



**Terms of Reference
Gaza and West Bank**

I. DETAIL INFORMATION	
Title	MHPSS Specialist
Position	P3 and P4
Duty Station	Gaza Strip and Jerusalem
Reporting to	Micaela Pasini, Chief of Child Protection, UNICEF SOP
Start/end date/Timeframe	1 January – 30 March 2023 (3 months)
II. BACKGROUND/CONTEXT	
<p>The context in the State of Palestine (SOP) remains a protracted crisis with recurrent escalations of hostilities between Israel and Palestinian armed groups and increasing protection issues both in Gaza and the West Bank. During the latest outbreaks of hostilities in August 2022 and May 2021, 253 Palestinians, including 84 children and 38 women were killed. Almost 2,000 Palestinians were injured during the hostilities, including over 600 children and 400 women, of whom some 10 percent may suffer from a long-term disability requiring rehabilitation (source HNO). Together with other policies and practices, the threat of destruction of homes and sources of livelihood contributes to the generation of a coercive environment pressuring people to leave their areas of residence. Demolitions leave many Palestinians throughout the West Bank, including East Jerusalem, with no option but to leave their homes and communities. Other elements of the coercive environment include forced evictions; the promotion of plans to relocate communities to urban townships; restrictions on access to natural resources; the denial of basic service infrastructure; the lack of secure residency; and settler violence (Protection Analysis Updates, 2022). As a result, Palestinian has one of the highest burdens of mental disorders in the Eastern Mediterranean Region, with 54 percent of Palestinian boys and 47 percent of Palestinian girls (aged 6 to 12 years) presenting emotional and/or behavioral disorders (source PAU, 2022).</p> <p>Multiple service providers expressed the need to coordinate MHPSS across sectors to deliver MHPSS services. Previously, attempts were made to maintain a sustainable MHPSS TAG, but more resources to engage a full-time coordinator were needed. In October 2022, the Health, Education, and Protection cluster and the CP AoR agreed on the structure and functioning of the appropriate MHPSS coordination mechanism. The MHPSS structure is in line with the guidelines and recommendations of the IASC MHPSS Reference Group, the needs identified in the West Bank, and the recommendations of the IASC MHPSS surge support. The MHPSS Technical Working Group will operate at the national level in Jerusalem. The surge support will assist the leadership of the TWG in the start-up phase in Jerusalem and work closely with the surge support at the sub-national level in Gaza to ensure consistency. UNICEF and other partners co-chairing the MHPSS TWG at the national level will seek long-term support to maintain the group.</p>	
III. OBJECTIVE	
<p>The objective of the MHPSS Specialists is to support the intersectoral MHPSS coordination for Health, Nutrition, Protection (including GBV and child protection), Education, WASH, Shelter, and Food Security to reach more people in need of higher quality services.</p>	

IV. RESPONSIBILITIES AND ACCOUNTABILITIES
<ol style="list-style-type: none"> 1. Provide technical support to the co-chairs to roll out the multisectoral MHPSS TWG that will involve the key Cluster members. 2. Support the co-chairs and leading clusters (Protection, Health, and Education) to develop the MHPSS TWG action plan for 2023 (work plan). 3. Conduct an assessment with MHPSS partners to identify gaps and skills for capacity building on service delivery and contribute to addressing the identified needs. 4. Map and operationalize the existing MHPSS services/projects/activities within the Protection, Health and Education clusters, with the aim to ensure the coverage of needs at all levels and strengthen referral pathways between services providers. 5. With the support of the Cluster Coordinators, initiate the collaboration and coordination with the Mental Health Thematic Group led by MoH and amongst agencies and diverse stakeholders. 6. Develop an interagency technical framework for MHPSS work, and relevant guidelines and set standards for quality provision of MHPSS in line with the IASC guidelines. 7. Develop individual work plans out of the TOR.
V. DESCRIPTION OF ASSIGNMENT
<p>The MHPSS Specialists will closely work with the co-chairs of the TWG to arrange the MHPSS meetings. For the first few months, the members will meet twice a month and later revert to monthly meetings. The agenda will be drafted and shared at least a week before the regular meeting. The MHPSS Specialist will encourage members to engage in the active contribution of experiences, perspectives, and inputs to the technical group and ensure tasks are distributed equally. Work closely with the cluster-AoR representatives responsible for informing and acting in accordance with their line ministry and with the relevant UN agency. Ensure clusters (WASH, Shelter, and Food Security) communicate a unified message/briefing to their respective members on the discussions, recommendations, and decisions reached by the MHPSS TWG.</p>
VI. REQUIRED QUALIFICATIONS AND EXPERIENCES
EDUCATION
<p>Advanced University degree in psychiatry, psychology, social work, or allied science from an accredited/recognized institute.</p>
EXPERIENCES
<p>At least eight years of P4 of relevant experience, at the national level and six years of P3 in relevant experience in the assessment, development, and implementation of policies, strategies, and action plans for MHPSS in the context of emergencies. Experience in capacity building, developing, and promoting collaborative partnerships.</p> <p>Desirable:</p> <ul style="list-style-type: none"> • Experience with implementing emergency MHPSS needs assessments and situational analysis • Experience in MHPSS IASC guidelines and PFA



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- Relevant work experience in UN agencies, and relevant non-governmental or humanitarian organizations.
- Experience in working for or with a relevant government ministry such as the Ministry of Health, Ministry of Social Development, and Ministry of Education in a low or middle-income country.

VI. LANGUAGE

For this position, fluency in English is required, (oral and written). The Arabic language is an added advantage.