



SECTION SEVEN

National VOAD

**DISASTER SPIRITUAL CARE POINTS OF CONSENSUS,
DISASTER EMOTIONAL CARE POINTS OF CONSENSUS,
AND DISASTER SPIRITUAL CARE GUIDELINES**

SEVEN



National Voluntary Organizations Active in Disaster Points of Consensus

DISASTER SPIRITUAL CARE POINTS OF CONSENSUS

IN 2006 THE NATIONAL VOLUNTARY ORGANIZATIONS ACTIVE IN DISASTER'S Emotional and Spiritual Care Committee published *Light Our Way* to inform, encourage and affirm those who respond to disasters and to encourage standards insuring those affected by disaster receive appropriate and respectful spiritual care services. As a natural next step following the publication of *Light Our Way* and in the spirit of the NVOAD “Four C’s” (cooperation, communication, coordination and collaboration), the Emotional and Spiritual Care Committee then began working to define more specific standards for disaster spiritual care providers. The following ten “points of consensus” set a foundation for that continuing work.

1. Basic Concepts of Disaster Spiritual Care¹

Spirituality is an essential part of humanity. Disaster significantly disrupts people's spiritual lives. Nurturing people's spiritual needs contributes to holistic healing. Every person can benefit from spiritual care in time of disaster.

2. Types of Disaster Spiritual Care²

Spiritual care in disaster includes many kinds of caring gestures. Spiritual care providers are from diverse backgrounds. Adherence to common standards and principles in spiritual care ensures that this service is delivered and received appropriately.

3. Local Community Resources

As an integral part of the pre-disaster community, local spiritual care providers and communities of faith are primary resources for post-disaster spiritual care. Because local communities of faith are uniquely equipped to provide healing care, any spiritual care services entering from outside of the community support but do not substitute for local efforts. The principles of the National VOAD—cooperation, coordination, communication and collaboration—are essential to the delivery of disaster spiritual care.



4. Disaster Emotional Care and its Relationship to Disaster Spiritual Care³

Spiritual care providers partner with mental health professionals in caring for communities in disaster. Spiritual and emotional care share some similarities but are distinct healing modalities. Spiritual care providers can be an important asset in referring individuals to receive care for their mental health and vice versa.

5. Disaster Spiritual Care in Response and Recovery⁴

Spiritual care has an important role in all phases of a disaster, including short-term response through long term recovery. Assessing and providing for the spiritual needs of individuals, families, and communities can kindle important capacities of hope and resilience. Specific strategies for spiritual care during the various phases can bolster these strengths. Ratified by Full Membership, 2009

6. Disaster Emotional and Spiritual Care for the Caregiver

Providing spiritual care in disaster can be an overwhelming experience. The burdens of caring for others in this context can lead to compassion fatigue. Understanding important strategies for self-care is essential for spiritual care providers. Disaster response agencies have a responsibility to model healthy work and life habits to care for their own staff in time of disaster.⁵ Post-care processes for spiritual and emotional care providers are essential.

7. Planning, Preparedness, Training and Mitigation as Spiritual Care Components⁶

Faith community leaders have an important role in planning and mitigation efforts. By preparing their congregations and themselves for disaster they contribute toward building resilient communities. Training for the role of disaster spiritual care provider is essential before disaster strikes.



8. Disaster Spiritual Care in Diversity

Respect is foundational to disaster spiritual care. Spiritual care providers demonstrate respect for diverse cultural and religious values by recognizing the right of each faith group and individual to hold to their existing values and traditions. Spiritual care providers:

- refrain from manipulation, disrespect or exploitation of those impacted by disaster and trauma.
- respect the freedom from unwanted gifts of religious literature or symbols, evangelistic and sermonizing speech, and/or forced acceptance of specific moral values and traditions.⁷
- respect diversity and differences, including but not limited to culture, gender, age, sexual orientation, spiritual/religious practices and disability.

