



MEDECINS SANS FRONTIERES
ÄRZTE OHNE GRENZEN

SECURITY MANUAL

1st edition
Geneva - July 2007

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MSF Emergency numbers in Geneva

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When a French version is available it is as well indicated.

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MSF security management reference documents (July 07)

All following documents are available on the attached CD-ROM in English and French.









1. Risk reduction in mission

<p>▶ Risk reduction policy (May 06)</p> <p><i>The main document explaining MSF approach and line of management for preventive security management in mission</i></p>	 "Risk Reduction Policy 22may06 .doc"	 "Politique réduction des risques 22may06"
<p>▶ Logistics and the Risk reduction policy (May 07)</p> <p><i>The articulation between the operation line and logistics regarding security: it includes the role and responsibilities of logistics plus an overview of the MSF standards for the 3 technical pillars of the risk reduction policy: Protective measures / Telecom /Transportation. (In French: only the first part on role and responsibilities)</i></p>	 "Logs & The Risk Reduction Policy May"	 "Logistique et sécurité, rôle&respon"








2. Security guideline

<p>▶ Security guideline form - with annexes (Feb. 07)</p> <p><i>A detailed description of the security management per project: risk analysis, security strategies, rules, procedures and responsibilities. Must be in place in each project.</i></p>	 "secu guideline FORMAT 09FEB07.zip"	 "FORMATS guide de secu 09FEB07.zip"
<p>Contingency plans (examples)</p> <p><i>A list of actions to anticipate MSF team response to an identified generic risk.</i></p>	 "Contingency plans 14May07.doc"	 "Plan de contingence 14Mai07.doc"
<p>▶ Risk analysis explanation document</p>	 "Risk analysis - explanation documen"	 "Analyse des risques - document d'explical"















3. Security and incident reporting

<p>▶ Incident typology (Jan.07)</p> <p><i>A description of the 3 types of incidents and events that need to be systematically reported from field to HQ.</i></p>	 "Incident Typology MSFCH JAN07.doc"	 "typologie d'incidents MSFCH JAN07.doc"
<p>▶ Incident report form (updated Feb.07).</p> <p><i>The form to be used to report security/safety incidents at project/mission level. To be sent to HQ within 24 hours after incident.</i></p>	 "Incident report form Feb07.doc"	 "Formulaire rapport d'incident Feb07.doc"
<p>▶ Sitrep (Jan.07)</p> <p><i>The main info sharing document between field/capital/desk about project implementation, including regular security and context changes.</i></p>	 "Monthly sitrep form.doc"	 "Format du Sitrep mensuel.doc"
<p>▶ Incident logbook form (Apr. 06)</p> <p><i>A tool to monitor all relevant events/incidents linked to security at project level and to be shared with coordination team on agreed frequency.</i></p>	 "Logbook incident form Apr06.xls"	 "formulaire suivi d'incident Avr06.xls"

4. Crisis management

<p>▶ Crisis management protocol (Aug. 06) <i>A detailed protocol, which gives guidance to respond to crisis situation, including the functioning of a crisis cell.</i></p>	 "PROTOCOL CRISIS MANAGEMENT 04AU"	 "Gestion d'une crise sur le terrain 8MAR07"
<p>▶ Field crisis management: what to do when a security incident happens? (Mar. 07) <i>An outline of the key actions to be taken at field level allowing an efficient response when a security incident happens.</i></p>	 "Field crisis management 8MAR07"	 "Protocole gestion d'une crise aout06 .d"
<p>▶ Briefing procedure Kidnapping (DRC & Somalia) <i>Specific briefing procedure before departure around kidnapping risks in 2 specifics projects .</i></p>	 "procedure briefing kidnapping 10Nov06."	
<p>▶ Stress Prevention And Management (SPAM) <i>A general overview of the SPAM, who to contact, what to do when the team is facing traumatic stress...</i></p>	 "Stress management policy avril07.doc"	 "Politique de gestion du stress avril07 .doc"

5. Other issues related to security management

<p>▶ Cash management (Nov. 06) <i>The golden rules of cash management in mission.</i></p>	 "Cash management (extract admin guide)"	 "gestion du cash (guideline admin FR I"
<p>▶ Preparation plan for medical assistance of MSF staff victim of serious medical situation in the missions (draft July 07) ▶ Repatriation procedure synoptic table (updated 2006) ▶ Repatriation procedure (updated 2006) ▶ Sanitary repatriation procedure (updated 2006)</p> <p><i>Tools to explain actions to be taken in order to medically assist or evacuate MSF staff for medical reasons.</i></p>	 "medical assistance procedure 19Jul07.dc"	 "procedure assistance médicale 1"
	 "Repatriation Synoptic table 2007.c"	 "Tableau synoptique sur le rapatriement 2"
	 "Repatriation procedure 2007.doc"	 "Rapatriement sanitaire SOS interna"
	 "Sanitary repatriation procedur"	 "Procédure complète de rapatriement sanit"
<p>▶ Conduct whilst on mission (June 06) ▶ Basic principles of conduct (June 06)</p> <p><i>A Summary of MSF conduct and behavior policy on mission, and the document volunteers signed before departure.</i></p>	 "MSF-CH – Conduct whilst on mission.doc"	 "Comportement MSF CH document de synl"
	 "Basic principles of conduct Jun06.doc"	 "Comportement principes fondamenta"

6. MSF security presentation: PowerPoint documents (English only)

▶ Risk reduction policy
▶ The role of Logistic within the Risk reduction policy
▶ New security guideline and framework of security documents
▶ How to perform a threat and risk analysis
▶ Analysis and statistics about the MSF-CH 2006 security incidents
▶ Protocol how to handle crisis in mission
▶ Stress prevention and management
▶ Cash management in mission
▶ Attitude and security
▶ Introduction to landmines

Introduction:

This manual is the result of the work done to improve our security management on the field. This first edition was realised within the frame of the “security project” from January 2006 till June 2007.

This manual is written first for those who are responsible for the management of the security both in mission and in headquarter: the field coordinators, heads of mission and program responsables. It aims to provide a common understanding of what means security management within the Swiss section and to give a comprehensive understanding of what the organisation is expecting from them at this level. Finally it should provide them with guidance, thru the presentation of policies and practical tools, to ensure that they properly manage their own security, the ones of their team and of the assets of the organisation.

It is also written for those who have specific security tasks in mission, such as the other members of the coordination teams, or those who are regularly confronted to dangerous situation such as the emergency coordinators, or any of our staff working in conflict or violent area.

How to use the manual?

The manual is structured in a logical way. It is addressing first the preventive part of security management, then the response to security and safety incident and finally specific and related issues to security management.

Chapter 1 should be fully read since it presents the principles of MSF preventive approach of security, including a clear definition of the security responsibilities in mission.

Chapter 2 is providing a format and some tools to draft the security guideline, an essential document at mission and project level.

Chapter 3 is addressing the issue of security information sharing in mission, with a specific attention given to security incident reporting.

Chapter 4 is providing tools and guidance about crisis management when a security incident occurs.

Chapter 5 is more a compilation of already existing MSF documents which have a direct link with security management, such as cash management, conduct in mission and medical evacuation following a security incident or an accidental hazard.

Electronic version of the documents on the CD-ROM

A CD-ROM is attached to the manual. You will find the electronic versions of each of the document and tools, divided in chapters. They can then be easily accessible to be used at mission level.

The easiest way to do so, is to open the word document named "MSF SECURITY REFERENCE LIST.doc" which provides a direct link to each document.

Not all security documents are available in French, but the existing ones are on the CD-ROM.

In addition to the manual, you will find on the CD-ROM a series of power-point presentations, which can be used for training purpose, related to the various chapters of the guide.

Chapter 1:

RISK REDUCTION IN MISSION

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Introduction:

The risk reduction policy is the main document explaining MSF approach and line of decision for preventive security management in mission.

It is complemented by:

- An overview of the MSF standards and practices applying to the 3 technical pillars of the risk reduction policy: Protective measures & identification, Telecommunication and Transportation.
- A clarification of the articulation between logistics and the operation management hierarchy regarding security management

On the CD-ROM: SECU REFERENCE DOC\ 01 Risk Reduction Policy \...

→ Risk Reduction Policy 22may06 .doc

Exists in FRENCH!

→ Logistics and risk reduction\ Technical security standards May07.doc

→ Logistics and risk reduction\ Logs & The Risk Reduction Policy 5Jan07.doc

Exists in FRENCH!

Risk Reduction Policy

version May 2006

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1. Introduction

The action and presence of MSF in emergency or crisis situations is formulated in the charter. This is a self-given mandate, it is not internationally recognized and does not provide us any official protection. The charter states the general framework for the volunteers, the risks and the accountability of the organisation in this respect:

“As volunteers, members understand the risks and dangers of the missions they carry out and make no claim for themselves or their assigns for any form of compensation other than that which the association might be able to afford them”.

Similarly the “la Mancha Agreement”¹ reworked the point on safety and security of field staff and the role of MSF as an organisation highlighting the principle of acceptance, the context of intervention and individual responsibility:

- Recognizing the inherent risk in carrying out our work, we are committed to reducing this risk, principally by promoting the acceptance of our presence and action as an impartial humanitarian organization.
- MSF intervenes by choice, not obligation or conscription, and may not be present in all crises especially when targeted threats against aid workers exist.
- MSF will not encourage individuals to take more risks than the organization is prepared to assume.

Whether in a situation of armed conflict, internal violence or unstable contexts, danger is characteristic of MSF working environment. The purpose of MSF security management is to enable

¹ Document dated 24 March 2006, articles 1.10, 1.11 and 1.12

the provision of humanitarian assistance in such contexts while minimizing the risk of violence and harm faced by MSF's staff².

Our operational goals and our aspiration to stand by the victims should therefore take into account the responsibilities we have towards the security of our personnel and subsequent impact security incidents may have on our action even limiting our further access to populations we want to assist. We are obliged to weigh every operation against the risks it involves and decide on the limits of our action: under certain circumstances we simply refrain from intervening³.

Our conception of security and risk reduction has to go beyond the implementation of mere security rules. Our understanding of the general context of operations (context analysis) and of the changing risks and threats faced by the teams (risk analysis), and our vigilance to keep this understanding alive in the lifetime of the mission are paramount to our safety. Other key point is our ability to respect the local environment and people, and to listen and communicate with all the actors.

Risk reduction is also a function of "what" and "how" MSF does and says and of our ability to project a stable and coherent image: In all circumstances, the MSF must be mindful of how it is perceived and accepted⁴, of the image projected by its work as well as the private and professional conduct of its staff.

2. The MSF pillars of risk reduction

The 8 pillars described below are the principles with which MSF wants to pursue and inculcate its security culture and state of mind in the field. The manner in which the pillars are synthesized will enable us to approach and analyse a given context, to set up and revise our risk reduction strategy.

They are inherently interconnected and complementary to one another. The importance assigned to each of the pillars will thus vary according to the type of threat encountered and the type of context of operation but all the pillars have to be worked out. Within the same mission, their weight and importance must be reviewed with the changes of context of intervention and of dangers teams are facing⁵.

2.1. Acceptance of MSF

Acceptance is the major principle adopted by MSF in its risk reduction policy; acceptance of the organisation and its work is fundamental in the majority of our missions constantly confronted with armed conflicts and internal violence.

The knowledge and the understanding of the MSF mission, its objectives, its guiding principles (impartiality, neutrality, independence) and its limits⁶, by the national and international personnel is a second premise. They will be the ones to work for the acceptance⁷ of the MSF mission with all external actors in a given environment.

² Although there is no zero risk situation our willingness and rigour in reducing the risks is essential.

³ It is also important to consider such limit of action in the case of remote-control activities, where national staff should not be exposed to a level of risk that the organisation cannot assume.

⁴ It is often possible that our assistance is seen as partial or contrary to the interest of some warring factions or of political economic interest groups adding up to the risks MSF teams face in the field.

⁵ Notably, the pillars are also analytical tools to analyse the reason a security incident in the field and to help to review rules and regulation to apply in a given mission.

⁶ Country policy papers, Plan of Action are some of the documents that define the mission of MSF in a given context.

⁷ As a first step, the acceptance concept and its relationship with security has to be explained to the teams.

And finally the acceptance and perception of MSF mission by the external actors is the bulk of the work to achieve by all MSF members.

- Acceptance by direct stakeholders, whether administrative, medical, or local, national authorities, humanitarian partners and other intervening actors is one level inscribed into the program functioning.
- Yet acceptance by our patients and the community we work with and live in, how the population in general and especially the non-beneficiaries perceive us necessitate a constant attention and analysis by the MSF teams.
- Acceptance by the parties to a conflict is primordial in conflict situation. They will accept the MSF presence and working procedures only if they understand the purpose of its medical activities and its role, in particular its status of independency and impartiality. But we must be mindful that full acceptance may not be achieved as our action may be in contradiction to their interests.

Establishing a relationship of trust is fundamental for being accepted. Acceptance is not something automatically given nor we can impose. It is constructed over time through a relevant and pertinent action on the field, and the building up of a dialogue and of a coherent MSF image that the individual members of MSF work out. Poor understanding of the context and cultural signs as well as inappropriate private or professional conduct can put the acceptance and the work of MSF at serious risk.

2.2. Relationship with the environment

Here we will treat what we mean by the environment in its broadest sense, involving all the constituents in reference to humanitarian, political, military, medical, civil, social-cultural, economic environment at local, regional, national, and international levels.

At all of the above levels MSF has to be able to identify the actors, their assumed interests, their relationship to each other and how they can effect, either positively or negatively, on the security environment in which MSF is operating⁸. The mapping of the actors will help to develop our own analysis on the environment.

This analysis should in turn permit MSF to develop our own position and an adapted policy for acceptance. It will help us to decide on the type of contacts to establish, type of information exchange, and the level of relationship we want to build with each one of these actors whether partnership, cooperation, distantiating or differentiation⁹.

If “what changes in the environment that MSF operates” is one question to tackle, the other question is “how MSF contributes to the changes in this environment” sometimes simply by our presence but also as a result of our actions. Awareness of the environment is combined with the awareness on the consequences of our actions¹⁰.

Relationships of quality with the key actors constituting the environment helps to understand the contextual stakes in which MSF operates, to monitor the impact and the perception of MSF presence, as well as to be known, understood and accepted by others.

It is important to remember that these relationships are not static. In a dynamic and shifting environment it is vital to continually monitor the different actors and their relationships as they develop over time.

⁸ It should be taken into consideration to some extent at the stages of conceptualisation of the program.

⁹ In some circumstances, formalised agreements such as the Memorandum of Understanding are important because they could ensure official recognition and an explicit reference framework. However written agreements do not have the same value in all communities, where the word of honour bears more importance.

¹⁰ Often, humanitarian interventions have an impact on the existing social-political-economic context, through the amount of aid brought into a country or the distribution strategies.

The formal, informal, bilateral meetings, organisation of seminars and workshops, distribution of leaflets etc are some of the activities we can pursue in raising awareness on MSF action and establishing strong bonds with the existing networks.

Whatever is the level of relatedness though, respect and diplomacy in explaining the role and the mission of MSF should be the guiding attitude. The MSF staff should be equipped with a clear understanding of the values, the mandate and the mission of our organisation and the appropriate ways to communicate it to third parties.

2.3. Information & risk analysis

Information gathering and its treatment is the key for a thorough analysis of the risks. The diversity and quality of the sources of information are fundamental in gathering information. Questioning the quality of this information¹¹, cross checking, centralising, distinguishing the rumours from the fact and prioritising is about how we treat the information. Its proper and timely treatment will ultimately contribute to identify the risk indicators that are particular events that should indicate changes in the risk level and therefore the level of danger posed to staff safety.

As mentioned above, contacts we establish in relation to our environment constitute our first-degree informants¹². The follow-up of medias (press, internet and radio) is another source. The globalised nature of some contemporary threats to humanitarian action and the regional political economy of the conflicts and banditry necessitate that our sources of information and our analysis reach beyond the national boundaries of our intervention context¹³.

All field personnel, whether expatriate or national, must acquire the reflex to collect and pass information on security matters. They must be especially alert to detect signs that mark a deterioration of the situation¹⁴.

In the process of information gathering, the active role of the national staff should be emphasised as they know the cultural codes and are informed of the events in their surrounding. National staff is one of the most valuable sources of information and their participation to the gathering of information and to its analysis has to be reinforced while keeping in mind that it is only one of the sources¹⁵.

In some locations, gathering information is very sensitive, can even be perceived as an act of spying by some of the informants. Therefore it is important, on one hand that staff are aware of the dangers involved in gathering information, and on the other hand to do it in a way that induces a sense of confidence by always providing first information about our project and our medical activities.

¹¹ Relevant information refers to their “informative value”, preciseness and authenticity.

¹² Informal networking / coordination and briefing meetings / centralised security information systems are 3 layers of such information source.

¹³ The MSF intersection channels of information flow have to be reinforced between HoM at regional level. The Headquarter and the PR have to feed the missions with intersectional information as well as the contacts they develop with other organisation’s headquarters.

¹⁴ There must be clear instructions on who informs who and how, the type, frequency and ways of sharing information. Verbal communication on security matters whether informative or decisional has to be documented in a written form.

¹⁵ Our national personnel understand and speak the vernacular language, they know social codes and behaviour; they can listen and better understand the implicit messages. On the other hand the national staff makes part of the particular community they live in, hence they may not be enough distantiated to have an objective view. In constant violence environments their threshold of dangers may differ, as violence becomes part of their normal life. In contexts of ethnic conflict special attention has to be given to the diversity of the sources among national staff.

Tracking and mapping of the security incidents will help us to depict the configuration of the risks and threats and the changing patterns over time. As part of a more detailed context analysis, the mapping of incidents is useful to visualise the geographical areas affected - or likely to be affected - by conflict, violence and crime.

The context and risk analysis exercises aim at identifying and ranking the most prominent risks faced by the teams in the course of their activities¹⁶. They are worked out in each project, on a continuous basis, at field level, and are to be regularly passed to the Programme Responsible at headquarter¹⁷. Discussion and a shared understanding of the situation do enrich our analysis and the pertinence of the decisions we take.

To ensure the quality of communication is the responsibility of everyone in a mission. Clear and timely transmission of information to the responsible (FC/HoM/PR) is essential. The coordinators will treat and centralise the information, create the grounds for participative analysis and its further dissemination as well as taking the appropriate measures and decisions.

The attitude of the persons is once again crucial in gathering and treating the information, such as empathy, listening, and attentiveness to cultural aspects and risks that it may endanger. Transparency and discretion has to be put in balance and the confidentiality of the sources respected in gathering and treating the information.

2.4. The security rules and procedures

Procedures aim at reducing the exposure of the teams to identified risks linked with our activities (such as limiting cash transfers, making sure that personnel stay out of no-go areas, or prohibiting travel by road where there may be landmines or frequent armed robbery, etc). The security guideline centralises those rules, procedures and responsibilities. It is an essential tool which attempts to prevent as much as possible security incidents to occur.

Secondly it prepares the teams to respond to an incident. The ultimate aim is to reduce the damages that individuals or the teams may undergo as a consequence of an incident if it nevertheless occurs (medical evacuation, insurance, emotional debriefing, etc.)

The security guideline is specific to each context of intervention¹⁸. It is drawn up by the coordination team who is also responsible for ensuring its compliance, and it must be continuously reviewed in the light of the situation¹⁹.

Rules and procedures must be developed taking into consideration local laws and regulations; they have to be clear, complete but as brief as possible, and written in a language known to all.

In contexts where several MSF sections intervene, it is important that the security rules for each MSF section does not incorporate contradictory elements and are harmoniously implemented. It is the role of the HoMs to ensure such agreement based on continuous communication and shared situation analysis.

Rules have no preventive value by themselves. They are fictitious unless they are implemented, thus once again emphasizing the role of the “persons” in link to this pillar. All MSF staff is obliged to strictly follow all security instructions during their time of employment to avoid unnecessary risks and prevent behaviour which brings themselves or the mission in danger²⁰.

¹⁶ Based notably on historical records of incidents linked to conflict, urban violence, or safety issues such as car accidents, etc.

¹⁷ Context and risk analysis exercise should be reported on a yearly basis in the security guideline.

¹⁸ This document has to provide context and risk analysis leading to related prevention strategies.

¹⁹ Some attention has to be paid to clarify the security rules for the families of the expatriates and the national staff delocalised by MSF, especially in case of evacuations.

²⁰ Trespassing or breaching of these rules may result in immediate repatriation and/or termination of contract. Besides, it may result in a limited liability for MSF in case of damage, injury or loss of life due to negligence or lack of observation of the rules.

2.5. Protective measures & MSF identification

As stated above, acceptance is the main strategy chosen by MSF to base its risk reduction policy. However, it is not the only one and it is always used in combination with protective measures in order to be prepared against all types of threats. For instance, in contexts where organised crime and banditry prevails or criminality rates are high the protection strategies will be reinforced as it is more suitable to the dangers we face.

By active (such as guards) and passive measures (such as reinforced buildings, protective walls, alarm system), MSF will increase the protection of working and living places thus increasing the security of its staff, buildings, infrastructure and operations.

As the protection aims at reducing our exposure to threats and render difficult acts of intrusion for the perpetrators, these measures cover a wide spectrum of reflection. They range from the choice of the location and type of our office and housing selection²¹, to barriers, shelters, safe rooms, lightning, garden areas, fire protection and response, anti-blast protection for windows, sandbag barricades etc.

None of these measures, however, is an absolute guarantee of security should the situation worsen.

Although none of the humanitarian actors including MSF are “per se” protected because of their mandate, the identification of the organisation could in some circumstances produce certain positive results²².

The means of ensuring visual identification are many and should be used systematically in the course of our activities within insecure environment: badges, T-shirts and jackets, flags and stickers of various sizes, painted signs on buildings and office. Their use is limited to project sites and the duration of activities.

However, in case of criminal and banditry activities the visibility aspect should be avoided. In such situation, vulnerability becomes a risk factor and personnel must maintain a discreet presence, reducing the predictability of MSF movements and making sure that it becomes harder to target us by adopting protective measures²³.

2.6. Telecommunications

Effective telecommunication equipment and networks are a key component of security in the field. The material itself is no guarantee of safety, but it plays an important role in gathering and transmitting information and notifications, monitoring the movements in the field, alerting others on deteriorations in the situation, and dealing with any crisis that may arise. Thus it is one of the major means we use to prevent and reduce the risks.

Today MSF can choose from a wide range of technological telecommunication means: HF and VHF radio systems, fixed and mobile telephones, satellites and computer networks etc²⁴. The choice of the system and to have back-up systems is important. Their effective combination should ensure uninterrupted communication means.

²¹ MSF premises should be located far from official buildings and military premises, in buildings that are not in an exposed position and that are solidly built.

²² However, in case of indiscriminate attacks, in particular against the civilian population, MSF is no longer protected by its humanitarian status and identification.

²³ However, such measures should not diminish the perception of danger and vulnerability (e.g. not closing the premises doors because there is a guard).

²⁴ The use of telecommunication equipment is subject to national and international regulations. In most countries, it is imperative to obtain a licence and a frequency allocation.

Training on the use of communication devices should not be underestimated and should be regularly organised at headquarters and field levels. The other aspect is to know the procedures of communication, the type of messages we can and cannot pass using a communication system.

Every user must bear in mind that any communication, whether work-related or private, may be intercepted and listened. The safety of the systems is only a matter of degree; no system offers an absolute guarantee of confidentiality. The civilian and military authorities are usually able to monitor MSF communications. For the same reason the local authorities and armed groups view sometimes these means of telecommunication with suspicion.

2.7. Transportation

In all our missions, responsible use, management and maintenance of vehicles is not only necessary for effective and cost-efficient use of transport resources, it is also a vital component of staff security and safety.

All vehicles operating in the field should be mechanically sound and properly equipped. It is important that vehicles are regularly serviced and maintained to ensure reliability and minimising breakdowns.

In both secure and insecure areas, vehicles safety is a basic principle that should be adhered to by all staff. The guidelines should cover safety driving procedures and pre-conditions for driving.

All staff should have a clear understanding of the MSF position on issues such as who is permitted to drive, carrying of non-MSF personnel and weapons in the vehicle, the use of MSF vehicles in case of evacuation or during non-working hours. It is particularly important to define the role and responsibilities of drivers in relation to vehicles and movement procedure. These must be clearly communicated, briefings and trainings have to be regularised.

The organisation of the field trips is an issue in itself. Preparation and planning is the key to safe and secure field trips and may avoid security incidents while travelling²⁵. It is also important to make a brief analysis after field trips with all the participants, to discuss the problems and risks encountered so as to ameliorate the preventive measures and attitudes to adopt

2.8. Personality and Attitude

Although this pillar appears at the end it is not the less important. On the contrary persons' attitude and behaviour are at the source of most of the security issues in missions. MSF credibility and acceptance is also a function of the accountability and action of each individual representing the organisation.

Personal image we give to the outside world, external appearance and our individual behaviour are elementary in all the relationships we establish²⁶. While maintaining personal and operational relationships, respect has to guide our behaviour if we want to be respected.

Another important factor is the staff's understanding of the culture in which they are working. If they are familiar with the local language, values and socio-cultural customs and rules as well as gender issues, they can act in a consistent manner with their environment²⁷.

²⁵ When planning a journey it is important to consider the following: to know the area, study the route, check and prepare vehicles, necessary security documentation, communication means, contingency plans, etc. In specific contexts, the collect of information and establishment of necessary contacts prior to and during a field journey are part of the preparation.

²⁶ A substantial part of the communication is established on visual basis, on the codes of our body language. People tend to remember as much how we behave and how we say things than what we say.

All national and international staff should avoid patronising attitudes, any abuse of their power vis à vis the population, their colleagues and on the usage of MSF material and premises. The “Code of Conduct”, a document international staff signs, is an integral part of the risk reduction framework. The application of those rules should be enlarged to every MSF national staff.

The security of MSF personnel, the safety of its properties and the proper implementation of its activities depend to a large extent on the personal attributes of each staff member. The qualities we have to praise are professional competencies and a developed sense of responsibility. Respect, compassion and solidarity should always be displayed in internal and external relations.

It is the responsibility of each staff member to maintain personal well-being and to keep a healthy routine in the field. Every personnel, and those in positions of hierarchy in particular, should foster a climate of trust in the mission, talking into account one’s concerns and emotions, in a spirit of openness and tolerance. In the long run it is always the best way to strengthen team spirit, and stimulate an individual sense of responsibility.

The capacity of properly reacting to a situation of crisis depends on our ability to maintain self-control and to manage fear and stress. Some staff members nevertheless experience fear, despair or premonitions of death. In the face of danger, these reactions are common and they can play a useful role in alerting us to and regulating our stress, just as they can precipitate inappropriate behaviour. If they are ignored and suppressed, they lead to unnecessary risks taking. It is equally dangerous to be overconfident and to think that one is able to manage all the risks by him/herself.

We should also take into account “internal conflicts” which occur too often in our missions, leading to inappropriate relationships within the team, unprofessional and sometimes violent behaviour. This kind of conflict situations is detrimental to the people, to the climate of solidarity and to the proper implementation of security management²⁸.

3. Implementation of the Risk Reduction Concept

3.1 Roles and Responsibilities:

The management of security is an integral part of planning and conducting operations. It falls therefore under the jurisdiction of the operational line to make decisions and to assume responsibilities. It means that the security management responsibilities lies on the Programme Responsible (PR) at headquarter level, on the HoM at country level and on the Field Coordinator (FC) at project level²⁹, the director of operation being the overall responsible for all security issues in all missions.

It allows the field to make day-to-day decisions, based notably on security issues, but within an agreed operational framework (defined in the country policy paper and annual plan of action) and within an agreed risk situation (defined in the security guideline) and ensuring proper discussion and decision-making process. Such functioning, based on clear individual and professional responsibilities, allows the organisation to collectively assume operational decisions, especially when there is an element of risk³⁰.

3.1.1. In the Mission and in the Field

²⁷ When the environment we are working may seem to permit acts of misconduct, MSF personnel should not consider it as acceptable acts or part of the local culture.

²⁸ In difficult security context and if there is no possibility to solve it quickly, it is better that the parties involved be replaced or put apart.

²⁹ In case disagreements arise at any of the levels in the decisional line, the upper level in the hierarchy is able to invalidate decisions taken only in favour of a more cautious position. This disagreement is then solved by bringing it up to one upper level (from FC -> HOM -> PR -> DO -> GD).

³⁰ See footnote 20 for limitation of responsibility.

Both HOM and FC should be able to create a synergy and team spirit and develop a great sense of responsibility among their colleagues and subordinates, including compliance to the security procedures. In addition to routine information share on context and risk analysis, specific security issues or particular threats in a given time must be shared among all team members³¹. The support and active involvement of the coordination team composed of medical, logistic and administrative coordinators, are also important for these tasks.

Day to day activities in a well-established and known context should be carried out according to the plans, under the responsibility and guidance of the coordination team. In case new activities are to be implemented or any substantial contextual changes that may have security implications arise, the coordination team with the PR should come up with a common decision. Any decision to change (either increase or decrease) risk levels must be informed in writing to the Program Responsible. Similarly, any incident putting in question the security of the team must be reported, first orally and then in writing, in the shortest possible time along the line.

The HoM can delegate part of the day-to-day security management tasks to the logistic coordinator³², but the responsibility itself cannot be delegated. The HoM and the FC should also designate a replacement³³ in their absence and make clear the division of tasks between the responsibilities on decision-making and the daily management of the security.

All team members have the duty to participate to the activities related to assessing the security environment including information collection, relationships with the environment, drawing of the security procedure and guidelines and ensuring their proper implementation. Competent senior national staff has to be systematically part of the processes together with the coordination team to reunite information, balance the different priorities and risks and ensure the decisions are taken and applied.

3.1.2. At Head Quarter Level

Risk reduction and security management responsibility lies on the Programme Responsible who approves the decisions taken by field teams. He orients and approves all documents related to the management of risk reduction (context and risk analysis, security guidelines and procedures etc.). The PR has to involve the other desk members into the reflection and approval process. Similarly, he/she must inform in time the DO about all security incident involving MSF personnel.

He/she also has the responsibility to relay with the headquarters of other MSF sections and other international organisations in order to feed the field with additional information and help analyse the situation, especially from the regional and global points of views.

The Director of Operations bears ultimate overall responsibility for the conduct and management of all operations on the field, and therefore for the security. The General Director and the board of the Association are regularly informed of changes in operational context and are asked to participate on institutional decisions.

3.1.3. Information exchange on security issues between field and headquarter

As mentioned earlier, gathering and analysis of qualitative information together with its timely transmission within the line between field and headquarter is essential to ensure a proper management of risk reduction, but also of security incidents.

³¹ Only when people are aware of concrete dangers faced, that they will be able to take a decision for themselves to either stay or leave the mission.

³² The logistic coordinators has in any case an essential role in security management: follow-up of technical issues (radio, car management, ...) and drafting procedures.

³³ Such delegation has to be made in a way that all team members are properly informed and the position of the person legitimised.

Unfolding of normal activities

In the course of the mission activities, the sharing and reporting of security information is mainly done through 2 documents, the “situation report” (or “sitrep”) and the “incidents logbook”. The latter is done at field level, allowing to have a chronological recording of the main security incidents in our area of activities³⁴.

Specific security update and information about critical incidents

When some important changes in the context of intervention are happening, the information needs to be shared in a more rapid manner. Specifically, when a critical security incident occurs in which MSF is directly involved³⁵, the HOM must inform the PR in the shortest possible time, using an “incident report form”³⁶.

In turn, the RP has the obligation to report the event immediately to the OD.

3.2 Recruitment, Training, Briefing, Evaluations

The implementation of clear and transparent human resources policy is important for security management. From the moment MSF recruits staff (national or international) until it terminates contracts, security awareness and its management need to be addressed³⁷.

