



## Disaster Response: Considerations for Catholic Health Care



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NEWS HEADLINE FROM 2011 TORNADO—TUSCALOOSA, ALA.

**Relief officials inundated with donations after the flurry of twisters that killed more than 300 people across the South are sorting through the broken toys and used underwear they don't need while hunting for places to store mountains of vital supplies like canned food.**

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*“That becomes the disaster within the disaster. When people make those mass donations... it causes the community to be overrun with them and have to deal with that in addition to the storm damage.”*

— MARK JONES, *Salvation Army spokesman*

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Article by Jay Reeves of the Associated Press. Article in full at <http://www.nbcnews.com/id/43039417/ns/weather/t/after-tornadoes-junk-donations-become-challenge/>

Cover photo: Eastern Oklahoma Catholic

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# Disaster Response: Considerations for Catholic Health Care



*Moore, Okla., May 26, 2013 — Volunteer Janice Moss, registered nurse of Mercy Hospital, is administering a tetanus shot to a May 20 tornado survivor while Allison Garrison completes required paperwork. Volunteers provide much needed personal services and are important FEMA partners in recovery for disaster victims. Photo by George Armstrong/FEMA*

Those who work in Catholic health care are compassionate people called to work in service to others. This is especially true in times of disaster—domestic and international, natural and human-made. Whether responding to help victims of a cholera outbreak, mining accident, tsunami, earthquake, flood or tornado, those who lead and serve in the ministry are compelled to provide help and hope to victims of disaster.

This brochure by the Catholic Health Association of the United States, with assistance from Catholic Relief Services and Catholic Charities USA, will provide ministry leaders with considerations for how health care organizations can appropriately respond in times of domestic or international disaster.

Sections include:

- Important Cautions
- Most Effective Practices
- Additional Information

While not prescriptive, the goal is to raise awareness about the opportunities for those who work in Catholic health care to reach out to their brothers and sisters to provide help and hope.

# Important Cautions

*Both individuals and health care organizations should exercise caution when responding to disaster situations. Becoming aware of the following pitfalls will help to ensure all donations reach and serve those who need them most.*

## FOR FINANCIAL CONTRIBUTIONS

**Fraud:** Many unofficial “relief agencies” appear during disasters. Donations made to unregulated or disreputable agencies often never reach those in need.

## FOR MATERIALS DONATIONS

**Lack of Space:** Many domestic organizations do not have the warehouse, storage space, nor the immediate labor force to sort through material donations that are oftentimes unusable.

**Unwelcome Fees:** International materials donations are often shipped to a country without consideration for customs. Without the assistance of in-country disaster experts, these donations go unclaimed at the customs office, and in some cases, are sold illegally to disaster survivors.

**Unneeded Items:** Sending unsolicited items to the scene of a disaster that is outside of the local community can cause burden on disaster response agencies. Unneeded items require human resources to be allocated to the sorting and disbursement of unsolicited items and can also require storage—something that can be scarce after a disaster.

**Lack of Transportation:** Often, agencies do not have extra funds for transport of material items. It’s always good practice to consider the means and costs for transportation as part of making a material donation.

**Local Economies Suffer:** In most disasters, needed supplies, including food, water, clothing and household goods, can be procured locally by relief agencies. Local merchants and economies hard hit by the disaster also need help and support.

## FOR MEDICAL & NON-MEDICAL VOLUNTEERS

**Untrained Volunteers:** The desire to help “hands on” is generous and admirable, however the help needed most by people impacted by disasters comes from trained, experienced relief and development professionals.

**Volunteer Safety:** Well-intended people who travel to disaster stricken areas without training or invitation by a qualified relief agency can place themselves and others in harm’s way and actually detract from helping those in need.

**Lack of Accommodations:** Providing food and shelter for concerned, but unprepared volunteers takes away vital resources from those being assisted in disaster situations. Lodging may be unavailable for unsolicited volunteers.

**Local Volunteers Available:** Local volunteers, sometimes even disaster survivors themselves, are usually available and benefit from participating in relief and rebuilding efforts in their communities.

**Unable to Practice:** The medical licensure and training of medical teams sent to disaster regions without coordination with an authorized agency may not be recognized.

**Unknown Road Conditions:** Roads into disaster areas may be impassable.

# Most Effective Practices

*These cautions leave today's leaders with many considerations for how their ministries can effectively respond to disasters. Here are some recommendations for how Catholic health care can increase the effectiveness and appropriateness of its disaster response in fulfillment of the ministry's healing mission.*

**BEST OPTION**

## FOR FINANCIAL CONTRIBUTIONS

### Make a Financial Contribution:

Disaster situations evolve quickly. Financial contributions enable relief agencies to purchase exactly what is needed when it is needed. Financial contributions also avoid the expense and environmental impact of transporting and storing donated goods.

Catholic health care organizations as ministries of the church should consider donating to Catholic Relief Services (CRS) in times of international disasters and Catholic Charities USA (CCUSA) for domestic disaster response. These agencies have associates already living and working in many of the communities/regions prior to any disaster and thereby have cultural competence and community contacts who can appropriately assess, identify and request most needed items.

Authorized relief agencies such as CRS and CCUSA, as well as others such as the Red Cross, support local merchants and local economies, and can assure that items purchased are culturally, nutritionally and environmentally appropriate.

**Evaluate Charitable Organizations:** To assure a financial contribution has maximum value for those being assisted, be sure to donate to a reputable, non-profit agency.