9. Disaster, Trauma and Vulnerability

People impacted by disaster and trauma are vulnerable. There is an imbalance of power between disaster responders and those receiving care.

To avoid exploiting that imbalance, spiritual care providers refrain from using their position, influence, knowledge or professional affiliation for unfair advantage or for personal, organizational or agency gain.

Disaster response will not be used to further a particular political or religious perspective or cause—response will be carried out according to the need of individuals, families and communities. The promise, delivery, or distribution of assistance will not be tied to the embracing or acceptance of a particular political or religious creed.⁸



10. Ethics and Standards of Care

NVOAD members affirm the importance of cooperative standards of care and agreed ethics. Adherence to common standards and principles in spiritual care ensures that this service is delivered and received appropriately. Minimally, any guidelines developed for spiritual care in times of disaster should clearly articulate the above consensus points in addition to the following:

- Standards for personal and professional integrity
- Accountability structures regarding the behavior of individuals and groups
- Concern for honoring confidentiality
- Description of professional boundaries that guarantee safety of clients* including standards regarding interaction with children, youth and vulnerable adults
- Policies regarding criminal background checks for service providers
- Mechanisms for ensuring that caregivers function at levels appropriate to their training and educational backgrounds*
- Strong adherence to standards rejecting violence against particular groups
- Policies when encountering persons needing referral to other agencies or services
- Guidelines regarding financial remuneration for services provided

¹ See *Light Our Way* pp. 52-54.

² Ibid.

³ Ibid.

⁴ Ibid.

⁵ Ibid.

⁶ Ibid.

⁷ Church World Service “Standard of Care for Disaster Spiritual Care Ministries”

⁸ Church World Service “Common Standards and Principles for Disaster Response”

* See *Light Our Way* p. 16



DISASTER EMOTIONAL CARE POINTS OF CONSENSUS

IN MAY 2005, THE EMOTIONAL AND SPIRITUAL CARE COMMITTEE of the National Voluntary Organizations Active in Disaster (National VOAD) approved points of consensus regarding provision of early psychological intervention for persons affected by disaster. The following statements about Early Psychological Intervention were included: Early Psychological Intervention is valued, has multiple components, requires specialized training to deliver, and represents one point of a continuum of emotional care. This Points of Consensus document was subsequently incorporated into guidelines for disaster emotional care by National VOAD member organizations.

In 2013, the National VOAD's Emotional and Spiritual Care Committee appointed a new subcommittee to write an updated list of agreed upon principles to guide both National VOAD organizations and community care providers to prepare for, respond to, and promote recovery from disaster. In the spirit of the National VOAD "Four C's" (cooperation, communication, coordination and collaboration), the new document expands the 2005 points of consensus for early psychological intervention, reflects current knowledge and ethical principles for disaster emotional care provision and replaces the previous document.

The following ten points of consensus are minimal standards, ethical or operational principles specific to Disaster Emotional Care. To continue as a member of National VOAD, organizations are required to agree to abide by approved Points of Consensus. This document was presented by the Disaster Emotional Care subcommittee to the National VOAD Emotional and Spiritual Care Committee in May 2014. Guidelines to outline the implementation of the principles contained in this document are under development.



1. Basic concepts of disaster emotional care

- a) Disaster emotional care is a valuable component of comprehensive disaster preparedness, response and recovery.
- b) Disaster emotional care promotes resilience, helps mitigate long and short-term psychological consequences of disaster, and facilitates recovery.
- c) Disaster emotional care includes a range of supportive actions grounded in concepts of resilience and behavioral health.
- d) Disaster emotional care activities are informed by relevant research and established best practices.
- e) Disaster emotional care is not psychotherapy, nor a substitute for psychotherapy. However, it is often the first step that could lead to professional counseling and psychotherapy.
- f) Disasters significantly affect everyone and their communities, including individual victims, family and social networks, rescue workers, health care providers, faith communities and spiritual care providers, vulnerable populations and impacted businesses.
- g) People impacted by disaster will experience a range of emotional responses, of varying intensity and duration.
- h) People's emotional responses to disaster are influenced by a variety of factors, including degree of exposure, individual resilience and recovery environment.
- i) Specialized training is necessary for effective disaster emotional care.

