LEBANON

People in need¹

3.7 million

including:

LEBANESE

2.2 MILLION

SYRIAN REFUGEES

1.3 MILLION

PALESTINIAN REFUGEES

119 000

MIGRANTS

87 000

People targeted¹

3.1 MILLION

Funding requirement

US\$ 48 MILLION

¹Figures represent People in Need and People Targeted for overall humanitarian assistance from the Global Humanitarian Overview 2025. Data specific to health assistance will become available following the publication of the Humanitarian Response Plan for this emergency.



CONTEXT

Lebanon's health sector is under unparalleled strain, compounded by years of socio-economic deterioration, regional instability, and recent escalations in violence along its southern border as well as across the country since September 2024. More than 1.3 million people have been internally displaced, including refugees already burdened by high poverty rates. Infrastructure damage, escalating displacement, and ongoing economic decline have worsened access to healthcare and essential services, leaving the health sector on the brink. This crisis builds on a complex, multi-year context, with Lebanon hosting millions of Syrian and Palestinian refugees, grappling with economic collapse, political stalemates, and managing the residual impacts of the COVID-19 pandemic and the Beirut Port explosion. As of 2024, poverty affects over 80% of Lebanese citizens and 90% of Syrian refugees, rendering healthcare unaffordable for many.

In the aftermath of the signature of the ceasefire in November 2024, the military escalation has led to the closure of at least 130 primary health centers and 7 hospitals. The health system is under immense strain, grappling with almost 4000 fatalities and more than 16 000 injuries. Unprecedented attacks on healthcare facilities have not only disrupted services but also resulted in severe injuries and fatalities among healthcare workers.

Shortages of medical supplies, skilled health personnel, and essential medicines are compounding the crisis, leaving countless vulnerable individuals without access to critical treatments, particularly for trauma care and non-communicable diseases. The risk of communicable disease outbreaks is heightened, driven by overcrowding, poor sanitation, and the widespread disruption of healthcare services.

In October 2024, WHO Lebanon launched a Flash Appeal for USD 50 million to sustain urgent health interventions over six months, in alignment with the UN Flash Appeal. Concurrently, the Lebanese Ministry of Public Health (MoPH), WHO, and partners developed a comprehensive health sector roadmap to address immediate humanitarian needs, facilitate early recovery, and build long-term resilience in the health system. This phased approach aligns with Lebanon's National Health Strategy Vision 2030, prioritizing strengthened health system governance, expanded primary healthcare, and greater self-sufficiency in essential medical supplies.

Under the 2025 Health Emergency Appeal, WHO reaffirms its commitment to this multi-faceted strategy, emphasizing an integrated humanitarian response alongside scalable early recovery and resilience-building initiatives. These coordinated interventions underscore WHO's pivotal and unique role in Lebanon: stabilizing trauma care, ensuring continuity of essential services, and reinforcing public health surveillance to protect Lebanon's vulnerable populations amid an escalating crisis.



WHO'S STRATEGIC OBJECTIVES

- 1. Strengthening integrated disease surveillance and laboratory capacity for effective public health response: To boost Lebanon's early warning systems and disease surveillance, WHO will focus on strengthening cholera response through water, sanitation, and hygiene (WASH) interventions and coordinated vaccination efforts, helping to mitigate and contain potential outbreaks. This will reinforce Lebanon's laboratory and disease surveillance capacity for more effective public health responses to emerging threats.
- 2. Ensuring scalable clinical care and protection during health emergencies: WHO aims to enhance Lebanon's ability to handle mass casualties by providing targeted support for trauma care, essential medical supplies, and surge support, especially at critical health facilities. WHO will support primary healthcare centres, mobile clinics and mental health services in high-need areas to ensure uninterrupted access to essential healthcare for vulnerable populations, including displaced persons.
- 3. Strengthening community engagement and resilience through comprehensive public health interventions: To build community resilience, WHO will stabilize health services across Lebanon, focusing on restoring health infrastructure, expanding primary care access, and supporting essential services for trauma care, chronic disease management, and mental health. Rapid training and surge capacity initiatives will address urgent needs in conflict-affected areas, fostering robust community engagement in public health.
- **4. Enhancing health emergency preparedness and response capacities:** Laying the groundwork for a resilient health system, WHO will support public health governance, digital health infrastructure, and the promotion of universal health coverage. Initiatives to increase local production of essential medicines, retain skilled health workers, and expand renewable energy sources in health facilities will help secure sustainable healthcare access for Lebanon's most vulnerable.

