Coping with Crisis

Federation Reference Centre for Psychosocial Support



Supporting Volunteers and Children in Lebanon

Working with Volunteers in Communities

Supporting Swedish Evacuees

The Psychological Support Programme in the Cuba Red Cross

Counting the Small Steps on the Way

Mapping of Psychosocial Support

The Roster Group





Working together

By Nana Wiedemann, Director of the IFRC Reference Centre for Psychosocial Support

hen we send this newsletter out all over the world we often wonder: Who are the readers? What do they like to read about?

All over the world Red Cross and Red Crescent National Societies are working with Psychosocial Support both in their national and international programmes.

The awareness of psychosocial support in the Movement has increased rapidly over the last thirteen years. Disaster preparedness and response; care for vulnerable groups; care for carers; and support for workers and volunteers are just some of the areas of psychosocial support. In many parts of the world people working with psychosocial support are getting together and forming networks.

We believe that circulating knowledge, documentation and lessons learned is a very important objective for the IFRC Reference Centre for Psychosocial Support (PS Centre). We want this newsletter to reflect what is going on in the field. It should reflect the tendencies of the time and enable all of us to take part in discussions and dialogue between different partners. To have a lively newsletter, we need input from you the readers.

Send us articles about your work with psychosocial support. Write to us about upcoming events such as regional meetings and conferences. Raise issues that constitute dilemmas and food for thought. We cannot share with you unless you share with us.

That is also why we recently asked you to answer our online questionnaire to help us improve the quality of Coping with Crisis. We still hope to get more answers so we will keep the survey open a little while longer. Please help us by participating in the survey – it will only take you five minutes.

We are also compiling lists of psychosocial support delegates and consultants so that we can get in touch with you whenever assistance is needed, set up meetings and training and arrange workshops. Write to us, tell us what you do, what you need and who you are.

Share information with us and participate in a process that will enable all of us to learn more about how psychosocial programmes and interventions take place all over the world.

Help us so that we can learn from each other and help the PS Centre to be as good as possible.■

No. 3 / December 2006

Contents

Working together
By Nana Wiedemann

Mapping of psychosocial support

Supporting volunteers and children in Lebanon
By Doris El Doueihy

Supporting Swedish Evacuees

By Annika Gillispie

Working with our volunteers in communities By Maureen Mooney, Koen Van Praet

The Psychological Support Programme in Cuba Red Cross

By Joan Swaby Atherton

Counting the small steps on the way

By Lene Christensen

The Roster Group

The translation into French of this newsletter has kindly been made possible by the French Red Cross



Published quarterly by: Reference Centre for Psychosocial Support

Disclaimer:

The opinions expressed are those of the contributors and not necessarily of the Danish Red Cross and International Federation of Red Cross and Red Crescent Societies.

E-mail:

psp-referencecentre@drk.dk

Internet: http://psp.drk.dk

ISSN: 1603-3027

Mapping of psychosocial support

ave you ever wondered about Mercy Corps' guiding principles for psychosocial support? Do you want to know who the psychosocial focal point at WHO is? Or perhaps you just want to orient yourself a little in the world of psychosocial support.

As awareness of the need for psychosocial support increases, so does the number of organizations providing psychosocial support and the level of activity.

Over the summer 2006 the IFRC Reference Centre for Psychosocial Support (PS Centre) compiled a map of international organizations working in the field of psychosocial support. More than 20 organizations have participated in the project. The mapping contains a short description of the organization's work with psychosocial support, link to their website and contact details for the focal point in the organization. Many organizations have also provided relevant documents such as policy papers, guidelines for programme planning and training material. The information was gathered by Belhira Kajevic, who spent two months at the PS Centre as an intern. We thank her for her great work.

The mapping is a valuable tool for us to

learn more about the field and to identify potential cooperation partners. It is also an opportunity for the participating organizations to show and share their work with peers. If new contacts are made or someone has been inspired by something in the mapping, we will consider this work a success.

Missing your organization?

