

International Standards and Guidelines for Relief Organizations: Document Analysis

Mazyar Karamali¹ , Morteza Moradipoor² , Elaheh Parnian³ , Hadi Jalilvand⁴ ,
Razieh Norouzi⁵ , Dariush Jafarzadeh⁶ 

Date of submission: 27 Jan. 2025

Date of acceptance: 10 Jun.2025

Review Article

Abstract

INTRODUCTION: Well-established guidelines and standards are essential for effective disaster management and relief operations. The aim of this study was to review the existing documentation in Red Cross and Red Crescent Societies regarding disaster relief guidelines.

METHODS: This narrative review was conducted using a documentary research method in 2023. In order to find articles related to standardization of relief and recommendations, extensive searches were conducted in relevant databases, with a special emphasis on the International Federation of Red Cross and Red Crescent Societies (IFRC) database. The identified documents were analyzed using document analysis and classification techniques.

FINDINGS: The most important point in the IFRC review was that the guidelines are divided into two parts: general and specific. It is not necessary to use general guidelines, but specific guidelines are important. IFRC guidelines are usually developed in cooperation with the 190 member states. However, it is recommended that each country adapt these guidelines to its own specific circumstances.

CONCLUSION: The results showed that when it comes to specialist areas such as housing and aid workers safety, IFRC recommendations are a valuable resource for countries when developing and updating national disaster relief protocols. While the IFRC principles provide a useful starting point, their successful use requires careful review and modification to meet the unique local conditions and requirements of each country.

Keywords: Relief; Relief organizations; Guidelines; Standards; IFRC; ICRC.

How to cite this article: Karamali M, Moradipoor M, Parnian E, Jalilvand H, Norouzi R, Jafarzadeh D. **International Standards and Guidelines for Relief Organizations: Document Analysis.** Sci J Rescue Relief 2025; 17(2):128-137.

Introduction

The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world's largest volunteer-driven humanitarian network. With a presence in every community through 190-member National Red Cross and Red Crescent Societies, it helps 160.7 million people annually through long-term services and development projects, and another 110 million through disaster response and early recovery initiatives. (1-4)

Disasters are the result of a risk process and are defined as disruptions in social functioning caused by a hazard related to a society's vulnerability to

such an event, an event that exceeds its capacity to cope with the given circumstances using existing resources. (5-7)

The spread of disasters and catastrophes affects the livelihoods of countless people worldwide, hinders the progress of nations and communities, and primarily undermines the capacity of societies to meet their own needs and contribute to their well-being. (8&9) Disasters severely disrupt public health and necessitate the provision of primary health care services to victims. (7, 10-12)

Disaster management encompasses many aspects, such as the provision of health services, the distribution of clean water, the proper disposal of sewage and human waste, the regulation of

1.Health Management Research Center, Baqiyatallah University of Medical Sciences, Tehran, Iran

2.Research Center for Emergency and Disaster Resilience, Red Crescent Society of the Islamic Republic of Iran, Tehran, Iran

3.Department of Health Economics, School of Health Management and Information Sciences, Iran University of Medical Sciences, Tehran, Iran

4.MSc of Epidemiology, Department of Epidemiology, Faculty of Health, Tabriz University of Medical Sciences, Tabriz, Iran

5.Student Research Committee, School of Health Management and Information Sciences Branch, Iran University of Medical Sciences, Tehran, Iran

6.Department of Health Economics, School of Management and Medical Informatics, Tabriz University of Medical Sciences, Tabriz, Iran

Correspondence to: Dariush Jafarzadeh, Email: djafarzadeh71@gmail.com

vectors and pests, the maintenance of food hygiene, and the assessment of epidemic risks after disasters. (5&13)

The International Red Cross and Red Crescent Movement is a global humanitarian network that provides assistance and support to people affected by disasters, conflicts and other emergencies. The IRFC has developed various guidelines and standards to ensure the quality and effectiveness of its humanitarian work.

Various organizations around the world have issued various guidelines and checklists for disaster management and relief. The primary motivation in any crisis response is to save lives, alleviate human suffering and protect the right to live with dignity. Actions are guided by the fundamental principles of the Movement, including Humanity, Impartiality, Neutrality, Independence, Voluntary service, Unity and Universality. (14)

These standards are based on existing evidence and humanitarian experience and provide best practices based on broad consensus. As they reflect inalienable human rights, they are universally applicable. However, for the standards to be effectively applied, the context in which a response is taking place must be understood, monitored and analyzed (14&15). These standards are derived from the principle of the right to life with dignity. They are general and qualitative in nature and set out minimum standards that should be achieved in any crisis. (16)

The Minimum Standard Commitments contained in the IFRC and ICRC documents follow relate to the fundamental principles four specific areas of focus, namely Dignity, Access, Participation And Safety (DAPS). The DAPS framework provides a simple but comprehensive guide to addressing key actions in Red Cross and Red Crescent emergency planning. The principles of dignity, access, participation and safety of all individuals and groups are embedded in the core principles of the Humanitarian Charter and the Core Humanitarian Standards. (15)

IFRC guidelines serve as a framework for the implementation of rescue and relief operations during natural and man-made disasters. Some of these guidelines are tailored to a specific context in the field of rescue and relief operations, while others are more general. However, these guidelines are not always known or widely used by other organizations or individuals involved in disaster response. The aim of this study is to review and

analyze the guidelines that have been issued ad hoc by the IFRC or in collaboration with it, and to identify the main documents and their limitations.

