



About this kit

This kit is intended to serve as a useful resource for ISANA members handling critical incidences in the International Student Community.

It covers a limited number of scenarios and is by no means complete. However, we hope that you will add to it any local phone numbers, contacts, reflections or experiences which will better prepare you for handling critical incidents on your campus. Moreover, share this information with your colleagues on campus and at other institutions in your region.

Should your campus not have a specific policy in place for handling critical incidents as they pertain to international students, a generic policy template is included for you to modify and submit for adoption at your institution. Not only will it assist you action plan in the event of a critical incident, it will also raise awareness at higher levels within the bureaucracy of your institution about your role. After all, the last thin you need when dealing with a crisis, is hold ups in the bureaucracy.

THINGS TO REMEMBER:

1. **In the event of any critical incident, the first thing to do is calm the affected party/parties down and offer hope.** This 'first up' encounter focuses on the present along. Communicate simply, take control and give clear and practical directions in order to reduce the anxiety and connect the logic of the affected party/parties.
2. **You are not superhuman.** Managing a critical incident can be a very lonely time, especially if you are regarded as the focal link with international students on your campus. While you are busy provide care or support to those directly affected by the incident, your own health and emotional well being may be at risk. Self-care should NOT be forgotten in your management strategy.
3. **Take time out each day to telephone or e-mail another ISANA colleague.** This will give you not only a chance to debrief, but also to compare notes with sympathetic colleagues who have had similar experiences and a real understanding of what you are feeling. You are helping others while you help yourself.

4. **Customise this kit to your particular needs.** Insert as many local telephone numbers and contacts, and as much information as you can so that you can refer to the kit as a 'stand along' resource, thereby allowing you to take effective and immediate action when necessary.

Finally, whether you are a veteran or a novice in Critical Incident Management, we hope that you will never have cause to refer to this kit. However, put it in a handy and visible location in your office, and alert your colleagues to its existence, just in case.

Contents

1. Who are you?
2. AV-CC Code of Ethics
3. Definitions
4. Policy Template
5. Media Hints
6. Student File Essentials
7. Skills and Knowledge
8. Preparing Yourself
9. Preparing Others
10. AusAID student procedures
11. Police involvement
12. Funeral FAQs
13. Repatriation
14. Real Life Stories
15. Reading List

WHO ARE YOU?

As a member of ISANA, you are a person who interacts with International Students in a professional capacity.

You are probably working in one or a range of the roles as listed below:

- International Student Adviser
- Student Counsellor
- Accommodation Officer
- Residential Adviser
- Residential Tutor
- Academic Adviser
- Teacher or Academic Staff
- Exchange or Study Abroad Adviser
- Admissions Officer
- Health Service Worker
- The list goes on...

In many if not most cases, you will be one of the first people notified in the event of a Critical Incident.

But let's forget about your title for now.

Ultimately, you are a concerned, caring, informed, capable, 'significant other' in the life of the international student. His or her own family structure will be unavailable, so assume that you will be helpful and a positive influence, in spite of your 'outsider' role. You, as an individual, will be more readily accepted than You as the Adviser or You as the Counsellor, or You as the Resident Tutor.

Optimise your own personal traits. Remember that it is more than likely that the international student has sought you out because of **who** you are, not **what** you are. So, follow your instincts and act accordingly.

AVCC Code of Ethical Practice in the provision of Education to International Students by Australian Higher Education Institutions

Section 2.8

Institutions should establish an appropriate infrastructure to be the focal point for all inquiries and to ensure both effective implementation of the institution's international student program and the provision of **all** necessary support services.

Guidelines *Section 9 - Student Support & Welfare*

Institutions should develop appropriate support services, including professional counselling services which will assist students to resolve problems which could impede successful completion of their study programs.

The consequence of taking the decision to admit international students automatically leads the institution to assume responsibility not only for the role of educator, but also that of service provider.

When an international student dies, educational institutions, of necessity, will take on many of the tasks which would normally be dealt with by the family of the deceased were the death to have occurred in the student's home country. Institutions, therefore, need to have in place efficient, sensitive and supportive strategies for dealing with such an event. In the absence of such strategies, there is great potential for confusion and for conflicts to occur between individuals over issues of confidentiality. It is essential that institutions provide support to members of staff, students and others in the community who will be involved.

DEFINITIONS

A Critical Incident as defined for the purpose of ISANA members is as follows:

'A tragic or traumatic event or situation affecting a student or staff member which has the potential to cause unusually strong emotional reactions in the school/campus community.'

Examples of Critical Incidents in the International Student arena would include, but are not limited to:

Death

(Including death of a dependant residing in Australia)

Accidental

Suicide

Result of an injury or terminal illness

Murder

Serious Illness which causes the deterioration of the student/staff member's health over time.

Serious Injury which prevents or severely affects the student's ability to continue with or complete the course.

Serious illness or injury would probably not be considered a critical incident in the broader campus community.

