

Point of view - Qualifications of ERU psychosocial support delegates

In 2008 the International Federation's Reference Centre for Psychosocial support developed an additional and optional component for the Health Emergency Response Unit (ERU). The activities undertaken within the ERU psychosocial support component will be managed by a delegate. The over-all task of the delegate is to facilitate the resilience, emotional and psychosocial well-being of the affected community-members, in collaboration with the host National Society, the local health authorities and ERU colleagues. To do this, a number of tasks are specified in the job description (see Annex) that has been developed. One core activity of the psychosocial delegate is to recruit, train and manage a group of local volunteers who conduct the activities for and with the beneficiaries.

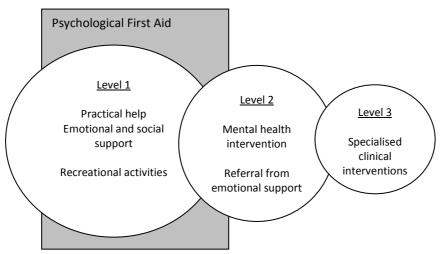
In the past, people with a range of professional backgrounds – from nurses, teachers and social workers to psychiatrists and psychologists—have been recruited to work as psychosocial delegates. The background of psychosocial delegates to undertake the ERU psychosocial work has been up for discussion. It has been expressed that in order to engage with the affected population (where a small proportion may need further attention by professional, i.e. referral), a skilled professional is needed to determine whether it is appropriate to initiate interaction with community members who potentially require professional attention.

The above standpoint would imply narrowing the delegate profile to only include psychiatrists and psychologists. From having been involved in recruiting and interacting with psychosocial delegates in the past, it is the experience of the PS Centre that being a psychologists or psychiatrists is not necessarily the only relevant background for psychosocial delegates. Being an effective and competent psychosocial delegate depends as much on previous experience and personal qualifications to engage and interact with colleagues, volunteers and community members. To ensure this, the job description, in addition to listing the professional requirements, states that:

"[The] delegate needs a strong public health background with *skills of training, diplomacy, cultural awareness and practical approach.* He/she must possess both the communication skills necessary to enable close collaboration with community leaders and representatives, as well as the pedagogical skills to transfer knowledge/skills to community volunteers that will actually conduct most of the activities.

Providing the affected community members with relevant and appropriate support is a key concern and attention must be paid that interaction by volunteers does not exceed the limits of psychological first aid which is the main vehicle for interaction between volunteers and affected community members.

Visually, the coverage of psychological first aid may be expressed in this way:



Adapted from Australian Red Cross community-based personal psychosocial support framework (2008)

Out of the defining principle of do-no-harm, and in order not to start processes for which there may be no closures, due to either lack of time or presence of relevant professional expertise, ERU psychosocial support activities stay in the first level of intervention. This warrants that activities may be lead by delegates who have a broader professional background and in addition have significant experience of implementing psychosocial support activities in emergency settings. Rather it a key concern that delegates have knowledge of different types of activities that may be conducted in each of the three levels.

It is the responsibility of the delegate to distinguish between the need for psychological first aid, which has the aim of providing practical and emotional assistance to affected community members, and mental health and clinical interventions that do not fall in the area of ERU psychosocial work and that are the responsibility of ERU clinical staff to attend to. And to convey this distinction in the trainings that are conducted with local volunteers.

There is a need to constantly monitor the levels of interaction between ERU delegates and affected community members and to clarify the practices for treatment and referral of people with chronic/on-going mental disorders. A concrete suggestion is to include this in the Health ERU manual which is under development, as it relates to the usage of the drugs available in the Interagency Emergency Health Kit which is currently being upgraded to include essential psychiatric drugs. The modes of interaction between clinical ERU staff and psychosocial delegates to ensure that the needs of community members are addressed at the appropriate level will be clarified in the standard operational procedures that are to be developed for this area.

Annex: Job description

International Federation of Red Cross and Red Crescent Societies Job Description – Emergency Response Unit

POSITION TITLE:

Psychosocial Delegate

- Basic Health Care and Field Hospital Emergency Response Unit (ERU) -

REPORTING TO: ERU Team leader

PURPOSE: The PS Delegate works to facilitate the resilience, emotional and psychosocial well-being of the affected population, in collaboration with the host NS, the local health authorities and ERU colleagues.

