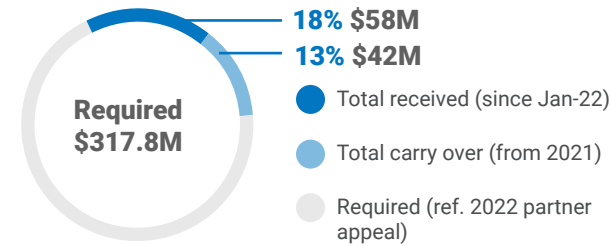




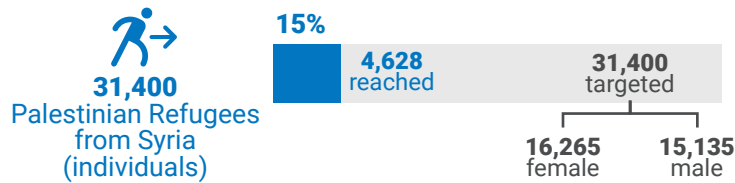
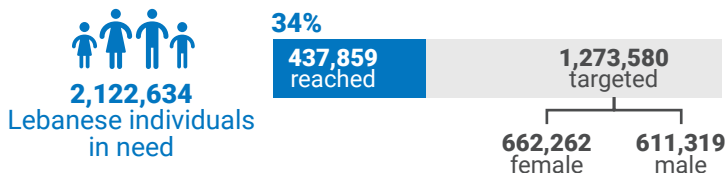
The 2023 2nd Quarter Health sector dashboard summarizes the progress made by Health sector partners involved in the Lebanon Crisis Response Plan (LCRP), identifies key challenges and priorities, and highlights trends affecting people in need. The Health sector in Lebanon is working to: OUTCOME 1) Improve access to comprehensive primary healthcare (PHC); OUTCOME 2) Improve access to hospital (incl. Emergency Room (ER) care) and advanced referral care (advanced diagnostic laboratory & radiology care); OUTCOME 3) Improve outbreak & infectious diseases control; OUTCOME 4) Women, men and youth (children, boys and girls, Person with Disabilities (PWD)) have their fundamental rights respected and have access to basic services and information.

2023 Sector Funding Status

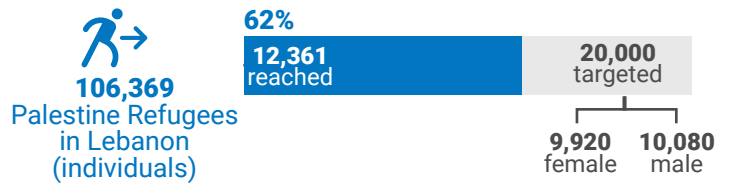
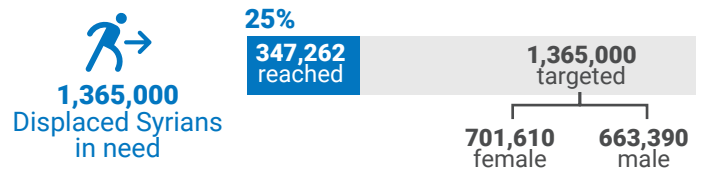
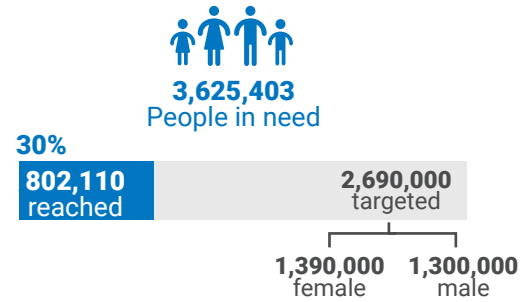
As of 30 June



