

Mental Health & Psychosocial Support **MINIMUM SERVICE PACKAGE**

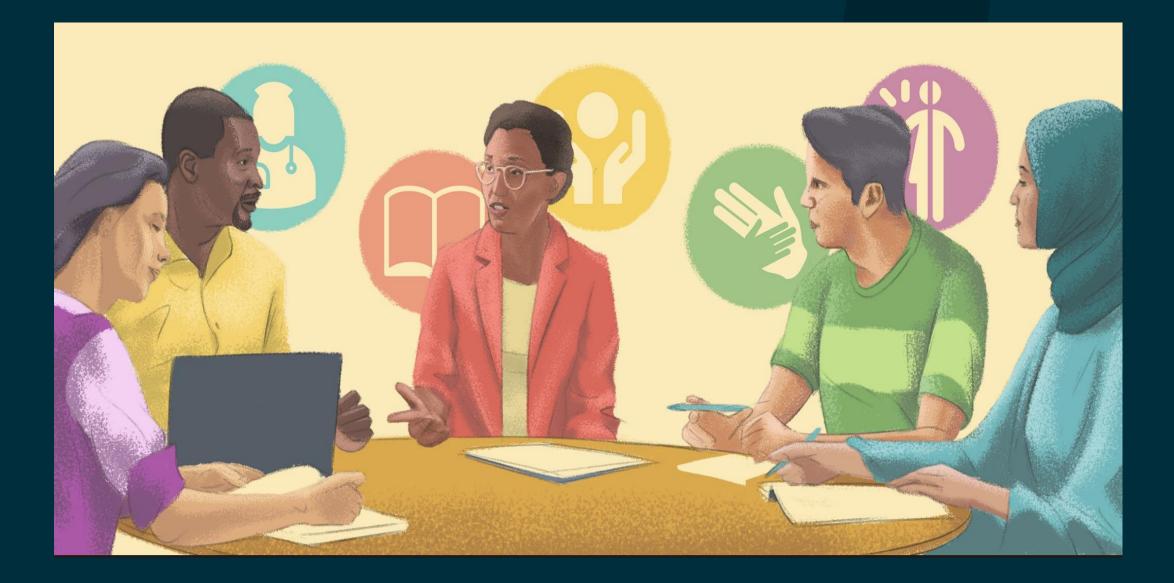




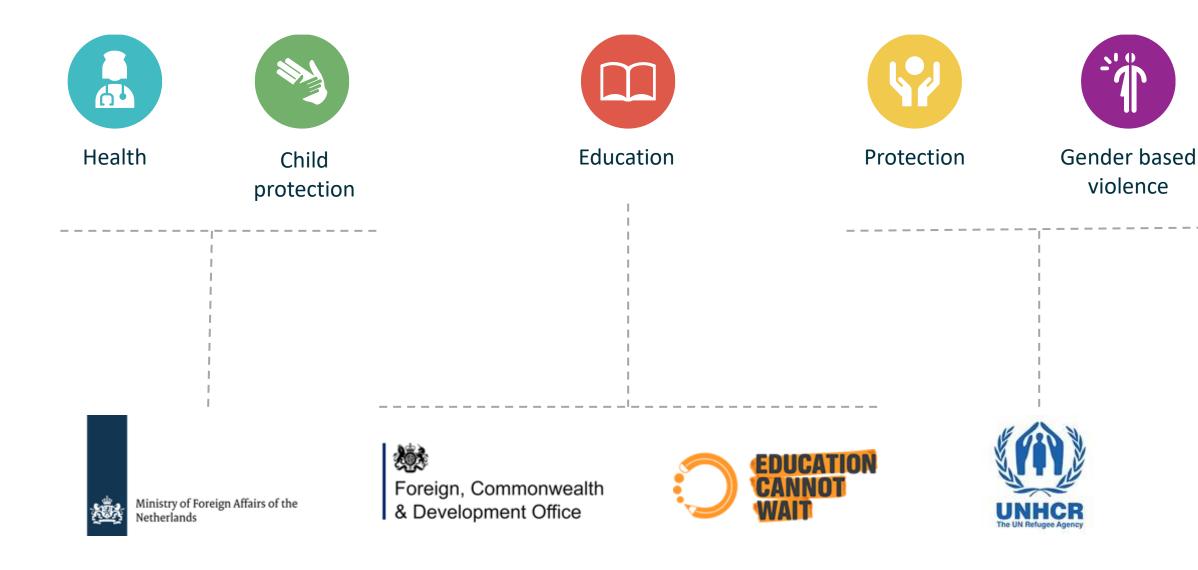




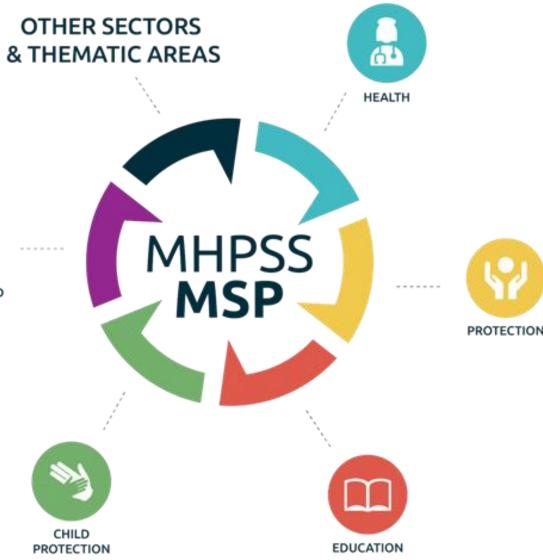
MSP overview



Funding, leadership and technical areas







Video: MSP background and purpose

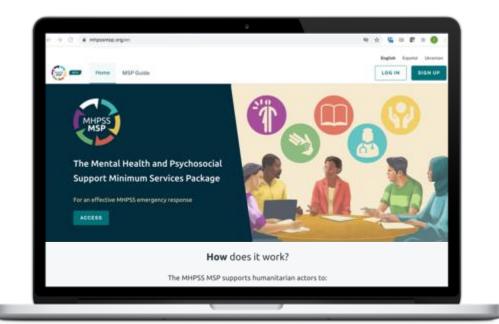
