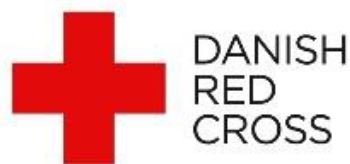


**BALTPREP PROJECT  
ENHANCING REGIONAL PREPAREDNESS  
AND RESPONSE CAPACITY  
FOR MAJOR ACCIDENTS IN THE BALTIC SEA  
REGION**

**MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT  
SESSION PLAN FOR BALTIC SEA  
DISASTER RESPONSE TEAMS**



October 2020

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## Introduction

The overall aim of the session for disaster teams in the Baltic Sea Red Cross Societies<sup>1</sup> is for participants to be acquainted with the basic principles for mental health and psychosocial support in humanitarian settings.

Participants will be informed about which mitigation measures they can take and skills to use in order to minimize the effect of mass trauma events. The session also focuses on leading different categories of volunteers as many spontaneous volunteers have come to assist in crisis situations in recent years.

The session is developed for BALTPREP Project Enhancing Regional Preparedness and Response Capacity for major Accidents in the Baltic Sea Region 2019 to 2020. It can be adapted for other programmes and trainings of responders; please adapt and tailor to the context as needed.

## For facilitators

As a facilitator it is necessary to be well acquainted with mental health and psychosocial support standards, guidelines and tools. The facilitator must also understand and use principles for adult and participatory learning and have good facilitation skills to be able to run the session. The session should be carried out without the use of PowerPoint to make it more engaging for participants, as adults learn best when being involved and when the learning is applicable to their daily lives and practices. Instead of using PowerPoints the facilitator can make drawings as described in the session plan.

On-line adaptation of the session is possible using platforms that allow interactive on-line training and learning. The session plan is for a three-hour session. However, as groups differ, you may have to adapt to fit a talkative group who like to discuss at length or to a group that needs more encouragement to discuss the topics.

### Materials needed for the session:

- Flipchart, markers and tape to hang flipcharts on walls
- An inflatable ball the size of a handball or a scarf made into a ball
- Pens and post its

### Materials for participants:

A copy for each participant of

- IFRC Reference Centre for Psychosocial Support: *Introduction to Psychological First Aid*
- IFRC Reference Centre for Psychosocial Support: *BALTPREP Folder for briefing of and for spontaneous volunteers*, or
- IFRC Reference Centre for Psychosocial Support: *Minimum standards of caring for volunteers during COVID-19*

### Materials for a table for reference materials:

- IFRC Reference Centre for Psychosocial Support: *Loss and grief during COVID-19 (2020)*
- IFRC Reference Centre for Psychosocial Support: *A Guide to Psychological First Aid for Red Cross and Red Crescent Societies (2018)*
- IASC: *Guidelines on Mental Health and Psychosocial Support: Checklist for Field Use (2008)*

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<sup>11</sup> The session is written for Baltic Sea Red Cross Societies; therefore, there is no mention of Red Crescent Societies – this can of course be adapted to fit the context

- IASC: *Inter-Agency Referral Form and Guidance Note*
- MOMENT project: *A roadmap for implementing International Red Cross and Red Crescent Movement commitments on addressing mental health and psychosocial needs 2020 – 2023 (2020)*
- Hobfoll et alii. *Five essential elements of immediate and mid-term mass trauma intervention (2007)*
- IFRC: *Minimum standards for protection, gender and inclusion in emergencies (2018)*

## The session

Introducing community-based mental health and psychosocial support

Time: 10 minutes

Materials: A flipchart with the aims of the session and show it to participants. A copy of the roadmap for the table with reference materials.

Reference materials:

A roadmap for implementing International Red Cross and Red Crescent Movement commitments on addressing mental health and psychosocial needs 2020 – 2023

Speaker notes:

*Welcome to the session on mental health and psychosocial support in response to any crisis or emergency.*

*I will give a short introduction to the topic and an overview of the session before moving into the practical exercises.*

*In major crisis and emergencies safety is challenged, social structures are shaken, routines are lost, and power dynamics change, and early psychosocial interventions can be lifesaving.*

*There is a growing recognition and body of evidence that mental health matters. The greatest need was to be listened to: The importance of mental health and psychosocial support during COVID-19” is the telling title of an ICRC and IFRC October 2020 report.*

