SAMETS
SOCIAL AFFAIRS management
IN THE EMERGENCY temporary SHELTER

GUIDELINE

Social Affairs Management
in the Emergency Temporary Shelter
SAMETS

With contributions from:

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SAMETS – Social Affairs Management in the Emergency Temporary Shelter

SAMETS is a project that comes from a magnificent opportunity and synergy between different members of the European network of Samaritan International that combines voluntary European performing activities in the social health and civil protection. Right from the exchange and "contamination" between different experiences gave rise to the idea that led to the creation of a training program that will cascade to deal with situations in which the volunteers will be, and that unfortunately given the recent emergencies had already deal . In this sense ANPAS could just bring the lessons learned from the management of the fields resulting from the earthquake in Abruzzo and Emilia Romagna. The sensitivity to the most vulnerable is a peculiarity of the history of the associations involved as the knowledge that they must proceed with the utmost competence in every possible occasion. This Guidelines will help volunteers and professional to manage the vulnerable groups in the Emergency Temporary Shelter.

Happy reading.

Fabrizio Pregliasco
ANPAS National President

As president and secretary gerneral of SAMARITAN INTERNATIONAL (SAM.I.) we are proud of these new guidelines for vulnerable parts of our society in emergency temporary shelter. The findings are the result of a two-years project cooperation of five European Samaritan partners. The best preparation of our volunteers and employees in the emergency response is one of our priorities. SAM.I. support its partners in exchanging best practices and in implementing cross-border activities. We are convinced, that European co-financed projects create a great added value for the entire European community. Facing increasing disaster events, it is crucial to learn from each other and to enhance transnational cooperation. Therefore, SAMETS represents a milestone. Thanks to the support of DG ECHO this Samaritan project could be realised. Congratulations to the project consortium leading to this success.

Knut Fleckenstein
President of SAMARITAN INTERNATIONAL

Ivo Bonamico
Secretary General of SAMARITAN INTERNATIONAL

A.   INTRODUCTION

A.1.   The project SAMETS

One of the purposes of the Civil Protection Financial Instruments is to support the efforts of Member States to protect people in the event of a natural disaster. In a constantly changing Europe due to demographic and social factors, we can identify some groups that are more vulnerable than others: Children, Elderly and Disabled with cross cutting themes on Multicultural e Multi-ethnic aspects. In case of a natural disaster, the Emergency response has to be focused primarily to those people who are more in difficulties especially when they are hosted in an Emergency Temporary Shelter (ETS) or a Camp managed by authorities or volunteers. The recent experience involving ANPAS in the management of emergency camps after the earthquake in Emilia Romagna in 2012, has clearly demonstrated the need for a appropriate preparation of volunteers and professionals. And this is need not given only for, the emergency response but also for the management of social affairs originated and matured within the emergencytemporary shelter or recovery. The presence of families and inhabitants from third countries as well as vulnerable people like disabled or elderly, require a different approach in the management of an ETS everyday life. The SAMETS Guidelines would to help and facilitate Civil Protection teams, professionals and volunteers, to manage this issues.

This is a living document and will be update regularly
Thanks for your contributions
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A.2.   How to use this guideline
A.2.1.   The guideline structure

This guideline follows the structure of managing emergency temporary shelters from the assessment over the set-up and construction to the operation of the camp. However, since the operation is the most important part for social affairs management this guideline addresses the mentioned phases in a reverse order.

The SAMETS Guidelines take into account humanitarian principles contained in the " Sphere Project – Humanitarian Charter and minimum Standards in Humanitarian response"

„The Core Humanitarian Standard on Quality and Accountability (CHS) sets out Nine Commitments that organisations and individuals involved in humanitarian response can use to improve the quality and effectiveness of the assistance they provide"

Reference: http://www.corehumanitarianstandard.org/
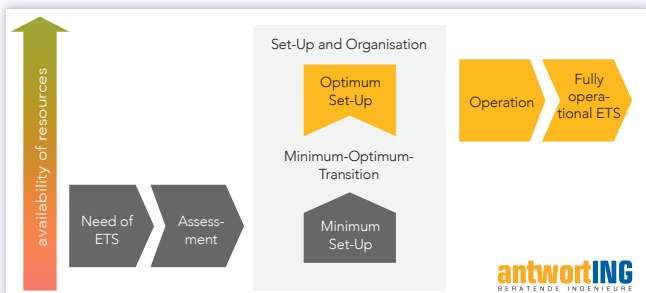
The figure above illustrates the different phases.

A.2.2.   Colour coding

Next to the assessment, set up and operation phase this guideline also deals with specific target groups. In order to ease the identification of the different groups the guideline uses the following colour coding:

Children
a young person between birth and youth

Elderly and disabled people
people over 65 years old – people with special needs or impairments

Multicultural aspects
People from countries outside EU

NOTE:

SAMETS is a cross-border project. Therefore it's natural that incident command systems are diverse because civil protection organizations deal with different preconditions, including different law situations, organizational structures and emergency management systems. Additionally, an incident command system respectively ETS organization should be adapted to each emergency situation individually.

B. OPERATION OF AN EMERGENCY TEMPORARY SHELTER

B.1. Managing Children in Emergency Temporary Shelters

During an emergency situation one of the most vulnerable group are the children. Depending on the family members' age, grade of exposure and experienced fear different stages of support, services and equipment by an ETS is necessary. It is the aim of SAMETS to provide a practical framework to support vulnerable groups building up on existing guidelines and fill the gaps regarding the SAMETS target groups.

If you manage an ETS with children among the guests requirements of management and special needs of children need to be brought together:

Management of
» medical service
  ◦ logistics
  ◦ food
  ◦ facility management
  ◦ administration
  ◦ contact to authorities
  ◦ Security

- ◦ Social issues
- ◦ Public Relation

You probably don't need an extra manager for each aspect but you should implement these fields in your management depending of the operating time of the ETS.

- » Registration of guests including their special needs
- » Overview of the number of guests in your ETS including clustering into age groups
- » „House rules" of your ETS
- » Children need safety, daily routine and a sense of familiarity
- » Keep up and provide roles (personal and professional), rules, routines
- » Implement child friendly spaces
- » If necessary organize special trained staff
- » To meet these aspects you should consider following points regarding children:
- » Are there single families with children in your ETS for whom you have to find individual solutions? Or is the group of families respectively children big enough to implement their needs in the ETS management structure?
- » What about paediatric care?
- » Are unaccompanied children in your ETS?
- » Who is in charge of taking care for unaccompanied minors? The ETS management, authorities or another institution?
- » Is baby food or food for infants needed?
- » Are items for daily use needed? (hygiene products, baby

beds, ...)
» Is it possible to give each family their own space/room? (Babies and infants have another sleep rhythm)
» Think of other areas (playgrounds, diaper changing room)
» Organize supervised activities for children (it also helps parents to relax)

B.1.1. Problem description

A commonplace says: "Children are no small adults". And indeed, compared to adults children have special needs that reach from nutrition over care issues to hygienic aspects. Taking a closer look at this target group it is obvious that there is a big diversity of children regarding their age and their development. Furthermore in most cases you usually do not deal with children alone but with families, thus it's necessary to see the family as one unit. In this context you should not only take measures to create a safe and stable environment for children but also keep in mind the special needs of pregnant women and new mothers.

