

Welcome to the Remote Field Crisis Management course!

The environments in which staff travel and work present a constant risk of security and safety incidents. The majority of these incidents, should they affect personnel, would normally be dealt with and managed through the existing in-country management structure, with support from the Head Office if required. However, exceptional crisis situations can arise which, due to the nature and severity of the incident or its wider implications for the organisation, are beyond the scope of normal programme management mechanisms or decision-making. As a result of such exceptional events, special coordination and decision-making must be undertaken. Although these events are rare, the successful management of any crisis situation is dependent on the degree of preparedness of the agency, combined with clearly defined roles, responsibilities and communication lines, especially where a coordinated and effective response from many different departments is required.

We hope you find the course enjoyable and informative!

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What is a Crisis?

What is a Critical Incident?

* an event (or series of events) that seriously threatens the welfare of personnel, potentially resulting in death, life-threatening injury or illness.
* an event that does NOT have wider implications for the organisation as a whole and can be managed by regular management structures, with additional support from headquarters if required.

What is a Crisis?

* an event that significantly disrupts normal operations
* has caused or is likely to cause severe distress or have severe consequences for individual staff or organisations
* requires out of ordinary measures to restore order and normality, thus demanding immediate action from senior management.

When does a critical incident become a crisis?

Field (Remote) Crisis Management

CMT

IMT

**FCMT**

HQ

Country Office

**Field Office**

**Crisis Management Team**

* Strategic Decision Making
* Overall Management of Crisis Response

**Incident Management Team**

* Operational Decision Making
* Day to Day Management of Crisis Response

**Field Crisis Management Team**

* Provide Contextual Knowledge for all Decision Making
* Day-to-Day Implementation of Crisis Response

The objectives of all management levels of the crisis management structure are:

* To establish an organised approach
* To centralise decision-making
* To manage and coordinate response
* To provide leadership inside and outside of the organisation.

What do the CMT and the FCMT do?

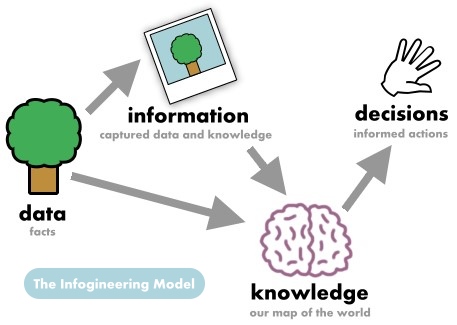
* Show LEADERSHIP!
* Determine **known** facts of incident: What happened? Who, where, when? Who is involved? Impact? Who else is present/near to location? What action has already been taken?
* **Decide** on crisis response: What personnel are required? Where will they be located? Is an EOR required?
* **Assemble** team and **assign** roles and responsibilities (may be virtual team in different locations).

Principles of Remote Field Crisis Management

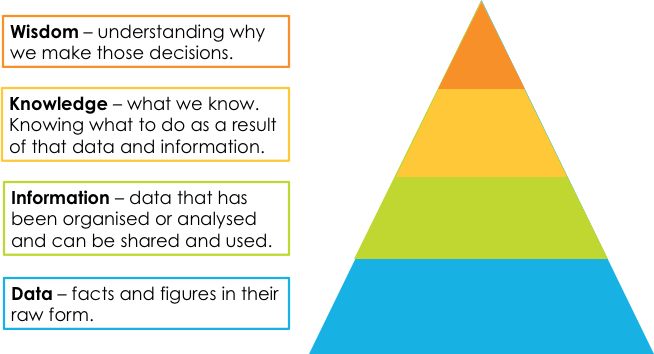
* Be prepared.
* Regain the initiative.
* Manage your time.
* Keep people informed.
* Maintain outward appearances.

The objective of crisis preparedness is to mitigate the impact of an incident. Since the quality of crisis response has potentially significant influence over an incident’s outcome, it should be regarded as fundamental to the humanitarian risk management system.

Security Knowledge and Information



**The DIKW Model**



Working with the Media

A good communications plans should answer all of the following questions:

* Who is our main audience?
* Who handles communications?
* Who acts as spokesperson?
* What is our media strategy?
* Which language/words do we use?
* How do we handle social media?
* Who keeps track of media interviews and monitoring?

