Annual Referral Health Care Report 2020

A summary report for secondary and tertiary health care provided to Syrian refugees in Lebanon in 2020
OVERVIEW

Secondary and tertiary health care institutions in Lebanon are mostly private and cost is a significant access barrier. UNHCR has put in place Guidelines for Referral Health Care in Lebanon and standard operating procedures (SOPs) to support access to life saving and obstetric care and to manage the costs of care for refugees. The costs covered by UNHCR vary according to the cost of service provided. Additionally, UNHCR contracts a third-party administrator (TPA) to manage and audit referral care processes and costs.

As of December 2020, there are 865,531 Syrian refugees and 15,896 refugees from other nationalities registered with UNHCR. The referral care programme also supports access to life saving care for non-registered refugees.

- The total number of approved referrals decreased from 65,513 in 2019 to 60,193 in 2020. This is a decrease of 8%. Many factors contributed for this reduction, but restriction in movement related to the COVID pandemic and the economic situation are both believed to be the main attributors.
- The composition of the UNHCR hospital network changed throughout the year much due to adaptations made for the COVID pandemic but as previous year it consisted for most of the time of around 40 hospitals. The majority (86%) of accepted referrals were treated in 20 hospitals.
- 62% of referrals were for maternity care (same in 2019).
- The proportion of births through caesarean section was 32% out of total deliveries (33% in 2019).
- Out of the total approved referrals there were 1058 mortalities, of which 55% were in children under one year of age, predominantly in the perinatal period. There was a significant increase in mortality during the year from 1.2% to 1.8%. Some of the increase can be attributed to COVID but also to other factors. Neonatal mortalities also increased, exceeding the SDG targets in the 3rd quarter of 2020.

DATA

UNHCR, through the TPA, collected data on the coverage of hospital referrals. The data for accepted referrals include the diagnosis, care received, outcome and cost of the service.
SECTION 1: NUMBER OF REFERRALS

Key Findings

Number of referrals per month fluctuating with the dip in Mar-Apr-May during first lock-down period.

1,154 referrals were declined support (1.9% of total). Most common reason for declining was that condition did not fit criteria set out in referral care guidelines (acute life-threatening, delivery etc.)

20% Proportion of referrals of children <5 years of age (21% in 2019).

5% of beneficiaries referred twice or more. The most common diagnosis for multiple referrals (4 or more/year) is blood- and immunological conditions. Possibly due to the need for repeated transfusions.
Key Findings

25.4 and 18.3 years
Mean age at admission for females and males respectively (24.7 and 16.0 years in 2019). The different means are due to the fact that the majority of females are referred for delivery while the majority of males are referred for perinatal reasons.

437
Average number of referrals per month to the hospital most frequented by refugees (Raii Hospital in Saida).

Percentage referrals to hospitals in South is notably higher than the percentage of refugees residing there. A number of large hospitals in Saida (Raii, Kassab) are receiving referrals from southern Mount Lebanon.
SECTION 2: REASON FOR REFERRALS

Key Findings

37,112
Number of accepted referrals requiring pregnancy related care (62% of total referrals)

36,199
Number of referrals for delivery (60% of total referrals)

This is a decrease from 2019 (39,339 referrals for delivery)

32%
Proportion of deliveries by caesarean section. Remained stable compared with 2019 (33%).
SECTION 3: MORTALITY

(Information about diagnoses from TPA general database. Rest of data comes from separate mortality register)

**Key Findings**

1,058 of beneficiaries referred died while hospitalized in 2020. Corresponding number for 2019 was 780 out of 65,513 referrals.

42% are neonatal mortalities (448 reported in 2020)

1.8% proportion of mortalities out of all referred in 2020 (1.2% in 2019)

6.5% of deaths were due to COVID-19

55% of the 1,058 deaths occurred among children under one year of age (decrease from 60% in 2019). The deaths happened mainly in the perinatal period and 9.1% were attributed to prematurity.

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Maternal mortalities among UNHCR supported referrals (3 in 2019).