

Developing guidelines for faith-sensitive psychosocial programming: Update

IASC MHPSS Reference Group Global Meeting
Geneva, October 2017



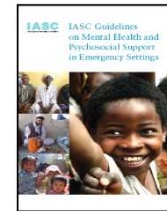
Reasons for developing guidelines for faith-sensitive psychosocial programming:

- It is indicated by the IASC Guidelines
- It is required by humanitarian law and principles
- Religion is an active and effective source of coping in many contexts
- Local faith actors have a 'comparative advantage' in humanitarian settings
- Engaging with religion is coherent with emerging policy and practice

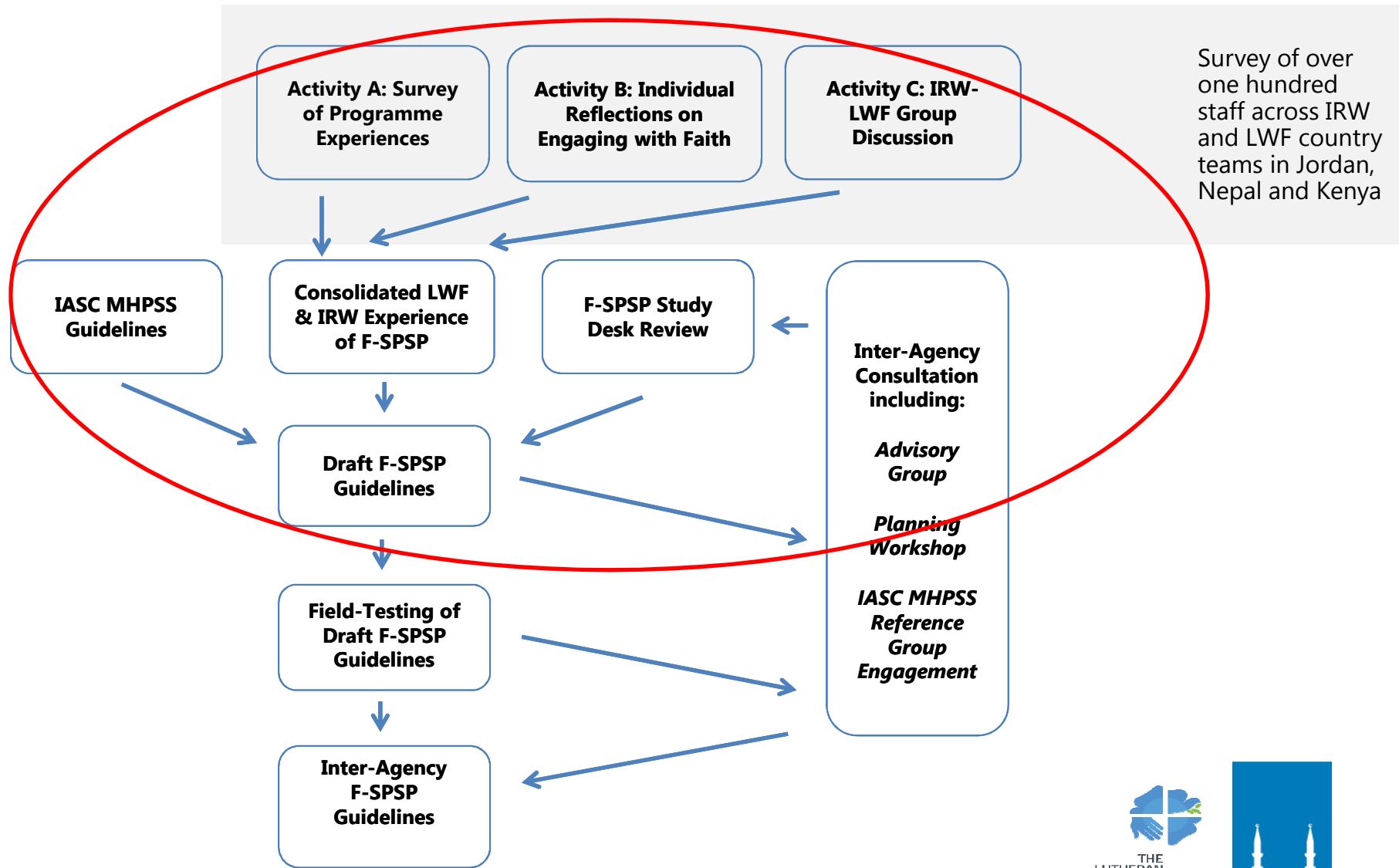
Humanitarian actors need tools for navigating the potentially confusing waters of faith and faith communities