A good media story has a CURVE:

**C**ompelling

**U**nique

**R**elevant

**V**isual

**E**motional

Who are the media?

Will you be reactive or proactive?

Reactive

* Protect staff identity
* Protect reputation
* Avoid misperception of security incident
* Correct false statements

Proactive

* Communicate with responsible groups
* Show sympathy and how you act to resolve incident
* Avoid rumors
* Be in control of information
* Be accountable and transparent

Social Media

* Monitoring social media is key
* React if false information goes viral
* Remove social media posts, if necessary
* Be careful what you post: routes of convoys, places of distributions
* Keep login details of staff
* Journalists use social media (Twitter) as a source
* Control and contain – but don’t heat up the discussion.

 [](http://findicons.com/files/icons/524/web_2/128/facebook.png)

Dos and Don’ts

* Never talk to media when the incident has not already been reported about (i.e. don’t be the one ‘breaking’ the news).
* Define whether you want to talk to media or not and if so, which media (i.e. high level, influential media, local media etc.).
* If you talk to media, only give verified information and only confirm information that has already been reported (don’t feed the media with new information that they do not know of)
* Designate a spokesperson and explain who this should be and what they need (talking points, media training, English and Arabic speaker)
* Have designated media focal point and make sure staff know about who is allowed to talk to media
* Talking points and key messages help you speaking to the media
* Don’t speculate, stick to talking points
* Often local journalists know exactly what is happening, use them as a source for more information
* Don’t lie to the media – but ask for their understanding to withhold publishing articles until you can confirm facts etc.
* Ask media for understanding that you can only say so much in order to protect staff and keep privacy of family
* Media training is important Do not say, ‘No comment.’ It always implies that you have to hide something. Avoid the question by using a holding phrase, such as “Please do understand that I can’t give you more information as the safety of our staff is our utmost importance”.
* Prepare media statement in order to correct false allegations or rumours
* Don’t become defensive – be open and explanatory
* Consider what language to use (be aware of differences in translations between Arabic and English)
* Don’t blame groups; stay neutral
* Be aware of revealing full names of affected staff and locations of incidents, never give away details of staff identity without family permission
* Consider how to present your organization (i.e. mentioning funding from US sources or highlighting a focus on women empowerment might be sensitive in some contexts)
* Show/highlight your humanitarian mandate, neutrality etc.
* Avoid giving radio/TV interviews, as they can distort your message or cut your quotes.
* Show sympathy with family
* Keep track of media interviews and monitor media (in all languages)
* Call media to correct false statement
* Good media relations start BEFORE a security incident; building media relations is part of good crisis preparation

Experiential Learning and Role Plays

**Kolb’s Experiential Learning Cycle**

This Learning Cycle provides a helpful simple diagram of the process of experiential learning, which is broadly:

1. Do (something).
2. Review the action or activity in order to deepen learning and understanding.
3. Identify positive performance and negative performance.
4. Develop and implement ideas for improvement.
5. (or 1.) Do again or do a new something else in the next stage of learning.

1. Action or Activity

3. Identify Negatives: Develop Ideas to Improve and Overcome

2. Review to Develop Understanding

3. Identify Positives: Continue with Confidence

4. Select and Apply Improvements

**Tips for Facilitating Role Plays and Simulations**

**Role play** is defined as an experience around a specific situation which contains two or more different viewpoints or perspectives. The situation is usually written as a prepared brief and the different perspectives on the same situation are handed out to the different people who will come together to discuss the situation.

**Simulations** are scenarios where the learner is placed in a "real" world defined by a trainer. They represent a reality within which participants interact. The trainer controls the parameters of this "world" and uses it to achieve the desired instructional results. Participants experience the reality of the scenario and gather learning and improved self-understanding from it.

Always ensure that you exercise caution and sensitivity when using any role playing games or activities which might disturb or upset people. Take extra care when working with younger people and children!

**Objectives**

* Be very clear about what you want people to get out of the role playing or simulation experience.
* Are you assessing skills or are you developing them? If you are assessing people, they need to know the competency level expected of them and the brief needs to have measurable outcomes.

