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**Joint Learning Initiative
on Faith & Local Communities**
Strengthening Evidence-Based Faith Engagement

POLICY PAPER

**Culturally Sensitive
Mental Health and Psychosocial Support Services
(MHPSS) In the Syrian Context**

Findings Of a Research Capacity-Sharing Project

A Policy/Practice Paper

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• Introduction

1.1. Why culturally responsive and faith-sensitive MHPSS in the Syrian context

An increasing number of recent studies on mental health and psychosocial support (MHPSS) points to the importance of cultural adaptation of MHPSS programmes to suit the context in which they are applied. There is a significant need for MHPSS interventions in Syria and Syrian refugee communities in the region; however, culturally adapted approaches are rare, with most Syrian MHPSS professionals applying frameworks developed in the Global North. While results in the sector are often measured based on the number of beneficiaries reached, it is often unclear what impact the lack of cultural adaptation has on people's lives. If we are to measure impact both in terms of quantity and quality of interventions, a focus on cultural adaptation is key. This policy/practice paper therefore focuses on developing culturally adapted MHPSS interventions for Syrian communities affected by the ongoing conflict and displacement, in order to better understand the impact of cultural adaptation on people's mental health and psychosocial wellbeing.

1.2. Why research capacity-sharing

The project was based on a research capacity-sharing approach. The research capacity-sharing with MHPSS professionals from Syria aimed to help build their research skills, enabling them to conduct research and produce evidence that is based on local experiences and competencies. The project was based on the belief that belonging to the same community as their research participants, Syrian researchers working on MHPSS in Syria and amongst Syrian refugees are best placed to produce the evidence that would then allow them to develop and modify MHPSS programmes that serve the interests of Syrian beneficiaries. The paper is based on a one-year project, which was part of a broader, more long-term collaboration between Syria Bright Future (SBF), a Syrian NGO that has been working on MHPSS in the Syrian context since 2012, and the Joint Learning Initiative on Faith and Local Communities (JLI), a network focused on the collaborative production of evidence on the role of faith in local-international partnerships between researchers and practitioners.

1.3. Summary of findings and ways forward

There is a distinct lack of knowledge of the concept of cultural adaptation amongst Syrian MHPSS professionals. Systematic practical training on cultural adaptation does not exist, despite calls for it in some existing programmes. There are cases of erroneous practices of cultural adaptation that may harm beneficiaries. For example, this includes the assumption that all Syrians have the same cultural background and beliefs, and therefore require the same type of MHPSS. This oversimplification may lead to ineffective or even harmful interventions, as it fails to account for the diversity within the Syrian population and the unique cultural factors that may impact individuals' mental health and wellbeing. Despite these existing gaps, overall there seemed desire by practitioners to obtain training in cultural adaptation. For example, practitioners were motivated to acquire training in basic sharia sciences and cooperate with religious bodies to support MHPSS work. At the same time, there was also resistance to cultural adaptation. For example, almost half of the MHPSS workers we spoke with opposed the presence of a religious/spiritual counselor to provide service in mental health centres. Similar numbers of MHPSS workers indicated that maintaining neutrality with respect to religious beliefs was essential, while simultaneously ensuring that nothing contradictory to those beliefs is presented.

Practitioners and researchers in the field of MHPSS should review existing programmes and modify them as necessary to be appropriate to the Syrian context. This must be supported by a thorough reflection of the concept of cultural adaptation in the Syrian context, which is characterised by a diversity of religions, cultures and customs. Civil society organisations and the media can help raise awareness of culturally adapted MHPSS. Further research is needed to develop effective and culturally sensitive MHPSS interventions for Syrian communities.