B.1.2. Logistics

To perform diverse tasks in an ETS for a heterogeneous group of people you do not only need staff and manpower, also infrastructure, organizational issues and equipment are vital. In case of children there are some extra points you should take into account:

» Establishment of accommodation (playground/play

zones, own space/room for each family, diaper changing room, recreational areas, …)
» Facility management (waste management, cleaning, …)
» Food (possibility to warm up baby milk or infant food 24/7, provide baby and infant food)
» Purchasing baby/infant articles and other items for mother's daily use (diapers, wipes, toys, breast pumps, …)
» Beds for babies and infants
» Shuttle service for visits of paediatricians, activities or other transport demands
» Access control if necessary
» Cooperation with local citizens or local authorities regarding toy donations or similar actions in cooperation with ETS management or social issue manager

B.1.3. Psychosocial care

There is no such thing as „Trauma" or putting it a bit differently the Traumatic Situation does not equal the actual process of Traumatization. We are rather facing a highly individual mixture of Before, During and After the event. And this individual mixture will be vital for each personal stress barrel to either overflow or to stay capable to hold its filling level. That means, it is never the event on its own, but filling level before, what comes into the barrel by experiencing the event and how much additional stress will I experience afterwards.

In an ETS we are usually in the stage "after the event". To supply orientation, give children an idea of what happened and what is going on as well as how to handle the situation

following aspects help:

» Stable attachment figures are of vital importance for affected children. So one of the main tasks for any support system will be to keep caregivers stable.
» Stability means well informed, aware of available support and in touch with own resources as much as possible.
» Well informed caregivers will need on-going psychoeducation, not only aimed at children but also at their own needs.
» Caregivers should be as familiar as possible, so stabilizing and education already familiar caregivers is to be preferred over setting up a solely professional support. The smaller children are, the more so.
» Professional yet unfamiliar staff should be easily recognizable to children of all ages. That could be tags or buttons with a logo or pictogram, so even small children can identify and differentiate staff from any other adults around. Unfortunately abusive behaviour towards children is possible in emergency shelters and due to children being particularly worthy of protection this topic should be addressed (Kern & Finkeldei, 2014).

Regarding the behaviour of children and people in general keep in mind that stress reactions to abnormal events are normal and that not every stress reaction is a sign of a process of traumatization. Note:

» A multitude of possible reactions following stressful life events may come as:
  ◦ Behavioural symptoms

- ◦ Emotions
- ◦ Physical symptoms
- ◦ Cognitions
- » A wide variety of reactions and associated strategies to release stress were stated possible.
- » In preparation of operating an ETS special training of staff and implementing stable screening competence are vital.
- » Activities in an ETS will have to be of some variety as well in order to cover different fields such as:
  - ◦ Normality and routines (meals, sleep, play, sports, learn, psychoeducation)
  - ◦ Free and organized activities
    - » For relaxation and energisation
    - » Confrontational activities to express feelings or work on resources
    - » Peer interaction
    - » Free time for caregivers
- » Depending on the individual mission, an ETS should be able to meet the needs of caregivers, children in infancy (with mothers), early childhood, middle childhood and adolescents (Kern & Finkeldei, 2014).

Activities are a useful tool to create a feeling of safety for children, to support them to come back to normality and interact with other children:

- » Implement child friendly spaces
- » Keep up and/or provide
  - ◦ Roles (personal and professional)
  - ◦ Rules (family rules and on-site rules such as media

access …)
- ○ Routines (timetables, different spaces, …)
» Try to create as much sense of familiarity (old and new) as possible (e.g. a play zone with a wall of handprints and names of each child)
» For putting these emphases into action different fields for concept work were identified:
- ○ Activities for single children or caregivers
- ○ Activities for groups of children or caregivers
- ○ Activities for groups with special needs
» Creative activities (drawing, clay, making puppets)
» Imaginative activities (dance, theatre, singing)
» Physical activities (sports, traditional children's games)
» Communicative activities (story telling, books, discussion, talk time) (Kern & Finkeldei, 2014).

NOTE: Confrontational activities should only be conducted for individual children and/or adults under supervision and by specifically trained staff.

Activities [1]	Organized Groups	Free
Activation resources	Communicative, creative and imaginative activities	Creative activities
Relaxation	Communicative, creative and imaginative activities	Creative activities
Energisation	Physical and imaginative activities	Physical activities

[1] (Kern & Finkeldei, 2014)

Entertainment and daily schedules for children

- » Parents need Information
- » Info Point
- » Meeting Point
- » Assess Age, Profession and Abilities
- » School
- » Kindergarten
- » Child Area
- » Be creative, flexible.
- » Use local resources (outside camp)
- » Be specific about staff
- » Provide material, areal needs according to specific situation

Handling unaccompanied children

One particular aspect to manage children in a ETS is the phenomena of the children without parents or relatives. For this sensible situation it's very important the close contact with Emergency Local Autorithy in charge.

Some aspect must be take in account , by ETS management such as:

- » Question of legal aspects
- » Close contact with local authorities
- » Person for children (Tutor)

B.2.   Managing Elderly and Disabled people in Emergency Temporary Shelters

Older people and people with disabilities have often been overlooked in disasters and conflicts, and their concerns have rarely been addressed by emergency programs or planners.

This guideline focuses on specific needs of this people and describes how they might be managed in an ETS.

To the maximum extent possible, shelter and support plans should include people with disabilities and older people along with others in their community. In most cases, accommodating people with disabilities requires relatively small, simple modifications to policies and physical environments: providing a portable ramp, ensuring that announcements are affirmatively communicated to deaf and hard of hearing people; allowing aides and family members to evacuate and shelter along with a person.

People with disabilities should not be routinely routed to health care environments or separated from essential equipment and other personal supports (e.g. service animals, friends, aides, family). Doing both greatly increases vulnerability and trauma, and may condemn a person to a lengthy, unnecessary period of institutionalization.

