Definitions of MHPSS interventions and activities

- **COMMUNITY BASED PSYCHOSOCIAL SUPPORT**
  Community based psychosocial support is focused on enhancing the resilience of communities.
  “The term ‘community-based’ does not in fact refer to the physical location of activities. Rather it stresses that the approach strives to involve the community itself as much as possible in the planning, implementation, monitoring and evaluation of the response. It is an approach that encourages the affected community to gain ownership of and take responsibility for the responses to their challenges. Community participation and mobilisation is therefore an integral aspect of a community-based approach.” (IFRC, 2009a, p. 43)

- **MENTAL HEALTH**
  A state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, and can work productively and is able to make a contribution to his or her community. In this positive sense, mental health is the foundation for individual wellbeing and the effective functioning of a community

- **PSYCHOSOCIAL**
  The term psychosocial is often used in the field of humanitarian response to “emphasize the close connection between psychological aspects of experience and wider social aspects of experience, inclusive of human capacity, social ecology, and culture and values.” Psychosocial interventions are designed to address the psychological effects of conflict, including the effects on behavior, emotion, thoughts, memory and functioning, and social effects, including changes in relationships, social support and economic status.
  The word psychosocial refers to the two-way relation between psychological factors (the way an individual feels, thinks and acts) and social factors (related to the environment or context in which the person lives: the family the community, the state, religion, culture)
  (UNHCR’s mental health and psychosocial support for Persons of Concern, 2013, P15)

- **MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT (MHPSS)**
  Mental health and psychosocial support are “any type of local or outside support that aims to protect or promote psychosocial well-being and/or prevent or treat mental disorder”. (IASC, 2007, p. 1)
• **PSYCHOSOCIAL SUPPORT**

Psychosocial support (PSS) is an umbrella approach, following the intervention principles named by Hobfoll et al. (2007) with the aim of promoting resilience of individuals, groups and communities in crisis. Psychosocial support includes a broad variety of interventions promoting the resources of individuals, families or groups as well as the community as a whole. It can prevent distress and suffering from developing into something more severe as it aims to help overcome adversities, stimulate recovery processes and restore (a new form of) normality after crisis.

Psychosocial support activities range from:

- Psychological first aid in immediate phase after emergencies or other critical events to
- Psychoeducation
- Individually provided treatment and support programmes
- Family & community support after crisis
- More focused non-specialised services.

Psychosocial support includes all processes and actions that promote the holistic well-being of people in their social world. It includes support provided by family, friends and the wider community. It includes what people (individuals, families and communities) do themselves to protect their psychosocial well-being, and the interventions by outsiders to serve the psychological, social, emotional and practical needs of individuals, families, and communities, with the goal of protecting, promoting and improving psychosocial well-being.

(UNICEF, 2011)

• **PSYCHOSOCIAL APPROACH**

Is defined as “a way to engage with and analyze a situation, build an intervention, and provide a response, taking into account both psychological and social elements, as well as their interrelation.”

(UNHCR’s mental health and psychosocial support for Persons of Concern, 2013, P19)

• **PSYCHOSOCIAL INTERVENTION**

Is defined as “composed of one or several activities that aims to increase the coping capacity of children, families and communities, and to reinforce their integration within society.”

(UNHCR’s mental health and psychosocial support for Persons of Concern, 2013, P19)

• **PSYCHOEDUCATION**

Psychoeducation refers to the provision of knowledge and skills to a given target group which involves teaching and exchange of relevant information that can be done in a broad variety of ways. Psychoeducation means the provision of information to the affected persons and
groups as well as the initiation of a dialogue about the nature of stress, posttraumatic and other symptoms, and what to do about them. The provision of psychoeducation can occur before possible exposure to stressful situations or after exposure. The intention is to ameliorate or mitigate the effects of exposure to extreme situations. Educational information can be imparted in a number of ways and should – whenever possible – not be given only as one way information but also in the form of a dialogue. It may include the provision of knowledge as well as the training of skills. Interventions may involve discussion groups, briefings, informational leaflets, dialogue with peers, possibilities for dialogue and answers to FAQ in the Internet and many others (Wessely, S. Bryant, R.A., Greenberg, N. Earnshaw, M. Sharpley, J., Hacker J. Hughes, J. 2008, p. 287)

