Key figures

- 1,119,585 Individuals registered or pending registration
- 41 # UNHCR supported primary health centres
- 5 # UNHCR supported mobile clinics
- 68 # UNHCR supported hospitals

June developments

- 31,000 patients received primary health care with UNHCR support this month. The top three consultations were for ante-natal care, respiratory tract infections, and routine child care.
- Over 4,555 people received life-saving care and support in June. The top demands for hospitalization were obstetric care followed by respiratory tract infections.
- Following a recent ministerial decision, UNHCR has started putting in place an alternative system of medical procurement with a view to preventing illegal trade of medical drugs and misuse.
- UNHCR organized workshops in field offices to improve referrals for refugees between Primary Health Centres and hospitals.
- The Ministry of Public Health (MOPH) have received medical equipment as part of institutional support to improve surveillance systems.

Achievements: January - June

<table>
<thead>
<tr>
<th>Activity</th>
<th>reached January-June</th>
<th>2014 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary health care (including reproductive and mental health)</td>
<td>162,074</td>
<td>240,000</td>
</tr>
<tr>
<td>Life-saving referral healthcare</td>
<td>29,897</td>
<td>60,000</td>
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<tr>
<td>Health education</td>
<td>200,000</td>
<td>700,000</td>
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</table>

Needs

As a consequence of the violence in Syria and the destruction of public infrastructure, many refugees arrive in Lebanon with health conditions that require immediate attention. Others have developed health problems during displacement related to trauma and substandard living conditions. 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. In light of their limited financial resources, refugees need support in accessing primary, secondary and tertiary health care within the public and private health care systems.
Challenges

Refugees are facing difficulties in getting 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 lack of trained health personnel. Visits of mobile medical units are in place to address this obstacle, but providing coverage in all areas remains a challenge. UNHCR’s existing network of 41 primary health care centres needs strengthening in order to offer comprehensive services and adequate follow-up for chronic conditions.

Needs for health care exceed available resources: With the daily increase in the number of refugees, UNHCR resources are not able to meet all health care needs. 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 caesarean section and care of premature infants) are extremely costly.

High cost of health care:
Refugees are charged the same medical fees as Lebanese nationals. Despite contributions by UNHCR and other partners in health centres supported by the humanitarian community, many refugees still find it difficult to cover the costs of medical treatment. In addition, medications and diagnostic tests are frequently overprescribed thereby increasing costs borne by both the refugees and UNHCR. Moreover, some providers require upfront payment of costs that are not covered by UNHCR.

Strategy

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

- **Primary Health Care:**
  UNHCR supports a network of primary health care centres, which serve as the entry point for refugees needing medical care. Through its partners, UNHCR covers most of the consultation fees for all refugees and 85% of the cost of diagnostic procedures for selected groups (including pregnant women, children under 5 and adults over 65 years). In addition, UNHCR is working to expand the existing network of mobile medical units to ensure free of charge access to the most vulnerable refugees and those living in remote locations. UNHCR prioritizes essential services for those most in need, especially reproductive healthcare, services for infants and young children (including immunizations and adequate infant and young child feeding), and mental health care services. By improving access to appropriate primary health care services, UNHCR aims to minimize the need for secondary health care.

- **Secondary and Tertiary Health Care:**
  UNHCR supports secondary and tertiary health care in life-saving and emergency situations only. 75% of all emergency life-saving care and cost of delivery are covered. Moreover, UNHCR has established an exceptional care committee to review exceptional cases and decides based on prognosis, treatment plan and cost criteria.

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); Lebanese Popular Association for Popular Action (AMEL) Restart Center and Association Justice, Misericorde (AJEM) and UNICEF.