Providing briefings, trainings and coaching is a key vector to inculcate permanent awareness of risks, to ensure consistency of security measures and to provide each individual with the necessary knowledge, skills and adapted behaviour.

The ultimate goal is to improve security arrangements, while drawing each individual's attention to the limits of the MSF mandate and prevent taking risks that would overstep those limits.

3.3 Risk reduction and Témoignage - Advocacy

Besides the provision of medical aid, the organisation and its volunteers commit themselves to bear witness to the situation of populations in danger. Such type of “témoignage” activities (bearing witness, advocacy, or lobbying) may also carry risks, putting in danger the people we want to help, the MSF staff or the MSF action itself.

Therefore, and as stated in the MSF-CH “témoignage” concept paper³⁸, “before to start up a “témoignage” effort, it is necessary, at the field level as at the HQ, that a risk analysis is performed. From its conclusions the balance can be done between the supposed risks and the benefits of the action. This is a case-by-case decision process”.

Although the Field coordinator and the Head of Mission are the pioneers of this activity, the general positioning of MSF has to be known and regularly communicated to the staff.

³⁴ Sitrep and incident logbook are usually exchanged on a weekly basis from the field to the capital team, and on a monthly basis from mission to Geneva.

³⁵ Examples of security events/incidents:

- An accident leading to death or physical harm within the team;
- All forms of violence or criminal act demonstrated against team members, against MSF patients/beneficiaries within MSF premises or against MSF premises (kidnapping, arrest, direct threats, assault, rape, forced entry, armed robbery, etc.)
- A situation in which a team finds itself blocked in a highly insecure zone without any means of evacuation;
- All contextual change leading to an evacuation of MSF team.
- Similar incidents targeting other MSF sections in the same locations where MSF-CH operates.

³⁶ In a first stage, the HOM will inform Geneva orally (first the PR directly, or via the on-call system, or directly the DO if the PR is not reachable). The HOM is requested to confirm the incident in writing within few hours. See the MSF-CH “Crisis Management Protocol” for more information

³⁷ Notably, the termination of contracts and the closure of programs or missions deserves special attention.

³⁸ Final version by Reflection Unit on Humanitarian Stakes and Practices, 28.04.2006

In the case of a public advocacy statement or denunciation “témoignage”, this involves a more interactive consultation and agreement process between the mission and the headquarter (the Programme Responsible and the Operational Director) in assessing the risks and possible security implications including those on other MSF sections if present.

In case of disagreement between the field and the headquarter MSF as organisation holds the right to advocate but must allow time for dissenting staff including national staff to withdraw from the project, prior to the act of “témoignage”.

THE LOGISTICS WITHIN THE RISK REDUCTION POLICY

May 2007

I- The Risk Reduction Policy: The Role and Responsibilities of Logistics

Our risk reduction policy is clear on the allocation of responsibility relating to security management: **it lies with the Programme Manager in headquarters, the Heads of Mission at country level and Project Coordinators at project level.**

As logistics play a specific role in security management, it is useful to clarify their articulation with the operational hierarchy.

A- Role and responsibilities of a Logistics Coordinator in the risk reduction management of a mission

The LogCo has responsibilities at 3 levels in the domain of security management:

- As the person in charge of logistics, he has direct responsibility for the technical aspects of the risk reduction policy: transport, communication, protection, identification, and elaboration of the technical part of the security guideline and the evacuation plan.
- As a member of the coordination team, he actively ensures that security constraints are taken into consideration in projects and the mission.
- As a member of an MSF team (and as is the case for everyone), he has an individual responsibility for his attitude whilst on mission, his professionalism in his work and the collection and transmission of information concerning the security situation to the HoM. He knows and applies MSF CH's risk reduction policy.

Note: In order for the LogCo to assume his responsibilities, it is important that the HOM maintains a high level of security information within the coordination team.

1. Technical management of risk reduction (linked to technical means)

Transport and communication

- The LogCo proposes means and rules for the use of transport and communication for each project. The HoM validates his propositions.
- In sensitive contexts, it is the HoM who authorises movements in the mission (red light – green light).
- The technical and organisational feasibility of security rules need to be assured according to the missions' means/resources.
- International and national staff require training on the application and understanding of rules.
- The implementation and application of rules need to be assured, with the HoM alerted if there is a problem.
- The LogCo has responsibility for the correct use, upkeep and renewal of material.

Protection, identification:

- The LogCo proposes protection levels and identification of the different sites in MSF's projects to the HoM. Once the propositions are validated, the LogCo is responsible for their implementation. Idem for the identification of staff (international and national).
- The LogCo is responsible for the policies concerning "safety issues" (fire and electricity protection, ensuring access, etc) for all project sites (house, stock, pharmacy, clinics, etc).

Security Guideline:

- The rules outlined above require re-transcription into a security guideline and “contingency plan” for missions/projects. This is an essential document, particularly for evacuation plans (identification of different evacuation routes, management of radio/logistics material, etc...).

2. Other LogCo functions in the management of risk reduction

- During the definition and implementation of projects, the LogCo, along with the HoM/FieldCo, actively ensures that security is taken into consideration by implementing a risk prevention framework and providing the necessary means for its application.
- The LogCo acts as a backup during the absence of the HoM, unless he is not the best person for such a role. This requires validation by the Programme Responsible in Geneva (idem for projects: the Logistician can act as backup for a FieldCo, which requires validation by the HoM).
- As a member of the coordination team, and over and above his technical management role, the LogCo:
 - Assists the HoM in the implementation, the follow-up and application of a security framework in the mission (risk analysis, contact network, information collection).
 - Aided by national staff under his supervision (especially drivers) and his contact network (suppliers, etc), creates a favourable environment for improved security management: information exchange, the assumption of responsibility, a listening ear (especially when staff are ill at ease about a particular trip, etc)

B-. Specific role of the RLO (Responsible of Operational Logistics in Geneva) in the risk reduction policy

- As a member of the extended desk team, the RLO participates in the implementation of security management in the different missions and participates in the follow-up and analysis of security contexts via his close links with LogCos. He assumes collective responsibility with other members of his desk for the risks incurred by teams in our missions. He therefore receives regular information from the Programme Responsible (PR) concerning evolution of the security situation.
- The desk (PR/deputy PR) delegates specific responsibility for technical security management to him (transport, telecommunications, protection, etc), along with the LogCos. He systematically draws the desk’s attention to dysfunctions in and the inadequacy of means made available for security rules, or to the non-application of these rules. He proposes solutions to the problems and has them validated by the PR.
- The RLO, as direct supervisor of a LogCo, ensures that the latter assumes his functions in his projects.
- He briefs all logistics staff on risk prevention policies, specific technical tasks and what is expected of them in the domain of security management.
- When a PR is absent, he/she informs the Operations Director on who replaces him/her on the follow-up of mission security. Normally the Deputy PR assumes this role, but the RLO could be an alternative choice.

II- Short Technical brief

This document is giving a practical overview of the 3 technical pillars of the risk reduction policy: Protective measures & identification, Telecommunication and Transportation. It refers to MSF standards or practices.

The logistics roles & responsibilities lie at various levels and are operationally assumed by:

- The field logistician at project level
- The CoTL at the mission level
- The RLO (Operational Logistics Responsible) at the desk level

1- Protective measures & identification (Pillar 5)

- Define the protection measures and levels to apply on the mission (validated by the HOM)
- Facilitate all **passive protection measures**:
 - Identifications
 - Transport
 - No armed personnel transported into MSF vehicles
 - Emphasise the MSF neutrality
 - Internal communication with team
 - Evacuation plan & roads
 - Fire protection...
- **Active protection** (guards, escorts...)
 - Propose clear rule and means for and active security of the premises, but also vehicle and the team transported. Except for specific situation, unarmed guards are insuring security and control of the MSF premises.

► **Identification of buildings, vehicles, team & staff**

MSF Vehicle	<ul style="list-style-type: none"> - MSF standard is white vehicles with MSF stickers and inventory numbers; - Only in very specific situation this can be adapted with the direct validation of the Desk and Operational Director in GVA. - No identification advisable in specific situation (explained during the briefing in GVA and/or in capital)
MSF Health Post	<p>Should be secure and well identified to facilitate the work of the medical team and insure the necessary security and control:</p> <ul style="list-style-type: none"> - Fence around the HP with entry/exit and access for vehicles, secured with watchmen to control and filter movements. - Well identify the structure with MSF stickers and "NO ARMS" stickers at the entrance - A mast with a flag visible from far - Stick the MSF Charter at the entrance in English or French and local language as well
Base and MSF offices	<p>Security must be adapted to the type of risks in the project, mainly:</p> <ul style="list-style-type: none"> - In strong structures (bricks/concrete) if possible or well protected (sand bags...), in ware exposed context. - Distant from official and military buildings to limit exposure and maintain sense of neutrality. - In non-exposed buildings and well lightened buildings / area. - Fenced and secured by watchmen (private guard company or MSF guard can be both considered) - A safe room should be identified and prepared to secure team in case of surrounding combat or assault. - Fire protections measure and means should be in position. - In exposed setting, consider having double door to ease visitor's control

2- Telecommunications (Pillar 6)

SET UP EFFECTIVE telecommunications equipment and network to enable external communication at any necessary time, and communication among the team members.

► **Type of communication**

VOICE communications	<ul style="list-style-type: none"> - HF - base & mobile (for vehicles movement and security back up between project and capital) - VHF - base, mobile & handset (internal com) - Satellite communication (inside mission and international communication): Rbgan, bgan, Thuraya, Mini M) - GSM & LANDLINES (not to consider for security management, only for daily communication in specific contexts)
DATA	<ul style="list-style-type: none"> - HF

communications	<ul style="list-style-type: none"> - Satellite communication (Rbgan, Thuraya, Mini M, V.Sat) - FAX / INTERNET - not for security communications
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► **MSF communication standard**

in NORMAL situation	<ul style="list-style-type: none"> - Voice/Data communications: systematic - Landlines / GSM / SAT (depending of facilities) - Radio coms HF preferred - Radio VHF depending on context and needs
in DIFFICULT situation	<ul style="list-style-type: none"> - Voice/Data communications: systematic - Landlines / GSM (not for security) - SAT = systematic - Radio coms HF = systematic - Radio coms VHF = systematic

► **Essential documentation and information to facilitate telecommunications**

FOR ALL EXPATS	<ul style="list-style-type: none"> - Mission contacts and emergency contacts lists- UPDATED!! - Briefing on communications systems and procedures - Training on the use of the different systems
RADIO & COMS ROOM	<ul style="list-style-type: none"> - Mission contacts and emergency contacts lists – UPDATED !! - Radio alphabet - Maps with mapping of activities / check points etc... - Communication guideline - Radio & COMS logbook - Wall clock - Frequencies & call signs list
VEHICLES	<ul style="list-style-type: none"> - Mission contacts and emergency contacts lists – UPDATED !! - Radio alphabet - Maps with mapping of activities / check points etc... - Frequencies & call signs list
TEAM HOUSES	<ul style="list-style-type: none"> - Mission contacts and emergency contacts lists - Radio alphabet - Frequencies & call signs list

► **Train and brief the team in the use of the various communication systems**

SAT COMS	<ul style="list-style-type: none"> - High quality – Direct voice / data coms - More difficult to monitor than landline / GSM - Sat signals can be controlled (ie. Lebanon crisis = Thuraya signal cut by USA) - No guaranty of confidentiality
VHF RADIO	<ul style="list-style-type: none"> - Short ranges (10 Km) - Obstacles can obstruct the signals. Can require repeater in urban settings. - Open air communication
HF RADIO	<ul style="list-style-type: none"> - Medium / long range (around the world) - Not too much disturbed by obstacles but could be disturbed by weather /electrical etc... - Open air communication
LANDLINE / GSM	<ul style="list-style-type: none"> - Unreliable during disasters / period of instabilities - Can be monitored easily - NOT FOR SECURITY MANAGEMENT !

► **Reliability of the communication means and sensitive information.**

- Radio coms = open air coms = NO SENSITIVE INFORMATION
- Regular contact schedule to be define in the communication guideline or/and security guideline linked to the different secu levels
- Always identify yourself and have you interlocutor identify himself

- Use short sentences and international radio alphabet when necessary to spell words
- Prepare your message before communicating and be prepared to receive it
- Use codes to simplify the communications if necessary (not to hide information)
- Avoid money discussion on radio
- Register all communications in the radio log book and transmit the message to the final recipient
- Always confirm the next contact before ending the communication
- **CAFE** = **C**ollecter **A**nalyser **F**ormuler **E**mettre / *Collect-Analyse-Express-Transmit*
- INSURE the good use and maintenance of such equipment

3- Transportation (Pillar 7)

To guaranty availability of vehicles for the entire team member under MSF responsibility to reach a safe location in case of security event.

- Insure the minimum safety tools are in place in every vehicles (seat belts, first aid kit, coms, life jackets...)
- COTL proposes the transport & movement rules to HOM who validates them (HOM remains the responsible for allowing movements: ie. green/red lights)
- Insure drivers are trained
- Investigate all transportation alternatives and itinerary, list and prioritise the different option (different roads, airstrips, path, port, rivers,)

In instable or remote contexts:

- always put in place emergency fuel stock and have always the minimums (genuine) spare parts in stock as defined in the Toyota order sheet.
- Park the vehicles facing the exit

► **ROAD movements:**

- 1 car = 1 driver (usually locally employed)
- Expats are not allowed to drive unless specific and formalised agreement granted by HOM. In such case expats take full responsibility in case of accident / incident
- Only MSF staff or activities related passengers can be transported otherwise a discharge of liability should be signed
- Passengers and driver must wear the seat belt
- Transport of persons in the back of a pick-up is forbidden.
- Use of motorbike is forbidden

► **Vehicle minimum equipment**

in NORMAL situation	<ul style="list-style-type: none"> ▪ Copy of documents (MSF Charter, road licence, insurance, registration...) ▪ First aid kit ▪ Driver tools ▪ 1 Spare wheel ▪ HF radio (all Land Cruiser Hard top = under discussion) ▪ Road maps, list of contacts (radio, telephones)
in DIFFICULT situation	<ul style="list-style-type: none"> • Copy of documents (MSF Charter, road licence, insurance, registration...) • First aid kit • Driver tools • 1 Spare wheel • HF radio (all Land Cruiser Hard top = under discussion) • Road maps, list of contacts (radio, telephones) • Emergency box (malle d'urgence) when long movements with the presence of a medical person in the vehicle • VHF radio

- | | |
|--|--|
| | <ul style="list-style-type: none"> • A second spare (wheel depending on context) • Water and emergency food ration (long trip in difficult situations) • Kit car recovery / puncture repair kit |
|--|--|

► **AIR movements safety (see annex below)**

- **The PLANE CELL (Bordeaux) can provide evaluations on air companies and recommends or not their use**
- Validation of the recommendations, or to bypass them (i.e emergency situation such as medical evacuation...). is done by the RP
- Distinction to be made for **team transport** and **cargo movement**
- Criterion of validation will be: type of aircrafts, quality and regular maintenance, the crew, insurances, international regulations etc...
- When/If context changes (new companies etc...) a new assessment by the plane cell must be required
- Validated companies must be part of the security guideline

► **Evacuation plan**

Logistic proposes security evacuation means, itinerary and procedure to the HOM for validation.

Annex: Air safety - flying with black listed company

Geneva, 10th January 2006.

Due to operational reason, our teams are often flying from capital to project sites with national & private companies. Some of those companies appear to be of a doubtful quality and can even be black listed by professional aviation organisations.

MSF-CH staff is not permitted to use the following companies:

- **those black listed by the ICAO (International Civil Aviation Organisation aviation) or by civil aviation organisations from developed countries;**
- **those about which the “MSF-Log fly cell” advises not to use;**
- **those which are known, in country of mission, as being of doubtful quality.**

However, exceptions can be made under strict conditions, and for operational reason only:

- Logistic (COTL or log capital) with the HOM will investigate all means of transportation (car, bus, boat, ...), and consider alternative airport, alternative company, and present all possibilities to HOM & coordination team.
- HOM & Coordination team will reflect on travelling needs: who, where, time constrain, duration, frequency making sure that flying is the only suitable option due to crucial operational need. *Remark: In regular project, time or financial means should not be consider valid argument to reconsider the security of the team members.*
- HOM will present the different alternatives discussed at mission level, and propose a suitable solution to the desk in HQ. If no suitable alternative are found, the HOM will request to his RP the authorisation to use the black listed company.
- RP & RLO will discuss it and RP will come up with a decision.
- RP will provide the mission with a written authorization to fly with that company.
- Desk will inform Dirop and HR responsible
- HR dpt will inform all expats going to this country to guaranty that they are aware of the risk.

In the field, as part of its security responsibilities, it is up to the HOM together with the COTL to ensure that the situation regarding flying companies is properly investigated and constantly monitored, taking into account the need and frequency of transportation with the change of operational needs.

The issue of flying with national or private companies should be systematically addressed within the security guideline of the mission

Chapter 2:

SECURITY GUIDELINE

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Introduction:

The security guideline is a detailed description of the security management per project: risk analysis, security strategies, rules, procedures and responsibilities. It is the responsibility of the HOM to pilot the its elaboration and to ensure that one is in place in each location where we operate.

A format for security guideline, linked to the risk reduction policy, has been validated in January 2007. It is composed of 4 documents:

- A main part listing all the security issues that need to be addressed in the mission.
- A tool to identify and rank risks in mission (together with an example)
- A tool to outline risk reduction measures and response procedures that need to be put in place, for high/medium risk ranking (together with an example)
- A standard format for risk levels, to be adapted in each mission

In addition, the chapter includes:

- A list of generic contingency plans;
- An explanation document regarding risk assessment and analysis.

On the CD-ROM : SECU REFERENCE DOC\ 02 Security Guideline\...

- secu guideline FORMAT 09FEB07.zip
- Contingency plans 14May07.doc
- Risk analysis - explanation document.doc

Security Guideline Format

MSF-CH, February 2007. Validated by DO.

Objectives of a security guideline:

- A- To ensure among the project and coordination team a common knowledge of the security situation, management, strategies, rules and procedures per project (in agreement with the new risk reduction policy).
- B- To ensure between the RP/desk and the HOM/coordination teams a common understanding and acceptance of the risks taken by our personnel, and procedures to reduce our exposure.

Responsibility:

It is the **responsibility of the HOM** to pilot the elaboration of the secu-guideline and to ensure that one is in place in each location where we operate.

The security guideline must be **validated by the RP**.

RP and HOM should agree together on the frequency to update it.

Summary / essential rules and procedures

It is recommended that the HOM extract from the guideline **a 1 or 2 pages-max document with the minimal secu information** allowing a staff member to act autonomously and responsibly in a given place: main rules in place, behavior to follow in a specific location, current secu level and essential contact numbers. Such document is also a great briefing tool as it can then be easily updated, presented and given to all international and key national staff both at HQ and field levels.

Recommendation for the elaboration of the guideline:

- Try to keep the doc **as short and as concrete as possible**. Avoid overloading the secu guideline with general comments on security. For this part, you should refer to the MSF-CH risk reduction policy where many general issues are addressed.
- Start the process with a **participative risk analysis exercise** at field level, under the lead of the HOM and Field-co.
- Based on this exercise, define together with a small group of qualified people in the mission (HOM, Field-co, COTL, key national staff, ...) **strategies and approaches** to implement our activities in the most secure way. You can share, at this stage, the result of **the risk analysis and main strategies with the desk in Geneva**.
- The logistic coordinator **proposes the rules regarding the technical pillars** (transport, telecommunication, protection, identification). The HOM validates them, and compile **a first draft of the guideline per location**, which is then reviewed by coordination team members and key staff in the project.
- **HOM approves the draft** and send it to the desk and the **Program Responsible for validation**. The Program Responsible should compile comments from the desk team and send them to the HOM.

1. Introduction (1/2 page)

Short explanations about the purpose of the secu guideline.

Some reminders for staff such as: guideline to be available at each MSF house/office.

Non-respect may lead to contract termination. Implication in case of no respect of national laws, ...

Define who among the national staff has access to it, ...

2. Current security overview (1/2 page max)

Very brief outline and analysis of the overall security situation and specific secu situation in area where MSF is located. As it will be very quickly outdated, this section should mention only basic info such as the nature of violence (Political & economic instability / Social, ethnic & religious tensions / Conflict dynamics and belligerents / Nature of Criminal activity /environmental hazards...), perpetrators, areas affected....

3. Background: main events and security incidents (1/2 to 1 page max)

- Brief outline of the recent historical context, including any significant events that may have fuelled particular tensions or conflicts, and factors that may have contributed to insecurity or tension in the country, notably surrounding humanitarian intervention.

- List the most important security incidents (last 2 years) – Put as an annex if too long.

4. Key Actors & Groups (1/2 page)

List of the main actors and groups that affect (negatively or positively) the security environment, for example political actors/parties, national and local authorities, security forces, insurgents or guerrilla groups, criminal gangs, and community groups. If available, to give basic information about their structures, agendas, cohesiveness, relationships with other actors, identification, areas of control or operation...

5. Risk analysis (1 to 2 pages max.)

This section should detail the main threats that exist to MSF security (and safety), outlining the degree to which staff, MSF, (or humanitarian agencies in general) are exposed/vulnerable to these threats. A ranking linked to probability of occurrence (low – medium – high) and degree of impact of the resulting risk should be presented in 2 different sections:

- Risks related to internal functioning of the mission (e.g. linked to movement and travel, cash management, staff attitude and activities, ...)
- Risks related to the context of intervention (conflict, urban violence, criminal activities, ...)

It is as well useful to differentiate when risks are applicable to specific locations.

[Cf. Annex 1: risk identification & ranking format](#)

For clearly identified (high/medium) risks, the section must present adapted procedures in case our staff is directly confronted to it. When applicable, the procedures should cover both the reaction of the person facing the risk (e.g. how to best react when being kidnapped), and the reaction of the team who will deal with the situation afterward (e.g. what to do if one colleague is kidnapped).

[Cf. Annex 2: risk management means & procedures](#)

6. Risk reduction strategies and main measures (1 page max)

This section should outline the overall security (and safety) management approach that will be utilized to reduce the security risks that exist. The MSF-CH risk reduction policy is a good basis to develop such approach, by identifying, for each of the 8 pillars the specific strategy/approach to be developed (1. Acceptance, 2. Relation with environment, 3. Information and risk analysis, 4. Security procedures, 5. Transport, 6. Communication, 7. Site protection & identification, 8. Staff attitude and behavior),.

Note that pillars 4, 5, 6 and 7 should be addressed in details in the section 8

[Cf. MSF-CH risk reduction policy](#)

7. Security Roles & Responsibilities - Flow of security information (1/2 page max)

Recall clearly the security line as specified in the Risk reduction policy: overall responsibility of RT, HOM & RP at the field/mission & HQ levels.

Define other specific responsibilities and obligations of the rest of the staff in relation to security issues and procedures: who's responsible when HOM or RT is absent (back-up system), role of the COTL (technical issues) & FINOP (cash management), individual and team responsibilities, National staff involvement, ...

As well, this section should cover secu briefings, secu meetings, ...

Recall the type, frequency and timing for the exchange of security information within the team and between the coordination and the desk: Sitrep / Security follow-up matrix / Incident reports. Define in addition any specificities for the mission/project.

[Cf. MSF-CH risk reduction policy](#)

8. Standard security rules and protective measures

8.1 Staff attitude and behavior (fully applicable for international staff and dependants, partly applicable to national staff) – including guidance on, and procedures for safe and secure behavior in that context e.g. what to do and what not to do; what to wear; warning of offensive behavior; local laws and customs; personal identification; places to avoid; curfews; measures to avoid particular threats, picture policy, stress management, external visit on mission, vacation policy, ...

If applicable, how to face media should be mentioned.

8.2 Communications - including the means of communication in that location, as well as protocols and procedures for their use e.g. communication network; radio protocols; secure and sensitive communications; loss of contact procedures; etc.

8.3 Vehicle Travel & Movements - including all procedures associated with vehicle use and staff movements e.g. driver responsibilities; expat driving rules, documentation needed; rules regarding passengers; movement and communication procedures; equipment and supplies; identification and visibility; checkpoint procedures; use of public transport; breakdown or vehicle accident response, etc.

8.4 Sites protection and identification - *including:*

- Security issues and safety procedures related to all offices, residences, warehouses and field sites (clinics, hospitals) perimeter security; guards; visitor access & procedures; shelters and safe rooms; time allowed in the office, alarm system, fire safety, computer data protection, ...etc.
- Team members identification & sites/vehicles identification

8.5 Financial Security – including procedures established for secure movement and storage of cash. As well should include expat cash and valuable management.

8.6 Staff Health & Welfare – including the health risks that exist and the precautions necessary for staff to avoid illness or injury; staff health responsibilities; individual responsibility; dealing with stress, ...

8.7 Incident Reporting – including the procedures and responsibilities for reporting security related incidents e.g. type of incidents to be reported, procedure and format for incident reporting.

9. Security risk levels & indicators

To define the different security levels, together with indicators to move from one level to another and contingency procedures.

[cf. Annex 3: risk levels and indicator FORMAT](#)

10. Annexes: contact, maps and contingency plans

This section should include additional information to assist staff in implementing security measures, as well as guidelines in order to respond to serious situation, specifically when there is a serious probability of: having to evacuate or relocate staff; medical emergency; kidnapping or hostage-taking; natural/manmade disasters.

10.1 Contact List - list of key staff contact information, other agencies telephone numbers and radio frequencies, etc.

10.2 Maps - national, sub-regional and local indicating project sites, main overland routes, air fields, border crossings, risk area, etc.

10.3 Evacuation Plan – including the decision-making process; criteria for evacuation; routes; communication procedures; administrative tasks; equipment and supplies; checklists, etc.

10.4 Medical Emergency Plan – including roles and responsibilities; medical facilities; medical evacuation procedures; transportation, etc.

10.5 Other Contingency Plans – these will be dependent on specific risks identified (e.g. mine area, natural disaster area, ...).

ANNEX 1: RISK IDENTIFICATION & RANKING

Mission:

Project:

1. External Threats linked to	the context of operations		Ranking	
THREAT	VULNERABILITY / EXPOSURE	RISK / CONSEQUENCE	Probability	Impact

2. Internal Threats linked to	the functioning of the mission		Ranking	
THREAT	VULNERABILITY / EXPOSURE	RISK / CONSEQUENCE	Probability	Impact

THREAT: The identified danger
VULNERABILITY / EXPOSURE: MSF presence / activity, security measures in place or not, context changes, recent events against MSF or NGOs
RISK: The consequences of the threat to MSF activities and its staff (Risk = Threat X Exposure)
PROBABILITY: **LOW / MEDIUM / HIGH**
IMPACT: **LOW** (no interruption of activities, stress), **MEDIUM** (activities on hold, stress),
HIGH (wounded, partial evacuation, stress, etc.), **CRITICAL** (casualties, evacuation, humanitarian impact, crisis cell)

Annex 1: RISK IDENTIFICATION & RANKING - EXAMPLES

Mission / Project :

1. External Threats linked to the context of operations

THREAT	VULNERABILITY / EXPOSURE	RISK / CONSEQUENCE	Ranking	
			Probability	Impact
Burglary, Robbery, Looting, Ambush, Car Jacking, Road blocks, etc...	Mission, Mandate, internal pressure (life-saving activities), insufficient security management	Staff casualties	Low	Low
Shooting, Crossfire, Shelling, Sniper fire, Landmines, UXO, etc...	Staff movement (location, timing), MSF sites location and building vulnerability	Restricted Activities	Medium	Medium
Extortion, Death Threats, Sexual Violence, Murder....	Competencies / Inexperienced staff, Staff attitude, stress, management	Program Suspension or Closure, Expulsion	High	High
Kidnapping, Arrest, Hostage Situation....	Communication or Transport facilities, measures and rules not in place	Team Evacuation (complete or total)		Critical
Riots, Increased tensions, generalised violence, political crisis, increased security incidents to other agencies, etc...	Quality of information, context and Risk Analysis Perception of MSF: confusion with other bodies (govt, UN, USA, etc), One-side project, NGO/UN co-ordination	Damaged reputation		
Natural (Earthquakes, Floods, Hurricanes, etc.) and Technological (Oil Spills, Contamination) Disasters Other...	Changes in Context and Security Environment, Warfare, Presence of Arms, Limited evacuation options and contingency planning Nationality, Ethnicity, Gender, Cultural sensitivity, Training, Etc...			

2. Internal Threats linked to the functioning of the mission

THREAT	VULNERABILITY / EXPOSURE	RISK / CONSEQUENCE	Ranking	
			Probability	Impact
Robbery, theft, fraud, car jacking, etc...	Staff management, inexperienced team, unsatisfied staff, abuse of power, bad management, lack of briefing and information, ...	Staff casualties	Low	Low
Hostile authorities, hostility reaction from individuals and communities, specific action against humanitarian organizations	Movement of team, Cash and assets management, Cultural sensitivity, lack of rules and procedures, training, ...			
strikes, death threats & physical harm from staff	Management, location & protection of MSF sites, ...	Lost/damaged assets	Medium	Medium
Car and transportation accidents, aircraft...	Communication or Transport facilities, ...	Damaged reputation	High	High
security mismanagement, no respect of rules, ... (linked to staff behavior)	Confusion with other bodies (govt, UN, etc)	Affected activities		Critical
Illness, labor accidents, stress, exposure to blood, Fire etc (linked to safety issue)	MSF abortion policy Etc...			

ANNEX 2 : RISK MANAGEMENT MEASURES & PROCEDURES

Mission:

Project:

THREAT	RISK REDUCTION MEASURES	RESPONSE PROCEDURES

ANNEX 2 : RISK MANAGEMENT MEASURES & PROCEDURES - EXAMPLE

Mission:

Project:

THREAT : only the one with a high/medium ranking	RISK REDUCTION MEASURES : Outline of the measures to be detailed in the part 8 of the guideline (standard security rules and protective measures)	RESPONSE PROCEDURES : - The contingency plan to put in place to respond in case of incident linked to specific threat - - The minimal training & information to be given to staff likely to be exposed to the specific threat
Ambush by armed people	<ul style="list-style-type: none"> - Movement regulations (destination, timing, green-light, ...) - Systematic information check, Briefing staff - Etc... 	<ul style="list-style-type: none"> - Remaining team: Who to contact in priority, what possible assistance to be given (movement to the incident location, ...) - - Victim team : What to do in case of being exposed to an ambush (How to act with the attackers, role of the expat/senior national staff/driver, communication with base, ..)
Office / house robbery	<ul style="list-style-type: none"> - Protection & identification of the sites - - Watchmen policy - - Cash and assets management policy - - Etc... 	<ul style="list-style-type: none"> - administrative and official/police follow-up - Individual versus organisation responsibility in case of loss of assets - - Etc...