Despite extensive efforts to develop standard guidelines for relief operations, significant gaps remain. These discrepancies can be attributed to various factors, including cultural differences, disparities in resources and capacities, and lack of coordination between different organizations.

The aim of this study is to identify and analyze these gaps and to review and evaluate the existing international standards and guidelines for relief organizations. The findings of this study can help increase coordination and efficiency in relief operations. In addition, this research can serve as a valuable reference for relief organizations, policymakers, and other stakeholders involved in humanitarian assistance.

Methods

The present study is a narrative review and for this purpose, extensive searches were conducted in relevant databases, with particular emphasis on the IFRC and Google Scholar databases (Figure 1). This was done by searching for references, using predefined inclusion and exclusion criteria, critically appraising the evidence, extracting and generating data from the evidence and producing them. (17) After selecting the databases, relevant documents were identified using the keywords "Relief", "Guideline", "Standard", "IFRC" and "ICRC" and based on the inclusion criteria (13) documents were finalized.

1. Identifying research questions

In this research, international standards and guidelines for rescue and relief organizations were examined.

2. Systematic study of literature

At this stage, according to the questions raised in the first stage of the study, documents and evidence were obtained using the keywords "help", "guide", "standard", "IFRC" and "ICRC" and searching databases related to IFRC.

3. Selection of proper studies

At this stage, documents in which the researcher did not have confidence in the findings presented were eliminated. The Critical Appraisal Skills Program is a tool commonly used to assess the quality of primary qualitative studies. The CAPS is a 10-question tool that helps the researcher determine the validity, validity, and

significance of a research study. These questions focus on the following: research objectives; rationale for the method; research design; sampling method - data collection, reflectivity (including the relationship between the researcher and participants), ethical considerations, rigor in data analysis, clear and concise statement of findings, and value of the research.

At this stage, the researcher assigned a quantitative score to each of the first questions. Based on the 50-point CASP rubric scale, the researcher proposed the following scoring system: Excellent (40-50), Very Good (40-31), Good (21-30), Average (20-11), and Poor (0-10), with any document with a score below 30 being eliminated (18). Based on the scores given to each source, the average minimum score given to documents was 21 and the maximum was 48. Finally, in the evaluation process, the researcher eliminated 24 sources out of 38 sources and documents, and finally, (13) documents were analyzed.

4. Extracting information from the studies

The researcher continuously reviewed the selected and finalized documents several times to arrive at specific content findings where primary and main studies were conducted. A descriptive table (including document codes, authors' names, year, and research titles related to standards and guidelines) in Excel was used to review and extract all items.

5. Analysis and synthesis of findings

In this stage, the researcher looks for themes that have been identified among the studies in the documentary study. (19) First, all the factors and components extracted from the research were considered as component codes. Then, considering the meaning of each of these codes, they were grouped into a similar concept so that the factors and components could be reviewed and finalized. By searching for the basic components and concepts related to the standards and guidelines, in the collected sources, different factors were identified and specified.

6. Quality control

In the documentary study method, the researcher considered the following procedures to maintain quality in his study:

- During the research process, the researcher tried to provide clear explanations for the options available in the research, taking the steps taken.
- The researchers found relevant documents using electronic and manual search solutions.
- The researchers used quality control methods used in original qualitative studies.
- To incorporate the original studies, the researchers used the CASP tool to evaluate the studies.

