



Protecting the social service workforce: best practices including mental health

How can lessons learned from previous efforts to support the social service workforce be applied to work during COVID-19?

September 2, 2020



Protecting the social service workforce: best practices including mental health

WORD CLOUD

As you wait for the presentations to start, please participate in this activity by:

1. Clicking on the link in the chat box (seen below).
2. With three words, describe what gaps you think the Social Service Workforce fills in the care continuum for OVCs.

[HTTPS://WWW.MENTI.COM/9FB7WNXT6Z](https://www.menti.com/9fb7wnxt6z)

AGENDA

Presenter	Title
Hugh Salmon, <i>Director, Global Social Service Workforce Alliance</i>	The Essential Roles and Support Needs of the Social Service Workforce in the Time of COVID-19
Sandra Oosthuizen, <i>National Association of Child Care Workers, South Africa</i>	The Isibindi Impilo Model: A Child & Youth Care Approach
Washington Jiri, <i>Child Protection Advisor, Bantwana Zimbabwe, World Education</i>	Supporting Case Care Workers to manage the emotional impacts of serious child protection cases
Karesma Mushi, <i>Programme Officer, REPSSI Tanzania</i>	Adolescent/Youth Peer Mentors: The unique needs of adolescents and young people working as extensions of the social service workforce
Jessica Tabler Mullis, <i>OVC Senior Specialist, Save the Children</i>	Mental Health and Psychosocial Support at Save the Children
Diana Chamrad, <i>Improvement Director, Vulnerable Children and Families and Mental Health, URC</i>	Q&A
Sally Bjornholm, <i>Senior HIV Technical Officer, Orphan and Vulnerable Children, USAID</i>	Lessons learned application to support for the social service workforce during COVID-19

THE ESSENTIAL ROLES AND SUPPORT NEEDS OF THE SOCIAL SERVICE WORKFORCE IN THE TIME OF COVID-19

OVC TASKFORCE WEBINAR: PROTECTING THE
SOCIAL SERVICE WORKFORCE: BEST PRACTICES
INCLUDING MENTAL HEALTH

SEPTEMBER 2ND, 2020

Hugh Salmon
Director



THE GLOBAL SOCIAL SERVICE WORKFORCE ALLIANCE



WHO IS THE SOCIAL SERVICE WORKFORCE?

The social service workforce is an inclusive concept referring to a broad range of governmental and nongovernmental professionals and paraprofessionals who work with children, youth, adults, older persons, families and communities to ensure healthy development and well-being.

Global Social Service Workforce Alliance.
2019. SSW Definition.

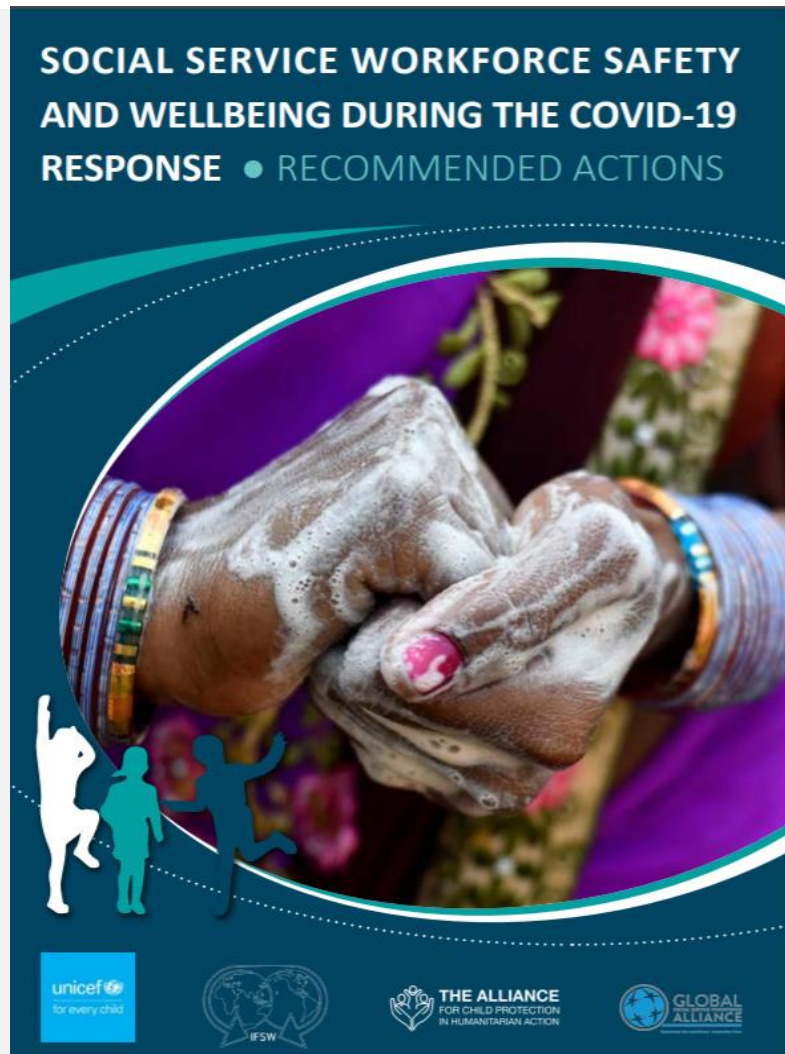


They provide **preventive** and **responsive** services, **promote** the wider workforce, and operate at **macro**, **mezzo** and **micro** levels.