However, considering the relatively 'close knit' nature of most international student communities, and their physical isolation from the familiar support networks they grew up with, critical incidents of this nature can have a wide reaching, sometimes devastating and usually long lasting effect on a student's ability to cope with their studies.

POLICY TEMPLATE

RATIONALE

To reflect quality in the level of service encouraged by the AV-CC Code of Ethical Practice in the provision of education to International students, this policy has been adopted as an adjunct to <<*Institution Name*'s >> generic Critical Incidents and Disaster Response Policy.

DEFINITION

A Critical Incident is defined as a tragic or traumatic event or situation affecting a student/s and/or staff member/s which has the potential to cause unusually strong emotional reactions in the International Student Community at <<*Institution Name*>>.

PROCEDURE

When a Critical Incident has been identified:

1. The staff member receiving the news immediately contacts the <<*Senior Officer of the campus*>>, the <<*head of the element responsible for International Students*>>, and the <<*your position*>>.
2. The <<*your position*>> calls an immediate meeting with the following staff to make decisions as to how to proceed:

- Member of Counselling and Health Service
- Head of <<*Faculty or School*>> of the affected student (or representative)
Representative from the *VC, PVC or equivalent* office
- Student Representative (Student Guild or International Student Association)

This group becomes the Coordinating team.

THE COORDINATING TEAM

At the initial meeting, the task of the team is:

- To create for themselves a clear understanding of the known facts.
- To plan an immediate response.
- To plan ongoing strategies.
- To allocate individual roles/responsibilities for ongoing tasks.

IMMEDIATE RESPONSE

Issues to be considered:

1. Contact with next of kin/significant others - what is the most appropriate manner of contact?

2. Arrangements for informing staff and students.
3. Guidelines to staff about what information to give students.
4. A written bulletin to staff if the matter is complex.
5. Briefing International Student Office staff and delegating a staff member to deal with telephone/counter inquiries.
6. Managing media/publicity
7. Identification of those students and staff members most closely involved and therefore most at risk.
 - Those directly involved
 - Personal friends/family of those involved
 - Others who have experienced a similar past trauma
 - Other students, staff, supervisors etc.
8. Arrange a time and place for an initial group/individual debriefing session with Counsellor/s. In this session, an opportunity is given to share the impact of the event, discuss various interpretations of the event in cultural/ethnic terms, the resulting sense of vulnerability, the experience of painful emotions and the normalization of reactions.
9. Organise a tasks timetable for the next hour/s, day/s etc.
10. Plan ongoing feedback and regular meetings so that the coordinating team is continually in touch and working together.
11. (In the case of death) Contact the Academic Registrar's Office to put a stop on the student's record.
12. Confirm access to emergency university funds if necessary.

NOTE *One member of the team should scribe for all meetings to keep records of content and decisions.*

ONGOING and FOLLOW UP RESPONSE

These issues may need to be discussed at subsequent meetings.

- WHO is the DECISION MAKER?
- WHO will FOLLOW UP?
- Availability of mobile phone/s
- Notification of and liaison with Sponsor/Agent if applicable
- Arrangements for visits to/from Family
- Liaison with Police, Doctors, Hospital Staff
- Hiring Independent Interpreters
- Death Notices
- Funeral/Memorial Service Arrangements
- Refund of student's fees to pay repatriation or associated expenses
- Copy of Death Certificate

- o Consideration of personal items and affairs (household and academic)
- o Insurance Matters, OSHC Coverage, Ambulance Cover
- o Formal Stress Management interventions required for students and/or staff (release from classes, leave, rescheduled assessments or exams)
- o Liaison with Academic Staff or Supervisors
- o Arrangements for further debriefing sessions for groups/individuals as required
- o Liaison with Immigration if studies will be interrupted
- o Fees issue to be resolved if student cannot continue with their studies
- o Legal Issues: helping students get access to legal assistance, right to sue etc.
- o Arrangements for further debriefing sessions for groups/individuals as required
- o Follow up condolence letters to Family
- o Financial Assistance for families of victim if residing in Australia
- o Roster of students for hospital visits

STRESS MANAGEMENT COMPONENTS

(Falls within role of Counsellor)

1. Debriefing as soon as possible after the event on an individual or group basis
2. Further debriefing - one or more days after the incident group basis
3. Follow up 2 - 6 weeks later - individual or group basis
4. Ongoing counselling as required
5. Recovery time for <<*your position*>>_and the Coordinating Team members.

MEDIA HINTS

In many cases, the institution would prefer not to issue a press release upon the death of an international student. However, in anticipation of some requests for comment from the media, it is advisable to have a press release drafted by Media staff just in case.

Listed below are some helpful hints, which can be used and applied within the role of the Coordinating Team, as outlined in the Policy Template.

