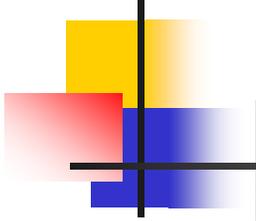
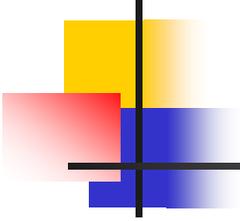
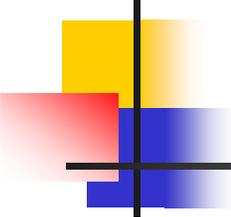


IASC Guidelines on Mental Health and Psychosocial Work in Emergencies:

From treating victims to supporting the mobilization of community actors



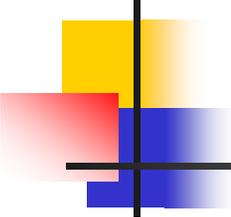




A new set of guidelines

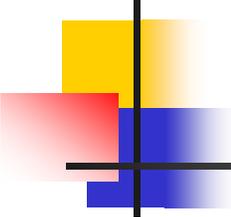
on mental health and psychosocial support in emergency settings was launched by the IASC last fall.

The product of a worldwide committee, the guidelines place culturally competent social service delivery, community ownership of decision making, participatory processes and human rights at the center of their focus



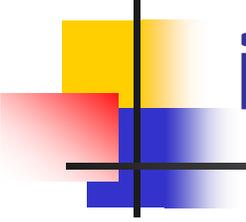
What is the IASC?

- The Inter-Agency Standing Committee (IASC) was established in 1992 in response to General Assembly Resolution 46/182, which called for strengthened coordination of humanitarian assistance. The resolution set up the IASC as the primary mechanism for facilitating inter-agency decision-making in response to complex emergencies and natural disasters.



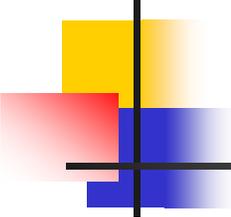
Who are the IASC members?

- The IASC is formed by the heads of a broad range of UN and non-UN humanitarian organizations including the Federation of Red Cross/Red Crescent Societies, the International Committee of the Red Cross, and consortia of international NGOs.



Why new guidelines on mental health and psychosocial support in emergency settings?

- In recent years, natural disasters and armed conflict have called forth large scale emergency humanitarian action in both global north and south.
- The IASC became concerned that in the absence of guidelines as to how community resilience should be supported, humanitarian actors have unwittingly been the cause of and not the solution to, psychosocial distress.



Why new guidelines?

- There have been all too many instances in which outsiders have been permitted to practice in situations of extreme gravity and do harm through importing external methods of coping, marginalizing rather than strengthening indigenous systems.

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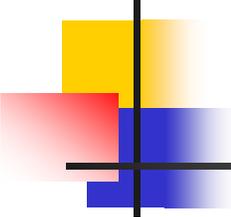
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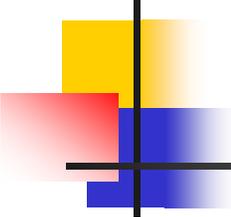
Bring your friends and learn how to help
effectively!

SCIENTOLOGY INTERNATIONAL VOLUNTEERS



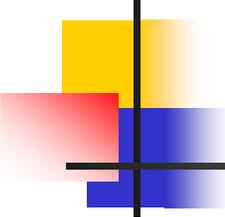
Why the guidelines?

- There have been widely reported instances of failure to provide for the basic rights and dignity of citizens through lack of collaboration with community based organizations and leaders.



Problematic Practice

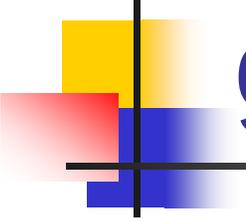
- In one US city, with flood waters rising, family caregivers were told that there was no room for them and their helpless babies on evacuation vehicles
- Armed guards threatened family members who tried to bring the children to safety.
- Church members who tried to organize neighborhood safety plans and lead families to safety on foot were threatened or marginalized...
- 150 babies were lost for months as they were placed in the arms of strangers to save them



What could have been done?

To prevent the distress of losing a child, or for a child, the loss of family care

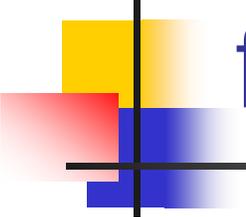
- Human rights standards demand that families be assisted together, supporting vulnerable caregivers along the way to safety
- Community organizations can be facilitated to organize and lead the evacuation of their members
- Law enforcement and all others (teenaged volunteers, anyone who is able) can help parents identify babies by an article of clothing or an identifying tag...



