



# Psychosocial Support 2016-2020

## Strategic Operational Framework

The IFRC Psychosocial Programme

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The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world's largest volunteer-based humanitarian network, reaching 150 million people each year through our 189 member National Societies. Together, we act before, during and after disasters and health emergencies to meet the needs and improve the lives of vulnerable people. We do so with impartiality as to nationality, race, gender, religious beliefs, class and political opinions.

Guided by *Strategy 2020* – our collective plan of action to tackle the major humanitarian and development challenges of this decade – we are committed to ‘saving lives and changing minds’.

Our strength lies in our volunteer network, our community-based expertise and our independence and neutrality. We work to improve humanitarian standards, as partners in development and in response to disasters. We persuade decision-makers to act at all times in the interests of vulnerable people. The result: we enable healthy and safe communities, reduce vulnerabilities, strengthen resilience and foster a culture of peace around the world.

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# Introduction

The Strategic Operational Framework (SOF) for 2016-2020 for the IFRC Reference Centre for Psychosocial Support (PS Centre) and the IFRC Psychosocial programme (PSP) is an adapted and updated version of the SOF for 2011-2015, prepared and aligned with Strategy 2020 and the strategic operational framework of the health department (global health team).

The PS Centre is a centre of excellence. It was established in 1993 and is hosted by Danish Red Cross. It is mandated to support, promote, and advocate for the awareness and implementation of psychosocial support through the IFRC Psychosocial Support Programme (PSP).

The objective and the functions of the Centre described in this document are outlined in the hosting agreement between Danish Red Cross and the IFRC. This document complements the IFRC Psychosocial Support Policy and provides the platform for the work and management of the PS Centre.<sup>1</sup>

The PS Centre strives to uphold a small secretariat with key positions, which are considered the minimum resource to deliver on the agreement with the IFRC. In addition, a roster of psychosocial professionals who can be deployed as staff or consultants is continuously developed and maintained. The PS Centre is part of and coordinates closely with the IFRC Global Health Team.

# Background

The overall objective of the IFRC Psychosocial Support Programme is to assist the Red Cross Red Crescent Movement to

- create awareness regarding psychosocial reactions at a time of disaster or long-term social disruption,
- to set up and improve preparedness and response mechanisms at global, regional and local levels,
- to facilitate psychosocial support before, during and after disasters,
- to restore community networks and coping mechanisms,
- to promote the resilience and thereby the rehabilitation of individuals and communities, and
- to enhance emotional assistance to staff and volunteers<sup>2</sup>.

The aim is to enable National Societies to understand, respond and utilize evidence based practice in meeting the psychosocial needs of vulnerable groups. Technical support, including assessment, training, support, monitoring and evaluations is key to integrating psychosocial care in (a) disaster preparedness and response (b) complex emergencies and refugee situations, (c) areas of community health, social welfare and youth.

The strategic framework for the activities of the IFRC psychosocial programme for the coming five years (2016-20) is based on the May 2003 Federation Psychological Support Policy. This policy underlines the need for mainstreaming psychosocial support in the core programmes of the Federation and its National Societies and establishes the basis of Red Cross and Red Crescent interventions both in emergency response operations and in the implementation of long-term development programs.

## The functions of the PS Centre

The general functions as defined in the agreement between the IFRC and Danish Red Cross concerning the PS Centre are listed below. The actual strategic priorities for the period 2016-2020 will be presented in this document. The strategic priorities for 2016 to 2020 are in line with the agreement.