Older people are a very diverse group, most of them are capable of coping and adapting, despite increasing poor

health and frail as they age. It is similar for people with disabilities, they already had to adapt to life with their impairment and cope with difficulties it had brought to their lives.

Disaster brings specific challenges making people with progressive loss of function in particular vulnerable to adapt and cope to emergences and hazard.

Important:

» Advanced age by itself does not create vulnerability. However, certain problems that are more common in old age can increase vulnerability. They include decreased strength, poor tolerance of physical activity, functional limitations, and decreased sensory awareness.
» Physical impairment create vulnerability in emergency situations. Since disaster situations can be very demanding, any diminished physical ability or sensory perception adds to a person's vulnerability. Mobility impairments, hearing loss, even a diminished sense of taste can place affected people at higher risk during emergencies.
» The severity of the impact of emergencies and disasters on older people and people with disabilities depends on the specific characteristics of the affected people and their environments, the type and severity of the hazard, disaster management systems, and interactions between all of these.

The ETS management should be aware of different groups of people coming to the ETS. It is responsible for taking care of elderly and disabled people in all areas of responsibility and functions, especially:

- » Command
- » Registration
- » Health/Medical care
- » Nutrition/Food and food distribution/water and water supply
- » Wash
- » Social services/ special communication aspects for target group
- » Safety & Security
- » Logistics
- » Special ETS manager need to be discussed depending on quality and quantity of requirements and beforehand planning; The manager will be responsible for transmission of the requirements, or needs of elderly and disabled people to the management of ETS
- » The ETS is not built to shelter and take care only elderly and disabled people and people with physical impairments; Registration will name elderly and disabled people and people with physical impairments
- » Anticipation of the expected quantity and quality of requirements and needed equipment;
- » Special trained staff is needed to take care of elderly and disabled people and people with physical impairments (depending on requirements – special trained staff would be minority of the overall staff) In case the assistance is needed
- » Special trained staff for health care and emergency medical care is needed too.

B.2.1.   Problem description

There are few characteristics which make elderly and disabled people different from other residents.

Elderly people – people older than 65 years:

» Approximately 20-30% of people over 60 have one or more disabilities, whether physical, mental, or sensory. This percentage increases with age to more than 50% in people over 80.
» Limitations in vision and hearing are particularly significant for coping in disasters. Surveys show that about 35% of older people have some form of visual impairment.
» Survey data show that 20% of older people living in the community report limitations in their ability to perform at least one activity of daily living, such as bathing, eating, dressing, toileting, walking, or using transportation (ECLAC 2008, MERCK & PAHO 2004). Emergencies and disasters may disrupt access to people and services the elderly rely upon in their daily lives.
» Mental health problems such as dementia and delirium are common in old age and can make the disruptions associated with disasters seem much worse, leading to feelings of helplessness and poor ability to respond.
» Surveys in the Caribbean show that at least 60% of older people have one or more chronic diseases. Even if normally well controlled, chronic diseases and conditions can rapidly deteriorate during disasters, leading to complications and even death.
» Surveys show that 8 in 10 older people remain functional-

ly independent despite having a disability. (ECLAC, 2007 & 2008). Older people can make positive contributions during times of crisis.

» Also the following points need to be considered:

People with disabilities:

» This term covers a broad spectrum of human experience and individual circumstances
» People with disabilities include those who have different types, levels and combinations of physical, mental, cognitive or sensory impairments so the term by itself gives little useful information about specific needs of any particular individual to whom it is applied
» No single strategy for outreach, planning, communication, evacuation, or shelter will work for everyone
» People who live with disabilities are generally the best source of expertise on what does and does not work for them. In addition, disability organizations are a tremendous resource, both for planning purposes and in the event of an actual emergency.

What makes elderly people and people with disabilities more vulnerable in emergency situations?

» medical conditions - hyper/hypothermia vulnerability
» dependency x limited social network
» risk of neglecting or abuse
» cumulative stress (multiple loss…)
» marginalization
» lower flexibility – transfer trauma

Important:

From the perspective of an ETS can be specific needs of people with disability and elderly defined in these categories:

- » Impairment in Mobility
- » Sensory Impairment
- » Cognitive Impairment

According to the different types, levels and combinations of impairments is necessary to consider and evaluate:

- » Need of personal assistance with daily routine activities such as eating, hygiene, dressing etc.
- » Need of assistive technology supplies – mobility aids, batteries for hearing aids, small spare parts frequently needed, cables, cleaning solutions etc.
- » Need of specific communication channel – sensitive to people with hearing, visual or cognitive impairment
- » Need of specific nutrition and medication – cooling or refrigerating

B.2.2. Logistics

Basic logistics for ETS (registration, accommodation, material order + documentation, warehousing, transport + papers, roads …) is supplemented with special requirements for elderly and disabled people and people with physical impairments especially in the area infrastructure (that fits to all inhabitants of an ETS but also to e.g. people in a wheelchair). Some ideas discussed during the workshop related to the target group:

- » Colored pathways
- » Communication signs/signals
- » Sign written and pictograms
- » Special care area
- » Health care center
- » Social area
- » Safety and security
- » Barrier free movement and solid pathways
- » Sheltering elderly evacuees in ways and with services that maintain existing support networks and neighborhood structures
- » Developing ways that senior evacuees with restricted mobility and/or independence can engage in activities providing social connection and meaningful engagement.
- » Creating sites where evacuees can gather socially away from the hustle and bustle of the reception center (some seniors may find the reception center overwhelming and disorienting).
- » Recognizing the heterogeneity of the seniors' population with respect to their willingness and capacity to participate in disaster relief and recovery activities.

B.2.3. Psychosocial care

Reaction to stressful events may come as: physical symptoms; emotions; cognitions; social reaction.

What are needs on physical, emotional, cognitive and social level of elderly and disabled people and people with physical impairment after extreme stress and what activity might be helpful?

	Needs	Activities
Emotional	Safety To have an overview Psychological assistance Need to be useful to community Perspectives Not to feel a burden Go back to normality	Skills of the staff Re-building and re-create a familiar environment Have a real person to give an update on the situation Give them something to do daily activities
Social	Psychological assistance Need to be useful Connection with other disabled / older people Connection to other people / no ghetto Interact with others Spend time with family, friends … To be alone	Psychological response Give a chance to help each other Make meeting Group activities, all day life, activities that can link people together Social activities Create opportunities
Physical	Medical Mobility Impairments – sensory Adequate environment Nutrition, diet … To play x security WC Other basic needs – clothing …	Mobility aids, caregivers Medical checks Basic signs, easy paths Comfy chair, cushions Social area task schedule Collect humanitarian things, clothes …
Cognitive	Orientation Reassurance Keep busy Feeling involved Information Religion, belief, meaning, spiritual	Basic signs – clear info Psychosocial activities Entertainment Involve in ETS Info board Places to pray

In emergency situation it is important for every single individual/affected persons as well as help providers to:

» be safe
» be informed
» be involved
» be not alone

Thinking of these needs and incorporating them into the organization of life in an ETS, can highly empower resilience and adaptation of affected people to the disaster as well as prevent the prevalence of PTSD.

