

# **Community Based Psychosocial Support for ACT Alliance programmes**

## **Guiding Principles**

This document was approved by the ACT Executive Committee on 14<sup>th</sup> December 2011 as policy guidance for ACT Alliance member programmes.

It was developed by the ACT Psychosocial Working Group.

## **1. Introduction**

Members of the ACT Alliance and the ACT secretariat (hereinafter referred to as ‘ACT’) have a common commitment to protect, without discrimination, the rights and dignity of the individuals with whom we work during our responses to emergencies and distressing events or long time stressful situations. ACT recognises its responsibility to protect affected populations and to recognize and strengthen local capacities. An underlying priority in emergencies is to protect and improve people’s mental health and psychosocial well-being, and to recognize their capacity for recovery and resilience. In 2010, the ACT alliance established a Psychosocial Support Working Group (PSWG) to promote and support the need for social and psychological considerations in all ACT sectors of work.

The ACT Psychosocial Support Working Group has developed guiding principles to assist ACT staff, consultants and volunteers in providing community-based psychosocial support work with countries around the world. Community-based Psychosocial Support adds a mental and social dimension to traditional humanitarian aid and has assumed considerable significance as a focus for relief efforts. It has been shown that when the affected people’s psychosocial wellbeing has been addressed, they are more likely to benefit from the other components of recovery efforts.

These guiding principles are meant to serve as a reference for psychosocial support initiatives held by the members of ACT Alliance. These guiding principles uphold the standard of quality of psychosocial work and represent best practices in this area. They are based on the principles of respect for human beings and their human rights, gender equality, understanding and enablement.

## **2. Understanding community based psychosocial support**

Community based psychosocial support (CBPS) is an approach in which humanitarian relief integrates psychosocial aspects into the response. Psychosocial well-being depends on many aspects of a person’s life. To achieve a sense of well-being, people rely on social interaction; mental stimulation and learning; physical security and safety; and religious and spiritual beliefs. Their material and biological as well as their psychosocial needs must be met in terms of food, water, shelter, sanitation, physical and mental health. They also need economic stability. Following a disaster, the manner in which people’s basic needs, safety and security are met has an impact on their well-being and recovery.

The foundation of all community-based psychosocial work is the recognition of the affected community’s capacity for recovery, resilience and future rebuilding and development. Psychosocial support goes beyond the initial phases of emergencies and distressing events. It is important to foster capacity building towards self-governance and collective decision making for ongoing community development. All communities and individuals have resources and strategies for dealing with difficulties, illness, and distress. It is the responsibility of humanitarian workers to respect, understand and enable the community and individuals in their own recovery. The strategies for dealing with difficulties can never be supported when individuals’ basic human rights are abused.

### **2.1 Disasters affect people in different ways**

Disasters affect everyone in the community. The circumstances of our lives at the time of an emergency influence our experience of it – and its impact on our later life. Early assessment of different reactions to

crisis is important. It is important to distinguish between normal distress and mental disorders. Emergency responders need to respect and understand that different cultures will respond in different ways. At the community level, they need to acknowledge that families and individuals are made up of males and females of all ages, and ability levels; some of whom may have special needs, but with the same rights. Members of each group face different risks and are affected in various ways.

It is essential to understand the individual within the community context and all of its social and cultural complexities. There may be external influences, traumas, etc., that determine one's ability to function in other areas of their lives – even the ability to advocate for oneself. It is a necessary component for the community to access the other services provided in an emergency. However, it is essential that as outside services are provided, they are administered in a way that builds upon the resources of the community and enables their capacity for recovery and future development.

Interventions need to be targeted to address the various needs of all groups. Some people will need a great deal of extra attention, such as children without parents, children heading households or single men or women heading households. Psychosocial support must be provided for the vulnerable, including children, elderly people with disabilities, lactating or pregnant women and sexually abused or raped women or men. Return to optimal functioning should be community based and promoted through social activities and gatherings in schools, community centres, churches, mosques and local organizations. Addressing spiritual needs promotes mental health and a feeling of belonging and connectedness. It is important to promote positive communal healing practices and to understand and respect communal rituals and burial practices.

For the most part, individuals affected by a disaster will heal and return to a level of functioning that allows them to live in a fulfilled manner. However, for some, the recovery needs may be much longer and more complex. For others stigmatization from the community might cause additional problems, requiring special attention to overcome.

