REPUBLIC OF LEBANON
MINISTRY OF PUBLIC HEALTH

World Health Organization
Lebanon

Executive Summary

Lebanon National Health Strategy: Vision 2030

Two-Year Review

FORWARD

It is with a deep sense of responsibility and reflection that we present this two-year review of the National Health Strategy: Vision 2030, launched in January 2023. This report chronicles achievements that reflect the collective vision and resilience guiding us through one of Lebanon's most challenging periods.

When I assumed office in September 2021, Lebanon's health system faced an unprecedented convergence of crises: severe drug shortages, the lingering effects of a global pandemic, the challenges of hosting a large refugee population, healthcare workforce migration, and a deep economic crisis and the collapse of financial protections that left many reliant on out-of-pocket healthcare payments.

In the following years, these lingering challenges were compounded by a cholera outbreak, a global economic slowdown, and the devastating impacts of war, including mass casualties, widespread displacement, and the targeting of healthcare workers and facilities.

In response, the Ministry of Public Health adopted a transformative approach: leveraging these crises as opportunities to rebuild and strengthen foundational health systems. This approach not only ensured resilience and preparedness but also drove systemic improvements that address immediate needs while paving the way for long-term reform.

The accomplishments of the past two years, as detailed in this review, reflect the collective efforts of the MoPH, our partners, and the health sector:

- Strengthened Governance and Collaboration: Governance was reinforced through strong partnerships with academia, professional organizations, NGOs, international agencies, and donors. Equally important, the Ministry actively integrated the perspectives of patients, ensuring that policies and reforms were aligned with the needs of those they serve. These collaborative efforts laid the foundation for multiple strategic documents and roadmaps, fostering a transparent and coordinated approach to health sector development.

- Modernization and Improvement of Systems: Initiatives like MediTrack, Aman, audits, and accreditation programs have promoted transparency, accountability, and quality in healthcare. Specifically, the introduction of the National Cancer Plan represents a critical step toward modernizing cancer care and ensuring equitable access to treatment.

- Enhanced Healthcare Delivery across the Spectrum: The expansion of the primary healthcare network, mental health integration, emergency care coverage, and strengthening of public hospitals reflect our commitment to equitable and quality care across the continuum.

- Resilience Amid Crises: The activation of the PHEOC showcased Lebanon's adaptability in responding to cholera, mass casualties, and other emergencies, while also fostering greater preparedness for future challenges.

While these achievements are significant, substantial work lies ahead. Structural reforms, sustainable financing mechanisms, and a unified health insurance framework remain critical priorities. As a new government takes office, we hope this review serves as both a record of progress and a roadmap for future action.

The past three years have shown that Lebanon's health system is more than just a sector—it is a cornerstone of national resilience and a symbol of hope for rebuilding trust. Let this review inspire all stakeholders—local and international, public and private—to renew their commitment to achieving universal health coverage and building a future where equitable and quality care is accessible to all.

Finally, I would like to extend my gratitude to the healthcare professionals, scientific committees, NGOs, international organizations, donors, and all other partners who have stood with us throughout these challenges. A special deep appreciation goes to the dedicated team at the Ministry of Public Health, whose tireless efforts and unwavering commitment have been instrumental in achieving the progress detailed in this review. Together, we have laid the groundwork for a healthier, more equitable Lebanon.

Dr. Firass Abiad

Minister of Public Health, Lebanon

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Ministry of Public Health, 2025

