

Health Care Programme - Lebanon

May 2021

Ten years into the Syria crisis, Lebanon continues to host the largest number of refugees per capita in the world, with the Government estimating that 1.5 million Syrian refugees are present in the country, in addition to some 14,800 refugees of other nationalities, mostly Iragis.

The COVID-19 pandemic came at a time when Lebanon was reeling under a serious economic and financial crisis, thus exacerbating the socio-economic vulnerabilities of both Lebanese and refugees. 9 in 10 Syrians now live below the extreme poverty line and have fallen deeper into debt.

As health services are largely privatized in Lebanon and are under further pressure due to the pandemic, accessing basic and lifesaving care has become more challenging for refugees who are increasingly struggling to meet their most basic needs including food, shelter and health care.

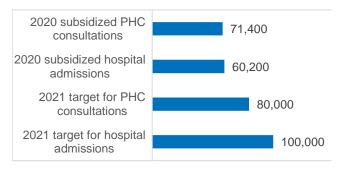
UNHCR'S RESPONSE

UNHCR co-leads the health sector as part of the inter-agency coordination under the framework of the Government-led Lebanon Crisis Response Plan. UNHCR helps refugees to access **primary health care** (PHC) services such as free childhood vaccinations, subsidized consultations for acute illnesses, reproductive health, non-communicable diseases and mental health, as well as subsidized diagnostic tests for the most vulnerable groups at 125 supported PHC centres across the country. Vaccines and essential acute medicines are provided free of charge, with a small handling fee for chronic disease medicines.

Moreover, UNHCR is the main humanitarian agency working to increase access to **secondary and tertiary health care** for refugees in Lebanon at a network of 34 contracted hospitals. Hospital bills for lifesaving, emergency and obstetric care for refugees are subsidized under a cost-sharing scheme whereby UNHCR covers 75 per cent of the cost of hospitalizations above USD 100 up to USD 2,900. To reduce the financial burden on refugees, the patient share is capped at USD 800 and UNHCR pays the remainder up to a maximum of USD 15,000. Treatment as a consequence of SGBV, torture and acute malnutrition, as well as COVID-19 is fully covered.

KEY FIGURES

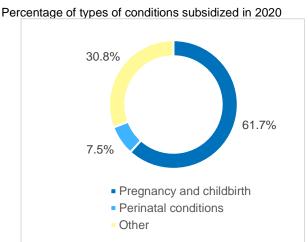
Targets and achievements



^{* 2021} targets for PHC consultations and hospital admissions are based on an overall needs assessment as well as projections of refugees' needs within the evolving context.

BREAKDOWN OF SUBSIDIZED HOSPITALIZATIONS

Types of interventions



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REMAINING GAPS

Refugees with conditions requiring long term, specialized and high-cost treatment (such as cancers, chronic haematological, endocrine, immunological and neurological conditions) are not covered by UNHCR and very few other actors assist refugees with such conditions. In addition, diagnostic tests carried out at out-patient level for severe but non-urgent health conditions are not covered. This can include expensive radiological procedures (MRI, CT and PET-scans) as well as laboratory examinations.

COVID-19 RESPONSE

In addition to its regular health care programme, UNHCR has been supporting the national COVID-19 response since March 2020, in close collaboration with WHO and other partners. UNHCR has focused on three main areas of intervention, namely **prevention** through community engagement and awareness-raising, **containment** of transmission through the setting up of isolation procedures in overcrowded settings and **treatment** through the expansion of the national hospitalization capacity for case management. Under the latter, UNHCR has provided equipment and supported renovation works to add 100 intensive care unit beds and is making available up to 800 regular beds for several hospitals across Lebanon to improve the health infrastructure and decrease competition for care.



FINANCIAL INFORMATION

UNHCR Lebanon requires **USD 64.5 million** to sustain access to basic and lifesaving health care for refugees and other persons of concern in 2021.

UNHCR is grateful for the support provided by donors who have contributed to the health programme as well as major donors of flexible and unearmarked funds in 2021:

Belgium | Canada | Denmark | European Union | Finland | France | Germany | Ireland | Italy | Netherlands | Norway | Private donors | Sweden | Switzerland | United States of America

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