

**EVALUATING THE  
WORK OF THE IFRC  
REFERENCE CENTRE  
FOR PSYCHOSOCIAL  
SUPPORT 2015-2022:  
A SUMMARY**





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## Psychosocial Centre

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International Federation of Red Cross and Red Crescent Societies

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Reference Centre for Psychosocial Support, 2023

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The IFRC Psychosocial Centre  
is hosted by Danish Red Cross



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*The PS Centre is perceived as a centre of expertise within the field of mental health and psychosocial support - both inside and outside the Red Cross Red Crescent Movement.*

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Evaluation lead consultant

## FOREWORD

The IFRC Reference Centre for Psychosocial Support (the PS Centre) has been instrumental in influencing the development of mental health and psychosocial support in the humanitarian sector since it was established thirty years ago. In doing so, the PS Centre has continuously promoted the relevance of mental health and psychosocial support in its work with Red Cross Red Crescent volunteers and staff as well as other members of the humanitarian community. This summary documenting the key findings of an external evaluation of the Centre's work over the past seven years is testament to its achievements.

We are proud of the reputation of the PS Centre as a global player in the field of mental health and psychosocial support. The outcome of the evaluation is not only proof of its current merits but is also an incentive to ensure that the PS Centre receives the support it needs to continue its important work both within and beyond the Red Cross Red Crescent Movement.

The report detailing the full evaluation is available on the PS Centre website: [Evaluation of the IFRC Psychosocial Centre \(2022\), Danish Red Cross and IFRC](#).



Petra Khoury,  
Director Health and Care Department IFRC

Peter Klansø,  
International Director Danish Red Cross

## **THE IFRC REFERENCE CENTRE FOR PSYCHOSOCIAL SUPPORT (PS CENTRE)**

The PS Centre was established in 1993 as a delegated function of the International Federation of Red Cross and Red Crescent Societies (IFRC), the world's largest volunteer-based humanitarian network, reaching 160 million people each year through its 192 National Societies with 14 million volunteers, providing long term services, development programmes and disaster response.

It is a centre of excellence, working in partnership with Red Cross and Red Crescent National Societies, academic institutions, donors, international humanitarian organizations, and other stakeholders to promote and enable the mental health and psychosocial well-being of beneficiaries, staff, and volunteers, as well as advocating the importance of mental health and psychosocial support as part of any humanitarian emergency response. It provides resources on a wide range of aspects of mental health and psychosocial support and offers technical support and capacity building in meeting the needs of those affected by adversity. Since 2015 the PS Centre has held the co-chair position of the IASC MHPSS Reference Group.

Hosted by Danish Red Cross in Copenhagen, Denmark, the PS Centre coordinates MHPSS activities with the IFRC Global Health and Care Team based at the IFRC Secretariat in Geneva, and with IFRC Regional Offices.

## EVALUATING THE WORK OF THE PS CENTRE

In 2022, Danish Red Cross and IFRC jointly commissioned an external evaluation of the work of the PS Centre for the years 2015 to 2022. The evaluation reviewed the functions and activities of the PS Centre, seeking to highlight achievements as well as challenges in fulfilling its mandate. The evaluation was based on a desk review, 50 key informant interviews, and a survey of 38 National Society MHPSS focal persons. Rebecca Horn, mental health and psychosocial health specialist, was appointed to conduct the evaluation.

The years 2015-2022 were of great significance to the PS Centre in a number of ways and led to the decision to commission this review. During this time, the PS Centre was instrumental in several key developments impacting the field of mental health and psychosocial well-being. The first was the appointment of the PS Centre as co-chair of the Inter-Agency Standing Committee Reference Group on Mental Health and Psychosocial Support in Emergency Settings. This group is central to interagency coordination and activities for MHPSS at global, regional, and national levels. The second was the development of the first joint Red Cross Red Crescent Movement policy on MHPSS – a process undertaken over several years culminating in the adoption of the Policy and Resolution on MHPSS in 2019. This was a significant contribution to the Movement in relation to MHPSS, bringing mental health and psychosocial well-being to the fore. Shortly afterwards, the world was hit by the COVID-19 pandemic. The PS Centre found itself under huge demand for resources. The pandemic required new ways of working and materials were developed quickly, providing a range of high-quality resources produced to meet the challenging circumstances of the time, particularly around help in working remotely.

