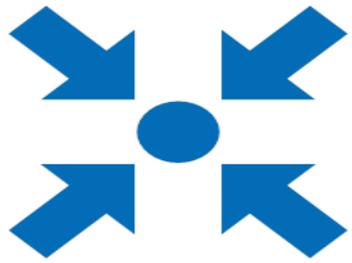


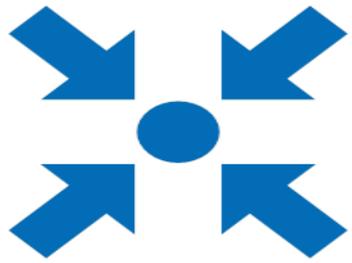


Inter Agency Meeting –13 May 2016



AGENDA

- Winter assistance and complementary cash approaches
- Mercy Corps presentation on Syrian teenagers motivated to build a better future
- Overview of available information and information gaps across sectors
- MoPH presentation on the national mental health and substance use strategy
- AOB



AGENDA

- **Winter assistance and complementary cash approaches**
- Mercy Corps presentation on Syrian teenagers motivated to build a better future
- Overview of available information and information gaps across sectors
- MoPH presentation on the national mental health and substance use strategy
- AOB



**Inter-Agency
Coordination**
Lebanon

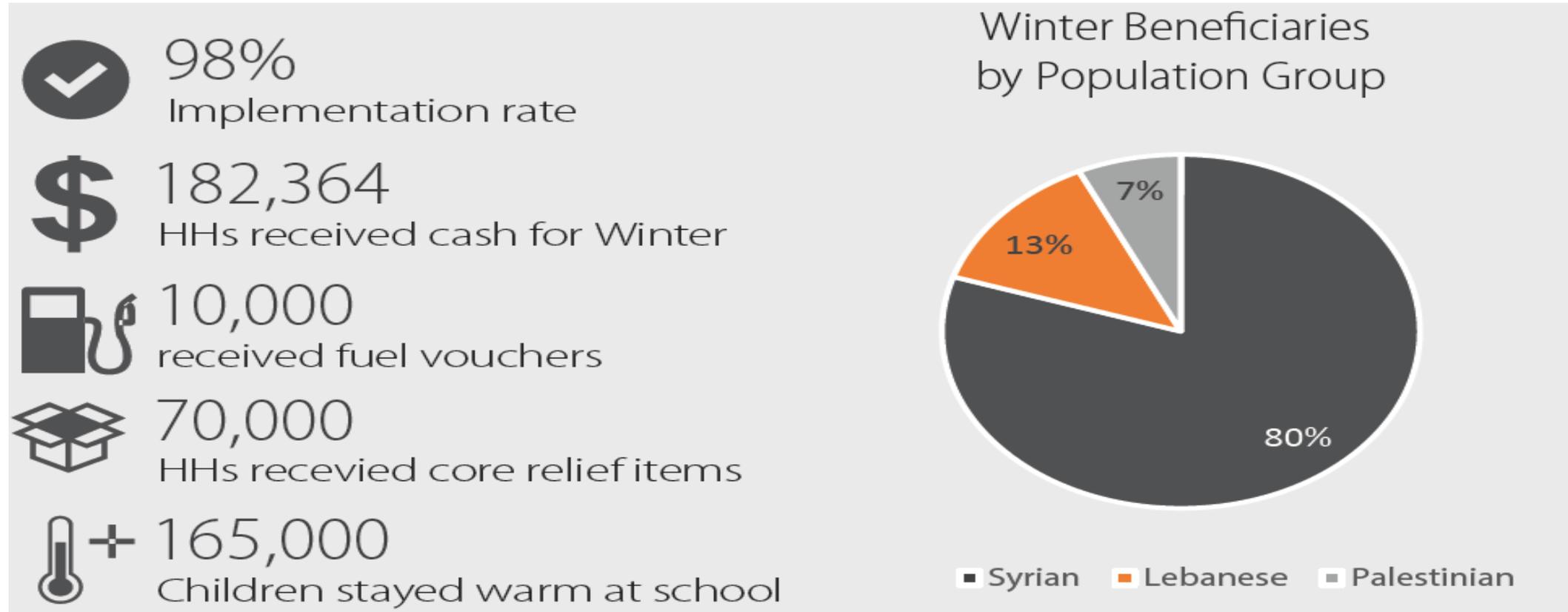
UNHCR
United Nations High Commissioner for Refugees
Haut Commissariat des Nations Unies pour les réfugiés

