WORDS ARE IMPORTANT

"...... In the Beginning, the Word rationalized Chaos

Emergency management is about rationalizing Chaos"

Definitions for EHA - October 2003
GENERAL DISASTER/EMERGENCY DEFINITIONS

AUTHORITY: Right to enforce obedience, delegated power, influence based on recognized knowledge

CHAOS: Utter confusion; formless matter

"Chaos" and/or "extreme instability" Situations of high-mortality risk, where there is the "likelihood of 300% or plus increases in morbidity and mortality (S. Hansch, 2001)

COMPLEX EMERGENCY: situations featuring armed conflict, population displacement and food insecurity with increases in acute malnutrition prevalence and crude mortality rates (CDC-Atlanta)

COMPLEX HUMANITARIAN EMERGENCIES (CHE): A humanitarian crisis in a country, region or society where there is a total or considerable breakdown of authority resulting from internal or external conflict and which requires an international response that goes beyond the mandate or capacity of any single agency and/or the ongoing United Nations country program (IASC, December 1994).

Situations featuring armed conflict, population displacement and food insecurity with increases in acute malnutrition prevalence and crude mortality rates (CDC-Atlanta)

CRISIS: Time of danger or greater difficulty, decisive turning point (OXFORD POCKET DICTIONARY, 1992)

Crisis develops because system are overwhelmed and do not sustain livelihood security. Large numbers of people face very high risks of impoverishment, severe illness and are more likely to die from health conditions than starvation, bombs or drowning (D. Nabarro, 2003)

DIRECT ASSISTANCE: The face-to-face distribution of goods and services

DISASTER: The occurrence of a sudden or major misfortune, which disrupts the basic fabric and normal functioning of a society (or community). (UNDMTP, 1992)

An event or series of events, which give rise to casualties and/or damage or loss of property, infrastructure, essential services or means of livelihood on a scale which is beyond the normal capacity of the affected communities to cope with unaided (DHA, 1992)

DISASTER MANAGEMENT: The range of activities designed to maintain control over disaster and emergency situations and to provide a framework for helping at risk persons avoid or recover from the impact of a disaster. The attempt to minimize the disruption caused by these adverse events and prevent as much as possible additional damage as possible
DISASTER MITIGATION: The process of planning and implementing measures to reduce the risks associated with known natural and manmade hazards and to deal with disasters when occurring. Strategies and specific measures are designed on the basis of risk assessments and political decisions concerning the levels of risk which are considered to be acceptable and the resources to be allocated (by national and sub-national authorities and external donors).

DISASTER PREPAREDNESS: Measures that ensure the readiness and ability of a society to a) forecast and take precautionary measures in advance of an imminent threat (in cases where advance warnings are possible) and b) respond to and cope with the effects of a disaster by organizing and delivering timely and effective rescue, relief and other appropriate post-disaster assistance.

DISASTER REDUCTION: Involves measures designed to avoid (PREVENTION) or limit (MITIGATION and PREPAREDNESS) the adverse impact of natural hazards and related environmental and technological disasters.

DUTY: moral or legal obligation

EMERGENCY: An extraordinary situation in which people are unable to meet their basic survival needs, or there are serious and immediate threats to human life and well-being. Emergency interventions are required to save and preserve human lives and/or the environment. An emergency situation may arise as a result of a disaster, a cumulative process of neglect or environmental degradation, or when a disaster threatens and emergency measures have to be taken to prevent or at least limit the effects of the eventual impact. (UNDP)

A state in which normal procedures are suspended and extra-ordinary measures are taken in order to avert a disaster (WHO, 1992)

Sudden state of danger, etc. requiring immediate action (Oxford Pocket Dictionary, 1992)

EMERGENCY PREPAREDNESS: Actions taken in anticipation of an emergency to facilitate rapid, effective and appropriate response to the situation

