

22 January 2018

IASC Reference Group on Mental Health and Psychosocial Support Terms of Reference

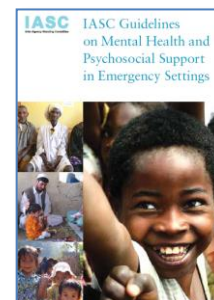
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I. Introduction

Following publication and launch of the Inter-Agency Standing Committee (IASC) Guidelines on Mental Health and Psychosocial Support in Emergency Settings in 2007, the IASC Working Group agreed to the formation of an IASC MHPSS Reference Group that would be primarily focused on dissemination and mainstreaming of the IASC MHPSS Guidelines.

What are the IASC Guidelines for MHPSS in Emergency Settings?

The IASC Guidelines on Mental Health and Psychosocial Support (MHPSS) in Emergency Settings (IASC, 2007) were developed during an inclusive process, input from UN agencies, NGOs and universities. The Guidelines help to plan, establish and coordinate a set of minimum multi-sectorial responses to protect improve people's mental health and psychosocial wellbeing in the midst of an emergency.



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What is the IASC? – please see Annex 1 for a pictorial overview of the IASC

The Inter-Agency Standing Committee (IASC) is an inter-agency forum for coordination, policy development and decision-making involving key UN and non-UN humanitarian partners. It was established in June 1992 in response to United Nations General Assembly Resolution 46/182 to strengthen humanitarian assistance. General Assembly Resolution 48/57 affirmed its role as the primary mechanism for inter-agency coordination of humanitarian assistance. For more information on the IASC structure, working group and subsidiary bodies please refer to the IASC Website: <https://interagencystandingcommittee.org/>

What is the IASC MHPSS Reference Group?

The Reference Group is an IASC subsidiary body. The group consists of more than 30 member organisations, and fosters a unique collaboration between NGOs, UN and other local or international agencies, as well as academics. The Reference Group members share a great sense of collective ownership as it relates to the spirit of the IASC Guidelines for MHPSS in Emergency Settings and are committed to investing in their dissemination and operationalization in humanitarian responses.

Translations of the IASC MHPSS guidelines

The IASC MHPSS Guidelines have been disseminated widely and have been translated into several languages, to date, including: Arabic, Chinese, French, Japanese, Korean, Nepali, Portuguese, Russian, Spanish, Turkish, Tajik and Ukrainian. Numerous orientation sessions, training, and advocacy initiatives have been implemented worldwide.

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Related IASC MHPSS RG Materials and Tools

Responding to needs indicated by humanitarian actors, the Reference Group has published several tools to supplement the IASC Guidelines, for example:

- IASC Guidelines on Mental Health and Psychosocial Support: Checklist for Field Use (2008)
- IASC Guidelines on Mental Health and Psychosocial Support: What should Protection Programme Managers Know? (2010)
- IASC Guidelines on Mental Health and Psychosocial Support: What should Humanitarian Health Actors Know? (2010)
- IASC: Who is Where, When, doing What in Mental Health and Psychosocial Support (2012)
- IASC Guidelines on Mental Health and Psychosocial Support: What should Camp Coordinators and Camp Management Actors Know? (2013)
- IASC Reference Group Mental Health and Psychosocial Support Assessment Guide (2013)
- IASC Reference Group Mental Health and Psychosocial Support: Recommendations for Ethical MHPSS Research in Emergency settings (2014)
- IASC Review of the Implementation of the IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings: *How Are We Doing?* (2015)
- IASC Inter-Agency Referral Guidance Note and Form (2017).
- A common monitoring and evaluation framework for the IASC Guidelines on MHPSS in Emergency Settings (2017).

II. Overall Goal Mental Health and Psychosocial Support in Emergency Settings

Based on the Common Monitoring and Evaluation Framework for MHPSS in emergency settings, the overall goal for MHPSS in Emergency Settings is “Reduced suffering and improved mental health and psychosocial wellbeing”.

III Activities IASC MHPSS Reference Group

The main focus of the IASC MHPSS Reference Group is the dissemination and mainstreaming of the IASC Guidelines. This includes, but is not limited to:

- Facilitating the integration of the relevant content of Guidelines into all sectors of emergency response;
- Providing practical guidance, coordination and technical support during emergencies including linking actors, discussing options for synergy and joint actions, supporting country-level MHPSS WGs where they exist and advocating for quality MHPSS interventions;
- Fostering collaboration: amongst agencies and diverse stakeholders (such as governments and communities) working in MHPSS; between MHPSS agencies at global, regional and national levels;
- Supporting interagency activities for MHPSS at global, regional and national levels;
- Developing relevant tools linked to the guidelines and share these with countries;
- Encouraging individual agencies to institutionalize the guidelines;
- Promoting and supporting on-going capacity building to enable effective use of the guidelines and related materials, including the Common MHPSS M&E Framework
- Sharing and learning from experiences of implementation of the guidelines among countries;
- Interfacing with the UN Cluster System and advocate for inclusion of MHPSS into policies, tools, capacity

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- building and budgets;
- Facilitating printing, dissemination and language translations of the guidelines;
- Advocating on MHPSS in emergencies with donors, policy makers and national government through the RG members
- Building the evidence base for MHPSS interventions in emergency settings.