2015/2016 INTERAGENCY WINTER SUPPORT PLAN

SUMMARY ACHIEVEMENTS

WINTER SUPPORT

Summary

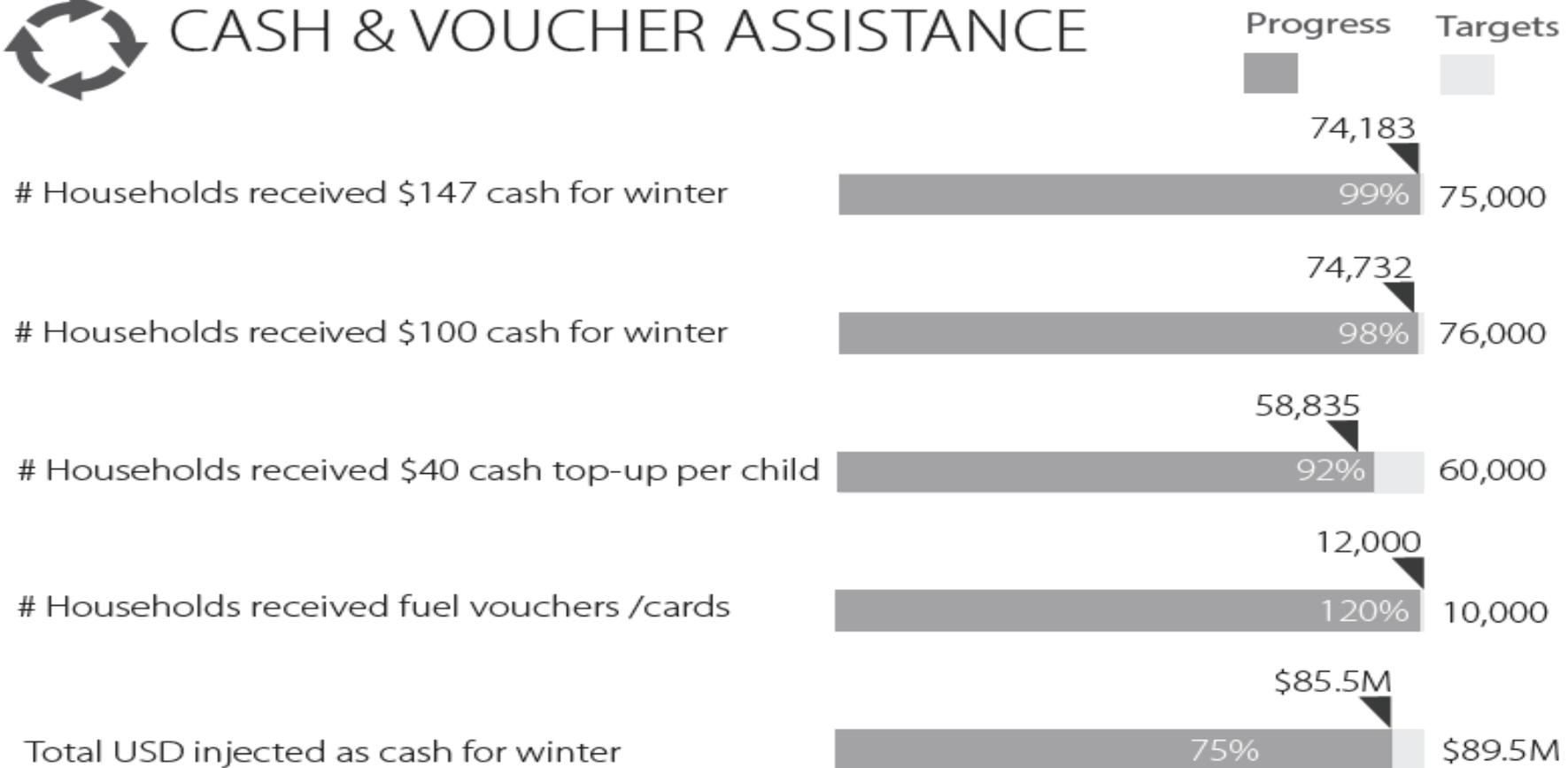


WINTER SUPPORT – BASIC ASSISTANCE

Summary by assistance type



CASH & VOUCHER ASSISTANCE



WINTER SUPPORT – BASIC ASSISTANCE

Summary by assistance type



CORE RELIEF ITEMS & CLOTHES*

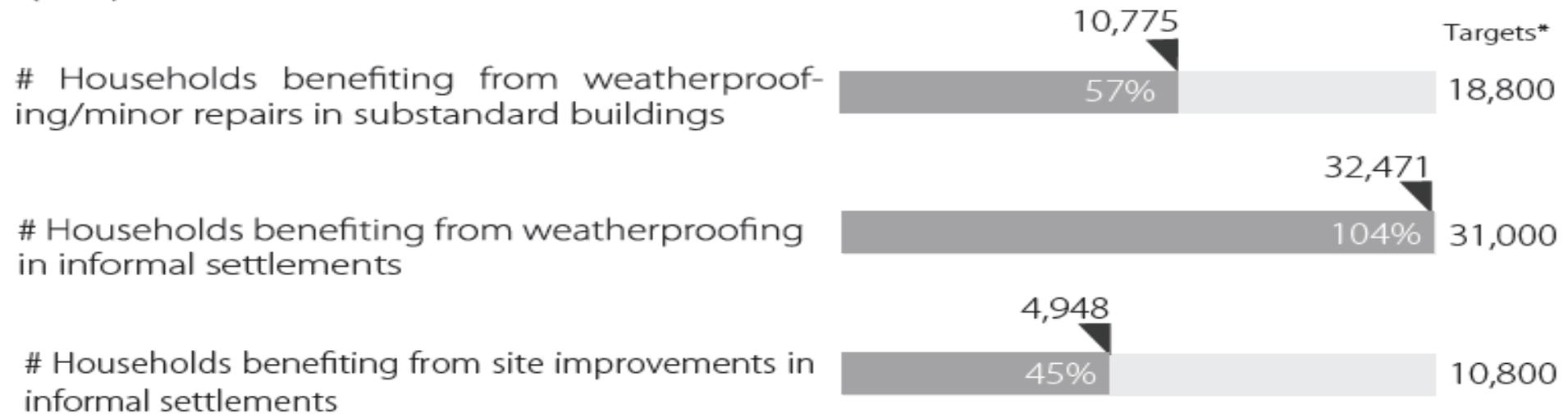


WINTER SUPPORT – SHELTER

Summary by assistance type



SHELTER – WEATHERPROOFING



* Targets represent shelter and economic vulnerable households. Achievements from April 2015 through Mar 2016.

