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International Red Cross and Red Crescent Movement Resolution “Addressing mental health and psychosocial needs of people affected by armed conflicts, natural disasters and other emergencies”

PROGRESS REPORT

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PROGRESS REPORT

International Red Cross and Red Crescent Movement Resolution “Addressing mental health and psychosocial needs of people affected by armed conflicts, natural disasters and other emergencies”

EXECUTIVE SUMMARY

In December 2019, the International Red Cross and Red Crescent Movement adopted a **set of commitments** addressing mental health and psychosocial needs. These commitments are set out in [Resolution 2](#) of the 33rd International Conference of the Red Cross and Red Crescent (International Conference) and [Resolution 5](#) of the 2019 Council of Delegates, which includes the Movement policy on addressing mental health and psychosocial needs.

The policy and resolutions have been operationalized into a [Roadmap for implementation](#) which identifies six priority action areas and outlines the outputs and outcomes expected by 2024. Five working groups (WGs) were established and implemented activities focusing on specific areas of mental health and psychosocial support (MHPSS). Priority Action Areas 5 and 6 were merged into one given that they are closely connected. The five WGs started their activities in 2021, with around 120 National Red Cross and Red Crescent Societies (National Societies), the International Committee of the Red Cross (ICRC) and the International Federation of Red Cross and Red Crescent Societies (IFRC) co-leading and/or participating in one or more of them. Since 2021, the WGs have enabled the Movement components to share knowledge, lessons learnt and experience gained from MHPSS activities across the world, and their members have highlighted how this has led to improved collaboration and alignment and increased focus on MHPSS internally and with their governments. WG members and National Societies acting as WG co-leads have expressed the wish to continue such thematic spaces within the Movement MHPSS Hub soon to be launched.

A range of tools, resources and training materials have been developed. This involved, among other things, defining the components of what a mandatory training course on basic psychosocial support should look like, creating a proposed menu of tools and resources to support National Societies in carrying out assessments, monitoring and evaluation (M&E) and research and developing training content for managers and leaders on how to promote the mental health and psychosocial well-being of staff and volunteers. Looking beyond 2024, the recommendation is to continue the **roll-out and dissemination** of the tools, resources and training and to build on the lessons learnt from the Roadmap project. Furthermore, efforts to strengthen MHPSS across the Movement components must include a special emphasis on ensuring the **integration** of MHPSS into the working procedures of other technical sectors and Movement components’ systems and processes through **increased tangible political support and internal and external advocacy efforts.**

1) INTRODUCTION

Mental health and psychosocial well-being are **critical to the survival, recovery and daily functioning** of people affected by armed conflicts, natural disasters and other emergencies. There is **clear evidence** that unmet mental health and psychosocial needs have far-reaching and long-term negative human, social and economic impacts, which affect individuals, communities and society as a whole, and that action by all Movement components and States

to meet these needs is critical to achieving universal health coverage and the Sustainable Development Goals.

The [2023 Movement MHPSS survey](#) shows a positive trend, indicating that Movement components are increasingly providing MHPSS services in emergencies, that they can refer people to more specialized mental health services and that the majority of them intend to expand their MHPSS activities. However, the lack of funding continues to be highlighted as the most significant challenge. The survey data also show a marked increase in the number of Movement component psychologists, psychiatrists and social workers and more than a doubling in the number of staff and volunteers trained in psychological first aid, compared to 2021.

While mental health and psychosocial well-being has become a more visible issue and a priority among States and Movement components, the gap between needs and available resources is still high. With this progress report, we underline the need for us to continue efforts to meet mental health and psychosocial needs and maintain MHPSS as a priority on the political agenda and for investment by States Parties.

2) BACKGROUND

In December 2019, the Movement adopted a set of commitments addressing mental health and psychosocial needs. These commitments are set out in Resolution 2 of the 33rd International Conference (Resolution 2) and Resolution 5 of the 2019 Council of Delegates (Resolution 5), which includes the Movement policy on addressing mental health and psychosocial needs.

