

Wireless Mental Health and Psychosocial Support for Individuals and Families Affected by COVID-19 and other Crisis Situation



Implementation Manual

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Message of the Officer-In-Charge



In 2020, the Philippine government declared a national emergency due to the COVID-19 pandemic, which led to the imposition of community quarantines as part of the management of the health crisis.

The pandemic did not only bring about socio-economic effects, but it also negatively affected the mental health of many Filipinos. Fear of getting infected with COVID-19, loss of loved ones, loss of income, diminished interpersonal activities, among others have caused much anxiety, distress, boredom, loneliness, and even depression not only on adults but even on minors.

This emerging social welfare issue has prompted the Department, through the Social Technology Bureau (STB), to develop a social welfare model of intervention to address the mental health and psychosocial needs of the public. I commend the STB for the development of the Wireless Mental Health and Psychosocial Support for Individuals and Families Affected by COVID-19 and other Crisis Situation (WiSUPPORT) project. This initiative came at a most opportune time when many of our countrymen needed a shoulder to lean on.

The WiSUPPORT gives premium to the provision of the much-needed psychosocial first aid to the Filipinos through various Mental Health Psychosocial Support Services (MHPSS) using wireless and online platforms. The project was pilot tested in DSWD Field Offices in the National Capital Region, Region VII, and Caraga, in partnership with the Department of Health, through the National Center for Mental Health, and civil society organizations.

The conceptualization of this noteworthy project is truly commendable as it serves as a channel in uniting and capacitating different service providers such as social workers, psychologists, and allied professionals at the national and regional levels. This breakthrough project also makes interventions more accessible to its intended clients as the service is provided through developed technology-based platforms such as electronic-mail, web portal, telephone, and the DSWD WiServ and mobile application.

I strongly enjoin all DSWD Field Offices and other partners in government and non-government organizations to continue the provision of the MHPSS interventions to the target clientele. We are hopeful that with the WiSUPPORT program, Filipinos will be able to resiliently cope with their mental health challenges and eventually live normal lives under the new normal.

A handwritten signature in black ink, appearing to read 'Eduardo M. Punay'.

EDUARDO M. PUNAY

Officer-in-Charge

Department of Social Welfare and Development

Foreword



Mental health services continue to be an integral part of interventions provided to people around the world to help them cope with the psychosocial effects of the COVID-19 pandemic.

In the Philippines, around 3.6 million individuals with mental health concerns were noted at the height of the health crisis. Among these were depression, anxiety, mood disorders, substance use disorders, trauma and grief.

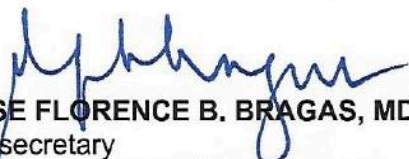
Cognizant of the need to provide psychosocial help to individuals who are experiencing mental troubles brought about by various crises including COVID-19 pandemic, the Department of Social Welfare and Development (DSWD), through its Social Technology Bureau, has come up with a timely intervention to address this concern.

Dubbed WiSUPPORT: Wireless Mental Health and Psychosocial Support for Individuals and Families Affected by COVID-19 and Other Crisis Situations, it is an innovative project, that aims to systematically address the increasing need for psychosocial interventions through various platforms. The project was evaluated as relevant, effective, efficient and sustainable as a result of the pilot implementation within the National Capital Region, Central Visayas, and Caraga Region.

In order to guide the implementers of the WiSUPPORT project and to sustain the gains of its pilot implementation, the DSWD crafted this Manual of Operations. It is intended to guide Mental Health and Psychosocial Support (MHPSS) service providers to ensure that they are fully-equipped and capacitated to assist more clients at any given time.

It is also our hope that through the WiSUPPORT project, more clients are able to regain their resiliency to cope with whatever challenges that they come across in their lives.

Let us continue to listen, care, and support our kababayans needing psychosocial help.


DENISE FLORENCE B. BRAGAS, MD, FPAFP
Undersecretary
Standards and Capacity Building Group

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 - DOH- Health and Emergency Management Bureau
 - DOH-Knowledge Management and Information Technology Service
 - DOH-National Center for Mental Health
 - DOH-Office of Metro Manila Center for Health Development
 - DOH Region VII
 - DOH Center for Health Development - CARAGA
- Department of Labor and Employment (DOLE)
 - Department of Labor and Employment (DOLE) - NCR
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 - Department of Labor and Employment (DOLE) - Region CARAGA
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- Philippine Red Cross
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 - Philippine Red Cross - Cebu Chapter
- Psychological Association of the Philippines (PAP)
- Task Force Jeremiah - CARAGA
- United Registered Social Workers (URSW)
 - United Registered Social Workers - NCR Chapter
 - United Registered Social Workers - Visayas Cluster
 - United Registered Social Workers - CARAGA Chapter

Acronyms

ABSNET	Area-Based Standards Network
AICS	Assistance to Individuals in Crisis Situation
ALSWDOPI	Association of Local Social Welfare and Development Officers of the Philippines, Inc.
CNSP	Children in Need of Special Protection
COVID-19	CoronaVirus Infectious Disease (2019)
DPA	Data Privacy Act
DSWD	Department of Social Welfare and Development
DOLE	Department of Labor and Employment
DOH	Department of Health
FHONA	Family Heads and Other Needy Adults
LDI	Learning and Development Interventions
MHPSS	Mental Health and Psychosocial Support Services
NCMH	National Center for Mental Health
NDA	Non-Disclosure Agreement
OWWA	Overseas Workers Welfare Administration
OFs	Overseas Filipino (OFs) in Distress
PWD	Persons with Disability
PRC	Philippine Red Cross
PFA	Psychological First Aid
PAP	Psychological Association of the Philippines
PMHA	Philippine Mental Health Association

RICTMU	Regional Information Communication and Technology Management Unit
SC	Senior Citizens
SWDAs	Social Welfare and Development Agencies
TNA	Training Needs Assessment
URSWs	United Registered Social Workers
WEDC	Women in Especially Difficult Circumstances
WiSUPPORT	WiSUPPORT: Wireless Mental Health and Psychosocial Support
WHO	World Health Organization

Definition of Terms

TERMS	DEFINITION
Beneficiary	Refers to any person who received the Psychological First Aid intervention from the WiSUPPORT Service Providers due to distress situations and other mental health related concerns.
COVID-19	Refers to the infectious disease caused by the SARS-CoV-2 virus. Most people infected with the virus will experience mild to moderate. (World Health Organization, 2022)
Crisis Situation	Refers to a situation when a person experiences a time of stress that negatively impacts their normal functioning or relationships.
Data Privacy Act of 2012	Refers to the comprehensive and strict privacy legislation to protect the fundamental human right of privacy and of communication while ensuring free flow of information to promote innovation and growth. (Data Privacy Act of 2012 (RA 10173)
Data Privacy Manual	Refers to the manual which ensures that entities or organizations processing personal data establish policies, and implement measures and procedures that guarantee the safety and security of personal data under their control or custody, thereby upholding an individual's data privacy rights. (Data Privacy Act of 2012 (RA 10173)
Data Sharing Agreement	Refers to the agreement that set out the purpose of the data sharing, cover what happens to the data at each stage, set standards and help all the parties involved in sharing to be clear about their roles and responsibilities. (Data Privacy Act of 2012 (RA 10173)
Data Protection Officer	Refers to the officer who is responsible for educating a company's employees about data compliance, training members of staff who are involved in processing data, and carrying out regular security audits. They also serve as the main point of contact between the company and the relevant data protection authorities. (Data Privacy Act of 2012 (RA 10173)
Exit Survey Form	Refers to the form that gathers the feedback or suggestions of the beneficiaries who received the services first hand to gauge their satisfaction on the services provided.

TERMS	DEFINITION
Informed Consent	Refers to the process that involves the service providers sharing sufficient information with the prospective client so the client can make an informed decision about participation in the proposed course of intervention. The client provides her or his informed consent based on being adequately informed about what they are considering participating in. With regard to how much information to share in this process, what specific information should be shared, when it should be shared, and in what format(s), the goals and potential benefits of informed consent are relevant to consider. (Republic Act No. 11036)
Mental Health	Refers to the state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community. It is also fundamental to our collective and individual ability as humans to think, emote, interact with each other, earn a living and enjoy life. (Republic Act No. 11036)
Mental Health Concerns	Refers to psychiatric disorders and other problems with mental and social well-being such as problems with adjustment, anxiety, depression, coping, behavior, emotions, etc. These types of concerns are often addressed by mental health social workers, psychologists and psychiatrists. (DSWD Memorandum Circular No. 04 Series of 2020)
Mental Health Psychosocial Support Services	Refers to the type of support that aims to protect and promote psychosocial wellbeing and/or prevent and/or treat mental health disorders.(Republic Act No. 11036)
Non Disclosure Agreement	Refers to the agreement that is a legally binding contract that establishes a confidential relationship. The party or parties signing the agreement agree that sensitive information they may obtain will not be made available to any others. It may also be referred to as a confidentiality agreement. (Data Privacy Act of 2012 (RA 10173)
Online Platforms	Refers to the digital service that facilitates interactions between the clients and the service providers who interact through the service via the internet and the technology-based platforms. (Memorandum Circular No. 04 Series of 2020)
Pandemic	A disease outbreak that spreads across countries or continents. It affects more people and takes more lives than an epidemic. The World Health Organization (WHO) declared COVID-19 to be a pandemic when it became clear that the illness was severe and that it was spreading quickly over a wide area.(WebMD Editorial Contributors, 2022)
Personal Information	Refers to any information whether recorded in a material form or not, from

TERMS	DEFINITION
	which the identity of an individual is apparent or can be reasonably and directly ascertained by the entity holding the information, or when put together with other information would directly and certainly identify an individual. (Data Privacy Act of 2012 (RA 10173))
Platform Administrator	Refers to the staff stationed at the DSWD Central Office who handles and navigates the technology-based platforms and receives the requests of the clients.(Memorandum Circular No. 04 Series of 2020)
Psychological First Aid	Refers to an evidence-informed approach that is built on the concept of human resilience. PFA aims to reduce stress symptoms and assist in a healthy recovery following a traumatic event, natural disaster, public health emergency, or even a personal crisis. (Republic Act No. 11036)
Psychosocial Interventions	Refers to any intervention that emphasizes psychological, behavioral or social factors rather than biological factors, such as pharmacotherapy. The goal of psychosocial intervention is to help disabled individuals to establish the emotional, social, and intellectual skills needed to live, learn, and work in the community with the least amount of professional support
Red Flags	Refers to the early warning signs, potential patterns, practices or specific activities indicating the possibility of a mental health condition.
Referral Feedback	Refers to the process by which the member of the Referral Network provides the list of services provided to beneficiaries through the use of the Referral Feedback Form. (Memorandum Circular No. 04 Series of 2020)
Referral Network	Refers to the network of individuals and organizations that accommodate referrals of beneficiaries needing specialized psychosocial interventions. Referral networks can be a combination of informal and formal agreements. (Memorandum Circular No. 04 Series of 2020)
Referral Pathway	Refers to the process by which the beneficiaries are referred from the WiSUPPORT Service Providers to the appropriate member agencies of the referral network for specialized intervention. (Memorandum Circular No. 04 Series of 2020)
Regional Moderator	Refers to the hired staff in the DSWD Field Offices who conduct initial assessment of beneficiaries accessing the online platforms of the program and refer the beneficiaries to a WiSUPPORT Service Providers for Mental Health and Psychosocial Support Services. (Memorandum Circular No. 04 Series of 2020)
WiSUPPORT Service Provider	Refers to the designated staff in the DSWD both at the Central and Field Offices who provide online Mental Health and Psychosocial Support Services to the target beneficiaries. (Memorandum Circular No. 04 Series of

TERMS	DEFINITION
	2020)
Profiling	Refers to the recording of the beneficiary's personal information including problems presented that are essential in the helping process and in identifying the appropriate intervention. (Memorandum Circular No. 04 Series of 2020)

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Chapter 1: Rationale

COVID-19, the worst health crisis of this generation, is severely challenging our country with the rising number of cases and reaching full capacity of our health and governance systems. Furthermore, over 2 million workers have lost their employment and students are out of school due to the pandemic.

As a result of the pandemic and the “new normal”, many have experienced stress ranging from anger, confusion, sadness, grief, and the feeling of uncertainties among the public. While there are some efforts to respond to these issues, there are still gaps and challenges since this pandemic is relatively new to most, if not all. Mental health issues and the general state of well-being of the general population must also be taken into consideration. A recent study concludes that ignoring immediate and long-term psychological effects would be disastrous. Interventions need to focus on nurturing resilience in children and adolescents by better communication to address their fears and concerns (Irman, et.al 2020).

The World Health Organization in their Philippine Coronavirus Disease 2019 (COVID-19) Situation Report on April 11, 2022 mentioned that as of 10 April, a total of 3,681,374 COVID-19 cases and 59,769 (1.6%) COVID-19 related deaths had been recorded since the beginning of the COVID-19 pandemic. There was a sudden and sharp increase in cases in late December 2021, but after peaking in early January, a decreasing trend has been continuing in the number of cases reported per day.

Despite the decreasing trend on COVID-19 cases in the country, the psychosocial impact brought about by the pandemic continuously affects the lives of the people as well as other crisis situations due to natural and man-made disasters and other forms of emergencies. Along with this, the delivery of programs and services remained a combination of a traditional (face-to-face) and digitalized (virtual/online) approaches including the provision of mental health and psychosocial support.

Technological advances may enhance new models of psychosocial interventions, as evidence of growing popularities of “telehealth” - the utilization of telephone and internet for health care purposes, in both clinical practice (Jerome, et.al 2000) and paraprofessionals crisis interventions (Lester, 2002; Wilson & Lester, 1998).

Hotline most often began as alternative services, eventually they became sufficiently organized to offer genuine services, meeting different and increasing needs of communities - hotlines as “telephone services in which the caller who has need presents a problem or a situation for discussion or resolution to perceived helper” (Seeley, 1996).

The DSWD issued the Administrative Order No. 3, series of 2020 which contains the Department’s COVID-19 Response and Recovery Plan for 2020-2022. One of the key deliverables hereto is the development of a Technology-based Mental Health and Psychosocial Support and

Modules for individuals, families and communities with a high number of COVID-19 cases. Furthermore, the Administrative Order No. 23, Series of 2021 created the DSWD Committee on Mental Health to ensure that the duties and responsibilities of the Department as members of the Philippine Council for Mental Health(PCMH) are delivered. This initiative is also anchored on the provisions of the Republic Act No. 11036 or the Mental Health Act and its Implementing Rules and Regulations which mandates the DSWD's duties and responsibilities to wit:

1. Refer service users to mental health facilities, professionals, workers, and other service providers for appropriate care
2. Provide or facilitate access to public or group housing facilities, counseling, therapy, and livelihood training and other available skills development programs
3. In coordination with the LGUs and the DOH, formulate, develop and implement community resilience and psychosocial well-being training, including psychosocial support services during and after natural disasters and other calamities, and
4. Develop and implement training and capacity building programs to effectively discharge the agency's role according to this Act.

It is in this context that the Social Technology Bureau, as the program development arm of the DSWD, has developed this model of intervention to efficiently and effectively address the psychosocial needs of the different clientele groups that the agency is mandated to serve in the "new normal" and other crisis situations.

The program was pilot tested from May to November 2021 in three (3) regions representing the island clusters namely: National Capital Region (Luzon), Region VII (Visayas) and Caraga Region (Mindanao). The pilot testing experiences helped determine the strength and weaknesses of the program including facilitating and hindering factors in the program implementation. The emerging good practices from the pilot regions were also identified as well learned and recommendations for consideration in the institutionalization of the program. Generally, the pilot implementation of the program provided the client the needed support to deal with their fears, stress, anxieties and distress of poverty, job/income loss and other challenges despite being brought about by the pandemic and other crisis situations. With the approach that focuses on a client's self-determination and strength helps to strengthen their resilience and direct them to cope with their present adversities.

The evaluation of the program was conducted by the Social Technology Bureau in November 2021. Based on the result of the evaluation, the response is timely for recovery of the clients and many positive results have been achieved by the WiSUPPORT program from February 2021 to date. The program has fostered strong linkages with partner institutions especially with the DOH as well as other government agencies and this can be associated as one of the strengths of the program.

All of the key deliverables envisaged in the program document have been delivered. The involvement of a program implementers and other stakeholders and interest groups in different pilot areas ensure ownership of outputs and outcomes. It is the opinion of the Evaluation Team that the program was carried out effectively and efficiently taking into consideration each of the components as

stipulated in the program design. Thus, contribute in addressing the psychosocial and mental health needs, issues and challenges faced by the individuals and families.