WINTER SUPPORT – ENERGY AND WATER

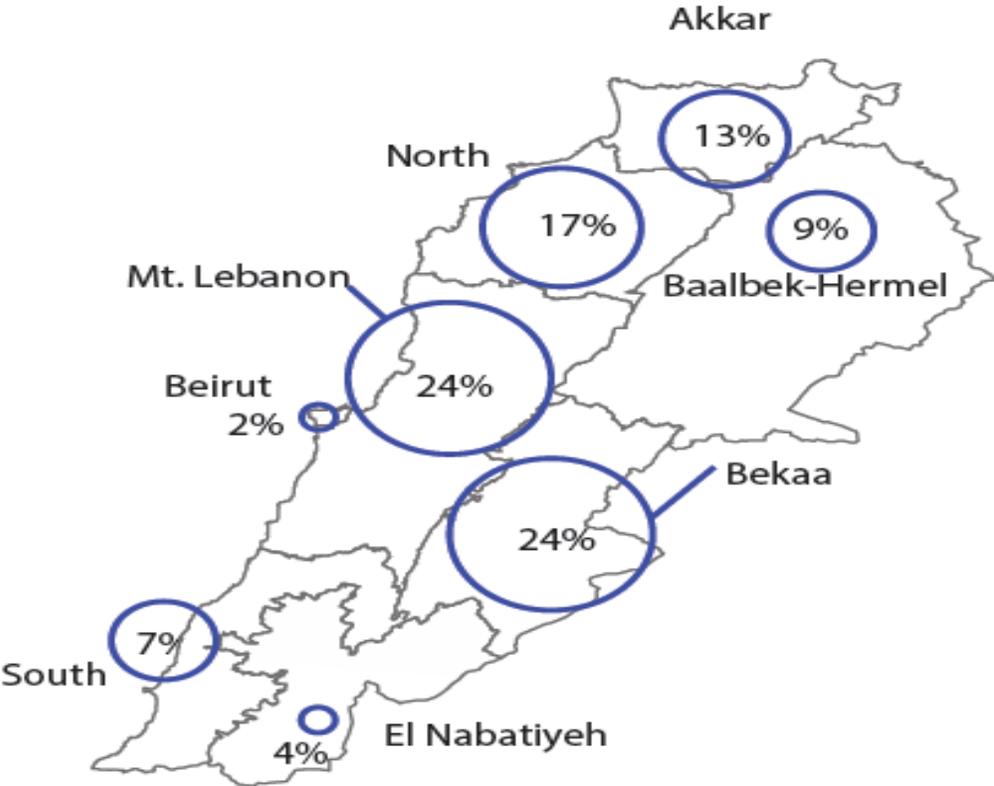
Summary by assistance type

- Flood mitigation activities
- Provide water (for storage)/ and before storms
- Ensure that the sewage pits are desludged to prevent overflow

