







Agenda :

-  Bienvenue –GPC Coordinateur, William Chemaly
-  Présentation des intervenants
-  Présentation sur le EMS en SMSPS par Peter Ventevogel, UNHCR et Vania Alves, UNICEF,
-  Aperçu de l'engagement sur le EMS en SMSPS, Peter Ventevogel, UNHCR
-  Questions et Reponses: Inka Weissbecker, WHO, Caoimhe Nic a Bhaird, UNICEF, Vania Alves, UNICEF, Peter Ventevogel, UNHCR
-  Clôture



ORIENTATION Ensemble Minimum de Services de Santé mentale et soutien psychosocial

Webinaires pour les clusters de protection sur le terrain

Février 2022

Présentation des intervenants

 Peter Ventevogel,
UNHCR

 Vania Alves,
UNICEF,





Santé mentale et soutien psychosocial

ENSEMBLE MINIMUM DE SERVICES

Aperçu de l'EMS



Financement, leadership et aspects techniques



Santé



Protection de l'enfance



Éducation



Protection



Violence basée sur le genre



Ministry of Foreign Affairs of the Netherlands



Foreign, Commonwealth & Development Office



**EDUCATION
CANNOT
WAIT**



UNHCR
The UN Refugee Agency

Qu'est-ce que l'ensemble minimum de services de SMSPS ?

L'EMS s'appuie sur les normes et outils existants en matière de SMSPS afin de créer un **ensemble intersectoriel facile à appliquer**, unique et complet.

6



Activités prioritaires



Actions centrales
pour accomplir
chaque activité



Pour les crises en cours et
les nouvelles situations
d'urgence



Réalisé par les acteurs
humanitaires



Coûts des activités



Intègre des considérations en
matière de pérennisation et de
planification à plus long terme

À qui s'adresse l'EMS ?

- Planificateurs des programmes
- Coordinateurs
- Bailleurs de fonds
- Partenaires de mise en œuvre
- Conseillers techniques



L'EMS aidera les acteurs humanitaires à :



Se coordonner et collaborer

- Se coordonner pour identifier et corriger les lacunes dans la réponse en matière de SMSPS
- Plaider pour que les principales lacunes en matière de SMSPS soient corrigées



Planifier et prendre des décisions

- Identifier les activités programmatiques de SMSPS à financer et à exécuter en priorité



Mettre en œuvre et affecter les ressources

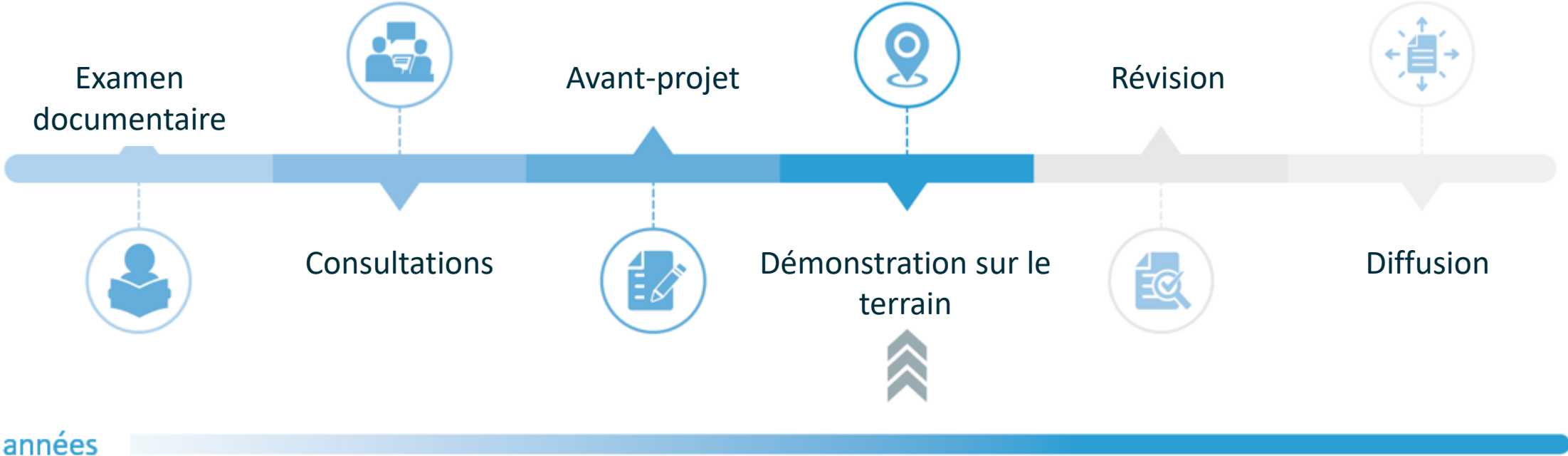
- Obtenir des conseils sur les actions à réaliser pour la bonne exécution de chaque activité de l'EMS