*In conflict areas more than one in five suffers from depression and anxiety. Mental health conditions will double in a humanitarian crisis and staff and volunteers are affected too. We know that working in the humanitarian sector is associated with an increased risk of adverse mental health. Humanitarians experience increased anxiety, PTSD, depression, burnout, alcohol, health complaints and suicidal ideations.*

*At the Council of delegates and the International Conference in December 2019 a resolution on MHPSS and a Movement policy on MHPSS were adopted. To assist National Societies in their work a roadmap has been developed that you can see on the table with reference materials.*

*The following statements let us understand the importance of HOW we do WHAT we do: We can give people food, but we cannot give them appetite, we can give people shelter but not a home, we can give blankets but not sleep. The mental health and psychosocial aspects must be part of any intervention as it relates to how we intervene and underlines these considerations need to be in place from the beginning.*

*Any comments or thoughts from you?*

*At the end of this session, the aim is that you will know and understand:*

- *the importance of mental health and psychosocial support in emergencies*

- *the preventive effect of establishing early psychosocial measurements in any response*
- *different categories of volunteers and how to brief spontaneous volunteers*

How do you calm yourself when distressed?

*Exercise 1*

Aim of the exercise: to introduce participants and a component in provision of MHPSS and selfcare

Time: 10 minutes

Reference materials: IFRC Reference Centre for Psychosocial Support: *Calming people down - video on pscentre.org*

Gather participants in a circle and ask them to pair up with someone they haven't talked to till so far in the training. If participants have just met, ask them to introduce themselves having a minute each. They are to tell where they are from, what their position is in the branch or National Society and to say what they like to do to calm themselves after a stressful episode or period.

Ask participants to end their presentation and to turn back to the circle. Ask them to share what they do to calm themselves after a stressful episode or period.

Speaker notes:

*I hope you got inspired by the different calming activities that were mentioned. They are part of our repertoire of coping methods and strategies. Knowing and using good and diverse coping methods – some mentioned by you are fun and innovative - and strategies is extremely important during stressful times as when working in an emergency. Knowing how to calm yourself and using different methods can help emergency teams working more efficiently. When being in the field and there are stressors, hard work, long hours and the people of concern may be upset, scared and threatened, knowing how to calm yourself is important.*

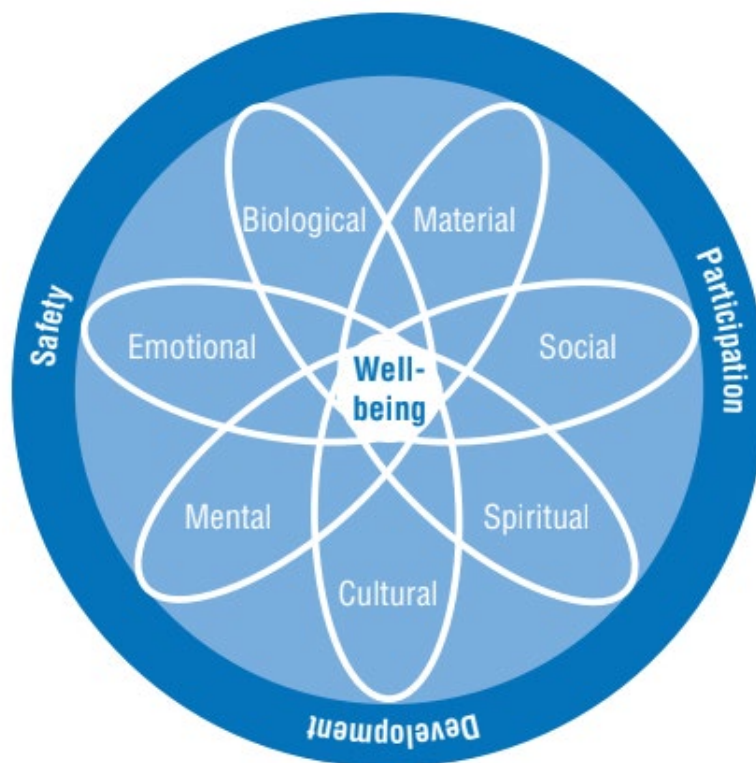
What is mental health and psychosocial well-being?

*Exercise 2*

Aim of the exercise: participants get an understanding of the different key aspects of mental health and psychosocial well-being.

Time: 25 minutes

Materials: A prepared flipchart showing a flower with seven overlapping petals, post its and pencil for each participant – as in the drawing below.