Cautions informing their development:

- Religion may be used as a basis for maladaptive coping
- Religious engagement is seen to threaten impartiality
- Practices of engaging with religion are poorly documented, disseminated and developed



Project Approach: Phase One June-December 2016



Developing guidelines for faith-sensitive psychosocial programming



Phase One Outputs: Desk Review

Developing guidelines for faith-sensitive psychosocial programming: A desk review

Developing guidelines for faith-sensitive psychosocial programming

A desk review



Review of over 100 sources available through MHPSS.net





Phase One Outputs: Draft Guidelines

A. Common functions across domains		
1	Coordination	e.g. participation of FBOs, faith networks, inter-planning and implementation
2	Assessment, monitoring and evaluation	e.g. monitoring and evaluating partnerships w effectiveness of all parties within the partnerst e.g. mapping local FBOS, local faith institutions e.g. mapping skills of humanitarian actors in re e.g. assessing existing religious coping strategie engagement of implementation partners
3	Protection and human rights standards	e.g. provision of detailed guidance about intern obligations to support religious practice and fo e.g. inclusion of religious social protection mec
4	Human resources	e.g. recruitment of staff from relevant religious e.g. training in faith literacy of humanitarian ac e.g. awareness raising in relation to the spiritu e.g. addition of guidance on human resources t e.g. include training on faith-sensitive psychoso
B. Core mental health and psychosocial support domains		
5	Community mobilization and support	e.g. build on the role of religious leaders to su behaviour (e.g. to e.g. translation of
6	Health services	e.g. provision of sp e.g. provision of e requirements rega
7	Education	e.g. provision of n e.g. document fait parenting groups,
8	Dissemination of information	e.g. build on sensi partnerships or to
C. Social Considerations in sectoral domains		
9	Food security and nutrition	e.g. use of religiou
10	Shelter and site planning	e.g. availability and uses of places for worship and prayer
11	Water and sanitation	e.g. awareness of, and provision for, religious practices of cleansing and ab

Draft guidelines for faith-sensitive psychosocial programming

December 2016

7. Education

A. How does this relate to the IASC MHPPS Guidelines?

Action sheet 7.1 is concerned with 'strengthening access to safe and supportive education.'

There are no action points that relate to faith-sensitive approaches regarding education. There are a few references to using cultural activities, for example: 'culturally appropriate structured activities such as songs, games, dance and drama (page 193). There is also reference to using education as a mechanism for community mobilization (page 151). These points could potentially include the participation of local faith communities and religious leaders.

B. What do we know about engaging with religion in relation to education?

The International Network for Education in Emergencies (INEE) does not list 'faith,' 'religion' or 'spirituality' as a thematic area in their resources. There does not appear to be guidance for the provision of religious education within formal schooling. However, there is guidance about the ways that education can promote peace, for example in curricula that include peace education teaching skills and values associated with peaceful behaviours, and in providing conflict-sensitive education. These approaches may include an analysis of the role of religion in conflict escalation and resolution.



"Prayers, yoga, worship, and meditation are used to teach stress relief in schools."

LWF and IRWF Nepal Field Report

Specialized intervention approaches

the meaning of death, and special

1. Identify religious leaders and FBOs to engage in coordination structures

Map potential partners in local faith communities

- What are the predominant faith traditions in your country/operation?
- What are their basic organizations, structures and systems?
- What are the national faith-based organizations that can act as liaisons with faith leaders?
- Understand the activities and map the existing work of faith and/or interfaith groups.

Identify supportive religious leaders in the local area

- Invest time in getting to know the leaders as a means to increase trust and lay the ground for potential collaboration
- Establish a relationship of mutual understanding and trust.



2. Strengthen the capacities of faith partners to participate in humanitarian coordination structures

Build the capacity of local faith actors to become more effective partners

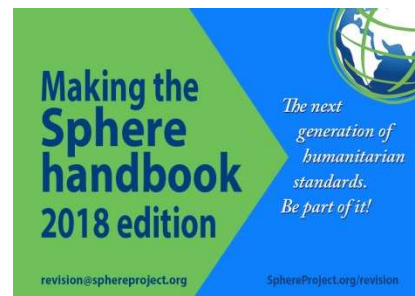
- Engage faith actors in training and capacity-building initiatives in order to deepen their understanding of the humanitarian response
- Identify relevant experience, skills and knowledge that faith actors bring.