The initial phase of the program has focused on the development of the online platforms and capacity building of implementers. Also, the establishment of the institutional and legal frameworks needed for achieving the overall program goal of delivering the psychosocial and mental health services. As to program institutionalization and scale up, the program implementers and its partners should ensure that all needed funds are secured before the replication and turnover of the program so as to improve the efficiency and sustainability of program implementation

Chapter 2: Legal Bases

A. International Instruments

1. International Covenant on Economic, Social and Cultural Rights, ICESCR (1966) states in Article 12 that the States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.
2. WHO Mental Health Care Law (1996) states in the component under promotion of mental health and prevention of mental disorders that there should be promotion of behaviors which contribute to enhancing and maintaining mental health well-being, such as those identified by WHO.

B. National Laws and Issuances

1. Republic Act No. 11036 or the “Philippine Mental Health Act of 2018” establishes a National Mental Health Policy to enhance the delivery of integrated mental health services promoting and protecting the rights of persons utilizing such services. The law highlights DSWD’s roles in providing psychosocial support services during and after natural disasters and other calamities.
2. NDRRMC National Guidelines on Mental Health and Psychosocial Support aims to enable humanitarian actors and communities to implement essential minimum high priority responses in emergencies and disasters that adapt and contextualize the Inter-Agency Standing Committee Guidelines on MHPSS.
3. Republic Act No. 10121 or the “National Disaster Risk Reduction and Management Act of 2010” provides for the National Disaster Risk Reduction and Management Framework and Institutionalizing the country’s National Disaster Risk Reduction and Management Plan. The law designates the Department as Vice-Chairperson for Disaster Response.

C. Department Issuances

1. DSWD Memorandum Circular 19, series of 2022 or the Guidelines on the Institutionalization of Wireless Mental Health and Psychosocial Support to Individuals and Families Affected by Crisis Situations.
2. DSWD Administrative Order No. 3, series of 2020 or the DSWD Response and Recovery Plan outlines the key deliverable of a Technology-Based Psychosocial Support (PSS), a social welfare model of intervention that would aid the needs and concerns of COVID-19 affected individuals, families and communities.
3. DSWD Administrative Order No. 23, series of 2021 or the Creation of the DSWD Committee on Mental Health which prescribes the guidelines in the establishment, roles and responsibilities of the Committee, its Sub-committees and Regional

Committees for the implementation of an integrated Mental Health Program by the DSWD.

Chapter 3: Description, Objectives and Target Beneficiaries

Description

DSWD WiSUPPORT is a social welfare model of intervention that seeks to establish a systematic response to address mental health and psychosocial needs of individuals and families affected by COVID-19 and other crisis situations through wireless and online platforms.

It also envisions to mobilize and capacitate Mental Health and Psychosocial Support (MHPSS) service providers both at the National and Regional level. This program also intends to make the MHPSS intervention more accessible to its intended clients by developing and utilizing technology-based platforms, in compliance with the infection prevention, control measures and other related guidelines.

Program Objectives

This social technology ensures a systematic response to the psychosocial needs of individuals and families affected by COVID-19 and other crisis situations through the technology-based platforms developed. Specifically, it aims to:

1. Utilize the technology- based platforms developed in the provision of Mental Health and Psychosocial Support;
2. Capacitate Service Providers in providing technology-based Mental Health and Psychosocial Support.
3. Provide actual Mental Health and and Psychosocial Support and other services to individual and families accessing the online platforms;
4. Establish a referral pathway to facilitate referral of clients needing specialized interventions.

Target Beneficiaries

The WiSUPPORT program shall primarily cater to the psychosocial needs of Individuals and Families affected by COVID-19 and other crisis situations. These include the following

clientele categories but not limited to:

1. Overseas Filipino (OFs) in Distress;
2. Women in Especially Difficult Circumstances (WEDC);
3. Family Heads and Other Needy Adults (FHONA);
4. Children in Need of Special Protection (CNSP);
5. Senior Citizens (SC)
6. Persons with Disability (PWD)
7. Children and families in situations of armed conflict;
8. Individuals involved as First Responders/ Caregivers to Crisis Situations and their families; and
9. Other Individuals and Families in Distress

Chapter 4: Program Components

Learning and Development Activities

- DSWD ensures proper management of cases by enhancing knowledge, skills and attitude of service providers on understanding crisis, mental health and psychological well being and in providing online psychosocial support

WiSUPPORT Service Provision

- Trained DSWD staff in pilot regions are available from 8:00AM to 5:00PM, Mondays to Fridays (except holidays) for Psychosocial Support and Consultation Sessions
- Clients are provided with options on the conduct of sessions such as video conference, landline or mobile calls, emails and text messages

PROGRAM COMPONENTS



Platforms for the Online PSS Consultations

- DSWD provides the public with easy access to various communication tools to talk with the WiSUPPORT Service Providers
- This includes electronic mail, web portal, WiServ or text messaging, mobile application and DSWD Agency Operations Center Hotline

Referral Pathway

- DSWD will also refer clients needing professional help from psychiatrists and psychologists through the referral networks established



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As shown in the graphic above, the components and key results of the program are as follows:

1. Platforms for the Online PSS Consultation Sessions

The different technology-based platforms to access the service which will be utilized by the WiSUPPORT service providers are the following:

- **Electronic Mail**

Official email addresses were created for the Central Office and the Pilot Regions where clients can send their requests or concerns. It is used to validate the information gathered from the client and to send details and the schedule of the session. With the Electronic Mail, the Administrator and the Regional Moderators can segregate the emails received into two categories; the MHPSS related concerns and non-MHPSS related concerns, then the identified concerns that are mental health-related are redirected to the WiSUPPORT web portal.

- **Web Portal**

The web portal is linked with the DSWD website. The web portal enables the

public to request support service by filling-up a form. It provides the public with self-care tips to help them maintain good mental health and psychological well-being. It also provides contact information of organizations that provide professional psychological and psychiatric support services. This also allows Moderators to assign client requests to MHPSS Providers and eventually sync with the electric mail of MHPSS Providers and Moderators.

- **DSWD WiServ**

The platform was developed to facilitate receipt of requests from clients via text keywords using the WiSUPPORT text line number 09189122813. It also allows Moderators to inform the client with his or her schedule sessions with an MHPSS Provider through text message and moderators and to cascade the clients requests to MHPSS Providers

- **Mobile Application**

The platform allows automated responses in providing information about the WiSUPPORT and scheduling clients with MHPSS Providers through a Chatbot. It also provides contact information of government agencies and private organizations that provides professional psychological and psychiatric services within a designated kilometer range of the mobile application user through the online map of aWHEREness PH. The platform allows clients to set an appointment with an MHPSS Provider and linked with the Google Meet for easier access of clients to his or scheduled appointments with an MHPSS Provider.

- **Mobile/Wired Phone**

Designated mobile numbers can be accessed by the clients to convey their requests and/or concerns to the WiSUPPORT service providers. It is also utilized to communicate with the clients immediately considering the accessibility of this platform to verify the data gathered from the client and to communicate details and the schedule of the MHPSS session. With the mobile phone, the Administrator and the Regional Moderators can segregate the calls and text messages received into two categories; the MHPSS related concerns and non-MHPSS related concerns, then the identified concerns that are mental health-related are redirected to the WiSUPPORT web portal.

2. Learning and Development Interventions (LDI) for MHPSS Providers

A minimum of fifteen (15) personnel shall be mobilized/ pooled and trained at the Field Office (FOs) who will serve as WiSUPPORT service providers. The MHPSS provider must be a social worker, psychologist and other professionals who possess basic training and actual experience in providing Psychosocial Support (PSS) and Psychological First Aid.

The pool of MHPSS providers shall undergo a series of learning and development interventions through a face to face training, online webinar platform and or blended mode to hone their knowledge, skills and attitudes in delivering wireless and online MHPSS support. A training manual was developed as a guide in order to capacitate DSWD social workers, psychologists and other WiSUPPORT service providers. This manual is composed of four modules, to wit:

Module 1: Understanding COVID-19 and Other Crisis Situations

The service providers shall be capacitated with the impacts of the COVID-19 and other crisis situations among the public. The module will define the pandemic and other crisis situation's psychosocial impacts and its suggested interventions through strength-based approach. Further, the module also highlights the legal bases and roles of DSWD along MHPSS.

Module 2: Mental Health and Psychological Well-being

Under this module, the service provider shall be enabled with knowledge regarding different concepts on mental health. The module defines stress, trauma, anxiety and suicidal ideation. It also provides the factors associated with these concepts and recommends intervention. Having background knowledge on these concepts will help the MHPSS provider further understand the psychological well-being of their clients and respond to them more appropriately.

Module 3: Providing Online Mental Health and Psychosocial Support

This module gives an overview on the concept of Psychological First Aid (PFA) as universal intervention accepted by MHPSS practitioners. This module gives adaptive ways of rendering Psychosocial Support to individuals and families affected by COVID-19 and other crisis situations through remote delivery of intervention using various online platforms.

Module 4: Operationalization and Protocols

The WiSUPPORT service providers shall be trained on the necessary protocols/standards in answering and handling calls to ensure effectiveness and consistency on how the service is being delivered to the client. Moreover, they shall also be equipped with knowledge and skills on how to use the different platforms and protocols in providing MHPSS to individuals and families affected by COVID-19 pandemic and other crisis situations.

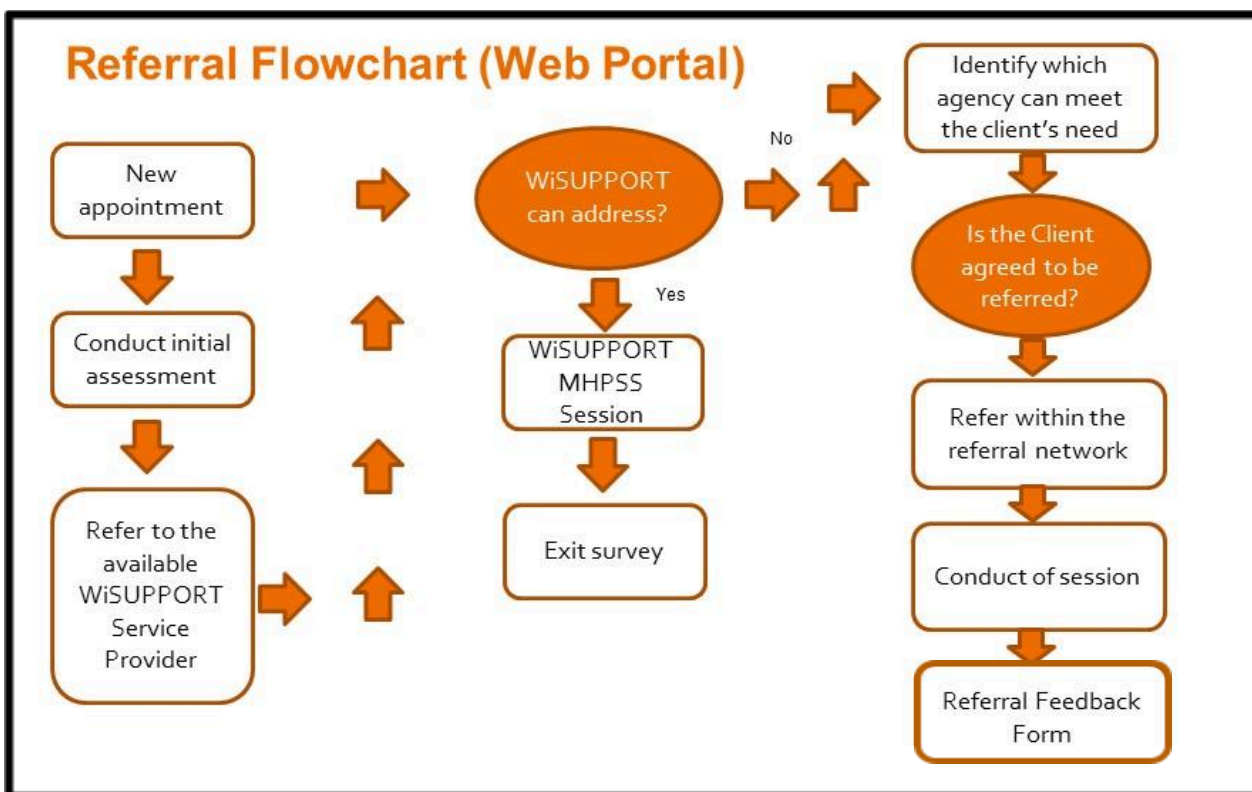
3. Mental Health and Psychosocial Support (MHPSS) Provision

Through the course of the engagement between the client and the MHPSS provider, a series of strategies to alleviate the feelings of uncertainties shall be addressed by the MHPSS provider. Such interventions shall be based on tested strategies and techniques provided by both local and international literatures in providing psychosocial support and psychological first aid as deemed applicable. Furthermore, the MHPSS provider will base its proposed services on the initial assessment using the concept of intervention pyramid highlighting strengths-based assessment as defined by the social work case management standards.

Promotion of the WiSUPPORT services shall be based on the program's Communication Plan (attached as Annex F).

4. Referral Pathway

Immediate interventions shall be provided by the attending WiSUPPORT service providers to assess the needs of the client and coordinate to appropriate offices with clear referral pathways to provide multiple services to meet the client's needs. Referrals to auxiliary services under the different offices of the DSWD may be facilitated by the MHPSS provider as deemed necessary. The partnership with Social Welfare and Development Agencies (SWDAs) through the Area-Based Standards Network (ABSNET) and other available resources, networks with its programs, and services shall be established for clear referral pathways.



Chapter 5: Implementation Procedure

The implementation of the WiSUPPORT program is divided into Activities and Procedures per phases as follows:

A. Pre- Implementation Phase (Social Preparation)

The pre-implementation phase is composed of several social preparatory activities which generally focus on the establishment of the Regional Referral Network and conduct of capability building activities among WiSUPPORT Service Providers and hiring of platform administrator and regional moderator. Pre-implementation phase activities are as follows:

1. Hiring of Psychologist

The hired Psychologist shall serve as the responder to cases needing Level Four (4) interventions if they cannot be immediately referred to the National Center for Mental Health and other partner agencies within the Referral Network. The Psychologist will also serve as the resource person during the Care for Carers activities planned to be conducted regularly to aid the service providers be debriefed on the psychosocial stress they may be experiencing. Lastly, the Psychologist will provide technical assistance to the WiSUPPORT service providers in the 16 regions and monitor the implementation of the program by coordinating with the program Development Officers. The following are the eligibility requirements for the position:

Education	:	Master's Degree in Psychology
Training	:	16 hours of relevant training on the delivery of psychological services which include psychological interventions, psychological assessment and psychological programs
Experience	:	2 year of relevant experience involving the delivery of psychological services
Eligibility	:	RA 10029 (Psychologist)

Special Qualifications:

- 1.1. Possesses Mastery on Modern Clinical Psychology;
- 1.2. Proficient in providing Therapy and Psychological Counseling;
- 1.3. Proficient in Mental Health Education;
- 1.4. Proficient in oral and written communications; and
- 1.5. Proficient in the use of Microsoft Excel/ PowerPoint and other software application systems.

2. Hiring of Information and Technology Officer

The Information Technology Officer will be responsible for the management, updating and troubleshooting of concerns in the system developed for the provision of the support services. The following are the qualifications for the Information and Technology Officer:

Education	:	Bachelor's degree relevant to the job
Training	:	8 hours of relevant training
Experience	:	2 years of relevant experience
Eligibility	:	Career Service (Professional) Second Level Eligibility

Special Qualifications:

- 2.1. Proficient both in oral and written communication;
- 2.2. Proficient in the use of Microsoft software application system; and
- 2.3. Application designing and maintenance

3. Hiring of program Development Officer II (Platform Administrator and Regional Moderator)

WISUPPORT Platform Administrator shall be hired at the DSWD Central Office to administer the online platforms of the program and Regional Moderator at the Field Office level to manage the clients accessing the program. The PDOs will also conduct online psychosocial support consultations as a WISUPPORT service provider; and refer clients in need of professional help to partner agencies following the Referral Pathway to ensure that they are provided with timely and appropriate interventions. The following are the eligibility requirements for the position:

- Must be a Filipino resident
- A graduate of Social Work, Psychology or any science/allied related course
- Must have training on mental health psychosocial support services
- Must have an experience on provision of psychosocial first aid
- Familiar on the use of Google workspace

The hired Regional Moderator will work collaboratively with the Platform Administrator at the Central Office who are managing the Web Portal and Mobile Application and ensure that the clients accessing the platforms referred to the regions are provided with timely and appropriate interventions.

4. Identification and Capability Building of WiSUPPORT Service Providers

At the regional level, the Field Offices shall identify the WiSUPPORT Service Providers for the implementation of the program based on the following criteria:

- Must be a licensed / registered social worker, psychometrician or psychologist and trained in providing Psychological First Aid (PFA) and other psychosocial interventions; ;
- Capable of assessing the psychosocial needs of an individual
- Knowledgeable in navigating technology-based platforms.