ANNEX 3: Risk Levels & Indicators - Standard Format

Level	RISK INDICATORS - FOR PROJECT AREAS	RISK INDICATORS - FOR CAPITAL	DECISION MAKING & RESPONSIBILITY	TEAM MOVEMENTS	INDIVIDUAL RESPONSIBILITY	COMMUNICATION PROCEDURES	CONTINGENCY PROCEDURES
1 <i>(Normal)</i>	<ul style="list-style-type: none"> Calm. Normal working conditions. No abnormal demonstrations/strikes. No hostilities in the area. Normal crime rates. Limited risks associated with natural disasters. Limited risks to staff health. 	<ul style="list-style-type: none"> Calm throughout city. Normal working conditions. No demonstrations. Normal crime rates. Limited risks associated with natural disasters. Limited risks to staff health. 	<ul style="list-style-type: none"> Normal line management structure. HoM ultimately responsible for staff safety in the field. 	<ul style="list-style-type: none"> Unrestricted movement. Movement board in use. 	<ul style="list-style-type: none"> Each individual responsible for their own security and health. Standard: carry ID, emergency cash. Proactively gather security information. 	<ul style="list-style-type: none"> Standard: Staff to carry mobile phones. Report all movements within the project areas. Weekly meetings to discuss sec. 	<ul style="list-style-type: none"> Emergency supplies in place. Evac plan in place. Briefing for all staff.
2 <i>(Tense)</i>	<ul style="list-style-type: none"> Increased police/military presence. Frequent demonstrations, possible violent but not targeted at the international community. Hostilities or inter-tribal violence in the area, but not in the area of MSF activities. Area prone to natural disasters. Area prone to infectious disease epidemics. HIV and Malaria prevalent in the area. 	<ul style="list-style-type: none"> Demonstrations in the city. Increased Police presence. 	<ul style="list-style-type: none"> As level 1. 	<ul style="list-style-type: none"> Unrestricted movement in capital. Restricted movement for expat staff in project areas. Restricted access to certain areas for expat & national staff. 	<ul style="list-style-type: none"> As level 1. 	<ul style="list-style-type: none"> As level 1, with heightened info gathering re-potential threats. Close monitoring, from base, of team movements. Movement out of towns with comms only. 	<ul style="list-style-type: none"> As level 1, with regular checking of supplies. Regular review of contingency plan. Measures taken to increase security all bases and work-sites.
3 <i>(Alert)</i>	<ul style="list-style-type: none"> Armed actions by police/military to quell civil unrest. Demonstrations targeted at the international community. Sporadic gunfire day or night where MSF is working. Hostilities by local or refugee population against agencies in the area. Banditry / requisitioning of agency property in the area. Area experiencing a natural disaster, or in the immediate post-disaster phase. Area experiencing an infectious disease epidemic. 	<ul style="list-style-type: none"> As level 2, but more widespread and violent. 	<ul style="list-style-type: none"> As level 1, but informing the OD of the situation. 	<ul style="list-style-type: none"> Restricted movements in capital. Restricted presence of expat staff in project areas. Possible closure of project offices or essential staff only. No access to certain areas for expat & national staff. 	<ul style="list-style-type: none"> As level 2, with bag of essentials ready. Evac roles & procedures clearly understood. 	<ul style="list-style-type: none"> As level 2, with daily comms & security meetings. Satphone at expat staff residences. Regular contact with HQ. 	<ul style="list-style-type: none"> Possible relocation of non-essential staff. Valuables and evac supplies identified for removal/packing up. Strict compound security protocol enforced.
4 <i>(Dangerous) Possible Evacuation</i>	<ul style="list-style-type: none"> As level 3, but with increased and more violent incidents targeting agencies. Deliberate attempts to disrupt agency work with violence or violent threats. Attacks against international community. Threats against MSF staff. Government advice to leave the area. Area currently experiencing a natural disaster, which poses a direct threat to staff safety. Area experiencing an infectious disease epidemic, which poses a direct threat to staff health. Evacuation routes / means still open but with risk of closing. 	<ul style="list-style-type: none"> Demonstrations targeted at the international community. Armed actions by police/military to quell civil unrest. Attacks against international community. Criminals gangs are armed and use excessive violence. Victims, including agency staff, have been injured or killed. Threats against MSF staff. Government advice to leave the country. Evacuation routes/means still open but with risk of closing. 	<ul style="list-style-type: none"> All decisions taken in consultation between the HoM and OD Final authority lies with the DoP. 	<ul style="list-style-type: none"> Staff to return to base and await evacuation decision. No movement unless for evac preparation only. 	<ul style="list-style-type: none"> Evacuation procedures initiated (see Contingency Plan regarding evacuation plans and procedures). 	<ul style="list-style-type: none"> Follow guidance established for inter-agency communication. Regular contact with MSF capital office or HQ prior to evacuation 	<ul style="list-style-type: none"> Implementation of evacuation procedures: STANDFAST – impending evacuation, remain alert. Discuss arrangement with other agencies for combined evac or lay low plan. CONSOLIDATION – prepare to evacuate. Drivers on standby as necessary.
5 <i>(untenable) Evacuation</i>	<ul style="list-style-type: none"> Widespread looting. Sustained gunfire day and night. Indiscriminate use of violence, including targeting of agencies. Evacuation not possible, airports or access roads closed. 	<ul style="list-style-type: none"> Police/security forces are non-existent or have ceased to function, law and order has broken down, and looting is widespread. Indiscriminate use of violence, including targeting of agencies. Movements in the city restricted - airports and roads closed. 	<ul style="list-style-type: none"> As level 4. 	<ul style="list-style-type: none"> No travel out of compound, at any time, except to evacuate. 	<ul style="list-style-type: none"> All portable possessions and equipment ready for evacuation. 	<ul style="list-style-type: none"> Maintain open comms with MSF capital or HQ during evacuation. 	<ul style="list-style-type: none"> EVACUATION – leave as group to safe area. LAY LOW – either in MSF compound, or in pre-determined location. Stay under cover until an evac can be organised.

CONTINGENCY PLANS

MSF, Geneva, May 2007

Adapted mainly from ICRC (Staying alive) and MSFH/Red-R (security guidelines)

Objective of contingency plans:

Those contingency plans are a collection of general rules, procedures or measures to be taken to minimize the impact of a future security events or incidents, that are possible but cannot be predicted with certainty. They are tools which are built from previous experiences in MSF and other humanitarian organizations, but they need to be applied to the reality of each mission (evaluated risk, nature of the context, experience of the staff,...).

- ▶ In the field, it is the **responsibility of the HoM**, supported by the logistic coordinator to adapt those tools to the reality of their mission, to integrate them in the security guideline and to ensure that all staff are properly briefed.

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Road Accidents

In many cases, driving is the most dangerous activity that humanitarian staff undertakes. Proper vehicle maintenance and abiding by safe driving procedures (specifically the use of professional drivers) should minimize accident risks, and that the responsibility of the logistic.

Key issue to consider in each mission:

- Crowd movements and violent behaviours are common in many countries after an accident (going as far as the lynching of the driver). Each mission should evaluate if it is safe or not to remain on the scene of an accident, even if MSF car is being involved in it, and instruct all potential drivers how to react. Investigate with MSF drivers/staff and local people about it.
- Remind the team that in case of personal responsibilities in the occurrence of a road accident, MSF is entitled to take disciplinary measures and request, from the concern person, compensation for the lost (if not covered by insurance)

What to do when MSF is involved in an accident?

- If you come across an accident or get involved in an accident yourself, first things to do is to assess if it is secure to remain at the scene or to stop:
 - If it is not secure to remain at the scene, proceed to the nearest police station, report the accident, and return on the spot with police.
 - If it is secure, remain on the spot, wait for the police to arrive and cooperate.
- Exchange contact details with the other parties involved in the accident.
- Take the names and addresses of the police officers and witnesses.
- If it safe and you have a camera you take pictures of the situation, avoiding upset onlookers.
- Do not try to settle the accident at the scene and do not make any statement in which you accept responsibility.

In case of injuries, there are 2 main options for MSF to assist, depending on medical staff presence, or not, in the car:

- Medical assistance on the spot, and/or
- Transport of wounded people to nearest hospital.

In case of serious injuries, medical doctor advice is always required before transportation in the MSF car, since it might be more dangerous for the person to be transported. Seek, if possible, advice form the medical coordinator.

When you are not involved in the accident yourself and it is safe to stop, remain on the spot and provide the necessary assistance.

Other points to keep in mind:

- Inform your project base and have them to inform the police .
- Remain polite and self-confident.
- Immediately after an accident, secure the place to prevent further danger to passengers, onlookers and other traffic.
- Give first aid or when there is no medical staff on board your vehicle, provide your first aid kit to possible medical persons at the scene.

- Be aware of your surroundings. The situation may still become violent, forcing you to leave. Have other MSF vehicles join you if this adds to your security.

What to do after an accident in which MSF is involved?

- Cooperate with police investigations into the accident.

Meanwhile inquire into criminal or legal liability of MSF as an organization, or MSF employees as individuals and seek specific legal advice if required. Be aware that MSF may end up in court as a result of the accident or as a result of the victims claiming compensation.

- Follow-up with the insurance company.
- Undertake your own analysis of the accident's circumstances, driving behavior and other elements that contributed to the accident or to unnecessary injury.
- Analyse the responsibility of the driver and take adequate measures accordingly.
- Review and adapt the management of your fleet and drivers and how effective your preventive measures have been.
- Provide an Incident Report to the HOM / Desk in Geneva!
- Consider the need to make a contribution or compensate to victims of the accident (in money or in goods e.g. burial costs, food for families, etc.). But ensure that recipients and authorities understand, formally as well as informally, that these contributions do not imply that MSF accepts legal/criminal liability.

Reference documents:

- *MSF CH driving Policy (Volunteer hand book)*
 - *Country driving policy (fields and capital): Who can drive ? During working hour and not, use of public transport, restricted areas, driving at night.*
 - *Briefing HoM, COTL.*

Roadblocks & checkpoints

According to the available documentation, roadblock and checkpoint have different meanings. Checkpoints are legitimate barriers set up (to control traffic circulation, to ensure compliance with driver and vehicle documentation...), while roadblocks are unauthorized barriers erected (for the purpose of extortion or robbery...).

However, in insecure context where MSF operates, both roadblocks and checkpoints may be a threat to MSF teams (e.g. underpaid, frustrated or scared soldiers) and the following procedures apply to both situations.

Reminder:

- ▶ besides the possible security threat, you may be able to use existing roadblocks to your advantage by gathering security information about the road ahead and receive a briefing by the logistic on the spot. However, be aware that in some cases this information may be misleading.
- ▶ Always resist giving something to facilitate going thru a checkpoint, it can only create more difficulties in the future

Normal Roadblock procedures

- Know where the regular roadblocks are located. Be vigilant in case of unexpected roadblocks.
- Be prepared to discuss, do not be in a rush to continue your journey.
- Appoint a spokesperson, e.g. the driver or the person seating in front. It can be either local or expatriate, depending on the location and conditions, but the spokesperson should be able to explain MSF's mandate and presence. The rest of the team must remain quiet and silent.
- Inform your base by radio *before reaching* and after leaving a roadblock, known to be troublesome. Do not use com equipment, while at the roadblock
- Slow down when you approach a roadblock and stop if required.
- During night time, change from headlights to side lights, if safe to do so, and switch on the interior light.
- Do not overtake other vehicles, humanitarian agencies are supposed to wait in line like everyone else.
- Lock car doors, if they are not normally locked. Wind down the window just enough to permit talking and to hand documents. Do not get out of the car, except if required.
- Turn off radio and music, remove sunglasses, don't eat, drink or smoke and keep valuables out of sight.
- Address the sentry/guards. Be courteous and friendly, but not over-familiar. Don't be arrogant, don't get angry but be confident. Present (copies of) required IDs, licenses and car papers when required.
- Be relaxed if they insist on checking your vehicle. Allow inspection when required as they have the right to do so and we have nothing to hide.
- Don't start arguments if delayed but try to negotiate a solution.
- Don't make sudden movements and keep your hands in view.

In case of tense roadblock:

- If you suspect that the roadblock has an ambush purpose, try not to approach and turn around, *if it is safe to do so*.
- Resist paying bribes. Alternative strategies such as handing over cigarettes, condoms, or MSF leaflets may be helpful.
- When under arm threat, do not resist car jacking, looting or confiscation of money/materials. Use your security money to buy yourself out in case of extreme situations where normal negotiation doesn't work.

Carjacking

Introduction

Carjacking is the stealing of a car by force. Although most carjacking incidents happen after dark and although some locations are more vulnerable than others, carjacking may happen at any time and in any location. **Carjackers are often armed and nervous and are likely to resort to violence.**

Gather information on carjacking incidents in your areas of operation and try to identify patterns (types of vehicles targeted, techniques used, specific locations affected, what time of the day and level of violence used...). If there is an identified risk of carjacking in your mission area, minimizing measures must be taken and drivers and passengers be instructed how to react in case of a hijack.

Carjacking techniques

Carjackers commonly use the following techniques: setting up a roadblock, surrounding the vehicle when stopped at a red-light or MSF entrance gate, using another vehicle to cut in or ram the target vehicle and setting up a fake accident or breakdown.

Warning signals

Be aware of the following warning signals are:

- A vehicle with two or more occupants following closely or alongside, maintaining the same speed as you.
- A vehicle trailing closely behind you, which does not take the opportunities to overtake you.
- A vehicle trying to overtake you on a deserted stretch of road.
- Suspicious individuals loitering along the roadside in high-risk areas like, at road intersections, traffic lights, speed bumps, fuel stations, shopping malls, etc.
- A vehicle that deliberately bumps your vehicle.

Risk minimizing measures

- If possible, use common cars instead of 4x4 valuable car.
- Avoid unnecessary trips, driving after dark and isolated roads.
- Travel with at least two people in a car or with two (or more) cars together.
- Be aware of your surroundings.
- Cars should be well maintained and carry sufficient fuel (full tank before the week-end).
- Park in a well-lighted and busy area and don't leave valuables in plain view.
- Use copies of documents instead of originals. (if possible)
- Establish radio call-in times.
- Vary travel routes and times and only inform people who need to know. Inform them as late as possible.
- Keep doors locked and windows rolled up.
- Keep a safe travelling distance behind other vehicles.
- Avoid stopping outside your office or residence. Inform the guards when you are approaching the gate and set-up a procedure with them.
- Drivers must guard their vehicle when parked outside a MSF compound.
- If you suspect that a hijacking attempt is about to take place, reverse your vehicle to a safe distance, turn your vehicle around and drive away from the area, or change your itinerary to see if you are followed. However, under no circumstances try to reverse away from the area **if there is insufficient time to do so**. This action may draw fire and put you and your passengers at further risk.
- In some situations, where the likeliness of armed carjacking is very high, it may be advisable to use rental vehicles instead of MSF vehicles.

- The use of vehicle demobilizing devices, e.g. a fuel cut-off device, is not allowed in order to not put an abducted driver or passenger at further risk.

How to act in case of an armed carjacking attempt

- **Do not argue but hand over the vehicle and other valuables without hesitation and delay, and follow instructions. Do not risk your life for the sake of the car or your belongings.**
- Remain calm. Don't make sudden moves and keep your hands in view. Before releasing your seatbelt or reaching for your documents inform the carjackers what you intend to do.
- Keep the engine running with the key inside and leave the doors open when moving out of the vehicle.
- When in a group avoid talking amongst each other and in any case don't use a language that the carjackers may not understand.
- Avoid eye contact with the carjackers.
- If radio is your only means of communication, try to negotiate the use of your radio to report back to base. Do not report what exactly is going on, but report your location, if this is safe to do, and say that you have been delayed. Inform in advance the carjackers of the message you are about to give.
- If there is a risk of abduction, try to negotiate the release of all passengers and the driver.

After the incident

- Leave the scene when it is safe to do so.
- Inform your base and resort to a safe place until you can be picked up.
- Deliver a MSF incident report.
- Report to the police.

Travelling in convoy

A convoy is a group of vehicles traveling together. This can be advisable when an individual vehicle is at greater risk of attack (ambush, car-jacking...) or to allow the vehicles to assist each other in case of dire road conditions.

In specific dangerous contexts, humanitarian convoys may be protected by military or police escort, including sometimes UN forces. **It is a clear MSF rule not to take part in such convoy, as it will compromise our independence and neutrality in the eyes of local people.**

Convoys are easy to organize, but hardly ever go completely right. Therefore it is important to put in place procedures that are clear and adapted to the local circumstances. The following checklist may serve as tips of some major issues to consider:

1. Preparation and briefings

Define always a convoy leader who will fully brief, prior to departure, everyone who is traveling and provide specific briefing to each driver (notably about the important to respect the order and to avoid competition between them). The convoy leader should assign responsibilities (e.g. vehicle responsible). The briefing should include explanation about the terrain and routes, potential threats to security, expected weather, document required, identification of the convoy, vehicle equipment, timing, regulation of conduct and order of the car.

In some situation it is useful that the convoy leader has the list of all persons in the convoy. You must be prepared on contingency plan such as roadblocks, incident, casualty or breakdown. After the journey a debriefing can be useful to improve convoy procedures.

It is also important to prepare the reception of the convoy at destination: inform the team there on traveling plans, ensure local authorities have been informed about the convoy arrival, ... In other circumstances, it is might be necessary to send an advance party to check the route and prepare the arrival.

2. Number of vehicles

MSF is often traveling with 2 cars, but convoy up to 4 or 6 vehicles are easily manageable. On the other hand, when setting up a large convoy, consider the image projected by the sight of a convoy of brightly painted four wheel drive vehicles and trucks, with healthy occupants. It might lead to a range of mixed emotions by observers and checkpoint staff and it can contrast with the image the organization want to give of itself.

As well in case of security evacuation of an MSF base, the image of MSF cars leaving the area can give a feeling of abandon to the population. Consider splitting the convoy when crossing the town.

3. Order of travel

The driver who knows better the road should be in the leading car together with the convoy leader, his deputy being in the last car. The slowest vehicle or less experienced driver should come immediately after the leading car. According to this rule, if traveling with trucks and cars, the truck should be second.

4. Space between vehicles

- Enough space should always be left between vehicles to avoid simple accident. If traveling closely because of the dust, you will have to adapt the cruise speed.
- Always keep the following car within sight and it is up to the leading car to adapt its speed to the following one. When approaching a check point, it is generally better to reduce distance
- If one vehicle stops, the entire convoy should come to a halt.
- When stopping, leave enough space between vehicles to allow to each car to move away in case of emergency. Specifically in areas where bomb attacks are possible, keep the distance between vehicles when stopping.

- When driving, the distance between vehicles will often depend on the level and nature of perceived threat in the area. E.g. when traveling on a cleared road in a mined area, you will keep a larger distance between vehicles. A specific convoy organization may take place in case of risk of ambush (cf. checkpoints).

5. Communication arrangements

Define which vehicle is in charge to regularly contact project base, usually the leading one.

If there are a limited number of radios to go around then they should be distributed first to the convoy leader, then the last vehicle. For those vehicles that do not have radios, a basic set of signals should be developed and practiced before departure. These can be hand signals, flashing lights (headlights/taillights). The signals should be very basic and one of them should definitely be "DANGER".

6. Checkpoints and roadblock

It is important to define in advance how to act when passing checkpoints in convoy.

- An obvious choice is to have the convoy leader ensuring that the entire fleet is crossing safely, before leaving the place himself. In that case, he must be in possession of all information (name of passengers, cargo...) and answer to all question and requests from the people in charge of the checkpoint. For quiet check-point, Once passing thru it, the fleet should wait for the remaining vehicles further away.
- For simple checkpoints, the head of convoy may proceed out of for all the vehicles after the checkpoint, before taking again the speed cruise.

Ambush risk:

When a clear ambush risk has been identified, it is wise to consider a specific convoy organization. The principle is to ensure that enough distance is given between vehicles that travel together to ensure that if one is caught in an ambush, the other one can escape safely. Therefore when arriving to a unofficial roadblock, or having to go through natural or fake bottlenecks or obstacles, the second vehicle will wait until the first one goes thru, clear the obstacle and inform by radio that it is OK. The first vehicle will then move further away from the spot and wait for the second vehicle to pass the obstacle before proceeding the travel together.

In case a car is caught in an ambush, it is imperative that the other vehicles immediately drive away from the spot up to a safe place and await any vehicles that make it through the ambush. **THE ONLY THING TO DO IS TO ALERT IMMEDIATELY THE COORDINATION TEAM AND THE NEAREST AUTHORITIES TO ORGANISE A SAFE RESCUE. AT NO COST, ATTEMPT SHOULD BE MADE TO GO BACK AND ASSIST THE TEAM.** This only has the potential to add to the casualties, since without an armed escort, there is little to nothing that can be done.

How should vehicles and occupants react if they come under fire?

Should a vehicle come under fire, the reaction of the driver must be instinctive depending on the situation:

When fire is used by attackers positioned ahead on the road, it is often to force the car to stop. In such situation, it is better to stop immediately to show that you will not try to escape. However, depending on shooting distance, drive backward as fast as possible could be another option.

- When you are taken under fire with a clear intention to cause casualties, forget all previous notes about loads and speeds and attempt to break the land speed record getting out of danger. In the mean time passengers should as much as possible lay on the floor of the car.

Survival guidelines during abduction

At the moment of abduction

The **time of abduction is the most dangerous**. Kidnappers are nervous, the victim does not understand what's happening and the situation can easily get out of hand. Your only objective is to survive and therefore an important rule is that **escape must not be considered** at the time of the abduction, as this may lead to death. You should remain as calm as possible, particularly when being transported. Talking to kidnappers is recommended, provided this does not make them more nervous. Pay close attention to the orders given to you, obey these orders strictly, do not resist physically. Ask permission to do things (drink, sit, stand, ...).

Avoid eye contacts, but face the captors as it is proven that it is harder to hurt someone in such a case.

In some circumstances (i.e indiscriminate kidnapping), inform immediately the kidnappers that you are a humanitarian worker and try to negotiate not to be kidnapped on this basis.

During the abduction period

Most likely, conditions will be difficult and unpleasant. You may be exposed to intimidation attempt, to be drugged, to face fake life threats or fake promises to be released.

Post capture shock is a major physiological and psychological problem and may result in severe trauma, brought by total change of situation. The victim's entire world is brought into chaos and confusion, bringing the person in deep depression while the kidnappers assume a position of dominance.

It is important for the victim to recognise the change of situation, to **accept to be now a captive and to obey any order given**, and then **to take steps to restore a sense of self-esteem** at the earliest opportunity.

Health

Conscious efforts must be made to maintain both your physical and mental health, knowing that loss of body weight, health and physical problems are common during captivity. In that sense the following is recommended:

Eat all food that is offered rather than refusing it, however repulsive it may be.

A daily routine of exercises should be carried out, even if confined in a cell.

Keep your mind active with constructive and positive thoughts by whatever means suiting you (some prisoners have spent long period composing music in their head, designing the ideal house, writing poetry, ...), trying to focus on the future, when you will be again free.

Try to remember positive and pleasant memories, meditation techniques and other ways to connect to your own personality or to family/friends's lives

If available, writing material or books can be of considerable assistance. Ask for them.

Maintain self-discipline to overcome hostile environment and inactivity: impose yourself strict schedule, standard of hygiene and order, as much as possible.

Keep as clean as circumstances permit; ask for adequate washing and toilet facilities

Give your captors details of any medical treatment you have been receiving.

Prepare mentally for a long wait, perhaps many months, before your release. Do not allow you to become over-depressed or over-optimistic.

Try to keep an accurate record of time, even if your watch is taken away from you.

It is normal to be anxious about one's family, but be aware that MSF is very concern about your family and will provide them with every possible support.

Relationship with captors

It is important to realise that, **for the captors, the hostage represents an important value** (propaganda tool, possible insurance against attack by security forces,...). The hostage is also their means of obtaining what they demand. A dead hostage is worthless to them.

When several hostages are taken, try not to be separated and appoint one person to speak for the group, in order to represent a common front (not letting the captors playing the hostages off against each other).

Warning: a situation can develop in which victims and captors both see themselves as sharing the same problem. The result is the growth of mutual sympathy and identity of perspectives (Stockholm syndrome). Avoid permitting yourself to identify with their causes.

Develop, if possible, a good rapport with your captors, and try to earn respect from them. Do not beg, plea or cry for help.

DO NOT antagonise your captors unnecessary, as they have you in their power. Keep low profile, not giving the impression you investigate their motives.

DO NOT let you drawn into conversation about controversial subjects as politics and religious beliefs, rather discuss mutual subjects such as home, children, football, DO NOT commit physical violence or verbal aggression. DO NOT threaten to testify against captors, this may endanger your survival.

Undertake a bit of advertising about MSF activities.

Negotiation

Negotiating the release of a hostage is a matter for MSF. It is very important to realise **that all action is being taken by MSF to obtain your release** (and do not allow yourself to be convinced, as certain captors may try to persuade yourself, that you've been abandoned) and that the hostage should not interfere with the process. Except in very special case, do not negotiate your release yourself, nor discuss what action may be taken by MSF, as such discussions would probably only compromise the on-going negotiations. However, encourage captors to contact MSF or authorities, to let them know your conditions and whereabouts.

Accept talking on radio, phones or record video. Say only what you are asked or allowed to say.. If asked about peculiar details of your personal life, be aware this may be part of on going discussion between captors and people negotiating your release, to obtain a proof of life.

In case you are confronted to press during you captivity, be aware that press is only there for a scoop, not for your safety.

Escaping

It should in principles not be considered as it may cause more danger, particularly when abducted in a group.

You should only contemplate this if you are absolutely sure you will succeed, not endanger others or yourself, or that escaping is necessary to save your life.

Release

Another period of high risk may occur when release approaches and there may be a rise of tension among your captors. When time of release comes, proceed with great care and specifically:

Pay very close attention to the orders given to you, and obey these orders immediately.

Do not make unexpected moves

Be prepared for delays and disappointments

In case of armed rescue attempt, keep low, lie down and keep hands over your head. When approached by rescuer, remember they may not know your identity and confuse yourself with captors.

Weather Hazards & Natural Disasters - Earthquakes

Introduction

An earthquake is a sudden shaking of the earth caused by the breaking and shifting of rock beneath the earth's surface. Earthquakes can cause buildings and bridges to collapse, telephone and power lines to fall, and result in fires, explosions and landslides. Earthquakes can also cause huge ocean waves, called tsunamis, which travel long distances over water until they crash into coastal areas.

In certain regions of the world earthquakes are likely to occur. Earthquakes [cannot be predicted](#), but they have some patterns. Sometimes foreshocks precede quakes, but [nothing distinguishes](#) these from ordinary quakes. But every large event has a cluster of smaller [aftershocks](#) near the main shock.

When you work in a earthquake prone area:

- Establish an earthquake plan. Find out about earthquake plans developed by other institutions in the area.
- If you have a choice rent reinforced or steel-framed buildings.
- Improve the structures as needed:
 - Check and repair deep plaster cracks in ceilings.
 - Repair defective electrical wiring, leaky gas lines, and inflexible utility connections.
 - Install flexible pipe fittings to avoid gas or water leaks. Flexible fittings are more resistant to breakage.
 - Brace walls and chimneys and repair loose roof shingles.
- Minimize potential injuries through:
 - Anchoring overhead lighting fixtures.
 - Bracing high and top-heavy objects.
 - Bolting down water heaters, gas appliances and other heavy appliances such as stove, washer and dryer.
 - Placing large or heavy objects on lower shelves. Fasten shelves to walls.
 - Storing bottled foods, glass and other breakables on low shelves or in cabinets that can fasten shut.
 - Keep hazardous goods away from heat and where they are less likely to spill.
- Know where and how to shut off electricity, gas and water at main switches and valves.
- Identify danger zones in each room - near windows where glass can shatter, bookcases or furniture that can fall over, or under ceiling fixtures that could fall down. Blast Film or curtains can reduce the risk of shattering glass. Blast Film can be ordered through Procurement in Amsterdam.
- Locate safe spots in each room under a sturdy table, in hallways or against an inside wall.
- Prepare to survive on your own for at least three days. Carry an ID-card with your blood group and a list of Emergency Telephone Numbers. Assemble a disaster supply kit:
 - Drinking water.
 - First Aid Kit.
 - Water purifying tabs.
 - Canned food and (mechanical) can opener.
 - Toilet paper, etc.
 - Camp stove or barbecue (for outdoors emergency cooking).
 - Protective clothing; sturdy shoes; heavy work gloves.
 - Sleeping bags or blankets.
 - Battery-powered AM/FM radio.
 - Flashlights and extra batteries.
 - Fire extinguisher. Everyone should know how to use one.
 - Plastic sheeting/tarpaulin.
 - Toilet bucket.

- Plastic garbage bags.
- Digging tools, shovels.
- Wrenches (to turn off gas and water supplies).
- Whistle
- List of Emergency Telephone Numbers.

Keep a comparable kit in the vehicles in case they are on the road during an earthquake.

- Establish a meeting place where the team can reunite afterward. It can be different during and after working hours.
- Review your insurance policies. Most insurance companies require specific coverage in order for a claim to be paid after a natural disaster.
- Hold earthquake drills with your teams.

What to do during an earthquake?

- Wherever you are, expect the ground or floor to move violently. If you live in an apartment block or a multi-story building, you may experience more sway and less shaking than in a smaller, single-story building. Remain calm.
- Drop, Cover and Hold On! Minimize your movements during an earthquake to a few steps to a nearby safe place.
- Stay inside until the shaking stops and it is safe to go outside. Most injuries during earthquakes occur when people are hit by falling objects when entering or exiting buildings.
- If you are indoors, take cover under a sturdy desk, table or bench, in hallways or against an inside wall, and hold on. Don't stay in the kitchen. Stay away from glass, windows, fireplaces, outside doors or walls and anything that could fall, such as lighting fixtures or furniture. Protect your head and face with your arms.
- If there isn't a table or desk near you, cover your face and head with your arms and crouch in an inside corner of the building.
- If you are outdoors, stay there. Move away from buildings, chimneys, streetlights and utility wires.
- If you live in an apartment building or other multi-household structure with many levels, consider the following:
 - Get under a desk and stay away from windows and outside walls.
 - Stay in the building (many injuries occur as people flee a building and are struck by falling debris from above).
 - Be aware that the electricity may go out and sprinkler systems may come on.
 - DO NOT use the elevators.
- If you are in a crowded indoor public location:
 - Stay where you are. Do not rush for the doorways.
 - Move away from tall shelves, cabinets and bookcases containing objects that may fall.
 - Take cover and grab something to shield your head and face from falling debris and glass.
 - Be aware that the electricity may go out or the sprinkler systems or fire alarms may turn on.
 - DO NOT use the elevators.
- In a moving vehicle, stop as quickly as safety permits, and stay in the vehicle. Avoid stopping near or under buildings, trees, overhanging rocks, bridges, overpasses or utility wires. Then, proceed cautiously, watching for road and bridge damage.
- If you become trapped in debris:
 - Do not light a match.
 - Do not move about or kick up dust.
 - Cover your mouth with a handkerchief or clothing.

- Tap on a pipe or wall so rescuers can locate you. Use a whistle if one is available. Shout only as a last resort - shouting can cause you to inhale dangerous amounts of dust.
- Stay indoors until the shaking has stopped and you are sure exiting is safe.

Note: because most injuries occur when people are hit by falling objects when entering or exiting buildings, it is advisable not to run inside or outside a building when the ground starts shaking. However, when you are in a nonsolid building, on the ground floor, and the shaking is minimal it may be better to run outside. This is up to your own judgment.

What to do after an earthquake?

- Be prepared for aftershocks. These secondary shock waves are usually less violent than the main quake but can be strong enough to do additional damage to weakened structures. Each time you feel one, Drop, Cover and Hold On!
- Check for injuries. Do not attempt to move seriously injured persons unless they are in immediate danger of death or further injury. If you must move an unconscious person, first stabilize the neck and back.
 - If the victim is not breathing, carefully position the victim for artificial respiration, clear the airway and start mouth-to-mouth resuscitation.
 - Maintain body temperature with blankets.
 - Never try to feed liquids to an unconscious person.
- Use the telephone only to report life-threatening emergencies.
- Do not expect fire-fighters, police or paramedics to help you. They may not be available.
- If the electricity goes out, use flashlights or battery powered lanterns. Do not use candles, matches or open flames indoors after the earthquake because of possible gas leaks.
- Turn off the gas if you smell gas or think it's leaking.
- Shut off power if the electrical wiring has been damaged.
- Wear sturdy shoes in areas covered with fallen debris and broken glass.
- Look for and extinguish small fires. First switch off the electricity.
- Inspect the building for damage. Get everyone out if the building is unsafe.
- If you (must) go out after an earthquake, watch for fallen objects, downed electrical wires, weakened walls, bridges, roads and sidewalks.
- Do not use your vehicle, except in extreme emergency.
- Listen to the local radio for news and instructions from emergency officials.

