

**Action Plan**  
**MHPSS response to the COVID-19 outbreak in Lebanon-V1.0**

This action plan was developed as part of the national response to the COVID-19 outbreak. It aims at comprehensively addressing the MHPSS aspects of the COVID-19 outbreak in Lebanon for all persons living in the country including Palestinian refugees and Syrians displaced using an integrated approach. It was developed by the MOPH-National Mental Health Programme (NMHP) with WHO and UNICEF, in line with the IASC Briefing note<sup>1</sup> on addressing mental health and psychosocial aspects of COVID-19 Outbreak- version 1.0 and the local needs, health system and national mental health strategy. This is a dynamic document subject to revisions based on arising needs.

**Goals:**

- I. Promote mental health and mitigate COVID-19 related stressors including stigma and discrimination against persons affected and health workers.
- II. Provide mental health support to the persons in quarantine in the hospital or at home and their families.
- III. Support the mental health of health workers and first responders in the response.
- IV. Ensure continuity of mental health care for persons using mental health services in line with IPC guidelines.

The table below shows actions per goal. Annex I shows the same actions per target group.

<b>I. Promote mental health and mitigate COVID-19 related stressors including stigma and discrimination against persons affected and health workers</b>
<p><b>Contribute to ensuring persons access reliable information</b></p> <p>1.1. Ensure MHPSS actors know about sources of reliable and accurate info on the corona virus and awareness messaging to spread it in communities they serve and disseminate information about COVID-19 is in line with nationally circulated IEC material.</p> <p>1.2. Develop a TV spot with tailored messaging on COVID-19 for older adults and their caregivers, including tackling the stress that elderly may be going through.</p> <p>1.3. Ensure key communication material are accessible to persons with disability.</p> <p><b>Raise awareness on ways to cope with stress and promote mental health during the COVID-19 outbreak</b></p> <p>1.4 Integrate key messages/tips on mental health, promoting self-care strategies, and fighting stigma in all communication and awareness materials issued by MOPH and partners about the Corona virus.</p> <p>1.5 Develop and disseminate widely digital content with tips on taking care of one’s mental health: targeting 1) general public (focusing on situation of home self-isolation) 2) general public on addressing stigma 3) Employers and 4) Persons working from home 4) Parents for children 5) Caregivers and general public for older adults</p> <p>1.6 Provide operators of the national emotional support and suicide prevention hotline “Embrace Lifeline-1564” with regular updates and material from MOPH and WHO to be able to provide accurate information to callers who have emotional distress related to corona and orient them to accurate sources of information.</p> <p>1.7 Integrate mental health awareness messages and guidance in the training material of health and non-health frontliners on raising awareness related to COVID-19.</p> <p>1.8 Develop and disseminate a tip sheet for media professionals to help decrease general public anxiety, provide helpful tips to cope with the situation and decrease stigma.</p> <p>1.9 Integrate in the social media campaign on mental health in times of uncertainty targeting youth in Lebanon (MOPH-NMHP, MEHE, UNICEF, WHO) key messaging related to the COVID-19 context.</p>

<sup>1</sup> <https://interagencystandingcommittee.org/system/files/2020-03/MHPSS%20COVID19%20Briefing%20Note%202%20March%202020-English.pdf>

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#### **Orient persons in emotional distress to national lifeline**

- 1.10 Train operators of the national COVID-19 call centers on Psychological First Aid (PFA) and orientation to the national emotional support and suicide prevention hotline “Embrace Lifeline”-1564.
- 1.11 Provide posters on the 1564 lifeline in the 1214 and national corona call centers.
- 1.12 Integrate relevant guidance and tips on MHPSS and COVID-19 including Emotional Crisis Management (ECM) and PFA in guidance for Protection case management and follow-up during COVID-19.
- 1.13 Ensure organizations sign-post the national hotline for emotional support and suicide prevention “Embrace Lifeline-1564” to persons in emotional distress.