This summary presents key findings from the evaluation in relation to the three strategic approaches that the PS Centre has adopted to guide its global work, including the challenges faced in seeking to fulfill its mandate.

## THE PS CENTRE STRATEGIC APPROACHES

TECHNICAL SUPPORT AND CAPACITY BUILDING

KNOWLEDGE GENERATION AND SHARING

HUMANITARIAN DIPLOMACY AND COMMUNICATIONS

## KEY FINDINGS FROM THE EVALUATION

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*The PS Centre has been very useful in terms of being a place for peer support, information exchange and connection to the wider Movement and the MHPSS community. This is the case for my National Society and region.*

”

Respondent to the evaluation

**TECHNICAL  
SUPPORT AND  
CAPACITY  
BUILDING**

**MENTAL HEALTH AND  
PSYCHOSOCIAL SUPPORT IN  
EMERGENCIES**

**GLOBAL, REGIONAL AND LOCAL  
KNOWLEDGE SHARING**

**TRAINING, SUPERVISION AND  
MENTORING**

**TECHNICAL ADVICE AND QUALITY  
ASSURANCE**

“

*One thing I have always admired is the look and feel of their products ... so also when you collaborate with them, they have that resource to bring into the equation. I think they've done a really good job with communication, with media, with presentation of resources, design. That's always important when you're trying to reach a large audience.*

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External partner

The evaluation confirms the contribution of the PS Centre in its intention to provide technical support and capacity building, both to the Red Cross Red Crescent Movement and the wider global humanitarian community. It is therefore pleasing to see comments about its contribution to the work of the Movement and the National Societies, as well as to other international and national organizations and partners.

There are 191 National Red Cross and Red Crescent Societies across the globe – one for almost every country in the world. Each one is made up of a network of community-based volunteers and staff providing a wide variety of services.

The variety of methods the PS Centre uses in providing technical support and capacity building is appreciated across the board. Respondents to the evaluation refer to the Centre's track record of developing "high-quality and relevant materials, tools, and guidance on community-based psychosocial support, which are produced in a timely fashion in response to events".

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*At the onset of the COVID-19 pandemic, two weeks after we experienced it, the PS Centre immediately published the PFA remote support guidance. They were the first resources I found on MHPSS in COVID-19. Then it followed with different modules on PFA in COVID-19, and we adapted these and used them. The speed of producing the PFA COVID-19 materials was really important to us.*

**National Society MHPSS focal point**

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They comment favourably on the PS Centre trainings which are available on specific aspects of MHPSS which contribute to the capacity building of both staff and volunteers. They like the range of formats on offer, including online and in-person training workshops, seminars, and webinars.

In their comments, National Societies highlight that capacity building around MHPSS training had become an increasing priority and as such, “the training workshops, technical support, and capacity-building opportunities offered by the PS Centre are perceived as relevant and of high quality”. The National Societies also value the part the PS Centre plays “in assisting National Societies with identifying relevant resources – and how to use them in practice” which requires careful work in embracing the specific needs of the respective National Societies.

The PS Centre has a team of MHPSS technical advisors who are available to provide technical assistance in response to all kinds of issues arising from humanitarian emergencies. They are described by respondents in the evaluation as being, “highly knowledgeable, skilled, and quick in responding to requests – including offering direct support on their own initiative during emergencies as they unfold.”

The response by the PS Centre to the devastating challenges associated with the COVID-19 pandemic in 2020 provides a vivid illustration of the way it was able to make resources available in a timely manner that met the needs of those at the frontline.



lundi, le 22 juin 2020  
niveau: CI  
discipline: français  
matière: lecture  
thème: étude des graphies  
sous-thème: la graphie  
séance N°  
durée: 30  
farine  
fa

**LES ESSENTIELS POUR SE PROTÉGER DU CORONA VIRUS COVID-19**

Lavez-vous régulièrement les mains à l'eau et au savon ou les désinfecter avec un gel hydroalcoolique.