Annex : Risk Assessment support document

MSF-Holland – Red-R, 2006

It is important that a thorough assessment is conducted of the risks that exist in a country or particular area. The key aim of a formal Risk Assessment process is to try to understand what threats exist and how widespread they may be. However, to develop a true appreciation of the risks involved, this process must also consider to what degree staff, MSF, or agencies in general, may be vulnerable to these threats. This process is essential if staff are to remain accurately informed about the nature of the risks involved, and therefore make more informed decisions about the security measures they need to adopt.

Risk, Threat and Vulnerability

First, it is helpful to distinguish between 'threat', 'vulnerability' and 'risk', by defining them as follows:

- Threat:** a potential act that may result in harm or injury to staff, or loss of, or damage to, agency property or programme. These threats may be to an individual, the organisation, or its programme activities.
- Vulnerability:** the extent to which an agency's staff, property, or programme is exposed to a threat.
- Risk:** the likelihood and impact of encountering a threat. Risk is therefore the result of the threats in the environment combined with the organisations or staff vulnerability to them.
- Risk = Threat x Vulnerability:** demonstrates the relationship between risk, threat and vulnerability. The greater the threats (in frequency and severity) and the greater the organisations or staff vulnerability to them, the higher the risk.

Threat Analysis

The first stage in any Risk Assessment is to identify different threats that exist. Further analysis will enable you to determine the situations in which they may occur, their frequency, and the possible causes. For MSF, a threat is considered to be any event or incident that may result in harm or injury to MSF staff, loss or damage of MSF property, or negative impacts on MSF's programmes. Different types of threats may require different security measures. Therefore, it is necessary to assess and analyse all different threats that are present in that context order to ensure that any measures taken are appropriate.

One method of identifying the threats that exist is to ask staff (both expatriate and national) to individually list the main security and safety threats that they face. Alternatively, meet with senior staff to brainstorm the main threats to security and safety, and ask them staff whether any of the threats from the list below are applicable in that context.

The list of possible threats in the country or particular areas may include some of the following:

- | | | |
|---|--|--|
| <input type="checkbox"/> Abduction | <input type="checkbox"/> Avalanche | <input type="checkbox"/> Cross-fire |
| <input type="checkbox"/> Aerial Bombardment | <input type="checkbox"/> Blackmail | <input type="checkbox"/> Cyclone/Typhoon/Hurricane |
| <input type="checkbox"/> Air Crash | <input type="checkbox"/> Bomb Attack (IED/VBIED) | <input type="checkbox"/> Demonstration |
| <input type="checkbox"/> Ambush | <input type="checkbox"/> Bribery | <input type="checkbox"/> Detention |
| <input type="checkbox"/> Armed robbery | <input type="checkbox"/> Car-jacking | <input type="checkbox"/> Earthquake |
| <input type="checkbox"/> Arrest | <input type="checkbox"/> CBRN Accident | <input type="checkbox"/> Extortion |
| <input type="checkbox"/> Arson | <input type="checkbox"/> CBRN Attack | <input type="checkbox"/> Fire |
| <input type="checkbox"/> Assault | <input type="checkbox"/> Civil Disorder | <input type="checkbox"/> Flood |

- | | | |
|---|---|---|
| <input type="checkbox"/> <i>Fraud</i> | <input type="checkbox"/> <i>Murder</i> | <input type="checkbox"/> <i>Shelling</i> |
| <input type="checkbox"/> <i>Grenade Attack</i> | <input type="checkbox"/> <i>Occupational Injury</i> | <input type="checkbox"/> <i>Shooting</i> |
| <input type="checkbox"/> <i>Harassment</i> | <input type="checkbox"/> <i>Rioting</i> | <input type="checkbox"/> <i>Sniper-fire</i> |
| <input type="checkbox"/> <i>HIV</i> | <input type="checkbox"/> <i>Road Block</i> | <input type="checkbox"/> <i>Stress</i> |
| <input type="checkbox"/> <i>Hostage Situation</i> | <input type="checkbox"/> <i>Robbery</i> | <input type="checkbox"/> <i>Theft</i> |
| <input type="checkbox"/> <i>Illness/Disease</i> | <input type="checkbox"/> <i>Sabotage</i> | <input type="checkbox"/> <i>Threat/Death Threat</i> |
| <input type="checkbox"/> <i>Kidnapping</i> | <input type="checkbox"/> <i>Sexual Assault</i> | <input type="checkbox"/> <i>Tribal/Clan Clash</i> |
| <input type="checkbox"/> <i>Landmine/UXO</i> | <input type="checkbox"/> <i>Sexual Exploitation</i> | <input type="checkbox"/> <i>Tsunami</i> |
| <input type="checkbox"/> <i>Landslide</i> | <input type="checkbox"/> <i>Sexual Harassment</i> | <input type="checkbox"/> <i>Vehicle Accident</i> |
| <input type="checkbox"/> <i>Looting</i> | | <input type="checkbox"/> <i>Volcano</i> |
| <input type="checkbox"/> <i>Mortar Attack</i> | | |
| <input type="checkbox"/> <i>Mugging</i> | | |

Vulnerability Analysis

The second stage in a Risk Assessment is to analyse vulnerability. A Vulnerability Analysis looks at why and in what ways humanitarian agencies, and MSF in particular, might be more or less at risk from the same threats than other groups. Not all threats that exist in a particular country or area will affect everyone in a similar way. The vulnerability of an agency and its staff to different threats can be influenced directly and indirectly by a number of factors. Therefore, it is important to consider what issues might make MSF staff more, or less, vulnerable to the threats identified. Examples of issues to be considered are:

- Location** - are staff more at risk because of the location of MSF programme sites (accommodation, offices, warehouses etc)? Are staff in risky locations for short periods of time (travelling through, undertaking assessments etc)? Could the security situation of areas in which staff work change quickly?
- Exposure of staff & property** - are staff more at risk due to the type of programme? Do staff spend extended periods travelling in vehicles/convoys, which tend to be more vulnerable? Are programme sites protected (fences, walls, guards etc)? Are staff members performing certain tasks or holding certain positions more at risk?
- Value of property** - are staff more at risk because of the (perceived) value of MSF's assets? Does the programme have large quantities of valuable assets (vehicles, radios, computers, supplies etc)? Do staff have to carry or store large sums of cash?
- Impact of programmes** - are staff more at risk because of the population or groups MSF works with? Does MSF's programme target or impact on particular groups more than others (IDPs or refugees as opposed to host population, populations in rebel or government controlled areas etc)?
- Security & safety measures** - are staff at risk because of a lack of, or inappropriateness of, security and safety measures? Is there security procedures and contingency plans in place? Do they reflect and adapt to the changing security situation? Are they updated and reviewed on a regular basis? Could staff be at risk because they do not comply with security and safety procedures? Are security and safety measures clearly explained and disseminated to staff? Do staff clearly understand and agree with measures in place?
- Staff interpersonal skills** - could certain staff be more at risk due to their behaviour or how they communicate? Are staff briefed on behavioural and cultural awareness? Are all staff able to communicate clearly MSF's mandate, presence and role to different actors?
- Image of staff & programmes** - could staff be more at risk due to a negative perception of MSF and its programmes? Is the appearance and behaviour of staff perceived negatively by the local population or officials? Does the nationality,

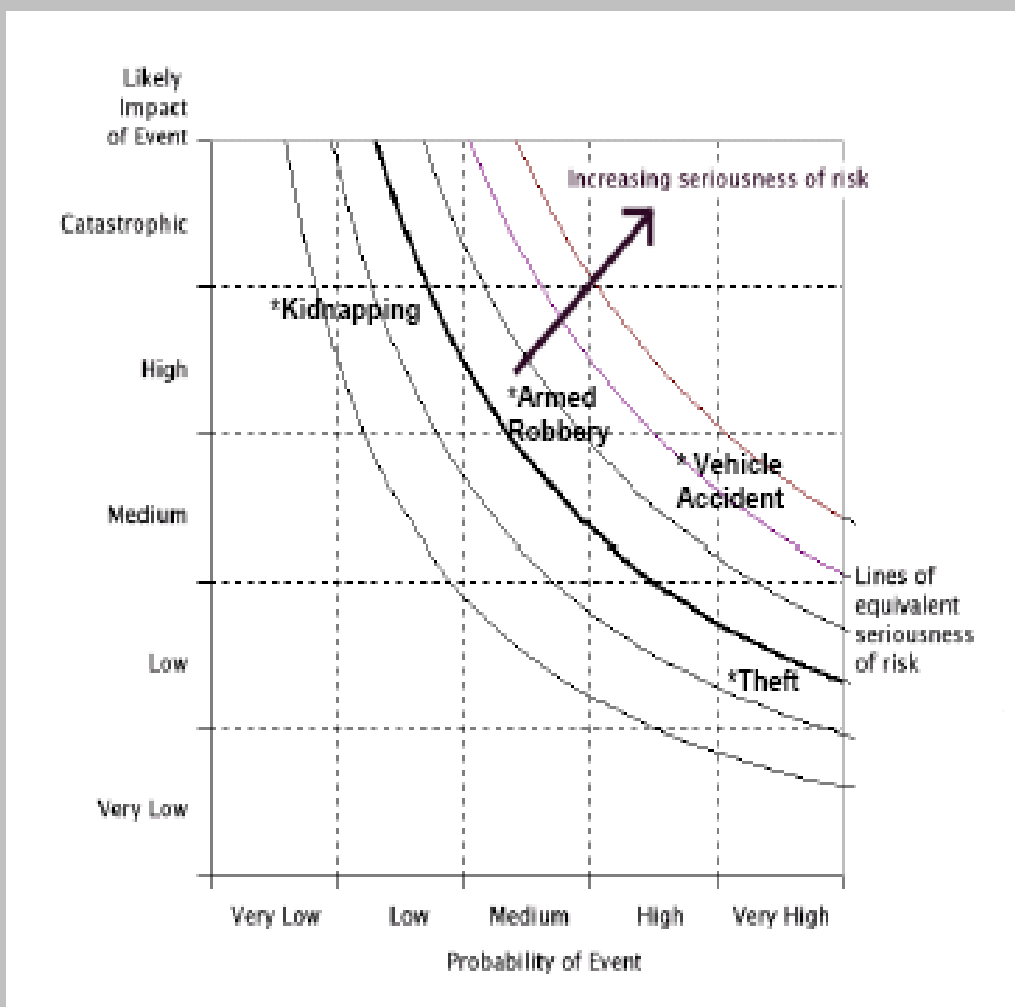
ethnicity, religion, gender, and age of staff affect their security? Could programmes be negatively perceived as aiding one particular group, or undermining another? Do programme activities associate MSF with other negatively perceived agencies or actors (UN, peacekeeping operations, coalition forces etc)?

Risk Analysis

It is neither possible nor effective to ensure that extensive security and safety measures are in place to deal with every potential threat. It is therefore important to analyse the different threats, and staff members' vulnerability to them, in order to determine which threats pose the greatest risk to MSF staff in a particular country or area.

To understand which are the most significant risks, it is important carry out a Risk Analysis to determine the probability of a threat occurring, and its impact if it does. 'Impact' should be measured in terms of effects on individuals directly involved (physical or psychological) or the organisation as a whole (MSF's presence, programme activities, image and reputation etc). Those threats that have the highest probability of occurring, and the greatest impact should they occur, are clearly the

One Risk Analysis tool involves plotting the threats on a Risk Matrix. As the example below shows, the two main characteristics of the threat we are seeking to assess is the probability of such an event occurring to us (how likely it is) and the potential impact of the event should it occur.



most significant risks.

The key to security and safety management is firstly being able to identify the main risks, and then taking pro-active steps to avoid these incidents occurring. It is often difficult to do anything about the threats that exist. However, it may be possible to reduce the vulnerability of MSF staff to these threats, either by:

- ❑ Reducing the likelihood of an incident happening by establishing measures and procedures (Standard Operating Procedures) which minimise staff exposure to the threat (e.g. by driving slowly, or employing guards).*
- ❑ Reducing the potential impact of an incident by establishing measures and procedures (Contingency Plans) which ensure that staff respond to an incident in the best way possible, thereby reducing its impact on staff, assets and programmes once it has occurred. (e.g. by wearing seatbelts, or limiting the amount of cash held in the safe).*

Understanding the risks in more detail will enable teams to identify which threats must be addressed, make informed decisions about which security and safety measures to adopt, and avoid adopting unnecessary measures.

What Is An Acceptable Risk?

There will be situations where, despite having extensive security and safety measures and procedures in place to reduce the probability of, and/or impact of, an incident occurring, certain risks cannot be reduced sufficiently to ensure staff safety. An essential part of any Risk Analysis is also to consider if, in these situations, staff should be exposed to these risks.

Not all humanitarian agencies accept the same level of risk. MSF may interpret a security situation differently or, because of its mandate, be more willing than others to accept higher levels of risk. Sometimes MSF decides to remain in a high-risk environment because it feels that the benefits to, or the urgent needs of, the local population outweigh the risks to which staff are exposed. Other agencies may be unwilling to operate in the same context. While all staff should recognise that risk is an inherent part of MSF's missions, ensuring truly 'informed consent' by individual staff for the risks they are taking is difficult. It is important to continually ensure that the level of risk MSF considers to be acceptable is compatible with the feelings of individual staff members.

In some situations it may be necessary to restrict certain staff from working in, or traveling to, particular countries or areas, because the level of risk to which they are exposed may not be considered acceptable due to their level of experience, role, or terms of reference.

Chapter 3:

SECURITY INFORMATION SHARING AND INCIDENT REPORTING

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Introduction

A typology has been developed which describes the 3 types of incidents and events that need to be systematically reported from the field. It is the responsibility of the HOM to timely report them in writing to the Desk, using an incident report form.

In the normal course of the mission activities, the sharing and reporting of security information is mainly done through 2 documents, the “situation report” (or “sitrep”) and the “incidents logbook”. The former is done by the HOM and shared on a monthly basis; the latter is done at field level, allowing a chronological recording of the main security events in our area of activities.

On the CD-ROM : SECU REFERENCE DOC\ 03 Security-Incident Reporting\...

- Incident Typology MSFCH JAN07.doc
- Incident report form Feb07.doc
- Monthly sitrep form.doc
- Logbook incident form Apr06.xls

INCIDENT TYPOLOGY

January 2007

It is the responsibility of the HOM to systematically and timely report all security and safety incidents happening in MSF installations (projects, houses, vehicles, offices, etc) or to all MSF employees on duty, and to MSF international employees off duty (Categories 1 & 2 below), using an **incident report form**. Events as described in the 3rd category, must as well be reported in writing (thru an IR or other).

All those incidents and events are centralised at the level of the direction of operation.

1. Security incidents type

- **Robbery** (incl. armed robbery, car-jacking, theft...)
- **Looting** (incl. forced requisition of materials)
- **Ambush** (incl. roadblocks)
- **Shootings** (incl. cross-fire, stray bullets, sniper-fire...)
- **Shelling** (incl. aerial bombardment, grenades attacks, bombs...)
- **Explosives** (incl. landmines, Unexploded Ordnance –UXO-, Improvised Explosive Devices –IED-, Chemical Biological Radiological or Nuclear –CBRN- attack,
- **Threats** (incl. threats or death threats, extortion or bribery attempt...)
- **Harassment** (incl. Verbal/physical misconduct, intimidations or hostility from staff or communities or authorities towards MSF, abuse of power against MSF...)
- **Physical aggression** (incl. torture, bodily harm, lynching, murder)
- **Sexual Aggression** (incl. Rape, harassment)
- **Civil Unrest** (communal, gang or ethnic violence, demonstrations, rioting and mob violence)
- **Intrusion** by the military / police in MSF structures...
- **Detention** (incl. arbitrary arrest, imprisonment) - *by authorities*
- **Kidnapping** (incl. abduction, hostage situation)- *by other actors*

2. Safety Incidents type

- **Traffic accidents** concerning:
 - MSF vehicles and other MSF transport means (owned & rented)
 - International employees on private transportation means or en route
 - Serious MSF vehicle breakdowns in unstable contexts
 - Air / Sea accidents (companies usually used by MSF)
- **Health issues leading to deaths or illness** from disease, accident or natural causes (that may lead to evacuation of an MSF staff), exposure to contaminants (blood, chemicals, etc) and to elements (extreme cold/heat, wildlife, etc)
- **Disaster situations leading to harm or damages** to MSF staff and property due to natural disasters (i.e. floods, earthquake, tsunami) or technological disasters (i.e. fire, chemical spills)

3. Other events to be reported

- **Severe / rapid security context changes in our operational environment** that may lead rapid change of security phase, suspension of activities, staff evacuation, forced confinement... Political crisis, generalized instability, elections, massive human rights violation, siege, curfews, Security Incidents occurring to other humanitarian actors in the same area...
- Special issues in relation with **MSF employees** such as :
 - **MSF national employee off duty** victim of security incidents
 - **Misbehavior** (incl. abuse of power, fraud, ...) by an international or national employee.
 - **Security mismanagement** by employee (incl. no-respect of MSF security rules)

Specify in the IR, the seriousness of the impact and consequence of the incident on MSF:

MINOR: Property loss, material damage, alert, stress, etc.

MEDIUM: Gross property and material damage, light injuries, stress, etc.

SEVERE: Injuries resulting to hospitalisation, repatriation, life threatening situations, etc.

CRITICAL: Kidnapping, serious staff casualties, life-threatening or crippling injuries, etc.

INCIDENT REPORT FORM

SECURITY INCIDENT REPORT N°: XX/2007
MISSION/PROJECT:

Incident type:
Date/time of incident:
Precise location of incident:
Information source:

Reporter's name:
Date of Report:

Description of the incident (facts only)

Analysis/Conclusion

Measures taken / planned by MSF

Explanation about the incident report form:

An incident report should be filled and sent to the RP in the shortest possible time (usually the same day the event takes place) every time an unexpected event can generate a crisis situation by putting in question the physical integrity or security of MSF personnel and of MSF patients/beneficiaries within MSF premises only, or the programme continuity. Examples of security events/incidents requiring an incident report:

- *An accident leading to death or physical harm within the team;*
- *Kidnapping, arrest, direct threats, assault, rape or all forms of violence demonstrated against team members or against MSF patients/beneficiaries within MSF premises;*
- *A situation in which a team finds itself blocked in a highly insecure zone without any means of evacuation;*
- *Criminal act/forced entry/damages/armed robbery to MSF premises;*
- *All contextual change leading to an evacuation of MSF team.*
- *Similar incidents targeting other MSF sections in the same locations where MSF-CH operates.*

In highly insecure contexts, the reporting could be broadened to incidents affecting other NGOs.

Monthly Situation Report

January 2007

ANNEX 7

<u>Monthly Situation Report</u>	
Country:	
Written by:	Date:

➔ Sensitive and confidential information must be distinguished from information that could be spread within the MSF movement: e.g. a delicate analysis of the governmental policy, confidential information coming from other organizations, etc.

This information may be written in *red and italic*, so that the desk can easily detect it.

I. EVOLUTION OF THE CONTEXT

1. Political, economic environment: national and regional

Description of the evolution of the context in the country during the period in question: significant political events and their implication (elections, demonstrations...), economic factors and indicators if available (inflation...), the international context related to the country, situation in the neighboring countries, particular relations with another country/alliances, regional summits, etc. with analysis

2. Security situation

Description of combat zones or areas of tension, security evolution and analysis with impact, threats, risks or potential risks for MSF. Update on incidents impacting on MSF, particular measures taken during the period in response: curfew, changes in the security guideline of the mission, etc.

3. Humanitarian situation

*Description of the evolution of population movements, potential emergencies /new needs, arrival or departure of humanitarian actors, human rights violations.
Analysis of whether the overall humanitarian response matches the needs of vulnerable people and whether potential gaps appear.*

4. MSF Program Update

Here one should describe the main successes achieved during the last month, constraints in programme, and solutions planned. Activities should not be described in detail. Where applicable analysis should be included.

- a. Progression of project activities over the last month, as measured through the limited number of activity indicators chosen per project*
- b. Medical*
- c. Human resources*
- d. Logistics*
- e. Finance*
- f. Communications*
- g. Plans for next month*
- h. Questions/comments for HQ*

SECURITY EVENT FOLLOW-UP MATRIX (Example to be adapted by the mission)

Apr. 06

Date	Source	Description of incident	MSF Analysis	MSF Reaction

Chapter 4:

CRISIS MANAGEMENT

Table of content / Chapter 4:

1. Field crisis management	p.71
2. Crisis management protocol	p.75
3. Stress Prevention And Management (SPAM)	p.101

Introduction:

The field crisis management is an outline of the key actions to be taken at field level allowing an efficient response when a security incident happens.

The crisis management protocol is a detailed protocol, which gives guidance to respond to crisis situation, including the functioning of a crisis cell in case of major crisis.

The Stress prevention and management (SPAM) is a short presentation regarding what to do, who to contact when the team is facing traumatic stress, linked to a security incident.

On the CD-ROM : SECU REFERENCE DOC\ 04 Crisis Management \...

→ Field crisis management 8MAR07.doc

→ PROTOCOL CRISIS MANAGEMENT 04AUG06.doc

→ SPAM introduction document FEB07.doc

FIELD CRISIS MANAGEMENT: WHAT TO DO WHEN A SECURITY INCIDENT HAPPENS?

March 2007

As explained in the MSF crisis management protocol (August 2006), we differentiate “minor” crisis, which are dealt within the normal operation line, from “major” crisis which complexity and seriousness require specific set-up and line of management outside of the OP (a crisis cell). This document, which complements the protocol, aims at giving simple guidance to the responsible of MSF security in mission, in order to respond more efficiently to “minor” crisis situations linked to a security incident.

Despite all analyses done, precautions taken and security procedures in place, security incidents can happen unexpectedly, anywhere, at any time, to anyone in the mission. In such situation, a rapid and efficient reaction to a security incident can minimize the consequences and might save lives! Therefore, the management of security incidents is utmost important, aiming at first to bring back alive and safe any member of the team affected, avoid harm to others and minimize the impact to the MSF staff and operations.

BEFORE

Even if an unexpected incident occurs, there are some steps to take in advance that can optimise our response to it and therefore minimize its consequences.

As part of your security guideline you should have already developed the following:

- **Participative risk analysis**, in order to identify the likely threats in the project and assess the degree to which we are vulnerable to them
 - ▶ When high risks are identified, prepare what to do taking into account the 2 incident sides: what to do if you are victim of an incident? What the rest of the team should do to deal with the situation?
 - > Technical guidelines (convoys and travel, battlefield survival, recovery of staff, landmines areas, natural disasters, etc.) should cover the first aspect.
 - > Contingency plans should cover the second aspect based on possible scenarios (team and medical evacuation, response procedure to kidnapping, crime, violence or sexual aggression, etc).
 - Pay attention to adherence to agreed procedures in normal set-up since there will be most likely used to inform about an incident (how many times in a mission, nothing happens after a planned contact fails to materialise because we believe it was just forgotten?) It is better to have a lighter but used procedure than a comprehensive one but not followed.
 - ▶ Brief the team around principles of crisis management and contingency plans, as they have to be implemented immediately after the incident occurs.
- **Identification of actors** in your environment, not only those who represent a possible factor of risk to MSF, but also the ones who could help MSF to resolve a crisis situation and initiate contact with them.
- **Changes over time**: be aware of the changes in the context or in the environment as time goes by, and adapt your analysis and actions strategy accordingly.

Everyone (international and national) in the mission must be aware of the dangers we face and the possible consequences on people or activities. Organise regular **security meetings and briefings** in order to keep the team aware of the evolution of the security situation.

What ever the general operational context is, there are always, at one point, **some more sensitive activities or movements** to organise (i.e, exploratory mission, movement to locations where specific risks have been identified...). In that case special attention must be given to the preparedness of the mission:

- ▶ Develop with the team a specific security procedure, encompassing all aspects of security management (checking existing secu situation, analysing context and risks, contacts with key

actors prior to and during the mission, communication and transport preparation, briefing of the team including national staff, identifying back-up person and defining his role...). After the mission, debrief with the team to draw lessons and ensure that our preparation was adequate.

- ▶ Prepare yourself and the team to the eventual occurrence of a security incident during the mission and be ready to respond to it, by developing possible scenarios and responses.

In conflict or high-violence context, two internal time-related enemies are **the routine** (in the functioning of the mission leading to loose procedures and preparation) and **the minimisation** of the seriousness of the situation/incidents occurring (leading to taking more and more risks). Do not let them develop: have a dynamic approach, involving the team in regular context, actors and risks assessment, or perception of NGOs/MSF, review of scenarios, strategies, procedures and rules... Take the time to properly analyse security incidents occurring to MSF and other organisations.

DURING

Keep in mind always the 3 principles of crisis management:

1. Any decisions are made in the spirit of protection and safety of MSF personnel in decisions made (preservation of victims' physical & mental health, but as well of the team dealing with the crisis);
2. MSF's systematic assumption of responsibility for crisis management, from start to finish, taking into account our own limits and specificities;
3. Trying as much as possible to keep some control on the events by properly managing the information & communication and thru the elaboration of action strategies.

Decision-making: During a crisis, it is essential to well identify the centre of decisions and that the entire team understands and respects scrupulously the chain of decision.

Panic Control: While perfectly normal to "panic" and stress when an incident occurs (as long as it does not last long), it is important to recover self-control! Many things have to be done simultaneously so being calm even in the worst-case scenario, helps a lot and it is transmissible to other team members. Incident management preparedness (such as briefings and contingency plans) helps to reduce and control the panic.

Alert the team: Depending of the gravity of the incident and of its type, locate all the team members and inform them timely (international and national alike) and keep on briefing them for any major development. Be careful not to create more tension in MSF direct environment by suddenly calling back everyone for a briefing. Special care should be given to deal with stress and fear in the team.

Alert the HoM/RP: alert immediately your line of hierarchy (RT / HOM / RP) about the incident (preferably by phone), so the information is shared. If your direct responsible is not reachable, contact the level above. Decisions have to be made quickly, and except in cases of extreme urgency (i.e. death threat or immediate evacuation), the decision should always be taken in common with the HoM / RP. Within 24 hours, report in writing the incident using the standardised security incident report.

Inquiry: Try to understand what really have happened and collect as many information and facts as possible, and from various sources. Properly debrief witnesses of the incident and reconstruct as precisely the sequence of events. Start from the beginning a logbook of events linked to the incident. Report in writing, but distinctly, the relevant facts and rumours, as well as decisions made by the team.

Response: Activate the contingency plan if existing and apply strictly the security rules when facing an incident (team must not discuss the agreed security rules during an incident; if necessary, they will be reviewed once the incident is closed). In case that the contingency plan fails to provide a proper solution, adapt it to the needs of the moment (by using your common sense or contacting the HQs or other organisations in the field that may have a better idea).

Always keep the responsibility of the team and of the management of the crisis. Do not hand over the management to other organisations (exceptions must be validated by HQ).

- In case of a critical incident (i.e. kidnapping) ask immediate help from the HQs which will activate a specific mechanism of incident management³⁹. Be aware that serious incidents may lead to suspension of activities, partial or total evacuation of the team, etc...

Organization: Distribute tasks as in the guideline / contingency plans, and define strategies and activities (operational, administrative, networking and lobbying, external communication, emotional support ...). Consider setting-up a crisis team dedicated to the management of the incident until the situation is back to normal, preferably in a separate room.. If normal activities are ongoing and think about dispatching the usual daily work of the crisis team members among the rest of the team. The latter should be regularly informed but should not disrupt the work of the former.

Rescue team: it is sometimes necessary to send another team to the location of the incident. Be cautious not to put other people in danger, agree on communication procedure, move to the closest safe area together with reliable partners, collect information on the way... In such situation, decisions to move should be taken in common with the desk in Geneva.

Incident, over or on-going? Whatever the seriousness of the incident, the set-up of the response management and the decisions to make are different if the incident is “over” (dealing with the consequences), or if it is still on going, i.e. staff unable to move in a dangerous situation, (dealing with the situation and the consequences).

Information to others: When possible, inform other field actors in order to prevent further exposure to the danger (other MSF sections, other humanitarian actors, relevant authorities). Organisations like ICRC or UN agencies may be able to help you, but keep an adequate level of confidentiality. In case of crime and traffic related incidents report the incident to the competent authorities.

Responsibility: during the management of the crisis, responsibilities that led to the incident should not be addressed (part of the “AFTER” tasks) and the focus must remain on solution findings.

AFTER

Experience shows that post-crisis situation requires often as much energy and management skills, from the team, as the crisis itself. As well, be aware that consequences of incidents can last for long on personal or mission level, and actions may be required during days or months.

It requires early identifying who, in the mission, will be responsible for coordinating post-crisis activities. When the management of the crisis required a lot of energy and generated much stress from the responsible, it is advisable to have a different person to manage the post-crisis (quick demobilisation of the crisis coordinator after it is solved).

Follow-up: It is very important to follow up all security incidents till the moment that we can say: “case closed”. Inquiries should continue till all parameters are clear, and properly reported in writing. Special attention should be paid to the following issues:

- Properly debriefing the victims of the incident, and providing them with adequate support. Separate the emotional debriefing with the operational one.
- Administrative follow-up with the authorities (if any).

Analysis & Evaluation: A triple analysis should be done in order to draw lessons and review our risk prevention strategy and security measures & procedures: (1) of the incident (Nature, Motives & Intention), (2) of the management of the incident, and (3) of the adequacy of our contingency plans, are important. Depending on the seriousness of the case, it may be advisable to have someone external to the team (HQ person) to come and help the team to work on the issue.

Those analyses should lead to:

- Better understanding of why an incident happened and if MSF was targeted as such.
- Identification of trends and occurrence of risk.
- Identify weaknesses and/or structural deficiencies in security management of the mission.
- Revision of the risk assessment and context analysis of the mission.
- Revision of the security strategies, security measures and contingency planning.
- Possible review of MSF activities.

³⁹ See MSFCH Crisis Management Protocol, crisis cell.

CRISIS MANAGEMENT PROTOCOL

04 August 2006

SUMMARY

While preventive security management must remain the priority of the teams in order to prevent as much as possible serious incidents to occur, there are however sudden and unexpected situations that can put in question MSF programmes, MSF credibility or even the physical security of MSF personnel, leading in turn to a situation of crisis.

This protocol is developed to improve the efficiency of MSF staff at headquarter and field levels to handle such situation. Based notably on lessons-learnt from previous crisis situations that have occurred in MSF-CH, it defines the principles and the organisational models applied within MSF in order to optimise our actions to resolve a crisis. The protocol should be seen a toolbox, at the disposal of the teams, which will be used in a different manner depending on the type, the context and the evolution of the crisis.

In any crisis situation, the main objective is straightforward: to bring alive and back to safety the victims of a serious incident. But this should be done in a way that takes into account our limits and specificities as a humanitarian organisation and that minimizes the negative impact on future humanitarian assistance in the region.

In reaching such objectives and, MSF will apply 3 main general principles:

To ensure that any decision are made in the spirit of protection and safety of our personnel, and first of all, the one directly victim of the incident.

To systematically assume the responsibility for crisis management when a member of its personnel is in immediate danger. Without delay MSF will activate its resources and does not delegate decision-making capacity on crisis resolution.

To maintain as much as possible the control of the events by properly managing the information/communication and by elaborating action strategies.

When it comes to the last point, the protocol is listing some essential components and factors that are common to most crisis situation and that the team in charge of managing the crisis needs to reflect on. They can be divided into 2 main families: operational vs organisational.

Operational issues cover the different types of activities that can be made to assist in the crisis resolution. It includes the following:	Organisational issues cover notably the following:
<ul style="list-style-type: none"> • Context analysis and understanding the nature and evolution of the crisis • Operational developments and leads • Contact with governments & institutions • Contact/mobilisation of the local community • Media communication • External expert role in support to MSF actions • Public mobilisation, including the role of the family • Potential judicial follow-up • Etc... 	<ul style="list-style-type: none"> • Setting up a crisis team : who does what • Managing the information around the crisis • Managing the internal communication • Relation with families of the victims • Psychological and emotional support to be provided • Administration and resources (financial and human) management • Etc...

