

# Minutes of Meeting – Monthly MHPSS TF Meeting

<b>Date</b>	March 5 <sup>th</sup> , 2024	<b>Venue</b>	Online via Zoom application
<b>Time</b>	2:00 PM – 3:30 PM	<b>Minutes prepared by</b>	Samyah Awada (MOPH-National Mental Health Program)
<b>Organizations attending</b>	Abaad, CDLL, Dorcas Tabitha, GIZ, ICRC, IDRAAC, Imam Sadr Foundation (ISF), International Medical Corps, INTERSOS, IOCC, IRC, LCCE, LUPD, Medair, Medecins Du Monde, MSF OCB, Red Oak, Restart, Save the Children International, SCI, SIF, UNFPA, UNHCR, UNICEF, War Child		

## Agenda

1. Updates from the National Mental Health Programme
2. Presentation by IDRAAC and the NMHP on the Self Help Plus (SH+) Training
3. Presentation by IDRAAC and the NMHP on the Mental Health in the Workplace Training
4. Presentation by UNHCR on Community-based Psychosocial Support Project
5. Updates and challenges to be shared by partners
6. AoB

Discussion	Action / Decision / Suggestion
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### 1. Updates from the National Mental Health Programme

More details are available in the attached presentation.

#### National Intersectoral MHPSS Emergency Preparedness & Response Plan

Available on the MoPH Website in English [Link](#) and Arabic [Link](#)

- The online 4Ws MHPSS services mapping platform is fully updated.
  - The disrupted PHC centers in the South that are part of the 4Ws and those whose mental health services were moved elsewhere or shifted online, were identified.
- National PFA training is being rolled out for frontliners and first aid responders **once per month**.
  - PFA trainings for PHC centers are being planned and will be rolled out by the PHC department and PHEOC department.
- ER and ICU physicians, nurses and other hospital staff are being trained on psychiatric emergencies.
  - So far, 75 physicians were trained in 30 trainings, and 261 nurses and other staff were trained in 15 trainings.

➡ The NMHP encourages all partners and MHPSS TF members to present in the upcoming meetings any activities or initiatives that the organizations are working on and that they would like to share for feedback, coordination and establishing collaborations. Contact [aya.harb@nmhp-lb.com](mailto:aya.harb@nmhp-lb.com)

➡ The Excel sheet with the disrupted and available PHC centers in the South can be shared upon request for referrals done.

➡ To receive a national PFA training or obtain the nationally developed PFA material to provide internal trainings, kindly

- Some stock of psychotropic medication (for up to of 3 months) is secured and being distributed to PHC centers.
- Contingency plans for the national lifeline for emotional support and suicide prevention Lifeline 1564, and for the national e-mental health service “Step by Step”.
  - Working on finding practical solutions and resources for implementing these plans
- SH+ exercises are being extracted into SH+ audio records.
- 13 Self-care videos for frontliners and public audience were developed.
- 23 Key messages on mental health for public were developed.

### Governance

- Mental Health Strategy being finalized. Launching in April 2024.
- Child, Adolescent and Caregivers Mental Health Sub-strategy second draft under revision. Potential Launching in October 2024.
- Mental Health Task Force Coordination:
  - Action plan in the last stages of revision.
  - 6 committees established to be re/activated in 2024.
- Law Reforms:
  - A formal request was submitted to the State Council regarding the draft mental health bill to support in its drafting.
  - The humans right committee is reviewing the latest draft of the new substance use law.

### Scaling up of Mental Health services – community-based services

- Integration of Mental Health into PHCs: Piloting of the national model Mental Health packages:
  - 11 PHCCs affiliated with **10 partners** are implementing the packages on 1) depression, and 2) anxiety and PTSD.
  - 100-300 beneficiaries per day and are getting screened in these 11 PHC centers.
- University of Diploma in Development and Organization of Mental Health Services: Preparations in progress.
- Quality Rights: e-trainings are ongoing.

contact: Aya Harb  
[aya.harb@nmhp-lb.com](mailto:aya.harb@nmhp-lb.com)

➡ Videos link:  
[https://www.youtube.com/watch?v=Tg1cVjRCSCY&list=PL6vDRyjGOU-MhcjPcv0j\\_3\\_kIvXAWtjUV](https://www.youtube.com/watch?v=Tg1cVjRCSCY&list=PL6vDRyjGOU-MhcjPcv0j_3_kIvXAWtjUV)

➡ Key messages link:  
<https://drive.google.com/drive/folders/1XQnRXNWC07AlxjqbeGFyhh7RXikLKnEL?usp=sharing>

➡ Once the next cohort of the University of Diploma is ready we will definitely let you all know for the interested persons to register.

