



National Voluntary Organizations Active in Disaster

COOPERATION | COMMUNICATION | COORDINATION | COLLABORATION

Quick Reference Guide: National VOAD Emotional and Spiritual Care Committee's *Disaster Emotional Care Guidelines*

INTRODUCTION TO THE QUICK REFERENCE GUIDE:

This *Quick Reference* includes a summary of the five sections of the National VOAD *Disaster Emotional Care Guidelines* (Sections One through Four plus Appendices). The document is intended to serve as a set of common core guidelines for National VOAD member organizations that currently have or that are interested in developing a disaster emotional care component to their overall service delivery, as well as a resource for disaster partners.

The *Disaster Emotional Care Guidelines* can be utilized for the following purposes:

- To provide guidance for organizations on the development, implementation, and maintenance of disaster emotional care services across the disaster cycle
- To develop trainings for disaster emotional care providers
- To promote disaster emotional care services among emergency managers and other disaster partners, as well as within local communities
- To support inter-agency and inter-disciplinary disaster emotional care efforts in the spirit of National VOAD's "4 Cs" of cooperation, communication, coordination, and collaboration.

National VOAD Committees produce various kinds of documents:

- Points of Consensus (POC) are minimal standards, ethical principles or operational principles specific to a relevant topic of the Committee. National VOAD member organizations are required to agree to abide by approved Points of Consensus. The National VOAD *Disaster Emotional Care Points of Consensus* were ratified by the NVOAD membership in 2015.
- Guidelines typically relate closely to an approved POC document and represent expanded operational, behavioral and/or ethical recommendations from the Committee. National VOAD member organizations are not required to comply with Guidelines as they are with the POCs. The *Disaster Emotional Care Guidelines* were approved by the NVOAD Emotional and Spiritual Care Committee in May 2019 and re-approved with minor revisions in February 2020.

SECTION ONE: Background, Purpose and Scope

SECTION SUMMARY:

The National VOAD *Disaster Emotional Care (DEC) Guidelines* are intended to serve as a set of common core guidelines for National VOAD member organizations that currently have or that are interested in developing a disaster emotional care component to their overall service delivery. The disaster emotional care guidelines are based on the *Disaster Emotional Care Points of Consensus* (ratified in 2015). The guidelines serve as a reference and resource for all National VOAD member organizations, state and territory VOAD member organizations, and other partners engaged in disaster preparedness, response, and recovery.

SECTION HIGHLIGHTS:

- The *Disaster Emotional Care Guidelines* are based on the *Disaster Emotional Care Points of Consensus* and provided as a companion to the *Disaster Spiritual Care Guidelines*. These documents were developed under the direction of and approved by the National VOAD Emotional and Spiritual Care Committee.
- The *DEC Guidelines* may serve many purposes, including to orient and guide organizations on the development, implementation, and maintenance of quality disaster emotional care services, and to foster inter-agency and inter-disciplinary disaster emotional care efforts in the spirit of the National VOAD's "4 Cs" of cooperation, communication, coordination, and collaboration.
- Disaster emotional care (DEC) is an umbrella term that includes a wide range of services. Related but distinct concepts include emotional support, disaster mental health, disaster behavioral health, disaster emotional care for children and youth, and disaster spiritual care. These terms are defined in this section.
- All natural and human-caused disasters have the potential to create significant distress within impacted areas, including overwhelming coping abilities and disrupting support systems. This section includes a brief literature review to highlight the need for DEC services to mitigate and prevent serious psychological consequences of disaster, to offer appropriate referral for those needing higher levels of care, and to facilitate psychological recovery and a return to adaptive functioning.
- The potential scope of disaster emotional care programs includes training, assessment of community needs, provision of DEC during disaster response, recovery support, and resources to meet the needs of diverse populations.
- Benchmarks for excellence in providing disaster emotional care services include respect for the individuals being served, commitment to collaboration with disaster partners, compliance with ethical standards, and knowledge of appropriate and effective disaster emotional care interventions.
- The *DEC Guidelines* inform and encourage National VOAD member organizations which endeavor to provide quality disaster emotional care services for the sake of those whom they serve.

