

Music (00:07):

Ketsa. "Mission Ready." Raising Frequency, <https://freemusicarchive.org/static>.

Trudy (00:09):

Welcome to Hotwash. I'm Trudy.

Christine (00:10):

And I'm Christine. We're emergency management and public health professionals.

Trudy (00:16):

Nerds talking about law and policy of emergencies. Today on episode seven of Hotwash, we're talking to Lisa Crow. CHHS is recovery planning program director. We're very lucky to have Lisa on because she is a nationally renowned recovery expert. She's forged in the fires. She coordinated Howard County Maryland's post-disaster recovery efforts following both the 2016 and 2018 historic Ellicott City floods. She's here to talk to us today about recovery planning in the time of COVID-19.

Music (00:54):

Ketsa. "Mission Ready." Raising Frequency, <https://freemusicarchive.org/static>.

Trudy (00:56):

So Lisa, welcome and thanks for joining us. We always ask our guests how did you end up in this field? So how did you end up here?

Lisa (01:03):

Wow, it really is interesting to reflect on everything because I think if you would have told me in college that I ended up here, I wouldn't believe you.

Trudy (01:15):

We hear that a lot. Actually.

Christine (01:18):

I think all of our colleagues ended up here accidentally somehow.

Lisa (01:22):

Yeah, well especially because I don't, I don't think you know a lot about emergency management and your daily life. I know a lot of people when I tell them what I do, they're like, what is that? So I honestly, I didn't know anything about emergency management. And the truth is I think after 9/11 I really just felt this sense of serving my country. After that I, it just really, really shaped me in profound ways. I grew up in a jurisdiction not too far from DC, really right smack in the middle of Baltimore and DC. So remember that that moment really just shaped me. And then I'm in high school, we also had the DC sniper situation. So I think those two events, I just really felt a calling to do something, but I wasn't quite sure what it entailed. I knew it was going to be serving my country and helping people. And I remember one day I just called my dad because he's so smart. I knew a lot about different professions and saying, you know, I'm really just interested in a lot of different fields and I want to be able to harness all of that

together. And I want to be at a desk a little bit, but I also want to be out and about. And he said, well, have you ever looked into emergency management? And that kind of triggered me doing some research. And I was an undergrad at Towson University studying anthropology and sociology. So I got a mix of just studying and I really liked psychology. And from there I was like, yes, this is exactly it. It's a blend of all of these different fields that are really interesting and different perspectives and expertise and bring them all together. And so from there, I'm just like this naive undergrad, I emailed all the emergency managers.

Trudy ([03:11](#)):

Wow.

Lisa ([03:12](#)):

In like central Maryland.

Trudy ([03:15](#)):

I'm sorry, what year was this?

Lisa ([03:16](#)):

2007.

Trudy ([03:18](#)):

Oh wow. That's crazy.

Lisa ([03:20](#)):

And none of them got back to me for the emergency manager of ocean city, Maryland.

Christine ([03:26](#)):

Oh, nice. Who was that at the time? Do you remember?

Lisa ([03:28](#)):

Joe Theobald. He's still there. And so I just, you know, emailed him and said I'd be interested in an unpaid internship. I'm just wanting to learn about this field to see if it's something I'm interested in. And he's like, yeah, come down, meet with me and see if this would work. And it wasn't. It was awesome. I went and met with him and I was like, this is exactly what I want to do. And he's like, we need support in revamping our emergency operations plan. I didn't know anything about our emergency operations plan at the time, but I thought it would be really cool to live at the beach for summer with my friends and to intern.

Trudy ([04:04](#)):

Many perks, many perks to this career path.

Lisa ([04:06](#)):

Yeah. And, and so that's what I did for a summer. I think again, I think it was 2007. And from there I was really just interested in the work and I knew I needed to learn a lot. And then from there I got an

internship while the semester started for Baltimore City's Office of Emergency Management. So I interned as an undergrad for them, helping them with just like various projects I think it was only, but after I graduated, it was during the recession. So finding a job was really hard and especially in emergency management, it can be really, really hard to get your foot in the door. I realized that I needed to go back to school to get my master's degree. So I went back to Towson and got my Masters in Integrated Homeland Security Management. And then one of my professors knew Heather Shavitz, who's our boss at the Center and sent her my resume. And then I from there got my job at the center. I was so incredibly excited to get that offer letter. I remember I was in DC at a meeting when I received the email and I was walking down the street and I tripped and I was so embarrassed because there was a lot of people behind me. It was like, you know what? I don't care. I just got a job - a real job.

