Overview
UNRWA’s goal is to ensure universal access to quality comprehensive services for Palestine refugees, prevent disease and promote family health. Primary Health Care remains the backbone of the Agency’s Health Programme. However, given the limited access of Palestine refugees to public health care in Lebanon, and in the absence of health insurance for 95% of the refugee population, UNRWA Lebanon goes beyond its usual role by absorbing the costs of secondary and tertiary health care incurred by refugees.

According to the Socio-Economic survey conducted in 2010 by the American University of Beirut and UNRWA, two-thirds of Palestine refugees residing in Lebanon are considered as poor and live on less than US$ 6 per day. A single case of acute illness can plunge a family further into poverty. Furthermore, a third of Palestine refugees living in Lebanon suffer from chronic diseases such as cancer, multiple sclerosis, hypertension or cardiac diseases. Mental health indicators are also alarmingly high, with 21% of refugees reporting that they experience depression or anxiety.

UNRWA Lebanon’s Response
In 2009, an assessment commissioned by UNRWA showed that, while the Agency’s Primary Health Care programme was quite efficient, its hospitalization policy needed to be reviewed in order to increase the coverage and accessibility of refugee patients.

The number of hospital beds was very low, with only 5.5 beds per 10,000 inhabitants. The flat rate practiced by hospitals encouraged the treatment of minor medical problems that could have been cured in emergency rooms, thereby restricting refugee patients’ access to hospital care. The assessment also showed that patients requiring tertiary care were particularly poorly covered. UNRWA’s overall referral system was very weak, with around half of Palestine refugee patients relying on self-referral.

Following this assessment, UNRWA launched a multi-pronged reform of its health programme in order to expand hospitalization services and increase the coverage of tertiary care services while enhancing primary health care.

Primary care
- UNRWA’s Primary Health Care Programme includes general consultations for acute and sub-acute medical problems, maternal and child health services, non-communicable disease programmes, and provision of essential medications.
- Primary Health Care is delivered through 28 health centres across Lebanon. Some of UNRWA clinics offer specialized consultations in gynaecology, cardiology and ophthalmology, as well as preventive and curative dental facilities. Many UNRWA health centres also offer laboratory services and radiology tests.
- As part of the health reform, an appointment and triage system is being piloted in three health centres, in order to improve the patients’ throughput. A comprehensive school health programme was introduced, while the management of medical supplies was improved.
- Lastly, the human resources were restructured, and a set of indicators were developed in order to enhance the quality of the programme.
Invest in Health

At a glance

- Around 51,000 active family files are registered across all UNRWA Lebanon health centres.
- The reported rate of chronic illnesses for Palestine refugees is 31%, double the national average. The types of chronic illness reported include: hypertension (32%), asthma (9%), diabetes (8%), rheumatism (6%) and heart problems (4%).
- On average, Palestine refugee households pay US$ 1,228 for hospital care, which is far beyond the means of a population comprising 66% of persons living on less than US$ 6 per day.
- UNRWA helps around 22,000 patients per year to cover the cost of secondary treatment and 4,000 patients to cover expenses related to tertiary care treatment.
- Thanks to the reform, the number of hospital admissions – secondary and tertiary – increased by 40% in 2010.

Secondary care

- As part of UNRWA’s health care reform efforts, all hospital contracts were reviewed to improve the coverage and accessibility to quality hospitalization services for Palestine refugees. UNRWA now has 36 contracts in place with the Palestine Red Crescent Society, Lebanese government-run and private hospitals. All secondary care services are now fully covered by UNRWA, with a co-payment by patients in the case of prosthetics or non-generic medications.
- A set of performance indicators was designed to monitor and evaluate the hospitals’ performance on a yearly basis, thereby improving the quality of care.

Tertiary care

- Usually requiring high technology equipment and specialized consultative care, tertiary treatment is more costly and cannot be fully covered by the Agency. These treatments, costing upwards of US$10,000, are beyond the means of a population that suffers from endemic poverty and marginalization.
- The Agency reached an agreement with the Ministry of Public Health to provide discounted medications for cancer and other catastrophic diseases. This agreement, which came into force at the end of March 2011, enables Palestine refugees to save between 15% and 70% on their medication expenses.
- Recognizing the challenges faced by refugees, in May 2011, UNRWA increased its coverage from 30% to 40% thereby increasing the ceiling per admission from US$ 2,000 to US$3,000.
- Concurrently, in April 2011, UNRWA Lebanon set up a separate programme entitled “CARE” (Catastrophic Ailment Relief Programme) to provide a financial assistance for those requiring long and very costly treatment, in addition to what they already receive under the Agency’s tertiary programme. These catastrophic conditions include but are not limited to cancer, cardiovascular and neurological diseases, multiple sclerosis and other illnesses. UNRWA has mobilized funding from existing projects and private donations and is currently seeking additional support from other donors.

UNRWA’s Fundraising Priorities

- Hospital care, in particular tertiary care
- Additional support to its CARE programme for catastrophic diseases
- Small scale, targeted interventions to counter the endemic problems of diabetes and mental illness
- Medications and medical supplies and upgrading of health care centres

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Source: AUB/ UNRWA Socio-economic Survey of Palestinian Refugees in Lebanon, 2010