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Psychosocial Centre



IFRC REFERENCE CENTRE FOR PSYCHOSOCIAL SUPPORT

Strategic Operational
Framework 2024

The IFRC PS Centre is a Reference Centre of the International Federation of Red Cross and Red Crescent Societies (IFRC), which constitutes the world's largest volunteer-based humanitarian network, reaching 150 million people each year through 191 Member National Societies and the work of over 16 million volunteers. Together, we act before, during and after natural disasters, conflict- and health emergencies to meet the needs and improve the lives of affected people. Our humanitarian interventions are based on impartiality, and we assist independently of the nationality, race, gender, or religious beliefs of the people we support.

The unique and direct access at local level is a key-strength for the Movement and a vital asset in the work of the IFRC PS Centre. The IFRC National Societies are permanently present in vulnerable communities across the globe through their extensive network of volunteers, including in the some of the most challenging contexts in the world.

The work of the IFRC PS Centre is guided by the IFRC Strategy 2030 – the plan of action to tackle the major humanitarian and development challenges of this decade. It reflects our collective forward-looking vision for the Red Cross Red Crescent network globally and provides high-level guidance for National Societies in their own strategic plans.

The IFRC PS Centre was established in 1993 and is hosted by the Danish Red Cross in Copenhagen, Denmark. The Centre is mandated to support, promote, and advocate for the awareness and implementation of mental health and psychosocial support (MHPSS) services. The IFRC PS Centre coordinates closely with the IFRC Global Health and Care Team based in the IFRC Secretariat in Geneva as well as the Regional IFRC Health and Care delegates and Regional MHPSS delegates. The Centre is governed by its Steering Committee and Advisory Group.

The IFRC Reference Centre for Psychosocial Support is hosted by the Danish Red Cross.

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Contact us:

Please contact the IFRC Reference Centre for Psychosocial Support should you wish to translate or adapt any part of this publication.

Address: Blegdamsvej 27, 2100 Copenhagen O, Denmark

T +45 35 25 92 00 | **E** psychosocial.centre@ifrc.org | **W** pscentre.org

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INTRODUCTION

The 2024 Strategic Operational Framework (SOF) outlines the priorities of the IFRC PS Centre. The SOF guides our global work to assist the Red Cross Red Crescent Movement to scale up and strengthen the quality of MHPSS across the globe. Moreover, it outlines the ambition to maintain and increase the targeted global influence on MHPSS humanitarian diplomacy through a proactive and structured approach towards policy events and decision-making processes.

Concurrently, the 2024 SOF reflects the focus of the IFRC PS Centre, and the Red Cross Red Crescent Movement more broadly, on the implementation of the Movement's MHPSS Policy on addressing mental health and psychosocial needs of people affected by armed conflicts, natural disasters and other emergencies. The policy, adopted at the 33rd International Conference in December 2019, commits the IFRC, ICRC and National Societies to scale up and strengthen the quality of MHPSS, including in humanitarian, low- and middle-income, and high-income settings. A crucial milestone at the end of 2024 will be the transformation of the IFRC PS Centre into the MHPSS International Movement Hub, which will be launched in January 2025, entering a new phase in the Red Cross Red Crescent efforts to deliver on mental health and psychosocial wellbeing. The tripartite partners of the IFRC, ICRC and Danish Red Cross will conduct an extensive consultation process in 2024 to compile the collective vision of MHPSS and shape the upcoming Movement Hub.

IFRC PS CENTRE FOCUS AREAS IN 2024

Throughout 2024, the IFRC PS Centre will continue building on its work in alignment with the needs and priorities conveyed by National Societies and the IFRC Secretariat. The climate crisis is highlighted in the IFRC Strategy 2030 as one of the main challenges that the Red Cross Red Crescent Movement will have to navigate in the coming years. Increased risks and vulnerabilities are already affecting communities throughout the world, with more frequent and more devastating emergencies threatening mental health and wellbeing at the individual, family and community levels – most severely in some of the most poor and unstable regions of the world. The IFRC PS Centre will strengthen its efforts in 2024 to ensure that preparedness and response mechanisms are able to adequately address MHPSS needs before, during, and after emergencies.