The range of titles and roles :

- social workers,
- social educators,
- social pedagogues,
- child and youth care workers,
- community development workers
- community liaison officers
- community workers,
- social welfare officers,
- social/cultural animators,
- case managers
- para / auxiliary social workers

RECENT TECHNICAL NOTE ON THE SSW DURING THE COVID-19 RESPONSE



- Jointly produced by UNICEF, the Global Social Service Workforce Alliance (GSSWA), the International Federation of Social Workers (IFSW) and the Alliance for Child Protection in Humanitarian Action (ACPHA)
- An Annex to the ACPHA Technical Note: Protection of Children during the Coronavirus Pandemic
- Builds on global standards and guidelines

<http://socialserviceworkforce.org/resources/social-service-workforce-safety-and-wellbeing-during-covid-19-response-recommended-actions>

ESSENTIAL ROLE OF THE SOCIAL SERVICE WORKFORCE DURING THE COVID-19 RESPONSE

“Why is it that we think a social worker is less important than a doctor or a nurse?”

The Minister of Women, Children and Youth, Ethiopia, on visiting a quarantine center, having met with a social worker trained on the COVID adapted case management tools to provide essential services for children and their families



CHALLENGES AND RISKS FACED BY THE SSW DURING THE COVID-19 RESPONSE

- Increased reports of violence against children, gender-based violence and intimate partner violence incidents
- Some services still require in-person support, posing a risk to the worker, children and families of contracting the virus
- Increased workload, increased range of roles
- Need to rapidly learn to use new technology and adapt services to social distance requirements
- Challenge of maintaining confidentiality
- Fear of the virus, and its impact
- Stigma from contact / association with the virus
- Other stressors, including personal circumstances



Workers need appropriate supervision, training, protective gear, and mental health and psychosocial support.

**FINDINGS of
APRIL 2020
ONLINE SURVEY
of ALLIANCE
MEMBERS and
PARTNERS –**

**221 responses
from
33 countries**



Nurses and Doctors were given protective equipment immediately but no one cares about social workers and community workers. Support to vulnerable families was not considered as an urgent issue. Social workers will now be overwhelmed with cases as there will be many social problems (school drop out, child labor, family separation, poverty, etc).

Response from Community and Family Support Worker, Rwanda

We have concerns about violence and abuse, about increased poverty driving family separation, street kids who are unprotected and systems to trace their families and reintegrate them are halted. Concerned that the state will place large numbers of street kids into orphanages and that will create more issues post-outbreak.

Program Director, Sierra Leone

Our major challenge is how to reach the most marginalised and vulnerable in remote areas with little to no technological options, particularly children and families where violence is present and likely to increase - how do our community social workers reach and monitor these families when they have fears for their own health and safety?

Child protection adviser, Australia

FINDINGS of APRIL 2020 ONLINE SURVEY of ALLIANCE MEMBERS and PARTNERS –

**221 responses
from
33 countries**



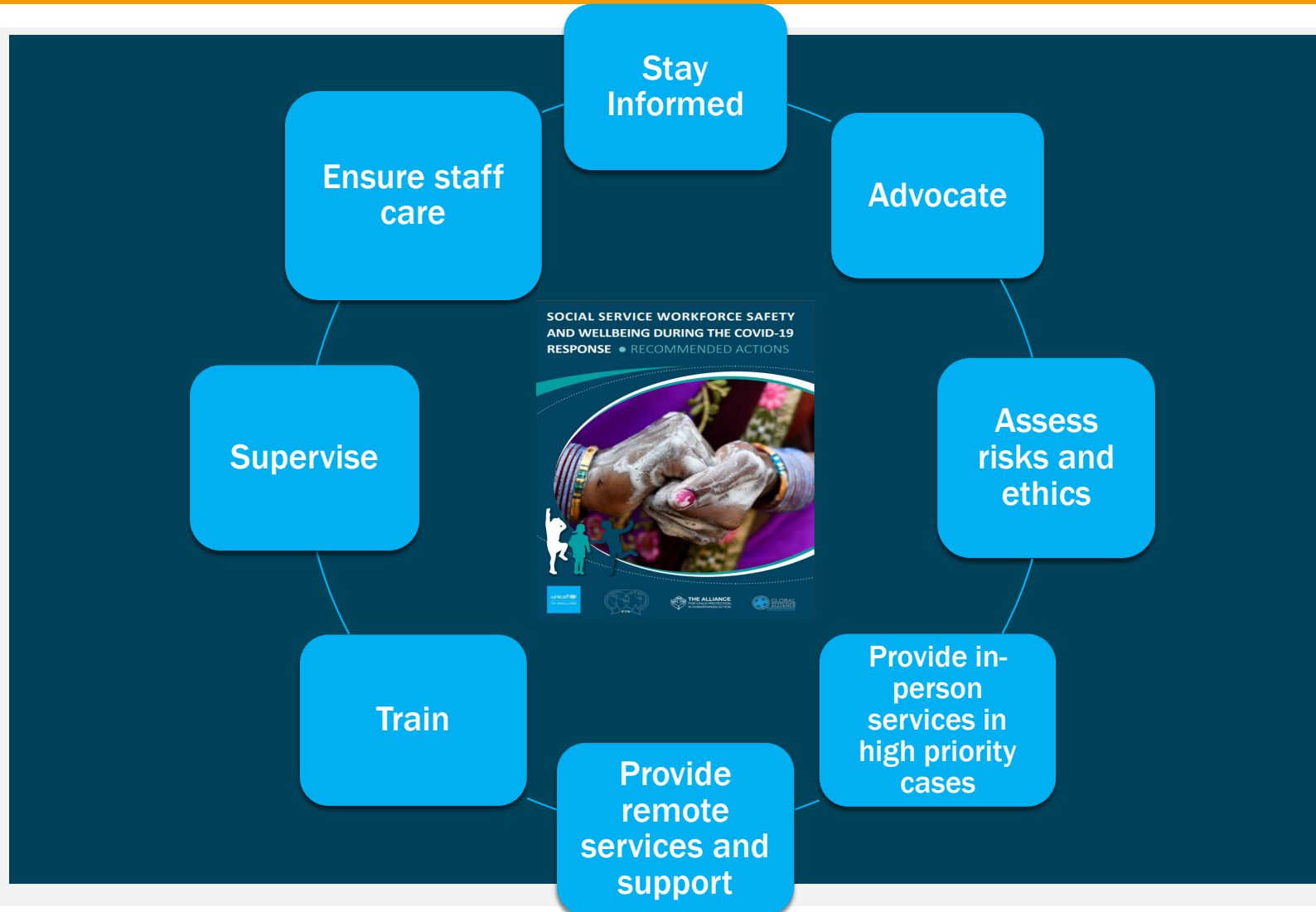
RECOMMENDED ACTIONS FOR THE SSW DURING COVID-19

These actions include all three types of function:

- preventive,
- responsive
- promotive,

across all three levels:

- micro
- mezzo
- macro.