ABBREVIATIONS

3RF: Reform, Recovery, and Reconstruction Framework
3W: Who, What, Where (used for activity mapping in crises)
ACLS: Advanced Cardiac Life Support
ADR: Adverse Drug Reactions
AE: Adverse Events
AEFI: Adverse Events Following Immunization
AFD: Agence Française de Dévelopement
ALMA: Australian Lebanese Medical Association
ALS: Advanced Cardiac Life Support
AMR: Antimicrobial Resistance
BFHI: Baby-Friendly Hospital Initiative
BLS: Basic Life Support
CBS: Community-based Surveillance
CCC: Command and Control Center
CHW: Community Health Workers
CMR: Clinical Management of Rape
CNAH: National Committee for Hospital Accreditation
COOP: Cooperation of State Employees
COVID-19: Coronavirus Disease of 2019
CPHL: Central Public Health Laboratory
CPT: Current Procedural Terminology
CSO: Civil Society Organization
DHIS2: District Health Information Software, version 2
ECD: Early Childhood Development
EIB: European Investment Bank
EMR: Electronic Medical Records
EMS: Emergency Medical Services
EMT: Emergency Medical Team
EPI: Expanded Program on Immunization
ER: Emergency Room
ESSN: Emergency Social Safety Net
ESU: Epidemiologic Surveillance Unit
EU: European Union
FAO: Food and Agriculture Organization
FAQ: Frequently Asked Questions
GBV: Gender-Based Violence
GMP: Good Manufacturing Practices
GSDP: Good Storage and Distribution Practices
GSHS: Global School Health Survey
HeRAMS: Health Resources and Services Availability Monitoring System
HIS: Health Information System
HIV: Human Immunodeficiency Virus
HPV: Human Papillomavirus Vaccine
HTA: Health Technology Assessment
IBBS: Integrated Bio-Behavioral Survey
ICD-11: International Classification of Diseases, version 11
ICU: Intensive Care Unit
IDPs: Internally Displaced Persons
IDRAAC: Institute for Development, Research, Advocacy and Applied Care
IEC: Information, Education, and Communication
IMC: International Medical Corps
INGO: International Non-Governmental Organization
IOM: International Organization for Migration
IPC: Infection Prevention and Control
IRC: International Rescue Committee
IT: Information Technology
IYCF: Infant and Young Child Feeding
KAP: Knowledge, Attitudes, and Practices
LASA: Look-Alike Sound-Alike
LAU: Lebanese American University
LDA: Lebanese Drug Administration
LEMSIC: Lebanese Medical Students' International Committee
LFET: Lebanese Field Epidemiology Training
LIMA: Lebanon Integrated Micronutrient, Anthropometric survey
LIU: Lebanese International University
LMS: Logistics Management System
LNPVP: Lebanese National Pharmacovigilance Program
LPSA: Lebanese Pharmacy Students' Association
LPSP: Lebanese Primary Healthcare Subsidization Protocol
LRC: Lebanese Red Cross
LRP: Lebanon Response Plan
LSFM: Lebanese Society of Family Medicine
LSGP: Lebanese Society for General Practice
LSOG: Lebanese Society of Obstetrics and Gynecology
LU: Lebanese University
MCI: Mass Casualty Incidents
MCM: Mass Casualty Management
MEHE: Ministry of Education and Higher Education
MENA: Middle East and North Africa
MERA: Mobile Electronic Reporting Application
MHPSS: Mental Health and Psychosocial Support

ABBREVIATIONS

MMR: Measles, Mumps, and Rubella vaccine
MoA: Ministry of Agriculture
MoI: Ministry of Interior
MoJ: Ministry of Justice
MoPH: Ministry of Public Health
MoSA: Ministry of Social Affairs
MoWE: Ministry of Water and Energy
MPH: Master of Public Health
NAP: National AIDS Program
NCD: Non-Communicable Diseases
NCP: National Cancer Plan
NGO: Non-Governmental Organization
NHA: National Health Accounts
NHS: National Health System
NIC: National Influenza Center
NICU: Neonatal Intensive Care Units
NITAG: National Immunization Technical Advisory Group
NMHP: National Mental Health Program
NMHS: National Mental Health Strategy
NPTP: National Poverty Targeting Program
NSP: National Strategic Plan
NSSF: National Social Security Fund
NTP: National Tuberculosis Program
OCV: Oral Cholera Vaccine
PAR: Protection Against Rape
PCPC: People-Centered Primary Care
PHC: Primary Health Care
PHENICS: Primary Healthcare Electronic Information and Coordination System
PHEOC: Public Health Emergency Operations Center
PIVI: Partnership for Influenza Vaccine Introduction
PrEP: Pre-Exposure Prophylaxis (HIV prevention)
PSU: Primary Healthcare Satellite Unit
PUI: Première Urgence Internationale
PV: Pharmacovigilance
PwD: Person with Disability
QA: Quality Assurance
QC: Quality Control
REAYA: Lebanese Primary Healthcare Subsidization Program
SH+: Self-Help Plus
SHA 2: System of Health Accounts, version 2
SOP: Standard Operating Procedure
SRH: Sexual and Reproductive Health
STEPs: STEPwise approach to Non- Communicable Disease Risk Factor Surveillance
TB: Tuberculosis
ToR: Terms of Reference
ToT: Training of Trainers
TPA: Third Party Administrator
UHC: Universal Health Coverage
UN: United Nations
UNFPA: United Nations Fund for Population Activities
UNICEF: United Nations International Children's Emergency Fund
UoB: University of Balamand
USD: United States Dollar
USJ: Université Saint-Joseph
UTI: Urinary Tract Infection
WASH: Water, Sanitation, and Hygiene
WASH FIT: Water, Sanitation, and Hygiene Facility Improvement Tool
WB: World Bank
YMCA: Young Men’s Christian Organization

