Navigating the Emotional Weight of the Work

A Crash Analysis Studio examines a tragedy. Someone was killed or seriously injured, and the people participating in the Studio may be asked to examine the circumstances of that person's final moments.

That can be difficult work.

Engineers, planners, public works staff, elected officials, and community members do not necessarily encounter death and serious injury as part of their regular professional responsibilities. A crash report may suddenly make something very real that previously existed as a number in a spreadsheet. Photographs may show a familiar street. The person who died may have been walking to work, riding a bicycle, driving home, or doing something any of us do every day.

It is appropriate for that realization to affect us.

The emotional response is part of the learning, but **trauma is not the teaching tool.**

Participants should understand that a real human life was lost and leave the Studio with a determination to prevent the same conditions from producing another tragedy. We do not need graphic photographs or detailed descriptions of injuries to manufacture that response.

Show What Participants Need To Learn

The same principle used throughout the Crash Analysis Studio applies here: **Show participants what they need to learn, not everything investigators collected.**

Police officers, medical examiners, emergency responders, and crash reconstruction specialists collect information for different purposes. Not all of that information is necessary for a conversation about street design.

Before including a photograph, autopsy finding, medical description, or other potentially graphic material, ask:

What will participants learn from this that will help them understand the street or identify a contributing factor?

If the answer is nothing, leave it out of the agenda packet.

A photograph showing where a vehicle came to rest may be important. A photograph showing the injuries to the person probably is not. A medical finding that establishes the direction or severity of an impact may occasionally be relevant, while the complete clinical description of those injuries is unlikely to be.

The Crash Analysis Studio should provide enough information to understand what happened without unnecessarily exposing participants to graphic material.

Recognize That Difficult Work Has an Effect

The emotional impact felt by the participants in the Crash Analysis Studio is not unique.

The National Institute for Occupational Safety and Health (NIOSH), part of the Centers for Disease Control and Prevention (CDC), recognizes that exposure to severely injured people, death, and other traumatic incidents can produce physical, cognitive, emotional, and behavioral responses. Those responses may occur immediately or emerge later.

The Substance Abuse and Mental Health Services Administration (SAMHSA) similarly describes how repeatedly hearing about or engaging with the traumatic experiences of others can contribute to secondary traumatic stress and, combined with burnout, compassion fatigue.

The Crash Analysis Studio is not a clinical setting, and facilitators should not attempt to diagnose or treat these responses. The practical lesson is much simpler:

Acknowledge that this work can weigh on people and organize the work accordingly.

Allow people to step away when they need to. Avoid unnecessary graphic material. Do not assume that everyone processes what they have seen in the same way. If a city regularly conducts crash reviews, consider how responsibilities are distributed rather than repeatedly placing the most difficult work on the same individuals.

Most importantly, do not allow the experience of participating in the Studio to end with the tragedy.

Close the Loop

The Crash Analysis Studio should create a feedback loop.

After recommendations have been implemented, return to the street.

Walk the intersection. Observe how people are using it. Watch drivers approach the crossing. See where pedestrians actually walk. Talk with the people who use the street every day. Ask whether the intervention addressed the condition identified during the Studio and whether something unexpected has emerged.

This is not simply project reporting. It is another round of observation and learning.

Crash → Observation → Studio → Action → Observation

The process should continue to build knowledge.

Closing the loop also provides something important for the people doing this difficult work: they get to see what happened because they acted.

For city staff, some of the most rewarding projects are the ones they can see working. A crossing was shortened. Lighting was improved. A lane was narrowed. A dangerous turn was redesigned. People are behaving differently because the street communicates something different.

SAMHSA uses the term compassion satisfaction to describe the fulfillment and positive feelings that can come from helping others through difficult circumstances. Its guidance specifically recommends celebrating successes with colleagues as one way of fostering that satisfaction.

For a Crash Analysis Studio team, that concept can be very tangible.

Go see what you changed.

Periodically replace a meeting around a conference table with a walk through a location previously studied by the team. Observe the completed work. Discuss what worked and what did not. Identify what the team learned that can be applied elsewhere.

The purpose is not to celebrate the crash. It is to recognize the action that followed it.

The team should be able to see the connection:

We observed. We learned. We acted. We came back to learn again.

That feedback reinforces why the difficult work of the Crash Analysis Studio matters and encourages the organization to keep taking action.

Footnotes:

Crash Analysis Studio participants are not crisis counselors or emergency responders, but these professions offer useful lessons for structuring work that requires people to confront serious injury and death.

Neither CDC nor SAMHSA is writing about transportation planners conducting Crash Analysis Studios. CDC's material is principally directed toward emergency-response workers, and the SAMHSA material is directed toward crisis counselors and disaster responders. The intent here is to apply established lessons from professions that routinely encounter traumatic material to a different professional setting.

CDC / National Institute for Occupational Safety and Health (NIOSH), "Traumatic Incident Stress." This is particularly useful for establishing that exposure to severely injured people and death can produce stress reactions; that reactions vary between individuals and may occur immediately or later; and that organizations should think about pacing, breaks, watching out for coworkers, and allowing individuals to determine when they want to discuss their experiences.

CDC/NIOSH: Traumatic Incident Stress
Original NIOSH publication: Traumatic Incident Stress: Information for Emergency Response Workers

SAMHSA, "Compassion Fatigue and Self-care Resources for Crisis Counselors." This is the strongest direct source for the concepts we are borrowing. SAMHSA defines compassion fatigue as involving burnout and secondary traumatic stress. More importantly for our purposes, it defines **compassion satisfaction** as fulfillment and positive feelings associated with the work and recommends that coworkers "celebrate successes and support each other during difficult times."

SAMHSA: Compassion Fatigue and Self-care Resources

SAMHSA, "Tips for Disaster Responders: Understanding Compassion Fatigue." This is the underlying SAMHSA tip sheet specifically addressing burnout, secondary traumatic stress, compassion fatigue, and compassion satisfaction. It was updated by SAMHSA in April 2025.

SAMHSA: Understanding Compassion Fatigue