World Health Organisation (WHO)

MHPSS TWG Coordinator – Mogadishu, Somalia

Terms of Reference

I. POSITION INFORMATION	
Position title	Mental Health and Psycho-Social Support Technical Working Group (MHPSS TWG)Coordinator
Position grade	P3
Duty station	Mogadishu, Somalia
Reports directly to	Health cluster coordinator
Estimated start date & timeframe	ASAP for 6 months

II. ORGANIZATIONAL CONTEXT AND SCOPE

Somalia is currently facing a complex and protracted humanitarian crisis driven by ongoing conflict, terrorism, civil unrest, and recurring climatic shocks. Decades of conflict, frequent outbreaks of cholera and measles, pervasive poverty, and recurring climatic shocks—including the recent drought and subsequent floods—have severely undermined Somalia's already fragile health system.

As a result of these compounded challenges, a significant portion of the population, particularly the youth, is grappling with deep-seated psychological issues that have largely gone unaddressed. Recent data from the Federal Ministry of Health (FMOH) and the World Health Organization (WHO) (2023) indicate a high prevalence of mental disorders, with anxiety disorders being the most common. These findings are consistent with earlier studies that highlighted elevated rates of mental health issues in conflict and post-conflict settings, and they align with previous research conducted in Somalia. This underscores the urgent need to integrate mental health and psychosocial support (MHPSS) into primary healthcare and other service sectors, such as education, especially given that most of the Somalia's population is young.

Over two-thirds of Somalia's population—approximately 15.4 million people—are young men and women, with 73 percent under the age of 30. Most of these young people have known only conflict throughout their lives, having experienced, witnessed, or been exposed to extreme violence, destruction, displacement, and personal loss. Many have had their lives uprooted and aspirations denied. This situation is further complicated by traditional gender norms and societal practices, where the stigma surrounding mental illness and psychosocial issues often hinders recovery efforts. Vulnerable sub-groups include displaced individuals, young women at high risk of gender-based violence (GBV), and certain groups of young men, such as ex-combatants, idle youths who have lost the means to support their families, and young men at risk of detention or violence. Conflict and insecurity affect men and women differently, with women and children often being the most vulnerable and hardest hit. Women, in particular, are more susceptible to abuses and various forms of GBV, including rape, sexual assault, forced prostitution, and domestic violence. In 2018, over 76 percent of recorded GBV survivors were from internally displaced persons (IDP) communities. Additionally, widespread practices such as Female Genital Mutilation (FGM) and early forced marriage pose significant risk factors for mental illness and psychosocial disruption among women. Without proper

community support structures and focused services, these psychosocial challenges can become chronic and long-lasting.

The recent large explosion at Lido Beach in Somalia has further exacerbated the already dire mental health situation among the civilian population, particularly affecting women and children. This tragic event, occurring within a context already marked by decades of conflict and insecurity, has been classified as a G3 emergency, compounding the ongoing humanitarian crisis in the country. The psychological toll of such incidents is profound, necessitating an urgent response. In this country context, Psychological First Aid (PFA) training has been provided over time by various partners. However, there are currently no systems in place to monitor the standards of care or outcomes of these interventions. Efforts to utilize the Mental Health Gap Action Programme (mhGAP) and its Humanitarian Intervention Guide (mhGAP-HIG), including integration into primary health care, have been explored. The revised Essential Package of Health Services (EPHS 2020) for Somalia includes mental health care at all service levels, from community health to referral hospitals. However, technical expertise and sustained efforts from all competent actors are essential to operationalize these services effectively. WHO is promoting the establishment of a university course on Psychology, expected to start at SIMAD University before end 2024, and preliminary seminars are planned in October.