- Advise and guide National Societies to sources of information on community-based psychosocial support
- Support National Societies in developing their capacity to provide community-based psychosocial support to vulnerable groups and volunteers through assessment and training
- Access external research and make it accessible to National Societies

<sup>1</sup> Agreement between the International Federation of Red Cross and Red Crescent Societies and the Danish Red Cross concerning the revised structure, funding and management of the "Federation Reference Centre for Psychological Support, signed August 2004, and IFRC Psychological Support Policy, adopted May 2003

<sup>2</sup> From the IFRC Psychological Support Policy, adopted May 2003





Photo: Ea Suzanne Akasha, Danish Red Cross

- Cooperate with other humanitarian organisations dealing with psychosocial support (e.g. IASC, WHO, Save the Children) in order to exchange materials and experience, and to avoid duplication
- Develop, translate and share models, tools and case studies that reflect best practice in community-based psychosocial support within and outside of the Movement
- Further develop and maintain a database of external consultancy expertise (“the roster”), to be deployed for assessment and training with National Societies.

## The framework for psychosocial support

Psychosocial support is generally defined as a process of facilitating resilience within individuals, families and communities with “resilience” understood as: *The ability of individuals, communities, organisations, or countries exposed to disasters and crises and underlying vulnerabilities to anticipate, reduce the impact of, cope with, and recover from the effects of adversity without compromising their long-term prospects*<sup>3</sup>.

Psychosocial support can be centred on promotion or prevention. Promotion focuses on the notion of psychosocial well-being as a positive attribute, rather than merely the absence of psychosocial or mental health problems. Prevention can focus on preventing psychosocial problems from arising in the first place or preventing mild problems from developing into more severe or persistent mental health problems. These two aspects of psychosocial support contribute to the building of resilience in the face of new crisis or other distressing life circumstances.

Psychosocial support enables people to bounce back to normality after the impact of critical events and helps them to deal with such events in the future. By respecting the independence, dignity and coping mechanisms of individuals and communities, psychosocial support promotes the restoration of social cohesion and social infrastructure.

Red Cross and Red Crescent National Societies implement community-based psychosocial support interventions that focus on strengthening the social bonds of people in affected communities, by improving the psychosocial well-being of individuals and of communities as whole entities. This approach is based on the idea that if people are empowered to care for themselves and others, their individual and communal self-confi-

<sup>3</sup> IFRC 2012: *The Road to Resilience*.

dence and resources will improve. This, in turn, will encourage positive recovery and strengthen the ability to deal with challenges.

The term “psychosocial” refers to the dynamic relationship between the psychological and social dimension of a person. The psychological dimension includes internal, emotional thought processes, feelings and reactions. The social dimension includes relationships, family and community networks, social values and cultural practices.

*Community-based Psychosocial Support: Training Kit, 2009*

Psychosocial support is a cross cutting discipline which can and should be integrated into key topics of humanitarian response, while at the same time include key considerations such as gender and diversity, promotion of a culture of non-violence and peace, as well as the “do no harm” principles.

## **Global challenges 2016 to 2020**

The world is becoming increasingly interconnected and there are a number of global challenges that influence the psychosocial well-being of people. These challenges will inform the focus of the PS Programme in the coming five years.

### **Gender and diversity**

There is substantial evidence worldwide of the negative impacts on women, girls, men and boys when humanitarian assistance is not gender- or diversity sensitive. However, when gender equality is actively promoted, it can positively transform and enhance individual lives as well as societies as a whole. By advancing gender equality and embracing diversity, it is possible to reduce the impact of many other humanitarian problems, including violence, inequitable healthcare and the negative consequences of disasters.

Psychosocial support helps people gain control and a feeling of being able to influence one’s own well-being. In other words it empowers people. At the same time it helps people know themselves and others better and thus it can help bridge differences between people, creating more cohesive communities.

### **Urbanisation and demographic change**

The world population is rapidly ageing and at the same time, many countries are undergoing an unplanned urbanisation. These demographic changes involve several challenges – not least in low and middle income countries, where these processes will be taking place rapidly over the coming decades. Among the psychosocial problems associated with ageing are loneliness, decreased perception of quality of life and increase in non-communicable diseases – among these also mental health disorders. Urbanisation, on the other hand, challenges the traditional notion of “community” and thereby the type of support structures that are available to people. This in turn influences the ways in which National Societies can provide psychosocial support.