Because the field is ever changing - new emergencies occur, more organizations start to provide psychosocial support - the mapping should also be dynamic. It is a living document which should be updated continuously. The mapping is not a complete map of all organizations working with psychosocial support. Rather, it is a snapshot of a part of the whole field. Therefore, if your organization is not represented here, and you think it should, please let us know. If your organization is represented, but the information is out of date, please also let us know. Please write to: referencecentre@drk.dk

You can find the research at our website http://psp.drk.dk, choose "Mapping" in the left hand side menu (English only).

Supporting volunteers and children in Lebanon

By Doris El Doueihy, PSP Coordinator, IFRC, Beirut Delegation

This summer was a busy time for the Lebanese Red Cross as hostilities broke out between Hezbollah and Israel. The conflict cost many lives and there was much damage to houses and infrastructure throughout the southern part of Lebanon.

Before the war, the Lebanese Red Cross (LRC) PSP team consisted of 25 people who had been trained in February 2006. The focal point for the psychosocial support activities is Mr. Anthony Douaihy from the Emergency Medical Services (EMS) in the LRC and the trainees came from all departments of the LRC: Medico Social, Youth, EMS and the Blood Bank.



Mount Lebanon. Lebanese Red Cross volunteer does house-to-house visits to find internally displaced people who are not living in public buildings but who still require assistance.

Photo: ICRC /KOKIC Marco

During the war some of the volunteers provided psychosocial support to the displaced people who were staying in schools in North and Mount Lebanon. In the north some of the PSP volunteers also supported other volunteers who were working in the field.

In order to boost the capacity of psychosocial support in the Lebanese Red Cross, the IFRC Beirut Delegation opened a position for a PSP Coordinator which was filled by Ms. Doris El Doueihy. Soon hereafter, five members of the PSP team had a meeting with the Organizational Delegate in order to formulate a plan of action for the following six months. The priority was to support the volunteers of the Lebanese Red Cross who had been working around the clock during the war, and the children in the southern suburbs of Beirut, South Lebanon and Bekaa. It was decided to offer debriefing to the volunteers and to start making activities for children through the LRC Youth Department.

Twelve of the original members of the PSP team were selected for further training in debriefing. With the support of the Danish Red Cross and the IFRC Reference Centre for Psychosocial Support, Ms. Maureen Mooney of the French Red Cross came to Lebanon. Together with Doris El Doueihy she taught the group about stress, communication skills in volunteer support and methods of "debriefing" working in groups and individually. When, how, with whom, when is it inappropriate, what are the limits. The group who had all been active with the LRC during the war were also given information on security when working in the

field. After the training, ten of the trainees started debriefing the LRC volunteers. Debriefing of volunteers is now taking place all over Lebanon.



Volunteers from the Lebanese Red Cross plays with children in Madame Aoun School in Mount Lebanon, which was turned into a temporary shelter for displaced people during the conflict.

Photo: ICRC /KOKIC Marco

At the time of writing this article (late October 2006) trainings are taking place in the Youth Department all over Lebanon. The goal of the trainings is to teach the volunteers how to support the children after the war. "We will be training volunteers how to work with children who survive such a crisis, how to encourage them to talk about what they've been through and how to let them express their fear," says International Federation delegate Doris El Doueihy. Because the Youth Department do most of the social activities in the LRC, it is natural that the PS for children is undertaken by this department.

Supporting Swedish Evacuees

By Annika Gillispie, Coordinator in the Stockholm Region of the Swedish Red Cross, member of the SRSA Support Force

hen the hostilities between Israel and Hezbollah broke out in Lebanon last summer thousands of foreign nationals were caught in the violence. This resulted in massive efforts by many countries to evacuate their countrymen.

Almost 7,500 Swedes were evacuated from Lebanon between the 16-25th July. Almost

2,700 were flown home from Syria. 3,365 were evacuated by boat to Cyprus. 1,316 went home in coordinated transports with other countries.

On Friday the 14th July, a few days after the Israeli bombings started, I was contacted by the SRSA. They asked if I was available for a mission. The purpose was to help and support the Swedish foreign department in



At the university in Aleppo. Photo: Annika Gillispie

an evacuation operation of Swedish citizens who were caught in the conflict in Lebanon.