1. “No Comment” = Not a good idea.
2. A good press release should answer the following questions:
What? How? When? Where? Why?
3. Add a joint statement from the VC (or equivalent) and the Student Guild President, which will signify unity and dissuade the press from looking for an ‘alternative angle’ on the story. The statement should include an expression of surprise and sadness at the tragedy, as well as compassion for the family of the victim.
4. A comment should be included explaining the university’s policy on responding to this kind of situation. In addition, if the situation warrants, it would be appropriate to comment on what measures will be put in place to ensure that any future events of this nature are avoided.
5. A telephone contact for further information is always left at the bottom of a press release. The Coordinating Team should determine who will be responsible for media inquiries, and all staff should be alerted to the procedure for directing media inquiries to this person.
6. Contact the **Public Relations Institute of Australia** in your state for more information about handling media inquiries.

(SAMPLE MEDIA RELEASE

A sponsored male student from Botswana, 31, has died at University X, Littletownship, in regional New South Wales.

The death has been recorded as suicide.

The University’s Vice Chancellor, Professor John Academic, said the incident had saddened University staff, its student body, and the close knit population of Littletownship.

“We are all dispirited at the loss of a very promising young man. Our profound condolences go to his family”, Professor Academic said.

A memorial service staged on campus yesterday, at the University X's Alumni Square, was attended by more than 150 people, including senior academics of the university, lecturers, International Programs staff, family, friends, classmates, and international student organisation representatives.

NOTE: The release is short and to the point. It depicts the university as a caring institution, a position reinforced by the fact that the memorial service was held on the university's own grounds. Note that the release was issued after the memorial service, to avoid the likelihood of media coverage at the service itself. The cause of death has been revealed, because of the young age of the deceased. Should media investigate further, it is suggested that the Vice Chancellor's office respond with a statement saying simply, "We are sure you will understand that we are not prepared to discuss any of the personal issues which may have been associated with this young man's death. It has always been our policy to respect the privacy of our students and their families."

STUDENT FILE ESSENTIALS

EMPLOY AND USE A FILE NOTE SYSTEM!

It will enable you and others to monitor student issues.

Include the following information:

- Coloured Photograph
- Copy of Passport, including number, photo page, and visa page
- Student's address and telephone number
- Student's religion
- Emergency contact telephone, with next of kin details, agent or sponsor (if applicable)
- Any other identification details - student ID, course details, medical conditions, allergy information etc.

SKILLS & KNOWLEDGE

(Needed within the Coordinating Team...see Policy Template)

- Cross Cultural Skills
- Training Skills in Cross Cultural Communication
- Awareness of one's own values and biases and how they may affect the students
- Knowledge of resources on and off campus
- Uninterrupted access to those resources
- Communication skills
- Organisational skills
- Liaison skills
- Networking skills
- Stress Management skills
- Delegation skills
- Maintenance of clear and direct communication channels with decision makers
- Panic diffusion skills
- Skills to eliminate time lags
- Sensitivity to the issue of confidentiality
- Sensitivity towards different cultural expressions of grief and other emotions
- Protocol knowledge (eg: for repatriation to home country)
- Diplomacy skills
- Debriefing skills
- Monitoring skills for those affected by incident
- Recognition skills re: warning signs of risk to students affected by the incident
- Follow Up skills
- Advocacy skills (for students)
- Referral skills to legal, medical, religious assistance.
- Recognition of one's own limitations
- Self care skills

PREPARING YOURSELF

How does one prepare for dealing with a critical incident in a cross cultural setting?

The ATTITUDE you assume is of the utmost significance.

- Expect the unexpected. Not everything occurs between 9 and 5.
- Do not be easily upset or disturbed by even the most extreme situations.
- Convey empathy and respect for the emotions of those involved.
- Worry and fear should not be conveyed to the person.
- Provide a sense of stability and strength.
- Be able to alleviate tension and anxiety.
- LISTEN - to what is said.
- LISTEN - to what is not said.
- Create a personal equilibrium between your own values and those of a different value system, but keep the values of the client foremost in your mind.
- There will be times when you are unavailable. Don't be consumed by guilt. As long as policy and procedures are in place, there will be someone else who can step in and fulfil the required role.
- Network with ethnic groups in the local community. .Keep a list of useful contacts who may be able to assist in matters not directly related to campus: religious customs, family support, interpreters, embassy or consulate contacts.
- It is not always important to remain within the specific religious affiliation to receive help in an emergency situation. Helping, coping, counselling skills are not religiously oriented, and warmth love and sensitivity are common to all members of the clergy. Keep this in mind when seeking assistance.
- Learn as much as you can from foreign nationals about how they would deal with specific scenarios - Ask questions:

“How should the body of a Muslim car accident victim be handled when the Coroner demands an autopsy and religious custom prohibits?”

“How does one act at a Chinese Buddhist funeral service? What is the proper way to express condolences?”

“How is mental illness regarded in your country?”

“What is the attitude toward rape in your country?”

The idea is to gain knowledge in advance, whenever possible. Again, keep in contact with your ISANA colleagues on a daily basis. Whether by telephone or e-mail, there will always be someone available to use as a sounding board.

