



Annual Referral Health Care Report 2022

A summary report for secondary and tertiary health care provided to Syrian refugees in Lebanon in 2022

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Overview

UNHCR's role is to facilitate and advocate for access to its persons of concern through existing services and health service providers and to monitor access to health care services. While the primary health care strategy is the core of all interventions; referral care is an essential part of access to comprehensive health services (UNHCR Public Health Operational Guidance, 2013). Majority of the secondary and tertiary health care institutions in Lebanon are private and catastrophic costs are a significant barrier to accessing health care. 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 to manage the costs of care for refugees effectively to avoid catastrophic health expenditures for the refugees. The costs covered by UNHCR vary according to the cost of service provided to the refugees by the health care provider. Overall, 45.7% of the referral health care providers for the year 2022 were public hospitals. There were 35 hospitals which were officially part of the referral network during the year.

UNHCR contracts a third-party administrator (TPA) to manage and audit referral care processes and costs.

It is estimated that around 815,000 Syrian refugees are registered with UNHCR by the end of 2022. There are also approximately 19,000 refugees and asylum-seekers from countries other than Syria who are registered with UNHCR. The 2022 referral care programme continued providing that access to life-saving for refugees who are not registered or in need of renewal of registration and linked them back to registration through the fast-track process.

- The total number of approved referrals increased by five percent (**5%**) from **62,049** in 2021 to **65,112** in 2022. This increase has been related to the increase in admission due to increase in the admission for children less than 1 year of age (22.4% increase).
- The composition of the UNHCR hospital network did not change through the year 2022. For most parts of the year the network included **35** hospitals with over ninety percent (**93%**) of referrals taking place to **20** of those contracted hospitals.
- Fifty three percent (**53%**) of referrals were for maternity care. This is a reduction from 58% in 2021. The reason was a decrease in the number of deliveries during the second half of the year.
- The proportion of births through caesarean section was **32%** out of total deliveries showing a slight increase in comparison to 30% in 2021.
- Out of the total approved referrals, there were **1,120 mortalities**, of which **48.6%** were in children under one year of age (44% in 2021). The trend in mortality rate from 2019 to 2022 shows that the mortality was highest in 2021, possibly due to direct and indirect factors related to the COVID-19 pandemic. From 1.2% in 2019, 1.8% in 2020, **2.4%** in 2021 to 1.7% in 2022. Further, the worsening economic crises and its impact on health sector in the country is also expected to be a contributing factor to this.

IN NUMBERS

65,112 Referrals were supported by UNHCR in 2022.

59,017 Beneficiaries supported by UNHCR with one or more referrals.

5,426 Monthly average referrals supported by UNHCR.

74%

Referrals of female patients, reflecting the high proportion of obstetric care (**76%** in 2021).

93% Accepted referrals in most utilized 20 hospitals. (91% in 2021)

DATA

UNHCR, through the Third-Party Agreement, collected data on the hospital referrals. The data for the accepted referrals include the diagnosis, care received, outcome and cost of the service. The data used in this report was extracted in January 2022.

