WHO

Terms of Reference – MHPSS Surge Deployment | WHO Lebanon

Position information	
Position title	MHPSS Consultant in emergency setting P3/P4 – Capacity-building, Monitoring & Evaluation and Preparedness
Reports directly to	WHO Country Office Lebanon
Timeline	23 November 2026 to February 2027
Type of request	New 2-month deployment, building on the previous surge deployment hosted by WHO Lebanon

Background and context

Humanitarian situation

Since hostilities escalated on 2 March 2026, nearly the entire population south of the Litani River has been directly affected, along with significant parts of Baalbek Governorate, the Bekaa Valley, and large areas of Beirut's southern suburbs. More than one million people have been displaced; a growing number have been returning to their areas of origin since the ceasefire, which brings new MHPSS needs linked to return and recovery.

As of 29 September 2026, the Ministry of Public Health reported 16,799 total casualties (12,413 injured and 4,386 killed) *(source: WHO SitRep, 29 September 2026)*.

The scale of the crisis has significantly increased mental health and psychosocial support (MHPSS) needs among affected populations, including displaced and returning communities, injured people, families of victims, and frontline responders. At the same time, humanitarian actors continue to rapidly expand MHPSS activities across multiple sectors, including health, protection, education, and community-based services.

MHPSS coordination and strategic framework

An inter-agency MHPSS Coordination Group (CG) is functional in Lebanon, chaired by the National Mental Health Programme (NMHP) at the Ministry of Public Health (MoPH) and co-chaired by WHO and UNICEF. It is multisectoral and inter-agency, and comprises more than 90 organizations (UN agencies, I/NGOs, civil society, universities, private practice, and national authorities). Its mission is to ensure an effective, coordinated and focused inter-agency response to the MHPSS needs of the people affected by the crises.

WHO and the NMHP work closely with partners in different sectors, including government entities, UN agencies (UNICEF, UNHCR, UNFPA, etc.) and I/NGOs, to ensure that MHPSS is mainstreamed across activities.

The response is aligned with the National Mental Health Strategy and with the WHO Eastern Mediterranean Regional Action Plan on Mental Health and Psychosocial Support 2024–2030. The deployment will also be guided by the IASC Guidelines on MHPSS in Emergency Settings and their associated products, in particular the IASC MHPSS Minimum Service Package (MSP), the IASC Common Monitoring and Evaluation Framework for MHPSS in Emergency Settings (with its means of verification), the IASC MHPSS Coordination Handbook and the IASC Technical Note on Linking Disaster Risk Reduction (DRR) and MHPSS.

Rationale for the deployment

Under the previous surge deployment, significant coordination, governance and technical work was achieved, including the development of the Operational Multisectoral and Inter-Ministerial MHPSS Coordination Framework with the MoPH/NMHP, the Ministry of Education and Higher Education (MEHE), the Ministry of Social Affairs (MoSA), humanitarian sectors and partners. Given the ongoing

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humanitarian situation and the transition towards recovery, a new surge deployment is essential to sustain the quality and coherence of the response and to address three emerging priorities:

- **Capacity-Building and Operationalization of the Framework:** orientation, dissemination and capacity-building sessions with ministries, sectors and civil society partners to strengthen inter-agency, multisectoral and inter-ministerial coordination, align CG members on the agreed Framework, and harmonize technical approaches and standards.
- **Monitoring and evaluation:** development of a harmonized, evidence-based MHPSS M&E framework for Lebanon, based on the IASC Common M&E Framework, with a core set of indicators to monitor the scale, coverage and quality of the response and to support advocacy and resource mobilization, complementing the MHPSS operational framework. This would be followed by training and capacity building for partners.
- **Preparedness, recovery and disaster risk reduction (DRR):** development of a multisectoral MHPSS preparedness and recovery plan for Lebanon, aligned with the National Mental Health Strategy, the Framework and WHO EMRO guidance, and integrated with national disaster risk management (DRM) and DRR mechanisms, in addition to integration of MHPSS in national emergency preparedness plans.

The overall goal is to enhance collaboration among partners to ensure a coherent, effective, timely and evidence-based MHPSS response.

Responsibilities and accountabilities

Under the supervision of the National Officer at WHO Lebanon, and in close coordination with the MoPH/NMHP, the MHPSS CG and its co-chairs, MEHE, MoSA and relevant sectors and partners, the surge expert will support the strengthening of multisectoral and inter-ministerial coordination, monitoring and evaluation, and preparedness for MHPSS in Lebanon, in the context of acute and protracted emergency and early recovery, in line with the WHO EMRO Regional Action Plan and IASC MHPSS standards.

