## MoM-North MHPSS TF-13

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<tr>
<th>Date</th>
<th>Wednesday October 5</th>
<th>Venue</th>
<th>Restart Center</th>
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<tr>
<td>Time</td>
<td>11:30am to 12:30pm</td>
<td>Minutes</td>
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<td><strong>Organizations attending</strong></td>
<td>International Medical Corps, Medecins Sans Frontieres-Belgium, Medecins Sans Frontieres-Swiss, Ministry of Public Health, Restart Center, Concern worldwide, UNHCR</td>
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### Agenda
1. **Presentation of gaps, challenges and potential actions identified by the task force**
2. **Discussion around priorities for the draft 2017 action plan**
3. **Presentation of the finalized psychotropic and neurological medication list for humanitarian settings**
4. **General Updates**

### Discussion

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<th>Action / Decision / Suggestion</th>
<th>1. Presentation of gaps, challenges and potential actions identified by the task force</th>
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<td>➢</td>
<td>The gaps, challenges and potential actions to address them that were identified by task force members during task force meetings in all regions, and through the online questionnaire that was circulated, were presented during the meeting.</td>
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<td>It was noted that the challenge brought up previously in the north task force related to patients being forced to stay in hospital because of inability to cover the 10% that is not covered by UNHCR was addressed: Caritas are covering the 10% in the North.</td>
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<th>2. Discussion around priorities for the draft 2017 action plan</th>
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A prioritization exercise was conducted during the meeting with the following priorities identified by the participants:

1. Ensuring accessibility to mental health services for persons in under-served areas (such as Wadi Khaled) through the establishment of mobile teams and clinics.
   - It was suggested to explore the possibility of establishing a mobile team in Wadi Khaled and linking it to the mhGAP trained GP in Makassed PHC.
2. Establishing a referral system for high risks cases
3. Crisis management:
   - Training the Lebanese Red Cross (LRC) and the Internal Security Forces.
   - Trying to ensure authorization for the LRC to provide medication in the ambulance
   - Having clearer protocols in regards the roles of different professionals in crisis management
   - Addressing the gaps in the crisis management process (i.e. transportation, emergency rooms preparedness and hospitals capacity for inpatient beds).
4. Addressing the shortage of beds in psychiatric hospitals
5. Addressing the gap of services for children with special needs

3. Presentation of the finalized psychotropic and neurological medication list for humanitarian settings

Issue: Since the Onset of the Syrian crisis, local and international NGOs have initiated specialized mental health services targeting displaced Syrians, Palestinian refugees and vulnerable Lebanese, using different lists of psychotropic and neurologic medications; some of the latter medication being costly with no evidence of added benefits. This was leading to challenges in maintaining the continuum of care for patients when moving between the different levels of care and therefore to a need to rationalize the medication list.

The rationalization of the medication list was conducted in line with domain 2 of the “Mental Health and Substance Use Strategy for Lebanon 2015-2020”, specifically with objective **2.3.3 Revise the MoPH list of psychotropic medications for prescriptions by specialists.**

Starting points
- MOPH/YMCA list as a base
- Psychotropic and neurological medications used by NGOs/iNGOs
- Lebanese National Drug Index 2015
- WHO essential list

Two psychotropic and neurological medication lists were developed:
1) For Adults and Children, with recommended line of treatment

The finalized lists will be shared with the task force.
2) For Emergency Rooms of Hospitals

- Medications categorized by cost effectiveness (line of treatment)
- Eligibility: Lebanese and non-Lebanese in the MOPH primary health care network
- To ensure that there is a unified channel of distribution for Lebanese and non-Lebanese, and to maintain a certain level of cost-effectiveness and quality control, the following distribution channel will be set for the added medication (in addition to the regular channel in PHC centres via YMCA for the essential medications):
  - Via MOPH → 8 community mental health referral centers (1 in each governorate)
  - Referral from other PHC centres for psychotropic medication will be accepted, with medication periodic review
  - For advanced medications: first prescription by psychiatrist or neurologist; prescription renewal will be opened soon for mhGAP doctor

The list of these community mental health referral centers will be share with the task force once they are identified.

4. General Updates

- **4Ws** (Who is doing What, Where and until When) mapping exercise was launched. Around 28 organisations have contributed so far and still expecting a few organisations to send their sheets in the coming week.

- **MSF Belgium** opened an NCD programme in Arragel in MOSA centre: Monday to Thursday from 9am to 2:30pm.
  - The mental health project are continuing in Wadi Khaled: mental health services provided on Monday and Tuesday for persons of all ages.

- **Restart Center** are able to receive Lebanese and non-Lebanese women, children and youth for mental health services (within their Afkar Programme). Interventions within this programme will start in two weeks.
  - Restart Center are also currently implementing a programme in Akkar Badawi and Batroun. The programme includes outreach PSS on group level targeting children and adults implemented by Restart psychologists.
  - They are planning a capacity-building programme to health Outreach Volunteers (OVs) through a 7 days course which covers ethical considerations and main psychological disorders. The material for the course is under development. The OVs will assist Restart psychologists in providing PSS outreach sessions for groups of refugees evicted from sites.

Organisations that haven’t filled it yet are urged to do so as it is critical for a comprehensive and reflective mapping that is timely and useful for everyone.

For more information, to contact Ms. Dana Lahham at msfocb-akkar-mh@brussels.msf.org

For more information, to contact Ms. Grace Jabbour at grace@restartcenter.com

Ms. Jabbour will be presenting this project during the next North task force meeting.
Update on the National Mental Health Programme’s current activities in light of the implementation of the “Mental Health and Substance Use Strategy for Lebanon 2015-2020”:

**DOMAIN 1: Leadership and governance**
- Finalizing an inter-ministerial substance use response strategy (objective 1.1.3)
- Developing a mental health and substance use strategy for prisons (objective 5.5.1)
- Revising laws and regulations related to mental health and substance use (objective 1.3.1)

**DOMAIN 2: Reorientation and scaling-up of mental health services**
- Integrating mental health into PHC centres and Social Development Centres (SDCs): mhGAP trainings + support and supervision (Objective 2.1.1)
- Piloting a community-based multidisciplinary mental health team (Objective 2.1.2)
- Contracting with general hospitals for beds in inpatient psychiatric wards (Objective 2.1.3)
- Adapting and piloting an e-mental health guided self-help programme for Lebanon with WHO (Objective 2.1.7)
- Developing accreditation standards for mental health/substance use institutions/organizations taking into consideration the special needs of children, children with disabilities and other vulnerable groups (Objective 2.4.1)
- Developing a code of ethics for mental health/substance use service providers (Objective 2.4.2)

**Domain 3: Promotion and Prevention**
- Starting discussions with MEHE and MOSA to work towards: integrating evidence-based mental health promotion and prevention into:
  - national protection programming (social protection, child protection, SGBV, minors in the judiciary system) (3.1.2)
  - maternal and child health programmes (3.1.3)
  - Schools (3.1.4)
- Implementing an evidence-based framework for prevention and monitoring of suicide: suicide prevention Helpline project with Embrace (3.1.5)

**Domain 4: Monitoring and Evaluation**
- Integrating a core set of mental health indicators within the national HIS at all levels: outpatient (dispensaries, PHC centres, and mental health clinics) and inpatient (psychiatric hospitals and psychiatric wards) (Objective 4.1.1)
- Developing a psychiatric registry

Next meeting: November 2nd, 2016 at 11:30am in Restart Center, Tripoli.