## **2.2 Involving the community**

To create a truly inclusive and beneficial humanitarian response, it is necessary to address and involve women, girls, boys and men in all aspects of the response work. Equal participation is a prerequisite. Following a disaster or conflict, the disaster response effort should facilitate the community's appraisal of its needs, wants, problems, available resources and values. This includes needs assessments by existing local organisations such as Community Based Organisations (CBOs) and Civil Society Organisations (CSOs). Enable the community by recognising and encouraging their belief in their own capacity to make change and protect their overall wellbeing. Local ownership and responsibility is established by actively engaging the affected women and men in the community in decision making during all phases of disaster response. This includes assessment, planning, implementation and evaluation. Relationship skills, partnership and "local knowledge" are essential to ensure that the emergency response is tailored to the affected community. When the affected community has shared ownership and responsibility, and is able to build on its own resources, it will be better prepared to sustain changes beyond the recovery period. Following recovery, it may be necessary to rebuild, not only the lives of the community, but infrastructure, services and programmes.

During emergencies, many people depend on humanitarian aid to help them meet basic needs. This dependency can contribute to a power imbalance between those delivering services and those receiving them. Cultural and gender sensitivity and inclusion of the affected community will help minimize misunderstandings and power struggles. When external support is necessary from organisations like

ACT Alliance, it must always build on existing local capacities with the intention of enabling the community to be self-sustaining.

### **2.3 Using Best Practices**

Responses to disasters can unintentionally cause more harm than good. To reduce harm, all humanitarian workers must adhere to international humanitarian principles and standards of conduct. Agencies must also be open to evaluating their program and allowing for external review. Cooperating with other agencies and organisations, especially local ones, will facilitate the adoption of ‘best practices’ that have been proven to be effective and successful.

It is important to act in ways that Do No Harm. Evidence and experience have shown that people who feel safe and connected to others remain calm and hopeful. It is also shown that those who have access to social, physical, mental, emotional, spiritual and cultural support are in a better position to help themselves and to receive help from others. We are seeking long-term wellbeing and a sense of belonging and empowerment – a sense of being included and also of being inclusive. CBPS believes in enabling the affected communities to understand their given rights, to claim their rights and their capacity to use them so that they can benefit from emergency support. When communities are able to rely upon their own resources, their long term sustainability for recovery, rebuilding and development improves significantly.

## **Guiding Principles for Community Based Psychosocial Support for ACT Alliance Programmes**

**Principle 1: Promote the basic rights and dignity of women, men, girls and boys, without discrimination, avoiding unnecessary distress, fear, and pain (e.g. physical, emotional and spiritual)**

The rights of individuals in a population should drive the support effort. While many rights develop from needs, a rights-based approach adds legal and moral obligations, and accountability. Individuals and groups are encouraged and empowered to claim their rights; they are not seen as hapless victims or objects of charity, but rather as people claiming their legal entitlements. ACT promotes special consideration of the rights and dignity of older people, children and people with disabilities as their needs and concerns have often been overlooked in disasters and conflicts.

### **Possible actions**

- Make human rights an integral dimension of the design, implementation, monitoring and evaluation of psychosocial programmes in emergencies, especially for people judged to be at risk or stigmatized. ACT Alliance members, and/or their local implementing partners, need to be familiar with relevant local laws and regulations that protect the rights of people to be served in the response effort. Additionally, the government agencies in charge of guaranteeing these rights must be recognized and supported. That is a key to any Rights Based Approach.
- Promote inclusive and non-discriminatory service delivery, and avoid unnecessary institutionalisation of people with mental disorders or unaccompanied children.

- Protect survivors for human rights violations from the risk of stigmatisation by including them in broader programmes.
- Advocate with human rights organisations and donors on the need of psychosocial support for survivors and provide them with information on available support structures
- Ensure clear and equally accessible complaint mechanisms for right holders.

**Principle 2: Include social and psychological considerations in all ACT work sectors (e.g. water and sanitation, livelihoods, shelter, health and security)**

The core humanitarian response areas all have psychosocial components that play an important role in helping people heal after a traumatic event. The social aspect of these basic services is, psychologically, very important. The way relief is distributed, how camps are organised and located, the provision of services to an affected population and how protection and equal participation is built into the program, all play a role in a person's sense of well-being and their ability to heal effectively from the disaster.

**Possible actions**

- Assess psychosocial factors in all activities related to food security, food aid, water and sanitation, shelter and site planning.
- Enable participation in assessment, planning and implementation, especially engaging women and other people at risk.
- Promote dignity, safety and protection in all water and sanitation activities, ensuring that latrines and bathing areas are lockable and well-lit.
- Prevent and manage conflict over humanitarian aid between affected families, displaced groups, permanent residents, local partners and foreign donors in a constructive manner.
- Implement emergency aid in a culturally appropriate manner that protects the identity, integrity and dignity of primary stakeholders.

**Principle 3: Build on community self help strategies, promoting community ownership and control over resources using participatory processes of engagement and decision-making**

Community-based approaches acknowledge and build on existing coping strategies within the community and seek to enhance the resilience of individuals and their families. Communities identify their needs and participate in implementing strategies they consider appropriate to their circumstances.