Supplies are extremely important because those hospitals have been working at full capacity and anything that improves their readiness means that they can carry out a better response and improve access to necessary and much needed healthcare. This also sends a very important signal of solidarity from the international community to Lebanon in these difficult times.

Dr Firass Abiad, Lebanese Minister of Public Health





WHO 2025 RESPONSE STRATEGY

WHO's 2025 response strategy for Lebanon prioritizes a comprehensive, phased approach that addresses urgent humanitarian health needs while building long-term resilience. Following escalating violence and a surge in health needs, WHO launched an Operational Response Plan in October 2024, focusing on trauma care, continuity of essential health services, and outbreak prevention. The proposed strategy for 2025 centers on stabilizing Lebanon's healthcare system, expanding access to critical services, and fostering close collaboration with MoPH and partners for a coordinated and impactful response.

In 2024, WHO, in collaboration with MoPH and local partners, implemented key initiatives to address immediate health needs. These included the delivery of 225 metric tons of medical supplies, supporting hospitals and clinics across the country. WHO also established two mobile medical units and satellite clinics, which provided consultations to displaced persons in 8 shelters. Efforts to strengthen disease surveillance proved critical, aiding MoPH in detecting a cholera case in October 2024 and preventing further spread through targeted and effective measures. In addition, WHO coordinated and supported training on mass casualty management, along with advanced trauma care and mental health in emergencies, bolstering mental health services for displaced populations and frontline workers. WHO also played a pivotal role in maintaining and reinforcing the Public Health Emergency Operations Center (PHEOC), a key example of the solid partnership with MoPH, ensuring that health facilities were prepared for rapid emergency responses.

For 2025, WHO's strategy is structured around a dual approach that meets both immediate health needs and early recovery goals, closely aligned with Lebanon's health sector roadmap. WHO will continue to strengthen Lebanon's capacity for mass casualty management by providing trauma kits, medical supplies, and essential resources to frontline hospitals. Sustaining essential healthcare services for vulnerable groups remains a priority, with expanded support for primary healthcare centers and mobile units that deliver mental health, non-communicable disease management, and maternal and child health services.

WHO's partnership with MoPH extends to supporting Lebanon's transition to health resilience. Early recovery efforts will focus on restoring critical health infrastructure and addressing workforce shortages through training and surge capacity support. Long-term resilience efforts will include developing local production of essential medicines, supporting digital health systems, and enhancing health financing mechanisms to secure universal health coverage.

WHO will continue its support for outbreak early detection and response, as the country is in increasing risks for flare-ups and outbreaks of communicable diseases.

Through its key coordination role, WHO collaborates with local, regional, and global partners to align resources, promote transparency, and optimize resource allocation. WHO's technical expertise, coupled with MoPH's national stewardship, underpins Lebanon's journey from crisis to recovery, safeguarding equitable healthcare access while fostering a resilient health system for the future

OPERATIONAL PRESENCE

WHO currently employs 27 staff under fixed-term and temporary appointments, 6 active Surge staff and 4 United Nations Volunteers based in Beirut Duty Station.

WORKING WITH PARTNERS

The cluster system is not activated for Lebanon's health sector. Instead, the country leverages its existing humanitarian and developmental coordination architecture. The health sector operates under the leadership of the MoPH with complementary support from the United Nations (UN) and NGO partners. WHO and UNHCR serve as co-leads for the sector, with coordination efforts jointly facilitated by WHO, UNCHR and Amel Association. A total of 58 health partners operate under the health sector coordination mechanism