**Role Play and Simulation Briefings**

* Role playing and simulation can become ineffective if people are unclear about what they are supposed to do. The briefs for all sides should be unambiguous and totally in line with the objectives. Be clear about the purpose.
* The briefs should contain enough information for both parties to engage in believable and relevant conversations and interactions, which should be in line with the objectives. Give as much detail as is necessary - too little and there won't be enough to sustain engagement; too much and people will be swamped with information, most of which they either won't need or won't remember.
* Avoid giving people the task of role playing or simulation attitudes alone. If you want somebody to role play an angry customer give them something to be angry about. Well-written briefings will help to keep the session focused and on track.

**Observation and Feedback**

* Arrange for other observers to observe both role plays and simulations. Their feedback forms the foundation for participant learning.
* For the observers, explain clearly what you want them to look out for. Again this should be in line with your objectives. Feedback should be meaningful and specific - something that the role player can act on.

**Don’t Forget!**

**Role plays and simulations requires a sensitive briefing and debriefing process - don’t forget to plan time for this when designing the session. De-role players before debriefing.**

Some content courtesy of AIM Associates Limited ([www.aimass.com](http://www.aimass.com)

Family Support

What is family support?

Providing support to the family of a staff member who is affected by a critical incident.

* Pre-Identification of family support roles
* Try to select individuals who have awareness of what is involved in this role

**BEFORE**

* Someone with good listening and recording skills
* Can you ensure that they are mentally and emotionally fit for this role?
* If the person has a personal relationship with the family, then that’s probably not the right person.
* Guidance: Ensure that they have materials to support their role, and clarity about interacting with the CMT/IMT/FCMT
* Practice (practice, practice): as much as possible
* Build and learn from any real experiences
* Break bad news

**DURINGGGG**

* Keep the family informed
* Provide emotional/psychological support and someone to trust
* Provide financial support?
* Ensure the family is involved in the process
* Keep records
* Be empathetic – not sympathetic
* Provide accompaniment

**AFTER**

* De-brief
* Knowing whom to talk to about the incident – long term
* Managing return to normal duties, where possible
* Understand local coping mechanisms

Dos and Don’ts Of Family Support

* Use simple / understandable language
* Keep notes of everything
* Provide consistency in message and approach
* Ask the family what they want
  + How, what, when
* Have patience (understand the family may be angry with you)
* Pass on all concerns, issues, actions of families to organization
* You can say “I don’t know
* Do not speculate – facts only
* Do not make promises
* Do not say what you think the family want to hear
* Do not get involved in family politics.

How can you prepare for family support?

**Be Empathetic Not Sympathetic**

***by Steve Davis***

Put yourself in the other’s shoes, but don’t walk their path for them

Isn’t Sympathy a Good Thing?

“Oh you poor thing. What happened to you is just terrible! You must feel awful. I wish there was something I could do.”

Do these words sound familiar? Maybe you’ve used them on a friend or relative who suffered a back break, or perhaps you’ve heard them yourself from a well-meaning friend at a time when something went wrong for you.

Words like these are usually expressed by well-meaning people in the form of “sympathy” to someone they care about. But imagine yourself hearing these words right now. How do they make you feel? Loved, cared for, empowered? Or helpless, victimized, and just plain bad?

Though sympathy is a socially acceptable gesture, I suggest that you stop using it and accepting it from others. It doesn’t help you or them. Empathy is a far superior form of expression. Let me explain.

Sympathy or Empathy?

So what’s the difference between sympathy and empathy? Sympathy, while highly valued in our culture, can actually be very disempowering. The sympathetic perspective tends to place you above the other, placing you in a position that might sound something like, “Oh you poor thing, this is just terrible what’s happening to you.” This behavior on your part will actually enable the limited worldview of a person operating from a victim state of mind, and is less likely to help them move to a healthy resolution of their problem.

On the other hand, coming from an empathetic perspective, you understand what the other is feeling but don’t necessarily “go there” with them. Instead, you view them as capable of working through the issue at hand. If you were being empathetic to someone in pain, you might say something like, “I sense that you’re hurting right now. Is there anything you need or any support I can offer to help you through this?”

This stance is one of understanding and one that places the responsibility for getting the necessary help in the hands of the person who needs it. Don’t rescue! Many people play the victim role so that others can play the rescuer role. Give people the opportunity to find the strength they need and you will both gain.