Participants continue with their partner from the previous exercise. Ensure that all pairs have pencils and post its at their disposal

Speaker notes:

*Psychosocial well-being describes the positive state of being when an individual thrives. It is influenced by the interplay of psychological and social factors. Psychosocial well-being fluctuates and can be strengthened, even during the most challenging circumstances. In this exercise we will explore what areas in life are influenced by mental health and well-being.*

*Stay in the pairs and discuss which needs and factors in life ensure that a person can be mentally healthy and well. What does a person need in life to feel and do well? Think of concrete factors – you could think of having access to water as a very concrete example and of having guiding values as another less concrete example.*

*Write your suggestions on post-it notes; note one suggestion per post-it. Take a few minutes to think and write post its – you are welcome to write as many as you like; do however remember one item – one post it.*

Next show the drawing of the petals and on the petals note respectively: biological, material, social, spiritual, cultural, mental and emotional.

Ask participants to place their post it on the corresponding petal – and in case the need or factor is already on a petal – place the post it on top of it.

Speaker notes;

*Mental health and well-being depend on many factors. The overlapping circles in the “well-being flower” suggest that individual and collective well-being depends on what happens in a variety of areas, that meeting at least a minimum level of need in each of these areas is necessary and that the areas are interrelated.*

Comment on which of the petals that has the least post its. Ask the group to come up with suggestions for factors belonging to this petal. (often the least unfolded petal will be the mental; therefore explain that mental refers to learning, stimulating and creative activities and how important it is to keep learning to learn during any disaster and how schools and Safe Spaces for Children are key for children's well-being.)

Divide participants into seven groups and assign each group a leaf from the flower and to discuss how it relates to their work or how it can be promoted during the work in an emergency setting.

Principles for mental health and psychosocial support during emergencies and how to use

*Exercise 3 Hopfoll principles and a case study*

Aim of the exercise: introducing the Hobfoll principles and applying these to a case study.

Time: 25 minutes

Materials: A prepared flipchart with a large circle divided into five parts, A 4 paper, post its and pencil for each participant

Reference materials: <https://pscentre.org/?resource=five-essential-elements-of-immediate-and-mid-term-mass-trauma-intervention-empirical-evidence-hobfoll-et-al>

Participants sit or stand in a circle. Divide them into groups by counting: safety, calming, self-efficacy and collective efficacy, connectedness and hope.

Speaker notes:

*Five Essential Elements of Immediate and Mid-Term Mass Trauma Intervention: Empirical Evidence (by Hobfoll and others) is a very important piece of research in mental health and psychosocial support. Hobfoll and the associates identified five empirically supported intervention principles that should be used to guide and inform intervention and prevention efforts at the early to mid-term stages. These are promoting: 1) a sense of safety, 2) calming, 3) a sense of self- and community efficacy, 4) connectedness, and 5) hope.*

*This framework of understanding can help understand how to think about mental health and psychosocial support in any emergency.*

Draw a large circle or divide it into five parts or show a prepared flipchart with the drawing. On each piece of the circle write the word: *safety, calming, self-efficacy and collective efficacy, connectedness and hope.*

*As in the previous exercise, safety and security is the basis of everything else. Let's use an example of take a local and small-scale disaster to work with the principles.*

*In a town in a Baltic Sea country a fire raged (or choose a flash flood) and it destroyed a family house completely. The family home was flooded and the family consisting of two adults and a teen-ager and a six-year old only had half an hour time to save a few of their personal belongings. The family moved to a small suite in a very big hotel that is used for conferences and meetings. The hotel has a big lobby, several lifts, long corridors, a popular café, several restaurants, gym and pool area.*

*Imagine you are from the Disaster Response Team and are asked to assist the family the day after they have moved to the hotel. The family is clearly devastated by the loss and by having to be temporarily living in a hotel until an interim solution is found for them. However, they seem like a resilient family. Even though it's sad and challenging for the, they would very much like to meet with you to have concrete guidance on what they can do to come through this difficult time.*



*How will you use the five principles in your concrete guidance to ensure they will have information, knowledge and skills that will help them to maintain their well-being when living in the hotel?*

Groups are assigned to the part of the circle that they are named after and are given 10 minutes for their discussion. They are to select a team leader responsible for keeping time and for appointing a team member to present the findings in the plenary.