### **Global inequalities and economic crises**

The past decade has shown how changes in the global economy have profound consequences for the everyday lives of people across the world. Recurring shocks and periodic economic and financial crises create new patterns of migration, including trafficking, unemployment, insecurity and marginalization, and at the same time reinforce existing inequalities. There are several psychosocial stressors related to the effects of economic crises: impoverishment for entire families, discrimination and increased levels of urban violence and limited access to basic health services.

### **Disasters and epidemic outbreaks**

The magnitude and frequency of climate related disasters such as typhoons, hurricanes, flooding and draughts are exacerbated by the effects of climate change. Disasters and epidemics – such as the Ebola outbreak in West Africa – cause significant psychological and social suffering to affected populations. Emergencies erode protective support systems that are normally available, increase the risks of a range of problems and tend to amplify pre-existing problems. For these reasons, preparedness and response capacity for psychosocial support in emergencies continues to be a top priority in the PS programme.

## **Displaced persons and survivors of violence**

Disasters and armed conflicts across the world will continue to cause widespread human suffering and force people to flee their homes. Refugees and internally displaced persons – whether forced to flee because of armed conflict or because of natural disasters – experience loss, grief, disruption of everyday life and sense of normalcy and violence in different ways. These feelings may affect their psychosocial well-being and or increase their vulnerability towards harmful coping strategies that may result in the development of mental health disorders.

In the wake of armed conflicts and disasters, there is an increase in relationship and self-directed violence such as sexual and gender-based violence and violence against children. This means that violence prevention must be mainstreamed in the PS programme, and that methodologies to provide psychosocial support to survivors must be further developed and disseminated.

## **Mental Health problems**

Mental health disorders are common in all regions of the world. The WHO estimates that one in four will experience mental illness in their lifetime and that mental health, neurological, and substance abuse disorders account for 14 % of the global burden of disease. Persons with mental health problems experience disproportionately higher rates of disability and mortality<sup>4</sup> and most of these people (85%) live in low and middle income countries where the coverage of mental health services is poorer than in high income countries.

Mental health interventions are normally conducted by mental health professionals in specialized settings whereas psychosocial support can be conducted by volunteers, often using a community-based approach. Psychosocial support can play a major role in enhancing the wellbeing and life quality of people with mental health problems. With an increase in mental health problems, PS programmes can play a role in offering non-specialised interventions to persons with mild to moderate mental health problems and thereby contribute to prevention of mental disorders and promotion of mental health. Additionally, interventions can be developed for families and caregivers of the affected persons.

## **Meeting the global challenges**

The PS Programme works towards meeting the global challenges within the context of Strategy 2020 and the psychosocial policy framework of the IFRC. In order to promote high quality and timely psychosocial support, the primary task of the PS Centre is to enable and support National Societies. This fundamental premise drives how the PS Centre defines its strategic directions.

Accordingly, in the coming years, the PS Centre will work to promote the three Strategic Aims of the Federation in the following way:

### ***1: Save lives, protect livelihoods and strengthen recovery from disasters and crises***

- Psychosocial support interventions reach larger, increasingly differentiated target groups in more effective and better sequenced ways. Well-timed and appropriately delivered psychosocial support helps people bounce back from, and mitigate the impact of a crisis and help to restore social cohesion and emotional well-being, and in turn, strengthen community resilience. It is both an integrated and complementary element of existing efforts to save lives, and strengthen recovery from disasters and crisis.

### ***2: Enable healthy and safe living***

- The National Societies and the Global Health Team are aware of the psychosocial impact, symptoms and means of mitigation related to violence, chronic and other long-term diseases, challenging and high-risk life styles, epidemics, mental health challenges including suicide and non-communicable diseases, and seek to integrate psychosocial support into community-based and other health programmes when relevant.