The WiSUPPORT Service Providers shall be trained on the utilization of technology-based platforms for assigning and scheduling MHPSS sessions as well as facilitating referrals. Throughout the implementation of the program, the WiSUPPORT Service Providers shall perform the following:

- 4.1. Utilize the technology-based platforms (i.e. WiSUPPORT Web Portal, Wireless Service (WiServ), Mobile Application, and other designated platforms) and prescribed forms (Consent Form, Profiling Form, Progress Notes, Referral Form, and other standard forms). The Mental Health Psychosocial Support (MHPSS) providers shall also utilize the strengths-based approach and psychological first aid (PFA) case management.
- 4.2. Take precautions when sharing and publishing information about the client. The WiSUPPORT program shall follow the program's data impact assessment and data privacy manual in compliance with the implementing rules and regulations of Republic Act 10173 or the Data Privacy Act (DPA) of 2012.
- 4.3. Ensure that the records and documentation are stored and preserved within five (5) years in secured storage or server, compliant with existing rules and regulations. Sharing of information within and between the offices and other agencies is necessary for the referral of clients, but should adhere to the provisions under the Non-Disclosure Agreement (NDA) and the Data Privacy Act of 2012. Breach in the provisions of the DPA and the NDA may be subjected for criminal or administrative sanctions as provided by existing rules and regulations.
- 4.4. In compliance with the Data Privacy Act of 2012 or the Republic Act 10173, all members of the Program Team such as Platform Administrator, Program Moderator, designated WiSUPPORT Service Providers at the Field Offices and Program Focal Persons who are involved in the data collection, storage and disposal shall comply and submit a Non Disclosure Agreement (see annex E) to be signed by the Regional Director and Regional Data Privacy Officer. Likewise,

all concerned staff at the Central Office who are involved in the program implementation and have access to client information shall also submit the said document to be signed by the OBS Director and the Designated Data Privacy Officer.

- 4.5. Participate in the Care for Caregivers activity, mentoring and psychosocial processing on a regular basis for moral support and sharing of notable experiences and recommendations for more effective delivery of services.
- 4.6. The MHPSS Providers shall undergo debriefing and mentoring sessions as need arises in coordination with the Human Resource and Development Service (HRMDS) or Unit/Section of the Field Office. The internal guidelines promulgated by the HRMDS in the conduct of such activity shall be used for the virtual mentoring sessions. Furthermore, Care for the Carers activities shall likewise be conducted on a periodic basis.

The Field Office shall allot funds for the purchase of ICT equipment for the WiSUPPORT Service Providers and shall provide forms and other tools needed for the conduct of sessions with the beneficiaries.

5. Establishment of Referral Network and Referral Pathway

- 5.1. At the regional level, the DSWD Field Offices shall initiate the creation of a network of service providers which may be tapped in providing further interventions for clients. The Referral Network may be composed of various government agencies who are members of the MHPSS Sub-Cluster and members of the Civil Society Organizations. Below are the minimum lists of agencies which can be part of the Referral Network:

National Government Agencies	Civil Society Organizations
<ul style="list-style-type: none"> ● Department of Health (DOH) ● National Center on Mental Health (NCMH) ● Department of Labor and Employment (DOLE) ● Overseas Workers Welfare Administration (OWWA) 	<ul style="list-style-type: none"> ● Philippine Red Cross (PRC) ● Psychological Association of the Philippines (PAP) ● United Registered Social Workers (URSW) ● MH aWHEREness PH ● Philippine Mental Health Association (PMHA)

The Local Chapter of the Association of Local Social Welfare and Development Officers of the Philippines, Inc. (ALSWDOPI) and other agencies in the locality providing mental health and psychosocial services can also be invited as a member of the Referral Network.

In line with the implementation of the Mandanas Garcia Ruling, the Local Government Units as part of the Referral Network shall provide various assistance to clientele in the form of AICS. Furthermore, the LGUs shall be responsible in the case management of clients once referred.

Such networks shall be maintained and updated from time to time. Below are the roles and functions of the Referral Network Members in the implementation of the program:

- Identify Focal Person as primary contact person for referral of WiSUPPORT clients;
 - Participate/attend in the quarterly meetings and be updated of the status of program;
 - Provide recommendations for the improvement of the ongoing pilot implementation of the program; and
 - Ensure/monitor the referral pathway/network (clients availed/served interventions).
- 5.2. The Regional Referral Network shall utilize the referral pathway (see annex G) developed which describes the step-by-step process that the MHSS Provider will take in case the concern is beyond the scope of the WiSUPPORT.
- 5.3. Directory of service providers at the regional level was developed and shall be updated regularly.
- 5.4. A Memorandum of Agreement or Data Sharing Agreement whichever is applicable shall be forged between or among member agencies of the Referral Network. This shall be done to sustain the partnership and referral mechanism established among members of Referral Network.

B. Implementation Phase

The implementation phase of the WiSUPPORT program focuses on providing Mental Health and Psychosocial Support, referral of clients needing specialized intervention, Information and Advocacy Drive for the program implementation and maintenance of the technology based platforms.

The following are the specific activities under the implementation of the program:

1. **Actual MHPSS Provision**

- a) Incoming requests for assistance shall be individually assessed and assigned by the platform administrator to a MHPSS provider. A consent shall be accomplished and recorded verbally or electronically ensuring the client's willingness to provide personal information in course of service provision. If the client refuses to receive the identified service appropriate to their need, the service provider shall inform the client that the client request will be terminated and will be marked as complete in the system, however the client can still access the WiSUPPORT platforms whenever he/she is ready to receive the service.
- b) In cases where the incoming request for assistance originates from a child, a consent shall be secured from his/ her parents/guardians depending on the assessment of the MHPSS Provider. Hence, in circumstances where the child seeks assistance to aid pressing issues concerning abuse and other forms of violence involving his/her parents/guardians, the MHPSS may proceed with the online provision of services upholding the best interest of the child.
- c) The MHPSS Provider shall provide a notice to the clients through the available platforms for the scheduled MHPSS provision. Such services shall be available from 08:00 AM to 05:00 PM within weekdays. Each session with the client evolving within the framework of PFA shall be conducted for an average of forty-five (45) minutes to one (1) hour.
- d) The client's personal information shall be secured prior to the MHPSS session through the use of the standardized Profiling Form.
- e) During the provision of MHPSS intervention, the MHPSS provider shall accomplish the progress note (see annex B.3) documenting the clients information, concerns, assessment, actions taken and referral information, if deemed necessary
- f) The MHPSS providers shall follow the protocols and perform effective communication skills on handling cases of clients seeking online MHPSS.

Below are the basic helping skills used during the online MHPSS:

- i) **Confidentiality**
Trust and confidentiality are the fundamental aspects of establishing a professional relationship with clients. Reassurance that the information shared by the clients will be kept and treated with confidentiality

considering that the medium of communication is technology-based.

ii) Effective Online Communication

Communicating concerns through the technology based platforms such as telephone, online conference platforms, etc., is an important skill in providing psychological first aid to the clients. Understanding the client's situation, including the emotions they are experiencing despite the physical distance.

- 1) Following "Netiquette" - Being polite in every online encounter, acknowledging the client's privacy, respecting their time for the session, making the client feel safe and respected at all times.
- 2) Using clear and concise language
- 3) Conveying the right tone - It is important to establish the correct tone of conversation from the start. Humor can be used moderately as an ice breaker and help build rapport.
- 4) Providing Statements the Show Concern
- 5) Providing Thorough Response
As a general rule, MHPSS service providers should always provide answers to basic questions such as Who, What, When, Where, Why, and How.

iii) Non-Verbal Skills

Non-verbal skills also affect the communication between the service provider and the client. The service provider shall maintain culturally appropriate non-verbal cues such as eye contact, nodding of head, facial expressions and hand gestures. These non-verbal cues reflect that the service provider is hearing what the client is saying.

iv) Praising Openness

Help the client feel comfortable talking about personal issues. Expressing appreciation towards the client's effort to seek Psychosocial Support to address his/her concern.

v) Validating

Normalizing the client's problems by helping them understand that many other people experience the same reactions and difficulties. Validating is letting the client know that their concern is understandable.

- vi) **Putting Aside Personal Values**
In MHPSS, at all times, the service provider must respect the client's personal values and beliefs. The experience of having someone listen without any judgment will greatly help in establishing rapport and trust between the service provider and client.
 - vii) **Giving Advice**
Giving advice is different from giving the client important and helpful information. In MHPSS, the service provider must only give advice when asked by the client.
 - viii) **Develop a Positive Relationship**
A positive relationship between the client and the service provider can decrease distortion and increase open sharing. This is achieved if the client feels understood, senses concern and trust from the service provider.
- g) The tasks of the MHPSS provider, the client, and others should be clarified during the session. In the course of the MHPSS provision, the following tasks shall be undertaken by the WiSUPPORT service providers, to wit:
- Utilize the technology-based platforms (i.e. WiSUPPORT Web Portal, Wireless Service (WiServ), Mobile Application, and other designated platforms).
 - Use of prescribed forms (Consent Form, Profiling Form, Progress Notes, Referral Form, and other standard forms) in doing the documentation as basis in providing the intervention to the client.
 - Utilize the strengths-based approach in providing psychological first aid (PFA) to the client and ensure that the client felt comfortable during the helping process.
 - Take precautions when collecting data/information from the client in compliance with the Data Privacy Act of 2012. Ensure that only significant/important information are being collected from the client.

If the client and MHPSS provider both recognize a need for a follow up MHPSS session, the MHPSS provider may schedule the client for another session.

- h) Before the end of the session, the client shall be directed to accomplish the

client's satisfaction survey through available WiSUPPORT platforms (annex C).

- i) The MHPSS Providers shall undergo debriefing and mentoring sessions in coordination with the Human Resource and Development Service (HRMDS) or Unit/Section of the Field Office. The internal guidelines promulgated by the HRMDS in the conduct of such activity shall be used for the virtual mentoring sessions. on a periodic basis. Furthermore, Care for the Carers activities shall likewise be conducted

2. Referrals of Clients Needing Specialized Intervention

- a) On the basis of the assessment, the MHPSS provider shall conduct a session with the client and/or refer him/her to the appropriate agency/organization that can provide the necessary interventions.
- b) The MHPSS Provider shall be responsible in referring the client to DSWD programs and services available within the Department, Local Government Unit/s and other private organizations, within 24 hours from the actual PFA provision, if deemed necessary following the indicators provided in the WiSUPPORT training manual.
- c) A referral form indicating the client information, reason of referral and services requested shall be prepared by the assigned MHPSS provider and will be sent through the established referral pathway.
- d) A referral feedback form shall be accomplished by the receiving agency and should be routed back to the MHPSS provider. The case shall be considered closed once the MHPSS provider receives the referral feedback form indicating actions taken or further interventions are provided to the client.
- e) Clients assessed to be in need of psychiatric interventions should be referred to a public or private agency/hospital offering such specialized care. The referral shall be made by the MHPSS provider within 24 hours from the actual PFA provision.
- f) In the process of referral, personal information of the client may be shared between and among members of the Referral Network to facilitate the provision of the needed services hence, a Data Sharing Agreement (see Annex E) among concerned agencies must be signed by concerned Parties to ensure that the client's personal information are properly collected, stored and disposed.
- g) A copy of the Data Privacy Manual (see annex H) shall also be shared among members of the Referral Network for guidance and ready reference of the Personal Information Controller and Data Privacy Officers of the member agencies.

3. Information and Advocacy Drive on the Program's Implementation

- a) The developed marketing collateral for the popularization of the WiSUPPORT program which can be used by the Field Offices. The materials include

information on how the general public can access the services of the MHPSS providers through the different platforms.

- b) The Central Office and Field Offices shall undertake popularization of the program through social media, DSWD website, and other available advocacy medium following the Advocacy and Communication Plan (see annex F) developed by the STB in partnership with Social Marketing Service and its counterpart in the Field Office.
- c) The Field Offices through the Social Marketing Units/Sections shall locally translate the tools and popularize the program to their respective regions.

4. Maintenance of the Technology-based Platforms

- a) Regular updating and maintenance of the web portal and other online platforms shall be ensured by the Information and Technology Officer from the Information and Communication Technology Management Service (ICTMS).
- b) ICTMS shall ensure provision of necessary technical support to the Program Management Bureau to the infrastructure of the web portal and other online platforms.
- c) ICTMS shall ensure that a data backup system is in place for the web portal, mobile application, WiServ and other applications and are archived on a monthly basis to enable restoring data in case of loss. The data from the WISUPPORT program shall be stored for at least five (5) years.

Chapter 6: Documentation, Monitoring and Evaluation

The Logical Framework embedded in the design of the WiSUPPORT program shall be the basis in determining the progress and status of the implementation and in evaluating the implementation of the program. The framework below presents the overall objective, outcome outputs and inputs/activities under the program with the corresponding intervention logic, objectively verifiable indicators of achievement, the source and means of verification and the identified risks and assumptions.

	Intervention Logic	Objectively verifiable indicators of achievement	Source and means of verification	Risks / Assumptions
Over-all Objective	Mental health and psychosocial impact of COVID19 and other crisis situations are addressed	Decrease in mental health cases in the country	National Reports on mental health	Risk of CoVid19 contagion is high when sessions are conducted face-to-face. Other agencies mandated in ensuring mental health and psychological well-being of Filipinos have existing programs or services accessible to the public.
Outcome	Effective Technology-based MHPSS Interventions provided	75% of clients gave a rating of Very Satisfactory	Client satisfaction Survey Terms of Reference with other OBSUs	Partner agencies and concerned stakeholders are implementing programs and support services on MHPSS Concerned OBSUs are receptive and provide consistent

		100% of cases or clients are responded	Consolidated responses to active cases	support to the program Concerned OBSU and service providers are able to develop the technology-based platforms as designed
Outputs	O1. Functional and Accessible Technology-Based MHPSS Platforms Developed and Utilized	Percentage of cases responded through the web portal Percentage of clients served through the telephone helpline Percentage of cases scheduled for MHPSS sessions using the DSWD WiServ Percentage of electronic emails responded to Percentage of cases responded to through the mobile application	Actual systems exist Copies of Users' and Admin System Manual System Generated Reports disaggregated by sex, gender, age and ethnicity	Clients have stable internet connection and have sufficient mobile load communication Clients needing MHPSS utilize the platforms following the instructions guide
	O2. Learning and Development Interventions (LDI) for Service	One (1) Training Manual developed and utilized for the learning and development	Manual exists	Staff designated to provide MHPSS will not be reassigned or pulled-out from the program

	Providers on MHPSS	interventions No. of MHPSS providers trained	Documentation Report Masterlist of trained MHPSS providers pooled from the CO & FOs	
	O3. MHPSS Provision	100% of clients availing of the service provided with MHPSS No. of cases addressing gender-based violence, child abuse, etc.	Documentation Report Summary of Actions Taken Protocols on managing cases to ensure gender-responsiveness, age-appropriate and culturally sensitive	Approval of the creation of new positions and/or designation of dedicated personnel for the program
	O4. Referral Pathway	Percentage of clients referred to other institutions	Directory of SWDAs Copy of Referral Forms/ Endorsements and Feedback Report from partner institutions	Further social service interventions from other OBSUs/ FOs and SWDAs provided Partner institutions will provide feedback to the DSWD after referral
Activities / Inputs	A1.1. Development of the Online PSS Platform	Available platforms are utilized Contact center platform is	Users Acceptance Testing Report Vulnerability Assessment	System bugs and glitches will be addressed immediately by developers and Internet Service

		enhanced	Report	Providers (ISPs)
		One (1) Mobile application developed	Mobile App Users' Guide	
	A1.2. Hiring of an ITO for the updating of the application	One (1) ITO hired	Copy of Contract of Service	There will be qualified applicants for ITO and Consultant based on the qualification standards and existing government requirements.
	A1.3. Hiring of Consultant for the development of the Data Privacy Manual	One (1) Data Privacy Manual developed	TOR for the Hiring of Consultant Approved Data Privacy Manual	
	A1.4. Provision of equipment and mobile load allowance	75 MHPSS providers provided with equipment and mobile load allowance	Report and Distribution List Approved Material Requisition (MR) Slip	Procurement of ICT assets and equipment based on the determined timelines Addendum to the Information Systems Strategic Plan (ISSP) will be approved
	A2.1. Development of training manual for service providers	One (1) Training Manual developed	Copy of Training Manual	Strong internet connection during the training
	A2.2 Pre-testing of MHPSS manual	No.of DSWD personnel who participated in the pretesting of manual	Pretesting Documentation Report	
	A2.3 Enhancement and finalization of MHPSS modules	One (1) Training Manual enhanced based on the result of	Approved Training Manual	

	A2.4 Online webinars and conferences for capability building activities	pretesting No. of MHPSS Service Providers pooled and trained	Documentation Report	
	A3.1 Conduct of MHPSS sessions	No. of MHPSS Sessions conducted No. of clients provided with MHPSS	Documentation Report Masterlist of trained staff Special Order of MHPSS Service Providers duly approved by the Head of Office	Trained personnel will be assigned as permanent MHPSS service providers.
	A3.2 Hiring of MHPSS Providers per region	Three (3) PDO IIs hired	Copy of Contract of Service	There will be qualified applicants for PDO II based on the qualification standards and existing government requirements.
	A4.1 Partnership with other SWDAs and other government agencies	No. of member SWDAs and other government agencies involved	Directory of members/ partners Minutes of the Meeting	Availability of SWDAs and other partner's provide appropriate interventions
	A4.2 Establishment of clear referral pathways	Referral pathways established	Referral flowchart	Smooth coordination among agencies involved in the pathway

Program Documentation

The Field Offices through the Regional Moderator shall submit a monthly statistical report (see annex D) to the Program Focal Person and Platform Administrator to the Program Management Bureau. The statistical data shall be consolidated by the Platform Administrator and readily available for sharing to the members of the Referral Network at the national and regional level and DSWD Committee on Mental Health.

