CRISIS COMMUNICATION PRACTICES
AT AN INTERNATIONAL RELIEF AGENCY

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WHEN A DISASTER strikes, the affected population relies upon the swift response and aid rendered by relief organizations such as the California-based Direct Relief International. Since 1948, Direct Relief’s mission has been to provide essential material resources to locally run health programs in areas affected by natural disasters, wars, and famine (see “About Us,” n.d.). Most recently, Direct Relief helped victims of the Philippine mudslide, the Pakistani earthquake, the U.S. Hurricane Katrina, and the Southeast Asia tsunami. To operate successfully across such a vast territory, crossing national boundaries, and interfacing with a variety of organizations and social structures, agencies such as Direct Relief must develop an effective communication plan (Barton, 1993; Rice, 1990; Williams & Treadway, 1992; Winsor, 1990, as cited in Hale, Dulek, & Hale, 2005). Thus, I wanted to learn more about the internal and external communication strategies developed by Direct Relief.

In October 2005, I interviewed Jason Kravitz, Direct Relief’s communications director. In this report, Kravitz describes the communication processes during these stressful times, their intercultural challenges, and how his agency handles stressors similar to those faced by a business handling its own crises. The difference is that Direct Relief has overcome many of the associated obstacles.
How did you come to work for Direct Relief International?

Several weeks ago, as I was ready to move to Ireland to begin graduate studies in Conflict Resolution, Thomas Tighe, our CEO, asked me to come back to California to manage Direct Relief’s communication operations. I had volunteered for Direct Relief back in high school, so I was familiar with the operations. At the time of the email, Direct Relief’s Chief Operations Officer, Annie Maxwell, was off at the United Nations for a year. She and Thomas were the only communications and writing people for the organization, aside from contracting out to a local public relations firm for 12 hours a week, which was not enough. So, I called an audible and here I am.

What is your communications background?

At Northeastern University, where I received a bachelor’s degree in international relations and economics, I participated in a cooperative education program where I got to work at the Peace Corps under a communications director whose specialty really wasn’t communication. As a result, I ended up doing a majority of the writing and media interaction—a deputy press director at age 20! After that, I went to Ireland for 6 months to work for the leader of the opposition party. I was involved with the communication team for the Nice Treaty campaign to expand the European Union by ten countries. This allowed me to tour Ireland and learn how to present the pro-Treaty message effectively. The experience also taught me how important local community papers are versus those that come out of the capital—vastly different.

Professionally, I worked in Washington, D.C., for U.S. Senators Sarbanes and Kennedy for 1 year on foreign policy. Most recently, I was employed by a small U.S. software firm to conduct market analyses for their entry into European and Asian markets. Every day at the U.S. Senate was chaotic, much similar to the chaos that follows the disasters Direct Relief deals with. So, it’s a good fit for me here. Mr. Tighe brought me on board because of that experience coupled with my writing and oral skills. My education and field work taught me to effectively communicate foreign policy issues to the general public, and that’s what I do here now.

What is the communication structure here on a normal day?

Generally, most interaction is between the Programs Department and me. Our internal departments (Programs, Warehouse, Operations,
and Development) work together in finding donors, in finding partners in the affected countries, and then in coordinating logistics. By the time the internal departments get all the information collected, it’s time for their people to go home, so the actual “story” of the crises and response is left up in the air. I talk with the director of the affected region to get the information, I write the story, I give it to Mr. Tighe to review, and then I send it out to the appropriate media channel. The day-to-day challenge is to be involved in what is going on here and to marry the personal element of who our efforts are benefiting and the data behind it all.

As far as communication with donors, the Development Department works with the donors and sends me information about the corporate gifts and the corporate bios, then I create a release about the specific grants. My job is to tie into this process and understand what might interest the public about it. For example, Federal Express just donated $100,000 of free shipping—right after Hurricane Katrina hit. We were able to ship supplies immediately without the cost issues. Oftentimes in the past, we have had amazing stories like that, but they were never disseminated. Communication of these events to the public helps Direct Relief and benefits our corporate partners as well. Pharmaceutical companies can toot their own horn about how much they donate, but when that information comes from a nonprofit, it means so much more.

**Was this communication structure in place when you arrived or something you created?**

I was brought on because Mr. Tighe was the top of the pyramid with no structure below him. At the end of the day, everyone went home, and Mr. Tighe was left to write the releases and create the story. I was hired to create and implement the structure outlined above.

**Is it working for you so far?**

Yes. Now, our departments are at the bottom of the pyramid, and they have their individual activities. One central person in each department works on a project, sends the resulting data to me, and I put the package together—I create it, finalize it, Mr. Tighe okays it if he’s available, I return it to the department to verify accuracy, and then it gets published. Direct Relief has two consultants from its Board of Directors: One specializes in marketing and one in public relations. My responsibility is to coordinate with them—they are looped into this whole process—to assist in Direct Relief’s’ strategic outreach efforts.
What format and tone of writing is used the most?