Setting up camp in Aleppo

Two days later I was on my way to Aleppo in the northern part of Syria together with 12 persons from the Foreign Office and

SRSA. In Aleppo we were met by Mr Akram Chaikmous, who had lived in Sweden for many years, and who helped 115 with many practical things. Our base was setup in a university campus which could host around 500 people. Already during Sun-

day evening 16 busses arrived from Beirut. People had been traveling for about 10-13 hours. Many were traumatized and in bad condition, both physically and psychological. They had hardly eaten or slept during the last couple of days.

Besides psychosocial and medical support our main task was to register all the passengers as required by the airlines and Swedish police. The Foreign department worked hard on getting as many extra airplanes as possible. While waiting everybody could get some well deserved rest and food.

The uncertainty about transportation home to Sweden was obvious among the evacuees. —"Are there more planes coming?"

"When will you be finished making the lists?" "Will we be on the next plane?" "Why am I not on the list, I arrived among the first?" The uncertainty, in combination with a high level of stress and fear, based on previous experiences, and the thoughts of the loved ones left behind, sometimes created conflicts within the group.

Our Support Force worked hard. Everybody helped in order to get as many evacuees home as quickly as possible. We assisted when the busses arrived, helped register and made lists, carried suitcases and distributed water, played with the children and informed as soon as we got new information.

Battling chaos at the airport

We also helped out at the airport. Many hours of waiting while papers and passports had to be controlled put pressure on the passengers. Sometimes it became chaotic when hundreds of people pushed to get

> through at the same time. Some fainted from pure exhaustion and some became loudly spoken. Αt certain times were also there other nationalities evacuating, but thanks to Mr Chaikmous, we could work fairly efficiently at the checkin counters.

Together with our colleagues from Save the Children we kept focus on psychosocial support, especially for the children. Many parents were in such a bad condition that they couldn't adequately cope with their parental role. A short and informative pamphlet was handed out to parents on the way children may react and how to deal with those reactions.

Two days after our arrival in Aleppo some of us in the Support Force traveled to Damascus where the Swedish Embassy had asked for reinforcements. The mission there was very much the same as in Aleppo except that the Embassy became our base. The need for medical help and crisis support was great. We divided up into smaller

"One woman told me that she had fled the war

in Lebanon with her parents 28 years ago which

had been an awful experience for her. She has

lived in Sweden since then and her older children

had tried several times to persuade her to go

back and visit family and relatives, but she al-

ways refused - until this summer! Her youngest

daughter was the same age as she was 28 years

ago, and now the little girl had to go through the

same ordeal as her mother!"

groups and went to the different hotels where the evacuees stayed to check their medical and psychological status in order to give them the right treatment and support. It was not a question of debriefing but rather a support from one person to another. In Damascus we stayed another six days. On July 24th I was back home in Stockholm.

Home again

I had two other Red Cross colleagues in the Support Force in Syria and we had another two based in Cyprus and in Turkey. It was difficult to keep in contact with them during the mission, so we really didn't know how

they were doing until we got back home. A few days after we came home we all met at the Swedish Red Cross headquarters in Stockholm. We were thanked by our head of department and we shared stories and experiences. Finally we also all had individual meetings with a psychologist for a sort of debriefing.

The mission was very intense but also very rewarding. Thanks to our Red Cross volunteers who were in the Swedish airports to greet the evacuees, we were able to help these Swedish citizens to get away from the dangers in Lebanon and almost all to their own front door.



The psychosocial support team. From the left: Annika Gillispie, Anna Jonsell and Lotta Karlsdotter Photo: Annika Gillispie

Learning from the experiences of the tsunami in which hundreds of Swedish nationals lost their lives, a special Support Force was formed by the Swedish Rescue Services Agency (SRSA). The task of this new Support Force is to support the Swedish Foreign Authorities during disasters or serious accidents abroad in aiding Swedish residents affected by the event.

