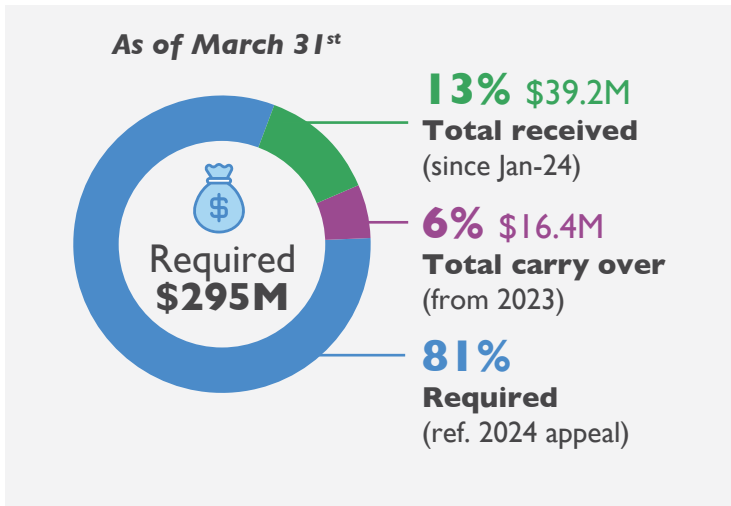


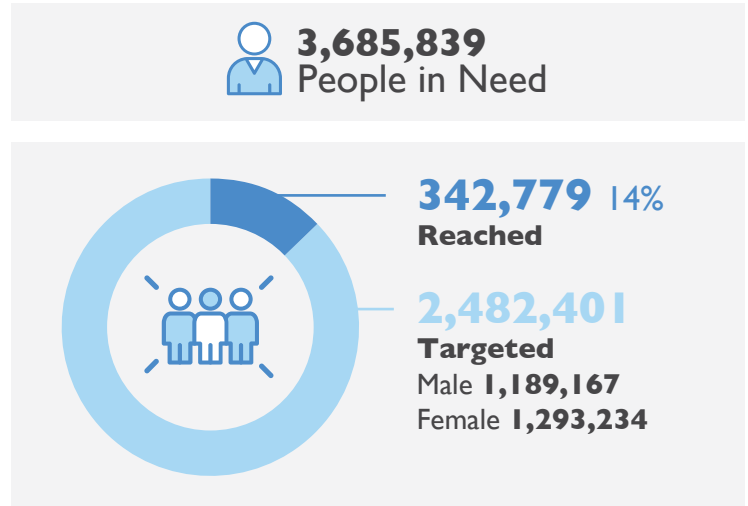
The first quarter of 2024 Health sector dashboard summarizes the progress made by Health sector partners involved in the Lebanon Response Plan (LRP), identifies key challenges and priorities, and highlights trends affecting people in need. The Health sector in Lebanon is working to: OUTCOME 1) Improved access to comprehensive primary healthcare; OUTCOME 2) Improve access to hospital and advanced referral care ; OUTCOME 3) Enhance emergency, outbreak & infectious diseases preparedness and response; OUTCOME 4) Improve access to health awareness & information.

The Lebanon Response Plan is pending endorsement by the LRP Steering Committee. This dashboard is based on information reported by Health sector partners operating under the sector strategy discussed with and endorsed by the Ministry of Public Health.