SUMMARY OF THE TWO-YEAR PROGRESS SUMMARY OF THE NATIONAL HEALTH STRATEGY

Over the past two years, the National Health Strategy: Vision 2030 has redefined Lebanon's approach to healthcare, transforming crisis management into an opportunity to build a stronger, more resilient, and better-prepared health system. The MoPH has leveraged collaboration, strategic planning, and innovation to turn challenges into catalysts for reform, ensuring progress even in the face of economic and public health crises. This executive summary highlights how targeted reforms in healthcare financing, delivery, emergency preparedness, workforce empowerment, digital transformation, and sustainability have laid the foundation for a system that not only responds to immediate needs but is strategically positioned for long-term success. These efforts, driven by partnerships with local and international stakeholders, underscore a commitment to using adversity as a springboard for lasting, transformative change. Below is a comprehensive overview of the key achievements and milestones that have been realized during this period.

A. Advancing Health Sector Governance

The MoPH has led a transformative effort to strengthen governance within Lebanon's health sector, establishing the NHS as a unifying roadmap for systemic reform and long-term resilience. By adopting a consultative and inclusive approach, the ministry engaged diverse stakeholders to ensure that the strategy addressed both immediate needs and structural challenges. This collaborative process shifted the focus from crisis management to building a sustainable healthcare system capable of withstanding future shocks.

1. Foundational Strategic Frameworks

A cornerstone of the governance reforms has been the development and implementation of strategic documents that define the direction of Lebanon's health system. The National Health Strategy: Vision 2030[1] has served as the primary compass for advancing health sector priorities, while complementary plans such as the National Cancer Plan[2], the Emergency Care Plan, the Neonatal Care Plan, and the Health Digital Transformation Vision[3] and Strategy (currently in its final stages) have provided comprehensive roadmaps for addressing specific health challenges. Together, these documents reflect a holistic vision to modernize and stabilize the healthcare system.

2. Strengthening Legislative and Policy Foundations

Along with the WHO, the MoPH has played a critical role in shaping the UHC law under discussion by the parliamentary committee. Through active engagement, data provision, and expert insights, the ministry ensured alignment between the proposed legislation and the NHS's vision for equitable and sustainable healthcare access. Similarly, the development of the tobacco investment case for Lebanon initiated critical conversations around health taxation policies aimed at reducing tobacco-related diseases while generating revenue for health system improvements.

[1]National Health Strategy: Vision 2030. Available at www.moph.gov.lb/en/Pages/9/1269/الخطط-الاستراتيجية#/en/view/67044/-الاستراتيجية-الوطنية-للقطاع-الصحي-رؤية-٢٠٣٠

[2]National Cancer Plan. Available at www.moph.gov.lb/ar/Pages/9/1269/الخطط-الاستراتيجية#/ar/view/69928/2028-2023-الخطة-الوطنية-لمكافحة-السرطان

[3]Vision for Digital Health Transformation. Available at www.moph.gov.lb/ar/Pages/9/1269/الخطط-الاستراتيجية#/ar/view/70101/-رؤية-الوزارة-حول-التحول-الرقمي-للقطاع-الصحي

3. Data-Driven Decision-Making and Performance Monitoring

The MoPH has prioritized evidence-based policymaking through enhanced data generation and performance monitoring systems. Key resources, including the Health Data Observatory Report[4], National Health Accounts[5], Annual Statistical Bulletin, Disease Surveillance Reports, and survey results such as LIMA[6] and STEP have informed planning and resource allocation. Digital platforms such as PHENICS, MediTrack, and LMS have further strengthened real-time decision-making, enabling continuous improvement throughout the sector. Regular audits and enhanced reporting mechanisms have ensured compliance with national and international standards, reinforcing accountability and transparency.

