

The IASC Guidelines and the International Disaster Psychology Program at the University of Denver

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There is a growing recognition of the significant psychological and psychosocial damage caused by natural and manmade disasters. This phenomenon has increased the demand for trained professionals with the necessary skills to address these problems, in diverse populations around the world. The Masters of Arts International Disaster Psychology (MAIPD) programme in the Graduate School of Professional Psychology was developed in order to help to meet this increased demand for professionals, required to work in the field of disaster psychology and emergency management within the United States, and around the world. The Inter-Agency Standing Committee (IASC) Guidelines on Mental Health and Psychosocial Support in Emergency Settings (2007) are extensively utilised in this programme. The guidelines provide practical approaches for addressing psychosocial problems in (post)disaster settings, and provide a framework for developing plans and intervention strategies. This article examines the use of the IASC guidelines in an academic setting, and discusses a case example of how the IASC guidelines were utilised by MAIPD students working in Panama. This critical evaluation aims to provide practical information in order to assist faculty, students and practitioners preparing to work in (post)disaster settings.

Keywords: emergency settings, IASC guidelines, international disaster psychology, mental health, psychosocial wellbeing

The *Inter-Agency Standing Committee (IASC) Guidelines on Mental Health and Psychosocial Support in Emergency Settings* were released in 2007 (Wessells, & van Ommeren, 2008). Since then, numerous journal articles have discussed the utility of these guidelines, recommendations for improvement, and the results of the use of the guidelines in the field. *Intervention* (Vol. 6, 3/4), were devoted entirely to various perspectives on the use of these guidelines in the field. These issues included reports on the experience of utilising the *IASC Guidelines* in various locations and situations, including: Timor-Leste, the Eastern Mediterranean, Sri Lanka, Jordan, Kenya, and with Burundian refugees in Tanzania (Horn & Strang, 2008; Krishnakumar, Sivayokan & Somasundaram, 2008; Murthy, 2008; Nyamukeba & Ndayisaba, 2008; Silove & Rees, 2008). These tangible field experiences are extremely important in order to evaluate the effectiveness of the guidelines. However, there has been no published discussion on the use of the guidelines within academic settings. This article, therefore, will examine the utility of the guidelines within academic coursework and fieldwork for students in the *International Disaster Psychology (IDP)* program in the Graduate School of Professional Psychology at the University of Denver, USA.

The MAIDP program at the University of Denver

The *IASC Guidelines* have been part of the coursework at the University of Denver for the last three years. The *Master of Arts in International Disaster Psychology* (MAIDP) program is in its sixth year at the University of Denver, Graduate School of Professional Psychology. It was developed to address the need for trained professionals to be equipped with the skills necessary to provide effective mental health and psychosocial services to disaster affected individuals and communities around the world. The programme emphasises a combination of academic and practical field experiences. Local and international practicum training provides experience in a variety of settings, and prepares graduates to engage in direct service, disaster response, staff training, programme development and evaluation, and policymaking.

The MAIDP is the first programme of its kind in a major United States university. It has won two national awards for *'Innovation in Graduate Education'*, one from the American Psychological Association and another from the National Council of School and Programs of Professional Psychology.

The required seminar and lecture courses cover the major content areas, including: international disaster psychology (ethics, trauma and life-span development); cross-cultural foundations of clinical psychology; international mental health; disaster mental health; gender-based violence; trauma treatment and interventions; clinical models of psychotherapeutic intervention; programme evaluation and research; global health; crisis intervention; and a series of three foundation courses in international disaster psychology (IDP1, IDP2, and IDP3). These courses are designed to give the students the basic principles and guidelines for working in

international disaster settings. IDP1 focuses on complex humanitarian disasters, utilising a multidisciplinary approach to examine psychosocial theories and practice. IDP2 includes a focus on the *IASC Guidelines* (since 2008), and IDP3 prepares students for an international placement in the summer quarter, between the first and the second year.

Practical application

The comprehensive *IASC Guidelines* are utilised in several ways in the coursework:

1. As a framework for organising intervention strategies: The class focuses on preparing students to organise and provide intervention strategies within disaster settings. The IASC domains represent one methodology for conceptualising intervention strategies. The comprehensive outline of the 11 domains, within this methodology, helps to reassure students that they are addressing all necessary interventions. Furthermore, the guidelines encourage students to examine issues that are often missed when planning mental health interventions. For example, distribution of food and water in a (post)disaster situation is not always considered within the planning of appropriate mental health interventions. However, the guidelines clearly spell out the importance of distributing these essentials in a manner that is respectful of local values and cultures. Some mechanism must ensure that everyone has access to life-sustaining commodities, and the existing power structure might make reaching all parties difficult, as for example, in a culture where there are adversarial ethnic groups, distribution of goods through one or the other group could be problematic.

Also, the values identified in the *IASC Guidelines* (human rights, participation, do no harm, building on available resources, integrated support systems, and multi-layered supports) are all basic principles that should guide the activities within each of the domains. The combination of values and domains therefore, provides a strong basis for organising intervention strategies.

