

MEMBER CARE NETWORK BRIEFING

A Communiqué of the Global Member Care Task Force (MemCa)

June 2004 No.11

Greetings: Welcome to the *Member Care Network Briefing*. We are sending this communiqué to over 1000 people who are actively involved in member care. Included are members of regional and national task forces, people who oversee member care related ministries, member care practitioners, and several mission/church leaders. The newsletter is a service of *Global Member Care Resources* (MemCa) which is part of the WEA Missions Commission. We send the Briefing three times a year, and include important updates and analyses regarding member care. It helps to further link us together as a growing, international member care community. We encourage you to save this *communiqué* for future reference, print it out, and to share it with your colleagues. Note that all of *Briefings* are also available in an attractive format to read/download on our MemCa web site <www.membercare.org>

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We begin this issue of the *Briefing* with some reflections on our special friend, Dave Pollock. As most of us know, Dave collapsed suddenly while teaching in Vienna in April, and died 12 days later on Easter Sunday. He was the co-founder and co-coordinator of MemCa. Dave will be missed by so many of us! We also want to acknowledge the passing of another dear friend, Dr. Ron Noll, who together with his wife Barbara, has been actively involved in the member care field in Asia and Europe for over 15 years. Ron too will be missed by many! We are proud and appreciative of you two men of God, and we know that you are with the Lord. The remainder of this *Briefing* spans the globe in order to provide a variety of important updates and analyses.

DAVE POLLOCK (1939-2004): A TRIBUTE TO OUR FRIEND

Kelly O'Donnell, Reprinted in Connections June 2004

I was staring into the dark stairwell in our home in France, slouching in sorrow. We had just heard of Dave Pollock's death on Easter Sunday. Our 10 year-old daughter climbed into my lap. "Oh Daddy, you're crying," she whispered. "Ah Ashling," I sighed. "Dave is worth crying over." I know many of us have shed similar tears, as we have grieved the loss of our dear friend.

Dave himself was a man of both joy and tears. His smile and laughter were contagious. Yet seldom could he teach without crying, as he recounted the challenges and courage of mission personnel and TCKs. His heart and his call, for nearly three decades, have been to support mission families. His own experience with his wife Betty Lou and kids in Kenya in the 1970s, and ongoing travels, have shaped his keen understanding of cross-cultural living. Prior to Kenya, Dave had graduated from Moody Bible Institute (1960) and Houghton College (1963). In 1962 Dave and Betty Lou married, and were blessed with four children: Dan, Nate, Mike, and Michelle, plus five grandchildren. He also pastored in New Jersey and New York USA from 1968-1975.

Dave has been Director of *Interaction* since 1980, based in New York. Interaction is well-known for its ministry to internationally mobile families. He was also an Adjunct Professor at Houghton College since 1986. Dave's numerous articles on transition, TCKs, and member care, as well as his book with Ruth Van Reken, *The Third Culture Kid Experience* (1999), are some of the finest works in the member care field. His influence and respect within the mission community have been widespread.

In 1998, Dave helped to launch and then co-chaired the Global Member Care Resources group. Part of the WEA Missions Commission, this task force comprises some 40 international member care leaders. Dave's insights and friendship have significantly influenced so many of us! Both the ivory tower and muddy trenches were familiar to him, although clearly he gravitated towards "getting dirty" with personnel on the field. Dave loved to be with people!

Dave is a beloved grandfather in the member care field. He was in the original planning group, for example, that gave birth to the three International Conferences on Missionary Kids, the first in Manila, 1984. Yet it was only privately, after probing, that he would modestly even mention such things (including his honorary doctorate in pedagogy). Dave was committed to partner with others in missions, to dream do-able dreams, and to discuss ministry problems. He was an advocate of the global church, with a special blend of humility, innovation, and integrity. As a model and mentor, he imparted not only his teaching, but also his life (I Thes. 2:8).

Yes, our tears of sorrow flow. But also do our cheers of joy. Dave Pollock ran the race well, and he is with our Lord. May your words Dave, and your example, live long in our hearts and hands: "Our love and unity demonstrate that we are His disciples. Love is the definitive apologetic and the core component of mission strategy. The Great Commandment and the Great Commission are inseparable."