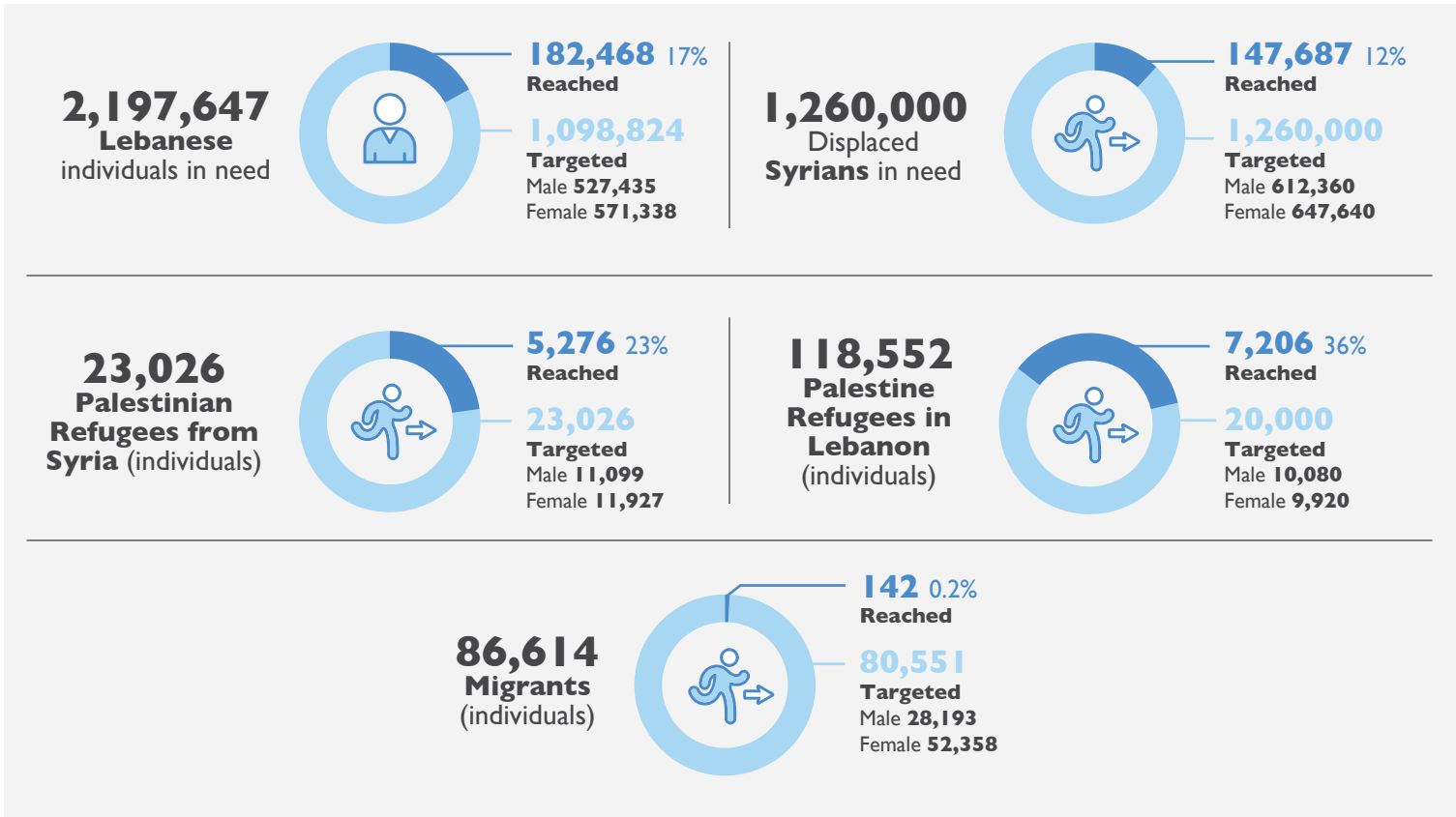
2024 Sector Funding Status



2024 Population Reached

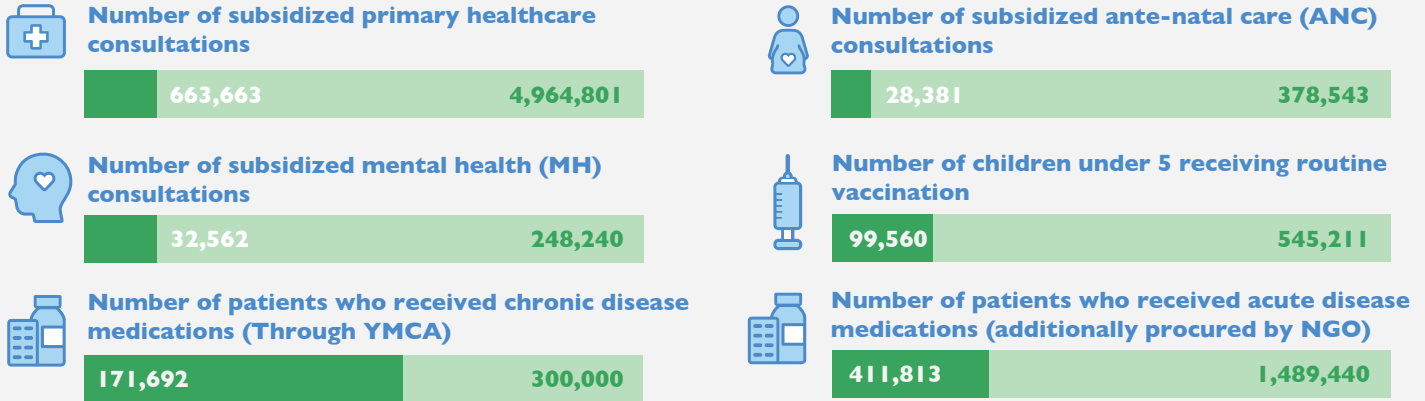


2024 Population Figures by Cohort

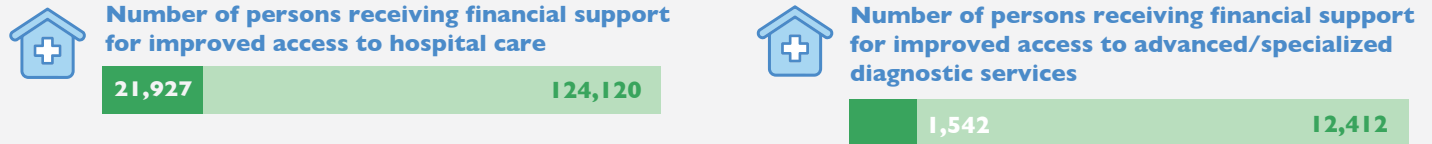


Progress against targets

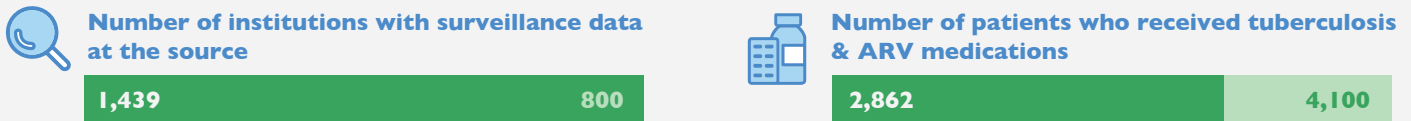
Outcome 1: Improve access to comprehensive primary healthcare



Outcome 2: Improve access to hospital and advanced referral care



Outcome 3: Enhance emergency, outbreak & infectious diseases preparedness and response



Outcome 4: improve access to health awareness & information



I. Analysis of achievements of the sector at the output level

Amid mounting pressures and a deepening layer of crisis, particularly with the decrease in resources and escalation of hostilities in southern Lebanon, the Health sector in 2024 persists in its dedication to delivering equitable access to high-quality health services. This commitment extends to the vulnerable Lebanese and non-Lebanese including displaced Syrians, Palestinian Refugees from Syria (PRS), Palestine Refugees in Lebanon (PRL), Migrants, and displaced individuals of diverse nationalities.

Outcome I: Improve access to comprehensive primary healthcare

In the first quarter of 2024, vulnerable populations remained supported by a comprehensive primary healthcare package. This package encompasses consultations, medications for both acute and chronic diseases, vaccination services, sexual and reproductive health care, mental health support (including medication when necessary), nutritional services for acute malnourished children with medical complications, as well as urgent dental care, and basic laboratory testing and imaging.

Subsidized Consultations

Number of subsidized primary healthcare consultations (total)

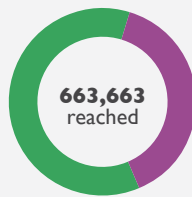


13%

663,663 Reached

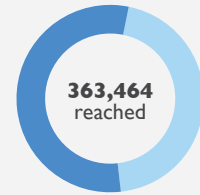
4,964,801 Targeted

61%
404,198
female



39%
259,465
male

55%
out of total
Lebanese



45%
out of total
non-Lebanese

Reproductive Health

Number of subsidized ante-natal care (ANC) consultations (out of total)



7%

28,381 Reached

378,543 Targeted

31%
out of total
Lebanese



69%
out of total
non-Lebanese

Mental Health

Number of subsidized mental health (MH) consultations (out of total)



13%

32,562 Reached

248,240 Targeted

58%
18,812
female



42%
13,750
male

51%
out of total
Lebanese



49%
out of total
non-Lebanese

Vaccination