2. Framework for organising plans (class assignment): One of the students' course assignments is a completed plan for a (post)disaster situation in a low or middle income country. While not a requirement, students often use the domains from the *IASC Guidelines* as a framework. In this way they are assured of developing a comprehensive plan. Students must also address the three levels of responses identified in the *IASC Guidelines*: emergency preparedness, minimum response, and comprehensive response. In this way, students are able to address disaster response, the immediate needs inherent in the minimum response, and longer term needs.
3. Framework for international practicum assignment: The *IASC Guidelines* are also utilised by the individual student in his or her international placement, as a guide for developing disaster response plans during the international practicum work. For example, during the summer of 2009 students who were placed with the Pan American Health Organization (PAHO) office in Panama used the *IASC Guidelines* as frameworks for several projects. The guidelines were used in combination with other World Health Organization (WHO) documents, in order to provide a framework for work with the variety of countries and cultures in Central America. More specifically, a

project funded by *Agencia Espanola de Cooperación Internacional para el Desarrollo*, and developed by PAHO, called for the development of an aggregate plan for a psychosocial response to disasters in some of the Central American Countries (Panama, Ecuador, Honduras, Guatemala, Costa Rica, and the Dominican Republic). The set of minimum standards provided in the guidelines facilitated the allocation of resources amongst the countries involved in this project. Also, communication between these countries was facilitated through the use of a computer system that allowed all parties involved to participate, and provide feedback, concerning the disaster response guide. The *IASC Guidelines* provided both a common language and universal goals that were meaningful to all participants. Consequently, the guidelines helped to reduce the time necessary for building the basis for group consensus; by reaching agreement on common terms and overall direction. Also, the MAIDP coursework and the students' knowledge of the *IASC Guidelines* helped them to identify some significant gaps in the first draft of their brief document. These included addressing the lack of coordination of a universal, organised response among agencies, protection of human rights, as well as utilisation of local community resources. Subsequent drafts, using the guidelines, were able to correct these oversights.

In addition to policy work, the *IASC Guidelines* provided a framework for structuring work in the field. In coordination with the Panamanian PAHO mental health team, the students were asked to design and deliver a presentation on mental health issues after disasters to the indigenous Ngöbe Buglé

region. The students utilised their knowledge of the culture and the *IASC Guidelines* to design culturally sensitive interventions for those vulnerable populations. They presented basic proposals, which ultimately led to a stimulating conversation around traditional and modern views of mental health. For example, the way in which alcoholism and violence is dealt with in the community was discussed. The women of the Ngöbe Buglé felt disempowered by the traditional view that family matters concerning mental health should be kept extremely private. They further stated that they lacked both resources and education concerning these issues, but wanted to connect with PAHO mental health leaders to empower themselves. Leaders from the Ngöbe Buglé region and Panamanian health professionals were able to share and exchange information, while reducing stigma. This will undoubtedly lead to more efficient and appropriate aid in the future. These types of interactions are essential for the Ngöbe Buglé, as both domestic violence and substance abuse rates have been known to increase after a disaster (IASC, 2007). Overall, the *IASC Guidelines* have helped to structure the presentation, and ultimately led to a successful exchange of information between the groups.

Positive and negative experiences using the *IASC guidelines* in an academic setting

Clearly, one of the major advantages of using the guidelines as a teaching tool is that they provide an immediate and concrete reference point for students. The students can organise their thinking, presentations, and academic papers around these guidelines. Since the domains are intended to be comprehensive, this approach ensures that the

students will benefit from the collective wisdom of the group that developed them. There are also possible negative consequences to using this approach. One of the downsides is that the students may depend too heavily on the guidelines, and may overemphasise something in that may be inappropriate for a particular disaster, or geographic region. For example, in the (post) 9–11 situation, the provision of food and water outside ground zero was not as critical as attending to the psychosocial issues affecting various geographic and cultural groups impacted by the tragedy. Furthermore, the guidelines (intentionally) do not include timelines for immediate and comprehensive responses. It might be useful to include some specific time ranges in future editions. Inexperienced responders may wait too long to move to a comprehensive response, simply because some parts of the population are still waiting for immediate interventions.

Finally, the students in Panama found that they had to be the interpreters and defenders of the guidelines. Although the Spanish version of the *IASC guidelines* was used in Panama, the students still had to explain them. They concluded that the *IASC guidelines* were not easily understood by lay people (partly because of the terminology used) and that this limitation has presented problems in the field. Dr. Aparicio, sub-regional consultant in mental health for Central America, Hispanic Caribbean and Mexico, PAHO/WHO reports that a shorter, layperson's version was used in Columbia and Peru. In other areas, as a consequence, all communication had to be filtered through the students and this was simply not practical in some situations. Also, the student placements were only eight weeks long and therefore, much work was left to be completed after the students departed.

In summary, the *IASC Guidelines* have proven to be very useful in the University of Denver International Disaster Psychology program. They help students organise disaster plans, interventions, and strategies. Although the guidelines have some limitations in the training program, the benefits far outweigh the limitations.

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