## FOR MATERIALS DONATIONS

**Find the Right Partner:** Before sending any items to the scene of a disaster, health care organizations should work with CRS or CCUSA, the Red Cross or other reputable organizations who do immediate needs assessments following a disaster and can then direct donors on what items are needed.

**Code of Conduct:** Working with or donating to organizations that adhere to the Red Cross and Red Crescent Societies Code of Conduct (which is sponsored in part by Caritas Internationalis and Catholic Relief Services) is important. Often these agencies are among the first on the ground in the most troubled parts of the world, responding to both natural and human-made disasters. As such, the Code of Conduct guides their activities.

By working with organizations that abide by the code, Catholic health care organizations can ensure that the work:

1. Is conducted in a manner which respects the needs and wishes of the recipients.
2. Allows those receiving the aid to participate in the program's success.
3. Attempts to mitigate further disasters.
4. Makes a lasting impact on the entire community by using local resources and staff.

*“Wherever and whenever there is need, we hear and heed God’s call to reach out, to use the gifts [God] has given us, to trust in [God’s] power, to step up and bring... hope.”*

— DR. CAROLYN Y. WOO

*President and Chief Executive Officer, Catholic Relief Services*

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### FOR MEDICAL & NON-MEDICAL VOLUNTEERS

**Go Through Recognized Routes:** As with all volunteers, well-intentioned, but unprepared medical personnel can inadvertently detract from assisting those most in need. Catholic health care organizations should work with a recognized relief agency that is authorized to work in the disaster region.

**Assess Your Skills:** When relief agencies call for volunteers, those most likely to be selected have: fluency in the language of the disaster stricken area, prior disaster relief experience and expertise in technical fields such as medicine, communications, logistics of water/sanitation and engineering.

**Register:** Physicians, nurses, emergency medical technicians, dentists and other clinical staff interested in providing assistance in disaster relief efforts should register with a medically oriented relief agency before a disaster or emergency strikes. See the following page for a list of resources for documenting training and qualifications.



## Additional Information

*There is a wealth of resources to help individuals and health care organizations make well guided choices in disaster response practices. Here are some suggested relief partners as well as some sources for finding more information on choosing an avenue of donation.*



### FINANCIAL CONTRIBUTIONS

#### Resources to help evaluate charitable organizations:

The Center for Disaster Philanthropy  
[www.disasterphilanthropy.org/](http://www.disasterphilanthropy.org/)

Charity Navigator  
[www.charitynavigator.org](http://www.charitynavigator.org)

Guide Star  
[www.guidestar.org](http://www.guidestar.org)

### MATERIALS DONATIONS

The code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief, is a useful yardstick Catholic health care can use to measure the conduct of those agencies with which they work.

#### Access the Code of Conduct at:

[www.ifrc.org/en/publications-and-reports/code-of-conduct/](http://www.ifrc.org/en/publications-and-reports/code-of-conduct/)

### MEDICAL & NON-MEDICAL VOLUNTEERS

#### Learn more about documenting your training and qualifications in advance:

American Red Cross Disaster Response Training for Volunteers  
[www.redcross.org/take-a-class/disaster-training-registration](http://www.redcross.org/take-a-class/disaster-training-registration)

Catholic Charities USA Annual Volunteer Response Conference  
[https://salsa3.salsalabs.com/o/50868/p/salsaevent/common/public/?event\\_KEY=70545](https://salsa3.salsalabs.com/o/50868/p/salsaevent/common/public/?event_KEY=70545)

National Voluntary Organizations Active in Disasters  
[www.nvoad.org](http://www.nvoad.org)

United We Serve  
[www.serve.gov](http://www.serve.gov)

Citizen Corps  
[www.citizencorps.gov](http://www.citizencorps.gov)

Hands On Network  
[www.handsonnetwork.org/volunteers](http://www.handsonnetwork.org/volunteers)

Access additional disaster response information at [www.chausa.org/disaster](http://www.chausa.org/disaster)



**Washington, DC Office**

1875 Eye Street NW, Ste. 1000  
Washington, DC 20006  
202.296.3993 *phone*  
202.296.3997 *fax*

**St. Louis Office**

4455 Woodson Road  
St. Louis, Missouri 63134  
314.427.2500 *phone*  
314.427.0029 *fax*

[www.chausa.org/international](http://www.chausa.org/international)

**THE SHARED STATEMENT OF IDENTITY  
FOR THE CATHOLIC HEALTH MINISTRY**

We are the people of Catholic health care, a ministry of the church, continuing Jesus' mission of love and healing today. As provider, employer, advocate, citizen—bringing together people of diverse faiths and backgrounds—our ministry is an enduring sign of health care rooted in our belief that every person is a treasure, every life a sacred gift, every human being a unity of body, mind and spirit.

We work to bring alive the Gospel vision of justice and peace. We answer God's call to foster healing, act with compassion and promote wellness for all persons and communities, with special attention to our neighbors who are poor, underserved and most vulnerable. By our service, we strive to transform hurt into hope.

**AS THE CHURCH'S MINISTRY OF HEALTH CARE  
WE COMMIT TO:**

- ✦ **Promote and Defend Human Dignity**
- ✦ **Attend to the Whole Person**
- ✦ **Care for Poor and Vulnerable Persons**
- ✦ **Promote the Common Good**
- ✦ **Act on Behalf of Justice**
- ✦ **Steward Resources**
- ✦ **Act in Communion with the Church**