relief and social services programme

a guide to social work

june 2019
About UNRWA

UNRWA is a United Nations agency established by the General Assembly in 1949 and mandated to provide assistance and protection to some 5.5 million registered Palestine refugees. Its mission is to help Palestine refugees in Jordan, Lebanon, Syria, West Bank and the Gaza Strip achieve their full human development potential, pending a just and lasting solution to their plight. UNRWA services encompass education, health care, relief and social services, camp infrastructure and improvement, and microfinance.

Cover photo: Two Palestine refugees from Syria in their refugee camp in Jordan smiling to the camera. © 2013 UNRWA Photo by Alaa’ Ghosheh
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introduction

1. A reform of the Relief and Social Services Programme to strengthen its social service interventions was suggested in the frame of a programmatic review in 2010. In 2017, a consultative process within the Department has led to an agreement to streamline relief functions against more efficient approaches freeing up staff capacity to function as social workers. There was broad acknowledgment that social work interventions must be offered as a complement to in-kind and cash-based assistance to address non-material needs of Palestine refugees. Supporting individuals and families to better cope with challenging living conditions by supporting their psychosocial resilience appeared to be a service undervalued. While staff were keen to offer such services, the lack of an institutional framework offering capacity development, recognition, professional space and supervision had not supported any efforts that were undertaking by staff on an individual or ‘focal point basis’.

2. An agreement was reached to separate relief and social service functions leading to the establishment of an institutionalized social worker function, to be supervised by area social work supervisors. The introduction of these new staff functions to the department at field level are the guarantors of an institutionalized approach to social care provided by UNRWA. The conceptual and operational considerations according to which the social work structure becomes operational are laid out in this document.
problem definition

3. The concept of social work as applied by UNRWA through community based organisations between the 1990s and late 2010s showed its limitations. The concept that was developed against the backdrop of ‘community empowerment’ appeared in many instances to have come at the expense of quality services for some of the most vulnerable and socially excluded refugee populations, namely those living in camps, and in addition being affected by disabilities and severe poverty. Implementation of programmes through volunteers proved non-sustainable where organisations were not able to generate regular additional resources beyond the base funding received from UNRWA, while the qualification of personnel tasked with providing specialised services outside of any accountability framework are problematic and in the worst case, harmful to clients. The initial concept of creating centres for unconventional community work whereby volunteers reach out into the community were soon reversed to providing facility based specialised services mocking traditional standardised and institutional services – but without the required resources and necessary support systems such as those provided by governments. UNRWA proved unable to either ensure basic quality standards are met as a general understanding dominated whereby any type of low cost services were better than none, or to negotiate that activities offered were commensurate with the personnel structure and capacity of these organisations.

4. Largely, the institution-based approach of the community based organisations encouraged by UNRWA two decades ago in most instances did not produce the community and family level engagement that would find local means to effectively address social and structural impediments to what today is called a cohesive and inclusive community. They did provide legitimate socialising spaces for women to meet other women outside the home, and for a small number of disabled persons, low cost special education and rehabilitation services.

5. At the same time, UNRWA has become increasingly aware that its modest Social Safety Net Programme is unable to achieve its objectives of poverty mitigation leave alone reduction, and as such does not sufficiently cater for financial aspects of social exclusion and deprivation. The majority of UNRWA’s Relief and Social Service Programme staff have been employed to support household based poverty assessments and for administering the SSNP. And while this exposes staff to many observations in the poorest refugee households they visit realising that non-monetary engagement may be as important if not more, they do not have the skills, means or assignment to engage professionally and follow-up with individuals or families. Yet, they may find that these are in distress and requiring an external counselling support to address complex internal situations of distress within the family and its individuals.

6. There was no professional or even para-professional social work force to fill the gap that existed between the work of community based organisations and UNRWA relief social workers carrying out asset-based assessments of households to determine abject poverty status for possible inclusion in the SSNP should resources permit.