DEVELOPING MEMBER CARE

INDONESIA MEMBER CARE TRAINING

Brenda Bosch

Indonesia's first National Member Care Seminar was organised by Yerry Tawaluyan, representative of the Indonesia National Research Network. The seminar was conducted for leaders and workers from various agencies and groups from 4-7 May 2004 in the capital city, Jakarta.

Approximately 40 people attended, and there were some sessions when as many as 50 people were receiving input. Brenda Bosch, who trains internationally in member care, was the main speaker. The topics that were covered were attrition, overview of member care, stress management, burnout, conflict resolution, debriefing, accountability, and mentoring. During the teaching on conflict resolution, a discussion panel was formed by four participants during which cultural issues of managing conflict were discussed—learning how tribal groups within the country dealt with conflict differently, was an eye-opener. All lecture notes were translated into Bahasa Indonesia beforehand, and verbal interpretation/translation was done when Brenda spoke.

During the last session, the participants were asked to indicate what they felt they needed next for member care in Indonesia, and discussed how they could network together. The participants felt that it was time to form a National Member Care Association/Network and that it is urgent to get their people trained in member care, as well as to train trainers. Leaders from sending groups indicated the need for all involved to learn how to take care of their workers and that they would be happy to host future seminars. The same leaders also indicated that they desired to contact and influence theological training institutes to receive training in member care for young trainee pastors to learn how to survive, as well as how to look after their workers sent out by their groups. Leaders from various agencies who are working in various parts of the country asked Brenda to run seminars in their particular regions. We are excited about Indonesia's people being so open to receive and learn about member care.

Respondents that completed an evaluation form about the seminar said that they appreciated the practicality and usefulness of what was taught, and half of the respondents said that they wanted multiple 2- to 3-week member care seminars for their people. According to feedback received on these forms, it seems to be imperative for people to live on site when these seminars are run—obtaining accommodation and transport in such a huge, traffic-filled city was difficult for some, while energy and time can be better used than to travel to a separate place for accommodation. We are looking forward to serving Indonesia's people and helping them to effectively look after their own people on the field.

PROVIDING MEMBER CARE

ORGANISATIONAL PROFILE ONE

International Health Management (IHM), Toronto, Canada

Duncan P. Westwood

Clinical Director of Expatriate Care & Development

Vision. Ever since our founding in 1936, we have been passionately committed to providing quality health management to travellers, expatriates and their sending organisations in a manner that inspires trust, promotes well-being for overseas effectiveness and endurance, delivers quality professional service and embraces change to be flexible and innovative.

Staff. Our interdisciplinary team is comprised of full-time and part-time staff, associates and local/global professional referrals. We are dedicated to carefully administering components of health care that address the five cardinal points of an expatriate's well-being: physical, cognitive, social, emotional, and spiritual/philosophical. Our team embraces the following professions: physicians, nurses, psychiatrists, psychologists, psychotherapists, counsellors, consultants, spiritual directors, and third-culture kid specialists.

Services. IHM's creative approach to expatriate care invites the creation of health covenants wherein the responsibility of health prevention and treatment is shared by three parties: the sending organisation, health care providers and you/your family as expatriates. In such an interdependent relationship, expectations are shifted from total dependency on our health care providers to mutual relationships of care with reciprocal responsibilities and tasks. To us, health management consists of carefully administering our components of care at times of wellness and illness along the expatriate journey. We seek to achieve this by offering the following services.

1. Travel Health Services. Pre- and post-travel health assessments are foundational to your peace of mind. Completing our research-based questionnaires results in a unique baseline profile of your travel health. This enables us to give you tailor-made health advice that can be discussed when you visit our travel clinic. At the same time we can arrange an immunisation plan and conduct any tests that may be required for visa purposes. Families and groups travelling together can make appointments. Medical screening for healthy returnees and for sick returnees is facilitated through completing our research-based questionnaires. You can make an appointment with one of our physicians for a pre- and post-travel tropical health check.