PREPARING OTHERS

Many campus staff respond that they are not qualified to handle international students in crisis. Eradicate this 'us and them' attitude by engendering team-work among staff with regard to assisting international students. Let them know that they can be of invaluable assistance in a crisis by offering short-term training and workshops.

Establish and maintain your own network of 'contacts' across campus, especially in departments with large numbers of international students. Try to include as wide a variety of types and levels of staff as possible.

Keep in regular contact whether formally or informally, as these contacts will be your most reliable allies at a moment's notice.

Conduct training across campus regarding the Critical Incidents Policy for International Students (see Policy Template). It is important for staff to be aware of the existence of such a policy.

Conduct a resource workshop to locate all relevant community resources in your immediate local area: Funeral Directors, Police and Medical Authorities, Religious Leaders, Ethnic Group Leaders, Media Representatives, Insurance Representatives, local Embassy or Consular representatives.

Coordinate and conduct a Mock Exercise to simulate a Critical Incident. Have the exercised observed and assessed by an outside party.

Follow up with a debriefing and feedback session, inviting Counsellors to educate participants about Stress Management, Post Traumatic Stress and general counselling principles when dealing international students.

Conduct general Cross Cultural Awareness training across campus at regular intervals.

AUSAID STUDENT PROCEDURES

Should such an event occur, the institution should immediately inform the AusAID State Office. The institution, in consultation with AusAID, should then develop a strategy to ensure the situation is managed appropriately. In such cases all communication with Posts will occur through AusAID State Offices.

1. DEATH of an AusAID Student

The State Office will inform the appropriate diplomatic representative and the appropriate Post. The Post will inform the student's next of kin. In the case of ASTAS students the Post will inform the nominating authority.

The Post will ascertain and pass on the next of kin's wishes regarding disposal of the student's body and personal effects. If burial in Australia is desired, the Post will ascertain the student's religion and any special rite the next of kin wishes to be observed.

If the student is accompanied by family members, the institution should ascertain their wishes regarding the disposal of the body and assist with the execution of these wishes.

If instructed to make funeral arrangements within Australia, the State Office will forward details to the Post.

If the student is not accompanied by family members, the institution may wish to place the effects of the deceased student in the hand of the Public Trustee awaiting instruction from the next of kin. The Public Trustee can take responsibility for selling effects if required and forwarding the proceeds to the appropriate person.

AusAID will pay for the funeral, cremation, or repatriation of the student's body to the home country, unless an insurance claim is pending following an accident. Any expenditure will need prior approval from AusAID.

The institution should seek information from the police and/or hospital about the circumstances of the death and request that the information is not made public before the next of kin have been notified.

Institutions should seek advice from the diplomatic/consular representative of requirements for the body to enter the student's home country.

Institutions may, at their discretion, pass details of funeral arrangements to relevant student organisations.

AusAID will write a letter of condolence to the next of kin.

2. Serious Illness of an AusAID Student

In the event of serious physical or mental illness of an AusAID student, the institution should inform the State Office as soon as possible.

If a student is hospitalized, the institution should ensure the treating doctor is aware of the limitations of the health insurance cover, if the OSHC exclusion clauses apply.

If a student is unwell and unable to resume his/her studies for some time, the student must return home as soon as he/she is considered to be medically fit to travel. The scholarship may be suspended or terminated on the grounds of illness in incapacity. If the scholarship has been suspended, the student would need an assessment of capacity to manage their studies prior to it being resumed/reinstated. This would normally take place in the home country.

If the institution is advised that a student requires medical/nursing assistance to manage the trip home, the institution should seek the services of an appropriately qualified escort. AusAID will pay for the travel and other agreed costs of an escort. The institutions should consult with the State Office prior to expenditure being incurred. If the institution secures an escort through a commercial nursing agency, AusAID would require an indemnity (workers compensation) from the agency as part of the contractual arrangement. If possible, the escort should be of the same sex as the student.

Where a student is to be medically escorted home, the institution should ensure that the carrying airline is informed of the nature of the student's illness and is consulted on the arrangements that need to be made.

The institution, in consultation with the State Office will ensure that the Post is advised of travel details. If necessary, the State Office will request the Post to facilitate customs and immigration clearance. The State Office will make arrangements with the Post for the student's reception and care during the transit through a third country.

State Offices will request the Post to inform the nominating authority and next of kin if it has been decided that an escort is required, bearing in mind the student's right to privacy regarding some personal or health information.

POLICE INVOLVEMENT

The police are required to investigate all cases of sudden unexpected death. Police actions include:

- o Reporting such death to the Coroner
- o Notifying next of kin
- o Obtaining official identification of the deceased (this must be done by someone who has known the deceased for some time)
- o Conducting investigations on behalf of the Coroner - for example, interviewing witnesses and others who may have been involved, collecting clothing and other items for use in evidence, delivering specimens for analysis.

Coronial Investigations

Every death reported to the Coroner must be investigated. The body of the deceased will be taken to the morgue where it may be viewed by the relatives but not touched. Once the coronial inquiries are complete (and this may take some time), the body will be released to funeral directors to await instruction from the next of kin. At this stage the body may be touched.