Gardez au moins 1 mètre de distance entre vous et les autres personnes.

Évitez les déplacements non essentiels.

Évitez de vous toucher les yeux, le nez et la bouche.

Restez chez vous si vous avez de la fièvre, de la toux ou des difficultés à respirer, évitez les contacts avec les autres et appelez le 15.

En cas de toux, fièvre et difficultés à respirer appelez le 15 pour des conseils et orientations.

CRS ALGERIE

FINANCE PAR

During the course of the pandemic and in its aftermath, the PS Centre produced a wide range of materials. They are described as “high-quality, relevant and accessible” by respondents to the evaluation. The evaluation also highlights the usefulness of online training workshops during this period. The first COVID-19 publication, [Remote Psychological First Aid during COVID-19](#), was developed a matter of weeks after the outbreak was first declared and was made available in nine different languages. By mid 2020, the PS Centre had produced seven guides, five training toolkits, and a set of activity cards for children out-of-school. Subsequently, through dialogue with National Societies as well as MHPSS stakeholders outside the Movement, a toolkit for children, parents/caregivers, and teachers affected by the COVID-19 pandemic called [A Hopeful, Healthy & Happy Living & Learning Toolkit](#) was produced in collaboration with REPSSI and APSSI and more recently, resources have been developed on psychological first aid for pandemic fatigue.

The evaluation indicates that the reach of the PS Centre increased too at this time. The Centre’s staff began to link with National Societies which had not offered MHPSS activities before the pandemic. They were able to do this in collaboration with IFRC MHPSS delegates who provided a link with National Societies with limited MHPSS capacity. The PS Centre was then able to help them develop and implement MHPSS activities for the first time.



COVID-19 related resources produced by the PS Centre:  
<https://pscentre.org/resource-category/covid19/>

**KNOWLEDGE  
GENERATION  
AND SHARING**

**TRANSLATING RESEARCH INTO  
GOOD PRACTICE**

**DRIVING INNOVATION THROUGH THE  
MOVEMENT**

**MONITORING, EVALUATION,  
ACCOUNTABILITY, AND LEARNING**

**EXPANSION AND DEVELOPMENT OF  
THE MHPSS TOOLBOX**

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*The PS Centre has built quite a capacity to integrate and transform research into practice, into recommendations and guidelines. They're now producing amazing training materials and webinars; high quality and they reach a large number of people.*

External partner

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The evaluation documents the active involvement of the PS Centre in knowledge generation and sharing across the global humanitarian community in relation to MHPSS. It refers to, for example, the significant role of the Centre in enabling the implementation of the Movement-wide Policy on MHPSS as well as in guiding the Movement in upscaling and strengthening its MHPSS responses. It is involved through the MHPSS and Working Group structures in creating Movement-wide forums for knowledge exchange and capacity building.

The evaluation also refers to a wide range of collaborative research projects with academic institutions and other stakeholders. This aspect of the Centre's work is crucial for a number of reasons: "It ensures that the PS Centre is up to date with current developments in the MHPSS field and contributes to the development of evidence around 'what works' in terms of MHPSS within the Movement, as well as informing the MHPSS field more broadly."

The evaluation highlights the added value the PS Centre brings in increasingly involving National Societies in research projects, "which builds capacity in terms of both research skills and understanding how to make use of research findings". It refers to the Red Cross Red Crescent Research Network on MHPSS, for example, which was established in 2016 "and has developed a 'culture of research' which enables National Societies to feel more confident in developing and implementing research, monitoring, and evaluation activities." There has been a focus recently particularly on the co-

creation of research with National Society representatives in the FOCUS EU Horizon 2020 funded project. This approach ensures that the project results in outputs that practitioners can use to improve their MHPSS services.

