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- 1 Canetti D, Russ E, Luborsky J, Gerhart JI, Hobfoll SE. Inflamed by the flames? The impact of terrorism and war on immunity. *J Trauma Stress* 2014; **27**: 345–52.
- 2 Mokdad AH, Jaber S, Aziz MIA, et al. The state of health in the Arab world, 1990–2010: an analysis of the burden of diseases, injuries, and risk factors. *Lancet* 2014; **383**: 309–20.
- 3 Hobfoll SE, Canetti-Nisim D, Johnson RJ, Palmieri PA, Varley JD, Galea S. The association of exposure, risk, and resiliency factors with PTSD among Jews and Arabs exposed to repeated acts of terrorism in Israel. *J Trauma Stress* 2008; **21**: 9–21.
- 4 Hobfoll SE, Mancini AD, Hall BJ, Canetti D, Bonanno GA. The limits of resilience: distress following chronic political violence among Palestinians. *Soc Sci Med* 2011; **72**: 1400–08.
- 5 Sinclair SJ, Antonius D. *The Political Psychology of Terrorism Fears*. New York: Oxford University Press, 2013.

## Syrian crisis and mental health system reform in Lebanon

No numbers, no percentages can convey the tragedies lived by the people fleeing the war in Syria, the excessive violence witnessed and experienced by children, the crushed hopes of families to be reunited, or the feelings of helplessness overwhelming those involved in the response.

More than 3 years after the start of the war in Syria, more than 1 million registered refugees in Lebanon, thousands of Palestinian refugees and Lebanese returnees from Syria; and there is still no solution for the Syrian crisis in sight.

Lebanon has a population of about 4 350 000, including 400 000 Palestinian refugees, was ravaged by a violent civil war between 1975 and 1990; yet Lebanon is now trying to cope with more than 1 million Syrian refugees.

In the midst of this straining situation, the Lebanese health system

has shown a tremendous resilience. Although UN agencies, international non-governmental organisations, and local agencies are providing assistance for a range of health services, the needs of the Syrian refugees are far from being met. The Lebanese Ministry of Public Health (MOPH) had to allocate funds to cover Syrians with life-threatening disorders. Public hospitals are under great pressure and are increasingly in shortage of financing, medication, and human resources. On the other hand, and despite all the risks of epidemics, the MOPH was able to prevent substantial outbreaks and to keep Lebanon polio free.

In December, 2013, the UN High Commissioner for Refugees report<sup>1</sup> on mental health and psychosocial service assessment for Syrian refugees in Lebanon highlighted the need for a coordination mechanism. As a result, a Mental Health and Psycho-Social Support (MHPSS) task force chaired by the MOPH, cochaired by UNICEF and WHO, and including all actors involved in MHPSS services was established with clear objectives to mainstream an MHPSS approach in all sectors (education, protection, water sanitation and hygiene, shelter, etc) and harmonise services at the different levels of the Inter Agency Standing Committee in a culturally sensitive manner, using and adapting international methods and guidelines.

Building on the support provided by International Medical Corps, WHO, and UNICEF, the MOPH has also created a national mental health programme to reform the mental health system in the country (service organisation, legislation, and financing). A national consensus on a mental health strategy will be discussed in November, 2014.

Much remains to be done in the health sector and for people suffering from mental disorder. However, turning adversity into positive change, Lebanon provides here a

promising example. Humbly, we acknowledge that addressing the plight of Syrian refugees is beyond scaling up of services for MHPSS. The major determinants for health are outside the realm of health: war, conflict, education, and social justice to say the least. We call on the international community to support host countries, and more importantly to help to resolve this crisis so that each and every refugee can regain their security, safety, and dignity by returning home.

We declare no competing interests.

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- 1 El Chammay R, Kheir W, Alaouie H. UNHCR Assessment of Mental Health and Psychosocial Services for Syrian refugees in Lebanon. <http://data.unhcr.org/syrianrefugees/download.php?id=4575> (accessed July 23, 2014).

### Department of Error

*Libri V, Yandim C, Athanasopoulos S, et al. Epigenetic and neurological effects and safety of high-dose nicotinamide in patients with Friedreich's ataxia: an exploratory, open-label, dose-escalation study. Lancet* 2014; **384**: 504–13—This Article should have been published under a Creative Commons CC BY open-access licence. The correction has been made to the online version as of May 8, 2014, and to the printed Article.

*Lynch DR, Fischbeck KH. Nicotinamide in Friedreich's ataxia: useful or not? Lancet* 2014; **384**: 474–75—This Comment should have been published under a Creative Commons CC BY open-access licence. The correction has been made to the online version as of May 29, 2014, and to the printed Comment.

*Stender J, Gosseries O, Bruno M-A, et al. Diagnostic precision of PET imaging and functional MRI in disorders of consciousness: a clinical validation study. Lancet* 2014; **384**: 514–22—In the summary of this Article, 13 of 41 behaviourally unresponsive patients showed brain activity compatible with (minimal) consciousness. This correction has been made to the online version as of Aug 8, 2014, and to the printed Article.



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