Depending on Grade of Exposure, experienced Fear/ Loss, ability to act, previous stressors and support from relatives elderly and disabled people will need more or less support and services provided by an Emergency Temporary Shelter.

One part of elderly and disabled people show resistant response and will be able to return to their former life when receiving "Basic services and support" within their family or support system. Basic services and support provide shelter, play, food, hygienic facilities and basic support in terms of psycho-education.

"Focused services" was defined as offers and activities to meet the needs of elderly and disabled people that are overly challenged by the need to adapt to ongoing changes and need more help in coping. This includes emotional support as well as training in supporting elderly and disabled people who show signs of ongoing traumatic stress.

Only a small part of target group might not recover easily from the impact of event and will need "Specialized Services". These services need to be offered by professionals or specifically trained, experienced and supervised staff.

Needs to be covered	Human resources needed other than staff
Safety Reassurance Hope, meaning Orientation Structure Prevention of exposure Prevention of conflicts Psychoeducation about possible trauma symptoms Be involved	Crisis intervention team (for psychosocial support and psycho-education Trauma therapist Other professionals who can bring reassurance and practical fact about nature of disaster and future
Staff skills, trainings	Material
Basic knowledge of crisis and trauma Basic training of conflict management Stress management techniques (within the staff, peer system …)	Social room Staff room Activity guide (tips how to organize free time in ETS, how to involve people into it) Activity kit (material for work and relax time) Screening list of trauma (checklist of trauma symptoms / if specialized care is needed) Psychoeducation material

B.3. Managing Multicultural Groups in Emergency Temporary Shelters

Managing and dealing with different ethnic groups in an ETS represents an major challenge and needs a lot of tact and empathy. People representing and belonging to different cultures have their own traditions and customs. These differences are also reflected in the area of the management of an ETS. The more different cultures interact with each other, the higher the demands on all people involved.

Cultural differences have to be considered in order to avoid possible problems in advance when planning and setting up an ETS. Emergency shelters should provide people in need with more than just a tent and infrastructural supply within the tent city. Personal needs, which are derived from the respective cultures, must be considered as well as the possibility to maintain certain rituals. These special needs should therefore constitute a central role in the management of an ETS and it should also be considered in the infrastructure of the camp.

In addition to the logistical challenges there are huge demands in terms of intercultural competence of the individual actors. Every single person in charge in the area of an ETS must be aware of this and should have no fear of getting in contact with foreign cultures. A successful management of different ethnic groups in an ETS is only possible if basic intercultural skills are present.

In general, interculturalism is a phenomenon of interactivity between at least two different cultures including their perception of each other. It follows that in this environment, a great deal of capacity-building of the individual concerned is necessary in order to enable a positive approach. Only a corresponding openness and the will to deal with these challenges allow a common togetherness.

In the early stages of a disaster shelters have decisive influence on survival. Above this they are also important in order to preserve human dignity, to sustain life in the family and the community and to support the affected population by recovering from the effects of a disaster. The respect of human dignity also causes the right to exercise religious practises and rites. Regarding the handling of different ethnic groups in an ETS the subject of religion plays a central role, which should not be underestimated and therefore it has to be included to considerations concerning the management of an ETS. For this reason the willingness of grappling with other cultures and their religion really must exist.

Summarising it can be said that the handling of different ethnic groups falls much more in the area of intercultural competence as in the area of classic camp management. The success of an ETS managing different cultures therefore depends on the willingness of all involved staff members to deal with other cultures and their needs. In this context a parallel to the other target groups of the SAMETS project (children, elderly and disabled people) can be laid:

» The dignified handling of the three target groups re-

quires a high degree of empathy and social intelligence.

Especially in terms of the management of different ethnic groups it must be said that the requirements are much more in the psychosocial area as in the technical area. Only a positive access to other people in terms of intercultural communication (important additional factors such as religious-cultural or linguistic-social) enables a successful management of an ETS.

B.3.1.   Problem description

Living together with people from other cultures is for most of us (especially in urban areas) for granted and we call it multiculturalism. But what is the definition of multiculturalism?

» Multiculturalism is a socio-political fact, something empirically given. Within a culture or a state-organized society there are coexisting cultures, either peacefully or in conflict, whether in togetherness or in an integrated coexistence

The more different cultures interact with each other, the higher the demands on all involved. Therefore a great deal of capacity-building of the individual concerned is necessary in order to enable a positive approach. In our minds there are existing prejudices and stereotypes about people coming from foreign countries, which have a great influence about our opinion. Prejudices and stereotypes often contain negative aspects of the out-group, while the in-group is better rated.

» **Stereotypes** describe a set of beliefs about the members of a social group
» **Prejudices** go one step further: they refer to a very special personality of the area of the assessed person

Prejudices usually refer to marginalized groups and negative evaluated settings. All members of this group are attributed to the same characteristics.

Every kind of prejudice regarding to other cultures must be overcome to enable a peaceful coexistence. Therefore, intercultural competence has become one of the key skills (generic competence; soft skills). Getting in contact with other ethnic groups often raises a lot of cultural differences such as:

» Both partners have different orientation systems, thereby one's own culture and their own life context (natural and social environment) understandable, manageable, influenced and controlled
» Each orientation system differs significantly from other people

One great problem with stereotypes and prejudices is also the aspect of generalization. Both partners believe that their orientation system is equally valid for all others have to be valid. Routine can also influence persons because both partners have become their culture-specific orientation system for granted and requires no reflection or critical control.

There are also mental images that influence our thinking, judge and act:

» External image: knowledge, assumptions, information about the other
» Self-image: what I put in the encounter
» Suspected foreign pictures: what does the other mean about me

Because of this reason intercultural experience needs different activities. You have to deal with each other, talk to each other and make arrangements to conduct negotiations.

Special problems with intercultural encounter are:

» Language, character
» Social community of the interlocutors (nation, culture)
» Different valuation of symbols (rites, rituals, religion, customs, tradition)
» Misperception
» Misinterpretations
» Misunderstandings

Therefore in the area of intercultural competence it depends mainly on the personal account of each individual. An operation without a corresponding knowledge and good preparation in terms of the different cultures would be fatal. The profound and comprehensive preparations as well as the knowledge of the many peculiarities of other cultures are indeed essential.