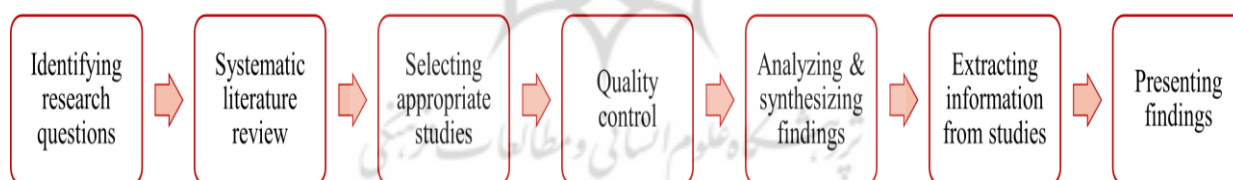


Figure 1. Stages of screening and study selection steps

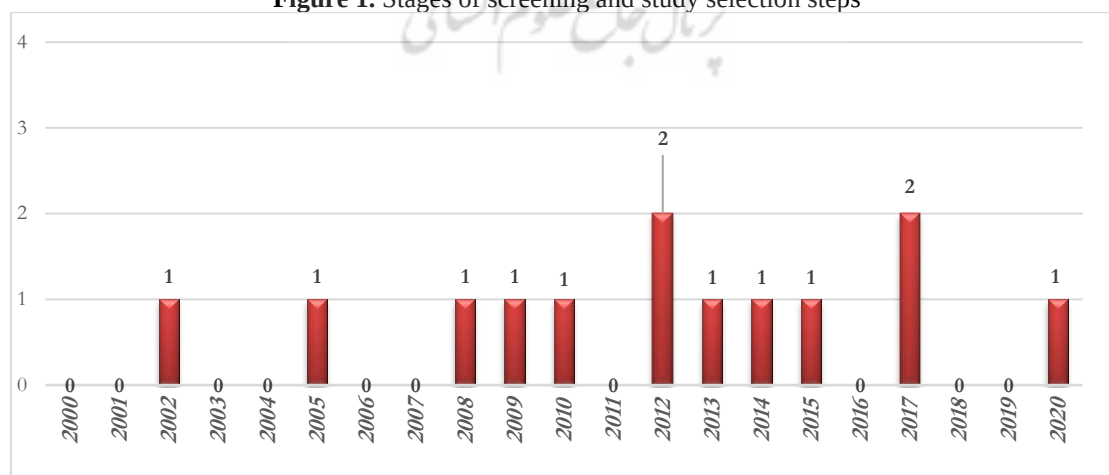


Figure 2: Number of documents published per year

Findings

One of the most important points about the international guidelines is that they are not binding on domestic implementers in countries. Their aim is to assist national legal preparedness by providing guidance to countries interested in improving their domestic legal, policy and institutional frameworks for international disaster relief and recovery assistance (20). In the guidelines, the criteria should be understandable and applicable to all (1).

The research findings showed that the IFRC was involved in the development of the guidelines in the remaining 13 documents, with 3 documents dating back to 2012 (Figure 2).

In this study, 6 components of water, food, shelter, basic hygiene, safety and security and other possible components were examined, in 5 and 4 documents, the components of shelter, safety and security and in 11 documents other items, in two documents, the importance of water and food and in 3 of the available documents, the largest number of components (11, 20 & 21) were examined (Table 1, Figure 3).

Table 1. Data extraction form of included studies

Data Source, Year & Reference	Study Design & data collection method	Study Population & Participants	Standard components/axis of guidelines in the field of aid (heading of standards)					
			Water	Food	Shelter & accommodation	Basic health	Safety & Security	Other Standards & Guidelines
IFRC, 2010 (22)	Literature review	It looked at multiple disasters, not a single population	-	-	-	-	-	Members of the policy team, leadership team, & disaster management teams.
IFRC, 2017 (1)	Expert panel teams & Delphi method	States & RCRC actors	-	How to supply food needed by foreign teams, how to ensure food security, how to pay expenses, transfer auxiliary food and etc.	Including how to enter and accommodate relief forces in other countries, how to get tax exemptions, and how foreign teams interact with the laws of the affected country	Disaster relief or initial recovery assistance should be initiated only with the consent of the affected state and, in principle, on the basis of an appeal.	-	It examines legal issues, how to request assistance from the affected country, how to interact with the affected country's domestic laws, and other international laws.
IFRC, 2014 (21)	It contains information sent by IFRC & more than instructions (a cross-sectional study)	A cross-sectional study.	-	-	-	-	-	The goal is to enhance the quality of HL programs and promote a higher perception of the logistician's role in humanitarian aid
IFRC, 2020 (23)	Literature review & expert panel	-	-	-	-	-	It outlines 12 core protection standards for relief efforts based on humanitarian principles and prioritize human needs, fair and nondiscriminatory treatment & other human rights	-
IFRC, 2005 (24)	Literature review	-	-	-	-	-	-	It details the responsibilities and legal frameworks concerning international disaster response, organized into the following sections: Responsibilities, Early Warning and Preparedness, Eligibility for Legal Facilities, and Legal Facilities for Entry and Operation.
Johns Hopkins and IFRC, 2008 (25)	Review of texts, review of actions taken, and review of international documents	-	-	Setting standards for safe water provision, creating infrastructure for it, disinfecting water, preventing waterborne diseases, and treating them	A set of standards for the location of relief teams, the magazine for setting up camps, how to prevent common diseases in camps, and etc.	A set of recommendations and standards for the provision of primary health care, clinical services, and necessary standards regarding personnel status.	A set of protective instructions to prevent damage to service providers and health personnel, withdrawal of troops in dangerous conditions, equipment protection tips, etc.	A set of recommendations and standards for disaster management, formation of relief teams, relief, and participation of affected communities.
IFRC, 2013 (26)	Experiences of IFRC members and the review of international sources	IFRC members	-	-	-	-	-	Expression of interest/ self-assessment/mentor assignment/mentorship process/preverification visit/ verification visit/ international registration