2023 population figures by cohort

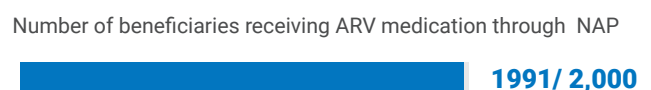
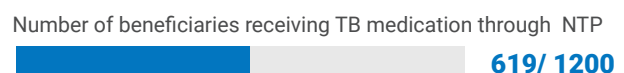
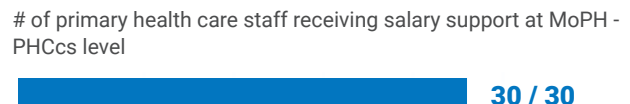
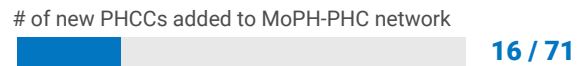
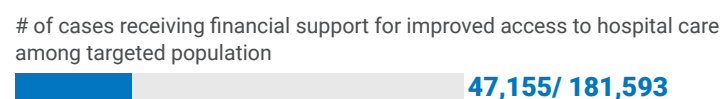
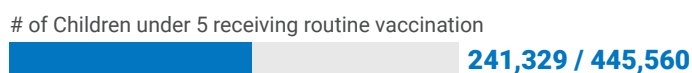
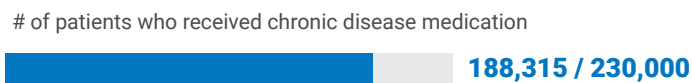
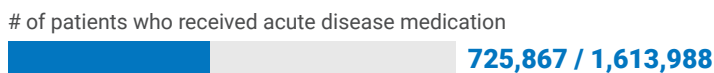
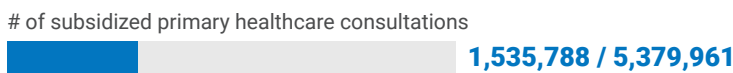


2023 population reached



Progress against targets

Key Achievements





1. KEY ACHIEVEMENTS OF THE SECTOR AT THE OUTPUT LEVEL

Despite the growing needs, the Health sector -under the Lebanon Crisis Response Plan (LCRP)- remains committed to ensuring an equitable continuation of quality healthcare for displaced Syrians, vulnerable host Lebanese community, Palestinian refugees from Syria (PRS), Palestine refugees in Lebanon (PRL), and displaced populations from other nationalities. The LCRP activities and targets are complemented by the Emergency Response Plan (ERP) for the Lebanese population, PRL, and migrants.

PRIMARY HEALTH CARE

In the second quarter of 2023, vulnerable populations continued to benefit from a comprehensive package of primary healthcare that includes consultations, medications for acute and chronic diseases, vaccination, sexual and reproductive health, mental health (including medication), and nutrition services, as well as urgent dental services and basic laboratory testing and imaging.

Subsidized Consultations



29%
1,535,788
reached
5,379,961
targeted



57%
out of total
Lebanese



43%
out of total
non-Lebanese

of subsidized primary healthcare consultations

Reproductive Health



20%
82,790
reached
410,638
targeted

35%
out of total
Lebanese



65%
out of total
non-Lebanese

of subsidized ante-natal care (ANC) consultations

Mental Health



25%
67,873
reached
268,988
targeted



46%
out of total
Lebanese



54%
out of total
non-Lebanese

of subsidized mental health (MH) consultations

Vaccination



54%
241,329
reached
445,560
targeted

of children U5 receiving routine vaccination

Chronic Disease Medications



82%
188,315
reached
230,000
targeted

of patients who received chronic disease medication

89%
out of total
Lebanese



11%
out of total
non-Lebanese



©Medair/Abdul Dennaoui



Compared to the same reporting period in 2022, the subsidized consultations including antenatal care and mental health consultation remained unchanged. Considering the increased demand and the higher target set for 2023, additional resources and efforts are needed from Health sector partners to respond to primary health care needs. The percentage of children under five receiving routine vaccination is also stable compared to the same reporting period last year with the same number of children receiving their essential vaccines. A measles vaccination campaign needed to take place in the second quarter of the year but did not happen due to limited resources. Additional advocacy and efforts are needed from all Health sector partners to increase routine immunization coverage and protect the country from vaccine preventable diseases and deadly outbreaks. The sector is undergoing an extensive exercise to identify the utilization of medications donated by Health sector partners. Numbers will be reflected in future dashboards. Additional partners are supporting in the provision of chronic disease medications; however, the Health sector is still facing some 17 per cent stock disruption for chronic disease medications and this is affecting the access of the vulnerable population to chronic disease medications in the 481 primary healthcare facilities across the country.