WINTER SUPPORT – BASIC ASSISTANCE

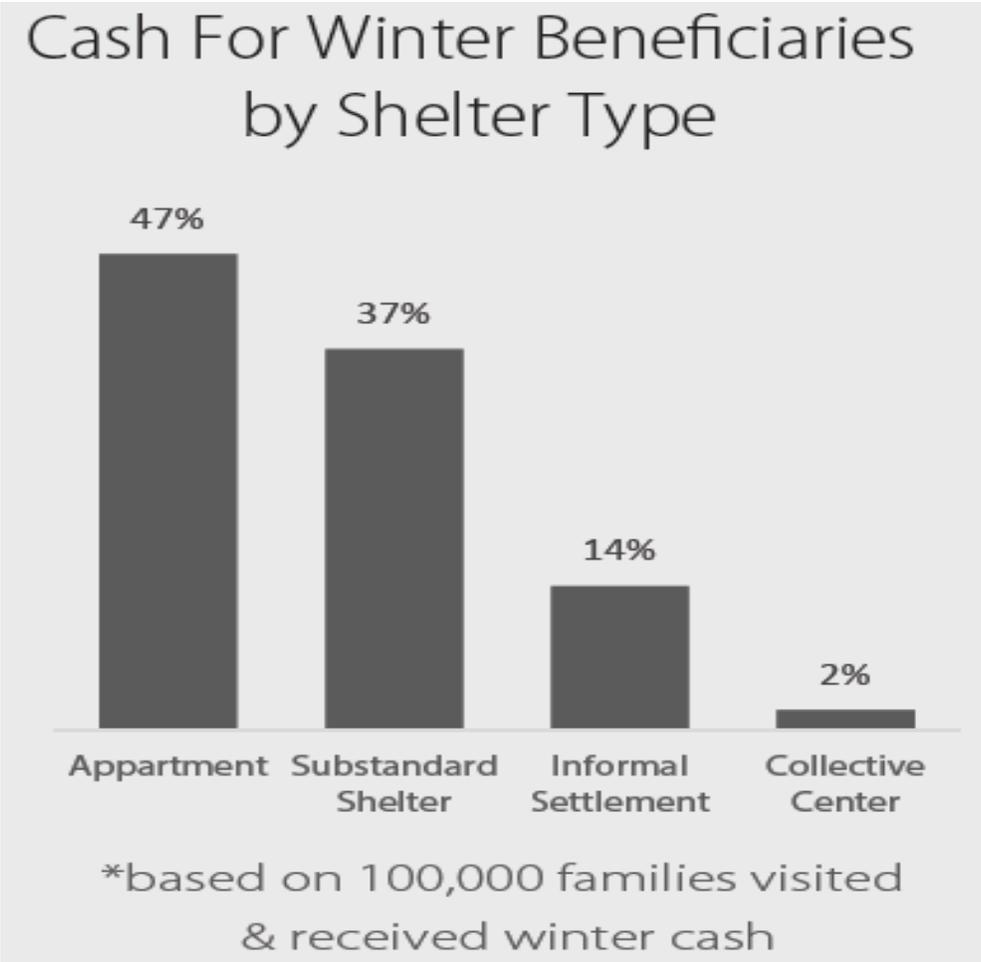
Cash assistance in focus

Syrian Refugee Households Receiving Cash for Winter by Governorate



WINTER SUPPORT – BASIC ASSISTANCE

Cash assistance in focus



WINTER SUPPORT – BASIC ASSISTANCE

Support to vulnerable Lebanese through NPTP



RECOMMENDATIONS / LESSONS LEARNT

Recommendation / Lessons Learnt	Programme Design	Coordination	Communication	Implementation	Reporting
Ensure involvement of refugees in project design/community based approach	✓				
Outreach to sector working groups: Shelter, Protection, E&W and other coordination mechanisms (CSMCs)	✓	✓	✓	✓	✓
Cash is the best assistance modality / closer look at hard to reach areas where cash is not an option	✓	✓		✓	
Ensure timely funding to meet needs / resource mobilization / to start planning early (June/July)	✓	✓	✓	✓	
Harmonized targeting criteria/ less restrictive / wider criteria adopted this year	✓	✓	✓	✓	✓
Ensure non-duplication of assistance: optimize the use of RAIS and Activity Info – the common IA reporting tools	✓	✓	✓	✓	✓
Outreach to local authorities for information on distributions and assistance		✓	✓	✓	✓
Implementation and provision of assistance to start as of October and for 5 months	✓	✓	✓	✓	✓
Harmonized feedback mechanism: unified complaints mechanism, call center, unified Q&A	✓	✓	✓	✓	✓
Maintain cash safety net for vulnerable Lebanese	✓	✓	✓	✓	✓
Provide written and verbal communication on winter assistance to stakeholders			✓	✓	✓

CASE STUDY: CASH FOR WINTER

Complementarity of assistance



Cash based assistance types:

WFP e-vouchers

\$ 40 / Child top up

\$175 Multi-purpose Cash Assistance

CASE STUDY: CASH FOR WINTER

Complementarity of assistance

Introduction

- ❑ HHs have various needs that require different interventions and various modalities
- ❑ Food assistance through E-vouchers: ensure the 2100 Kcal dietary intake per person per day
- ❑ Multipurpose cash assistance: facilitate accessing to basic goods and services (non food items, rent, water, clothing, services, etc.)
- ❑ Cash for winter: help covering parts of the additional winter related expenses like clothes, blankets, fuel
- ❑ \$40/child top up: additional support for families with children living in informal settlements to enable buying clothes, shoes...

CASE STUDY: CASH FOR WINTER

Complementarity of assistance

Observations

- ❑ 2015/16 winter and assistance to vulnerable refugees: 4 types of cash transfer modalities (regular and top ups) analyzed
- ❑ Majority of families received cash for winter and food assistance: critical drop after winter may affect their ability to better access basic goods and needs

CASE STUDY: CASH FOR WINTER

Complementarity of assistance

Observations

- ❑ Seasonal assistance is a top up to existing assistance schemes that aim to cover additional or increasing costs refugees needs
- ❑ Regular assistance (MPC) coverage has to be expanded further: all poor families eligible for cash and food should receive assistance
- ❑ Otherwise, families will be further exposed to economic hardship and risk falling deeper into poverty