➡ For more information about how to do a Quality Rights e-training, contact: [layal.alhanna@nmhp-lb.com](mailto:layal.alhanna@nmhp-lb.com)

## **Promotion and Prevention**

- Mental Health in the Workplace:
  - 164 mental health and human resources professionals, and managers were trained in 3 TOTs. 32 Trainers selected.
  - 6 rollout sessions were provided by the 32 trainers to 159 trainees.
- Migrant Domestic Workers:
  - 50 frontliners in civil society organizations were trained in 3 trainings.

## **Research projects Updates**

- Step-by-Step:
  - Reached a total of 2,816 users.
  - An average of 145 new users per month.
- Summit
  - The final timepoint (at 52 weeks) was done in March.
  - The research paper was re-submitted after the first round of revisions.
- Self-Help Plus:
  - 10 TOT trainers with a background in mental health were selected.
  - TOT trainers trained 80 participants (Social Workers, Community Workers, etc.) of whom 40 were selected to conduct rollout sessions.
  - 40 trained participants conducted rollout sessions for 479 beneficiaries.

## **Q&A:**

### Farah Malyani from UNHCR:

I wanted to ask about the pilot of mental health integration. You mentioned that there are 11 PHCs in the pilot. Do you know if all these 11 PHCs are supported by health partners? I'm asking because it's interesting to look into this data and if possible, to get feedback from these partners about how it's going in the pilot since they are present in the PHCs.

### Aya Harb from NMHP:

Yes, these 11 PHCs are affiliated with 10 health partners/ NGOs. Under this project, of course, we are following up very closely with all of the PHCs that are implementing the packages as part of the pilot.

The monitoring of the package implementation includes each partner's feedback on the processes.

We are assessing all of the challenges that are being raised and are faced during the pilot. Hopefully by the end of this year, we will have a full-scale

report on the pilot to learn from all of the experiences and to improve the pilot further before expanding this initiative.

These partners support mental health services in the PHCs that are affiliated with them. Some partners support only MH services while others subsidize others services as well.

Grace Jabbour from Restart:

Will the MHPSS actors be involved in the revision of the draft MH law?

Aya Harb from NMHP:

In the roundtable discussions, there were a lot of mental health actors and physicians and high-level representatives such as heads of hospitals and rehabilitation centers, the syndicate of hospitals, parliamentarians and judges. No community or civil society organizations were present, unfortunately.

➔ More details on the involvement of MHPSS actors in the revision of the draft MH law will be provided during the upcoming MHPSS TF meeting after receiving feedback from Dr. Chammay.

**2. Presentation by IDRAAC and the NMHP on the Self Help Plus (SH+) Training**

More details are available in the attached presentation.

Presentation by Bedros Kazazian from NMHP:

- SH+ is a scalable, group-based, evidence-based, stress management course for adults that promotes self-help skills.
- Adapted to suit larger or smaller groups (groups of up to approximately 30)
- Content of SH+:
  - The Audio Course: Delivered across 5 weekly sessions (each for 90–100 minutes).
  - The Illustrated Guide: has same 5 five core skills as the course
- Core Skills of SH+: Grounding, Unhooking, Acting on Your Values, Being Kind, and Making Room
- Facilitators and Co-Facilitators of SH+ - They guide participants through the SH+ course.
- Overview of the SH+ Project in Lebanon:
  - 20 Mental Health Professionals were provided TOTs
  - 80 Facilitators were trained on SH+. Of those 40 Facilitators were selected to provide roll out sessions in 20 Groups constituting of Facilitators and Co-facilitators.
  - Roll out sessions provided to ~ 400 participants
- Next Steps:
  - Increasing the Scalability and Accessibility of SH+ through SH+ podcasts.
  - We have already started to roll out another batch of SH+ through UNICEF so we have trained an additional 80 providers.

Bedros Kazazian from NMHP:

If there are organizations that are struggling with high patient loads, and don't have enough case management and psychotherapy sessions for everybody, and have high waiting lists, I would encourage them to start mobilizing SH+, because it can be done with groups of up to 30 people,

Q&A:

Aya Harb from NMHP:

Will the SH+ initiative also be available in another round of trainings, if anyone is interested?

