HEADLINES

01 Building Crisis Management Capacity: development of frontliner protocols and trainings
02 Integration of mental health into PHC: support and supervision and second training phase for 44 centres trained this year
03 Mental health trainings for Emergency room Staff in all hospitals in Lebanon
04 Setting the “Psychotropic and neurological medications list for prescription in humanitarian settings”
05 Development of a psychiatric registry to capture trends in mental disorders and treatment
06 Development process of the 2017 Action Plan of the Mental Health and Psychosocial Support task force initiated to address gaps and challenges
Between July 21, 2016 and September 3, 2016, the “Fundación Promoción Social de la Cultura” in collaboration with the National Mental Health Programme (NMHP) trained around 200 frontline staff and 30 senior trainers from local non-governmental organizations, international non-governmental organizations and United Nations agencies from different sectors (mental health, psychosocial, child protection, Sexual and Gender Based Violence…) and operating across all Lebanese governorates on the frontline Crisis Management Protocol.

The frontline Crisis Management Protocol is a guide aimed at providing assistance to frontline humanitarian staff on how best to aid persons who are in crisis. It offers structured guidelines for engaging persons in crisis in a safe and supportive manner, determining their most pressing concern, and activating the mechanisms that can most appropriately address that concern. It was developed by the National Mental Health Programme and the “Fundación Promoción Social de la Cultura” in line with the Mental Health and Psychosocial Support Task Force action plan 2016, with the aim of responding to a pressing need to have clear guidelines on how to attend to persons in crisis.
The National Mental Health Programme, after a long process of local and international review by experts and stakeholders, has set a list of psychotropic and neurological medications recommended for prescription for adults and children in humanitarian settings, especially at the specialized healthcare level.

This list was established upon the request of the MHPSS task force, to respond to the challenges in maintaining a continuum of care for patients with mental health or neurological conditions when moving between the different levels of care (non-governmental organizations with specialized mental health services, primary healthcare centers with or without integration of mental health and hospitals). The evidence-based list is expected to help rationalize the prescription of psychotropic and neurological medications and keep this prescription away from some medications that are costly with no reported additional benefits.

The main conditions covered are mental health disorders (psychosis, depression, bipolar, anxiety), neurologic disorders (epilepsy, Parkinson), and antipsychotic medications side effects.

The list is accessible on the NMHP page on the MOPH website through the following link: http://www.moph.gov.lb/en/Pages/6/553/the-national-mental-health-program

In line with the 2016 Action plan of the MHPSS task force, a series of workshops on managing mental health emergencies at emergency departments are being rolled out in partnership with WHO for emergency room staff in all public and private hospitals in Lebanon. This intervention was piloted in 2015 by UNHCR in collaboration with Restart center in the North and will be rolled out to all hospitals in Lebanon due to the growing need identified by the task force to build capacity for dealing with emergency cases such as psychotic agitation or suicidal attempt.

In line with the national strategic priority of integrating mental health care into Primary Health Care (PHC), the NMHP at the Ministry of Public Health (MOPH) supported by WHO and funded by the European Union under the Neighbourhood Initiative has been conducting a series of training workshops on the mental health Gap Action Programme (mhGAP). These trainings aim at building the capacity of PHC staff on mental health care, namely on assessment, management and referral.

The focus this year has been on the PHC centres that are part of the MOPH Emergency Public Health Restoration Project and the training delivered to the general practitioners, nurses and social workers in these centres were divided in two phases of 3-day training each, separated by on-site support and supervision. Job aids for mhGAP trained persons have been developed with the aim of having user-friendly and useful aids for the implementation of the mhGAP.

After attending the first phase of training in May and June 2016, the 85 staff from 44 centres spread over Mount-Lebanon, the South and the North, went through a phase of on-site support and supervision during which the NMHP team of technical supervisors provided support and supervision to strengthen the skills learnt in the training and monitor the quality of care as well as assist in any problem faced. The rolling out of the second phase of training has started in September and will extend to November 2016.

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The National Mental Health Programme, in collaboration with the World Health Organization, has developed and is piloting a psychiatric registry in order to identify trends of diseases and treatment in mental disorders. The registry will facilitate the collection of key mental health indicators for patients newly seen by the psychiatrists in private clinics, primary health care centres and hospitals with periodic reporting.

The development process involved two preparatory meetings with psychiatrists interested in participating in the pilot project. On September 1, 2016, data collection was launched for patients newly seen by the participating psychiatrists in private clinics, primary health care centers and hospitals.

The first report is expected to be produced in December 2016.

This project is funded by the EU/ENI.

The MHPSS task force, chaired by the MOPH and co-chaired by WHO and UNICEF, has the mission to ensure an effective, coordinated and focused inter-agency response to the MHPSS needs of the persons affected by the Syrian crisis and the host population in Lebanon through identifying and addressing the gaps, promoting the importance of MHPSS at all levels as well as developing standards and building the capacity of the MHPSS sector. To achieve this mission, an annual action plan is developed by the task force to focus its work on addressing the identified gaps and priorities.

As the implementation of the 2016 action plan of the task force is ongoing, the development process of the 2017 action plan has begun with initial brainstorming sessions around gaps and challenges faced in MHPSS work and priorities to be addressed in the coming year. In addition, to ensure that all actors have the opportunity to participate in the development of the action plan, an anonymous and short online feedback form was shared with the task force, which includes around 60 organizations working in MHPSS in Lebanon, to collect feedback on challenges and priorities to be addressed.

All NMHP newsletters are accessible on the MoPH website on the following link: http://www.moph.gov.lb/en/Pages/6/553/the-national-mental-health-program
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