

Action Sheet Nr. 9: Key Principles in MHPSS¹ Crisis Management

Area

All event types, all target groups, all phases

Key principles

Principle 1: There is effective command, control and coordination before, during and following a disaster or major incident

Principle 2: Appoint psychosocial and mental health trained advisers at the strategic, tactical and operational levels of command to assure full integration of the services that respond to communities' and people's psychosocial and mental health needs within disaster and major incident plans.

Principle 3: The responsible authorities, incident response commanders, service managers and professional practitioners adopt an ethical framework for planning and delivering services.

Principle 4: The responsible authorities, incident response commanders, service managers and professional practitioners adopt a framework for good decision-making.

Principle 5: Commanders should ensure that appropriate services are made available in each phase of response and recovery and this requires services that offer

- immediate humanitarian aid and welfare services for everyone who needs them;
- service responses that recognise that the intensity and duration of people's exposure to stressors, certain prior experiences, and the availability or otherwise of social support are related to their likelihood of developing more serious psychosocial problems or mental disorders;
- long-term and persistent follow-through; and
- care for responders.

Principle 6: The responsible authorities, incident response commanders, service managers and professional practitioners adopt pre-planned frameworks for:

- corporate governance; and
- clinical governance.

Principle 7: Execution of psychosocial and mental health care plans depends on effectively managing and caring for staff.

Staff and agencies should be provided with:

- clear plans;
- statements of the expectations that are likely to fall on them;
- opportunities for training and rehearsal; and
- increased supervision and social support.

Principle 8: Roles, standards and support

Staff and volunteers should have:

- clear roles and responsibilities that are agreed in advance;
- professional standards and expectations that are clear, practical and realistic;
- effective leadership and access to the support of colleagues.

BASED ON:

¹ Mental health and psychosocial support

¹NATO-TENTS guidance: Williams, R., Bisson, J., Ajdukovic, D., Kemp, V., Olf, M., Alexander, D., Hacker Hughes, J. & Bevan, P. (2009). Guidance for responding to the psychosocial and mental health needs of people affected by disasters or major incidents, **p.16-17** Available at http://www.coe.int/t/dg4/majorhazards/ressources/virtuallibrary/materials/uk/Principles_for_Disaster_and_Major_Incident_Psychosocial_Care_Final.pdf

²Boin, A. & t'Hart, P. (2007). The Crisis Approach. In H. Rodriguez, E. Quarantelli & R. Dynes (Eds.) Handbook of disaster research (pp. 42-52). NY: Springer. Available at <http://link.springer.com/content/pdf/bfm%3A978-0-387-32353-4%2F1.pdf>

Additional resources

Boin, A., t'Hart, P., Stern, E. & Sundelius, B. (2005). The Politics of Crisis Management: Public Leadership under Pressure. Cambridge: Cambridge University Press.

Boin, A. (Ed.) (2008). Crisis Management: Volume III. London: Sage Available at <http://www.sirpa.fudan.edu.cn/picture/article/56/1d14cd6e-ceb6-463f-9e2d-898499a93625/a89b9cdc-4ba3-462f-af57-bdaf36e913e6.pdf>

Rodriguez, H., Quarantelli, E. & Dynes, R. (Eds.) (2007). Handbook of disaster research. NY: Springer. Available at <http://books.google.at/books?hl=de&lr=&id=zbqm1SRClU4C&oi=fnd&pg=PR7&dq=Handbook+of+disaster+research&ots=ulot6lspaK&sig=H0hB5PEdG2mZ3BSW6K00MnaU8d0#v=onepage&q=Handbook%20of%20disaster%20research&f=false>

Svedin, L. (Ed.) (2011). Ethics and Crisis Management. Charlotte: Information Age.

Tools

Philippine Department of Health - Health Emergency Management Staff (DOH-HEMS) & World Health Organisation - Emergency and Humanitarian Action - Regional Office for the Western Pacific (WHO-WPRO) (2012). Pocket Emergency Tool. Available at <http://mhps.net/wp-content/uploads/group-documents/219/1384428965-pocketemergencytoolphilippinesdeptofhealth.pdf>

The European Network for Traumatic Stress (TENTS) (n.d.). Tents-E-Modules. Available at <https://www.estss.org/tents/e-module/>

Containing

- Planning, Preparation and Management (E-Module)
- General Components of Response, Specific Components of Response (E-Module).

Practice examples

Council of Europe / EFPA (2010). Lessons learned in psychosocial care after disasters. Available at http://www.recoveryplatform.org/assets/publication/Lessonslearned_psychosocial%20care%20EC_EN.pdf

International Federation of Red Cross and Red Crescent Societies (IFRC) (2001). Psychosocial Support: Best Practices from Red Cross Red Crescent Programs. Available at <http://helid.digicollection.org/en/d/Js2902e/>

OPSIC-Team (2014). Practice examples. Comprehensive Guideline OPSIC-Project - [Annex](#).

World Health Organisation (WHO) (2013). Building back better. Sustainable Mental Health Care after Emergencies. Available at http://www.who.int/mental_health/emergencies/building_back_better/en/

Containing:

- Part 2: Seizing opportunity in crisis: 10 case examples (p. 25)
- Part 3: Spreading opportunity in crisis: Lessons learnt and take-home messages (p. 95).