3) ANALYSIS/PROGRESS

The aforementioned commitments have been operationalized into a **Roadmap for implementation**, with a view to strengthening the Movement's collective response to mental health and psychosocial needs, in line with the policy and resolutions, and continuing to encourage States to undertake the commitments adopted in [Resolution 2](#). The Roadmap supports a **strategic and coordinated approach** to implementation and identifies **six priority action areas**. It sets out key activities for National Societies, the ICRC and the IFRC and for the Movement as a whole and outlines the outputs and outcomes expected by 2024 and beyond. Five WGs were established by a number of National Societies, the ICRC and the IFRC to support overall Movement commitment to Roadmap implementation. Priority Action Areas 5 and 6 were merged given that they are closely connected.

Many Movement components committed to supporting the roll-out of the Roadmap project between 2020 and 2024, **with representatives of more than 120 National Societies, the ICRC and the IFRC from all regions** participating. This **report** for the 34th International Conference takes stock of the progress made in fulfilling the commitments and ambitions in the period between the last progress report, submitted to the Council of Delegates in 2022, and June 2024.

Priority Action Area 1: Guarantee a basic level of psychosocial support and integrate mental health and psychosocial support across sectors

Priority Action Area 1 has consolidated the [resources](#) produced over the past two years to enable the integration of MHPSS into all the Movement's activities. Specifically, this involved the mapping of a) basic psychosocial support training, b) basic assessment and preparedness tools, c) resources to reduce mental health stigma and d) targeted stakeholders and contacts

across the Movement components to disseminate resources and advocate for the integration of MHPSS.

Tools to promote the understanding and integration of basic MHPSS were developed and disseminated, reaching audiences familiar and unfamiliar with MHPSS services. Furthermore, [key messages for four key areas](#) (disaster management, protection, gender and inclusion, Restoring Family Links and first aid) were developed through a consultative process.

Additionally, a consultation was conducted with Movement components to identify lessons learnt on the integration of MHPSS in different sectors across the world, and this knowledge was shared with the wider Movement community for the purposes of consultation and inspiration.

Priority Action Area 2: Develop a holistic MHPSS approach between Movement components and in collaboration with other actors

Priority Action Area 2 focused on six operational contexts; Yemen, Syria, Iraq, Ukraine, COVID-19 peer-to-peer support and emergency response in Colombia. [Resources developed](#) throughout the project will support National Societies, the ICRC and the IFRC in continuing to develop comprehensive and complementary activities across the spectrum of the Movement's MHPSS framework. [A webinar](#) showcased the lessons learnt report on coordination and collaboration and the documents *Integrated Response based on the Movement MHPSS Framework*, *Memorandum of Understanding for operational partnership* and *Project document template for the integration of MHPSS on a more technical level*.

New contexts found these resources to be useful. In Mali, for example, the documents have been used to guide a holistic approach to MHPSS, resulting in a tripartite agreement between the Mali Red Cross, the ICRC and the Danish Red Cross. The agreement aims to ensure comprehensive and complementary activities across the spectrum of the Movement's MHPSS framework. Furthermore, the documents supported conversations to build collaboration on comprehensive and complementary activities between Movement components in Niger, Kenya, Nepal and Syria as well as in the MHPSS communities of practice in Africa.

Priority Action Area 3: Protect and promote the mental health and psychosocial well-being of staff and volunteers

While increasing the number of MHPSS focal points was recognized as a priority, so too was the need to increase the knowledge and capacity of managers and leaders. This led to the development of a new e-learning module [It Starts with You – Promoting Mental Health and Wellbeing as a Manager](#), launched in 2023. The course, available in Arabic, English, French and Spanish, allows managers and leaders to access practical tools and real-life insights to help them promote mental health within their teams. It also features a self-assessment and a comprehensive toolbox for managerial support. Course participation (5,208 starts), the completion rate (1,564 people have completed the full course) and the geographical reach (208 locations) highlighted the great need for and interest in the module.

Alongside the e-learning course, a toolkit was created to assist managers and leaders in establishing and maintaining supportive systems for a mentally healthy workplace. The priority action area aims to develop a facilitator package, focusing on raising mental health awareness, identifying stressors, fostering supportive environments and creating actionable plans.

Priority Action Area 4: Demonstrate the impact of MHPSS activities through research, evidence, monitoring and evaluation

Two research activities were commissioned during the reporting period (1) to better understand the challenges and factors involved in conducting monitoring, research and evaluation of

MHPSS services and (2) to develop recommendations on how to better demonstrate the impact of MHPSS services.