IV. Structure – please see Annex 2 for a pictorial overview of the structure of the RG

Co-Chairs

The purpose of the Co-Chairs is to coordinate and facilitate the activities of the Reference Group. The Co-Chairs of the Reference Group on MHPSS are proposed by the members of the Reference Group for a period of at least 1 year (preferably two years), after which the chairmanship may rotate to another member. Where possible it is best to have a representative of a UN agency as well as civil society (e.g., an NGO or the International Federation of Red Cross Red Crescent Societies) with the representatives coming preferably from a mixture of the health, and protection or social services sectors. Ideally, one co-chair will be based in Geneva to attend relevant Global Cluster meetings. Each Co-Chair is responsible for supporting certain aspects of the annual work plan and working groups. The Co-Chairs will report monthly on RG activities to the IASC Secretariat and report to RG members on an annual basis at the annual, face-face meeting.

Cluster Focal Point Reference Group members

Each year during the annual meeting Cluster Focal Points for the relevant clusters should be confirmed. Relevant clusters include: Health, Protection, Education, Nutrition, Shelter, and Camp Coordination & Camp Management

Focal Points will be responsible for:

- Disseminating the full version or field version of the guidelines to cluster members
- Attending (when possible) key cluster meetings and making possible linkages
- Including MHPSS in the work plan of the relevant cluster and ensuring MHPSS is mainstreamed into key strategic or guidance documents within that sector (including but not limited to regular revisions of the Sphere guidelines).
- Conducting an orientation seminar for cluster members at global or field level
- Advocating for funding where necessary for joint activities
- Organizing conference calls related to emergencies, cluster updates or thematic projects
- Reporting progress at the annual IASC MHPSS Reference Group face-to-face meetings and in the monthly RG mailout.

Thematic projects

Following the needs identified in the field the IASC MHPSS Reference Group will annually identify specific “thematic projects”. For example working on assessment or monitoring and evaluation, or other related materials to enhance MHPSS emergency responses. These “thematic projects” are usually carried out by a subgroup of RG members and endorsed by the whole RG, preferably during the annual meeting. In the past, this has led to products such as the ‘Mental Health and Psychosocial Support Assessment Guide (2013) and the Recommendations for Ethical MHPSS Research in Emergency settings (2014) and in 2014-2016 Reference Group members worked on a common monitoring and evaluation framework. These thematic projects are set out as part of the IASC MHPSS Reference Group Annual Workplan, submitted to and approved by the IASC, and at the conclusion of each year, reported against. Whilst only MHPSS RG members may lead thematic projects,

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Observers are welcome to participate and actively contribute to the work of the thematic project.

VI. Membership Criteria and Expectations

Reference Group membership aims to be diverse, as various skills, resources and strengths are needed to carry out the activities, produce the outputs and meet the overall goal. Furthermore, membership will reflect a variety of perspectives, i.e. NGO, UN, multilateral, donors and academic members. Diverse sectors are also needed for representation, including humanitarian protection, health, nutrition, education and disaster risk reduction, among others.

Membership criteria

1. IASC registered Agencies

Any IASC agency can automatically be a member of the IASC MHPSS RG. Organizations with existing membership of International Federation of Red Cross and Red Crescent Societies (IFRC) or the consortiums International Council of Voluntary Agencies (ICVA) and InterAction automatically meet IASC Reference Group criteria, because IFRC, ICVA and Interaction are part of the IASC.

