

# Psychosocial Support delegate

## Psychosocial Support

Among humanitarian actors it is recognised that armed conflicts, natural disasters and epidemics cause significant psychological and social suffering to affected populations. Emergencies erode protective supports that are normally available, increase the risks of diverse problems and tend to amplify pre-existing problems. The psychological and social impacts of emergencies may be acute in the short term and can undermine the long-term mental health and psychosocial well-being of the affected population, threaten peace, human rights and development.

Psychosocial support (PSS) is an integral part of Danish Red Cross (DRC) emergency response. It assists affected populations in restoring a sense of normalcy, rebuild social structures while also healing the psychological and emotional wounds. Psychosocial support:

- Prevent distress and suffering from developing into something more severe
- Help people cope better and assist in resuming normal lives, install a sense of control over their situation and foster hope
- Utilise existing resources and structures in a community
- Contribute to a multi-layered emergency response ensuring integration of minimum standards for MHPSS and Protection, Gender and Inclusion across sectors

## Core competencies for Psychosocial Support in Emergencies Delegate

In the most recent emergency deployments, the Red Cross Red Crescent has deployed four different delegate profiles through the multilateral and bilateral system:

- Surge/FACT PSS Delegate
- Psychosocial Support in Emergencies (PSSiE) Delegate
- Community Outreach PSS Delegate
- ERU Health Facility PSS Delegate

A set of core technical competencies and generic knowledge, skills and behaviors are required of all psychosocial delegates. Furthermore, a set of technical mental health and psychosocial competencies are required. In the tables below is an overview of the core and generic competencies required for PSS in emergency delegates:

Core competencies
<ul style="list-style-type: none"><li>• Independent and analytical</li><li>• Collaborative and cooperative</li><li>• Assertive in communication</li><li>• Communicate clearly and effectively verbally and in writing</li><li>• Adapt information and communication style and techniques vis-à-vis different audiences</li><li>• Contextually and inter-culturally sensitive</li><li>• Be able to incorporate strategies for interacting with persons from diverse background</li><li>• Modify interventions and programmes considering age, gender and diversity</li><li>• Empathetic and trustworthy</li><li>• Flexible and innovative</li><li>• Grounded and well-balanced</li></ul>

## Generic technical competencies

### Red Cross Red Crescent context

- Familiar with the Movement, its policies and the emergency set up
- Work closely with the Host National Society to promote overall Host National Society capacity building

### Advocacy

- Advocate for mental health and psychosocial support with stakeholders, partners and colleagues
- Advocate for the integration of psychosocial support and mental health into other programmes e.g., WASH, nutrition and shelter.

### Community participation

- Knowledge in conducting participatory assessments and approaches to increase accountability to affected populations.
- Identify local leaders and support and establish networks
- Experience with community mobilization and stakeholder involvement.

### Coordination

- Engage and coordinate effectively with all groups as e.g. colleagues, men, women, girls and boys affected by the emergency, target beneficiaries, community leaders, National Governments and local mental health and psychosocial support actors
- Attend mental health and psychosocial support local and national coordination meetings (where they exist).

### Programming

- Familiar with programme cycle and programme management tools

## Psychosocial technical competencies

### Mental health and psychosocial support

- Knowledge of protection and psychosocial assessment, monitoring and evaluation tools
- Ability to analyse and recommend appropriate interventions
- Familiar with child protection, SGBV prevention and response, violence prevention and mental health and psychosocial support intervention and activities in emergencies
- Implement mental health and psychosocial community-based supports and protection approaches and interventions with an inclusive approach
- Knowledge and experience with different types of psychosocial interventions and their adaptation to local context

### Learning & training

- Counselling and stress management skills
- Knowledge of adult learning, facilitation and transfer of knowledge
- Training at ToT level in psychosocial support following IFRC tools and international guidelines
- Mentoring and supervision of staff and volunteers
- Volunteer management

### Contextual sensitivity

- Be aware of how mental health and psychosocial support is understood by the target population (e.g., understood through the lens of spirituality, voodoo/demons, awareness of stigma and discrimination, types of terminology used etc).

In addition to the above-mentioned core, generic competencies the table below give an overview of the preferred professional background and experience of a PSSiE Delegate:

<b>Education and professional background</b>	<b>Most preferred</b>	<b>Preferred</b>
Counsellor, social worker, Psychologist or Psychiatrist	X	
Teaching or pedagogical professional		X
Health or public health professional		X
Anthropologist or related areas		X
International studies or related areas		X
<b>Experience</b>	<b>Required</b>	<b>Preferred</b>
Experience in mental health and psychosocial support (MHPSS) activities for at least 1 year	X	
Experience in conducting trainings in MHPSS, eg. Psychological First Aid trainings	X	
Experience in providing counselling and psychological interventions to emotional distress and problems		X
Professional work experience, preferably in an emergency setting		X
<b>Languages</b>	<b>Required</b>	<b>Preferred</b>
Fluently spoken and written English	X	
Good command of other IFRC official languages (French, Spanish or Arabic)		x

## **The four Psychosocial Support in Emergencies Delegate Profiles**

Each type of deployment demands specific competencies and has different tasks and responsibilities. The Team Leader or in some cases the HeOps will be the line manager of PSSiE Delegates and as such will assist in defining specific and general tasks and responsibilities. The PSSiE Delegate will usually work closely with the Health Delegate and the Protection, Gender and Inclusion (PGI) Delegate, in case there is the latter. In this case there will be some overlaps in tasks and responsibilities, that the team leader and the delegates will coordinate as needed.