FAMINE: an extreme collapse in local availability or access to food that causes a widespread rise in mortality from outright starvation or hunger-related illnesses (FEWS) Not enough food for a great number of people, causing illness and death, or a particular period when this situation occurs (Cambridge dictionary) Extreme scarcity of food in district, etc. (Oxford Illustrated Dictionary)

HUMANITARIAN ACTION: Assistance, protection and advocacy actions undertaken on an impartial basis in response to human needs resulting from complex political emergencies and natural disaster

HUMANITARIAN ASSISTANCE: Aid to a stricken population that complies with the basic humanitarian principles of humanity, impartiality and neutrality. Assistance can be divided into three categories based on the degree of contact with the stricken population:
HAZARD: A possible threat of source of exposure to injury, harm or loss, e.g. conflict, natural phenomena

INSECURITY: Being insecure and feeling insecure; uncertainty (Webster's Revised Unabridged Dictionary)
The state of being subject to danger or injury. The anxiety you experience when you feel vulnerable and insecure (WordNet ® 1.6, © 1997 Princeton University)

INSTABILITY: Unpredictability (Oxford Pocket Dictionary)
Liability to give way or to fail; precariousness. (Webster's Revised Unabridged Dictionary)

MANDATE: Official instruction, authority given

MITIGATION: Measures taken to limit the adverse impact of natural hazards and related environmental and technological disasters. Examples of mitigation are the retrofitting of buildings or the installation of flood-control dams, training and legislation.

NATURAL DISASTER: The consequences of the impact of a natural hazard on a socio-economic system with a given level of vulnerability, which prevents the affected society from coping adequately with this impact

A so called natural disaster is the result of the impact of a natural hazard on a socio-economic system with a given level of vulnerability, which prevents the affected society from coping adequately with this impact. Natural hazards themselves do not necessarily lead to disasters. It is only their interaction with people and their environment that generates impacts, which may reach disastrous proportions. The ISDR encompasses technical and environmental disasters only when caused by natural hazards. A disaster is usually defined as a serious disruption of the functioning of society, causing widespread human, material or environmental losses, which exceed the ability of the affected society to cope, using only its own resources (IDNDR/DHA 1992).

NATURAL HAZARDS: Phenomena such as earthquakes; volcanic activity; landslides; tsunamis; tropical cyclones and other severe storms; tornadoes and high winds; river floods and coastal flooding; wildfires and associated haze; drought; sand/dust storm; infestations.

PREVENTION: The outright avoidance of the adverse impact of natural hazards and related environmental and technological disasters. Good planning is an example of disaster prevention, i.e. the decision not to build houses in a disaster-prone area for example.

PREPAREDNESS: Measures taken in advance to ensure effective response to the impact of disasters. Preparedness measures include effective evacuation infrastructures or the regular testing of warning systems.
PUBLIC HEALTH EMERGENCY: An occurrence or imminent threat of an illness or health condition, caused by bio terrorism, epidemic or pandemic disease, or (a) novel and highly fatal infectious agent or biological toxin, that poses a substantial risk of a significant number of human facilities or incidents or permanent or long-term disability (CDC, 2001)

The declaration of a state of public health emergency permits the governor to suspend state regulations, change the functions of state agencies.

REHABILITATION: Actions taken in the aftermath of a disaster to enable basic services to resume functioning, assist victims’ self-help efforts to repair dwellings and community facilities, and revive economic activities (including agriculture)

RELIEF: The provision on a humanitarian basis of material aid and emergency medical care necessary to save and preserve human lives and enable families to meet their basic needs for shelter, clothing, water, and food (including the means to prepare food)

RELIEF AND EMERGENCY HUMANITARIAN ASSISTANCE: Relief operations are intended to respond to the immediate need to save lives, limit extraordinary suffering, prevent further injury to the population or damage to the society. Normally, these are operations of short duration. However, in complex emergencies when states are unstable or have failed, and the society has lost its ability to respond, protracted humanitarian emergencies requiring a sustained international presence can exist.