Section 1: Number of referrals

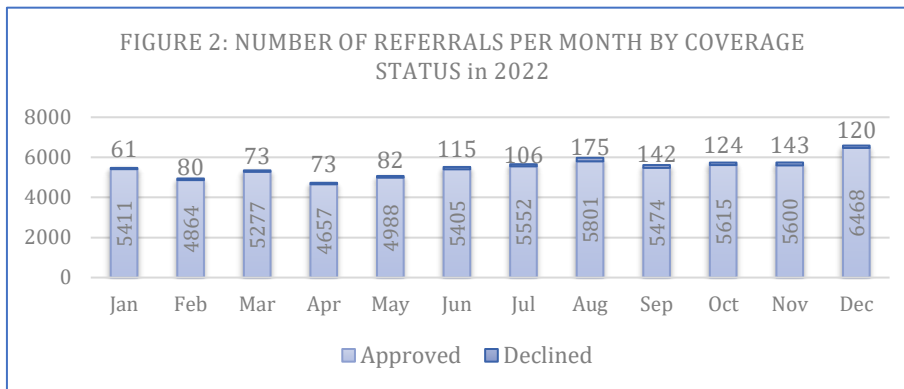
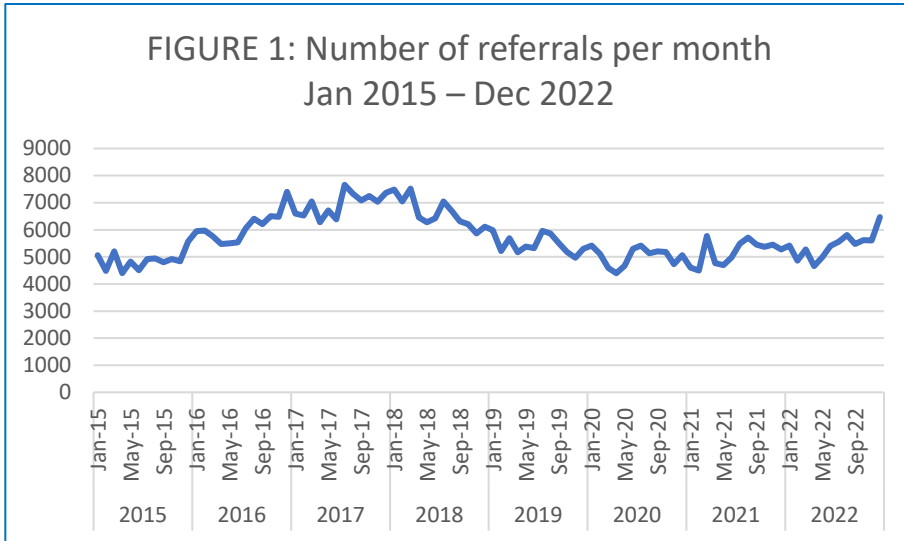
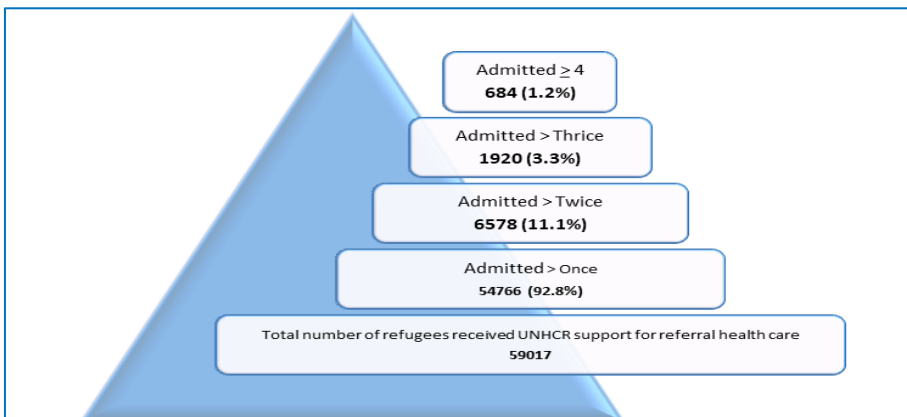


FIGURE 3: NUMBER OF REFUGEES SUPPORTED AND FREQUENCY OF ADMISSIONS PER REFUGEE



Key Findings

Referrals per month fluctuating with admissions peaking in the month of December 2022 (6,468 admissions).

1,294 referrals were declined support (1.95% 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.)

This value was 1.7% in 2021.

23% Referrals of children <5 years of age (19% in 2021).

7% of beneficiaries referred twice or more. The most common diagnosis (apart from symptoms*) for multiple referrals was for endocrine and metabolic disorders.

*Symptoms: Fever, Gastrointestinal symptoms, Respiratory symptoms, etc.