From the
UNICEF,
GSSWA,
IFSW, ACHPA.
2020
Technical
Note on
Social Service
Workforce
Safety and
Wellbeing
during the
COVID-19
Response.

THANK YOU!



Protecting the social service workforce: Best practices

The Isibindi Impilo Model: A Child & Youth Care Approach

**Sandra Oosthuizen, Senior Program Manager,
National Association of Child Care Workers, South Africa**

Overview of presentation

- Context
- Isibindi Impilo Model
- Child and youth care supervision
 - Supervision structure
 - Supervision methods
- Impact
- Story

The COVID-19 Context in South Africa and the Western Cape

(31 August 2020)

South Africa

Total confirmed cases: **625,056**

Active cases: **72,424**

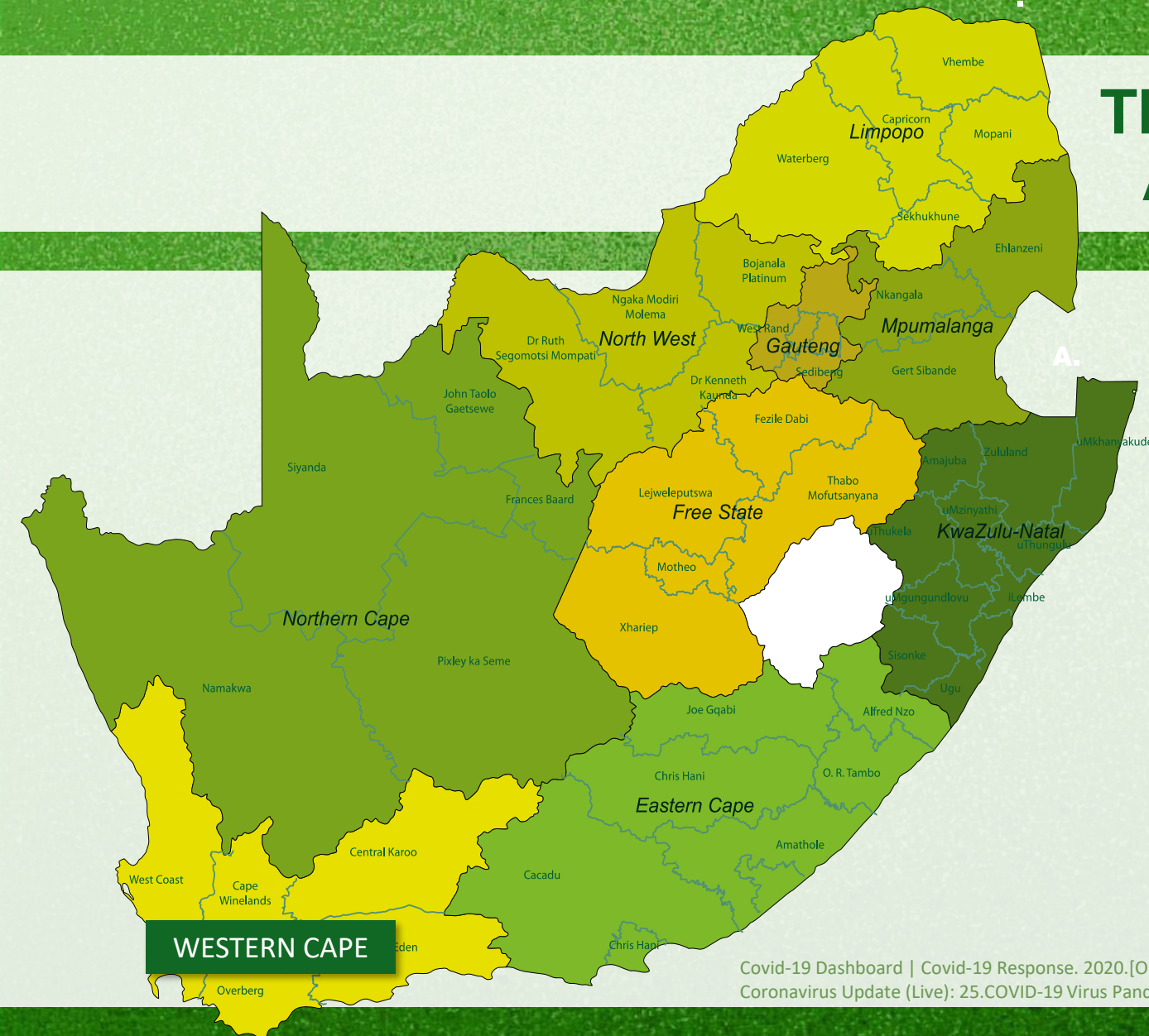
Total deaths: **14,028**

South Africa: Western Cape

Total confirmed cases: **105,093**

Active cases: **4,068**

Total deaths: **3,889**



Covid-19 Dashboard | Covid-19 Response. 2020.[ONLINE] Available at: <https://coronavirus.westerncape.gov.za/covid-19-dashboard>. [Accessed 31 August 2020].
Coronavirus Update (Live): 25.COVID-19 Virus Pandemic - Worldometer. [ONLINE] Available at: <https://www.worldometers.info/coronavirus/>. [Accessed 31 August 2020].

