



# **Impact Study: The role of Psychological First Aid in the IFRC Ukraine MHPSS response**

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## Foreword

Red Cross Red Crescent National Societies across Europe have been providing support to people displaced from Ukraine since the start of the International Armed Conflict in Ukrainian in February 2022. This has included an array of care from basic services such as access to health services and Water, sanitation and Hygiene (WASH) to more specialized services.

There has been an increased need to provide Mental Health and Psychosocial Support MHPSS services to people displaced from Ukraine. In response to this need, National Societies have been committed to integrating and implementing Psychological First Aid (PFA) within their Ukraine Response to provide Psychosocial support and to ensure displaced Ukrainians receive the adequate services.

This study conducted by the IFRC PS Centre within the context of the IFRC emergency responses to the Ukraine and impacted countries crises. This response entails multiple fundings and technical support by Partner National Societies (PNSs), International Federation of the Red Cross (IFRC), IFRC Reference Centres and Regional Offices. Combined with this, the EU4Health (EU4H) project funded by the European Union and under the European Commission's Directorate-General for Health and Food Safety (DG Sante) in partnership with IFRC aims to provide PFA and mental health services to conflict-affected populations in Ukraine and displaced people from Ukraine in 24 EU and EEA countries.

This is the first instance of a coordinated, unified effort to apply Psychological First Aid (PFA) across various contexts, addressing the needs of individuals displaced from Ukraine. This study aims to highlight the opportunities, strengths, challenges, and gaps in such a unified effort to integrate PFA into National Societies' Ukraine Response.

The objectives of this study are to map and document the process of PFA implementation, review the methods employed, understand the role of PFA in the broader context of National Societies' responses, and evaluate its potential sustainability and wider impact. By delving into the challenges, gaps, strengths, and lessons learned, this study seeks to provide valuable insights that can inform future MHPSS responses to emergencies.

The IFRC Regional Office of Europe acknowledges the invaluable contributions of National Societies, staff and volunteers, who have played a pivotal role in the delivery of mental health and psychosocial support. Their dedication and adaptability have been instrumental in shaping the trajectory of this response.

The IFRC Regional Office of Europe hope is that the study will not only shed light on the successes and challenges of implementing PFA but will also serve as a guide for future endeavors. Our collective commitment to the well-being of individuals affected by crises is unwavering, and this study is a testament to the collaborative spirit that defines the Red Cross and Red Crescent movement.

IFRC Regional Office of Europe

## Executive Summary

Red Cross National Societies across Europe have been responding to the needs of displaced people from Ukraine. For some, part of their response has been the integration of PFA to meet the mental health and psychosocial needs of the target population. PFA has been used to support the implementation of services as well as to directly provide MHPSS to displaced people from Ukrainians. PFA is an evidence informed approach that is widely acknowledged as an approach that is effective in reducing distress and supporting recovery. Even so, it is challenging to measure the direct impact of PFA and because of this the study focused rather on what the impact of integrating and institutionalising PFA is within National Societies.

The goal of the study is to map how PFA has been used and identify its wider institutional impact within the general context of National Societies Ukraine Response. The study maps out the challenges, gaps and successes of institutionalising PFA while identifying the correlating factors which shaped the roll out and integration of PFA.

To do this the study adopted a case study approach of seven National Societies, Red Cross of Montenegro, Bulgarian Red Cross, Ukrainian Red Cross Society, Romanian Red Cross, Lithuanian Red Cross Society, Polish Red Cross and Slovak Red Cross. These National Societies were selected as they were each at different stages of implementation and were willing to participate and facilitate in person or online data collection within the allocated timeframe of the study.

Using both qualitative and quantitative methodology, focus group discussions and Key Informant Interviews took place with those who had been trained in PFA, were implementing PFA and/or were directly working with Ukrainians. In addition, an online survey was shared with National Society staff and volunteers. Data collection tools were designed to understand the conceptualisation of PFA, the challenges, gaps and success of PFA within the Ukraine response as well as the wider institutional impact. A thematic analysis was used to identify the common themes across the different national societies.

Across the National Societies, 15 Focus Group discussion took place with staff and volunteers, and 9 Focus Group Discussions with displaced people from Ukraine. There were 30 KII with National Societies staff and volunteers as well as the IFRC Regional Office of Europe and the IFRC Psychosocial Support Reference Centre. 86 National Society staff and volunteers responded to an online survey.

## **Key findings**

The key findings of the study can be divided into the following themes, PFA within the Ukraine response, factors contributing to the implementation of PFA, impact and role of PFA within the Ukraine response, PFA strengths, challenges, gaps and sustainability.

### **PFA within the Ukraine response**

- PFA three action principles assisted in the application of PFA.
- PFA helped identify the need of people displaced from Ukraine.
- PFA helped address the MHPSS needs of people displaced from Ukraine.

### **Factors contributing to the implementation of PFA.**

- PFA implementation is supported by internal and external factors.
- PFA core principles are complemented by IFRC Principles of Voluntarism and Humanity
- PFA is an accepted approach and skill set to address MHPSS needs.

### **Impact and role of PFA within the Ukraine response**

- PFA gave the skills and knowledge to calm, connect, and establish contact with displaced people from Ukraine.
- PFA has an overlapping impact on staff and volunteers' wellbeing,
- PFA provided an approach and skillset for staff and volunteers to do their jobs and for National Societies to achieve their mandate.
- PFA supported the development of MHPSS programmes within National Societies

### **PFA strengths, challenges, gaps, and sustainability**

- PFA three action principles make it a basic tool that can be applied in multiple contexts both in work and in personal life.
- Staff and volunteers need comprehensive knowledge and skills transfer to be able to integrate and implement PFA.
- Supervision was a key gap and was recognised by staff and volunteers as vital to successful implementation and integration of PFA.

## Recommendations

1. Reshaping PFA for the Ukrainian context to emphasize understanding and addressing complex reactions to emergencies.

Key to PFA is understanding the impact of crises and the reactions to crises. It was noted that National Society staff and volunteers need more understanding of common reactions of different groups, including children and adolescents. More emphasises on the psychoeducational component of PFA and the PFA modules on different types of crises, reactions of crises, complex reactions and how different groups are impacted and need support, needs to be included in trainings and in supportive supervision.

2. Developing guidance for the operationalization of PFA

There are multiple manuals and approaches to PFA but there are limited resources on how to operationalise PFA. The development of these resources should include:

- the development of impact tools in PFA such as Monitoring and Evaluation and data collection methods,
- tools and guidance notes on how to contextualise and upscale PFA to different cultural contexts.
- training and mainstreaming guidance including how to equip trainers and managers on how to transfer skills and knowledge and mainstream PFA within MHPSS and other sectors.
- supportive supervision, how to provide care for staff and volunteers as well as the development of a competency-based framework to support the skill development and knowledge transfer of PFA.
- key messages to advocate for the integration and mainstreaming of PFA and its role in establishing an MHPSS framework.

3. Strengthening the role of the management and increasing programme development

Conducting a SWOT analysis to better understand the strengths, weakness, opportunities and threats is vital to ensure the successful contextualisation and integration of PFA within National Societies and ensuring the sustainability of PFA. Using the findings of a SWOT analysis would allow for National Societies to have a starting point to build the PFA response and measure their progression.

## Key Abbreviations

<b>Acronym</b>	<b>Full Form</b>
<b>DG Santé</b>	Directorate-General for Health and Food Safety
<b>EEA</b>	European Economic Area
<b>EU</b>	European Union
<b>EU4H</b>	EU4Health programme
<b>FGD</b>	Focus Groups Discussion
<b>IASC TWG</b>	Inter-agency Standing Committee Technical working group
<b>IEC</b>	Information Education and Communication
<b>IFRC</b>	International Federation of Red Cross and Red Crescent Societies
<b>IFRC PS Centre</b>	IFRC Psychosocial Centre
<b>IMS</b>	The Integrated Model for Supervision
<b>KII</b>	Key Informant Interview
<b>MHPSS</b>	Mental health and psychosocial support
<b>NSs</b>	National Red Cross Red Crescent Societies
<b>OD</b>	Organizational development
<b>PFA</b>	Psychological First Aid
<b>PRC</b>	Polish Red Cross
<b>PTSD</b>	Post Traumatic Stress Disorder
<b>ROE</b>	IFRC Regional Office for Europe
<b>UNICEF</b>	United Nations Children's Fund
<b>WASH</b>	Water Sanitation and Hygiene
<b>WHO</b>	World Health Organization
<b>WHO/UNICEF EQUIP</b>	Ensuring Quality in Psychological Support

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## Introduction

Since the onset of the International Armed Conflict in Ukraine in February 2022, National Societies across Europe have been providing support to people displaced from Ukraine. This has included an array of care from basic services such as access to health services, cash voucher assistance, shelter to more specialized services. There has been an increased need to provide Mental Health and Psychosocial Support (MHPSS) services to people displaced from Ukraine (WHO, 2022<sup>1</sup>). In response to this need, National Societies have been committed to integrating and implementing Psychological First Aid (PFA) within their response to provide Psychosocial Support and to ensure displaced Ukrainians receive the adequate services.

The response has been composed of multitude of funding streams and technical support. This has included financial and technical support from Partner National Societies (PNSs), International Federation of the Red Cross and Red Crescent Societies (IFRC), IFRC Reference Centres and Regional Offices. An example of this is the EU4Health (EU4H) project *Provision of quality and timely psychological first aid to people affected by Ukraine crisis in impacted countries* funded by the European Union and under the European Commission's Directorate-General for Health and Food Safety (DG Sante) in partnership with IFRC further supported the integration and promotion of PFA within National Societies.

This marks for the first time an established unified effort across multiple contexts to integrate PFA to meet the MHPSS needs within a migration response. The report highlights opportunities, strengths, challenges, and gaps in upscaling PFA by seven Red Cross National Societies. The study was carried out by the IFRC Psychosocial Centre (IFRC PS Centre) and supported by the IFRC Regional Office for Europe (IFRC ROE).

## Purpose of the Study

The study sought to understand the broader impact of PFA with a particular focus on the Ukraine and affected countries crisis. The study explored the role of PFA and how it has been applied both in the Ukraine response for NS development and in parallel to their other activities. Further the study maps out the challenges, gaps, and successes in introducing PFA to meet the demands and needs of National Societies within the Ukraine response. In addition, the study identifies the correlating factors which have shaped the roll out and institutionalization of PFA by National Societies both with the Ukraine response and elsewhere. The case studies will showcase the role of PFA, provide recommendations for next steps of the PFA roll and inform future responses to emergencies.

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<sup>1</sup> WHO (2022). WHO promotes action on urgent mental health needs of Ukrainian refugees. [WHO promotes action on urgent mental health needs of Ukrainian refugees](#) accessed 10 November 2023

## Methodology

The study examined the work of seven National Societies: Red Cross of Montenegro, Bulgarian Red Cross, Ukrainian Red Cross Society, Romanian Red Cross, Lithuanian Red Cross Society, Polish Red Cross and Slovak Red Cross. The National Societies selected for the study were chosen based on their willingness to participate, availability, and their varying levels of experience with implementing PFA interventions. Those National Societies' visited in person were Red Cross of Montenegro, Bulgarian Red Cross, Romanian Red Cross, Lithuanian Red Cross. Three National Societies, Polish Red Cross, Slovak Red Cross and Ukrainian Red Cross Society were included through online data collection methods due to their interest in participating but inability to facilitate in-country visits during the study period. Together these seven National Societies offered a robust and diverse data for analysis as each country was at a different stage of PFA implementation and experience with delivering MHPSS services.

A case study approach was chosen to allow for an in-depth exploration of the impact of upscaling and implementing PFA is within National Societies within a context of an emergency response. The study was carried out through both in-person field work and online data collection using questionnaires and a survey.

Data was collected through individual interviews and focus group discussions with those who had been directly trained in PFA, were implementing PFA and/or were working directly with the affected Ukrainians. A survey was shared with National Society staff and volunteers to gather a wider perspective of how PFA was used, what challenges were experienced when using PFA and what were the gaps in implementing PFA. When possible, people displaced from Ukraine were also interviewed. Survey participants were required to have been employed by the National Society for at least six months, undergone PFA training, and applied it in their work, whether directly or indirectly, with the people displaced from Ukrainian. In total, 31 Key Informant Interviews with Staff and Volunteers, 86 survey responses with Staff and Volunteers and 8 Focus Groups with people displaced from Ukraine<sup>2</sup> were carried out.

