

# MoM-Beirut MHPSS TF

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| <b>Date</b> | Tuesday November 14 | <b>Venue</b>               | WHO conference room (-1) |
| <b>Time</b> | 02:00pm to 03:00pm  | <b>Minutes prepared by</b> | Rawan Hamadeh            |

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| <b>Organizations attending</b> | ABAAD, Alpha, Caritas, DORCAS, EMDR Lebanon Association, Himaya, IDRAAC, Inara, International Rescue Committee, Medecins Du Monde, Ministry of Public Health, Restart Centre, Swedish Red Cross, UNHCR, UNICEF, UNRWA. |
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## Agenda

1. **Presentation of E-mental health pilot project**
2. **Presentation by IDRAAC of project “Towards The Human Rights Protection of a Vulnerable Population: The Elderly of Lebanon”**
3. **2017 MHPSS TF Action plan status**
4. **2018 MHPSS TF Action plan**
5. **General Updates**

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| <b>Discussion</b> | <b>Action / Decision / Suggestion</b> |
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### 1. Presentation of E-mental health pilot project

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| <ul style="list-style-type: none"> <li>➤ The MOPH-National Mental Health Programme and the World Health Organisation, with the support of Fondation d’Harcourt, have developed and are currently piloting a new internet based support program for persons experiencing difficult emotions.</li> <li>➤ This project is in line with objective 2.1.7 of the “Mental Health and Substance Use Strategy for Lebanon 2015-2020”.</li> <li>➤ The intervention is called Step-By-Step or Khoutweh Khoutweh in Arabic.</li> <li>➤ People can create an account and log in but only patients who are above 18 years old and score above 10 on the PHQ9 questionnaire are eligible to participate in the sessions.</li> <li>➤ There are 5 sessions to be done on a weekly basis over and 8 weeks period. The sessions can be followed in video or slides format featuring a story with different characters (Male, Female etc...) sharing the symptoms of depression, techniques and skills with activities to help manage emotional problems. After each session there are suggestions for the participant to practice different techniques learned in their daily life. Each session can be done on different days, participants are not obliged to finish a session at once.</li> <li>➤ People can access the website from their own devices or they can use tablets present in 4 PHC centres with internet access, free of charge.</li> </ul> | <ul style="list-style-type: none"> <li>➤ Questions asked during the meeting:               <ol style="list-style-type: none"> <li>1. Has this type of project been done in any other country?<br/>Such interventions are used in other countries but it is being tested electronically for the first time in Lebanon and Egypt.</li> <li>2. Anyone can use it even if they are receiving mental health services?<br/>This internet-based support program is complementary to any other treatment so participants can do the program even if they receive any kind of mental health services.</li> </ol> </li> </ul> |
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| <ul style="list-style-type: none"> <li>➤ E-helpers are available to provide technical and emotional support to all participants through online web chatting, whatsapp, text messages, email or by phone according to the preferred timing of the participant. The E-helpers are available from 8-12pm and from 4-8pm, these timings are chosen upon the suggestion of the community after several focused group discussions and community testing.</li> <li>➤ This pilot project began in October and will stay for 6 months in the pilot phase with a target of 200 participants. Once the pilot phase is done, the program will be tested by a Randomized Control Trial.</li> <li>➤ The first 2 weeks after launching the website there weren't any active recruitment for people to participate however, active recruitment will start as of now through organizations in the MHPSS task force, universities, social media....</li> </ul> | <ul style="list-style-type: none"> <li>➤ Website: <a href="http://www.khoutouwat.com">www.khoutouwat.com</a></li> <li>➤ Detailed information will be shared by email.</li> <li>➤ Actors are kindly asked to refer to this intervention persons within their networks who may be experiencing difficult emotions (such as anxiety or sadness) or stressful times (Age: above 18 years old).</li> </ul> |
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**3. Presentation by IDRAAC of project “Towards The Human Rights Protection of a Vulnerable Population: The Elderly of Lebanon“**