Ask groups to present in the plenary.

Break

*Exercise 4 Selfcare*

Aim of the exercise: for participants to use selfcare principles in practise

Time: 15 minutes

Speaker notes:

*Thanks for your attention so far and now it is time for a break.*

*Before the break, I would like to ask you to stand or sit quietly for a moment, turn your attention inwards and notice your body for a few seconds (give them 15 seconds). Think about what you need to do for yourself right now. Do you need a stretch, a deep breath or to talk to others? See you in 15 minutes....*

During the break, if necessary clear space for the next exercise. Ask for help from participants if needed.

Stressors, stress reactions and resilience of teams

*Exercise 5 We all react differently to stressors*

Aim of the exercise: participants understand how stressors impacts individuals and what teams can do boost their resilience.

Time: 20 minutes

Materials: flipchart and markers, a ball

Reference materials: IFRC eCBHFA – module for MHPSS

Gather participants in a circle. Ask for a scribe to note what is being said by participants on a piece of paper or a flipchart.

Speaker notes:

*We will look at stressors – something that can be perceived as stressful by the organism - and at stress reactions. In emergencies the levels of stress will be high for all involved as much is at stake. When the levels of stress rise, it's hard to think straight, so responders need to know how what stressors they react to and what they and the team can do to be able to function well.*

*I will ask you to name something that stresses you; you could give examples of what stresses you when volunteering for the Red Cross, or in your work and daily life. Let me hear an example from all of you. It can be anything that you find is a stressor – anything that has a stressful impact on your mind, body, thinking and/or reactions.*

Next ask participants to stand on a long line in the middle of the space, whether the session takes place in-or outside. Every time you mention one of the stressors participants have mentioned or you use the lists below, each participant is to take a step forward, if the stressor mentioned stresses them and remain in place if this particular stressor doesn't stress them.

In addition to some or all from the list of stressors mentioned by participant, the facilitator can add one or more of the following:

You are called in for the flood/or fire (relate to the case in exercise 3) operation:

- It's your first flood rescue operation; however, you have been well trained for this
- and the IT and phone system are down for an hour in the beginning of the operation.
- you are assigned as the team leader and is given charge of five spontaneous volunteers
- one of the volunteers does not want to comply with the task as it is not the right approach to a flood rescue operation
- he childcare/school calls and says you need to come to pick up your child who is sick
- you made a difficult decision in the field late last night and there is no one to discuss it with
- the food delivery for volunteers that you were told would be there at noon hasn't arrived and its 1:30 pm
- your rubber boots leak.... Etc.....

At the end of the exercise ask participants to look around and see where everyone stands. It will probably be clear that not all will react in the same way to stressors. Gather the group and ask participants to discuss in pairs or trios what the reasons are that people react differently to a stressor. Take a few answers and sum up by saying that stress reactions will depend upon many factors such as:

- the nature of the stressor or event – was it anticipated, or a sudden event was it man-made or natural
- the severity of the what happened – how severe the consequences were, especially if there were loss of life, property, livelihood, health
- how long the event lasted
- whether the event is similar to something experienced before
- the physical health and pre-existing mental health conditions
- cultural background and traditions
- whether solid and trustworthy information on the event is shared and is available to all involved
- if the event was experienced as degrading and unjust
- age - for example note that children of different ages react differently to adults

*One of the most important and protective factors for a person after a critical event is the level and nature of social networks and support. Most people who experience crises or traumatic events have common reactions and recover well, especially if they can restore their basic needs and receive support from people around them.*

*When a community is affected by a crisis event the impact will be larger than the reactions. It is not only **what** you do when you intervening it is equally important **how** you do it; remember the statements; we can give food, but not appetite, we can give people shelter but not a home, we can give blankets but not sleep.*

Depending upon the time, either ask participants to give concrete examples of what a team can do to become more resilient so they can better handle stressors or have participants work in groups to come up with a list of what teams can do to improve their resilience.

## Loss and grief

### *Exercise 6*

Aim of the exercise: participants understand the basis of meeting those affected by loss in disaster situations

Time: 20 minutes

Materials: a prepared flipchart and a ball

Reference materials: IFRC Reference Centre for Psychosocial Support: *Loss and grief during COVID-19*

Gather participants in a circle. Ask them to change places by moving in and out in the circle as when shuffling a deck of cards, so they end up standing beside someone they haven't talked to so far.