Two sets of tools were developed to accommodate the difference in context between National Societies providing services to those displaced from Ukraine (Red Cross of Montenegro, Bulgarian Red Cross, Romanian Red Cross, Lithuanian Red Cross Society, Polish Red Cross, and Slovak Red Cross) and the Ukrainian Red Cross Society providing services to the population of concern within Ukraine.

Data collection instruments, including the questionnaires and the survey tool were based on the framework of the needs assessment and organizational capacity assessment developed by the IFRC PS Centre and used

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<sup>2</sup> Refer to Annex 1 National Society Data Collection

at the initial stages of the EU4H project in 2022. The questions were further refined using insights from the IASC (2021) Common Monitoring and Evaluation Framework for Mental Health and Psychosocial Support in Emergency Settings, including methods of verification (version 2.0), and Snider, L.'s (2017) report, "Psychological First Aid: Five Year Retrospective (2011-2016)," commissioned and supported by the Church of Sweden.

The data was assessed using a thematic analysis to determine the effect of institutionalizing PFA within National Societies' efforts in effectively responding to the crisis in Ukraine and impacted countries. The process included writing up and organising the interviews according to country. Following this the data was analysed to identify the themes and whether there were common themes across countries.

The assessment took place between July and November 2023 as detailed:

**Table 1. Assessment team composition per country**

Country	Date and place	Team composition
Poland	Online	<p>Research team. Sarah Kate van der Walt, IFRC PS Centre technical advisor.</p> <p>The following staff members supported the assessment visit logistically and with translations:</p> <p>Nataliia Korniienko, IFRC Regional Office Europe, MHPSS delegate</p>
Ukraine	Online	<p>Research team. Sarah Kate van der Walt, IFRC PS Centre, technical advisor Ganna Goloktionova, IFRC PS Centre, technical advisor.</p> <p>The following staff members supported the assessment visit logistically and with translations:</p> <p>Den Humenny, Ukrainian Red Cross Society, head of the technical sector of the Department of Mental Health and Psychosocial Support</p>
Slovakia	Online	<p>Research team. Sarah Kate van der Walt, IFRC PS Centre, technical advisor.</p> <p>The following staff members supported the assessment visit logistically and with translations:</p> <p>Lucia Faltinová, Slovak Red Cross, MHPSS coordinator</p>

Lithuania	22 - 25 August 2023	<p>Research team. Sarah Kate van der Walt, IFRC PS Centre, technical advisor Arz Stephan, IFRC PS Centre, technical advisor.</p> <p>The following staff members supported the assessment visit logistically and with translations:</p> <p>Eglė Samuchovaitė, Lithuanian Red Cross, head of MHPSS programme Simona Juškaitė, Lithuanian Red Cross, community engagement specialist, Rasa Vyšniauskienė, Lithuanian Red Cross, MHPSS programme psychologist</p>
Montenegro	24 - 28 July 2023	<p>Research team. Sarah Kate van der Walt, IFRC PS Centre, technical advisor</p> <p>The following staff members supported the assessment visit logistically and with translations:</p> <p>Aleksandra Vujović, Red Cross of Montenegro, MHPSS coordinator</p>
Bulgaria	17 - 21 July 2023	<p>Research team. Sarah Kate van der Walt, IFRC PS Centre, technical advisor</p> <p>The following staff members supported the assessment visit logistically and with translations:</p> <p>Desislava Ilieva, Bulgarian Red Cross, MHPSS focal point</p>
Romania	5 – 8 September 2023	<p>Research team. Sarah Kate van der Walt, IFRC PS Centre, technical advisor</p> <p>The following staff members supported the assessment visit logistically and with translations:</p> <p>Sanja Pupacic, IFRC Regional Office Europe, MHPSS delegate Alina Garleanu, Romanian Red Cross, MHPSS National Coordinator</p>
IFRC ROE	Online	<p>Research team. Sarah Kate van der Walt, IFRC PS Centre, technical advisor.</p> <p>The following staff members supported the assessment visit logistically and with translations:</p> <p>Pia Lorentzen, IFRC Regional Office Europe Regional, MHPSS coordinator</p>
PS Centre	Online	<p>Research team. Sarah Kate van der Walt, IFRC PS Centre, technical advisor</p>

## Limitations

PFA is an approach that is recognized internationally as an effective method to meet the MHPSS needs of impacted populations from crises and disasters<sup>3</sup>. However, even with the years of use, adaptations and support, comprehensive documentation of PFA's impact and the evidence base supporting its effectiveness remain limited.

Historically PFA was first presented during World War II following the recognition of the psychological impact of war at sea, but it was only in 2004 when Stevan Hobfoll and his colleagues worked together to identify a set of evidence-based principles that can be used to support recovery, that PFA began to spread<sup>4</sup>. These principles are Promoting a Sense of safety, calming, self- and community efficacy, connectedness and hope and underpin the PFA approach<sup>5</sup>. It is difficult to measure the direct impact and efficiency of PFA, but it is assumed that by following these principles, PFA can be acknowledged as impactful and effective in its aim to “reduce initial distress and to foster short and long-term adaptive functioning<sup>6</sup>”.

The study does not intend to assess or analyse the impact of PFA on the target population but rather what the impact was of the implementation and upscaling of PFA within National Societies.

The study was an explorative study on the institutional impact of PFA and due to the scope and time limitations of the study, the study could only include seven National Societies. Findings of the study cannot and should not be generalised but rather could be used as a starting point to better understand the potential impact of the integration of PFA within similar contexts.

National Societies that were included in the study were at different stages of implementation of integrating PFA within their Ukraine Response. This was evident as some staff were well versed in PFA while others included in the data collection were not familiar with PFA. Most of the staff familiar with PFA were at the headquarters and those at a branch level and an implementation level were less familiar thus skewing the responses to be reflective of those at headquarters.

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<sup>3</sup> Everly et al. (2014) The Development of a Model of Psychological First Aid for Non-Mental Health Trained Public Health Personnel: The Johns Hopkins RAPID-PFA J Public Health Management Practice, 20(5), S24-S29

<sup>4</sup> Snider, L. (2017) Psychological First Aid: Five Year Retrospective (2011-2016). Church of Sweden

<sup>5</sup> ibid

<sup>6</sup> <https://www.nctsn.org/treatments-and-practices/psychological-first-aid-and-skills-for-psychological-recovery/about-pfa>

## PFA as an approach

The intention of PFA is to equip people from multiple backgrounds with the skills to provide direct support and a set of actions to support someone in distress (IFRC PS Centre, 2018)<sup>7</sup>. PFA is not psychological debriefing or psychological support rather it falls into the category of psychosocial support (IFRC PS Centre, 2018). These boundaries need to be adhered to when designing the implementation of PFA and transference of knowledge and skills. The Inter-Agency Standing Committee (IASC) recognises this as PFA,

“.....is often mistakenly seen as a clinical or emergency psychiatric intervention. Rather, it is a description of a humane, supportive response to a fellow human being who is suffering and who may need support. PFA is very different from psychological debriefing in that it does not necessarily involve a discussion of the event that caused the distress<sup>8</sup>.”

PFA guidelines and training modules have advanced to include multiple application guidelines to address and understand mental health and psychosocial needs. These have been designed by different international bodies and agencies both within and external to the Movement to be applied in multiple contexts and various target groups. These include and are not limited to, PFA for Groups<sup>9</sup>, PFA for Field Workers<sup>10</sup>, The Johns Hopkins RAPID-PFA<sup>11</sup>, PFA for Children<sup>12</sup>.

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<sup>7</sup> [PFA-Guide-low-res.pdf \(pscentre.org\)](https://www.pscentre.org/PFA-Guide-low-res.pdf)

<sup>8</sup> Inter-agency standing committee (IASC). IASC guidelines on mental health and psychosocial input support in emergency situations. Geneva: IASC, (2007).

<sup>9</sup> IFRC Reference Centre for Psychosocial Support (2018) Training in Psychological First Aid for Red Cross and Red Crescent Societies. Module 4. PFA in Groups – Support to teams

<sup>10</sup> World Health Organization, War Trauma Foundation and World Vision International (2011). Psychological first aid: Guide for field workers. WHO: Geneva.

<sup>11</sup> Everly, et al., (2014) The Development of a Model of Psychological First Aid for Non-Mental Health Trained Public Health Personnel: The Johns Hopkins RAPID-PFA Public Health Management Practice, 20(5)

<sup>12</sup> Save the Children (2013) Psychological First Aid Training Manual for Child Practitioners

## Findings

### Factors contributing to the implementation of PFA.

The scale up of PFA within National societies did not occur in a vacuum. Internal and external developments and factors were highlighted to have contributed to the roll out of PFA within National Societies. Internal factors included IFRC mandate and principles, International Red Cross and Red Crescent Movement policy on addressing mental health and psychosocial needs<sup>13</sup>, PFA For All pledge, the role of the PS Centre and support of the IFRC Regional Office of Europe, First Aid trainings and introductory online courses of PFA for staff and volunteers. External factors included the ongoing influx of refugees and migrants fleeing war, conflict, and violence globally, the COVID-19 pandemic impact on individuals and communities' mental health and psychosocial wellbeing as well as the advocacy of MHPSS and allocation of funds to MHPSS in the Ukraine Response. Figure 4 (pg 19) details internal and external factors which created conditions that supported the implementation of PFA.

### PFA within the Movement

PFA is not a new term within the Red Cross and Red Crescent Movement. The implementation of PFA across the Movement has been led by the PS Centre as well as further entrenched with the PFA For All Pledge. The PFA For All Pledge<sup>14</sup> was presented at the 2019 33<sup>rd</sup> International Conference. PFA For All is an open pledge aimed at scaling up the global capacity of PFA as a “means to prevent and alleviate mental health and psychosocial needs and promote individual and community resilience”<sup>15</sup>.

The PFA for All pledge states that PFA is an approach and skill set that can be used by National Societies to address the mental health and psychosocial needs of people affected by armed conflict, natural disasters, and other emergencies. The signing of the pledge is not mandatory for National Societies to sign.

### IFRC Principles and PFA

The IFRC is the world's largest humanitarian organization with 191 Red Cross and Red Crescent National Societies and is guided by seven fundamental principles: humanity, impartiality, neutrality, independence, voluntary service, unity and universality. These principles guide the Movement's activities and approach to

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<sup>13</sup> [Movement MHPSS Policy Eng single.pdf \(pscentre.org\)](https://pscentre.org/movement-mhpss-policy-eng-single.pdf)

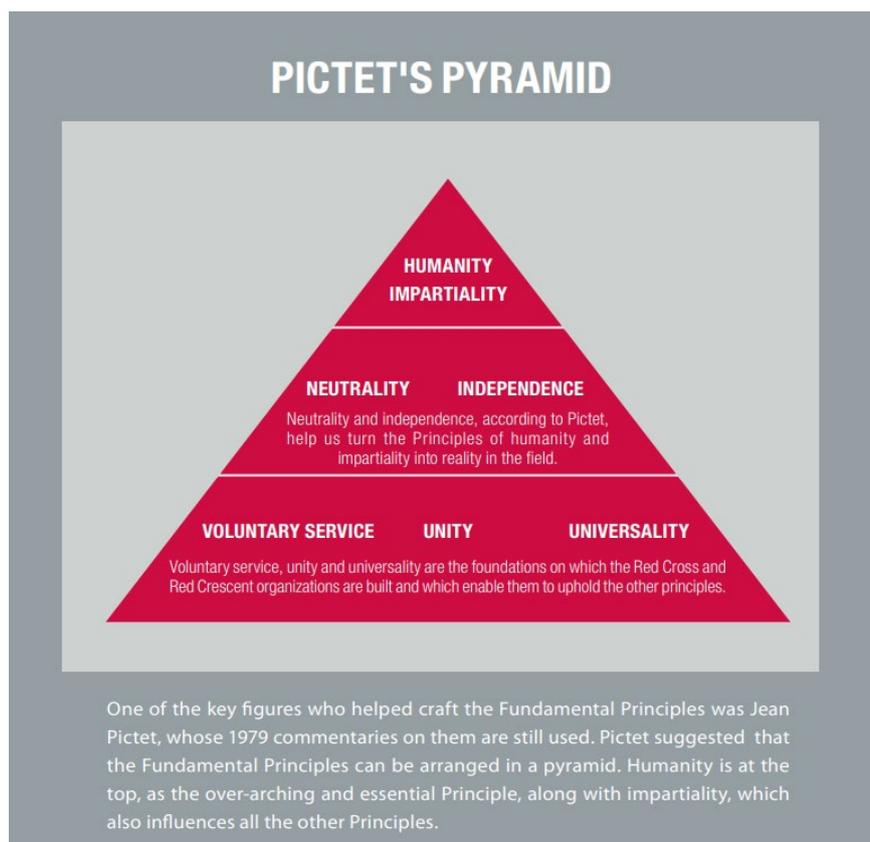
<sup>14</sup> [Psychological First Aid for all / Des premiers secours psychologiques pour tous / الأولوية الإسعافات للجميع النفسية – Statutory Meetings \(rcrcconference.org\)](#)

<sup>15</sup> [Psychological First Aid for all / Des premiers secours psychologiques pour tous / الأولوية الإسعافات للجميع النفسية – Statutory Meetings \(rcrcconference.org\)](#)

alleviating suffering and preparing the Red Cross and Red Crescent National Societies to respond to armed conflict, disasters, public health emergencies and other emergencies in their auxiliary role to the states.