A research consultancy collected data from 15 National Societies, key informant interviews and a literature review of the [2019, 2021 and 2023 MHPSS surveys](#). A report was published, along with an MHPSS Evidence-Building Toolkit, to help Movement components conduct more effective monitoring, research and evaluation (particularly for core activities such as psychological first aid carried out by a large number of National Societies). [The key findings and the toolkit](#) were presented at the 2023 Research Carnival, hosted by the Red Cross Red Crescent Research Network, and were disseminated via a podcast and webinar. A subgroup was created and linked to the [Digital MHPSS Pledge](#). All results and deliverables can be found here: [Digital MHPSS in the Movement](#).

Through a partnership with the University of Bern, research was further conducted on identifying the challenges faced by National Societies, specifically with regard to MHPSS M&E and the factors that facilitate the implementation of M&E frameworks.

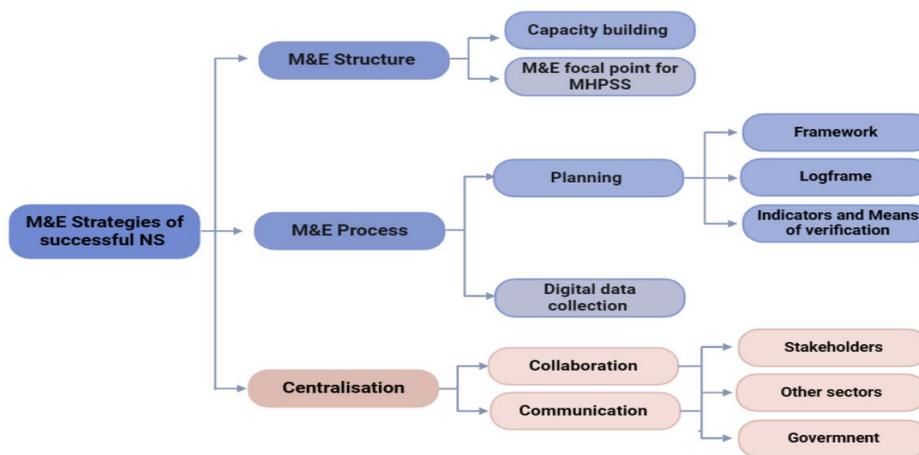


Figure: M&E strategies of successful National Societies (Source: [Mapping the Path: Navigating Monitoring and Evaluation Challenges and Solutions in MHPSS across Red Cross National Societies](#), p. 45)

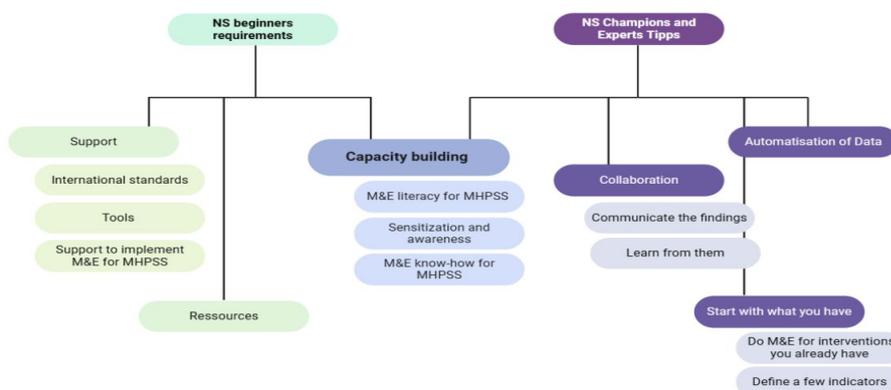


Figure: Addressing M&E needs (Source: [Mapping the Path: Navigating Monitoring and Evaluation Challenges and Solutions in MHPSS across Red Cross National Societies](#), p. 47)

Four webinars were conducted on topics identified by the research: [Assessments, Cultural Adaptation, Monitoring and Evaluation, and Research](#). Each webinar had 50 to 100

participants, was co-presented by a Movement component (National Society, the ICRC and/or the IFRC) and an external partner and was translated into Arabic, French and Spanish.

