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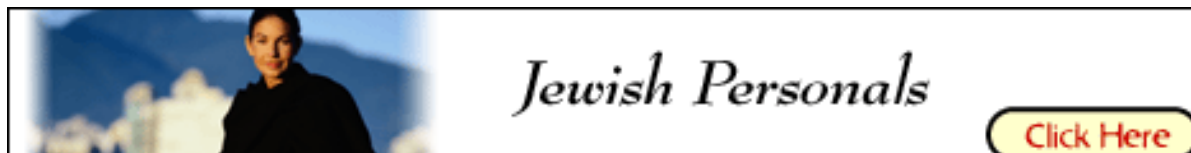
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In face of disaster, calm prevails, say experts Conference held on living with terror

by Eric Fingerhut

Staff Writer

Those who escaped the World Trade Center on Sept. 11, 2001, said the scene was panic-stricken. When questioned closely about what happened, however, they told a somewhat different story.

"Everyone walked down the stairs, calmly. ... People were checking their Blackberries," said Rutgers University sociologist Lee Clarke, describing what many recounted from Sept. 11.

Similarly, he said, survivors of a plane crash talk about the panic all around them, but then discuss how they helped a fellow passenger trapped in the wreckage.

"Actual panic is quite rare," Clarke said, while often "altruism comes out in times of great crisis."

And that is important for policymakers to know, he said, because many believe that "people are prone to bad reactions" when faced with terrorism, and thus are wary of providing the public with enough information on terrorist threats.

Clarke spoke Monday at the first International Conference on Living with Terror: Psycho-Social Effects, which focused on terrorism's impact on society.

The two-day seminar, held at the National Press Club in

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the District, was sponsored by the University of Haifa Faculty of Social Welfare and Health Studies and the University of Pennsylvania. It represents an effort by the Israeli school to bring its expertise on dealing with terror to a wider audience.

The idea for the conference was developed not long after the Sept. 11 attacks, said Alan Reider, chair of the health care practice at the D.C. law firm Arent Fox.

The university approached him looking to "increase [the] visibility" of its health studies department worldwide, and Reider suggested that the school was uniquely situated to provide information on the effects of terrorism.

"The faculty runs a number of clinics for victims of terror," said University of Haifa associate vice president Henry Smith. "At a time when terror is a constant" worry, "Israelis have great data that Americans don't. ... The United States has to think about this [issue] like the Israelis do."

So the university joined together with Penn, whose Institute for Strategic Threat Analysis and Response has worked on similar issues since Sept. 11.

As evidence of the desire for learning in the field, Reider noted that 17 of the "largest and most prestigious" organizations of health professionals -- from the American Medical Association to the American Association of Occupational Health Nurses -- signed on to co-host the event.

"We have found very little published research in this area," Reider said.

The conference began with Haifa and Penn professors outlining what factors create terrorists, and then included a variety of health care professionals and academics discussing how best to respond to that threat.

At Monday morning's panel on "Costs of Terror: Mental and Physical Health," Clarke emphasized the importance of communication in effectively managing a response to terrorism.

"Leaders must earn the trust" of the populace, he said, something that then-New York Mayor Rudolph Giuliani was able to do on Sept. 11 because he was honest.

"He said 'I don't know,' " when he did not have an answer,

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Clarke said, and "didn't give platitudes, which people don't trust."

Clarke also dismissed the "cry wolf myth" -- that too many terrorism warnings lead to citizens dismissing the threat when a real crisis occurs.

"If the threat is credible, and the communicator is credible, the warning is credible," he said.

He also urged more study on what role "regular folks" play in responding to an attack, noting that they "become parts of the critical infrastructure" when a terrorist attack occurs.

Meanwhile, psychiatrist Michael Barnett stressed that "counterterrorism efforts will fall short if they don't take into account the psychological influence of terrorist threats."

He pointed out that in addition to the actual violence, the goal of terrorism is to manipulate the public and make citizens fear a future attack. That fear, he said, "can be magnified out of proportion to the actual danger."

There is a distinction, he explained, between "rational fear" -- taking notice of an unattended knapsack on the subway -- and "irrational fear" -- not taking the subway at all because of terrorism worries.

Barnett also noted the much greater chances of dying in a car accident than in a terrorist attack.

As a part-time staffer for Rep. Patrick Kennedy (D-R.I.), Barnett has formulated legislation to develop public education programs to disseminate such messages.

The close to 200 conference participants included representatives from throughout the nation's public health professional field, who agreed that bringing together so many people to talk about dealing with terrorism is essential to improve the nation's preparedness for an attack.

"It's a good start," said Karen Wolf, a nurse practitioner at the MGH Institute of Health Professions in Boston. Among the points she found most interesting: Experts noted that terrorists are individuals who have become "disenfranchised" from their societies, but say that the best way to combat terrorism is to "build social ties" among the citizenry.

"Terrorism is a vague concept," said Mark Lindberg, a psychologist with Northern New Hampshire Mental Health. "Figuring out how to get specific" and prepare people for it is important.

Lindberg noted that he hoped to bring back information to his colleagues, but said that many living in his "relatively rural" area doubt they would be terrorism targets and are not focused on preparing for a possible attack.

They are more aware of the terrorism threat in Macon, Ga., according to David Gowen, a safety manager for a school system that has developed extensive plans for its students. He said this week's conference, particularly the knowledge Israelis bring, will further help.

"I know what they experience in Israel," he said. "After 9/11, I realize anything can happen here."

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