The Support Force consists of core personnel from the SRSA, medical personnel, logisticians, police officers and other specialists. The Swedish Red Cross, Save the Children and the Swedish Church provide personnel with experience in psychosocial support.

In three years the Support Force will consist of 150 people. The first group of 50 was trained in June of this year. In each group of 50 there will be five people from the Swedish Red Cross with focus on psychosocial Support.

Working with our volunteers in communities: Improving care through Psychosocial Support

ENPS 2006, Athens, September, 20-22

By Maureen Mooney, outgoing Coordinator, Secretariat for the ENPS, French Red Cross

The aim of the ENPS is to facilitate exchange of experience and development in the psychosocial domain within the RC/RC Movement; coordinate resources and help the transfer of good practices.

The Forum

For the last three years, the European Red Cross/Red Crescent Network for Psychosocial Support (ENPS), ope to all 52 National Societies in the IFRC European zone, has come together in a yearly forum. This year the two day meeting was hosted with hospitality and efficiency by the Hellenic Red Cross in Athens. Over 40 participants and 28 National Societies were represented.

Many participants either gave presentations or took turns to facilitate workshops. An atmosphere of respect for others and their cultural diversity reigned.

The programme

The main theme of the forum, "Working with our volunteers in Communities", seemed to stimulate all the participants to reflect and advance on future strategy.

The programme was developed around how the Red Cross/Red Crescent Movement meets the needs of our European communities. We can do this by developing a strong, competent and supported volunteer base, by using our ENPS network as a resource, as well as by working with our communities, empowering them to meet their needs.

This year, it was felt by all that the quality of the programmes and training continues to increase. The recommendations and ideas coming from the numerous workshop groups confirmed this. It was evident by the diversity, richness and cross-cutting aspects of the presentations that psychosocial activities are an integral part of ENPS National Societies.

From ongoing health to trafficking

Examples of presentations covered such diverse areas as integration of PS into Disaster Response teams, seen in the Montenegro and Estonian presentation, to PS in on-

going health programmes in the Hellenic RC and Moldavian RC presentations and PSP in supporting populations involved in human trafficking such as the Bulgarian RC activity or PSP in support of migrating populations as demonstrated by the Spanish RC.

Other presentations developed a strategy and evolutionary aspect of PSP. The Swedish RC explained how they are linking PSP to Disaster Preparation drawing on recent lessons learnt. The IFRC Reference Centre shared their ongoing work of being a resource centre and centre for development of our PSP activities.

Definite role for the ENPS

The cross-cutting aspect of PSP and the interest in networking came out in the presentation by several other Movement European Networks who came to share and exchange in the forum. PERCO, ERNA, European RC/RC cooperation in response to human trafficking and the emerging emergency contact group within the EU countries all took time to discuss how we can cooperate further together. The acting head of the IFRC delegation in Budapest pointed out that the development of regional offices for the Europe desk, outside of the Secretariat office in Geneva, means that the Networks will have a definite role to play in the cohesion and promotion of activities.

As outgoing Network coordinator, I am so pleased by the excellent participation in Athens this year. Despite a rich, intense programme, all involved were able to make contacts and reflect together. It was an enjoyable and enriching experience.



The Forum from a participant's view

By Koen Van Praet, Belgian Red Cross (Flanders)

The most appreciated, perfect organisation and warm hospitality by the Hellenic Red Cross created a nice working atmosphere for us, the participants at the fourth ENPS Forum.

The purpose of this forum was to provide European Red Cross/Red Crescent National Societies, working in the domain of Psychosocial Support (PS), with a venue and time to exchange ideas, best practices and tactics. The programme consisted of a well-balanced mixture of presentations by fellow societies, working groups and presentations by specialists

The network is us

ENPS coordinator Maureen Mooney made clear from the very first moments how exactly ENPS functions as a network: "the network is us". In my view, this simple line was of major importance for all who participated. Language borders, definition confusion, nothing could stop us.