KEY CONCEPTS:

- National VOAD member organizations are committed to strive toward excellence throughout the disaster cycle in all areas of care, including disaster emotional care. The *Disaster Emotional Care Guidelines* are intended to assist organizations in implementing high quality disaster emotional care services to meet the needs of individuals, families, and communities impacted by disaster.
- Disaster emotional care (DEC) is an umbrella term for a wide range of services which provide comfort, support, and resources to individuals, families and communities throughout all phases of the disaster cycle.
- Disaster emotional care is intended to mitigate and prevent serious psychological consequences of disaster, to offer appropriate referral for those needing higher levels of care, and to promote recovery. DEC is grounded in concepts of resilience and behavioral health, informed by research and best practices, and committed to cultural competence.
- Disaster emotional care may be delivered by licensed mental health professionals, licensed behavioral health professionals, or paraprofessionals. DEC paraprofessionals may include peer support personnel trained to provide crisis intervention or psychological first aid, disaster spiritual care providers with specialized training in disaster emotional care, and crisis-trained and credentialed handlers of emotional support animals.

SECTION TWO: Essential Components of Disaster Emotional Care Programs

SECTION SUMMARY:

This section provides suggested guidelines to assist organizations in identifying, recruiting, and training disaster emotional care providers. It includes specific discussion of qualifications, experience, competencies, and accountability structures for the delivery of appropriate and effective disaster emotional care. Guidance is provided for organizations to fulfill their obligation to help emotional care providers maintain their own health and wellbeing before, during and after deployment.

This section also includes a discussion of the ethical underpinnings of disaster emotional care. The section concludes with a comprehensive description of the types of emotional care activities appropriate for each phase of disaster.

SECTION HIGHLIGHTS:

- The subsection on developing a disaster emotional care (DEC) program contains information to help organizations choose a staffing strategy, select eligibility requirements, identify roles and competencies, and train DEC providers.
- Other subsections present models for recruiting and staffing DEC programs and offer guidance for deploying and supporting staff and volunteers.

- The subsection on ethical foundations of disaster emotional care lists important ethical principles and focuses in-depth on accountability and responsibility, informed consent, confidentiality, and cultural awareness.
- A subsection on disaster emotional care interventions includes descriptions of emotional care activities across the disaster cycle. These include preparedness, assessment, psychosocial support (e.g., Psychological First Aid), early psychological intervention (e.g., crisis intervention, critical incident stress management), and recovery activities.
- Tables in this section:
 - The Strengths and Weaknesses of Paid and Volunteer Workforces
 - Examples of Eligibility Criteria
 - Competency Categories
 - Disaster Emotional Care Provider Level and Knowledge, Skills, and Attributes
 - Deployment Options and Considerations

KEY CONCEPTS:

- Disaster emotional care workers respond to the psychosocial and emotional needs of people affected by disaster. This includes members of the affected community as well as other disaster responders experiencing the stress of disaster response.
- Disaster emotional care services supplement, but do not supplant existing community mental health services.
- Different organizations rely on different staffing strategies during the disaster response, based on their size, structure and service delivery model. Eligibility criteria for disaster emotional care providers can cover a vast range of educational and professional requirements, from requiring workers to have independent mental health licensure to anyone who completes agency-specific training in a specific subset of disaster emotional care activities.
- Organizations should develop a leadership structure within their disaster emotional care workforce to ensure ethical, quality services and appropriate supervision for workers. Organizational leaders should furnish appropriate support during and after deployment.
- Organizations bear the responsibility for assuring that disaster emotional care providers are trained in the ethical standards and interventions employed in disaster emotional care across the disaster continuum.
- Organizations should consider their capacity to utilize their disaster emotional care workforce on disaster responses. Many organizations only have the capacity to support local or regional response and recovery efforts while others may be able to deploy their providers outside of their region to support a national disaster.
- All disaster emotional care providers are responsible for providing quality care, following designated protocols, taking care of themselves, and supporting their colleagues.