4. Commitment to Transparency and Learning

The MoPH has demonstrated a strong commitment to transparency through regular performance reviews and the documentation of lessons learned. Milestones in this area include the One-year and Two-year reviews of the NHS[7], the one-year review of the NCP[8], and the publication of insights from the health sector response to the 2024 war on Lebanon, Emerging From Crisis: Health Sector Response and Lessons Learned. These reviews have provided valuable reflections on progress, allowing for strategic refinements and informed decision-making to address emerging challenges.

5. Fostering Collaborative Governance

Effective partnerships and coordinated efforts have been central to strengthening health sector governance. The MoPH has engaged a wide range of stakeholders, including professional orders, scientific committees, NGOs, academic institutions, international organizations, and donors. Scientific committees, such as those overseeing drug authorization, PHC programs, and cancer care, have facilitated evidence-based decision-making, optimized resource allocation, and supported participatory governance. Notable contributions come from the EPI and the NITAG, which have advanced discussions on introducing HPV and influenza vaccines into Lebanon's national immunization schedule. Meanwhile, cancer committees have driven initiatives aligned with the NCP, addressing prevention, early detection, and care.

6. Building Effective Partnerships

Academic institutions and NGOs have been instrumental in addressing health workforce shortages and enhancing capacities through training programs, diplomas, and residency opportunities. These initiatives have strengthened Lebanon's health sector by equipping professionals with the skills to respond effectively to crises while maintaining high standards of care. NGOs have also played a vital role in community outreach and service delivery, particularly for vulnerable populations during times of crisis. Donors and international organizations have provided critical technical and financial support, ensuring the sustainability of these efforts.

[4] Vital Data Observatory Statistics. Available at www.moph.gov.lb/en/Pages/8/14246/vital-data-observatory-statistics
[5] National Health Accounts 2019-2022. Available at www.moph.gov.lb/en/Pages/8/141/national-health-accounts
[6] LIMA survey 2023-2024. Available at www.unicef.org/lebanon/media/11606/file/LIMA_Final%20Report_240912_FINAL.pdf.pdf
[7] National Health Strategy: One-Year Review. Available at https://moph.gov.lb/DynamicPages/download_file/6950
[8] On-Year Review of the National Cancer Plan. Available at https://www.moph.gov.lb/DynamicPages/download_file/7099

7. Encouraging Patient Participation

Patient involvement in decision-making is an essential element of effective healthcare governance, ensuring that policies and services are patient-centered, equitable, and responsive to real-world needs. For example, in Lebanon, the inclusion of cancer patient advocate groups in the development of the National Cancer Plan has been instrumental. These groups provided critical insights into patient challenges, treatment accessibility, and support needs, ensuring that the plan addresses not only clinical priorities but also the psychosocial and financial burdens faced by patients. Additionally, the PCPC Initiative at PHC has reinforced the importance of engaging patients in their healthcare journey.

8. Advocacy and International Engagement

The MoPH's leadership in local and international conferences and public health platforms, such as the NHSWG, LRP, and 3RF, has amplified its voice in advocating for Lebanon's health system. These platforms have facilitated resource mobilization, alignment of health priorities, and coordination of reform initiatives, underscoring the ministry's leadership in addressing the sector's challenges. By integrating strategic frameworks, strengthening collaboration, and committing to transparency and accountability, the MoPH has laid the foundation for a governance model that drives sustainable and equitable health system improvements.

B. Reshaping Healthcare Financing

Recognizing the critical role of sustainable financing in building a resilient health system, the MoPH implemented transformative measures to optimize resource allocation and ensure equitable access to healthcare. One of the key milestones was the shift from traditional item-based budgeting to program-based budgeting, aligning resources with strategic priorities. This approach allocated targeted funding to critical areas, such as the PHC network, the CPHL, and essential human resources, ensuring that these programs could continue to serve as pillars of the health system even during financial crises.

1. Implementing Capitation Models to Ensure Equity and Efficiency

To safeguard access to healthcare for vulnerable populations, the MoPH introduced a capitation-based payment model in approximately 60 PHC centers. Widely regarded as the gold standard in healthcare financing, this model emphasized efficient resource utilization while ensuring equitable service delivery. The REAYA Project, funded through a World Bank loan, further demonstrated the ministry's commitment to providing care for the most marginalized by linking resources to outcomes and addressing the needs of the poorest populations.