Over the period of this evaluation, the PS Centre has produced a large range of tools and materials. The development of these resources is prompted by various factors. They may arise from a specific need identified by MHPSS regional networks or IFRC at global level or from discussions within the broader MHPSS field. During the COVID-19 pandemic the PS Centre also produced a wide range of materials (as outlined above). This drew initially on the resources developed by the Hong Kong branch of the Red Cross Society of China. The Centre also identifies materials produced by other organizations and adapts them to fit the needs of National Societies and the Movement in general. An analysis of the use of PS Centre resources indicates that they are well used by National Societies and others.

The fact that the PS Centre has been involved in so many collaborative MHPSS research networks and projects as well as being the Reference Centre on MHPSS for 192 National Societies, provides the Centre with insight and learning opportunities based on the unique experiences of the National Societies and their circumstances.

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*The PS Centre has helped strengthen the collaboration and focus on MHPSS within the Movement and has created a shared vision and a shared language around MHPSS.*

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Evaluation lead consultant

## RESEARCH PROJECTS 2015-2022

The PS Centre has participated in three research projects funded by the European Union to investigate how low-intensity, scalable, psychological interventions can be applied within the Movement context. These have involved partnerships with universities and larger international NGOs and smaller local NGOs:

- **STRENGTHS**

The STRENGTHS project (2017-2021) trained Syrian refugees to provide Problem Management Plus (PM+) to fellow Syrian refugees.

- **FOCUS**

The FOCUS project (2019-2022) aimed to impact on both research and practice by understanding and improving the dynamics of integration for migrants and host communities with a special emphasis on how psychological and social factors influence integration.

- **REFUGE-ED**

REFUGE-ED (2021-2023) is about co-creating and scaling up ways of supporting education, wellbeing and a sense of belonging for refugee children, unaccompanied minors and their host communities in Europe.

# PS CENTRE MATERIALS 2015-2022

Year	Themes and topics
2022*	<p>Resources related to the international armed conflict in Ukraine</p> <p>PFA for pandemic fatigue</p> <p>The Well-being Guide</p>
2021	<p>Online/ offline PFA training materials, including training of trainers</p> <p>Guidance on online facilitation in MHPSS</p> <p>A Hopeful, Healthy &amp; Happy Living &amp; Learning Toolkit</p> <p>Community-based psychosocial support training manual for staff and volunteers</p> <p>Integrated Model for Supervision for Mental Health and Psychosocial Support: Handbook</p> <p>Mental health and psychosocial support in primary health care settings</p> <p>Suicide prevention</p>
2020	<p>Online PFA in COVID-19 training, with additional modules</p> <p>MHPSS in COVID-19 materials, including loss and grief, suicide prevention, supportive supervision, caring for volunteers, M&amp;E.</p> <p>Back to school during COVID-19</p> <p>Baltic Sea Emergencies MHPSS materials</p>

\* Not including videos, podcasts and other resources

## PS CENTRE MATERIALS 2015-2022

2019

A short introduction to Psychological First Aid  
Guidelines for caring for staff and volunteers in crises  
MHPSS in Emergencies – Delegate Handbook  
Outreach walk: Improving protection and psychosocial support through outreach

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2018

Training in PFA – four modules  
Child Friendly Spaces in Humanitarian Settings toolkit

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2017

Monitoring and Evaluation Framework for Psychosocial Support Interventions  
Key actions for psychosocial support in flooding

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2016

Moving together: promoting psychosocial wellbeing through sport and physical activity

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2015

Caring for Volunteers: Training manual  
Different. Just like you.  
Sexual and gender-based violence – training guide  
The resilience programme for young men – a psychosocial handbook

**HUMANITARIAN  
DIPLOMACY AND  
COMMUNICATIONS**

**INFLUENCE RELEVANT POLICIES AND  
PRACTICES**

**ENGAGAGE ACTIVELY WITH  
STAKEHOLDERS AND PARTNERS**

**UTILISE TECHNOLOGY TO DO MORE,  
SMARTER**

“

*The most important contribution the PS Centre has made to the MHPSS field is the political and policy aspects. The impact of the Resolution has been huge because it means that IFRC and ICRC are on board, on the same page, advocating for MHPSS in a coordinated way, in any meeting anywhere in the world. This brings a big weight. They are present in all countries so have respect from and access to the governments, whereas we [as an INGO] are always seen as external, so they have huge influence.*

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External partner

The PS Centre has strengthened its influence and engagement in the field of MHPSS over recent years. It has earned the respect of both MHPSS practitioners and stakeholders, including donors and policymakers, particularly in terms of its role in the IASC MHPSS Reference Group and in relation to the development of a Red Cross Red Crescent Movement Policy on MHPSS and a resolution signed by 196 states and the subsequent policy work. The evaluation acknowledges the Centre's contribution to both these important activities and commends its work in using a wider range of communications channels than before and structuring its response in a more focused way.