A second focus area will be to continue increasing the capacity to care for staff and volunteers across the Red Cross Red Crescent Movement, including through supportive supervision. A stated priority of the IC33 Resolution and Policy, in 2024 the IFRC PS Centre will expand the development and dissemination of tools, guides, resources and trainings to provide adequate support for the mental health and wellbeing of humanitarian staff and volunteers.

Research and innovation are a third focus area for the IFRC PS Centre in 2024. With the aim of maintaining and strengthening the Movement's position as a leading point of reference in MHPSS, the Centre will continue to produce and share knowledge with key researchers and partners in academia and beyond. Within the Movement, the IFRC PS Centre will continue to co-chair the Red Cross Red Crescent MHPSS Research Network with British Red Cross and co-lead the working group in the MHPSS Roadmap with the Swiss Red Cross.

THE WORK OF THE IFRC PS CENTRE

The IFRC PS Centre is hosted by Danish Red Cross in Copenhagen. The objectives and the functions of the Centre are outlined in the hosting agreement between Danish Red Cross and the IFRC, and include:

- Support National Societies in developing their capacity to provide community-based MHPSS services to vulnerable groups and volunteers through assessment and training
- Develop the necessary capacity to meet the demand for operational assistance to international mental health and psychosocial programmes within National Societies, including Danish Red Cross
- Advise and guide National Societies to sources of information on community-based MHPSS

- Develop, translate and share models, tools and case studies that reflect best practice in community-based MHPSS within and outside of the Movement
- Access external research and make it accessible to National Societies
- Cooperate with other humanitarian organisations providing MHPSS (e.g., IASC, WHO, Save the Children, UNHCR, IOM, UNICEF etc.) to exchange materials and experience, and to avoid duplication

STRATEGIC APPROACH 1: TECHNICAL SUPPORT AND CAPACITY BUILDING

Expected outcomes from Strategic Approach 1:

- The MHPSS capacity of National Societies and the IFRC is strengthened through high-quality trainings (including Training of Trainers), mentoring, and responsive technical support.
- The “MHPSS in Emergencies” component of the IFRC Emergency Health and Surge team is strengthened, leading to improved preparedness and response capacity by the IFRC and National Societies to provide MHPSS services.
- Regional support and knowledge sharing are facilitated through the establishment and continuous support to regional networks, communities of practice, inter-agency working groups, IFRC Regional Health and Care staff, MHPSS delegates and regional/ country-cluster offices.

MHPSS capacity gaps and development

Many National Societies have developed their capacity to provide MHPSS to affected populations and, staff and volunteers over the past years. Based on the results of the 2023 Movement-wide MHPSS Survey, 146 National Societies, the IFRC and the ICRC provided mental health and/or psychosocial support activities in 2023, while 42% of all survey respondents reported limited or lacking technical expertise as an obstacle for delivering such activities. The survey report further reveals that National Societies as well as external agencies request capacity-building and technical support from the IFRC PS Centre to bridge such gaps.

Accordingly, the focus of the IFRC PS Centre in 2024 will be on those National Societies with no or limited capacity and with the wider Red Cross Red Crescent Movement who work multilaterally or bilaterally on facilitating capacity-building and MHPSS services in armed conflict, natural disasters, and other emergencies. Partnerships and services provided to external agencies will continue where they align with strategic priorities.

MHPSS support in Emergencies

Emergencies are often the catalyst for National Societies to start engaging in MHPSS activities. After the emergency response phase, activities and services are adjusted and developed further to ensure capacity to act in future disasters and integrate MHPSS into recovery and development programmes. Providing technical and operational support to National Societies and the IFRC in emergencies thus often has a scope that reaches far beyond the immediate crisis.