Christine ([05:33](#)):

A real job. Yeah, no more of those unpaid internships for you.

Lisa ([05:37](#)):

Right, right. And actually I should say at the time I was working as a file clerk at a doctor's office know. Yeah. And I was living at home with my parents and I just got engaged to my now husband. So it was like, Oh, thank goodness all this is working out.

Christine ([05:56](#)):

You've really hit a lot of the highlights for our generation - or like a lot of the events that really shaped us as as a generation 9/11 and the recession and uncertainty about how we're moving forward. And so many of us I think have been shaped by those events ,and I, at least for me, certainly made transitioning into emergency management, very interesting and compelling ... whose cat was that?

Trudy ([06:27](#)):

That was mine. He was just zoom bombing. He's leaving.

Christine ([06:30](#)):

I forgot what I was going to say.

Trudy ([06:32](#)):

You were in a very poignant moment about a compelling movement into emergency management.

Christine ([06:38](#)):

I think some of these things have just shaped our generation so much that there has been a lot more interest in emergency management and fields like it. And so we're... As a field emergency management has seen an influx of people from different backgrounds.

Lisa ([06:55](#)):

Absolutely. And I think I've actually noticed and realized it's, it is starting to shift a little bit because I think that it is morphing more into a profession, and people are really understanding the value and having different backgrounds and expertise. When I started for the Center, my first position was for Montgomery County's Office of Emergency Management, Homeland security and I was one of the National Capitol Region planners assigned to various preparedness plans and you know, at that time in

that that space response plans were pretty dominant and where the priorities were. And so I spent a lot of my, you know, the first chunk of my career working in developing emergency operation plans, also supporting our training and exercise team. And so after I spent a year and a half in Montgomery County, I moved to Baltimore and I supported the City of Annapolis while somebody's contract was kind of running up. And I helped them put together their first after action report after a really full scale exercise. And then from there I supported various different center projects, which was awesome. I got to work on continuity of operations planning. But again, really living more in that preparedness for response state.

Trudy ([08:17](#)):

I also think at the time, I mean we talk a lot about this on the podcast, like sort of the evolution of emergency management since we all got on board. So I think at the time that you were working on those things, that was sort of what the field was doing, right?

Lisa ([08:30](#)):

Yeah, absolutely. You know, and especially because, you know, as we talked about the, the events that really marked our generation, response was it. We needed to develop and enhance those programs first. When I first went to Howard County, their office of emergency management, we kind of joke about it and laugh about it now because I was originally only supposed to be there 30% of my effort for six months. I wound up being there a hundred percent of my time, six years. And you know, I really just had a lot of love and support for Howard County because that's where I grew up. That's where my husband grew up. I was very familiar with that jurisdiction. But the emergency manager at the time and my onsite supervisor, the deputy director, they wanted me to come in and make them emergency management accreditation-compliant, which was, you know, saying that this jurisdiction meets all of these standards and requirements. You really, really have to emphasize the planning process. And at the time they had an emergency operations plan that was written individually by different departments. So there was no cohesive structure to it. And we're looking at it and you know, with my, my background serving other clients and my internships, the EOP is really the foundational plan for how a jurisdiction operates. So that is the first big step. So that was the project that I led and had support from other center staff and really bringing the County together through a comprehensive planning process. That took two years. We had well over a hundred meetings and you know, we had some smaller events that the new EOP helped the County come together and respond in really a coordinated effort. And I'm thankful that we have those events because it did give us, it did give us an opportunity to test that plan. And so after that that EOP was done, I actually had my first child, I went on maternity leave and then I came back and my supervisor said, okay, you know how you finished that EOP and it was a major project and you put all your blood, sweat and tears into that. Well now we need a recovery plan. So can you just get on that right, right now. And I remember thinking, okay, I don't know anything about recovery at all. This should be really interesting.

Trudy ([11:00](#)):

So this was in a vacuum, right? It wasn't because of any event, it was just part of that accreditation and planning process. They just, the next step was a recovery plan.