COVID-19 increased challenges

- **Poverty** - job losses, loss of income, hunger
- **Violence** - in communities - robberies, gang violence, GBV
- **Safety risks** - COVID-19 infections & protocol management
- **School closure** - no feeding scheme for children, child protection risks, potential risk of school drop-out, GBV, lack of supervision
- **Increased health needs** - lack of access to chronic medication, COVID-19 testing, overcrowded homes, isolation & quarantine
- **Social isolation** - no access to sick family members in hospitals, COVID-19 stigma, GBV, increased anxiety, fearful of contracting the virus
- **Increased deaths** - 3889 deaths in WC, no traditional burials and rituals, trauma and grief
- **Staff challenges** - delays & challenges in access to medical PPEs, inadequate multi-disciplinary work, shifting SAG COVID-19 regulations, anxieties, coping with own family COVID-19 losses while servicing beneficiaries with COVID-19 loss, COVID-19 related staff death

Isibindi Impilo : Courage in Health

- Professional and Auxiliary (Para) Child and Youth Care Workers (CYCWs) deployed in health facilities and communities
- Registered (licensed) workforce with South African Council for Social Service Professions
- Essential services workers
- Focused services and support to children and families:
 - COVID-19 screening in communities with Department of Health
 - Access chronic medication
 - Food security (food parcels/vouchers)
 - Referrals to health care services
 - Virtual connection / virtual life space work
 - COVID-19 messages: wash hands, wear mask, social distance
 - Trauma work and grief work

CYCWs conducting COVID-19 screening in community



CYCWs with full
Personal Protective
Equipment
supporting
Department of Health
with COVID-19
screening

Child and youth care supervision

- CYC practice is **relational** practice
- Supervision is a **relationship** that **supports** the child and youth care worker's technical competence and practice, **promotes** well-being and **enables** effective and supportive monitoring of child and youth care practice.
- The ultimate **purpose** of supervision is **improved quality of service** and **improved outcomes for children and youth**.

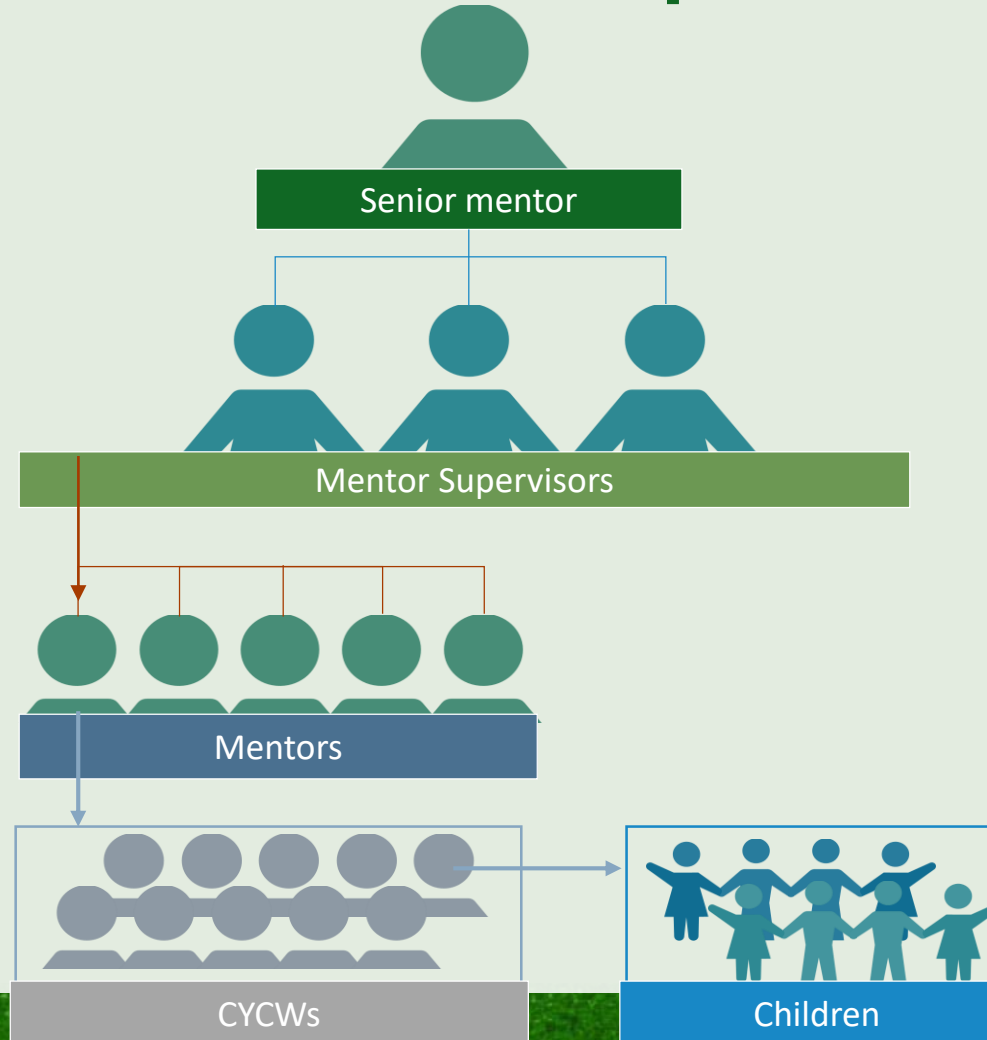
Isibindi Impilo LAYERED Supervision Structure