2. Pre-Departure Health Management Services. General health screening is the foundation of effective and efficient health management. Completing our research-based questionnaires results in a unique baseline profile of your medical and mental health. A follow-up appraisal builds on this foundation by making a more in-depth risk appraisal of target conditions that might impact your health and well-being. This is done through assessment tools and, if necessary, a one-hour appointment with one of our counsellors. Our personal assessment builds on the findings of the general screening and follow-up appraisal by identifying factors that can contribute to your overseas effectiveness and endurance. A three-hour appointment with one of our counsellors is required for this process. Members of our staff conduct pre-departure workshops for sending organisations.

3. Overseas Health Management Services. Health guidance via e-mail and/or telephone is available as a source of information and support. Referrals to international health care providers for clinical assessment, diagnosis and treatment can be requested. Prior to exiting the overseas assignment you can complete a general health screening update to make your baseline health profile current. Members of our staff do make themselves available to conduct a limited number of overseas workshops for sending organisations.

4. ReEntry Health Management Services. General health screening updates enable us to assess if the overseas environment has impacted your health and well-being in significant ways. Ninety minute debriefing appointments are available to facilitate healthy repatriation integration. An initial debriefing appointment can be extended to include follow-up appointments should some form of follow-up treatment be recommended. A tropical health check appointment can be scheduled for third-culture kids the same day. Your premature repatriation as a result of crisis situations will require us to formulate a critical incident response plan. For (TCKs) graduating from high school, and adults at critical life-stage transitions and times of redeployment, vocational assessments are also available. Members of our staff conduct re-entry workshops for sending organisations.

ORGANIZATIONAL PROFILE TWO —

Harbour of Hope, Dakar, Senegal

Scott Hicks

The Harbor of Hope (HOH) is a new ministry that has been established in Dakar, Senegal, West Africa for the purpose of helping missionaries thrive in their pursuit of what God has called them to do in this part of the world. As missionaries with Barnabas International, my wife and I see our ministry helping missionaries in much of North and West Africa. We have been here in Dakar working in the area of member care since February 1997, but have only recently set-up this retreat ministry. As a licensed counselor in the U.S., after having worked for 10 years in various counseling positions, God led us overseas to do a similar work with missionaries; to serve those that work in West Africa.

One of the truly exciting parts of our ministry is meeting so many unique and diversely gifted people that God has strategically placed throughout West Africa. It is fascinating to listen to them share their stories of ministry and how God has blessed them along with the difficulties that has brought them to us. My wife and I truly feel privileged to be able to come along side such a wonderful group of people to help to better do what God has called them to do.

To help describe what we do, we have organized our ministry under the acronym of IMPACT to best describe our ministry.

I – Immediate. By being an immediate resource, we see ourselves as a near resource during times of difficulty that can be quickly accessed. Being nearby, we also hope to have established a quality reputation with mission leaders so that we are a known quantity for providing help when help is needed. Additionally, we will be able respond as a fellow laborer in this part of the world who understands first hand the reality of life here.

M – Mobile. Since we live here on the field, we are easily accessible either us going to the missionaries or for them to come to us. It has proven to be faster and less expensive than trying to receive help from their passport countries (often we can respond to a crisis within hours rather than possibly days or weeks). Additionally, since we live on the field, the chance for an extended time of face to face involvement exists if that is needed.

P – Preventative. Our primary ministry hopefully will be one of prevention. Through conferences and seminars, we hope to provide tools and resources for the mission community to use before difficulties arise. Conferences on transition, teambuilding, interpersonal relationships, debriefing and marriage are some of the conferences that have been seen as helpful so far. We would also like to organize times of refreshment for the mission community, maybe by providing a yearly spiritual emphasis week.

A – Affiliations. We know we don't personally have all of the resources needed for a community of the size of West Africa. Therefore, another important part of our ministry will be as a liaison between other resources in the world and the identified needs here on the field. Hopefully, because this is our primary job, we can provide the time that is needed to link resources with the identified need. Hopefully this process will help us to become more focused in what is presented in conferences and seminars as we know the identified areas of struggle that missionaries are having in their areas of ministry.

