



Medecins du Monde France in coordination with the
Department of Psychology at the American University of Beirut

present a conference on

Mental Health and Psycho-Social Support (MHPSS) Research:

FOCUS ON THE SYRIAN HUMANITARIAN CRISIS

Monday, December 18, 2017 | 9:00 am–5:00 pm | Maamari Auditorium, OSB, AUB

8:30–9:00 am	Registration	Registration
9:00–9:20 am	Welcome and Opening Remarks	Welcome and Opening Remarks
9:20–9:50 am	Rabih El Chammay, MD National Mental Health Program, Ministry of Public Health	Place of research in the mental health system reform in Lebanon, National Mental Health Program, Ministry of Public Health Lebanon
9:50–10:20 am	Vivienne Matthies-Boon, PhD University of Amsterdam	A Question of Faith? Rethinking the Role of Religion, Spirituality and the Transcendent in Trauma Interventions with Refugees, University of Amsterdam
10:20–10:50 am	Maria Stacke, MPH Social Promotion Foundation	Recovery-oriented mental health care in the context of displacement: A qualitative study of service user and service provider perspectives in Lebanon Lund University
10:50–11:20 am	Coffee break	
11:20–11:50 am	Alaa Hijazi, PhD American University of Beirut	Predictors of depression and post-traumatic stress symptoms in Syrian refugees, American University of Beirut and Medecins du Monde–France
11:50 am–12:20 pm	Patricia Moghames, MS Médecins du Monde–France	Biological Pathways of Risk and Resilience in Syrian Refugee Children, Queen Mary University of London, IDRAAC, Medecins du Monde–France
12:20–12:50 pm	Tania Bosqui, PhD American University of Beirut	Development, Piloting and Evaluation of a Phone-Delivered Psychological Intervention (t-CETA) for Syrian Refugee Children in Lebanon, Queen Mary University of London, John Hopkins University, American University of Beirut, Medecins du Monde–France
12:50–1:20 pm	Hala Kerbage, MD Saint Joseph University	Mental Health and Psychosocial Support Services (MHPSS) for Syrian refugees in Lebanon: beyond diagnostic and clinical categories, Saint Joseph University and Ecole des Hautes Etudes en Sciences Sociales Paris

1:20–2:20 pm	Lunch	
2:20–3:00 pm	Forum Discussion	Strengthening Collaboration between Humanitarian Agencies and Academic Institutions
3:00–3:40 pm	Forum Discussion	MHPSS Research Priorities in the Humanitarian Field
3:40–4:00 pm	Coffee Break	
4:00–4:30 pm	Next Steps	Planning for 2018 Forum
4:30–5:00 pm	Closing remarks	Closing remarks

RABIH EL CHAMMAY

Place of Research in Mental Health System Reform in Lebanon

The Ministry of Public Health has launched in 2014 the National Mental Health Programme in partnership with WHO, UNICEF, and IMC with the aim of reforming the mental health system towards community and evidence-based services that are in line with human rights. This has been captured in the 5-year strategy 2020-2015 that the programme is working on implementing and much has been achieved since then on different levels from legislation to service provision and research. The presentation will discuss the reform with a specific focus on the place of research in the current reform and how it is geared towards generating local evidence to inform service development.

Dr. Rabih El Chammay is a psychiatrist and currently the head of the National Mental Health Program at the Ministry of Public Health in Lebanon. After founding the program, he led the development of the first National Mental Health and Substance-Use Strategy 2020-2015, aiming at reforming the mental health system in Lebanon towards community-based mental health services in line with human rights and the latest evidence that is currently under implementation. Dr. Chammay is a member of the Department of Psychiatry at the Faculty of Medicine at Saint Joseph University in Beirut.

VIVIENNE MATTHIES-BOON

A Question of Faith? Rethinking the Role of Religion, Spirituality and the Transcendent in Trauma Interventions with Refugees

Trauma, as it results in a disrupted assumptive world, may invoke questions of religion, faith and the transcendent in a variety of ways: it may lead to a crisis of God where the existence or nature of God is questioned, it may also be invoked as a resource through which meaning can be reinserted into broken assumptive worlds and it may in fact even contribute to spiritual growth and wisdom. Yet, our fieldwork with NGOs that run MHPSS programs for Syrian refugees in Jordan indicates that when it comes to humanitarian trauma interventions, many of the MHPSS programs shy away from incorporating religion in their humanitarian programs. This is a result of a secular, medicalised bias within both the (increasingly neoliberal) humanitarian and mental health sectors that threatens to hamper religious, spiritual and philosophical reflection on questions of meaning, the soul and the nature of Being that experiences of trauma evoke. In doing so, the 'language' spoken by MHPSS programs may not in fact correspond to or connect with the interpretative horizons of displaced peoples – such as the Syrian communities – whose world

views are in fact often saturated with religious and spiritual references, thereby potentially hampering their effectiveness.

