

# Meeting Minutes

## Health Working Group - Displaced Syrians

### September 29, 2017

The central Health Working Group met, as planned on a bi-monthly basis to discuss issues and plan actions for follow up concerning the displaced Syrians crisis in Lebanon. The meeting was held at the premises of WHO – Museum Square, Glass Building, floor -1 on Friday September 29<sup>th</sup>, 2017 between 9:00 AM and 11:00 AM.

#### *Topics of Discussion*

1. Field news and information on outbreaks
2. Reproductive health
3. Mental health and psychosocial support
4. Child health/vaccination
5. Nutrition
6. LCRP updates
7. AOB

#### *Main Discussions*

Topic 1	Field news and information on outbreaks
<i>Topic Details</i>	<p><b>MOPH- ESU department</b></p> <ul style="list-style-type: none"> <li>- Polio: 0 cases in Lebanon</li> <li>- AFP: 61 cases recorded since the beginning of 2017</li> <li>- Measles: 89 cases recorded so far in 2017</li> <li>- Brucellosis: outbreak in baalbak-hermel, increase in comparison with last 5 years, case control studies are being done to investigate the outbreak.</li> <li>- Food poisoning: Large outbreak of food poisoning in baalbak (after a wedding), more than 160 cases, salmonella detected in samples collected</li> <li>- Meningitis: 16 cases for this month (3 cases are Syrians), 1 case died in baalbak-hermel, Rifadin was given to all contacts</li> <li>- Strategic planning mission in collaboration with WHO: to put a strategic plan for ESU, recommendations will be shared in next meeting</li> <li>- District Health Information System (DHIS 2): ESU is moving from paper based to electronic surveillance. Training sessions are being conducted for all medical centers in Lebanon. There are still 12 sessions to be conducted.</li> <li>- A mailing list that includes emails of hospitals and medical centers is being prepared; if interested please send email to Dalale (<a href="mailto:dalalyoussef.esu@gmail.com">dalalyoussef.esu@gmail.com</a>) so that you would receive updates and reports from ESU</li> </ul> <p><b>Blue Mission</b></p> <ul style="list-style-type: none"> <li>- Blue Mission operates 2 mobile clinics; one in Saida and one in Mt Lebanon. In a shelter in baysariyi area, many persons have been seen with a type of skin diseases that was not recognized by the physician. The infection is itchy and it spreads from one location to another in the person's body. The physician was not sure if it is a vector-borne disease (discussion took place on whether it could be impetigo or a staphylococcus infection).</li> <li>- In khiyam also similar cases were seen by another NGO and they were diagnosed as impetigo by a dermatologist and they received the necessary treatment.</li> </ul> <p><b>MOPH</b></p> <ul style="list-style-type: none"> <li>- ESU will follow up with Blue Mission on the mentioned cases to investigate and refer to treatment</li> </ul>

	<ul style="list-style-type: none"> <li>- Around 93 cases of leishmania were detected this year and they are referred to specific hospitals to receive the necessary treatment</li> <li>- 260 cases of dysentery were detected this year across Lebanon</li> <li>- More than 1000 cases of rotavirus infections this year</li> <li>- There are some cases of hep A but they are not considered an outbreak</li> </ul>
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<b>Topic 2</b>	<b>Reproductive health</b>
<i>Topic Details</i>	<p><b>UNFPA</b></p> <ul style="list-style-type: none"> <li>- UNFPA started training midwives this year on the FP counselling training package and manual, in collaboration with the Order of Midwives. 45 midwives have been trained so far, 30 or 35 additional midwives will be trained before the end of year. The training will continue through next year as well, UNFPA is looking forward to train all midwives registered in the Order of Midwives.</li> <li>- 57 RH dispensaries along with 14 SDCs are receiving service delivery guidelines and RH reporting related training. 130 to 140 health staff participating in the trainings. RH reporting related trainings are conducted in an effort to systemize and harmonize the reporting system to the MOPH. If there are organizations who want their clinics to be trained (even if they are not in the MOPH network) they are encouraged to request from UNFPA or MOPH to be included in the training.</li> <li>- UNFPA in collaboration with LSOG, finished training 173 focal points at 140 hospitals on maternal and neonatal mortality surveillance.</li> <li>- Consultant completed the review and compilation of all reproductive health education materials. The objective was to have standard IEC materials and messages that are agreed upon by partners and stakeholders. Many partners contributed to the exercise and their efforts are much appreciated. UNFPA will disseminate results in separate meeting. Brief presentation will take place in upcoming SRH sub-working group meeting.</li> <li>- CMR Kits are available for next year in Lebanon and CMR training for 16 prioritized facilities. IMC will support with the training that will start in October.</li> </ul> <p><b>UNHCR</b></p> <ul style="list-style-type: none"> <li>- Just completed the annual health access and utilization survey; results are being analysed. At first look there are still some important concerns with regards to ANC coverage and FP uptake; they seem to be remaining relatively low. Results will be shared when analysis is completed.</li> </ul>