The definition and the adoption of the principles was interpreted by Jean Pictet who organized these principles as a triangle with Humanity as overarching and essential, and impartiality influencing all the other principles as noted in figure 1 below<sup>16</sup>.

**Figure 1. Pictet's Pyramid**



IFRC defines the principle of humanity as “to protect life and health and to ensure the respect for the human being. It promotes mutual understanding, friendship, cooperation, and lasting peace amongst all peoples.” This is reiterated by the IFRC brochure on the Fundamental Principles which states; “Principles of humanity inspires not only concrete action such as life-saving emergency medical care but also small gestures of compassion<sup>17</sup>. These principles support the operationalisation of PFA within the Movement as PFA principles and the IFRC principles overlap in their distinction and definition. In addition to this, it was recognized that

<sup>16</sup> [FP-brochure-2015.pdf \(ifrc.org\)](#) pg 7

<sup>17</sup> [FP-brochure-2015.pdf \(ifrc.org\)](#) pg 24

PFA goes hand in hand with the mandate of the IFRC. As mentioned in an interview with an MHPSS technical adviser at the IFRC Psychosocial Centre “it (PFA) is not what we do, but how we do our work” (KII).

**The mission of the IFRC is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies.**

We do so with a view to preventing and alleviating human suffering, thereby contributing to the maintenance and promotion of human dignity and peace in the world.

By effectively coordinating and supporting the work of our member National Societies, the secretariat will ensure the IFRC fulfils its potential as an engaged, accountable and trusted humanitarian actor on a global scale.

<https://www.ifrc.org/who-we-are/about-ifrc>

IFRC is the largest humanitarian volunteer-based organization with a wide outreach. National Societies’ work and activities led and organized by volunteers within their countries and communities<sup>18</sup>. Volunteers and staff of the Red Cross and Red Crescent are mostly characterized as being altruistic, having social skills and being socially astute. This was highlighted in an interview with a Ukrainian refugee living in Montenegro who declared that “*maybe it isn’t PFA, but they are just good people*” (FGD) Voluntary service is recognized by the IFRC Strategy 2030 as fundamental to respond to future challenges<sup>19</sup>.

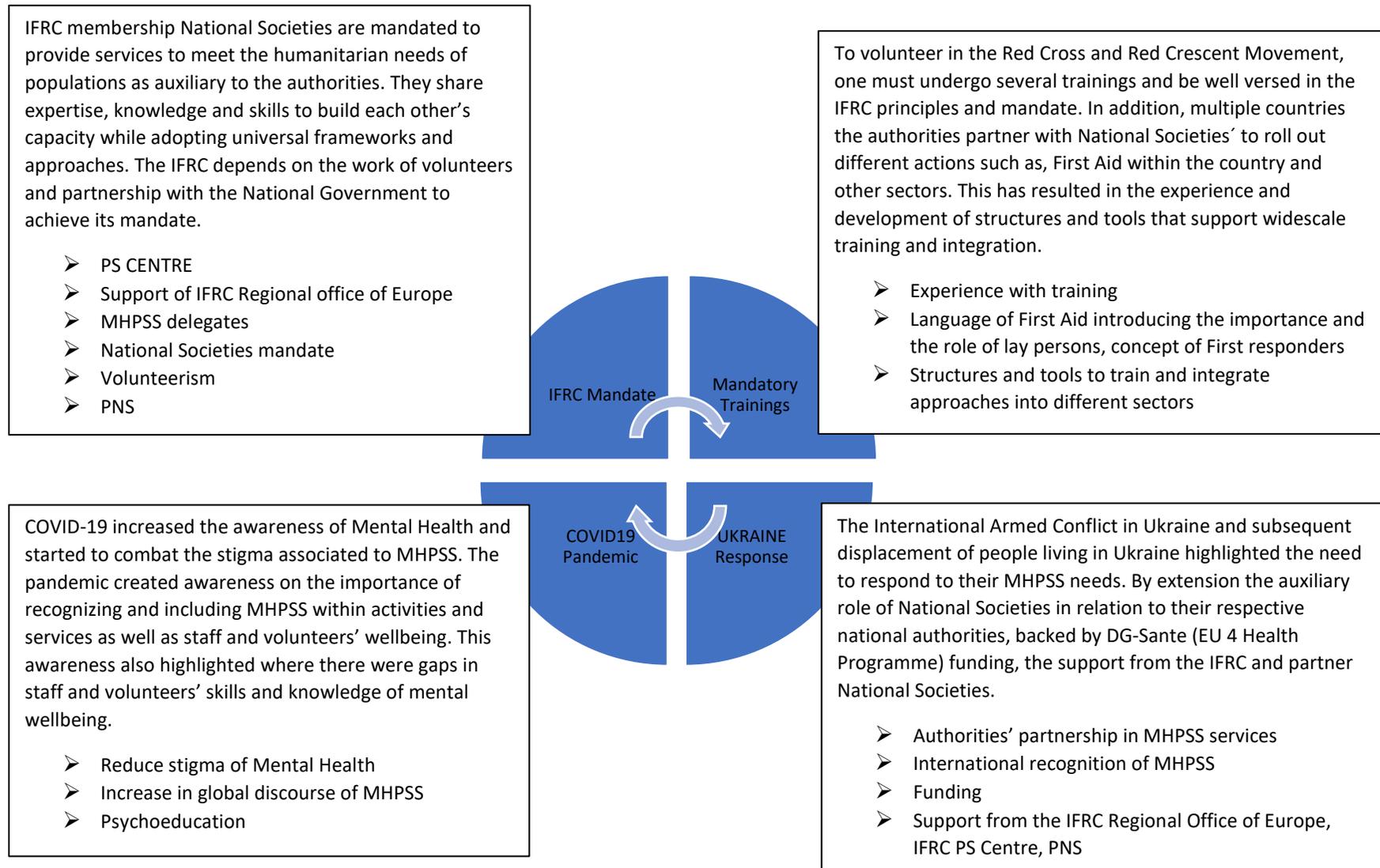
Figure 2 below details how these different factors interact to create a supportive environment to implement and upscale PFA within the Red Cross and Red Crescent Movement.

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<sup>18</sup> [About National Societies | IFRC](#)

<sup>19</sup> [Strategy 2030 | IFRC](#)

**Figure 2. Internal and external factors supporting the role out of PFA**



## PFA within the Ukraine Response

PFA is a dynamic psychosocial support activity that can either be integrated into multiple sectors, activities or can be a standalone activity addressing the emotional and social needs of individuals (IFRC PS Centre, 2018). Within the Ukraine response PFA was the approach to support the provision of MHPSS and in building/strengthening capacities and capabilities of the Red Cross and Red Crescent (RCR) National Societies' staff and volunteers, frontline responders, and other professionals<sup>20</sup>.

### PFA perceived and applied.

PFA is founded on three action principles, Look, Listen and Link. These principles support the operationalise of the Hobfoll principles: Promoting a sense of Safety, Calming, Self and community efficacy, Connectedness and Hope which were identified to support people to recover from disaster and mass violence (Hobfoll et al, 2007<sup>21</sup>). One staff member of the Romanian Red Cross Society described her use of PFA as to;

*"Listen carefully and to be present and to be sure they are being listened to and cared for. To make the connection and to understand and believe them and to calm down and feel normal even if they have many emotions (KII)."*

The knowledge and skillset from PFA were emphasized as a vital component to the successful use of PFA by the Ukrainian Red Cross Society staff and volunteers, *"Therefore, PFA is knowledge that can be used as tools... we know these skills, then we can use them as tools when we need them. That is, we will simply have it as a tool"* (FGD)

### PFA relevance within National Societies' response

PFA was intentionally included to provide psychosocial support to displaced people from Ukrainian (IFRC PS Centre KII). Based upon the experiences of staff and volunteers, PFA was perceived as being vital to the Ukrainian response (Bulgarian Red Cross). It was acknowledged by staff and volunteers that people displaced from Ukraine were showing signs of distress such as anxiety, aggression and with PFA they were able to lower their anxiety. PFA gave staff and volunteers the capacity and competence to create a sense of safety and to lower the percentage of displaced people from Ukraine showing signs of distress, including symptoms of anxiety and depression. Such as expressed by Bulgarian Red Cross where PFA is perceived as having an important role to help staff and volunteers to feel safe (KII).

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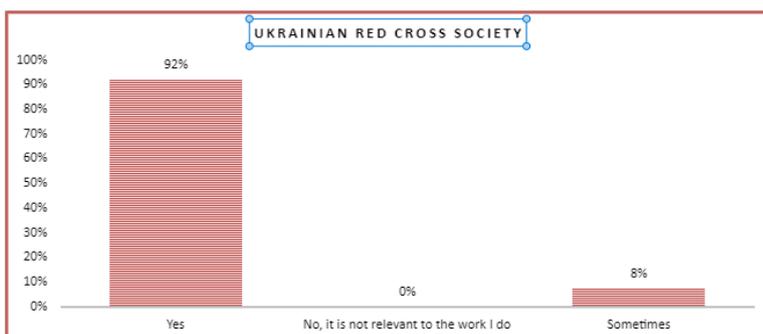
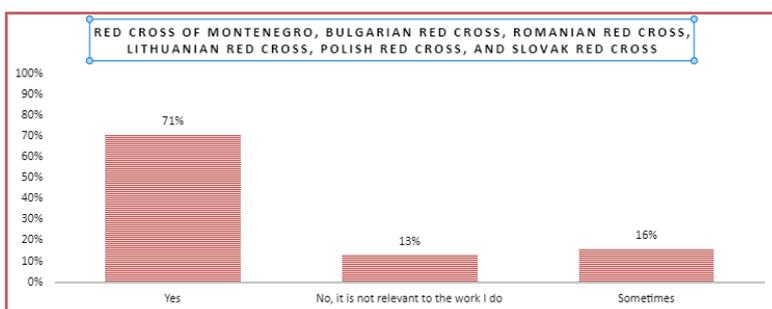
<sup>20</sup> IFRC project proposal, Provision of quality and timely psychological first aid to people affected by Ukraine crisis in impacted countries.

<sup>21</sup> Hobfoll et al., (2007) Five Essential Elements of Immediate and Mid-Term Mass Trauma Intervention: Empirical Evidence. *Psychiatry* 70(4)

One of the motivations to include PFA as a service modality was to give the essential skills to staff and volunteers and prepare National Societies to support people in distress (KII former IFRC Regional MHPSS Delegate). Staff and volunteers were asked in the survey how they were using PFA to support the needs of Ukrainians. Most responses highlighted that PFA was a tool being used to identify the needs of Ukrainians and helped volunteers to listen and to support others (Survey responses).