Dr. Vivienne Matthies-Boon is an assistant professor in the international relations of the Middle East and coordinator of the Zeytun Exchange Program with the Middle East in the Department of Political Science at the University of Amsterdam. Previously, she was assistant professor in international relations at the University of Groningen and assistant professor in sociology at the University of Surrey in the UK. She was also a Duncan Norman Research Fellow in political philosophy at the University of Liverpool. Having an interdisciplinary background in Middle Eastern studies, philosophy, politics, sociology, and psychology, her primary interests are in bottom-up anthropological research within the MENA region on the social, political, and personal issues of 'wellbeing' <mental health and <trauma> – particularly as they pertain to the greater existential questions of

◁humanness,▷ ▷being,▷ and ▷suffering,▷ Rooted in critical theory, her work on mental health particularly centers around social justice,

human rights, and a transformation of political repression, marginalization, and displacement.

MARIA STACKE

Recovery-Oriented Mental Health Care in the Context of Displacement: A qualitative study of service user and service provider perspectives in Lebanon

An estimated 1.5 million displaced Syrians currently live in Lebanon. Armed conflict and displacement is known to have an adverse impact on mental health. While recovery-oriented care has become an increasingly important concept in mental health care provision in high-income countries, it has rarely been discussed in the context of displaced populations in low and middle income countries. The overall aim of this study was to explore what recovery-oriented care for Syrian refugees with mental illness in Lebanon would entail based on service user and service provider perspectives. The research questions were: (i) What are service user and service provider perspectives on recovery? and (ii) What are service user and service provider perspectives on facilitators and barriers to recovery?

Maria Stacke has a master's degree in public health from Lund University. She also holds a bachelor of science in social anthropology from Stockholm University and attended the summer program in cultural psychiatry at McGill University in 2016. Her academic interests include the anthropological studies of clinical practice, local understandings of well-being, and role of qualitative research in health policy formulation and intervention design. Apart from her academic pursuits, Stacke has worked for several years with communication and fundraising for the Swedish Red Cross. She has recently finished an internship at the Department of Health System Development at the World Health Organization regional office in Cairo, and is currently working as team leader at a Community Mental Health Center in Zahle, Lebanon, with the Social Promotion Foundation (FPS).

ALAA HIJAZI

Predictors of Depression and Post-Traumatic Stress Symptoms in Syrian Refugees

The 2011 Syrian war has created the largest refugee crisis of our time, with over 4.9 million Syrian refugees worldwide, one million of whom are in Lebanon. Refugee exposure to multiple traumatic events increases their risk for various physical and psychological symptoms, including depression and post-traumatic stress symptoms (PTSD). Yet, there are only a handful of studies about mental health issues with Syrian refugees, and even fewer studies with Syrian refugees residing in Lebanon. Moreover, literature exploring predictors of PTSD and depression among refugees is scarce, particularly among Middle Eastern refugees. In collaboration with Medecins Du Monde, this study sought to investigate culturally relevant predictors of

depression and PTSD symptoms among Syrian refugees in the Bekaa valley in Lebanon. We surveyed 160 adult Syrian refugees on their symptoms of depression, PTSD, trauma-related shame, sense of injustice, perceived invalidation, and sense of coherence. Results, implications, and challenges of the study will be discussed.

Dr. Alaa Hijazi is an adjunct assistant professor in the Department of Psychology at the American University of Beirut and a licensed clinical psychologist in independent practice. Dr. Hijazi holds a PhD in clinical psychology from Wayne State University in Michigan, USA. She was previously the mental health and psychosocial support (MHPSS) technical advisor for Médecins

du Monde – Lebanon. Dr. Hijazi has clinical and research expertise in the field of trauma. She has worked with refugees, war veterans, and survivors of inner city conflict and sexual assault.

PATRICIA MOGHAMES

Biological Pathways of Risk and Resilience in Syrian Refugee Children

There are currently more than 1.2 million Syrian refugee children in countries surrounding Syria, with more than 500,000 living in Lebanon. Not only do many refugee children experience traumatic war-related events, but many also end up living in adverse conditions with little access to basic resources. Psychological and social distress among refugees is common, resulting in a wide range of emotional, cognitive, physical, and behavioural problems in the short- and long-term. However, there seems to be substantial variation in how refugee children respond. While some develop psychological problems, other show remarkable resilience due to various, complicated, and interrelated psychological, social, behavioural, genetic, epigenetic and neuroendocrine factors. Currently, little is known about the mental health status of Syrian refugee children and how their mental health is affected by the interplay between war exposure and current conditions of displacement. The objectives of the study is to comprehend how environmental and biological risk and protective factors interact to predict which children will show resilience and which children will suffer difficulties, in post war and displacement experiences.