Senior mentor
1:3 Mentor Supervisors

Mentor Supervisor
1:5 Mentors

Mentor
1:10 CYCW

CYCW team
1:300 beneficiaries



Child and youth care integrated supervision methods

- **Individual** supervision
- **Group** supervision
- **Informal debriefing** – responsive supervision
- **Virtual** supervision via an electronic platform – Teams, Zoom, WhatsApp
- **Life-Space supervision** is real time supervision, provided in the life-space, with the CYCW and the family or child:
 - Observing
 - Noticing
 - Positioning oneself - sometimes to be in front, or besides or behind
 - Guiding, supporting, mentoring, coaching
 - Special value in COVID-19 context

ISIBINDI IMPILO impact : the numbers & the services

30 000 children & youth serviced by 100 CYCWs

In 3 months of lockdown with the following services:

- COVID-19 screening
- Accessed chronic medication
- Food security (food parcel delivery or vouchers)
- Referred to health care services
- Virtual connection utilized:
 - virtual life space work
 - trauma and grief work
 - study support for matric learners
 - COVID-19 messages: wash hands, wear mask, social distancing

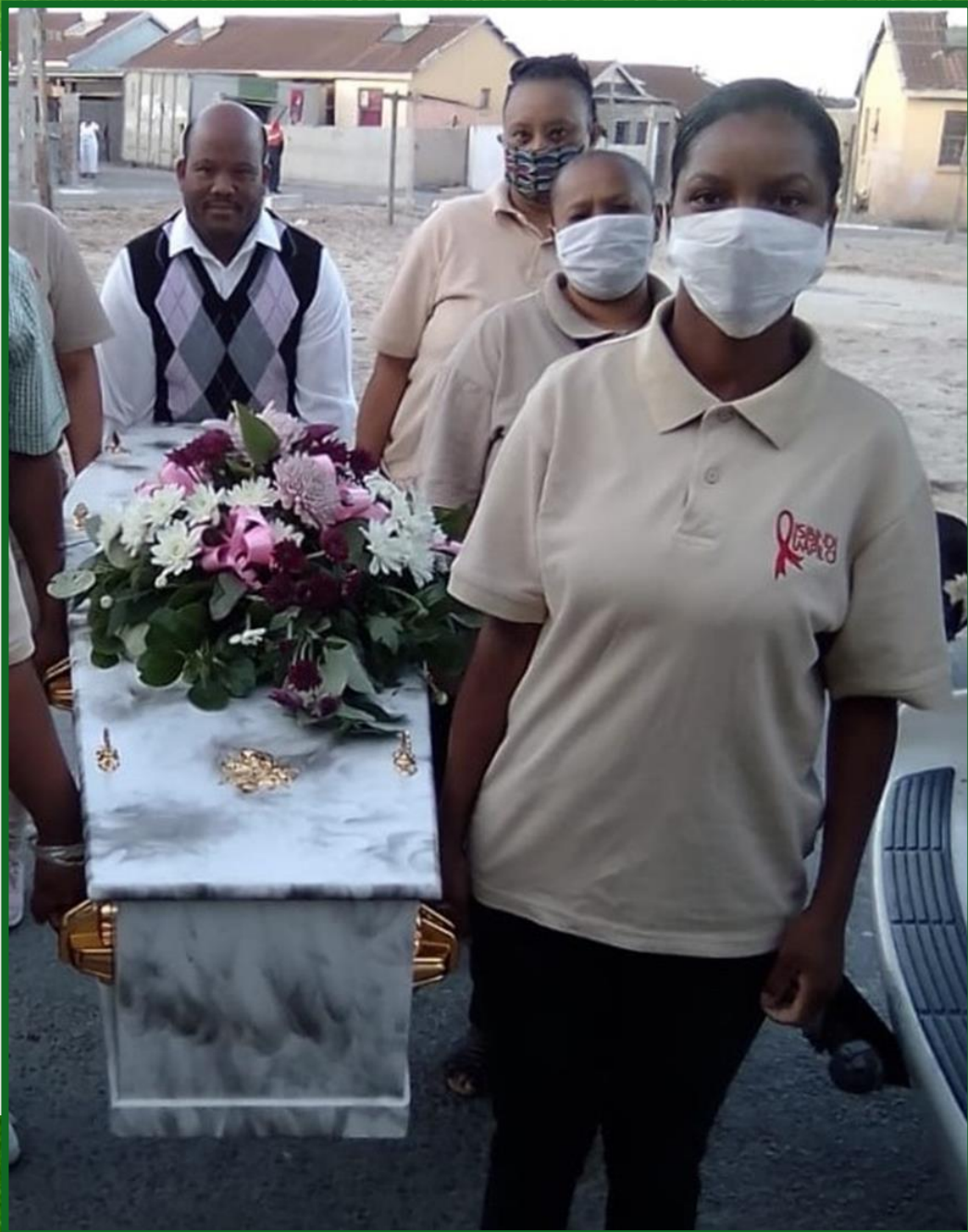
FOOD 4 COVID-19 THANK YOU



Phelile is an HIV exposed infant that lives with his mother and two other siblings. The mother is currently unemployed and is the single parent. The mother is on ART and breastfeeds. She informed the CYCW that she did not have food in the house and it is a challenge lactating when you do not have proper meals. The CYCW advocated for her to get a food parcel. She expressed that was very happy but mostly relieved as she had no other options. She couldn't stop saying thank to the CYCW.