Ask for or nominate a scribe to note the different types of loss that will be mentioned during the exercise.

Speaker notes:

*In almost every crisis people will experience and react to losses. There are many types of losses. When working in crisis situations, it's important to acknowledge that the affected need to deal with their losses in many ways including for example mentally, psychologically and socially. Their reactions and grief in response to losses will depend upon several factors. Let us think about the situations of loss you have witnessed during your work – or imagine that you will come across in the line of their work in the Red Cross.*

Throw a ball to a participant asking: which types of reactions have you seen to losses? The one who catches the ball will name a reaction and throw the ball to another participant and so on.

Ensure the different types of losses are mentioned:

- **Physical loss:** such as loss of physical health, loss of motor skills, loss of limbs or other parts of the body (caused by an accident, or disease)
- **Psychological loss:** such as loss of self esteem, loss of confidence and trust, loss of sense of control
- **Cognitive loss:** such as loss of memory, loss of language, loss of visual and spatial abilities
- **Social loss:** such as loss of support networks, loss of freedom to gather, loss of meaningful relationships
- **Human loss:** such as loss of loved ones or people who have a role in one's life
- **Spiritual loss:** such as loss of faith, loss of belief, loss of hope, loss of values
- **Material loss:** such as loss of property
- **Financial loss:** such as loss of employment and livelihoods, loss of savings, loss of income.

*Being able to prepare physically and mentally for certain kinds of loss may help the affected to better deal with the consequences. On the other hand, losing something meaningful or a dearly loved person in a sudden and unexpected way, is likely to make it more difficult for those affected to cope with this loss.*

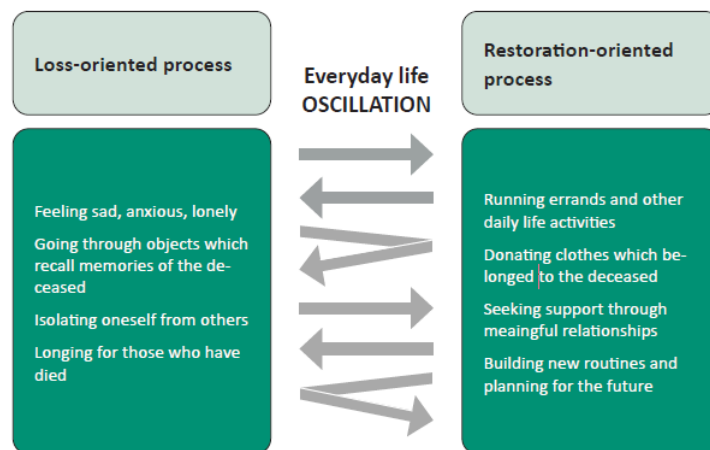
*The loss of loved ones is without a doubt one of the most difficult and painful events in a person's life. From birth, the capacity to create and maintain strong and meaningful links with other human beings is key to individual development and social relationships.*

Ask participants to talk for a minute with the person standing next to them: *If you worked with someone over a longer period of time, did you notice if and how their reactions changed over time?* Take some answers from the pairs.

Speaker notes:

*After major losses there will be a period of grieving. To understand how best to support the grieving the dual process model of understanding what individuals or a community go through can help.*

*On the one hand – or column there are reactions related to the loss and on the other column processes that orient towards restoring the new life and living with the loss. As the arrows indicate these two processes are happening at the same time. For mental health and psychosocial well-being teams should think about how they can ensure conditions that allow for these processes. A factor that can complicate a grieving process could be if traditional burial rituals cannot be observed as in Ebola epidemic and in pandemics and the teams can help find alternative solutions.*



## Responding to a grieving person

### Exercise 7

Time: 15 minutes

Materials: IFRC Reference Centre for Psychosocial Support: *Introduction to Psychological First Aid* and the Listen principles written on a prepared flipchart

*The basic principles of psychological first aid will help when interacting with the affected in a crisis situation. In the pre-reading leaflet: Introduction to Psychological First Aid the guiding principles for listening to someone in distress are these:*

**LISTEN** refers to how the helper

- approaches someone
- introduces oneself
- pays attention and listens actively
- accepts others' feelings
- calms the person in distress
- asks about needs and concerns
- helps the person(s) in

*Let's do a short demonstration role play using these principles in the case from exercise 3.*

*The family that was moved to a hotel that you advised on how to cope in the best way using the five Hobfoll principles. The family has now lived in the hotel for two weeks and are about to move into a temporary home. They have met with you as part of team a few times and one of the family members asks you to go for a walk as there is something it would be nice to discuss.*

Ask participants to pair with the neighbour identified in the previous exercises. One will role play an adult from the family and the other a DM team member.