The perfect opener was the personal experience by a lady volunteer from the Hellenic Red Cross who had worked with children with cancer. Her beautiful story was personal and recognisable about difficulties and success, powerlessness and satisfaction. Another presentation that deserves special mention is the one from the Russian Red Cross about Beslan. The Beslan team presented the current status of the community based psychosocial support projects in Beslan proving that by using this approach it is possible to avoid dividing the commu-

nity into those who are victims and those who are not. This approach is far from the PTSD, individual and therapy focused projects we saw in the nineties. We were happy to see the community view shared in all the presentations.

Another common idea is that psychosocial programmes should not stay on their much specialised psychosocial islands, but that we should try to bring in the psychosocial aspect into all Red Cross/Red Crescent programmes or structures: be it First Aid (how to approach a victim), home visits, health programmes, management or decision makers.

On Saturday and Sunday a specialist gave a presentation which brought food for thought. Joanne Hersberger from Switzerland presented a survey on how we could use questionnaires in order to screen volunteers. The first results offer some perspective: a questionnaire can be an extra tool, but most of us have to have a translation to a language other than German. On Sunday it was Atle Dyregyrov who presented his interesting and very Red Cross compatible view on psychosocial support.

Finally, Sune Folling, IFRC representative for Central Europe and the network as a whole thanked Maureen Mooney for the work she has done for the ENPS before she handed the ENPS secretariat over to Barbara Juen of the Austrian Red Cross and Konrad Frey of the Swiss Red Cross.

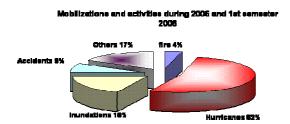
The Psychological Support Programme in Cuba Red Cross By Joan Swaby Atherton, Cuba Red Cross

very active hurricane season in the Caribbean has meant a very busy year and a half for the Cuban Red Cross Psychological Support Programme. Volunteers and relief workers were mobilized more than 450 times in that period.

As shown in the figure, more than 50% of mobilizations were due to hurricanes but



we also had volunteers working with great diversity in stressful situations which affect our population and also constitute a highly prioritised goal in our PS programme.



We count on 6,237 volunteers working in vulnerable communities, not only to prepare the population for hurricanes, draughts and tornadoes, but also to teach them how to deal with daily stressful situations which can occur in a quotidian disaster if one is not armed with adequate coping techniques.

These volunteers give support to the sick, elderly, handicapped and HIV patients, sustaining special programmes carried out by the Ministry of Health in the communities.

They also worked infloofds due to heavy rains, helping in evacuation of the population and in temporary shelters. Although not so frequently, we have had volunteers mobilized giving support in forest fires during the dry season, and in accidents.

In these events more than 5,000 volunteers and helpers were activated providing support and assistance to more than 17,000 persons.

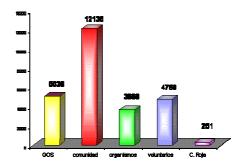
Psychological Support in training

All volunteers and helpers have been trained through training programmes specially designed according to their field. In all training programmes Psychological Support is a main ingredient. It provides the trainees with an important tool to guide the behaviour of everyone in an emergency or in daily life.

These trainings are also aimed at preventive work in the grassroots, people living in vulnerable areas, workers in highly risky places and according to our disaster's response programmes.

As the figure shows, most of the trainees were people from the communities. Training members of the community is an important





component of the disaster preparedness plans. Furthermore, relief special workers (GOS), volunteers, people from workplaces and organizations such as fire workers, police and civil defence workers were also among the trainees. Naturally the Red Cross staff was also trained to achieve the goal of connecting the PS Programme to all Red Cross activities.

It's a fact that the PS knowledge acquired by our staff, volunteers and helpers, has been a great help in their daily lives, in their work as helpers, giving support to the distressed, the elderly, the sick, the neighbours, the family members, the friends, and to everyone that looked to a Red Cross worker for support and was left satisfied. We have become friendlier and we definitely accomplish one of our main principles: HUMANITY

Counting the small steps on the way

Working with indicators for psychosocial support

By Lene Christensen, Psychosocial Consultant, IFRC Reference Centre for Psychosocial Support

When setting up a programme for psychosocial support (PSP), it is now common practice that indicators are defined by those who are in charge of implementing the programme. According to the textbook definition an indicator is a statement or parameter that will allow for documentation or measurement of the degree to which a programme is being implemented successfully and thus may be expected to reach its goals.