FIGURE 4: REFERRALS BY SEX AND AGE GROUP

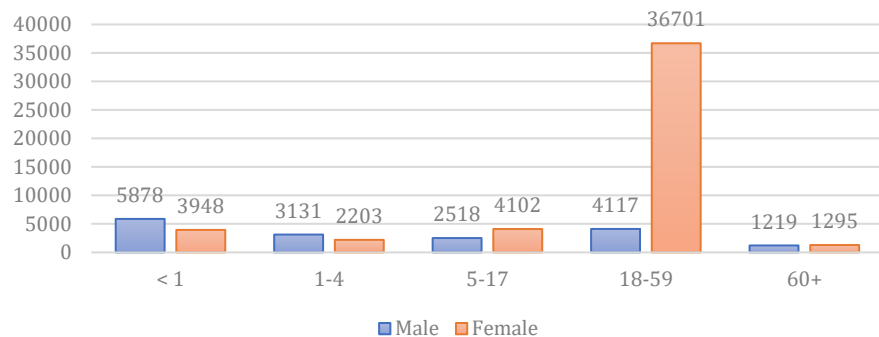


FIGURE 5: PROPORTION OF REFERRALS AT THE 20 MOST FREQUENTED CONTRACTED HOSPITALS

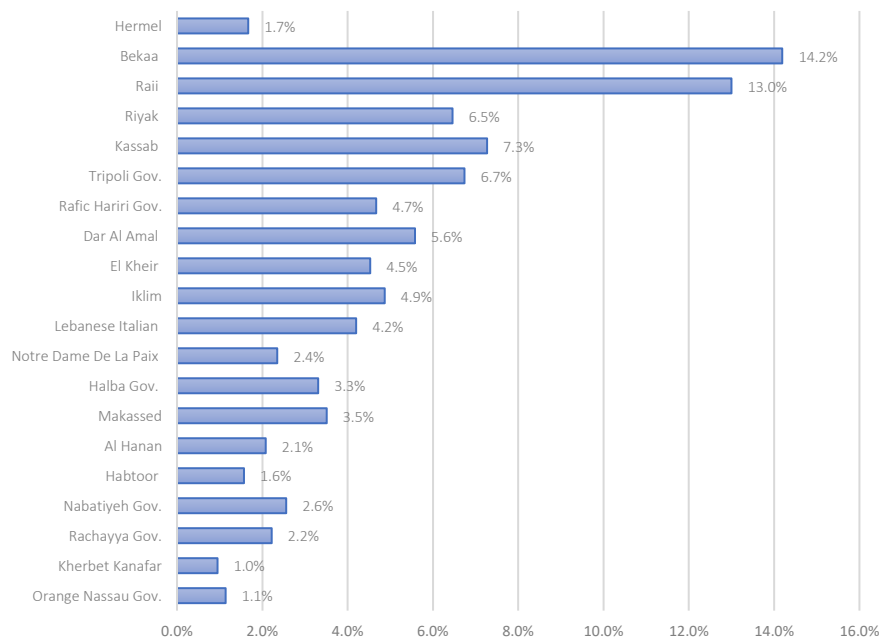
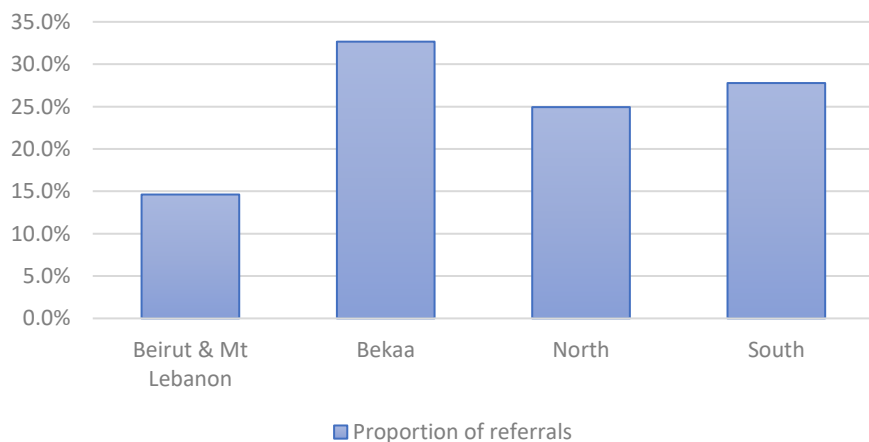