7. While poverty levels among Palestine refugees across all five fields are very high – and in some instances higher compared to their host environment – it was also acknowledged that psycho-social problems including issues of violence, abuse and neglect in the communities and households themselves all undermine the ability of individuals to better cope in situations determined by social and economic hardship.

8. In 2017, UNRWA decided to reform its RSSP with the centrepiece being a social work reform. What was identified as an underutilisation of UNRWA relief and social work field officers, was to be transformed into a work force that could support individuals and families in better understanding their opportunities and taking control over potentially destructive dynamics. This work force should operate alongside UNRWA service provision programmes and support most vulnerable Palestine refugees affected by conditions of social and economic stress compounded by external factors such as conflict, displacement and, in many instances, the absence of legal status that deprives them of protection within the framework of civil rights.
the concept of social work within the frame of the agency’s relief and social services programme

9. “Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing.”

10. This definition implies that social work equally engages at the individual as well as at the community level, and that it considers material, cultural as well as psychological aspects in trying to find ways of well-being including in situations of economic, and social hardship. Given the range of aspects and consequently perspectives applied in social work, this discipline has had the advantage but also faced the challenge in bringing together different sciences, challenges and opportunities existing within the society it operates.

11. The concept of social work is tied to the concept of society as a determining factor for the individual, and the state that has the responsibility to ensure a protective and enabling environment for the individual. Social work does not depart from an understanding whereby it is an individual’s fate or sole responsibility to develop, grow and socialise. However, it is also acknowledged that in general modern societies value self-determination and self-responsibility of individuals within the social collective that assures basic human rights of every person as the main regulatory actor. Social work is further based on the understanding that an economically deprived person shall have the same rights to education, health and development as a person with material wealth, and that a disabled handicapped person has the same right to respect and social and economic participation as anyone else. Old people merit a place in society as do the young. Men and women have equal rights and deserve equal opportunities.

12. Social workers protect these elementary human rights, and wherever possible, enhances awareness and application and will attempt to compensate failures and inequalities in a given social context. Social work is being carried out on what may be referred to as the ‘fault lines’ of society, where there is conflict. In abstract terms, it mediates between the needs and wishes of individuals and the capacities of the collective to fulfil these needs.

13. Social work has many historical roots. Its professionalization advanced towards the end of the 19th century in Western societies that emancipated the discipline from charitable undertakings that are a prevalent aspect of many of the main religions around the world. It is not possible to outline a history of social work here. A short discussion of some of the main issues, dilemmas and contradictions that have come to shape social work shall nevertheless be touched upon here in as far as they have also contributed to shaping the specific understanding of UNRWA’s approach to social work as having emerged from many discussions and workshop throughout the course of 2017.

14. Charity, social regulation and the problem of material help. Charity is based on the understanding – prevalent in most of the world’s main religion’s – that the privileged should help the less privileged with the material transaction reflecting in accumulation of some form of credit for otherworldly gains on the side of the one that gives with no obligations on the side of the one that receives but to receive what is given. There is thus no specific educative message or purpose initially in this act of giving, no intention of control. As charity becomes a more organised undertaking, performed by welfare societies or even states, its transactional logic also becomes more sophisticated. Definitions of who has the right to receive what type of benefit are tied to expectations of performance related to an objective of the transaction itself such as moral, behavioural or educational outcomes. The one that gives is in a position of power deciding on who merits help and puts the resources to good use. In this equation, charity, social inequality and social control become contested sides of the same coin. Within such a frame, social work is employed within given power structures of a system managing social benefits. Social work here is about facilitating a mechanism of identifying persons that merit benefits that in return accept the conditions based on which they receive the benefits.

