Surviving a Major Bus Crash
Experiences from the Crash and Five Years after

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Akademisk avhandling

som med vederbörligt tillstånd av Rektor vid Umeå universitet för avläggande av medicine doktorsexamen framläggs till offentligt försvar i hörsal B, 9 tr, Norrlands universitetssjukhus,
fredagen den 27 oktober, kl.13:00.
Avhandlingen kommer att försvaras på svenska.

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Abstract
Survivors’ experiences of major road traffic crashes are rare or missing in disaster medicine research and a comprehensive understanding of the survivors themselves is lacking. The overall aim is to broaden the understanding of the short- and long-term consequences and experiences of surviving a major bus crash. The contexts are two bus crashes that occurred in Sweden, in February 2007 and December 2014. In total, the participants are 110 out of the 112 survivors, and the data is collected through telephone interviews, official reports, and medical records at one month, three months, and five years after the crashes. Analysis methods include qualitative content analysis, descriptive statistics, thematic analysis, and mixed methods research analysis. One month after the crash, most of the survivors were experiencing minor or major physical and/or psychological stress in their everyday lives (Study I). Four main findings were identified regarding their experiences of immediate care (Study II): prehospital discomfort, lack of compassionate care, dissatisfaction with crisis support, and satisfactory initial care and support. The importance of compassion and being close to others was also highlighted. Five years after the bus crash in Rasbo (Study III), survivors were still struggling with physical injuries and mental problems. Other long-term consequences were a lasting sense of connectedness among fellow passengers, a gratitude for life, as well as feelings of distress in traffic. The main findings from study IV indicated that social aspects seemed to be of important to the recovery process, and that injury severity did not seem to considerably affect mental health. There was a connectedness among survivors in which they seemed to be linked to each other’s recovery. A strong need for short- and long-term social and psychological support in terms of compassion and community is evident in all the studies. The survivors ought to be acknowledged as capable and having the resources to contribute to their own and their fellow survivors’ recovery and health. There is a need for greater understanding of how different the survivors are, with each one of them having various physical, psychological, social, and existential needs.