Furthermore, the Field Offices shall prepare and submit a quarterly report to the Program Management Bureau detailing the activities conducted based on the approved Work and Financial Plan.

The Program Focal Person at the Central Office shall consolidate the quarterly reports of the Field Offices and extend technical assistance in the implementation of the program. The program milestones shall be properly documented as ready reference.

The good practices of the Field Offices shall likewise gather as part of the Explicit Knowledge. The documentation of good practices shall follow the DSWD Administrative Order No. 5, Series of 2016 or the Good Practice Documentation Guidelines.

Program Monitoring

Periodic monitoring shall be conducted by the Program Management Bureau to the Field Offices which can be done via on-site monitoring or online monitoring whichever is feasible and appropriate.

Monitoring activities shall be attended by the Regional Program Focal Person, Program Moderator, WiSUPPORT Service Providers and other concerned staff at the Field Offices. The scope of the program monitoring shall focus on the program implementation status and accomplishments based on the approved Work and Financial plan, issues and challenges and other related concerns. Other concerns relative to the technology based platforms shall also be discussed with the concerned staff of the Regional Information Communication and Technology Management Unit (RICTMU)

Monitoring activity shall also serve as a venue in identifying the follow through activities which will serve as basis in the succeeding monitoring activities.

Program Evaluation

Evaluation of the program can be conducted on a yearly basis to determine the outcome of the program based on the set work plan for the year. Furthermore, a Program Review and

Evaluation Workshop (PREW) can be conducted every three years to determine the relevance, effectiveness and efficiency of the program. The impact of the program to its target beneficiaries shall also be determined during the workshop. The result of the Client Exit Survey Form (see Annex C) shall be used as one of the references on how the WiSUPPORT Program responded to the Mental Health needs of the individual who availed the services.

The Evaluation Design (see annex I) developed which is based on the program Logical Framework shall serve as reference to measure the outcome/ success of the program implementation. During the review and evaluation of the program, the Program Management Team together with the members of the Referral Network need to participate.

Chapter 7: Institutional Arrangements

The Mental Health Committee adopts the DSWD WiSUPPORT as the flagship program of the Department in the provision of mental health and psychosocial support in accordance with the roles and responsibilities highlighted in the Implementing Rules and Regulations of the Mental Health Act.

The adoption of the program is relative to the function of the committee in shepherding the harmonization of plans, programs, and budgets as well as the performance review and assessment of the Department's mental health initiatives. Specifically for the WiSUPPORT program, the committee shall perform the following:

- a) Monitor the implementation of the program in the Department;
- b) Spearhead evaluation activities with regard to the implementation of the WiSUPPORT; and
- c) Review and recommend policies that will further support the implementation of the program.

The roles and responsibilities of all concerned Offices, Bureaus, and Services as well as the Field Offices relative to the WiSUPPORT implementation shall be as follows:

- **Program Management Bureau (PMB)**
 - a) Lead and manage the full implementation of the program in the Department and ensure completion of the program outputs;
 - b) Serve as resource persons and providers of Technical Assistance and Resource Augmentation to the Field Offices on the implementation, as needed;
 - c) Implement and provide psychosocial services utilizing the WiSUPPORT platforms through the Crisis Intervention Unit/s per DSWD Memorandum Circular No. 11 series of 2019 and come up with inputs and recommendations as to the basis for the enhancement of systems and materials;
 - d) Provide personnel in the implementation of the program particularly in the provision of psychosocial support and program management;
 - e) Facilitate hiring of personnel (Psychologist, Information Technology Officer, program Development Officer) based on the criteria set as indicated in the program manual;
 - f) Conduct capacity building of newly hired or designated service providers following the WiSUPPORT Training Manual and through the utilization of the E-learning course;
 - g) Convene coordination meetings among members of the TWG and Referral Network;
 - h) Prepare implementation reports, formulate a Work and Financial Plan (WFP);

- i) Update contents and enhance designs for the technology-based platforms in partnership with the ICTMS and STB;
 - j) Maintain the Referral Network established for the referral system of clients in need of specialized intervention;
 - k) Facilitate the periodic review and evaluation of the program as a basis for improvement of operational procedures;
 - l) Submit reports and other documents as requested by the DSWD Committee on Mental Health; and
 - m) Spearhead meetings and other activities related to the implementation of the program as Lead of the Technical Working Group (TWG).
- **Agency Operations Center (AOC)**
 - a) Serve as the receiving office of WiSUPPORT service requests received through its different platforms;
 - b) Designate personnel, preferably a registered Social Worker, who will be in-charge in the implementation of the program particularly on receiving and referring clients to Service Providers utilizing the WiSUPPORT System and based on the Flowchart for Referral;
 - c) Provide Psychological First Aid (PFA) to clients with MHPSS related concerns and assistance to clients with non-MHPSS related-concerns raised in the WiSUPPORT Platforms (e.g. queries on other DSWD programs); and
 - d) Participate in the meetings and other activities related to the implementation and periodic evaluation activities of the program.
- **Social Technology Bureau (STB)**
 - a) Provide technical assistance on the conduct of Learning Development Interventions for the WiSUPPORT service providers who will be trained on the program's implementation;
 - b) Develop a Program Training Manual for the capability-building of WiSUPPORT service providers in the provision of MHPSS, as needed;
 - c) Develop the Program Manual and Guidelines based on the pilot-testing experience and facilitate the enhancement of such as necessary;
 - d) Develop an E-learning Course on WiSUPPORT based on the Training Manual and ensure its inclusion in the SWIDB Learning Management System as a method of capacity building for service providers;
 - e) Provide technical assistance on the creation of positions for the start-up in the national implementation of the WiSUPPORT;
 - f) Organize the National Launching of the program in collaboration with Social Marketing Service prior to its national implementation;
 - g) Assist in the promotion of the program to Local Government Units and other stakeholders through the conduct of social marketing activities;

- h) Recommend impact evaluation of the program to Policy Development Bureau after 5 years of national implementation; and
 - i) Participate in meetings and other activities related to the implementation and periodic evaluation activities of the program.
- **Information, Communications, and Technology Management Service (ICTMS)**
 - a) Assist in the finalization of the Terms of Reference for the hiring of the Information and Technology Officer to be hired for the national implementation of the program;
 - b) Supervise the Information and Technology Officer hired for the program;
 - c) Enhance and maintain the technology-based platforms (web portal, WiSERV, and mobile application) for the implementation of the WiSUPPORT;
 - d) Provide technical assistance to ICT-related concerns of the program;
 - e) Provide support in the conduct of learning and development interventions on the use of wireless and online platforms;
 - f) Ensure the inclusion of features and functionalities in the system that will support compliance with Republic Act No. 10173 otherwise known as the Data Privacy Act of 2012 to protect the individual personal information that may be collected, processed, and/or shared through the information system based on the Privacy Impact Assessment (PIA), Data Privacy Manual and other privacy-related documents that will be developed by the Business Owner;
 - g) Provide technical assistance for hosting of the web, text messaging, and mobile applications;
 - h) Facilitate review and evaluation of the Data Privacy Manual on a yearly basis or as deemed necessary. Privacy and security policies and practices within the organization shall be updated to remain consistent with current data privacy best practices; and
 - i) Participate in the meetings and other activities related to the implementation and periodic evaluation activities of the program.
- **Disaster Response Management Bureau (DRMB)**
 - a) Designate and authorize staff to be trained as WiSUPPORT service providers who will be mobilized in the delivery of the program's intervention;
 - b) Provide technical assistance and support in the implementation of MHPSS based on the existing MHPSS module that the DSWD and Department of Health co-developed; and
 - c) Participate in the meetings and other related activities relative to the implementation and periodic evaluation activities of the program.
- **Social Marketing Service (SMS)**
 - a) Organize the National Launching of the program prior to its national implementation in collaboration with the Social Technology Bureau;

- b) Provide technical assistance and support in the development and implementation of the program's communication plan and promotional advocacy materials;
 - c) Spearhead the periodic evaluation of the program's Communication Plan; and
 - d) Participate in the meetings and other activities related to the implementation and periodic evaluation activities of the program.
- **Social Welfare and Institutional Development Bureau (SWIDB)**
 - a) Include the E-learning course on WiSUPPORT in the SWIDB Learning and Management System;
 - b) Provide technical assistance in the design and development of LDI plans that will reinforce learning;
 - c) Provide technical assistance on the enhancement of the WiSUPPORT Training Manual as necessary; and
 - d) Participate in meetings and other activities related to the implementation and periodic evaluation activities of the program.
- **Policy Development and Planning Bureau (PDPB)**
 - a) Provided technical assistance and inputs in the program indicators in the Harmonized Planning, Monitoring, and Evaluation System (HPMES) of the Department;
 - b) Ensure inclusion of updates regarding the WiSUPPORT implementation in the Department-wide reports and other reportorial requirements regarding the implementation of the DSWD along with its mandates on RA 11036 or the Mental Health Act;
 - c) Capture accomplishments in the Recalibrated Strategic Plan for Mental Health and capture/ highlight of the accomplishments during the Mental Health Committee Meetings;
 - d) Lead in the impact evaluation of the program after five years of implementation.
 - e) Participate in the meetings and other activities related to the implementation and periodic evaluation activities of the program.
- **Human Resource Management and Development Section (HRMDS)**
 - a) Ensure the conduct of care for the Caregivers/ Support Providers by providing regular mentoring sessions and psychosocial support to the WiSUPPORT service providers at the Central Office in collaboration with the Psychologist hired for the program and with the HRMDS counterpart in the Field Offices;
 - b) Provide technical assistance in the development of the Competency-based Job Descriptions and in the hiring of the WiSUPPORT program staff based on the approved Terms of Reference (TOR) both at the Central Office and Field Offices;
 - c) Assist in the widening of the Referral Network of the WiSUPPORT through maintaining contact with institutional networks and professionals to support the implementation of the DSWD's programs on Mental Health; and

- d) Participate in the meetings and other activities related to the implementation and periodic evaluation activities of the program.

- **General Administrative Services**

The General Administrative Services composed of the following Services of the DSWD shall provide logistics support in the implementation of the Program including its regional counterparts at the Field Offices. The specific functions of the concerned Services are as follows:

- a) **Financial Management Service (FMS)** shall provide support and advice in the Financial Management funds for the implementation of the program.
- b) **Administrative Service (AS)** shall provide support and assistance relative to the procurement of services and shall assist in the processing of other logistics needs such as communication load allowance of the WiSUPPORT Service Providers and other program administrative requirements.

The concerned Services shall participate in the meetings and other activities related to the implementation of the program per invitation as Resource Person and Technical Assistance Provider.

- **DSWD Field Offices**

- a) Facilitate the hiring of staff requirement based on the approved Terms of Reference (TOR);
- b) Designate and authorize additional staff to be trained as WiSUPPORT service providers who will be mobilized for the delivery of the program's interventions;
- c) Designate a Focal Person from the Program Management Unit/Division or its equivalent as the lead in the implementation of the program who shall coordinate activities to be conducted in the region;
- d) Establish a regional program Implementation Team composed of, but not limited to the following divisions/units: PMU, STU, CBSU, SMU, CBU, RICTMU, HRMDD, DRMD and other concerned units/ divisions to ensure systematic and coordinated program implementation;
- e) Designate a RICTMU focal person who will provide technical assistance along with IT-related activities and program concerns (i.e. on the web portal, WiServ, mobile application, and other online MHPSS platforms);
- f) Mobilize external partners both from the government agencies, non governmental organization and members of ABSNET who can be tapped in the provision of MHPSS and serve as members in the WiSUPPORT Referral Network;
- g) Submit reports and other documents as requested by the Regional Committee on Mental Health and to the Policy Development and Planning Bureau in accordance with the Harmonized Planning, Monitoring, and Evaluation System through the implementing Unit/Division at the Field Office;

- h) Facilitate the signing of the Non-Disclosure Agreement of all internal staff who are involved in the client's data collection, storage, and disposal;
- i) Facilitate the signing of Data Sharing Agreement (DSA) and/or Memorandum of Agreement (MOA), whichever is applicable, among members of the Regional Referral Network in adherence to the Data Privacy Act of 2012; and
- j) Participate in all activities relative to the implementation, periodic and impact evaluation of the program.

Annexes

Annex A. Directory of Referral Network

Annex A.1. National Level

Annex A.2. Regional Level

Annex B. Forms

Annex B.1. Informed Consent Form

Annex B.2. Profiling Form

Annex B.3. Progress Note

Annex B.4. Referral Form

Annex B.5. Referral Feedback Form

Annex C. WiSUPPORT Exit Survey Form

Annex D. Monthly Statistical Report Templates

Annex E. Non- Disclosure Agreement

Annex F. Advocacy and Communication Plan

Annex G. Business Process and Referral Pathway

Annex H. Data Privacy Manual

Annex I. Evaluation Design

Annex A. Directory of Referral Network

Annex A.1. National Level

Organization	Contact Number	Email Address	Available Services	Paid / Free	
CENTRAL OFFICE					
Psychological Association of the Philippines	PAP	Mobile Numbers: 0915-422-5189 0947-571-7629	mhpss.sig@pap.ph	Provides mental health support and other psychosocial support services.	Paid
Department of Labor and Employment	DOLE	Hotline (24/7) : 1349	n/a	Assistance to labor and employment issues and concerns.	Free
Philippine Red Cross	PRC	9452206656	welfare-old@redcross.org.ph	Provides MHPSS.	Free
Department of Health	DOH	8651-7800 Loc. 1733 (Mental Health Division) Loc. 2204 (HEMB Preparedness Division)	mhd@doh.gov.ph hembpreparedness@doh.gov.ph	Provide guidance in the overall implementation of the MHPSS Program Coordinates need for psychosocial services of affected population including capability building	Free
National Center for Mental Health	NCMH	0917-899-USAP 0917-899-8727 7-989-USAP 7-989-8727	ncmh.mcc@gmail.com ncmh.doh@yahoo.com ops-adult@ncmh.gov.ph	Provides mental health support.	Free

Annex A.2. Directory of Referral Network - Regional Level

FO NCR					
DOH- Office of the Metro Manila Center for Health Development	DOH-OMMCHD	Dr. Alexander Amante	Medical Officer II/ Health and Emergency Management	85310034	hemulhsd.dohncr@gmail.com
DOH- Office of the Metro Manila Center for Health Development	DOH-OMMCHD	Ms. Thea Marie Santiago	Health Program Researcher/ Mental Health Coordinator	85310034	hemulhsd.dohncr@gmail.com
National Center for Mental Health	NCMH	Dr.. Jhomel P. Cabuang Dr. Alden Cuyos	Chief, Medical Social Services Section Chief, Outpatient Services	8531 9001	jhomelpcabuang@gmail.com
FO VII					
Department of Health- R7	DOH-R7	Dir. JAIME S. BERNADAS, MD, MGM, CESO III	Regional Director	253-6355 / 260-9740	dohro7@gmail.com
Department of Labor and Employment -R7	DOLE R-7	Dir. SALOME O. SIATON	Regional Director	266-2792 / 234-3318	dole_centralvisayas@yahoo.com
Overseas Worker Welfare Administration-R7)	OWWA R-7	Dir. MAE D. CODILLA	Regional Director	231-5291 /	region7@owwa.gov.ph owwa.region7@gmail.com owwa_region7@yahoo.com
Philippine Mental Health Association-Cebu Chapter	PMHA Cebu	Ms. LINA B. LAIGO	President	9175652036	oned@pmha.ord.ph pmhacds@gmail.com pmhacebu1950@gmail.com

Philippine Red Cross- Cebu Chapter	PRC Cebu	Ms. MARIA VERA G. DE JESUS	Chapter Administrator	253-9793 / 328-9238/ 09562297675	cebu@redcross.org.ph
United Registered Social Worker-Visayas Cluster	URSW Visayas	Ms. MARIA TERESA YGNACIO-PARKER	Team Leader/ Cluster Leader	9164432224/ 09156432220	mtyparker888@gmail.com
FO CARAGA					
DOH Center for Health Development CARAGA	DOH Caraga	Dir. CAESAR C. CASSION, MPH, CESE	Regional Director	09086158754 / 09272304885	dohro13caraga@gmail.com
United Registered Social Worker- Caraga Cluster	URSW Caraga	Desiree Gonzales	Regional Group Leader	9057710909	dfgonzales@carsu.edu.ph
Task Force Jeremiah	TSJ	May A. Ocarez	Office Head	9778319432	oas@carsu.edu.ph
Department of Labor and Employment Caraga	DOLE Caraga	Dir. Naomi Lyn C. Abellana	Regional Director	342-9606	dolecaraga13@gmail.com
Overseas Worker Welfare Administration Caraga	OWWA Caraga	Dir. Ma. Ireen C. Cambaling	Officer-in-Charge	09503057533/ 09123289262/ 09551884858	caraga@owwa.gov.ph

Annex B. Forms

Annex B.1. Informed Consent Form

CONSENT FORM

DSWD WiSUPPORT: Wireless Mental Health and Psychosocial Support

Name: _____

Address: _____

Contact details: _____

Purpose: *The purpose of this form is to obtain your consent to participate in the Psychosocial Support (PSS) Session and voluntarily provide information that is useful, in compliance with the Data Privacy Act.*

Nature of the Tele/Online PSS Session: During the session:

- a) Details about you and your concerns will be discussed through the use of telecommunication technology and/or other online platforms
- b) Audio recordings may be taken during the session

Confidentiality: Reasonable and appropriate efforts have been made to eliminate any confidentiality risks associated with Tele/ Online PSS Session, and ensure all data privacy protections under the Data Privacy Act.