15. States may regulate the system of benefits through laws that specify entitlements and eligibility for financial and social benefits. The social worker in this system represents the authority that sets the conditions of the benefactor vis-à-vis the recipient. Social work becomes an undertaking of social judgement, control – and eventually disempowerment of the recipient. This system on the one hand promotes fantasies of an all-powerful authority or state – of which the social worker is the implementing representative – that can help, but help is applied on a selective basis according to criteria that are outside the definition power of the recipient.
16. This is the relation that Palestine refugees experience when relief social workers appear in their houses to assess or re-assess eligibility for UNRWA SSNP. It inscribes a hierarchical and judgemental relationship between UNRWA staff and refugees that fundamentally prevents the refugee from building up a sense of empowerment necessary to take control of his or her situation, which is a precondition for experiencing a sense of well-being. The introduction of the proxy-means testing approach to determine poverty levels has further emphasised this relation where even relief social workers feel disempowered as they have been confined to extracting data from households with eligibility being calculated through a formula that remains undisclosed to prevent manipulation of results.

17. Modern social work has tried to overcome the dilemma of on the one hand acknowledging the need for material support when it comes to supporting economically deprived persons associated with disempowering processes that place clients on a receiving end only, while on the other hand having to address non-material needs through strengthening self-determination, psychological resilience and social agency of their clients.

18. Conceptually, the dilemma can be overcome if material support is allocated a function alongside non-material interventions, i.e. where material support no longer is the main means to achieve an objective, but where it becomes a complementary measure in support of self-determination and empowerment of individuals. As much as possible, the social control aspects inherent in charitable programme approaches need to be rolled back to make way for addressing more holistically the social, psychological, legal, educational etc. problems faced by people alongside the economic ones.

19. In this sense, the ways in which material support is availed should be subsumed under the premises of an overarching programme that supports the social inclusion and facilitates efforts to strengthen self-determination and empowerment – and through this the well-being - of the programme’s clients. A critical change to the Agency’s programme and staffing structure in response to the above is (a) the separation of the role of relief worker (engaged in the management of social transfer programmes offering material support) and that of the social worker; and (b) a revisiting of UNRWA’s approach to targeting and eligibility determination based on the application of a proxy-means test as the sole tool to determine inclusion or exclusion from social transfer programmes.
determining boundaries: help as a profession versus help as voluntary social commitment

20. Social work has roots in many different types of social commitment and community engagement practiced throughout times and around the world. Some religions have encouraged and promoted community level engagement and created sometimes life-long commitments to quasi-professional activities among its members. The health profession with its focus on care and nursing looks back to thousands of years of professional and para-professional healing. But whereas volunteerism and para-professionalism in the area of health have decreased, the field of social work still remains to be populated by significant numbers of volunteers that offer their time and resources. The comparatively new trends in determining “professional” social work as opposed to volunteerism has not yet been concluded as social work, given the broad range of topics it covers, is still in the process of delineating its ‘borders’ between professionalism and volunteerism.

21. The simultaneous reality of volunteers alongside professional social workers provokes a constant challenge to the work of social workers. The social worker, like the volunteer, has to apply empathy, commitment and friendliness as a core attitude to her or his work. A key difference, however, is that the social worker will pay attention to avoiding relations of dependency and to ensure that clients are aware of their rights, obligations and options. It is exactly here where the professional obligation of the social worker lies to determine the border between charitable dependency and professional empowerment of clients. The social worker must promote empowerment of clients and manage the risk of unequal power relations. In comparison, the relationship between volunteers and clients are all too often determined by charitable dependency dynamics. The professional social worker is not neutral to the personal suffering of clients, but has learned to suffering in a way that maintains and fosters respect for the right to self-determination of the client, especially when the client is in need of help. An important role of the social worker then becomes the facilitation and accompaniment of volunteers to guide them on appropriate forms of engagement.

22. In the fields of UNRWA operations, ‘social work’ has yet to be established as a widely accepted and available academic discipline with clear employment profiles. UNRWA’s concept of community-based organisations based on volunteers has been an attempt to channel available volunteerism into a structure for community support. But at the same time, UNRWA has insufficiently invested in offering professional space, skills training and institutional structures for social work through its own directly implemented programme or to ensure that qualified capacity is available to guide volunteers of implementing partners.