Élaboration de l'EMS



Processus d'élaboration

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Démonstration sur le terrain dans 5 pays



Développement de l'EMS : poursuivre le **développement** des contenus et outils de l'EMS (par ex. : cadre pour le suivi et l'évaluation, outil d'estimation des coûts) **et les tester sur le terrain.**



Évaluation de l'EMS : déterminer son **acceptabilité, sa faisabilité, les bénéfices perçus, son utilisation et son impact.**



Mise en œuvre de l'EMS : les partenaires de mise en œuvre **lancent, consolident, amplifient des activités de l'EMS.**

Contenus et format de l'EMS



L'EMS de SMSPS comprend :

- 22 activités
- un outil d'estimation des coûts
- un outil d'analyse des lacunes

The infographic details the MHPSS MSP Goal and its components. At the top, it lists the goal: 'Reduced suffering and improved mental health and psychosocial well-being among populations affected by humanitarian crises'. Below this, it is divided into four sections, each with specific activities and progress indicators (represented by colored circles 1-5). Section 1: Inter-Agency Coordination and Assessment for the MHPSS Response. Section 2: Essential Components of all MHPSS Programs. Section 3: MHPSS Program Activities, which is further divided into 'ORIENT HUMANITARIAN ACTORS AND COMMUNITY MEMBERS ON MHPSS', 'STRENGTHEN SELF-HELP AND PROVIDE SUPPORT TO COMMUNITIES', and 'PROVIDE FOCUSED SUPPORT FOR PEOPLE IMPAIRED BY DISTRESS OR MENTAL HEALTH CONDITIONS'. Section 4: Activities and considerations for specific types of emergency settings. A legend at the top right identifies icons for Health, Education, Protection, Child Protection, and Gender Equality.

MHPSS MSP

HEALTH EDUCATION PROTECTION CHILD PROTECTION GENDER EQUALITY

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
- 1.2 Assess MHPSS needs and resources to guide programming

The humanitarian MHPSS response is well coordinated and responsive to the context, needs and gaps

Section 2. Essential Components of all MHPSS Programs

- 2.1 Design, plan and coordinate MHPSS Programmes
- 2.2 Develop and implement an MEE System
- 2.3 Care for staff and volunteers providing MHPSS
- 2.4 Support MHPSS competencies of staff and volunteers

MHPSS programs are well designed, monitored and evaluated and workers are supported

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
- 3.2 Orient frontline workers and community leaders in basic psychosocial support skills

Humanitarian actors and community members are oriented to MHPSS and equipped with basic psychosocial support skills

STRENGTHEN SELF-HELP AND PROVIDE SUPPORT TO COMMUNITIES

- 3.3 Disseminate key messages to promote mental health and psychosocial well-being
- 3.4 Support community-led MHPSS activities
- 3.5 Provide early childhood development (ECD) activities
- 3.6 Provide group activities for children's mental health and psychosocial well-being
- 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
- 3.9 Provide MHPSS through safe spaces for women and girls

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
- 3.11 Provide MHPSS as part of clinical care for survivors of sexual violence and intimate partner violence
- 3.12 Initiate or strengthen the provision of psychological interventions
- 3.13 Provide MHPSS through protection case management services
- 3.14 Protect and care for people in psychiatric hospitals and other institutions