Lisa ([11:10](#)):

Yes. And I should also say that my direct supervisor at the time was also nominated to be the chair of the Baltimore urban area security initiatives, recovery committee. So they came together and realized like recovery is important. We need to address it. And so he was smart and forward thinking enough to

say, okay, well before we can plan as a, as a region, we need to have local recovery plans. And he had a lot of different experience in seeing disasters. So it was really him that prompted that assignment to me, that that changed everything. And so from there I, you know, as you do with any assignment, you have to first learn about it and figure out, okay, what is this topic really about? You know, what research is out there, what trainings are available, who's done it? And so I went to a week long training course at the emergency management Institute, which isn't too far from me. And that's where I learned all of the key concepts about recovery and really helped the County start to foster a plan for what recovery would look like that would mirror the emergency operations plan. So I should say that at the time nobody was really bought into recovery as a concept. They were, they were like, why do we need this? You know, it's not something I really want to spend my time going to meetings, talking about something that might not ever happen. And even, you know, it was hard to get buy in from, from some leadership. But as I was working on the emergency, sorry, I should say the pre-disaster recovery plan, a lot of significant events happen. So the first one was the Baltimore city civil unrest and so I was sent up from Howard County as a representative to support them in their recovery efforts. And that was really my first experience, recognizing, okay, how do you transition from response to recovery? How do you set up this recovery framework? That really gave me the experience that I needed to propel forward into developing Howard county's recovery plan. And then from there we had a tornado that went through the Western portion of Howard County that really built momentum and to our stakeholders saying, okay, I understand why we need this plan. That was four weeks before we had the first Ellicott city flood. You know, after the first Ellicott City flood, I spent probably a good chunk of 2017 going around sharing the lessons learned because I think that's really how we learn in this field of emergency management is from, you know, people that have gone before us. So that's what I spent 2017 doing. And then unfortunately it happened again right in 2018 and so it really gave us an opportunity to think about what we could have done better and, and enhance that process moving forward, which is an extremely rare opportunity that I, I don't know that I've met anybody that's gone through something like that. And so really from there and made sense to help other people build their recovery programs and their systems before something happens. Because in Ellicott city we were really developing these things on the fly and it just went a lot, lot more smoother the second time around because we knew what we were doing.

Trudy ([14:37](#)):

In talking about every, and this is why we have you on here, you know, we're hearing a lot about reopening and recovery with COVID-19 and the pandemic and many States have reopened or announced they're reopening or that they're about to reopen their phase one based on their recovery plans. So I guess one of our first questions is, what does recovery mean? And you kind of talked about it with Ellicott city in this line of work, and you know, is it the same as what we're hearing in the news?

Lisa ([15:05](#)):

First of all, this, these are great questions. It's like you guys know what you're doing here.

Christine ([15:11](#)):

It's like we know what we're doing, but I don't know we do.

Lisa ([15:15](#)):

So I actually want to kind of break this down for everybody. I first want to read to you the best definition of recovery in the field of emergency management, because I think you really hit on the key point here that recovery and emergency management means something different than it does to the general

population. In the course that I took, the definition that they kind of put in here was from Dr. Dennis Mileti. It was in his 1999 book disasters by design. And he discusses "the contemporary perspective of recovery is not just a physical outcome but a social process that encompasses decision making about restoration and reconstruction activities." So that's really the basis that I use as the definition for recovery because it is not just about rebuilding. And I think right now people are getting really confused in all of these different terms and concepts that are getting, you know, thrown out there and they're thinking they're just kind of interchangeable. But the easiest way I want to kind of break it down for, for everybody is to think about it through a different lens. So I know we're really in COVID-19 right now and it's very triggering. But I want to kind of think about in a natural disaster situation where a very, very specific geographic area is impacted. And so when that happens, the first thing that's done is public safety sets up a perimeter and controls the access because that, that situation is unstable at the moment and it poses life safety issues. And that was something we obviously saw in both Ellicott city floods was there was a perimeter established and government said this is not, it is not safe for people to go into this area because there's buildings that could collapse if we had any other types of weather events. It, you know, when we have unstable infrastructure, we don't know the consequences. And so that was a big portion of that was establishing that perimeter and the policy level decisions of okay, we cannot allow the public, the general public to go in here. And so as time kind of moved on, you have people that need to get in there for in order to survive. So businesses had to get in there to be able to thrive. People who live there may, may needed to get their, their pets or their medications. And so there was a balance and how do we let people that need to get in there through a really, really safe procedure. So they, they had strike teams, they worked with, you know, the business community and, and, and establishing a process to have people be able to quickly and safely get in there, grab the things that they need and get out as that, you know, environment over time was becoming more and more stable. And then over time as they're able to fix some things, get more resources, the, the policy level decision was, okay, we can maybe open this up for just a limited traffic and say, you know, we don't want everybody coming in here. And so that, that, that's, that scenario still applies here. You know, you know, you can go to the grocery store, but there's certain safety precautions that are in place. We don't want everybody just kind of going out and about because it's still a little unstable. Then in Ellicott city we had a day where officially everything was reopened because it was safe for the general public to move out and about. There wasn't that unstable or life safety situation. So that reopening, you know, was just a component of recovery and it really was a milestone that marked. Okay. Generally speaking, people can, can, can move about. But did the town look the same? Absolutely not. I mean there were still, there's still buildings that were boarded up. People still weren't back at work. There was a lot, a lot of work that still needed to be done. So I think if we look at it that same lens, that's really what reopening means. It's just a milestone. It's just a step as part of recovery in general.