23. UNRWA will increasingly employ social workers academically pre-qualified as social workers in parallel to graduates being available in the labour market. But until such times, it will commit to ensuring that its existing work force, which can count on years of community level experience, is equipped with the required skills and knowledge and the institutional frame to perform basic social work functions with the aim to ever increasing professionalism.
the role of social work in social assistance programmes: material assistance versus psychological support versus social change – and what is empowerment?

24. Social work in UNRWA will be implemented as a combination of social and psychological support interventions alongside material assistance through cash transfers. It is understood that material assistance alone fosters dependency, while the complementary intervention of social works aims at self-dependence and psychosocial wellbeing of clients. At the same time it is acknowledged that the exclusive use of psychological counselling, a central element in social work, would ignore pressing material and financial needs that also have to be addressed. However, only advocating for social change does not directly change the social reality of an individual in the short term. Therefore, social work will always have to remain engaged at three levels, material assistance programmes, advocacy for social change, and psychosocial interventions at the micro-social level.

25. Social work has to consciously occupy all three different aspects determining the dynamic realities of an individual:

The psychosocial space

livelihood/infrastructure

individual processes social processes

“Empowerment” contains the word “power” which is associated with different meanings, including agency, strength, capability, competence, authority, vigour etc.

26. Power at the level of the individual refers to the realisation that an individual’s social position is shaped by its ability to influence and change their lives, to act, to make decisions and solve problems.

27. Power at the level of the collective refers to the realisation that as an individual one is also part of a social group and as such agency and change can be exercised as part of a collective process of thinking, acting and networking together.

28. Power associated with organisations including states is supported by structures, processes and functions that serve as means to organise collectives and individuals. The nature of this type of power may be experienced by different individuals or groups within a range of being enabling/nurturing to marginalising/oppressing. The aim should be to allow for broad and inclusive participation in determining the scope and nature of power exercised through and by organizations and states.

29. Social workers will discern the lack of sense of power at any of these levels as far as they impede on the wellbeing of clients and will identify opportunities for strengthening agency or empowerment.

30. Empowerment can manifest itself in various forms:

- Personal empowerment: increasing self-confidence, self-assurance, self-respect, opportunities to experience wellbeing and manage crises.
- Legal empowerment: exercising citizenship rights, access to justice; claiming protection through formal law enforcement.
- Social empowerment: visibility, social presence, social acceptance and respect; participation in social gatherings, processes and networks.
- Political empowerment: participation in political groups, parties and processes.
- Cultural empowerment: shaping cultural definitions, values and norms; influencing symbolic order.
- Economic empowerment: access to property, means of production, employment; financial and economic literacy; decision-making power over resources; access to insurance, social assistance and security; reduction of economic dependency.
context and relevance of social work within unrwa

31. Everyday life realities for most Palestine refugees in the five fields of UNRWA operations – Jordan, Gaza, West Bank, Lebanon and Syria – are challenging. High unemployment and poverty rates, life in segregated camp environments, occupation, displacement, armed conflict, destruction, death, forced migration, separation, lack of civil status and state protection, violence and loss more often than not trail the paths of several generations of refugees since 1948. These experiences have shaped their collective and individual memories, sometimes merging into one. And while external factors also affect host communities, it is the refugee community, even if in the fourth or fifth generation, where a sense of insecurity, volatility and exposure is amplified even where safety was assumed. The continued lack of a political settlement for Palestine refugees – has resulted in an uneasy status and identity of this population weighing heavily on their personal and collective sense of security and optimism. This is compounded by trends of hostility against ‘foreign’ populations, migrants and refugees in a climate of nationalist and chauvinist politics.

The necessary ingredients for empowerment – as listed above – are often absent when it comes to their identity as Palestine refugee in relation to their social, political and economic environment. The Palestine refugee community has experienced that times of political and social acceptance and integration can be replaced practically overnight by loss of respect, segregation, persecution and expulsion whenever the page of political association with the “Palestinian cause” turns. The sense of political disempowerment – for various reasons – is high. The sense of being a victim has become a collective narrative with critical implications for the sense of self of the individual.