When it comes specifically to psychological and emotional support, it is stated that it is compulsory to provide such support in any traumatic event involving MSF personnel. When international staff is involved, the OD activates a specific mechanism (SPAM), under HR responsibilities.

In the document we make an important distinction between 2 types of crisis requesting 2 different organisational models in order to best respond to the situation:

“Minor crisis” evokes short-term consequences on MSF programmes in the country only, and requires a stronger involvement of the Program Responsible and of the Operational Director in support to the field .

“Major crisis” evokes exceptional and complex consequences on the MSF personnel and activities, and requires a separate organisation, outside of the usual operational line, with specific means: a “Crisis Cell”.

A crisis cell is an exceptional set-up. It requires clarification about the functioning and the line of responsibilities. It is composed of a limited executive cell in Geneva, one (or more) field executive cell, and a strategic committee. Decision-making process are strongly centralised at the level of the Crisis Cell Responsible.

Finally, a specific attention in the protocol is also given to the post-crisis situation which requires as well a lot of energy and resources and needs to be properly planned.

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INTRODUCTION AND DEFINITIONS

By definition, the evolution or resolution of a crisis cannot be predicted. This document does not therefore provide a rigid framework for managing crises, but rather some general principles to cover these situations. It is conceived as an aid for handling certain acute situations with a maximum of efficiency. Based on recent MSF Switzerland experiences, it should allow field teams and headquarters to take rational, well-founded and rapid decisions for the effective management of all crises.

However, it is above all of primordial importance that headquarters and field teams do everything possible to anticipate crises and prevent incidents, staying aware of intervention contexts and the risks involved and demonstrating a capacity to put in place appropriate security strategies and to adhere to security measures.

Some definitions:

Crisis: a sudden or unexpected situation that puts programme continuity, the credibility of MSF's mission or the physical security of MSF field personnel or their beneficiaries in question. Such a situation is generally accompanied by a strong and enduring emotional reaction within the teams.

Crisis management: the organisation and specific working principles applied within MSF in order to optimise actions and reactions during such a situation, and to resolve the crisis when possible.

Two types of management can apply according to the nature and gravity of the event as well as the nature of the ensuing crisis. They cover:

- A "minor" crisis: follows an incident which is serious but evokes short-term consequences only on MSF's activities in the country. It is managed by an increased involvement of the Programme Responsible (PR) and his/her team in headquarters and the head of mission (HoM) and his/her team in the field. The decisional lines are reinforced by a first-line involvement of the Director of Operations (DO). If the situation evolves badly, a minor crisis can become major and its management is taken over by a crisis cell.
- A "major" crisis: follows an incident generating exceptional, enduring and complex consequences either on the personnel or activities of MSF. It necessitates the creation of a crisis cell (CC). Remaining in place until the situation is brought to a head, the CC is managed outside the operations department and involves separate organisation and means.

Types of events/incidents in a mission which can generate a crisis situation:

- All security incidents⁴⁰, such as:
 - An accident leading to death or physical harm within the team;
 - Kidnapping, arrest, direct threats, assault, rape or all forms of violence demonstrated against team members or against MSF patients/beneficiaries within MSF premises;
 - A situation in which a team finds itself blocked in a highly insecure zone without any means of evacuation;
 - Criminal act/forced entry/damages/armed robbery to MSF premises;
- All accusations bearing repercussions on the moral integrity of the MSF team: illegal and/or inappropriate behaviour (e.g. paedophilia, misappropriation of funds, etc);

⁴⁰ Recent security incidents within MSF Switzerland:

- August 2002: kidnapping of MSF HoM in Dagestan lasting 20 months;
- November 2002: 7 people, including 4 MSF national staff, were killed and 6 others were injured when an MSF car drove over an anti-tank mine explosion;
- February 2005: an MSF car is ambushed by an armed group around Gulu, Uganda.
- June 2005: kidnapping of 2 MSF employees – one national, one international - in Ituri, DRC, lasting 10 days.

Other situations such as cases of “burn out” can also generate serious/crisis situation, but are clearly avoidable if the coordination/desk teams take action on time.

CRISIS MANAGEMENT

3.1 Objective of crisis management

The primary objective is straightforward: **to bring alive and back to safety the victims of a serious incident.**

The secondary one is **to minimize the negative impact of the crisis management on future humanitarian activities in the region** (meaning not creating any precedent that would jeopardise the assistance to a population in danger).

3.2 General principles of crisis management

The most important principle is **ensuring that any decision are made in the spirit of protection and safety of international and national personnel.** This amounts to providing maximum preservation of the victims’ physical and mental health.

It also includes ensuring a safe working environment for those handling the crisis.

The second main principle involves **MSF’s systematic assumption of responsibility for crisis management – from start to finish** - when a member of its personnel is in immediate danger, taking into account our limits and specificities as an humanitarian organisation. MSF activates its own resources without delay and does not delegate decision-making capacity on crisis resolution to any governmental or private institution⁴¹. Obviously this does not exclude the possibility of calling upon other institutions when they can make useful contributions to the situation.

The third main principle consists of **maintaining as much as possible the control of the events by properly managing the information/communication (internally and externally) and by the elaboration of action strategies**, (to be regularly and objectively evaluated) taking into account the totality of factors that intervene during a crisis. They include:

- The complexity of a crisis and its environment (reason for and nature of a crisis, evolution of the context, principal actors, etc);
- Different types of activities that could assist in the crisis resolution (operation or institutional contacts, media, etc), the need and level of mobilisation/public communication required on the incident;
- Different factors linked to the crisis management (family, information management, administrative management, etc);
- Other factors not linked to the crisis management but which could interfere with it (programme continuity, team stress, etc).

In addition to applying these three general principles, we must always bear in mind the necessity **to guarantee throughout the crisis the continuity of the implementation of MSF Switzerland’s operational project**: other missions should not suffer from the crisis and of its management.

⁴¹ We consider that in the majority of cases, MSF is the best placed (given our network of contacts created via our medical programmes) and the most willing institutional actor to find solutions. However we are aware that a government, who has the political will to solve a situation, can have far more means and possibilities to take actions than an NGO.

3.3 The major components of crisis management

As already stated above, the nature, evolution and resolution of each crisis is unpredictable. There is therefore no rigid framework for the organisation of crisis management. We can nonetheless identify a “tool box” of certain essential components common to all crisis situations.

3.3.1 Installing a crisis team in the field

One of the first steps to take in a crisis is the constitution of a team in the field, clarifying the role and responsibilities of each member in terms of management and follow-up of the situation as well as the definition of strategies, objectives and actions to be taken.

This team generally conforms to operational lines, with the HoM assuming the preponderant role of crisis coordinator, building up his/her team together with the PR. In headquarters, the PR provides supervision and reinforced support for the mission, along with an increased implication of the DO.

The management of critical periods of the crisis is an absolute priority for those in charge, absorbing them totally⁴². They are nonetheless also in charge of other dossiers or coordination tasks. To avoid internal difficulties, other urgent tasks must be delegated to another coordination team member for a given period. It is also advisable to organise brief daily coordination meetings to ensure that other operational issues continue to run smoothly. The HoM can also delegate a number of his habitual tasks.

3.3.2 Contact with governmental authorities and institutions

3.3.2.1 *Contacts with authorities of an incident victim's home country*

Incident victims' home country governments are, along with their families and MSF, one of the 3 essential bodies usually implicated in the management of a crisis.

A government will have different ways of proceeding in these situations. But its protection obligations for nationals abroad must be respected, and it can deploy considerably more reactive means than MSF (information services, consulate and diplomatic services, logistics, etc).

Nonetheless, MSF will maintain its general responsibility for managing a crisis involving one of its staffs. And, except in particular circumstances, MSF will not ask for the direct intervention of the victims' home country governments.

On the other hand it is essential to define a strategy for managing relations with these governments, modulated according to the assistance they can provide or their implication in local contexts. A relationship of confidence should be systematically installed right from the start, based on a reasonable level of information sharing and regular contacts at different levels, particularly within the Ministry of Foreign Affairs (MOFA) and the government's embassy.

- ⇒ Inform the MOFA and the embassy of the incident immediately, before they learn through other sources
- ⇒ Keep them informed of our action strategy and results.

From a practical point of view, a government can often facilitate urgent administrative procedures when a crisis breaks out, or when the evacuation of a victim proves necessary (obtaining a visa, etc). A government can also put significant pressure on the authorities of the country hosting the incident.

⁴² In the most critical or complex cases, a specific model for a team entirely dedicated to the management of the crisis in headquarters and the field will take over (ref section III of document).

3.3.2.2 *Contacts with authorities of the country hosting the incident*

This government also plays a major role in a crisis. A strategy dealing with requests for support, exerting pressure, etc must be developed rapidly, and the targets for collaboration identified, especially with law enforcement services.

Contact should be taken up with a high-level official in the capital immediately after the onset of a crisis, informing him/her of the situation and the actions we intend to take. Similar contacts must be done at regional and local levels.

It is important to identify who we contact (which minister, government member or high-ranking officer in the armed forces or police) and who can help us to contact them (Embassy, UN, ICRC, influential members of civil society, etc). This demonstrates the importance of a pre-established network of contacts within the MSF mission. We can also call on other sections' or organisations' networks.

It is essential to call attention to our primordial preoccupation for the health and protection of victims when dealing with local authorities in order to avoid unilateral and possibly dangerous action from their side.

3.3.2.3 *Contacts with Swiss authorities*

Being a Swiss organisation, we can call upon the Swiss government for certain forms of assistance. Contacts with Berne and the local embassy need developing from the onset of the crisis.

3.3.2.4 *Contacts with the UN and ICRC*

UN humanitarian agencies have always proved allies of MSF during security incidents, and can in certain cases provide invaluable assistance including evacuations and/or sharing contacts or expertise.

The ICRC is a similar resource, to be contacted during the initial period of a crisis.

3.3.3 Relations with international field staff's families⁴³:

This is an essential component. If relations go well with MSF, a family can be of significant help in taking decisions. If they go badly, a family can generate new difficulties that take time and energy to resolve and can even slow down the resolution of a crisis.

A relationship with a family can be constituted around 5 principles:

3.3.3.1 *Responsibility:*

MSF should explain its responsibilities in crisis management, pointing out their continuity: consensus will always be sought but, in case of disagreement, the organisation choice will be predominant to the family choice.

The contact with victims' families falls under the responsibility of headquarters. In no circumstances must the field enter into direct contact with the families. It is primordial that MSF announces the incident in person before the families hear of it through other sources (press, etc)⁴⁴. One senior person from the RH department will be in charge of those contacts, but at least the first one, which is of utmost importance, must be done at director level (DRH or DG)⁴⁵.

⁴³ In the case of families of national staff, the principles described in this section should apply in a similar way. However, the implementation is done in the country, and it is advisable to have a senior member of our national staff as a privileged contact with the families.

⁴⁴ MSF has also the responsibility to inform in a preventive manner the families when an exceptional and clearly identified risk is to be taken by the team in an insecure context (e.g. attempt of evacuation).

⁴⁵ In dealing with the family, to keep in mind the possibility to call upon assistance from people who have been through similar experiences

It is essential to associate families with communication strategies in order to procure the strongest media interest possible, starting in the victims' home countries. But to be aware that families can also decide to develop their own strategies and initiatives.

3.3.3.2 *Transparency and frankness:*

A clear and frank dialogue with the family is required throughout the crisis. It is better to be transparent and privilege a relationship built on confidence. We should explain our action strategies, even if it is not always possible to communicate all the details on the various steps undertaken.

3.3.3.3 *Recognition:*

Let families know that the organisation recognises their distress and demonstrate a strong and constant organisational commitment to finding a solution to the crisis.

- ⇒ It is preferable to have the General Director (GD) take up contacts with family members to pass certain important information;
- ⇒ It is also desirable to invite families to the Geneva office to take up contacts in person. It can sometimes help understanding/acceptance of the situation if meetings are organised with other people/families who have been through similar situations.

Whatever measures taken, it needs to be accepted from the outset that relations with families can sometimes be difficult due to the high level of emotions involved.

3.3.3.4 *Regularity:*

Regular contacts must be established, if only to say that the situation has not evolved.

- ⇒ The HR department is the one dealing with the families (director or head of services).
- ⇒ Identify the privileged contact person in the family;
- ⇒ Organise meeting with him/her in the Geneva office or at his/her home in order to explain our action strategies;
- ⇒ See with the SPAM team if psychological support can be offered.

3.3.3.5 *Availability:*

Demonstrate a capacity to listen and above all be available for responding to possible questions.

- ⇒ The mobile telephone number of certain people in charge of the crisis and possibly the GD's should be passed to the families.

3.3.4 Managing information

To properly manage the information often poses problems during a crisis but is one cornerstone of crisis resolution.

The first responsibility in this regard is to promptly inform, along the decisional line, about any security incident that may generate a crisis situation⁴⁶.

Then during a crisis, it should include the following principles:

Accurate and rapid: Information should be accurate, precise, up-to-date, checked (several sources) and available as fast as possible for all actors involved in the crisis. The same interlocutors should be maintained as far as possible between headquarters and the field. Rumours and false news frequently circulate during a crisis, and should be treated with care (but not completely ignored).

Written: For rapidity and convenience, important information is often transmitted orally during the first emergency period. However, information should be systematically transcribed into written form and centralised in a specific dossier accessible to all those involved in the crisis management. All

⁴⁶ Any unexpected event which can generate a crisis situation by putting in question the physical integrity or security of MSF personnel (and of MSF patients/beneficiaries within MSF premises only), or the programme continuity.

decisions taken in headquarters and the field should also be registered (use a “log book”, cf. Annex 1). This necessitates strong discipline within each team, from start to finish of the crisis.

Shared: It is essential that the different decision makers in a crisis (in headquarters or the field) have access to the same level of information. To avoid senseless frustrations, it should also be clear from the start that certain confidential information will not be shared with everyone.

A list of people involved in the crisis management and their telephone/contact numbers should be updated and systematically shared with all MSF actors involved (field, headquarters, MSF movement).

Specific process during the initial phase of a crisis

- ⇒ As a matter of principle, the PR and OD should be informed immediately when a security incident affecting MSF teams occurs in the field. The first contact between field and headquarters is critical for evaluating the situation correctly and putting urgent points of action into motion. It occurs by telephone, usually following normal decisional line (field co > HoM > PR > OD > DG), but rigorous respect of these lines can be waived if they result in undue delays (e.g. possibility to contact the OD directly). The duty system (“on call”) should always be in place in headquarters and the on call numbers circulated in the field (*cf. annex 2: on call numbers and procedure*).
- ⇒ Next, and soon after (less than 4 – 6 hours), the HoM should send through an “incident report” to the PR/OD (ref. annex incident report). This report permits the HoM/field to rationalise and clarify the available information, initiate an analysis and propose an initial list of strategies/actions.
- ⇒ During a preliminary meeting, the OD and PR, in consultation with the HoM, will decide how to manage the crisis, basing their decision on this initial information and the gravity of the situation.

3.3.5 The role of external communication and media relations:

External communications and media relations represent major issues and have to be addressed during the management of a crisis. Press contact is often perceived as an extra constraint obliging MSF to be attentive to the level and type of information diffused. On the other hand, the media can be a potentially important source of aid when we are looking to mobilise public opinion and put pressure on certain decision-makers during the crisis.

The principal communication factors requiring attention during a crisis include the following:

- Being pro-active and controlling what we want to diffuse rather than letting the media diffuse wrong information;
- Maintaining a clear and simple dialogue with the media, based on facts and not suppositions or speculations;
- Defining different communication strategies according to our position and the evolution of the context;
- Taking care not to pass over national press for international press;
- Defining the spokespersons in headquarters and the field, thereby limiting press contacts to a few well-briefed persons within the organisation.

There should never be a public reference to who is behind a crisis. We should always bear in mind that those responsible for an incident can have access to MSF’s press releases. The person in charge of the crisis management should always validate press releases before they are issued.

3.3.6 External relations and political/diplomatic follow-up:

Political and diplomatic pressure can often unblock difficult situations. Once again, the different political actors (foreign governments, international institutions, national and local figures with

political power, etc) should be identified as a preliminary step and action strategies defined for approaching them. Somebody should be put in charge of this strategy in the incident country.

Several tools are available for this type of activity: regular updating of the “briefing paper”, organising meetings, identifying opportune moments on the international agenda. It is important to make clear and concrete requests of the people we address. It is not enough just to pass over information. Somebody who is personally implicated will always be more receptive to MSF’s messages during a crisis.

We can call on our own internal hierarchy, asking senior members of the organisation to be available for passing messages when appropriate. MSF can also call on support from within the MSF movement, which has accumulated a rich experience in contacts and political negotiations over the years.

3.3.7 Internal communication

This should be managed at different levels:

In the mission affected by the crisis:

Being in proximity with a crisis situation generates difficulties/anxieties within a team (including national staff). It can also provoke sentiments of solidarity and a desire to contribute to the crisis resolution. To avoid the creation of serious frustrations (which can take time and energy to resolve), the team needs to receive regular updates of the situation (whilst accepting a certain level of confidentiality). Someone can be nominated in charge of daily team briefings during the initial phase of the crisis, or a member of the coordination team can be the specific contact for information transmission.

Besides, other HOMs in the country need to be kept posted on the evolution, since serious incident can have clear repercussions in their own projects.

3.3.7.1 *The MSF movement:*

Other sections can become involved in MSF-CH’s crises due to the mix of nationalities found in our teams. In this context, the other sections’ directors require regular information in order to organise their own teams in coordination with Geneva.

The division of tasks could be envisaged as follows:

- Com aspects: relayed to media managers in the other sections;
- Relations with families: following the request of and respecting the policies defined by Geneva, other sections can take up family contacts for international staff members recruited by them;
- External relations/advocacy: to be undertaken whilst respecting the policies defined by Geneva;

We should not hesitate to consult other operational sections during major crises. They can help to identify leads and ideas (e.g. organise a general meeting).

3.3.7.2 *Other field missions:*

There is real solidarity between the various missions. Their need for information during a crisis goes beyond simply transmitting press releases. Whenever possible, it is preferable to communicate with the different fields before diffusion of information in the media. A more “personalised” and regular transmission of information for the field should always be provided (e.g. thru the “Tout terrain”).

3.3.7.3 *Headquarters personnel:*

The main developments in the situation are communicated to headquarters personnel via written e-mail updates or during daily/weekly information meetings.

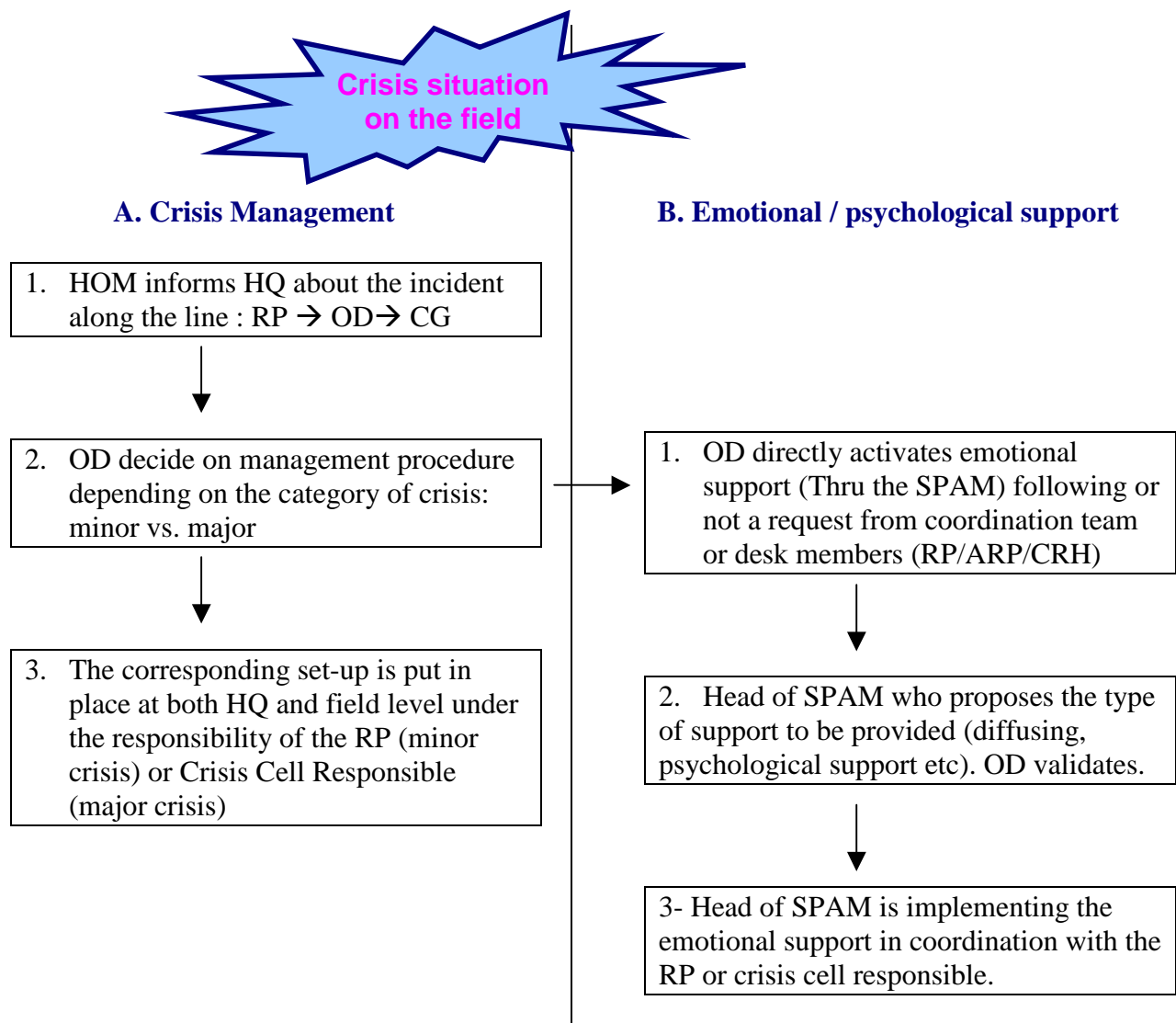
3.3.8 Providing psychological and emotional support

Handling traumatic stress and providing emotional/psychological support is a compulsory component of crisis management. It primarily involves the direct victims of the incident but can be extended to teams who witnessed the events and those managing the crisis.

To ensure that emotional support is systematically provided in a professional manner without overloading the ones in charge of the crisis, the management of emotional support needs to be fully differentiated from the management of the crisis. It is the role of the Director of Operations to activate emotional support activities. When international staff is involved in the incident, it is a responsibility from HQ to provide this support and this is done thru a special mechanism, the SPAM (Stress Prevention And Management), under the responsibility of the head of field HR (see for more info SPAM protocol).

When national staff is involved, it is then the responsibility of the mission to offer adequate support, and the SPAM can offered advice.

Graph 1: Process of speeding up emotional support during a crisis



3.3.9 Possible judicial follow up

Generally speaking, we do not activate judicial action immediately, but it could provide solutions in certain cases⁴⁷. Several possibilities can be explored during the process of resolving a crisis.:

- The family brings a court case in the country of origin or the country in which the incident took place;
- The organisation brings a court case and/or the procedure is followed up by a lawyer;
- There is a court case in an international court (European Court of Human Rights, The UN Commission for Human Rights, the International Criminal Court (ICC), etc);
- Questions arise on our legal responsibilities towards our national employees, or regarding different official services in charge of law enforcement in the incident country (Ministry of Justice, the police, etc).

3.3.10 Mobilising the community

Mobilising members of the community is often a key point in solving a crisis situation. If an MSF project is well perceived and accepted in the field, the local community or its representatives can defend the cause of MSF and put pressure on those responsible for the event initiating the crisis.

MSF national staff members can also form part of this community and provide an important source of assistance in this respect.

3.3.11 The role of experts or external consultants

In such exceptional situation, MSF often lack experience and competencies and should systematically considers calling upon different types of external experts for specific issues. However, their role must remain an advisory one (MSF always wants to keep its decisional role). These external players have the advantage of being emotionally detached and can assist MSF to maintain a global view of the situation (a “helicopter view”).

Such assistance can cover diverse domains such as legal support, experience in similar crises, specific knowledge of the context/certain actors with whom MSF has never had contact, the role of intermediary during negotiations, emotional and psychological support, etc.

MSF will refrain from responding to offer of services form specialised security companies during crises (but it can be interesting to listen to them). However collaboration with a firm with specific experience in managing secu incident can be considered in a broader manner (cf. collaboration ICRC or MSF-H & CRG)

3.3.12 Mobilising the public around the incident

In certain cases of major crisis, MSF needs to mobilise public opinion on a crisis situation in order to exert public pressure on decision makers. MSF should not hesitate to call for maximum help from the international MSF movement

Family members are the most efficient mobilisation factor. It can take place in the victims’ home countries, in the field and in Switzerland. Obviously the message has to be defined and targeted.

Several tools are available: public assemblies, petitions, calls in the press, open letters, public questioning of political actors, asking public personalities for their support, etc.

⁴⁷ It should be noted that judicial procedures are often long and complicated and require considerable preparatory work as well as specific competences.

3.3.13 Evacuation plan

Part of crisis management also involves preparing for a resolution and possible necessary evacuations. Various resolution scenarios and related evacuation plans have to be developed in an early stage.

3.3.14 Analysing the incident:

Focus must remain on solutions during crisis management, and not on the analysis of the causes or responsibilities that led to the incident. This latter task will be taken up elsewhere, in a post-crisis framework.

4 MANAGING MAJOR CRISES: SETTING UP A CRISIS CELL

Most situations can be handled by the traditional operational line of management (HoM, PR, DO). In more serious and enduring cases, MSF establishes a distinct crisis management unit functioning separately from operations: a crisis cell.

4.1 Definition and composition of a crisis cell

A CC is composed of a small group of people in Geneva and the field with a specific organisation and means. It aims to define, coordinate and follow-up strategies for resolving the crisis (operational, political and diplomatic, external communication, etc) in headquarters and the field. It is also responsible for contacts with people and institutions connected to the incident (victims' families, governments, etc) and for mobilising and managing the necessary resources in difficult contexts (management of a team in a stressful environment, complex security contexts, external support, etc). Representatives of the CC must be installed immediately wherever there are necessary operational or political/diplomatic contacts to be taken up in the field.

The number of members can vary according to the characteristics of the crisis but there will always be a core group (see below). HQ and field members of a CC concentrate purely on the crisis in hand, and are discharged of all their other obligations⁴⁸.

The executive unit of the CC needs one or more rooms at its disposition, whether in Geneva or the field, equipped with communication and IT means, a recording system, etc. Those people (HQ and field) who are not directly involved should not disturb the CC members. On the other hand, the CC needs to communicate regularly in order to respond to legitimate requests for information. An effort must be made to ensure the teams manage their time and rest periods⁴⁹.

In Geneva:

The executive unit of the CC is composed of 3 or 4 persons, depending on the context and crisis intensity (*cf annex 3 : Executive crisis cell - Job descriptions*)

- The Crisis Cell Responsible (CCR) : managing the CC, this person has an excellent knowledge of MSF HQ and field (PR profile) and the country in which the crisis is unfolding;
- The context person who could take on political contacts, context analysis, etc, and should be capable of replacing the CCM.
- The information manager/assistant (centralisation of information, dispatch, logbook, etc). In more complex situation and for limited period of time, this position can be split in 2.

⁴⁸ It would be interesting to validate prior to any crisis people within MSF-CH who can assume CC responsibilities during a crisis (HQ and field) and maintain a list of experienced field coordinators, thereby ensuring minimum delay in establishing CCs when required.

⁴⁹ Taking a hotel room near the Geneva office is a possible solution for allowing CC members to escape from the pressure.

Note: the location where the CCR must be present most of its time depends on the epicentre of the resolution (field or elsewhere).

Other people support the executive unit without actually being part of it⁵⁰. They cover the following domains:

- Contact with families: this should be taken on by a manager (director or head of service) in the HR department, but the first contact is the responsibility of the HR director;
- Administrative and logistics follow-up: technical means, tickets, visas, etc
- Support for external communication and managing the media;
- Psychological support for the teams;
- Financial follow-up.

In the field:

- The field responsible of the CC (CCFR), to whom the CCR refers (profile experienced MSF HoM).
- One or more deputies for implementing the strategies and activities decided on by the CC and ensuring logistics and administration⁵¹. The option of incorporating a senior member of the national staff should be seriously considered.
- In general, MSF will try to send without delay a pre-identified person from headquarters to join the field CC for the set-up period. He/she normally takes over its coordination, but this is not obligatory and depends on the profiles of the people involved.

The global composition of the field CC is chosen/validated by the CCR in Geneva.

There are several possible configurations in the field according to the number of locations requiring CC representation. We can thus find one or several CCFRs (e.g. one in the capital and one in the field, near the incident zone), both of whom report to the CCR, or one CCFR covering several zones.

4.2 Hierarchical functioning/relations within the CC

The CC does not function like a desk, even if it seems like one. The ultimate responsibility of the crisis management is at HQ level: the decision making centre is centralised on the CCR in Geneva and the scope for taking initiative on strategic questions is limited in the field⁵².

It is essential to ensure good working relations between CC members (in Geneva, in the field and between the two) in order to create a maximum climate of confidence, a strong team dynamic and the best possible synergy within the CC⁵³.

Care needs to be taken to systematically integrate the CCFR/s onto the regular discussions and onto the choice of strategies/actions to be taken in Geneva. The CCFR is part of the 1st circle of information (but in specific circumstances, mainly the location of the epicentre of the resolution, the CCR can deliberately decide not to disclose immediately some information).

⁵⁰ They can be integrated into the CC temporarily according to needs, the moment or the strategies decided.

⁵¹ Many staff in the field would like to be part of the CC and assist in the resolution of the crisis. It is nonetheless Geneva who decides the structure and composition of the CC.

⁵² This choice is linked to a possible negative outcome of the crisis (e.g. a hostage dies during a kidnapping) and allows the organisation to assume maximum collective responsibility, partially discharging individuals involved in the crisis management.

⁵³ A reminder of a basic team management principle: respect the people involved by adhering to decisional lines and avoiding the exclusion of different levels implicated in the management

4.3 Organisational model for a crisis cell

Among the 2 main theoretical models which apply to deal with a crisis, MSF-CH has chosen to favour a 2 levels model⁵⁴, which has the advantage to maintain a necessary distance for taking important decisions, therefore relieving the executive people from the most difficult decisions to make.

Executive level: **the executive unit** is led by the CCR who proposes strategies and implements activities with his/her team.

Strategic level: **a decisional strategic committee discusses and validates the executive unit's propositions** regarding important strategic issues. It has a minimum composition of the President of the board, the GD and the DO. It can be filled out with 1 or 2 other people with particular competences in the domain of crisis management.

The core group of the crisis cell is composed of the strategic committee, the HQ executive unit and the Field responsible of the crisis cell. This group has access to all the information around the crisis.

However, to avoid one potential disadvantage of the 2 levels model (adding a layer to decision-making, which could make the process more lengthy) the complete implication of one or more members of the strategic committee (except the President) is accepted for a limited period of time and at critical periods of the crisis⁵⁵. The challenge lies in ensuring that this implication in the daily evolution of the crisis remains limited over time and that the management recovers the necessary distance to allow strategic follow-up of events. The president of the board must be the guarantee of this.

4.4 Internal functioning of the crisis cell

4.4.1 Initiation of a crisis cell

A CC is generally set up for the duration of the crisis. Only the OD and GD can decide its initiation following reception of information on an exceptionally serious incident.