Trudy ([19:36](#)):

Yes, absolutely. And I think that's a really great distinction to make because we, I think you're right, we hear a lot of these terms used interchangeably and one of the things that we're hearing is reopening kind of his recovery. Like once we reopened, it's, you know, we've recovered. But what you're saying is that's just a step. There's still so much more to go in recovery in our field and also probably in this pandemic too.

Lisa ([20:01](#)):

yeah, and I also wanted to um, break down the different phases of recovery because I think that's really helpful for, for folks to understand. So it's not, you know, recovery isn't just this, you know, this blend of everything. There are different distinct phases. There are, there are short term recovery, which is days

to weeks after an event. There's intermediate recovery, which is weeks to months. And then there's long term recovery, which could be months to years. So when we were in Ellicott city, we were still technically in long term recovery when the 2018 Ellicott city flood happened again. So even though you can kind of move in this continuum, there are different phases that that overlap but activities and the feel and the community's priorities are very different through those different phases. And I will say, I did have a reporter that recently asked me, you know, what is it? What does that look like to recovery, recover? How will you know that we've recovered? Really the best analogy that I can give you is, it's the same as if you were to recover from a, from an injury back in college. I got ankle surgery from rolling my ankle so many times and spraining it in high school. I got the surgery to, to ultimately fix the problem. And when I was in short term recovery, I was on crutches. I was in a lot of pain. I couldn't really, you know, move about on my own. I had to rely on a lot of support. And then, you know, over time I was able to finally get back to my daily activities. My, my routine. That was intermediate recovery. I could go to the grocery store, I could go on a walk, but I wasn't back to fully running in my full stride, you know, and then,

Trudy ([21:50](#)):

You've got to wake up in the morning and get out of bed and say like, is it going to hurt today or is it going to be okay?

Lisa ([21:55](#)):

Right. And then, you know, when I was in that long term recovery, I was, you know, starting to exercise again. And for some people that might look like physical therapy, trying to strengthen the weak part because now that you've, it's more stable, you have the opportunity to look back and say, okay, I want to make sure that I prevent another injury from ever happening and take care of myself. That's what long term recovery looks like. And then ever I remember thinking, you know, I would run on the treadmill and my ankle would hurt, it would ache just when I applied a lot of pressure to it and you know, you still have some of those pain points and then one day, you know, years down the road, I remember having a thought and thought was, well my ankle doesn't hurt anymore. I have recovered, I've healed. And so it's a very gradual process and I think it looks exactly the same as it would for physical injury where you might have that realization one day, Hey, we've recovered, we're there, but it might not look like you know that you know, it's gonna take a lot of time to get there.

Trudy ([23:03](#)):

Right. And that, and reaching that point is not usually the fanfare. It's sort of like looking back, you're like, Oh, I haven't, we haven't thought about this. Everything has sort of been normal. We haven't, so I guess that's, that means we're back where we were or in a better place than we were before.

Lisa ([23:18](#)):

Yeah, exactly.