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*The Centre [is] in an ideal position to collaborate on initiatives relevant to the work of the Movement, including the development and implementation of new MHPSS interventions and approaches, as well as humanitarian diplomacy efforts designed to strengthen the focus on MHPSS both within and beyond the Movement.*

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Evaluation lead consultant

The IASC MHPSS Reference Group was established in December 2007 to advocate for the implementation of the IASC Guidelines in MHPSS in Emergency Settings, to interface with the humanitarian coordination and cluster system at the Geneva and field levels, to develop relevant tools, policies and advocacy briefs, and to support interagency coordination for MHPSS in emergencies at the global, regional and national levels. The Reference Group consists of 65 agencies which are full members, with 20 observer agencies and 11 observer donors. It fosters a unique collaboration between INGOs, the IFRC and ICRC, UN and International agencies, and academics, promoting best practices.



Photo: IFRC Psychosocial Centre

## THE IASC MHPSS REFERENCE GROUP

The PS Centre took up the position of co-chair of the IASC MHPSS Reference Group in 2015. The evaluation highlights how this position increased the visibility of the PS Centre and the Movement, bringing IFRC and the Centre closer to key decision-makers and drivers of change within the MHPSS field. It has enabled the Centre to strengthen humanitarian diplomacy activities and to contribute to an increased emphasis on MHPSS within and beyond the Movement.

The evaluation highlights examples of the varied ways the PS Centre has engaged with the Reference Group's agenda. For example, in 2016 PS Centre staff were involved with several Reference Group activities, including one related to 'Linking research, practice and field level perspective'; co-leading an advocacy initiative related to the World Humanitarian Summit meeting and side event; and a review of psychological first aid (PFA). In 2017, the PS Centre participated in three working groups/task forces, as well as testing and disseminating scalable psychological interventions, and completing the translation of an IASC MHPSS Reference Group guidance note into Arabic. More recently, the Centre has contributed to the development of inter-agency guidance, including suicide prevention guidance, the MHPSS Coordination Handbook and the Common Monitoring and Evaluation Framework on M&E in Emergency Settings. In 2021, the PS Centre produced a handbook on supervision of volunteers and staff called the **Integrated Model for Supervision** which grew originally from discussions at an annual meeting of the Reference Group.

During support missions to emergencies on behalf of the IASC MHPSS Reference Group, the co-chair has also been able to offer technical support to the local National Society. These missions often relate to coordination, so the National Society can be encouraged to become involved in coordination mechanisms, if they were not already, which gives them access to peer support and capacity-strengthening opportunities, as well as input into decision-making.



Power of Humanity  
Le pouvoir de l'humanité  
12 décembre 2019, Genève

01:17

#RCRC19



Photo: ICRC/IFRC/KNOBEL, Alba

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*The PS Centre proved itself when we got MHPSS into a Resolution and Policy. It's managed to integrate MHPSS into IFRC and the work. Now nobody questions whether the non-physical health is important, everybody recognises that it's something we need to deal with. MHPSS is high on the to-do list of NSs in Europe, and without the centre and the consistent push this wouldn't have happened.*

**Senior Manager, IFRC Europe & Central Asia  
Regional Office**

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Respondents to the evaluation recognize the instrumental role the PS Centre played in developing the Resolution and the Movement's first joint policy on MHPSS. This was a process over several years involving many different entities, including the IFRC, the ICRC, the Swedish Red Cross and Danish Red Cross, and a reference group composed of representatives of around 40 National Societies, including MHPSS focal points.

