

REPRODUCTIVE HEALTH SUB-WORKING GROUP RHSWG

NEWSLETTER ISSUE #4

OCT-DEC 2024

In Lebanon, the Reproductive Health Sub-Working Group (RHSWG) was established in 2013 under the Health Sector. The Ministry of Public Health (MOPH) leads the RHSWG where the United Nations Population Fund (UNFPA) serves as the co-lead. The RHSWG members include national and international non-governmental organizations (NGOs), academics, relevant ministries, and UN agencies who coordinate to standardize and improve all aspects of sexual and reproductive health (SRH) programming such as community awareness, service quality, accessibility, and coverage. The RHSWG develops and follows up on the implementation of a yearly action plan that contributes to the objectives laid out in the Lebanese Response Plan (LRP).

This issue highlights priority SRH needs identified and issues faced between October and December 2024.

✓ RHSWG Key Achievements Oct-Dec 2024



Emergency Response

Following massive conflict escalations in Sep 2024, the RHSWG developed a referral matrix for hospitals supported to deliver subsidized services targeting vulnerable pregnant women → [Hospital Delivery Support Referral Matrix – Snapshot – Jan 31, 2025](#)



Hospital Delivery Dashboard

The RHSWG developed the [Support for Deliveries at Hospital Dashboard](#) to reflect the status of hospitals providing subsidized deliveries and identify gaps in service provision due to hostilities.



Clinical Management of Rape (CMR) Dashboard

The CMR Task Force (CMR TF) developed a [CMR Facility Dashboard](#) to reflect the status of health facilities providing CMR services and identify geographical gaps in service provision due to hostilities.



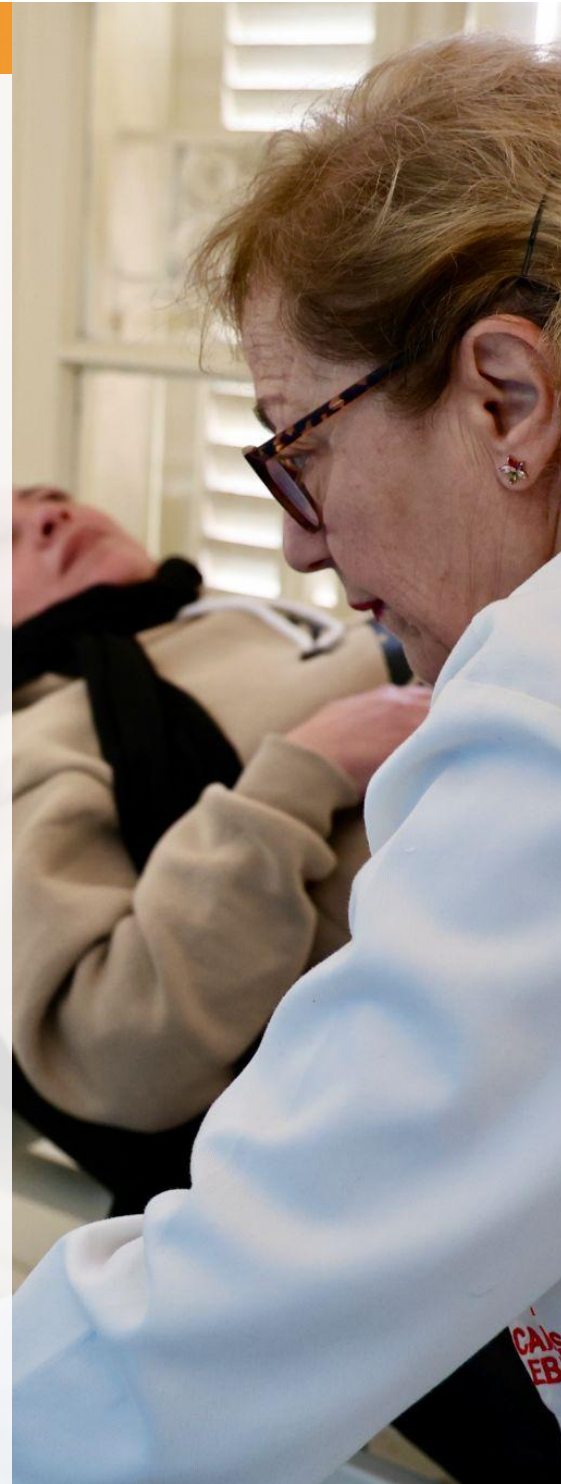
Community Engagement

The RHSWG supported MOPH in prioritizing and distributing SRH information education and communication (IEC) material for use at PHCCs and outreach in collective shelters and at the community level. The [prioritized materials](#) were consolidated online for mass dissemination.