FIGURE 6: REFERRALS BY REGION



Key Findings

25.8 and 16.9 years

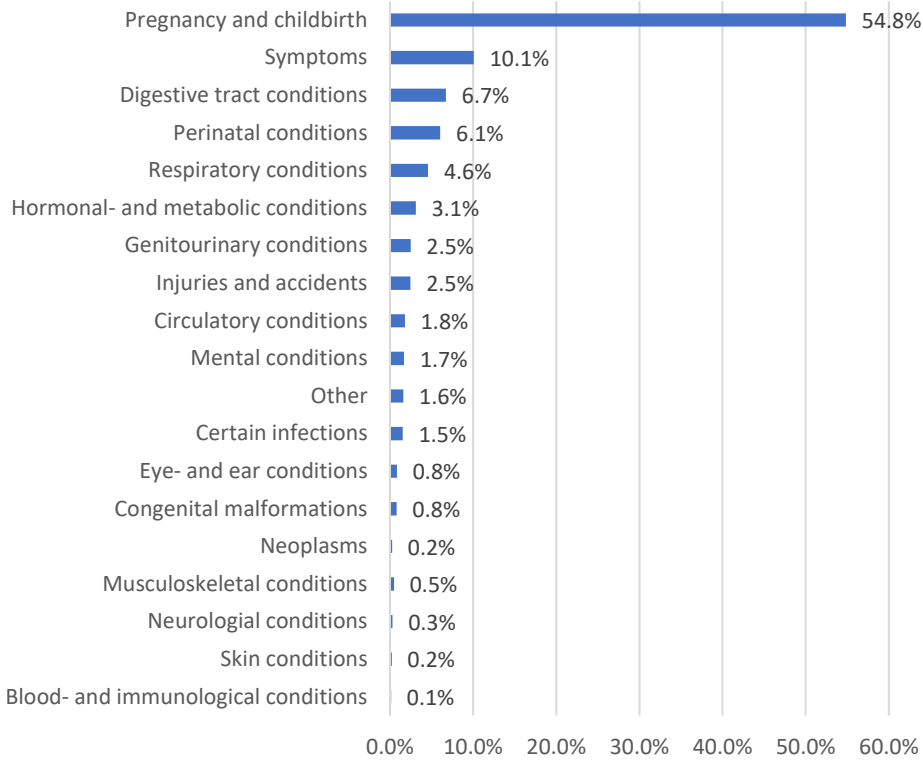
Mean age at admission for females and males respectively (25.7 and 19.6 years in 2021). Average age for men have returned to values closer in 2019 (16.0 years).

770

Average referrals per month to the hospital most frequented by refugees. The number of referrals/population in the region is observed disproportionate for some regions which is because of the inter-region referrals based on the capacity and services availability.

Section 2: Reason for referrals

FIGURE 7: ICD-10 DIAGNOSTIC CATEGORY ON DISCHARGE, AS PROPORTION OF APPROVED REFERRALS (N=65,112)



Key Findings

35,711

Referrals required pregnancy related care (55% of total referrals)

There is a slight decrease from 2021 (58% of total referrals)

34,738

Referrals for delivery (53% of total referrals)

There is a slight decrease from 2021 (35,387 referrals for delivery; 57% of total referrals)

31%

Deliveries by caesarean section. Slight increase since 2021 (30%)