2. Non-IASC registered agencies

Required:

- Be a national NGO who is leading/ co-leading an MHPSS WG at country-level OR an organisation with at least two years field experience in providing MHPSS programs in emergencies in at least three low or middle income countries.
- Institutional expertise relevant to the tasks outlined in the Reference Group ToR
- Interest in and commitment to supporting the systematic application of the IASC MHPSS Guidelines and organisational agreement to endorse their use
- Documented past efforts or plans to develop and/or implement the IASC MHPSS Guidelines
- Promotion of the IASC Guidelines and associated tools within their organizations, to partners and other networks
- Willingness to share expertise, technical materials and work in a collaborative manner
- Willingness to contribute to some of the following tasks: development of training materials, provide consultants for training, distribution of materials, field visits and organization of conference calls
- Represent their organisation on decision making matters for the functioning of the IASC MHPSS Reference, such as holding a representative “vote” for decisions such as co-chairs, annual workplans and/or other decisions deemed important for the group to jointly agree on for engagement (e.g., topical advocacy statements, participation in global forums, or other decisions that reflect the reference group and its members’ position on issues related to MHPSS in emergencies). Note – should more than one individual from a member organisation be engaged with the reference group, each organisation may only carry one vote and allocate who will have that voting representation on behalf of their organisation (understanding this may change depending on the topic being voted upon).
- Organisations and Agencies should be ‘not for profit’.
- Commitment of resources (e.g., travel to RG meetings, support local staff or partners to attend RG meetings, staff time and/ or other activities like training, leading MHPSS WGs at country level and/ or translation of RG products.
- Where feasible be willing to assist MHPSS RG fundraising efforts for thematic projects or other RG initiatives.

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It is important that the individual representative of their organisation (whether IASC registered or non-IASC registered organisation) is committed to participating in the Reference Group for at least one year. If organisational representatives step down from their engagement with the Reference Group, they will be asked to nominate a replacement. In this sense, it is important to note that reference group membership is based by organisation and not individuals.

Organizations will be expected to attend the annual face-to-face Reference Group meeting, and incur the relevant costs to do so. The meeting will be at least three days (sometimes four days) and vary in location, depending on the member agency hosting the function. Organisational representatives must be agreeable to contributing additional time to the IASC MHPSS Reference Group for conference calls, e-mail correspondence, and coordinating and carrying out promotion, training, updates, application support, and monitoring and evaluation activities. Members will need to make a commitment to keep in touch and respond to communications and deadlines. Members will do their work alongside their regular jobs and their various contributions will be considered in-kind support. An estimation of the Reference Group member is an organizational time commitment of minimum one day per month. Ideally, this time commitment and work should be written into the job description of the Reference Group member. Additional time may be demanded from members if they nominate to engage in annual thematic projects.

3. Exceptions for non-members

3.1 Individuals

In some circumstances, independent experts who (a) have worked with member organizations in the past; (b) engage with member organisations on project-specific consultancies that are of relevance to the MHPSS RG; or (c) have participated in the Reference Group in the past may be added to the email distribution list and invited to the “open sessions” of the RG annual meetings as Observer individuals.

Observer Individuals may only attend the ‘open sessions’ of the RG annual meeting and are expected to fully cover their own costs to attend the meeting.

3.2 Non-member organisations – “Observer organisations”

The IASC MHPSS Reference Group recognises and values the diverse opinions of local and international MHPSS stakeholders who may not meet membership criteria. Their contributions contribute to and/or challenge the IASC MHPSS Reference Group members and their efforts. As such, ‘non-IASC members’ may be invited to Reference Group meetings (annual, online or for engagement in annual work plan initiatives) as “Observers” for the “open sessions”. These non-member organisations may include Universities and local NGOs (not meeting the membership criteria) or other partners with a strong track record in MHPSS in emergencies and/or local MHPSS working groups in emergency settings.

Participation to RG meetings should be of benefit to the non-member agency and observers are encouraged, where appropriate, to participate in and contribute to successful completion of the activities of the Reference Group as described under III.

3.3 Donor organisations

Donor organisations who are funding or interested in funding MHPSS programme in emergencies may participate in RG activities as “Observers” and they may attend both open and closed sessions at IASC RG meetings, as appropriate.

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While the contributions of observers in IASC MHPSS Reference Group matters are warmly welcomed and encouraged, decisions made by member organisations shall be the final decision makers on behalf of the group, and thus observers will not be able to contribute a “vote” to such decisions, nor lead on activities on the RG workplan. Observers may take part in the “open sessions” within the RG annual meeting and participate in thematic projects.

VII. Communication Mechanisms

It is essential to maintain regular communication (a) among Reference Group members and (b) between the Reference Group Members and their organizations; and at times, including observers to the reference group. There will be two mailing lists, one for RG members only and an extended list covering Reference Group members and Observers.