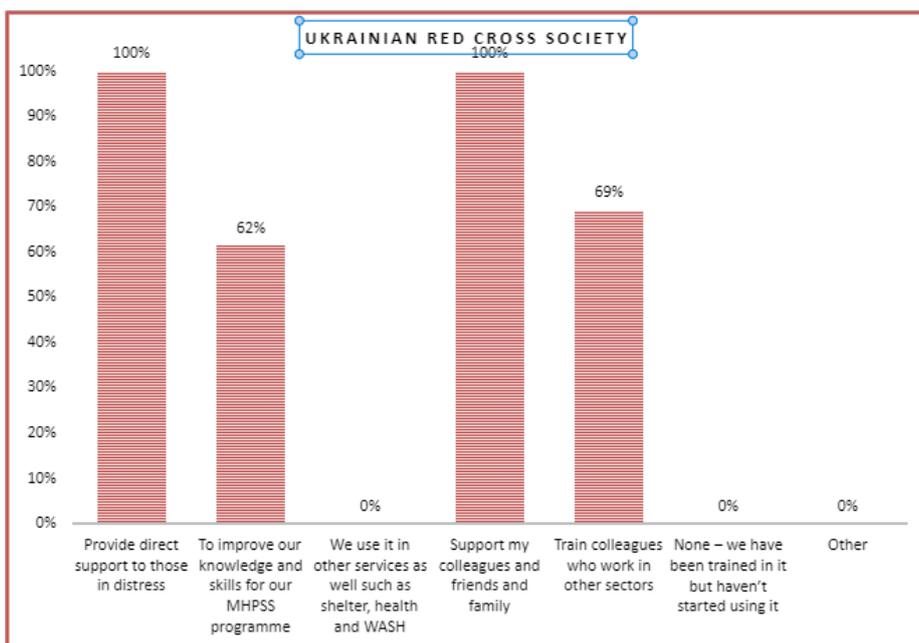
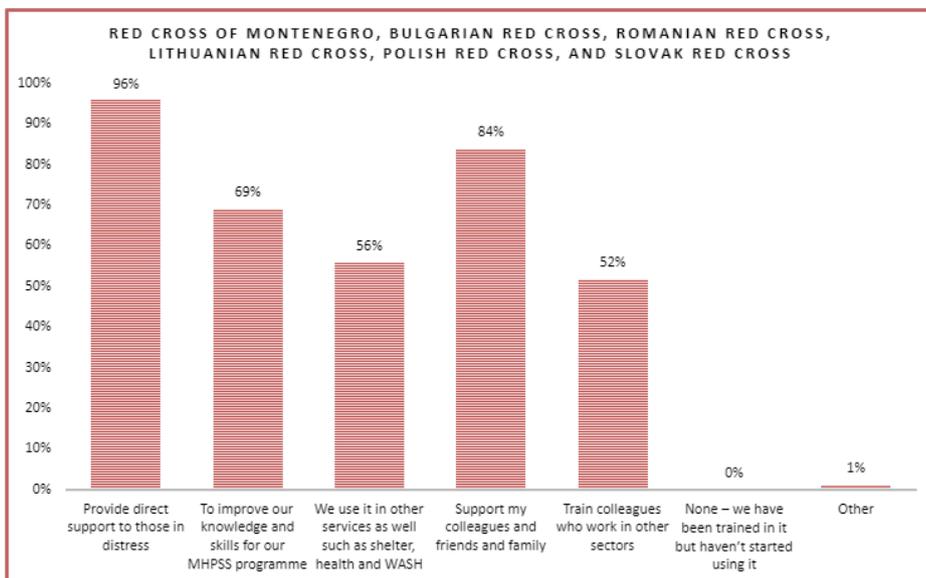
This was further reiterated in the survey as shown in Figure 3, where most staff and volunteers said that PFA helped them to meet the needs of displaced Ukrainians thus highlighting its relevance within the Response.

**Figure 3. How PFA helps Red Cross and Red Crescent Staff and Volunteers meet the needs of displaced Ukrainians**



Below Figure 4 shows the survey responses of how staff and volunteers use PFA. Across the National Societies PFA was used mostly to provide direct support to those in distress as well as to support their colleagues, friends, and families.

**Figure 4. How PFA is used in the National Society**



Within the Ukraine Response PFA, was described as the “*building block*” to respond to the MHPSS needs (IFRC PS Centre KII). Ukrainian Red Cross Society recognized that “*PFA helps in how to do the activities*” (Ukraine Red Cross Society KII). However, there still needs to be understanding in how PFA can be used across the different sectors [disaster management, first aid, health and protection, gender and inclusion] and be further integrated into National Societies services (IFRC PS Centre KII).

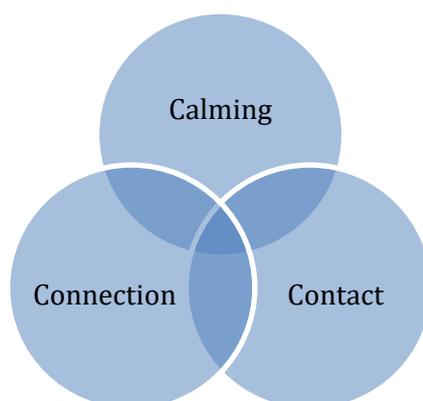
## Impact and Role of PFA in the Ukraine Response

The study mapped out what the wider impact of integrating and institutionalising PFA within the Ukraine Response has been amongst National Societies. This was not to identify the impact of PFA on the target population but rather to understand how PFA was interpreted by National Societies, how this impacted programming and service delivery and if there was any institutional development based on the upscaling of PFA.

### The three Cs

When asked to define PFA and its role in the Ukraine Response, the responses can be categorized into three 'Cs': Calming, Connection and Contact. These three 'C' were closely tied to communication and how to establish rapport with the target population to support the aim of PFA. Figure 5, the role of PFA as three C's, shows how they overlap.

**Figure 5. The three Cs of the role of PFA in the Ukraine response**



### Calming

When asked to describe PFA, many of the staff and volunteers mentioned that PFA gave them the skills to help distressed people to calm down. The Romanian Red Cross staff and volunteers in Bucharest recognized PFA as a skill set that helped them to calm down others and reassure them that they were *“secure and safe in the environment”* while others described PFA as how to calm someone in distress, building on the Hobfoll Principles (Romanian Red Cross society FGD). This was echoed by the Red Cross of Montenegro in a FGD where staff and volunteers described PFA as helping them to calm people down when they were distressed. Within the response in Poland, it was mentioned that they *“use the communication skills of PFA to calm people down”*. This impact of PFA was confirmed by Bulgarian Red Cross staff and volunteers FGD who agreed

that they used PFA to deescalate the situation and identify what the needs are. The IFRC MHPSS delegate in the Slovak Red Cross recognized that by using PFA the team were able to identify the needs of Ukrainians and put them at ease by helping them feel safe and grounded.

In addition to helping others feel calm, PFA also helped the PFA providers to remain calm and enabled them to listen to the other person and provide support to them. Ukrainian staff and volunteers used PFA to know, *“How to calm down and get a hold of yourself”* while another attributed PFA with the ability *“to calm down, to get out of those acute reactions”* (FGD).

## Contact

PFA skills supported the staff and volunteers to create spaces where they were able to build connection and help with the first contact with Ukrainians, *“(PFA) is for the start, it helps build the connection and listening to the needs and to respond to the needs”*. Bulgarian Red Cross staff and volunteers agreed that PFA gave them the skills to interact with people when meeting them for the first time. From the survey it was noted that PFA helps with making the first contact with someone in distress, *“It helped with using the right response during the first contact with someone who is distressed”* (Survey Q9). This was reiterated in Red Cross of Montenegro where one of the strengths of PFA was described as providing staff and volunteers with the confidence and ability to *“approach to create a climate of trust”* and establishing the first connection with Ukrainians. One FGD participant stated that PFA is *“for the start, helps build the connection and the listening to the needs and to responding to the needs.”*

Romanian Red Cross Staff and volunteers also recognized that PFA is the *“first thing to support and to stabilize and encourage someone”* (FGD). Similarly in the Ukrainian Red Cross Society, who recognized that after the PFA training, staff and volunteers learnt *“how to make contact with people, and to provide them with further support”* (FGD). Establishing this contact with the Ukrainians is vital as it was noted that it was *“difficult to work with Ukrainians if one was unable to build this connection”* (Red Cross of Montenegro FGD). Building this connection by using PFA skills also helped Ukrainians calm down (Romanian Red Cross Society FGD).

PFA was described as important as it helps staff and volunteers in Lithuania to build contact and to talk to Ukrainians who were showing signs of distress, *“how to talk to (him) when he is very sad. Ukrainians are not bound to get specialized services.”* The ability to use PFA to establish contact recognised by Ukrainians receiving services at the Lithuanian Red Cross Society who reported, *“people are kind here, we were welcomed warmly. We feel supported and people feel sorry about the war.”* (Ukrainian FGD).

Closely linked to the contact building was the building of connection with the person in distress and then connecting them to other social networks and services. PFA has a role in establishing contact with impacted

persons, as a how distressed person is approached is important to their recovery and how they respond to the offer of help<sup>22</sup>.

### Connection

The use of PFA helped identify Ukrainians who needed access to services or specialized services as it was *“very helpful to create a space to talk about their needs – stressful situations and PFA helped with whom to connect to have more focused support.”* Montenegro FGD. This was echoed in the Bulgarian Red Cross where staff and volunteers had the skill set and knowledge to respond to different real-life situations and connecting displaced people from Ukraine to other services (Bulgarian Red Cross FGD). In addition, the Bulgarian Red Cross recognised that PFA helped them to link to other organisations and services within the community.

The MHPSS focal point at the Lithuanian Red Cross Society recognized the importance of PFA as a skill set that builds connection with Ukrainians. The Lithuanian Red Cross Society staff and volunteers said that PFA is used to build connections with Ukrainians and to help them to calm down while another FGD described PFA as a skill set to know how to connect to Ukrainians, *“To make the connection and to understand.”* This was reiterated by Ukrainians who had been accessing services from the Lithuanian Red Cross Society as they reported to having a feeling of connection with the Red Cross. Another the Ukrainian FGD in Red Cross of Montenegro recognised this as when asked to describe how they feel when accessing services at the Red Cross, *“There is no distance between us”* another said *“everyone is friends.”*

Part of this connection was referred to as linking Ukrainians with other Ukrainians to offer social connection and integration (Bulgarian Red Cross KII). This was reiterated in Red Cross of Montenegro psychologist who used PFA to build connection with Ukrainians and establish social connection between Ukrainians.

### Three levels of impact

In February 2022 each National Society was at a different stage of implementing PFA and MHPSS services. Some of the National Societies, such as Bulgarian and Ukrainian Red Cross Society already had fully established MHPSS and PFA programmes, whilst other National Societies had limited experience and capacity to respond to the MHPSS needs of displaced Ukrainians.

The upscaling of PFA to support the Ukraine response has had a wider impact on the services of National Societies. It can be summarized into three main categories of impact: the National Society, the wellbeing of staff and volunteers and the improvement of services to the target populations. These three categories

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<sup>22</sup> IFCR PS Centre (2018). Training in Psychological First Aid for Red Cross and Red Crescent Societies. Module 1: An introduction to PFA

overlap and interact to transform the work culture, services and activities to support the mandate and core principles and upskill staff and volunteers as shown in figure 6: the overlapping impact of PFA.

**Figure 6. The overlapping impact of PFA**



#### Work tasks and duties.

1. Skills and knowledge needed.

PFA helped staff and volunteers in Romania to know how to communicate and respond to people in distress as PFA gave them the “*tools on how to deal with the situation*” (FGD). Red Cross of Montenegro staff and volunteers said that the three action principles of PFA, Look, Listen and Link, helped them identify Ukrainians needs and to provide the support while creating a structure to their work. Staff and volunteers from the Lithuanian Red Cross Society mentioned that PFA had transformed their work and they had included the three action principles of Look, Listen and Link in their daily routine. It was mentioned that one can tell who has received a PFA training and those who have not by “*the phrases they use, especially how they relate to their work... they are more confident and know how to refer*” (Lithuanian Red Cross Society KII). In addition to not only making staff and volunteers more confident and prepared in their work, PFA helps to make the work easier as it emphasizes how people respond while giving the skills to identify the needs of the target population (Bulgarian Red Cross FGD).

2. Building confidence and self-esteem

PFA was also seen as a tool equipping and building the confidence of staff and volunteers in responding to the signs and symptoms of distress and knowing how to provide support and what to say (survey results). One Bulgarian Red Cross staff and volunteers said PFA helped them feel more confident in their work and what they were doing, another mentioned that their self-esteem had improved. This was echoed in Lithuania where a staff member said that with PFA they feel more confident, know what to say, how to refer and felt stronger in their role.

Slovak Red Cross Staff and volunteers said that after receiving a PFA training they knew how to help and provide emotional support while also building confidence in their work (Slovak Red Cross KII). Similarly, Polish Red Cross Staff and volunteers appeared to feel more confident in their work (Polish Red Cross KII). In Red Cross of Montenegro, the three action principles of PFA gave the team the structure and confidence to provide psychosocial support. Romanian Red Cross staff and volunteers agreed and attributed the confidence building of PFA to the do's and don'ts in the training material while PFA helped them to know how to respond. The MHPSS delegate of the Slovak Red Cross noted that PFA helped build staff and volunteers' confidence and skills on how to identify who needs help and how to listen to people.