Rights: You may withhold or withdraw consent to the PSS Session at any time without affecting your right to future psychosocial support.

Please click your appropriate response:

I agree to participate in the Tele/ Online Psychosocial Support (PSS) Session described above.

I do not agree to participate in the Tele/ Online Psychosocial Support (PSS) Session described above.

Date: _____

Annex B.2. Profiling Form

PROFILING FORM	
DSWD WiSUPPORT: Wireless Mental Health and Psychosocial Support	
<p>Magandang araw po! Welcome sa DSWD WiSupport: Wireless Mental Health and Psychosocial Support! Maaari po lamang na ibigay ang mga impormasyong hinihingi ng mga sumusunod upang maiproseso ang inyong concern o mensahe. Kayo po ay makakasiguro na ang mga impormasyong inyong binigay ay magiging confidential alinsunod sa Data Privacy Act. Maraming Salamat po!</p>	
Name:	Date:
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Gender:
Age:	Marital Status:
Mobile Phone No.:	Address:
Email Address:	Is it ok to leave a message for you at this number? <input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency Contact Name:	Is it ok to email you? <input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency Contact Mobile Number:	How were you referred?
Message or Concern: <i>(Please provide your concern for us to facilitate your request)</i>	

PERSONAL INFORMATION:

Annex B.3. Progress Note

PROGRESS NOTE

DSWD WiSUPPORT: Wireless Mental Health and Psychosocial Support

Tracking Number:

Date of Intake (dd/mm/yy):

I. Client Information:

Name	
Age	
Sex	
Date of Birth	
Phone Number	
Email Address	
Occupation / Profession	
Emergency Contact Name	
Emergency Contact Details	

II. Problem / Concerns Presented:

--

III. Assessment:

--

IV. Actions Taken:

--

V. If Client is Referred to Other Service Providers:

Name of Receiving Agency	
Intervention Needed	
Remarks	
Date of Referral	

VI. Responses of Clients in Exit Survey (Optional)

Item I	
Item II	
Item III	

Annex B.4. Referral Form

REFERRAL FORM

DSWD WiSUPPORT: Wireless Mental Health and Psychosocial Support

Routine Urgent Date of referral

Referring Agency	
Agency:	E-mail Address:
Location:	Contact Details:

Receiving Agency	
Agency / Organization:	E-mail Address:
Location:	Contact Details:

Client Information	
Name:	E-mail Address:
Address:	Contact Details:
Age:	Sex:
Emergency Contact Name:	Emergency Contact Details:
If Client is a Minor (under 18 years)	
Name of Parent / Caregiver:	Relationship to the Child:
Contact Details:	

Background Information / Reason for Referral:	
Has the client informed of the referral? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, Explain Below)	Has the client been referred to any other organizations? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, Explain Below)

Service Requested		
<input type="checkbox"/> Mental Health Services	<input type="checkbox"/> Social Services	<input type="checkbox"/> Balik Probinsya Program
<input type="checkbox"/> Psychological Interventions	<input type="checkbox"/> CRCF	<input type="checkbox"/> Family Tracing Services
<input type="checkbox"/> Physical Health Care	<input type="checkbox"/> Education	<input type="checkbox"/> Nutrition
<input type="checkbox"/> Physical Rehabilitation	<input type="checkbox"/> Financial Assistance	<input type="checkbox"/> Social Amelioration Program
Please explain any requested services:		
Other requested Services:		

Annex B.5. Referral Feedback Form

REFERRAL FEEDBACK FORM

DSWD WiSUPPORT: Wireless Mental Health and Psychosocial Support

Name of Agency	
Agency:	E-mail Address:
Location:	Contact Details:

Client Information	
Name:	E-mail Address:
Address:	Contact Details:
Age:	Sex:
Emergency Contact Name:	Emergency Contact Details:
If Client is a Minor (under 18 years)	
Name of Parent / Caregiver:	Relationship to the Child:
Contact Details:	

Actions Taken

Remarks

Prepared by:

Name: _____

Designation: _____

Noted by:

Name: _____

Designation: _____

Annex C. WiSUPPORT Exit Survey Form

Annex C. WiSUPPORT Exit Survey Form



WiSUPPORT Exit Survey Form

Magandang araw! Maraming salamat sa pagbahagi mo ng iyong kwento sa amin. Kami sa DSWD WiSUPPORT ay patuloy na nagnanais na mas mapabuti ang pagbibigay ng serbisyo. Nais po naming malaman ang inyong feedback o katugunan batay sa inyong natanggap na serbisyo o mga impormasyon mula sa WiSUPPORT Service Providers.

[Mag-sign in sa Google](#) para i-save ang iyong pag-usad. [Matuto pa](#)

***Kinakailangan**

Anong WiSUPPORT Platform ang iyong ginamit para maipaabot ang iyong concern o request? *

- Web Portal
- Mobile Application
- DSWD WiServ
- Telepono / Mobile Hotline
- WiSUPPORT Email

Maaari mo bang bigyan ng rating ang aming paglilingkod gamit ang sumusunod:

- 1 - Lubos na hindi nasiyahan (Very Unsatisfactory)
- 2 - Hindi nasiyahan (Unsatisfactory)
- 3 - Nasiyahan (Satisfactory)
- 4 - Lubos na nasiyahan (Very Satisfactory)
- 5 - Napakahusay (Excellent)

Sa kabuuan, gaano ka nasiyahan sa naibigay saiyong serbisyo ng WiSUPPORT? *

- | | | | | | | |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-------------------------|
| | 1 | 2 | 3 | 4 | 5 | |
| Lubos na hindi nasiyahan
(Very Unsatisfactory) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Napakahusay (Excellent) |

Paano pa namin mas mapapabuti ang aming serbisyo?

Iyong sagot _____

Maraming salamat po sa inyong pagsagot. Manatili po tayong ligtas.

Submit

[I-clear ang form](#)

Huwag isumite kailanman ang mga password sa pamamagitan ng Google Forms.

Ginawa ang form na ito sa Department of Social Welfare and Development. [I-ulat ang Pag-abuso](#)

Google Forms

Annex D. Monthly Statistical Report Templates

Annex D. Monthly Statistical Report Templates

Department of Social Welfare and Development Social Technology Unit Field Office ___									
WiSUPPORT: Wireless Mental health and Psychosocial Support for Individuals and Families Affected by COVID-19 and Other Crisis Situations									
MONTHLY STATISTICAL REPORT MONTH CY 2022									
I. STATISTICAL DATA					<i>*Indicate the inclusive dates. Please refer to the guide regarding the coverage and date of submission.</i>				
Coverage :									
Number of Clients Served									
WiSUPPORT related concerns									
Age Range						Gender			Total
1-18	19-35	36-64	65-74	75-84	85 and beyond	Male	Female	Prefer not to Say	
0						0			
									0
Number of Clients Served									
Non-WiSUPPORT related concerns									
Age Range						Gender			Total
1-18	19-35	36-64	65-74	75-84	85 and beyond	Male	Female	Prefer not to Say	
0						0			
									0
Technology-Based Platforms				Number of Clients Served					
				WiSUPPORT related concerns	Non-WiSUPPORT related concerns			TOTAL	
Mobile Phone (calls and text)								0	
E-mail Address								0	
Web Portal								0	
Telephone Calls (AOC)								0	
Total				0	0			0	

II. NATURE OF CLIENT'S CONCERNS

**Enumerate the nature of client's concerns, eg. Depression, anxiety, suicidal thoughts, suicide attempts, family problems, issues with online studies, etc.*

III. INTERVENTIONS PROVIDED

Specific Intervention Provided to the Clients	Number of Clients Provided with Intervention/s
Provision of Psychosocial Interventions <i>(eg. Psychological First Aid, Counseling Session)</i>	
Provision of Information per queries of the client	
Referral to Partner agencies in Referral Network	
Total	

IV. ISSUES/CONCERNS and ACTIONS TO BE TAKEN

**Identify the issues and concerns encountered by the region during the implementation of the project.*

ISSUES and CONCERNS	

V. RECOMMENDATIONS

**Enumerate recommendations of the pilot regions here.*

Prepared by:

Name
Regional Moderator

Noted by:

Name
Head, STU

Department of Social Welfare and Development

Social Technology Unit

Field Office __

WiSUPPORT: Wireless Mental Health and Psychosocial Support for Individuals and Families Affected by COVID-19 and Other Crisis Situations

MONTHLY STATISTICAL REPORT

MONTH 2022

Question 1	Platform	Number of Clients
Anong WiSUPPORT Platform ang iyong ginamit para maipaabot ang iyong concern o request?	Web Portal	
	Mobile Application	
	DSWD WiServ	
	Telephone/ Mobile Hotline	
	WiSUPPORT Email	
TOTAL		0

Question 2	Average of Client's Responses
Sa kabuuan, gaano ka nasiyahan sa naibigay saiyong serbisyo ng WiSUPPORT?	Average rating of the services provided by WiSUPPORT 1 = <i>Very Unsatisfactory</i> , 5 = <i>Excellent</i>

Question 3
Paano pa namin mas mapapabuti ang aming serbisyo?
<i>*Input recommendations from the clients.</i>

Prepared by:

Noted by:

Name
Regional Moderator

Name
Head, STU

Annex E. Non-Disclosure Agreement

Annex E. Non-Disclosure Agreement (page 1)

NON-DISCLOSURE AGREEMENT

(Note: WiSUPPORT partners and external providers template)

FOR GOOD CONSIDERATION, and in consideration of my contract of service (professional and voluntary) with the **Department of Social Work and Development** (DSWD) — WiSUPPORT Project, the undersigned hereby agrees and acknowledges:

1. That during the course of my contract, there may be disclosed to me certain protected data of the DSWD such as but not limited to:
 - a) Personal information: any information whether recorded in a material form or not, from which the identity of an individual is apparent or can be reasonably and directly ascertained by the entity holding the information, or when put together with other information would directly and certainly identify an individual.
 - b) Sensitive personal information refers to personal information:
 - About an individual's race, ethnic origin, marital status, age, color, and religious, philosophical or political affiliations;
 - About an individual's health, education, genetic or sexual life of a person, or to any proceeding for any offense committed or alleged to have been committed by such person, the disposal of such proceedings, or the sentence of any court in such proceedings;
 - Issued by government agencies peculiar to an individual which includes, but not limited to, social security numbers, previous or current health records, licenses or its denials, suspension or revocation, and tax returns; and
 - Specifically established by an executive order or an act of Congress to be kept classified.
2. I agree that I shall not during, or at any time after the termination of my contract with the DSWD, use for myself or others, or disclose or divulge to others including future employees, any protected data, confidential information with or without label, or any other proprietary data of the DSWD in violation of this agreement.
3. That upon the termination of my contract from the DSWD:

Annex E. Non-Disclosure Agreement (page 2)

- a) I shall return to the DSWD all documents and property of the DSWD, including but not necessarily limited to: reports, manuals, correspondence, clients' data, computer programs, and all other materials and all copies thereof relating in any way to the DSWD's operation, or in any way obtained by me during the course of my contract. I further agree that I shall not retain copies, notes or abstracts of the foregoing.
- b) The DSWD may notify any future or prospective employer or third party of the existence of this agreement, and shall be entitled to full injunctive relief for any breach.

4. This agreement shall be binding upon me and my personal representatives and successors in interest, and shall inure to the benefit of DSWD, its successors and assigns; any breach of this agreement may be regarded as an infringement of the terms of the contract.

5. DSWD shall be entitled to seek remedies in the event that I have breached this agreement, or threatens to, in whole or in part. In such case, the DSWD may enter into an amicable settlement with me. The DSWD, however, reserves the right to pursue other remedies, including a claim for losses and damages should it determine that an amicable settlement would not serve its best interests.

6. That by affixing their signature, the Data Privacy Officer _____ and/or Head of the Social Technology Bureau shall ensure that the undersigned shall abide by this Non-Disclosure Agreement and by the principles and provisions of the Data Privacy Act of 2012.

IN WITNESS WHEREOF, the Parties have indicated their acceptance of this Agreement by their signatures below on the dates specified.

Annex E. Non-Disclosure Agreement (page 3)

Conforme:

Signature over Printed Name

Date of Signature

Attested by:

Signature over DPO's Name

Signature over STB Director's Name

Date of Signature

Date of Signature

Annex F. WiSUPPORT Advocacy and Communication Plan



**COMMUNICATION PLAN ON DSWD WiSUPPORT:
WIRELESS MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT**

I. Background

The Department of Social Welfare and Development (DSWD) issued the Administrative Order No. 03, series of 2020 otherwise known as the "DSWD COVID-19 Response and Recovery Plan (2020-2022)". One of the key deliverables hereto is the development of Technology-based Mental Health and Psychosocial Support and Modules for individuals, families, and communities with a high number of COVID-19 cases. Based on the experience of the United Registered Social Workers (URSW) in their provision of MHPSS during the Enhanced Community Quarantine, their organization receives 50 calls per day per region from people seeking psychosocial support.

It is in this context that the Social Technology Bureau, as the program development arm of the DSWD, proposed the development of this model to efficiently and effectively address the psychosocial needs of the different clientele groups that the agency is mandated to serve in these uncertain times caused by the pandemic and other crises.

The DSWD WiSUPPORT: Wireless Mental Health and Psychosocial Support (MHPSS) is a social welfare model of intervention that seeks to establish a systematic response to address the mental health and psychosocial needs of individuals and families affected by COVID-19 and other crises through the development and enhancement of wireless and online platforms. It also envisions to mobilize and capacitate MHPSS service providers at the national and regional level. This project also intends to make the MHPSS intervention more accessible to its intended clients by developing and utilizing technology-based platforms, in compliance with infection prevention, control measures, and other related guidelines.

As designed, the WiSUPPORT Project has four (4) components namely 1) Platforms for the Online MHPSS Sessions, 2) MHPSS Provision, 3) Learning and Development Interventions and 4) Referral Pathway. The platforms include the webportal, WiSERV text messaging, mobile application and calls using mobile phones. The MHPSS provision shall be conducted by trained MHPSS Service Providers through online sessions making use of Google Meet. The Learning and Development Interventions aim to build the capability

Annex F. WiSUPPORT Advocacy and Communication Plan (page 2)

of identified MHPSS service providers in the conduct of sessions following the Training Manual developed by the STB. The manual includes topics on understanding CoVid19 and other crisis situations, mental health and psychological well-being, skills needed in Psychological First Aid and protocols in using the WiSUPPORT platforms. Lastly, the Referral Pathway describes the process to be undertaken by the WiSUPPORT moderators, MHPSS providers and key focal persons from partner institutions in managing cases that are beyond the mandate of the DSWD (e.g. cases needing professional expertise of psychologists and psychiatrists).

Realizing the gaps in information between the DSWD and the general public, the platforms of the WiSUPPORT and the services that the social technology offers needs to be communicated clearly. Thus, this Communication Plan was drafted to guide the Social Marketing Service and the Social Technology Bureau on how to communicate the WiSUPPORT Project to key stakeholders and its intended beneficiaries.

II. The Need for a Communication Plan

To serve as a guidepost among project implementers and to inform the public, including the stakeholders regarding WiSUPPORT, this communication plan was drafted to execute the Department's duties and responsibilities outlined in the Implementing Rules and Regulations of Republic Act No. 11036 otherwise known as "The Mental Health Act of 2018". Likewise, the critical role of the Department in providing psychosocial support to the individuals and families affected by COVID-19 and other crises will be emphasized in accordance with the DSWD Response and Recovery Plan.

Based on the risk assessment conducted by the STB, the influx of calls from the public and negative image on the WiSUPPORT were noted as probable and could have major impact on the project if the operational side of the project is not yet in-place and established. Once the project is launched, an influx of calls is expected considering the rising number of people experiencing mental health concerns due to the pandemic. Furthermore, the launching may raise the public's expectation from the DSWD in providing psychosocial support and may lead to a negative image of the WiSUPPORT if it would not be backed by solid operations. In this regard, this Communication Plan intends to clarify the target audiences for information dissemination about the WiSUPPORT and the support mechanisms in-case calls will be coming from non-pilot areas.