32. The experiences of now at least three generations of Palestine refugees that were scattered across a politically diverse and turbulent Middle Eastern region will translate themselves into psychological processes that affect behaviour within the community and between individuals, i.e. eventually in relations between parents and children, husband and wife, between family members and neighbours etc.

33. The social experience of threat turns into a psychological state of fear; the experience of destruction turns into trauma; and the experience of loss turns into grief. In the worst case, where Palestine refugees experience long-term or even chronic situations of insecurity as existential threats, this implies a psychological reality of permanent fear. Permanent fear is not a mechanisms of self-protection, but becomes a damaging and inhibiting factor in everyday life. Where chronic threats produce chronic fear, the psychological response becomes an automatic function where fear starts reproducing itself outside actual external threats over time.

34. It is a sad reality that most refugees – either personally or as part of their family history – have experienced severe trauma. This means that extreme feelings of hope- and helplessness, of terror and impotence have become a regular part of the psychological structure of many Palestine refugees. Frequently experienced loss – of home, property, status, employment, loved ones, and the subsequent – often complicated – process of mourning is an on-going reality in many lives where individual and collective experience merges.

35. These realities affecting Palestine refugees today as they are living in Gaza, the West Bank, Lebanon and Syria, but also Jordan, should not be an underestimated backdrop against which UNRWA social workers will engage with the community. And not to forget – UNRWA social workers as a member of the same community, will themselves be affected by the same political, social and psychological dynamics that need to be taken care of as well.

36. The goal of wellbeing and protection of basic rights under such circumstances may often not be achievable. Social work will not be able to “solve problems” in such contexts where the structural and political impediments are too significant. But it can play a role to facilitate identifying space for survival under extremely adverse conditions, and help maintain hope where perspectives are grim.
principles and objectives – and obligations

37. UNRWA is committed to provide social work interventions to families facing complex psycho-social situations often compounded by external factors such as economic deprivation and conflict. The aim of social work is to support individuals and families to identify causes of internal distress that is amplified by external factors, and their options for addressing causes of distress through means available to them in a manner that increases their well-being.

38. The underlying concept to social work interventions is mental health and psycho-social support (MHPSS) which UNRWA is committed to implementing across all programmes.⁵ The Relief and Social Services programme is integrating a MHPSS approach to its aim of professionalising social work as implemented through its social workers. Social workers are assigned the role of agents of change and empowerment committed to enhance and facilitate as much as possible the psycho-social well-being of Palestine refugees through interventions that help to develop their own psycho-social resilience, address their basic needs, obtain necessary social services and develop the best possible perspectives of human development.

39. The term psycho-social underscores the close connection between the psychological aspects of our experience (e.g. our thoughts, emotions and behaviour) and our wider social experience (e.g. our relationships, traditions and culture).⁶ It refers to the dynamic relationship that exists between psychological and social aspects of development, which continually interact with, and influence each other. Social work consciously integrates different aspects of the psychosocial field, considering personal, social and material dimensions of people's realities.

40. The concept of social work does not pathologise or medicalise suffering in a way that would label individuals or families as “a problem”. This would be both enforcing a sense of social exclusion and disempowerment. It feeds into a culture of blame. The concept of social work instead understands suffering and distress as a starting point from which through an analysis of the whole context within which an individual and family finds itself that also allows to include an identification of people's strengths and resources, so as to facilitate a sense of empowerment in every way.

41. In essence, social work advocates a conceptual shift towards a contextualised approach to psychosocial support. A principled approach adopted by a service provider:

<table>
<thead>
<tr>
<th>Principle</th>
<th>Obligation</th>
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<tbody>
<tr>
<td>Child/person-centred</td>
<td>To ensure the best interest of the child/person</td>
</tr>
<tr>
<td>System-centred</td>
<td>Working with individual children, adults and families (all referred to here as ‘clients’) in ways which recognise and address the context of people’s presenting difficulties</td>
</tr>
<tr>
<td>Holistic care</td>
<td>Providing a range of services which are coherent, integrated and which function in a collaborative and interdisciplinary way to serve the best interest of clients</td>
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<tr>
<td></td>
<td>Providing services which are respectful and protect the dignity of each individual.</td>
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<tr>
<td></td>
<td>Providing services which recognize and value the importance of relationship-building with clients as central to all assessments and interventions.</td>
</tr>
<tr>
<td>Strengths-focused</td>
<td>Focus on strengths, resources and resilience of all children, adults and families, not only on needs and difficulties</td>
</tr>
<tr>
<td>Empowerment-focused</td>
<td>All interventions are oriented towards the enhancement of self-determination of clients</td>
</tr>
<tr>
<td>Rights oriented</td>
<td>All interventions are rights based and oriented towards the equality of citizens before the law</td>
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rules of conduct

42. The above principles and related obligations provide the frame for a series of basic rules of conduct guiding social work interventions as per the following:

1. The best interest of the client shall be of primary consideration in all actions and decisions.

2. The views of the client must be heard, given regard and be respected.

3. All interventions shall consider the holistic needs of the client including their educational, psychological, physical, social and spiritual development, and their family and wider social, cultural and economic context.

4. All professional practice with adults, children and their families shall be non-discriminatory and all forms of discrimination identified shall be monitored, addressed and prevented.

5. All professional practice shall be culturally appropriate, gender sensitive and respectful.

6. Do no harm: all interventions should be carried out to provide maximum support and benefit and do no harm. All professionals engaged in social work and providing psychosocial support have a ‘duty of care’ towards each person and family member that has come to be part of their professional work assignment. This requires that every professional staff member must take reasonable care to support their clients and protect them from foreseeable risk of harm.
standards

43. The above listed rules of conduct can be translated into standard practices for social workers to be adhered to and applied during their professional interventions.

<table>
<thead>
<tr>
<th>Standard</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td><strong>Standard 1</strong></td>
<td>Ensure informed consent to PSS activities (full assessment, interventions, referrals etc.)</td>
</tr>
<tr>
<td><strong>Standard 2</strong></td>
<td>Respect the privacy of the client and family and the need for safety in PSS/counselling/supervision activities, ensuring confidentiality of information acquired in the course of their work, except where legal and UNWRA policy requirements demand otherwise; the sharing of information is required to address immediate or anticipated serious threats to the safety and/or wellbeing of the client or their families.</td>
</tr>
<tr>
<td><strong>Standard 3</strong></td>
<td>Monitor and respond to the protection needs of children and adults (with respect to risk of harm – including risk of suicide, self-harm, neglect, abuse, exploitation, harm to or by others) in accordance with the policy and procedures of UNWRA.</td>
</tr>
<tr>
<td><strong>Standard 4</strong></td>
<td>Ensure that children/adults who are particularly vulnerable have in place additional safeguards (in accordance with UNWRA policies) to protect their welfare.</td>
</tr>
<tr>
<td><strong>Standard 5</strong></td>
<td>Ensure non-exploitation of the child/adult or their family, emotionally, financially or otherwise.</td>
</tr>
<tr>
<td><strong>Standard 6</strong></td>
<td>Practise within the limitations of your competency.</td>
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<tr>
<td><strong>Standard 7</strong></td>
<td>Refer to and consult others more competent/knowledgeable about particular issues which are outside your competency.</td>
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<tr>
<td><strong>Standard 8</strong></td>
<td>Use an ethical decision-making process in resolving conflicts and dilemmas which arise in PSS work.</td>
</tr>
<tr>
<td><strong>Standard 9</strong></td>
<td>Ensure record-keeping which is appropriate, respectful of clients and colleagues, confidential and securely held.</td>
</tr>
<tr>
<td><strong>Standard 10</strong></td>
<td>Ensure ongoing professional development to enhance professional knowledge and skills.</td>
</tr>
<tr>
<td><strong>Standard 11</strong></td>
<td>Ensure that personal ‘fitness to practise’ is maintained at a level that enables professional, ethical and effective service-delivery.</td>
</tr>
<tr>
<td><strong>Standard 12</strong></td>
<td>Ensure that professional relationships with colleagues in teams and in work settings are conducted with mutual respect, professionalism and striving for good communication and collaboration.</td>
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dimensions of the unrwa approach to social work

Psychosocial and multidimensional approach to social work

44. As explained above, the UNRWA approach to social work is grounded in a basic psychosocial approach. And it always adopts a holistic understanding of a client’s reality considering psychological, social, cultural and economic dimensions simultaneously.