Christine ([23:20](#)):

You've sort of highlighted the differences between the terms being used in the media, reopening and recovery, those mean different things. It's not just putting people back in buildings. Can we talk a little bit about what recovery should look like for this pandemic, but this pandemic presents some challenges when thinking through traditional recovery. What are some some unique challenges for recovery?

planning that you see and what sort of, what work are you doing right now in terms of recovery and COVID-19?

Lisa ([23:52](#)):

I will say that the challenges with recovery, regardless of the incident, size and scope have all felt the same to me. You know, the, the details and the circumstances are a little different, but the overall challenging challenges are still the same. There's a lot going on. Recovery is a very, very different pace than response. Response is very much, there's an issue. We need to find resources. Recovery is very complicated, uh, requires a lot of forward thinking, slowing down and strategic forethought. And so, uh, and I think also with that, the challenges are you've got a lot of people who are doing a lot right now. How do you get, how do you get them extra support? How do you build a structure that's sustainable over time? And that also balances that you have human beings with emotions and family lives and families that are being impacted from this disaster. I don't think there's a single person on the planet that is not impacted in some way that's crazy right there and how we all show that impact. And so as leaders, they have to recognize that. But I think the most important thing that I work with my clients on is developing a framework. And that's what I work primarily with my current clients on is being able to operationalize that framework and making sure that information is flowing up and flowing down, but that there's different areas and you have the right people in the right seats. Looking at the different issues because they're a combination of different issues right now. Some people are just solely economically impacted, right? So you need to have the right people that are thinking about the economic impacts. You have a lot of organizations that are trying to get back to work in a safe way. And so you have a whole component there on whether it's government, whether it's government services or organizational services. So that's a, that's a area that needs to be addressed there. And then you have the whole public health housing issues and human needs that you need the right organizations, nonprofits, all working together to address those human needs. So I think really the biggest thing that I'm doing right now is supporting my clients into establishing that foundational framework. Because you can't decorate the house until you have a foundation put up. We're human beings and we can feel very triggered by the circumstances of what we're talking about. You know, sometimes we just need to think about it logically too, which is really hard to, to slow everybody down and get that framework in place. So that's really the first thing that I help my clients with is being able to fill in the positions in that framework, figuring out how people are communicating at what intervals. And so the clients that I serve are primarily here in Maryland. So that's what I'm doing right now.

Christine ([26:50](#)):

I think you've brought up some really interesting points. The issue of having to slow people down is huge right now because there's a lot of pressure, political pressure, and otherwise to reopen, let's just forget this thing ever happened. Let's just go back to normal, which I can say it would be a mistake to just jump right back in as though nothing happened. And your idea of strategic forethought being key to recovery, one of the keys is incredibly interesting because some of these things certainly have to happen in a particular order for them to be effective. There's been a huge push to do something around recovery and child care. And sometimes that push looks like let's just reopen schools and put children back in school, so parents could go back to work or you know, regain their sanity from several months of.

Trudy ([27:38](#)):

Home schooling.

Christine ([27:39](#)):



Home schooling. But that would also be a mistake without appropriate forethought, appropriate sort of physical mitigation measures.

Lisa ([27:49](#)):

There is absolutely a balance, and I think another thing I should mention that I'm really working with my clients right now is putting the vision of their future front and center and understanding what they're trying to accomplish and where they're trying to go. Because without that vision, it's like packing up your car with everything you have and driving nowhere. It is a balance of having leadership understand that vision but also breaking it down into not getting caught up into the the huge overall big picture of like what are we going to be doing a year from today? Well, we have to, that's why we break it down through the different phases. We have to focus on the strategy for short term recovery and looking at what the community's needs are, what resources are available and what the gaps are. And you need to do that on a weekly basis. That's really what the key is understanding what's the destination, where are you going, how can you use your vision that you've already established through, you know, your day to day world before all of this happened. But also breaking it down into what are the steps we need to do right now.

Trudy ([28:56](#)):

And it sounds like, I mean one of the things that struck me was you were talking about, and this is something that we've talked about with this current pandemic, is the personnel strain. Like the resources. You know, a lot of people are working 12 hours days. It's not like there's tons of people waiting in the wings to come in and fill in when those people take their weekends, if they get weekends. But it almost sounds like you kind of need to have almost two separate teams thinking about the response, cause we're still responding, right? We're still responding to this pandemic. But then you also need to have other people at this other tempo thinking about the recovery.