Email has come to dominate everything. I would even go so far as to say it tops telephone communications, especially when dealing with reporters. It is easier for them if you type in a sentence versus record it over the phone and have them write it down. Email also leaves a trail for them and for us. Email is the trend, and everywhere I’ve been it has become the standard.

In most cases my writing is rather informal, especially for audiences who are “type-A” personalities with a lot going on. They don’t have a lot of time and sometimes just send a one-sentence paragraph. However, since we seldom send letters these days, some formality is necessary when communicating to a partner facility, donor, or the outside public.

How important is a candidate’s writing ability in your hiring process?

Writing is a 10 out of 10 in importance to me. Beyond the obvious reason, so many emails are sent out that people are communicating by the minute. If someone can’t create a coherent and concise sentence, it’s almost a waste of time. Although writing is not the focus of our departments here at Direct Relief, their messages need to be understood for the communication structure to work properly. For example, if somebody is sending a shipment to Pakistan, a program officer writes up an informal paragraph about the shipment. It becomes my responsibility to edit it and make it captivating to the audience. But there is necessarily a difference in the internal formality of that message and the external communication formality.

How does the relief effort start? Do you wait to hear from the affected area or self-initiate?

We initiate contact immediately. Whoever hears about the emergency first starts the wheels spinning for us. I think it makes sense that if Santa Barbara was affected by a disaster, health professionals would be scrambling already. We do the same; we call immediately. In Pakistan, the logistics are so bad, the populace so poor, and the weather so awful (it’s snowing, people are freezing) that communication in and out is terrible. You have to find other ways to get around that problem. That’s one of the reasons we are sending a representative into the region as our basic contact, so we know sending products to facilities is okay.
Does the communication structure change when a disaster occurs?

Communication structure is a work in progress. Normally, Mr. Tighe lays out the assignments for everyone in the departments, like “contact this person or contact Reuters,” and then directors branch out. It’s a very loose structure, because he is not a micromanager. He allows people with their own abilities to do what they need to do. It worked out so well with the Tsunami efforts because one of the senior program officers had so much experience with India and Sri Lanka that we were ready to go on day one. We received tremendous press with the fast reaction. Essentially, after you have those initial tasks allocated, everyone goes off and does his or her thing. The Operation’s warehouse was being renovated when Katrina hit, yet they were so efficient, we shipped out over 15 tons or $24 million worth of medical products. It works out so well that once we find the needs and the partner, we can move forward. Federal Express’s gift was the last piece of the puzzle. We had everything ready and didn’t need to worry about finding a shipping company. Everything just went out the door in an organized way.

Pakistan was a similar matter. We simply found our local contacts and then tried not to be in the way. We had someone in Pakistan follow up on the contacts we’d made to ensure that the donations we sent were put to use. This happens on a regular basis on normal shipments also such as those to Tanzania. At some point the program officer meets face to face with clinic or health facility personnel in the contact country. That’s our selling point; we have long-standing relationships with our partners. We don’t need to be there all the time, but we know the clinics will run well. The donors appreciate that relationship.

We also try to keep our Web site up to date with information about the disaster, relief efforts, and current state of events. Ideally, we’d like to do this daily, but the reality of time issues makes an every other day update more likely.

In a crisis, organizational layers tend to flatten. Is this so at Direct Relief?

That is what happened in the past. Everything went to Mr. Tighe. Now there is the beginning of a sense of structure. Actually, since I’ve been here, we had one somewhat down week during Hurricane Katrina when the structure tended to flatten. We got back to “normal” and
then the Pakistan earthquake hit. I envision that it would be the same structure in both instances—normal and crises. Naturally, in a time of disaster, more phone calls come in and go out. Things are more chaotic, like the idea of hitting specific deadlines, especially with the 3-hour time difference with the key media players on the East Coast. When East Coast editors are leaving their desks and it is only 3 p.m. here, it makes more sense to plan having the press release in their hands first thing in the morning.

It seems odd to say this, but with each disaster that hits, I think we are fine-tuning our own machine. It positively has an influence on how we interact internally on a normal basis because once things start slowing down, whether someone’s shipping to Guatemala, China, South Africa, etc., there is a set structure.

Is there any difference in this structure when a disaster is national versus international? What happened when Katrina hit versus the Pakistani earthquake, for example?

There would not have been a difference with Katrina, because we did not have many contacts in the Gulf. We used our California contacts to find others in the affected states. The same thing happened with Pakistan in that we only had one partner facility in the southern part of the country and that’s not where the earthquake hit. So, essentially that first step with the partners in both situations was to let them know that we were ready to help immediately, but that we needed their help to find other hospitals in the region.

Again, with Katrina, we worked with our California contacts to find Gulf Coast contacts immediately through the community clinics. (Direct Relief’s major domestic program is through the California Community Clinics. Since the program’s inception in December 2003, Direct Relief has provided almost $12.5 million [wholesale] in pharmaceuticals and medical supplies to 70 community and free clinics throughout California.) We turned that around to work with the community and free clinics in Alabama, Arkansas, Louisiana, Texas, and Mississippi. Since they are accredited clinics, they aren’t going to run away with the money. Reliability is a major issue with donors and the public about that perception due to the unsettled nature of what is going on with nonprofits.