Post Mortems (autopsies)

Most reported deaths require a post mortem examination to determine the medical cause of death. This usually involves an internal and external examination of the body, and of tissue, organ and blood specimens taken from the body. Cultural and religious objections to a post mortem may be discussed with the coroner or a court social worker. However, these objections very rarely influence the coroner's decision to conduct an autopsy.

Inquests

An inquest is a public hearing before a coroner (and occasionally a jury) to decide the circumstances of death. Once initial investigations are completed, the Coroner may (as in 90% of cases) dispense with an inquest. However, the Coroner may order an inquest or, in certain circumstances (such as murder), an inquest may be legally required.

More detailed information about each State's coronial system can be obtained from the relevant State Coroners Courts. This information generally outlines coronial procedures, deals with the legal rights of members of the public involved in these procedures, and indicates what advice and specialised counselling may be available.

FUNERAL INFORMATION

This information is taken from materials published by the Australian Funeral Directors Association. A variety of reading material is available. Inquiries may be directed to:

Australian Funeral Directors Association
PO Box 291
Kew East VIC 3102

AFDA Funeral Advice Line: (03) 9859 9966
or check the white pages for the local branch number in your state.

ARRANGING A FUNERAL

When faced with having to make funeral arrangements, most people have no prior experience in organising such an event, and little idea of what to do. Initial interviews with the funeral director can be at a location nominated by you. While some people may have a fairly clear knowledge of the arrangements they want to make, others may want to consider a myriad of alternatives before making any decisions. The funeral director is there to guide and advise on the many matters which need to be considered.

Decisions to make will include:

- Time and location of the funeral
- Type of service
- Burial/cremation (reflection of the religious or ethnic attitudes and family traditions)
- Type of coffin
- Viewing arrangements
- Choice of participants
- Floral arrangements, motor vehicles and other relevant matters

THE FUNERAL DIRECTOR

The funeral director will take responsibility for arranging, with the family concerned, the time and place for an appropriate funeral service by coordinating and liaising with clergy members, doctors, hospitals and cemetery or crematorium officials.

The funeral director will lodge notices in the press, arrange floral tributes, provide a hearse and other vehicles, a funeral chapel and any other facilities and personnel required to carry out the wishes of the family being served.

All official forms must be completed and taken to the appropriate people at the right time. The funeral director, for example, registers the death with the Registrar of Births, Deaths and Marriages.

The funeral director ensures that human dignity both of the deceased and the survivors is preserved, and performs tasks in a sensitive and understanding manner.

Kindness, helpfulness, understanding and the empathetic handling of funeral arrangements are the vital psychological components of the funeral director's role.

WHEN SOMEONE DIES

When death occurs, the first practical consideration in most cases will be the need for a doctor's attendance. In Australia today, relatively few people die at home and in most cases the medical necessities and formalities will be taken care of by the relevant hospital or other authorities.

The deceased's doctor or the hospital authorities will explain what steps, if any, are required to establish the cause of death and complete the necessary death certificate. Meanwhile, the family may begin making their desired funeral arrangements, which can be completed when the death certificate has been signed.

THE FUNERAL CEREMONY

All reputable funeral directors are able to provide a broad range of services to suit the precise requirements of the bereaved family.

Funerals can be as different as the people they are for, with their main purpose being to help the bereaved in the first stages of grief.

The order, style and content of service can all be varied to suit the family's needs. A personal tribute from a family member or close friend, or perhaps including appropriate cultural traditions, may make the service more meaningful.

SPECIAL CIRCUMSTANCES, WHEN THERE IS NO BODY

Deaths from Suicide and AIDS may sometimes present special problems because of old religious discrimination and/or social stigma. Nevertheless, the need for people to mourn and the rituals of the funeral are still essential for friends and family.

When there is no body (eg: drowning accidents, abduction) it is still important to acknowledge the life of the deceased and help the family and friends to accept

that death has occurred. A special memorial service to allow everyone to say goodbye and be able to get on with their grieving is essential. The use of photos, significant objects associated with the deceased's life, and perhaps candles are a great help to use in place of the body.

GRIEVING

Grief is not a single response, but a complicated series of feelings, emotions and even physical manifestations of a person's reaction to the bereavement.

Grieving is an intensely personal process. Each death is unique and everyone affected will respond differently. Most survivors however, will pass through similar stages of grief from initial shock, numbness, and often denial and anger to realisation, acceptance and finally re-adjustment.

The intensity of grief experienced will be affected by a number of factors, including the degree of attachment to the deceased and the duration and quality of relationship with them. The greater the attachment, the longer it is likely to take to resolve grief.

However it is not the passage of time itself which brings resolution, but the working through of stages of grief. A meaningful funeral service can play a significant part in the crucial early stages of grieving.

DEATH OF A CHILD

There is probably nothing more traumatic than the death of a child. Most children's deaths are unexpected. The parents have no warning and no opportunity to prepare for their grief or to plan to say goodbye. This intensifies the acuteness of loss.