FIGURE 8.1: Pregnancy and Childbirth

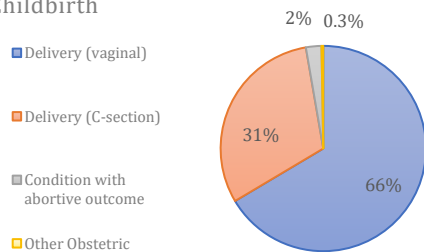


FIGURE 8.2: Symptoms

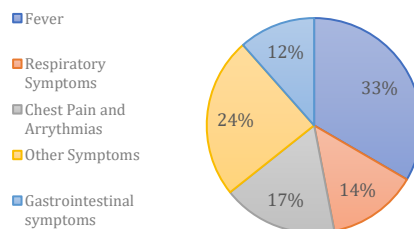


FIGURE 8.3: Certain infections

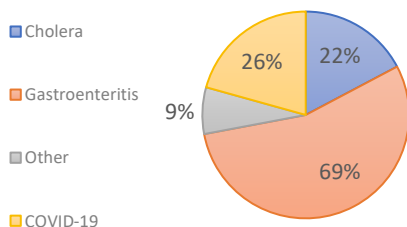
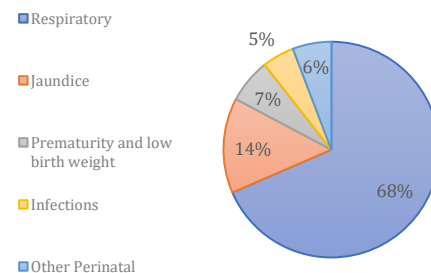
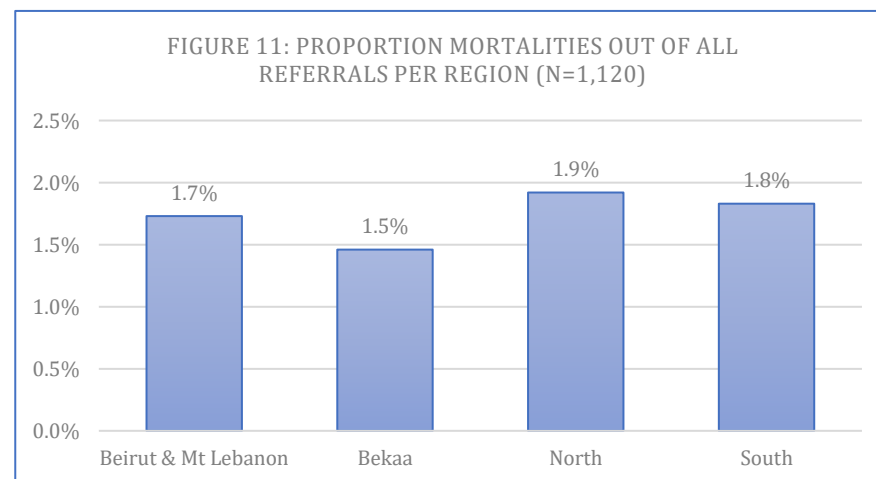
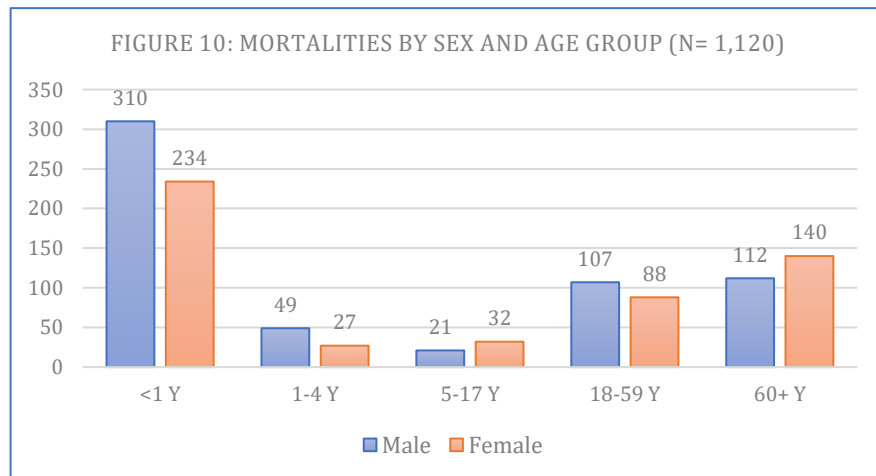
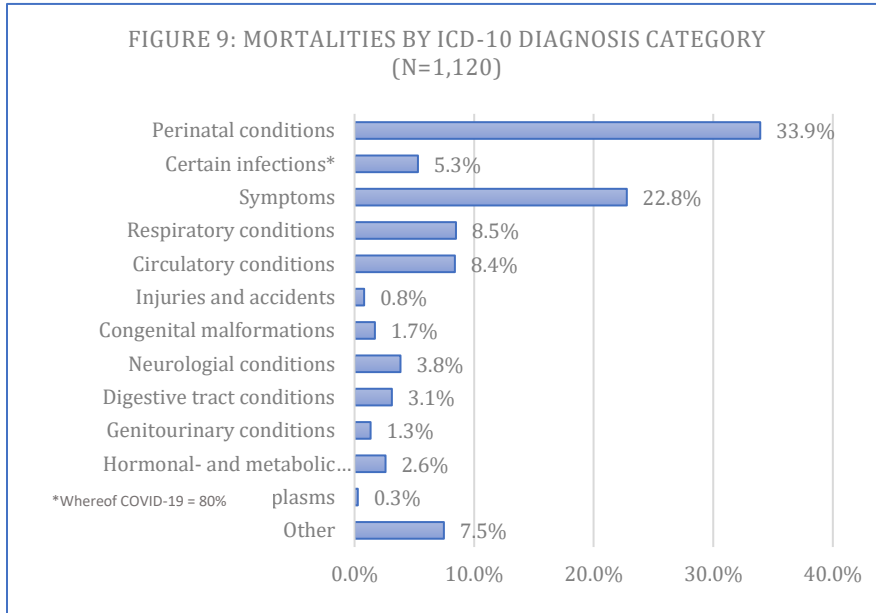


FIGURE 8.4: Perinatal Conditions



This section contains information about the diagnosis and the origin extracted from the TPA database.



Key Findings

1,120 of beneficiaries referred died while hospitalized. Corresponding number for 2021 was 1465 out of 62,049 referrals.

1.7% of the ones referred died (2.4% in 2021)

4.1% of deaths were due to COVID-19 (21.1% in 2021)

48.6% of the 1,120 deaths occurred among children under one year of age (increase from 44% in 2021).

37% (414 mortalities) were neonatal mortalities in the hospital amongst those receiving referral health care supported by UNHCR (In 2021, 33% and 487 mortalities respectively)

6 Maternal mortalities among UNHCR supported referrals (7 in 2021).