Number of children under 5 receiving routine vaccination



18%

99,560 Reached

545,211 Targeted

Chronic Disease Medications

Number of patients who received chronic disease medication



57%

171,692 Reached

300,000 Targeted

88%
out of total
Lebanese



12%
out of total
non-Lebanese

During the first quarter of 2024, a total of 663,663 (LEB-55%, SYR-44%, Others-04%) subsidized primary healthcare consultations including antenatal care and mental health were reported which experienced a notable decrease of 17 per cent compared to the same reporting period in 2023. With the surge in demand, it is imperative that additional resources from donors, coupled with concerted efforts from Health sector partners, are mobilized to effectively address primary health care needs across the country. Out of the total subsidized consultations, 28,381 (LEB-31%, SYR-68%, Others 1%) were for antenatal care, reflecting a significant 43 per cent decrease from the previous year, constituting only seven per cent of the yearly target. Whereas total mental health consultations in the first quarter of 2024 were 32,562 (LEB-51%, SYR-46%, Others-01%), which is a five per cent decrease from the prior year and a 15 per cent shortfall from the yearly target. The decrease by 25 per cent of the targeted children under five receiving routine vaccinations compared to the same period in 2023 is alarming, necessitating close monitoring by Health sector partners to prevent potential outbreaks of communicable diseases. The total number of patients receiving chronic disease medication has increased by 25 per cent compared to the first quarter of 2023. While additional partners have stepped in to support the provision of chronic disease medications recipients benefitted from the NCD medications provided by Health sector partners, the Health sector still grapples with an 18 per cent stock disruption for these vital medications, adversely affecting access for vulnerable populations across the 481 primary healthcare facilities.

The majority benefiting from subsidized consultations remains the Lebanese, which is almost unchanged at 55 per cent out of the total population reached, and it is among the highest since the beginning of the complex crisis in Lebanon (57% in 2023, 58% in 2022, 48% in 2021, 38% in 2020, 31% in 2019, 17% in 2018), reflecting the increased vulnerability among the host community and the need to maintain and expand support to people in need.