Even when a child dies from a prolonged illness the sense of loss is heightened because the parents feel the loss not only of the child that they have known, but also of the person that child would have become. Such parents cannot gain the consolation of recalling a life lived that helps them to cope with an older person's death.

It is therefore normal for parents' grief to be more intense if they lose a child. In addition to the usual symptoms of grief, reaction to the loss may be characterised by acute shock and disbelief, tremendous pain, anger and guilt. Parents may also fear for the safety of other children in the family.

When a child dies, great strains can be placed on the family. It is important that members of the family are able to recognise and understand each other's feelings and so work together to resolve their grief.

Support groups are also available to help at this difficult time. The funeral director can help and will direct you to the appropriate organisation for assistance.

REAL LIFE ACCOUNTS

(Taken from Anne Skea's article, JANZSSA, 6, October 1995 and Ewa Solecka-Drew's paper to the National ISANA Conference, December 1996).

Case Study 1: (A regional NSW University)

A 31 year old sponsored mail student from Botswana, who had been studying for a degree of Bachelor of Natural Resources for 18 months, hanged himself in the grounds of the Vice-Chancellor's residence. The body was found by fellow students who were looking for him. The body was identified for police purposes by a staff member from the International Programs Office and a member of the African Students' Association. A Post-mortem examination was required and the Coroner recorded 'Suicide' as the cause of death.

Because of superstitious beliefs amongst fellow students, it was necessary to perform certain rituals. Police, Coroner, hospital staff and undertakers were very helpful. The police, for example, allowed items associated with the hanging to be photographed so that the necessary rituals could be performed.

No crisis management policies were in place at the university. Staff of the International Programs Office, the sponsor, Police and the Coroner dealt with events and official procedures. Fellow students were very helpful and supportive.

A memorial service was held on campus and was attended by the VC, Dean of the Faculty, senior academics, lecturers, staff of the International Programs Office, family, friends and class-mates of the student and representatives from international student organisations.

Case Study 2: (A regional NSW University)

A 35 year old student from Papua New Guinea, sponsored by AusAID, who was studying for a Master of Business Administration degree, died in hospital of a massive heart attack. He, with his wife and three young children, had been in Australia for four months. His wife was with him at the time of death and she identified the body. A post mortem examination was required and the Coroner recorded "Massive Heart Attack" as the cause of death.

Police, hospital staff (especially, the hospital social worker who stayed with the wife) and undertakers were helpful and sensitive to cultural aspects, such as the need for the family from PNG to view the body. PNG students and Pacific Islander students - a very close-knit community - were 'tireless' in their support for the family and in their cooperation. The deceased was a well respected leader in his community and an elder of the Seventh-Day Adventist Church in PNG. The Church was very helpful and bore some of the expenses. There were superstitious, cultural complications affecting the return of the wife and children

to PNG. To ease this situation, everything was done in accordance with the wife's wishes. It was necessary for the brother of the deceased to fly to Australia to find out first-hand what had happened and for the body of the deceased to be returned to PNG. No university Crisis Management policy was in place, but the Counselling Service had put in place crisis management procedures following the suicide death (Case Study 1). Previous experience was drawn on to deal with the situation and the International Programs Office, AusAID, The Hospital Social Worker and Pastor of the deceased's church dealt with events and official procedures.

A memorial service was held and attended by the VC and his wife, Director of the Graduate School of Management, Dean of the faculty, lecturers, International Programs Office staff, PNG and Pacific Islander students and their families, class-mates and representatives of international student organisations and groups.

Case Study 3: (A metropolitan NSW University)

A 36 year old student from the People's Republic of China, who had been in Australia for 18 months studying for a Ph.D in Industrial Chemistry on an OPRS scholarship was knocked down by a car as he crossed the road on his bicycle. A post mortem examination was required, the body was identified by university colleagues, and the Coroner certified death as due to 'internal injuries'.

Back in China, the student's family spoke only Chinese. Interpreters were therefore needed for official procedures. Chinese friends dealt with the search for a solicitor to deal with insurance claims and with funeral arrangements. The PRC consulate contacted the student's family and assisted in finding accommodation for them whilst they were in Australia. The police were helpful in getting the accident report completed because it was needed for insurance purposes. Staff at the morgue and undertakers were understanding and sensitive. University staff negotiated with DEET for a refund of fees to cover funeral expenses, and with the bank to close his account without going through trustees and other formalities. University administrative staff dealt quickly with documents needed for solicitors. Other PRC students were very supportive of the family and they and the students' Australian colleagues donated money to help with the living costs of the deceased's father and brother whilst they were in Australia.

No Crisis Management policy was in place at the university. All the necessary arrangements and official procedures were coordinated by the International Students' Office. A funeral service was arranged by the family and was attended by family, consulate staff, International Students' Council representatives, the student's supervisors and fellow students from his department, and many PRC students.