Priority Action Area 5: Strengthen resource mobilization for MHPSS in humanitarian response

In the donor landscape, we discern a more explicit focus on MHPSS among both institutional and private donors. For example, the governments of the Netherlands, Canada and Denmark, the European Commission's Civil Protection and Humanitarian Aid Operations department (ECHO) and USAID specifically mention mental health and psychosocial well-being as a priority in their humanitarian strategy, and the charitable foundation Welcome Trust in the United Kingdom has mental health as one of its three priority focus areas. In relation to the Movement specifically, the European Commission's Directorate-General for Health and Food Safety (DG SANTE) has invested significantly in Movement initiatives since 2022 to offer MHPSS services across 27 countries in response to the Ukraine crisis.

"Today, the IFRC network in Europe is running its biggest mental health response in history [...] This reminded me of where we were four years ago in February 2019, and the fantastic journey and mobilization that we have been part of."

Dick Clomén, Head of Humanitarian Diplomacy, Liaison,
Communications & Regional Support, Regional Office for Europe,
IFRC

As a concluding contribution to the MHPSS Roadmap structures, a consultancy has been commissioned to increase and strengthen resource mobilization for MHPSS in the Movement and to provide recommendations for relevant strategies, including how to position MHPSS in internal Movement resource mobilization structures and how to position the Movement and MHPSS vis-à-vis major donors.

Priority Action Area 6: Mobilize political support for MHPSS – humanitarian diplomacy and advocacy

The Movement engages in humanitarian diplomacy to ensure that States and other actors address mental health and psychosocial needs, and it is involved in the development of international standards and practices to ensure quality of care in very challenging circumstances. The Red Cross EU Office, representing the 27 National Red Cross Societies of European Union countries, the Norwegian Red Cross, the Icelandic Red Cross and the IFRC advocated to the European Commission, using key observations and recommendations on the Roadmap, on the need for a comprehensive approach to mental health. States have the primary responsibility to respond to the mental health and psychosocial needs of people in their territory; the components of the Movement have important complementary and supportive roles, including the auxiliary role of National Societies.

Movement components have, since 2022, come together and coordinated their participation and key messages around MHPSS at various events and across networks. National Societies involved in the Roadmap project have played an outstanding role in establishing [the MHPSS Nordic Network and Conferences](#), bringing together representatives of more than 60 actors across Movement components, governments, UN agencies, academia, private foundations and other non-Movement civil society organizations at the first conference in Copenhagen (2022) and subsequently in Malmö (2024). The Copenhagen Conference resulted in the launch of a regional Nordic network on MHPSS and the adoption of the 2022 Declaration on MHPSS.

Other advocacy efforts in the Europe region have included presentations and discussions on the MHPSS Roadmap, Policy and Resolution at the annual meetings of the European MHPSS

Network, with 54 National Societies attending in 2022 and 2023. In 2022, Roadmap actors co-hosted an MHPSS side event at the European Humanitarian Forum and spoke at the Global Mental Health Summit (GMHS) in Rome, and the Roadmap project was presented at the Red Cross and Red Crescent Research Consortium global annual workshop held in Türkiye in 2023.

Outside the Europe region, various MHPSS initiatives took place. Movement components from the Americas region spoke at the GMHS in Buenos Aires (2023) and, together with the Government of the Netherlands, organized a thematic session on the topic of MHPSS in crises across the world. In addition, in South Africa, in 2024, National Societies from the Africa region, the ICRC and the IFRC started drafting an MHPSS 2030 Africa Region Roadmap to implement the MHPSS Policy, inspired by the global Roadmap process.

4) CONCLUSION AND RECOMMENDATIONS

The MHPSS Resolution, Policy and Roadmap were used to strengthen the implementation of MHPSS within the Movement and across States. The Roadmap project created a platform for advocating for people's mental health and psychosocial needs, both in terms of access to services and recognition of the need to increase funding, capacity-building and knowledge-sharing to improve MHPSS services.