The OD and GD collaborate to select the CCR and compose the CC for the emergency phase. The strategic committee then takes over the review of the CC's composition for the rest of the crisis.

The HoM takes the first steps to address the crisis in the field (or the person the most apt to replace him/her if he/she is not available). Once identified, it is the CCR who, together with the field, decides the set-up and composition of the field CC⁵⁶.

4.4.2 Role of PR and HoM in a crisis cell

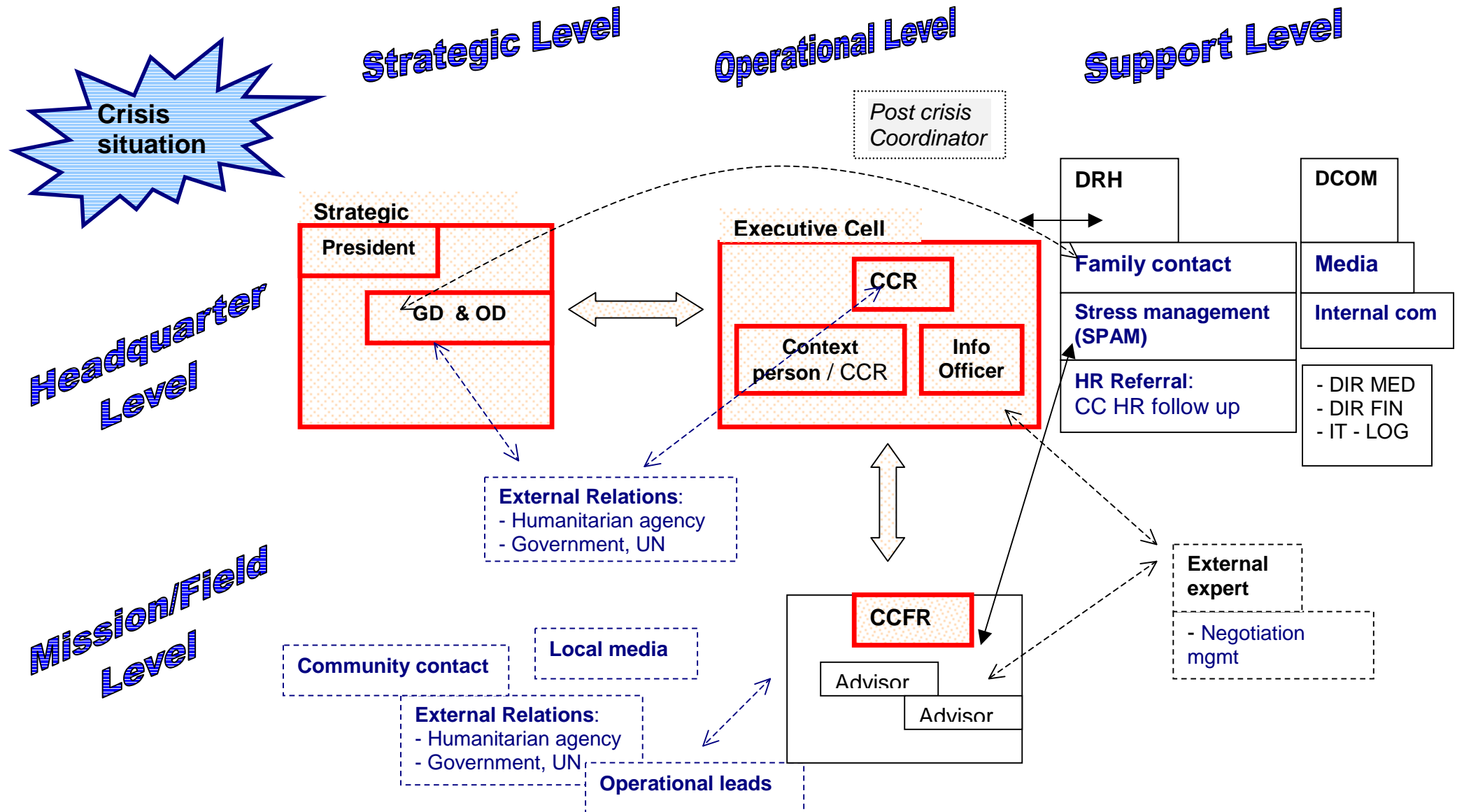
It is logical and most likely that the PR in Geneva and the HoM in the field will be given key role in the crisis cell (knowledge of the context, network of contacts, etc) for the starting phase and during the CC's establishment (normally lasts between 2 – 6 weeks). If the crisis is still not resolved within

⁵⁴ The other is a 1 level model, where the CC has both an executive and decisional roles, meaning the CC is led by either the GD or the DO is responsible (advantages: decisions can be taken immediately. Disadvantages: the GD/DO operational involvement means a loss of distance on the crisis, and possible negative repercussions on the overall management of the organisation; it is improbable that the GD or DO can invest 100% in the crisis throughout its duration. negative repercussions on the entire organisation).

⁵⁵ This is particularly true during the set-up phase which requires full dedication of the top management.

⁵⁶ The HoM is not systematically confirmed as the CCFM during the management of a crisis in the field.

Graph 2: Functional diagram of a crisis cell



this period, it is preferable to withdraw them from the CC (physical and emotional exhaustion, guilt feelings because they did not prevent the incident, etc).

Similarly, the role of each one of the CC members should be reconsidered once the emergency phase is over and the replacements should be staggered over time to ensure the continued smooth running of the cell.

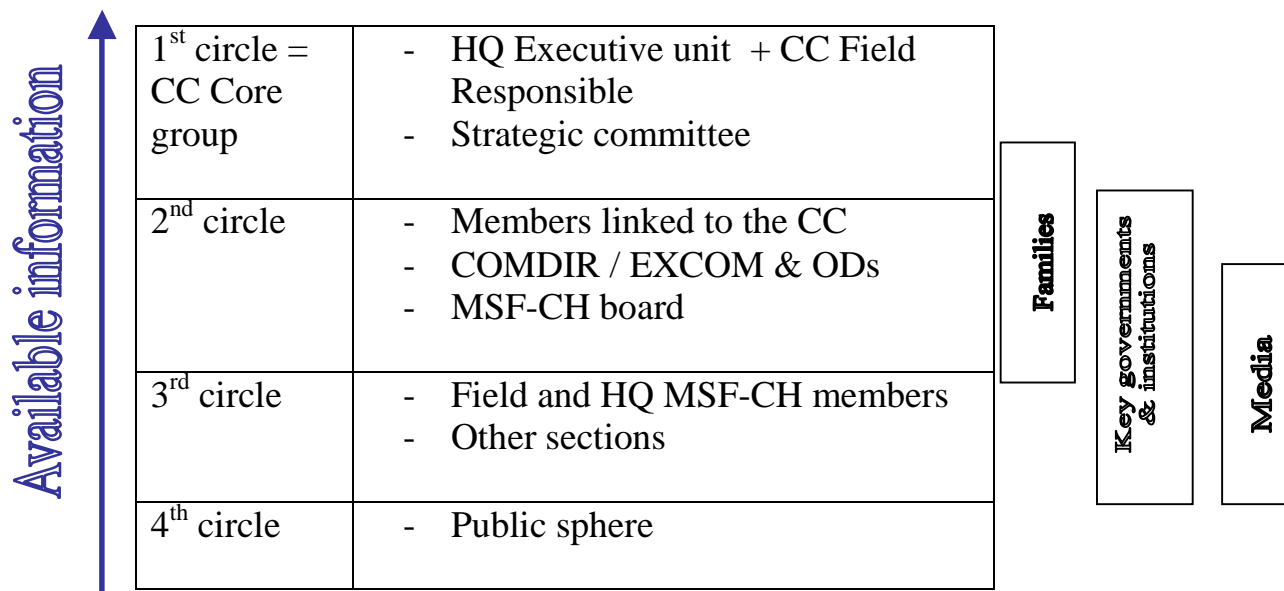
4.4.3 Managing information

Sharing and managing information within the CC, and on a wider scale within MSF, is a crucial element in the quest for efficiency and/or confidentiality, and is linked to communication means and the sensitivity of the subject.

It is essential that the same level of strategic information is at the disposition of the CC's core groups (in Geneva and the field). The CC members have to guarantee confidentiality in return.

The level of information available to different persons is decided on a “need to know” basis, meaning that each person has access to the information he/she needs in order to carry out his/her functions, but not more⁵⁷. This corresponds to several information spheres.

Graph 3: Level of shared information in a crisis



4.4.4 The role of the communication service

The communication department will always be involved from the beginning of a major crisis. A representative from this department will belong to the second circle of information, operating on a “need to know” basis in order to produce press releases or identify appropriate contacts in the media. A communications representative can be fully integrated into the CC if public communication becomes an important tool in the management of a crisis.

⁵⁷ With the possible exception of the team who was close to the incident, and to whom some additional more info could be shared in the course of the crisis. To take into account also the request of info from HQ members, which can grow exponentially as the crisis last.

4.4.5 The role of the board during a crisis

Over and above certain exceptional decisions required from the board within the framework of its responsibilities, (e.g. authorising a sizeable payment for the release of a hostage), the president of the board guarantees the correct management of the crisis. He/she must be a member of the strategic committee and have access to all information. Unlike the GD or the DO, he/she never assumes an executive role, thereby ensuring sufficient distance between strategic and executive levels throughout the crisis. The president ensures the passage of necessary information to the other members of the board.

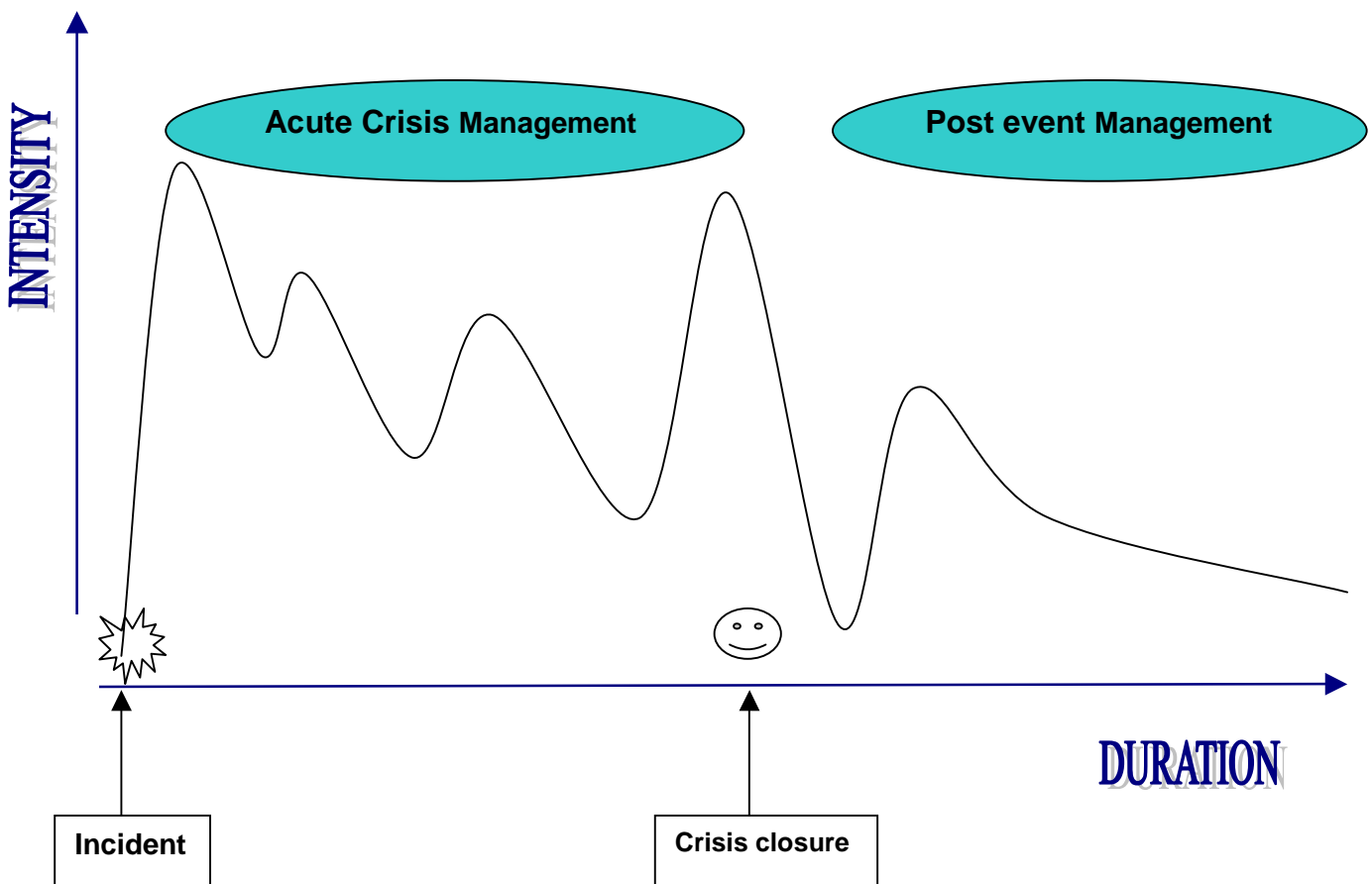
4.4.6 Time management/level of intensity

Two important characteristics of a crisis – its duration and its intensity – will evoke specific responses from MSF.

The first days of a crisis often have a critical impact on the outcome. The organisation's directors must initiate crisis management immediately, making all necessary resources available for obtaining a rapid resolution. Once the initial phase is over, the management team must resume the management and steering of MSF Switzerland.

Preparations must also be made to manage the crisis over time, putting a model into place that can respond to the evolution of events. The CC members can face highs and lows corresponding to the intensity of their input. There are periods requiring the investment of considerable time and attention, and others when nothing seems to be happening, which can encourage feelings of failure.

Whatever the duration, some essential parameters for the long term management of a crisis must be maintained: definition and evaluation of strategies/objectives/activities, regular revision of the CC and strategic committee's internal functioning, timely replacement of people involved to avoid burn-out, etc.



4.5 Other specific points

4.5.1 Negotiations policy

Negotiations can be necessary with those responsible for the incident generating the crisis (e.g. to reply to kidnappers' political or financial demands). Rapid clarification is required on from the top management, if MSF accepts to become involved in these negotiations (amount of money which can be spent for critical information, ransom policy if applicable, ...).

Everything should be done to avoid having direct contact between a member of the crisis cell – either in the field or in headquarters – with the kidnappers. We need to identify an intermediary in whom we have confidence. National staff can assist with the identification of such a person, or even assume this role.

However, all CC members should be aware of the orientation of our dialogue and the messages to be passed in case they are the first person to have such a contact (“first contact guideline”).

The physical and mental well being of the victims must be the basis of all negotiations.

In the case of a hostage crisis, there are often “regular cycles” of negotiation which repeat themselves right up to the end. One cycle roughly corresponds to finding an intermediary, taking up contacts with the kidnappers, negotiating possible demands and claims, then discussing modalities of release. Every step can be interrupted and the negotiations recommenced at zero.

4.5.2 Operational leads

In certain cases, MSF can find itself hunting actively for operational leads to resolve a crisis. This can be extremely complex as we become drawn into a domain that we generally know very little about. This is strongly linked to the nature and environment of the crisis.

4.5.3 Abduction issues

Cf annex 4 concerning some specific information intended to volunteers going to work in places with kidnapping risks

- To Develop specific briefing procedures for identified country at risks of kidnapping (personal Q&A for identification, ...)

4.5.4 Operational continuity of the various projects in the mission

The OD and PR have to take an immediate decision in this respect as soon as the CC is in place. There are several possible scenarios, ranging from continuing all or part of a project's activities to a complete suspension of the mission, which means the departure of the entire international team apart from the CC members (although efforts should be made to avoid loading the team with heavy administrative tasks during the implementation of the CC in the field). **A team reduction will always be considered in order to focus on the crisis.**

The PR and his desk can continue to support other projects and missions once the CC is in place and has relieved him/her of the management of the crisis. If the PR is part of the CC, the OD has to nominate a new PR asap.

This is even more critical when regular activities continue in the affected mission. If the HoM is integrated into the CC, the PR needs to nominate another HoM asap. The decisional lines in the field need re-clarification, as does the internal functioning between the CCFR and the HoM (who does not necessarily refer to the same person in HQ).

5 POST-CRISIS MANAGEMENT/DEMOBILISATION

This process can take several months and must respond to various expectations: follow-up care required for long-term victims, demobilisation/phasing out of the team, analysis and comprehension of the incident, analysis of the crisis management, etc

Due to the number of people waiting for answers and clarifications, regular communication of the progress made on these various issues is important.

Generally speaking, the team in charge of managing the crisis is completely disbanded in the days following its resolution. There is nonetheless a great deal of work remaining to do and a handover between the CCR and the coordinator of the post-crisis phase (identified beforehand) is required.

The first task for the post-crisis coordinator entails defining strategies and activities for this new phase.

5.1 Regarding the direct victims of an incident:

- The immediate and mid-term medical considerations and “well-being” of the victims; Specific attention must be given to the follow-up of injured or traumatised national staff members.
- Their operational debriefings;
- The mid & longer term projection and clarification of their future with MSF including administrative issues (requires clear coordination among HQ actors);
- Eventually, the judicial follow-up.

5.2 Regarding those involved in the crisis management:

- The debriefing of the actors involved in the CC;
- The phasing out of the teams implicated in the CC management (debriefing, collective thanks, periods of rest, team follow-up, etc.) which must be done in accordance with post-crisis management;
- Follow-up and accompaniment of field teams until a return to normal activities ;
- A due process of thanking all non-MSF actors involved.

5.3 Regarding the consequences of an incident or crisis:

- An objective analysis of the CI⁵⁸ and lesson-learnt exercise, that will be shared with the field and other sections (or humanitarian partners present in the area). Main objective: analysing how the mission was organised and functioning at the time of the incident in order to introduce future improvements. Assist decision-taking at an operational level;
- An objective analysis of the management of the crisis and lesson-learnt exercise;
- The judicial strategy and follow-up (if any);
- A strategy of communication timed to take into account the above findings;

5.4 Regarding the mission :

- The consequence of the incident and the following crisis on the MSF framework of operations in the country: review of activities, review of security rules, ...
- The provision of special operational support, even after the crisis has been resolved. HQ people need to get more involved in order to support the mission.
- A complete change of teams can be envisaged, but is not obligatory.

⁵⁸ Meaning done by evaluators not coming from the decisional line of the mission.

6 ANNEXES

6.1 Annex 1: Format logbook for crisis follow-up (field and headquarter)

Date (y-m-d)	Event / Decision	Information source

6.2 Annex 2 : Executive crisis cell - Job descriptions (Skeleton)

A- Responsible of executive Crisis Cell (CCR)

General remarks

Bears the responsibility for handling the crisis, delegated by the strategic committee.

Main responsibilities

1. Setting and supervising the crisis cell teams (field and HQ)

- Number and location site of field crisis cells
- Constitution of the various cells + define who is in support to the cell
- Evaluate the necessary means for crisis management
- Maintain the minimum parameters required to manage the crisis management for an undetermined length of time.
- Be aware of the stress level of the team and liase with SPAM
- Validate all field visits
- Security responsible for the crisis cell teams

2. Crisis management strategies/activities.

- Proposing to and ensuring validation by the CC strategic committee of crisis management **operational strategies/activities** (identification and follow-up of operational leads, negotiation management,)
- Proposing to and ensuring validation by the CC strategic committee of crisis management **support strategies/activities** (public mobilisation, community mobilisation, legal follow-up, ...)
- Elaborate in collaboration, with information officer and reference person in com department, **communication strategy**

3. Taking decisions on the follow up of the crisis

- Taking daily decision within agreed strategy with Strategic Committee
- Ensuring implementation of the decisions from other CC members (field/HQ).
- Consulting and reporting about activities to CC strategic committee

4. Consulting with all relevant third parties (together with GD/OD)

- Contact with governments having a direct link to the incident (host government, victim's home country government, Swiss government);
- Operational contact with actors who can influence the resolution of the crisis;
- Contacts with the UN and ICRC at HQ level
- Information and mobilisation of external actors (diplomats, international organisations, etc) and advocacy/lobbying activities;
- Define the level of information to be shared with each actors

5. Define and validate, with the Strategic Committee, the need of external experts/consultant

6. Define, with the Strategic committee, the moment to hand responsibilities back to the operational line and hand-over to post-crisis coordinator

7. Management of information

- Validate all external communication on the crisis
- Possible spokesperson for the organisation

B. CONTEXT ADVISOR

General remarks

Member of the crisis cell core group, meaning having access to all the information

1. Analysis of the crisis environment:

- Analysis of the context in which the incident takes place;
- Analysis of the nature and evolution of the crisis;
- Identification and mapping of different political actors (local, national, international) having a capacity to influence the resolution of the crisis.
- Brief field teams on context and actors analysis

2. Assist the CCR in defining strategies

- Explore and propose action strategies for approaching the relevant political actors
- Explore and propose various possibilities of support strategies/activities (public mobilisation, community mobilisation, legal follow-up, ...) in relation with the context.

3. Assist the CCR on various general issues

- Check insurance policy/SOS international with our insurance company
- Ensure the preparation of end of crisis plan (evacuation process, in case of release, ...)

4. Potentially replace the CCR during absence

C. INFORMATION OFFICER

General remarks

Member of the crisis cell core group, meaning having access to all the information

Main responsibilities

1- Managing the information inside the CC

- Register all decisions taken in ECC using a log book
- Ensuring information sharing with all CC members
- Update and disseminate with all MSF actors involved, the contact list of people involved in the crisis management and their telephone/contact numbers

2- Managing the information outside the CC

- Ensuring adequate level of info sharing within MSF movement, according to their degree of involvement in the crisis (field teams, office staff, other sections, ...)
- Brief the HR responsible (either director or head of field HR) on relevant development to pass to the family

3- Managing communication

Elaborate with reference person in com department communication line

D. FIELD RESPONSIBLE (CCFR)

General remarks

- Member of the crisis cell core group, meaning having access to all the information.
- The CCFR does NOT bear the responsibility for handling the crisis; The CCFR falls hierarchically under the CCR in Geneva

Main responsibilities

1- Main interlocutor with the CCR

- Search of information, verification, confirmation about the incident
- Implement decisions made by head of ECC
- Participate to the analysis and reflection of action plan and propose new strategy of actions
- Ensuring a continuous and direct means of communication with HQ.
- Ensuring a field logbook of the event is in place

2- Setting up the field executive cell in agreement with MSF crisis management principles and protocol

- Identify HR needs and supervise the field executive cell
- Assign role and responsibilities
- Consider implications for other programs in country and Liase with HOM and/or FC in case they continue.

3- Liasing with all relevant third parties in the country

- Liaison with relevant national and local authorities
- Consulting/informing relevant third parties : humanitarian and UN agencies, diplomatic community, resourceful persons in the community, local media, ...
- Taking up political negotiations with third parties who can influence the resolution
- Compile a list of telephone numbers, email and addresses of all the relevant actors:

4- Operational contacts

- Taking up of operational contacts and following up operational leads according to agreed strategy with head of executive cell

5- Liaison with families of national staff involved.

6- Ensure regular and adequate updates of the situation are given to the rest of the team in the country

7- Liason with national, local and/or international press in the country

Spokesperson for MSF on the crisis in the country

E. OTHER KEY RESPONSIBILITIES

GD / OD

- activates crisis cell
- As members of Strategic Committee, together with president of the board, consulted and approving important decisions to be made
- Temporary executive role when necessary
- Supervise the functioning of executive cell
- External relations in coordination with head of CC
- OD: activate/validate SPAM
- GD: Family contact in coordination with HR department

Human Resources Dpt

1. Director of HR:
 - Families contact (at least the first contact)
2. Head of field HR
 - Emotional support / SPAM
 - Families contact in coordination with HR director
3. CRH – ARH support
 - Ensure replacement of field posts
 - HR administration: briefing / visa , movement, ...

6.3 Annex 3: Information to volunteers working in countries with an identified risk of abduction

1. MSF-CH principles of in case of abduction of one of its staff

When there is an identified risk of kidnapping in one mission country, the Program Responsible will provide a specific briefing about such risk. The volunteer will be asked to provide confidential information that may ensure proof of life in case of abduction.

In case security preventive measures do not avoid a kidnapping of MSF-CH staff to occur, the following principles, accordingly to the protocol, will apply in order to deal with the situation:

- MSF decisions by will always be taken **in the spirit of protection and safety of the abductee(s)**.
- **MSF will systematically assumes the responsibility for crisis management, from start to finish**, taking into account our limits and specificities as an humanitarian organisation. MSF and does not delegate decision-making capacity on the crisis resolution to any governmental or private institution, but will liase and call upon other institutions when they can make useful contributions to the situation.
- **MSF activates without delay its own resources to work on the abductee's safe and secure release, until the release takes place**. This is done thru the set-up of a crisis cell both in Geneva and on the field, under the responsibility of the organisation president and general director.
- MSF will ensure a **fair and privileged relationship with the family** of the abducted person(s) during the crisis time and systematically propose psychological support when necessary.

2. Survival guidelines during abduction

→ SEE P.53, CHAPTER 2: SECURITY GUIDELINE - CONTINGENCY PLANS

What is the SPAM ?

Geneva, April 2007

The SPAM is the MSF CH's stress policy. It stands for **S**tress, **P**revention **A**nd **M**anagement. The SPAM coordination is based in the office in Geneva.

Why does MSF CH need a stress policy?

All employees, national and expatriate, work on projects which are defined by the MSF CH operational policy. This operational policy is based on three fundamental pillars: violence, emergency and forgotten illnesses. Thereby, working in those conditions can mean facing difficult and even violent situations, generating an important level of stress.

Stress management: your individual responsibility is involved

Each person working in MSF programmes abides by the Charter and the founding principles of the organisation. (S)he engages him/herself knowingly and it is up to the person to find his/her own tools in order to manage the stress (s)he will be confronted to. (S)He also engages him/herself to pay special attention to fellow colleagues.

The MSF CH institutional responsibility is also involved

In some cases, stress management at individual level will not suffice. This is the reason why MSF, which takes in charge health issues for its personnel, implemented the SPAM. The institutional responsibility is engaged by communicating on the mission's working conditions and environment, by implementing preventive and training tools on ways to reduce stress factors, and by taking in charge the most important stressful situations, particularly those due to cumulative stress and following critical incidents.

MSF CH wants to take in charge two different types of stress

➤ **Cumulative stress**

This is a regular exposition to different factors of stress (sometimes minor, predictable and repetitive), or to a series of difficult professional and/or private events.

This is the most common form of stress faced by humanitarian staff. This is also the case in MSF CH. We are more commonly faced to situations of cumulative stress or burn out than to situations of traumatic stress due to a critical incident.

➤ **Traumatic stress**

This is a violent and unexpected confrontation to an event that has a factor of « intimacy with death », together with an intense feeling of fear, helplessness or horror. Traumatic stress can appear after an incident, called 'critical incident'.

More information on stress, its various types and on how to face them can be found in the ICRC or MSF CH leaflet given to you by your HR officer during your briefing. Do not hesitate to ask your HR officer at any time for a copy.

What is the specific objective of the SPAM ?

The SPAM's objective is to implement all known measures, internally and externally, in order to support the resiliency mechanisms of MSF CH's personnel.

Resiliency is an individual mechanism that takes root in the construction of the person, and that the person will put in place to overcome and face a difficult situation.

Who can benefit from the SPAM?

All expatriates and national staff working for MSF CH. The SPAM will adapt its response and the taking in charge to each situation and to each person. In order to offer the most adapted support to national staff, the SPAM will take into consideration the country specificities, especially cultural sensitivities.

3 levels of intervention for MSFCH

➤ Prevention

The SPAM is responsible for diffusing information, for providing training on the different aspects of stress encountered by humanitarian personnel on a individual and collective level, for anticipating and reducing, inasmuch as possible, its impact on the personnel and on operational activities.

In terms of prevention, the SPAM is implementing different tools:

- Stress module information for 1st missions (PPD)
- Stress module training for coordinators (field-co + Hom)
- Briefing and debriefing of all expatriates, done by the HR officer with special attention to stress issues
- Training of all HR officers on how to detect stress symptoms
- Team management training for field coordinators

➤ Cumulative stress management

Prevention and training will better prepare our staff to face demanding conditions, but in some cases it will not be enough: some members of our personnel will be faced to cumulative stress or burn out. For each identified case, the SPAM will look at elaborating a support strategy in the most appropriate and personalised way.

In situations of cumulative stress, the SPAM can offer:

- A remote but direct individual follow up of the expatriate in the field will be carried out by the HR officer.
- The implementation of specific local support for a proximate coverage on some missions.
- On return of each expatriate, a HR debriefing with specific focus on stress will be done by the HR officer.
- An emotional debriefing done by a professional, an external and neutral psychiatrist, can be arranged in Geneva.
- Once back home, and if necessary, MSF can take in charge an individual psychological support.
- Pool managers insure an individual follow up of persons that are home.

MSF CH is working on two supplementary tools to be yet implemented:

- Permanent information on stress, in the form of a self training multi media kit, which will be put at your disposal throughout the fields (implementation planned for the second semester of 2007, after validation)
- A non institutional support will be carried out by the **peer support network**. The peer support network is a proven tool of individual follow up which consists in the making of a support network by ex-expats (peers). These peers have no hierarchical link with headquarters or persons benefiting from the support.

They are available to insure an individual follow up, in an informal and friendly spirit. The form of this tool is being validated.

➤ **Traumatic stress management**

Again, good prevention can help persons concerned by a critical incident to better manage traumatic stress, but it can still be insufficient. The SPAM, in collaboration with the crisis operational management, will try to implement specific support for concerned staff. This is a priority for MSF CH, which has the will to provide systematically an emotional support to the teams having lived a critical incident. A good emotional support after this type of incident can avoid a PTSD (post traumatic stress disorder) or better prepare the person to recognize and face PTSD if it appears later.

After a critical incident, coordinators (headquarters and teams) will see to separate operational management from the emotional management from the crisis.

Some rules and tools, applicable to any critical incident, have already been defined by the SPAM.

Some key rules to apply after a critical incident:

- The coordination teams (field and capital) need to report immediately to the operations department in Geneva any critical incident, minor or major, which happened in the field.
- The Program Responsible and the Operational Director have to inform the SPAM as soon as possible of any critical incident.
- Following a critical incident, an analysis of each situation will be done jointly by the SPAM and the Operations in order to define solutions adapted to the operational and emotional management of the crisis.

What are the tools that could be used to follow up critical incidents?

From the field:

- Immediately after the incident, offer a secured space and provide basic needs (avoid any new security risk, if needed make a health check, let them rest, eat and drink)
- After this rest period, organise a **demobilisation** exercise facilitated by a person not implicated in the incident (4 key questions).

Demobilization is the taking in charge, in a simple and rapid manner, of the emotional debriefing. It is done right after the incident, in the field, when the person(s) involved come back to the base. It should be organised in a secured and clam place, and facilitated by a team member whom is not involved in the incident. 4 Key questions are to be used in the organisation of this group debriefing: what happened? what did you think during the incident? how did you react during the incident? how do you feel now? These simple questions should already enable the concerned persons to understand what happened and help starting their resiliency mechanism.

- Provide an access to international communications. Following a grave incident, each person should be able to contact his/her family. If contacts from the field are difficult to make, the HR from headquarters will take care of this.

From headquarters:

- Evaluation of local resources (defusing or debriefing) available on the field (in the field or in the area)
- A « defusing » team of headquarters voluntaries can be organized in 24-48 hrs to take in charge the concerned persons.

Defusing is a group debriefing which enables the persons to share their experience and to express their feelings and immediate worries. It is useful in un-triggering an emotional situation and in reducing the intensity of the reactions. It links the chaos created by a crisis situation to the beginning of a reconstruction period and to the return to a normal situation. The defusing is also the incident's formal acknowledgment by headquarters. The session will be organized and facilitated by a "Défuseur". All the people involved directly or indirectly in the incident will compose the defusing group. The "défuseur" will help people to retrace the making of the incident following a more constructive approach than the "demobilisation". The "défuseur" will also be available for individual discussion if needed after the group debriefing.