Providing support in emergency settings is a key-priority in the IFRC MHPSS programme, with the IFRC Secretariat responsible for operations and the surge-systems, and the IFRC PS Centre leading on tool development, training curriculums and capacity-building. Consequently, focus is on the further development and adaptation of the MHPSS component of the Surge system and Emergency Response Units (ERUs). The aim is to continuously and efficiently develop systems that help identify, train, and prepare qualified delegates for ERU, capacity, assessment, and planning (CAP), indicators and Health Information Systems, Regional Disaster Response Teams (RDRT) and stand-alone MHPSS in emergency surge-deployments upon request. This requires close collaboration with IFRC Health and Care and Surge colleagues in Geneva, and with the National Societies running MHPSS rosters and Health ERUs (the MHPSS Emergency Technical Working Group). Emphasis will be placed on the development and support of flexible, relevant, and National Society-applicable tools and materials adapted to diverse contexts. This is a multi-year initiative, but particular attention will be directed to updating the MHPSS global surge delegate training package including corresponding competency frameworks and the MHPSS module within the Emergency Response Units. There will be close collaboration with the members of the newly reactivated MHPSS workstream, which is co-

led by the IFRC, Canadian and Danish Red Cross. Furthermore, the internal Emergency Coordination Group of the IFRC PS Centre will facilitate this work.

The IFRC PS Centre will continue to co-chair the IASC Reference Group on Mental Health and Psychosocial Support in Emergency Settings. The IFRC PS Centre holds this position on behalf of the IFRC; the World Health Organisation is the other Co-Chair of this inter-agency group.

Stronger regionalization, peer exchange and decentralization of training, supervision, and mentoring

Regional networks, whether focused on MHPSS or potentially overlapping issues such as protection, gender, and inclusion are sustainable, cost-effective ways to facilitate learning, foster peer-peer support and exchange knowledge across National Societies. In 2024, the IFRC PS Centre will therefore continue to reinforce existing regional networks and communities of practice to more effectively link and collaborate with IFRC regional and country-cluster offices. The IFRC Regional Health and Care delegates and the IFRC Regional and country MHPSS delegates (where they exist) will be vital strategic partners in this regard. In the IFRC PS Centre's experience, Regional MHPSS delegates are a strong multiplier in lifting the National Societies' capacity (and the PS Centre's ability) to meet the MHPSS needs of affected populations.

In partnership with National Societies and the IFRC, the PS Centre will offer regional-level MHPSS-specific trainings in 2024 focusing on Africa, Americas, Asia-Pacific and the MENA regions. In 2024 there will be two trainings at global level held in Copenhagen, with the National Societies in the Europe and Central Asia region continuing to be supported through the EU4Health project and the MHPSS-European Network. Regional, inter-agency and country-level trainings will continue to be provided and supported through our projects.

The IFRC PS Centre will focus on training of trainers, creating spaces for reflective practices after trainings/ workshops, and supporting National Societies to develop relevant supportive supervision systems for volunteers. Further, the IFRC PS Centre will continue to provide on-demand mentoring and technical support to National Societies and IFRC offices.

STRATEGIC APPROACH 2: KNOWLEDGE GENERATION AND SHARING

Expected outcomes from Strategic Approach 2:

- Research priorities across the Movement are documented and advocated for, with an aim to strengthen partnerships across the Movement and with relevant key external and academic actors who can support the realisation of the research agenda and research projects.
- The capacity of National Societies to monitor and evaluate their MHPSS interventions is strengthened through the development of appropriate and relevant systems and dissemination of core guidance, which in turn will facilitate learning and accountability towards donors and beneficiaries.
- The IFRC PS Centre Monitoring and Evaluation Framework is used to measure our impact, inform decision-making processes, increase accountability, and optimize the use of resources.