RESIDENT COORDINATOR AND HUMANITARIAN COORDINATOR: The Resident Coordinator is the head of the UN Country Team. In a complex emergency, the Resident Coordinator may be designated as the Humanitarian Coordinator.

If one of the UN agencies is designated the “Lead Agency” they may assume the responsibilities of the Humanitarian Coordinator. In large-scale emergencies, a Humanitarian Coordinator, distinct from the office of the Resident Coordinator and Lead Agency may be appointed. If the emergency affects more than one country, a Regional Humanitarian Coordinator may be appointed. In countries where large multi-disciplinary field operations are in place, the Special Representative of the Secretary-General has authority over the Resident and Humanitarian Coordinator. The decision on who to appoint as Humanitarian Coordinator is made by the Inter-Agency Standing Committee.

RISK: An evaluation of the probability of occurrence and the magnitude of the consequences of any given hazard, i.e. how likely is a hazard and what consequences will it have?
SLOW-ONSET EMERGENCIES: Situations in which, the ability of people to acquire food and other necessities of life slowly declines to a point where survival is ultimately jeopardized. Such situations are typically brought on or precipitated by drought, crop failure, pest diseases, or other forms of “ecological” disaster or neglect.

SUDDEN NATURAL DISASTERS: Sudden calamities caused by natural phenomena such as earthquakes, floods, tropical storms, or volcanic eruptions. They strike with little or no warning and have an immediate adverse impact on human populations, activities, and economic systems.

STRIFE: conflict, struggle (OXFORD POCKET DICTIONARY.92)

STRUGGLE: Violently try to get free from restraint, try hard under difficulties, contend, fight, progress with difficulty, hard or confused context (OXFORD POCKET DICTIONARY.92)

SURVIVAL: (the act of) surviving or continuing to exist in spite of (a danger, accident, etc). Oxford Pocket dictionary, 1992

SURVIVAL/OR BIAS: The magnitude of the crisis is so grave that no one remains live, or meets the eligibility criteria to be interviewed in a determined area. This bias leads to a lower estimate of mortality. Methods have been proposed to estimate the occurrence and/or the magnitude of this bias.

TECHNOLOGICAL DISASTERS: Situations in which large numbers of people, property, infrastructure, or economic activity are directly and adversely affected by major industrial accidents, severe pollution incidents, nuclear accidents, air crashes (in populated areas), major fires, or explosions.

VULNERABILITY: The extent to which a community, structure, service, or geographic area is likely to be damaged or disrupted by the impact of a particular disaster hazard, on account of their nature, construction, and proximity to hazardous terrain or a disaster-prone area.

A function of human actions and behaviour. It describes the degree to which a socio-economic system is either susceptible or resilient to the impact of natural hazards and related technological and environmental disasters. The degree of vulnerability is determined by a combination of several factors including hazard awareness, the condition of human settlements and infrastructure, public policy and administration, and organized abilities in all fields of disaster management. Poverty is also one of the main causes of vulnerability in most parts of the world.

UTOPIA: imagined perfect place

WAR: Armed hostilities, conflict between people or - especially - nations (OXFORD POCKET DICTIONARY.92)
CORE HUMANITARIAN PRINCIPLES:

Relief provided by the international humanitarian community is governed by core principles originally codified by the Red Cross Movement:

**HUMANITY**: Human suffering should be addressed wherever it is found. The dignity and rights of all victims must be respected and protected.

**IMPARTIALITY**: Humanitarian assistance should be provided without discriminating as to ethnic origin, gender, nationality, political opinions, race or religion. Relief of the suffering must be guided solely by needs and priority must be given to the most urgent cases of distress.