The Health sector continued to contribute in 2024 strengthening the national health system by carrying out and supporting interrelated functions in human resources, finance, governance, capacity building, and health information systems. Support for procuring vaccines, essential medications, reproductive health commodities, as well as other medical supplies and equipment for facilities, including Primary Health Care Centers (PHCCs) within the Ministry of Public Health (MoPH) network and health dispensaries, continues to be prioritized.

No additional PHCCs were added to the MoPH network in the first quarter of 2024. The number of MoPH-PHCCs reached 302 across Lebanon in 2024. Fifty-two per cent of the total are supported by Health sector partners to provide a comprehensive package of primary health care services.



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Reproductive Health Sub Working Group (RHSWG):

During the first quarter of 2024, Reproductive Health Sub Working Group (RHSWG) observed a decrease in the number of Anti-Natal Care (ANC) consultations at the Primary Healthcare Centers (PHCCs) across Lebanon. Several factors could have contributed to such a decrease, including but not limited to a decreased number of supported PHCCs and imposed budget caps at PHCCs associated with decreased funding, safety and security constraints in South Lebanon, shortage of obstetrics and gynecology OBGYN and midwives engaged in the provision of services in the PHCCs, potential underreporting of partners on the Activity Info platform, decreased utilization of health services during the month of Ramadan, and transportation costs, which have been flagged by various partners as key barriers to accessing services. Moving forward, increased efforts are needed to mobilize additional resources to expand ANC support as well as enhance the reporting process to improve accuracy (including standardizing indicators for Activity Info and MOPH PHENICS systems). Also, there is a need to monitor the impact of the increased contribution of beneficiaries/consultation fees at PHCCs (Ministerial decree 279/1 - effective March 12, 2024).

RHSWG updated the Sexual & Reproductive Health (SRH) service mapping tool in March 2024 to reflect the subsidization of institutional deliveries as part of emergency preparedness and response activities. Furthermore, enhanced monitoring and follow-up are put in place to ensure enhanced access to SRH services. To capture deliveries outside hospitals, an additional indicator was included on PHENICS in February 2024 to capture the place of delivery for all children coming to vaccination at PHCCs, and the RHSWG issued a recommendation for the content of a Menstrual Hygiene Management (MHM) kit to ensure a standardized and evidence-based approach to menstrual hygiene management.

National Mental Health Programme (NMHP)

The National Mental Health Programme (NMHP) is witnessing a surge in mental health consultations across primary healthcare centers, and the Step-by-Step initiative is experiencing a significant increase in users. Currently, a cohort of 2,948 individuals grappling with symptoms of low mood and stress are benefiting from free psychoeducational and social support services. These services include stress management techniques, fostering positive self-talk, bolstering social support networks, and equipping participants with robust relapse prevention strategies through a 5-week self-help electronic intervention. An analysis conducted in March yielded compelling results: 40.33 per cent of participants reported a significant reduction in symptoms exceeding 50 per cent, with 16.9 per cent achieving complete remission, indicative of the absence of depressive symptoms. Moreover, 85.7 per cent expressed high levels of satisfaction with the program's offerings. One participant shared their experience:

"Through the Step-by-Step program, I learned to listen to my body, respect my pain and fatigue, rest, and breathe. I learned not to be harsh on myself if I fall short in my work or ignore something. I also learned to monitor my mood and my feelings, open up to friends I love, not postpone phone calls with them, ask for help, and make time for the things I love. The nice girl who accompanied me on calls, not once did she make me feel that what I said was silly or unimportant. On the contrary, she paid attention understanding my condition better and helped me identify techniques to use. From the tone of my voice, she knew how I felt. It is nice to know that there's someone who cares and is trying to help you to get better. Finally, I am thankful for everyone in the program. We all need support and help in this difficult time."



Outcome 2: Improve access to hospital and advanced referral care

A total of 21,927 (LEB-03%, SYR-66%, PRL-28%, Others-3%) individuals received obstetric and emergency/life-saving hospital and advanced referral care, which is 18 per cent of the yearly target of 124,120. Among them, 735 individuals out of the target of 54,941 were vulnerable Lebanese, approximately double the number for the same period in 2023, accounting for two per cent of the annual target. Additional resources are needed for the Health sector partners to increase hospital care support for the Lebanese population. Through UNRWA, around 634 PRS and 6,070 PRL received hospital care, marking an overall increase of 155 per cent from the same period in 2023. Regarding migrants, 82 individuals out of a yearly target of 403 received support for hospital care admission in the first quarter of the year, constituting 21 per cent of the yearly target. Overall, women and girls accounted for 68 per cent of individuals supported with hospitalization. Staffing support was also provided to public hospitals to retain specialized doctors and nurses.