Instruct the identified DM team members to prepare for meeting the family member who is devastated and in distress. How can they be of help by using the LISTEN principles. They will sit and talk or go for a walk with the family member. Your task is to acknowledge the losses the family member talks about and discuss the restoration-oriented processes. Respond the best way you can.

Next take the family member role-players aside and instruct them on their role: *You are one of the adults from the family. You can choose your own gender and age and tell your helper your name, age and gender when you begin the conversation.*

*You are still devastated by the loss and distressed by living in a small suite in a hotel. You cannot cook for your family, there is no privacy for any of the family members. You are angry at the insurance company who let you stay for so long in the hotel. You have noticed that your partner and the children are affected by the situation and worry about them. When moving into the temporary housing you want them to think ahead and work with you on plans and drawings for how to rebuild the house.*

Instruct the family members and DM team members to conduct the LISTEN conversation for about six to seven minutes allowing a few more minutes should this be needed. Stop the roleplay, thank and compliment the role players and ask the pairs to discuss what went well for a minute before returning to the circle.

Ask a few of those roleplaying family members about what they found helpful in what the DM team member said or did.

Ask a few of those roleplaying DM team members what they found useful in the exercise.

## Managing different types of volunteers

### *Exercise 8*

Aim of the exercise: participants understand how different types of volunteers are motivated to respond and how to manage and motivate the different types of volunteers.

Time: 35 minutes

Reference materials: copy for each participant of Folder for briefing of and for spontaneous volunteers (see Annex 1) and Minimum standards of caring for volunteers during COVID-19

### Speaker notes:

*Response teams will interact and work with volunteers in disasters. The following exercise is about managing different types of volunteers based on their characteristics. Let me explain the set up of the exercise, as it has a couple of steps. I will also explain the case scenario we will be working with for this exercise.*

- 1. I will ask you to form groups – one group will be team leaders, and four groups will represent different types of volunteers. In these groups you will discuss different topics and there is a handout explaining the tasks of the groups.*
- 2. Next each team leader will meet with their group of volunteers so each group of volunteers will be assigned a team leader.*
- 3. After this meeting there will be a discussion on how it went. The format will be a so-called fishbowl where some talk and the rest listens. First the team leaders and next to a representative from each group will discuss how the meetings went.*

*Any questions so far?*

*The case is the following: there has been a huge forest fire in a Baltic Sea country and a village of 1347 people will have to evacuate to the outskirts of a larger town where the volunteers are from. They will be living at the site for some time till the danger is over and they can move back. The town administration has asked Red Cross to help with the move and to set up psychosocial activities. This was reported in the media and got a lot of local attention.*

Appoint or ask for five volunteers who will play the role of the team leaders.

Divide the group into four groups of volunteers:

1. A group of psychologists who come to offer support who know each other well beforehand.
2. A local sports club volunteers from a handball club – trainers and teen-age players and some parents.
3. A Knitting and reading circle of women in their sixties and who are very eager to serve. They know each other and have been in the circle for years.
4. Spontaneous volunteers who show up at the Red Cross branch. You will sit individually and think about similar questions as the other groups, so bring paper and pen for the exercise.

*Handout for volunteer team leaders:*

You have 10 minutes with the other team leaders to discuss your task and how to carry it out.

You will each be managing one of the groups of volunteers.

Your job is to instruct them on the task they are asked to do by the branch and authorities.

The volunteers are to help with setting up the shelter with camp beds, kitchen, distribute nonfood items and cook and do the washing up.

The psychosocial activities that many volunteers want to help with are only to begin if the stay is extended beyond the two weeks – which runs counter to what the administration has declared. The DM teams are only allowed to offer psychological first aid when doing their assigned tasks.

*Handout for group work for volunteers' groups or individuals*

As a group you have 10 minutes to discuss:

- What are your characteristics as a group?
- What do you want to do in the response to support?
- How do you perceive the other groups?
- Which support do you need?
- What could be difficult in managing you?