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| <ul style="list-style-type: none"> <li>➤ IDRAAC presented their project about drafting the rights of the elderly law which is funded by the US embassy and Meppi.</li> <li>➤ The project constitutes of 1) a legal review of laws related to the elderly in Lebanon and 1) drafting the new law related to elderly in addition to focus groups which protects the elderly of Lebanon from discrimination and neglect. An additional component is an awareness campaign that will be conducted to raise awareness about this topic.</li> <li>➤ The process included focus group discussions with various stakeholder groups.</li> <li>➤ Main findings of the legal review included: <ul style="list-style-type: none"> <li>- Absence of laws related exclusively to the elderly in Lebanon (which is found to be discriminatory in some countries) but different laws which apply to any person also apply to the elderly population.</li> <li>- Some laws related to health status, social status and mental capacity relate to the elderly population as well.</li> <li>- No clear definition of the elderly in Lebanon.</li> <li>- In the case of decreased mental capacity, the only measure provided in Lebanese law is the guardianship system, which is still supported by the personal status laws of the religious sects.</li> <li>- The main problems within the elderly population noticed throughout the study were mainly: health problems, family problems and abuse from</li> </ul> </li> </ul> |  |
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| <p>family members, financial issues, social problems, violence, marginalization, and the lack of laws and protection mechanism.</p> <ul style="list-style-type: none"> <li>➤ The drafting of a new law taking in consideration the problems of the elderly population and their rights is the proper way to ensure their safety and protection.</li> <li>➤ Workshops related to elderly rights are planned to take place in addition to a national campaign and a press conference to introduce the new law to the public.</li> </ul>  |  |
| <b>4. 2017 MHPSS TF action plan status.</b>  |  |
| <ul style="list-style-type: none"> <li>➤ The implementation status of the 2017 action plan was presented.</li> <li>➤ The majority of activities are completed or on track.</li> </ul>  |  |
| <b>5. 2018 MHPSS TF action plan</b>  |  |
| <ul style="list-style-type: none"> <li>➤ The MHPSS TF action plan 2018 development process was launched with an online survey to gather actors' feedback on: <ul style="list-style-type: none"> <li>1) Gaps and challenges in MHPSS work</li> <li>2) Priorities to be addressed by the task force in 2018</li> </ul> </li> <li>➤ 48 respondents from local NGOs, international NGOs and UN agencies and from all governorates provided their feedback.</li> <li>➤ Survey results are being analyzed and will inform the drafting of the action plan.</li> <li>➤ This year, for the first time, a large part of the MHPSS TF action plan will be integrated in the LCRP.</li> </ul> |  |

## 6. General Updates

- **Mapping of specialized mental health services** completed and disseminated as per compilation of information shared by MHPSS task force organisations related to their following services:
  - Psychiatric consultations
  - Psychotherapy consultations
  - Consultation by GP trained on the mhGAP
- **The 4Ws** (Who is Doing What, Where and Until When) in MHPSS mapping tool online software pilot version under development by the MOPH-NMHP has been finalized. The pilot with 5 MHPSS organisations will start second week of November and will extend until the end of the month. First online mapping using the platform should be conducted in January 2018.

- Actors are encouraged to kindly proactively share any updates/edits.
- An updated version with recent edits/updates from actors will be shared next week.

### National Mental Health Campaign 2017

- Presentation was provided of the evaluation and reach of the 2017 campaign on Depression launched twice this year on the occasions of World Health Day in April and World Mental Health Day in October 2017 with main objectives to increase awareness about depression, its causes, symptoms, consequences, and ways to help one self or seek help.
- The components of the campaign were:
  - TV clip on social media and on all local TV channels (6 times per day on average)
  - Posters and Brochures distributed by PHCs, hospitals and MHPSS TF partners
  - Awareness session guide with key messages on depression shared with partners to facilitate conducting awareness sessions.
  - Key messages posted on the MOPH Facebook page and reached around 380000 views
  - Hotline of MOPH was activated to receive any inquiry related to Depression and the Mental Health services provided. Around 152 calls were received mainly asking about the nearest PHC where they can seek care and their contact details.
  - Talk shows on TVs and radios by NMHP team members to talk about the campaign and raise awareness around depression.

- Some participants in the meeting provided their feedback based on the awareness sessions they have conducted:
  - Through the awareness sessions, misconceptions changed after knowing the exact symptoms of depression.
  - Awareness sessions are mostly attended by females which decreases the awareness raising of men.
  - Brochures are not very popular among some people since not everyone is used to read, so visual messages can reach the general public a lot more than texts.
  - Caritas encouraged awareness sessions done in PHC centres as they are a good way to start talking about Mental Health more openly and seek help.

➤ **Himaya shared announcement of capacity building programs:**  
Parenting effective training (PET) and teacher effective training (TET) which are 24 hours trainings in 10 days sessions+ diplomas at the end.

➤ Invitation to the capacity building programs will be shared to be circulated with MHPSS TF members.

**Next meeting: December 12, 2017 at 2:00 pm in WHO conference room (-1).**