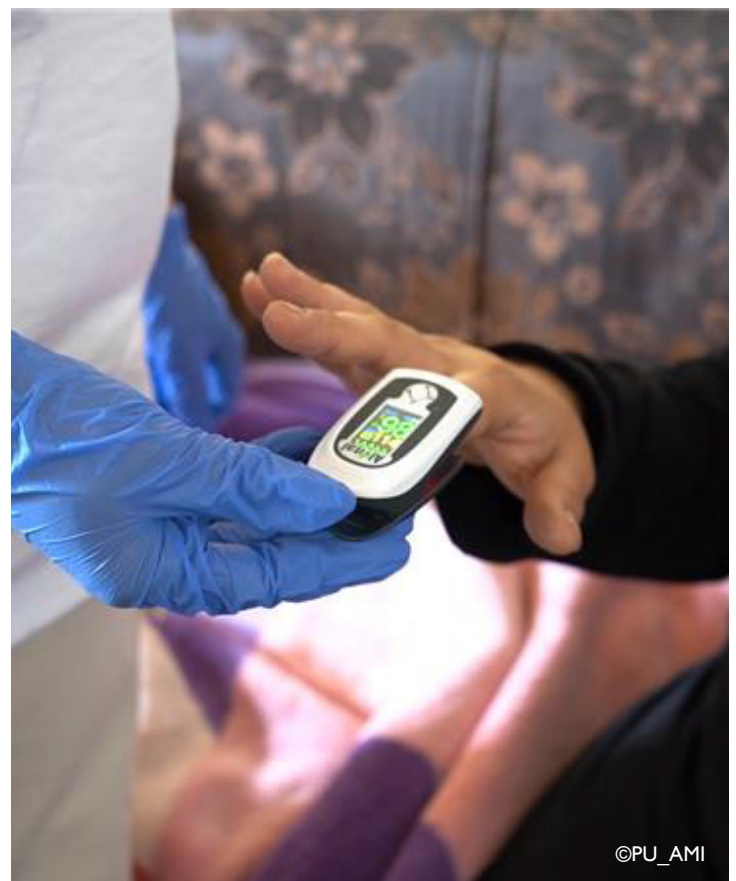
Outcome 3: Enhance emergency, outbreak & infectious diseases preparedness and response.

In the first quarter of 2024, the Health sector continues to support national outbreak and infectious disease control efforts. This was achieved through the expansion and reinforcement of key infrastructure such as the National Early Warning and Response System (EWARS) and the Public Health Emergency Operation Center (PHEOC), alongside the strengthening of critical programs like the National Tuberculosis and Acquired Immunodeficiency Syndrome (AIDS) Programmes (NTP & NAP). In the first quarter of the year 1,439 institutions have surveillance data at the source surpassing the target of 800. Furthermore, contingency stocks were strategically positioned at Ministry of Public Health (MoPH) warehouses, particularly in response to escalating hostilities in the South and possible water borne diseases outbreak. Within the National Tuberculosis Program (NTP), 514 beneficiaries, primarily 59 per cent women and 41 per cent men, received tuberculosis medications, segregated by 160 active patients and 354 patients receiving tuberculosis preventive treatment reaching 28 per cent of the target. Similarly, under the National AIDS Program (NAP), 2,348 beneficiaries were provided with antiretroviral (ARV) medications, exceeding the target of 2,300. Notably, 50 patients out of total were newly admitted in the first quarter of 2024. The distribution of ARV medications saw 92 per cent male beneficiaries and eight per cent female beneficiaries. These efforts underscore the sector's commitment to effectively managing and mitigating the

impact of infectious diseases, ensuring equitable access to treatment and care across demographics.

Outcome 4: Improve access to health awareness & information.

Health sector partners expanded efforts to ensure women, men, and youth (including children, boys, and girls, as well as persons with disabilities) have their fundamental rights respected and have access to health awareness and information. 72 out of a target of 295 PHCCs were engaged in health promotion and outreach activities. At the community level, 25,905 caregivers were reached with integrated health awareness messages, constituting five per cent of the yearly target of 551,313.



Prioritization and Localization:

In the first quarter of 2024, the Health sector prioritized life-saving activities amidst decreased resources and heightened needs. Partners focused their support particularly in high-vulnerability areas where immediate interventions were crucial. Notably, efforts were directed towards localization, with initiatives designed to address immediate needs while actively involving local communities in response efforts, especially in response to the escalation of hostilities in the south.

