



TERMS OF REFERENCE FOR A CAPITALIZATION MISSION

Community Mental Health and Substance Use Centers (CMH-SUC) – MdM Lebanon mission

SUBJECT: The Community Mental Health and Substance Use Centers (CMH-SUCs); model of an inclusive care system. Capitalization on the strategic, administrative and financial steps enabling the opening and the operation of these centers in a versatile context (Lebanon).

COUNTRY: Lebanon

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CONTEXT

ORIGIN OF THE REQUEST

Médecins du Monde (MdM) is an international humanitarian organization that provides medical care to the most vulnerable populations affected by war, natural disasters, disease, famine, poverty and exclusion, those who do not have access to health care and those who the world is gradually forgetting.

MdM has been working in Lebanon for more than 30 years from the response to the civil war in the 1980s, the Syrian crisis that emerged in 2011 and during the recent political turmoil and instability in Lebanon (October 2019 uprising, COVID 19 pandemic and Beirut Port explosion). MdM was officially registered in Lebanon in 2008. MdM mainly works in the sector of Health - sub-sector Primary Health Care (PHC) and Mental Health and Psycho-Social Support (MHPSS) - while ensuring cross cutting subjects in Gender mainstreaming, Gender Based Violence (GBV) and Sexual and Reproductive Health (SRH). Since 2012, in cooperation with civil society organizations as well as national and local authorities, MdM's intervention aimed at increasing access to quality primary healthcare and strengthening the national primary healthcare system. Moreover, MdM has been actively engaged in providing access to MHPSS services and reducing the impact of the Syrian crisis on the mental and physical health of the Syrian refugees and vulnerable Lebanese.

Skoun Lebanese Addictions Center is a Lebanese non-governmental, non-profit organization founded in 2003 in the aim of improving the response to the drug problem in Lebanon. Since then, Skoun has become a leading entity in the delivery of Harm Reduction (HR) and substance use treatment programs



reaching thousands of people and their families across Lebanon. Our main mission is to provide accessible treatment, education, and protection for all people who use drugs. We are committed to reducing the harm caused by substance use in Lebanon. Skoun's vision is to ensure that substance use and addiction are treated as a primary health issue. For almost two decades, Skoun has worked towards changing the mindset of the Lebanese stakeholders and public towards drugs and people who use them. Through the various areas of its work, Skoun has become a key player in the national response to drug use focusing on three main areas of intervention: provision of specialized care, advocacy and policy reform, and prevention.

MdM is currently leading on the implementation of ReCEVAL project, in close collaboration with the National Mental Health Programme (NMHP), and in a consortium with Skoun and Embrace, funded by the Agence Française de Développement (AFD). The project aims to continue supporting the development of community-based mental health and substance use system building approach in line with the national mental health strategy and model of care, tackling gender barriers in service access and gender bias in service provision through provision of quality and gender-sensitive services to women, men, boys, girls and non-binary individuals living in Lebanon, particularly the most vulnerable groups and people at risk.

December 2024 marks the end of the project started in November 2021. Within this project, MdM and Skoun collaborated to open and then operate Community Mental Health and Substance Use Centers (CMH-SUCs) aiming at offering holistic patient care. As the project comes to its end, MdM and Skoun are seeking to capitalize on all the steps (strategic, administrative, financial) taken to open and operationalize the centres. The aim is to share what has been learnt and achieved, and to take into account the milestones for the smooth running of the centers, so as to ensure the eventual continuity of services, but also the opening of these centers either in another region of Lebanon or even other MdM missions.