FEED A FAMILY FOR 1 MONTH

 **NACCW**
NATIONAL ASSOCIATION OF CHILD CARE WORKERS



**Child and youth care workers
are responsive to the needs of
the family**



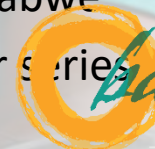
Caring for the Frontline Workforce: *Supporting Community Childcare Workers to manage the emotional impacts of serious child protection cases*

Washington Jiri, Child Protection Advisor

Bantwana Initiative of World Education, Zimbabwe

OVC Task Force and PEPFAR Interagency webinar series

2 September, 2020



Bantwana



WORLD EDUCATION
INITIATIVE

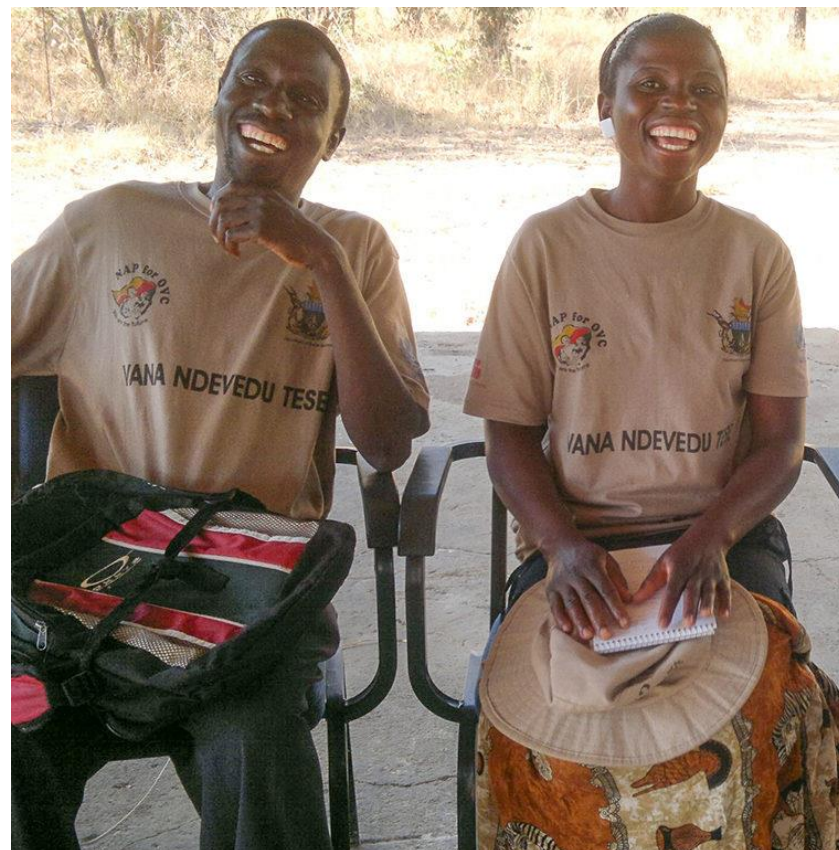
Our Work in Zimbabwe

- 2008 - 2013: testing and scale-up of **comprehensive OVC models of care** and **systems strengthening support** under PEPFAR/USAID OVC and other donor-funded programming
- 2011 - 2015: development of **Zimbabwe's national case management system (NCMS)**
 - 2011: design and pilot of case management system in one district
 - 2012-2015: national scale-up in all 65 districts of Zimbabwe
 - 2015: official adoption of NCMS by Government of Zimbabwe



Laying the NCMS Groundwork

- Recruited and trained 9,000+ community childcare workers
- Upskilled 150 social welfare workforce/cadres
- Developed and rolled out tools, SOPs, guidelines, and performance management framework
- Supported direct placement and support supervision of social workers in districts