## Staff and Volunteer wellbeing

### 1. Selfcare

Red Cross of Montenegro staff and volunteers recognized that the three action principles of Look, Listen and Link were also used when practicing their own selfcare and wellbeing. They had also started to use the buddy system in their workplace which supported overcoming work-related stress and provided peer support. Romanian Red Cross staff and volunteers reflected that they have been applying the principles of PFA to themselves and to take care of themselves. Bulgarian Red Cross staff and volunteers said PFA helped them to overcome the stress in their daily work and make them feel well. Most importantly it was noted that the PFA protected staff and volunteers from burnout and help recognise their feelings of distress. In the Ukrainian Red Cross Society, the PFA trainings provided staff and volunteers with the knowledge of themselves and the psychoeducation on how to support their own wellbeing (Ukrainian Red Cross National Society KII). Romanian Red Cross staff and volunteers described PFA as *"life skills that can be applied anywhere"*. Some staff and volunteers who were interviewed mentioned that they applied the principles of PFA to themselves and were starting to practice self-care.

In addition, Ukrainian Red Cross Society staff and volunteers accredited PFA as an approach that supports the integration selfcare and how to support teams within their National Society, *"it would be good if our supervisors would be trained in PFA and hear about the importance of self-care for our work for themselves"*

*and to better support the teams"* (FGD). In parallel, the PFA trainings designed by the IFRC PS Centre also stresses the component of selfcare and peer support with the inclusion of the buddy system<sup>23</sup> (PS Centre KII).

## 2. Boundaries

One of the contributing factors to the improvement of selfcare and wellbeing in the workplace is the establishment of boundaries that PFA encourages staff and volunteers to set and maintain. The Link principle where one accepts one's own role, it's responsibilities and limitations and to refer individuals for specialized and other services, prevents taking too much responsibility outside acquired skills and competencies. PFA emphasises the importance of boundaries of what one can and cannot do, *"(PFA) emphasizes that we can't do everything"*, with another staff member stating that *"PFA also helps us workers not to get too involved in others' problems, to be more resilient to the surrounding emotions"* (Lithuanian Red Cross Society FGD). Personal boundaries and professional boundaries were mentioned during a FGD in Ukraine where staff and volunteers mentioned that PFA *"taught them to build our own boundaries, that is, to take care of ourselves during and after"* (FGD).

## National Society

### 1. Do no harm.

Red Cross of Montenegro recognized that they were better able to support people while preventing additional harm to displaced Ukrainians, as well as helping meet their MHPSS needs. By using PFA staff and volunteers are ensuring that there are appropriate referrals and referral is done in a *"better"* way (FGD). In Lithuanian Red Cross, PFA was defined as foundational to their work and to how they do their job. The Bulgarian Red Cross recognized that PFA helped to increase trust in the Bulgarian Red Cross from communities.

### 2. Capacity to respond.

The Lithuanian Red Cross Society acknowledged that with PFA the National Society is better prepared and stronger to respond to future disasters and they are closer to the Ukrainian Population than before. A reason for this could be attributed to staff recognizing the importance of PFA, and PFA having been used to prepare staff and volunteers communication skills as well as understanding the impact of war and what support affective populations need (Lithuanian Red Cross, KII). The Bulgarian Red Cross attributes its readiness to

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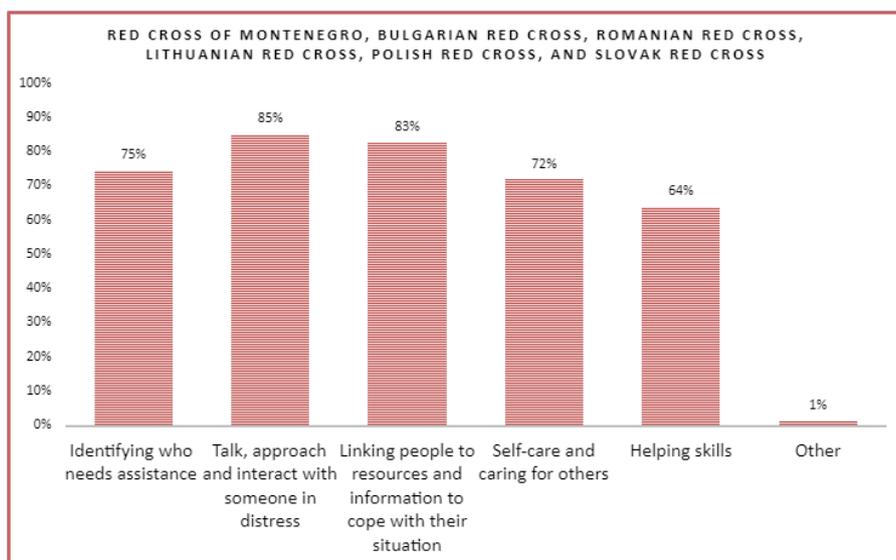
<sup>23</sup> IFRC Reference Centre for Psychosocial Support, (2018) A Guide to Psychological First Aid for Red Cross and Red Crescent Societies.

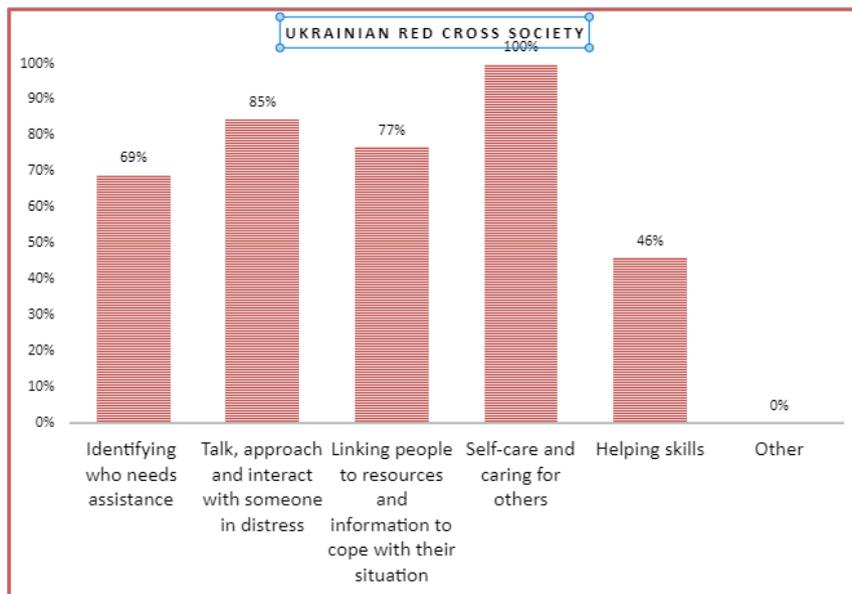
respond to crises to the impact of PFA in preparing the volunteers with the skills and knowledge to respond to crises.

### 3. Achieve Mandate

The provision of PFA helps National Societies fulfil their mandate, as PFA helps support vulnerable people, while improving a National Societies position in society by offering comprehensive humanitarian services (Bulgarian Red Cross FGD). PFA helped to organize the response as it provided them with the skills, attitudes, and ability to identify the needs of the target population and know when to link to specialized services. This was reiterated in the survey by staff and volunteers across the National Societies as shown in figure 7.

**Figure 7. What part of Psychological First Aid was used the most when responding to the needs of displaced Ukrainians**





## PFA as an entry point to MHPSS

PFA has a dual purpose; it identifies the need to provide psychosocial support to those experiencing distress and crises but also gives the helper (volunteer) the tools to respond. *“Now mental health is important, and we knew this but now we can do this”*. MHPSS is not a standalone sector but should be integrated into other sectors. PFA lends the skills and knowledge to integrate MHPSS services into other sectors, which helps to destigmatize MHPSS services and enabling MHPSS services. The three action principles of Look, Listen and Link was identified as framing for the development of MHPSS and the integration of MHPSS into other sectors (Polish Red Cross KII).

### 2. PFA as strengthening MHPSS.

In the Bulgarian Red Cross, it was recognized that PFA is the basis of the MHPSS programme and is the foundation of all MHPSS services; and consists of basic skills when supporting people in distress. This was in direct reference to the skills and the trust that is needed to provide MHPSS, as PFA was perceived to build the basic capacity to develop MHPSS programming and the trust required to respond to MHPSS needs. In the Lithuanian Red Cross society, *“PFA built the MHPSS programme”* the first step to becoming an established sector in the Lithuanian Red Cross Society was through the introduction of PFA in the DG Sante project. There is now a coordinator, a training team and a project plan to support the establishment of an MHPSS program centred around the implementation of PFA. The MHPSS delegate in Slovakia stated that *“PFA is one of the tools to help build (the MHPSS programme) and is basic step if want to do more”* (KII). The IFRC MHPSS

Delegate to Poland said that PFA helped in the building of MHPSS in the Polish Red Cross Society, one of the ways was by knowing *“how to link and talk to recognize these people (needing MHPSS)”*

### 3. Financial and project support

The financial support to respond to the need of displaced people from Ukraine as well as the technical support from the IFRC Regional Office in Europe gave the *“space to work with MHPSS”* (Red Cross of Montenegro KII). With the focus on the provision of PFA, the Romanian Red Cross has been able to *“build a deeper approach, not to sideline (MHPSS) but more focused and capacity building”* while also giving a *“long term opportunity to grow”*. In addition, PFA *“helped spread the awareness of MHPSS and the need for MHPSS, ask what to ask for in terms of trainings and knowledge (Lithuania KII)”*.

### 4. The action principles of PFA

It was noted by the Red Cross of Montenegro MHPSS coordinator, that the three action principles of PFA created a structure to respond to the needs and to develop a pathway of support to build a framework for an MHPSS program. Montenegro structured their MHPSS services by using the action principles of PFA, by listening and calming those in distress and referring them for practical and emotional support when needed.

These principles work together to build teams and to identify or establish systems of referral and to ensure those who need additional specialized support receive it, *“PFA highlights the need to identify signs of distress and to do proper referral to specialist services”* (Lithuanian FGD). PFA provides the skills and knowledge and emphasizes that mental health and psychosocial impact of crises is real, and to how to include this in humanitarian assistance.

The question *What next?* after PFA is provided to a person in distress, was echoed across different National Societies (Romanian Red Cross, Ukrainian Red Cross Society) which emphasized the need for more activities and services to provide support to those who need additional support. This question automatically had staff and volunteers identifying additional services that could support the mental health and psychosocial wellbeing of displaced people from Ukraine. Further it supports the idea that providing MHPSS services can include a network where safe, empowered, and dignified referrals take place to other services.

## PFA: Strengths, challenges, gaps and sustainability

The presented strengths, challenges, gaps and sustainability is a combined result of the organisational capacities, project design and nature of PFA (Table 1). This includes the limitations of how PFA has been designed in its approach and implementation. These findings highlight that when integrating and upscaling PFA, complementary tools, guidance and approaches such as supervision needs to be included.

**Table 2. Strengths, challenges, gaps and sustainability**

Strengths and supportive factors	Challenges and Barriers
<ul style="list-style-type: none"> <li>- Basic tool</li> <li>- Can be done by everyone and everywhere and applied to all situations.</li> <li>- PFA provides language to provide support.</li> <li>- Help people calm down.</li> <li>- Volunteers: willing and able, follow the principles naturally</li> <li>- Red Cross and Red Crescent principles echo principles of PFA.</li> <li>- Gives structure to the response – guiding framework.</li> <li>- PFA builds on previous experiences.</li> <li>- Creates safe and calm space for Ukrainians to express themselves.</li> <li>- Look, Listen and Link action principles.</li> <li>- Useful and applicable</li> <li>- Practical tool that can be used in people’s day to day lives.</li> <li>- Help people help themselves.</li> <li>- Promote the practice of self-care</li> </ul>	<ul style="list-style-type: none"> <li>- Language barriers</li> <li>- Needs practice before being able to apply.</li> <li>- Team members are already doing a lot.</li> <li>- Link is not always easy: stigma with referral and limited support from the receiving services.</li> <li>- Referral to specialized services (no services, not enough or not receiving the requested services) need for follow up guidelines.</li> <li>- Stigma of Mental Health (Context: need to also know the perception of MH in ex-Soviet countries there was a weaponizing of MH services</li> <li>- People are suspicious of MH)</li> <li>- Volunteers have their own autonomy.</li> <li>- Difficult to measure – indicators of project don’t match PFA.</li> <li>- Need to invest time into trainers.</li> <li>- Terminology and translation</li> </ul>
Gaps	Sustainability
<ul style="list-style-type: none"> <li>- Context – tools/guidance to adapt to the context.</li> <li>- What next? (PFA perceived as not enough)</li> <li>- No supervision included.</li> <li>- Context is changing (no longer acute crisis phase) and need to know how to adapt PFA to noncrises situations.</li> <li>- Basic training is not enough: need more knowledge on the complex responses to crises.</li> <li>- No impact measurement tools</li> </ul>	<ul style="list-style-type: none"> <li>- Authorities wishes Red Cross support to the implementation of PFA across the country.</li> <li>- Development of a training network and core training team, material is adapted and ready to use.</li> <li>- Experience setting up First Aid trainings in different sectors.</li> </ul>

### Strengths and supportive factors

Throughout the study, staff and volunteers stated that PFA is a basic tool that can be used to “*support, stabilize and encourage*” distressed people within the Ukrainian response (Romanian Red Cross FGD). Staff and volunteers described PFA as simple which everyone can use in every situation and be applied to all situations of crisis. “*We try to define and frame it as the approach that can be used by anyone in any situation*” (Polish Red Cross KII). The strength of PFA within the Ukrainian Response was that not only can it easily be

used in one's work to meet the needs of Ukrainians, it is also needed in other sectors and activities, *"every programme needs to have PFA and to be prepared on how to communicate"* (Lithuanian Red Cross Society KII). The three action principles of PFA, look, Listen and Link, provides a communication skills that enables people from multiple backgrounds to understand the importance and role of PFA and how to use it in other work responsibilities and their daily lives. The transferable nature of PFA was also one of the ways that National Societies were able to gather support for the scaling up of PFA within the Ukraine Response,

*"They also welcome the fact that it's so transferable. It's not just a professional match ... but it can also be used in one's private life in whichever area of private life that as well. So, it's received very well. And people are literally thirsty to receive the training"* (Slovak Red Cross-National Society KII)

PFA was designed to be an approach that can be applied to all emergencies and integrated into different sectors. It is way of helping someone who are showing signs of distress through practical steps and principles promoting recovery and coping (PS CENTRE, 2018<sup>24</sup>). *"PFA is easy for non-professional actors to understand and apply within their own work and daily life and recommends concrete skills that anyone can learn"* (Snider, 2017<sup>25</sup>).