### ***3: Promote social inclusion and a culture of non-violence and peace.***

- Psychosocial support interventions are used as a method to foster and (re)build social trust,

<sup>4</sup> World Health Organization 2013; Mental Health Action Plan 2013-2020.



social empathy, nonviolent communication, and peaceful resolution of tension and a culture of non-violence. Violence prevention and protection are integrated elements of psychosocial support interventions.

As part of the core mandate of the PS Centre, an additional enabling action of the PS programme has been defined:

***Promoting psychosocial well-being of staff and volunteers***

- The National Societies and IFRC operational and technical teams actively promote the psychosocial well-being of staff and volunteers through facilitation of appropriate and timely provided management support that includes psychosocial means of support as and when needed. In preparation for and deployment in emergency and disaster settings, psychosocial support will be systematically offered and available to both staff and volunteers. In most cases IFRC Staff Health or the National Societies will be responsible for the psychosocial well-being of staff, but in some cases (on request) psychosocial considerations for staff will also be included.

The IFRC PS programme is global, but the challenges are met locally. There are large variations in the need for psychosocial support across the world, as well as large differences in the National Societies' capacity to provide psychosocial support from region to region and country to country. Close cooperation with the IFRC Secretariat and its five zones, as well as regional and country delegations of the IFRC, is the cornerstone in the PS Centre's ability to follow the needs and capacity of the National Societies and be both proactive in supporting capacity building where needed and reactive in providing technical support in emergencies - and to ensure the sustainability of the PSS interventions beyond the involvement of the PS Centre.

The ultimate goal of the PS programme is that all National Societies have sufficient capacity to provide psychosocial support that meets the needs of the populations in their country, while at the same time taking care of the physical and psychosocial well-being of their staff and volunteers. To meet this goal, focus will be on identifying and supporting National Societies that have little or no capacity for PSS or who are facing extraordinary challenges in meeting the needs in their country.

By means of three strategic approaches, the psychosocial support programme will seek to deliver the following outcomes:

<b>Technical support and capacity building</b>	Psychosocial support in emergencies Regional knowledge sharing Training, supervision and mentoring
<b>Knowledge generation and sharing</b>	Strong partnerships with academia Monitoring, evaluation, accountability and learning Expansion and development of PS toolbox
<b>Humanitarian diplomacy and communication</b>	Influence relevant policies and practises Engaging actively with stakeholders and partners Utilizing technology to do more smarter

The activities described in the three strategic approaches are all closely interlinked and inter-dependent.



# Strategic approach 1: Technical support and capacity building

Over the last 20 years, many National Societies have developed their capacity to provide psychosocial support to volunteers and affected groups. However there are still huge gaps and many National Societies request capacity building and technical support from the PS Centre. Focus will be on those National Societies with no or little capacity and on the Participating National Societies that works multilaterally or bilaterally on facilitating psychosocial capacity building and psychosocial support interventions in emergencies. Psychosocial support in emergencies

## Psychosocial Support in Emergencies

Emergencies are often the catalyst for National Societies to start engaging in psychosocial support activities. After the response phase, activities are adjusted and developed further in order to carry them over to future disasters and in recovery and development programmes. Providing technical and operational support to National Societies in emergencies thus often has a scope that reaches far beyond the immediate crisis.

Providing psychosocial support in emergency settings is highly prioritized in the PS programme. Consequently focus is on further development and adaptation of the Psychosocial Support component of the Emergency Response Unit (ERU), and to continuously develop systems that help identify, train and prepare qualified delegates for ERU, FACT, RDRT and stand-alone PSS in Emergency deployments upon request. As complexity of emergency operations is likely to increase, development and support of flexible, relevant and field-applicable tools and materials that can be used in a various contexts will be emphasised. This will happen through collection and sharing of knowledge and experience, development of training packages, psychosocial guidelines on request from partners and ad hoc technical support requested by National Societies or IFRC operational teams.