- A « debriefing » team intervention can be sent to the field for a more individual emotional coverage. This team would be composed by professionals (psychiatrists or psychologists).

Emotional debriefing is an individual emotional support brought by a professional (psychiatrist or psychologist) having an MSF field experience. He is available to go deeper in emotional management with the persons who need it. The objective of the emotional debriefing is to help the person to verbalize his/her experiences, to prevent or ease the apparition of psychological troubles, and to promote the psychological recovery. Even if you were not confronted to a critical incident during your mission, and if you feel the need for a psychological support, talk with your human resources officer. He can plan a meeting with a professional.

- To reinforce resiliency, the operational responsible needs to take time to explain facts and decisions taken to field teams.
- An emotional debriefing, if not done in the field, will systematically be proposed in Geneva.
- The same type of support developed for cumulative stress will be implemented in Geneva: psychological support when home, follow up by pool managers.

These tools do not constitute a strict protocol. Each situation will be individually evaluated and SPAM interventions can be varied.

Who to contact in Gva?

If you, personally, or a team member, or if the whole team feels the need to discuss a difficult situation linked to a cumulative or traumatic stress situation, please contact your CRH or the SPAM coordination:

- The SPAM is coordinated by the **field HR coordinator** and implemented with the collaboration of all CRH in Gva (Eric Roux 00 41 22 849 84 73 office / 00 41 79 447 36 63 mobile).
- The **human resources director** is one of the 3 SPAM referents. He will provide back up to the SPAM coordinator or act as interim (Marc Hermant 00 41 22 849 84 13 office / 00 41 79 250 45 48 mobile).
- As final responsible of the health of expatriates, **the director of the medical department** is one of the 3 referents of the SPAM (Abiy Tamrat 00 41 22 849 84 41 office / 00 41 79 508 49 39 mobile).

Chapter 5:

OTHER ISSUES RELATED TO SECURITY MANAGEMENT

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3. Conduct and Behaviour issues	p.139

Introduction:

As mentioned in the risk reduction policy, a number of technical and human issues are related to the management of security. In this chapter, we are presenting a number of existing documents linked to the following topics:

- The golden rules of cash management in mission.
- The sanitary repatriation procedure that explains actions to be taken in order to repatriate a volunteer for medical reasons
- A summary of MSF conduct and behavior policy on mission

On the CD-ROM: SECU REFERENCE DOC\05 Technical-human issues and security\...

- Cash Management\Cash management (extract guideline admin Nov06).doc
Exists in FRENCH!
- Medical evacuation\Repatriation procedure 2007.doc
- Medical evacuation\Repatriation Synoptic table 2007.doc
- Medical evacuation\Sanitary repatriation procedures 2007.doc
- Behaviour\MSF-CH – Conduct whilst on mission.doc
Exists in FRENCH!
- Behaviour\basic principles of conduct

CASH MANAGEMENT IN A MISSION

CASH MANAGEMENT IN A MISSION

Extract from administrative guideline (Chapter IV, The liquid assets in the mission), November 2006

A – THE SAFE AND ITS MANAGEMENT

• RESPONSABILITIES AND ACCESS

The Administrator is responsible for the funds management and he/she keeps the safe key.

Only the Administrator has access to the safe, and the copy of the key must be used only in case of emergency. If the Administrator has to be absent (field visit, rest), the safe must be handed over to the Head of mission (or the Log.Co). After he/she has counted the money and signed the inventory, the latter person will keep the original key and will have the responsibility for the safe .

If the local Accountant has a petty cash, he/she keeps the key to it. A copy of this key should be kept in the safe. This copy will be put in an envelope, sealed (taped) and signed by him/her and by the Administrator.

In the projects, the expatriate Log/Admin. and the Field Coordinator are assigned these tasks. However, the Administrator remains the person responsible for the proper management of the entire mission.

• SAFE FEATURES

- You must have a real safe. The safe must be heavy, in order to make it difficult for thieves to simply carry it off. If the safe is too small, it should be fixed to the ground.
- The safe must have a serious locking mechanism: with several anchor points from the door to the frame. It should be impossible to crack in 2 minutes.
- It must be impossible to make locally a duplicate of the key.
- The safe must not have any defects, holes or twisted parts, etc....

• WAYS TO OPEN THE SAFE

Options available to you:

1. **Combination safe: do not use!**

As it is always necessary to have more than one person capable of opening the safe, and the safe can be opened only by code, in case of theft, several people would be considered suspects.

2. **Key + tumbler lock safe: do not use!**

In case of robbery, we consider that tumbler locks are too difficult to open for stressed people, thus putting them in danger.

If the office has already such safe, it is necessary to block the wheels in the position "open", use the safe only with the key, and replace it as soon as possible.

3. Key safe + electronic code: do not use!

It can hardly be found in the countries where MSF works! Despite the fact that the safe seems to have "security ultra plus", it is inconvenient for the same reasons as the tumbler safe.

4. Safe with key only: Ideal solution!

Make sure that there are only 2 keys available, seal the second copy in an envelope, and make sure that it is impossible to duplicate this type of key locally.

• SAFE LOCATION

- Ideally, the safe must be placed in a room annexed to the finance office. If the floor plan of the MSF office does not allow for this, the safe must be put in the finance office. The rooms must have barred window.
- The room where the safe is should only be used for finances. Limit the number, and define carefully the persons authorized to enter the room. For all other persons the room is off limits.
- The safe must be put in the corner, not in a high traffic area.
- The door to this room must lock both from inside and outside. This door should not be left open during normal business hours.
- Curtains must be hung over the windows and be drawn when the safe is open and during cash inventories.
- The safe must be fixed to the wall/ground or should be extremely heavy to carry.
- Visitors must be unable to see the contents of the safe (when it is open).

• USE OF THE SAFE

- DO NOT leave your safe open unattended (not even for a second).
- DO NOT leave your keys lying around. In case of loss, immediately change your safe (or the lock).
- DO NOT leave the cash book near the safe, and allow snoops to learn the contents of the safe. The book must be kept IN the safe itself or in the locked drawer of your desk.
- Try to limit the number of times you open the safe.
- Your safe must be used to supply the petty cash and not to do the daily payments.
- When opening the safe: draw the curtains (if it is possible to see through the window from outside), and lock the door from inside (to avoid unexpected visitors).
- Fix a maximum amount, not to be exceeded! This maximal amount must be a compromise: not too high (to reduce loss in case of theft) and not too low (to reduce the number of the transfer supply to the safe).

- Never leave your safe completely empty, always leave a little money visible: a nervous thief who can't find anything could become more dangerous.
- The safe will contain money and possibly some important documents which we rarely need. It is preferable to keep the passports, the plane tickets and other documents in another safe under the responsibility of the administration: either of the Administrator if the expatriate position is divided, or of the local Administrative Assistant. We will, thus, reduce the number of times we open the safe with the money (in addition, we won't lose the passports and plane tickets in case a thief takes the safe with the money).
- PLEASE NOTE: if expatriates' personal envelopes are kept in the safe, do not forget to inform each expatriate that this service is offered by the mission but in case of theft, MSF will not be responsible for their losses.

B – THE PETTY CASH AND ITS MANAGEMENT

● RESPONSIBILITIES

The Administrator is responsible for all the petty cash of the mission. He/She obviously cannot keep it all himself/herself and has therefore to delegate. This means that he/she will undertake all necessary steps to guarantee its follow-up and regular control.

Each cash-box is under the responsibility of the person who keeps it.

- If this person is the expatriate, he/she will have direct responsibility.
- If it is not the case, the expatriate will delegate this task to the local Cashier but will remain the final responsible for the petty cash management.
- During field visits, the Administrator will make an inventory of all peripheral cash-boxes.

● ORGANISATION

In all missions, in the central coordination, there is at least one cash-box besides the safe. There could be variant organizations depending on the office size and its mode of functioning:

- 1). The majority of missions prefer to have a Cashier who is under the direct responsibility of the Administrator and who manages all the money INs and OUTs from the petty cash which is the only one for all of the office. This is the main function he/she is assigned and therefore he/she will have all the time to do the necessary operations and control. The follow-up is often better; however it is heavy in terms of mission organization because to authorize an expense, expatriates must give a "Payment authorization" to the person who will receive the amount from the petty cash.
- 2). Another alternative we find in some offices is that the Financial Responsible (or preferably his/her Assistant Accountant) has a petty cash for main operations and that persons who must always have money available for regular operations, have open advances to be settled at the end of each week. This could be a Logistician,

for example. This allows funds to be available more quickly and with less hassle. In such cases, we will fix an average value which will be recorded in the extra-accounting advance and settled systematically at the end of the week.

☞ **Reminder:** always give preference to payment by cheque! Fix a maximum ceiling for cash payment.

● GENERAL PRINCIPLES

- Each cash-box must have 2 keys: the Cashier in charge of the cash-box has the #1 key. In case of money loss, he/she will be held responsible. The Administrator must NOT have an easily accessible key to this petty cash. The #2 key must be sealed in an envelope, signed by Cashier and the Administrator and placed in the safe.
- The cash-box must always be locked.
- During the day, the petty cash must be kept in a locked drawer. (It is easier to steal a small cash-box than the whole office!). At the end of the day, the cash-box will be placed in the Administrator's safe.
- The cash-box should contain the maximum necessary amount, defined in advance by the Administrator according to the work load which corresponds to the expected expenditures for the week. Fix the cash level: a maximum amount to never be exceeded. If the amount exceeds the fixed level (as a result of cashing) the Cash Responsible must, as soon as possible, advise the Financial Responsible and hand over to him/her the surplus.

C – THE CASH/CASH TRANSFERS

If the bank system is non-existent or faulty in the place where MSF operates, the projects should be supplied with cash.

● SENDING PROCEDURES

Two methods are possible:

● **Carrier with responsibility for money (this method is recommended)**

1. The Administrator and the Carrier count the money together.
2. The Administrator wraps up the money: if possible in a money belt, otherwise makes a parcel (as small as possible).
3. The Administrator prepares the fund transfer document (in triplicate: see Appendix), and has it signed by the Carrier.
4. The money Receiver knows the amount he/she must receive and the name of the Carrier. Upon the Carrier's arrival, the Receiver organizes an immediate reception of the money.
5. The Carrier hands the money over to the Receiver and they both count it: take measures beforehand to ensure that the hand-over conditions allow for counting the money discretely.

In case of problem upon delivery, the Carrier is held directly responsible since he alone had access to the money.

- **A Blind Carrier (in exceptional circumstances)**

1. The Administrator wraps up the money: if possible in a money belt, otherwise makes a parcel of the smallest size possible.
2. The Administrator closes the envelope and seals it; the only persons capable of opening the envelope will be the Sender and the Receiver. Use a sealable transport bag (if available), or the Sender must close the envelope, sign it over the closure, and seal it so that it should be impossible for the Carrier or any other person to open the envelope without it being noticed.
3. The Administrator gives the sealed envelope to the Carrier.
4. The Administrator prepares the transfer document and has it signed by the Carrier.
5. The Carrier is thus responsible for delivering the envelope to its destination, and is aware that the envelope contains money. However, he is not responsible for the exact money count in the envelope.
6. The Receiver knows the amount and the name of the Carrier. Upon the Carrier's arrival, he/she organizes an immediate reception of the money.
7. The Receiver simply verifies that he/she receives a sealed envelope; he/she must not count the money immediately.

In case of problem, this must be settled between the Sender and the Receiver; the Carrier should not be involved since his responsibility is released from the moment he/she has handed over the envelope.

This method must be used only in exceptional circumstances: i.e. with the plane pilot.
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- **FROM CAPITAL TO THE FIELD**

Basic principles:

- NEVER use the method consisting of placing money in a parcel, which is placed in a shipment along with other parcels, in other words without the knowledge of the Driver.
- Each person has a right to refuse cash money transportation. However, if they accept it, they commit their responsibility; in case of problem, it will be evaluated through investigation whether they are at fault.
- Send only the ceiling amounts defined by the Coordination Team. We can fix specific ceilings: from this place to that place, the maximum amount is X.000 USD.
- NEVER indicate the sum on the parcel.
- DO NOT withdraw money the night before the shipment; avoid keeping the money in the house overnight.
- The Carrier must keep the money on him/her at all times (in a pouch or in a money belt) or with him/her (in his/her jacket, in a bag which he/she will not leave). So the money must NEVER stay unattended: in the corner of the office, in the house, in a bag left in the room, or in a car etc...

- Upon the count at delivery, it is necessary to really count each bank note. One of the theft methods consists of taking one or two bank-notes from each pack. For missions where we work with bank-note wads, we can buy a bank-note counting machine.
- Maintain the highest level of discretion when transporting and communicating; no clear messages by phone or in writing, do not speak about money transfers in an open and accessible (to everybody) communication such as: discussions, radio, telephone, letters without envelopes, fax, wave mail and e-mail etc...
- Always send money with an expatriate. Exceptionally, if it is impossible to do otherwise, we could hand money over to a member of the national staff (do not confide 10 years worth of salary to a driver) or to a plane pilot. In the latter case, it is essential to use a sealed bag (the Carrier is blind). Consider different amount ceilings according to the Carriers.

- **FROM HQ TO THE CAPITAL**

These transfers are rare and should be limited. They are used only for the mission opening or within the emergency context.

Basic principles:

- As far as possible, respect the law in force for the entry of foreign currencies cash into the country; unfortunately it is very difficult to comply!!! Persons who will have to carry funds to their mission will receive explanations from the Accounting Unit in HQ on the procedure and instructions for application in their country of destination. A “legal alibi” must be prepared in case the Carrier is checked and he/she must know what to do and what to say (“ah but we thought that...”)
- Coordination and the Desk must, therefore, write a document for each person who must carry money to the mission, explaining clearly the steps to be followed: to declare or not upon arrival in the country, what to say in case of customs control...

When someone has to leave with money, the HQ person who organizes the transfer must:

- a). Inform that the person can refuse,
- b). Place money in one or several money belts,
- c). Provide the money transfer document (in two copies) signed by the Cashier of the Accounting Unit in Geneva, by the Financial Controller and the Carrier...
- d). Send the details of this transfer (name of expatriate, arrival date and hour) to the Administrator in the capital in a confidential message, so that the person is welcomed and able to immediately hand-over the money to the Responsible.

Upon arrival, the Administrator will make sure to welcome the person, receive the money, count it, countersign one copy of the document (which will be used for the voucher), and immediately place the received value in the safe (not waiting until the next day).

MEDICAL EVACUATION AND REPATRIATION

Preparation plan for the medical assistance and evacuation of MSF staff victim of serious or critical medical situations in the missions

19 July 07 – Eric C / Marc P

Security and safety related incidents occur frequently in the missions and may jeopardize the health or the life of MSF staff. It is essential for the staff of every mission to be ready to offer an efficient medical response that is appropriate to the level of emergency.

This document is written for the persons in charge of medical issues and of the security management at mission and project levels. It does not claim to offer responses for all situations, but to identify the necessary steps to establish a preparation plan for serious or critical medical situations. It also clarifies everyone's responsibility in this area.

The principle of risk analysis as it is used in security management will help us to study what would be suitable to do for every step (before, during and after the problem):

- 1) Identifying the threat or the danger
- 2) Assessing MSF's vulnerability or exposure to these threats
- 3) Setting up prevention measures for these risks
- 4) Preparing to confront the problem that might occur.

1. BEFORE THE PROBLEM

1.1. Define responsibilities and evaluate skills.

- At mission level, medical evacuations are under the responsibility of the medical coordinator (and not the head of mission), supported by the coordination team for logistic and administrative matters. If the medical coordinator is absent, the head of mission holds this responsibility.
- At headquarters level, the mission follow-up and support are the responsibility of the medical referent in the desk, that is to say the ARP. For international staff (and their families), the responsibility is transferred to the medical director in case of vital risk to the person or in case of international evacuation.

At project level, a medical reference person must be identified in order to be the medical coordinator's contact person so he or she can make decisions. We must ensure that this person has the necessary skills to hold this function (a doctor in charge of an HIV mission may not necessarily know how to give first aid in case of a car or mining accident). It is possible to use someone who does not belong to MSF if these skills are not to be found within the project.

The development of the assistance and medical evacuation plan is the responsibility of the medical coordinator. As it is part of the "security guideline", the head of mission must ensure that this is enforced.

Everyone's responsibilities must be clearly stated, because the response to serious medical situations requires the mobilisation of several people in the team.

1.2. Identification of the plan beneficiaries in the mission

MSF's responsibility applies to the following categories:

- International or national staff who suffer from medical disorders at work.
- International staff who are off-duty.

- Families of international staff.
- Visiting headquarters staff.

The response is different for each category of persons according to their travelling possibilities (means of transport, visas, etc.), medical insurance, and place of residence (i.e. regional or relocated staff). For national staff, a general rule is that it will solely be assisted in the mission country.

1.3. Identification of context related risks

It deals with identifying the high-risk situations (medically speaking) to which the staff might be faced on each mission/project. Every mission must elaborate its own list of likely medical incidents according to the context and the type of the mission (TB, jail...). For the most likely risks, the medical coordinator must be ready to respond to them, particularly by knowing the various protocols (i.e. treatment for snake bites, first aid after a mining accident, etc.).

1.4. Identification of person related risks

Before the volunteer leaves, the medical visit determines whether he or she is fit to go on the mission.

Nevertheless, in the field, the Head of Mission/Field-coordinator and the medical coordinator should be aware of those who have particular health disorders, because they may put their lives or the lives of their colleagues in danger (epilepsy, diabetes, etc.). The medical coordinator and/or his assistant should compile a file for each individual accessible in case of incident.

1.5. Action for prevention/risk reduction and assistance in case of incidents

Depending on the risks that are identified, and the context and people involved, every mission must develop and establish:

- First, preventive actions to reduce MSF staff exposure to identified risks: well-organised work, appropriate tools, appropriate training, as well as setting up adequate security measures.
- Second, the development of a suitable response that will allow us to reduce the impact of a potential incident on casualties: emergency boxes, first aid-trained staff, protocol of agreement with medical facilities, transport companies, etc.

1.6. Definition of the level of emergency

Every incident is unique and the appropriate response will be different according to the level of emergency. This level will be defined by the medical staff present, generally with the help of the medical coordinator. It depends not only on the medical disorder, but also on the context.

It is useful for us to provide a common framework within the mission in order to avoid discussions when the incident happens. For instance, a victim of acute hepatitis A, who usually requires mere rest needs, in certain cases, to be sent to the capital to be placed under observation if the disease is likely to become more serious. The evacuation is too difficult to organise afterward.

It is important to plan for the specific case of death, which requires not only a psychological and administrative management, but also a material one particularly concerning the remains (special bags, coffin, where to find them locally, contact with the embassy, etc.).

1.7. Definition of the level of intervention

We can roughly identify 4 levels of intervention:

- MSF medical facilities
- Local facilities outside MSF
- Regional facilities (capital, nearby town)
- Medical facilities in another country.

It is important to define beforehand what we expect in terms of assistance for each level of intervention: observation, stabilisation and treatment.

We then need to ensure that each facility is able to perform the required tasks, and to follow up later (ex. a skilled surgeon may be transferred or on holiday).

If local facilities are appropriate but poorly equipped, we need to consider providing them with medical resources from MSF (ex. making a surgeon emergency box available).

For international evacuations, particularly those linked with SOS International, the medical and HR departments established specific documents. Please refer to chapter 5 of the MSF security manual.

1.8. Ensuring the presence of human, material and financial resources

The actions defined in the plan of responses to critical medical situations require financial, human and material resources.

We regularly need to ensure that these resources are available.

It is important to clearly identify the people in charge (airline companies, local representatives from SOS International, hospital directors, the administration that grants travel permits, etc.) and to meet with them regularly before any incident happens.

1.9. Communication and confidentiality

The medical coordinator must ensure that the patient's confidentiality is respected throughout the whole process.

The success of the evacuation depends on the participation of different people, each of them with his own level of responsibility. It is thus vital to have quick and clear communication – well-planned beforehand – between the field, the capital and the headquarters when these problems happen.

Although the first pieces of information are generally given by phone or radio, it is still advisable to use what is already set up for security incidents, that is to say a written incident report that does not breach medical confidentiality and which is developed by the medical person in charge. In addition, a separate medical document with all medical information will be exchanged between the various medical people in charge.

When the incident happens in the field, the incident report will be sent to the medical coordinator and to the head of mission. The latter will be in charge of forwarding it to the desk in Geneva. The medical information will only be sent to the medical coordinator.

1.10. Follow-up of the medical evacuation plan and communication tools

The medical coordinator must ensure that the medical plan is adapted over time to the people present and to any change in activities, context or available resources, particularly within medical facilities.

The medical coordinator is in charge of following up medical incidents on the mission by updating a logbook (that can then easily be transmitted to his or her successor).

2. DURING THE PROBLEM

The process of managing these incidents must ensure that we have the best possible assistance and follow-up. The first step consists of applying the rules that were discussed and decided beforehand, especially those concerning everyone's role (medical, administrative, logistic, communication, etc.).

Incident management

- The operational priority must be given to the incident management. Every decision must be made with the patient's security in mind.
- Decisions must also be made in such a way so as not to endanger the lives of other team members.
- Confidentiality must be respected as much as possible.
- It is preferable to overreact and not to wait until it is too late to make decisions.
- In case of evacuation, a medical person must always stay with the evacuated person.

Communicating

- It is important that MSF team members communicate quickly and clearly with each other (in the field, headquarters or capital) in order to ensure that all the people who need to intervene have the necessary level of information.

It is also important to communicate with the patient's family (when dealing with international staff, this is HR's responsibility at the headquarters), the other members of the team and, if necessary, local authorities.

Disagreeing with a decision

In case of any disagreement between the field and the capital, the med-co must seek advice from the ARP who can help to collectively make the right decision. In the end, the medical coordinator is the one in charge in the field.

3. AFTER THE PROBLEM

Following up with the victim and the team

Obviously, the situation will differ if the evacuated person comes back on the mission or not, but it is important to follow up with him or her over time, until everything is considered to be normal again.

While ensuring confidentiality, it is important to communicate the result of the intervention to the other members of MSF team, and to other people outside MSF who were affected by the incident.

For particularly stressful situations, emotional support can be offered to the team (SPAM intervention). The field has the right to request such support.

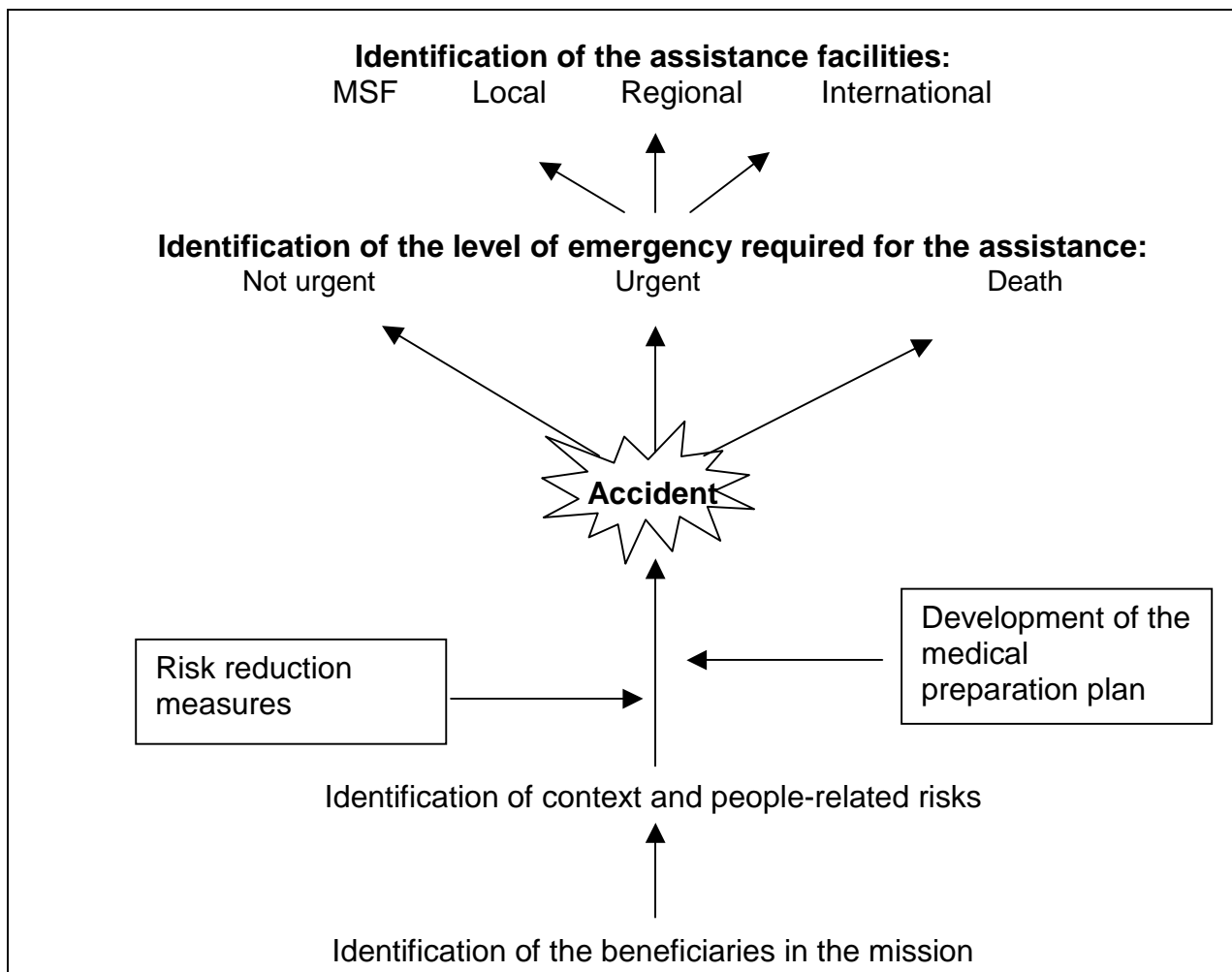
Following up with the incident assistance and the evacuation

It is good to learn lessons from every situation by pointing out what went well and what can still be improved.

From what we have learnt from the past, it is important to adapt the medical assistance and evacuation plan.

Beyond the immediate, individualized management of each situation, a more global analysis of medical incidents must be done at least once a year at every level (field, headquarters and capital). This review is the opportunity to identify tendencies and to adjust and adapt the plan again.

Schematic diagram for constructing a preparation plan for critical medical situations.



MEDICAL REPATRIATION: A SUMMARY DOCUMENT

REPATRIATION (SOS INTERNATIONAL)

- Repatriation doesn't always mean back to home. It's possible to repatriate on the nearest country with appropriate services.
- MSF have a contract with SOS-International (service provider).
- We paid an amount to have access to their services, so do not hesitate to ask information.
- **MSF will pay all services that SOS will furnish.**

IT'S IMPORTANT TO KNOW THE PROCEDURE WELL AND THE DIFFERENT OPTIONS **TO AVOID MEANINGLESS EXPENSES** SO IT'S COMPULSORY TO READ AND WELL TO KNOW THE DOCUMENT "MEDICAL REPATRIATION".

1. Which are the services offered by SOS and always paid by MSF?

1. Evacuation and Repatriation (for medical check, non urgent repatriation, urgent repatriation)
2. Companion tickets
3. Additional travel after Medical Evacuation
4. Repatriation of mortal Remains
5. Transportation of Minor Children
6. Medical expenses guarantee, cost review& payment, medical monitoring
7. Dispatch of medication & medical supplies

Some other services are offered by SOS without any additional fees (Emergency and routine medical advice, Legal Referrals, Emergency message transmission, lost document Advice and assistance, Emergency translation, etc.)

2. For what kind of repatriation or service is it not necessary to ask the intervention of SOS?

1. Each time that MSF can organize the repatriation (medical check, non urgent repatriation,....).
2. Each time that the airline ticket is still valid and no special follow is required
3. Avoid asking SOS intervention to accompany, choose if possible an MSF doctor or companion.

3. When is it always necessary to asks SOS intervention (after having with the medical department)?

1. Urgent repatriation
2. Contagious illness (VHF)
3. Repatriation of mortals remains

4. What is the procedure to follow?

Repatriation is a very sensitive matter.

It's a question of good coordination and communication.

Each member of the staff has to know the procedure and his role.

- A) Contact SOS Alarm Center in Paris when you started a mission to announce that you're the medical coordinator and the main responsible of the repatriations.**
- B) Clarifies procedures and alternatives for each possible case at the beginning of your contract with the administrator and the Comed you're replacing.**
- C) For administrators but also for medical coordinator it will be useful to contact the closest Swiss mission in charge of the country where you are working. For urgent repatriation of non Swiss volunteers in Switzerland it will be necessary to ask for a Visa (the administrator should contact Swiss and /or Schengen missions in the country and verify in advance procedures and time needed for this kind of Visas).**

YOU FIND A DESCRIPTION OF ALL PROCEDURE ON THE DOCUMENT "**SANITARY REPATRIATION PROCEDURE**".

5. Which is the role of the COMED?

SHE/HE is the main responsible of the repatriation procedure

- **Repatriation for medical check out**
 1. Inform desk
 2. Establish medical certificate
- **No Urgent Repatriation**
 1. Decides – in coordination with MSF HQ - the way the repatriation has to be done
 2. Informs CRH and desk
 3. Establish medical certificate
- **Urgent Repatriation**
 1. Contact immediately the desk's doctor or the Medical director of MSF and then SOS.
 2. Evaluates – with person in charge in HQ – all the different opportunity
 3. Decides the way the repatriation has to be done
 4. Insure logistic in collaboration with SOS, the administrator and the COTL
 5. Insure the contact with SOS
 6. Inform the desk's doctor on the evolution of repatriation
 7. Send the complete file to ARH (invoices, medical certificate, Admin and Comed repatriation report, etc.)
- **Viral hemorrhagic Fever**
 1. The MedCo call HQ medical director and then SOS.
 2. Immediately after receiving the message from the field, the Medical director asks Geneva Hospital, or another institution, for an authorization to hospitalise our volunteer.

3. The capital administrator contact immediately the Swiss mission in order to obtain Visas procedures and the responsible of SOS procedures at HQ (actually Marcel Prahin)

- **Repatriation of Mortals Remains**

1. Inform RP and CRH on the repatriation
2. Contact SOS
3. Organize with SOS the contact with the local POMPES FUNEBRES (with the administrator)
4. Inform RP and CRH on the repatriation

6. How to recover the expenses?

- MSF has a contract with Winterthur
- Winterthur reimburses (to max 30'000 CHF the expenses in case of repatriation due to illness or accident).
- Administrator must send immediately all invoices, medical certificates and any other relevant document to the HQ administrator in charge of the desk.