## Challenges and barriers

The nature of PFA as a skill set which can be used as a standalone support service and be integrated into other services and sectors. The duality of PFA emphasizes the need for trainings to transfer knowledge and skills to do both. However, PFA is often implemented in response to emergencies and crises which limits the time to conduct an in-depth training. This highlights the need for quick and concise trainings to respond to the immediate needs of affected populations. Additionally, within the Red Cross and Red Crescent Movement, most services are provided by staff and volunteers who are balancing multiple tasks. To be able to effectively use PFA it was mentioned by staff and volunteers that one training is not enough. Emergencies are also balancing what is and isn't possible given the needs, capacity and number of staff and volunteers, constraints, and the operating environment. More attention needs to be paid to this challenge of how trainings can be designed in the early stages of a response and be supplemented by supervision and additional training to ensure the transfer of knowledge and skill. .

There is a *"need to have more than one training"* (Lithuanian Red Cross Society FGD) and in Bulgaria it was noted that one training is not enough to address all the MHPSS needs (Bulgaria Red Cross FGD). Short

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<sup>24</sup> A Guide to Psychological First Aid for Red Cross and Red Crescent Societies, IFRC Reference Centre for Psychosocial Support, Copenhagen, 2018.

<sup>25</sup> Snider, L. (2017) Psychological First Aid: Five Year Retrospective (2011-2016). Church of Sweden

trainings as a one-day training is not enough, there is a need for *“more time for someone to be able to learn, they are not professional”* and *“the basic five hours is not enough training”* (Lithuanian Red Cross Society KII). Staff and volunteers stated that one cannot only be trained once in PFA but need additional topics to provide adequate support to complex reactions and in providing PFA. This was recognized in Montenegro where a basic PFA training helped but was not enough.

The EU4Health Project funded by EU DG Sante was specifically designed to scale up the provision of quality and timely services by National Societies to respond to the MHPSS needs of people displaced from Ukraine<sup>26</sup>. PFA was chosen, as a psychosocial support activity where skills and knowledge can be quickly and easily transferred with little to no knowledge and experience in MHPSS. However, a study conducted by Horn et al (2019)<sup>27</sup> found that a one-day training of PFA in Sierra Leone and Liberia supported the understanding of active listening but was not enough to transfer the skills necessary to support someone in distress as detailed by the Hobfoll principles that PFA is built upon<sup>28</sup>.

In Bulgaria and Ukraine where a strong MHPSS programme already existed the additional support of the IFRC Regional Office Europe and the IFRC PS Centre further entrenched PFA into their activities and service. But for other National Societies such as Red Cross of Montenegro and Lithuanian Red Cross Society where PFA had only been introduced as a mandatory two-hour online session, reiterated that to be able to meet the complex needs of displaced people from Ukraine there is a need for more than the current one-day training.

#### PFA – Terminology and Translation

It was noted, that the term PFA evoked apprehension with the target population as when hearing the term PFA many immediately thought it was the work of a psychologist, which *“raises expectations that you need to be a psychologist”* (Romanian Red Cross FGD). This was not only the case in Romania but also in Poland where the term PFA and the Look and Link action principles are often lost in translation (IFRC MHPSS Delegate in Poland KII). The term psychology can often be overemphasized in PFA contributing to the perception by those not familiar with PFA that PFA trainings, roll out and services needs to be provided by psychologists, countering the original intention and aim of PFA.

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<sup>26</sup> <https://go.ifrc.org/emergencies/5854/additional-info/eu4health>

<sup>27</sup> Horn et al., (2019) The myth of the 1-day training: the effectiveness of psychosocial support capacity-building during the Ebola outbreak in West Africa. *Global Mental Health* (2019), 6, e5,

<sup>28</sup> Horn et al., (2019) The myth of the 1-day training: the effectiveness of psychosocial support capacity-building during the Ebola outbreak in West Africa.

## Gaps

Supervision was identified as a missing component of the implementation of PFA across the National Societies of the study. Staff, volunteers, managers and technical advisers, all stated that supervision is a vital component to prevent doing harm, enhance the transfer of knowledge and skills and ensure the appropriate integration of PFA into services. Supervision was perceived as a tool to deepen and bridge the knowledge and implementation of PFA, while creating protecting boundaries for staff and volunteers when implementing PFA. Peer support and emotional and psychological support to deal with the stress and burnout was requested by staff and volunteers.

A challenge highlighted in the implementation of supervision was the language barrier between National Societies and Ukrainians working as staff and volunteers. They requested supervision, however many of the staff and volunteers who were seen as experienced and qualified to provide supervision did not speak Ukrainian which was seen as a needed pre-requisite.

A systematic review recognized that without supervision PFA could potentially lose its efficacy<sup>29</sup>. While acknowledging that providing supervision after a PFA training is vital to maintaining the Hobfoll principles underlying PFA<sup>30</sup>. In the 5-year review of PFA with MHPSS experts, even though the majority (87%) felt that supervision and coaching after a PFA orientation is necessary while only 67% felt that this was feasible in the areas they worked<sup>31</sup>. Thus, highlighting the need to include guidelines on what is defined as supervision, how supervision can be included, in what formats, and how to provide and plan for it before the implementation of PFA. According to the survey results (Figure 8), 21% of respondents from six National Societies did not receive any form of post-training support, refresher trainer or supervision internally or externally to the National Society while only 8 % of participants from the Ukrainian Red Cross Society had not received supervision or support.

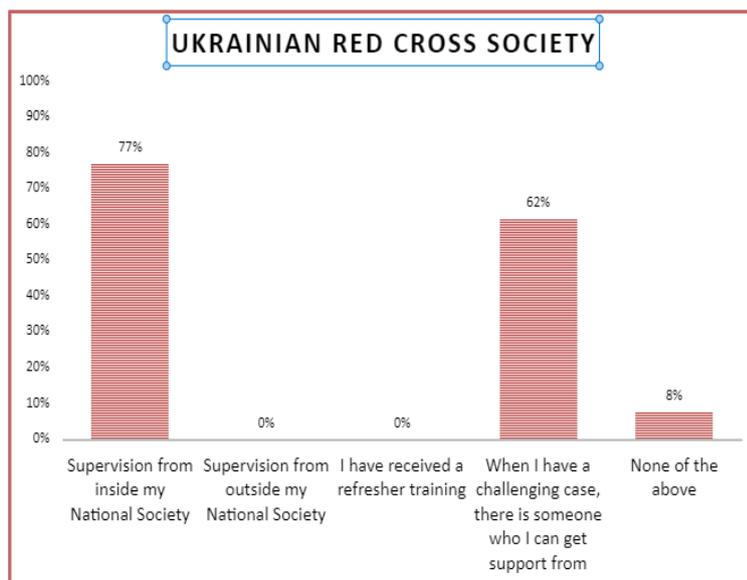
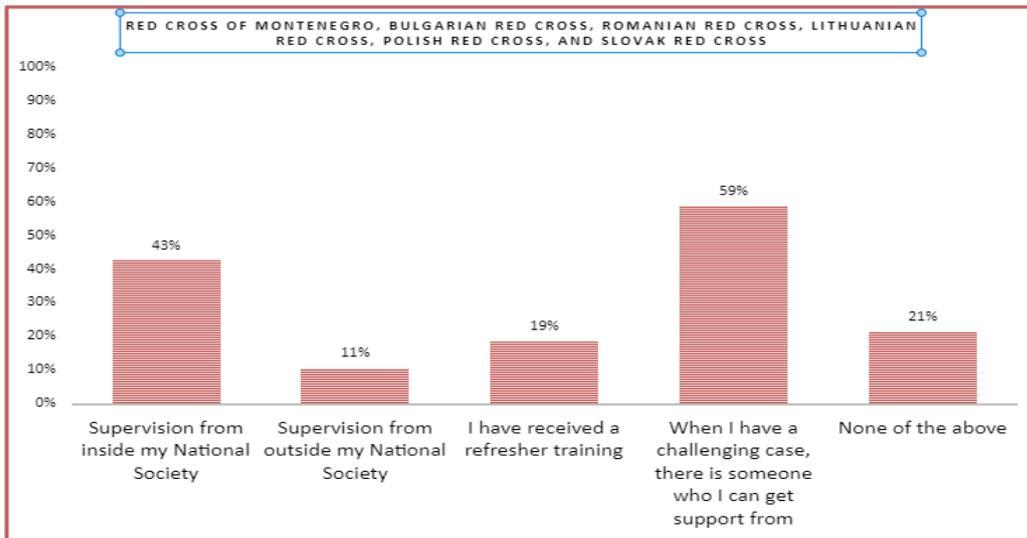
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<sup>29</sup> Wang, et al, (2021). Psychological First Aid Training: A Scoping Review of Its Application, Outcomes and Implementation. *Int. J. Environ. Res. Public Health*, 18, 4594

<sup>30</sup> Wang, et al, (2021). Psychological First Aid Training: A Scoping Review of Its Application, Outcomes and Implementation. *Int. J. Environ. Res. Public Health*, 18, 4594

<sup>31</sup> Snider, L. (2017) Psychological First Aid: Five Year Retrospective (2011-2016). Church of Sweden

**Figure 8. Support received after a PFA training**



### Complex reactions

Each of the National Societies mentioned the impact of the International Armed Conflict in Ukraine and the daily stresses on displaced and refugee Ukrainians. They expressed the need to understand how individuals and communities are impacted and how to support them. The National Societies reiterated that people fleeing from Ukraine need accessible, adequate, and appropriate psychosocial support due to the “distress, grief and loss, adjustment and integration experiences<sup>32</sup>”. It was highlighted by staff and volunteers that PFA

<sup>32</sup> EU4H IFRC Proposal: Provision of quality and timely psychological first aid to people affected by Ukraine crisis in impacted countries

provided the skills to establish safety and to help calm a person down, but some Ukrainians were showing complex reactions. These were expressed as signs and symptoms of depression, anxiety, stress, fear, anger and aggression, PTSD and psychosomatic symptoms. Staff and volunteers also said Ukrainians had experienced trauma, grief, and loss. These signs and symptoms of distress are common reactions for populations who have experienced conflict but still most people do not need specialized services rather access to basic needs and support to recover<sup>33</sup>. Understanding the MHPSS needs of the target population is important to ensure the provision of appropriate services and to reduce the potential for harm. Needs assessments findings should be central to the implementation of PFA. The response to these identified MHPSS needs should be done through the action principles of PFA and the appropriate establishment of a participatory, safe, and supportive referral system.

The Ukrainian Red Cross Society have complemented their PFA training with a module covering grief and loss due to the intense nature of the International Armed Conflict in Ukraine, *“for 1.5 years we didn’t have a session on grief and loss but now we see the need and we include grief and loss”* (KII). Appropriate psychoeducation on the complex reactions and the understanding of the impact of emergencies and for vulnerable groups such as children and adolescents as was highlighted by the Bulgarian Red Cross staff and volunteers. It is vital for staff and volunteers to be prepared to respond to complex reactions and ensure the appropriate considerations are included for vulnerable groups such as children and older persons. Still guidelines need to remain in place to ensure that PFA does not evolve into a psychological intervention to address complex reactions and maintain the ‘link’ action principle to refer to specialized services when needed.