#### **II. Provide mental health support to the persons in quarantine in the hospital or at home and their families**

<b>For persons transported by LRC</b>	<ul style="list-style-type: none"> <li>2.1 Provide training for LRC first responders and dispatch teams involved in COVID-19 response on ECM (particularly de-escalation techniques), phone-based PFA and red flags for mental disorders.</li> <li>2.2 Explore ways to address the challenge for transportation of persons with severe mental disorders who are in an acute state and need to be transported to the quarantine.</li> </ul>
<b>For children</b>	<ul style="list-style-type: none"> <li>2.3 Ensure child-friendly games or books (for various age groups in quarantine) are provided within the quarantine in line with IPC guidelines.</li> <li>2.4 Orient nurses in quarantine on child protection red flags and link each quarantine to a focal CP agency to follow-up with those cases depending on the need.</li> <li>2.5 Ensure that there are child-friendly protocols for quarantine that minimize separation and ensure regular contact of children with their family while maintaining child protection measures.</li> </ul>
<b>For adults/older adults</b>	<ul style="list-style-type: none"> <li>2.6 Recommend to persons to play cognitive stimulating games such as sudokus or crosswords on their phone and print some of these games for persons who do not have phones or prefer hard copies (to be disposed of in line with IPC guidelines).</li> <li>2.7 Provide guidance to conduct breathing exercises (videos and infographics) to be given systematically to persons admitted to quarantine.</li> <li>2.8 Hang posters of the 1564-National Emotional Support and Suicide Prevention Lifeline “Embrace Lifeline” in the quarantine.</li> <li>2.9 Provide older adults with simple physical exercises to perform at their home/in quarantine to maintain mobility and reduce boredom.</li> <li>2.10 Provide brief training to nurses on identification of red flags related to mental health, ECM (mainly de-escalation), grief and loss and self-care using recorded videos.</li> <li>2.11 Develop a checklist for nursing teams in quarantines on taking care of the mental health of patients, including those with pre-existing mental disorder.</li> <li>2.12 Set-up a mental health support network of mental health specialists for remote support of persons in quarantine and their families.</li> <li>2.13 Ensure access to interpreter and IEC material in their mother tongue for foreigners including foreign domestic workers.</li> </ul>

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<b>For persons with a mental disorder</b>	<p>2.14 Ensure continuity of mental health care follow-up (by phone during restrictions).</p> <p>2.15 Develop protocol in line with mhGAP to adequately support persons with moderate and late stages of dementia.</p>
<b>For persons in quarantine at home</b>	<p>2.16 Integrate messages on coping with stress and self-isolation (including guidance for older adults or their carers to support older adults in conducting simple physical exercises at their home to maintain mobility and reduce boredom).</p> <p>2.17 Orient MOPH teams who are following-up with persons in home quarantine to refer those in emotional distress to the national emotional support and suicide prevention lifeline “Embrace lifeline-1564”.</p> <p>2.18 Develop short video and social media challenges for parents and families on tips to promote their children’s wellbeing in home quarantine, including messages on preventing the spread of the disease such as hand washing games &amp; rhymes and on supporting children coping with stress.</p>
<b>III. Support the mental health of health workers and first responders in the response</b>	
<p>3.1 Provide training for LRC peer-supporters on providing self-care including red flags for mental disorders (detection and referral).</p> <p>3.2 Provide brief training to nurses working in quarantine on self-care using recorded videos and provide self-care tip-sheet.</p> <p>3.3 Set-up a mental health support system for health workers in the quarantines (including availability of on-call mental health professional for phone-based support, information about available services to them, brief and regular meetings to touch based on their psychosocial wellbeing, etc.).</p>	
<b>IV. Ensure continuity of mental health care for persons using mental health services in line with IPC guidelines</b>	
<p>4.1 Develop triage criteria to identify service users in need of critical care for mental health that would need regular follow-up.</p> <p>4.2 Develop a brief protocol/guidance on conducting phone-based mental health consultations and follow-up.</p> <p>4.3 Ensure persons in long-stay mental health institutions are coping with the situation (ex: maintaining social contact in line with good IPC measures (by phone) and coping with the stress, etc.).</p> <p>4.4 Monitor trends related to help-seeking behavior through the MHPSS task force.</p>	

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**ANNEX I: Actions by target group**