BRIEF PRESENTATION OF THE PROJECT

Overall project presentation

Since November 2021 and until December 2024, MdM, Skoun, Embrace and the National Mental Health Program (NMHP), are implementing ReCEVAL project which aims to improve the opportunities for women, men, boys, girls and gender non-compliant individuals in Lebanon to enjoy the best possible mental health and wellbeing. The consortium aims to reach its objective through supporting community-based Mental Health and Psycho-Social Support (MHPSS) and Substance Uses (SU) system offering appropriate, quality and gender inclusive services to all people living in Lebanon, particularly the most vulnerable groups and people at risk, while tackling gender barriers in service access and gender biases in service provision. The project is run in 3 regions in Lebanon: Beirut, Baalbek and Tripoli. The specific activities of the project target the different levels of the social ecological model with activities designed and aimed at the individual, interpersonal, organizational and community levels. Specifically, the consortium aims to operate three Community Mental Health and Substance Use Centers (CMH-SUC) in Lebanon, integrate MHPSS within six Primary Health Care Centers that are part of the Ministry of Public Health network, operate the National Lifeline for Suicide Prevention and Emotional support, implement outreach activities, as well as conduct a series of trainings, capacity building and awareness sessions to targeted groups of the society to fight the stigma against mental health and gender biases and promote usage of services, while tackling gender barriers in accessing mental health and substance use services.



CMH-SUCs

Within ReCEVAL project, MdM and Skoun are operating two Community Mental Health and Substance Use Centers (CMH-SUC) in Baalbak (Douris PHCC), established in July 2019 and in Tripoli (Al Rahma PHCC), established in Sept 2022 to deliver direct mental health and substance use services to people in need. These community centers are the only ones in Lebanon where MH and SU services are integrated within one facility. In Beirut, the consortium partners are operating separate centers, one CMHC operated by MdM and one CSUC operated by Skoun at RHUH.

The service provision approach is ensured through the operation of the 3 CMH-SUCs, where staff provides comprehensive and integrated Mental Health and Substance Use service by specialized multidisciplinary mental health teams (case managers, nurse, psychologist and psychiatrist). MdM's MHPSS and Skoun's SU service approaches ensure that service users are at the center of their treatment and are empowered to make decisions about the care they receive

The CMH-SUCs consist of a multidisciplinary team, providing psychosocial assessment, mental health and substance use consultations. The teams comprise of case managers, clinical psychologists, nurses and psychiatrists. Moreover, each CMH-SUC has a supervisor who ensures the smooth operation of the activities. The aim of the CMH-SUCs is to create a strong link between the PHCC and the community but also to reinforce the referral pathways with the secondary health system. The CMH-SUCs are closely linked with PHCC and informal care providers working in the community. Community mental health services provide an opportunity for many persons with severe mental disorders to continue living in the community and thus promote community integration.

Main Outcomes of the project

Outcome 1: An integrated and gender-sensitive mental health and substance use service system is available in Beirut, Baalbek and Tripoli areas and offers quality, gender-specific and focused care to women, men, boys, girls and non-binary individuals dealing with MHPSS and SU problems, in accordance with the care model defined by the National Mental Health Program strategy

Outcome 2: Capacities and knowledge of community members and service users are strengthened with gender-sensitive and inclusive information on mental health and substance use services and rights to treatment to increase effective use of MHPSS and SU services by women, men, boys, girls and non-binary individuals in the areas of intervention

Outcome 3: Capacity building and on-the-field supervision of practices to ensure quality services and to strengthen the capacities of mental health CSOs, utilizing a gender approach to tackle gender-inequalities and gender discrimination that hinder access to and provision of MHPSS and SU services

DEFINITION OF THE CAPITALIZATION MISSION

GENERAL OBJECTIVE AND ANTICIPATED APPROACH

The aim of the study is to capitalize on the best practices, learnings and achievements implemented within ReCEVAL project from the opening of the CMHS-SUCs to the management of their operations and their handover, highlighting the main milestones and processes from a strategic and operational perspective (e.g. procedures, administrative tasks, costs, medical tasks, partnerships). Its purpose is to provide guidelines enabling the replication of this activity whether in other contexts, another region of Lebanon or another country where MdM is operating.

Notably, as the project operations were affected by different incidents related to the country's specific context (economic crisis and huge inflation impacting medicines prices, anti LGBT movements, conflict



in Gaza and Southern Lebanon...), the study will reflect the good practices and mitigating actions implemented to ensure the continuity of services.

More specifically, the following objectives will be focused on:

The aim is to describe the intervention of the ReCEVAL consortium partners in Beirut, Bekaa and Tripoli and to document best practises within the CMH-SUCs.