<b>Topic 3</b>	<b>Mental health and psychosocial support</b>
<i>Topic Details</i>	<p><b>MOPH- National Mental Health Programme (NMHP)</b></p> <ul style="list-style-type: none"> <li>- The training on IMPACT model of depression care, also known as Collaborative Care, took place last week. Makhzoumi and Rafic Hariri PHC centers were trained on this model. The model is currently being tested to see if it can be implemented in other centers.</li> <li>- The national mental health campaign on Depression for the occasion of the World Mental Health Day was relaunched this month. This campaign is a continuation of the campaign that was launched on the World Health Day (7 April 2017). Brochures were shared with PHCs, and campaign material were sent to media outlets; the aim is to raise awareness on depression and its main symptoms as well as provide some self-help techniques and information on where people can seek help.</li> <li>- With the support of WHO, a set of training and refresher training workshops were planned between September and November on mhGAP for MDs and non MDs (for PHC centres). Training on management of psychiatric emergencies for staff working in emergency departments in public and private hospitals is also taking place. The complete emergency department staff from 8 hospitals in different Qadaa and one private hospital are being trained on management of psychiatric emergencies.</li> <li>- An e mental health project is being implemented with support from WHO. The application is a self-based tool that will be piloted in October. There are currently 5 trained e-helpers who will support people using this intervention. It is being piloted in PHCs with 200 participants who will use the application and e helpers will contact them once per week to check if they are properly using the application and if they are facing any problems.</li> </ul> <p><b>UNHCR</b></p> <ul style="list-style-type: none"> <li>- Critical pressure on hospital beds for acute psychiatric emergencies; RHUH has agreed to open an 8-bed acute in-patient psychiatric unit which will be supported by the NMHP; there has been some delay but it is expected to open towards the end of October.</li> </ul>

<b>Topic 4</b>	<b>Child health/vaccination</b>
<i>Topic Details</i>	<p><b>MOPH- PHC department</b></p> <ul style="list-style-type: none"> <li>- The schools will be reopening again so MOPH is working with MEHE to make sure that schools ask for vaccination records as pre-requisite for school admission. Community mobilizers in NGOs are asked to support this by reminding parents and guardians to vaccinate their children before school admission especially in public schools.</li> <li>- MOPH and UNHCR are vaccinating and following up on the new comers from Syria. Cases of polio zero doses are being tracked and are being vaccinated through an outreach urgent mission in collaboration with UNHCR North office.</li> <li>- A partnership between MOPH and WASH sector in North has been established. The sector asked to be informed of residency details of water-borne diseases of the cases. The surveillance team prepared a report form for the WASH sector to get the necessary details to better address the cases.</li> <li>- Mr. Hussein Soueidan is leaving his position at MOPH PHC department, for inquiries about vaccination or for IEC or PHC related material please call Mrs. Wafaa Kanan on 01 830300.</li> </ul> <p><b>URDA</b></p> <ul style="list-style-type: none"> <li>- Process of vaccination in PHCs is not free of charge since although vaccines are free of charge, and nurses are authorized to give the vaccine, the centers are requesting that physicians, who charge consultation fees, check the child before they give the vaccine.</li> </ul> <p><b>MOPH- PHC department</b></p> <ul style="list-style-type: none"> <li>- MOPH trained the nurses at PHCs to pre assess the children and if there is no fever or</li> </ul>

contraindications or specific medical conditions, they are authorized to vaccinate according to the national vaccination protocol.