KEY ACTIVITIES FOR 2025

- Strengthening disease surveillance: Under the updated national surveillance strategic framework, strengthen integrated disease surveillance systems by training 500 healthcare workers in data collection and reporting at priority health facilities and by creating a unified "One Health" platform.
- **Enhancing laboratory capacity:** Enhance laboratory capacity by upgrading one central laboratory and four peripheral laboratories to improve pathogen detection and diagnostics, alongside establishing a robust external quality assurance program.
- Improving emergency response capabilities: Distribute 100 trauma kits to key health facilities to bolster emergency response capabilities.
- **Expanding mental health support:** Train 500 healthcare workers in mental health management to enhance psychosocial support services during emergencies.
- **Ensuring continuity of essential healthcare:** Ensure the continuity of essential healthcare services by supporting over 200 000 patients with chronic medications.
- **Building frontline healthcare capacity:** Train 1000 health workers in trauma care, mass casualty management, and infection prevention to strengthen frontline response and healthcare continuity. Additionally, build the governance capacity of managers to improve emergency response coordination.
- Supporting human resources in public health: Maintain support for human resources within the Ministry of Public Health, including 100 staff members working in the Ministry, the Public Health Emergency Operations Center (PHEOC), and epidemiological surveillance units, as well as nurses and doctors at public hospitals.



We organize the distribution of the trauma supplies to all hospitals taking into account that not only hospitals in the Red Zone should be given kits but also in the Yellow Zone and Green Zone as they served as immediate back-up during the last emergency we had. We serve everyone, including health facilities across the country. Thanks to WHO support, we are able to accelerate and structure this coordination.

Wahida Ghalayini, Public Health Emergency Operation Center (PHEOC) Manager





ACHIEVEMENTS IN 2024 THE PUBLIC HEALTH EMERGENCY OPERATION CENTRE BRINGS LEBANON'S HEALTH SECTOR TOGETHER





On 17 September, amid chaos from an explosion in Beirut causing over 3000 severe injuries, the Public Health Emergency Operation Centre (PHEOC) coordinated Lebanon's emergency health response. Despite overwhelming demands, Beirut's emergency rooms remained functional. About 2800 victims were swiftly directed to available hospitals, as PHEOC managed logistics, assessing the injured and matching them to appropriate facilities. Hospitals were mapped by district, with real-time updates from volunteers verifying bed availability and injury statuses via calls and a dedicated WhatsApp group. When Mount Lebanon Hospital reached capacity, paramedics, the Lebanese Red Cross, and Civil Defense teams received immediate redirection orders, enabling continued care for patients.

WHO has played a key role, equipping PHEOC with essential ICT equipment, furniture, communication tools, staffing and continuous technical assistance. The PHEOC functionality was tested and upgraded during the cholera outbreak in October 2022 and further strengthened to respond to the fulminating military escalation in 2023-2024. WHO also formulated emergency plans for cholera, mpox, and trauma and conducted extensive training in mass casualty management, empowering over 5600 healthcare workers across 125 hospitals. WHO's collaboration with Lebanon's Ministry of Public Health includes building assessment and reporting tools within DHIS2, enhancing data capture and sharing with stakeholders. This partnership strengthens Lebanon's emergency health infrastructure, ensuring coordinated and effective responses in times of crisis.

A second round of MCM activation drills was launched for 13 hospitals previously trained on Mass Casualty Management. WHO has also supported community-based organization who played a crucial role during this conflict by providing supplies (trauma bag packs, first aid kits, etc) as well as capacity-building.

FOR MORE INFORMATION

Dr. Abdinasir Abubakar, WHO Representative a.i., WHO Lebanon, abubakara@who.int

Dr. Alissar Rady, Team Lead, WHO Lebanon, radya@who.int

Alessandro Bellelli, External Relations and Partnerships Specialist, WHO Lebanon, bellellia@who.int





2025 FUNDING REQUIREMENTS

LEBANON HUMANITARIAN EMERGENCY	
EMERGENCY RESPONSE PILLAR	FUNDING REQUIREMENTS (US\$ '000)
Collaborative surveillance	1903
Surveillance, case investigation and contact tracing	1376
Diagnostics and testing	527
Community protection	1549
Risk communication and community engagement	193
Travel, trade and points of entry	38
Infection prevention and control in communities	43
Vaccination	1275
Safe and scalable care	37 988
Infection prevention and control in health facilities	519
Case management and therapeutics	10 791
Essential health systems and services	26 678
Access to countermeasures	2478
Operational support and logistics	2478
Emergency leadership	4132
Leadership, coordination, PSEAH and monitoring	4132
Grand Total	48 051