**Possible actions**

- Enable equal participation in assessment, planning and implementation, including women and other people at risk.
- Facilitate the process of community identification of priority actions through participatory rural appraisal and other participatory methods.
- Facilitate a gender assessment as a basis for targeted interventions.
- Be attentive to language barriers, especially as they limit local participation in phases of relief efforts. Avoid giving power to those who speak the NGOs language, when the community is more qualified and knowledgeable to lead the effort.

**Principle 4: Promote the return to the optimal functioning of affected communities and individuals through their involvement in social activities and gatherings within local structures such as schools, community centres, churches, mosques, and local organisations**

The affected communities need to be actively involved in all aspects of humanitarian response. Their participation is essential in assessing, planning, implementing, and evaluating all of the relief efforts. Whenever possible, existing structures and programmes in the affected community should be used and strengthened. Because the psychological and social impact of emergencies may be long-lasting, it is important that the affected community is able to sustain the programmes over time.

**Possible actions**

- Support community initiatives, actively encouraging those that promote family and community support for all emergency-affected community members, including single headed households and people at greater risk.
- Encourage the formation of groups, particularly ones that build on pre-existing groups, to conduct various activities of self-support and planning.

**Principle 5: Recognise and encourage the community's belief in its own capacity to make change and to protect their overall wellbeing by building on their own resources**

The manner in which relief is distributed and the provision of services to an affected population is vital to their ability to heal effectively from the disaster. Inappropriate humanitarian response projects can harm well-being by creating stressful social environments and reduce some people's access to their basic rights.

When a population is treated as if it is entirely dependent on external aid, over time its members may actually become dependent on that aid. Family roles and relationships are undermined and community relationships are distorted. Self-respect, self-esteem and self-reliance are damaged or destroyed, which affects individual and community well-being. It is therefore essential to build the support on existing local capacities.

**Possible actions**

- Establish safe and sufficient spaces early on to support planning discussions and the dissemination of information in all languages needed to reach all individuals.
- Recognise and highlight the psychosocial support that comes from the affected community members themselves.
- Build the emergency response on available resources, avoiding giving more help than necessary
- Make sure ACT Alliance members' physical presence in the affected area follows the DO NO HARM principle; that protection and participation is embedded and well understood at all levels and that complaint mechanisms are functioning.

**Principle 6: Promote positive communal healing practices, emphasising family and community support structures to address individual and collective needs**

The availability of collective coping strategies, such as funerals, rituals and ceremonies and social support networks such as supportive families, friends, peer groups, religious and cultural institutions and communities reduce the likelihood of lasting adverse effects after a disastrous event.

**Possible actions**

- Facilitate conditions for appropriate healing practices, such as rituals and burial practises, that are important to affected people and that are compatible with international human rights standards.

**Principle 7: Address people’s spiritual needs to maintain good mental health and a feeling of belonging or connectedness**

Focusing on the community’s spiritual life enhances the prospects for cohesion among survivors. Spiritual leaders, when treated with respect and included in overall planning, can both provide access to key people and encourage cooperation from the local community. While ACT views spiritual needs as central to healing processes, ACT never ties the promise, delivery or distribution of assistance to the embracing or acceptance of a particular religious creed.

**Possible actions**

- Approach local religious and spiritual leaders and other cultural guides to learn their views on how people have been affected and on practices that would support the affected population.
- Learn about cultural, religious and spiritual supports and coping mechanisms and disseminate the information among humanitarian actors at sector and coordination meetings.
- Discuss with the leaders harmful traditions and practices that can hamper this healing.
- Provide spiritual caregivers with the support and care they need to be effective.

**Principle 8: Enhance a community’s resilience and hope for long term recovery and sustainability by nurturing their capacity for growth**

The women and men in the affected communities need to be in control of the direction of their recovery. When they have the ownership and responsibility for the programmes, they will be better prepared to sustain changes beyond the recovery period.

**Possible actions**

- Facilitate the process of community identification of priority actions through participatory rural appraisal and other participatory methods.
- Support community initiatives, actively encouraging those that promote community and family support for all affected community members, including people at greatest risk.

- Support community initiatives and structures that are promoting and sustaining women's access to participate in decision making.
- Remember that an emergency situation is not only a tragedy, but can also become a platform for change to the better in a community. It can foster new leadership and roles and promote more equality in access to services and decision making. It is, therefore, important that humanitarian support willingly or unwillingly sustain equal and just situations.
- Actively involve local partners and do not treat them as mere implementers of our ideas, but having the main responsibility for the sustainability of the relief efforts.