IFRC, 2012 (27)	It has been done through the participation of service volunteers, expert panels, and resource reviews	-	-	-	-	-	Health service providers must adhere to safety standards, including maintaining security while driving, transferring medical equipment, examining patients, providing primary care services, and ensuring security in war-torn areas	-
IFRC, 2015 (29)	Literature review	-	-	-	It covers shelter requirements, location, pod quality, camp accommodation models, volunteers' struggles, emergency conditions, and house renovation standards.	-	Standards for maintaining the safety of camps/ standards for maintaining the safety of volunteers in shelters/ safety standards for preventing wild animals from attacking camps, and etc.	Operational program standards/asylum seeker preparation program standards/standards for foreign participation in the establishment of shelters/ standard of equipment needed to supply energy to shelters and etc.
IFRC, 2009 (30)	A cross-sectional study	The purpose of this study was to describe the IFRC's Emergency Shelter Cluster Review program in Myanmar to create shelters after Typhoon Nargis.	-	-	It examines campsite requirements, storm-affected areas, leadership committee formation, operational team formation, emergency shelter equipment arrival, and financial budget allocation for the Emergency Shelter Cluster.	-	-	-
IFRC, 2017 (31)	Literature review	-	The 8 steps for hygiene promotion in emergencies include identifying the problem, targeting groups, analyzing barriers, formulating objectives, planning, implementing, monitoring, and readjusting	-	-	-	-	Community participation/use and maintenance of facilities/ selection and distribution of hygiene items/ community and individual action/ communication with wash stakeholders/ monitoring
IFRC, 2012 (2)	Literature review	-	Has access to water and sanitation services been re-established for everyone? Which groups still do not have access, and why not?	-	How to build the recovery approach and ways of working into the program cycle	Has access to health services been re-established for everyone? Which groups do not have access, and why not? How can the provision of initial assistance protect and restore access to services that enable recovery?	-	The Pressure and Release (PAR) model focuses on disaster relief and early recovery, considering population movement, density, social structures, registration, targeting, land and property, cost of living, provision of services, reconstruction, and urban economy.
IFRC, 2002 (32)	Key informant interviews, focus groups, community interviews, direct observation, mini surveys & visualization tools.	Several uniform groups consisting of 8 to 12 individuals	-	-	-	-	-	National Society Cooperation Agreement Strategy (CAS)

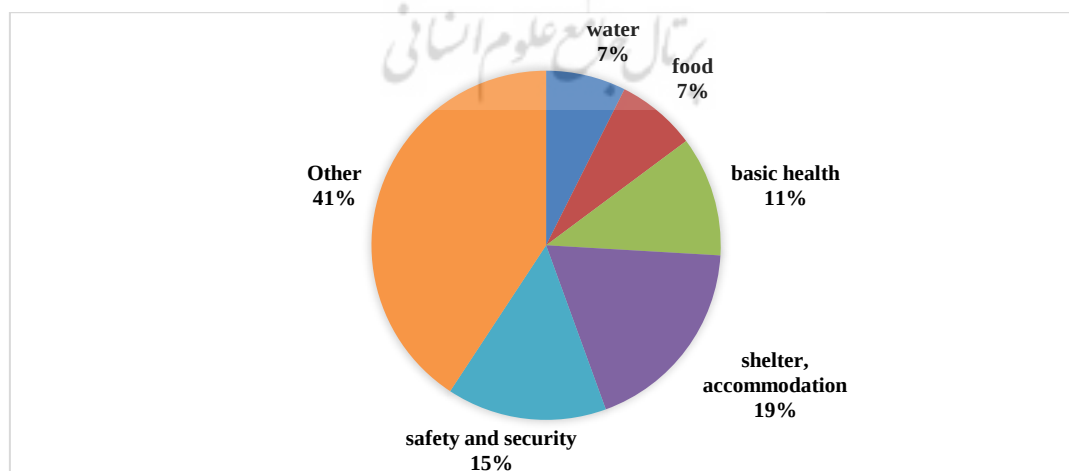


Figure 3: Number of variables in the final documentation

Water standards

Two studies focusing on water standards described eight steps for promoting hygiene in emergencies, including problem identification, target group identification, analysis of barriers and incentives, setting health behavior goals, planning, implementation, monitoring and evaluation, and review and re-adjustment.

Food standards

Two studies looked at food standards, including the provision of safe water, infrastructure, water disinfection, prevention and treatment of waterborne diseases, and food aid.