- **PUBLIC AWARENESS (AWARENESS RAISING)**

Public awareness is “the extent of common knowledge about disaster risks, the factors that lead to disasters and the actions that can be taken individually and collectively to reduce exposure and vulnerability to hazards. Comment: Public awareness is a key factor in effective disaster risk reduction. Its development is pursued, for example, through the development and dissemination of information through media and educational channels, the establishment of information centres, networks, and community or participation actions, and advocacy by senior public officials and community leaders.” (UNISDR, 2009, p. 22-23)

- **WELL-BEING**

“Well-being refers to the condition of holistic health and the process of achieving this condition. Well-being has physical, cognitive, emotional, social and spiritual dimensions. The concept includes ‘what is good for a person’ such a participating in meaningful social roles, feeling happy and hopeful, living according to good values as locally defined, having positive social relations and a supportive environment, coping with challenges through the use of healthy coping mechanisms, having security, protection and access to quality services and employing.” (UNHCR, 2013 p. 78)

- **PSS CASE MANAGEMENT**

Is collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy in the interest of developing options and services to meet PoC’s comprehensive needs through communication and available resources to promote quality, cost-effective outcomes; Case management areas are many and varied and they are not specified only with one field.
• **PSS CASE MANAGER:**

The educational background is psychology or psychological counseling, PSS case manager is able to put an initial diagnosis, referring cases to available services, following up with them, and working on empowering individuals, families and community’s resources.

• **PSYCHIATRIST**

A physician specialised in the prevention, diagnosis and treatment of mental illness. A psychiatrist commonly utilises medications to treat mental illness, and is in charge of medication management.

• **PSYCHOTHERAPIST:**

A professional specialised in the prevention, diagnosis and non-medical therapeutic treatment of mental illness. A psychologist commonly uses therapy to treat mental illness.

• **MULTI-DISCIPLINARY TREATMENT TEAMS**

A treatment team and program that involves Psychiatrists, psychotherapists, and PSS case managers, therefore integrating medication, and therapy, case management and support.

• **PSYCHOTHERAPY:**

An intentional interpersonal relationship between a trained professional and a POC with the goal of increasing the POC’s sense of wellbeing and ability to function in the world.

• **INDIVIDUAL PSYCHOLOGICAL COUNSELING:**

It depends on beneficiary-focused approach, and helps those reaching appropriate solutions for their problems that are based on available resources, and strength points to control the psychological situations and increase the ability of coping.

It is a general practice provider specialty in professional psychology. It focuses on how people function both personally and in their relationships at all ages. Counseling psychology addresses the emotional, social, work, school and physical health concerns people may have at different stages in their lives, focusing on typical life stresses and more severe issues with which people may struggle as individuals and as a part of families, groups and organizations. Counseling psychologists help people with physical, emotional and mental health issues improve their sense of well-being, alleviate feelings of distress and resolve crises. They also provide assessment, diagnosis, and treatment of more severe psychological symptoms.

• **PSYCHOLOGICAL FIRST AID**

Is an element of psychosocial support that can be effectively applied by trained lay-people including volunteers but is also used by professionals. According to Sphere (2011) and IASC (2007), Psychological First Aid (PFA) describes a human, supportive response to a fellow human being who is suffering and who may need psychosocial support. PFA is an established intervention format that generally contains the following elements

• Providing practical care and support, which does not intrude;
• Assessing needs and concerns;
• Helping people to address basic needs (for example, food and water, information);
• Listening to people, but not pressuring them to talk;
• Comforting people and helping them to feel calm;
• Helping people connect to information, services and social supports;
• Protecting people from further harm.

(Who, 2011, p. 3)

• **STRUCTURED PSS GROUP SESSIONS**

It is usually comprised of 6-8 people who meet face to face with 1 or 2 trained facilitators (usually PSS case managers) and talk about what is concerning them, members listen to each other and openly provide each other feedback. These interactions give members an opportunity to increase understanding, try out new ways of being with others and learn more about the ways they interact. The content of the group sessions is confidential; members agree not to identify other members or their concerns outside of group.

(https://counseling.appstate.edu/pagesmith/158)

Examples of these types of activities:

1. Support group for families with psychiatric patients
2. Support group for families with a disabled child
3. Support group for families suffering a member loss
4. Parenting skills program: 6-12 discussion sessions for small groups of parents.
5. Stress management for different age groups (each age group)
6. Support group for Anger management (especially in domestic violence cases)
7. Support group for adolescents with a common behavioral problem
8. Support group for families with an elderly with Alzheimer or Parkinson
• **LAY COUNSELING**

A key activity in many humanitarian organizations is support to individuals in crisis provided by trained lay counsellors. It is likely to consist of active listening, information sharing, and support to make informed decisions, all with the objective of empowering the individual to cope with stressful and critical situations. If a person needs professional help, the lay counsellor can also assist with referral to the relevant specialists (psychologists, therapists, etc.) or services (social, legal, etc.).