The position and priorities of the IFRC PS Centre in the IFRC Movement and research community

The IFRC PS Centre is highly respected in the global MHPSS community and as such is in an advantageous position to collaborate with other actors and to influence the global MHPSS agendas. Due to its strong connection to National Societies, the IFRC PS Centre is well-positioned to ensure the voices of local communities and volunteers are amplified to influence global MHPSS research agendas. At the same time given its strong ties to both the practical implementation of MHPSS and the research in academia fora, the IFRC PS Centre is uniquely placed to bridge the gap between the two. Utilizing all resources and increasing cooperation will improve the generation and sharing of knowledge, ultimately resulting in better quality of MHPSS services and positive outcomes for affected National Societies, communities, families, and individuals.

In 2024, the IFRC PS Centre will continue to co-chair the Red Cross Red Crescent MHPSS Research Network with British Red Cross, and co-lead a working group prioritizing the implementing of the Movement MHPSS policies 'demonstrating the impact of MHPSS in the Movement' in the MHPSS Roadmap along with the Swiss Red Cross. The Roadmap for Implementation Project ends this year. The Research Network currently has a broad membership including current and future potential academic collaborators active in global mental health research, along with National Society and Network members across the Movement. The Network aims to foster connections between academics and implementing actors, highlight core research priorities for the Movement, and develop a 'culture of research' that enables National Societies to feel more confident in developing and implementing research projects, lessons learned and/or evaluation activities. The Network also promotes the generation of research with practical applications to humanitarian contexts.

Translating research into practice and driving innovation

To maintain and consolidate academic partnerships, the IFRC PS Centre will, where feasible, engage in large-scale research consortium projects aiming to generate innovative ideas and solutions to core issues facing the Movement with respect to MHPSS. This will result in new areas of knowledge that can be translated into practical tools and guidelines for use by National Societies and volunteers. Participation in these research projects furthermore ensures that the IFRC PS Centre is up to date with current state of the art research. At the same time these research projects are valuable catalysts for new and stronger partnerships and allow for more in-depth exploration of topics of interest to the Movement such as climate change, conflict, migration, health, and volunteerism. The engagement of IFRC National Societies in external research projects is an important parameter at the research and project-consortium-design phase and for choosing to support existing research projects, ensuring the perspective of local staff and volunteers, and promotes better dissemination, feasibility and applicability of results back to National Societies.

To ensure that the Centre and the Movement maintains its position at the forefront of developments in MHPSS, it is important to actively engage in knowledge development, -generation – mobilisation and –sharing with academic and applied research partners, alongside users and producers of research within and beyond formal academia. The IFRC PS Centre wishes to position the National Societies and the IFRC as a research partner and not just as a source of data. We aim to be an active research partner and co-producer of knowledge and evidence. Furthermore, the IFRC PS Centre will specifically aim to initiate partnerships with research actors based in the Global South.

Monitoring, evaluation, accountability and learning

Monitoring, evaluation, accountability, and learning (MEAL) of MHPSS approaches are essential to ensure accountability towards affected populations and donors, and to facilitate learning and research. Yet, monitoring and evaluation of MHPSS approaches are perceived as a challenge by many National Societies. This area is still relatively young and the positive outcomes and impacts of MHPSS can be less straightforward to measure and research than other types of programme approaches (including, for example, impact often only being observed in the longer-term, causation being difficult to attribute to specific actions, or the inherent subjectivity and nuance of researching people’s emotional wellbeing, opinions, and feelings).

The IFRC PS Centre has developed key research, monitoring and evaluation guidance for the Movement (comprising a guidance note, toolboxes and indicator guide, and a guidance on MHPSS monitoring and evaluation during the COVID-19 pandemic). These resources, along with updated IASC monitoring and evaluation framework and the accompanying means of verification guidance, serve to support National Societies in their efforts to collect relevant data, conduct monitoring and undertake research. Webinars and various communication methods will be used to highlight the existing documents, to promote their use and further engage National Societies in research and monitoring and evaluation.

In 2024, we will continue to improve our internal data management, monitoring and reporting systems so we can better demonstrate the impact of our global work and ensure accountability. The IFRC PS Centre will action this through its Monitoring and Evaluation Framework.