CASE STUDY: CASH FOR WINTER

Complementarity of assistance

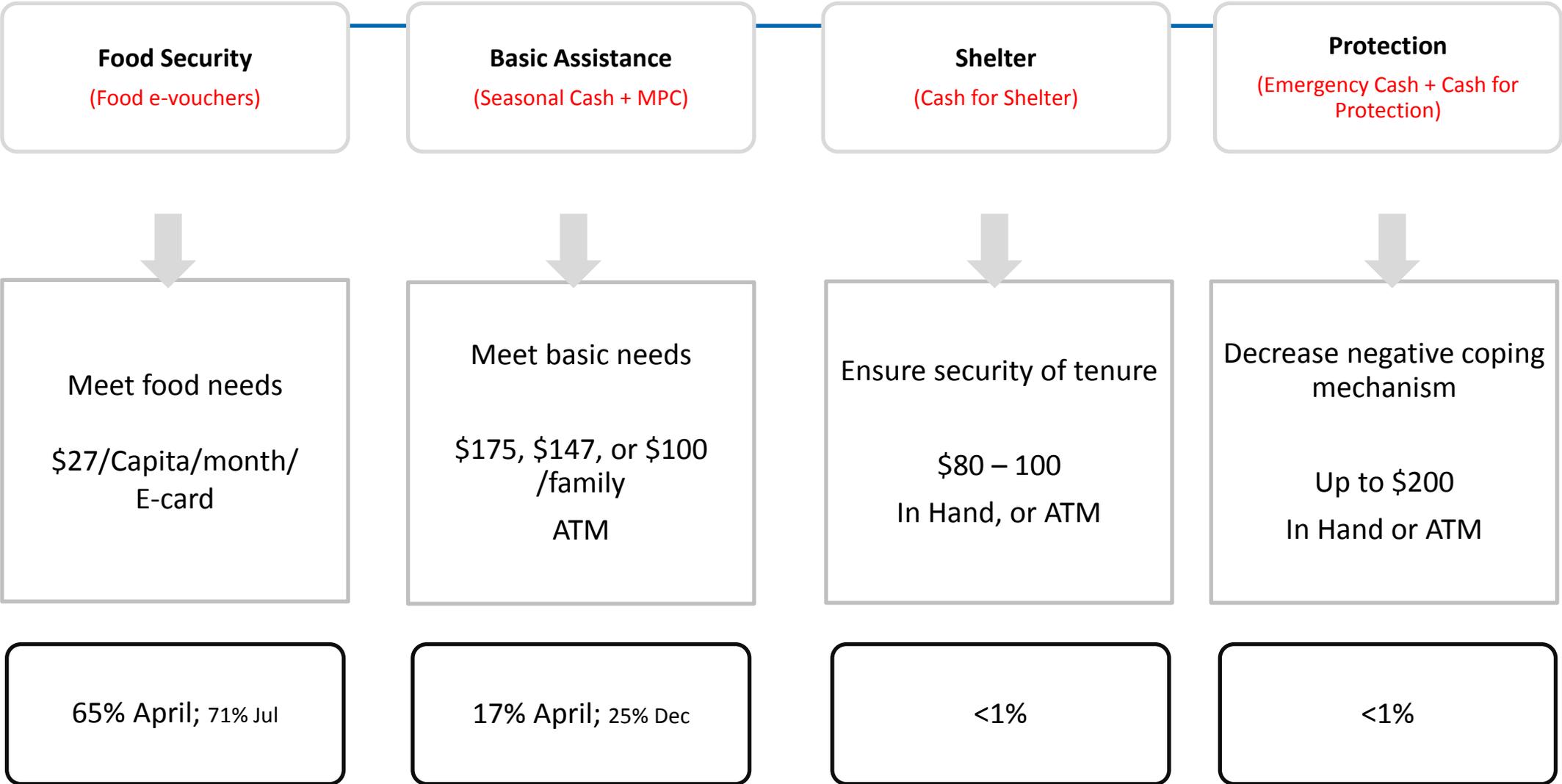
Recommendations

Lessons learnt show the following:

- Different needs require different forms of assistance and complementarity is essential
- Unconditional cash is intersectoral in nature and therefore requires consultation across different sectors

WAY FORWARD: REGULAR ASSISTANCE

Complementarity of assistance

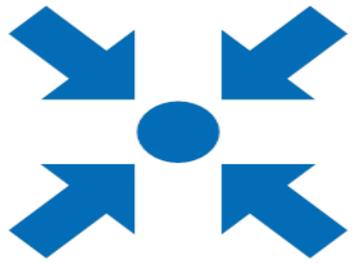


WAY FORWARD: REGULAR ASSISTANCE

Complementarity of assistance

For further discussion...

- Clearly define complementarity between programmes and how refugee needs are met or can be met



AGENDA

- Winter assistance and complementary cash approaches
- **Mercy Corps presentation on Syrian teenagers motivated to build a better future**
- Overview of available information and information gaps across sectors
- MoPH presentation on the national mental health and substance use strategy
- AOB

Welcome



**MERCY
CORPS**



AGE OF UNREST

Syrian Youth at a Crossroad

Anastacia Al Hajj

Media and Communications Coordinator



A Future of Syrian Youth



Methodology

Mercy Corps' Research Resources:

"Youth and Consequences" (2014)
"From Jordan to Jihad" (2014)
"Investing in Iraq's Peace" (2015)

Migration Policy Institute:

"The Educational and Mental Health Needs of Syrian Refugee Children" (2015)

In-depth interviews with 15 Syrian youth during a fact-finding trip to Jordan, Lebanon and Turkey in Dec 2015

More than 30 interviews with experts, field staff, outreach workers and municipal officials from the host countries



Physicians for Human Rights:

"Aleppo Abandoned" (2015)

UNICEF:

"The State of the World's Children" (2015)

Adolescents

- › Mercy Corps' definition of adolescence: 10 to 19 years of age
- › **Adolescence is a critical time** in a young person's development
- › Young Syrian refugees feel isolated, in **limbo**, alone and hopeless
- › They feel a **strong sense of responsibility**
- › They have been a largely **invisible** group



Challenges They Face

- › Building **emotional well-being** and resilience at a time of turbulence and violence
- › Continuing their **education** and gaining necessary technical knowledge
- › Getting decent **jobs** in which they are treated fairly and legally, and not exploited



I. Well-Being and Personal Resilience

“The image I have of my homeland is one of deserted houses, shattered glass, ambulances roaming the streets, people fighting for their lives, and people looking for their families” Sema, 17, lives as a refugee in Turkey