“We are working with people who; have fled the war, lost their homes and families who have PTSD and an altered psychological state. At the start those working with Ukrainians were not prepared to deal with extreme reactions which affected their daily work”

“PFA represented a great help in providing support to the refugees that just arrived in the country but also in my work in RFL as the beneficiaries were usually in need of PFA because of their traumatic experiences and loss.”

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<sup>33</sup> Inter-Agency Standing Committee (IASC) (2007). IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings. Geneva: IASC.

## Sustainability

Many authorities have placed the responsibility of First Aid trainings and the integration into different sectors (education, health, rescue services etc.) to the National societies as part of their auxiliary role. This recognition of the role and expertise in First Aid has allowed National Societies to use the training to gain funds and build trust within their countries. Following this blueprint of being a trusted partner in First Aid, National Societies were leveraging their relationship with the authorities to gain the same role as the main partner of the implementation of PFA.

## Recommendations

The study findings highlighted the need to assess the current progress of National Societies in responding to the Ukrainian MHPSS needs using PFA.

The recommendations are given on three levels:

1. Reshaping PFA for the Ukrainian context to emphasize understanding of and addressing complex reactions to emergencies
  2. Developing guidance for the operationalization of PFA
  3. Strengthening the role of the management and increasing programme development.
- 
1. Reshaping PFA for the Ukrainian context to emphasize understanding and addressing complex reactions to emergencies.

A Guide to PFA (PS Centre 2019) includes an introduction to different kinds of crises and reactions to crises, as well as for children. PFA is not only about having the skills to helping someone in distress it also requires the knowledge and understanding of different types of crises and reactions. More emphasises needs to be placed on understanding different types of crises and how people, adolescents and children are impacted during trainings. The below points should be considered:

- Enhance the psychoeducational component in PFA training, possibly incorporating Information, Education, and Communication (IEC) techniques with key messages.
- Emphasise the PFA modules on different types of crises, reactions of crises complex reactions and situations.
- Stress that most individuals do not require specialised services rather first steps are to meet their basic needs in a supportive, safe, and empowering way.

- Deepen the understanding of trauma and trauma-informed principles, highlighting their intersection with the Hobfoll principles.
- Clarify the scope of PFA, what it entails, and its adaptability in the post-emergency phases.
- Provide guidance on discussing signs and symptoms of distress to prevent the labelling and pathologizing of symptoms.

## 2. Strengthen the operationalization of PFA

To effectively scale up PFA there needs to be guidance on the operationalization of PFA within National Societies alongside the transfer of knowledge and skills. This requires the development of tools to operationalize PFA.

### 2.1 Developing Impact Tools in PFA Implementation:

- Develop a standardized monitoring and evaluation template tailored to the specific requirements of PFA interventions, ensuring consistent and thorough assessment.
- Implement a structured plan for monitoring and evaluation processes, emphasizing the need for systematic data collection and analysis throughout the PFA program life cycle.
- Provide guidance on effective data collection methodologies to showcase diverse impact levels of PFA. This should encompass quantitative and qualitative approaches to offer a holistic understanding of the program's outcomes.
- Links to key documents for the development of Monitoring and Evaluation Framework should be included these would be;

[MHPSS-evidence-building\\_summary.pdf \(pscentre.org\)](#)

[Promoting-MHPSS-evidence-building\\_final-report.pdf \(pscentre.org\)](#)

[Building MHPSS evidence within in the RCRC movement – Presentation - Psychosocial Support IFRC \(pscentre.org\)](#)

[IASC Common Monitoring and Evaluation Framework for Mental Health and Psychosocial Support in Emergency Settings- With means of verification \(Version 2.0\).pdf \(interagencystandingcommittee.org\)](#)

[PFA-Guide-low-res.pdf \(pscentre.org\)](#) pg 97 - 103

### 2.2 Contextualization of PFA

- Prior to beginning with PFA, initiate a comprehensive assessment to pinpoint strengths, weaknesses, opportunities, and threats for effective scaling up of PFA and other MHPSS services. Based upon the assessment design the programme and implementation in relation to the operational context.
- Develop a basic guide on key considerations on how to adapt the training material and PFA approach to the needs of the National Society without compromising the quality and the characteristics PFA including the case writing guidance. This can be based upon Brief on Translating and Adapting the PFA Guidance<sup>34</sup>.
- Include training modules that enhance cultural sensitivity to ensure that PFA interventions are culturally appropriate, inclusive and respectful of diverse backgrounds.

### 2.3 Training and mainstreaming guidance

- Include a short introduction to adult learning principles, emphasizing the balance between knowledge transfer and practical exercises to develop competence and confidence.
- Equip trainers with vital facilitation and pedagogical skills for MHPSS sessions, encompassing effective group facilitation techniques. Familiarity with the core principles of MHPSS Emergency Settings outlined by the IASC is essential.
- Include a prerequisite for trainers to have received specialized training on PFA to ensure expertise in the subject matter. Conduct workshops on referrals encompassing service mapping, equip participants with the skills on how to refer to specialised services in a destigmatizing way.
- Provide a breakdown of different modules to be used in different context such as in person or online and how to apply this. In addition to how certain skills can be refreshed in preparation to deployment and how to debrief post deployment to ensure the appropriate use and reduction of harm of PFA. This could include a linkage to supportive supervision with detailed competencies as detailed below with WHO/UNICEF Ensuring Quality in Psychological Support (EQUIP)<sup>35</sup>.

### 2.4 Supportive Supervision

- Provide a brief yet comprehensive description on supportive supervision, outlining its role and significance when providing PFA and conducting PFA training.
- Develop a competency framework, based on the WHO/UNICEF EQUIP<sup>36</sup> model, outlining the knowledge and skills required for PFA providers, trainers, and trainers of trainers.

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<sup>34</sup> [Microsoft Word - 2018 PFA Translation and Adaptation Guidance.docx \(pscentre.org\)](#)

<sup>35</sup> [Ensuring Quality in Psychological Support \(EQUIP\) global scale up training \(who.int\)](#)

<sup>36</sup> [Ensuring Quality in Psychological Support \(EQUIP\) global scale up training \(who.int\)](#)

- Offer basic guide on planning, rolling out, and providing supportive supervision, incorporating best practices from the Integrated Model of Supervision (IMS). [The Integrated Model for Supervision - Psychosocial Support IFRC \(pscentre.org\)](#)
- Merging Caring for Volunteers; a Psychosocial Support Toolkit practices and principles into the general administration and the management of staff and volunteers

## 2.5 Key messages

- Identify and develop key messages to effectively promote the integration and mainstreaming of PFA within National Societies.
- Develop key messages on highlighting the impactful role of PFA in the development of National Societies, emphasizing its contribution to fulfilling their mandate and auxiliary responsibilities.
- Communicate key messages on positioning PFA as a strategic entry point for fortifying and structuring MHPSS programs or broader services.
- Highlight PFA vital role in shaping a comprehensive MHPSS framework.

## 3. Management/programme development

To ensure the successful implementation of PFA, it is imperative to have a staff equipped with the necessary experience, knowledge, and skills. This includes not only proficiency in PFA but also a solid understanding of project management and fundamental knowledge of MHPSS. A strategic approach, beginning with a comprehensive SWOT analysis, becomes pivotal in guiding the contextualized and integrated deployment of PFA skills within National Societies, thereby fostering sustainability.

Conducting a SWOT analysis allows for a thorough examination of the strengths, weaknesses, opportunities, and threats in the PFA implementation. These insights serve as the foundation for a strategic and tailored approach to effectively integrate PFA. With this, PFA is anchored within the broader framework of National Societies, particularly within health, disaster management, social services, integration departments, strategy, and overall organizational structures.

Furthermore, the SWOT analysis findings emphasizes how PFA can be instrumental in achieving the mandate and auxiliary role of National Societies. It positions PFA as a vital component in addressing the needs of displaced Ukrainians, contributing to the overall enhancement and integration of MHPSS services. Conducting workshops with National Societies to discuss and reinforce the key findings of the study becomes a collaborative and participatory strategy to further strengthen their MHPSS services and facilitate the broader integration and implementation of PFA. This participatory approach ensures that

PFA becomes an integral part of the organizational fabric and responsive to the dynamic needs of the communities it serves.

## Conclusion

Investigating the role of PFA within the IFRC Ukraine MHPSS response showed that PFA has multiple outcomes across National Societies. These outcomes can be used to advocate for the adoption of PFA within wide scale responses to meet the MHPSS needs of a target population.

The use of PFA within the Ukraine Response emphasises that PFA can be used to provide a direct service and to build the capacity of National Societies to respond to the MHPSS needs of their target population. In addition, PFA gave the skills and knowledge to address displaced people from Ukrainian MHPSS needs, promoted staff and volunteers' wellbeing practices, and supported National Societies to achieve their mandate. The promotion of PFA within the Ukraine response was found to support the establishment of an MHPSS programme within National Societies. This could be attributed to multiple factors both internal and external to the Red Cross and Red Crescent Movement.

However significant gaps and challenges were missing in the planning and implementation of PFA. These were, limited supportive supervision, evidence building tools and guidance tools on how to operationalise and contextualise PFA. It is recommended that resources to support and guide the mainstreaming and upscaling of PFA needs to be provided alongside training material and modules.

More experimental research should be done in different regions better understand the wider impact of institutionalising PFA within the Movement in different contexts.

## Annex 1 National Society Data Collection

For each country the number of FGD, KII and survey participants

	FGD Staff and Volunteers	FGD displaced people from Ukraine	KII	Survey
Polish Red Cross	0	0	2	10
Ukrainian Red Cross Society	1		3	13
Slovak Red Cross	1	0	3	6
Lithuanian Red Cross	4	3	4	17
Red Cross of Montenegro	2	2	7	11
Bulgarian Red Cross	3	3	3	16
Romanian Red Cross	4	1	3	13
IFRC ROE	0	0	2	0
IFRC PS Centre	0	0	3	0
<b>Total</b>	<b>15</b>	<b>9</b>	<b>30</b>	<b>86</b>

## Annex 2 Inception Report

### Impact Study:

#### The role of PFA in the IFRC Ukraine MHPSS response.

Inception Report, 1 July 2023

##### Aim

The study aims to understand how Psychological First Aid methodology has been used in the Ukraine response and its wider impact within the general context of Red Cross/Red Crescent National Societies Ukraine Response. The study will explore the role of PFA and how National Societies' have utilized it in the Ukraine response for NS development and in parallel to their other activities. Further the study will map out the challenges, gaps, and successes in introducing PFA to meet the demands and needs of NS's within the Ukraine response. In addition, the study will identify correlating factors which have shaped the roll out and institutionalization of PFA by NSs both with the Ukraine response and elsewhere. Four National Societies will be chosen to partake in field visits while two will be included remotely. These case studies will showcase the role of PFA to NS's responses, provide recommendations for next steps of the PFA roll out in the Ukraine response and inform future responses to emergencies.

##### Objectives

- 1) Map and document the process of PFA implementation to identify what the intention and use of PFA is/has been within the Ukraine response and the general context of Red Cross/Red Crescent national societies.
- 2) Review and document the method of PFA implementation – explore what methods (trainings, introductory meetings etc) were used to introduce PFA into the Ukraine response and specifically the chosen Red Cross/Red Crescent National Societies by using data sets such as, mandates, strategic objectives, and capacity assessments.
- 3) Understand each of the selected National Societies Ukraine response and to what extent PFA is being used in the response and for wider National Society MHPSS capacity and why.
- 4) Review the potential sustainability of PFA and evaluate the wider impact it has had in selected NSs.

##### Guiding Questions:

1. What are pre-existing documents, support and approaches that have played a role in the institutionalization of PFA capacity?

2. What is the perception of PFA by NS at the macro (i.e. managers and team leads) and micro level (i.e. providers) in achieving their goals and meeting their implementation needs?
3. What are the wider capacities and correlating factors impacting the roll out and implementation of PFA in the NS and wider Ukrainian response including what was the timeline that PFA was introduced and did this play a factor in its up take and roll out in the Ukraine response?
4. How has PFA been used by NS in response to the MHPSS needs identified in the Ukraine response and wider NSs activities and staff and volunteer needs?
5. What are the challenges, gaps, strengths, and lessons learnt in the current implementation of PFA by NS in the Ukraine response and potentially within NS other sectors and activities?