STRATEGIC APPROACH 3: HUMANITARIAN DIPLOMACY AND COMMUNICATIONS

Expected outcomes from Strategic Approach 3:

- Advocacy efforts by the IFRC PS Centre will focus on ensuring that MHPSS remains high on the agenda of internal and external stakeholders through concerted communication, continued co-chairing of the IASC MHPSS RG and humanitarian diplomacy efforts by the IFRC PS Centre.
- The IFRC PS Centre contributes to and supports an increased awareness and engagement by NS, Donors, and State parties on the implementation of the IC33 Resolution and MHPSS Policy and reporting back at the International Conference (IC34)
- Resources, training curriculums, podcasts and videos produced by the IFRC PS Centre are easily available for and leveraged by stakeholders inside and outside the Movement, in a variety of languages and based on an overview of needs.

Influence relevant policies and practices to keep MHPSS on the agenda

Awareness of the importance of MHPSS has increased significantly in recent years, becoming a priority in the global health agenda catalysed by the Covid-19 and Ukraine crises. This calls for a more targeted approach to maintain high-level momentum and convert political commitments into actionable policies, programmes, and practices with the appropriate resource mobilization. The tools include advocacy, negotiation, diplomacy, communication, formal agreements, and other measures.

Advocating for MHPSS services is an ongoing activity on all the IFRC PS Centre platforms, continuously making decision-makers and opinion leaders aware of the importance of MHPSS, while simultaneously informing National Societies, research institutions and other stakeholders about the available tools and guidelines to implement MHPSS services. To achieve the goal of influencing decision-makers and opinion leaders to act in the interests of vulnerable people, and with full respect for fundamental humanitarian principles, humanitarian diplomacy needs to be an integral part of the IFRC PS Centre's work and be formulated in a Humanitarian Diplomacy Strategy.

Cultivating a strong, skilled, and competent, locally based and globally connected Movement is also necessary to monitor and ensure wide Movement participation in the future implementation of the high-level commitments and ultimately achieve positive mental health outcomes and well-being for all. To that end, the MHPSS Movement policy, the IC33 resolution, and the Roadmap working groups have provided important tools for humanitarian diplomacy at the national and global levels. A major milestone in 2024 will be the transformation of the IFRC PS Centre into the MHPSS Movement Hub, including a renewal of MHPSS humanitarian diplomacy ambitions/strategic objectives.

Throughout 2024 the IFRC PS Centre will continue to contribute to relevant new IFRC policies and sub-strategies to ensure that mental health and psychosocial aspects are addressed and in line with the IFRC approach and international standards. The IFRC PS Centre will disseminate information on and increase awareness and understanding of the MHPSS policy and IC33 resolution to National Societies with the aim to ensure successful implementation of the commitments and priority action areas laid out in the Roadmap. Further, the IFRC PS Centre will be a leading actor in collaborating with the IFRC, ICRC and National Societies on streamlining MHPSS messages in relevant high-level events throughout 2024, which will include regular exchanges with Movement HD focal points. Outside the Red Cross and Red Crescent Movement, the IFRC PS Centre speaks on behalf of IFRC in matters of MHPSS promoting policies, programme implementation and institutional commitment in relevant international networks and decision-making bodies.

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

- Develop and be led by a key humanitarian engagement strategy and plan that includes advocacy and HD priorities linked to activities to be implemented during key global advocacy moments. The plan will highlight the liaison with IFRC Geneva and New York advocacy teams for global action, regional IFRC offices in Europe and Africa, as well as Danish Red Cross and Nordic Civil Society Organisations
- Continue to Co-Chair the Inter-Agency Standing Committee Reference Group on Mental Health and Psychosocial Support in Emergency Settings (IASC MHPSS RG), thereby taking a leading global humanitarian diplomacy and coordination role, and actively collaborate to host meetings, support emergency operations in humanitarian contexts, review and contribute to the development of international MHPSS guidelines, tools, and interventions. Co-chairing and actively participating in the Reference Group has led to strong partnerships with UN agencies, international NGOs, and other MHPSS actors.