*Handout for spontaneous volunteers – one handout per volunteer*

- What are your characteristics as a volunteer?
- Why did you turn to the Red Cross?
- What do you want to do in the response?
- How do you perceive the other groups?
- Which support do you need?
- What could be difficult in managing you?

Instruct team leaders to join an assigned group of volunteers letting the spontaneous volunteers meet and talk for the first time.

Allow ten minutes for the team leaders and groups to interact.

Stop the group work/roleplay and ask the volunteer team leaders to come to the centre of the room and sit on four chairs in the middle of the room. The groups are sitting in a circle around the four chairs and are instructed to listen to the volunteer team leader's conversation.

Ask the volunteer team leaders how their meeting with the volunteers went. What challenges did they encounter? What went well? Did the expectations to the tasks match?

Allow the conversation to continue for some minutes before asking the volunteer team leaders to step away from the fishbowl. Ask a representative from each of the groups of volunteers to sit in the middle.

Instruct them to discuss how was it to meet the team leader? Next what challenges and opportunities did the team leader have in managing the group. Did the plans for what to do match? What did the groups think of the other groups of volunteers? Any tips for the volunteer team leaders in managing volunteers?

Distribute the BALTPREP folder for spontaneous volunteers and briefly go over it. The folder can be used by volunteer team leaders to give a briefing to spontaneous volunteers and can also be handed to volunteers to ensure they have the basic information needed to begin volunteering with the Red Cross.

### Ending the session

Time: 10 minutes

Ask participants to find the person they talked to in the first exercises and to spend a few minutes talking about what they will do the rest of the day to care for themselves.

Invite participants back to the circle and end the session by encouraging each of them to name in no more than five words a lightbulb moment they have had during the session or something they learnt about mental health and psychosocial support.

End the session by thanking everyone for their active participation.

### Annex 1

## Folder for spontaneous Red Cross volunteer

The folder is handed to spontaneous volunteers and the briefing by the Volunteer Team Leader follows the same order. A pdf version of the folder is to be found at [pscentre.org](http://pscentre.org) with the BALTPREP training curricula.

### Welcome to the Red Cross

We are glad you have decided to join the Red Cross as a volunteer to help others in a time of need. This folder gives basic information on volunteering with the Red Cross as well as a brief introduction to volunteers' tasks and responsibilities.

We will do our best to help you fulfil the role of a volunteer and make you feel part of the community of volunteers. If for any reason, you decide that volunteering with the Red Cross is not for you, please let the team leader know.

### Spontaneous volunteers

A spontaneous volunteer is someone who is not affiliated with a response or voluntary organization but who offers support to the response, and recovery from an incident without extensive preplanning. Spontaneous volunteers are often part of the affected communities. They know the situation on the ground and this is a great asset in the response. At the same time it is important to know that the events may affect volunteers more than anticipated, due to witnessing their own community in distress.

### Red Cross and the 7 fundamental principles

Red Cross is the world's largest volunteer organization. 191 countries have Red Cross or Red Crescent Societies. They act in a supporting role to their governments. National Societies assist those in need whether in everyday life or crisis situations. Part of the Red Cross Red Crescent mandate is to be auxiliary to the state, yet at the same time independent, and volunteers may interact and work alongside public authorities. The emblems of the Red Cross and Red Crescent Societies are protected symbols. When wearing it, volunteers are obliged to uphold the seven principles of: humanity, impartiality, neutrality, independence, voluntary service, unity, and universality.

Red Cross volunteers must be clearly identifiable by wearing a Red Cross vest or cap, have an ID badge and must be over 18 years of age. Volunteers usually work in teams under the guidance of a volunteer team leader.

### Respect instructions

To help in the current crisis event, volunteers are obliged to respect and follow the instructions given by the authorities such as the police, civil protection services and Red Cross. These parties are trained to assess the situation and decide on the best course of action. Not following instructions may compromise safety and complicate the aid operation. Volunteers are expected to follow and respect a certain chain of command. Make sure it is clear who is the team leader before engaging in activities.

### Safety

Ensuring that volunteers remain safe is a main concern for the Red Cross as keeping and feeling safe is vital to be able to help others. Don't take risks that may compromise safety as this can have serious consequences. In case a situation seems or feels unsafe, don't hesitate to bring this to the attention of other team members and the team leader.