**NEUTRALITY**: Humanitarian assistance should be provided without engaging in hostilities or taking sides in controversies of a political, religious or ideological nature. In addition, the United Nations seeks to provide humanitarian assistance with full respect for the Sovereignty of States. As stated in General Assembly Resolution 46/182:

“The sovereignty, territorial integrity and national unity of States must be fully respected in accordance with the Charter of the United Nations. In this context, humanitarian assistance should be provided with the consent of the affected country and in principle on the basis of an appeal by the affected country.”
CIVIL-MILITARY DEFINITIONS:

**COMBAT MISSIONS:** are those where the primary purpose of the operation is the use, or threatened use, of military force.

The following operational principles ensure that when MCDA are used they are in concert with the core humanitarian and UN principles as well as international humanitarian law.

**COMPLEMENTARITY:** MCDA are means of last resort in responding to a humanitarian emergency. United Nations agencies will not request these assets unless they are urgently needed and civilian assets are not reasonably available.

**Civilian Control:** Safety of MCDA is, and will remain, an MCDA command responsibility. However, to be effective, control and coordination of overall humanitarian effort is a function requiring professional humanitarian staff. This is, and will remain, a civilian responsibility. **MCDA employed in the support of United Nations humanitarian activities will be under the supervision and control of responsible civilian authority, such as the UN Humanitarian Coordinator.**

**At No Cost:** MCDA, like all UN humanitarian assistance, is provided at no cost to the affected population or the receiving state. Sending states should avoid decrementing other planned and programmed assistance, such as development, to recover the cost of MCDA or other relief support.

**MILITARY AND CIVIL DEFENSE ASSETS:** MCDA comprises relief personnel, equipment, supplies and services provided by foreign military and civil defence organizations for international humanitarian assistance.

*When to Use Military Resources to Support Humanitarian Activities:*

The decision of whether or not to use military resources rests with the Humanitarian Coordinator. These questions are provided to help guide these decisions:

- Is the military force capable of the task?
- Can they be committed for the duration?
- Can they be deployed without weapons?
- Can they establish neutrality and/or impartiality?
- Can they be placed under direction of a civilian actor?
- Are they the only or most appropriate option?
- What are the consequences for other humanitarian actors?

**CIMIC:** The coordination and cooperation, in support of the mission, between a military Commander and civil actors, including the national population and local authorities, as well as international, national and non-governmental organisations and agencies.

**CIVIL DEFENCE ORGANIZATION:** Any organization that, under the control of a Government, performs the functions enumerated in paragraph 61 of Additional Protocol I to the Geneva Conventions of 1949.
OTHER DEPLOYED INTERNATIONAL MILITARY FORCES: These are all other international military forces deployed in the region or available to deploy to the region that are not UN MCDA. For the purposes of these guidelines these forces are divided into three categories based on their missions:
HEALTH ASPECTS

HEALTH: The World Health Organization (WHO) described health in 1948, in the preamble to its constitution, as "A state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity."

In 1984, the WHO Health Promotion initiative led to expansion of the original WHO description, which can be abbreviated to: The extent to which an individual or a group is able to realize aspirations and satisfy needs, and to change or cope with the environment. Health is a resource for everyday life, not the objective of living; it is a positive concept, emphasizing social and personal resources as well as physical capabilities.

A state characterized by anatomic, physiologic and psychological integrity; ability to perform personally valued family, work and community roles; ability to deal with physical, biologic, psychological and social stress a feeling of well-being; and freedom from the risk of disease and untimely death.

A state of equilibrium between humans and the physical, biologic and social environment, compatible with full functional activity.

An ecological definition is: A sustainable state in which humans and other living creatures with which they interact can coexist indefinitely, in equilibrium. The word health is derived from the Old English hal, meaning whole, sound in wind and limb.

"Health is a resource for everyday life, not the object of living. It is a positive concept emphasizing social and personal resources as well as physical capabilities". (WHO, Health Promotion Glossary)

HEALTH IMPACT: The overall effects, direct or indirect, of a policy, strategy, programme or project on the health of a population.

HEALTH IMPACT ASSESSMENT: A combination of procedures, methods and tools by which a policy, program or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population.