Identify opportunities for equipping partners for response to future crises

- Provide technical support to faith leaders in the course of the response, developing knowledge of MHPPS and broader humanitarian concerns.



Phase One Outputs: Inputs to Sphere Revision



Information Note on Faith-Sensitivity in Relation to Palliative/End-of-Life Care

A joint Lutheran World Federation-Islamic Relief initiative – supported by an Advisory Group with representatives from UNHCR, IFRC, World Vision, Church of Sweden and HIAS and reporting to the IASC MHPSS Reference Group – is seeking the development of guidelines on the provision of faith-sensitive psychosocial support in humanitarian contexts. These guidelines will be consistent with the existing IASC MHPSS Guidelines, but provide more concrete guidance on strategies for appropriate engagement with religious groups and institutions and the faith-experience of beneficiary populations.

Consideration of faith-sensitivity in the context of palliative or ‘end-of-life’ care is to be welcomed. Preliminary guidance on faith-sensitive psychosocial programming (the work is currently at the stage of field-testing) is firmly grounded in established humanitarian principles. The principle of humanity mandates actions that support the dignity and respect of persons. For many persons, notions of dignity and respect are inextricably linked to their religious affiliation and belief.¹

Draft Guidelines on Faith-Sensitive Psychosocial Programming currently in the process of field-testing do not feature specific reference to religious engagement in provision of palliative care, although this may be redressed in the final guidelines. The draft guidelines do, however, highlight relevant material identified in the desk study supporting development of the guidelines regarding requirements for palliative care in low and middle-income countries.² This is discussed in the context of referral from health providers to religious leaders and other sources of spiritual support and wider moves for the provision of ‘compassionate care’ that is patient-centred.

Relevant excerpts from guidelines related to health are reproduced overpage.

The current field-testing of the draft guidelines on faith-sensitive psychosocial support is anticipated to result in revised and agency-endorsed guidelines being available towards the end of the first quarter of 2018.

Information note prepared by Professor Alastair Ager on behalf of the LWF-IRW consultancy team working on Phase 2 of the project: Developing Guidelines for Faith-Sensitive Programming. The views expressed are those of the consultancy team and do not represent the policy of LWF, IRW or other organizations represented on the Advisory Group.

August 2017

Sphere Handbook, Health Action chapter, Essential Health Services – Relief of Suffering and End of Life Care, Draft

2.7. Essential health services – Relief of Suffering and End of Life Care

Essential health services – Relief of Suffering and End of Life Care standard:

People will have access to care that prevents and relieves pain and suffering of any kind – physical, psychological, social or spiritual; that is integrated with life-saving and disease-modifying treatment when these are appropriate; that maximizes the comfort, dignity and quality of life of all patients, including those who are dying or “expectant”; and that provides psychological, social, and spiritual support for family members.

People at their end of life are identified as such. Informed choices are made with patients taking into account their needs, expectations and preferences. According to this a shared care plan is established.

Outcome Indicators:

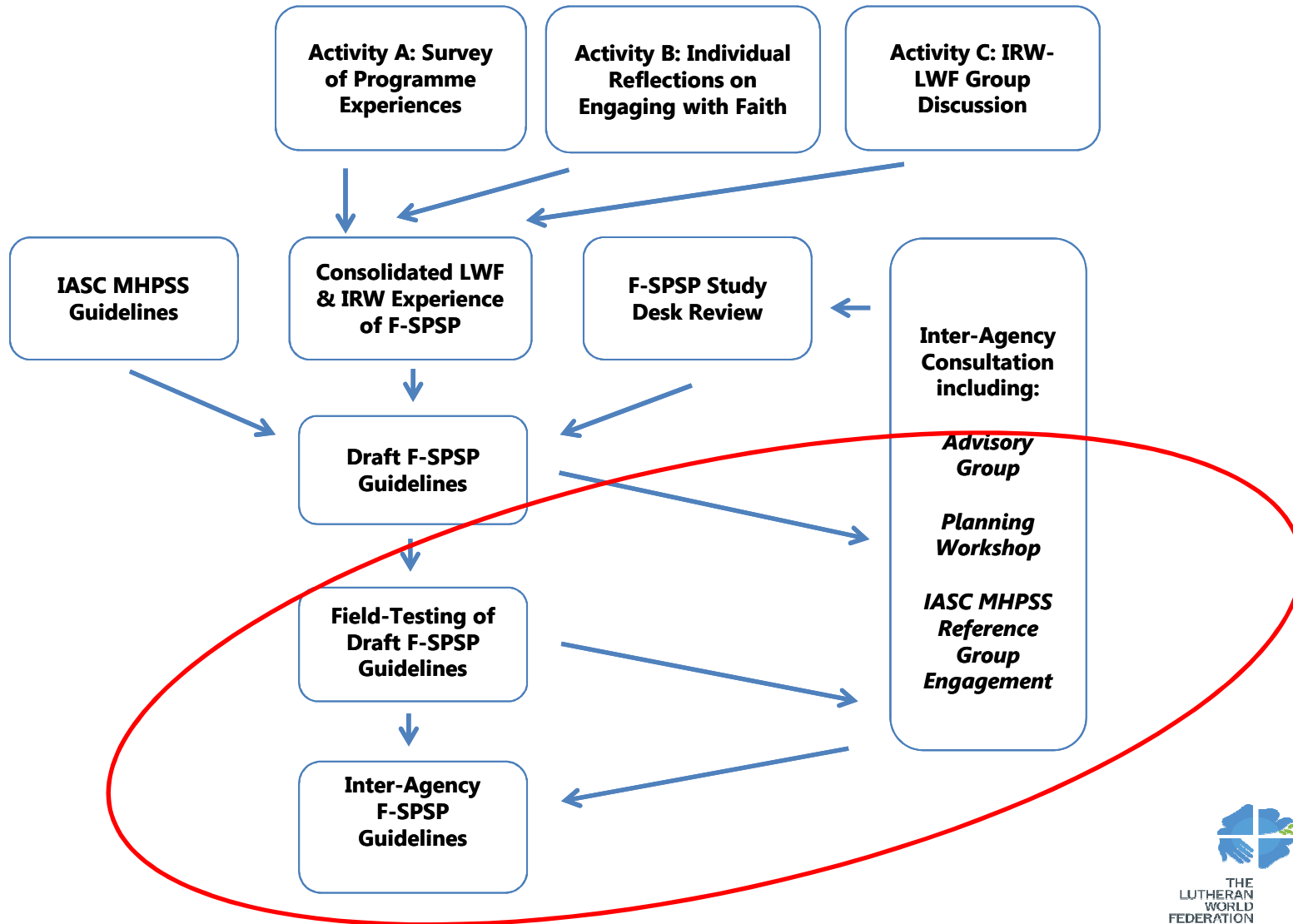
- Proportion of health centers, hospitals, mobile clinics and field hospitals with the following
 - *essential palliative medicines in stock at the time of review
 - *Essential Package of Palliative Care in the Report of the Lancet Commission on Global Access to Palliative Care & Pain Control
- % of trained staff in basic pain and symptom control / palliative care in each health center, hospital, mobile clinic and field hospital
- % of expectant patients that receive end of life care

Key Action 1

Organisation of services:

- o Policy and Guidelines
 - o Ensure that all humanitarian responses organizations and teams have a policy recognizing that saving lives and relieving suffering are both priorities and that “expectant” or dying patients must receive comfort-oriented care.
 - o Ensure availability and use of national or

Project Approach: Phase Two August 2017- February 2018



Developing guidelines for faith-sensitive psychosocial programming



Two Steps in field-testing the Draft Guidelines

1. A review guide for section-by-section feedback on the draft guidelines.

Review & Field-testing of Guidelines for Faith-Sensitive Psychosocial Programming **Field-Testing Guide**

FIELD-TESTING GUIDELINES FOR FAITH-SENSITIVE PSYCHOSOCIAL PROGRAMMING

Please use this Field-Testing Guide for Faith-Sensitive Psychosocial Programming as a tool to guide the process of identifying priority issues suggested by the guidelines; sources of information to evaluate your experience of field-testing; and a version of the guidelines.

SITE DETAILS

Agency: _____
 Country: _____
 Setting: (Location, Camp/Urban) _____
 Agency HQ Contact: _____
 Local Contact: _____

PROGRAMMING CONTEXT

Brief Overview of current MHPSS programming: _____
 (Provide programme proposal as an attachment)

3. Human resources

A: Does section A effectively link material to the MHPSS guidelines? Suggest edits or improvements.

B: Does section B summarize relevant evidence? What additional information (if any) would be useful?

C: Suggested guidance: 1. Ensure that humanitarian staff are aware of legal and humanitarian obligations with regard to religion. Was this guidance clear and helpful? Did you follow it? What was the result?

C: Suggested guidance: 2. Ensure that faith groups engaged in providing humanitarian support are aware of legal and humanitarian obligations. Was this guidance clear and helpful? Did you follow it? What was the result?