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MSP format

- Interactive, accessible
 digital platform and PDF
- formats

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• Links to relevant guidance and implementation tools



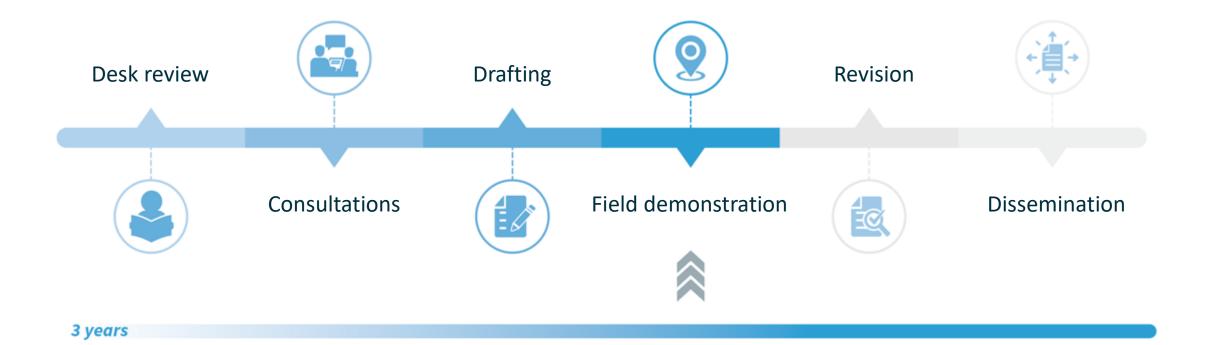


mhpssmsp.org

MSP development



Process of development



8

MSP content



The MHPSS MSP includes:

22 activities

- Gap Analysis Tool
- Costing Tool

SUMMARY OF MHPSS ACTIVITIES

The MHPSS MSP Goal:

Reduced suffering and improved mental health and psychosocial well-being among populations affected by humanitarian crises



Section 1. Inter-Agency Coordination and Assessment for the MHPSS Response

| 1.1 Coordinate MHPSS within and across sectors | 80000 |] _ | The humanitarian MHPSS response is well coordinated and responsive |
|---|-------|-----|---|
| 1.2 Assess MHPSS needs and resources to guide programming | 80000 | " | to the context, needs and gaps |

Section 2. Essential Components of all MHPSS Programs

| 2.1 Design, plan and coordinate MIHPSS Programmes | 80000 | |
|--|-------|--|
| 2 2 Develop and Implement an M&E System | 80000 | MHPSS programs are well designed, monitored and evaluated |
| 2.3 Care for staff and volunteers providing MHPSS | 80000 | and workers are supported |
| 2.4 Support MHPSS competencies of staff and volunteers | 60000 | |

Section 3. MHPSS Program Activities

ORIENT HUMANITARIAN ACTORS AND COMMUNITY MEMBERS ON MHP55

| 3.1 Orient humanitarian actors and community members on MHPSS and advocate for MHPSS considerations and actions | 00000 | Humanitarian actors and community members are oriented |
|--|-------|--|
| 3.2 Orient frontline workers and community leaders in basic psychosocial support skills | 00000 | to MHPSS and equipped with basic psychosocial support skill |

STRENGTHEN SELF-HELP AND PROVIDE SUPPORT TO COMMUNITIES

| 3.3 Disseminate key messages to promote mental health and psychosocial well-being | 00000 |
|--|-------|
| 3.4 Support community-led MHPSS activities | 80000 |
| 3.5 Provide early childhood development (ECD) activities | 800 |
| 3.6 Provide group activities for children's mental health and psychosocial well-being | 00 |
| 3.7 Support caregivers to promote the mental health and psychosocial well-being of children | 8000 |
| 3 8 Support education personnel to promote the mental health and psychosocial well-being of children | . 00 |
| 3.9 Provide MHPSS through safe spaces for women and girls | 0 |

Affected communities have access to information and activities to promote their mental health and psychosocial well-being

PROVIDE FOCUSED SUPPORT FOR PEOPLE IMPAIRED BY DISTRESS OR MENTAL HEALTH CONDITIONS

| 3.10 Provide mental health care as part of general health services | θ | | |
|--|------------|---|---------------------|
| 3.11 Provide MHPSS as part of clinical care for survivors of sexual violence and intimate partner violence | 00 | | Pers |
| 3.12 Initiate or strengthen the provision of psychological interventions | 8000 | » | or m have and |
| 3.13 Provide MHPSS through protection case management services | <u>0</u> 0 | | |
| 3.14 Protect and care for people in psychiatric hospitals and other institutions | 000 | | |

Persons impaired by distress or mental health conditions have access to care, protection and support

Section 4. Activities and considerations for specific types of emergency settings

4.2 Provide MHPSS to persons deprived of their liberty

| I | |
|---|--|
| I | 4.1 Integrate MHPSS considerations and support in clinical case management for infectious diseases |
| I | The regree initial considerations and support in contract case management for initiated as |

MHPSS considerations and activities are appropriately integrated in specific types of emergency situations

0

0000

Activities are organized into four sections

11



Section 1: Inter-agency coordination and assessment



Section 2:

Essential components of all MHPSS Programs (Design, M&E, workforce wellbeing, competencies)