- Ongoing discussion with the Lebanese Pediatric Society and Syndicate of Pediatricians about a directive from MOPH to ensure that vaccines are administered by the nurse free of charge. Results of discussions and updates will be announced later.

#### **URDA**

- 530 children were registered with URDA as having congenital orthopedic malformation, 200 surgeries have been done so far.
- 250 children are registered in the new program with URDA as suffering from congenital abdominal and urinary tract malformation. Surgeries will start next month.
- A message will be sent by URDA to health partners about the criteria of covered cases and how to refer them. Refugees are targeted and registration is done easily through whatsapp. There are no lengthy reporting forms; the info needed is: name of child, age of child, medical problem, contact info of family, address of family.

#### **UNICEF (*presentation attached in email*)**

- cVDPV2 outbreak in Syria is severe and although Lebanon is safe, there is still at risk of contamination through border crossing.
- Accelerated vaccination activities will take place now in 209 cadasters with low vaccination coverage.
- MOPH, with WHO and UNICEF support, will work on strengthening the immunization system through outreach activities
- PHC will be at the center of routine immunization: raising demand through targeting parents house to house with specific guidance messages on immunization referring them to PHCs to complete under 15 vaccination and increasing supply of PHCs
- Reaching out through social media and community immunization to bring children to the PHCs
- PHCs will be reporting through an electronic information system.
- This approach has been piloted in 2 PHCs located in 2 districts (baabda and baalbak)
- In Baabda 80% of children approached had at least one missing vaccine or missing documentation of vaccinating and of this sample 37% were zero polio doses
- Health centers experienced tremendous increase of load in delivery of services (700% increase in baabda and 400% increase in baalbak)
- Lessons learned include: combining awareness raising with service provision, awareness message clear, concise and well understood, paper based reporting worked well, district teams are very responsive, high demand from the community is present but the service must be made easily accessible, massive overload on health centers, some regions are not accessible for the screening teams, phoenix electronic system not well established yet, some data was missing.

#### **UNFPA**

- It is important to include WASH issues in THRIVE since health and WASH are so intertwined.

#### **UNICEF**

- The THRIVE will have WASH, nutrition and health messages
- Back to school campaign is identifying out of school children and the list of out of school children with the vaccine drop outs children. The drivers of inaccessibility to schools maybe the same drivers for exclusion from the public health system. The cross mapping and vulnerability mapping will help in figuring out what are the risk factors and how to tackle them. For the time being the focus will be on vaccination against polio and on testing the house to house methodology.
- UNICEF is working in close collaboration with the World Bank so that THRIVE would complement the UHC initiative. Mechanism of financing and implementation is still being discussed (direct contracting with PHC or not).

	<ul style="list-style-type: none"> <li>- Thanks to WHO emergency recommendation, Lebanon got 71000 PCV 13 doses at a low price as a response to the Syrian crisis (3\$ instead of 26\$) and we need to use the 71000 doses by December.</li> <li>- how to help us link community to the PHCs</li> </ul> <p><b>IMC</b></p> <ul style="list-style-type: none"> <li>- IMC is working with MOPH on improving the HIS to be able to track more vaccination data and improving the vaccination reports. They are now getting the first reports it requires a lot of back entry of data (a lot of hours is allocated for data entry clerks but a solution is being discussed). PHCs in THRIVE are encouraged to make use of this HIS to enter the data.</li> </ul> <p><b>UNICEF</b></p> <ul style="list-style-type: none"> <li>- In the youth programs UNICEF is working with youth to make use of their skills in data entry. This is an approach to try to cross sectors by involving the youth in data entry related to health. These are innovative interventions where youth are the pillars in improving the system.</li> </ul> <p><b>Blue Mission</b></p> <ul style="list-style-type: none"> <li>- Will MMUs be recruited for accelerated immunization activities?</li> </ul> <p><b>UNICEF</b></p> <ul style="list-style-type: none"> <li>- This is to be discussed with the MOPH, some cadasters might need MMUs and some others might not. So this is treated on a case by case basis (depending on each district). Recruited vaccinators might do the outreach immunization (they would be part of a mobile vaccination team, not a mobile clinic).</li> </ul>
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<b>Topic 5</b>	<b>Nutrition</b>
<i>Topic Details</i>	<p><b>UNICEF</b></p> <ul style="list-style-type: none"> <li>-UNICEF is working on the integration of IYCF activities within the Health care system: in coordination with MOPH, IOCC, and LAECD, 30 PHCs were identified and have been assessed. Breastfeeding corners are designed and now UNICEF is moving forward for implementation.</li> <li>-In coordination with MOPH, UNICEF is implementing the Baby Friendly Hospital Initiative. 11 hospitals were identified and training material is developed. The program will be rolled out during the second week of October. MOPH will send communication to respective hospitals to ensure smooth implementation.</li> <li>-In order to develop the MOPH's IYCF national policy a consultant will be recruited in the first week of October. He/she will approach health and nutrition partners to discuss issues on IYCF.</li> <li>-A capacity building project will take place in coordination with AUB and MOPH to train paediatricians, nurses, and dieticians on in patient management of acute malnutrition. It will be conducted in November.</li> </ul>