Case Study 4: (A metropolitan SA University)

A 29 year-old male, Japanese student, who had been in Australia for seven months studying an M.Sc in Virology, committed suicide off campus. The body was identified by the student's girlfriend. A post mortem examination was required and the Coroner specified "broken neck" as the cause of death.

Most of the transactions with police and undertakers were performed by the Japanese Consul who also contacted the student's family and made the arrangements for them to come to Australia. The International Student Adviser was responsible for liaising with the Consul and for coordinating all the other necessary procedures. All expenses were paid for by the family but the university refunded half the student's fee to help them with this.

No university Crisis Management Policy was in place at the time. Fellow students were very shocked and the Director of Student Services immediately arranged a debriefing session for them. Crisis Management procedures have recently been put in place because of the deaths of two more Australian students. A funeral service and a memorial service were arranged by the deceased's family but they allowed only immediate teaching staff, the Director of the International Programs Office and the International Student Adviser to attend.

Case Study 5: (A regional NSW University)

A 43 year-old AUSAID sponsored student from Papua New Guinea, studying for a Bachelor of Business degree died under hospital care after voluntary admission to casualty the evening prior to his death.

The student was a government employee in PNG and had been in Australia with his wife and four young children for three and a half years. The wife identified the body. A post-mortem examination was required. The Coroner deemed the death to be from natural causes but could not specify any particular cause of death.

Hospital staff, the PNG Consul and the undertaker were very helpful. The undertaker was sensitive, listened to the family and clarified the situation with the International Student Adviser. He allowed close family and friends to view the body and subsequently liaised with funeral directors in Sydney and Port Moresby. The funeral was held in Port Moresby.

Hospital staff, although helpful, were not sensitive to cultural needs of the wife and children, who had been sent home from the hospital the previous evening until further notice because the student was not in an apparently critical condition. Death occurred in the hospital toilets. Both these things caused considerable distress to the deceased's wife: firstly, because she believed that the family should have been with him; secondly, because she believed that the

place where the death occurred was unacceptable. Superstitious beliefs surrounding a death of a family member from unknown causes and the possible extension of this misfortune to others in the family were also the cause of serious anxiety for the wife.

No Crisis Management policy was in place at the university. A non-formalised procedure by which the Principal is notified first and then Student Services (to support students and others affected by the incident) is recognised to be not altogether satisfactory. Student Services have looked at crisis management from a counselling perspective and a university committee is currently examining Critical Incident Procedures. A memorial service was held a week after the death and was attended by members of staff but only two students were present.

Case Study 6: (A metropolitan QLD University) (Ten Lonely Days)

Helena is employed as the International Student Adviser. She and her colleagues are based in the international office, so they work next to other people who are working with international students. Helena returned to Australia on the weekend after a month's holidays in Europe, and was visualising her first day at work as one full of stories about her holidays. This was not to be the case. A few minutes after she came to work, she was presented with the file of a student from the faculty in which the student was studying, with the information that on the Sunday night, the student had died in a car accident.

The name of the student didn't mean anything to Helena. When she went to her notes however, she realised that she knew the young woman, Sophie, very well.

Helena knew one thing; there was no point in searching for a piece of paper with the policies for management of critical incidents, or a list of tasks for such events. She knew that her university didn't have such a document. Luckily, she remembered that a document which could help did exist. After ISANA Queensland's critical incident workshop, such a document was drafted. She called one of her colleagues and obtained it. Equipped with these few pages, she started her journey. It took ten days. During the journey she was moving between cultures - the culture of her university, the bureaucracy, the culture of funeral directors and the culture of different countries with different customs and languages. She was able to observe how these cultures meet and mix and clash on some occasions. She was looking at all of these laments being wrapped in grief and pain which seemed to be universal.

Monday

The accident took place in a town six hours drive from Brisbane.

By lunch time, Helena was on her way to identify the body. Already she had:

- contacted the police
- found that Sophie had been living on campus
- talked to the Head of Residence
- contacted a Residential Adviser who became her companion and main driver for the next ten days
- rented a car
- left a message about the event with the Pro Vice-Chancellor's secretary, as no one at that level of the university was available.

Six hours later Helena walked into the police station, talked to the police and received more details of the accident. The car in which Sophie was killed was driven by Martin, a male international student from the same country, and same university. Martin was there. Admitted to hospital the previous night with minor injuries, he had already been released. He was in deep shock. He had difficulty communicating in English. This was a reflection of his stress rather than his fluency in English. Over and over again, he was asking one question, 'What will happen to me?'

The police were in possession of all the things which were in the car. Martin identified them in Helena's presence. Endless documents had to be signed. Helena then went to the morgue where she met a few of Sophie's and Martin's friends from the university. She identified the body and went back to the police station. The police took responsibility for informing Sophie's parents through their channels. Business cards were exchanged, and Helena took Martin with her. Two cars undertook the six hour journey back to Brisbane. One, with Helena, the Residential Adviser and Martin; the second car with friends of Sophie and Martin, international students themselves. Helena gained a new appreciation of technology. Mobile phones were in both cars, so from time to time she was able to check that the people in the second car were OK.