What is the most common method of communication in an emergency?

Both phone and email are the most frequently used mediums, but it really depends on necessity and also on the nature of the program. It has been 10 months after the tsunami in Southeast Asia, and they
have allocated over $7 million dollars in cash grants toward various redevelopment projects and to create an infrastructure. Sometimes these improvements aren’t immediate, so phone needs aren’t met. You’d be surprised that they have the Internet in very rural places. They may not have clean water, but they have the Net. But actually, I think that the phone correspondence happens more often internationally than domestically.

**How do you overcome communication difficulties during a disaster?**

We use our local partners and rely on their network to help Direct Relief find contacts. In many disasters, we will ship to our partner facilities in the affected regions to maintain their inventory, because it’s almost a guarantee that they will be unloading as much as they can to the affected region. They need the supplies because they’ve already distributed their own. For instance, a particular hospital in Pakistan was unloading its entire inventory to hospitals in northern Pakistan. Luckily, we had a shipment sent out to them that would backfill their supply—we were lucky with that.

Also, through the Lion’s Club we made some contacts in South Asia. That organization has its own local teams on the ground assessing needs to figure out what people need and report back to us. It is fine-tuning our network of current contacts to find positive referrals that helps us communicate in time of disaster. That’s what happened with Katrina. Our California contacts helped line up what we were sending out to the Gulf and word just spread. Once we had a facility in Mississippi, word spread and we made contact with others. There is always one doctor who knows everybody along the coast, and it’s just about finding that right individual.

The doctors and hospitals were receiving so many calls for information, clothing donations, offers of assistance, etc. It was difficult to get through to someone who knew what was needed and to line up the proper logistics to get the shipments down there. Local contacts simplified that process. Oftentimes when we ship abroad, we have customs issues. In an emergency, we can’t have our product sitting in port for 2 weeks on the other end. Having relationships with doctors around the destination country helps speed up these processes.

**Describe typical miscommunication due to language or cultural differences.**

For us it’s much less than many other organizations. For example, we are sending an employee to Pakistan tomorrow where there is a
minimal U.S. media core—it is mostly foreign press. Mr. Tighe and I will be briefing him on what to say if asked why there hasn’t been more U.S. aid or why there hasn’t been a greater response. In Pakistan, over 50,000 people have died in this recent disaster, and that by far trumps anything that’s gone on in this country for the last few years. Immediately you have your racist and prejudicial issues. The message we want to send is that we are in a place to deliver and we are only there to help. It goes back to our relationships with local doctors—we trust each other. We are not on the ground treating people; we are letting them treat themselves. We respect the local sovereignty and, therefore, get around certain biases.

**Have you needed language translators for any foreign communications?**

We have someone on staff who speaks fluent Spanish, French, and German. Most hospital administrators do speak English, so we haven’t needed translation services since I’ve been here. I haven’t had anyone call in and say they need a translator. But when we travel to foreign countries affected by disaster, we employ local translators as well as someone who knows that area well.

**Do nonprofit organizations’ communication structures differ from for-profits?**

I think they differ—especially in the business corporate structure, which has to be streamlined, very organized. From my experience, government is very bureaucratic. Nonprofit is more similar to the government, with less disorganization. We can’t streamline our communications, because we are not working with one general product or message. I think a nonprofit that works domestically and internationally also has its own inherent variables that differ from other nonprofits, especially from a communications perspective of “how do you sell our brand?”

**Implications for Business Educators**

This interview spotlights the effectiveness of a fluid communication structure that flexes in times of crises. Direct Relief’s linear model withstood pressures on a national and international level by relying on internal elasticity and external relationship building at a grassroots level. Even though its response is to another’s crisis, Direct Relief has mastered many of the reported problems associated with the traditional linear response phases:
Observation: The lack of accurate, timely information about ongoing crisis activities at the center of the crisis is remedied by partner hospitals/facilities at ground zero reporting facts.

Interpretation: The lack of normal communication channels during crises is problematic but not insurmountable because of the partner network at the crisis site. Local, indigenous contacts also reduce conflicting interpretations of data.

Choice: Lack of decision-making time is not an issue for Direct Relief because the organization is structured for quick mobilization and response at every level. On-site staff maintain the organizational memory, allowing swift decisions based on past effectiveness.

Dissemination: Streamlined and dedicated departments do not usurp dissemination channels but, instead, funnel pertinent information to their communications director, a professional with extensive experience in the creation and dissemination of information, meeting the needs of multiple targeted audiences.

Additionally, while still employing the traditional news release, Direct Relief has joined millions of companies in utilizing the Web to communicate with citizens, donors, media, and many other publics. As Direct Relief well knows, appropriate use of the Web during a crisis can enhance understanding, change perceptions, and even save time and money (Perry, Taylor & Doerfel, 2003).

REFERENCES


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