



## THE LEBANESE ASSOCIATION OF THE KNIGHTS OF MALTA (LAKM) / THE ORDER OF MALTA LEBANON IS LOOKING FOR **A CONSULTANT**

LAKM has been operating in the health and social welfare sectors since 1957. It manages a network of 30 projects serving the most vulnerable populations, across the Lebanese territory including primary healthcare centers, mobile medical units, elderly day care centers, hosting centers for the differently abled and projects for the displaced and refugees.

LAKM, with the support of its partner Malteser International (MI), has recently developed a comprehensive multi-annual program to strengthen its social, health services and agriculture programs.

In this framework, LAKM is releasing a call for proposal submittals from consultants for the implementation of a day-care medical center for psychosocial rehabilitation and well-being.

### **CONSULTANT FOR THE INTEGRATION OF MENTAL HEALTH REFERRAL SERVICES FOR THE MOBILE MEDICAL UNITS' PATIENTS**

#### **Context – Mental Health Situation**

Mental health is a major problem in Lebanon, accentuated by the current financial crisis and the lack of perspectives. In response, the MOPH has established a National Programme for Mental Health and has developed, with the support of WHO, a National Strategy for Mental Health and Drug Abuse Control 2015-2020 and an Inter-Ministerial Strategic Plan for Drug Abuse Control 2016-2022. It is estimated that there are about 1.5 mental health beds per 100,000 inhabitants in general hospitals. There are also 5 mental health hospitals with approximately 28.52 beds per 100,000 inhabitants (89/100,000 inhabitants in France), 71 psychiatrists (1.26 per 100,000 inhabitants, 19/100,000 inhabitants in France) and 193 psychologists (3.42 per 100,000 inhabitants, 47/100,000 inhabitants in France) working in mental health institutions or in private practice. The need is incrementally increasing and the services not as available or responsive as need be.

#### **Audience:**

##### Lebanese population

The country has always been a kind of social and political pressure cooker, despite its resistance and boundless energy. Whether it is Lebanon's historic role as the adopted homeland of its sinking neighbors, or the current political stalemate that brought thousands of its frustrated citizens to the streets in mid-October 2019, prolonged periods of calm remain extremely rare.

The war in Lebanon or the Lebanese civil war was punctuated by foreign interventions and took place from 1975 to 1990 with between 130,000 and 250,000 civilian victims. The consequences of the conflict are felt over a long period with laborious reconstruction, the maintenance of autonomous armed militias and occasional resumes of violence. The psychological consequences are still reflected in a transgenerational manner 30 years later.

Furthermore, in 2020, Lebanon has witnessed a complete meltdown on all fronts, deeply upsetting the social, economic and health situation in the country to unseen levels.

In fact, since October 17th, 2019 transformative events have led to a social uprising and the downfall of the banking and financial sectors, while the national currency lost almost 80% of its initial value and rising. The country's public debt-to-gross domestic product was the third highest in the world; unemployment stood above 30% before the end of 2020; and nearly a third of the population was living below the poverty line. Currently, it is estimated that 28.5% of the Lebanese population live below the poverty line and according to an update of the Lebanon Response Plan from 2019, 3.2 million people are dependent on emergency aid.

Then, on August 4th, 2020, the Beirut port was hit by a major blast, causing the death of 220 people, injuring 6,500 others and causing more than 300,000 people to become homeless, triggering a substantial relocation of a part of the population to rural areas in the country. On top of that, Covid-19 was making ravages on the national level. The Government has imposed several movement restrictions to halt the spread of the coronavirus pandemic that have further deteriorated the living conditions of vulnerable people. Moreover, two major lockdowns commanded by the Lebanese authorities crippled the entire country between mid-April and the end of May 2021.

COVID-19 pandemic and lockdown has brought about a sense of fear and anxiety, that only adds-up to the incremental sense of helplessness caused by the situation in the country. This phenomenon has led to short term as well as long term psychosocial and mental health implications for all citizens.