C – Counseling. One of the realities is that one-on-one counseling will be needed. Again, building off of what has already been said, we would be available for extended periods of counseling should the need arise for such a ministry. Additionally, we would be able to understand much of the reality/symptoms/causes that surrounds a given problem

T – Transition Care. This is provided by our small retreat center for missionaries to come and take advantage of if the need arises. We primarily see three scenario's that might lead one to use our retreat center:

- For long term counseling if Dakar is not where they are fielded.
- A debriefing that might require a longer and safer environment than might be available in their country of ministry from which to work through the issues.
- Or a missionary that just needs a break from their ministry responsibilities (especially village ministry) and would come for a time of refreshment before heading back to their field of ministry. (We use the word transition because we would hope to see hurting missionaries gain the strength and resolve to return or transition back to their field of

service having successfully worked through the issues that caused them to seek out our services and receive the kind of attention that is available at the Harbor of Hope).

In the time that we have been doing this ministry, we have received a lot of encouragement and support for this type of ministry from within the mission community. It has been fun to see how God has taken a seed thought on our part and has grown it into the ministry that we have today. It will be interesting to see where God takes it from here.

One of our difficulties is much like the person who wrote in the previous *Briefing* [February 2004]. We too have few colleagues in our area. Although I do know of others who are doing a similar type of work in other West African countries, they are hours away by plane. We only get to see each other about once a year but we usually gather for a ministry purpose, not just to be together and dream and brainstorm or even talk about difficult situations that we've had to face in the counseling arena. To add to this problem, we are with a small mission and we are the only fielded missionaries in this part of the world. So, we too are looking for those who would be interested in joining our team and are constantly looking for opportunities to go to conferences and rub shoulders with those who are doing a similar work. Getting on to an email network is part of the networking that we believe we must do in order to make ourselves known in this field, as well as to try and stay on top of what is happening in other fields so that we are not trying to "reinvent the wheel".

Additionally, at present time, we are trying to look into options with those that we know of who work in the area of member care in West Africa, to figure out if there is a way to start meeting on some kind of regular basis to talk through some of the issues that present themselves to us in the area of member care. One of my dreams is to begin to build a small conference for people who do member care in this area of the world where some of the member care "experts" are invited to come and present and stimulate our hearts and minds to further our development and training in this field. Not sure where this thought will eventually end up, but it is fun to dream when you know you serve a BIG God.

Finally, one of the things that we have found true is that we have found it necessary to take much of the advice that we give to others to heart. We really try to watch how stretched we become, and if we have a particularly busy season, to try and plan some recuperation time soon after. We realize that we can't do it all ourselves and so we try to be careful to act like it and not overschedule ourselves to the point of getting run down. We have found over the course of our ministry together that when we get run down, problems start showing up in other places, like in our marriage, family, health, etc. We are not much good to anyone when that starts happening. We look forward with great anticipation to what God is going to continue to do in the area of member care.

Email <hicks@barnabas.org>

ESSENTIAL RESOURCES

EMAIL RESOURCES IN AFRICA

There are two new excellent email update services in Africa. The first is by the Member Care-Africa Network. The second is directed to YWAM bases/staff in Africa, but also relevant for other organisations and locations. These types of ongoing communications are absolutely key to developing the member care field in a region, as they help to form closer relational links and to exchange important resources/information.

AFRICA MEMBER CARE NETWORK (ACMN) – EMAIL FORUM

Marina Prins

Coordinator, Member Care southern Africa

This network is an interagency affiliation of colleagues with member care responsibility. Our purpose is to help provide and develop member care resources on behalf of African mission personnel and sending groups. We have a special Email Forum, which is sent out every two months. Through this Forum we provide regular email updates about important events that have taken place as well as future ones, regarding member care in Africa. It thus helps link the diverse group of member caregivers/mission personnel together, and leads to some greater co-ordination in our member care efforts.