## Regional support and knowledge sharing

Regional networks are cost-effective ways to facilitate learning and exchange of knowledge and ultimately build capacity.

### Regional networks

The PS Centre will work with existing regional networks and facilitate the creation of new formal and informal networks and twinning of National Societies that, through common interest, common language, common geography etc. can benefit from exchange of knowledge and best practices.

Examples of this could be the formation of an informal network of trainees after a regional training, connecting two National Societies who provide psychosocial support in similar circumstances etc. In this way, the benefits of working in networks are explored without the need for extensive resources. The structure of these networks may be ad hoc or become more permanent if needed.

## Training, supervision and mentoring

PSP focus on training of trainers, supervision and mentoring and technical support on request in order to support the membership and to make the best use of resources.

A model for mentoring will be developed and tested for capacity building of National Societies.

In complex emergencies new delegates will be able to develop their skills under direct supervision and mentoring by experienced delegates and consultants.

### The PS Academy

The “PS Academy” is the umbrella term for psychosocial trainings, workshops and seminars focusing on cost-effective regional trainings and specialised trainings, e-learning and distance learning provided by the PS Centre. The PS Academy will apply and disseminate the PS toolbox (see Knowledge generation and sharing), which provides opportunities to build the relevant skills to utilize the resources.

### Formal certification

Explore the possibility and relevance of entering into partnerships with a university with the aim of establishing a formal certification in psychosocial support.

### **The PS roster**

The global PS roster is continuously developed and maintained, with the aim of having a fully functioning roster with a geographical spread that can complement resources, give trainings, assist with development of tools and knowledge and be activated to support emergency interventions locally and globally. The PS roster, consisting of 30-35 psychosocial specialists, staff and delegates, is instrumental for scaling up capacity and reaching the objectives for the PS programme. Taking the increased awareness and raise in requests for support into consideration further effort needs to be invested in negotiating for availability, funding and additional technical expertise. Efforts are taken to ensure that the composition of the roster is geographically balanced with members to be found in all regions and with multiple language and cultural skills.

A mentoring model for the roster will be developed to ensure good exchange of experience and skills.

### **Technical support on demand**

Ad hoc technical support and input can be requested from National Societies and IFRC operational units for assessments, baseline surveys, programme design, trainings, evaluations and overall strategy planning. Additionally support in developing proposals, logframes and indicators will be provided alongside quality assurance of interventions and local tools and guidelines.

## **Support systems for volunteers**

The National Societies and IFRC operational and technical teams actively promote the psychosocial well-being of staff and volunteers through facilitation of appropriate and timely provided management support that includes psychosocial means of support as and when needed. In preparation for and deployment in emergency and disaster settings, psychosocial support will be systematically offered and available to both staff and volunteers.

## **Expected outcomes from Strategic Approach 1:**

- The “psychosocial support in emergencies” component of the PS programme is strengthened, thereby providing improved preparedness and response capacity.
- Regional support and knowledge sharing is facilitated through the establishment and continuous support to regional networks.
- The PS capacity of National Societies is strengthened through high-quality trainings, mentoring and technical support on demand.
- The global outreach of the PS programme is extended through a well-resourced and operational Roster of psychosocial experts.
- More National Societies have clear systems for supporting staff and volunteers
- More advanced training systems for staff and volunteers implemented (including mentoring and certification).

## Strategic approach 2: Knowledge generation and sharing

Psychosocial support is a discipline under constant development both in academia and in the field. Interventions and methodologies are requested in an increasing number of National Societies and IFRC operational units. New areas of interventions and new ways of combining psychosocial support with other types of humanitarian interventions are continuously emerging. At the same time, universities and applied research institutions produce large amounts of research and knowledge about new interventions and target groups. As the area of expertise and the number of requests grow, the need for new knowledge, tools and methodologies increase in order to base interventions on best practice and research.