Practice Empathy

Practice using empathy the next time you’re in a situation where someone is suffering emotionally. Assuming this person is an otherwise functional and healthy human being, be present with them in an effort to understand what you might be feeling in a similar situation. Don’t try to have their feelings. Instead, trust that they have the inner resources necessary to solve their problems and to get the help they need to move forward. Let them feel their feelings, express their concerns, and shed their tears. Don’t try to fix anything for them. Just be with them with your heart open and with an inner and outer certainty that their’s is just one perception of their current reality and that they will find strength in your silent witness to their temporary fantasy of limitation.

About the Author:

Steve Davis, M.A., M.S., is an Facilitator's Coach, Infoprenuer, and free-lance human, helping facilitators, organizational leaders, educators, trainers, coaches and consultants present themselves confidently, access their creativity, empower their under-performing groups, enhance their facilitation skills, and build their business online and offline. Subscribe to his free weekly ezine at [www.MasterFacilitatorJournal.com](http://www.MasterFacilitatorJournal.com).

Active Listening

What is active listening?

“Attentive listening to avoid misunderstanding; the practice of paying close attention to a speaker and asking questions to ensure full comprehension.”

“An intent to listen for meaning in which the listener checks with the speaker to see that a statement has been correctly heard and understood.”

Four Components of Active Listening



Types of questions and when to use them

|  |  |  |
| --- | --- | --- |
| **Type of Question** | **When to Use It** | **Examples** |
|  |  |  |
| Open | * To establish rapport | Can you tell me about your role? |
|  | * To gain background information | What approach do you take? |
|  | * To explore ideas/opinions and attitudes | What is your opinion on…? |
|  |  |  |
| Probing | * To show interest | What makes you say that? |
|  | * To dig a bit deeper and explore an issue in more detail | I’m really interested in X, can you tell me more? |
|  | * To show understanding |  |
|  |  |  |
| Reflective | * To check understanding | You seem very happy with things?  So your challenge is managing the team? |
|  | * To explore a topic in more depth |
|  | * To reflect facts and feelings |
|  |  |  |
| Clarifying | * To test understanding | So what you are saying is …? |
|  |  | Can you just clarify the situation? |
|  |  |  |
| Closed | * If you want a clear ‘yes’ or ‘no’ from the other person | Do you know the programme manager of this organization? |
|  | * If you want to check a fact |  |
|  |  |  |
| Multiple | * Never: the person will end up answering the last question you asked and this may take you off track | What do you enjoy about your role? What are you looking forward to and what do you think the biggest challenge will be? |
| **Type of Question** | **When to Use It** | **Examples** |
| Leading | * Never: they can distort the conversation | We are looking for someone who can deal well with stress, how do you rate your ability? |
|  |  |  |
| Rhetorical | * This may be useful in some teaching situations, but generally your aim should be to get the other person to talk and answer the question. | So how do you develop your team? Well there are four things you need to do… |
|  |  |  |
| Hypothetical | * Useful in testing out scenarios and understanding what the other person might do in a certain situation. | What could have happened if you challenged this behaviour earlier? |
|  | * Can be useful in coaching or interviewing |  |

Pam Jones. (2007) *Managing for Performance, Delivering Results Through Other*, Harlow, UK: Pearson Education Limited.

Crisis Management Exercise

**Healthy Communities Profile**

A UK-based NGO specialising in community health programmes and emergency medical care. The country office of HC is based in ***City, Country***, from where it is running its ***Neighbouring Country*** response.

Currently, HC has two clinics running in ***Regional*** governorate and a 15-bed trauma surgery clinic was recently set up in a house in ***City***. It includes an operating theatre, emergency department and resuscitation room. The clinics not only treat the war-wounded but also offer obstetric and other kinds of emergency care, as well as basic health services. As access to health services has worsened, HC has extended its activities to include basic healthcare, vaccinations and maternal care. At the end of the 2013, despite repeated requests, HC still had not received government permission to work in the country.