The percentage of Lebanese benefitting from subsidized consultations remains at 57 per cent out of total population covered (compared to the second quarter of 2022) and is the highest since the beginning of the crisis (48% in 2021, 38% in 2020, 31% in 2019, 17% in 2018) which reflects 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 2023 to strengthen the national health system by carrying out and supporting inter-related 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 Centres (PHCCs) within the Ministry of Public Health (MoPH) network and health dispensaries continues to be prioritized.

Sixteen PHCCs were added to the MoPH network in the second quarter of 2023. The number of MoPH-PHCCs reached 294 across Lebanon in 2023. 50 per cent out of the total are supported by Health sector partners to provide a comprehensive package of primary health care services.

HOSPITAL CARE

A total of 47,155 individuals received obstetric and emergency/life-saving care or 26 per cent of the yearly target of 181,593. For the displaced populations, a 23 per cent decrease in the number of individuals supported for hospital care was noticed from May to June 2023 after the update of UNHCR Referral Care SoPs that implies a higher share on the patient. Close monitoring is needed to understand if the revised referral care would impact the ability of the displaced population to access hospital care. Some 2,949 individuals out of the target of 76,415 are vulnerable Lebanese. Additional resources are needed urgently for the Health sector partners to be able to respond to the increase in hospital care support to the Lebanese population, who is in dire need as a result of the ongoing and deteriorating economic situation. Through UNRWA, 805 PRS and 10,257 PRL received hospital care. Overall, women and girls accounted for 67 per cent of individuals supported with hospitalization. Staffing support was provided to the public hospitals to retain specialized doctors and nurses.

OUTBREAK & INFECTIOUS DISEASE CONTROL

The Health sector supported the national outbreak and infectious diseases control through the expansion and reinforcement of the National Early Warning and Response System (EWARS) and the strengthening of the National Tuberculosis and Acquired Immunodeficiency Syndrome (AIDS) Programmes (NTP & NAP). 1,308 out of a target of 800 EWARS centres were functional in Q2, contingency stocks were made available at MoPH warehouses, 619 beneficiaries received tuberculosis medications through NTP (out of a target of 1,200), and 1,991 beneficiaries received antiretroviral (ARV) medications through NAP (out of a target of 2000).

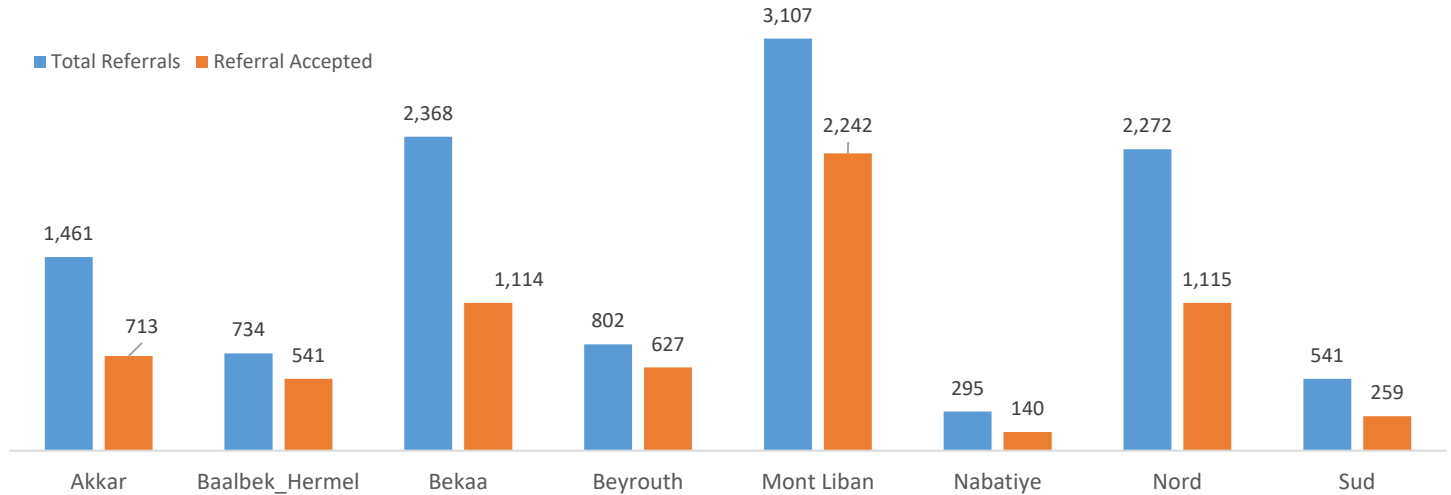
HEALTH AWARENESS & INFORMATION

Health sector partners expanded efforts to ensure women, men, and youth (children, boys, and girls, Persons with Disabilities) have their fundamental rights respected and have access to health awareness and information. 67 PHCCs were engaged in health promotion and outreach activities (out of the target of 285). At the community level, 222,799 caregivers were reached with integrated health awareness messages out of a yearly target of 725,081.