• The Challenge

2.1. A lack of culturally sensitive MHPSS in the Syrian context

Over twelve years following the outset of the Syrian revolution and the war that followed it, Syrians' MHPSS needs have increased significantly. This has been reflected in a growing number of research-based publications on the question of MHPSS, culture and faith in the Syrian context, with an increasing number of researchers calling for culturally responsive and faith-sensitive MHPSS services. The terms and concepts referred to vary, with researchers calling for approaches that consider localisation (Hassan et al. 2016; Yalim 2019; Hamza and Hicks 2021), faith/religion (Hasan et al. 2016), culture/socio-culture (Yalim 2019; Al Laham et al. 2020), community (Latifeh and Dashash 2016) or holistic ways of working (Maconick et al. 2020). However, the underlying idea is the same: we cannot simply assume that global MHPSS frameworks (which are often produced by global north and secular practitioners) can be applied anywhere without adaptation to the socio-cultural realities of the individuals and communities in a given context. The findings of these researchers reflect the experience of MHPSS practitioners on the ground, such as SBF. In order to develop culturally responsive and faith-sensitive MHPSS approaches suited to the Syrian context, evidence on existing practices and beliefs about the role of cultural adaptation in MHPSS is needed.

2.2. A lack of evidence and research skills

While there is some research on cultural adaptation of MHPSS in the Syrian context, overall there are very few in-depth studies on the topic. From a practical point of view, the current evidence base is not strong enough to inform effective practice. While some scientific research has been conducted within universities, it often appears to be disconnected from practical applications and seems to primarily serve the purpose of obtaining academic degrees. The connection between these research endeavors and practical applications is often tenuous. Moreover, the majority of the studies employ quantitative research methods, which may not always be well-suited for MHPSS research, especially when the focus is on culture. To most Syrian MHPSS practitioners, the idea of cultural adaptation is a new concept, with no or little prior training or research exposure. Most research on the topic is conducted by academics (usually based in the Global North), and most MHPSS professionals have little to no experience in conducting research on this topic themselves. Research agendas and approaches on the topic are therefore rarely shaped by Syrian practitioners themselves.

• Our Approach

Our approach aimed to address the gaps in the areas of awareness, evidence and research skills on cultural adaptation of MHPSS in the Syrian context by emphasising community participation, collaboration between local, regional and international partners, and research training for Syrian MHPSS professionals. In response to the lack of culturally responsive and faith-sensitive MHPSS in the Syrian context, we focused on developing evidence on culturally adapted interventions that take into account the local context and cultural beliefs of the beneficiaries.

3.1. Collaboration between SBF and JLI

Our work sought to take a culturally responsive and faith-sensitive and evidence-based approach to ensure that the interventions developed were effective, appropriate, and sustainable for the Syrian context. SBF's collaboration with the JLI helped to ensure that the interventions were grounded in an evidence-based understanding of the cultural and religious factors that influence mental health and wellbeing among Syrians. To address the lack of evidence and research skills, JLI offered a three-part research training to the SBF team and a group of selected Syrian MHPSS professionals. This training aimed to support the group in strengthening their research skills in order to help them contribute to the existing evidence base on MHPSS in the Syrian context. Collaboration with the JLI helped to ensure that the research was grounded in a rigorous methodology and designed to capture the complexity of cultural adaptation in MHPSS interventions.

The collaboration with the JLI was part of a broader partnership between SBF and JLI and the establishment of a joint learning hub on MHPSS and culture in the Syrian context, which was aimed at raising awareness and building the evidence on the topic. As part of this work, JLI and SBF had conducted a scoping study on MHPSS, culture and faith in Syria, a series of shared learning and awareness raising events, and two research training sessions for the SBF team.

3.2. Collaboration with local communities

Working with grassroots networks and community leaders helped to ensure that our interventions were community-centred and responsive to the needs and preferences of the local populations. Initially, individuals and organisations interested in cultural adaptation of MHPSS were selected. A WhatsApp working group was established to communicate, exchange and discuss learnings and support each other.

SBF then conducted three joint learnings meetings for Syrian MHPSS professionals based in Turkey, Syria and Jordan. These meetings, which were aimed at raising awareness, promoting learning and exchange, and building a coalition of interested individuals, were organised on Zoom. Topics included cultural adaptation, the reasons why cultural and religious considerations are often not taken into account in MHPSS programmes by organisations working in the field, and other related topics.

As a next step, a group of interested MHPSS professionals were selected and trained in research.

3.3. Research training

The research capacity-sharing element of the project was led by the JLI. Senior Research Fellow Dr. Jennifer Philippa Eggert, who had been working with the SBF team for three years, provided three two-hour online research training sessions to a diverse group of Syrian MHPSS professionals and NGO staff in Turkey, Syria and Jordan, with attendance ranging from 20 to 27 individuals per session.