Formally adopted in 2019, the MHPSS Policy and Resolution set the framework for meeting mental health and psychosocial needs among individuals, families, and communities, including staff and volunteers working in all contexts. The Policy was operationalised into a Roadmap for implementation which identifies six Priority Action Areas and outlines the outputs and outcomes expected by 2024.

Actors within the Movement established five working groups (WGs), two of which are co-chaired by the Psychosocial Centre. The MHPSS Resolution and Policy are important tools for humanitarian diplomacy at both national and global levels. The evaluation acknowledges the central role of the PS Centre in supporting National Societies in their advocacy efforts and implementation of the Movement-wide Policy.

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*The newsletters are very helpful because they're relevant for us as practitioners. Podcasts are good because they highlight good examples, like a window to see what National Societies are doing. Otherwise, we wouldn't know, I'm not familiar with the international sphere of the Movement, I'm not aware of who's doing what. I found the Kenyan Red Cross are involved in digital work and we connected with them through the PS Centre.*

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National Society MHPSS focal point

Disseminating resources and communicating information in ways that are accessible and useful to the National Societies and stakeholders outside the Movement are highly valued by respondents to the evaluation. An analysis of the use of PS Centre resources undertaken during the evaluation indicates that they are well-used by National Societies and other stakeholders beyond the Movement. Respondents note that particularly in response to the COVID-19 outbreak, “the PS Centre began to engage with social media in a more focused and structured way and stepped up its use of the website, newsletters, podcasts, and videos.” An initiative known as ‘Facebook Friday’ is appreciated as “a regular connection with the Movement’s staff and volunteers, as well as people from the wider humanitarian community. This was a way of providing some simple self-care tools at a difficult time”.

## CHALLENGES TO THE WORK OF THE PS CENTRE

Whilst the evaluation documents progress in many areas, it highlights a number of challenges facing the PS Centre in fulfilling its mandate. Three particular challenges concern responding to the diverse needs of National Societies; strengthening regional connections across the Movement; and addressing the changing funding landscape.

The PS Centre's objective is to provide capacity building activities to all 191 National Societies of the Red Cross Red Crescent. It seeks particularly to support those National Societies with no or limited capacity.

MHPSS focal persons are currently present in 132 National Societies, representing 81% of members across the Movement.

*MHPSS Global Survey (2021) MOMENT*

However, as the evaluation indicates, in practice the Centre responds to requests and opportunities when they arise in relation to any National Society. Having MHPSS focal persons within National Societies are key to the effective functioning of the PS Centre. National Societies overall benefit from increased in-country mentoring and support. Those National Societies with minimal MHPSS capacities require enhanced support addressing their specific contexts which the PS Centre is currently unable to provide because of funding challenges.

The evidence from the evaluation also shows that there are some National Societies which do not have any contact with the PS Centre. This is not because they do not require support, but because they may not be aware of the services available and uncertainty around whether and how they can connect with the Centre. A more general comment about materials and communications not being translated due

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*We consider the PS Centre as the technical Hub, who develop guidelines, who have the repository of things, who have some of the trainers or can also develop some tools required and we consider this [Asia-Pacific MHPSS] Collaborative as the operational arm of that Centre that can really be focused on more tailor-made action based on global guidelines that are more focused on the Asia Pacific.*

IFRC regional manager

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to limitations in funding is noted too in terms of resources, social media messages and the PS Centre website. This may contribute to barriers in accessing information.

There are specific areas of practice identified by National Societies in the course of the evaluation where additional support would be welcomed. This includes community mental health care and MHPSS monitoring and evaluation. Respondents also refer to the PS Centre's role in further encouraging the sharing of experience and knowledge of National Societies themselves across the Movement, much as it has done already, for example, regarding the trauma-informed approach from the British Red Cross or the MHPSS in surge emergencies training from the MENA region.

A second challenge is around the PS Centre's work being integrated with the IFRC Regional Offices in a more prioritised and systematic manner. The evaluation suggests that where there are IFRC MHPSS Delegates at regional level, communication and collaboration between regions and the PS Centre are reportedly more effective. However, there have been difficulties in ensuring consistency in Regional MHPSS Delegates. Previously, funding related to the COVID-19 pandemic enabled an MHPSS delegate to be in place in each of the five regions, but this is no longer the case.