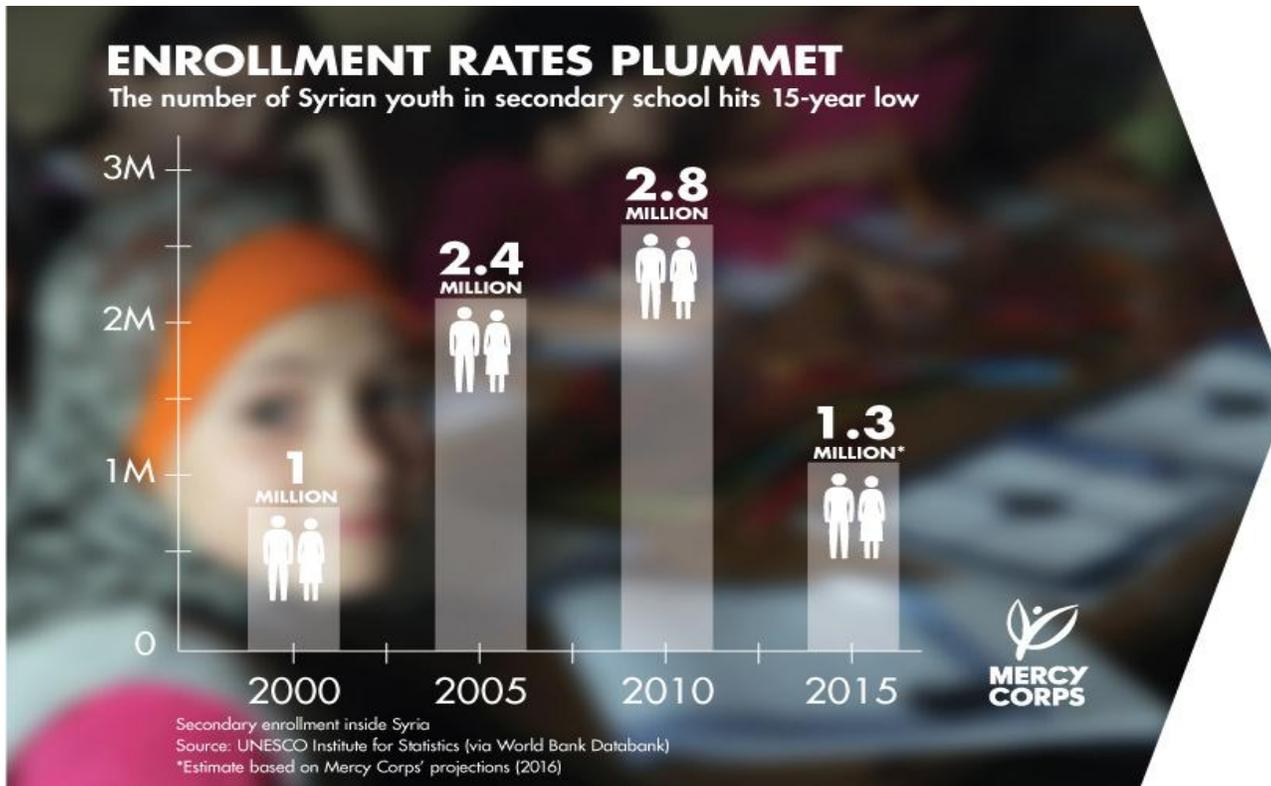
The Mental Health of Syrian Refugee Youth

- › Witnessing brutal violence
- › Difficulty re-entering school
- › Facing discrimination
- › Struggling with poverty and exploitative labor
- › Being vulnerable to sexual abuse



II. Education

“I was always an excellent student. I’ve always wanted to become a lawyer. But I cannot continue my education because I don’t have the right documentation that proves I passed the 9th grade in Syria” Fadwa, 17, lives as a refugee in Lebanon



Barriers:

- › Lack of school capacity
- › School distance/Transportation - especially risky for girls
- › Expensive tuition fees
- › Lack of documentation
- › Difficulty of curriculum
- › Different curriculum language
- › Difficulty to integrate

III. Employment and Income

“Working in Jordan is illegal for me. If I am caught, I will be arrested and maybe even deported back to Syria. But I need to work; I am the main breadwinner for my family” Bassam,17, lives as a refugee in Jordan

Syrian refugee youth face

- › Intense pressure to support their families
- › The risk of illegal labor market
- › Exploitation
- › Tension with host communities over jobs



↑
Unemployment Rates

↑
of Families Below the Poverty Line



I see a beautiful future. There will be lots of difficulties down the road, but they can all be overcome”

Amina, 17

Recommendations

I. Promoting Well-Being and Resilience

- › Reinforce community-based mechanisms and programs to ensure protection of youth
- › Invest in equipping young people with skills and knowledge
- › Make aid adaptive – tailored programming
- › Foster positive social engagement
- › Empower youth to build their own representative assemblies



Recommendations

II. Promoting Education for All

- › Promote life skills for adolescents to prepare them for transition
- › Recognize that Non-Formal Education (NFE) is a necessary mode of delivery.
- › Formalize a certification of learning—at both the country and regional level