### **Surge/FACT PSS Delegate**

Surge/FACT PSS Delegates focus on assessment, activity and programme development, technical support and coordination. Surge/FACT PSS Delegates are deployed often within 48 hours to humanitarian emergencies and are expected to serve up to four weeks in a deployment cycle. Surge/FACT PSS Delegates are experienced Red Cross Red Crescent Delegates with extensive knowledge of and experience with protection and psychosocial support in emergencies.

In addition to the core, generic competencies a Surge/FACT PSS Delegate requires the following technical competencies:

- Demonstrated skills in programme development and proposal writing
- Stress management in volatile security environment

### **PSSiE Delegate**

PSSiE Delegates continue the work initiated by the Surge/FACT teams or previous PSSiE Delegates and they ensure to include community interventions. They develop the work plan for future rotations and begin planning for the recovery phases. PSSiE Delegates focus on continuing assessment, programme and activities development, implementation and coordination if needed. They act as technical advisors in matters of protection and PSS, train, supervise, and monitor implementation of activities and interventions and ensure links to relevant IFRC structures. PSS Delegates must be Red Cross Red Crescent experienced and have knowledge of protection and psychosocial support in emergencies.

In addition to the core, generic competencies a PSSiE Delegate requires the following technical competencies:

- Programme development and proposal writing
- Experienced facilitator and mentor
- Planning and coordination skills in, during and after crisis events

### **Community outreach PSS Delegate**

Community Outreach PSS Delegates focus on community mobilization in the areas of protection and psychosocial support in communities outside of the Emergency Response Unit. Community outreach PSS Delegates assess, plan, monitor and supervise, and evaluate interventions and programmes for communities. They act as technical advisors in matters of protection and psychosocial support for ERU Management and other partners and ensure links to relevant IFRC structures. Community Outreach PSS Delegates have Red Cross Red Crescent background, are experienced in providing community-based psychosocial support in emergency and recovery phases.

In addition to the core, generic competencies a Community Outreach PSS Delegate requires the following technical competencies:

- Psychosocial and protection aspects of public health in emergencies
- Mitigation of long term impact of disasters and resilience building
- Establishing community-based support systems
- Knowledge and experience in responding to issues around grief and loss
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### **ERU Health Facility PSS Delegate**

ERU Health Facility PSS Delegates focus on protection and mental health and psychosocial support to patients, relatives and national staff in ERU hospitals and clinics. ERU Health Facility PSS Delegates assess,

monitor, and evaluate relevant interventions for patients, relatives and national staff. They build the capacity of national staff and volunteers to carry out interventions and activities in the ERU hospitals and clinics. They also act as technical advisors in matters of protection and mental health and psychosocial for Emergency Response Unit management and other partners. ERU Health Facility PSS Delegates are experienced in providing community-based psychosocial support in emergency and recovery phases.

In addition to the core, generic competencies a ERU Health Facility PSS Delegate requires the following technical competencies:

- Knowledge of the transitioning phases from emergency to recovery
- Knowledge of how to mitigate long term impact of disasters and on resilience building
- Long term planning in the areas of protection and psychosocial support

For more information about the specific profiles, please learn more and apply here:

- [Surge/FACT PSS Delegate](#)
- [PSSiE Delegate](#)
- [Community Outreach PSS Delegate](#)
- [ERU Health Facility PSS Delegate](#)

When applying for the DRC PS emergency delegate roster, please apply for the profile(s) you are interested in and indicate in your letter of motivation how your competencies match that specific profile.

### **PSSiE material and tools**

As a PSSiE Delegate you are expected to be familiar with the following tools and materials;

- IASC Guidelines on MHPSS in Emergencies
- Sphere Guidelines
- Gender and Inclusion in Emergencies (DAPS). IFRC
- Community-based psychosocial support – A training kit. IFRC PS Centre.
- ERU Psychosocial Support Component Delegate Manual. IFRC PS Centre.
- ERU PS Awareness flyers. IFRC PS Centre.
- Child Friendly Spaces and child protection support package (e.g. tools, training, and guidance notes). IFRC PS Centre and World Vision International.
- Caring for volunteers. IFRC PS Centre.
- Sexual and Gender-based violence. IFRC PS Centre.
- Briefing note on Child Protection in Emergencies and online Child Protection briefing. IFRC
- Broken Links. IFRC PS Centre.
- Monitoring and evaluation framework training. IFRC PS Centre.

All material produced by the IFRC PS Centre is available on [www.pscentre.org](http://www.pscentre.org). Here you will also be able to see the trainings offered by the IFRC PS Centre.

Other IFRC and PS Centre trainings might be relevant depending upon the type of emergency and task and responsibilities.