45. The operational tool of social work is case work. This implies assessing the client’s understanding of his or her situation together with the client. The assessment follows methods associated with basic psychosocial assessment approaches. In rare cases, and where advanced skills can be offered by social workers, these may also be specialised psychosocial assessments. The social worker decides together with the client what should be done, develops a case intervention plan and potentially refers where needed and possible. The Relief and Social Services Department has agreed on a series of elements that shall guide the Agency’s approach to social work.

Family-based approach to social work

46. The unit that social work focuses on is the family. Individual clients are always seen as a member of a family system. Therefore, all interventions related to an individual client will comprise interventions including the family or specific family members depending on the assessed situation. The assessment will focus on understanding intra-family relationships and the functioning of the family system. Any care plan will be based on an assessment of the relations between individuals within the relevant family system (nuclear and/or extended family or parts thereof) and a care plan may include the whole family system.

Community orientation

47. Social work, especially in its preventive aspect, is always oriented towards the community. Communities are even more complex systems compared to the family system and an understanding of community structures and functions related to the client family and individuals in consequence requires longer-term familiarity with the client context. In the frame of social work, community engagement is understood as identifying entry points for leveraging support structures and functions that can be provided by the community with regards to the client situation and needs.

Working on social strengths I (resilience and social ties)

48. A key objective of social work is strengthening resilience of its clients. However, it is important to note that this does not simply imply creating strength in the face of adversity. Nor does it imply a tacit acceptance of structural and functional circumstances of what leads to the distress of the client in the first place. Resilience implies a combination of individual abilities and helpful social ties, networks and opportunities – it something that continuously needs to be worked on through the interaction between the individual client and the social environment.

Working on social strengths II (resilience and healthy vulnerability)

49. When facing realities of fear, trauma and grief, the ability to experience healthy vulnerability is an important element of psychosocial resilience. Human beings are not stone hardened. When experiencing loss and destruction, people need to grieve. Not being able to do so because of social or political constraints can lead to serious psychological and social harm. The ability to experience vulnerability through grief is linked to the capacity to establish and maintain social relationships as it reflects the ability to be empathetic and express feelings. Vulnerability is thus not an expression of weakness but of a sustained relationship capacity, and essentially of being human. As social work helps clients to develop strength in the face of adversity, it facilitates space for being weak, for sharing experiences that hurts and as such overcoming or avoiding isolation and loneliness.

Working on social strengths III (recognition and acknowledgement)

50. A key part of social work focuses on recognition and acknowledgement. Many conflicts within families (and communities) can be traced back to the lack of recognition and acknowledgement experienced by individual family members leading to a sense of low self-confidence and low social status. Clients do not expect that social workers magically change their situation, but they do expect being heard and listened to.
Being able to experience that feelings of anger, rage, despair, hopelessness and impotence are acknowledged, already creates a frame for containment that may facilitate further processes.

**Working on social strengths IV (appreciating difference and healthy conflict capacity)**

51. Where the social or political context is determined by continuous external (and sometimes internal) threat or even terror, the appreciation of differences in needs and opinions becomes difficult and so does ensuring equality of treatment. Where everyone is expected to think and act the same, any tolerance for differences in behaviour, needs and convictions disappears. In the long run, this implies the loss of healthy conflict capacity (i.e. the capacity to work out differences in a peaceful manner) and feeds authoritarianism and violence. Social work must pay attention to such dynamics within families, in particular where environments are prone to foster these, but also with regards to interactions between individuals, families, communities and institutions in the sense of nurturing a healthy conflict capacity.