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

- 4.1 Integrate MHPSS considerations and support in clinical case management for infectious diseases
- 4.2 Provide MHPSS to persons deprived of their liberty

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

Les activités sont organisées en quatre sections



Section 1 :
Coordination et évaluation interorganisations



Section 2 :
Composantes essentielles de tous les programmes de SMSPS
(conception, suivi et évaluation, bien-être du personnel, compétences)



Section 3 :
Activités programmatiques de SMSPS



Section 4 :
Activités et aspects à prendre en considération pour des **situations spécifiques**

Activités de l'EMS de SMSPS

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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



2.2 Develop and Implement an M&E System



2.3 Care for staff and volunteers providing MHPSS



2.4 Support MHPSS competencies of staff and volunteers



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

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Section 3. MHPSS Program Activities

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STRENGTHEN SELF-HELP AND PROVIDE SUPPORT TO COMMUNITIES

3.3 Disseminate key messages to promote mental health and psychosocial well-being



3.4 Support community-led MHPSS activities



3.5 Provide early childhood development (ECD) activities



3.6 Provide group activities for children's mental health and psychosocial well-being



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



3.9 Provide MHPSS through safe spaces for women and girls



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

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



3.12 Initiate or strengthen the provision of psychological interventions



3.13 Provide MHPSS through protection case management services




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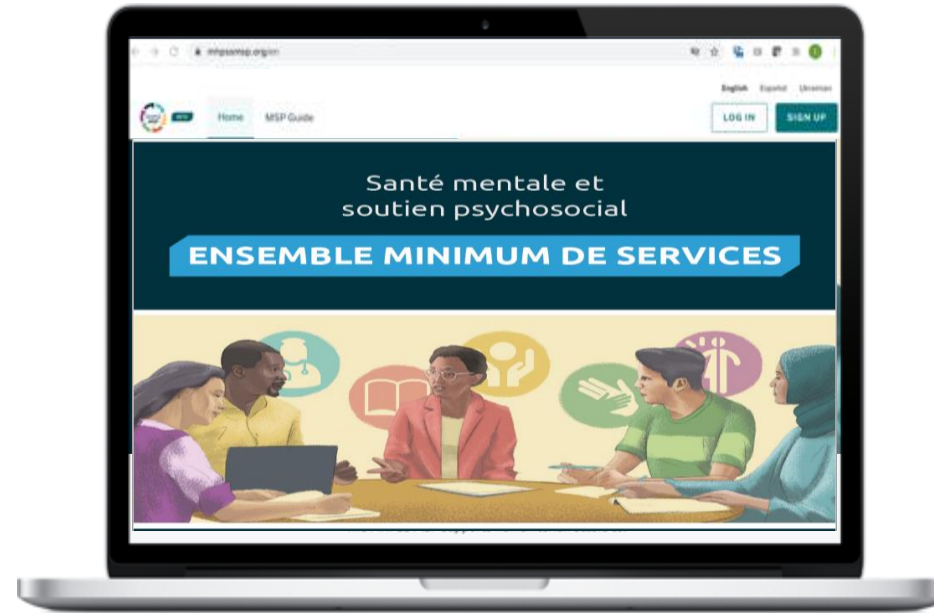
Chaque activité est accompagnée de plusieurs éléments :

- une brève description
- une liste de contrôle des actions à réaliser
- des actions complémentaires à considérer
- les principales directives et normes et les principaux outils
- la liste des postes budgétaires

CORE ACTIVITY	
Actions	
✓	
✓	
Additional actions for consideration (depending on context and available resources)	
✓	
✓	
Guidelines, standards and tools	
	Click here to access relevant guidelines, standards and tools.

