



# Libya Recovery Trust Fund (LRTF)



## Submission Form to the Libya Recovery Trust Fund

### Part A. Meeting Information

(To be completed by the LRTF Technical Secretariat)

Meeting No:	
Item No:	
Date of Meeting:	
Programme / Project	PBF/LRF-66 : Civilian capacity support

### Part B: Programme<sup>1</sup> Summary

(To be completed by the Participating UN or Non-UN Organization(s))

Date of Submission: 25 June 2013	
From: <i>Head of Participating UN or Non-UN Organization(s): Dr J. Jabbour</i> WHO Representative, Libya	Contact: <i>Telephone number, email:</i> <u>JABBOURJ@liy.emro.who.int</u> 0020218 (0) 21 4630994
Signature _____ Date 30 June 2013	
National Authority: <input checked="" type="checkbox"/> Endorsement <input type="checkbox"/> Comments (mandatory if no endorsement)	Contact: Dr Baderdin Najjar <i>Telephone number, email:</i> <u>bbannajar@yahoo.com</u> 00218912154211

<sup>1</sup> The term "programme" is used for projects, programmes and joint programmes

<input checked="" type="checkbox"/> Continuation of previous funding	<input checked="" type="checkbox"/> Participating UN/Non-UN Organization within the GoL and UN agreed priorities
<input type="checkbox"/> Other (explain)	<input type="checkbox"/> Other (explain)

Participating UN or Non-UN Organization: World Health Organization

Implementing Partner(s): National Centre for Disease Control

Programme Title: Psychosocial Support for ex combatants and their families

Total Programme Budget: US\$ 400,000 USD \_\_\_\_\_

Amount of PBF/IRF funds requested: US\$ 51,317 USD \_\_\_\_\_

Amount and percentage of indirect costs requested (7%): US\$ 3,357 \_\_\_\_\_

*Narrative summary of programme*

(Not to exceed 500 words)

## **1. Background**

Armed conflicts may result in significant psychological and social suffering to affected population. The psychological and social impacts of emergencies may be acute, in short term, but they can also undermine the long term mental health and psychological wellbeing of the affected population. These may impact peace, human rights and development. One of the priorities in emergencies is thus to protect and improve people's mental health and psychosocial wellbeing. (IASC- MHPSS Guidelines 2007) In 2012, WHO in partnership with National Centre for Disease Control (NCDC) has started an ambitious program to scale up mental health and psychosocial needs in Libya to cope with urgent emerging needs. One of the key components of this program is capacity building of mental health and psychosocial support professionals providing services to ex-combatants and their families.

During 2011-2012, all national consultations regarding health and mental health services in Libya organized by WHO identified ex-combatants as one of most vulnerable groups that would need urgent support .An intensive training program targeting psychologists providing services to ex-combatants was designed in 2012 , in consultation with Psychology departments from 6 Libyan Universities ,Ministry of Health, Warriors Affairs Commission (WAC) and with technical support from WHO.

A diploma course in clinical psychotherapeutic interventions was launched in Tripoli in May 2013 with support of WHO and in partnership with NCDC, WAC and the Libyan Foundation for Rehabilitation. The course is targeting 35 psychologists from Tripoli , Sebha , Sert , Benghazi, Kufra , Tobrok ,Misurata, Zintan and other cities in Libya.

PBF/Civcap funding would enable WHO to include international trainers in the course, covering topics such as substance use disorders, anger management counselling .It will also enable WHO to extend the duration of training program, including supervision and support follow up technical visits by key international trainers and clinical experts in this highly specialized field.

## **2. Purpose of Proposed Programme**

### **Objective of the program :**

- Psychosocial Service providers to ex-combatants and their families from different cities in Libya are equipped with skills and knowledge to provide services to this highly vulnerable group through high quality training program.
- Reintegration of ex-combatants into their communities through establishing community based mental health and psychosocial rehabilitation services closer to their living places provided by candidates graduate from the course.
- Professionals from all over Libya able to exchange their experience during the course ,learn from each other and to support building a national consensus among professionals on right based approach to psychosocial services for ex combatants and their families.

### **Activities :**

Four international experts in mental health and psychosocial support in post conflict settings participate in capacity building programs as part of Diploma on clinical psychotherapeutic interventions for ex combatants and their families

**Budget**  
*(In the 8 UNDG agreed categories)*

<b>PROJECT BUDGET*</b>	
<b>CATEGORIES</b>	<b>AMOUNT</b>
1. Staff and other personnel costs	42,560 USD
2. Supplies, Commodities, Materials	
3. Equipment, Vehicles and Furniture including Depreciation	
4. Contractual Services	
5. Travel	5,400USD
6. Transfers and Grants to Counterparts	
7. General Operating and Other Direct Costs	
<b>Sub-Total Project Costs</b>	<b>47,960 USD</b>
Indirect Support Costs **	3,357 USD
<b>TOTAL</b>	<b>51,317 USD</b>

\* Budgets must adhere to the UNDG Harmonised Budget Categories as approved by the High Level Committee on Management (HLCM) and Chief Executives Board for Coordination (CEB).