Bedros Kazazian from NMHP:

Currently, we don't have funding to do other rounds of trainings of SH+, but there are many organizations who received the TOT, and they can contact the national trainers and scale it up if they have the resources to do the SH+ training. In terms of the National Mental Health Programme, there is a potential project that might come probably in five to six months, and we might be doing another round of SH+ trainings, but nothing is certain for now.

Aya Harb from NMHP:

It's not necessary that all people who benefit from SH+ should be diagnosed with any disorder. It can be done just for the general public as well.

Bedros Kazazian from NMHP:

It can be used for people who have mental health conditions, those who don't have mental health conditions, and also as a prevention tool to acquire stress management and self-help skills, to even delay or prevent the onset of mental health conditions. So, it can be a promotional tool as well.

it's not intensive and it's really beneficial.

### 3. Presentation by IDRAAC and the NMHP on the Mental Health in the Workplace Training


**More details are available in the attached presentation.**

Presentation by Bedros Kazazian from NMHP:

- Why is Mental Health Important at Work?
  - Work impacts mental health.
  - Huge economic cost is linked to mentally unhealthy workplaces
  - Promoting MH in the workplace is also a global development priority
- In 2019, the NMHP launched the MH in the Workplace Initiative, which included: 1) A National campaign on MHiW, 2) The “National Charter for Mental Health in the Workplace, 3) Awareness material and some training material, and 4) A Web Portal (accessible to anyone, with resources to promote mental health in the workplace <https://mhworkplace.nmhp-lb.com/en/home> )
- The National Charter for Mental Health in the Workplace has 3 main pillars: 1) Protecting mental health, 2) Promoting mental health, and 3) Supporting recovery.
- In 2023-2024, hundreds of businesses and organizations were trained.
- Capacity Building as a Means to Implementing the Charter

Bedros Kazazian from NMHP:

All partners are encouraged to go over the platform, check it out, and read it. One of the objectives of the coming few months is to update the website and add the logos of people trained.

 All partners are encouraged to TAKE THE PLEDGE!

- ToTs were conducted for HRs and Mental Health Professionals in different organizations.
- Several Rollout sessions were done to create a pool of MH Champions.
- What are the Potential Next Steps?
  - Update the Web Portal
  - Invite CEOs to a high-level engagement meeting
  - Follow up with businesses and organizations who were trained on MHiW on progress
  - Continue to roll out the MHiW trainings

#### 4. Presentation by UNHCR on Community-based Psychosocial Support Project

More details are available in the attached presentation.

##### Presentation by Tamara Abou Hamzeh from UNHCR:

This project aims to improve the mental health and psychosocial wellbeing of refugees and affected communities through strengthening community-based structures, through:

- Strengthening the capacity of Outreach Volunteers and frontline staff to provide non-specialized community-based psychosocial support
- Enhancing the existing life-skills packages at CDCs targeting refugee and Lebanese adolescents and youth
- Trainings
  - In total, 912 Ovs and frontliners were trained
  - 47 CDC staff across 26 Community centers were trained
- Implementation – Reach in 2023
  - 5,712 persons were reached with non-specialized community-based PSS
  - 87 PM+ groups reaching 530 persons
  - 30 Peer Support sessions reaching 205 Ovs
  - 4,927 persons receiving PFA
- Community-based PSS Guidelines for Ovs were developed.
- Video: <https://vimeo.com/871025192/9c338e5a2e?share=copy>

##### Aya Harb from NMHP:

You said that all were trained on PFA, but not all were trained on PM+ and peer support. Was there any kind of criteria by which you chose which OVs to train on which interventions?

Are these trainings also available for outreach volunteers, that are not under UNHCR? Can these trainings be provided to outreach volunteers and for other partners as well if they are interested?

Tamara Abou Hamzeh from UNHCR:

For the first question, when it comes to the criteria, yes, of course, there are some selection criteria that we prepared in collaboration with Save the Children. When it comes to selecting volunteers who will be providing these interventions, especially the group PM+ component, because it's very delicate and there should be some criteria in place, especially when we're dealing with such interventions. So of course, there were some selection criteria when it comes to selecting the volunteers to be part of this project.

As for the other question, when it comes to other partners, if they're interested in receiving this training. In our case, we used all the training manuals that were already out there. When it comes to the PM+, we used the WHO manual and the strength manual - that was also adopted to conduct these trainings. So of course, it can be scalable to other organizations.

**5. Updates and challenges to be shared by partners**

N/A

**6. AoB**

N/A

**Next meeting: April 2<sup>nd</sup>, 2024, at 2:00PM**