B.3.2.   Logistics

The logistics in an ETS with "multicultural ethnic groups" need to focus on the areas of staff and infrastructure.

Concerning the special target group "multicultural ethnic groups" logistics and requirements here are closely related to the religion and the rituals and rules derived therefrom. Depending on the composition of groups living in the ETS you may be confronted with very diverse and specific challenges.

E.g. Muslims have strong rules concerning their meals and their prayer times. In the area of this special target group the ETS has to provide a special room for worship. Perhaps there would be a special kitchen storage regarding to the rules of Islam. Otherwise apply in the field of logistics, the broadly defined requirements of an ETS.

In the assessment phase it may be helpful to look at the sociodemographic composition of the region where the ETS will be established. First ideas of the specific logistic necessities for this mission can be determined by this information.

B.3.3. Psychosocial care

Only a positive access to other people in terms of intercultural communication enables a successful management of an ETS with a multicultural background. Staff in the area of psychosocial care therefore needs special abilities. On the one hand you have to deal with each other, talk to each other and make arrangements to conduct negotiations and on the other hand you have to know about the norms and values of other cultures and their religion.

Different skills will play an important role:

- » Cognitive competence (knowledge)
- » Affective competence (emotions)
- » Pragmatic-communicative competence

Characteristics of intercultural competence are also to recognize adherence to culture, to overcome culturalism, to develop respect towards other cultures, to take into account divergences and convergences and to be tolerant with regard to ambiguity.

Intercultural competence is reflected in the ability to detect cultural conditions and influencing factors in perception, judgements, feeling and actions in one self and in other people to respect, appreciate and productively use.

In supporting different cultures or ethnic groups in the field of psychosocial care the use of a "cultural mediator" would be helpful. This "cultural mediator" could be a member of the immigration community who has experiences with both cultures and above all there would be the possibility to talk in mother tongue. The aim must be to produce a comprehensive understanding with others on an emotional level.

Topics to be considered might be:

- » Religion / ethnic minorities
- » Special food
- » Are there conflicts between countries that the inhabitants are citizens of?
- » Information and integration is crucial when dealing with racism
- » Language and writing should be adapted to

the inhabitants of the ETS
- » Do language, climate, social rules and religion differ from what camp inhabitants are used to?
- » Daily routines (e.g. eating times, breaks) may shift
- » Eating habits
- » Some people dont want to share a tent with strangers or "non-family"
- » People may like to help, plan for that!

B.4. Summary of Intersections / Cross cutting themes

Some themes are not related with a specific target goups, but have cross cutting management aspects such as:

- » Management structure
- » Logistics and food (general needs)
- » Administration
- » Facility management
- » Registration (add focus groups aspects)
- » Meeting point
- » Family point
- » Social room
- » Self sufficiency

C. EMERGENCY TEMPORARY SHELTER SET-UP AND ORGANISATION

C.1. Material and staff logistics

The Basic Standard to establish a camp are defined by several partner experiences and internationally literature such as UNHCR Manual for emergencies, Sphere Handbook and others references. Camp Manager. Registration Office, or Catering services are basic components to manage a camp such as Logistic services, Facilities and Security. The number of Staff involved (volunteers and professionals) idepends on two factors: How long does the emergency and how many guests have the ETS. Since most ETS start with a lack of resources the process from getting from a minimum set-up to the optimum set-up (fully operational) needs to be described.

C.1.1. Minimum requirements and set up

The SAMETS Project identified the Minimun Set Up for and with an emergency that has a duration less than 72 hours.

The main goal of the minimum set up is to establish an ETS with all basic components. There are only some points which should be considered if the ETS is operational less than 72 hours.

Related to the target groups it will strongly depend on some factors such as age, (i.e. for children), what kind of people, culture, religion (i.e. for multicultural) or what level of disability or special needs for elderly and disabled people.

They additionally depend on the lack of infrastructure and the number of guests in the ETS.

Minimum requirements and set up for children

Organization:
» Daily routine (meals, sleep, play sports, learn, psychoeducation)
  ◦ Meals
  ◦ Sleep
  ◦ Information
» Access control if necessary
» Basic health care
  ◦ Support contact for paediatric / psychologist
» Support network
» Registration and identification
» Protected area for nursing
» Paedeatric care (depends on situation and the lack of infrastructure)

Management:
» Permanent contact person for children issues
» SOP if necessary
» Special structure of the ETS Management (target group manager or children issue manager)

- » Rules and enforcement of rules
- » Psychological assistance
- » Cultural awareness
- » Definition and identification of needs

Children issues:
- » Protected playground (design differs over time)

Equipment:
- » Fencing if necessary
- » Access control if necessary
- » Basic consumables
  - ◦ Food (for babies and infants)
  - ◦ Non-food items (some will be brought), hygiene articles, diapers, products for infants like toothbrushes

Staff:
- » Specialized trained personnel
- » Different experts (psychologist, …)
- » Basic trained staff (reduces stress!)
- » Contact person for children issues

Minimum requirements and set up for elderly and disabled people

Organization
- » Barrier free movement
- » Solid pathways
- » Appropriate size of the space

<u>Management</u>
» Manager for Elderly and disabled people issues (Social worker)

<u>Equipment</u>
» Hygiene items (diapers)

<u>Staff</u>
» Volunteers that solve the lack of self-sufficiency

Minimum requirements and set up for multicultural aspect

<u>Organization</u>
» Daily occupation/ engagement opportunities
» Language mediator/s (identified within the guests ethnic groups)
   ◦ Basic informations and logistic indication in the main spoken languages
» Spatial conditions
   ◦ close family members should be in the same tent
   ◦ cultural sensitive allocation of tents
   ◦ area for prayer

<u>Management</u>
» Cultural mediator

<u>Staff</u>
» Trained cook about multicultural special dietary
» Staff trained in cultural awareness (generally)

C.1.2.   Optimum requirements set up

The SAMETS Project identified the Optimum Set Up for and with an emergency that has a duration over the 72 hours and more. If the ETS is operated more than 72 hours further management staff and infrastructure are needed to meet the needs of vulnerable people. The following components are addition to minimum requirements set up.