\*\*Indirect support cost should be in line with the rate of 7%, as specified in the LRTF TOR and MOU and SAA, Section II- Financial Matters.

**Part C: Administrative Review**

*(To be completed by the LRTF Technical Secretariat)*

**4. Review by the Technical Secretariat**

(a)	Does the programme document comply with format? <i>(incl., cover page, results framework, etc.)</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(b)	Is the Budget in compliance with required categories?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(c)	Is the Indirect Support Cost within the approved rate?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(d)	Is the Programme Summary completed? <i>(for posting on website)</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(e)	Is the Progress Report included? <i>(for supplementary funding only)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Part E: General Criteria for Prioritising**

(a)	Is in line with Libya and UN agreed cooperation,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(b)	Recipient Organization is unable to meet high or urgent priority needs with existing level of funding,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(c)	Addresses high priority activities that have significant impact, and by nature must address seasonal or timing imperatives and considerations,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(d)	Supports activities that are likely to improve the overall situation at national and local levels,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(e)	Does not overlap with other on-going programmes.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Overall review of programme submission

[Recommendations]

#### Part F: Decision of the Steering Committee

(To be completed by the LRTF Technical Secretariat)

##### 5. Decision of the Steering Committee

- Approved for a total budget of US\$ 51,317
- Approved with modification/condition
- Deferred/returned with comments for further consideration
- Rejected

##### Comments/Justification

Esam Garba  
Rep. Libya Ministry of Planning  
Co-chair of the Steering Committee

George Charpentier  
DSRSG/RC/HC  
Co-chair of the Steering Committee

Signature  
Date: \_\_\_\_\_

Signature  
Date: \_\_\_\_\_

#### Part G: Administrative Agent Review

(To be completed by the MPTF Office)

**6. Action taken by the Executive Coordinator, Multi-Partner Trust Fund Office, UNDP**

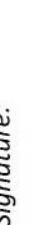
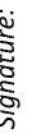
- Programme consistent with provisions of the LRTF Memorandum of Understanding with the Participating Organizations and the Standard Administrative Arrangement with donors.

**Yannick Glemarec  
Executive Coordinator,  
Multi-Partner Trust Fund Office, UNDP**

.....  
**Signature**

.....  
**Date**

**Annex to the Libya Recovery Trust Fund Submission Form – to be used to request funds for the PBF/IRF PROJECT NUMBER (to be provided by  
MPTF Office)**

Signature Page by Participating Organisations			
<b>Name of Participating Organisation:</b>  <b>Name of Head of Agency:</b> World Health Organization  <b>Signature:</b>  <b>Date</b> 25 June 2013	<b>Contact:</b> Email: Telephone	<b>Name of Participating Organisation:</b>  <b>Name of Head of Agency</b> <b>Dr Badrbin Najjar</b> <b>Signature:</b>  <b>Date</b>	<b>Contact:</b> Email: Telephone
<b>Name of Participating Organisation:</b> <b>Name of Head of Agency</b> <b>Signature:</b>  <b>Date</b>	<b>Contact:</b> Email: Telephone	<b>Name of Participating Organisation:</b> <b>Name of Head of Agency</b> <b>Signature:</b> 	<b>Contact:</b> Email: Telephone

Date

**Results Table:**

The objective of the results table below is to link the individual projects for specific consultancies, to the log-frame in the overarching Programme Document. The table can be completed by sector, to group together different individual projects that are contributing to supporting the overall outputs and outcomes for a particular sector. The RCO will aggregate all individual project results and submit a single consolidated report using the PBF template to report on progress towards meeting the overall objective. This report will also be reflected in the Consolidated LRTF Report.

**SECTOR: Social Sector**

The current overall objectives in the Programme Document are defined as Priority Areas, 1, 2, and 4. Individual projects by sector will need to indicate to which Priority Area they contribute towards. The RCO will need to share details of data collection will be done on the indicators at the overall objective level.

**Sustainability :** the diploma training program has already started in May 2013 – WHO is providing funding for international and national experts , logistical support including accommodation for trainee , training venue , coffee and lunch break costs are covered by National center for disease control and Warrior Affairs Commission

The program is accredited by the Medical Manpower Development Center At Ministry of Health as a nationally accredited program and supervised by 6 national supervisors

The program is established through partnership with National Center for Disease Control , Medical Manpower Development centers ,Tripoli Psychiatric hospital , Warrior affairs commission and civil society ; namely Libyan foundation for rehabilitation . Candidates include participants from Tripoli, Benghazi , Sebha, Sert , Misurata and other Libyan cities .