TANIA BOSQUI

Development, Piloting and Evaluation of a Phone-Delivered Psychological Intervention (t-CETA) for Syrian Refugee Children in Lebanon

While there is an overwhelming need for the psychological treatment of refugee children, available mental health services, particularly those specialised for children, are often insufficient and very difficult to access for refugee populations. This project aims at adapting, piloting, and evaluating an existing transdiagnostic psychological treatment

Her research interests seek to understand how life stressors and psychological trauma impact psychological and physical health and how they can also foster resilience and growth.

Patricia Moghames is currently working with Médecins du Monde – Lebanon in their Advocacy and Research Department as the fieldwork coordinator of the projects conducted in collaboration with Queen Mary University of London. The project currently conducted by Moghames is “Biological Pathways of Risk and Resilience in Syrian Refugee Children” (BIOPATH) while kick-starting a new project under the title of “Development, Piloting, and Evaluation of a Phone-Delivered Psychological Intervention (t-CETA) for Syrian Refugee Children in Lebanon.”

Before joining Médecins du Monde, Patricia worked as a consultant, research assistant, and research coordinator at the Department of Nutrition and Food Sciences at the American University of Beirut for five years, conducting research related to health, obesity, non-communicable diseases, nutrition, and epidemiology in both children and adults. Patricia also worked as a consultant with International Medicals Corps, mainly in conducting nutrition and health-related research among Syrian refugees in both Jordan and Lebanon.

programme (Common Elements Treatment Approach; CETA) for the innovative and scalable delivery over phone in order to increase access to psychological intervention for children in humanitarian emergency/low-resource settings with limited access to mental health services. The study will be conducted with Syrian refugee children based in Lebanon. The objectives are

to 1) develop telephone-delivered CETA (t-CETA) by adapting the scientifically validated face-to-face CETA program and 2) scientific evaluation of the effectiveness of t-CETA applying a pilot randomised controlled clinical trial. In the developmental stage trained mental health professionals will deliver face-to-face CETA to 80 children in order to identify the most relevant treatment components for the specific population and continuously adapt CETA for phone delivery. In the piloting stage 160 Syrian refugee children will be randomized into either telephone-administered CETA by trained lay providers or a care-as-usual control group in order to test the feasibility of delivery and efficacy of the intervention.

Dr. Tania Bosqui is assistant professor in the Department of Psychology at the American University of Beirut. She is a clinical

psychologist, holding a doctorate in clinical psychology from Queens University Belfast in Northern Ireland, a master's in poverty reduction and development management and a bachelor of science in psychology. She has clinical experience with children, adolescents, adults, and older adults in the UK, India, the occupied Palestinian territories, and the Pacific island of Guam. She has taught at Queen's University Belfast and the University of Guam, and completed postdoctoral research on ethnicity, migration, and childhood trauma at the Centre for Public Health and the Institute of Child Care Research at Queen's University Belfast. Dr. Bosqui has published a number of research studies in the field of childhood trauma and development, migration, war, and global public mental health.

HALA KERBAGE

Mental Health and Psychosocial Support Services (MHPSS) for Syrian Refugees in Lebanon: Beyond diagnostic and clinical categories

Since the beginning of the Syrian war, Lebanon has hosted more than one million Syrian refugees (UNHCR, 2017). Therefore, the Lebanese Ministry of Public Health (MoPH) established a Mental Health and Psychosocial Support task force (MHPSS-TF) to “implement several cost-effective and evidence-based strategic interventions.” However, no exploration has been done on the experience of suffering among Syrian refugees and their ways of coping with their situation. In this study, we explore qualitatively the functioning of the MHPSS services in Lebanon, the role of culture in the therapeutic relationship, and the perceived experience of refugees. Our methodological tools are participant observation and ethnographic description following in depth interviews and case studies with Syrian refugees as well as key informants from various organizations.

We found that many mental health professionals perceive the Syrian culture as an obstacle to

mental health interventions. Refugees, however, perceive MHPSS services as a zone of safety, where people welcome them and listen to them, rather than a medical or a clinical service. Their main sources of distress were of social, political, and economic nature. Moreover, they were overwhelmingly concerned about whether they will be chosen for resettlement, and about the UNHCR, which is perceived as something far and unattainable and, at the same time, as the masters of their destiny. In this context, Syrians become forced to different narrations of themselves towards donors and to constantly play with their politics of identification, through lying or hiding certain facts. This lying, we believe, can be understood as a resistance to, or a way to cope with, a universe of arbitrary and impenetrable procedures in which they are embedded, and has already been described in the literature among asylum seekers, as the “moral economy of lying.”

Hala Kerbage is a psychiatrist at Hôtel-Dieu de France Hospital and lecturer at the Faculty of Medicine, Saint Joseph University. She is a consultant for the International Organization of Migration and has worked for several local and international NGOs dealing with Syrian refugees in Lebanon. She is also a member of the Legal Agenda and has participated in amending the Lebanese mental health draft law. Her main areas of research revolve around social and legal aspects of psychiatry as well as mental health among refugees.