HEALTH DETERMINANTS: The personal, social, cultural, economic and environmental factors that influence the health status of individuals or populations.

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HEALTH STATUS: The state of health of a person or population assessed with reference to morbidity, impairments, anthropological measurements, mortality, and indicators of functional status and quality of life.

HEALTH OUTCOME(S): Change(s) in current of future health status of individuals or communities that can be attributed to antecedent actions or measures.

EQUITY IN HEALTH: Everyone should have a fair opportunity to attain his or her full health opportunity, and that no one should be disadvantaged from achieving this potential.

DISABILITY-ADJUSTED LIFE YEARS (DALY): A measure of the burden of disease on a defined population and the effectiveness of interventions. DALY's are advocated as an alternative to QALY's and claimed to be a valid indicator of population health (1). They are based on adjustment of Life Expectancy to allow for long-term disability as estimated from official statistics. However, their use as currently expressed and calculated may be limited because the necessary data are not available or do not exist. Moreover, the concept postulates a continuum from disease to disability to death that is not universally accepted, particularly by the community of persons with disabilities. See also Disability-Free Life Expectancy. DALY's are calculated using a "disability weight" (a proportion less than 1) multiplied by chronological age to reflect the burden of the disability. DALYs can thus produce estimates that accord greater value to fit than to disabled persons, and to the middle years of life rather than to youth or old age.

DISABILITY-FREE LIFE EXPECTANCY: (Syn: active Life expectancy) The average number of years an individual is expected to live free of disability if current patterns of mortality and disability continue to apply (1). A statistical abstraction based on existing age-specific death rates and either age-specific disability prevalences or age-specific disability transition rates.

ECONOMY: A community’s system of wealth creation, administration and management

SURVIVAL AND ECONOMY
At the core of any concept of health is human survival. Only individuals and communities that are alive can develop an economy that in turn will be the key to their health. And emergencies force individuals and communities to focus on Human survival as the priority.
HUMANITARIAN INTERVENTION: An armed intervention in another state, without the agreement of that state, to address (the threat of) a humanitarian disaster, in particular caused by grave and large-scale violations of fundamental rights (definition adopted by NATO)
EVALUATION APECTS

EVALUATION: An internal or external management activity to assess the appropriateness of a program’s design and implementation methods in achieving both specified objectives and more general development objectives; and to assess a program’s results, both intended and unintended and to assess the factors affecting the level and distribution of benefits produced

The systematic assessment of the relevance, adequacy, progress, efficiency or effectiveness of a policy, programme or project, in relation to its intended aims and objectives.

APPROPRIATENESS: The extent to which the humanitarian activities address the local needs, increase ownership, accountability and cost-effectiveness

COVERAGE: The extent to which humanitarian assistance actually reaches the intended beneficiaries, providing them with assistance and protection and covering the potential need for this assistance and protection

EFFECTIVENESS: Measures the extent to which the specific humanitarian assistance does what is intended to do for the affected population

RELEVANCE: Those characteristics of a program, which make its implementation desirable and appropriate in relation to a given time, context and environment

SUSTAINABILITY: The extent to which a project or activity will be able to continue after donor funding/assistance will be withdrawn
PROJECT MANAGEMENT

ADVOCACY: Support or argument for a cause, policy, etc (Oxford Pocket Dictionary, 1992)
Exhortation, patronage, fosterage, championship, testimonial (Roget’s International Thesaurus, 1963)

BENCHMARK: a reference or measurement standard used for comparison. (Auluck, 2002)

CAPACITY: a combination of all strengths and resources available in a community or organization that can reduce the level of risk, or the effects of a disaster

CAPACITY BUILDING: efforts aimed to develop human skills within a community, organization or institution needed to reduce the level of risk

CATCHMENT AREA: geographical area from which the users of a particular health facility are drawn

COMMITMENT: engagement or obligation

COMMUNITY: A group of people living in the same locality and sharing some common characteristics

COVERAGE: a measure of the extent to which the services rendered cover the potential need for these services in a community

CONTINGENCY PLANNING: The process of establishing programme objectives, approaches and procedures to respond to situations or events that are likely to occur, including identifying those events and developing likely scenarios and appropriate plans to prepare and respond to them in an effective manner

DATA: are symbolic depictions of facts (e.g. the display on a thermometer, or a ten year time series reflecting GDP, balance of payments and exchange rate performance).