Lastly, there is a risk for the project to be misconstrued as an emergency hotline. With the help of other stakeholders and members of the Referral Network, this misconception may be prevented if they are provided aid, in the form of IEC materials that explain the project, provides clear messaging and supplies complete information. In this light, this Communication Plan also highlights

Annex F. WiSUPPORT Advocacy and Communication Plan (page 3)

the need for collaboration between internal and external stakeholders of the project to highlight that the WiSUPPORT components revolve around prevention of mental health illnesses and the provision of psychological first aid.

III. Objectives

This communication plan generally aims to communicate DSWD's implementation of the WiSUPPORT, including the procedures and cooperation engagements, as indicated in Administrative Order No. 03, series of 2020, or the DSWD COVID19 Response and Recovery Plan.

Specifically, it aims to:

1. Inform the target beneficiaries that the DSWD has initiated relevant, responsive, and timely assistance along with their MHPSS needs.
2. Encourage the target clientele group to access the WiSUPPORT platforms and MHPSS interventions.
3. Build awareness among the public or netizens and the media about the DSWD's implementation of the WiSUPPORT.
4. Engage stakeholders to take part in the DSWD's mental health and psychosocial support (MHPSS) efforts.
5. Provide guidance to OBS and FOs focal program implementers on the critical project information, including the operational features and phases of WiSUPPORT.

IV. Target Audiences

To prevent the influx of calls and better manage the general public's trust, the target audience are highly recommended to be limited and focused on the pilot regions (National Capital Region, Region VII, and CARAGA) and the Local Government Units within their jurisdiction. The target audiences to which the communication initiatives will be directed include the following:

Internal:

1. DSWD Internal Staff which includes the Social Technology Bureau, Program Management Bureau, Disaster Response and Management Bureau, Human Resource Management and Development Service, International Social Services Office and the three pilot regions.

Annex F. WiSUPPORT Advocacy and Communication Plan (page 4)

External:

2. The program shall be catering to the following clientele groups:
 - Overseas Filipino Workers in Distress
 - Children in Need of Special Protection
 - Senior Citizens in distress
 - Family Heads and Other Needy Adults
 - Other Individuals, and Families in Distress from the pilot areas
3. Public and Netizens
4. Members local media from the NCR, Region VII and CARAGA
5. Members of the Referral Network
 - Department of Health
 - National Center for Mental Health
 - Regional DOH Offices
 - Civil Society Organizations offering MHPSS

v. Communication Channels

All available communication channels will be utilized so that the intended audience will obtain understanding and appreciation of the WiSUPPORT. The information materials will be disseminated through the traditional medium (TV, print, radio) and digital media (DSWD website, Facebook Pages of the DSWD NCR, VII and CARAGA, web portal).

Platform moderators shall be responsible for receiving requests for MHPSS provision through the platforms available. The request shall undergo filtering based on the urgency and severity of the case. The project will operate from 08:00 AM to 05:00 PM from Mondays to Fridays excluding holidays. Each session with the client will evolve within the framework of Psychological First Aid shall be conducted for an average of thirty (30) minutes. For clients coming from non-pilot areas shall receive notice that such requests shall be directly referred to the DOH, NCMH and CSO partners providing the same services.

Annex F. WiSUPPORT Advocacy and Communication Plan (page 5)

Facebook Analytics will be used as a means to gather data and generate initial profiles of clients. Through Facebook, the STB and SMS can have an idea as to the geographical location and age range (among other demographics) of users that take interest in the WiSUPPORT project. From this initiative, the DSWD can also get data on the social media practices of the target clientele since the WiSUPPORT services are provided online.

VI. Implementation Plan

OVERARCHING MESSAGE: *DSWD offers services of trained counselors to individuals who need psychosocial support or those who need to vent their worries and concerns.*

Audience	Specific Behavioral Objective	Take Away Messages	Indicative Activities	Time Frame	Responsible Office	Evaluation	
						Tool	Success Indicator
Target Clientele: <ul style="list-style-type: none"> • Overseas Filipino Workers in Distress • Children in Need of Special Protection • Senior Citizens in distress • Family Heads and Other Needy Adults • Other Individuals, and Families in Distress from the pilot areas 	Access WiSupport platforms to avail professional psychological and psychiatric support services	I will use WiSupport platforms every time that I feel like I need someone to talk to	30 second video Facebook Ads Launching (Facebook Live in Regions NCR, VII and CARAGA)	March to April 2021 March 30, 2021	STB and SMS STB and SMS	Facebook Analytics	No. of Facebook Users reached in the targeted areas
	Access WISUPPORT platforms to get information on self-care tips in maintaining good mental health and psychological well-being	I will regularly check the mobile application or the web-portal to get tips on taking care of myself	Infographics and videographics (on how to access the services through the platforms)	March to December 2021	STB and SMS	Analytics of the different platforms: 1. Web portal 2. WISERV text messaging service	No. of users of the different platforms No. of intake forms gathered through the web portal
	Encourage his / her sphere of influence to use	I will encourage my neighbors / friends to use the platforms so					

Annex F. WiSUPPORT Advocacy and Communication Plan (page 6)

	WiSUPPORT platforms	that they will benefit from it					
	Feel free to give suggestions to improve the service / platforms	I will accomplish the Client Satisfaction Survey so that my suggestions are considered	Client Satisfaction Survey after the MHPSS Sessions	April to December 2021	STB	Number of individuals who responded to CSS	Very Satisfactory rating in majority of the accomplished surveys
General Public / Netizens (focused in the pilot areas)	Like and share posts about WiSUPPORT materials posted in social media Help in the information dissemination about WiSUPPORT	I will help DSWD by disseminating WiSUPPORT related information	<ul style="list-style-type: none"> • Infographics and Videographics • Media Cards • Radio guestings in community radio stations of Regional Directors • Use of hashtags #DSWD-EKwento Mo (Launching) • #DSWDMayMalasakit 	March to December 2021	STB and SMS	Media monitoring and analysis	Positive mentions vs. negative mentions
LGUs / Legislators (in pilot areas)	Promote WiSUPPORT among its constituents Help in the information dissemination about the importance of mental health	It is our primary duty to inform our constituents about mental health related matters	Email FAQ on WiSUPPORT	March to June 2021	STB and SMS	Media Monitoring	No. of mentions by LCEs / Legislators
Local Media	Write and publish balanced or	It is my duty as a journalist to	Issuance of Press Releases	March to June 2021 March 2021	STB and SMS STB and SMS	Media monitoring	No. of PRs aired/published

Annex F. WiSUPPORT Advocacy and Communication Plan (page 7)

	positive stories and views	provide balance news at all times	Meeting with Editors				
	Report the complete and impartial stories with correct attributes	Balance presentation of news and views adds to my credibility	Radio/TV interviews of DSWD executives and resource persons Press Conference during the Launching	April to December 2021 March 30, 2021	STU, Field Offices STB and SMS	Media monitoring Media monitoring	No. of media interviews No. of media organizations covered / published about the event

VII. Resources Needed

In the duration of the pilot-testing of the WiSUPPORT Project in 2021, the matrix below provides the budgetary requirements needed to implement the Communication Plan:


Activities	Items	Details	In-Charge	Cost
Launching (Physical and Virtual) and Press Conference	Catering / Meals	1,800 x 50 participants	Central Office (STB)	90,000.00
	Jackets	1,400 x 50 participants	Central Office (STB)	70,000.00
	Honorarium for Emcee		Central Office (STB)	20,000.00
	Banner Tarpaulin	(6 ft x 16 ft)	FO NCR	6,000.00
Development of IEC Materials	Flyers / Briefers	P10 x 5 pages x 700 copies	FOs NCR, VII and CARAGA	35,000.00
	Stickers	P5000 x 3 regions	FOs NCR, VII and CARAGA	15,000.00
	Pull-Up Standees	P3,000 x 6 pieces	FOs NCR, VII and CARAGA	18,000.00


Annex F. WiSUPPORT Advocacy and Communication Plan (page 8)

	Refrigerator Magnets	P10,000 x 3 regions	FOs NCR, VII and CARAGA	30,000.00
Utilization of Facebook Ads for Targeted Audience	Facebook Ads (30 sec teaser videos)	P200 / 5 days x 6 (Ad) P600 x 15 days (Post boosts)	Central Office (STB)	10,200.00
	Facebook Ads (30-sec teaser videos)	P200 / 5 days x 6 (Ad) x 3 regions; P600 x 15 days (Post boosts) x 3 regions	FOs NCR, VII and CARAGA	30,600.00
TOTAL				336,800.00


- Nothing follows -

Submitted by:

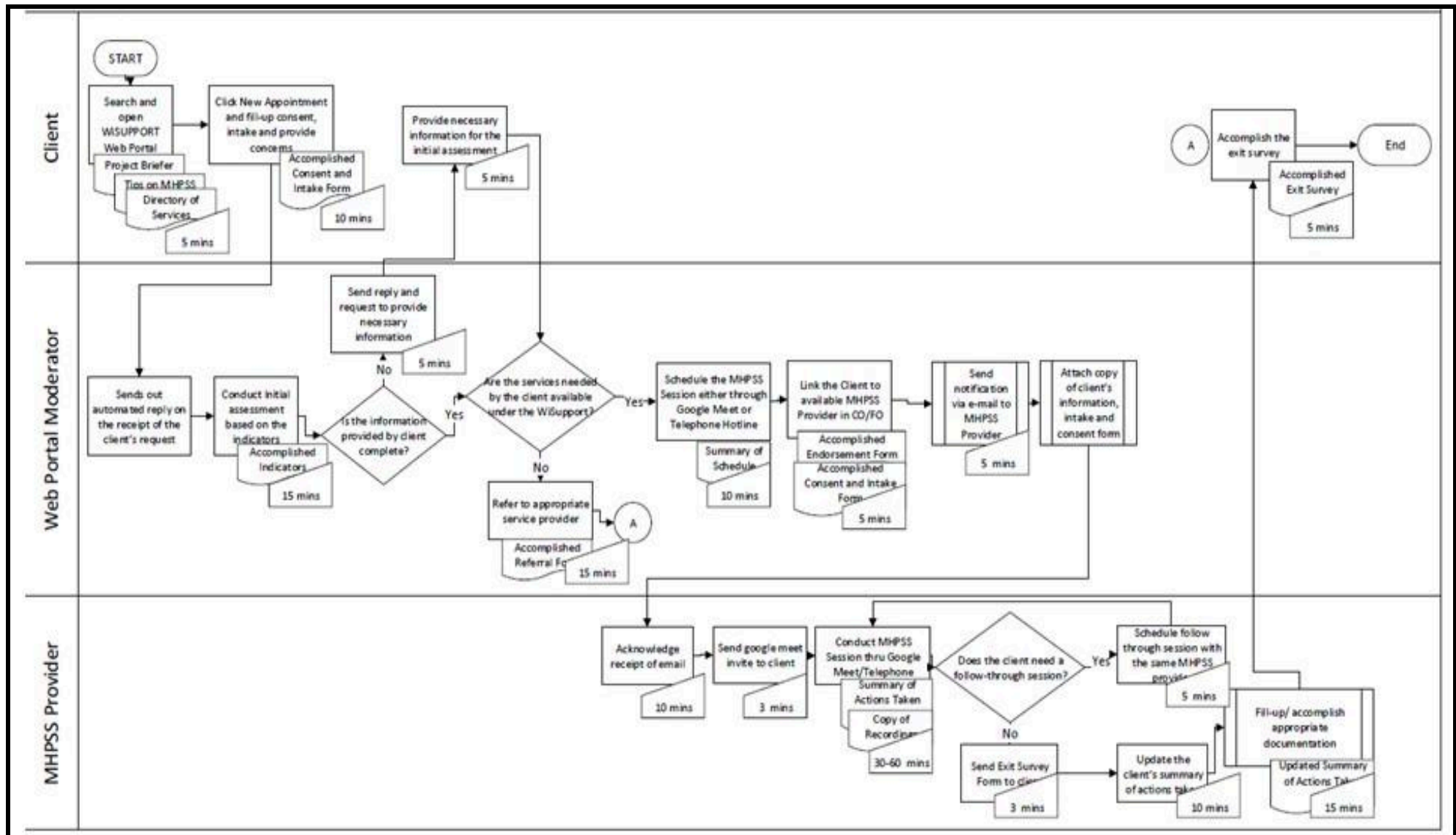

DIRECTOR IRENE DURLAO
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 Social Technology Bureau *cd*

Approved by:


CAMILO G. GUDMALIN, CESO I
 Concurrent Undersecretary
 Standards and Capacity Building Group *A*

Annex G. WiSUPPORT Business Process and Referral Pathway



Annex H. WiSUPPORT Data Privacy Manual

Wireless Mental Health and Psychosocial Support

Data Privacy Manual

March 2021

1. Introduction

The Wireless Mental Health and Psychosocial Support (WiSUPPORT) Privacy Guidelines are hereby adopted in compliance with Republic Act No. 10173 or the Data Privacy Act of 2012 (DPA), its Implementing Rules and Regulations, and other relevant policies, including issuances of the National Privacy Commission.

The Coronavirus Disease (COVID-19) disrupted Filipino family's lives in the past few months since the pandemic began in early 2020. The lockdown measures by the National Government imposed restrictions in the day-to-day lives of Filipinos which affected the socio-economic and the overall mental state and wellness of the people. It also resulted in a massive loss of jobs, sickness, loss of loved ones, displacements, isolation, financial crisis, and other social and health issues that affected the psychological well-being of the people.

As part of the COVID 19 Response and Recovery Plan of DSWD, Wireless Mental Health and Psychosocial Support (WiSUPPORT) project was developed under the auspices of the DSWD Social Technology Bureau (STB), to mitigate the serious long-term impact of COVID-19. WiSUPPORT convenes essential social supports deemed to protect and support mental health and psychosocial well-being of the people in times of emergencies.

WiSUPPORT Web Portal provides a facility for psychosocial support services to help address the mental health and psychosocial needs of individuals and families affected by COVID-19 and other crises. Through this portal, all information related to MHPSS will be posted including the other available platforms for the public to access the service. The web portal link enables the WiSUPPORT MHPSS Service Providers to provide and assess psychosocial support services to its clientele.

DSWD respects and values the data privacy rights of its data subjects, and makes sure that all personal data collected, are processed in adherence to the general principles of transparency, legitimate purpose, and proportionality.

This Manual shall inform WiSUPPORT Web Portal users and the public about data protection and security measures, and may serve as a guide in exercising the rights of data subjects under the DPA.

Policy Statements

1. DSWD-WiSUPPORT adheres to the general principles of transparency, legitimate purpose, and proportionality in the collection, processing, securement, retention, and disposal of personal information.
2. The data subjects whose personal information is being collected shall refer to the individuals and families of the general public affected by the COVID-19 pandemic and other crises.
3. Data subjects shall be informed about the reason or purpose of collecting and processing personal data.
4. The data subjects shall have the right to correct the information especially in cases of erroneous or outdated data and to object to the collection of personal information within the bounds allowed by privacy law.
5. The data subject has the right to file a complaint in case of breach or unauthorized access to his/her personal information.
6. DSWD shall secure the personal information of data subjects from whom personal information is collected and shall take adequate measures to secure both physical and digital copies of the information.
7. DSWD shall ensure that personal information is collected and processed only by authorized personnel for legitimate purposes of providing specialized mental health and psychosocial support to its clients seeking support.
8. Any information that is declared obsolete based on the internal privacy and retention procedures shall be turned over for archiving and other appropriate measures.
9. Any suspected or actual breach of the DSWD -WiSUPPORT Data Privacy policy must be reported to any member of the Data Privacy Response Team under DSWD processes and procedures.
10. Data subjects may inquire or request information from the Data Privacy Response Team, regarding any matter relating to the processing of their data under the custody of WiSUPPORT, including the data privacy and security policies implemented to ensure the protection of their data.

