MoM-MHPSS-TF-North- 7

Date       Wednesday February 3, 2016
Venue      Restart Center
Time       11:35am-12:10pm
Minutes prepared by Grace Jabbour

Organizations attending Caritas, Handicap International, Heartland Alliance, International Medical Corps, Medecins Sans Frontieres-Swiss, Ministry of Public Health, Ministry of Social Affairs, Restart Center, SCI, UNHCR.

Agenda

1. Working groups formation
2. MHPSS community service utilization indicators
3. General Updates

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<tr>
<th>Discussion</th>
<th>Action / Decision / Suggestion</th>
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<tr>
<td>1. Working groups formation</td>
<td>➢ An email will be sent in the incoming weeks. Representatives of TF organizations interested in taking part of a particular working group will be kindly asked to nominate themselves.</td>
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<td>➢ Three working groups (WG) within the task force will be formed to facilitate the organization for the implementation of specific objectives on the 2016 TF Action Plan.</td>
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<td>1. Referral system project WG</td>
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<td>- Action 1: Develop a referral system for crisis management linking all levels of care</td>
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<td>2. Mental health professionals in humanitarian settings WG</td>
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<td>- Action 5: Develop a code of conduct for NGOs working in MHPSS in line with the national code of ethics developed by the ministry</td>
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<td>- Action 6: Identify range of salaries and benefits of mental health professionals working in the humanitarian field</td>
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<td>- Action 7: Harmonize recruitment criteria for hiring mental health professionals</td>
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<td>3. Capacity building WG</td>
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<td>- Action 9: Develop and implement a capacity building plan for non-specialized staff, including trainings for:</td>
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<td>- MH front-liners/community mobilizers on identification and referral for children in need of protection and ensure Support &amp; Supervision by CP sector</td>
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<td>- committees in the regions (youth committee, family committee…) on recognizing mental health main symptoms and referral</td>
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- CP and SGBV case workers and Refugee Outreach Volunteers (ROVs) on recognizing severe mental disorders and on Psychological First Aid

- Working groups composition:
  - At least 5 persons each, with representation from all regions the task force meets in
  - One or more focal persons from the MoPH NMHP team in each group

- Modality:
  - Initial meeting at central level to brainstorm and reach consensus on the implementation activities, task division and modes of communication within the group.
  - Mode of communication: to be determined by every group (could be through emails, phone or skype calls…).
  - Regular updates given to the task force on the implementation status.

2. MHPSS community service utilization indicators

- TF Action plan 2016: Action 4: Develop and report on key indicators on MHPSS community service utilization

  - Based on the objectives, scope and duration of intervention and in line with the national MH strategy → Information for action

  - To be integrated in activity info; limited number by key component
    1. Population served:
       - Patients’ characteristics (diagnostic categories, socio-demographics, residency…)
       - Pathway to care (patterns of help-seeking, case-finding, referral networks…)
    2. Interventions:
       - Clinical Interventions (Service provided, Referral/Continuum of care, Medications, Lab tests)
       - Prevention and promotion interventions (MH awareness sessions…)

3. General Updates

- TF organizations to share the indicators that they report on related to these particular components discussed (indicators that are either systematically shared with donors or that are collected as per NGO requirement).

- Aim: to collect the array of indicators that are already being used by organizations in order to inform the selection of a few indicators by the TF to collect information on MHPSS community service utilization.
The MoPH, in collaboration with the World Health Organization, will be implementing an “E-mental health self-guided service provision pilot project”; in line with objective 2.1.7 of the national mental health and substance use strategy “To adapt and pilot an e-mental health guided self-help programme for Lebanon”.

MSF will be opening a Minor Trauma Unit (MTU) and integrated MH activities inside Makassed hospital in El Hichi, Wadi Khaled on the 17th of February 2016.
- The MH activities will be delivered by one clinical psychologist/therapist as well as by one social worker. MSF are installing an internal and external referral system.
- The specific target population comprises vulnerable Lebanese as well as Syrians, children up to 15yrs, adolescents, especially single mothers and women and males with MHD (for now).
- Please refer to Dr Sleiman Ammar as the Medical Activity Manager: msfocb-akkar-mam@brussels.msf.org and to Dana Laham as the clinical psychologist, Tel 76. 53 26 28

A stakeholder consultation meeting will be held on February 17, 2016 to present the project aims and to collect feedback on its feasibility and acceptability.
Invitation will be sent to TF organizations’ mental health coordinator/advisor or focal point.

Next meeting: Wednesday March 2, 2016 in Restart Center, Tripoli