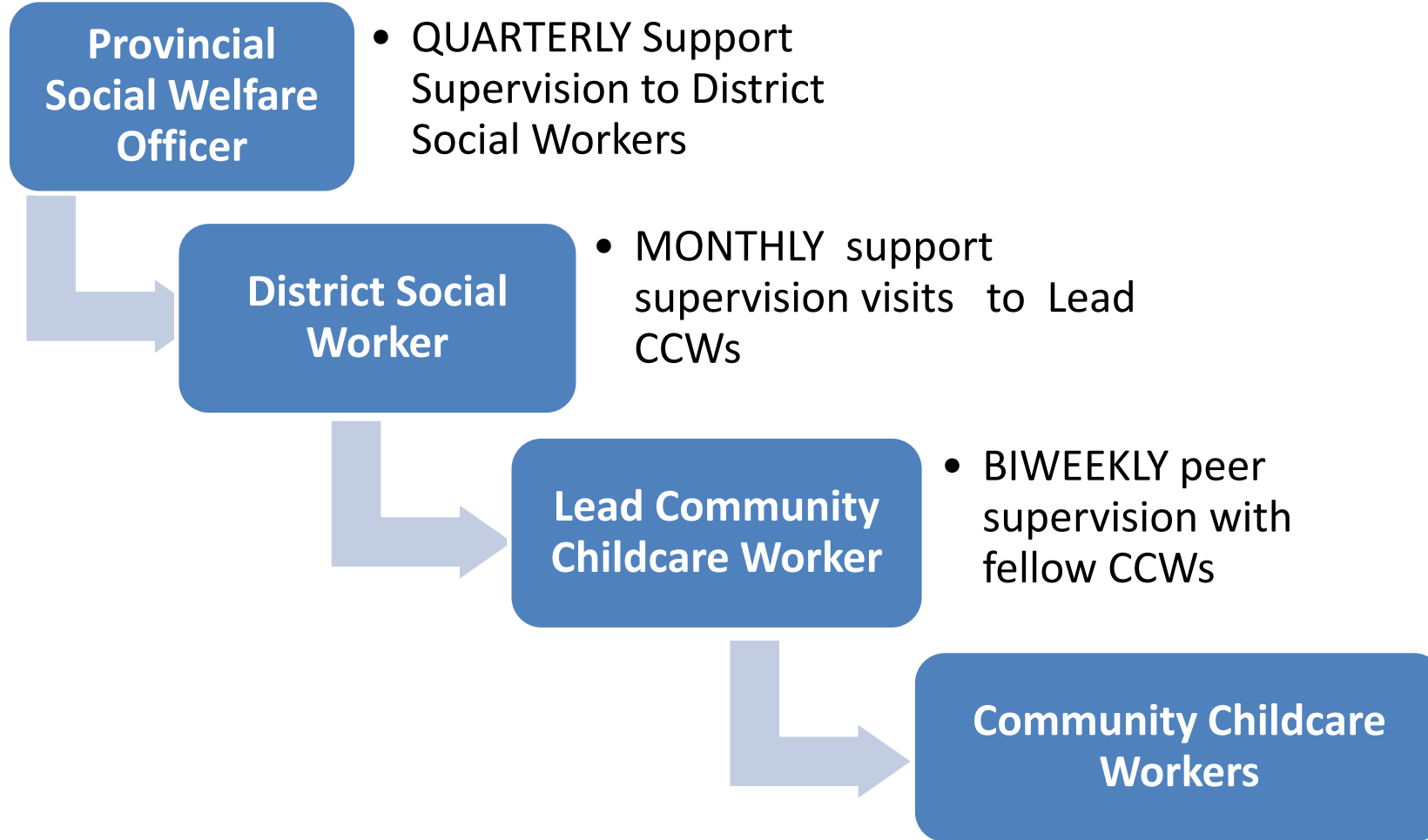


General Stressors for CCWs

- High caseloads
- Dealing with complex, difficult cases
- Fear of victimization, intimidation and harassment
- Cultural beliefs



Supporting Case Workers at All Levels



Added Stressors for CCWs

CYCLONE IDAI (2019)

- **Double Duty**: CCWs dealing with their own and others' loss of loved ones and loss of property and livelihoods
- **High caseloads**: Already high caseloads increased with this natural disaster

COVID-19 (2020)

- **Increases** in sexual violence cases
- **Limited contact** with children
- **Fear** of contracting the virus

Helping CCWs Cope: the Support Supervision Package

- Lead CCW-led peer supervision sessions:
 - Facilitated discussions with 5-8 CCWs
 - Members debrief difficult issues (i.e. sexual abuse, child marriage) to *diffuse stress*
 - Peer-to-peer learning to improve *coping and social work skills*
- Lead CCWs take up more challenging issues to professional social workers
- Peer supervision reporting tools tracks common issues and needed skills

COVID-19:

New challenges and new solutions

- Introduced **weekly clinical supervision checklist**:
 - staff wellbeing
 - fears
 - general stress related to working directly with children and families during COVID
- Promoting **self-care action plans**
- Delivering **virtual coaching and mentorship** via mobile phones
- Advocating for **upskilling clinic supervision skills** for social workers

THANK YOU!

The Bantwana Initiative of World Education, Inc.

For more information, contact:

Washington Jiri, Child Protection Coordinator

Bantwana Zimbabwe

e-mail: wjiri@bantwana.org

www.bantwana.org | www.worlded.org





Psychosocial Wellbeing For All Children

Peer Supporters – Part of the SSW

Date: 2 September, 2020

Presented by: Karesma Mushi



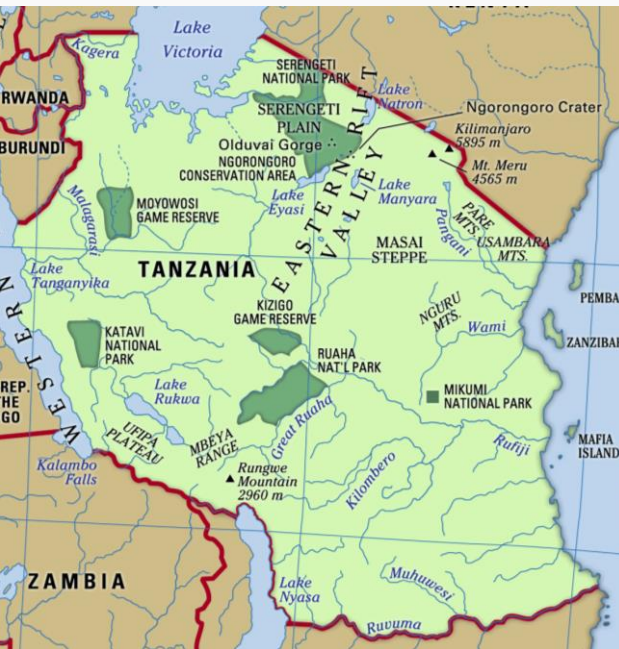
COVID-19 in Tanzania

- COVID-19 confirmed in Tanzania on 16th March 2020. 17th March - range of measures, including closing schools and colleges instituted but not a full lockdown.
- Tanzania government stopped reporting case numbers in May - the number of confirmed cases 509, recovered patients 183, and 21 deaths.
- 21st May President announced that colleges and form 6 students would return to school & sports resume from 1st June: international flights resume without quarantine from 27 May.
- 16th June, president announced all schools to re-open on 29th June 2020
- Everything back to normal now, still using masks and other prevention strategies
- According to MoH, COVID 19 has slowed down immensely
- People affected in different ways; physically, emotionally, socially.



SSW in Tanzania

Role in a time of COVID-19



- Two types of social service workforce: the government and non government workforce, rather than using the terms “formal” and “informal” workforce
- Both are supporting communities that are affected or fearful of Covid-19.
- Social service workforce - essential frontline role in fighting the spread of the virus - supporting communities protect themselves, distancing and solidarity.
- Social service workers are experiencing varying levels of stress and distress.