We have found that such email forums work best if there is a group/network that takes responsibility for sending the facilitator important updates. Currently Marina Prins is serving as the communication facilitator of the ACMN. So it

depends on the group--that is, all of us--and not just the facilitator. Practically, this means that we send the facilitator short summaries of recent and upcoming ministry (as opposed to personal newsletters), and your concise thoughts on any special issues or brief topical papers. Different ministries will also have an opportunity to introduce themselves (in a paragraph or two) in the AMCN A very important part of member care development in any continent is a good channel of communication. We would appreciate your participation in this effort. If you are involved in the care and development of mission personnel, and would like to become part of this network, please send an email with "subscribe to the Africa Member Care Network" in the subject line to mcsa@xsinet.co.za

Email <mcsa@xsinet.co.za>

STAFF DEVELOPMENT E-ZINE FOR YWAM AFRICA

Randy & Jane Rhoades

Service Team, Youth With A Mission, Africa

The Staff Development E-zine is meant to provide short articles to inform, inspire, and equip for staff development. Our goal is to provide very practical ideas for application in YWAM settings. Because of the wide variety of base sizes, staff, and ministries in YWAM Africa, we will try to provide a variety of articles. In the future we hope that leaders and staff will participate by writing articles, contributing news items, suggesting ideas, or recommending topics to be covered.

Email <randyrhoades@juno.com>

MEMBER CARE ARTICLES IN SPANISH – WWW.COMIBAM.ORG

Where would the field of member care be without good articles?! There are several excellent articles in the member care section of the COMIBAM web site. These articles are in Spanish and are being added to regularly. Making these articles available is one of the projects of the Member Care Program for COMIBAM, the Latin American Missions umbrella organisation (*COMIBAM Programa de Cuidado Integral*).

Web site <www.comibam.org>

SPECIAL ISSUES

REMAP 2 SURVEY ON MISSIONARY RETENTION: MEMBER CARE BUILDS UP MISSION PERSONNEL

Detlef Bloecher

How do member care and missionary longevity go together? The World Evangelical Alliance's (WEA) recent ReMAP II study on missionary retention and agency practices provides an extensive database to address this question. Mission executives from 22 countries were asked to assess their agency's practices and actual performance regarding member care and to provide retention data for their mission personnel. 600 agencies with some 39,600 long-term, cross-cultural missionaries participated in the study. Old sending countries (OSC) of Europe, North America and the Pacific and new sending countries (NSC) of Africa, Asia and Latin America were analysed separately to explore the differences in their mission movements. The methodology used and more results are presented elsewhere (www.wearesources.org).

Member Care in Old (OSC) and New (NSC) Sending Countries

Time. OSC agencies invest about 8% of their total organisational time (on the field and in the home office) in member care, so that one out of 12 missionaries is full-time serving in member care in terms of equivalent hours. NSC agencies spend about 14.5%, which is almost twice as much - an impressive rate, probably reflecting the relational fabric of their home cultures as well as their strong commitment to their missionaries.

Finances. OSC agencies spend just over 4% of their total finances/budget on member care and NSC agencies nearly 10%. These percentages are lower than those for member care time because agency budgets include also project expenses, capital investments etc. – whereas member care is mainly personal allowances.

Preventative member care. A third (OSC) to a fifth (NSC) of the overall member care resources are spent on the broad areas of prevention and personal development so that the majority are invested in crisis intervention: nearly 70% in OSC and 80% in NSC. These findings indicate that member care is still more reactive in nature and crisis-oriented for helping wounded missionaries. Preventative member care in general is still very underdeveloped!

Member Care and Retention Rate for Preventable Attrition (RRP)

NSCs. In terms of preventable attrition, high retaining NSC agencies invest 9% of their total finances on member care. This is twice as much as in low retaining NSC agencies (4%). High retaining NSC also spent the doubled fraction (about 23% vs. 11%) of their total member care on prevention. Taken together, this means that high retaining agencies spent four times as much of their total organisational effort on personal development and support of their missionaries (that is, preventive care) than low retaining NSC agencies! This huge distinction marks their dissimilarity in how they care for their missionaries.

OSCs. High retention OSC agencies invest a quarter more time and 7% more finances on member care than low retaining OSC agencies, but only 28% of their total member care on prevention. Considering the higher time allocation of high retaining agencies, it still results in the same amount of staff time on prevention, yet 50% more on crisis response and restoration. (Yet we need to consider that only the *amount* of member care and not its *quality* is being assessed). This finding draws our attention to the significance of good crisis intervention and professional counselling as means for restoration. Many missionaries work in risky areas, are exposed to violence and are serving in disaster areas. They need critical incident debriefing and specialised care for restoration and recovery. Agencies need to build up resources and infrastructures in all their countries of service, possibly by sharing expert competence in order to provide quality care on short notice.