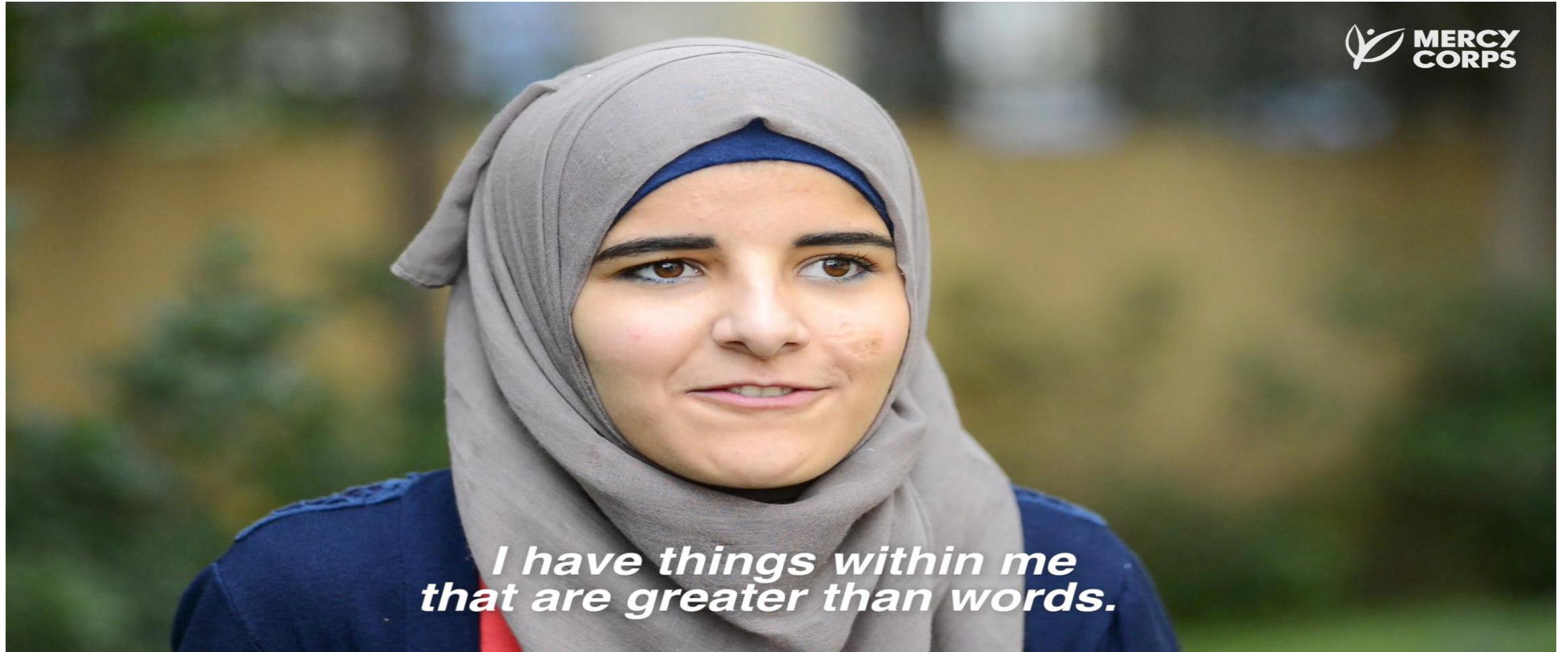
Recommendations

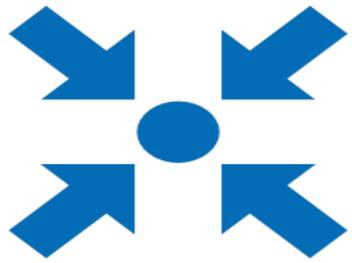
III. Promoting Economic Growth and Employment Pathways

- › Build a legal foundation for safe, decent and fair jobs for refugees
- › Invest in workforce programs for both Syrian refugee and host country youth that respond to market demand
- › Invest in vocational training in skills needed for reconstruction —with an eye towards future economic recovery
- › Invest in industries that will be vital for post-war reconstruction in Syria i.e. construction, technology.



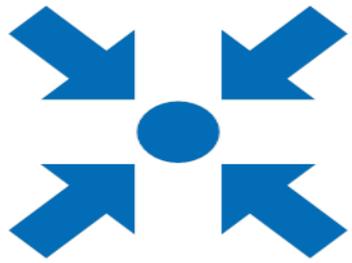
Call for Action





AGENDA

- Winter assistance and complementary cash approaches
- Mercy Corps presentation on Syrian teenagers motivated to build a better future
- **Overview of available information and information gaps across sectors**
- MoPH presentation on the national mental health and substance use strategy
- AOB



AGENDA

- Winter assistance and complementary cash approaches
- Mercy Corps presentation on Syrian teenagers motivated to build a better future
- Overview of available information and information gaps across sectors
- **MoPH presentation on the national mental health and substance use strategy**
- AOB



MINISTRY OF PUBLIC HEALTH
MENTAL HEALTH PROGRAMME

Mental Health System Reform in Lebanon

National Mental Health Programme

13 May 2016

Outline

- Why is Mental Health a Public Health priority
- Mental Health and Substance Use Strategy for Lebanon 2015-2020
- MHPSS Task Force

Burden of mental disorders

- **10%** of adults suffer from a mental disorder
- Up to **30%** of Primary Care Attenders
- Between **0.5 and 2%** of all adults suffer from a chronic, severe mental disorder
- About **1 in 10 children** suffer from a childhood mental disorder

Leading causes of years of life lived with disability

1	Unipolar depressive disorders	10.9%
2	Hearing loss, adult onset	4.6%
3	Refractory errors	4.6%
4	Alcohol use disorders	3.7%
5	Cataracts	3.0%
6	Schizophrenia	2.7%
7	Osteoarthritis	2.6%
8	Bipolar affective disorder	2.4%
9	Iron-deficiency anaemia	2.2%
10	Birth asphyxia and birth trauma	2.2%

(Both sexes, all ages)

Predictions for the leading causes of disability and mortality in 2030

World	1	HIV/AIDS
	2	Unipolar depressive disorder
	3	Ischaemic heart dis.
High-income countries	1	Unipolar depressive disorder
	2	Ischaemic heart disease
	3	Alzheimer
Middle-income countries	1	HIV/AIDS
	2	Unipolar depressive disorder
	3	Cerebrovascular
Low-income countries	1	HIV/AIDS
	2	Perinatal disorder
	3	Unipolar depressive disorder

- Severe mental disorders associated with **2 to 3 fold increase in mortality**, independent of suicide
- Mental disorders associated with **unhealthy lifestyles**, e.g. smoking
- Alcohol use is major risk factor for a number of medical disorders

- Discrimination in employment
- Increased expenditure on medical treatment, e.g. multiple consultations and medications

Mental Health: a Public Health Priority

- Human rights protection
- Public health and economic burden
- Cost and cost-effectiveness (as low as 2\$ per capita)
- Equitable access and financial protection

- Three psychiatric hospitals
- Seven psychiatric wards in general hospitals
- Outpatient care mainly in the private sector
- MOPH covers inpatient care and psychotropic medication
- Private insurances do not cover mental health
- No mental health legislation
- No mental health strategy

BACKGROUND (National Mental Health Programme)

Launching May 2014

Partners:

- WHO
- IMC
- UNICEF





REPUBLIC OF LEBANON
MINISTRY OF PUBLIC HEALTH

Mental Health and Substance Use

Prevention, Promotion, and Treatment

Strategy for Lebanon
2015 - 2020

Strategy launching

- The strategy was launched on May 14, 2015
- “The strategy is not that of the MoPH but rather a NATIONAL Strategy and its successful implementation will require the continued implication and collaboration of all actors on the ground.” Dr. Walid Ammar, Director-General of the MoPH



- Vision
- Mission
- Values and Guiding Principles
- Domains
- Goals
- Strategic objectives
- Targets for successful achievement of objective.