Raw material – facts and figures, registered but analyzed

FUNCTION: necessary purpose, official or professional duty

(HEALTH) INFORMATION SYSTEM: a set of components and procedures organized with the objective of generating information, which will improve (health care) management decisions at all levels of the (health) systems

IMPACT: The long-term effect of a project/program on the health status of the population
**IMPACT ASSESSMENT:** The dictionary definition of an impact is an "effect of influence" and of assessment is the "estimation of size, quality, value".

**INDICATORS:** Quantified measurements that can be repeated over time to track progress toward achievement of objectives

An indirect measure if an event/condition; variable that indicates or shows a given situation, and thus can be used to measure change.

**INDIRECT ASSISTANCE:** Assistance at least one step removed from the population and involves activities such as transporting relief goods or relief personnel.

**INFORMATION:** processed data- data set in a particular context (e.g. the proposition: "It was 30 degrees Celsius at Cap d’Antibes at 11:00 a.m. on 3 August 1999", or "The south-east Asian economies grew rapidly between 1985 and 1995.").

Analyzed data, presented in a form that allows decision-making, exists only if it is transmitted and received

**INFRASTRUCTURE SUPPORT:** Providing general services, such as road repair, airspace management and power generation that facilitate relief, but are not necessarily visible to or solely for the benefit of the stricken population.

**INPUT:** The financial, human, and material resources available to implement the a project/program as planned

**INTELLIGENCE:** The processes and the products that lead to understanding and taking decisions related to reality.

**KNOWLEDGE:** The product of thinking, the connection of information in a logical-functional way. Knowledge allows us to explain or give reasons for phenomena, and to predict future events.

**MANAGEMENT:** The process of planning, organizing, operating, monitoring, and evaluating all the interrelated parts of a system

**MANAGEMENT INFORMATION SYSTEM:** a system that provides specific information support to the decision-making process at each level of the organization

**MONITORING:** A continuous internal management activity whose purpose is to ensure that the program achieves its defined objectives within a prescribed time-frame and budget

The regular observation, surveillance, or checking of changes in a condition or situation, or changes in activities

**NORM:** Standard, pattern or type

**NORMATIVE:** of or establishing a norm
**OBJECTIVES:** Tangible and realistic expression of a desired result (what?), specified in terms of time (when?), and space (where?), and including measurable quantitative and qualitative indices, and which must have been achieved at a specific time by qualified persons (who?) to meet a given need (why?)

**OUTCOME:** The measurable health changes achieved among the project population, the health care services or in the community

**OUTPUT:** The services or products that a project delivers to a target population and that are intended to produce the expected impacts

**PARTICIPATION:** Participation relates to the active involvement of all interested parties in the planning, operation and control, monitoring and evaluation of the use of measures and resources.

**PLANNING ASSUMPTIONS:** The key elements of a scenario that form the basis for developing a contingency plan (for example, projected caseloads, ?????)

**POLICY:** Statement of:
- principles underlying action
- preferred direction of action
- criteria for the selection of action priorities
- principles underlying the sharing of roles and responsibilities
- decision-making powers
- main lines of organization

A set of statements or commitments to pursue courses of action aimed at achieving defined goals of public or private institutions

**PROGRAM:** A set of actions/projects designed for a specific purpose (for example a child welfare programme, or tobacco control programme).