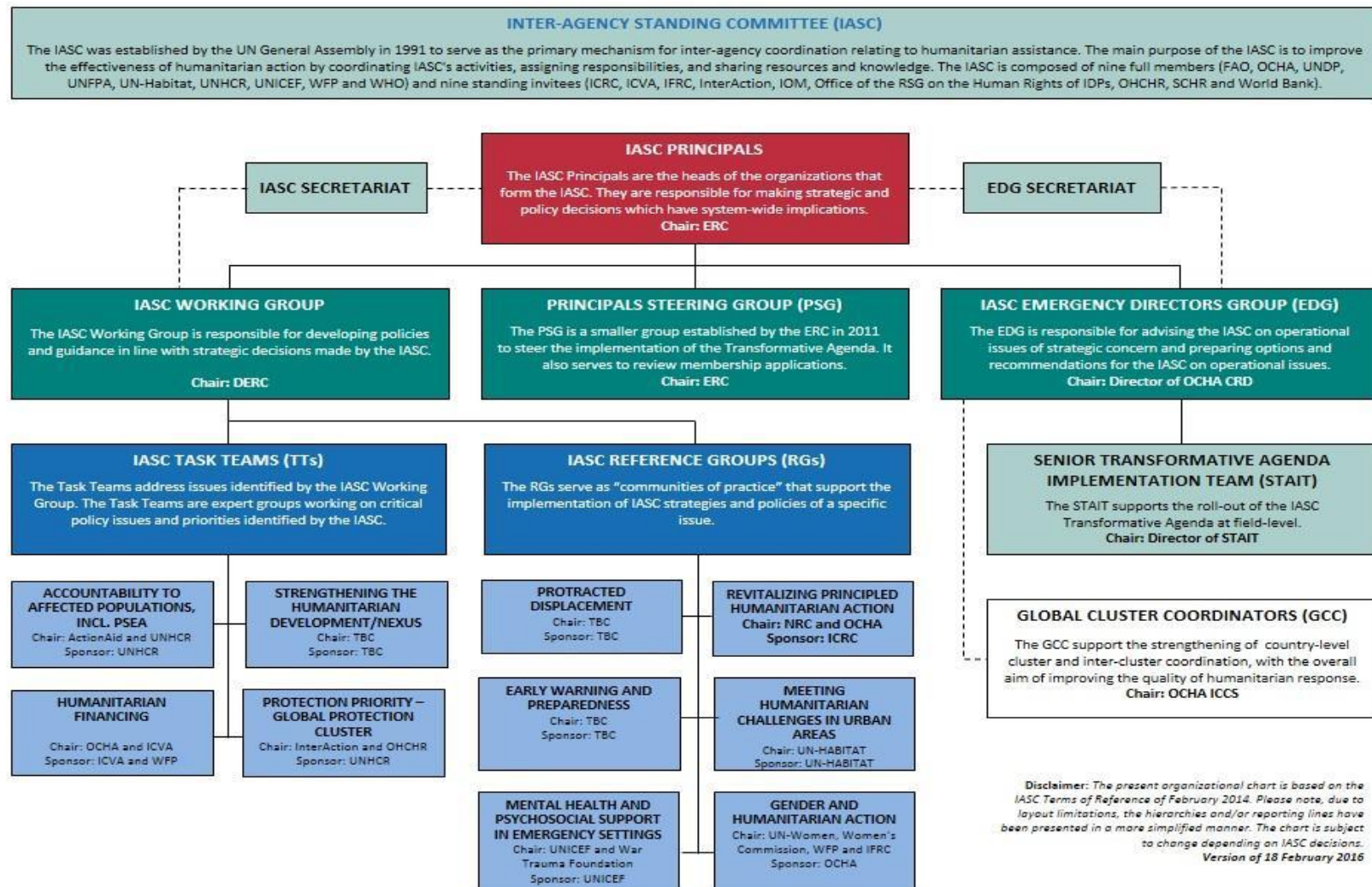
In addition to the annual face-to-face meeting of the full Reference Group each year, the Co-chairs will commit to regular teleconferences to monitor the implementation of the annual work plan. Additional online discussions about specific topics (e.g., emergency responses or thematic projects) will also be timetabled throughout the year. Such calls may be initiated by the co-chairs and/or those leading the thematic projects.

Members will be asked to participate in additional communications when they are responsible for or engaged in thematic projects. Members will receive regular email communications requesting inputs that may be related to the work plan or the activities of the Reference Group itself.

Reference Group members are encouraged to take advantage of opportunities that may arise to meet face-to-face or to support the overall work of the Reference Group (e.g. if travelling to a country for your agency, you would be encouraged to link in with the working group in that country). They are then requested to communicate the work of the group within their respective agencies and where possible through existing networks such as mhpss.net. For the benefit of the whole reference group, such actions would also be important to maintain links with the Co-chairs.

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Annex 1 Structure of the IASC Secretariat



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Annex 2: Structure of the IASC MHPSS RG