2. Types of disaster emotional care

Emotional care is provided across the disaster continuum from preparedness to response and recovery. Emotional care takes many forms, and emotional care providers are from diverse professional backgrounds. Accepted types of disaster emotional care include, but are not limited to:

- Preparedness activities
- Assessment and triage activities
- Psychosocial support activities
- Early psychological intervention activities
- Recovery activities



3. Capacity building, readiness and planning components of disaster emotional care

Capacity building involves identifying and recruiting appropriate disaster emotional care providers. In order to deliver effective disaster emotional care, it is essential that providers engage in training and exercises, and become affiliated with a disaster relief organization. Disaster emotional care providers have an important role in planning and mitigation efforts and contribute toward building resilient communities.

4. Local community resources

Local providers of emotional care are an integral part of their communities pre-disaster, and therefore are primary resources for also providing post-disaster emotional care services. Because local providers of emotional care are uniquely equipped to serve their communities, any emotional care services from outside the community support but do not substitute for local efforts. In this context, the principles of the VOAD movement—cooperation, communication, coordination, and collaboration—are essential to the delivery of emotional care.

5. Disaster emotional care and resilience

Resilience is defined as the strengths of an individual or community to respond well to adversities. Resilience can be both inborn and developed, and most people are inherently resilient. Research suggests that most people impacted by a disaster will return to pre-disaster levels of functioning and some people will grow as a result of the experience. Disaster emotional care providers should encourage survivors to recognize and strengthen their resilience as a part of disaster emotional care intervention.

6. Disaster emotional care in recovery

In order for communities to fully recover and integrate the disaster into their history, emotional care is essential as part of a program of services. Disaster emotional care providers work with state and local Recovery Committees to offer services related to the disaster, encourage programs aimed at strengthening community resilience, and facilitate counseling and supportive services for persons in need. Pre-existing community programs are the primary emotional care providers whose capacity to serve the community will be acknowledged, supported and strengthened.



7. Disaster emotional care for the caregiver

Providing emotional care in disaster can be an overwhelming experience. The burdens of caring for others in this context can lead to compassion fatigue. Understanding important strategies for self-care is essential for emotional care providers. Disaster response agencies have a responsibility to care for their own staff during all phases of disaster deployment and to model healthy work and life habits. Post-deployment support processes for emotional care providers are also essential.

8. Disaster emotional care and its relationship to disaster spiritual care⁹

Mental health professionals partner with spiritual care providers in caring for individuals and communities in disaster. Spiritual and emotional care share some similarities but are distinct healing modalities. Spiritual care providers can be an important asset in referring individuals to receive care for their mental health and vice versa.

9. Disaster emotional care and diversity

As a foundation of disaster emotional care, providers respect diversity among colleagues in emotional and spiritual care and within communities served, including but not limited to race, ethnicity, culture, gender, age, sexual orientation, spiritual/religious practices, socioeconomic status and disability. Disaster emotional care providers strive for cultural awareness and sensitivity, and adapt care strategies to address cultural differences in the individuals and communities they serve.

⁹ See *Light Our Way*, 2013, pp. 52-54.



10. Ethics and Standards of Care

National VOAD members affirm the importance of professional standards of care and the obligation to follow legal and ethical guidelines. Adherence to common standards and principles promotes the delivery of effective and appropriate disaster emotional care.

Disaster emotional care services should incorporate the principles of:

- Personal and professional integrity
- Accountability and responsibility
- Recognition of the boundaries of one's competence
- Respect for people's rights and dignity, including privacy and self-determination
- Promotion of safety and protection of people affected by disaster

