MoM-Bekaa MHPSS TF						
Date	Tuesday 27 September 2016		Venue	UNHCI	UNHCR Zahleh	
Time	1:00-2:00pm		Minutes prepared by	Nour Kik		
Organizatio	ons attending		ocion Social de la Cu nde, Ministry of Publ	*	rnational Medical Corps, UNHCR, UNICEF	
			Agenda			
3. Brai	iew of implementation instorming session for 2 eral Updates		_		Action / Decision / Suggestion	
					Action / Decision / Suggestion	
	entation of the finalize ince the Onset of the Syr				for humanitarian settings	
Palestini psychoti costly w maintair different list.	specialized mental heal an refugees and vulneral opic and neurologic me ith no evidence of added ning the continuum of ca a levels of care and there	ble Lebanese, using dications; some of the lebanefits. This was re for patients when fore to a need to rate	g different lists of the latter medication land leading to challenges in moving between the tionalize the medicati	s in e on		
of the "I specifica	onalization of the medic Mental Health and Substally with objective 2.3.3 ions for prescriptions	ance Use Strategy f Revise the MoPH	for Lebanon 2015-202			
StartingMOIPsycLebaWHe	points PH/YMCA list as a base hotropic and neurologic nese National Drug Ind O essential list	al medications used ex 2015				
1) I	chotropic and neurologic For Adults and Children, For Emergency Rooms of	with recommended	•		The finalized lists will be shared with the task force.	

> 5 categories of psychotropic medications: 1.Antipsychotics, 2.Anxiolytics,

3.Antidepressants, 4.Mood stabilizers, and 5.Antiepileptic drugs 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.

2. Review of implementation status of 2016 MHPSS TF action plan

- ➤ The implementation status of the 10 objectives on the MHPSS TF 2016 action plan were reviewed.
- ➤ The implementation of all objectives is on track.

3. Brainstorming session for 2017 action plan: challenges and gaps

- ➤ In preparation for the development of the 2017 MHPSS TF action plan, a discussion around challenges and gaps in MHPSS work was held during the meeting.
- > Challenges and gaps brought up by participants:
 - Gaps in the availability of mental health services in the Bekaa
 - Absence of institutions for non-Lebanese children with developmental disorders
 - Lack of services for persons with epilepsy and for persons with substance use disorders in the Bekaa
 - Long waiting lists in NGOs
 - High risk cases: need time to have approval from hospital
 - Challenge in ensuring transportation to hospital or other needed services
 - No opportunity for re-integration of persons into the community and no community support
 - Big number of patients coming from a neurologist with unprofessional and inaccurate diagnosis.
 - A lot of prescriptions from neurologists for psychotropic medications are leading to addiction on prescription medication
 - No system for cross-checking that patients are not benefiting from same service in different organisations.
 - Capacity-building for front-liners: they do not transmit (and they have low salaries)

To ensure that all actors have the opportunity to participate in the development of the action plan, an anonymous and short online feedback form (2 questions only) was shared with the task force to collect feedback on challenges and priorities to be addressed. All members are encouraged to provide any further feedback they may have through filling the survey.

- > Suggested actions by participants to address challenges:
 - Training community groups (family committees in the region) on identifying mental health disorders and referral
 - Linking community mental health centres and teams with protection and shelter hubs and with the committees in the region
 - Ensuring the availability of disaggregated data for the Bekaa

4. General Updates

- ➤ 4Ws (Who is doing What, Where and until When) mapping exercise was launched. Around 25 organisations have contributed so far and still expecting some organisations to send their sheets in the coming week.
- 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.

Organisations that haven't

> 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)

- Regular updates are provided through the National Mental Health Programme Newsletter accessible on the NMHP page on the new MOPH website:

 http://www.moph.gov.lb/en/Pages/6/553/the-national-mental-health-program#collapse_1349
- The national strategy and publications of the NMHP are also available on and downloadable from this webpage.

• 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: Tuesday October 25, 2016 at 1pm in UNHCR Zahleh