Agencies with High and Low Member Care Investment

Agencies with high investment in member care (>20% of their total organisational staff time) had a third less attrition in the years 2001-2002 (5.2% (OSC), 3.0% (NSC) per year) than low member care agencies (<5% of their staff time): 7.3% (OSC) respectively 3.6% (NSC) per year, and the reduction refers to potentially preventable as well as unpreventable attrition. The definition of unpreventable attrition included factors such as: return at the end of project, completion of pre-determined length of service and health reasons, which can indeed be affected, as good member care builds up the whole person, strengthens their physical and emotional health, helps maintain their spiritual perspective.

Further, agencies with a high investment in member care (>20%) rated their organisational structure, leadership and personal care system 15-30% (NSC) higher than agencies with little member care (<5%), in particular: supportive mission team, pastoral care on the field level, interpersonal conflict resolution, regular financial support, annual vacation, risk assessment on the fields, provision for health care and MK-schooling. OSC agencies with high member care rated their organisational practices 5-13% higher than OSC agencies with little member care, in particular: field supervision, effective system for handling missionaries' complaints, language learning, regular financial support, strengthening of the missionaries' spiritual life and home church involvement in the missionary's life. These practical aspects of member care are reflected in the categories of 'Self Care', 'Mutual Care' and 'Sender Care' in Kelly O'Donnell's and Dave Pollock's transcultural member care model.

Conclusions

ReMAP II shows the impressive investment of the New Sending Countries (NSC) in member care. It also clearly demonstrates the strong positive correlation between member care and missionary retention and in particular preventative member care: little member care means more attrition, and more member care means less attrition. Member care helps missionaries to grow spiritually and in their personal development, learn new skills, give and receive mutual support, develop a consultative leadership style, practice open communication, build trusted relationships, extend their flexibility to go through transitions and adjustment. These results differ from ReMAP I some eight years ago. Yet in the past 10 years the member care system has tremendously developed in quality and quantity, and also a new generation of missionaries has proceeded to the field which is much more dependent on personal care than the previous generation of "builders" and "boomers". These changes help account for the differences to the findings of the earlier study ReMAP I.

Quality member care is extremely important in our modern world with its rapidly changing political and social circumstances. Missionaries are our most precious resources, they are the human vessel through which Christ's love and compassion, holiness and grace is revealed in our needy world. They are the life models that new believers can follow (2 Thess 3:10). It is the leaders' responsibility to provide them with the required care and resources, keep them healthy and spiritual, strong and resilient, care in crises, comfort in defeats and assist in times of transition. Mission leaders are shepherds and need to look after the entrusted flock of workers as Christ cares for us (Jo 21:16; Acts 20:28; 1 Peter 5:2).

But we do not consider missionary longevity as an end in itself, unless missionaries are really productive in ministry. Yet hard places will only be reached with the Gospel through dedicated, experienced and committed missionaries who

have mastered the language, carefully adjusted to the local culture, living out an incarnational lifestyle in trusted relationships day by day. This calls for long-term commitment and long-serving missionaries. It requires well trained missionaries, quality agencies with an effective missionary care system – taking care of the various needs of individual missionary. Member care is not an added department besides leadership, public relations, administration and human resource development. It needs to be an integral feature of the overall operations and be rooted in the organisational ethos and values, and thus shape all operations and procedures of the agency.

FUTURE DIRECTIONS

Where are you heading in member care? And where is the member care field heading? There are so many ways to contribute, to get involved, and to find a good fit between ones call/gifts and the many needs/opportunities.

In this section we highlight material from two experienced and influential secular organisations. The first consists of core ethical principles for human resource management, by the Society for Human Resource Management (visit their web site for more resources, conference information, and updates on this broad field <www.shrm.org>). This brief piece continues the discussion from the last few *Briefings* on guidelines and good practice principles for member care workers. The second is a summary of the action points of the International Federation of the Red Cross and Red Crescent Societies. These are recommendations for further supporting humanitarian aid workers, and they are very similar to some general ideas for further supporting Christian mission personnel (e.g., see the PACTS section in the Introduction of the book *Doing Member Care Well*.) This material is excerpted from pages 18-20 in *Psychological Support: Best Practices from the Red Cross and Red Crescent Programmes* (2001) <www.ifrc.org>.