Optimum set up for children

Organization:
- » Keep children busy!
  - ◦ School
  - ◦ Kindergarten
  - ◦ (Education) alternatives
  - ◦ List of possible activities
- » Paediatric care
- » Activity, play, private zones
  - ◦ Playground
  - ◦ Family place
  - ◦ Info and meeting point
- » Separate areas for families
- » Tents if necessary (to create more space in general)

Management:
- » Small groups of children (nice to have)

Children issues:
- » Distinction of age groups
- » Education
- » Child friendly spaces

Equipment:
- » Comfortable area (nice to have)
- » Playground
- » Many-purpose toys
- » Music
- » Tent for school / kindergarten

Staff:
- » Children supervision
- » More caretakers (numbers of children is key)
- » Children manager
- » Focused psychosocial care
- » Volunteers from camp people

Optimum set up for elderly and disabled people

Organization:
- » Logistics (barrier free movement, signs, pictograms, colored pathways)
- » Daily activities, task schedule
- » Special care area
- » Health care area
- » Social media, TV
- » Familiar environment
- » Humanitarian aid (clothes, books, free time activities)

Management
- » Manager for Elderly and disabled people issues (Social worker)
- » Regular updates on the situation

Equipment
- » Comfortable chairs, beds
- » Medical tools

Staff
- » Psycho-social care
- » Trained staff specialized on elderly and disabled people care

Optimum set up for multicultural aspect

Organization:
- » Daily occupation/ engagement opportunities
  - ○ Taking into account the different regional habits
  - ○ Participation in different fields (excluding management)
- » Language
  - ○ All the Logistic Indications should be in the different languages spoken in the ETS
  - ○ multi-language announcements for the meeting point
- » Spatial conditions
  - ○ close family members should be in the same tent
  - ○ Social room according to social costumes
  - ○ Making religious feasts possible
- » Food
  - ○ All ethnic groups should be considered
  - ○ nutrition to be adapted to the local habits and rules (special food items)
  - ○ Adaption of spatial conditions on according to eating habits

» Medical Care
  ◦ Spatial division according to gender
  ◦ Medical staff trained on cultural sensitivity
  ◦ Psychological with languages ability

Management
» Cultural mediator
» External translators
» Clerics

Staff
» Trained cook about multicultural special dietary
» Staff trained in cultural awareness (generally)
» staff members that are trained on ethnic specifics
» Medical with languages competences

C.1.3. Getting from minimum to optimum

When planning the process of getting from minimum to optimum flexibility is crucial when reacting to the most urgent problems. It should always be taken into consideration, that getting from minimum to optimum is a process. The longer the ETS is operational, the more important it is to identify the needs of the different vulnerable groups and react accordingly. Special attention must be paid to the infrastructure and to underlying logistics.

Getting from minimum to optimum for children

The management structure and the provided infrastructure is depending on the duration of event respectively

the operating time of an ETS. To expand ETS services and structure continuous communication between all actors like ETS management, field manager, stakeholder of authorities, stakeholder of other emergency management organizations and guest of the ETS is necessary. It is the key to identify the needs of improvement to adapt the ETS structure and infrastructure to the current situation, to find practical solutions and it supports a social culture within the ETS.

Regarding psychosocial care you could describe the steps of different services with three stages. Basic service and support provide shelter, play food, hygienic facilities and basic support in terms of psychoeducation. Furthermore all families need information, balance of privacy and community and a basic screening. Therefore staff with at least a basic psychological first aid training is needed. The target group of the focused service are families that are overly challenged by the need to adapt to on-going changes. They need support in coping with the situation, emotional support and training in supporting children. The service focuses on children and caregivers and includes more specific and individual single or group psychoeducation, activities and screening. Personnel needs crisis intervention training. Specialized service applies to families that cannot return to a challenged, yet stable level of functioning. Staff offering these services (for both children and caregivers) need to be professionals with specifically training, they should be experienced and supervised. Unaccompanied children may well be set in this group to provide one-on-one support, providing a substitute attachment figure. This service is highly individual and the

ETS management should check if this service can be offered by the ETS or if the family affected should be forwarded to another institution or professional (Kern & Finkeldei, 2014).

Getting from minimum to optimum for elderly and disabled people

If ETS is operating more than 72 hours additional development of infrastructure is needed. While basic services and support provide shelter, food, hygienic facilities and health care, "focused services" are those which meet the needs of elderly and disabled people including changes in staff composition, registration, challenges in logistic issues, training the assistance for elderly and disabled people as well as psychological support.

Getting from minimum to optimum for multicultural aspects

It's not possible to state a specific order of steps to get from minimum to optimum in the development of the multicultural requirements of an ETS because of the wide range of possible scenarios. As an example there could be an important religious festival that needs immediate attention and special logistics. Taking care of these religious needs could be more important than developing other areas of multicultural necessities. Nevertheless the process of getting from a minimum to an optimum set up in the field of multiculturalism is highly dependent of the staff. Of importance is their sufficient number as well as their qualification and adequate

training in cultural sensitivity. As language skills are crucial, special attention must be paid on translators and personal with multilingual background or skills. For getting started it can be helpful to get in contact with local communities of immigrants or NGOs working in the field.

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C.2. Vulnerable people management
C.2.1. Registration

Registration is one of the key issue for the ETS Management. The knowledge of the social composition inside the camp is necessary to avoid conflict and to prevent special needs.

Registering children

To gain an overview how many guests are accommodated in your ETS registration is necessary. It also helps you to identify how many children you have in which age group and in a second step collect and assess special needs. You sould adjust requested information to the situation and estimated duration of the ETS. Here are some examples:

» Name
» Date of birth/ age
» Residence
» If necessary, affected area where someone was evacuated from
» Family affiliation within - and if necessary outside – the ETS (parents/caregiver, children)
» Nutrition (baby food, vegetarian, …)
» Medication
» Limited mobility
» Required assistance in daily life activity
» Diseases that require medical care
» Education (educator, teacher, midwife, psychologist, …)
» School class

Registering elderly and disabled people

The registration is one of the most important points in ETS. The registration gives general picture of the person, his provenience, family, overall situation, profession, contact in case of separation. In many cases the ID issued after registration is the only document left to resident and may serve for re-issue of the official documents. The camp management should be prepared to confirm the residence of persons for third parties. Therefore, the formalities must be discussed with the local authorities before.

Example of the registration form (can be modified up to the camp management needs).

RESIDENTS REGISTRATION FORM

1	ID card/passport number	
2	Camp ID number	
3	Picture number	
4	EAN	
5	Licence number	
6	Religion	
7	Alergy	
8	Diabetes	
9	Disability	
10	Birthday	
11	Dress size	
12	District	
13	Address	
14	Community number	
15	Tent number	
16	Head of the household	
17	Family members	
18	Reasons for entrance	

Hereby I confirm that personal data are accurate and may be used in coherency with SAMETS tasks.

Date _____   Signature _____

Also see the SAMETS rating system in section D for further registration information.