Target group	Actions
<p><b>1. General population (with special attention to vulnerable groups like older adults)</b></p> <p><i>In any epidemic, it is common for people to feel stressed and worried, and there are specific stressors linked to COVID-19. Addressing the stressors including stigma and promoting strategies to cope with the stressors can protect mental health of the population, prevent long-term impact of the fear and worries and contribute highly to stopping the spread of COVID-19.</i></p>	<p>1.2 Develop a TV spot with tailored messaging on COVID-19 for older adults and their caregivers, tackling the stress that elderly may be going through.</p> <p>1.3 Ensure key communication material are accessible to persons with disability.</p> <p>1.4 Integrate key messages/tips on mental health, promoting self-care strategies, and fighting stigma in all communication and awareness materials issued by MOPH and partners about the Corona virus.</p> <p>1.5 Develop and disseminate widely digital content with tips on taking care of one’s mental health: targeting 1) general public (focusing on situation of home self-isolation) 2) general public on addressing stigma 3) Employers and 4) Persons working from home 4) Parents for children 5) Caregivers and general public for older adults</p> <p>1.6 Provide operators of the national emotional support and suicide prevention hotline “Embrace Lifeline-1564” with regular updates and material from MOPH and WHO to be able to provide accurate information to callers who have emotional distress related to corona and orient them to accurate sources of information.</p> <p>1.7 Integrate mental health awareness messages and guidance in the training material of health and non-health frontliners on raising awareness related to COVID-19.</p> <p>1.8 Develop and disseminate a tip sheet for media professionals to help decrease general public anxiety, provide helpful tips to cope with the situation and decrease stigma.</p> <p>1.12 Integrate in the social media campaign on mental health in times of uncertainty targeting youth in Lebanon (MOPH-NMHP, MEHE, UNICEF, WHO) key messaging related to the COVID-19 context.</p> <p>1.11 Provide posters on the 1564 lifeline in the 1214 and national corona call centers.</p>
<p><b>2 Persons calling the call centers (1214, MOPH corona call center, LRC call center)</b></p> <p><i>Improving access of people to reliable information and remote emotional support is key to help them cope with stress and control the spread.</i></p>	<p>1.10 Train operators of the national COVID-19 call centers on Psychological First Aid (PFA) and orientation to the national emotional support and suicide prevention hotline “Embrace Lifeline”-1564</p> <p>1.11 To provide posters on the 1564 lifeline in the 1214 and national COVID-19 call centers.</p>

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<p><b>3 Persons in Quarantine in hospital</b></p> <p><i>Integrating a psychosocial approach to operating quarantine sites will significantly contribute to the well-being of quarantined persons and their families, including reduce loneliness, psychological isolation and long-term risk for mental disorders.</i></p>	<p><b>Children</b></p> <p>2.3 Ensure child-friendly games or books (for various age groups in quarantine) are provided within the quarantine in line with IPC guidelines.</p> <p>2.4 Orient nurses in quarantine on child protection red flags and link each quarantine to a focal CP agency to follow-up with those cases depending on the need.</p> <p>2.5 Ensure that there are child-friendly protocols for quarantine that minimize separation and ensure regular contact of children with their family while maintaining child protection measures.</p> <p><b>Adults/older adults</b></p> <p>2.6 Recommend to persons to play cognitive stimulating games such as sudokus or crosswords on their phone and print some of these games for persons who do not have phones or prefer hard copies (to be disposed of in line with IPC guidelines).</p> <p>2.7 Provide guidance to conduct breathing exercises (videos and infographics) to be given systematically to persons admitted to quarantine.</p> <p>2.8 Hang posters of the 1564-National Emotional Support and Suicide Prevention Lifeline “Embrace Lifeline” in the quarantine.</p> <p>2.9 Provide older adults with simple physical exercises to perform at their home/in quarantine to maintain mobility and reduce boredom.</p> <p>2.10 Ensure access to interpreter and IEC material in their mother tongue for foreigners including foreign domestic workers</p> <p>2.12 Set-up a mental health support network of mental health specialists for remote support of persons in quarantine and their families.</p> <p><b>Persons with a mental disorder</b></p> <p>2.14 Ensure continuity of mental health care follow-up (by phone during restrictions).</p> <p>2.15 Develop protocol in line with mhGAP to adequately support persons with moderate and late stages of dementia.</p>
<p><b>3 Persons in quarantine at home</b></p> <p><i>Integrating a psychosocial approach to the follow-up and support of persons in home quarantine will significantly contribute to the well-being of quarantined persons and their families.</i></p>	<p>2.16 Integrate messages on coping with stress and self-isolation (including guidance for older adults or their carers to support older adults in conducting simple physical exercises at their home to maintain mobility and reduce boredom).</p> <p>2.17 Orient MOPH teams who are following-up with persons in home quarantine to refer those in emotional distress to the national emotional support and suicide prevention lifeline “Embrace lifeline-1564”.</p> <p>2.18 Develop short video and social media challenges for parents and families on tips to promote their children’s wellbeing in home quarantine, including messages on preventing the spread of the disease such as hand washing games &amp; rhymes and on supporting children coping with stress.</p>
<p><b>3 Health professionals working in quarantine</b></p>	<p>3.2 Provide brief training to nurses working in quarantine on self-care using recorded videos and provide self-care tip-sheet.</p>