Highlighting the main steps and actions, reporting main learnings and best practices, main warnings and referring to related procedures, guidelines and forms for the opening, the operation and the handover of a CMH-SUC.

Note that, in Beirut, Skoun and MdM are operating in 2 separate centers (1 CMHC and 1 CSUC) both located in Rafic Hariri Governmental Hospital. Whereas integrated centers (CMH-SUCs) were opened and operated in Tripoli and Bekaa by both MdM and Skoun. This capitalization mission should relate the added value of the integrated Mental Health and Substance Use approach (common team, services, level of care etc.)

Also, Bekaa CMH-SUC was opened in 2019, and lessons learned from this 1st experience were applied to the opening of the center in Tripoli in 2022. This capitalization mission will analyse and relate this replication process.

The inclusion of the Gender within Mental Health – Psychosocial Support (MHPSS) and Substance Use (SU) care approach will be documented in aim to formalize and replicate the approach for similar project.

The focus will be on the gender inclusion and people of concern empowerment practices adopted at the CMH-SUCs, based on the existing procedures and tools, communication and visibility material available at the centers, knowledge, attitude and practices of the centers' staff (based on existing KAP study and monitoring).

At each step, CMH-SUCs operations inside the community and in relation with the main relevant partners (institutional, INGOs, local organisations and associations, etc.) and stakeholders will also be highlighted.

SCOPE

ReCEVAL project activities related to the opening, operation and handover of the centers.

4 centers in 3 locations:

- 1 CMHC operated by MdM at RHUH in Beirut
- 1 CSUC operated by Skoun at RHUH in Beirut
- 1 CMH-SUC operated by MdM and Skoun in Tripoli (at Al Rahma hospital PHCC)
- 1 CMH-SUC operated by MdM and Skoun in Douris, Bekaa (at Amel's Mother & Child center)

Depending on the situation and the location, field and collection phase would be done online.

Period: project period Nov 2021 to March 2025.



TARGET AUDIENCE

The capitalization is focused on the CMH-SUCs

The outcomes of the capitalization mission will be used by:

- MdM Lebanon and Skoun for the record and in case of replication of the model in another area in Lebanon
- Institutional partners especially the NMHP and MoPH.
- by healthcare partners in the field (PHCCs or local organizations taking over the activity of integration MHPSS and SU to their services). As the integration of MHPSS and SU services to PHCCs is part of the national strategy, it will be useful to share the capitalization documents with NMHP and the PHCCs especially on learnings about integration of both MHPSS and SU services in the same center.
- Other NGOs interested to support specialized PHCC center with a MHPSS component
- MdM HQ if replication of a similar model is done in another country
- The capitalisation report will also be shared with the donor (AFD)

METHODOLOGY PREFERENCES

QUANTITATIVE/QUALITATIVE METHODS

The capitalization work will be carried out by an external consultancy in close cooperation with MdM MEAL coordinator and the Consortium coordinator with the support of MdM and Skoun involved teams: management teams, field coordinators, MEAL teams, CMH-SUC staff.

The consultancy in charge of the capitalization work will be responsible for suggesting in the technical proposal whichever methodology is best suited to respond to the objectives and challenges of the capitalization process.

KEY DOCUMENTS

Various documents will have to be consulted before and during the field phase:

- Initial project proposal, action plan, log frame and budget
- Amended project proposal, action plan, log frame and budget
- Tripoli's CMH-SUC needs assessment
- Tripoli's CMH-SUC mid-term evaluation
- Interim reports shared with the donor
- CMH-SUCs templates and forms, tools and guidelines
- SOPs
- KAP study and analysis

The detailed list of these documents will be given to the consultancy in charge of the capitalization during the initial briefing.



KEY INDIVIDUALS/INSTITUTIONS

Most of the capitalization work will be carried out with MdM and Skoun teams (management and operational teams). Around 20 persons from Skoun and MdM staff will be interviewed.

An interview of the NMHP will be also required.

Interviews with the local partners such as Amel in Douris and Al Rahma PHCC in Tripoli could be considered.

