p>	<ul style="list-style-type: none"> • Advocates should predict and prepare victims and families about possible outcomes, discussing what justice means to them and what the outcomes might be. Never promise victims more than you have control over. • Refer victims to mental health professionals for any emotional trauma compounded by feelings of disappointment in the criminal justice system. • Inform victims that they can seek legal counsel to explore possibilities of civil remedies.
<p>16. Communities are eager to get back to normal without due consideration of the long-term needs of victims.</p>	<ul style="list-style-type: none"> • Community leaders must receive training to understand the nuances of trauma and how moving forward with compassion can eventually be in the community's best interest. • Community leaders must recognize up front that recovery can take time. There is no “time limit” on individual and community grief and trauma. • Seek help from public relations and marketing firms to rebrand the community. Sometimes firms will work pro bono or for a substantially reduced rate.
<p>17. Some MVIs have met with cruel disbelief and taunting by hoaxers, deniers, and conspiracy theorists.</p>	<ul style="list-style-type: none"> • Victims should be sensitively advised about these types of potential harassment, and to avoid social media platforms where they proliferate. • Victims should know when these individuals may be physically present. VSPs should work to keep a safe distance between victims and these people. Victims do not have to prove anything to them because it is very likely nothing will appease them. • The legal system should work to protect victims using remedies such as restraining orders or challenging protest permits. • These groups seem to thrive on media coverage, so the less coverage, the better.

This project is supported by Award No.2020-V7-GX-K002 awarded by the Office for Victims of Crime, Office of Justice Programs, US Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this publication are those of the author(s) and do not necessarily reflect the views of the Department of Justice or the Office for Victims of Crime.