The key components of the guidelines

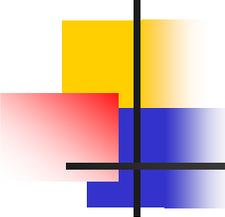
The guidelines identify:

- community mobilization and participation as the core of mental health and psychosocial support,
- emphasize the promotion of and compliance with human rights standards.



What do the guidelines call for?

- community ownership and control of emergency response in all sectors
- establishment of participatory monitoring and evaluation systems to insure that this control is operationalized
- social and cultural norms to be considered in every aspect of humanitarian action from food and nutrition support, to the provision of shelter, water and sanitation
- culturally appropriate specialized care to insure that people suffering from severe mental illness and neurological impairment have clinically sound and culturally appropriate care



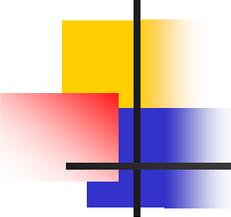
Staying sane in emergencies: What people need:

To keep their families together

Access to clear information about the
emergency if it is known

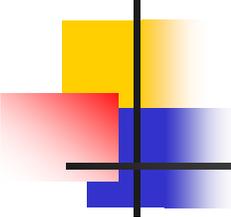
Access to clear information about and safe
central locations to obtain

- Safe water
- Sanitary facilities
- Food
- Emergency health care
- Shelter



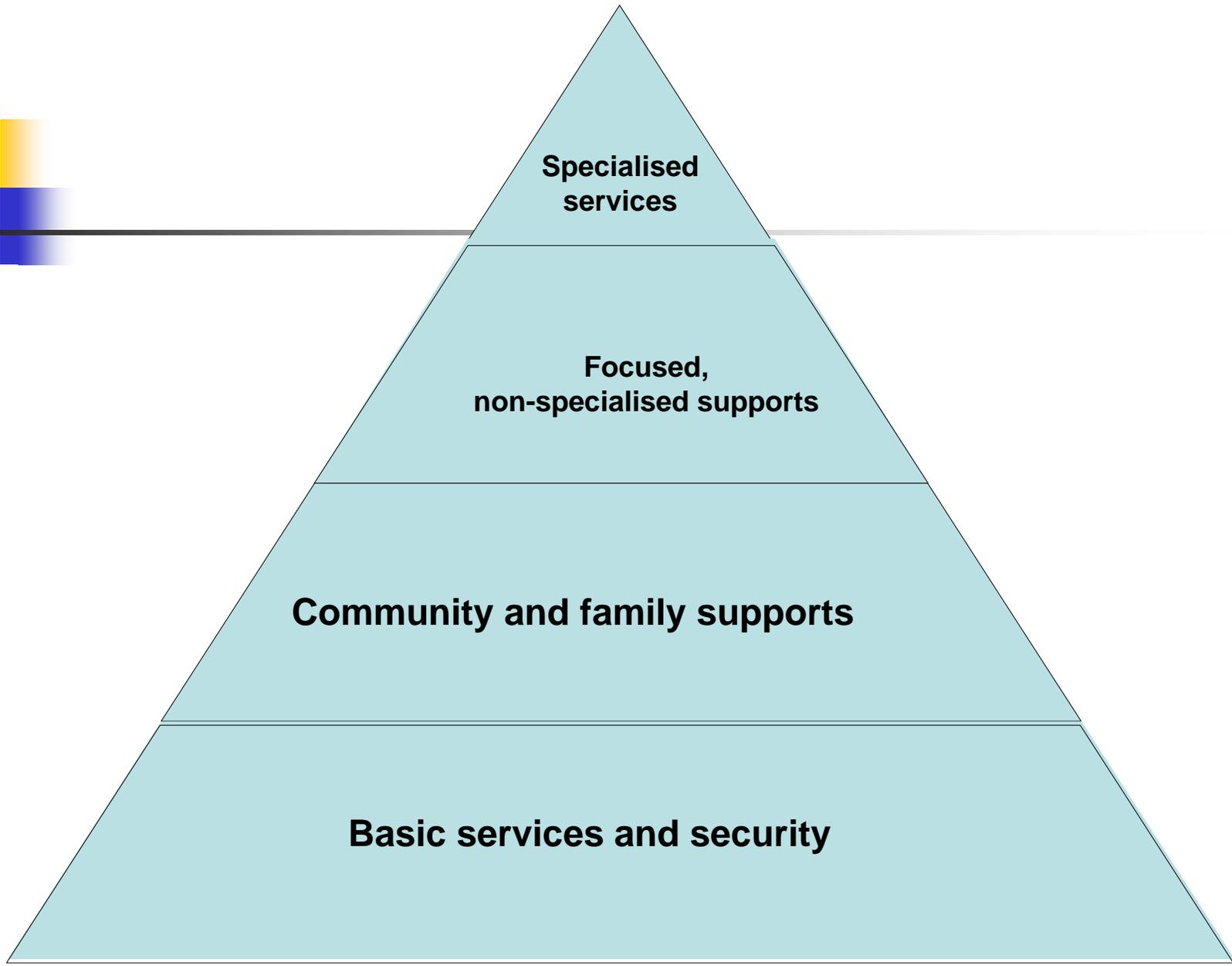
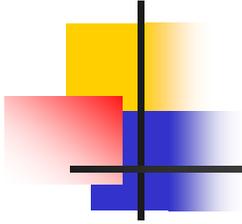
Staying sane in emergencies: What people need:

- Protection from danger
- Sound and sustainable care for the mentally ill, the aged, and the physically disabled
- Opportunities to participate in creating solutions
- Advocacy for their human rights, especially in man made emergencies
- Supports that help ministries and duty bearers to strengthen and cope up



Hierarchy of Services

- A hierarchy of services may not be a hierarchy of needs
- Instead, each level of service can assist in restoring psychosocial wellbeing whilst insuring that people get what they need

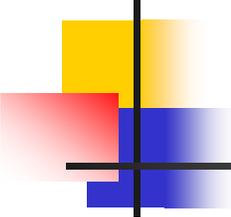


**Specialised
services**

**Focused,
non-specialised supports**

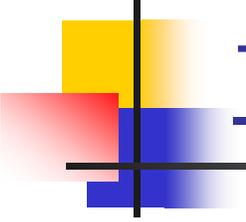
Community and family supports

Basic services and security



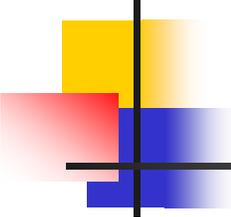
An example of good practice

- The design of sites and shelters often cause distress owing to over-crowding, lack of privacy, and lack of safety at latrines
- Key Actions:
 - organize shelters in ways that promote privacy and reduce overcrowding
 - provide adequate lighting around lockable sanitation facilities



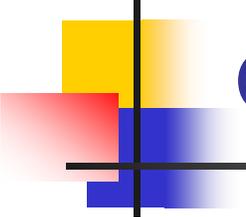
What are the key features of the guidelines?

- The guidelines consist of 25 points in a poster, accompanied by 25 action sheets that operationalize the implementation, a short “Do No Harm” slide show that targets harmful practices and offers the alternative of beneficial ones and a short field version
- They are all available in 6 languages with more coming....



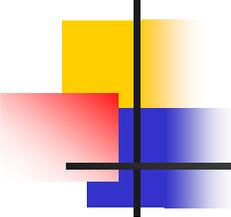
What are the implications for Social Work ?

- The guidelines suggest that community and agency practice should take the lead in empowering people to help themselves in time of crisis, thereby promoting resilience and minimizing the accumulation of harmful experiences that create risk.
- They call for social work practice, values and ethics to be at the forefront of emergency action.



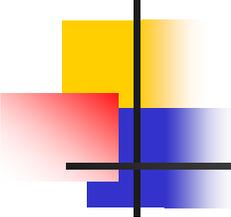
What is the role for social work educators and academics?

- The question of whether the guidelines are in fact in line with social work values, ethics and best practice research remains to be studied.
- It is important that social work itself not be imported, but be defined by the prevailing standards of each country



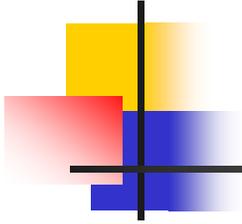
Some questions for Social Work research

- What pedagogical strategies meet the needs of social workers who practice in emergency settings?
- How do we insure that members of and institutions in communities in crisis take the lead in practice and its evaluation?
- How can we promote the engagement of community members in participatory monitoring and evaluation as well as research so that they emerge as lead actors in their own behalf?



Discussion question

- Are universal standards helpful in promoting a human rights perspective in emergency programming?
- How can social work emerge as the lead discipline in situations where it is our knowledge and experience that is being put forward as critical to improving practice?



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Child survivors in Galle, Sri Lanka