The detailed list of these individuals/institutions will be given to the consultant during the initial briefing.

EXPECTED PRODUCTIONS AND FEEDBACK

DELIVERABLES

Inception report

An inception report will be produced at the start of the mission by the consultant following a kick off meeting and first briefing, and after reviewing the key documents. Amongst other things, the inception report defines and formalises the contemplated methodology, sets out the necessary data collection and production instruments (interview guides, etc.) and suggests a realistic work plan with a detailed and final calendar. The inception report will be submitted to the Capitalization Steering Committee for comments and validation during the inception meeting.

Capitalization report

Capitalization guidebook of 10 pages max referring to fact sheets

Suggested fact sheets (4 pages max/fact sheet)

- Opening a new center including: Identify the right location to open a center / selection of a location, main stakeholders...
- Operations of the center: organization of the center, governance, main meetings, main costs + HR: organizational chart, job descriptions of the team, recruitment of the team
- Outreaching for the community
- MHPSS and SU services provision and related procedures and forms
- Providing inclusive services
- Data management
- Handover process

The suggested fact sheets will be adapted during the inception phase of the mission based on the consultant recommendations and related in the inception report.

Fact sheets should contain main steps and actions, main learnings and best practices, main warnings/things to pay attention to; and referring to related procedures, guidelines, and forms of/warnings.

They should also highlight the added value of having an integrated CMH-SUC.

- Annexes: terms of reference, list of individuals interviewed, calendar, questionnaires, interview guidelines, observation grids, etc.



FEEDBACK

Workshop: Final results of the capitalization mission will be presented to the teams during a “lessons learned” workshop, MdM will take in charge the venue.

DEFINITION OF THE CAPITALIZATION MISSION

LOGISTICAL AND ADMINISTRATIVE ORGANISATION

Equipment

A laptop can be made available to the evaluator/consultant, upon request. The consultant can use MdM offices in Lebanon to work and schedule interviews. MdM and Skoun CMH-SUCs will also be available.

Means of communication

The consultant is expected to use their own mobile/phone number for work purposes. However, when the consultant is at MdM offices in Lebanon, local landline and internet can be used.

Travel

The consultant is responsible for their own movement for this mission. The consultant is expected to have their personal health insurance coverage.

STEERING AND REPORTING

Steering committee

The Steering Committee is the governance body for the capitalization process and its main role is to ratify the stages of this process.

Main roles and responsibilities:

- Validate of the terms of reference
- Select of the consultant
- Participate to the organization and attend the inception meeting and initial briefing
- Validate the inception report
- Review and validate the deliverables

Composition of the Steering Committee

- MdM - Consortium coordinator
- MdM - MEAL coordinator
- MdM - Deputy General Coordinator
- MdM – Mental Health Coordinator
- Skoun – Executive Director
- Skoun – Project manager

The consortium coordinator will be the consultant focal point.



BUDGET & TIMETABLE

The budget of this mission won't exceed 7500USD, inclusive of all costs including contingency costs (maximum 5%), the remuneration of the capitalization team (fees and *per diem*) and any other costs connected to the conduct of the capitalization process.

The mission must be conducted between **16/12/2024** and **21/03/2025**.

The inception meeting will take place W51.

The consultant will have in charge to elaborate a detailed timeline for the mission

SKILLS REQUIRED FOR THE MISSION

The capitalization consultant will be in charge of setting out an appropriate approach and methodology, supporting and carrying out the capitalization process, collecting and analysing the necessary data, producing and delivering the inception report and any other productions anticipated, and also providing feedback as stated in these Terms of Reference.

The vacancy is open to a single or team of consultants;

Technical skills and qualifications

- Minimum of 6-8 years of proven experience on humanitarian programming and evaluation,
- Knowledge of the local context in Lebanon is required
- Proven professional experience working with non-governmental organization is desired, with focus on mental health programming and public health,
- Professional experience in conducting similar capitalization missions,
- Experience related to gender, especially gender and mental health and/or gender and substance use issues is preferred,
- Fluent in Arabic, English (spoken and written),
- Knowledge of data analysis software is desired,
- Reporting and analytical skills.