Section 4: Activities & considerations for specific settings

MHPSS MSP Activities

| Section 1. Inter-Agency Coordination and Assessment for the M | HPSS Response |
|---|---------------|
| 1.1 Coordinate MHPSS within and across sectors | 8 🛛 🖓 🖓 🕄 |
| 1.2 Assess MHPSS needs and resources to guide programming | 8 🛛 🖓 🖓 🕄 |

| Section 2. Essential Components of all MHPSS Programs | |
|--|-----------|
| 2.1 Design, plan and coordinate MHPSS Programmes | 8 🐵 🛇 🕲 🚯 |
| 2 2 Develop and Implement an M&E System | 8 🙂 🛇 🕲 🚯 |
| 2.3 Care for staff and volunteers providing MHPSS | 6 0 0 0 |
| 2.4 Support MHPSS competencies of staff and volunteers | 60000 |

| Section 4. Activities and considerations for specific types of em | nergency settings |
|--|-------------------------|
| 4.1 Integrate MHPSS considerations and support in clinical case management for | infectious diseases 🕴 😫 |
| 4.2 Provide MHPSS to persons deprived of their liberty | 800 |

Section 3. MHPSS Program Activities

ORIENT HUMANITARIAN ACTORS AND COMMUNITY MEMBERS ON MHPSS

| 3.1 Orient humanitarian actors and community members on MHPSS and advocate for MHPSS considerations and actions | 80000 |
|---|-----------|
| 3.2 Orient frontline workers and community leaders in basic psychosocial support skills | 8 🛛 🖓 🖓 🕄 |

STRENGTHEN SELF-HELP AND PROVIDE SUPPORT TO COMMUNITIES

| 3.3 Disseminate key messages to promote mental health and psychosocial well-being | 3 🛛 🛇 🕞 🚯 |
|--|-----------|
| 3.4 Support community-led MHPSS activities | 3 🛛 🛇 🕞 🚯 |
| 3.5 Provide early childhood development (ECD) activities | 600 |
| 3.6 Provide group activities for children's mental health and psychosocial well-being | <u> </u> |
| 3.7 Support caregivers to promote the mental health and psychosocial well-being of children | 8000 |
| 3 8 Support education personnel to promote the mental health and psychosocial well-being of children | • |
| 3.9 Provide MHPSS through safe spaces for women and girls | 0 |
| PROVIDE FOCUSED SUPPORT FOR PEOPLE IMPAIRED BY DISTRESS OR MENTAL HEALTH CONDITIO | ONS |
| 3.10 Provide mental health care as part of general health services | Θ |
| 3.11 Provide MHPSS as part of clinical care for survivors of sexual violence and intimate partner violence | 0 |
| 3.12 Initiate or strengthen the provision of psychological interventions | 8000 |
| 3.13 Provide MHPSS through protection case management services | 8000 |
| 3.14 Protect and care for people in psychiatric hospitals and other institutions | 800 |

Each activity is presented with:

- A brief introduction
- A checklist of actions
- Additional actions for consideration
- Key guidelines, standards and tools
- List of budget items

| CORE | ΑCΤΙVΙΤΥ |
|--------------------------------|---|
| | |
| Action | 15 |
| ~ | |
| ~ | |
| | |
| Additi | onal actions for consideration (depending on context and available resources) |
| Additi | onal actions for consideration (depending on context and available resources) |
| Additi | onal actions for consideration (depending on context and available resources) |
| | |
| | onal actions for consideration (depending on context and available resources) |

Video: Using the Online MSP

Zooming in



MHPSS MSP Activities

Section 1. Inter-Agency Coordination and Assessment for the MHPSS Response

| 1.1 Coordinate MHPSS within and across sectors | |
|---|--|
| 1.2 Assess MHPSS needs and resources to guide programming | |

Section 2. Essential Components of all MHPSS Programs

| 2.1 Design, plan and coordinate MHPSS Programmes | 8 🛛 😗 🕞 🚯 |
|--|-----------|
| 2 2 Develop and Implement an M&E System | 6 9 9 6 |
| 2.3 Care for staff and volunteers providing MHPSS | 6 2 8 5 |
| 2.4 Support MHPSS competencies of staff and volunteers | 6 9 9 6 |