**Social work staffing structure – protocol of interactions**

52. **Field social services officer**

Key functions: Provides overall direction, guidance capacity development and serves as main focal point for social work within the department as well as with other departments and external partners.

S/he interacts with:

a) **Chief, relief and social services and deputy chief**
   - Management and distribution of staff including filling vacant posts
   - Catch-up or onboarding training cycles for social workers
   - Social work case profiles, issues, interventions required: consolidate analysis and suggests communication, advocacy, interventions including engagement with the front office and headquarters as applicable

b) **Area social work supervisors**
   - Containment, coaching and guidance on professional management of social workers and handling of (high risk) cases when and as required
   - Bi-weekly consultations with all Area Social Work Supervisors

- Management and distribution of staff including filling vacant posts
- Agrees on requirements for community interventions and partnerships
- Links up with Gender and Disability Mainstreaming Officer when and as required

c) **Gender and disability mainstreaming officer**
   - Discussion of all matters related to partnerships and targeted technical support to social workers
   - Consolidation of an agenda related to handling of GBV cases

d) **External to UNRWA**
   - Fostering of partnerships with potential local partners for referral and service delivery

53. **Area social work supervisor**

Key functions: Provides guidance, containment, capacity development to social workers and acts as manager of high risk cases reported in the area.

S/he interacts with:

a) **Chief Area Officer**
   - Discussion of incidences involving/affecting social workers and the community
   - Briefing on area specific partnerships for referral and service delivery
   - Ensuring that responsibilities and limitations of social work are understood
   - Engagement on security related matters affecting social workers as and when necessary

b) **Area relief social services officer**
   - Data collection and analysis activities
   - Interrelations between relief workers and social workers
   - Administrative and logistical coordination of respective support to social workers (cars, office, stationery etc.)
   - Organize monthly meeting with relief and social workers to exchange on specific cases

c) **Social workers**

Bi-weekly joint meetings with all social workers to discuss work challenges and experiences
c) Social workers

Bi-weekly joint meetings with all social workers to discuss work challenges and experiences
- Bi-weekly meetings with individual social workers for containment, and where and when required for coaching (such as with new staff members) to perform client centred and strengths-based social work interventions.
- Encourages independence and growth of social workers to develop care plans
- Observation of any burn-out syndromes among social workers and respective intervention
- Assignment of management/case work related to high risk cases

2) Conferencing on high risk cases in case these are assigned to the social worker
   i) Organization of community based interventions where appropriate

b) Social workers

1) Peer-to-peer support to self-reflection and containment
2) Regular sharing of professional experiences on a bi-weekly basis facilitated by the area social work supervisor
3) If required, joint management of specific client cases

d) Relief workers

- Exchange of information on clients in the event of assumed or identified severe abuse and exploitation of children, GBV and suicide attempts
- Referral of clients for social work interventions provided there is consent from the client

e) Gender and disability mainstreaming officer

- Seeking technical advice on management of gender and disability related cases

f) External to Relief and Social Services

- External partners for referral/service delivery
- Area Education Officer and Area Health Officer for sharing of information and case management/referrals
- Field legal and field security officer for feasibility assessment of high risk case intervention plan (and front office if and when required)
- Field security officer in case of threats to social workers
- Any staff across the agency assigned to support high risk case intervention plan

54. Social worker

Key functions: Engages in social work with clients to develop care and intervention plan on a participatory basis. Provides containment and support to peers.

S/he interacts with:

a) Area social work supervisors

1) For containment and case discussion in selected cases when and where required in addition to bi-weekly individual and group meetings
footnotes

1 Social Development Direct: Review of the UNRWA Relief and Social Services programme (2010).
2 Lesley McCulloch: Community Based Development. Consultancy report for UNRWA (2014).
4 Definition of social work as approved by the International Federation of Social Workers (IFSW) General Meeting and the International Association of Schools of Social Work (IASSW) General Assembly in July 2014.
5 UNRWA Mental Health and Psycho-Social Support Framework, June 2017.
6 Inter-Agency Network for Education in Emergencies (INEE).
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