*(Lay counseling, IFRC)*

• **SOFT PSS ACTIVITIES**

Soft psycho-social activities, are type of activities that target different beneficiaries from all age groups, gender, and cultural background. These kind of activities are implemented to serve PSS goals and objectives. In one hand these activities are tools for beneficiaries to express their emotions, and thoughts, in another hand they are tools for PSS facilitators to identify mild, moderate and severe cases that need more focused psychological services.

Ideally, soft PSS activities are designed and implemented by psychologists inside community centers, child friendly spaces, shelters, or at any appropriate place.

Soft PSS activities used as psychosocial interventions, such as (art, drawing, dancing, psychodrama...) aim to relaxation relief from inner tension, give opportunities to use gross motor skills, which also helps to let go of inner tension, increase the ability to deal with different types of reactions, especially hypervigilance, isolation and aggression, increase the awareness of personal identity and own individual characteristics, build a positive self-esteem, regain a sense of being able to influence the events in their life through own capabilities, increase communication, increase ability to express thoughts and feelings in a positive way, and develop good social communication skills, both in nonverbal and verbal language.

Types of soft PSS activities:

* Silent story telling: Drawing pictures or making sculpture about the difficult event;
* Writing the story about the difficult event and then reading the story to the group;
* Reading favorite stories or poems out loud to the group;
* Singing favorite songs out loud in a group;
* Playing games which let them really move all their big body muscles;
* Using movement, music and drama games to tell the story of the difficult event;
* Doing activities that challenge the survivor’s physical ability to balance;
* Doing activities that challenge the survivor’s mental ability to solve fun problems.
• **PEER SUPPORT**

Peer support groups is a structured activity where you can discuss day-to-day problems with other people who have been through the same problems. Support groups have not been shown to reduce the problems, but they can help you feel better in other ways. Because they can give you a sense of connection to other people, a peer support group could be a great addition to your treatment. Support groups can also help family members or friends who are caring for the person of concern.

• **DRAMA GAMES ACTIVITIES**

Drama games are drama exercises aimed at practicing the elements necessary for recovery from trauma, such as countering the pervasive sense of powerlessness, emotional fear or numbing, isolation and disconnection. Drama games can be very useful in helping the natural recovery processes and supporting playful activities after difficult circumstances.

One of the common effects of extremely threatening circumstances, for youth and adults, is the resulting sense that one has lost control of their live, meaning that one feels powerless in their life, as if they have no personal control over the events taking place. So it appears to them that events simply happen to them and they have no ability to shape the events, their relationships, or their future. Therefore there may be no point in trying to plan for the future or to imagine an outcome that they could control.

The drama games focus on relocating control away from the outside world to and back into our personal world. We encourage youth to become the directors of their fate, to use their imagination to create and practice an outcome that they have personal control over.

This will usually allow them to begin developing their own personal rules to help them recognize, make sense of, and control their emotional responses to external events.

Drama games allow youth to experience their feelings without being overwhelmed by those feelings, to make sense of those feelings, and to continue to act with a sense of power and control even when they have very strong feelings.

Importantly, the drama games are a group activity. They require a great deal of cooperation and interaction among group members. We are using the language of relationships to share experiences with one another and to counter the sense of isolation and disconnection that exposure to trauma often elicits. The drama games constantly focus children’s attention on how they are related to other children and adults around them, on how they are connected
to the world and how those connections may be influenced by their individual choices. The connections among group members are often physical as well as emotional and each exercise is followed by a group processing time when group members can share with others what the experience going through the exercise felt like. The drama games may be very effective after traumatic exposure because they are fun to participate in, they utilize non-verbal expression, and they create a shared experience, drawing the group members closer together while offering individuals the ability to control those connections.

It is critically important that the Group Leader provide time and supervision after each drama game exercise for all the participants to verbally share their impressions and thoughts about their participation in the drama game. This must always be offered to each participant before moving on to the next activity.

(Psychosocial Play and Activity Book For Children and Youth Exposed to Difficult Circumstances, UNICEF, 2002)

- **COGNITIVE BEHAVIOR THERAPY**

It is a short-term, goal-oriented psychotherapy treatment that takes a hands-on, practical approach to problem-solving. Its goal is to change patterns of thinking or behavior that are behind people's difficulties, and so change the way they feel.

It is implemented by psychotherapist.