The responsibilities are organized into three workstreams:

- ***Workstream 1 – Capacity building and technical support for quality multisectoral MHPSS***
    - Lead the dissemination of the Framework with the MoPH, MEHE and MoSA, and with respective sectors and partners, and facilitate alignment among partners on technical approaches, priorities, and standards for MHPSS interventions.
    - Design and deliver orientation and dissemination sessions on the Operational Multisectoral and Inter-Ministerial MHPSS Coordination Framework for relevant sectors, ministries and partners.
    - Provide technical input and support to partners to ensure interventions align with the framework, IASC MHPSS Guidelines, the MSP and WHO technical guidance, and promote the use of the MSP to identify gaps and to prioritize, plan and cost MHPSS activities across sectors.
    - Strengthen the multisectoral and inter-ministerial coordination capacities of sectors, partners and ministries, especially the health, protection, education and social sectors, to ensure the operationalization and implementation of the Framework for integrated MHPSS interventions.
    - Support the mainstreaming of MHPSS within inter-sector humanitarian coordination structures (e.g., ISCG, sector working groups) and support engagement with the UN Resident Coordinator's Office.
    - Transfer of knowledge and building capacities of national focal persons on the MHPSS coordination and framework.
- ***Workstream 2 – Monitoring, evaluation, assessment and learning (IASC Common M&E Framework)***
    - Develop, in consultation with the MHPSS CG, a harmonized MHPSS M&E framework for Lebanon based on the IASC Common M&E Framework for MHPSS in Emergency Settings, including a results framework (goal, outcomes and outputs), a core set of indicators with definitions and means of verification, and data collection, reporting and data-flow arrangements.

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○ Align the indicators with existing national and sectoral reporting systems (e.g., MoPH/NMHP information systems, the 4Ws/ActivityInfo and sector log-frames) to avoid duplication and reduce the reporting burden on partners; facilitate the validation of the M&E framework by the CG and orient partners on its use. ○ Support the consolidation and use of MHPSS needs and resources assessments to identify priority needs, gaps and at-risk groups, including displaced and returning populations. ○ Continue to strengthen and support the mapping of MHPSS services and partners using the IASC MHPSS 4Ws tool, and maintain updated information on available services, gaps, and coverage. ○ Ensure documentation of lessons learned and good practices to inform the ongoing response and recovery planning, and promote ethical and safe data management practices (informed consent, confidentiality and data protection). - ***Workstream 3 – Preparedness, recovery and disaster risk reduction*** ○ Develop a multisectoral MHPSS Emergency Preparedness, Response and Recovery Plan for Lebanon, aligned with the National Mental Health Strategy, the Framework and WHO EMRO guidance. ○ Support the integration of MHPSS into national DRM/DRR mechanisms and health emergency preparedness plans, in line with the IASC Technical Note on Linking DRR and MHPSS and the WHO Health Emergency and Disaster Risk Management Framework. ○ Identify MHPSS priorities for the transition from humanitarian response to recovery and longer-term mental health system strengthening ("building back better"). - ***Other*** ○ Undertake field visits to monitor and support implementation of MHPSS activities where security conditions permit. ○ Perform other related duties, within the scope of this deployment, as requested by the supervisor.	
Required qualifications and experience	
Education	Advanced university degree in psychiatry, psychology, social work, public health or a related field from an accredited/recognized academic institution.
Experience	Essential • At least 5 years of relevant experience, at the national and international levels, in the assessment, development and implementation of policies, strategies and action plans for MHPSS in emergency settings. • Demonstrated experience in inter-agency, multisectoral MHPSS coordination in humanitarian settings, including work with government counterparts. • Experience in capacity building, developing and promoting collaborative partnerships. • In-depth theoretical and practical knowledge of the IASC Guidelines on MHPSS in Emergency Settings and associated products (e.g., the MHPSS Minimum Service Package, the Common M&E Framework and its means of verification, the MHPSS Coordination Handbook, the assessment toolkit, the 4Ws mapping tool). Desirable • Experience in protection of human rights in the context of mental health. • Relevant work experience in UN agencies, relevant non-governmental or humanitarian organizations.

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	• Experience in working for or with a Government Ministry of Public Health in a low or middle-income country. • Experience in emergency preparedness, contingency planning and DRR/DRM, including the integration of MHPSS. • Experience in Lebanon or the Eastern Mediterranean Region.
Language	Essential: English (oral and written) Desirable: Arabic and/or French

Competencies[1]

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.
- 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

- 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.

Managerial competencies

- 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.

[1] Competencies should be drawn from the Competency Framework of the Organization.

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