With strong ties to both the practical implementation of psychosocial support in the field and the research in academia, the PS Centre is uniquely placed to bridge the gap between the two and work towards better generating and sharing of knowledge, ultimately resulting in better interventions.

### **Strong partnerships with academia**

The PS Centre is a highly recognized actor in the global mental health and psychosocial support community, and as such in a good position to learn from other actors and to influence global MHPSS agendas.

To ensure that the PS Centre and the Movement stays on the frontline of developments in the psychosocial field, it is important to actively engage in knowledge development, -generation – mobilization and -sharing with academic and applied research partners. Systematic gathering and dissemination of evidence informed or -based knowledge on psychosocial interventions, standards for determining what works, how and why in different situations and with different populations is critical for learning, for backing recommendations and advocacy, and for identifying best practises.

To maintain and consolidate these partnerships, the PS Centre will be engaged in large-scale research projects when relevant and feasible. This will result in new areas of knowledge that can be translated into practical tools and guidelines for field use. Participation in these research projects furthermore ensures that the PS Centre is up to date with current state of the art research in the psychosocial field and at the same time, these research projects are valuable catalysts for new and stronger partnerships. The inclusion of Red Cross Red Crescent partners in research projects is an important parameter for choosing projects, ensuring the perspective from the field and promotes better dissemination of results back to the field.

### **Monitoring, evaluation, accountability and learning**

Monitoring, evaluation, accountability and learning (MEAL) of psychosocial interventions are essential to ensure that we are accountable towards donors and beneficiaries and furthermore to facilitate learning and collection of best practice examples. Yet, monitoring and evaluation of PSS interventions are perceived as a challenge by many National Societies. The field is still relatively young and the effects of psychosocial support are less straightforward to measure than other types of interventions.

To this end, user-friendly M&E systems will be developed and differentiated for different contexts, i.e. emergency phase, recovery and long-term development, different target groups etc. Furthermore, the systems will be rolled out through integration of M&E in the PS Academy and the PS Toolbox.

### **Expansion and development of the PS tool box**

There is an ongoing need to develop additional guidelines and tools in order to support and facilitate mainstreaming PSS into other new areas of interventions. Based on requests from the National Societies (mapping 2015), the following topics can be highlighted:

- Survivors of armed conflicts, SGBV and torture,
- Non communicable diseases and a special focus on Mental Health, including suicide
- Loneliness
- Migration



- Youth
- Older people
- Persons living with disabilities

Existing trainings tools will be consolidated and the training portfolio will be continuously developed, updated and improved based on new knowledge and research. The basic community-based psychosocial support training is being complemented with a range of shorter, more specialized trainings/training modules on different subjects or specific programmes at different levels (basic training, training of trainers, master training). Trainings will be developed on the basis of existing tools and emerging needs and trends. In order to reach larger groups and make tools and methodologies available focus will be put on developing e-learning and other types of distance learning courses to supplement the catalogue of face-to-face trainings in an accessible and cost-effective manner.

It will be explored and tested how low intensity mental health interventions (developed by agencies such as WHO and UNHCR) can be incorporated into the IFRC portfolio of psychosocial support interventions.

## **Expected outcomes from Strategic Approach 2:**

- The academic partnerships of the PS Centre are strengthened through closer collaboration with selected universities and involvement in knowledge and research projects.
- The capacity of National Societies to monitor and evaluate their psychosocial interventions is strengthened through the development of appropriate and relevant systems, which in turn will facilitate learning and accountability towards donors and beneficiaries.
- The PS Toolbox is updated and expanded in response to emerging needs and trends, including e-learning. A step-wise approach will be developed to facilitate capacity building in psychosocial support in a particular National Society.
- New low intensity mental health interventions are tested, and if relevant the approaches and methods are integrated into the psychosocial tool box of the National Societies.
- The effects of PS Academy trainings are documented through a better system for evaluation of trainings.