Active engagement with stakeholders and partners

The IFRC PS Centre will support the aim of the IFRC Humanitarian Diplomacy Policy to establish humanitarian diplomacy as a permanent mindset across all National Societies and the International Federation, by strengthening the humanitarian diplomacy around MHPSS in the Red Cross and Red Crescent Movement.

In this regard, the IFRC PS Centre will engage with the IFRC Regions and National Societies to:

- Identify opportunities for joint advocacy and influence at national, regional, and global levels for visibility and influence of National Societies providing MHPSS. Track and share relevant occasions and events in this regard and support engagement by providing key messages and through direct representation of the IFRC PS Centre.
- Through the Role of Co-chair of the IASC MHPSS RG, support National Societies to engage with broader MHPSS and humanitarian networks at country level, to strengthen and amplify their Humanitarian Diplomacy efforts through these networks.
- Ensure active participation and inclusion of National Societies in humanitarian diplomacy and influence opportunities identified by the IFRC PS Centre, IFRC Policy teams, and ICRC, in the previous section.

Participation in mental health and psychosocial network meetings and other face-to-face events are also important venues of engaging directly with stakeholders and the global mental health and psychosocial community.

Further, the IFRC PS Centre makes use of several channels of communication, such as the PS Centre website, the PS Centre newsletters, a podcast channel, Communities of Practice, and relevant social media platforms to reach and engage with as many stakeholders as possible.

Additionally, the latest developments in MHPSS will be communicated and the stories and videos from volunteers and staff within National Societies to audiences inside and outside the Movement will be shared to sustain interest and build knowledge.

Utilising technology to do more, smarter

The IFRC PS Centre will focus on doing more, smarter when it comes to communications. As accessibility to the internet and portable hardware such as tablets and smartphones increases globally, it becomes possible to take better advantage of the possibilities for low-cost and flexible distribution of tools and training they offer, while keeping the digital divide in mind and continue physical distribution. National Societies and others can access information and knowledge through the IFRC PS Centre website. To be widely accessible, the IFRC PS Centre also produces materials, tools, and guidelines available through other recognised channels, such as www.mhpss.net and www.ifrc.org/fednet.

An integral part of this effort is the diverse IFRC PS Centre communication portfolio, which features weekly MHPSS exercises, video content on MHPSS, as well as educational and advocacy content and an extensive database of training materials and research publications available on the Centre's website.

The IFRC PS Centre will:

- Continue to explore and utilize current trends and new technologies to optimize and diversify the communication flow from the IFRC PS Centre to stakeholders inside and outside the Movement.
- Work towards making our print and online resources more accessible to people with disabilities.
- Continue to optimize existing channels and platforms to make access to IFRC PS Centre resources as easy as possible across the digital divide.
- Structure the on-going advocacy push to optimize the reach across all channels and platforms.

MEETING GLOBAL MHPSS CHALLENGES

The IFRC PS Centre's primary mission is to enable and support National Societies to promote quality and timely MHPSS. These efforts are undertaken in the context of increasingly complex crises and emergencies across the globe often combining different challenges such as poverty, armed conflict, epidemics, and natural disasters fueled by climate change. While the circumstances of MHPSS interventions vary in severity and complexity the key objectives remain:

People anticipate, respond to, and quickly recover from crises

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

People lead safe, healthy, and dignified lives, and have opportunities to thrive

The National Societies and the IFRC Global Health and Care Team are aware of the MHPSS impact, symptoms and means of mitigation. This awareness should be present whether interventions are dealing with violence, chronic and other long-term diseases, challenging and high-risk lifestyles, epidemics, mental health challenges including suicide and non-communicable diseases. Further, interventions should seek to integrate MHPSS into community-based and other health and social care programmes when relevant.