D: Are the suggested resources useful? Is there additional material that would be helpful?

Any other comments on this section of the guidelines?



Section-by-section review of draft guidelines by staff of HIAS Kenya

<input type="radio"/> Section 1: Coordination	<input type="radio"/> Section 7: Education
<input type="radio"/> Section 2: Assessment, monitoring & evaluation	<input type="radio"/> Section 8: Dissemination of information
<input type="radio"/> Section 3: Protection & human rights standards	<input type="radio"/> Section 9: Food security and nutrition
<input type="radio"/> Section 4: Human resources	<input type="radio"/> Section 10: Shelter and site planning
<input type="radio"/> Section 5: Community mobilisation & support	<input type="radio"/> Section 11: Water and sanitation
<input type="radio"/> Section 6: Health services	

Developing guidelines for faith-sensitive psychosocial programming



Field-Testing the Draft Guidelines

2. A field-testing guide for selected agencies in making action plans which relate their work to relevant aspects of the draft guidelines

Review & Field-testing of Guidelines for Faith-Sensitive Psychosocial Programming **Field-Testing Guide**

3. EVALUATING OUTCOMES

This part of the field-testing guide gets you to consider how you will know if your actions have been successful.

Review & Field-testing of Guidelines for Faith-Sensitive Psychosocial Programming **Field-Testing Guide**

2. ACTION PLANNING

After reviewing your responses above, return to the Draft Guidelines and list below the specific

Review & Field-testing of Guidelines for Faith-Sensitive Psychosocial Programming **Field-Testing Guide**

FIELD-TESTING GUIDELINES FOR FAITH-SENSITIVE PSYCHOSOCIAL PROGRAMMING

Please use this *Field-Testing Guide* to document your work in field-testing the draft Guidelines for Faith-Sensitive Psychosocial Programming. This guide takes you systematically through the process of identifying priority areas of programming where you wish to field-test actions suggested by the guidelines; action planning for implementing those actions; identifying sources of information to evaluate their impact; capturing that information; and reflecting on your experience of field-testing; and proposing revisions to be incorporated into the final version of the guidelines.

SITE DETAILS
Agency:
Country:
Setting: (Location, Camp/Urban etc.)
Agency HQ Contact:
Local Contact:
PROGRAMMING CONTEXT
Brief Overview of current MHPSS Programming:
[Provide programme proposal and evaluation documents as appropriate to provide detail]

Some would look like – that

is information. Think collating information about it when and how

will arrange this, how



Participants at Nairobi orientation to field-testing for staff of HIAS, IR, LWF and UNHCR

Field-Testing Across Five Settings

Five sites have been selected from those nominated by the Advisory Group:

Country	Hosting Agency	Locations
Kenya	HIAS	Urban Nairobi
Nigeria	CoS/CA	Borno State
Chad	HIAS	Eastern Chad (12 settlements)
Iraq	CoS/LWF	Iraqi Kurdistan
Lebanon	IRW	Saida and Bekkar

SITE DETAILS
Agency:
Country:
Setting: (Location, Camp/Urban etc.)
Religious profile of the population:
Agency HQ Contact:
Local Contact:
PROGRAMMING CONTEXT
History of MHPSS Programming: (e.g. long-standing programmes or new interventions being introduced)
Current experience of engaging with issues of faith and religion: (e.g. extensive track-record or some exploration or reticent to engage)
What interest is there in piloting the faith-sensitive guidelines? (e.g. piloting the full guidelines or a specific domain, and if so, which?)
LOCAL CAPACITY AND READINESS
Local capacity for M&E, research and related activities: (e.g. strong or weaker capacity)
Is the site in a position to begin piloting in mid-September?

Developing guidelines for faith-sensitive psychosocial programming



Planned Work

October-December 2017	Review, field-testing and reporting of findings, plus compilation of a case study
January-February 2018	Revision of the draft guidelines based on findings from the review and field-testing stages
March 2018	Launch of guidelines for faith-sensitive psychosocial programming

Agency Leads: Michael French, Lutheran World Federation and Neelam Fida, Islamic Relief Worldwide

Advisory Group: Pieter Ventevogel, UNHCR, Rebecca Dempster, HIAS, Nana Wiedemann, IFRC Psychosocial Centre, Alison Schafer, World Vision, Haroon Kash, Islamic Relief, Scott Pohl, UNHCR, Simone Sinn, LWF, Leslie Snider, Robert White, LWF, Jessika Gustavsson, Church of Sweden

Consultancy Team: Rebecca Horn, Wendy Ager and Alastair Ager



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