III. RESPONSIBILITIES AND ACCOUNTABILITIES

1. Provide leadership and technical advice to strengthen the MHPSS Technical Working Group, in terms of governance and of technical contents.
2. Support mental health policy and strategy working and steering groups, by facilitating such and providing technical input.
3. Support and facilitate the coordination functions of the country's health institutions.
4. Support MHPSS within the Cluster system, at the Inter-Cluster Coordination Group (ICCM) and non-MHPSS actors, the Government of Somalia, and within the Donor Community.
5. Contribute to the design of and deliver capacity-building actions such as training of trainers, specialized training, and awareness-raising initiatives (orientation seminars, mini-trainings, briefings, project reviews) for MHPSS stakeholders in public, private sectors, and civil society using evidence-based tools and guidelines available (mhGAP-IG/HIG, PFA, Basic psychosocial skills, IASC guidelines (incl. Referral mechanism guidelines), WHO-UNHCR toolkit, etc.).
6. Contribute to the institutional of training by contributing to the establishment of the University course in Psychology in country. Contribute to the design and implementation of preliminary seminars.
7. Support partners in resource mobilization for MHPSS activities.
8. Contribute to the adaptation of existing MHPSS tools and standards of care to the context of Somalia with a particular focus on:
   - Mainstreaming MHPSS in project design by relevant clusters.
   - Contributing to the integration of mental health care into PHC, in line with the country's service delivery framework, the EPHS 2020, including referral system across levels.

9. Maintain an up-to-date matrix of MHPSS projects (4Ws) that include actual and future interventions to be published and shared with relevant stakeholders, donors, and governmental agencies on a regular basis.
10. Support to update the online MHPSS dashboard.
11. Perform such other duties as may be assigned by the hosting agency WHO and the health cluster coordinator.

IV. REQUIRED QUALIFICATIONS AND EXPERIENCE

EDUCATION

- Master's degree in Psychiatry, Psychology, Social Work, Counselling or a related field from an accredited academic institution with three to five years of relevant professional experience; or
- University degree or a three-year diploma in the above fields with three years of relevant professional experience.

EXPERIENCE

- Experience in MHPSS responses in humanitarian contexts.
- Experience working in conflict/humanitarian contexts.
- Proven expertise in establishing Mental Health and Psychosocial Support (MHPSS) helplines, including the development and implementation of best practices in line with international standards.
- In depth theoretical and practical knowledge of the IASC Mental Health and Psychosocial Support in Emergency Settings guidelines and associated products (e.g., IASC Assessment toolkit, the 4Ws mapping tool, M&E framework, and the Health, Protection and CCCM booklets);
- Experience in coordinating the delivery of health-related interventions and good understanding of the primary health care principles.
- Strong networking capacities for constructive relationships with all humanitarian actors (e.g., OCHA, ICRC, Cluster Leads, UN agencies, INGOs, NNGOs and CBOS), Donors and relevant Government Line Ministries;
- Experience in working in large scale complex humanitarian emergencies and protracted crises (previous working experience in Somalia is an advantage);
- Familiarity with the humanitarian architecture (cluster system), humanitarian appeals, humanitarian response plans and common humanitarian funds;
- Ability to work independently and under pressure

V. LANGUAGES

Required (specify the required knowledge)	Advantageous
For this position, fluency in English is required (oral and written).	Somali or Arabic will be considered an asset.

VI. COMPETENCIES

The incumbent is expected to demonstrate the following values and competencies:

Values

- Inclusion and respect for diversity: respects and promotes individual and cultural differences; encourages diversity and inclusion wherever possible, respect of the local culture and diversity.
- Integrity and transparency: maintains high ethical standards and acts in a manner consistent with organizational principles/rules and standards of conduct.
- Professionalism: demonstrates ability to work in a composed, competent and committed manner and exercises careful judgment in meeting day-to-day challenges.

Core Competencies – behavioural indicators
- Teamwork: develops and promotes effective collaboration within and across units to achieve shared goals and optimize results.
- Delivering results: produces and delivers quality results in a service-oriented and timely manner; is action oriented and committed to achieving agreed outcomes.
- Managing and sharing knowledge: continuously seeks to learn, share knowledge and innovate.
- Accountability: takes ownership for achieving the Organization's priorities and assumes responsibility for own action and delegated work.
- Communication: encourages and contributes to clear and open communication; explains complex matters in an informative, inspiring and motivational way; respects cross-cultural and cultural appropriate communication principles.

Managerial Competencies – behavioural indicators
- Leadership: provides a clear sense of direction, leads by example and demonstrates the ability to carry out the organization's vision; assists others to realize and develop their potential.
- Empowering others and building trust: creates an atmosphere of trust and an enabling environment where staff can contribute their best and develop their potential.
- Strategic thinking and vision: works strategically to realize the Organization's goals and communicates a clear strategic direction.