Settlement and Shelter standards

Five studies discussed shelter and accommodation standards, including the settlement of relief forces in other countries, tax exemptions, interaction with local laws, camp location, prevention of diseases, shelter requirements, and accommodation models.

Basic Health standards

Basic health standards were examined in three studies, including disaster relief, primary health services, clinical services, personnel standards, staff training, health-care staff to population ratios, and monitoring. The main goal of health and primary health care is to create conditions that prevent the spread of infectious diseases, and in emergencies and crises, access to health infrastructure is crucial to preventing infectious diseases. The "campaign" approach is the most widely used method in emergencies by the Red Cross and Red Crescent to establish this infrastructure, and key components of its promotion include community participation, use and maintenance of facilities, selection and distribution of health supplies, community and individual actions, communication with water and sanitation stakeholders, and monitoring. A key component of successful health promotion is the responsiveness of relief teams to victims (32). When building health infrastructure, care must be taken to ensure that victims and responders are not harmed (24).

Safety and Security standards

The remaining four documents refer to the provision of checklists and guidelines for the safety and security of aid workers, service providers and clients, covering various aspects of this

component, such as ensuring the safety of aid workers and service providers in disaster-affected and conflict-affected areas when providing services and transporting equipment, respecting their human rights and dignity, creating a safe environment for providing services, and establishing safe camps to prevent wild animal attacks. The primary responsibility for maintaining the safety of aid teams lies with the government of the affected country, and, where necessary, full-time and complete security for international aid workers should be provided by the affected country. (20)

Among the most important security incidents for international aid workers are road accidents, vehicle theft, and theft of equipment and/or supplies from vehicles. To reduce these incidents, aid workers should be trained in local driving laws in the affected area. (27) Attracting the cooperation of stakeholders in relief efforts is of great importance in reducing damage. (21)

Both the conservation and environmental work being done is dynamic and rapidly changing, so disaster safety standards and guidelines need to be continuously updated. A systematic approach should be taken when defining disaster safety standards. (24)

Discussion and Conclusion

In this study, the aim was to review international standards and guidelines in the field of disaster relief, and only international standards that addressed issues related to disaster relief were considered because these standards can help countries develop national disaster relief guidelines and also provide a framework for international interactions for disaster relief. Next, based on the review of international guidelines, key findings were divided into sections on standards for water, food, housing and shelter, basic hygiene, safety and security, and other findings were also included in a separate section.

In fact, one of the most important measures in dealing with disasters in any society is the rescue of the injured and the rehabilitation of the affected. (33) Guidelines in each country should be tailored to the needs and conditions of that country (10&13). When disasters occur, with proper planning and foresight by relief officials, disaster losses and damages can be greatly reduced. (34)

Currently, the approach to disaster risk management has replaced crisis management and aims to prevent and reduce the risk factors and prepare for an immediate response to the consequences of an incident or disaster. (35)

There are several phases in crisis management: the prevention and mitigation phase includes measures that are taken before the occurrence of incidents and disasters to reduce the severity of the incident and reduce the negative effects of the incident on the organization. The preparedness phase includes activities, programs, and processes that are planned and implemented before the occurrence of incidents and disasters in the organization to effectively respond to the incident. The response phase includes a set of activities that are carried out in a short period of time to deal with and manage incidents and disasters. The recovery phase also includes activities and processes that are carried out after the occurrence of incidents and disasters to return to normal for individuals, organizations, or society. (36&37)

There are also different dimensions such as dealing with diseases, housing and providing drinking water, and crisis management. (38).

Some IFRC guidelines, such as "Volunteers, Stay Safe! A Safety Guide for Volunteers" (27), are specific, while others, such as "Introduction to Guidelines for Facilitating and Regulating International Disaster Relief and Recovery Assistance" (20), are general. Countries should consider these checklists individually when developing their own guidelines, as the checklists in the IFRC guidelines provide valuable guidance on: 1) how to ensure the safety of aid workers during the delivery of relief services in conflict-affected areas; 2) how to set up shelters; 3) how to provide safe drinking water; and so on.

It is important to note that specific guidelines, such as the "Volunteers, Stay Safe! The "Safety Guide for Volunteers" (27), the "Red Channel Agreement: Standards, Quality Assurance and Coordination" (26), the "WASH Guidelines for Promoting Hygiene in Emergency Operations" (31) and other guidelines do not mean that there is no need to review the general guidelines. It is important to note that these guidelines are developed in accordance with the conditions of their time, so they need to be updated and adapted.