MHPSS MSP Activities

Section 3. MHPSS Program Activities

ORIENT HUMANITARIAN ACTORS AND COMMUNITY MEMBERS ON MHPSS 3.1 Orient humanitarian actors and community members on MHPSS and advocate for MHPSS 8 🛛 🖓 🖓 🚯 considerations and actions 3.2 Orient frontline workers and community leaders in basic psychosocial support skills 8 🛛 🛇 🖓 🚯 STRENGTHEN SELF-HELP AND PROVIDE SUPPORT TO COMMUNITIES 🔒 😐 😳 🕤 🚯 3.3 Disseminate key messages to promote mental health and psychosocial well-being 8 🖸 🕐 🖓 🚯 3.4 Support community-led MHPSS activities 3.5 Provide early childhood development (ECD) activities 800 3.6 Provide group activities for children's mental health and psychosocial well-being 😐 🖸 0000 3.7 Support caregivers to promote the mental health and psychosocial well-being of children 3 8 Support education personnel to promote the mental health and psychosocial well-being of children 0 3.9 Provide MHPSS through safe spaces for women and girls 0 PROVIDE FOCUSED SUPPORT FOR PEOPLE IMPAIRED BY DISTRESS OR MENTAL HEALTH CONDITIONS 0 3.10 Provide mental health care as part of general health services 3.11 Provide MHPSS as part of clinical care for survivors of sexual violence and intimate partner violence O 8000 3.12 Initiate or strengthen the provision of psychological interventions 3.13 Provide MHPSS through protection case management services 8000 3.14 Protect and care for people in psychiatric hospitals and other institutions 800



3.8 Support education personnel to promote the mental health and psychosocial well-being of children

Integrating MHPSS with education can contribute to effective learning and can help protect children from the negative effects of crisis by creating stable routines, fostering hope, reducing stress, encouraging self-expression and promoting collaborative behaviour.

To achieve this, the **training and support of teachers** should be prioritized, while also ensuring that other education personnel are empowered to support teachers in their roles.

Teaching can be one of the most stressful occupations and teachers not only influence **students' learning** but also their **social**, **emotional and cognitive development**. Teachers also play an important role in **supporting at-risk children** (e.g. those with MHPSS needs, including children with developmental delays and developmental disabilities or with protection vulnerabilities).

The mental health and psychosocial well-being of teachers is particularly important in crises as it affects their teaching and their ability to support the mental health and psychosocial well-being of their students.

CORE ACTIVITY

Support education personnel to promote the mental health and psychosocial well-being of children

Actions

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Assess needs and capacities to support the mental health and psychosocial well-being of children in learning spaces and the mental health and psychosocial well-being of teachers and other education personnel[™] (through consultations with communities, caregivers, teachers and other education personnel and with education authorities such as education ministry officials, if possible).

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- Develop/select and adapt programme content and training materials to support the well-being of teachers and other education personnel (e.g. check-ins that gauge teachers' emotional condition and needs for additional support; peer-to-peer networks/support groups; social and emotional learning workshops; stress management techniques), based on needs and priorities identified in assessments and through participatory discussions (see actions on community engagement in Activity 2.1. Design, plan and coordinate MHPSS programmes).
- Develop/select and adapt orientations, training curricula and IEC materials to help build the capacity of teachers and other education personnel to support the mental health and psychosocial well-being of children⁴⁹ (see recommended MHPSS training topics for caregivers, teachers and other education personnel on the MHPSS MSP. Web Platform).
- Train and supervise facilitators to support the well-being of teachers and other education personnel and to provide orientations, capacity-building and supportive follow-up on promoting the mental health and psychosocial well-being of children (see recommended MHPSS training topics for workers providing activities that. build MHPSS capacity and support well-being among caregivers and teachers on the MHPSS MSP Web Platform).
- Provide orientations to teachers and other education personnel including personnel supporting teachers (e.g. head teachers, principals, school supervisors and other education officials) – on the rationale for integrating MHPSS into education in emergencies and the role of teachers in crisis contexts.
- Provide capacity-building to teachers and other education personnel via in-service training, mentoring and peer learning methods.
- Engage staff with MHPSS technical expertise to provide ongoing supervision to facilitators and oversight of activities.
- Facilitate links and referral pathways from education settings to any needed services and supports (e.g. mental health and psychosocial support services, health services, protection services).
- Facilitate access to safe spaces in which to conduct activities as needed.