Format de l'EMS

- Plateforme numérique interactive, accessible en ligne et format PDF
- Liens vers des conseils et outils de mise en œuvre
- Intègre un outil d'estimation des coûts et un outil d'analyse des lacunes



<https://mhpssmsp.org/en>

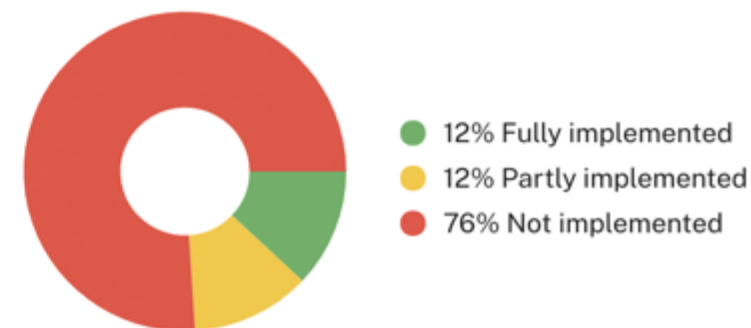
Outil - Gap analysis

But:

Fournir des informations sur la **couverture** des activités EMS et les **lacunes** dans les activités EMS (et leur évolution dans le temps)

24%
Implemented

Country: Switzerland
Geographical Region: Geneva
Analysis conducted: 09/2021



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

Outil d'établissement des coûts (en cours de développement)

- Pour calculer les coûts des activités EMS SMSPS
- Utile pour les coordonnateurs, les partenaires de mise en œuvre et les donateurs
- L'utilisateur saisit **des informations de base** (par exemple, le pays et le nombre de populations affectées)
- Les **estimations de coûts sont générées automatiquement** en fonction des données disponibles

Program personnel	Annual salary	Number of full time equivalent	Fringe benefit rate	% of resource used to Coordinate MHPSS Within and Between Sectors	Subtotal
International: MHPSS TWG co	100,000.00	1.0	28.0%	100.0%	128,000
International: Staff with MHP	70,000.00	0.0	28.0%	100.0%	-
International: MHPSS consulta	70,000.00	0.0	28.0%	100.0%	-
National: Staff with MHPSS te	24,000.00	0.0	16.0%	100.0%	-
National: MHPSS officer/coor	14,400.00	0.0	16.0%	100.0%	-
National: Outreach/incentive	5,000.00	0.0	16.0%	100.0%	-
Personnel lumpsum	-	1.0	0.0%	100.0%	-
Subtotal					128,000

Capital items	Unit cost	Quantity	% of resource used to Coordinate MHPSS Within and Between Sectors	Subtotal
Building construction (per squ	300.00	-	100.0%	-

1.1. Coordinate MHPSS within and between sectors

Human resources and materials needed	Notes
Full Time (100%) MHPSS Technical Working Group Co-Chair [Staff experienced in MHPSS in emergencies, international staff, P4 level]*	May be provided and budgeted by agencies as additional tasks of staff members (e.g. 2-3 part time staff co-chairs) or may need to be budgeted for as full-time staff position or as part of surge capacity mechanism
Copies and printing of relevant MHPSS materials and guidelines	
Possible additional resources needed	
Computer and email to send out announcements and resources to group members	
Translation during meetings/of meeting documents/of guidelines	If there is a significant language barrier to local actors/organizations participating
*If at least 15 actors are present who are planning or implementing MHPSS programs. 50% (of Full Time Equivalent/FTE) if there are fewer actors	

Pourquoi les acteurs de protection doivent-ils s'engager en SMSPS ?



Pourquoi les acteurs de protection doivent s'engager en SMSPS

- Équité: pas seulement pour les survivants de VBG ou les enfants “à risque” pour des problèmes SMSPS
- Renforcer les résultats de protection à travers la SMSPS
- Effet de responsabilisation/resilience (‘empowerment’) sur les populations affectées par les conflits



Engagement du HCR en EMS

- Protection
 - Favoriser l'intégration de la SMSPS dans la protection
 - Protection mainstreaming dans les EMS
- Renforcer l'optimalité des EMS dans le contexte des réfugiés

Le consultant protection a travers le GPC fait partie de l'équipe EMS

- Consultations avec les acteurs de protection
- Engagement des AdRs (VBG, MA)

Resultats:

- Les considérations sur la protection & les approches centrées sur le survivant sont intégrées
- Les aspects spécifiques de protection :
 - Safe spaces pour femmes et filles
 - Case management en Protection
 - Personnes privées de leur liberté

Questions ou commentaires





Merci !

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