There are many important but neglected points in the IFRC guidelines. For example, in the guideline: Professional standards for protection work carried out by humanitarian and human rights activists in armed conflict and other situations of violence; there are very important points to keep rescue personnel safe during the preparation process. (22)

Another important point in using IFRC guidelines is the appropriateness of the time priority of publication. Although these guidelines have undergone changes over time, each of these guidelines is tailored to a specific purpose and one cannot choose or reject a guideline based on the latest version alone. For example, the guide "Volunteers, stay safe! Safety guide for volunteers" lists a set of safety tips that should be observed during the work of relief workers while providing various humanitarian services such as rubble removal, services for war refugees, victims of road accidents, in straw shelters and refugee resettlement camps, etc. when they are in other countries for relief. Reviewing this guideline is especially important during the preparation of national guidelines and should be considered as a sub-scale in all different sectors.

By examining these guidelines, it can be concluded that the establishment of a standard shelter is a key link in providing relief to victims of all natural and man-made disasters. In the "Shelter after disaster" guidelines, there are various points and standards for establishing safe shelter in different parts of the shelter structure, disease prevention, maintaining the safety of rescuers, providing safe and clean water, proper disposal of garbage, sewage and human waste, training, etc. (29)

In this study, by examining the IFRC guidelines for disaster management and relief, it was found that the IFRC provides comprehensive guidelines that cover the different stages of disaster response, from prevention to recovery. In fact, although these guidelines provide valuable insights, they still need to be adapted to the specific national contexts of each country. In these guidelines, five main areas of water, food, shelter, security and basic health services were identified as the most important dimensions that require standards. Considering the IFRC's key points and basic standards when setting up shelters for refugees can greatly standardize the provision of

relief. According to the study, the IFRC has a comprehensive set of guidelines for disaster management and disaster relief that can be used to design disaster relief assessment guidelines and checklists that can be used in any country.

Some of these IFRC guidelines are very general and some are quite specific such as the “Emergency Shelter Cluster Review” or the “Shelter after disaster” guidelines. It is recommended that specific IFRC guidelines be used to develop and revise disaster relief and management guidelines and checklists in the country. Given the many and varied cultural differences that exist between countries, it is therefore essential to use guidelines such as The introduction to the “Guidelines for the Domestic Facilitation and Regulation of International Disaster Relief and Initial Recovery Assistance (IDRL Guidelines)” that explains the role of international relief. Finally, this study recommends that countries use IFRC guidelines/ standards/ checklists when developing and updating disaster management standards and guidelines.

Compliance with Ethical Guidelines

There were no ethical considerations in this research.

Funding/Support

No financial support was received for this research.

Author's Contributions

This article was written based on the idea of Mazyar Karamali. However, Morteza Moradipour, Elaheh Parnian, Hadi Jalilvand, and Razieh Norouzi contributed equally to the preparation of the documents and reports, and Dariush Jafarzadeh was responsible for the design, methodology, supervision, data collection and analysis, and the final version and editing.

Conflict of Interests

The authors declare no conflict of interest.

Acknowledgments

The authors are grateful to all those who helped in conducting this research.

References

1. International Federation of Red Cross and Red Crescent Societies (IFRC). Introduction to the Guidelines for the domestic facilitation and regulation of international disaster relief and initial recovery assistance. 2017. Geneva: Switzerland. [Internet]. Available from: https://disasterlaw.ifrc.org/sites/default/files/media/disaster_law/2020-09/1205600-IDRL-Guidelines-EN-LR.pdf
2. International Federation of Red Cross and Red Crescent Societies (IFRC). IFRC Recovery programming guidance 2012. International Federation of Red Cross and Red Crescent Societies. 2012 Geneva: Switzerland. [Internet]. Available from: <https://www.ifrc.org/sites/default/files/2021-06/IFRC%20Recovery%20programming%20guidance%202012%20-%201232900.pdf>
3. Mousavi A S, Karimi M, Pourmohamad A, Khanzadeh Jouryabi M. [The role of the international red cross and red crescent movement in promoting the culture of peace and cooperation in the Middle East in 2000-2022 (Persian)]. *Journal of Rescue and Relief*. 2024;16 (3):189-202 <https://doi.org/10.61186/jorar.16.3.189>
4. Mehregan AH, Amir Arjomand A, Hanji A. [The need to review the mission of the ICRC: from reducing human suffering to preventing armed violence (Persian)]. *Journal of International Studies*. 2020; 17(2): 151-169. <https://doi.org/10.22034/isj.2020.123051>
5. Azarmi S, Dabbagh Moghaddam A, Baniyaghoobi F. [Impact of natural disasters on public health with reviewing the Kermanshah earthquake (Persian)]. *Paramedical Sciences and Military Health*. 2018; 13 (4):54-62 Available from: <http://jps.ajams.ac.ir/article-1-164-fa.html>
6. Beyranvand F, Sharifi Tarazkoohi H, Salimi S. [Receiving medical assistance in cases of natural and man-made disasters in the light of soft law with emphasis on formalism and pluralism of international law (Persian)]. *Medical Law Journal*. 2021; 15 (56):659-676 Available from: <http://ijmedicallaw.ir/article-1-1372-fa.html>
7. Rahmanian F, Abbasi B, Bolourdi A, Maleki F et al. [The level of preparedness of Iranian hospitals against accidents and disasters: a systematic review (Persian)]. *Journal of Emergency Medicine*. 2021; 8(1):13
8. Ezzati E, Kaviannezhad R, Karimpour H, Mohammadi S. [preparedness of crisis and disaster management in social security hospitals in Kermanshah in 2016: a short report (Persian)]. *Journal of Rafsanjan University of Medical Sciences*. 2016;15(6):583-590. Available from: <http://journal.rums.ac.ir/article-1-3364-fa.html>
9. Bazazan F., Mohammadi, P. [Modeling regional economic damage caused by natural disasters: a case study of the Tehran earthquake (Persian)]. *Journal of Economic Research*, 2016; 21(68): 99-127. <https://doi.org/10.22054/ijer.2016.7498>
10. Seyedi R, Dadgari F. [Introducing 3 groups of vulnerable people in times of crisis and disasters and their health management (Persian)]. *Journal of the School of Army Nursing*. 2015; 15(2): 1-7
11. Alizadeh Y, Rostami S., Beyranvand, F. [Developments in the Principle of the Right to Receive Medical Assistance in the Event of Disasters in the Light of International soft Law (Persian)]. *Medical History*, 2016; 8(28): 85-103.