Medication

- » Importance and urgency
- » Medication: Yes or No?
  - ◦ If yes: Medical staff (list, availability)
- » Nurse (doctor)?
- » Prescription
- » Diabetics and dietary
- » Own documents (diabetes pass etc)
- » Medication packages
- » Copy of prescriptions
- » Rating scheme
  - ◦ 0 - no medication
  - ◦ 1 - medication (independent)
  - ◦ 2 - medication (dependent)
  - ◦ 3 - medication (professional)

Cognitive

- » Ask questions
- » Ask / Answer
- » Comprehension and possibility to communicate needs
- » Language?
- » Time and Space
- » Rating scheme
- » Conscious / Oriented
- » Disoriented / Confused / Repeating
- » Mental retardation
- » Rating scheme
  - ◦ 0 - Time, Person, Location (permanent)
  - ◦ 1 - Time, Person, Location (min. 1 not permanent)
  - ◦ 2 - Time, Person, Location (min. 2 not permanent)

- ◦ 3 - Time, Person, Location (min. 3 not permanent)

Mobility
- » Walking / Not walking
- » Using wheelchair?
- » Alone
- » Need specific / protected (structured) tracks
- » Can stand alone?
- » Pictograms (Reg. Form)
- » Rating scheme
- » Full
- » With material support (stick, "wheel stick", wheel chair)
- » Full immobility (can't use even hands fully)
- » Rating scheme
  - ◦ 0 - can walk free
  - ◦ 1 - can walk with support (stick etc.)
  - ◦ 2 - can't walk more than 2 meters (barrier-free!)
  - ◦ 3 - needs wheelchair

Sensory
- » Supportive device used (glasses etc.)
- » Hearing device
- » Pictograms (Reg. Form)
- » Transitory / Permanent needs
- » Sensory test (e.g. walking straight line)
- » Sight (no impairment, needs material support, glasses, blind)
- » Hearing (no impairment, needs material support, hearing machine, deaf, deaf-muteness)
- » Rating scheme
  - ◦ 0 - non-permanent (or has glasses etc. for

compensation)
- ◦ 1 - needs glasses
- ◦ 2 - blind etc.
- ◦ 3 - blind, deaf or combination (dependent)

Multicultural aspects of registration

Regarding the management of multicultural groups it is important to register country of origin, religion and the cultural group the person feels part of.

As there are very different definitions of family in different cultures the registration system should be apt to even register large family systems as one unit.

Registration forms should be available in the required languages or alternatively there should be native speakers or translators to help with the registration process.

Keep in mind that in some countries of origin analphabetism is an extendedly common issue.

C.2.2. Definition of concrete needs

Definition of concrete needs for children

The concrete needs of children are:

- » Stable attachment figures
- » Normality (meals, sleep, play, sports, learn, psychoeducation, sense of familiarity)
- » Roles, rules, routines and their enforcement

- » Social interactions
- » Comprehension
- » Special daily use items like diapers, wipes, children tooth-brushes etc.
- » Education activities

Definition of concrete needs for elderly and disabled people

The concrete needs of elderly and disabled people are:
- » Daily routine
- » Social interactions
- » Assistance (personal hygiene, feeding)
- » Sanitary items (diapers, wipes)
- » Clear, coloured and barrier free pathways
- » Clear signs in appropriate level and size
- » Psychologist for cognitive impairments

Definition of concrete needs with regards to multicultural aspects

In a multicultural environment the respect of the individual cultural rituals is of special importance to give people the impression that they are being taken seriously in their belief and needs and therefore feel respected and equally important as the rest of the camp inhabitants.

The other important point is the matter of communication. People need to be addressed in their own language (mother tongue) to ensure that information is being spread democratically and effectively

C.2.3.   Care

Taking care of children

As mentioned above, if you have children in your Emergency Temporary Shelter you are responsible for protecting children from harm, for caring for children's well-being as well as strengthening their resilience and building up child protection structures and community capacities in the Shelter. Child Friendly Spaces (CFS) are an effective method to implement these tasks in your ETS. Therefore the "Guideline for Child Friendly Spaces in Emergencies" from UNICEF will be summarized for the application of staff members in Emergency Temporary Shelter. For more information please seek further information in the guidelines listed in the chapter "Further Literature". (UNICEF, 2009, p. 2)

The UNICEF Guideline defines the specific objectives of CFS as follows: "1. mobilize communities around the protection and well-being of all children, including highly vulnerable childern; 2. provide opportunities for children to play, acquire contextually relevant skills and receive social support; and 3. offer inter-sectoral support of all children in the realization of their rights."   CFS need to be developed within an ongoing process and with recurrent evaluation to evolve and adapt CFS to child development and distinct need of boys and girls. Even education can be started on this base. (UNICEF, 2009, p. 2-3)

The UNICEF guideline establishes following principles and actions:

Principles that are essential and should be implemented in all actions to establish CFS:

1. Take a coordinated, inter-agency and multi-sectoral approach

2. Use CFS as a means of mobilizing the community

3. Ensure that CFS are safe and secure

4. Make sure CFS are stimulating, participatory and supportive environments

The following action are necessary when extablishing CFS:

a. Conduct an assessment

b. Organize integrated supports and services

c. Provide ongoing training and follow-up support for animators and staff

d. Monitor and evaluate CFS programs

e. Phase out or transition in a contextually appropriate manner

Taking care of elderly and disabled people

Living in a emergency temporay shelter is difficult for all the guests. For people with disabilities or elderly could present a real problem for ETS staff. According with diffent experiences and references (Sphere HandBook - WHO - Older people in emergencies : considerations for action and policy development / David Hutton.) some special care people is needed as well as Social manager - responsible for transmitting of the requirements, or needs of elderly and disabled people to the management of ETS

A unique problem that recently surfaced may become more common for shelter managers in the future: Blind persons who use guide dogs have traditionally been allowed to bring their animals into shelters, because it has been recognized that the dog functions as a part of the person's life support system. For the past decade or so, deaf persons also have been using dogs to alert them to a variety of household events, such as ringing doorbells, crying children and the like. Clearly, these are valuable animals that cannot be left outside. Severely disabled persons use dogs and pets as helper animals. These creatures are vital to mobility impaired persons. Arrangements will have to be made within shelters to accommodate these animals.

The inhabitants of the ETS with experience should be included in the preparation and, if possible, in the management of catering and food items.
An important matter is the coordination and the common planning of the dishes and the food served.

The transformation process from basic to operational catering can only happen step by step and with the help of the inhabitants of the ETS.

When regarding special food items availability may be reduced due to the disaster situation and this leads to the need for alternative food items and sources thereof. Resource efficiency and preparation effort for special dishes must also be taken into consideration.

Sometimes vegetarian food is an alternative.

Research on the specific eating habits of different minorities can and should be done in advance (preparation phase).