*MHPSS Technical Advisor Eliza Yee Lai Cheung leafing through The Well-being Guide, a compilation of self-care exercises for staff and volunteers in the Red Cross Red Crescent Movement produced by the PS Centre. Eliza is based in Hong Kong and leads the Asia Pacific MHPSS Training and Learning Collaborative,*

*Photo: IFRC Psychosocial Centre*

Despite these challenges, requests for PS Centre support and input to the IFRC Regional Offices in planning MHPSS activities for regions to ensure a strategic and coordinated approach are increasing. The evaluation shows that decentralisation of MHPSS training within the Movement is desired, with stronger coordination between the PS Centre, the IFRC regional offices, and the National Societies to enable regions and National Societies to plan capacity-strengthening efforts efficiently. For example, the Asia-Pacific MHPSS network was established recently by the Asia-Pacific MHPSS Collaborative as an extended function or operational arm of the PS Centre. Around 15 National Societies have so far joined the network and they meet every two months.

The evaluation refers to the challenge associated with significant changes in funding arrangements over the period of the review which makes forward planning difficult. When the PS Centre was first established, funding was unrestricted, but over time this was no longer available making it necessary to diversify its funding sources with an increase in project-based funding. This makes it problematic to develop a coherent strategy in terms of its work in general and support to National Societies in particular. For example, planning a cycle of global and regional training in advance of the current year requires certainty in accessing funding streams.



## THE WAY AHEAD

The PS Centre has made an important contribution to the work of the RCRC Movement and to the MHPSS field over the last seven years. During this period, the Centre has been able to steer a course in challenging times and has made significant progress in relation to technical support and capacity building, knowledge generation and sharing, and humanitarian diplomacy and communications, as evidenced in the evaluation. It is highly respected in the global humanitarian community with a reputation for strong MHPSS capacity and efficiency.

The evaluation highlights the many achievements made by the Centre and indicates areas for improvement and development. One of the Centre's most significant contributions has been the production of high-quality materials, tools and guidance on community-based psychosocial support. However, the PS Centre notes in particular the need shown in the evaluation to strengthen community-based mental health activities. Community mental health care is now one of the strategic priorities of the PS Centre's work for 2023 and 2024.

The PS Centre recognizes a more strategic approach is needed around planning training opportunities to enable National Societies and others to participate and is working to improve forward planning in coordination with regions to provide a calendar of global and regional trainings. The Centre is also planning to strengthen internal monitoring and evaluation systems in 2023 and 2024 to capture the impact of capacity building on MHPSS programmes and practice.

The evaluation also indicates that regional MHPSS capacities within the Red Cross Red Crescent Movement are crucial to the successful execution of the PS Centre's work around the world: Where they exist, regional MHPSS delegates, MHPSS networks and MHPSS focal points within National Societies play an important role in taking what the PS Centre produces and operationalizing it for the specific context in which they work. As such, stronger integration is welcomed by the PS Centre in the Red Cross Red Crescent especially on a regional level to ensure a more strategic and coordinated approach.

Funding remains a challenge. The PS Centre no longer receives the largely unrestricted funds for core functions that it once did. Other funding streams are only accessible in tandem with IFRC and/or the specific National Society in a given country. Project funding has largely enabled the Centre to continue its work. These circumstances place constraints on the Centre's capacity to make longer-term plans.

The PS Centre has delivered – and continues to deliver – crucial MHPSS work which benefits vulnerable groups, staff, and volunteers around the world. However, the PS Centre – while operating within the scope of the IFRC's policies and principles – has a vision of doing 'more' and doing it better; to realise its vision of reaching all National Societies with the support they need; transcending its mandate to not just enable National Societies in providing evidence-based psychosocial care to vulnerable groups, but also to advocate the crucial importance of MHPSS and inform policymakers to place MHPSS at the top of any emergency response by mainstreaming MHPSS activities into the core of long-term development programmes. The work continues.





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