Soft skills

- Group leadership and facilitation skills,
- Able to handle tight deadlines in a professional manner,
- Communicative,
- Organized and timely, and
- Creative in overcoming the barriers present in humanitarian contexts.

Female participants and people with disabilities are highly encouraged to apply.



APPLICATION FILE

HOW TO SUBMIT AN APPLICATION

Applicants are invited to submit a complete file via email to: < logmanag.lebanon@medecinsdumonde.net > with the subject line “**24/LB/BEY/117 Capitalization Lebanon**”. Applications filed in any other manner will not be taken into consideration. The file is considered complete if it includes the following 3 elements:

1. **Technical proposal** including:

- An understanding of the terms of reference;
- The technical approach developed and the detailed methodology;
- Details regarding the consultant and the team members if any, how responsibilities are shared between them, the CVs proposed and the availability of the consultant and team members as well as the legal status of the members of the consultancy team and/or evaluation firm to which the consultant(s) belongs;
- The provisional calendar for the mission and an estimate of charges per person, per day;
- References from 2 similar projects previously completed.

2. **Financial proposal** including:

- The total budget (inc. VAT);
- A detailed itemised breakdown (inc. MoF number and VAT if applicable)

The deadline for submitting an application is **02/12/2024 at 12 noon (Beirut time/CET)**.

INSTRUCTIONS FOR BIDDERS

In order to be authorised to apply, bidders must be able to establish, at the discretion of MdM-F, that they meet the legal, technical and financial conditions applicable and that they have the necessary capacity and sufficient resources to carry out the mission. The following rules are aimed at helping the bidder prepare a complete document that meets the requirements of MdM-F.

Content of the offer of services

The bidder must provide all necessary and sufficient information to enable the technical and budgetary proposal to be correctly evaluated. The information provided must be succinct and cover all aspects. The bidder must be able to show how it holds the required qualifications to carry out the mission. The bidder may add any information considered relevant.

Exclusion criteria

MdM-F will exclude from the contract procedure any bidders to which any of the following applies:



- Bankrupt or the subject of bankruptcy or liquidation proceedings, court-ordered restructuring or preventive arrangements, having ceased trading or in a comparable situation as a result of proceedings of the same kind under domestic legislation or regulations;
- Convicted via a judgment having *res judicata* (i.e. no longer subject to appeal in any manner) of any offence impacting their professional morality;
- Guilty of serious professional misconduct established via any means by MdM-F;
- Having failed to comply with their obligations regarding the payment of social security contributions or their tax obligations under the relevant provisions of law;
- Convicted via a judgment having *res judicata* on charges relating to fraud, corruption, participation in organised crime or any other unlawful activity;
- Which, following the signature of another contract, was declared to have committed a serious breach of contract due to failure to comply with their contractual obligations.

Bidders must be able to certify via any appropriate means that they are not currently in any of the situations described above.

Ineligibility clauses

Contracts are not awarded to bidders who, during the bidding phase:

- Find themselves in a conflict of interest with or have a specific link to any other bidders or parties to the project; any attempt made by a bidder to obtain confidential information, to enter into unlawful arrangements with its competitors or to influence the Steering Committee for the mission or MdM-F during the course of the examination, clarification, evaluation and comparison of the bids will lead to the rejection of the bid;
- Make inaccurate declarations when submitting the information required by MdM-F in order to take part in the contract or fail to provide such information.

Grounds for rejection

MdM-F and the bidders shall comply with the highest possible ethical standards when negotiating and performing contracts.

MdM-F will reject any proposal submitted by a bidder and terminate the relevant contract if it is established that this bidder has engaged in acts of corruption, fraud, collusion or coercion. The administrative or financial sanctions applied must be in proportion to the size of the contract and the seriousness of the misconduct established.

MdM-F has a duty to ensure that all bidders and applicants have no involvement whatsoever in child labour and respect all basic employment rights and rules on working conditions. They must themselves make a commitment not to purchase goods from suppliers involved in child labour or violating basic employment rights and/or rules on working conditions.