## Strategic Approach 3: Humanitarian diplomacy and communications

Humanitarian diplomacy is closely linked to the maintaining of partnerships and knowledge generation and sharing with external partners mentioned above, but it is also a set of independent activities.

A large number of National Societies provide psychosocial support in different settings and for different vulnerable groups – in emergency settings as well as in non-emergency situations. In recent years, it has become commonplace to automatically include psychosocial support in emergency responses worldwide.

It remains important, however, to continue to increase knowledge and understanding of psychosocial support and its benefits to keep a high level of awareness among those National Societies who already provide psychosocial support, and to convince those that do not.

Through humanitarian diplomacy and advocacy it is highlighted how and in what situations psychosocial support can play a positive role.

### **Influence relevant policies and practices**

The PS Centre will continue to contribute to relevant new IFRC policies and sub-strategies to ensure that psychosocial aspects are addressed and in line with the IFRC approach and international standards. Outside the Red Cross Red Crescent Movement, the PS Centre speaks on behalf of IFRC in matters of psychosocial support and promotes the psychosocial support programme and policy in relevant international networks.

In relation to other international humanitarian actors, the PS Centre will:

- Contribute to the Inter-Agency Standing Committee reference group for mental health and psychosocial support and actively collaborate to host meetings, review and contributing to the development of action sheets, tools and interventions
- Work closely with UN agencies and other large INGO's in coordination and development of tools and guidelines.
- Strengthen collaboration with relevant research and academic bodies.
- Work closely with the ICRC to develop tools and methodologies and support each other promoting the psychosocial support agenda in the Movement

### **Engaging actively with stakeholders and partners**

While the National Societies play a the vital role in implementing psychosocial support, the PS Centre offers a platform for the National Societies to seek knowledge and connect. The PS Centre makes use of several channels of communication, such as the PS Centre website and relevant social media to engage with as many stakeholders as possible. Participation in psychosocial network meetings and other face-to-face events are also important venues of engaging directly with stakeholders and the global psychosocial community.

The magazine “Coping with Crisis” is published and distributed two to three times a year. The magazine will be disseminated electronically and – in more limited numbers – in hard copies to IFRC Zone and regional offices, National Societies, agencies and academic institutions.

Additionally, the latest developments in the field of psychosocial support will be communicated and the stories and videos from the field to audiences inside and outside the Movement will be shared to sustain interest and build knowledge.

### **Utilizing technology to do more, smarter**

The psychosocial support programme will focus on doing more, smarter when it comes to communications. As accessibility to internet and portable hardware such as tablets and smartphones increases globally, it becomes possible to take better advantage of the possibilities for cheap and flexible distribution of tools and training they offer, while keeping the digital divide in mind and continue physical distribution.

National Societies and others can access information and knowledge through the PS Centre website: [www.pscentre.org](http://www.pscentre.org). In order to be widely accessible, the PS Centre also makes materials, tools and guidelines available through other recognized channels, such as [www.mhpss.net](http://www.mhpss.net) and [www.ifrc.org/fednet](http://www.ifrc.org/fednet).

### **Expected outcomes from Strategic Approach 3:**

- Psychosocial support remains high on the agenda of internal and external stakeholders through concerted advocacy efforts by the PS Centre as well as participation in relevant conferences and humanitarian summits
- Stakeholders and partners across the world are informed about the PS programs through a variety of channels.

## Implementation

The aims and ambitions in this Strategic Operational Framework are agreed upon by the PS Centre and its Steering Committee in May 2015. The SOP will be dynamic and revised as needed. Fulfilment of ambitions will be pending on sufficient resources.



# The Fundamental Principles of the International Red Cross and Red Crescent Movement

**Humanity** The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

**Impartiality** It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

**Neutrality** In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

**Independence** The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

**Voluntary service** It is a voluntary relief movement not prompted in any manner by desire for gain.

**Unity** There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

**Universality** The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.