<b>Topic 6</b>	<b>LCRP 2017-2020 updates</b>
<i>Topic Details</i>	<p><b>Inter-Agency UNHCR (<i>presentation attached in email</i>)</b></p> <ul style="list-style-type: none"> <li>- For the health sector, total appeal was 308 million and the total received by quarter 3 was 67 million (21.7% of total appeal)</li> <li>- In comparison to other sectors, we're one of the least funded sectors.</li> <li>- Amongst partners, 18 out of 43 have received funding in 2017; other agencies might have received funding but they did not report it; all agencies are encouraged to report in order to reflect the real situation</li> <li>- From January till July, progress on key indicators: <ul style="list-style-type: none"> <li>o Number of subsidized PHC consultations: 48% of the target</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>○ Number of persons supported in access to hospital care: 40% of the target</li> <li>- Activity Info dynamic dashboard updated monthly on the portal; it is a summary of all information that partners report on Activity Info; partners are urged to report before the 7<sup>th</sup> of each month</li> <li>- Below are some deadlines for LCRP 2018 planning: Oct 4<sup>th</sup>: Health Sector Core Group meeting to update the Situational Analysis &amp; discuss the Strategy Oct 5<sup>th</sup>: Results of the 2017 VASyR will be presented to the HCT and then shared with all sector working groups Oct 6<sup>th</sup>: 1<sup>st</sup> LCRP 2018 Planning Workshop Oct 17<sup>th</sup>: Deadline for Initial Draft Sector response plan to be updated and submitted to Inter-Sector Oct 27<sup>th</sup>: Deadline for sectors to submit revised sector response plan to Sector Steering Committees (SSCs) Nov 10<sup>th</sup>: Deadline for all sectors chapters to be approved by their respective SSCs.</li> <li>- IASC GBV guidelines roll-out: A first training tool place at national level of Aug 10<sup>th</sup>. Next week trainings are planned at field level: Oct 2<sup>nd</sup>: South, Oct 3<sup>rd</sup>: North, Oct 4<sup>th</sup>: Bekaa, Oct 5<sup>th</sup>: Mt Lebanon. Once trainings are finalized, the action plan for integration of GBV guidelines is to be endorsed by the sector</li> <li>- Many of the PHCs will no longer have support by end of December 2018. In light of changing support to PHC landscape, PHC prioritization meetings took place at field level. It is expected that the selection of PHC for support will rely on the outcome of this exercise in addition to joint final selection of PHCs.</li> <li>- Preparation ongoing for PIST report, staffing support has been compiled. Hala will be contacting health partners to compile info about capacity building and equipment support offered as to Ministries as institutional strengthening.</li> </ul>
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<b>Topic 7</b>	<b>AOB</b>
<i>Topic Details</i>	<i>No other business discussed</i>

### *Annex: List of Attendees*

Central Health Working Group- Attendance List			
Friday September 29, 2017			
Organization	Name	Tel.	E-mail
AMEL	Mohamad Al Zayed	71-552849	health@amel.org
Arcenciel	Nadim Abdo	03-341131	Nadim.abdo@arcenciel.org
Armenian Relief Cross of Lebanon	Verginie Khorshidian	71-599424	Arcl-absmc@hotmail.com
Balamand University co-academic program	Eliana Mikhael	03-160588	Eliana_mikhael@live.com
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