“All people living in Lebanon will have the opportunity to enjoy the best possible mental health and well-being”

*“To ensure the development of a **sustainable** mental health system that guarantees the **universal accessibility** to **high quality** mental health **curative and preventive** services through a **cost-effective, evidence-based, multidisciplinary** approach, with an emphasis on **community involvement, continuum of care, human rights, and cultural relevance.**”*

- Autonomy
- Dignity
- Participation
- Empowerment
- Quality
- Accountability and Integrity

1. Leadership and Governance
2. Reorientation of Services
3. Prevention and Promotion
4. Health Information System and Research
5. Vulnerable Groups

1- LEADERSHIP and GOVERNANCE

- Legislation (Enact, Revise, Develop)
- Financing (Revise MOPH budget, Insurances)
- Advocacy (Media, User Association, Stigma)
- Emergency response plan
- Substance Use Strategy

2- REORIENTATION OF SERVICES

- Integration of Mental Health into Primary Care
- Contracting Psychiatric wards
- Building a referral system (Community-based)
- Monitor Mental Health facilities for Human Rights protection
- Assessment of persons in long-stay facilities
- Piloting e-mental health guided self-help programme

2- REORIENTATION OF SERVICES

Human Resources



REPUBLIC OF LEBANON
MINISTRY OF PUBLIC HEALTH

Capacity building plans, with all actors

- Multidisciplinary approach
- Biopsychosocial model
- Recovery model

2- REORIENTATION OF SERVICES

Human Resources



REPUBLIC OF LEBANON
MINISTRY OF PUBLIC HEALTH

Target Population

Capacity building plans, with all actors

- Multidisciplinary approach
- Biopsychosocial model
- Recovery model

- Specialized Staff
- Non-specialized staff
- Non- health staff
- Undergraduate curricula

2- REORIENTATION OF SERVICES

Quality improvement



REPUBLIC OF LEBANON
MINISTRY OF PUBLIC HEALTH

- Accreditation Criteria for MH/SU facilities
- Code of ethics for MH/SU providers
- Monitoring and Evaluation System

2- REORIENTATION OF SERVICES

Procurement and distribution of medication



REPUBLIC OF LEBANON
MINISTRY OF PUBLIC HEALTH

- Revise the list of MOPH restricted list of medication
- Develop guidelines for rational prescription of psychotropic medication

3- PREVENTION and PROMOTION

- Inter-ministerial action plan
- Framework for prevention and monitoring of suicide
- Integration of evidence-based mental health promotion and prevention in: Protection programming, Schools, Maternal and Child Health programmes

4- Health Information System and Research

HIS and M&E



REPUBLIC OF LEBANON
MINISTRY OF PUBLIC HEALTH

- Integrating a core set of mental health indicators within the national HIS at all levels of care

4- Health Information System and Research

Research



REPUBLIC OF LEBANON
MINISTRY OF PUBLIC HEALTH

- Setting priority research areas aiming at service development

5- VULNERABLE GROUPS

- Children and Adolescents
- Foreign Domestic Workers
- Older adults
- Families of disappeared from armed conflicts and wars
- LGBT community
- Persons receiving Palliative Care
- Persons in Prisons
- Persons living with disabilities
- Persons living with HIV/AIDS
- SGBV survivors
- Survivors of torture and their families
- Palestinian refugees
- Displaced populations

5- VULNERABLE GROUPS

GOAL

“Improve access to equitable evidence based mental health preventive and curative services for all vulnerable groups living in Lebanon”

- Chaired by the Ministry of Public Health
- Co-Chaired by WHO and UNICEF
- Includes all actors (UN, iNGOs, local NGOs, Other Ministries)
- Aiming at Mainstreaming, Harmonizing and up-scaling MHPSS services in the Syrian Crisis response

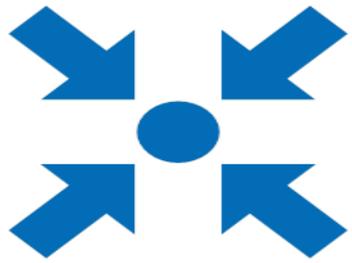
- Around 60 organizations
- Monthly meetings:
 - Centrally: Beirut
 - Regionally: North, South and Bekaa
- Platform for exchange and coordination
- Annual action plan
- Linkage with TFs/WGs from other sectors

MHPSS TF Action Plan 2016

- Develop a **referral system** for crisis management linking all levels of care
- Maintain an online **4Ws** mapping
- Develop and report on **key indicators** on MHPSS community service utilization
- Disseminate **staff care** recommendations based on assessment results
- Develop a **code of conduct** for NGOs working in MHPSS in line with the national code of ethics developed by the ministry

MHPSS TF Action Plan 2016

- Harmonize 1) **recruitment criteria** and 2) **range of salaries and benefits** of mental health professionals working in the humanitarian field
- Scale-up **mental health trainings for ER staff** in selected key hospitals
- **Capacity building for non-specialized staff** (ROVs, front-liners, community mobilizers, CP and SGBV case managers...)
- Conduct **IPT trainings and supervision**



AGENDA

- Winter assistance and complementary cash approaches
- Mercy Corps presentation on Syrian teenagers motivated to build a better future
- Overview of available information and information gaps across sectors
- MoPH presentation on the national mental health and substance use strategy
- **AOB**

THANK YOU.