**PROGRAMMES, PROJECTS:** In order to implement policies, any number of programmes and projects may be developed.

**PROJECT** is usually more narrowly defined, although in terms of resources used it may be larger or smaller than a programme (for example, the building of an oil refinery, or a small training course might both be defined as projects).

**QUALITY:** The degree of excellence, relative nature or standard of the humanitarian assistance provided

**RAPID HEALTH ASSESSMENT:** a broad collection of epidemiological, statistical and anthropological techniques, both at a low cost, in a simple format. Their key elements are: 1) a short interval between data collection and presentation of results, 2) a combination of methods and sources of data and 3) orientation toward action
RESPONSIBILITY: duty, managerial freedom

ROLE: person's or thing's function

SCENARIO: An account or synopsis of a possible course of events that could occur, which forms the basis for planning assumptions (for example, a river floods, covering a nearby town and wiping out the local population's crop)

SCENARIO-BUILDING: The process of developing hypothetical scenarios in the context of a contingency planning exercise. From Inter-Agency Contingency Planning Guidelines for Humanitarian Assistance 2001

SURVEILLANCE: systematic ongoing collection, collection and analysis of data and the timely dissemination of information to those who need to know so that action can be taken

SURVEY: a study in which information is systematically collected, but in which the experimental method is not used

VALUES: Values denote worth or desirability.
(HEALTH AS A BRIDGE FOR) PEACE ASPECTS

CONFLICT: Tension arising out of not being able to reconcile opposing goal. Conflict may entail but need not equal violence

State of opposition, fight, struggle, clash, clashing of opposite interest (OXFORD POCKET DICTIONARY.92); hostility, opposition, antagonism, fight, battle, combat, contention (R.T.)

CONFLICT MANAGEMENT: Efforts to contain and if possible, reduce the amount of violence used by parties engaged in violent conflict and to engage them in communication looking toward settling the dispute and terminating the violence

CONFLICT RESOLUTION: Efforts to increase cooperation among the parties to a conflict and deepen their relationship by addressing the conditions that led to the dispute, fostering positive attitudes and allaying distrust through reconciliation initiatives, and building or strengthening the institutions and processes through which the parties interact. Conflict resolution can be used to reduce the chances of violence or to consolidate the cessation of a violent conflict in order to prevent escalation

MEDIATION: A process in which an impartial third party helps disputants resolve or plan a transaction, but does not have the power to impose a binding solution

NEGOTIATION: A process in which two or more participants attempt to reach a joint decision on matters of common concern in situations where they are in actual or potential disagreement or conflict

PEACE ACTIVITIES:
1. Support local administration, and mechanisms for indigenous and sustainable conflict management
2. Increase inter-communal contacts to minimize misinformation and mistrust. (e.g. support traditional leaders' meetings by communications, food and transport)

PEACE KEEPING: United Nations Presence in the field that with the consent of the conflicting parties, implements or monitors arrangements relating to the control of conflicts and their resolution, or ensures the safe delivery of humanitarian relief. It is a technique initiated by the United Nations as a means for maintaining international peace and security
They can be divided into three broad categories: 1) assist in maintenance of cease-fires, 2) implementation of comprehensive settlements, and 3) protection of humanitarian operations

PEACE BUILDING: The effort to promote human security in societies marked by conflict. The overarching goal of peace building is to strengthen the capacity of societies to manage conflict without resorting to violence, as a means to achieve sustainable human security. The definition covers peace building in pre-, mid- and post conflict situations
**PEACETIME MISSIONS** include training and exercises in the region with no hostile intent.

**PEACE SUPPORT MISSIONS** include peacekeeping, peace enforcement, and other so-called peace operations where the use of force is restricted and closely controlled.

**SAFE HAVENS:** Villages that were only for civilian inhabitants and not to be attacked. *(used in the Balkans conflict/HBP definition)*

**SANCTUARIES OF PEACE:** Health and/or medical institutions, e.g. hospitals and clinics, not to be affected by war. *(HBP definition)*