The first session provided an introduction to practice-focused research, research ethics, and data collection:

1. What is research? What distinguishes research from journalism, opinions, Internet searches?
2. How can research benefit practitioners?
3. What is research ethics?
4. What is sampling?
5. What is the purpose of an interview guide, and how to develop one?
6. Should interviews be recorded, or is note-taking preferable?

The second session focused on data cleaning and management

1. What is data cleaning?
2. What is data management?

The third session covered data analysis and writing up research:

1. What is data analysis?
2. What types of written outputs can be used to present research?
3. How is data best written up?

In addition to dedicated time for questions, answers and comments at the end of each online training, sessions were led interactively, with frequent opportunities for participants to actively participate. The trainings took place in English with Arabic interpretation. Trainees could participate in the discussions in English and Arabic. After each training session, a questionnaire was sent to participants to gauge their views on the training and plan the next session accordingly.

3.4. Data collection and analysis

This research is qualitative and manually performed, using computer and EXCEL software. After the conclusion of the three research trainings, the SBF team, led by Dr Mohammad Abo Hilal, conducted an additional discussion session with members of the core group of interested individuals and trainees. The discussion focused on the objectives of this research, and resulted in a collaborative development of interview questions. JLI then provided feedback on the interview questions.

Then, SBF moved to the interviews stage, conducting semi-structured interviews with 20 Syrian MHPSS professionals in Syria and Turkey. Interview responses were then entered into an Excel file organised by interview questions, before the team cleaned, and analysed them thematically. Once findings were generated, they were discussed in the team, and written up in a collaborative, dialogic process.

Eventually, the results of our work were presented in two online webinars; one of them in Arabic, aimed at Syrian practitioners, and one of them in English with JLI, aimed at Syrian and other researchers and practitioners.

• FINDINGS

Our research has identified a general problem with MHPSS programmes in the Syrian context. Some of these programmes are not appropriate for the context, because they have not been culturally adapted. Current programmes often lack tangible measures of success beyond the number of beneficiaries included in reports. There is a need to measure the extent to which these programs improve the resilience of families and societies and have a long-term impact.

Lack of understanding of cultural adaptation

Cultural adaptation is not well-established or clearly understood among Syrian MHPSS workers. There is a lack of specific approaches and mechanisms for the cultural adaptation process in Syrian communities. Some MHPSS workers implement cultural adaptation, but it is often superficial and does not reflect the necessary level or quality of adaptation.

Lack of holistic approaches

Only about half of the participants supported the idea of including religious/spiritual counsellors in MHPSS teams. Many providers avoid dealing with jurisprudential issues, showing a lack of awareness of the interdependence of different aspects of a person's life and their impact on each other.

Resistance to cultural adaptation

Some research participants resisted the idea of cultural adaptation and believed that Western curricula are scientifically proven and do not require any changes. Some MHPSS workers practised unprofessional and immoral behaviours in the name of "neutrality."

Training gaps

Despite numerous trainings on other topics, cultural adaptation was not given adequate attention. 60% of participants requested training on appropriate cultural adaptation mechanisms to improve mental health programs in the community.

• RECOMMENDATIONS

A paradigm shift

- Adopt a different paradigm when discussing the role of culture and faith in mental health and psychosocial problems among Syrians.
- Empower Syrians to have a critical attitude, form theories about their own matters, and challenge prevailing theories.
- Encourage a self-criticism approach to culture to define harmful cultural practices and provide more suitable approaches.
- Address belief in magic and possession, and other culture related topics in innovative ways.

Research

- Establish an MHPSS and culture radar to capture research, articles, or blogs regarding Syrian MHPSS.
- Explore wider literature that includes the works of scientists from over 1000 years ago and literature that talks about mental health and culture in other Arab and Muslim countries.
- Conduct more research on the importance of cultural adaptation of mental health programs and its impact on improving the mental health of Syrians.
- Find a way to encourage uptake of research findings that bypass filters.