2. Reforming Medication Financing and Distribution Systems

In parallel, the MoPH undertook significant reforms in medication financing and distribution. Following the lifting of subsidies, availability of essential medications improved, supported by a structured procurement process aligned with evidence-based disease management protocols. This policy shift also incentivized local pharmaceutical production, contributing to greater system resilience. The introduction of digital platforms, such as MediTrack, further enhanced transparency and accountability in medication distribution, ensuring that cancer and other catastrophic conditions treatments reached patients efficiently while reducing counterfeit medications, smuggling, favoritism, and other malpractices.

3. Revising Hospital Tariffs and Strengthening Public Hospitals

Hospital tariffs and service packages were revised to prioritize essential and life-saving interventions, reducing the financial burden on patients while strengthening the role of public hospitals as safety-net providers. These revisions were complemented by investments in digital systems, such as the Visa hospital billing system, which streamlined service approvals and facilitated real-time tracking of hospital expenditures.

4. Developing a Health Technology Assessment Framework

To institutionalize evidence-based decision-making, the MoPH initiated the development of an HTA framework. With secured funding and trained personnel, this model aims to systematically evaluate medical technologies, treatments, and interventions, ensuring their alignment with national health priorities and cost-effectiveness studies. This represents a critical step toward optimizing resource allocation across the healthcare system.

5. Leveraging Partnerships to Address Funding Gaps

Despite inherent challenges, including the rigidity of governmental budgeting processes, the MoPH leveraged partnerships with international agencies, NGOs, and donors to address funding gaps in critical programs. These collaborations sustained essential services, enhanced healthcare access, and underscored the importance of collective efforts in advancing health financing reforms. Collectively, these initiatives reflect the ministry's commitment to building a sustainable, efficient, and equitable financing system that supports Lebanon's long-term health goals.

C. Strengthening Emergency Preparedness and Response

The establishment of the PHEOC marked a milestone in Lebanon's transition to a proactive and integrated approach to crisis management. As a cornerstone of the NHS, the PHEOC enabled the coordination of multi-stakeholder responses to emergencies, including the cholera outbreak, the 2024 war on Lebanon, and other acute public health challenges. Its role in mobilizing resources, leveraging real-time data, and ensuring seamless communication among health sector partners underscored its transformative impact on Lebanon's emergency preparedness framework.

1. Coordinated Crisis Management Through the PHEOC

During the 2024 war, the emergency response demonstrated its value by addressing the healthcare needs of over 1.2 million displaced individuals. It coordinated efforts across public hospitals, the PHC network, and humanitarian partners, ensuring the continuity of essential services, managing trauma cases, and preventing disease outbreaks. By leveraging real-time data and multi-stakeholder collaboration, the PHEOC exemplified a proactive and systems-based approach to managing emergencies.

2. Enhancing Surveillance and Early Warning Systems

The MoPH prioritized the enhancement of surveillance systems to improve the detection and management of outbreaks. Automated EWARS mechanisms were strengthened to enable timely data collection and rapid response to public health threats. These tools, which shall be further supported by the Pandemic Fund and the EIB-funded project, played a critical role in managing the cholera outbreak and other emerging health challenges.

3. Strengthening Laboratory Capacity

Laboratory capacity was significantly upgraded to support emergency response efforts. Infrastructure improvements and the development of SOPs enhanced diagnostic accuracy and speed. These upgrades ensured that laboratories could provide timely and reliable results during outbreaks and crises, bolstering Lebanon's overall emergency preparedness.

4. Leveraging Digital Tools for Emergency Response

Digital tools were central to the MoPH's emergency preparedness strategy. Platforms like PHENICS like DHIS2 were expanded to include modules for assessing the needs of IDPs and tracking care provision during the 2024 war. Dashboards and other tools facilitated real-time monitoring of patient care, resource distribution, and service coverage, ensuring efficient and agile responses under challenging conditions.

5. Building Workforce Capacity for Emergencies

Recognizing the importance of an agile and skilled workforce, the MoPH implemented training programs focused on outbreak management, mass casualty preparedness, and emergency care. Over 3,000 healthcare workers were trained in areas such as cholera management, trauma care, Mental Health first aid, ensuring their readiness to respond to emergencies. Partnerships with academic institutions and international organizations supported these efforts, addressing critical gaps in healthcare capacity and enhancing Lebanon's ability to manage concurrent crises.

D. Transforming Healthcare Delivery

The NHS prioritized transforming healthcare delivery to enhance equity, quality, and resilience across Lebanon's health system. By expanding PHC services, modernizing public hospitals, and improving access to essential medications, the MoPH laid the groundwork for a healthcare system capable of meeting the needs of all segments of the population, particularly during crises.