### Syrian refugees

Syrian refugees have fled violence, aerial bombardments, car bombs and chemical weapons. The war in Syria will have claimed the lives of more than 500,000 people, forced 4 million Syrians to flee their country and forced some 7 million more to leave their regions of origin. The prevalence of mental trauma among the Syrian population, displaced and otherwise, is not surprising. A 2015 study by the German Federal Chamber of Psychotherapists estimated that half of Syrian refugees living in Germany have mental health problems, with 70% having witnessed scenes of violence and 50% having been victims.

International Medical Corps (IMC) has just conducted a survey in the health centers that this non-profit association supports and which welcome refugees and displaced Syrians in Syria, Jordan, Lebanon and Turkey. His finding? Their access to mental health services is extremely limited, with 54% of displaced people suffering from severe emotional disorders and 26.6% of children at risk of delays in cognitive and physical development. The United Nations High Commissioner for Refugees (UNHCR) points out that "the most common and important clinical problems among Syrians are psychological, from depression to various forms of anxiety disorders, through reactions of prolonged bereavement or post-traumatic stress disorder. The lack of adequate treatment and the persistence of a high degree of stress make the situation worse. Especially since, for the most part, medical treatment for these mental disorders is inaccessible.

Children and women face specific forms of vulnerability. In Syria, as in the host countries, women and girls are or often feel threatened: domestic violence, sexual violence, the increase in early marriages, harassment and isolation, exploitation and prostitution in order to survive. A quarter of Syrian refugee households are headed by a woman. As UNHCR notes, "Life in exile has forced these women to become the main breadwinner and caregiver and they have to fend for themselves and with their loved ones, far from their communities and traditional sources of support. For most of them, the burden is enormous, and many depend entirely on outside help. Children, on the other hand, are constantly concerned about the fate of their parents and siblings. Post-traumatic stress disorder is very common, with almost half of children suffering from it. Then comes depression and a host of other psychological challenges. The everyday environment (refugee camps or marginalized urban and rural areas) reinforces this stress. Mental health problems have lasting consequences for children.

### Mental health and Covid-19:

"Recent studies show a worrying increase in anxiety and depression" in the general population, says a professor of public health at the University of Edinburgh. "The indirect consequences are accumulating," she continued, stressing that "recent studies show a worrying increase in anxiety and depression" in the general population.

Despite the lack of investigations carried out in Lebanon, signs of psychological distress as well as a deterioration in mental health due to the confinement which adds to the economic drift are highlighted. If this situation continues it could favor the onset of severe psychiatric pathologies.

The host community as well as the refugees suffer from increased social isolation, loneliness, health concerns, stress and economic plunge, conditions that combine to undermine well-being and mental health. And it is therefore access to professional help that will be one of the challenges of ending the crisis.

For citizens and refugees alike, lack of access to medical services, especially mental health, remains another area requiring significant reform. This is why it is essential to try to fill the gaps in the Lebanese health system, which suffers from a significant lack of support for the populations.

## **Project**

### **Integration of Mental Health referral services to the Mobile Medical Units' patients in remote and rural areas in Lebanon:**

Lebanon's health system is slowly decaying with the ongoing economic and political unrest. The strain that is currently put on the system is not sustainable; the host community as well as the high influx of refugees have an increased need for mental health services. The Order of Malta in Lebanon has currently integrated subsidized mental health packages in its community health centers in four different districts in Lebanon namely, Ain el Rommaneh, Zouk, Khaldieh and Siddikine (being in Beirut, Mount Lebanon, the North and the South). The Order of Malta is considering complimenting these four community health centers and its planned Day Center with the integration of a mental health referral system to the 5 remaining PHCCs if the LAKM all over Lebanon thus providing access to mental health services to patients, widen reach and meet the patients' needs in remote and rural areas in Lebanon. Mobile medical units would serve as a proxy for the LAKM primary health care centers located in their vicinity and to which they are affiliated, offering mental health services referrals to those neighboring PHCCs or to specific service providers of mental health services when the said PHCCs are out of reach.

Mental health services include only psychology and psychiatric consultations.