People mobilise for inclusive and peaceful communities

Across global networks, the IFRC PS Centre will promote and support more inclusive, equitable and cohesive societies. The IFRC PS Centre strives for a world where all people are socially included, experience compassion, and diversity is celebrated. The IFRC PS Centre recognises that it plays an important part in helping to achieve this and that it must work effectively as part of a broader network to influence people's lives for the better. The IFRC PS Centre will therefore continue to work with partners and people of all ages and diversity.

Promoting the mental health and psychosocial wellbeing of staff and volunteers

The National Societies and IFRC operational and technical teams actively promote the mental health and psychosocial wellbeing of staff and volunteers through the facilitation of appropriate and timely provided MHPSS services as and when needed. The Movement components commit to protect the mental health and psychosocial wellbeing of staff and volunteers responding to humanitarian needs by ensuring that staff and volunteers have the required knowledge and psychological support skills to cope with stressful situations, look after themselves effectively and seek support when needed.

Implementation of the Red Cross Red Crescent MHPSS Policy and Resolution

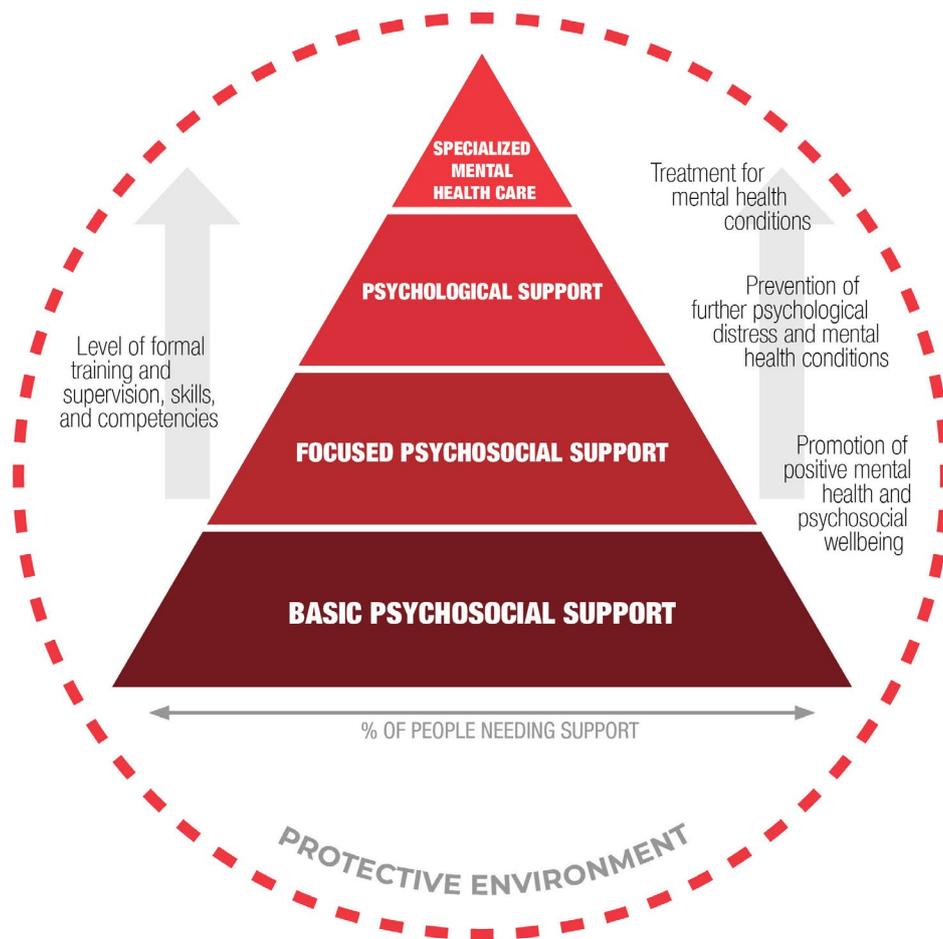
Over the course of 2020 and to date, the IFRC secretariat, the IFRC PS Centre, ICRC and National Societies have focused on the continued roll-out and step-by-step implementation of the MHPSS policy and IC33 Resolution. It is the first ever Movement-wide policy to be adopted, placing MHPSS high on the global humanitarian and development agenda and thus creating a unique momentum to collectively ensure that commitments are translated into actions. The IFRC PS Centre continue to ensure dissemination of information on and increase awareness and understanding of the MHPSS policy, IC33 resolution beyond 2024. Progress will be reported to the 2024 Council of Delegates.