SECTION THREE: Disaster Emotional Care for Diverse Populations

SECTION SUMMARY:

This section provides an overview of disaster emotional care considerations for diverse populations with increased vulnerabilities that need to be addressed across the disaster cycle. Each sub-section includes a description of the population presented, challenges facing this population in a disaster setting, barriers that affect access to care, strategies and recommendations for overcoming those challenges and what is required to provide excellent disaster emotional care. The emotional care themes discussed include protection and safety, hospitality and comfort, belonging and connectedness, understanding and listening, and empowerment.

This section focuses on the following populations: children and youth; older adults; people with access and functional needs including disabilities; and people from diverse cultures. Although this section does not address all forms of diversity, it provides a framework for considering how disaster emotional care is provided across a spectrum of unique needs.

SECTION HIGHLIGHTS:

- The guidelines and recommendations for children and youth specifically address child safety, unaccompanied minors, training requirements for DEC providers, and referrals for more intensive care. This sub-section includes a table addressing common emotional needs of children and how those needs can be met by supportive adults.
- The sub-section on disaster emotional care for older adults includes guidance on preparedness and disaster planning for older adults, factors affecting emotional wellbeing during disaster response, recommendations for DEC provider training, and referrals for more intensive care, including bereavement care. Also discussed are common challenges of providing disaster emotional care to older adults and suggested strategies that may be helpful in overcoming these challenges.
- The sub-section on disaster emotional care for persons with access and functional needs, including disabilities, discusses emotional and physical safety and provides training recommendations for care providers. This sub-section includes a list of common challenges for providing disaster emotional care and suggests strategies for supporting persons with disabilities, access or functional needs.
- The sub-section on cultural diversity has recommendations for providing disaster emotional care (DEC) to culturally diverse individuals, families, and communities throughout the disaster cycle. Topics addressed include cultural competence, considerations in making referrals, common challenges encountered by diverse cultural groups in disaster, and care strategies for addressing those challenges.
- Tables in this section:
 - Disaster Emotional Care (DEC) for Children and Youth
 - Guiding Principles for Cultural Competence and DEC

KEY CONCEPTS:

- The many challenges of working with diverse populations, as well as ethical considerations, make it important to have consistent training and preparation of DEC providers so that they will respond effectively and do no harm to those experiencing the trauma of disaster.
- Disaster emotional care providers need appropriate preparation and training to provide care for the emotional needs of children following disaster and to support resilience in children, as well as to identify children who require more advanced care.

- Given the vulnerabilities and moment-to-moment needs of children and families following disaster, there is an intensity about the work that can be challenging for even experienced DEC providers. Particular attention needs to be paid to self-care and team care.
- Disaster emotional care providers who work with older adults will be more effective if they have had specific preparation and training to provide care for the emotional needs in this vulnerable population, as well as the ability to identify those who require more advanced care. DEC providers need to be attentive to the needs of caregivers of older adults as well.
- It is important to recognize that people living with disabilities are a part of every demographic group. A condition does not need to be severe or permanent to be a disability, and some disabilities are not easily recognized.
- Respecting the independence and autonomy of a person with a disability or access and functional need is paramount.
- Cultural diversity may include but is not limited to race, color, ethnicity, national origin, immigration or citizenship status, veteran status, religious and spiritual beliefs, sex, gender identity, sexual orientation, age, or different physical and sensory abilities.
- It is vital for VOAD member organizations to integrate cultural awareness, sensitivity, and competency throughout the organization's structure and services. Cultural competency is not an end point, but an ongoing process.