Referrals

11,580 referrals were made to the Health Sector in the second quarter of 2023 by 49 partners. 58 per cent of the referrals to the Health sector were accepted, while six per cent were not accepted and five 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'. The main reason for not accepting referrals is mainly related to the unavailability of the service due to lack of resources for both primary and hospital care.



Gender and GBV risk mitigation mainstreaming

A new gender and GBV risk mitigation sector focal point was confirmed. The focal point will support the sector's coordinators to implement gender and GBV priorities included in the workplan.

2. KEY CHALLENGES OF THE SECTOR

Aggravated barriers due to the compounded multi-layered crisis, have further impacted the meaningful access of displaced women, men, girls and boys and other vulnerable groups to primary and secondary health services. Health sector partners were challenged to ensure business continuity due to the increased risk of outbreaks, social instability, and supply gaps.

Accessibility Challenges: Affordability including the direct and indirect cost of services remained the main challenge to accessing health care services. Additional barriers continue to hinder the accessibility and the timely use of health services in Lebanon. The supply and demand levels are mainly related to availability (e.g., services and supplies including medications), geographical accessibility (e.g., remote areas), and acceptability (e.g., social stigma). The revised UNHCR Referral Care SOP that was initiated in May implies a higher patient share and therefore adds strains on the displaced population to access hospital care. The needs of Lebanese for hospital care support continue to increase considering the growing numbers of uninsured individuals and the inefficiency of the national insurance schemes. Dialysis and blood disease support remain a gap for both displaced populations and vulnerable Lebanese. Health sector partners continue to increase efforts to remove accessibility barriers by subsidizing the comprehensive package of care in the primary health care centers, providing awareness on health integrated topics, and supporting hospitalization bills for all populations groups despite the scarce financial resources.

System Challenges: In 2023, the health system in Lebanon is under significant strain due to increased demand and scarcity of resources. This strain is leading to higher mortality rates and worsened health outcomes, causing protection concerns and tensions in the country. Lebanon's vulnerability to disease outbreaks is rising due to several factors, including ongoing complex crises, weakened water, sanitation, and health systems, and a shortage of human resources. The economic crisis has resulted in a sharp decline in vaccination coverage among both Lebanese and displaced populations, increasing the risk of vaccine-preventable diseases. Lebanon is struggling to respond to multiple and simultaneous outbreaks, further compounded by the global lack of resources and critical supplies, as well as an overstretched healthcare workforce dealing with multiple emergencies concurrently. In recent years, preventable diseases like cholera have resurged, in addition to the challenges posed by the COVID-19 pandemic. These outbreaks have depleted the Ministry of Public Health's (MoPH) capacity for early detection, overwhelmed the laboratory network, exhausted healthcare personnel and resources, and stretched the limited capacity for outbreak response and management. Presently, Lebanon is facing a Measles outbreak, and the country remains at high risk for other infectious and communicable diseases. Partners and health organizations must remain vigilant, keep their contingency stocks updated, and promptly report any suspected emerging communicable diseases to the Epidemiological Surveillance Unit (ESU) at MoPH. The challenge to access vaccines and essential resources adds to the challenges faced by the already overwhelmed public health and medical personnel. Health sector partners are working to strengthen the national health system, including the Public Health Emergency Operation Center (PHEOC) and ESU, through functions related to human resources, finance, governance, capacity building, information and health information systems, and medical products such as personal protective equipment, vaccines, and data technologies.



Funding Challenges: The Health sector in Lebanon needs significant financial assistance to overcome this deep humanitarian, social, and economic crisis and to respond to the growing needs of the vulnerable populations. The protracted nature of displacement coupled with other crises, increased demand for public health care, Lebanese pound devaluation, global inflation, and the prioritization of other emergencies in the region greatly affected the funding situation of the Health sector in Lebanon. Insufficient funding directly leads to reduced access and therefore to increased morbidity and mortality. Health sector partners are stretched and obliged to prioritize life-saving interventions in high-risk areas across Lebanon leaving behind less severe underfunded cases.