THE MOVEMENT MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT FRAMEWORK

The IFRC MHPSS programme is global, but the challenges are met locally. There are significant variations in the need for MHPSS across the world, as well as differences in the National Societies' capacity to provide MHPSS. Close cooperation with the IFRC Secretariat and its five regions, as well as regional and National Society delegations of the IFRC, is the cornerstone in the IFRC PS Centre's ability to follow the needs and capacity of the National Societies and be both proactive in supporting capacity-building, where needed, and reactive in providing technical support in emergencies, while also ensuring the sustainability of the MHPSS support beyond the involvement of the IFRC PS Centre.

As per the Red Cross Red Crescent Movement MHPSS Policy, there are eight policy statements, which guide the Movement's work in providing MHPSS:

- 1. Ensure impartial access to MHPSS and prioritise early response**
- 2. Ensure comprehensive and integrated support and care for people with mental health and psychosocial needs**
- 3. Recognise the resilience, participation and diversity of people in all mental health and psychosocial activities.**
- 4. Ensure protection of safety, dignity and rights**
- 5. Address stigma, exclusion and discrimination**
- 6. Implement and contribute to the development of interventions based on MHPSS standards and practices that are internationally recognised and informed by evidence**
- 7. Protect the mental health and psychosocial wellbeing of staff and volunteers**
- 8. Develop MHPSS capacity**



Specialised mental health care – the top layer of the pyramid – includes specialised clinical care and treatment for individuals with chronic mental health conditions and for persons suffering such severe distress and over such a period of time that they have difficulty coping in their daily lives. Examples of activities include treatment centres for survivors of torture and alternative approaches to drug therapy. Services are provided within State healthcare and social welfare systems and in detention facilities.

Psychological support – the third layer of the pyramid – includes prevention and treatment activities for individuals and families who present with more complicated psychological distress and for people at risk of developing mental health conditions. Examples of activities include basic psychological interventions, such as counselling or psychotherapy, which are usually provided in healthcare facilities with accompanying outreach work or in community facilities, where this is culturally acceptable.

Focused psychosocial support – the second layer – includes promotion of positive mental health and psychosocial wellbeing and prevention activities, with a specific focus on groups, families and individuals at risk. Examples of activities include peer support and group work. Focused psychosocial support can be provided by trained and supervised Red Cross and Red Crescent staff and volunteers and/or trained community members.

Basic psychosocial support – the first layer of the pyramid – promotes positive mental health and psychosocial wellbeing, resilience, social interaction and social cohesion activities within communities. Activities in this layer are often integrated into health, protection and education sectors and should be accessible to 100% of the affected population, where possible. Examples of activities include psychological first aid (PFA) and recreational activities. Basic psychosocial support can be provided by trained Red Cross and Red Crescent staff and volunteers and/or trained community members.

IMPLEMENTATION

The SOF will be revisited towards the end of 2024 and updated in line with new structural, operational, and strategic developments pertaining to the Centre as well as the Movement's work on mental health and psychosocial support and implementation of the MHPSS 2020-2024 Roadmap. Fulfilment of activities will be pending on sufficient resources.

THE FUNDAMENTAL PRINCIPLES OF THE INTERNATIONAL RED CROSS AND RED CRESCENT MOVEMENT

Humanity

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

Impartiality

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

Neutrality

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

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Independence

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

Voluntary service

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

Unity

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

Universality

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