Advocacy for SRH

The RHSWG issued a [special edition newsletter](#) in December 2024 to shed light on the SRH response by various partners, focusing on achievements and challenges faced.





PRIMARY HEALTHCARE - SRH Service Utilization Trends

The health sector in Lebanon continues to deliver equitable quality healthcare services targeting vulnerable Lebanese and non-Lebanese individuals, including displaced Syrians, Palestinian refugees from Syria, Palestinian Refugees in Lebanon, migrants, and displaced individuals of diverse nationalities. The health sector supports improved access to comprehensive primary healthcare, which includes sexual and reproductive healthcare, among other essential health and nutrition services.

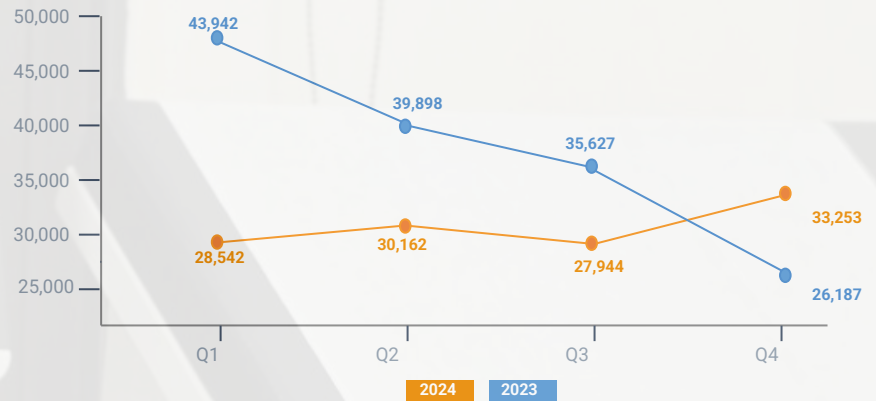
In Q4 2024, activity info data showed an increase in Antenatal Care (ANC) consultations at Primary Healthcare Centers (PHCCs) across Lebanon compared to the same period last year. This reflects the efforts of health partners, the success of the crisis response interventions, and the resilience of the health system in Lebanon to respond to the health needs of pregnant women during the significant hostilities and the resulting displacement crisis that took place in this reporting period. Deployment

of medical mobile teams and units, enhancement of service delivery at PHCs, and outreach interventions were crucial to ensure the continuity of maternal care services. These outreach activities helped support women struggling with the cost of transportation to health facilities, which has been a long-standing barrier reported by partners throughout 2024. Furthermore, enhancing the referral process between PHCCs and hospitals remains a key aspect that needs to be further developed to ensure the continuum of maternal care.

Access to family planning services decreased despite invested efforts by the MOPH and RH actors to ensure zero unmet need for family planning. Note that the spike recorded in Q2 of 2024 is due to an inconsistency by one partner reporting all of their achievements in the 1st half of 2024 under Q2. While health partners have reported a higher provision for Family Planning (FP) services when compared to 2023, this was not associated with an increase in the utilization of

contraceptives at PHCCs. Noting that MOPH avails contraceptives at the primary care level and recommends mobile teams deployed at the community level to ensure the provision of contraceptives as needed. Further research is needed to understand the reasons behind decreased utilization vs increased efforts and provision of FP services. Moreover, additional work needs to be done to ensure triangulation of data with MOPH data (PHENICS) to ensure a comprehensive understanding of the status of FP uptake in the country and to respond as needed.