1. Expanding the Primary Healthcare Network for Equity and Accessibility

The PHC network expanded to 326 centers, significantly increasing access to subsidized healthcare services for vulnerable populations. These centers were instrumental during emergencies, including the 2024 war, by addressing the health needs of displaced populations, managing chronic and acute conditions, and contributing to outbreak detection and prevention. The integration of mental health services and nutrition programs into the PHC network further underscored the ministry's commitment to comprehensive and person-centered care.

2. Integrating Innovative Programs into PHC Services

Several new programs were introduced to enhance the quality and accessibility of services within the PHC network. The REAYA Project, funded through a World Bank loan, implemented a capitation-based payment model to ensure equitable care for Lebanon's poorest populations. Other initiatives, including the PCPC, AaSalameh program, EPI, school health program, and NCD care, improved service quality, expanded coverage, and enhanced patient satisfaction.

3. Modernizing Public Hospitals to Build System Resilience

Public hospitals were transformed into critical pillars of the healthcare system, equipped to provide both routine and specialized care. Strategic investments enabled the introduction and upgrading of services such as NICUs and PICUs, dialysis, burn care, cardiac care, and cancer treatment. Public hospitals also played a vital role during the 2024 war, delivering trauma care and wound management through EMTs while maintaining essential services for dialysis and cancer patients.

4. Reactivating Underutilized Facilities for Improved Access

The reactivation of the Turkish Hospital, which had been stagnant for over a decade, showcased the MoPH's commitment to maximizing healthcare resources. By operationalizing this facility, the ministry expanded access to critical services and reduced the strain on other hospitals during emergencies.

5. Enhancing Medication Access Through Transparent Systems

The availability of essential medications was ensured through structured reforms and the integration of digital platforms like LMS, MediTrack and AMAN. These systems enabled transparent and equitable distribution of high-cost medications, including those for cancer and chronic diseases. Improvements in supply chain management and storage processes further strengthened the reliability of medication provision across the healthcare system.

6. Securing Healthcare Quality

Quality improvement initiatives have also been prioritized. A qualification program for the quality control of blood banks has been implemented, while similar programs for dialysis and chemotherapy units are underway. Preparations are also undergoing for the next hospital accreditation cycle, scheduled for 2025, reflecting a commitment to maintaining high standards of care and continuous improvement across the hospital network.

E. Evolving Healthcare Through Digital Transformation

The MoPH has embraced digital transformation as a foundation of the NHS, revolutionizing Lebanon's healthcare system through innovation, transparency, and accountability. By leveraging digital tools and data-driven solutions, the ministry has enhanced service delivery, strengthened emergency responses, and improved resource management.

1. Developing the Digital Health Strategy

The Digital Health Strategy, currently in its final stages, provides a comprehensive roadmap for advancing Lebanon's digital health initiatives. Focused on aligning national priorities with global best practices, this strategy aims to further integrate technology into healthcare operations, ensuring sustainability and efficiency in service delivery.

2. Expanding and Integrating Digital Platforms

Key digital platforms such as PHENICS, MediTrack, LMS, and DHIS2 were significantly expanded and integrated to optimize data collection, reporting, and resource management. MediTrack ensured transparent and efficient distribution of medications, particularly for cancer and catastrophic conditions, while eliminating ill practices. PHENICS played a pivotal role in real-time reporting and resource allocation, particularly during emergencies, enabling swift and effective decision-making.

3. Implementing Unique Health IDs for Patient-Centered Care

The introduction of unique health IDs marked a significant step toward patient-centered care, enabling seamless data sharing across the healthcare continuum. The visa system supported processes such as hospital approvals and discharge summaries streamlined service delivery and improved financial tracking.

4. Innovating Mental Health Access Through Digital Solutions
The MoPH leveraged digital tools to expand access to mental health resources, addressing a critical gap in healthcare delivery. Initiatives such as the SH+ Arabic podcast, interactive mental health hubs, and mobile applications provided accessible and culturally appropriate support for diverse population needs, reinforcing the ministry's commitment to holistic healthcare.

5. Enhancing Decision-Making Through Data-Driven Insights
Integrated dashboards and automated reporting systems empowered stakeholders with actionable insights for evidence-based decision-making. These tools supported resource allocation, policy planning, and performance monitoring, ensuring that health sector strategies aligned with emerging challenges and population needs.