Important phone numbers:

Arnaud Derossi : Medical director SOS / Our main contact

Abiy Tamrat : HQ Medical director +41 22 849 84 32 or +41 79 470 4462

Eric Roux : HQ HR-Field responsible +41 22 849 84 73

Marcel Prahin : HQ SOS coordinator ++41 22 849 44 24

INTERNATIONAL SOS ASSISTANCE

Centrale d'alarme SOS à Paris - France

Tél. : +33 1 55 63 31 55

6.3.1.1 Fax : +33 1 55 63 31 56

MEDICAL REPATRIATION: SYNOPTIC TABLE

SOS INTERNATIONAL in Paris: 00 33 1 55 63 31 55 Dr Arnaud DEROSI

MSF-CH MD on duty: Dr. Abiy Tamrat +41(0)79 508 4939 or +41(0)79 470 4462

		Medical examination abroad	Non urgent repatriation	Urgent repatriation	Death
	Expatriate				
FIELD	Medical coordinator	<p>Calls the MSF-CH's MD on duty - discussion – decision.</p> <p>Informs the HOM</p> <p>Writes a medical certificate or ask a doctor to do it</p>	<p>Calls the MSF-CH's MD on duty - discussion – decide on repatriation or not;</p> <p>Informs the HOM</p> <p>Writes a medical certificate or ask a doctor to do it</p>	<p>Contacts SOS International Paris</p> <p>Informs HOM</p> <p>Keeps In contact with local doctor if hospitalisation</p> <p>Calls the MSF-CH's MD on duty if disagreement with SOS Final decision will be taken by Dir Med</p> <p>Organises local logistics with SOS / MSF administrator and logistics</p>	<p>Informs the HOM</p> <p>Contacts SOS International Paris</p> <p>Contacts, with MSF administrator, local funeral service indicated by SOS</p>
	HOM	Informs the ARP	Informs the ARP	Informs the ARP and the RRHT	Informs the ARP and RRHT
	Administrator	<p>Takes care of the local logistic with and organises the flight</p> <p>Communicate flight timetable to ARH+CRH</p> <p>Sends the file to ARH</p>	<p>Takes care of the local logistic and organises the flight</p> <p>Communicate flight timetable to ARH+CRH)</p> <p>Sends the file to ARH</p>	<p>Take care of the local logistic with SOS and Co Med, and coTL if needed</p> <p>Communicate flight timetable to ARH+CRH)</p> <p>Sends the file to ARH (Medical certificates, invoices, repatriation reports med. et admin.)</p>	<p>Contacts the local funeral services, appointed by SOS (With MedCo)</p> <p>Communicate flight timetable to ARH+CRH)</p> <p>Sends the file to ARH (Medical certificates, invoices, repatriation reports med. et admin.)</p>
HEADQUARTERS	MD on duty		Informs the MSF-CH SOS coordinator (C. Canuti)	Informs the MSF-CH SOS coordinator (C. Canuti)	Informs the MSF-CH SOS coordinator (C. Canuti)
	HR administrator	Opens an insurance file	Opens an insurance file	Opens insurance file	Opens insurance file
	RRHT		Contacts family of the expatriates (On request of the expatriate only)	Contacts family of the expatriates (On request of the expatriate only or in case the expatriate cannot express his/her wishes))	Informs DirOp ;DRH, DG et psychologist
	ARP			Informs RP	Informs RP, DirOp ;DRH, DG et psychologist – coordination with RRHT for the family contact/visit

Capital coordination is a team, and each member has to be clear on his own tasks in case of repatriation. This document is a limited summary of the necessary tasks to be fulfilled in case of repatriation. Please read the document «Medical repatriation ».

MEDICAL REPATRIATION : FULL SANITARY REPATRIATION PROCEDURE

INTERNATIONAL SOS ASSISTANCE

SOS Call Centre in Paris - France

Tél. : +33 1 55 63 31 55

Fax : +33 1 55 63 31 56

CONTRACT NO. 30BCMA000006

BE CAREFULL

**IN ANY CASES THE RAPATRIATIONS INVOLVES THE
WHOLE COORDINATION TEAM AND THE RP or ARP MEDICAL
OF THE DESK, RESP. FIELD HR, SOS COORDINATOR**

Arnaud Derossi : SOS Medical Director/ Our contact(no. down mentioned)

Abiy Tamrat : Medical Director 0041 79508 4939

Eric Roux : HR Field Coordinator 0041 79 447 36 63

Marcel Prahin : SOS Coordinator 0041 22 849 84 24

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MEDICAL REPATRIATION

1 – SOS – PRESENTATION

Since 1st January 2004, all operational sections have a service contract with the same repatriation company “**International SOS Assistance**”.

INTERNATIONAL SOS ASSISTANCE
SOS Alarm Center in Paris – France

Tel: +33 1 55 63 31 55

Fax: +33 1 55 63 31 56

1.1 Extent of cover:

SOS Assistance advises on, carries out and insures all medical repatriations throughout the world, resulting from SICKNESS, ACCIDENT OR DEATH.

The cover lasts for the duration of the mission, the return journey and local rests included (it is important that everyone who travels during their local holidays is in possession of both their SOS card and MSF card with the address and phone numbers of the mission).

1.2 Financial aspect of the contract:

The contract between MSF and SOS is a service contract based on the principle that MSF pays all service furnished by SOS.

In order not to increase this threshold from year to year because repatriation costs are too high, MSF and SOS have the task of seeking to employ the most economical solutions possible.

Depending on the seriousness of the case and the local possibilities available, MSF will try to:

- **use local or regional repatriation by MSF which will take charge of the repatriation if the medical and/or logistical aspects allow it or when the repatriation is not urgent. This is to cut costs!**
- repatriate to the person's country of residence if local repatriation is not possible.
- use the return airline ticket if still valid or buy a ticket at a reduced tariff.
- if it is necessary for someone to accompany, choose an MSF companion.

The following are considered to be the costs of evacuation and repatriation:

- The journey undertaken by an insured person for medical examinations that are not feasible at the mission site or the capital of the mission (see chapter 'Procedure', local or non-urgent repatriation section)
- transport of the patient (ambulance, regular flight, air ambulance)
- medical care given by SOS during transport
- transport justifying accompaniment (medical or not)
- transport of accompanying adult in the case of repatriation of a child less than 18 years old

- transport of children under 2 years of age in case of repatriation of the mother
- transport for childbirth (with 25% threshold)
- costs of search and rescue.

The following are **not** considered to be costs of evacuation and repatriation, but as being at the charge of MSF or the person themselves:

- return because of the death of a family member (MSF)
- return because of sickness/accident putting the life of a family member at serious risk (MSF)
- return to mission of the insured when cured (MSF)
- travel of a family member to visit an expatriate hospitalized abroad (MSF)
- repatriation following a mountain climbing accident (MSF)
- repatriation following active participation in acts of war (MSF)

2 – SETTING UP A NETWORK

In order to be as efficient as possible the moment a medical problem arises, it is essential to put administrative and logistical procedures in place and to make urgent contact with those organizations which can be useful in the case of urgent or less urgent repatriation.

2.1 Expatriate's administrative file

The administrator will ensure that a complete file is made up for every expatriate in the field: amongst other things, copy of passport and visas, information about blood group, etc.

2.2 Contact with the SOS Assistance Alarm Center in Paris:

Upon arrival, **the head of mission, the medical coordinator (or the administrator)** must contact the SOS Assistance Alarm Center in Paris in order to identify themselves as persons competent to deal with the company and to introduce other persons who could have a role in the decision-making process of a repatriation (medical coordinator or person responsible for the health of expatriates).

2.3 Setting up a local network and putting repatriation procedures in place:

The head of mission and the medical coordinator (or administrator) will set up or update the local network below (for each contact, identify the person responsible and take a note of their work details, telephone numbers etc.):

- the SOS Assistance regional office (if there is one in the country), to draw up evacuation or repatriation plans with them (night and weekend contacts, times needed, means of transport available, etc.)
- failing a regional SOS office: local air ambulance companies
- the nearest airport to each locality in which expatriates are working
- the main companies for aircraft, helicopter and ambulance rental
- the embassy representing the nationals on the mission
- nearby expatriate doctors other than MSF (HCR, CICR, MDM, etc.)
- hospitals of reference (see web site 'sosinternational.com')

If another MSF section is already present in the country, it will contact its head of mission and the two missions will coordinate their information (in order not to do the same work twice) so as to make up a **joint file and draw up a local evacuation plan** (this file can also list expatriates' blood groups).

This 'Repatriation' file must be carefully updated and be available to all the executive staff in the capital and the managers in the field.

3 PREVENTIVE HEALTHCARE

The mission's medical coordinator (or another doctor, if need be) is responsible for managing the healthcare of expatriates. He must have a preventive attitude in order to avoid the consequences of:

- stress, fatigue
- self-medication
- failure to observe individual or collective safety regulations
- failure to observe prophylactic advice issued by MSF.

The objective is to avoid as far as possible behavior or attitudes identified as being at risk. If he considers it necessary, he can recommend that several days local rest should be taken in cases of fatigue or acute stress; he ensures that the vaccination and hygiene regulations issued by the organization are being followed. (Failure to observe these regulations could result in the mission being halted.)

He will also ensure that the urgent medical bag is operational and that all necessary medical supplies are in position in the field, sufficient to cater for the number of expatriates present.

4 – REPATRIATION PROCEDURES

For information: the RH- SOS administrator will communicate every changing phone numbers to the SOS Alarm Center, and every three months he updates the list of the heads of mission and medical coordinators.

4. 1 JOURNEY FOR MEDICAL EXAMINATION

4.1.1 Definition:

'return to carry out the examinations necessary for the identification of a medical problem that cannot be organized in the locality of the mission, or in the capital of the country'. It is not necessary to involve SOS in the organization of this kind of repatriation.

MSF and SOS prefer local repatriation (from the locality to the capital) and/or regional (to another neighboring capital; return to the expatriate's country of residence as a last resort).

4.1.2 Procedure in the field

- **The medical coordinator** will inform the RP of the expatriate's journey for medical reasons, and draw up (or asks to draw up) the **medical certificate** justifying the trip.
- **The administrator** will take care of the logistics of the journey:
 - * if local/regional journey: buying a ticket for airline or other necessary means of transport
 - * if 'return': depending on the date and validity of original ticket, he will make a reservation using the return portion of this ticket or will buy a return ticket for departure from the capital – in case of doubt or any reservation difficulties, he can call the departures office in Geneva.
- **The administrator** will confirm the date and time of the return flight to the RH field coordinator (Eric Roux) and to the administrator of the departures office (Mac).
- **The administrator** will send the **file** to the RH administrator (Mac) with the expatriate or by mail.

- * medical certificate justifying the repatriation
- * copy of the bill for travel expenses (plane, taxi, etc) plus documents.

4.1.3 Procedure in MSF Swiss Office:

- in the case of 'return', the expatriate will contact the CRH as soon as possible to arrange a meeting with the RH administrator with a view to the possible opening of a file for 'loss of profits' and the reimbursement of the health care costs.

4.2 NON URGENT REPATRIATION

4.2.1 Definition:

'repatriation to undergo medical treatment that cannot be obtained in the locality of the mission or in the country's capital, and that cannot be postponed until the end of the mission'.

It is not necessary to alert SOS for each repatriation. SOS must be contacted only if necessary.

This type of repatriation does not require urgent intervention, the logistics are normally quite simple since the date of travel can be planned.

MSF prefer local repatriation (from the locality to the capital) and/or regional (to another neighboring capital); return to the expatriate's country of residence as a last resort.

In every case SOS, if it is involved in the logistics of the return, must be notified: the RH administration will send the file to the insurer to take account of the costs pre-financed by MSF in the field, and reimburse SOS for their own.

4.2.2 INFORMATION TO GIVE TO SOS

- identification of MSF contract: **30BCMA000006**
- identification of operational section, country of the mission, name of medical coordinator plus details of the mission, (tel, fax, e-mail, etc)
- identification of the expatriate: name, age, sex, nationality, country of residence
- description of case: locality of expatriate, sickness/accident, state of health, symptoms/treatment in progress, details of doctor treating case if hospitalization in progress, etc.
- if return already organized by MSF: date/means used
- preferred destination, arrangements necessary on arrival
- if necessary to be accompanied, medical/non medical: MSF or SOS
- possibly name of MSF duty doctor if consultation necessary.

4.2.3 Procedure in the field:

- **The medical coordinator** will, if need be, contact the SOS Alarm Center in Paris to submit the case to them and decide on a 'local' or 'return' repatriation and the methods of repatriation.

In the event of disagreement about the diagnosis or the methods of repatriation, the medical coordinator will consult with the MSF duty doctor on the one hand and Dr De Rossi at SOS, who fulfils the role of SOS consultant doctor, on the other.

The medical coordinator will be the final decision maker.

- **The medical coordinator** will inform the RH field coordinator (Eric Roux) and the expatriates' return desk of the medical reasons, and will draw up the **medical certificate** justifying the return.

- **The administrator**, with the possible help of a logistics expert, will assure the logistics of the journey, **assisted if necessary by SOS**:

- * if local/regional journey: buying a ticket for airline or other necessary means of transport
- * if 'return': depending on the date and validity of original ticket, he will make a reservation using the return portion of this ticket or will buy a return ticket for departure from the capital – in case of doubt or any reservation difficulties, he will request logistical assistance from SOS
- * SOS will cover all special logistical costs: ambulance, reservation of hospital room, etc.

- **The administrator** will confirm the date and time of the return flight to the RH field coordinator (Eric Roux) and to the administrator of RH departures (Mac).

- **The administrator** will remind the expatriate to contact his CRH or CAD as soon as possible after his return to organize a debriefing 'file of repatriation/loss of profits/healthcare reimbursement' at the RH administration.

- **The administrator** will send the **file** to the RH administration (Mac) with the expatriate or by mail:

- * medical certificate justifying the repatriation
- * copy of the bill for travel expenses (plane, taxi, etc) charged in ???? plus

documents repatriation report

4.2.4 Procedure in MSF Swiss Office:

- **The Desk** will inform the departures administration (Mac) on receipt of the announcement of a repatriation by the medical coordinator, in order to open the file.

- **The RH field coordinator (Eric Roux)** will contact the expatriate's family at the **specific request of this latter**.

- **The duty doctor**, if he has been contacted by the medical coordinator or by SOS, will immediately notify the RH administration (Mac – contact person between SOS and the insurance broker who keeps track of the contract).

4.3 URGENT REPATRIATION

4.3.1 Definition:

'repatriation as the result of sickness or an accident, necessitating the rapid intervention of MSF and SOS, to ensure the optimal conditions for the patient to receive the care adapted to his case'

SOS will be notified as soon as possible, the costs of local logistics are normally paid by MSF (the departures administration will later send the file to the insurer to take account of the costs pre-financed by MSF, and reimburse SOS for their own).

Depending on the seriousness of the case, there may be a 'stabilization' of the patient's condition in the best adapted and most accessible hospital of reference before the repatriation to the country of residence; the means of transport will be adapted to the seriousness of the case (ambulance, airline, + stretchers, air ambulance, etc).

4.3.2 INFORMATION TO GIVE TO SOS

- | |
|---|
| <ul style="list-style-type: none">• identification of MSF contract: 30BCMA000006• identification of operational section, country of the mission, name of medical coordinator plus details of the mission, (tel, fax, e-mail, etc)• identification of the expatriate: name, age, sex, nationality, country of residence• description of case: locality of expatriate, sickness/accident, state of health, symptoms/treatment in progress, details of doctor treating case if hospitalization in progress, etc.• if local repatriation already organized: date/means used• if 'local' hospitalization: details of the hospital and name of the doctor treating case• preferred final destination, arrangements necessary on arrival• if necessary to be accompanied, medical/non medical: MSF or SOS• possibly name of MSF duty doctor if already contacted. |
|---|

4.3.3 Procedure in the field:

- **The medical coordinator** will contact the SOS Alarm Center in Paris to submit the case to them and decide on the methods of repatriation. If there is a 'local' hospitalization, the duty SOS consultant doctor will get in touch with the doctor responsible at the hospital to get his medical opinion on the patient's state and ability to travel.

In the event of disagreement about the diagnosis or the methods of repatriation, there will be a consultation between the medical coordinator, the MSF duty doctor and Dr DeRossi (the SOS consultant doctor dealing with MSF).

The medical coordinator will be the final decision maker.

- **The medical coordinator** will inform the MSF duty doctor of the event.

- **The medical coordinator and the administrator** will assure the 'local' logistics of the repatriation, **jointly with SOS**: excellent coordination is imperative, as well as an exchange of information between both parties: always confirm 'who does what'

- * local/regional repatriation: contact between all the parties to facilitate the repatriation; facilitate contacts between SOS and local helpers.

- * SOS will cover all special logistical costs: ambulance, reservation of hospital room, etc.

- **The medical coordinator and the administrator** will inform the duty doctor about the development of the repatriation, and its progress.

- **The administrator** will send the **file** to the departures administration (Mac) with the expatriate or by mail:

- * medical certificate from the hospital and medical certificate from the doctor treating the case
- * medical coordinator's medical report (+medical certificate if no 'local' hospitalization)
- * copy of the bill for travel expenses (plane, taxi, etc) with mission's analytic number plus documents
- * repatriation report

4.3.4 Procedure in MSF Swiss Office:

- **The duty doctor** will immediately notify the RH field coordinator (Eric Roux), the departures administration (Mac) and the manager of 'group 422'

- **The duty doctor** will send all the information concerning the progress of the repatriation to the RH field coordinator and the RH administrator

- **The duty doctor**, contact SOS consultant doctor for information and/or action in case of disagreement between SOS and the medical coordinator.

- the RH field coordinator, will contact the expatriate's family and, depending on the **expatriate's wishes**, keep them up to date concerning the repatriation (if the expatriate is unable to express his wishes, he must then notify the family/person to contact officially)

!! During the weekend:

- **the duty doctor** will immediately notify the RH field coordinator and the manager of 'group 422'
- **the duty doctor** will send all the information about the progress of the repatriation to the RH field coordinator
- **the RH field coordinator** will contact the expatriate's family and, depending on the **expatriate's wishes**, keep them up to date concerning the repatriation (if the expatriate is unable to express his wishes, he must then notify the family/person to contact officially)
- **the RH field coordinator** will inform RH administration (Mac) on the next working day.

4.4 REPATRIATION FOLLOWING DEATH

4.4.1 Definition:

'repatriation of the remains following death as the result of an accident, to the country of residence of the deceased'

Death in the field from an illness is extremely rare (except in the case of a virulent sickness) the onset of illness having entailed a prior repatriation.

Death as the result of an accident can be immediate or can take place shortly afterwards. When it is not immediate, the procedure for urgent repatriation should be followed, and the procedure for repatriation for death will be set in motion.

SOS will be notified as soon as possible, the costs of local logistics are normally met by SOS in coordination with a **local mortician's office**, whose task it is to carry out all the legal requirements. MSF will collaborate with SOS in providing all the necessary documents at its disposal (the RH administration will later send the file to the insurer to take account of the costs pre-financed by MSF, and reimburse SOS for their own).

!! The administrative formalities being numerous and essential, both in the country where the death occurred and in the country of repatriation, SOS directives must be followed to the letter and at least one week should be allowed before the repatriation will be able to be carried out.

4.4.2 INFORMATION TO GIVE TO SOS

- identification of MSF contract: **30BCMA000006**
- identification of operational section, country of the mission, name of medical coordinator plus details of the mission, (tel, fax, email, etc)
- identification of the expatriate: name, date of birth, nationality
- description of the circumstances of death: location of the remains, reasons for the accident, etc.
- information regarding official contacts already made

4.4.3 Procedure in the field:

- **The medical coordinator** will contact the SOS Alarm Center in Paris
- **The medical coordinator** will inform the RP/RH field coordinator (Patrick Schmitt)
- **The medical coordinator and the administrator** will make contact with the manager of the mortician's office which will have been appointed by SOS

- **The medical coordinator and the administrator** will inform the RP/RH field coordinator (Eric Roux) about the development of the repatriation, and its progress.

- **The administrator** will send the **file** to the RH administration (Mac) by mail:

- * medical certificate from the hospital if there has been hospitalization before death
- * medical coordinator's medical report
- * copy of the bill for travel expenses (ambulance, plane, taxi, etc) charged analytic number plus documents
- * repatriation report

4.4.4 Procedure in MSF Swiss Office:

- **The RP/ RH field coordinator** (Eric Roux) will immediately notify the Dir Ops, the DRH, the DG and the manager of 'group 422', as well as the partner section (manager/recruiter) if need be.

- **The DG** will notify the president of the CA

- **The RP, accompanied by a member of the direction or a member of the CA**, will pay a visit to the home of the expatriate's family (or the contact person) in order to notify them: if the expatriate's family lives in a country where there is a partner section, an operational section or another mission, the DG will delegate two MSF persons to carry out this task. If the journey is impossible at first, the family must be notified by telephone, but a visit should be organized later.

- **The RP** will notify the RH administration (Mac)

- **The Field RH coordinator (Eric Roux)** will keep the family informed about the progress of the repatriation.

4.5 REPATRIATION FOR HAEMORRHAGIC FEVER

Immediately contact SOS and HQ. Immediately contact Swiss embassy for Visa and authorization procedures.

Acts as for urgent repatriation (4.3).

Conduct and Behaviour issues

MSF-CH – Conduct whilst on mission

Summary of MSF Switzerland's policy regarding conduct whilst on mission

Aim: To efficiently address and anticipate unacceptable conduct whilst on mission

➤ Why?

Why is conduct on mission an important and continuous topic of concern?

- The specificity of the situation: The first, purely practical, aspect is linked to the particularity of life on mission: professional life and private life often overlap. This applies to international staff as well as to national staff. Even if MSF remains committed to the respect for private life, liberty and personal choices, the reality on the ground means that our actions and gestures lose their private character. We represent MSF almost continuously.
- The specificity of the risk: This specificity is linked to the notion of power, which covers two aspects, namely management/decision-making power, and monetary power. While on mission, MSF staff is confronted to new situations without having had any previous experience or training.
 - (1) Management power: MSF staff (particularly international staff) may find itself managing more or less large teams, without any previous experience; managing teams meaning having authority over a certain number of people.
 - (2) Monetary power: the purchasing power of the international staff often varies quite subsequently from the purchasing power of the vast majority of the local population (including our national staff). This means that we have a great deal of power and that we can do an enormous amount with our money.

This power differential creates an obvious risk of power abuse! It is important to be aware and heedful of this, and, as far as possible, to prepare oneself for it.

Our concern: It goes without saying that we expect from anyone working with MSF, wherever they are, a level of conduct in line with MSF's charter and principles. This applies both to those working at headquarters and on the ground. Evidently, the close proximity between private and professional life whilst on mission renders what could be an unacceptable conduct of some individuals quite observable: such a visibility can affect the image and the reputation of MSF. This, of course, is not the only consideration: inappropriate behavior or abuse of power can have a serious impact on the people that we are trying to help, on the population in general, and on national and international colleagues. Finally, a corollary of these possible impacts is the consequences that this can have on the security of the people. It should be noted that these issues equally affect those from headquarters visiting the ground.

➤ The notion of Responsibility

A corner stone of the conduct issue is the notion of responsibility. We stress three categories of responsibility: institutional, individual and functional.

□ Institutional responsibility

This is MSF's responsibility, as an employer. It is linked to the means by which MSF anticipates and addresses conduct issues.

We bear this responsibility as following:

→ To give benchmarks, to define with clarity and precision the context in question.

→ To inform people and increase awareness about issues linked to conduct and, more specifically, to the risks of power abuse.

→ To produce clear information and decision-making mechanisms, make them known to the greatest number.

→ To prosecute those who commit serious abuses.

□ Individual responsibility

This is the responsibility of every person working for MSF either on the field as part of a mission or on a field visit.

Each of us must remember that (s)he is personally responsible for his or her behavior. The organization is responsible for implementing the above measures. Individuals are responsible for observing at all times a conduct respectful of the charter and principles. Within this context each of us may be asked to account for any attitude contrary to the charter and the principles of MSF, particularly regarding power abuse. This accountability goes beyond MSF

Switzerland insofar as the MSF International Council adopted a resolution to this effect some months ago.

Furthermore we should, as individuals, maintain a constant vigilance over these issues. Indifference is not permitted; we owe it to ourselves to be attentive to whatever is going on around us, to provoke discussion and reflection, and to intervene if necessary.

- Functional responsibility

This responsibility is linked to the position occupied by each person. What we have in mind is the responsibility to set an example and the responsibility of representation, which is borne by each person from headquarters visiting the field. More particularly, we also have in mind the responsibility of the managerial staff on mission.

We bear this responsibility as following:

- To inform and increase awareness about issues of conduct and risks of abuse in a preventive manner, taking over from actions undertaken at headquarters in this context.

- To facilitate the flow of information, to contribute to decision-making mechanisms as specified.

- Reflection on the means of implementation?

- Code of good conduct?

Wanting to regulate everything and defining in an exhaustive manner what is ethically acceptable and what is not seems to us difficult and inappropriate. Our movement is international in character, counting 19 sections and more than 60 different nationalities. A homogeneous position that would be commonly accepted and suitable to all is unrealistic. In addition, the impact of strict regulation experimented by other organizations did not have the expected impact. They run the risk of seeing some of these issues go underground. The MSF charter and the Chantilly principles give us important information on the essential values conveyed by MSF. Therefore, we would rather provide benchmarks and enable prompt reflection on these issues.

- The legal aspect

MSF is, of course, anxious to respect the law. Nevertheless this setting is limited with regards to issues of conduct: Swiss law can be at odds with the law of the different countries in which we work or even with the law of the countries of origin of the particular individuals. Furthermore, legality does not ensure an ethical conduct. For reasons of medical ethics, we are sometimes led, as an organisation, to be at odds with the legal framework of a country in which we are operating.

Let us be clear: this is not an invitation by MSF to disrespect the law, far from it! Put simply, the diversity, contradiction and deficiency of laws do not enable us to take them as a unique and uniform reference.

In terms of conduct, laws refer us to the notion of responsibility, and thus to our individual responsibility.

→ Information, Training, Awareness

We are convinced that the best way to prevent inappropriate behavior and to reduce the occurrence of power abuse is to inform, train and raise awareness amongst individuals. It is by talking and by demonstrating the risks to which one is exposed and to which one exposes the organisation and individuals, that we will give to each person the means of adapting his or her conduct to the new situations (s)he is confronted to.

→ Benchmarks, Frameworks

At this stage, we do not wish to develop a code of conduct, although we deem it important to provide benchmarks. We emphasize principles that are essentially based on the MSF Charter and on the Founding Principles of the organization: they highlight the importance for MSF to value respect for human dignity. These essential principles are dealt with in the Carnet de Route. Issues relating to power abuse, sexual conduct, prostitution, use of drugs and alcohol, security and money management are also addressed in the Carnet de Route. The aim of the Carnet de Route is to raise awareness about such issues while providing benchmarks and setting a framework.

In addition, these fundamental principles are summarized in a document issued to each expatriate during the departure briefing (see below). The expatriate is asked to sign this document before departure in order to stress the fact that these issues have indeed been raised with the expatriate and that (s)he has acknowledged them.

→ Appeal and questioning mechanisms

Information and awareness raising will void of sense and will not be converted into anything concrete unless we also establish clear questioning, appeal and decision-making mechanisms, known to all.

➤ Actions and means implemented:

The different elements developed above have led us to resolve our conduct policy around four principal themes: (1) Systematic information and awareness-raising with regards to these issues through briefings and training (emphasis on the document of reference, the Carnet de Route), (2) the stimulation of constant vigilance and continuous reflection on issues of conduct in order to ensure that, where necessary, our response is adapted in the most

appropriate manner, (3) the set up and good running of the functioning of precise warning systems and appeal mechanisms, and (4) application of sanctions if needed.

(1) Information & Awareness Raising

- All expatriates are briefed by the Human Resources Officer, which raises awareness amongst expatriates on specific issues before their departure. In addition, the HR Officer ensures that the « MSF Switzerland Basic Principles of Conduct » document is signed (see above). Anyone not wishing to sign this document will be invited to discuss the matter with the Human Resources Director.
- All mission leaders are made aware by the RH Director of those issues along with their own responsibility due to their posting.
- Training: a module on conduct revolving around the issue of awareness raising in new situations is organized in the context of the Preparation to a Primary Departure course (PPD).
- A presentation/discussion on issues of conduct is held during the Field Coordinator and (soon) Head of Mission trainings

(2) Vigilance & Reflection

Issues of conduct require continuous vigilance: each of us must be aware of what is going on around us and be ready to challenge when necessary and intervene if need to be. In addition, these issues should be the subjects of continuous reflection in order to challenge grey areas and search for the most appropriate responses to difficult situations. This reflection will be led by the Study and Advisory Committee on Conduct (Comité de Réflexion et d'Avis sur le Comportement -CRAC)

(3) Warning and Appeal

This is a determining factor in order to carry out an efficient policy in terms of managing conduct issues. It is certainly the biggest challenge facing us today. A mechanism is set out in the document « Dealing with inappropriate conduct in the field » (see attached document). This document seeks to define in a precise manner the management of difficult situations whilst on mission, the possibilities for warning and informing. It also emphasizes the importance of the objectivization stage. Without doubt, it is still insufficient in the realm of possible warning systems: it is necessary to explore other methods of questioning in order to reduce as much as possible the margin of error. Consequently, the CRAC will consider this matter in order to foster further questioning and to provide the greatest response to problems, however small.

(4) Sanctions

There are no pre-defined sanctions as these must be adapted to each case. Above all, it is important to thoroughly assess a situation before applying a sanction, for it to be as just as possible.

One should be aware that sanctions can lead to dismissal from MSF and that such issues can be taken before a tribunal for legal proceedings.

➤ In conclusion

This document seeks to summarize the position and the policy of MSF Switzerland with regards to the management of inappropriate conduct. We defined the context but it is important to emphasize that it is not rigidly established: not in the sense of a certain leniency that we could have regarding inappropriate behavior but rather in the sense of the necessity of keeping these issues central to our concerns. We should keep an ongoing questioning in order to adapt and improve our responses so that they become more pertinent and more effective.

Finally, history shows us that one of the most important challenges in terms of conduct policy is the dissemination of the awareness of this policy and the mechanisms pertaining to it. This challenge lies, of course, with headquarters and, more precisely, with those in charge of this dossier and in charge of information. It is also, however, a challenge on the ground and, more particularly, for the coordinating teams who have to play a linking role between information/awareness-raising and reflection, a key role without which we strongly risk missing our aim.

Tools:

(5) Study and Advisory Committee on Conduct

(Comité de Réflexion et d'Avis sur le Comportement - CRAC)



Advisory committee
(EN)

(6) Dealing with inappropriate conduct in the field



Dealing with
inappropriate conduct

(7) MSF Switzerland Basic Principles of Conduct



Basic principles of
conduct (EN)

(8) Volunteers' handbook (Carnet de route)



Volunteers'
handbook (EN)

BASIC PRINCIPLES OF CONDUCT

(Revised June 2006)

Basic Principles:

- While you are on a field assignment, you represent Médecins Sans Frontières 24 hours a day. Your words and behavior may be interpreted as a reflection of the principles Médecins Sans Frontières stands behind.
- MSF supports values that respect human dignity and therefore expects that each volunteer behaves with respect for the opinions, knowledge, lifestyle, religion, beliefs and attitudes of the other volunteers, local staff and local populations.
- As a foreign worker with a humanitarian organization, you will be in a position of power in the field and it is very easy, without even realizing it, to abuse this power. Do not abuse your power. Be respectful of your teams and the population you serve. Take action if you witness an abuse of power.
- Each of us is responsible for safety during these field missions, both on an individual and collective basis. One inappropriate act can endanger the entire team.

In addition to these basic principles, MSF Switzerland insists on the following points:

- a. During work hours, the consumption of alcohol is strictly prohibited. This restriction applies to both foreign workers and local staff.
- b. The presence of MSF staff, for reasons unrelated to work, in places known for prostitution must absolutely be avoided.
- c. Extra-professional relationships with representatives of national authorities, the military or factions must be maintained with great diplomacy and discretion. To ignore this guideline is to endanger your life or the lives of your colleagues.

MSF reminds you that you are also bound by collective responsibility. If you witness behavior that seems inappropriate and/or inconsistent with the principles MSF stands behind, you should take action. Report it to your field manager and/or head of mission. You can also report it to headquarters.

Finally, it is essential to keep in mind that each individual is personally responsible for his or her conduct. Each of us may be held accountable to MSF for any behavior that is inconsistent with MSF's Charter and principles, in particular in the event of an abuse of power.

I, _____, by signing this document, declare that I have read and understood the intentions, implications and consequences related to the expected conduct during MSF missions.

DATE

SIGNATURE