Subsidized Antenatal Care Consultations

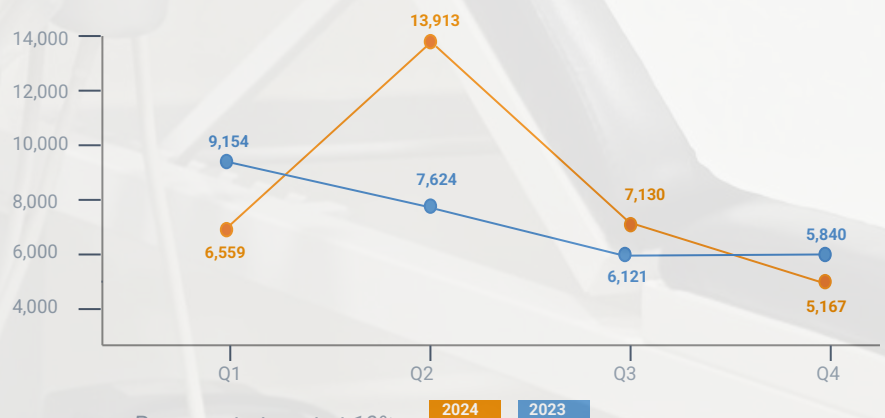


➔ Progress to target at 31%

➔ For 2024, Q4 data accounted for 119K ANC consultations

➔ Annual ANC consultations decrease by 17%

People Accessing Family Planning Services



➔ Progress to target at 10%

➔ For 2024, Q4 data accounted for 32.7K Family Planning services

➔ Annual family planning services increase by 14%

SEXUAL VIOLENCE & CLINICAL MANAGEMENT OF RAPE SERVICES

Globally, **1 in 3 women are subjected to physical or sexual violence by an intimate partner or a non-partner** (WHO).

In reference to the drastic conflict in 2024 that Lebanon witnessed, the risks of GBV have intensified amid widespread displacement and deteriorating living conditions. Overcrowded shelters, inadequate sanitation, insufficient lighting, and lack of privacy have contributed to increased incidents of Gender-Based Violence, including rape and sexual assault → **13% of total GBV incidents in Q4 2024 vs. 11% in Q3 2024.**

The Gender-Based Violence Information Management System (GBV IMS) report of Q4 2024 shows that rape and sexual assault remain a high risk also on children, noting that men and boys are also exposed to sexual assault and abuse even though it is not often reported, where **10% of all the reported rape incidents in Q4 are for male survivors.** It was noticed that, in Q4 2024, more working boys were exposed to sexual assault in the workplace or on the streets.

The risk of violence and sexual assault has also affected people from different nationalities, where an increase in GBV incidents was reported by Lebanese (40%), Palestinian refugees (7%) and migrants (3%). GBV incident reporting by Syrians remains the highest at 50%.

As part of MOPH response to sexual violence, there was an increase in the number of clinical management of rape (CMR) facilities to ensure geographic coverage per population needs. MOPH, in collaboration with UNFPA, provided training to the new CMR facilities on CMR standard operating procedures. The total number of CMR facilities increased from 12 to 14, including 8 hospitals and 6 PHCCs. To note, only 10 CMR facilities were operational during Q4 2024, where 4 were forced to close due to hostilities in Baalbek El Hermel, South, and Nabatieh Governorates.

The CMR TF has updated its [Clinical Management of Rape \(CRM\) Facility Dashboard \(Dec 27, 2024\)](#) to reflect changes post-ceasefire, with all CMR facilities reopening to resume provision of CMR services by the end of December 2024.



This [video](#) raises awareness on sexual assault and provides critical information on CMR service provision

National Aids Program (NAP)

World Health Organization (WHO) & the International Organization of Migration (IOM)

Launching of the New National HIV Strategic Plan 2023-2028

The launching of the new [National HIV Strategic Plan 2023-2028](#) marks a significant milestone in Lebanon's response to the HIV epidemic. Guided by the National AIDS Program under the governance of the Ministry of Public Health, the plan reflects a unified approach built on inclusivity and evidence-based practices.

By prioritizing the needs of key populations and fostering strong partnerships across sectors, this plan aims to drive progress toward reducing new HIV infections, enhancing the quality of life for people living with HIV, and addressing persistent stigma and discrimination. With its alignment with the National Health Strategy Vision 2030, the plan serves as a catalyst for collective action and renewed dedication to achieving a healthier, more equitable future.

United Nations Population Fund (UNFPA) Response

Donors: UNFPA Core Funding, France, KOICA, ECHO, Japan

In response to the escalation of hostilities, UNFPA coordinated closely with MoPH, the Ministry of Social Affairs (MoSA), and local partners to adapt its response strategy to meet emerging needs. UNFPA's support spans from system strengthening initiatives to supporting service delivery.



Procurement of SRH commodities & supplies to support life-saving reproductive health services: UNFPA agreed with MOPH on a PUSH system for reproductive health commodities and support for the transportation of essential and chronic medications to **145 PHCCs** across Lebanon.



In coordination with MOPH and the Lebanese Society of Obstetrics and Gynecology (LSOG), UNFPA **developed a national reference document to address high-risk pregnancies in Lebanon**. It aims to establish a shared understanding of high-risk pregnancies among health actors, providing clear guidance for the identification and timely referral of such cases upon the onset of danger signs and symptoms.