Lisa ([29:31](#)):

Absolutely. Yeah, you really, really hit a major point there and that was something we were very aware of in Ellicott City was cannot have the same people working in both response and recovery. And especially now because they're extremely blended, it does make a lot more sense to, to kind of break off into different teams and have a whole separate structure that is focusing on recovery and having, you know, a recovery manager or somebody that can dedicate a hundred percent of their time just thinking and coordinating recovery efforts. So, and the other thing I should mention is, you know, a lot of jurisdictions are still gonna maybe have other disasters, you know, we're, we're getting into summertime where we can have severe weather and so they have to be prepared to respond to those incidents as well.

Christine ([30:23](#)):

We're going to see a resurgence of some of the tropical diseases vector born diseases with a summer, winter or summer, winter weather. What is that? That's not a real thing.

Trudy ([30:34](#)):

It could be, we could make it a thing, but we've also seen, you know, down South, and a lot of the areas that had lower rates of covert 19, but they've gotten hit by tornadoes they've had to do sheltering. So you're right. Like there's still a whole other realm of response that may come into play.

Christine ([30:53](#)):

And we don't know whether COVID-19 can be vector-borne. I'm not pushing any panic buttons. Nobody, nobody take that and run with that please.

Lisa ([31:04](#)):

No, I, yeah, I watch a lot of times pieces, you know where I mean, you're watching it and you're like, if they only knew this. Are my children gonna watch this and be like, if they only knew this?

Trudy ([31:17](#)):

Right. I feel that way now. Yeah. I only knew this list of a thousand things.

Christine ([31:25](#)):

but sort of circling back to the staffing piece, my client was very insightful and knew. I mean, you, you know who my clients are and they worked Ellicott city with you. So they were, they knew that they needed to start recovery now and set up a specific recovery work group. Many of the people on their work group also had sort of part time duties elsewhere. But several of us work just on the recovery work group. So having that work group set time aside to work specifically on these phases of recovery has been incredibly helpful for our response. For continuity of operations planning. We've been able to answer questions that the leadership that the school system had immediately.

Trudy ([32:08](#)):

There are some jurisdictions or some businesses or some organizations that are thinking about recovery now and maybe specific to this pandemic or maybe just, Oh Hey we didn't have a recovery plan and now we see the value that that could add to our organization. So if the, if there are those organizations or people who are just starting to think about recovery, what are some of your like high level recommendations in terms of who should be involved in the recovery? And you kind of talked about that. What of questions should they be asking? What resources particularly do you think should be critical or prioritized in the recovery process? And you talked a little bit about all of these issues, but if we were to nutshell it as they say.

Christine ([32:53](#)):

Do they say that?

Trudy ([32:54](#)):

I don't know. Maybe they will like winter, summer weather.

Lisa ([33:01](#)):

Question. Because I know a lot of people and families and people that run their own businesses want to know the answer to this and so they, they do ask me and I would say for who should be involved, do you need to have buying from the very top and you should have a framework that gives everybody a spot on there and so they that it's very clear what everybody's roles and responsibilities are because when you get that clarity it just really helps with the emotional and stress level that everybody has right now. And then in terms of what questions should they be asking, the question they should be asking right now is what is the vision for recovery? Like what is my organizational vision for recovery? Because you need to understand that. Like an example I can give you as an Ellicott city, we had to ask that question. Do we

want a model resilient town or something that's more aesthetically pleasing because those priorities are very different. And a utility company comes in and says, we can, you know, underground all the lines, but it's not going to make it more resilient or we can move, move the poles. You want to just to look better. You gotta have to understand what that vision is so you can enact the right efforts moving forward. So that's really the, the, the number one question. And you might want to bring your leadership together and have that discussion because it's going to really be important that everybody's kind of on the same page and you're getting different perspectives.

Christine ([34:29](#)):

That's so much like a typical strategic planning process; starting out with what is the mission and the vision of this organization. That's very interesting.