12. Hosseini MA, Mirzayi G, Kovari SH, Khankeh HR, Hosseini Teshnizi S. [Non-structural and functional vulnerability of rehabilitation centers of Tehran Welfare Organization in disaster (Persian)]. *Journal of Health in Emergencies and Disasters*. 2016;1(3):129-36. <https://doi.org/10.15412/J.HDQ.09010303>
13. Rabiee A, Ardalan A, Poorhoseini SS. [Assessment of Coordination among Lead Agencies of Natural Disasters Management in Iran (Persian)]. *Journal of Hakim*. 2013; 16 (2) :107-117 Available from: <http://hakim.tums.ac.ir/article-1-1159-en.html>
14. The Sphere Handbook: Humanitarian Charter and Minimum Standards in Humanitarian Response. Geneva: Sphere Project. 2018 Available from: <https://www.supporttolife.org/wp-content/uploads/2023/03/Sphere-Handbook-2018-EN.pdf>
15. Greaney P., Pfiffner S., Wilson, D. The Sphere Project. Humanitarian Charter and Minimum Standards in Humanitarian Response. 2011. Available from: https://spherestandards.org/wp-content/uploads/2018/06/Sphere_Handbook_2011_English.pdf <https://doi.org/10.3362/9781908176202>
16. Leaning J, Guha-Sapir D. Natural disasters, armed conflict, and public health. *New England Journal of Medicine*, 2013; 369(19):1836-42. <https://doi.org/10.1056/NEJMr1109877>
17. Sohrabi MR. [Principles of writing a review article (Persian)]. *Journal of Pajoohandeh*. 2013; 18 (2):52-56 Available from: <http://pajoohande.sbm.ac.ir/article-1-1512-fa.html>
18. Arab M., Ebrahimzadeh Pezeshki R., Morvati Sharifabadi, A. [Designing a hybrid model of the factor affecting divorce by systematically reviewing previous studies(Persian)]. *Iranian Journal of Epidemiology*, 2014;10(4): 10-22.
19. Abdolshah M, Khatibi SA, Hosseini S, Beheshtinia MA. [Optimizing of Schedule Time for Relay Transportation System in Hazard Condition Respect to Dividing Tasks between Centers and Capacity of Fleet (Case study: Qazvin City) (Persian)]. *Journal of Environmental Hazards*, 2017; 4(2):143-56 <https://doi.org/10.22059/jhsci.2017.238874.270>
20. Borra V, De Buck E, Vandekerckhove P. Guidelines of the International Federation of Red Cross and Red Crescent Societies: an overview and quality appraisal using AGREE II. *BMJ open*. 2016; 6(9):e011744. <https://doi.org/10.1136/bmjopen-2016-011744>
21. International Federation of Red Cross Red Crescent Societies (IFRC). Everyone counts Key data from 189 National Red Cross and Red Crescent Societies - a baseline. Geneva: Switzerland. [Internet] [cited 2014] Available from: https://data-api.ifrc.org/documents/noiso/Everyone_counts_2014_EN.pdf
22. International Federation of Red Cross Red Crescent Societies (IFRC). Setting up a national disaster preparedness and response mechanism: Guidelines for National Societies. 2010. Geneva: Switzerland. [Internet] [cited 2010] Available from: https://ctk.climatecentre.org/downloads/modules/training_downloads/2b%20IFRC%20Setting%20up%20national%20DPR%20mechanism%202014.pdf
23. International Federation of Red Cross Red Crescent Societies (IFRC). Guidelines for the Domestic Facilitation and Regulation of International Disaster Relief and Initial Recovery Assistance. International Federation of Red Cross Red Crescent Societies (IFRC). Geneva: Switzerland. [Internet] [cited 2020] Available from: <https://www.ifrc.org/sites/default/files/Minimum-standards-for-protection-gender-and-inclusion-in-emergencies-LR.pdf>
24. International Federation of Red Cross Red Crescent Societies (IFRC). Guidelines for Emergency Assessment, International Federation of Red Cross and Red Crescent Societies, 2nd edition, 2008, Geneva (www.proventionconsortium.org). https://www.unisdr.org/files/9055_TDRM05.pdf
25. International Federation of Red Cross Red Crescent Societies (IFRC). The Johns Hopkins and Red Cross Red Crescent Public health guide in emergencies. Geneva: Switzerland. [Internet] [cited 2008] Available from: <https://www.rcrc-resilience-southeastasia.org/wp-content/uploads/2016/09/Public-Health-Guide-in-Emergency-2nd-ed.pdf>
26. International Federation of Red Cross Red Crescent Societies (IFRC). The Red Channel Agreement: Standards, quality assurance and coordination. Geneva: Switzerland. [Internet] [cited 2013] Available from: https://www.ifrc.org/sites/default/files/2021-07/Principles_Rules_Red_Cross_Red_Crescent_Humanitarian_Assistance_EN.pdf
27. International Federation of Red Cross Red Crescent Societies (IFRC). Volunteers, Stay Safe! A security guide for volunteers. Geneva: Switzerland. [Internet] [cited 2012] Available from: <https://ifrcgo.org/africa/docs/volunteers/Volunteers%20Stay%20Safe%20booklet-English-LowRes.pdf>
28. United Nations Office for the Coordination of Humanitarian Affairs (OCHA). Shelter after disaster. International Federation of Red Cross Red Crescent Societies (IFRC). New York: United States. [Internet] [cited 2015] Available from: https://preparecenter.org/wp-content/sites/default/files/shelter_after_disaster_2nd_edition.pdf
29. International Federation of Red Cross Red Crescent Societies (IFRC). Shelter Cluster Review. Geneva: Switzerland. [Internet] [cited 2009] Available from: <https://adore.ifrc.org/Download.aspx?FileId=83561&pdf>
30. International Federation of Red Cross Red Crescent Societies (IFRC). WASH guidelines for hygiene promotion in emergency operations. Geneva: Switzerland. [Internet] [cited 2017] Available from: https://www.rcrc-resilience-southeastasia.org/wp-content/uploads/2019/04/1319400-IFRC-WASH-guidelines-for-hygiene-promotion-in-emergency-operations_final.pdf
31. International Federation of Red Cross Red Crescent Societies (IFRC). Handbook for Monitoring and Evaluation. Geneva: Switzerland. [Internet] [cited 2002] Available from: https://www.measureevaluation.org/resources/training/capacity-building-resources/basic-me-concepts-portuguese/IFRC_Monitoring%20and%20Evaluation%20handbook.pdf
32. Sandelowski M., Barroso J., Voils, C. I. Using qualitative meta summary to synthesize qualitative and quantitative descriptive findings. *Research in Nursing & Health*, 2007; 30(1): 99-111 <https://doi.org/10.1002/nur.20176>