Tangible political support needs to be increased by senior and middle managers across the Movement components in order for MHPSS to feature in all activities, be adequately funded and be included in global and regional coordination across all sectors. Strong advocacy is required from everyone in leadership positions to ensure MHPSS is included across all the resources and activities of the Movement and States. This is underpinned by the following recommendations:

- **Integrate MHPSS in Movement components and structures:** Integration relies on the cooperation of all Movement components. It is strengthened through collaborative processes and systems that ensure the visibility and clarity of the MHPSS services offered. MHPSS should encompass a holistic approach and be integrated into different sectors to ensure a more meaningful and wider reach. It is necessary to assess and monitor mental health and psychosocial needs, use the resources and documents produced by the WGs and prioritize evidence-building in order to advocate for the effectiveness of MHPSS across all activities.
- **Build on the efforts undertaken to address the priority action areas:** Resources and tools were developed to directly overcome the common challenges identified by Movement actors. These should be absorbed into the future Movement MHPSS Hub and be used to guide frameworks and policies to better meet mental health and psychosocial needs. In addition, the regional MHPSS networks and communities of practice that were established should be utilized to strengthen and advocate for the prioritization of MHPSS within the Movement. This also includes recognizing contextually relevant responses and efforts, such as culturally appropriate responses, tools and resources available in multiple languages for more regional engagement.
- **Expand the accessibility of training:** This involves ensuring that MHPSS resources and training products are translated into a wide range of languages and are freely available online and that there are comprehensive data tracking and feedback mechanisms.
- **Advocate for mental health in the workplace:** Given the success of e-learning for management and leadership and the importance of the topic, it is important to encourage uptake of such training by all managers and leaders. This also involves expanding the accessibility of the training programmes by adapting the resources to suit different cultural and organizational contexts within the Movement.
- **Increase the visibility and active role of MHPSS focal points in Movement components** through regular training and engagement activities, including the

promotion and protection of the mental health and psychosocial well-being of staff and volunteers. These focal points should be equipped with the tools and knowledge required to advocate for services, funding and the integration of MHPSS across different sectors.

- **Establish robust systems to support and ensure accountability for the mental health and well-being of staff and volunteers across Movement components:** The increased risk of adverse mental health conditions among volunteers and staff should be acknowledged by treating their well-being as a priority in all Movement components. This entails a serious commitment to fulfilling the duty of care to staff and volunteers, which includes providing them with the necessary skills, tools and supervision to manage and address their mental health and psychosocial needs and ensuring that they have access to external services.

The following steps are recommended for States:

- **Increase funding** and the inclusion of budget lines for workforce well-being and capacity-building in proposals and appeals.
- **Recognize the need for MHPSS for staff and volunteers and integrate it into national health and emergency response frameworks:** This involves encouraging States to collaborate closely with the relevant Movement component to develop and enforce policies that support the mental health and well-being of staff and volunteers. This collaboration should focus on establishing sustainable MHPSS systems, ensuring adequate resource allocation and creating legislative environments that prioritize the mental health of those involved in humanitarian services. This recommendation is further stipulated in the newly approved MHPSS resolution signed at the World Health Assembly (May 2024), which calls for integrated, quality mental health services which are accessible to all, particularly in fragile and conflict-affected areas.
- **Continue to highlight the importance of mental health and psychosocial needs and MHPSS services:** This includes working with National Societies to respond to mental health and psychosocial needs and incorporating MHPSS into national policies, which involves ensuring there is an MHPSS component in domestic and international emergency response systems, including disaster laws, preparedness plans and emergency response coordination mechanisms, and calling upon the components of the Movement, particularly National Societies, to support this effort in accordance with their respective mandates. It also includes building the capacities of the MHPSS workforce so that they have the competencies and ongoing support required to deliver effective and impactful MHPSS resources and activities.
- **Encourage States to follow and implement the recommendations of the World Health Assembly resolution “Strengthening mental health and psychosocial support before, during and after armed conflicts, natural and human-caused disasters and health and other emergencies” (A77/A/CONF./11).**

A Movement MHPSS Hub will be launched in 2025 to support the Movement components in making progress in effectively promoting, preventing and responding to mental health and psychosocial needs globally, with the ambition of making MHPSS a right for everyone, alleviating human suffering and promoting the mental health, psychosocial well-being and resilience of individuals (including volunteers and staff) and communities at all times, in accordance with the Movement MHPSS Resolution and Policy on addressing mental health and psychosocial needs.

It is necessary to build on the work of the thematic WGs established and the knowledge gained from the Roadmap project to continue to increase the Movement’s ability to address the mental health and psychosocial needs of people affected by armed conflicts, natural disasters and other emergencies. The MHPSS Hub is an opportunity to leverage the gains made by the Roadmap project, while further efforts are required to ensure that National Societies are equipped to lead MHPSS activities and policy implementation.