6. Building a Sustainable Digital Infrastructure
The MoPH conducted comprehensive assessments of vital applications, including its official website and mobile platform, leading to the development of enhancement plans focused on functionality, user experience, and alignment with the Digital Health Strategy. These efforts ensured a robust and sustainable digital infrastructure capable of supporting Lebanon's evolving healthcare landscape.

F. Empowering Health Human Resources

The NHS recognized that a skilled and resilient workforce is fundamental to strengthening Lebanon's health system and ensuring its capacity to respond to challenges. To address critical gaps and build long-term capacity, the MoPH implemented targeted initiatives focused on recruitment, training, and workforce development.

1. Addressing Workforce Shortages
To sustain essential healthcare services, the MoPH collaborated with international agencies to recruit key personnel for critical roles in surveillance, logistics, and emergency response. Around 150 staff members were deployed to fill these essential positions, reinforcing the capacity of Lebanon's health system to manage concurrent crises. Partnerships with academic institutions, professional orders, and other stakeholders facilitated the design and implementation of residency programs, continuing education opportunities, and professional development initiatives. These efforts addressed both immediate needs and long-term workforce sustainability.

2. Strengthening Specialized Capacities
The MoPH emphasized the development of specialized healthcare skills to support Lebanon's evolving health priorities. More than 4,000 professionals received specialized training in areas such as emergency response, outbreak management, hospital accreditation, pharmacovigilance, maternal and neonatal care, and the management of communicable diseases. The Lebanese Field Epidemiology Training Program further strengthened workforce capabilities by integrating One Health principles, addressing the interconnectedness of human, animal, and environmental health in managing outbreaks. Emergency medicine training programs, developed in collaboration with academic institutions, were critical in expanding the capacity of general practitioners and residents, particularly in underserved and remote areas. These efforts were complemented by the integration of mental health training into broader capacity-building programs, addressing a critical gap in healthcare delivery.

3. Fostering Collaboration and Knowledge Sharing

Collaboration with academic institutions and international organizations played an important role in workforce development. Joint programs delivered targeted training, while partnerships with diaspora organizations facilitated knowledge exchange among highly skilled professionals. These collaborations not only addressed Lebanon's immediate healthcare challenges but also positioned the health sector for sustained progress by aligning training programs with global best practices.

4. Promoting Workforce Retention and Well-being

Recognizing the strain on healthcare professionals during crises, the MoPH prioritized measures to support their well-being and motivation. Efforts to improve working conditions, including better resource allocation and career development opportunities, contributed to retaining skilled workers and reducing burnout.

G. Strengthening Public Health Through Communication

The MoPH has placed communication at the forefront of its efforts to build public trust, promote health awareness, and ensure effective crisis management. Under the NHS, a comprehensive approach to communication was adopted, focusing on transparency, responsiveness, and collaboration with key stakeholders.

1. Building Public Trust During Crises

During the 2024 war on Lebanon, the MoPH demonstrated the power of timely and credible communication in maintaining public trust and ensuring access to reliable information. The ministry became the primary source of updates on casualties, healthcare services, and the distribution of donations, providing real-time information through digital platforms and direct engagement. This transparency reassured the public and strengthened confidence in the health system's ability to manage the crisis effectively.

The ministry's call centers (1214, 1787) and the mental health helpline (1564) served as critical communication channels, addressing public inquiries, grievances, and mental health concerns. These resources were instrumental in connecting the public with essential services and information, particularly during emergencies.

2. Leveraging Digital Platforms for Outreach

MoPH utilized a wide range of digital platforms, including its official website and social media channels (X, Facebook, Instagram, LinkedIn, YouTube), to disseminate updates and reports. Frequent press releases and detailed briefings from the Minister and other key officials ensured that accurate information reached both local and international audiences. Over 550 journalists received updates through organized WhatsApp broadcasts and press tours, further amplifying the ministry's messages.

3. Health Promotion Campaigns

The MoPH prioritized impactful health promotion campaigns to address critical public health issues and encourage preventive behaviors. Initiatives such as anti-tobacco campaigns targeted school-aged children, fostering early awareness of health risks. Additionally, preparations for a nationwide breast cancer awareness and screening campaign underscored the ministry's commitment to proactive health promotion and early detection.

4. Coordinated Media Engagement

The MoPH's proactive engagement with the media further strengthened its public health messaging. Press conferences, interviews, and organized media tours ensured consistent and accurate reporting of health sector developments. By emphasizing speed, clarity, and credibility, the ministry positioned itself as a reliable source of information during crises and beyond.