Training and curriculum development

- Train local researchers in qualitative research.
- Train MHPSS professionals and their organisations' teams on the principles of cultural adaptation.
- Train religious/spiritual counsellors and involve them in mental health and psychosocial support services.
- Develop specific approaches and mechanisms for the cultural adaptation process.
- Build new culturally adapted curricula and support their dissemination.

Partnership, coordination and awareness-raising

- Raise awareness about cultural adaptation through media, advocacy and outreach activities and addressing deep cultural topics and resistance to cultural adaptation.
- Involve religious leaders in the process of cultural adaptation of mental health programs, linking MHPSS professionals to reliable religious bodies.
- Focus on coordination in the mental health field, establishing specialised leadership in Syria to organise and govern it, and involving all stakeholders in it.

• CONCLUSION

The idea of deliberate, systematic cultural adaptation of MHPSS programmes according to the societal context is still relatively new to most Syrian practitioners working in this area. Recently, there has been some increase in public interest in the topic, and there is an increasing understanding that MHPSS programmes developed in the Global North can lead to unsatisfactory results when applied in communities with a different socio-cultural context. This gap in current MHPSS practice in Syria and Syrian communities has motivated us to develop a new vision for culturally responsive and faith-sensitive MHPSS services.

The research on which this policy paper is based has allowed us to draw evidence-based findings on the reality of MHPSS practice in the Syrian context and to develop recommendations, which we hope will be of use to MHPSS professionals striving to take faith and cultural aspects of Syrian society into account in their work.

We hope that our work will serve as a foundation on which subsequent studies and programmes can build, God willing, to achieve the best results for the psychological well-being of Syrians who have suffered for over a decade now from the effects of the violence of war, persecution and displacement.

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• ACKNOWLEDGMENTS

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Funding: International Partnership on Religion and Sustainable Development (PaRD), Joint Learning Initiative on Faith and Local Communities (JLI)

About Syria Bright Future (SBF)

Syria Bright Future (SBF) is an independent, non-governmental, non-profit organisation operating in Syria and her neighbouring countries. SBF’s vision is to build a flourishing society whose members enjoy psychosocial wellbeing. Its mission is to integrate MHPSS services with protection, nutrition, health, education, and other relief and livelihood programs to provide mental health, psychosocial support and protection services in an integrative framework.

SBF was one of the first Syrian organisations in providing MHPSS and protection services to refugees. It was started as a Syrian grassroots initiative in Jordan in 2012 and expanded to Turkey in 2014, and registered in Turkey in 2018. SBF has implemented multiple projects in MHPSS, women protection and empowerment, child and youth protection and empowerment, capacity building, and research and innovation. More recently, SBF has focused on the importance of culture adaptation of MHPSS and protection programmes that are provided to the Syrian people.

About the Joint Learning Initiative on Faith and Local Communities (JLI)

Founded in 2012, the Joint Learning Initiative on Faith and Local Communities (JLI) is a learning and evidence network of researchers and practitioners. It builds fair and equitable spaces to create and share evidence on religions in development and community work and aims to strengthen partnerships between and amongst faith and non faith actors, internationally and locally. JLI has three main goals:

Fair and Equitable Approach: JLI actively challenges asymmetries of power in knowledge and evidence within religions and development by embedding fair and equitable practices across all of its research, evidence, learning and partnership work.

REAL (Research, Evidence, Accountability and Learning): JLI is a leading global provider of research, evidence, learning and capacity sharing that strengthens practical religious engagement strategies for faith and development actors both locally and globally.

Member and Network Engagement: JLI is recognized as a broad network of diverse international and local (faith) actors, researchers and practitioners, providing a platform for intersectoral and multi stakeholder engagement that advances religion and development knowledge and learning.

• SUGGESTED CITATION

Abo-Hilal, Mohammad; Eggert, Jennifer Philippa; Alkourdi, Manal; Okab, Zein; Alghadban, Marwa; Mustafaalhasan, Amr (2023): Culturally Sensitive Mental Health and Psychosocial Support Services (MHPSS) in the Syrian Context: Findings of a Research Capacity-Sharing Project. Istanbul and Washington, D.C.: SBF and JLI MHPSS Hub