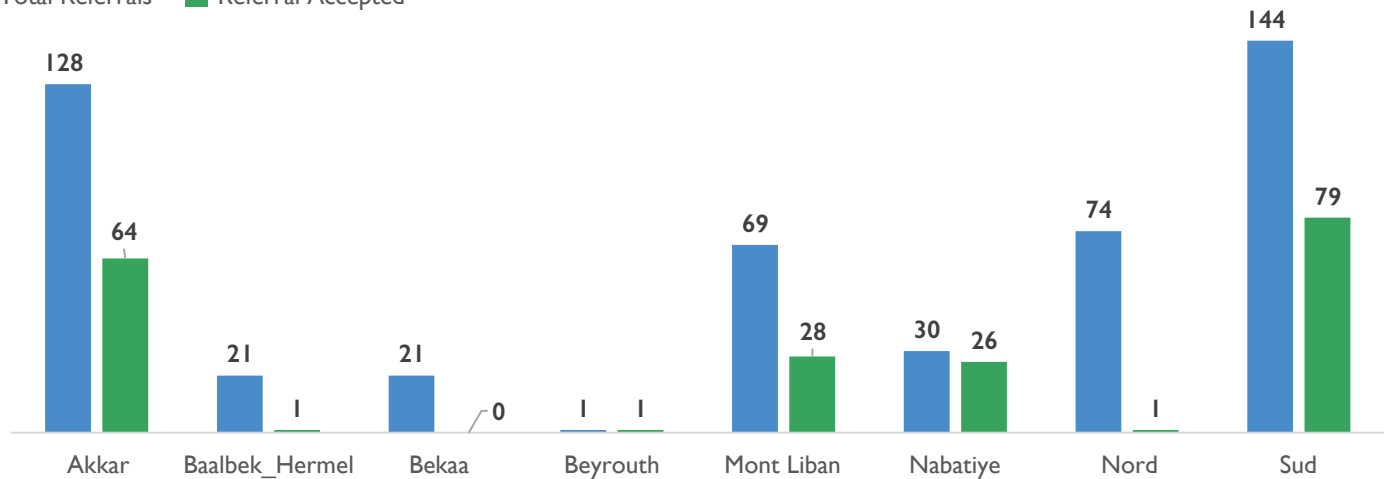
Gender and GBV risk mitigation mainstreaming

A comprehensive gender plan was developed to identify sector priorities and determine activities for implementation throughout 2024, providing a roadmap for integrating gender considerations and mitigating GBV risks. Additionally, a specialized tip sheet was created for health sector partners, offering practical guidance for integrating gender considerations and addressing GBV risks throughout the humanitarian project cycle. The health sector strategy underwent a thorough review using the Gender Age Marker tool, resulting in a score of 4, indicating a high level of gender responsiveness with attention to age and disability considerations. These initiatives underscore the sector's commitment to promoting inclusivity and equity in humanitarian assistance, aiming to address the diverse needs of all individuals.

Referrals

488 referrals were made to the Health sector in the first quarter of 2024 by 7 partners. 41 per cent of the referrals to the Health sector were accepted which indicates a good response rate, while 59 per cent were not accepted and 1 per cent out of these not accepted referrals were for "other" reasons such as, 'the service is not available in the area of coverage' or 'the service is no longer needed'.

■ Total Referrals ■ Referral Accepted



Escalation of Hostilities in the South:

In response to the escalating hostilities and displacement from southern Lebanon, the Health sector continues to mobilize resources. Fourteen health sector partners are addressing the increased needs through established channels. Resources have been reallocated, and support has been directed to areas most affected by the conflict. Efforts focus on enhancing emergency medical services, trauma care, and psychological support for communities exposed to violence and displacement, including those remaining within the conflict zone and Internally Displaced Persons (IDPs). Collaborating closely with partners and local authorities, the sector strives to ensure the continuity of healthcare services, including the provision of essential medicines and medical supplies to affected populations.

Special attention is being given to implementing targeted health interventions to address specific health risks associated with the conflict situation, such as injuries, infectious diseases, and mental health disorders. This comprehensive response aims to mitigate the adverse health impacts of the conflict and support the resilience of affected communities through existing channels.

In response to the closure of Primary Healthcare Centers (PHCCs) and increased demand from IDPs, twenty-one primary healthcare satellite units (PSUs) on rotation are providing integrated PHC services for those remaining within the conflict zone and IDPs. During the reporting period, the PSUs conducted 3,297 consultations, provided 3,118 reproductive health services, and vaccinated 18,440 children in southern Lebanon.

The underfunded nature of the response to the crisis in the South further exacerbates the already strained situation. Despite efforts to strengthen the national health system and supply essential medical resources, the situation in the South remains a focal point for heightened risks to health outcomes and protection concerns within affected communities.

2. Challenges, Risks and Mitigation Measures

Referrals

In the first quarter of 2024, mounting funding challenges, intensified by regional instability and compounded by displacement from the South, have severely impeded meaningful access to both primary and secondary healthcare for displaced individuals and host communities alike. This includes women, men, girls, boys, and other vulnerable groups, exacerbating an already precarious situation.

Funding Challenges: In the first quarter of 2024, the Health sector has available USD 55.6 Million. This constitutes 18.8 per cent needed to cover the yearly appeal. Funding challenges have emerged as the primary obstacle to addressing the deep humanitarian, social, and economic crisis in Lebanon and meeting the growing needs of vulnerable populations. The displacement from the South, coupled with the protracted Syria crisis and other ongoing emergencies, has further strained the already fragile funding situation and capacity of the Health sector in Lebanon. Decreased funding directly impacts access to healthcare services, exacerbating morbidity and mortality rates, particularly among displaced populations. In 2023, Health sector partners faced immense pressure to prioritize life-saving interventions in high-risk areas across Lebanon, leaving less severe and underfunded cases behind, underscoring the urgent need for increased financial assistance and resource allocation, coupled with strategies for stabilization and sustainable strengthening of the national health system.