2. Definition of Terms

- *Authorized Personnel* refers to the employees or officers of DSWD and concerned WiSUPPORT Team members specifically authorized to collect and/ or to process personal information either by the function of their office or position or through the specific authority and agreements given by the policies of the agency.
- *Consent of the data subject* refers to any freely given, specific, informed indication of will, whereby the data subject agrees to the collection and processing of personal information about and/or relating to him or her. The consent shall be evidenced by written, electronic, or recorded means. It may also be given on behalf of the data subject by an agent specifically authorized by the data subject to do so.
- *Coronavirus disease (COVID-19)*, is an infectious disease caused by a newly discovered coronavirus. The virus spreads primarily through droplets of saliva discharge from the nose when an infected person coughs or sneezes (WHO).
- *Personal Information Processors (PIP)* collectively refers to the WiSUPPORT Project Development Officers (PDO) working under the DDPO and stationed at the DSWD Field Offices and DSWD National Office. It also refers to any natural or juridical person or any other body to whom a PIC may outsource or instruct the processing of personal data pertaining to a data subject;
- *Data Processing System* refers to a structure and procedure by which personal data is collected and further processed in an information and communications system or relevant filing system, including the purpose and intended output of the processing.
- *Data Privacy Act or DPA* refers to Republic Act No. 10173 or the Data Privacy
- *Data subject* refers to an individual whose personal information is processed
- *Designated Data Privacy Officer (DDPO)* refers to the individual designated to monitor and ensure the implementation of the Data Privacy policies of DSWD WiSUPPORT Project. The DDPO is also the de facto head of the WiSUPPORT Data Privacy Response Team.
- *Data sharing* is the disclosure or transfer to a third party of personal data under the control or custody of a PIC or DPO: Provided that a PIP may be allowed to make such disclosure or transfer if it is upon the instructions of the PIC concerned. The term excludes outsourcing or the disclosure or transfer of personal data by a PIC to a PIP.
- *Data Privacy Response Team* refers to the group of individuals designated to respond to inquiries and complaints relating to data privacy and to assist in the monitoring and implementation of the WiSUPPORT Data Privacy Policy. The Data Privacy Response Team is composed of the Designated Data Privacy Officer, Project Development Officers, DSWD Infor-

mation Communication and Technical Support, (ICTMS), and Project Development Officers under WiSUPPORT.

- *A filing system* refers to any set of information relating to a natural or juridical person to the extent that, although the information is not processed by equipment operating automatically in response to instructions given for that purpose, the set is structured, either by reference to individuals or by reference to criteria relating to individuals, in such a way that specific information relating to a particular person is readily accessible.
- *Information and Communications System* refers to a system for generating, sending, receiving, storing, or otherwise processing electronic data messages, or electronic documents, and includes the computer system or other similar device by which data is recorded, transmitted, or stored, and any procedure related to the recording, transmission or storage of electronic data, electronic message, or electronic document; outsource or instruct the processing of personal data about a data subject.
- *Mental Health* refers to one's emotional, psychological, and social well-being. When one's mental health is maintained positively, he or she can realize his or her full potential, cope with the stresses of life, work productively and make meaningful well-being, and/or prevent or treat mental disorders.
- Mental Health and Psychosocial Support (MHPSS) is used to describe any type of local or outside support that aims to protect or promote psychosocial well-being and/or treat mental disorders.
- Psychosocial denotes the interconnection between psychological and social processes and the fact that each continually interacts with and influences the other.
- Psychosocial well-being consists of positive relationships with others, personal mastery or self-acceptance, autonomy, a feeling of purpose and meaning in life, and personal growth and development (Carol Ryff, 1989)
- *Personal data* collectively refers to Personal Information, Sensitive Personal Information, and Privileged Information.
- *Personal data classification* refers to the *categories of personal information* collected and processed and classified as public, confidential, and classified. WiSUPPORT personal data is classified as:
 - a. **Public**- these are information readily available and may be disclosed to the public such as: published research or report containing the number of clients availing WiSUPPORT by age, sex, regions.
 - b. **Confidential**- Those which are declared confidential by law or policy and which may only be processed by authorized personnel, and if disclosed may cause material harm to the organization, or information is sensitive as will affect the health or well-being of the individual or data subject such as names, addresses, contact numbers, SSS, Phil-

Health, health information, child counseling and medical records (Data Privacy Law); financial information of parents and family members.

c. **Classified**- These are information the access of which is highly restricted, and if disclosed may cause severe or serious harm or injury to the data subject or third party, such as computer passwords (Data Privacy Law, Anti-Cyber Crime Law, DSWD-CTIM policies), and WiSUPPORT Web portal login.

- *Personal Information Controller* refers to the overall Data Privacy Officer of DSWD who controls the collection, holding, processing, or use of personal information, including a person or organization who instructs another person or organization to collect, hold, process, use, transfer or disclose personal information on his or her behalf. The term excludes:
 - (1) A person or organization who performs such functions as instructed by another person or agency; and
 - (2) An individual who collects, holds, processes, or uses personal information in connection with the individual's personal, family, or household affairs.
- *Processing* refers to any operation or any set of operations performed upon personal information including, but not limited to, the collection, recording, organization, storage, updating or modification, retrieval, consultation, use, consolidation, blocking erasure, or destruction of data.
- *Profiling* refers to the manual and automated processing of personal data such as an individual's economic situation, political or religious beliefs, behavioral, location data, and financial data, among others, to evaluate, analyze, or predict his or her performance, qualities, and behavior, among others.
- *Security incident* refers to any event or occurrence that affects data protection or may compromise the availability, integrity, and confidentiality of personal data. It includes incidents that would result in a personal data breach, if not for safeguards that have been put in place. A "personal data breach," on the other hand, is a subset of a security breach that leads to "accidental or unlawful destruction, loss, alteration, unauthorized disclosure of, or access to, personal data transmitted, stored, or otherwise processed.
- *Sensitive personal information* refers to personal information: (1) about an individual's race, ethnic origin, marital status, age, color, and religious, philosophical, or political affiliations; (2) about an individual's health, education, the genetic or sexual life of a person, or to any proceeding for any offense committed or alleged to have been committed by such person, the disposal of such proceedings, or the sentence of any court in such proceedings; (3) issued by government agencies peculiar to an individual which includes, but not limited to, social security numbers, previous or current health records, licenses or its denials, suspension or revocation, and tax returns.
- WiSUPPORT is a technology-based platform for COVID-19 and other emergency responses. DSWD through the WiSUPPORT Web portal works on reaching out to in-

dividuals and families in need of psychosocial support during various crises that affect their mental health and psychological well-being. The process starts with online registration through the web portal which enables the collection of personal information which will facilitate assessment and referral on the merits of individual cases seeking care and support.

3. Scope and Limitations

The administrators, moderators, and MHPSS Providers of WiSUPPORT, regardless of the type of employment or contractual arrangement, must comply with the terms set out in this Privacy Manual.

The data collection covers the personal information of data subjects such as personal, mental health, and psycho-social support assessments; it also includes referral pathways, types of intervention provided, and services needed or availed.

The scope of data collection and intervention covers the pilot regions NCR, VII, and CARAGA. It is also open for Filipino Overseas Foreign Workers abroad which will be administered by the Social Welfare Attache of Philippine Embassy offices in respective countries where the OFWs are currently based. *The scope of the magnitude of intervention shall be reviewed through another round of Privacy Impact Assessment to cover more areas and clients during the institutionalization and/or replication of this project in other areas.*

4. Processing of Personal Data

- Collection

The personal information will be sourced directly from individuals and families in need of Psychosocial Support (PSS). The WiSUPPORT web-based technology shall be piloted in regions NCR, VII, and CARAGA and also covers Filipino Overseas Foreign Workers abroad which will be administered by the Social Welfare Attache of Philippine Embassy offices in respective countries where the OFWs are currently located. DSWD through the WiSUPPORT Web portal will be collecting information voluntarily from the subjects.

The following information will be collected using a secure web-based system lodged under DSWD, such as **full name, sex, gender, date of birth, email address, civil status, location/address, contact number, emergency contact number, and CID number.**

To ensure data quality in the collection and processing of information, WiSUPPORT ensures that the data generated is not shared with any other party and to reinforced security from unauthorized use through regular analysis of traffic data, specifically — user IP address, search

terms used, pages and internal links accessed in the site, date and time a user visits the site, geolocation, referring site platform, operating system and web browser type.

- Use

Information collected may be used as a basis for client response regarding services or intervention that may be provided by DSWD and MHPSS providers. Information will not be shared with any third party outside of the Government, other than as necessary to fulfill the requested services of a client. Unless otherwise provided, the DSWD or any of its authorized personnel/ MHPSS may contact the client via email or by phone to provide care and support, changes to this privacy policy, or other information to affect the social service mandate of the DSWD.

The use and disclosure of information will be governed by consent agreements in the form of NDA (Non-Disclosure Agreements) with DSWD employees with temporary employment status and Data Sharing Agreement (DSA) between partner government agencies (e.g. DOH), mutually signed by relevant parties.

- Storage, Retention, and Destruction

Personal Information Processors in the project areas will ensure that personal data under its custody are protected against any accidental or unlawful destruction, alteration, and disclosure as well as against any other unlawful processing. PIPs will implement appropriate security measures in storing collected information, depending on the nature of the information. All information gathered shall not be retained for a person longer than 15 years or when the file is no longer in use or active. Up until such time, all electronic files of personal information shall be archived through the system and filed through secured means.

- Access

Due to the sensitive and confidential nature of the personal data under the custody of DSWD and partner agencies, only the authorized representatives shall be allowed to access such personal data, for any purpose, except for those contrary to law, policy, public order, or morals.

Electronic copies of the personal data will be stored in the web databanks (cloud storage).

- Disclosure and Sharing

All DSWD employees and personnel involved in the WiSUPPORT initiative shall maintain the confidentiality and secrecy of all personal data that come to their knowledge and possession, even after resignation, termination of a contract, or other contractual relations. Personal data under the custody of concerned offices shall be disclosed only according to a lawful purpose, and authorized recipients of such data.

Disclosure and sharing of data will only be used for a legitimate purpose and will be executed with consent from authorized personnel (PIC) and covered by an NDA by both parties.

5. Security Measures

DSWD and partners will implement reasonable and appropriate physical, technical and organizational measures for the protection of personal data. Security measures will be of prime importance to maintain the availability, integrity, and confidentiality of personal data and protect them against natural dangers such as accidental loss or destruction, and human dangers such as unlawful access, fraudulent misuse, unlawful destruction, alteration, and contamination.

Moreover, DSWD ensures that the system is regularly tested for accuracy; Periodic reviews of the information (yearly, semestral monitoring); disposal schedule in place that deletes information that is over the retention period; staff are trained in the use of the tools and receive periodic updates; reviews of audit trails are undertaken regularly (ICTMS), automated; independent oversight; and incidents are reviewed for lessons learned and systems/processes updated appropriately.

5.1 Organization Security Measures

1. Data Protection Officer (DPO)

The Overall Data Protection Officer shall oversee the compliance of the DSWD with the DPA, its IRR, and other related policies, including the conduct of a Privacy Impact Assessment, implementation of security measures, security incident and data breach protocol, and the inquiry and complaints procedure.

Overall, DPO monitors the WiSUPPORT compliance with the DPA, its IRR, issuances by the NPC, and other applicable laws and policies. Specifically:

- a. collect information to identify the processing operations, activities, measures, projects, programs, or systems, and maintain a record thereof;
- b. analyze and check the compliance of processing activities, including the issuance of security clearances to and compliance by all other parties;
- c. inform, advise, and issue recommendations to the Designated Data Privacy Officers (DDPOs);
- d. ascertain renewal of accreditations or certifications necessary to maintain the required standards in personal data processing; and
- e. advise the DDPOs as regards the necessity of executing a Data Sharing Agreement with other parties, and ensure its compliance with the law;
- f. ensure the conduct of Privacy Impact Assessments relative to activities, measures, projects, programs, or systems of the WiSUPPORT;
- g. advise the DDPOs regarding complaints and/or the exercise by data subjects of their rights (e.g., requests for information, clarifications, rectification, or deletion of personal data);
- h. ensure proper data breach and security incident management by the DDPOs, including the preparation and submission to the NPC of reports and other documentation concerning security incidents or data breaches within the prescribed period;

- i. inform and cultivate awareness on privacy and data protection within WiSUPPORT Team, including all relevant laws, rules and regulations and issuances of the NPC;
- j. serve as the contact person of the DDPOs, PDOs vis-à-vis data subjects, the NPC and other authorities in all matters concerning data privacy or security issues or concerns;
- k. cooperate, coordinate and seek the advice of the NPC regarding matters concerning data privacy and security; and
- l. perform other duties and tasks that may be assigned by the DSWD that will further the interest of data privacy and security and uphold the rights of the data subjects.

Except for items (a) to (c), WiSUPPORT DDPOs at the DSWD Central Office and DSWD Field Offices shall perform all other functions of a DPO. Where appropriate, he or she shall also assist the supervising DPO in the performance of the latter's functions.

The organization shall sponsor mandatory training on data privacy and security at least once a year. For personnel and PDOs directly involved in the processing of personal data, management shall ensure their attendance and participation in relevant training and orientations, as often as necessary.

2. Conduct of Privacy Impact Assessment (PIA)

The DSWD shall conduct a Privacy Impact Assessment (PIA) relative to all activities, projects, and systems involving the processing of personal data.

Under the guidance of DDPOs in DSWD Field Offices and DSWD Central Office, recording and documentation of activities shall be carried out by the PDOs, or the organization itself, to ensure compliance with the DPA, its IRR, and other relevant policies.

DSWD shall organize mandatory training on data privacy and security at least once a year. For personnel directly involved in the processing of personal data, management shall ensure their attendance and participation in relevant training and orientations, as often as necessary.

3. Duty of Confidentiality

All authorized personnel of DSWD and all other parties will be asked to sign a Non-Disclosure Agreement. All employees with access to personal data shall operate and hold personal data under strict confidentiality if the same is not intended for public disclosure.

4. Review of Privacy Manual

This Manual shall be reviewed and evaluated annually or as deemed necessary. Privacy and security policies and practices within the organization shall be updated to remain consistent with current data privacy best practices.

5.2 Physical Security Measures

DSWD and partners will develop procedures intended to monitor the activities therein. This may include the use of policies and procedures to allow regular monitoring, allocate dedicated workstations for facilities, and as some guidelines that specify the proper use and access to electronic media such as locks, back-ups for computers, workstation protection, and others.

Moreover, security measures are further enhanced to ensure adequate protection from mechanical destruction, tampering, and alteration of personal data under the custody of the respective offices will be protected from disasters, power disturbances, external access, and other similar threats. These are:

- a. Data collected will be stored in digital/electronic format
- b. Persons involved in processing shall always maintain the confidentiality and integrity of personal data.
- c. Transfers of personal data via electronic mail will be made using official emails for WiSUPPORT. As to the retention and disposal procedure, the WiSUPPORT shall retain the personal data of a client for 15 years when no longer in use and upon assessment. As mandated by the National Archives of the Philippines Act of 2007, all physical and electronic copies of the personal data shall be turned over for archiving upon expiration of such period.

5.3 Technical Security Measures

DSWD and partners in respective areas shall implement technical security measures to make sure that there are appropriate and sufficient safeguards to secure the processing of personal data, particularly the computer network in place, including encryption and authentication processes that control and limit access. They include the following, among others:

1. *Monitoring for security breaches.* The WiSupport is equipped with an Audit Trail for logging activities (e.g. record creation and modification). The hosting facility is also equipped with network security solutions for logging and mitigating intrusion attempts. The ICTMS monitors security breaches and provides necessary interventions for any attempt to interrupt or disturb the system.
2. *Process for regularly testing, assessment, and evaluation of the effectiveness of security measures.* The ICTMS shall review security policies, conduct vul-

nerability assessments, and perform penetration testing within the unit on a regular schedule to be prescribed by the appropriate department. In parallel, the business owner must conduct regular functionality testing.

3. *Encryption, authentication process, and other technical security measures that control and limit access to personal data are also enhanced.* Each personnel with access to personal data shall verify his or her identity using a secure encrypted link and multi-level authentication.

6. Breach and Security Incidents

Creation of a Data Breach Response Team. A Data Breach Response Team comprising of the DPO, designated DPOs from the Central Office and the Regional Field Offices, ICTMS, and WiSUPPORT Project Team Leader shall be responsible for ensuring immediate action in the event of a security incident or personal data breach. The team shall conduct an initial assessment of the incident or breach to ascertain the nature and extent of the security breach. It shall also execute measures to mitigate the adverse effects of the incident or breach.

Procedure for recovery and restoration of personal data. The respective PDOs of DSWD -WoSUPPORT and all other parties shall at all times maintain a backup file for all personal data under its custody. In the event of a security incident or data breach, it shall always compare the backup with the affected file to determine the presence of any inconsistencies or alterations resulting from the incident or breach.

Notification protocol. DPO as the Head of the Data Breach Response Team shall inform the DSWD of the need to notify the NPC and the data subjects affected by the incident or breach within the period prescribed by law.

Documentation and reporting procedure of security incidents or a personal data breach. The Data Breach Response Team shall prepare detailed documentation of every incident or breach encountered, as well as an annual report, to be submitted to DSWD and the NPC, within the prescribed period.

7. Inquiries and Complaints

Every data subject has the right to reasonable access to his or her data being processed by the personal information controller or personal information processor. These rights include (1) right to dispute the inaccuracy or error in the personal data; (2) right to request the suspension, withdrawal, blocking, removal, or destruction of personal data; and (3) right to complain and be indemnified for any damages sustained due to inaccurate, incomplete, outdated, false, unlawfully obtained or unauthorized use of personal data.

The PDOs in the DSWD regional offices will provide guidance on the procedure for inquiries and complaints that will specify the means through which concerns, documents, or forms submitted shall be received and acted upon.