### **The Mobile Medical Units:**

The Mobile medical Units (MMUs) aim to strengthen the health of the vulnerable Lebanese population and refugees living in remote regions, by:

- Improving their access to primary and secondary health care,
- Strengthening preventive health capacity through the promotion of appropriate hygiene practices.

All three MMUs based in Akkar, Northeast Baalbeck and Nabatieh (Yaroun) areas provide on yearly basis an average of 20,000 consultations.

Services provided are the following:

- Medical consultations
- Medical drugs
- Referral system to secondary and tertiary services
- Health education
- Awareness sessions
- Distribution of hygiene kits
- Satisfaction questionnaire, feedback, and complaint mechanism

All the data is gathered and retrieved from the MoPH software Phenics.

## Goals

The mobile medical units operating in the areas of Akkar, Baalbeck and Nabatieh aim to provide mental health referrals to their patients. Those patients are in dire need of mental health services which are not provided within the MMUs.

The objective is:

to provide access to mental health services to the MMUs patients.

to raise awareness about LAKM mental health services availability using telehealth within its PHCCS located in these areas.

to connect to neighbouring mental health care providers in their surroundings, when the PHCCs are out of reach.

educate and raise awareness around mental health within these communities.

## Request

LAKM launches a call for proposals for a feasibility study related to the accessibility of mental health services for the patients of the Mobile Medical Units operating in North east Baalback, Akkar and Nabatiyeh.

### 2.1- General objective

To provide all the quantitative and qualitative information necessary for the possibility of insuring access to mental health services through the Mobile Medical Units.

### 2.2- Specific objectives

- Develop a clear mental health mapping for service providers in the regions stated above.
- To analyse the supply of level 1,2 and 3 mental health care services provided in all three regions.
- To develop a clear referral system to other organisations offering mental health services in the vicinity of the MMUs, when the PHCCs are out of reach.
- To develop a clear referral system to the LAKM PHCCs operating in those areas.
- Define the targeted mental health needs of the patients attending the MMUs.
- Identify the nature and volume of MMUs beneficiaries that will require referrals to mental health services (psychology, psychiatry).

- Develop an outreach and communication strategy to educate and break taboo around mental health.
- Draw up the budget.
- Make an estimate of the financial sustainability of those services within the mobile medical units.

### 2.3- Expected results

Complete document should include:

- The mental health service providers mapping in the relevant areas
- A study of the profile of the MMUs patients that will require mental health service
- A clear study and suggestions of partners
- A clear flow of referral procedures to LAKM PHCCs or service providers
- The technical equipment needed
- HR strategy for operations using current resources,
- A development strategy for sustainability of the offering
- The budget,
- A financial projection over 4 years including an economic model to ensure the sustainability of the structure.

### Deliverables :

- After 1 week: Start of consultancy process
- After 2 weeks from start: submission of a first report
- After 1 week from submission: exchange with LAKM
- After 1 week from exchange: submission of the final report

### Expectations:

- LAKM expects a proposal for services including
  - A presentation of the Institution and the team in charge of the study (1 page) + CV
  - A presentation of the methodology for each of the two types of studies
  - A budget proposal
  - In annex: references
- Tenders must be submitted in two separate sealed envelopes (one for the original and one for the copy), before the deadline of **July 2nd, 2021 at 12pm** and delivered by hand against receipt to the following address:  
Mrs. Rindala Bou Harb - Lebanese Association of the Knights of Malta Lebanese Association of the Knights of Malta, Boulevard Pierre Gemayel, 1020 Ashrafieh bldg / Ex Olivetti Bldg /3rd floor, Mathaf – Beirut – Lebanon.

IF YOU ARE INTERESTED TO QUOTE, PLEASE SEND US AN EMAIL NO LATER THAN **AUGUST 6TH, 2021 AT 12PM** AT 12H00 PM TO MRS. RINDATA BOU HARB, THE EXECUTIVE MANAGER OF THE DEVELOPMENT PROGRAMS AT **RINDALA.BOUHARB@ORDREDEMALTELIBAN.ORG**  
\* SPECIFY THE *PROJECT NAME* IN THE SUBJECT.