Access Challenges: Affordability remained the foremost obstacle to accessing healthcare services in the first quarter of 2024, compounded by persistent barriers related to availability, geographical accessibility, and acceptability. The displacement from the South further aggravated these challenges, particularly in border areas where healthcare infrastructure is either damaged or not accessible due to insecurity which in addition aggravates the situation for resistant people remaining in the conflict areas. Transportation fees emerged as a heightened challenge highlighted by partners during this period, further complicating access to essential healthcare services. Households facing higher health expenditures—such as those with individuals with disabilities, older persons with chronic illnesses, or a higher dependency ratio, along with children under five years of age, adolescent girls and boys, and survivors of gender-based violence—have been disproportionately affected by these barriers, resulting in poorer health outcomes and increased risk of morbidity and mortality. Despite scarce resources, Health sector partners are intensifying efforts to address accessibility barriers. These efforts included subsidizing the comprehensive package of care in primary healthcare centers, raising awareness on integrated health topics, and assisting with hospitalization bills for all population groups, including those displaced from South Lebanon.

System Challenges: Since late 2023, the health system has faced mounting pressure due to increased demand for healthcare services, limited resources, and the displacement of populations from the South. These factors have stretched the system thin, exacerbating existing challenges. Environmental concerns, particularly regarding medical waste management, have further complicated the situation for the Health sector. The strain on the health system has resulted in elevated risks of mortality, deteriorating health outcomes, and heightened protection concerns within affected communities. Despite these challenges, Health sector partners have remained committed to bolstering the national health system. In 2024, they continue to focus on various interconnected areas such as human resources, finance, governance, capacity building, and health information systems. Additionally, they supplied crucial medical supplies and equipment including personal protective equipment, vaccines, and data technologies. The Health sector is grappling with the escalation of hostilities in the South, leveraging existing systems to respond. However, meeting the emerging needs in areas where infrastructure is damaged and humanitarian access is impeded presents exceptional difficulties.

Escalation of Hostilities in the South:

The escalation of hostilities in South Lebanon has severely challenged the Health sector's response. The financial shortfall, alongside displacement and ongoing crises, has strained the sector's capacity, limiting access to healthcare and increasing risk of morbidity and mortality rates among displaced populations. Affordability is a major barrier, worsened by damaged infrastructure and rising transportation costs. Vulnerable groups, including individuals with disabilities, older persons, young children, adolescents, and survivors of gender-based violence, face disproportionate impacts. The health system is under immense pressure from increased demand, limited resources, and access challenges. Insecurity due to the ongoing hostilities in South Lebanon, the expansion of hostilities in other parts of the country, and attacks on healthcare workers and facilities are impacting an already struggling health system and its capacity to respond to increased humanitarian needs. To make the situation worse, very limited financial resources have been made available to respond to this emergency. Health sector partners continue to repurpose funds from other planned actions, leaving other vulnerable populations without services. It is imperative that additional resources are made available to sustain and expand disease surveillance and response capacity, build capacity for casualty management, and provide essential health services to internally displaced populations (IDPs) in South Lebanon.

3. Key Priorities For The Next Quarter

For the second quarter of 2024, the Health sector will maintain its focus on supporting the Ministry of Public Health (MoPH) at the primary healthcare level, emphasizing complementary models that extend coverage to those in need and align with existing services. Recognizing the shortfall in coverage compared to yearly targets, the sector will intensify advocacy efforts for primary healthcare support and urge partners to expand their support to more PHCC within the MOPH network. Partners will be encouraged to implement the National Unified Long-term Primary Healthcare Subsidization Protocol (LPSP) in supported centers and adhere to the MoPH guidance and memos.