3. MID-YEAR REVIEW - KEY PRIORITIES/ADJUSTMENTS FOR THE DURATION OF 2023

As we reach the midway point of 2023, the Health sector under the LCRP has maximized efforts and stretched resources to ensure equitable access to quality healthcare for vulnerable populations in the country. Despite facing multiple challenges including increased demand and decreased resources, the sector remains committed to providing life-saving health services to displaced Syrians, vulnerable Lebanese communities, PRS, PRL, and displaced individuals from other nationalities.

In terms of the sector's **priorities** for 2023, the comprehensive package of primary healthcare in vulnerable areas is crucial especially for the most vulnerable groups including pregnant and lactating women, children under five, older people and patients with chronic illnesses. Failure to prioritize these interventions, would lead to increased risks of outbreaks, preventable hospitalizations, and higher morbidity and mortality rates, as well as exposing the most vulnerable to risks of GBV and exploitation. Providing cost coverage support for lifesaving and limb-saving interventions in hospitals for the most vulnerable individuals in need irrespective of nationality, mortality and morbidity will be reduced, and protection threats and tension can be mitigated. Feasibility is enhanced by applying eligibility criteria and establishing acceptable tariffs for interventions, both in hospitals and for doctors.

To address the **gaps** resulting from decreased funding and increased demand for primary healthcare services, the sector has subsidized consultations, including antenatal care and mental health consultations. However, despite the progress, additional resources and concerted efforts are needed to meet the higher targets set for 2023 and respond effectively to the escalating healthcare needs of vulnerable populations. Regarding hospital care, the sector has maximized efforts to provide obstetric and emergency/life-saving care, benefiting a significant number of individuals. However, some challenges emerged with the initiation of updated UNHCR Referral Care Standard Operating Procedures (SOPs), potentially resulting in a decrease in support for displaced populations seeking hospital care. These SOPs imply a higher patient share, putting strains on the displaced population's access to essential services. Additionally, vulnerable Lebanese populations are facing increasing difficulties in accessing hospital care due to the ongoing and deteriorating economic situation. In terms of outbreaks, Lebanon's vulnerability to communicable is rising due to several factors, including ongoing complex crises, weakened water, sanitation, and health systems, and a shortage of human resources.

As of mid-year 2023, the Health sector is **31% funded**, significantly below the required level to meet the healthcare needs of vulnerable populations. Urgent action is needed to bridge the funding gap and to make sure the country is prepared to prevent and contain any potential outbreak and to address the urgent gaps and ensure that essential healthcare services reach those in dire need. Securing additional resources is crucial to ensure equitable access to quality healthcare and mitigate the impact of ongoing crises on public health in Lebanon. If resources are not made available, the sector will struggle to meet the expected results and targets set out for 2023. Collaborative efforts from health sector partners and stakeholders are essential to safeguard the health and well-being of the vulnerable population during these challenging times.



National (24)

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



All 38 organizations mentioned below are contributing to the achievement of Health Outcomes prioritized under the LCRP and reporting under ActivityInfo:

AICA, AI Makassed, AI Midan, AMEL, ANERA, Blue Mission, Caritas Lebanon, chaine de l'espoir, Ghawth, Humedica, IMC, INARA, IOCC Lebanon, IOM, IRC, Lebanese Order of Midwives (LOM), Lebanese Red Cross, Magna Lebanon, MDM, MEDAIR, Medglobal, Mercy USA, MoPH, NAWA, Order of Malta, Plan International, PU-AMI, RESTART Lebanon, RI, SAMS, SCI, SKOUN, UN-Habitat, UNFPA, UNHCR, UNRWA, WATAD Association, WHO.

According to the Q2 2023 financial update, the top 10 donors to the health sector under the LCRP are listed below:

UNITED STATES OF AMERICA, PRIVATE DONORS, GERMANY, Canada, NETHERLANDS, FRANCE, EUROPEAN UNION, NORWAY, CERF, JAPAN.

datasource: Q2 2023 financial update

For more information, please contact:

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