Data subjects may inquire or request information regarding any matter relating to the processing of their data under the custody of the organization, including the data privacy and security policies implemented to ensure the protection of their data. They may write to the WiSUPPORT Team: National Capital Region (NCR), wisupport_foncr@dswd.gov.ph, Region 7, wisupport_fo7@dswd.gov.ph, Caraga, wisupport_focaraga@dswd.gov.ph, Central Office, wisupport@dswd.gov.ph and briefly discuss the inquiry, together with their contact details for reference.

Complaints shall be filed in three (3) printed copies, or sent to the above email addresses. The concerned PDOs in respective regions shall confirm with the complainant their receipt of the complaint.

8. Effectivity

The provisions of this Manual are made effective this 1st day of APRIL 2021. It shall remain in force until the project is terminated in writing or through a memorandum.

Annexes

1. Data Sharing Agreement Template

Annex I. Evaluation Design

DSWD WiSUPPORT: Mental Health and Psychosocial Support

EVALUATION DESIGN

Introduction

The COVID-19 is the worst health crisis of this generation. It is severely challenging the Philippines with the rising number of COVID-19 cases, health and governance systems operating on maximum capacity, quarantine and physical distancing measures in place, over 2 million workers have lost their employment and students are out of school due to the pandemic. Moreover, this COVID-19 pandemic has resulted in sickness, loss of loved ones, displacements, isolation, financial crisis, and other social and health issues which affected the psychological well-being of the people. Social supports are essential to protect and support mental health and psychosocial well-being in emergencies, and they should be organized through multiple sectors.

Aside from the COVID-19 pandemic, there are other various crisis situations that affect the mental health and psychological well-being of individuals and families. These may include natural and human-induced disasters, experience of violence and abuse, loss of a loved one, sudden loss of jobs/ livelihood, accidents and other crisis situations.

It is in this context why the Department of Social Welfare and Development (DSWD) developed the COVID-19 Response and Recovery Plan (RRP) to mitigate the effects on health, economic, social, physical, and psycho-social well-being of the most vulnerable sectors. The development of Technology-Based Platforms for Psychosocial Support Measures/ Modules for individuals, families and communities affected by COVID-19 pandemic is one of the key deliverables under the DSWD RRP.

Objectives

The study aims to assess the pilot implementation of the DSWD WiSUPPORT Project in DSWD Central Office and in Regions NCR, VII and CARAGA. Specifically, it intends to:

- a. Determine the relevance of the WiSUPPORT Project in the three pilot regions;
- b. Evaluate the effectiveness and efficiency of the project components; and
- c. Recommend ways on how to improve and sustain the WiSUPPORT platforms and interventions.

Scope and Limitations

Pursuant to DSWD Memorandum Circular No. 09 s. 2019 (DSWD Research and Evaluation Policy), the current study is considered as an experimental research since it would like to test the hypothesis of whether WiSUPPORT could contribute in addressing the mental health and psychosocial impact of CoVid19 and other crisis situations. It is an evaluation study following the process evaluation type because it focuses on documenting the

progress of developing a social technology for the provision of mental health and psychosocial support.

The evaluation study will be undertaken in the DSWD Central Office and three (3) DSWD pilot FOs specifically the National Capital Region, Central Visayas and CARAGA. This study will cover the platforms used for the online MHPSS session to wit:

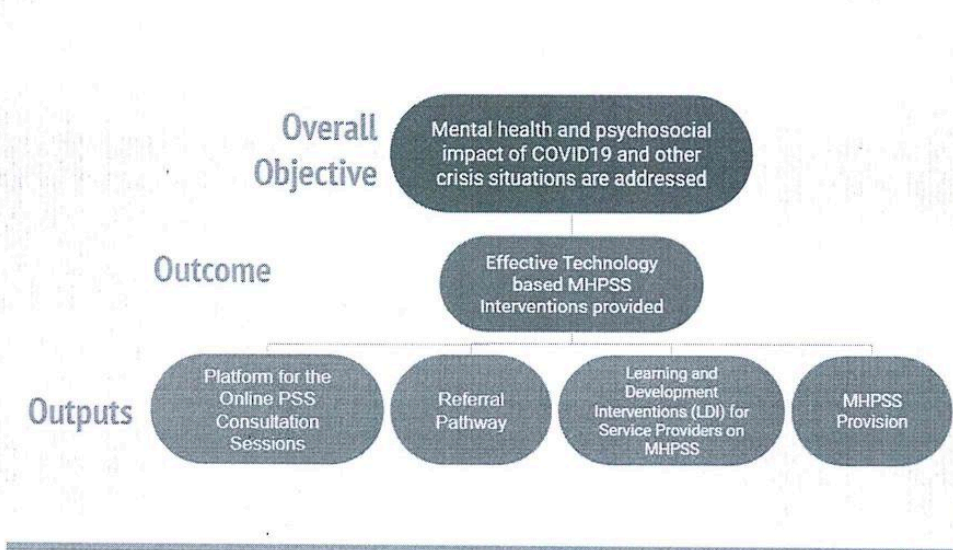
- a. Web portal
- b. Electronic-Mail
- c. Telephone
- d. DSWD WiServ
- e. Mobile Application

The research team will cover 100% of clients who accomplished the Client Satisfaction Survey. For other target respondents, at least 30% of the MHPSS service providers will be selected via random sampling technique. Key partners from other OBSUs and CSOs will also be interviewed and engaged in the FGD during the data gathering activities. Copies of the reports, users manual, privacy impact assessment and vulnerability assessments of the systems/ online platforms, and other relevant documents will also be reviewed to assist the team in evaluating the relevance, effectiveness, efficiency and sustainability of the project.

The study shall also evaluate the MHPSS Training Manual, the technology-based platforms, actual MHPSS provision and the established referral pathway.

Evaluation Framework

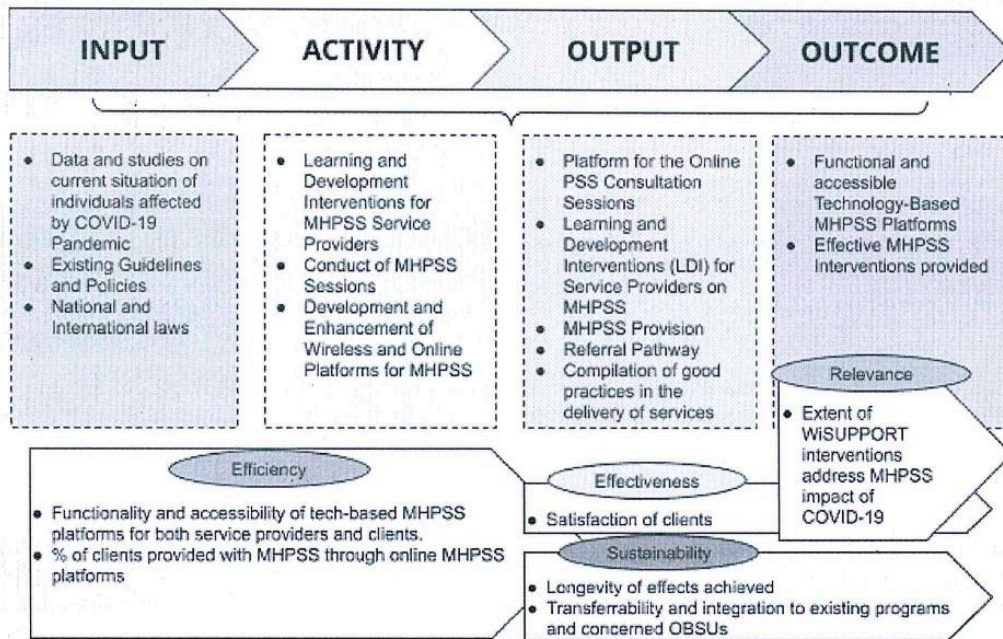
The study will use the overall objective and the logical framework of the WiSUPPORT as the framework and guide to evaluate the project. Results matrix of the project shows the following intended overall objectives, outcomes and outputs as shown in the figure below:



The above shown results matrix will be evaluated in the lens of the Relevance, Effectiveness, Efficiency and Sustainability (REES) Framework, particularly through:

- a. **Relevance.** To evaluate the **relevance** of the WiSupport, the assessment team will analyze the extent to which the project is suited to the needs of the concerned OBSUs and its clientele group. Specifically, it will look into the **input level**, particularly the relevant data and studies on current situations of the individuals and families affected by COVID-19 and other crisis situations, existing guidelines and policies, national and international laws.
- b. **Efficiency. Input, activity, output levels** in responding to the client's needs will be reviewed to evaluate the **efficiency in the delivery project services**. This area will include the analysis of service delivery procedures, actual conduct of MHPSS sessions, timeliness of service delivery and the allocation of resources (human resource, physical and financial) to ensure the delivery of MHPSS to its target clientele group.
- c. **Effectiveness.** The **output and outcome levels** will be assessed to determine the **effectiveness** of the WISUPPORT. Analyzing the results of the session to the clients who were provided with MHPSS will be the primary focus of this evaluation area. The result of the Client Satisfaction Survey will be analyzed to assess the project's effectiveness.
- d. **Sustainability.** The rapid assessment will also look into the **sustainability** of the project and check on how these could be integrated in the existing programs of the concerned OBSUs. The established partnership and support of the Civil Society Organizations, Non-government Organizations, academic institutions and ABSNET members will also take into account the project sustainability. The evaluation study shall also explore the feasibility of replicability of the project by the Local Government Units following the provisions of RA 7160 or the Local Government Code.

The above said pointers for the evaluation is summarized in the figure below:



Success Indicators

The project's logical framework shall also be used as the primary basis for evaluating whether it has achieved its intended results particularly at the outcome and the output level.

	Target	Success Indicators	Source and means of verification
Outcome	Effective Technology-based MHPSS Interventions provided	75% of clients gave a rating of Very Satisfactory	<ul style="list-style-type: none"> Client satisfaction Survey Terms of Reference with other OBSUs
		100% of cases or clients are responded	<ul style="list-style-type: none"> Consolidated responses to active cases
Outputs	O1. Functional and Accessible Technology-Based MHPSS Platforms Developed and Utilized	<ul style="list-style-type: none"> 100% of cases responded through the web portal At least 80% of clients served through the telephone helpline (not 	<ul style="list-style-type: none"> Actual systems exist Copies of Users' and Admin System Manual System

		<p>24/7)</p> <ul style="list-style-type: none"> • 100% of cases scheduled for MHPSS sessions using the DSWD WiServ • 100% of electronic emails responded to • 100% of cases responded to through the mobile application 	<p>Generated Reports disaggregated by sex, gender, age and ethnicity</p>
	O2. Learning and Development Interventions (LDI) for Service Providers on MHPSS	<ul style="list-style-type: none"> • One (1) Training Manual developed and utilized for the learning and development interventions • 75 MHPSS providers trained 	<ul style="list-style-type: none"> • Manual exists • Documentation Report • Masterlist of trained MHPSS providers pooled from the CO & FOs
	O3. MHPSS Provision	<ul style="list-style-type: none"> • 100% of clients availing of the service provided with MHPSS • ANA No. of cases addressing gender-based violence, child abuse, etc. 	<ul style="list-style-type: none"> • Documentation Report • Summary of Actions Taken • Protocols on managing cases to ensure gender-responsiveness, age-appropriate and culturally sensitive
	O4. Referral Pathway	<p>100% of clients for referral were referred to other institutions</p>	<ul style="list-style-type: none"> • Directory of SWDAs • Copy of Referral Forms/ Endorsements and Feedback Report from partner institutions

Methodology

Qualitative and quantitative methods will be employed to evaluate the achievement of the results intended by the project. The research team will conduct documents review, analysis of customer satisfaction surveys, key informants interviews with the service providers, and focus group discussions with other stakeholders. In summary, the sources vis-a-vis methods to be used for this evaluation study is outlined in the table below:

SOURCE	METHOD	
	Quantitative	Qualitative
Beneficiaries	Client Satisfaction Survey	
MHPSS Providers	Survey (using Google Forms)	Key Informant Interviews
Partner OBSUs and Institutions	Survey (using Google Forms)	Focus Group Discussion
Reports and Surveys	Document Review	

A. Document Review

The assessment team will be reviewing various documents to analyze the relevance of the project and to understand the guiding policies and procedures that will assist the team in evaluating the relevance, efficiency and effectiveness of the project in the identified pilot FOs. The number of clients accessed the various WiSUPPORT platforms and acted upon shall also be analyzed including the summary of client satisfaction survey.

B. Key Informant Interviews

Key Informant Interviews (KIIs) will be conducted with the MHPSS service providers, social workers, psychologists and partner organizations (ABSNET members, CSOs, NGOs, academe). The assessment team shall develop semi-structured interview guides to generate necessary information from the respondents. The KII may be done either via online mode.

C. Focus Group Discussions

Another useful and complementary method in understanding the dynamics of the WiSUPPORT project is the use of focus group discussions or FGDs. The FGDs will be conducted through the use of Google Meet Application.

Participatory research strategy will be utilized where the team will be engaging the client beneficiaries and to ensure that clients will be involved in coming up with recommendations to further improve the project.

The research team will employ purposive sampling. The research participants will be selected from those who served as platform moderator, MHPSS service provider and clients who have accessed the WiSUPPORT services.

D. Survey

The study will also employ surveys for clients and implementers to analyze project results based on the set objectives. For the beneficiaries, a Client Satisfaction Survey will be developed and will be requested to be answered every after conduct

of an MHPSS session. The surveys will be conducted through the use of Google Forms Application.

Methodological Framework

Hereunder is the matrix showing the evaluation areas with corresponding data gathering methods, sources of data and indicators of success per evaluation areas:

Evaluation Areas	Data Gathering Method	Data Sources	Guide Questions
1. Relevance			
a. Current situation of individuals and families affected by COVID-19 and other crisis situations	Document review Survey Focus group discussion Key Informant Interview	Existing data and studies on the current situation of individuals affected by COVID-19 and other crisis situations Accomplishment Reports; Logbook and other reporting mechanisms of the project Clients Partner OBSUs and organizations MHPSS Service Providers	Responsiveness of the project to the needs of the clients and service providers <i>(To what extent does the WiSUPPORT project address the needs of the stakeholders?)</i> Alignment and consistencies with DSWD Response and Recovery Plan (AO 3, series of 2020) and the Mental Health Law (RA 11036) <i>(To what extent does the WiSUPPORT project is aligned with the DSWD RRP and RA 11036?)</i> Complementation with other programs/ projects <i>(To what extent does the project complements with the existing services and systems resulting in better outcomes?)</i>
b. Objectives of the project	Document review	Accomplishment Reports; Web Portal dashboards and other reporting mechanisms of the project and its platforms.	
Efficiency			
a. MHPSS Session facilitation	Document review	Existing policies/guidelines; reports	Efficient delivery of outputs <i>(Were the activities cost efficient? To what extent was resource utilization minimized)</i>

	Client Satisfaction Survey	Beneficiaries	<i>in relation to the conduct of the MHPSS sessions? Were the other key stakeholders mobilized to provide other necessary interventions?)</i> Operational alternatives <i>(Are there better, more efficient ways to conduct the MHPSS sessions?)</i>
	Focus group discussion	Partner OBSUs and organizations	
	Key Informant Interview	MHPSS providers	
b. Resources (physical, human and financial resources)	Document review	Financial reports	Timeliness <i>(Were the time allocated for the conduct of the MHPSS session sufficient? Were the sessions conducted as scheduled? Were the MHPSS service providers able to provide immediate services to clients needing urgent intervention?)</i>
	Key Informant Interviews	MHPSS providers	
	Focus Group Discussions	Partner OBSUs and organizations	
3. Effectiveness			
a. Client satisfaction	Document Review	Documentation reports; progress reports; Feedback/ update reports from partners where clients were referred	Objectives Achievement <i>(What are the results of the conduct of the sessions amongst the clients?)</i> Client Satisfaction <i>(To what extent were the clients satisfied with the MHPSS sessions?)</i>
	Key Informant Interview	MHPSS Providers	
	Focus group discussion	Partner OBSUs and organizations	
	Client Satisfaction Survey	Beneficiaries	
4. Sustainability			
a. Building the capacities of MHPSS providers	Key Informant Interview	MHPSS service providers	Integration to the DSWD's WFP <i>(To what extent is the project integrated in the concerned OBSUs and FOs' plans and budget? What were the major factors which influenced the achievement or</i>
	Focus Group Discussion	Partner OBSUs and Organizations	

b. Managing the WiSUPPORT platforms c. Conduct of MHPSS Sessions			<i>non-achievement of sustainability of the project? Which project components and its gains could be sustained?)</i>
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The assessment team will develop data-gathering tools, based on the research objectives, which will be used for the surveys, key informant interviews and focus group discussions.

Ethical Considerations

Consent Form will be used to secure the permission of the clients prior the session and administration of the Client Satisfaction Survey. Permission of the pilot regions and concerned OBSUs, especially the respondents, will also be sought prior to the data gathering. The assessment team will also adhere to the existing policies of the DSWD and with the Data Privacy Law during the conduct of this rapid assessment. The preliminary findings and recommendations will also be presented to the key respondents and partner OBSUs and pilot FOs to validate findings, get their comments/ feedback and help in the improvement of the design and the project implementation of the WiSUPPORT.

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