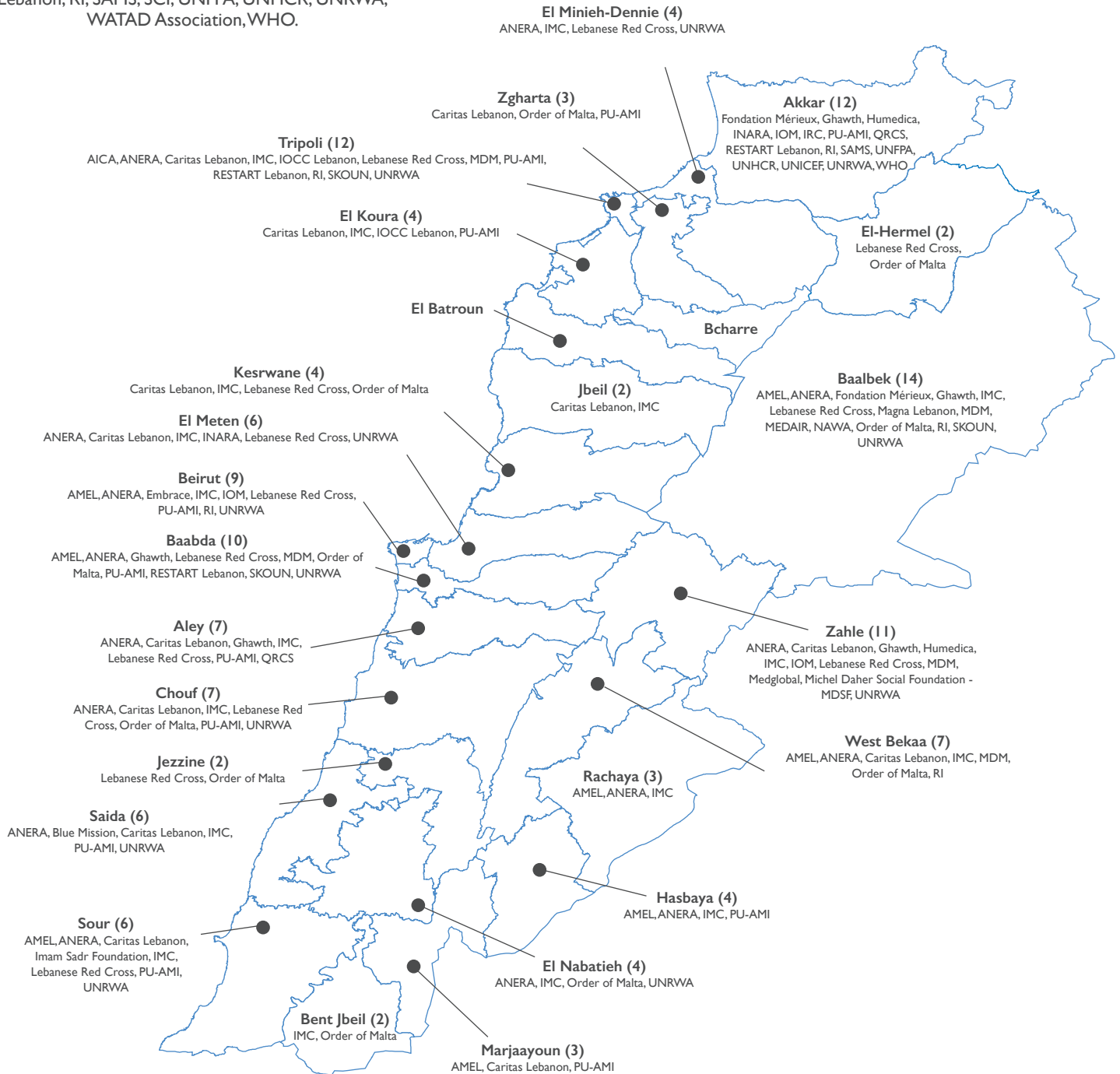
At the secondary and tertiary healthcare levels, partners will continue to prioritize sustaining and augmenting financial backing

for hospital care, with a particular emphasis on improving access for vulnerable Lebanese, host communities. Efforts will be directed towards advocating for uninterrupted dialysis and blood disease support amid funding constraints and rising prices. Amid worsening economic conditions, the Health sector will persist in prioritizing sustainable life-saving services for vulnerable displaced Syrians and Lebanese.

Remaining vigilant, the Health sector is fully prepared to respond to any potential resurgence of cholera or other communicable diseases. This readiness is ensured through the maintenance of contingency stocks at the MoPH central warehouse, support for the Epidemiological Surveillance Unit, ongoing efforts of rapid response teams, and capacity building initiatives for frontline workers.

National (24)

Al Midan, ANERA, Caritas Lebanon, chaine de l'espoir, Ghawth, Humedica, IMC, INARA, IOM, IRC, ISWA, Mercy USA, MoPH, Plan International, PU-AMI, RESTART Lebanon, RI, SAMS, SCI, UNFPA, UNHCR, UNRWA, WATAD Association, WHO.



All 36 organizations mentioned below are contributing to the achievement of Health Outcomes prioritized under the LRP and reporting under ActivityInfo:

AICA, AMEL, ANERA, Blue Mission, Caritas Lebanon, chaine de l'espoir, Embrace, Fondation Mérieux, Ghawth, Humedica, Imam Sadr Foundation, IMC, INARA, IOCC Lebanon, IOM, IRC, Lebanese Red Cross, Magna Lebanon, MDM, MEDAIR, Medglobal, Mercy USA, Michel Daher Social Foundation - MDSF, NAWA, Order of Malta, PU-AMI, QRCS, RESTART Lebanon, RI, SAMS, SKOUN, UNFPA, UNHCR, UNICEF, UNRWA, WHO.

According to the QI 2024 financial update, the top 10 donors to the health sector under the LRP are listed below:

PRIVATE DONORS, FRANCE, EUROPEAN UNION, UNITED STATES OF AMERICA, Italy, GERMANY, Others, NORWAY, Central Emergency Response Fund - CERF, NETHERLANDS.