SSW in Tanzania

Gaps



- Though there are many trained social workers the government service is small.
- A team of Government Social Workers were trained by REPSSI before on responding to emergencies – have been training others in time of COVID-19.
- Also counselling people who were affected psychologically especially those who lost their relatives and those who were quarantined
- NGOs, CBOs have done most of the work including disseminating information about how take care, support for children when the schools were closed etc



- The aim of the READY programme is - Adolescents and young people (aged 10 -24) living with HIV are resilient, empowered, knowledgeable and have the freedom to make healthier choice and access services related to their sexual and reproductive health
- Implemented in four countries - Eswatini, Mozambique, Tanzania and Zimbabwe - by a consortium led by Frontline AIDS, including Y+, PATA, Africaid, CANGO and REPSSI
- The program aims to reach 30,000 adolescents and young people living with HIV in all countries



Adolescent Peer Supporters



Critical part of the SSW



- CATS - Community Adolescent Treatment Supporters - young people living with HIV aged 18 - 24 years old; not in school; literate; trained and accredited by Zvandiri; committed to improving the lives of other YPLHIV
- Lead support groups, conduct home visits, encourage YPLHIV, liaise between them & families; share up to date and correct information
- Advocate & speak out about the rights of YPLHIV
- Help other YPLHIV understand & accept their HIV status; start ART with understanding and confidence & adhere; feel cared for, understood, valued, supported, have purpose; with skills to keep themselves well



CATS during COVID-19



Continued support to their Peers

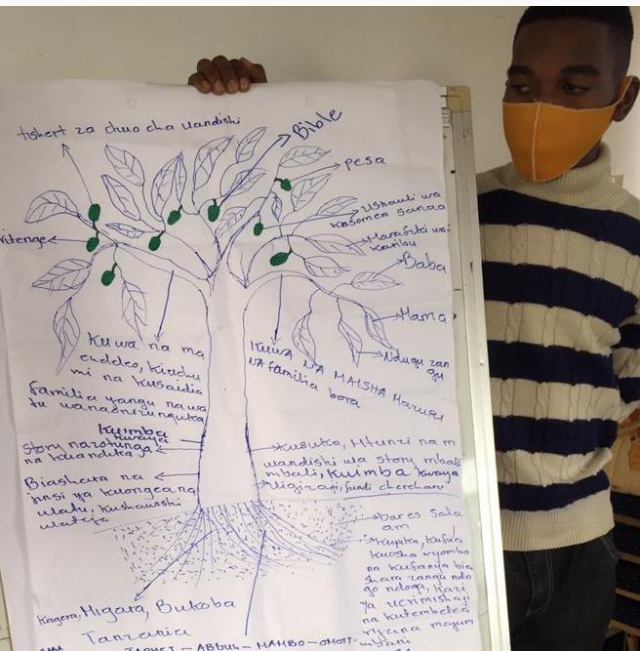


- Despite concerns about their own health – what will happen if I have 2 viruses? they worked from home from April to June
- Supported their clients through sms and whatsapp
- All CATS were trained on Psychological First Aid hence they were able to support their clients
- Formed whatsapp groups with other young people
- Encouraged them to access treatment
- Provided accurate information about COVID-19



Psychosocial Concerns

Affecting all YPLHIV



- CATS & other YPLHIV affected by many psychosocial issues (without COVID-19) e.g. stigma, rejection, struggling with disclosure; abuse from own family especially parents living with HIV who pour out own stress on children; abuse from partners & in laws especially if do not have a child
- Further concerns as a result of COVID-19 situation e.g. loss of interaction & support; loss of livelihoods & impact of poverty; loss of schooling for ALHIV in school



Psychosocial Support for CATS



From CBOs & FBOs



- CATS work with / supported by CBOs & FBOs in the community as well as health facilities.
- Regular, updated information on COVID-19 for themselves & to share
- Regular contact by phone / whatsapp
- Visited at home and supported to maintain contact with their clients – provided with airtime / data
- Had trainings, maintaining all precautions – in small groups & then bigger ones; provided with masks, sanitizer etc
- Explored own psychosocial stressors & sources of strength



“

The Youth is the hope
of our future.

”

Thank you
Asante Sana

FOLLOW US

ADDRESS

266 West Ave, Unit
Waterfront Office Park,
Randburg, South Africa
2194

PHONE & WEB

T: +27 11 886 1581

www.repssi.org

CONTACT PERSON/S

[Karesma Mushi](mailto:Karesma.Mushi@repssi.org)
Karesma.Mushi@repssi.org

or
Lynette Mudekunye
Lynette.Mudekunye@repssi.org
Or
info@repssi.org

SOCIAL MEDIA



@REPSSI



REPSSIHQ



@REPSSI



REPSSI CHANNEL



Regional Psychosocial Support Initiative



Mental Health and Psychosocial Support (MHPSS) at Save the Children

Presented by Jessica Tabler Mullis
On behalf of Aida Bekic



Staff Well-Being Guidance Note

MHPSS for Staff, Partners, and Frontline Workers

**GUIDANCE FOR
HUMAN
RESOURCES**

**GUIDANCE FOR
MANAGERS**

**MHPSS
APPROACHES
AND ACTIVITIES
FOR STAFF**

**GUIDANCE FOR
SELF-CARE**

**BUDGETARY
CONSIDERATIONS**

**FEEDBACK
(MONITORING)
GUIDANCE**



Examples of MHPSS Activities

- Professional Counselling Services (one-on-one and group; remote and in-person)
- Peer Support Groups (staff facilitated after short training, new manual to support)
- Staff Well-Being Retreats
- Space and Time for relaxation and social events (inside office, external, remote)

THANK YOU



Save the Children

**For more information, contact:
Aida Bekic
Senior Manager, Mental Health and
Psychosocial Support
Save the Children US
abekic@savechildren.org**



**Protecting the social service workforce: best practices including
mental health**

Q&A SESSION

**Please submit remaining questions through the
“Q&A” function on Zoom and we will address
during this session.**



**Protecting the social service workforce: best practices including
mental health**

QUESTIONS?

**Please submit any questions or comments after the webinar
to:**

OVCTASKFORCE@GMAIL.COM



Stay tuned for information on the next webinar!

OVC Electronic Case Management: Key Considerations