DUTIES Applicable to All

- 1. Work towards the achievement of Federation goals in the country/region of operation through effective managerial and lateral relations and teamwork
- 2. Ensure understanding of roles, responsibilities, lateral relationships and accountabilities
- 3. Perform other work related duties and responsibilities, as may be assigned by the supervisor.

Specific DUTIES Responsibilities AND accountabilities

These are the duties and accountabilities applicable to the ERU team members, within the ERU deployed in a Federation coordinated operation, and are complimentary to the specific tasks elaborated in the ERU deployment Order / Terms of Reference.

Standard Operating Procedures for Emergency response Units as agreed to by the deploying National Society apply.

- 1. To undertake professional duties under direction of the ERU Team leader
- 2. To plan and support basic psychosocial activities as part of the work of the ERU, together with the host National Society and/or local health authorities. This may include:
 - Set up the psychosocial component where appropriate in the vicinity of the ERU
 - Interface with ERU colleagues, agree on modes of collaboration and flow of patients through the clinic
 - Take part in health assessment activities with specific focus on psychosocial issues, mapping of resources and identification of gaps
 - Assess existing mental health/psychosocial resources and link up where necessary and possible
 - Interact with host National Society to identify volunteers to assist in running the psychosocial activities
 - Facilitate training of volunteers in psychological first aid and emotional support to affected groups and individuals
 - Instruct volunteers on how to organise games and play activities for children
 - Launch psychosocial activities
 - Organise outreach activities, e.g. community-awareness raising sessions and establishment of support groups

- Inform ERU team members on psychosocial issues, including psychosomatic, grief and extreme stress reactions that can occur within the affected population
- Liaise with local health authorities, WHO, UNICEF and others regarding psychosocial interventions and mental health care at e.g. cluster meetings if applicable
- Continuously asses, monitor and evaluate needs and activities, follow up when necessary
- 3. To provide regular and timely reports, to the ERU team leader
- 4. To work according of the SOP, to the Ministry of Health / WHO guidelines and meet standards as stated in the IASC Guidelines.¹
- 5. To support the capacity of the host National Society and develop skills where possible.
- 6. To interact and, if necessary advocate with the local authorities concerned in matters of mental health and psychosocial support

Lateral Relationships

- 1. Establish and ensure effective working relationships with the other ERUs and RC partners.
- 2. Ensure effective working relationships with National Society counterparts and leadership.
- 3. Ensure effective working relationships with technical and service departments at regional and

Geneva Secretariat level.

Person specification Required Preferred General In good mental & physical health Qualifications Basic Delegates Training Course or equivalent Professional qualification as a psychologist, social worker, nurse or \mathbf{X} teachers – multiple years field experience In addition, Delegate needs a strong public health background with skills of training, diplomacy, cultural awareness and practical approach. Must possess both the communication skills necessary to enable him/her to work closely with community leaders and representatives, as well as the pedagogical skills to transfer knowledge/skills to community volunteers that will actually conduct most of the activities. The delegate must have a holistic Public Health oriented approach to health in emergencies and related sectors with the view that culture, belief systems, established habits, attitudes, behaviour, and religion are to be respected and leveraged to facilitate improvements in the health of the public. Basic technical ERU training (health) \mathbf{X} Experience Experience of managing & supporting staff Experience of working for the Red Cross/Red Crescent Experience of planning and managing budgets X Experience of writing narrative & financial reports **Skills**

¹ IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings. IASC Geneva September 2007

Skills in training and developing staff		Preferred
	X	
Self-supporting in computers (Windows, spreadsheets, word-processing)	X	
Valid international driving licence (manual gears)	X	
Languages Intermediate Berlitz level 6	X	
English	X	
Core competencies - a high degree of competence in		
Commitment to the International Red Cross & Red Crescent Movement;	X	
integrity & personal conduct; sensitivity to diversity; flexibility &		
adaptability; proactivity; solution focused; decisiveness; accountability;		
teamwork; interpersonal skills; resilience		
Management competencies * - a high degree of competence in		
Management of strategy; management of change; leadership; planning;		X
management of budgets; management of resources; monitoring;		
supervision and control; reporting; communication; networking;		
management of self; management of others; inspiring others; forming		
vision; organisation building;		