There are many good reasons for keeping track of the indicators that have formulated in connection with the programme design phase. Some of the obvious ones are:

- It provides information on the process of implementing the PSP
- It tells the organisations in charge about the effects the programme is having
- It allows for transparency and accountability to local and international stakeholders.

From emotional response to indicators

Experience shows that stressful events are likely to produce emotional responses. Even though this does not necessarily lead to long term mental problems, it is almost always very painful. The purpose of PS programmes is to help people overcome the effects of such events. In many cases it has been observed that up to 70% of a given population may display emotional reactions that could be met through PS programmes. While some people may cope very well, others may have to be referred to counselling or other types of professional support. Emotional response to stressful events is a basic human function which is seen all over the world. Examples of the emotional responses that have been seen in previous emergencies include sadness, grief, feelings of loneliness and loss, fearfulness, lack of self-confidence and dignity/self-respect, loss of control over the future, life and property.

By a thorough analysis of the local conditions during an assessment, a list of prevalent emotional responses in the context of an emergency or stressful event is developed. These are turned into indicators which a psychosocial programme may address. In each case the emotional response manifests itself in a changed behaviour which may be detected through observation and interviews with those affected. Different groups of people affected respond differently to the same kind of stress. The table below list some indicators that have been defined in connection with previous psychosocial interventions:

| Adults | Ability to return to daily routines / do daily chores | | | | |
|----------|---|--|--|--|--|
| | Ability to concentrate, irritability etc. | | | | |
| Adoles- | Spends time with peers, hope for the future, | | | | |
| cents | engagement in education, work or other, for boys - risk taking behaviour | | | | |
| | | | | | |
| School | Concentrates in school, plays with peers, age appropriate behaviour | | | | |
| Children | | | | | |
| Young | De/increase in clinging behaviour, plays with peers, age appropriate behav- | | | | |
| Children | iour | | | | |

Why is it difficult to measure the effects of psychosocial support?

It is often mentioned that it is very difficult to develop meaningful indicators for psychosocial work. Most methods and tools used to identify and categorise psychological states and disorders have been developed in a Western context. However, each society and cultural setting has its own way of defining and making sense of what goes on. This means that the human

emotional functions are displayed differently across space and time. Thus, emotional responses, and the behaviours that may subsequently be observed, vary across cultures and types of beneficiaries. Individuals react differently on the basis of both their mental habitus and the social relations in which they engage.

Applying Western ways of categorising such states in different cultural contexts may have the effect that an assessment misses certain culture-specific ways of expressing and interpreting the world. It may also be that a recognisable symptom is identified but has a different meaning or is not considered important in the local setting by the people of that specific location. This again means that the significance of what is observed may be different from what the symptom normally signifies. Experience shows that a purely clinical approach to obtaining information about psychosocial issues does not capture the complexity of new settings, and thus will not be sufficient to translate psychosocial needs into a programme response. Rather a mix of methods and a certain sense of pragmatism should be employed.



Photo: Heine Pedersen

Counting the uncountable – methods for quantifying qualitative information

Psychosocial programmes focus on bringing about qualitative changes in the lives of individuals and communities. This obviously makes it difficult to numerically verify the effects of the programme. We can describe the words and actions of participants and also count the numbers of people who participate, but this does not tell very much about the longer-term results and the changes seen in the lives of those who participate. Nevertheless, it is sometimes necessary and desirable to be able to document the effects of a PSP in numbers because it presents an easy overview

of what has been achieved. Donors often request this type of information.

To bridge the gap of being able to communicate the improvements in the lives of beneficiaries and thus the programme achievements and those who prefer numerical information, it is sometimes decided to quantify qualitative information. In this method questionnaires are given to programme participants who are asked to rate themselves according to certain statements. The statements have been phrased on the basis of the defined indicators for the programme, e.g. increased levels in trust and tolerance.

