

Key figures

2,500 individuals/week receive primary health care

500 patients/week receive secondary and tertiary care

UNHCR key targets (RRP 5)

400,000 individuals supported in accessing primary health care including reproductive health and mental health

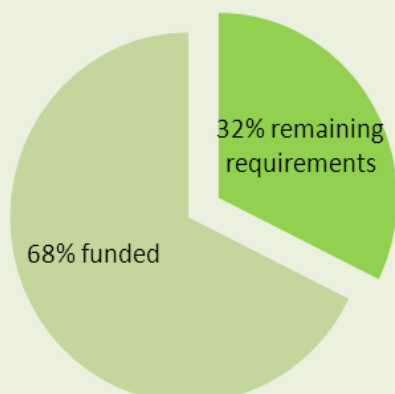
49,000 individuals benefit from secondary and tertiary health care

Funding

UNHCR health requirements: **37.9 m**

Percentage funded: **68 %**

- Remaining UNHCR requirements (RRP5)
- Funding for health as of July



Needs

Violence in Syria and the destruction of public infrastructure has meant that many refugees arrive in Lebanon with urgent health concerns. Others have developed health concerns in displacement linked to trauma, substandard living conditions and depletion of their limited means. As a result, refugees need support in accessing primary, secondary and tertiary health care within the public and private health care systems.

Common health care needs of refugees include: reproductive health care and family planning, child health care (i.e. vaccinations), treatment for acute illnesses (respiratory infections, gastrointestinal diseases), chronic diseases (hypertension, diabetes) and mental health.

Challenges

Refugees need help accessing health care services:

Physical access to health care centres is a challenge for some refugees who live in remote locations. In addition, access is limited by short working hours and availability of trained health personnel. Visits of mobile medical units are in place to address this obstacle, but harmonizing these visits remains an ongoing challenge. The existing network of UNHCR's 18 primary health care centres, and 23 referral hospitals needs strengthening to offer comprehensive services and adequate follow up of chronic disease to reduce the burden of hospitalization.

Cost of public (and private) health care:

Contributory payment is required for all health care services in the public health care system. While the same fees apply to refugees as locals, the fees may be prohibitive for many refugees. Refugees must pay the costs for care/tests not covered by UNHCR (25%). Additionally, some providers require upfront payment of these uncovered costs. Medications and diagnostic tests are frequently overprescribed, increasing costs for refugees and UNHCR.

Needs for health care outstretch available resources:

With the daily increase in the number of refugees, UNHCR's resources cannot meet all health care needs. As a result, funds are increasingly stretched among prioritized and vulnerable cases, particularly at secondary and tertiary care levels. Lifesaving interventions in the area of maternal and infant health (surgical deliveries by cesarean section and care of premature infants) are extremely costly.

Strategy

UNHCR's role vis-à-vis refugee health is to facilitate, monitor, and advocate for refugee access to health care services in Lebanon.

- **Primary Health Care:**

To this end UNHCR works to promote and support refugee access to a network of primary health care centres, which serve as the entry point to the national health care system (both public and private). In addition, in order to improve access to refugees living in remote areas, and for the most vulnerable, UNHCR will expand the network of mobile medical units. "Safety nets" and free of charge access is available for the most vulnerable. UNHCR prioritizes targeted preventative and curative health care especially reproductive healthcare, services for infants and young children (including immunizations), and mental health care services. UNHCR seeks to identify and address mental health needs at the primary health care level.

- **Secondary and Tertiary Health Care:**

UNHCR supports secondary and tertiary health care on a needs-only basis. All referral care is limited to emergency referral only (and in most cases, refugees must bear the cost of 25% of treatment out of their own pockets). UNHCR has established an exceptional care committee to review exceptional cases basing decisions on prognosis, treatment plan and cost criteria.

Achievements January - July

	Individuals reached
Primary health care	65,800
Life-saving secondary healthcare	18,409
Health education	25,500

July developments

- 12,675 individuals assisted in primary health centres, and 2,600 in secondary and tertiary health care.
- A total of 3,934 patients received clinical and social consultations for mental health issues provided by IMC, Makhzoumi Foundation and Restart in the past month.
- UNHCR assessment conducted on delivery care in hospitals investigating the high rates of caesarean sections among Syrian refugee women.
- 53,634 children received vaccinations within UNHCR registration sites, with the support of UNICEF and the Ministry of Public Health in July in North, Bekaa and South.
- New health information reporting tools for partners for Lebanon finalized and piloted in July.



Syrian refugee children receive care in primary health centres © UNHCR/S.Baldwin

UNHCR implementing partners

International Medical Corps (IMC), Caritas Lebanon Migrant Center (CLMC), Makhzoumi Foundation, Première Urgence - Aide Médicale Internationale (PU-AMI), International Orthodox Christian Charities (IOCC), Amel Association – Lebanese Popular Association for Popular Action (AMEL), Restart Center, Association Justice and Misericorde (AJEM).