***Country Office City, Country***

The Incident Management Team (IMT) consists of:

* Country Director: David Jones, is a British citizen who has been working with HC for 3 years and is accompanied by his wife and 2 children.
* Senior Programme Manager and Security Focal Point: Anne Lenny, a UK citizen, has been in post for 10 weeks.
* Human Resources: Adem Telek, from Istanbul and has had international experience with HC in Libya.

***Regional Field Office***

Most of the HC’s work in the region is coordinated from the HC Field Office. The ***City*** clinic has recently resumed running after a year of avoiding travel between ***City*** and ***City*** (***between the Field Office and a nearby city where the non-mobile clinic is located****)* where car-jacking and vehicle attacks were taking place. The programme resumed after a security review; there have been no reported attacks in the last three months.

Staff:

* Area Manager for HC Field Office: Ghayth Nahas, originally from ?? who has worked for HC since 2006.
* Assistant Area Manager for HC Field Office: Sadiq Kuzbari , originally from ?? and is new to HC.
* Logistics Manager: Mahmoud Al Qasem, originally from ??.
* Driver: Mohamed Ahmed Hussein, local from ??.
* Doctor: Dr Jamil Zogheib, originally from ??, but lives in ?? with his Syrian wife and their two children.
* Nurse: Elissar Helal, from ??.
* Nurse: Nour Khoury, from ??.
* Various other temporary and volunteer staff also work with the organisation in all three clinics.

***City clinic***

Staff include a managing doctor, a nurse, a health project officer and a driver. All staff are from the area.

**Healthy Communities, Security Assessment, *Field Country* Programme**

**Context Assessment**

There are a lot of armed groups operating in this area; all opposition groups are represented. The Islamic Front has a big presence; also present are Jabhat Al Nusra, ISIS and numerous FSA groups. There are several ongoing inter-group clashes at present and the area is prone to airstrikes from government forces. In recent weeks, car bombings have become more and more frequent and the general level of operational security in the area is tense and difficult. There is a major, ongoing smuggling operation in the areas where we operate which can at times cause insecurity, particularly at checkpoints inside ***Regional*** Governorate.

The overall increase in conflict and espcially random acts of violence such as car and suicide bombings has also caused the ***neighbouring*** authorities to tighten security. As a result delays are long and frequent at border corssings which can impeded access and egress into ***Field Country***.

**Programme Assessment**

Healthy Communities (HC) established a field office in ***Region***, with activities two mobile health clinics and more permanent, but temporary, clinic in ***City***. These are all currently operated by locally recruited staff:

Acceptance is generally good within the communities. But it is worth mentioning that such ‘acceptance’ does not seem to have much influence in regards to banditry and other criminal activities.

In recent months, donor concerns over programme quality and compliance issues have resulted in a security assessment. This assessment was commissioned to review the viability for staff being based in each area of operations and, ideally, for the regional mobile clinics to be able to travel within the directorate, and for ongoing road access between ***City*** and ***City***.

**Risk Assessment**

The main risks for staff in general are as follows:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Threat** | **Nature** | **Risk** | **Remarks** | **Recommended Mitigation Measures** |
| Ambush | Indirect | Moderate | Wrong Time/Place | Stay abreast of changes in road safety in the region |
| Carjacking | Direct | Moderate | ACGs | Use vehicles rented from local community |
| UXO/IED | Indirect | Moderate | Wrong Time/Place | Never be the first to use the road each day |
| Abduction | Direct | High | Expats | High profile, heavy armed security |
| Extortion | Direct | High | Checkpoints | Negotiate access with community elders |

**Current Standard Operating Procedures**

* Expat visits can be carried out only with updated security briefings in the ***Regional*** governorate and are not guaranteed of happening; ***City*** area is a higher risk due large presence of armed groups and bandits.
* The CMT in ***Country Office or HQ (at whatever level the crisis will be managed from)*** has a functioning Crisis Management Plan and has considered the scenario of an attack or abduction. This is an important mitigation measure as there is an ongoing possibility of criminal gangs or bandits doing both.
* Security training for all staff is planned but not yet completed

|  |  |  |  |
| --- | --- | --- | --- |
| How will I use and develop the skills/ knowledge learnt on the course? | What do I need to do to make this happen? | What or who can help with this? | What is the first thing I can do to get started? |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |

Action Plan

Notes

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