33. Mehrabi F., Rezaee M. [The Assessment of Readiness Indicators in Military Hospitals against Natural Disasters in Iran (Persian)]. *Journal of Military Medicine*, 2022; 17(1): 35-40.
34. Abbasabadi-Arab M, Mosadeghrad A M, Khankeh H R, Biglarian A. [Development of hospital disaster risk management accreditation standards (Persian)]. *Tehran University of Medical Journal*. 2021; 79 (7):533-545.
35. Koenig K. L., Schultz C. H. Koenig and Schultz's disaster medicine: comprehensive principles and practices. Cambridge University Press. 2010. <https://doi.org/10.1017/CBO9780511902482>
36. Roknoddin Eftekhari A, Vazin N, Poortaheri M. [The process of natural disaster management in indigenous & modern methods (case study: villages of Khoresh-Rostam district, Khalkhal County) (Persian)]. *Tarbiat Modarres University Press. The Journal of Spatial Planning and Geomatics*. 2009; 13(1):63-94
37. Tokakis V, Polychroniou P, Boustras G. Crisis management in public administration: The three phases model for safety incidents. *Safety science*. 2019;113:37-43. <https://doi.org/10.1016/j.ssci.2018.11.013>
38. Mohebifar R. Tabibi S.J. Asefzadeh S. [Design of disaster management structure pattern for Iran (Persian)]. *Journal of Health Management*. 2008; 11:47-56