For a psychosocial programme in Palestine, the participating children were asked questions like these:

| | Not at all 1 | times | Several times a week - 4 | Every day 5 |
|--|-----------------|-------|--------------------------------|----------------|
| I talk to a friend if I am sad or scared | | 5 | WEEK - 4 | |
| I will help a friend who has a prob- lem | | | | |
| I stay out of fights with my sib- lings at home | | | | |

Developing meaningful indicators for PSP is never an easy task. For each intervention there is much to be learned about the specific circumstances that influence the lives of beneficiaries. The only way is therefore to engage those who will be participating in the programme; they are the ones who know the problems best. Engaging them in defining possible solutions psychosocial activities may help them start reflecting on their own way forward.

The Roster Group

By the IFRC Reference Centre for Psychosocial Support

The objective of the IFRC Reference Centre for Psychosocial Support (PS Centre) is to support the IFRC and National Societies in providing psychosocial support. This is done through capacity building, strategic consultations and operational support. In order to support the PS Centre's working capacity a Roster Group was established in late 1998.

The members of the group were mainly recruited from National Societies, universities and regional delegations and were given some initial training. Since then there have been a number of meetings and the group has evolved according to need and interest.

Today the Roster Group functions as a valuable source of knowledge and experience for the PS Centre. The group assists the PS Centre in developing tools and guidelines, engaging in technical discussions in relation to psychosocial issues and providing services to National Societies such as training, assessments, evaluations and reviews.

The Roster Group members are selected on the background of their qualifications, availability and financial backing. Most of the meetings and assignments of the roster members are voluntary, but the members will still need to get their expenses covered. To ensure cultural representation, sensitivity and sustainability of Psychosocial Support Programmes (PSP) in all geographical regions, the PS Centre needs to prioritize

funding support for members from less affluent countries. This means that the majority of the Roster members need to obtain funding from their own National Society or supporting organization. This type of collaboration and partnership is highly appreciated.

Currently there are about 25 members of the roster and this we consider to be a good number. It is important that the group is big enough to have dynamic meetings, but at the same time it should be small enough for the members to get to know each other. The turnover in the group is relatively low and many of the members have been with us since the very beginning. This ensures continuity and trust within the group. At the same time, there are always new faces at the meetings – either because new members have joined or because special guests have been invited.

The meetings

The group meets approximately once a year for two to three days to discuss various topics, share experiences, network and provide input to the PS Centre's work. 23 people representing several National Societies, four universities, IFRC delegations and the Secretariat participated in this year's meeting which took place in Copenhagen on 24-26 October. The red thread throughout the meeting was how to ensure the best possible quality of our work and the widest possible impact through out the Movement.



23 people representing several National Societies, four universities, IFRC delegations and the Secretariat participated in this year's meeting which took place in Copenhagen on 24-26 October. Photo: Morten Vistisen, Danish Red Cross

Among the topics discussed at the meeting **Sharing experiences** were

- of standardizations
- recent research
- indicators
- Revision of the Community-based Psy- tection of the most vulnerable.■ chological Support Training Manual

Networking and sharing experiences is always Psychosocial Support modules in FACT, an important part of a roster meeting. Be-BTC, ERU and Stress management train- cause of its diversity, the group as a whole brings a wide range of experiences and in-PSP and the programme cycle - issues sight to the table - both the one in the conference room and at dinner in the evenings. Documentation of PSP - an overview of This year we heard presentations about PSP during and after the Lebanon crisis, the need Assessment, monitoring & evaluation - to support the volunteers who work with HIV/ development of operational qualitative AIDS in southern Africa, training and assessment in Somalia, assessment in Syria, imple-A practical experience of implementing menting the IASC mental health and psychothe IASC guidelines for Mental Health social support in emergencies guidelines in and Psychosocial Support in emergen- the field and about the need for all humanitarian workers to be much more aware of pro-