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<p><i>Providing them with access to sources of psychosocial support is of equal priority with ensuring their physical safety.</i></p> <p><i>Providing them with skills to support persons in emotional distress and orient them to needed care is key for protecting the wellbeing of the population and reduce responders' risk of burnout.</i></p>	<p>3.3 Set-up a mental health support system for health workers in the quarantines (including availability of on-call mental health professional for phone-based support, information about available services to them, brief and regular meetings to touch based on their psychosocial wellbeing, etc.).</p> <p>2.10 Provide brief training to nurses on identification of red flags related to mental health, ECM (mainly de-escalation), grief and loss and self-care using recorded videos.</p> <p>2.11 Develop a checklist for nursing teams in quarantines on taking care of the mental health of patients, including those with pre-existing mental disorder.</p>
<p><b>4 Lebanese Red Cross staff involved in transportation of persons that could be affected</b></p> <p><i>Providing them with access to sources of psychosocial support is of equal priority with ensuring their physical safety.</i></p> <p><i>Providing them with skills to support persons in emotional distress and orient them to needed care is key for protecting the wellbeing of the population and reduce responders' risk of burnout.</i></p>	<p>2.1 Provide training for LRC first responders and dispatch teams involved in COVID-19 response on ECM (particularly de-escalation techniques), phone-based PFA and red flags for mental disorders.</p> <p>2.2 Explore ways to address the challenge for transportation of persons with severe mental disorders who are in an acute state and need to be transported to the quarantine.</p> <p>3.1 Provide training for LRC peer-supporters on providing self-care including red flags for mental disorders (detection and referral).</p>
<p><b>3 Persons seeking mental health care from governmental, non-governmental and humanitarian organizations</b></p> <p><i>Adaptation of existing services to the COVID-19 situation is key to ensure continuity of care.</i></p>	<p>4.1 Ensure MHPSS actors know about sources of reliable and accurate info on the corona virus and awareness messaging to spread it in communities they serve.</p> <p>4.2 Develop triage criteria to identify service users in need of critical care for mental health that would need regular follow-up.</p> <p>4.3 Develop a brief protocol/guidance on conducting phone-based mental health consultations and follow-up.</p> <p>4.7 Monitor trends related to help-seeking behavior through the MHPSS task force.</p>
<p><b>4 Persons in long-stay mental health institutions</b></p> <p><i>Developing procedures to minimize risk of infection in institutions and to continue promoting a mentally healthy environment for service users is key for the protection of service users and health workers.</i></p>	<p>4.4 Ensure long-stay mental health institutions are following IPC measures.</p> <p>4.5 Ensure persons in long-stay mental health institutions continue to be in contact with their family and loved ones (phone).</p> <p>4.6 Ensure persons in long-stay institutions are coping with the situation (leisure activities).</p>
<p><b>5 Persons seeking services in other sectors (CP, SGBV...)</b></p> <p><i>Providing them with skills to support persons in emotional distress and orient them to needed care is key for protecting the wellbeing of the population and reduce responders' risk of burnout.</i></p>	<p>1.12 Integrate relevant guidance and tips on MHPSS and COVID-19 including ECM and PFA in guidance for Protection case management and follow-up during COVID-19.</p> <p>1.13 Ensure organizations sign-post the national hotline for emotional support and suicide prevention “Embrace Lifeline-1564” to persons in emotional distress.</p>

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\*MHPSS: *Mental Health and Psychosocial Support*  
\*\*IPC: *Infection Prevention and Control*  
\*\*\* IEC: *Information, Education and Communication*  
\*\*\*\*PFA: *Psychological First Aid*  
\*\*\*\*\* ECM: *Emotional Crisis Management*