Ethical and Professional Standards: Society for Human Resource Management

- Professional Responsibility: As HR professionals, we are responsible for adding value to the organizations we serve and contributing to the ethical success of those organizations.
- We accept professional responsibility for our individual decisions and actions. We are also advocates for the profession by engaging in activities that enhance its credibility and value.
- Professional Development: As professionals we must strive to meet the highest standards of competence and commit to strengthen our competencies on a continuous basis.
- Ethical Leadership: HR professionals are expected to exhibit individual leadership as a role model for maintaining the highest standards of ethical conduct.
- Fairness and Justice: As HR professionals, we are ethically responsible for promoting and fostering fairness and justice for all employees and their organizations.
- Conflicts of Interest: As HR professionals, we must maintain a high level of trust with our stakeholders. We must protect the interests of our stakeholders, as well as our professional integrity and should not engage in activities that create actual, apparent, or potential conflicts of interest.

Use of Information: HR professionals consider and protect the rights of individuals. Especially in the acquisition and dissemination of information while ensuring truthful communications and facilitating informed decision-making.

PSYCHOLOGICAL SUPPORT PROGRAMME: INTERNATIONAL FEDERATION OF RED CROSS/RED CRESCENT

This programme is based at the headquarters in Geneva, Switzerland and came into being in the early 1990's. A main reason for starting the programme was the greater awareness of the negative psychological consequences on staff who were working in crisis/conflict areas.

Objectives

To prevent the stress and psychological problems related to humanitarian work. Although crises, suffering, and stressful life situations are inherent in this type of profession, it is important to prevent possible cumulative stress both during and after a mission so that delegates can carry out their functions and avoid burnout.

- To raise awareness within the international federation of the harmful effects of stress on humanitarian workers.
- To develop the coping skills of both individuals and teams.
- To set up a well-functioning support system before, during, and after missions.

The Future

In the future, the Psychological Support Programme (PSP) will focus on the following:

- Promoting training on stress management, critical incident debriefing, conflict resolution and cross-cultural management.
- Developing a global network to support traumatised delegates and those suffering from burn out, both during their mission and on their return home. Developing PSP in National Societies for the follow-up of these delegates in their home countries is a priority of the programme.
- Ensuring that delegates working on an International Federation contract benefit from adequate support and psychological follow-up after their mission. This is especially the case for locally recruited delegates or those recruited by the International Federation through a National Society, who come from countries where there is as yet inadequate psychological support.
- Supporting locally employed staff in the case of security incidents, trauma, etc. Promoting training for Geneva staff members who are dealing with stressful situations either in their work or in their contact with delegations.
- Promoting research on psychological health and the impact of humanitarian work on current and former delegates.
- Encouraging managers to propose psychological support missions to the field in emergency operations, difficult countries facing security problems, in conflict situations, etc.
- Developing, with the International Federation, better tools to support teams, and delegates who face difficulties in the field. The priority is on prevention and early diagnosis so that conflicts in teams, which can be painful and destructive, are avoided.