Tuesday

Helena spent the day with her check list - ticking things off as she progressed:

- closing bank accounts
- contacting Sophie's faculty
- contacting the agent who recruited Sophie in her country
- contacting the police in relation to Sophie's family

The list was long.....

Wednesday

Helena contacted the police as she wanted to know if Sophie's parents had already been informed. The police had initially had problems contacting the family. Using Interpol, they finally did so on Wednesday. Soon after, faxes from

Sophie's family arrived at the university with requests for confirmation of this information, as the family did not believe the information which they had received was accurate. The last fax informed Helena that the family would be arriving in Australia the next day. More international students came to Helena, prompting her to arrange with the university counsellors for emergency counselling.

While this was happening, Helena was dealing with various bureaucracies, trying to release Sophie's body from NSW and bring it to Queensland. She was also talking to undertakers and getting quotes for various related and necessary services. She was searching through her networks and preparing for the arrival of the family. Helena had some information about Sophie's parents - she knew that they couldn't speak any English, and she knew their religion. She found a priest and a nun of the same ethnic background who were willing to help her, and look after Sophie's family. She booked a hotel room for the family. She organised a bus for transporting the family and the various other people who would be accompanying them.

Thursday

Helena went to the airport in the company of the priest and the nun and some of Sophie's friends to meet the family. Everything was moving quickly. The family arrived. They expressed the desire to buy a few necessities: incense, food from McDonalds (Sophie's favourite), and paper money were bought. They went to Sophie's flat where a small ceremony was performed. It was a difficult day for Helena. She was both organiser and support person. At the same time it was a day full of new experiences, and it was emotionally draining. When Helena eventually got home, she poured herself a big glass of Scotch.

Friday

Helena's day started early. By 7am she, the family and 12 students were on their way to the site of the accident. This time the journey took longer than six hours, as they were travelling by bus. They went to the hospital where Sophie's body was kept. They viewed the body. Sophie's father seemed to age twenty years and he needed medical attention. The hospital staff, both the doctors and the social worker were very helpful.

The hardest thing was to keep things moving. The body was in the care of the coroner and it was already Friday afternoon, and Monday was a public holiday in NSW. Helena had 15 minutes to release the body and organised transport from one State to another. When she had achieved this task there was another step - to go to the crash site. The police joined Helena, the student and the family in the next ceremony, which was similar to the one performed previously in Sophie's flat. On the way back to Brisbane, Helena talked to Sophie's parents, using students as interpreters. She noticed that the process of acceptance had started to occur.

Saturday and Sunday

Although the family was attended to by the priest, the nun and the students, Helena couldn't relax, in anticipation not only of what Monday was going to bring, but also she had received a few case related phone calls.

Second Monday

Helena received information that the body was in Brisbane. She went with the family to choose a coffin. Communication was very difficult. The family chose the most expensive one, but Helena couldn't agree to this. For the previous few days, in addition to everything else she had been doing, she had been trying to get the university's agreement to pay for a number of things, one of them being a coffin. She committed her university to doing that by having already made a promise to Sophie's family. Eventually the decision on which coffin to buy was made.

Back to the university, and lunch. After the lunch, Helena had to spend some time with Martin, the driver of the car. She had to go with him to a solicitor. It was there that Martin expressed the desire to meet Sophie's parents. They went back to the university and the Pro Vice-Chancellor met the family and talked with them. During this conversation, he arranged a meeting between Martin and the family. This took place in the afternoon and became a situation of confrontation. The Pro Vice-Chancellor had not anticipated that the session would be in another language, and that he and Helena would have to be passive observers of the meeting.

Second Tuesday

Martin's father and a friend arrived in Australia. Confused students were coming to Helena - they were friends of both Sophie and Martin, and now they felt confused as to whose parents they should lend their support.

Second Wednesday

Helena went with the parents to the funeral parlour where for the last time the body was viewed. Then the lid was closed. Helena went with the family to book their flight back home on Friday.

Second Thursday

A memorial service took place near the university. In spite of the fact that the notice was put around the university, in addition to Helena, there was only one other person from the international office. The church was full but they were mostly other international students. The occasion was beneficial for Helena; she

received a lot of support and recognition from the community. She also extended her networks and found a person who was willing to provide support for Martin. Then she said goodbye to Sophie's parents.

On Friday, Sophie's parents left Australia. On Sunday Sophie's body was flown to her country. Helena could not take time off for the next few days. There were a lot of loose ends to be tied up and paperwork to be finished. She was still working with Martin. Eventually she took a few days off and was able to reflect on the management of the case. It had been a lonely journey for her.

When asked how she was able to manage the loneliness of the experience Helena listed support at home, combined with previous experience and energy, (one of her strong personal attributes), as the elements that allowed her to finish this journey. Be that as it may, this story shows, among other things, that one person should not and cannot work alone in the case of a critical incident.