### Briefing

Red Cross volunteers will receive a briefing before taking on a set of tasks. The volunteer team leader will explain what should be done, where to go, when to begin and end the work, whom and how to assist, when and where to meet to report back and hand in materials. It is recommended to take notes during the briefing and note down key phone numbers on the mobile and at the back of this folder.

### Assigning tasks and the right to decline

The volunteer team leader will assign tasks to the group of volunteers. When signing up, it is a good idea to let the volunteer team leader know about useful skills and capacities that you may have.

Volunteers should never be asked to intervene if there is any danger or risk of violence. Volunteers have the right to decline a task if:

- They are close to those needing support or they themselves are in a similar situation
- They don't feel well or need rest
- The work situation and conditions are too demanding
- The tasks assigned exceeds their capacity and competencies

### Child protection

Child protection is very important in crisis situations especially since children (any person under 18 years), face many risks when crises occur. Taking good care of children and ensuring not to do harm is therefore vital. Red Cross volunteers are obliged not to abuse, exploit or injure a child. Being alone with children should be



avoided, although if a child needs to speak with a volunteer in confidence steps like being out of hearing but in sight, or having two volunteers present, can be used. This has the dual function of ensuring the safety of both parties. If there are any concerns for the well-being of a child, volunteers should report these to the team leader and the authorities.

#### Confidentiality

Confidentiality must be upheld during and after volunteering work and this includes everything the volunteer has seen, heard and read. In a crisis situation a volunteer may be told private stories and these must be kept confidential and not be shared with those outside the Red Cross or the media. Consent from the involved parties must always be obtained if taking photos, video etc. Special rules apply for those under 18, where consent from caregivers is needed for photos, videos etc. If a volunteer is told about unlawful behaviours and harm or risks to those under 18 there is a need to report to the authorities. When in doubt, consult the team leader.

#### Team support

Volunteers will often work in pairs even when sent out as part of a team. Keep an eye out for the partner and for other team members and their well-being as it is important for any operation to be successful. Remember to take breaks, drink and eat during the operation. Taking even short breaks will ensure that the team has the capacity to go on for longer.

#### Media

In times of crisis and emergency situations, the media will be interested in what is going on. It is important to uphold the dignity of the portrayed, especially the dignity of children. Volunteers can talk about what they are doing with the approval from the team leader, but cannot discuss cases they support, as such cases could be identified. Discuss with the team leader if and how the use of social media is allowed, and be mindful that under no circumstances are volunteers allowed to take photos or film for private uses. Consent must be given to take photos, films, interviews etc. and for children consent has to be granted by caregivers.

#### Do no harm

When volunteering, the principle of doing no harm must be upheld. Volunteers will constantly be mindful of securing the dignity of those they help. They will also think about and discuss if their interventions benefit those in need or if there could be personal motives that may cloud their judgement.

#### Duty to inform and report

After an intervention is over, Red Cross volunteers must report that they have finished the shift, how the assignment went, what was done, if they encountered problems and if there are any situation of concern where further support is needed.

#### Useful advice for psychosocial well-being in crisis situations

Offer the following advice to anyone affected:

- After distressing events, social support is very important. Therefore, show others that you care!
- Spend time with others you feel comfortable with
- Show interest and concern for others – especially for children and youth
- Help each other by talking about good and bad experiences
- Respect if you or anyone else do not feel like talking about what happened
- Be physically active and maintain eating and sleeping routines
- Follow the instructions by the authorities and avoid getting caught up in the media coverage of the events
- Family and friends, who are not in the area, may be very concerned and will often send constant messages of concern. Arrange to let them know you are well at agreed times so their worry doesn't distress unnecessarily

### Support to children

- Offer the following advice to those involved in children's well-being:
- Children need to be physically and emotionally near their family and friends in times of distress
- Be as calm as possible in word and action in order to create a safe environment for children
- Spend extra time with children doing things they like
- When asking about the situation, children need simple and concrete answers
- Be honest and truthful yet avoid giving children overwhelming or scary information
- Be careful not to let your own worry distress children so they make the worry their own
- Don't let young children watch distressing things on tv or social media. Take time to explain the situation to them in a way that is adapted to their age

Practical information Please note that this page is to be written by each NS and should cover: insurance, cost recovery and possible further support

Contact info of the branch and volunteer team leader: \_\_\_\_\_

Volunteers are insured in case of accidents when they register with the National Society.

Should a volunteer be affected by the voluntary work and the situation, there are the following options for receiving support: \_\_\_\_\_