5. Collaborative Communication Approaches

The ministry's communication strategy extended to collaboration with local and international stakeholders, aligning efforts to promote health awareness and manage public perceptions. These partnerships enhanced the reach and impact of the MoPH's messaging, particularly during emergencies such as the cholera outbreak and the 2024 war. Collaborative platforms like the NHSWG and humanitarian coordination networks also served as forums for aligning communication efforts and addressing emerging health challenges.

H. Driving Climate Resilience and Sustainability

The MoPH has prioritized integrating climate resilience and environmental sustainability into Lebanon's healthcare system as a key component of the NHS. Recognizing the growing intersection between climate change, environmental health, and healthcare delivery, the ministry has implemented targeted initiatives to strengthen health infrastructure, mitigate environmental risks, and promote long-term sustainability.

1. Enhancing Climate-Resilient Infrastructure

The adoption of renewable energy solutions has been central to the MoPH's sustainability strategy. Solar energy systems were installed in 172 PHC centers and 22 public hospitals, significantly reducing reliance on traditional energy sources while improving energy security. These solarization projects, which form part of the Sustainable Energy Strategy for the Healthcare Sector in Lebanon, have lowered operational costs and increased the resilience of healthcare facilities during power shortages and emergencies.

To further ensure the functionality of health infrastructure during environmental challenges, the MoPH conducted climate and environmental health assessments in PHC centers and public hospitals using WASH FIT tools. These assessments identified vulnerabilities and guided targeted investments in resilient infrastructure, including improvements in WASH systems. Additionally, multi-sectoral action plans supported by the Pandemic Fund are designed to address the health impacts of climate change, incorporating One Health principles that connect human, animal, and environmental health.

2. Promoting Sustainable Practices in Healthcare Operations

The MoPH has implemented sustainability initiatives to reduce the environmental footprint of healthcare facilities. These include medical and general waste management programs, air quality assessments, and urban health projects targeting environmental health risks. The promotion of "Green Health Facilities" has encouraged healthcare providers to adopt eco-friendly practices, emphasizing energy efficiency, waste reduction, and the use of environmentally friendly materials. The ministry has also focused on ensuring the continuity of critical services during emergencies. Investments in resilient oxygen systems at hospitals have safeguarded the supply of essential resources, further strengthening the capacity of healthcare facilities to operate under challenging environmental conditions.

3. Building Awareness and Capacity for Climate Resilience

The MoPH has emphasized the importance of education and awareness in promoting climate resilience within the health sector. Training programs and workshops have equipped healthcare workers with the knowledge and skills needed to implement sustainable practices and address climate-related health risks. Public awareness campaigns have complemented these efforts by highlighting the links between climate change and public health, fostering community engagement in sustainable initiatives.

4. Laying the Foundation for Long-Term Sustainability

Through its climate resilience and sustainability initiatives, the MoPH has set a strong foundation for integrating environmental considerations into healthcare planning and operations. These efforts align with broader global commitments to sustainable development and demonstrate Lebanon’s leadership in addressing the health impacts of climate change. By prioritizing renewable energy, sustainable practices, and climate adaptation, the MoPH has strengthened the health sector’s resilience to environmental challenges while promoting long-term sustainability. These initiatives reflect a forward-looking approach that not only addresses current vulnerabilities but also ensures the healthcare system’s ability to meet future needs in an increasingly climate-impacted world.

This two-year review of Lebanon's NHS reflects significant progress in transforming the health sector amidst unprecedented challenges. The MoPH has leveraged crises as opportunities for reform, focusing on equity, resilience, and collaboration to build a sustainable and responsive healthcare system. Key achievements include advancements in governance, healthcare financing, delivery, emergency preparedness, workforce development, digital transformation, and climate resilience. These efforts, grounded in data-driven decision-making and strengthened by local and international partnerships, have laid the foundation for a more equitable and sustainable health system. While much has been accomplished, significant challenges remain. The MoPH's commitment to transparency, innovation, and collaboration will be vital in addressing these gaps and advancing Lebanon's healthcare system toward a healthier and more resilient future.

Summary of Progress across NHS Objectives

Progress evaluation	Number of objectives	
	One Year Review	Two Year Review
No progress	22	10
Work initiated	34	23
Significant progress	31	54
Completed	1	1
Total	88	88

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