D. ASSESSMENT

D.1. General assessment for Vulnerable Group inside the ETS

The Assessment is one of the most important issue to manage people in the ETS. The knowledge of the health status for each guests is crucial to better organize the management inside the ETS. The Assessment should be organize after the registration, by ETS special staff such as: psychologist, medical, nursery and cultural mediator.

The Guidelines provide some indicators and a rating system to help the ETS staff to manage this vulnerable group

The Assessment Rating System helps to understand problems for each indivudual and how to organize the better support for them and also It helps to systematically look at what is available to alleviate the problem (resources, skills and capacities) and decide whether the ETS Staff or Local Emergency Authorities should be involved and at what level.

The Assessment Rating System encourages focus on specific conditions (Cognition, Mobility Medical, Sensory) and it highlights different areas of responsibility for reducing vulnerabilities.

This information will assist the Local Emergency Authority to define more clearly its roles and areas of collaboration with the ETS Staff.

D.2.2. The SAMETS rating system for fast Assessment

SAMETS assessment system
Inital check for needed level of support of guests in Emergency Temporary Shelters

ORIENTATION	Points	Support of family	Rating
Full Orientation to time, person and location	0	0	
Non-permanent orientation to one: time, person or location	1	0	
Non-permanent orientation to two: time, person or location	2	1	
Full non-permanent orientation to time, person and location	3	2	

MEDICATION	Points	Support of family	Rating
Person needs no medication	0	0	
Person has NOT enough medication with him/her	2	2	
Medication can be taken independently	1	1	
Person needs general support to take medication	2	1	
Person needs professional support to take medication	3	2	

SENSORY IMPAIRMENT	Points	Support of family	Rating
No aid or supporting device needed	0	0	
Person IS DEPENDENT ON visual aid, hearing aid etc. TO BE INDEPENDENT	1	0	
Blind, deaf or another impairment (person lives usually independent)	2	1	
Person has multiple sensory impairments and NEEDS AID	3	2	

MOBILITY	Points	Support of family	Rating
Person can walk freely	0	0	
Person can walk with support (e.g. walking stick)	1	0	
Person can walk max. 2 m (barrier-free ETS?)	2	1	
Person needs wheelcair or is otherwise immobile (barrier-free ETS?)	3	2	

PREGNANCY	Points	Support of family	Rating
Yes	3	3	

INSPECTION OF UPPER PART OF THE BODY and when indicated: of feet, hands and head	Points	Support of family	Rating
Parasitic diseases	3	3	

BODY TEMPERATURE	Points	Support of family	Rating
> 38°C	3	3	

Assessment

Impairment and support of family	weekly checkup
2 points in one category	daily support needed
3 points in one category	professional assessment or medical examination and - if indicated - professional help / treatment >> Are you able to care for the person in you ETS?

0 until 4 points	no help needed
5 until 8 points	help needed
9 until 12 points	professional help needed

E.   APPENDIX

E.1.1.   References

A Guide for including people with disabilities in disaster preparedness planning, Connecticut Developmental Disabilities Network, 2006
www.ct.gov/ctcdd/lib/ctcdd/guide_final.pdf

Older people in disaster and humanitarian crisis: Guidelines for best practice, HelpAge International
www.globalaging.org/armedconflict/countryreports/haigiudelines.pdf

Guideline Addressing Older Adults - Distinct Psychosocial Issues in Emergency Situations
Seniors and Disasters Synthesis of Four Case Studies
http://www.ccsmh.ca/en/resources/emergencyPreparedness.cfm

NATO guidelines
Psychosocial care for people affected by disasters and major incidents

David Hutton, WHO
Older people in emergencies – Considerations for action and policy development

antwortING Ingenieurbüro Weber Schütte Käser PartG. (2014). *Report on the first peer review workshop, 04.-06-07.2014 Wiesbaden, Topic: Children, Focus: Organizational and requirement challenges.* Cologne, Germany.

Kern, T., & Finkeldei, S. (2014). SAMETS Report *"Coordinated FLOOD / SAMETS meeting Friday 4th to Sunday 6th July 2014.* Wiesbaden, Germany.

E.1.2.   Additional literature

» "Child Friendly Spaces in Emergencies: A Handbook for Save the Children Staff"
» "A Practical Guide for Developing Child Friendly Spaces", UNICEF
» "Guidelines for the design, management and monitoring of play areas", UNICEF
» "Child Friendly Spaces: A Structured Review of the Current Evidence-Base", Worldvision
» "Child Friendly Spaces Facilitator Training Manual", Save The Children

WHO - Older people in emergencies : considerations for action and policy development / David Hutton.

E.1.3.   The SAMETS consortium

National Association of Public Assistance

ANPAS Italy - Coordinator

ANPAS, founded in 1904 in Spoleto, is present in 19 of the 20 nation's regions, and currently representing 869 associations. Involved daily in services ranging from emergency medical care and transportation to social programs, healthcare programs, disaster prevention and relief and civil protection. ANPAS with their 90.000 volunteers (64.000 of them active in Civil Protection) and 400.000 members, is one of the largest volunteer association in Italy

Arbeiter-Samariter-Bund

ASB - Germany

The ASB-Germany was founded in 1888 and is an aid and welfare organization. Its tasks extend from civil protection, emergency medical service as well as first-aid training and humanitarian aid, to a comprehensive range of social services. The basis of the organization are formed by 224 regional branches Around 29.000 full-time employees as well as more than 12.000 volunteers support the ASB. Most are active in the field of civil protection, disaster relief and rescue services.

Arbeiter-Samariter Bund

ASBO – Austria

As an indipendent Austrian humanitarian NGO, the Samaritain Austria - ASBO is one of the major providers of health, rescue and ambulance services, of disaster relief service, care for elderly and persons with disabilities in Austria. With 1541 professional and around 5.300 volunteers (medical doctors, paramedics, and techical experts) ASBO has been active in international Humanitarian Aid since many years.

Asociácia samaritánov Slovenskej republiky

ASSR - Slovakia

ASSR is registered since 2005 as the civic association of volunteers based on the idea of helping people in need, educate volunteers in proper areas especially relating to disaster relief and civil protection.

Since last three years ASSR successfully participated at some international projects resulted in creation of special teams and modules acting in disaster relief operations, or educational project aimed on best practices exchange

Landesrettungsverein Weisses Kreuz onlus White Cross

NPO – Italy South Tyrol

The regional NPO „Landesrettungsverein Weisses Kreuz-onlus" (called White Cross) was founded on August, 10th 1965 The White Cross performs the following services: Rescue service, patient transport services, disaster relief and civil protection activities. With 378 professionals and around 2.700 volunteers the organization is well prepared for the tasks to be fulfilled within a civil protection environment

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