







Weekly Updates & Reviews

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Current Health Event

MoPH Launches mhGAP

On 8 May 2014, the Ministry of Public Health (MoPH), Lebanon officially launched its National mental health (MH) Gap Action Program (mhGAP).

Editorial note:

MoPH has identified MH as one of its eight national health priorities for 2014-2015. WHO, UNICEF, and International Medical Corps (IMC) assisted MoPH establishing its new mhGAP. During Nov-Dec 2013, WHO held a series of training activities on mhGAP that aimed at integrating MH into primary health care (PHC). Health care professionals (doctors, nurses and social workers) at PHC centers were trained to recognize and treat the signs of mental disorders.

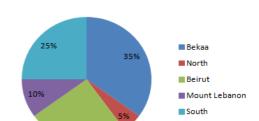
Mental, neurological, and substance use disorders are common in all regions of the world, affecting every community and age group across all income countries. While 14% of the global burden of disease is attributed to these disorders, 4 out of 5 people in contexts of low/middle-income

Facts:

- \bullet ~ 20% of the world's children and adolescents have mental disorders/ problems
- MH and substance use disorders are the leading cause of disability worldwide
- About 900 000 people commit suicide every year
- War and disasters have a large impact on MH and psychosocial well-being
- Mental disorders are important risk factors for other diseases, as well as unintentional and intentional injury
- Stigma and discrimination against patients and families prevent people from seeking mental health care

Figure: Distribution of Syrian refugees and number of selected PHCs/area

Displaced Syrians distribution



Number of selected PHCs

countries who need MH services do not receive them; and when these services are available they are neither of high quality nor rely on evidencebased interventions.

Mental disorders cause significant disability and interfere with a person's tasks of daily living, livelihood activities, educational opportunities, physical health, and relationships to others, which also impacts social and economic development. In the context of humanitarian crises, MH is critical to recovering from disasters and the ability to rebuild. With the advent of the Syrian crisis, Lebanon has witnessed a rise in its population by nearly one third. The living conditions of refugees accentuates the demand on the PHC system to provide health services. Nongovernmental and international organizations and PHC centers are reporting an increased demand for MH services. WHO provides medicines for MH to all participating PHC centers.

mhGAP training in Lebanon: Goals:

- To enhance the access of the population to quality MH and psychosocial support services; and
- To decrease stigma on mental health conditions.

Objectives:

- To integrate MH into PHC; and
- To widen the pool of professionals trained on the mhGAP.

Targeted outcomes:

• To increase the ability to assess MH patients; manage MH conditions through psycho-education, medications, and referrals; and provide appropriate follow up for patients.

Cumulative Notifiable diseases in Lebanon (Syrian)

Disease	2013	2014	Apr	May
	Cumul	Cumul*		
Vaccine Preventable Diseases				
Polio	0(0)	0(0)	0(0)	0(0)
Acute Flaccid				
Paralysis	34(7)	13(6)	4(1)	0(0)
Measles	1760(232)	187(71)	65(27)	16(5)
Mumps	14(2)	255(30)	132(12)	39(2)
Pertussis	59(9)	28(8)	3(2)	1(0)
Rabies	1(1)	0(0)	0(0)	0(0)
Rubella	27(1)	8(6)	3(3)	0(0)
Tetanus	4(0)	0(0)	0(0)	0(0)
Viral Hep B	141(8)	73(9)	28(5)	5(1)
Water/Food Borne Diseases				
Brucellosis	189(12)	43(1)	13(0)	3(0)
Hydatid cyst	13(3)	5(0)	1(0)	0(0)
Typhoid Fever	407(21)	58(3)	10(3)	1(0)
Viral Hep A	1551(220)	537(84)	68(8)	14(5)
Other Diseases				
Leishmaniasis	1033(1032)	259(258)	27(27)	1(1)
Meningitis	204(24)	74(7)	26(3)	4(0)
Viral Hep C	103(4)	30(1)	6(0)	1(0)

Source: Ministry of Public Health, Lebanon . Cumul= Cumulative