SECTION FOUR: Relationships and Integration of Emotional Care across the Disaster Cycle

SECTION SUMMARY:

Strong relationships among disaster care providers serve to maximize positive and constructive outcomes, while minimizing the risks for tension, miscommunication and other common pitfalls that can occur through any type of disaster response, especially when there are many players in the field. This section describes foundations for effective working relationships between disaster emotional care providers and other groups with which they often work, including disaster spiritual care providers, disaster emotional care providers from various jurisdictions, and state and territory VOADs. Benefits of forming alliances, challenges to collaboration, and recommendations for building strong working relationships are discussed. The section concludes with a list of opportunities for integrating disaster emotional care into each phase of the disaster cycle.

SECTION HIGHLIGHTS:

- The sub-section on DEC-DSC relationships includes discussion of the advantages of collaboration (force multiplication, holistic care, complementary services, and cross-referrals) as well as challenges to collaboration (mistrust, historical tensions, misunderstandings, and specialized training). The sub-section concludes with recommendations for building strong DEC-DSC relationships.
- The sub-section on relationships with community emotional care providers begins with a list of types of local providers, followed by a discussion of benefits of collaboration. It identifies key state and local DEC stakeholders and presents models for building working relationships. The sub-section concludes with recommendations for collaboration between National VOAD member organizations and local DEC providers across the disaster cycle.

- The sub-section on VOAD partnerships identifies benefits of state or territory VOAD participation and steps in forming an Emotional and Spiritual Care Committee (ESCC). This sub-section describes activities of the ESCC (promoting compliance with *Points of Consensus*, planning, capacity-building, and response coordination) and concludes with a discussion of potential challenges and suggestions for overcoming challenges to collaborative relationships.
- The final part of this section focuses on recommendations for intentionally integrating disaster emotional care into disaster preparedness, response, and recovery efforts.
- Tables in this section:
 - Comparison Between Disaster Emotional Care and Disaster Spiritual Care
 - Key Disaster Emotional Care Stakeholders
 - Collaboration Across the Disaster Cycle
 - Challenges and Suggestions for Improving Local Collaboration

KEY CONCEPTS:

- Disaster emotional care and disaster spiritual care share some similarities but are distinct healing modalities. Emotional and spiritual care providers contribute to the wellbeing of disaster survivors and responders in unique and valuable ways.
- Local emotional care providers are key disaster partners because they know their communities, have staff and volunteers from the diverse populations they serve, and are aware of unmet needs and other challenges confronting disaster-affected communities.
- In order to effectively collaborate with local and state DEC providers, it's important for National VOAD member organizations to understand who the typical key players are at each level, and their typical roles or functions in disaster emotional care.
- Each state and territory VOAD needs an Emotional and Spiritual Care Committee (ESCC) to facilitate cooperation, communication, coordination, and collaboration among providers of disaster emotional and spiritual care and with the VOAD membership at large.
- Having a successful state or territory VOAD Emotional and Spiritual Care Committee requires effort and intentional planning.
- Disaster emotional care should be integrated into all phases of the disaster cycle.

APPENDICES:

Appendix A: Checklist for Collaboration among Disaster Emotional Care Providers

This checklist summarizes strategies for fostering collaboration within the Voluntary Organizations Active in Disaster (VOAD) movement among local, state, territorial, and national disaster emotional care providers, throughout the disaster cycle.

Appendix B: Fact Sheet for Emergency Management on Disaster Emotional Care

This document provides suggestions for emergency managers when considering the behavioral health implications of a disaster. It includes actions which emergency managers can take to engage disaster emotional care providers during pre-planning, during an event, and after an event.

Appendix C: Disaster Emotional Care Points of Consensus

A copy of the *Disaster Emotional Care Points of Consensus*, ratified by the National VOAD membership in 2015, on which the *Disaster Emotional Care Guidelines* are based.

Appendix D: Resources

This appendix includes links to key National VOAD resources, including Emotional and Spiritual Care Committee guidance documents for disaster emotional and spiritual care, and links to FEMA's national disaster response and recovery frameworks.

Appendix E: Glossary and Acronyms

This appendix includes an extensive glossary of terms related to disaster emotional care and a list of common acronyms.