The funding will enable to sustain and empower the program through inclusion of international trainers in topics needed to be covered during the course e.g. substance use disorders , anger management counseling , counseling for families of ex combatants , extend the duration of training program, including supervision and support follow up technical visits by key international trainers and clinical experts in this highly specialized field

Indicators	Baselines & time-bound targets	Means of verification	Assumptions / Risks	Responsible Participating
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<b>Programme Outcome &amp; Priority Area:</b>	<i>Government priority in providing services including psychosocial support and rehabilitation services to ex combatants and their families established</i>	<i>Number of Warrior affairs centers and MOH facilities with trained psychologists on clinical psychotherapeutic interventions providing services</i>	<i>MOH-WAC statistical records</i>	<i>Security situation stable</i>
<b>Outcome:</b>	<i>Increased ability by national government to address transitional challenges particularly those concerning ex combatants needs</i>	<i>Degree of participation of candidates from different cities of Libya</i>	<i>NCDC records World Health Organization Assessment instrument of mental health system (currently being implemented in Libya)</i>	<i>National Center for Disease Control /MOH</i>
<b>Priority Area 4:</b> <b>(Re)Build essential services and administrative infrastructure</b>	<i>Consensus building among professionals from different Libyan cities on right based approached and best evidence based international practices to psychosocial services to ex combatants with mental health problems as members of Libyan community satisfaction survey by participating organizations and training course evaluation by candidates</i>	<i>Organization/candidates evaluation of training activity</i>	<i>Training activity reports Participants attendance sheets</i>	<i>Security situation stable</i>
<b>Priority Area 2:</b> <b>Promote coexistence and peaceful conflict resolution</b>	<i>Programme Output &amp; Activities:</i>	<i>Training course evaluation by candidates</i>	<i>Training evaluation Certification and national accreditation of program</i>	<i>National Center for Disease Control /MOH</i>
<b>Output:</b>	<i>Timely availability of targeted, specific expertise to government in critical transitional areas.</i>	<i>Activities:</i>	<i>Activity 1: consultant on addiction and substance use disorders in areas of armed conflicts provide capacity</i>	

building and technical  
advice for two weeks as  
part of clinical  
psychotherapeutic  
interventions diploma for  
ex combatants and families

Activity 2: Consultant on  
advanced counseling skills  
provide capacity building  
and technical advice for two  
weeks as part of clinical  
psychotherapeutic  
interventions diploma for ex  
combatants and families

Activity 3: consultant on  
supervision skills for  
psychotherapist provide  
capacity building and  
technical advice for two  
weeks as part of clinical  
psychotherapeutic  
interventions diploma for ex  
combatants and families

Activity 4 : consultant on  
management of mental  
health problems provide  
capacity building and  
technical advice for two  
weeks for psychotherapist  
as part of clinical  
psychotherapeutic

interventions diploma for ex combatants and families

#### Budget (by Participating Organisation)

One budget per Participating Organization must be completed below. Where a Participating Organisation is requesting funds for more than one individual project, consultancy, a single consolidated budget may be presented. Kindly note that the UNDG 8 categories need to be used from 1<sup>st</sup> January 2013.

CATEGORIES	Participating Organisation 1 AMOUNT	Participating Organisation 2 AMOUNT	Participating Organisation 3 AMOUNT	Participating Organisation 4 AMOUNT
1. Staff and other personnel costs	42,560 USD			
2. Supplies, Commodities, Materials				
3. Equipment, Vehicles and Furniture including Depreciation				
4. Contractual Services				
5. Travel	5,400USD			
6. Transfers and Grants to Counterparts				
7. General Operating and Other Direct Costs				
Sub-Total Project Costs	47,960USD			
Indirect Support Costs **	3357.2 USD			
<b>TOTAL</b>	<b>51,317USD</b>			

\* Budgets must adhere to the UNDG Harmonised Budget Categories as approved by the High Level Committee on Management (HLCM) and Chief Executives Board for Coordination (CEB).

\*\* Indirect support cost should be in line with the rate of 7%, as specified in the YNDCRTF TOR and MOU and SAA, Section II- Financial Matters



Ref. No. ....

Date : / / 20

الرقم الإشاري : ٤١٣ ٣١٩

التاريخ : ٢٠١٣ / ١٦ / ٢٠١٣ م

السيد الدكتور جان جبور  
ممثل منظمة الصحة العالمية في ليبيا

تحية طيبة و بعد ،

في الوقت الذي نثمن فيه جهود مكتبكم الموقر في دعم البرامج الصحية و في إطار برامج التعاون المشتركة للمركز الوطني لمكافحة الأمراض مع منظمة الصحة العالمية ، و بالأشرارة الى العرضين المرفقين بخصوص :

- ١ - الدعم النفسي اجتماعى للمحاربين السابقين و اسرهم
- ٢ - تعزيز الأمن الصحى بنقاط الدخول لليبيا بحسب اللوائح الصحية الدولية

نأمل من المنظمة التنسيق لدعم البرنامجين بالخبراء الدوليين لتقديم الدعم التقنى اللازم و المساعدة فى بناء الكوادر الوطنية من العاملين فى القطاع الصحى

مع جزيل الشكر و التقدير

د. بدر الدين النجار

رئيس اللجنة الإدارية

المركز الوطني لمكافحة الأمراض