Additional actions for consideration (depending on context and available resources)

- Provide additional skills training to teachers and other education personnel to support children (e.g. additional support for children with developmental delays and developmental disabilities, children with protection vulnerabilities).
- Provide social and emotional learning (SEL)⁴¹ opportunities for teachers and other education personnel to
 develop their own social and emotional competencies, so that they can interact positively with children and serve
 as role models for them to follow.
- Provide social and emotional learning for children through school-based activities and through formal and non-formal school curricula.^a
- Take steps to promote the inclusion of MHPSS elements, including SEL, in pre- and in-service training.

- Advocate for the revision of national teacher competency frameworks to promote the integration of MHPSS elements, including SEL.
- Create and/or support structures and practices that promote teacher-parent communication about children's well-being (e.g., fostering teacher-parent cooperation processes by organizing pre-planned teacher-parent meetings at regular intervals, conducting awareness-raising and skills-building sessions for caregivers and for teachers).
- Support or reactivate collective activities around learning spaces (e.g. through parent-teacher associations, mothers' groups, community education committees; by creating opportunities for older community members to impart cultural and traditional knowledge to younger generations; by organizing learning and recreational events facilitated jointly by education personnel, students, caregivers and community groups) to maximize exchanges and cooperation between education personnel, caregivers and the community.
- Build the capacity of school leaders to better support their own mental health and psychosocial well-being and those of education personnel.
- Advocate for policies and professional development activities that promote the mental health and psychosocial well-being of education personnel.

• Key consideration 11: MHPSS focal points for learning spaces

Learning spaces should have a designated MHPSS focal point who is aware of the MHPSS services available and referral mechanisms in place. This may be a school counsellor, where available.

Alternatively, if there is no school counsellor, a high-capacity individual (such as a teacher or a head teacher) can be trained and supported to fulfil the role of MHPSS focal point, identifying needs and referring as appropriate.

Taking on this role may require a review and adjustment of their existing workload and responsibilities.

• Key consideration 12: Support the recruitment and retention of female teachers

- It is important to ensure that there are women in learning spaces (teachers and other female personnel)
- who can act as mentors, role models or resource persons for girls.
- Where no female teachers or candidates are available for training, consider approaching women from the community to work as **classroom assistants**.
- Inexperienced or underqualified **volunteers** can teach effectively with adequate training, Whenever possible, provide ongoing training and opportunities for female volunteers to complete their own education, and support their transition into a full teaching role.

uidelines, standards and tools

Click here to access relevant guidelines, standards and tools.

MSP tools



Gap analysis Tool

Purpose:

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To provide information on **MSP activity coverage** and **gaps** in MSP activities (and change over time)



| Activity | Status | |
|---|-------------------------------------|--|
| Section 1: Inter-Agency Coordination and Assessment | | |
| 1.1 Coordinate MHPSS within and across sectors | Implemented | |
| 1.2 Assess MHPSS needs and resources to guide programming | Not implemented | |
| Section 3: MHPSS Programme Activities | | |
| 3.1 Orient humanitarian actors and community members on MHPSS | Not implemented | |
| 3.2 Orient frontline workers and community leaders in basic psychosocial support skills | Partly implemented | |
| 3.3 Disseminate key messages to promote mental health and psychosocial well-being | Partly implemented | |

Costing tool (under development)

 To calculate the costs of MHPSS MSP activities

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- Useful for coordinators, implementing partners and donors
- User inputs basic information (e.g. country and affected population numbers)
- Cost estimates are automatically generated based on available data









Thank you!

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