## **Methodology**

The study will undertake a qualitative approach to better understand how PFA has been utilized within the Ukraine Response. Case study approach was chosen to allow for an indepth exploration of the impact of Pfa within the Ukraine response. The study will be both an inperson and online collection of data. National Societies included in the field visits were chosen based on their availability and willingness to participate in the study. The two that are to be included as online studies were included due to their interest but inability to host the field work. The six National Societies offer a diverse analysis as each of these countries are at different stages of implementation as well as experience of PFA and providing MHPSS services in their National Societies. The study will focus on collecting qualitative data through individual interviews and focus groups with those who have been directly trained, implementing, and receiving PFA. A survey will be used to gather a wider perspective of the study and will be released to all National Societies.

This inception report details the methodology and the timeline to meet the objectives and the aim of the Impact Study. The inception report includes what resources are required, the structuring of the data collection methods and the outputs of the study.

- a. Literature review
- b. Survey
- c. KII
- d. FGD
- e. Outputs
- f. Timeline

## Literature review

The literature review will be an analysis of internal documents and previous assessments used to guide the Ukrainian response such as needs assessments and Organizational capacity assessments. In addition, with the ongoing implementation of PFA, the monthly reports of the project indicators will be reviewed. Project documents will also be gathered to assess the timeline of the project, implementation and the roll out of PFA in the different National Societies. Internal documents such as strategic approach to the Ukrainian response, country plans and NS reports of the case study National Societies will be used to gain a more in depth understanding of these National Societies.

Objectives	Documents
Assessing the MHPSS strengths, needs and the gaps of the National Societies responding to the Ukrainian Response	Organizational Capacity Assessment Needs assessments. M&E reports
National Society Case Studies	Strategic developments
Mapping of the roll out of the PFA of Ukrainian response	M&E report Training reports Training material
MHPSS needs of the target population are being met	Needs assessments of Ukrainian refugees external

### Other key documents.

1. Organizational capacity assessment results for relevant study NSs
2. IFRC Emergency Appeal: [Russia-Ukraine: International armed conflict | IFRC](#)
3. IFRC Operational updates: [Russia-Ukraine: International armed conflict | IFRC](#)
4. IFRC MHPSS operational strategy for the Ukraine response
5. PSC/ROE Assessment reports (Ukraine, Hungary, Slovakia, Romania, Poland)
6. EU4H proposal (phase 1 and phase 2)
7. EU4Health project reports
8. Monthly country specific operational reports
9. NS adapted PFA training curriculum
10. PSC PFA methodology
11. Global MHPSS survey report
12. Call center guidelines
13. Supervision tools for providers of PFA

## Survey

The survey will be an opportunity to have a broad overview of the impact of the PFA trainings and how PFA has been understood and implemented in the different NS. This survey will be conducted at the different field visits but also be asked at the Communities of Practice and Learning.

Participants – these will be volunteers and staff from National Societies who have received a PFA training and are included in the Ukrainian response. The survey will be translated and checked by National Society focal points.

*Dear Colleague,*

*Please help improve the support to Ukrainians by responding to this survey on how you use Psychological First Aid. The survey is anonymous and will not be assessing you or the National Society. We want to learn more about the role of PFA in the Ukrainian Response. It is for all who have attended a PFA training in the Ukrainian Response and managers. Our aim is to learn from your knowledge and experience, so that we will better be able to design services and provide support. The survey is designed to learn from your experiences and knowledge. Your participation is voluntary. If you choose to participate in the survey, then I can assure you that your information will remain confidential. You are free not to take part.*

*I appreciate your help very much and for any questions please email Sarah Kate van der Walt: sawal@rodekors.dk.*

1. Country of National Society:\*

- Slovakia
- Romania
- Poland
- Ukraine
- Czechia
- Lithuania
- Bulgaria
- Montenegro

2. What is your position in your National Society? Select all that applies:

- Programme Manager
- Project Officer/ Project Manager
- Volunteer
- Trainer
- Volunteer Team Leader/ Volunteer Manager
- Staff
- Other

3. How long have you been in your National Society ?

- 11 months
- 2 years
- 2-5 years
- 5- 10 years
- more than 10 years

4. I am working with Ukrainian refugees:

- Yes
- No
- Sometimes

4.1. Please specify your role when you were involved in the Ukraine Response?

5. I have knowledge in the area of:\* Select all that applies:

- Health
- Mental Health
- Psychosocial Support
- Social Services
- Project Management
- Volunteer management
- Other

6. When was Psychological First Aid introduced in your National Society?\*

- More than 3 years ago
- 3 -2 years
- 2 -1 years
- With the response to Ukraine and impacted countries crisis
- Don't know

7. Have you attended a Psychological First Aid training before August 2022?\*

- No
- Yes

7.1. If you have attended a Psychological First Aid training before August 2022, how long was the training.

Select all that applies

- 4 hours
- 8 hours (1 day)
- 1.5 days
- 2 days
- more than 2 days
- Other
- Can't remember

8. Since August 2022 which Psychological First Aid training have you attended? Select all that applies

- I received a PFA Training of trainers facilitated by my NS
- I received PFA training facilitated by my NS
- I have received PFA training facilitated by IFRC Psychosocial Centre ( hosted by IFRC in Budapest)
- Other

9. Psychological First Aid helps me to meet the needs of displaced Ukrainians\*

- Yes
- No, it is not relevant to the work I do
- Sometimes

10. In my National Society we use Psychological First Aid to, select all that applies\*

- Provide direct support to those in distress
- To improve our knowledge and skills for our MHPSS programme
- We use it in other services as well such as shelter, health and WASH
- Support my colleagues and friends and family
- Train colleagues who work in other sectors
- None – we have been trained in it but haven't started using it
- Other

11. What part of Psychological First Aid have you used the most when responding to the needs of displaced Ukrainians\* Select all that applies

- Identifying who needs assistance
- Talk, approach and interact with someone in distress
- Linking people to resources and information to cope with their situation
- Self-care and caring for others
- Helping skills
- Other

12. There is a clear strategy to how Psychological First Aid is to be used in the National Society for the Ukrainian Response\*

- Yes there is a clear approach in how Psychological First Aid is being implemented to respond to the needs of displaced Ukrainians
- MHPSS is included in my National Society overall strategy
- I don't know what the approach is
- No we don't have a clear approach

13. I am supported in implementing Psychological First Aid:\*

- Yes
- No
- Sometimes

14. After the Psychological First Aid training, I have;\* Select all that applies

- Supervision from inside my National Society
- Supervision from outside my National Society
- I have received a refresher training
- When I have a challenging case, there is someone who I can get support from
- None of the above

15. What are the biggest challenges in using Psychological First Aid in the Ukrainian Response?

### **Key Informative Interviews**

Aim: To have more detailed/ in-depth exploratory conversations with staff overseeing the implementation of the Appeal and relevant projects, and supporting NSs in responding to the needs of Ukrainian refugees.

Project manager in NS, the RoE and the PS Centre

MHPSS focal points at the regional office

National Society MHPSS focal Points in the selected National Societies

MHPSS delegates at the regional office, country-cluster offices and in-country/ NS specific

MHPSS partners guiding the EU4H, Ukraine core funding appeal and MHPSS-EN network (PS Center)

IFRC Europe Regional of Health and Care Manager

### **KII with those overseeing the implementation of Ukrainian response**

i.e. project managers, RoE, project partners supporting of PFA, TA

1. How do you define PFA?

Needs to be broader than just a project to also include the IFRC Ukraine Appeal and French pledge. Can tailor questions depending on staff (e.g., PS Centre staff are not involved in French pledge & Appeal, and some NSs are not included in EU 4 Health e.g., Montenegro).

➤ What is the role of PFA in the Ukrainian response

2. PFA was the chosen modality of the EU 4 Health project – do you think this was the right choice or do you think another modality should have been chosen? Why?

3. Based on your interactions with the NS how do NS societies understand PFA

4. What are some of the principles that are easy for them to integrate into their work?

5. In what way is PFA being used in the Ukraine Response (give examples),

➤ Does this differ according to the regions/areas?

➤ If so what do you think are the reasons for this?

6. What has been some of the factors that have influenced how PFA is understood within the NS?
  - History (previous conflict etc)
  - MHPSS projects
  - Sectors
  - Staff qualifications
7. How does PFA fit into the strategic development and work of the NS's
8. What is the role of PFA in building the capacity to strengthen the implementation of MHPSS in the NS?
  - If supporting, what are the aspects of PFA do you think would lend itself to this,
  - If not why not and what else should be considered when building the capacity to implement MHPSS in NS
9. Based on the project what have you seen as the strengths of PFA?
10. Based on the project what have you seen as the challenges/limitations of PFA
11. What has supported the implementation of PFA?
12. What have been the barriers in implementing PFA
13. What are additional considerations when using PFA in emergency/crisis/conflict/refugee responses based on your observations of this project?

#### **KII with those with management/strategic positions in the NS**

1. Are you familiar with Psychological First Aid?
2. How has PFA been used in the Ukraine response
3. What has been the impact of PFA in the NS?
4. Do you think PFA is important to be included in the NS Ukrainian response?
5. What is the role of PFA in your work currently supporting Ukrainian refugees, and in the future?
6. Has PFA changed the way you have worked? If yes, give examples
  - What have these been
  - What was the impact of these changes
  - Have you had to make any changes to how you have implemented PFA
7. In meeting the MHPSS needs of Ukrainian refugees has there been any significant changes in your programme/activity development and what has these been?
  - What has caused these changes
8. What are factors that have influenced the roll out of PFA
9. Does PFA extend to other sectors other than MHPSS in your NS?
10. Was there anything that made it difficult to start rolling out PFA in your organisation?

11. Was there anything in your mandate, history of your NS that supported the roll out and the uptake of PFA/meeting the MHPSS needs of Ukrainian Refugees?
12. When designing an MHPSS programme in your NS what should/needs to be considered?
  - Does PFA support this?
  - What existing activities can you build on?
  - What are some of your challenges?
13. Since your NS has been exposed to PFA, in your opinion, what was the impact of this in the NS?
  - what was the most significant change from the NS being exposed to PFA?
  - Why you think this is a significant change?
  - If there was no change why not?

### **Focus Group Discussion**

Gain a more in-depth understanding of the implementation and the roll out of PFA with staff who have been trained and those who are Master trainers (can conduct ToTs).

- NS attendees to the PFA trainings
- NS attendees to the PFA TOT
- Ukrainian refugees
- Master Trainers

### **FGD Themes to be covered with those who have received a PFA training and are using it in their work**

1. What is the role of PFA in your work?
2. How is PFA used in your work?
  - What is the role of PFA within the Ukrainian Response in your NS?
3. What part of PFA do you use in your work?
  - Ask for examples.
4. What are the demands (skills/knowledge) made on you to address the MHPSS needs of Ukrainian refugees?
5. Is it easier to identify the needs of Ukrainian Refugees after attending the PFA training?
  - Ask for examples.
6. What are the challenges in using PFA in your work?
7. After a PFA training what has been the most significant change in relation to learning about PFA?
  - Has there been a change?
  - What are some examples?

8. Do you see any impact from using PFA the work/outcomes of PFA in your work?
9. Do you have any additional reflections?

**FGD with those who have received a TOT in PFA.**

1. What sectors do you work in?
2. How would you define PFA?
3. Have you used PFA in the work you do?
  - If yes how (examples) if no why?
4. In your training of PFA what was the most important part of PFA that you shared with the others?
5. How do you see PFA being used by volunteers who receive the training
  - Do you see the PFA fitting into your NS?
6. Who do you think should receive the training of PFA in your NS? Why?
7. Is PFA meeting the demands of the Ukrainian Response?
8. Since your NS has been exposed to PFA, in your opinion, what was the impact of this in the NS?
  - what was the most significant change from the NS being exposed to PFA?
  - Why you think this is a significant change?
  - If there was no change why not?

**FGD with refugees from Ukraine**

To better understand the impact of PFA with beneficiaries and if it is meeting their needs, a FGD will take place with Ukrainian Refugees,

Ukrainian Refugees

1. What services have you received from the Red Cross/ what Red Cross activities have you been involved in?
2. What words would you use to describe the services you receive from the Red Cross/ activities you are involved in?
3. Do you feel listened to and understood when interacting with Red Cross volunteers?
4. How does the NS share information with you about services or resources available?
5. What are some of your experiences in engaging with the Red Cross. Probe: examples.
6. Have you ever been referred by the Red Cross to other services/ organisations/ agencies providing support?
7. Do you have any suggestions for the Red Cross to help them (better) meet the mental health and psychosocial support needs of Ukrainians?