Lisa ([34:38](#)):

Yeah. And it, you know, think about it. If you were starting your business, that's the first thing you're going to do is try to figure out what's your vision and what's your mission. Like how are you accomplishing that? It's the same thing moving forward with this recovery that, and it's a process that everybody's familiar with. So that's the first question. And then in terms of resources, you know, we talked about this, it's 100% personnel. If you don't have people, and if you're not taking care of them, everything will fall apart. It doesn't matter how much money or resources you have, if you don't have people, you can't recover because you have, you don't have the humans actually carrying out those efforts. So it, it does feel counter-intuitive. Like I think in our culture we just want to white knuckle everything and plow through. But it is the most important thing. That's what I tell my clients all the time. We have, you have got to take care of your people because that's what's going to pay the most dividends.

Christine ([35:36](#)):

And it's incredibly difficult in the COVID-19 response pandemic world because many of these organizations were already, as we discussed in a previous episode, chronically underfunded and therefore chronically understaffed. So you have one person doing three people's jobs and they're working 14 hours a day and there's no way that they can move on to recovery,

Lisa ([35:58](#)):

I should say, you know, more on a personal note that I was really, really bad at taking care of myself during the first elegant city flood. You know, that was kind of like the last thing on my list and I had, I had some significant consequences from that. I had probably a headache every single day for a year because I was so used to my body just being really stressed out and revved up for a long time. And I just saw a lot of the, the ramifications and the toll that it had the second time. So once it, when it happened again, that's when it really, really started to come out how people were impacted. And I know people who've been heavily involved in the process that have yet to even drive through the town. It's really important that we kind of armor ourselves with all of the equipment. You know, we physically talk about equipment and PPE, but we need to equip ourselves with all of the tools, all of the support that you need, and if you need extra care and help, you need to ask for it and get it. And it could not be the most important thing right now.

Christine ([37:11](#)):

You said earlier that this pandemic impacts every single person on this planet. So it's sort of thinking about how do we recover considering every single person on the planet, like a whole population recovery.

Lisa ([37:24](#)):

I think having those major statements and recognizing that almost helps in understanding that there's such a humanity with all of this. Like it doesn't matter if you're, you know, John Krasinski who watches good news. Every celebrity is impacted. It doesn't matter who you are. Every single person is impacted. So it brings this, this human human component that we're all in this together. And I think to not feel like the weight and overwhelming component of that, it's like focus on your community. So I think it does feel overwhelming to go, okay, well every single person is impacted. But just kind of recognizing that, okay, we're, we're all in this and it might come up in, in, in strange ways and I'm going to have compassion for every single person, but I'm going to do my part in supporting where I live and where I work. You know, if everybody does that, there's just this human spirit that will just continue to thrive through all of this.

Christine ([38:21](#)):

And thank you for bringing up the self care and mental health aspect of it. Our previous episode, we had Nicole on to talk about the planning she was doing around the behavioral and mental health group that she's putting for her client and we definitely touched on that, but I think it's an incredibly important point that I've heard from everybody working this crisis.

Lisa ([38:44](#)):

Everyone, like personally for me, I have a, I have a therapist that I talk to every other week and that's how I get that support. And I think especially for people that are on the front lines, like they're going to have to get care. I think it's just so critical.

Trudy ([39:00](#)):

So this is all such great information. But I think sometimes when people are thinking about recovery and they're thinking about all of these issues, like anything else with planning or emergency management, it can be overwhelming. So if you were going to say, here are three concrete steps that you can take toward addressing recovery in your organization or in your business, what would those three concrete here do this steps be?

Lisa ([39:25](#)):

Yeah, that's a great question. Number one, develop a framework. So map that out. Then the second part is have the conversations with those involved in the framework. Get everyone to buy in and understand their roles and responsibilities. And then the third thing is conduct a weekly strategy that includes an assessment of needs, what resources are available and what are those gaps? Because you want to work in mending those gaps. And that's the way that all of these competing priorities, you can get them succinctly organized to figure out where you need to spend your time and effort. So those are the three things that I would suggest and that's what I work with my clients on doing

Trudy ([40:04](#)):

Well, Lisa, thank you so much for joining us and talking to us about these issues cause it's on everyone's mind and everyone is talking about it and I think this is very helpful. Stay tuned for next week on our

episode, we're going to be addressing mass fatality, which is a pretty tough topic to talk about, but it's something that needs to be addressed and talked about and we're going to do our best.

Music [\(40:43\)](#):

Ketsa. "Mission Ready." Raising Frequency, <https://freemusicarchive.org/static>.