UPCOMING MEMBER CARE EVENTS

June 6-20, 2004. SCOTLAND LEADERSHIP MATTERS TRAINING COURSE, EDINBURGH E-mail : leadershipmatters@om.org	June 7-11, 2004. USA. SHARPENING YOUR INTERPERSONAL SKILLS WORKSHOP, COLUMBIA E-mail : info@mresourcescolumbia.org	June 12-25, 2004. FRANCE REFRESH! 2004 E-mail : heartstream@compuserve.com
June 15-17, 2004. KOREA AERC FAMILY EDUCATION CONFERENCE E-mail: stalev22@yahoo.com	June 22-27, 2004. NORWAY SHARPENING YOUR INTERPERSONAL SKILLS WORKSHOP E-mail : annasaet@frisurf.no	June 28-July 9, 2004. GERMANY MULTI CULTURAL TEAMS E-mail : : CCrouse@aem.de
July 5-16, 2004. USA. MK REENTRY SEMINARS E-mail : mukappa@barnabas.org	July 16 - August 2, 2004. USA. HEARTSTREAM INTENSIVE CARE PROGRAM E-mail : Heartstream@compuserve.com	July 19 – 30, 2004. USA. MK REENTRY SEMINARS E-mail : mukappa@barnabas.org
August 2-8, 2004. USA. TCK TRANSITION SEMINARS, COLORADO E-mail : interaction@compuserve.com	August 2-13, 2004. USA. MULTICULTURAL TEAMS COURSES AND WORKSHOPS E-mail: sis-acadprogdir@dept.fuller.edu	August 9-15, 2004. USA. TCK TRANSITION SEMINARS, NEW YORK E-mail : interaction@compuserve.com
August 9-16, 2004. USA. MK RE-ENTRY RETREATS, COLUMBIA E-mail : info@mresourcescolumbia.org	August 13-15, 2004. UK EQUIP COURSE NEW DIRECTIONS (RE-ENTRY COURSE) E-mail : info@equiptraining.org.uk	August 18-25, 2004. USA. MK RE-ENTRY RETREATS, COLUMBIA E-mail : info@mresourcescolumbia.org
August 22-25, 2004. USA. TCK TRANSITION SEMINARS, NEW YORK E-mail : interaction@compuserve.com	August 29 – September 17, 2004. AUSTRALIA MEMBER CARE COURSE E-mail : MemCCourse@yahoo.co.uk	September 6-20, 2004. USA. HEARTSTREAM INTENSIVE CARE PROGRAM E-mail : Heartstream@compuserve.com
September 11-18, 2004. HUNGARY	September 17-19, 2004.	September 22-24, 2004. UK.

RETREATS FOR SINGLE MISSIONARIES E-mail : OfficeMET@aol.com	SWITZERLAND RENTRY WEEKEND Email : vrkleiner@freesurf.ch	EIHC/GLOBAL CONNECTIONS CONFERENCE E-mail : cmshepherd@eihc.org
October 9-31, 2004. UK. FACE TO FACE COURSE E-mail : gill.trainor@c.ict.om.org	October 10-23, 2004. TURKEY LEADERSHIP MATTERS TRAINING COURSE E-mail : leadershipmatters@om.org	November 1-15, 2004. USA. HEARTSTREAM INTENSIVE CARE PROGRAM E-mail : Heartstream@compuserve.com
November 18-21, 2004. USA. MENTAL HEALTH IN MISSIONS CONFERENCE Website : www.MTI.org	November 28-December 12, 2004. INDIA LEADERSHIP MATTERS TRAINING COURSE E-mail : leadershipmatters@om.org	December 13-17, 2004. GERMANY MULTICULTURAL TEAMS COURSES AND WORKSHOPS (IN GERMAN) E-mail: smf@aem.de
January 10-14, 2005. USA. BUILDING SKILLS FOR MEMBER CARE WITH EXCELLENCE E-mail: KenRoyer@linkcare.org	January 17-18, 2005. PERU THE GORGAS EXPERT COURSE E-mail: info@gorgas.org	April 13-17, 2005. GERMANY EUORPEAN MC CONSULTATION CARE ACROSS CULTURES E-mail : mariondk@uk2.net

WEA MEMBER CARE NETWORK *BRIEFING*

This *MemCa Briefing* is compiled and edited by Kelly O'Donnell and Harry Hoffmann on behalf of Global Member Care Resources, WEA Missions Commission

MemCa is an affiliation of 40 international colleagues committed to help develop member care resources within missions. We are comprised of member care specialists who come from different mission organizations/sending churches. It is part of the WEA Missions Commission. Our members work together and with other colleagues on projects which benefit the global mission community along with specific regions. A special emphasis is on supporting mission personnel from Asia, Africa, and Latin America, and on those working among unreached people groups. Members are also committed to provide personal/professional support for each other as needed. Our friendship and Christian fellowship provide the foundation for our joint work.

MemCa Website: <http://www.membercare.org>

Email: WEF-MCNB@yahoogroups.com

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Problems or Questions: HoffmannHT@Compuserve.com (Harry Hoffmann)