UNFPA's support to the **MOPH network of active CMR facilities** through procurement and repositioning of essential medical supplies and medication allows survivors of rape access to life-saving medical services. UNFPA's support also included financial coverage for CMR services at 2 CMR facilities.



Support **Emergency Obstetric and Newborn Care services at 32 hospitals** across Lebanon with RH equipment, supplies, and medicines in

addition to financial coverage for childbirth costs, addressing the challenge of affordability to institutional deliveries. UNFPA support also included coverage of pregnancy complications, allowing women to access emergency obstetric care.



United Nations Population Fund (UNFPA) Response *cont.*

Donors: UNFPA Core Funding, France, KOICA, ECHO, Japan



UNFPA supports **SRH services at 35 PHCCs and 14 medical mobile units** that operate in communities. These facilitate access to SRH care and pre-and postnatal care, alongside the dissemination of information on menstrual management, sexually transmitted infections, family planning, and nutrition for pregnant and breastfeeding women. UNFPA supports referrals to specialized services as needed. At the peak of the crisis, UNFPA extended SRH service support to **93 shelters**.



UNFPA's **network of 200 midwives** continues to provide maternal health care and family planning services to pregnant women and new mothers across Lebanon.



In partnership with the Social Workers Syndicate in Lebanon, UNFPA is implementing an initiative to **address the mental health and psychosocial well-being of individuals and families affected** by crisis, displacement, and economic instability. Through training approximately **40 social workers**, the initiative ensures early identification and referral of individuals in psychological distress. The project provides direct services, including group sessions and psycho-social support on stress management, emotional resilience, and coping strategies aiming at reducing mental health stigma and promoting help-seeking behaviors. The project also facilitates group sessions on sexual and reproductive health topics.



In partnership with the Lebanese Order of Midwives, UNFPA provided **training on family planning counseling and Midwifery care during the crisis to 120 midwives** across Lebanon. Additionally, in partnership with the Social Workers Syndicate and the NMHP, UNFPA provided **mental health and psychological first aid training to 81 social workers**.

International Organization for Migration - UN (IOM)

Donor: Global Fund

IOM signed an agreement with Lebanon's Ministry of Public Health under the fourth cycle of the Middle East Response Project to fight Tuberculosis (TB), HIV, and Malaria. The project, running from January 1, 2025, to December 31, 2027, ensures the continuity of TB and HIV treatment and essential services.

Amid the conflict in Lebanon, the National Tuberculosis and AIDS Control Programs (NTP/NAP), in coordination with IOM, developed a contingency plan to maintain care and prevent disease transmission.

Key interventions included deploying two satellite units equipped with AI-powered portable X-ray machines for TB screening and awareness-raising. TB screening activities were launched on October 11, 2024, across Beirut, Mount Lebanon, South Lebanon, Akkar, and Baalbek-Hermel, targeting displaced populations in shelters.

Until the end of December 2024, 1,839 individuals were screened, with 340 individuals referred to the NTP for further investigation. As a result, 7 TB cases were diagnosed and enrolled in treatment. The intervention also aimed to promote awareness about TB disease and included the distribution of IEC materials adapted to the languages of the screened populations.

This innovative approach significantly enhanced the efficiency of TB detection, allowing immediate linkage to care and rapid diagnosis, demonstrating a successful model for using advanced technology in health interventions.



Médecins du Monde (MdM)

Expanding Access to Maternal Health: MdM Enhances Support for High-Risk Pregnancies

MdM continues fully covering delivery services for low-risk pregnancies under the midwifery-led model at the RHUH Birth Center. The project started in September 2024. Beginning in February 2025, MdM will expand its maternal health coverage to include delivery support for high-risk pregnancies, exclusively at RHUH. The details of this coverage are as follows:

- For migrants, stateless individuals, Syrians not registered with UNHCR, and others without a guarantor: Full coverage up to 500 USD is provided, given that they are followed in MdM-supported centers.
- For Lebanese citizens and UNHCR-registered Syrians: A cost-sharing model will be applied to complement UNHCR and Ministry of Public Health (MoPH) coverage.

Outpatient clinic at RHUH PHCC supported by MdM for SRH services including ANC care for pregnant women



In addition, costs related to pregnancy loss (Ultrasound and consultation) are covered. This initiative aims to ensure access to essential maternal healthcare services for vulnerable populations in Beirut.

United Nations Children's Fund (UNICEF)

Donor: Korea

NICU and PICU Support

Through Korea's grant, UNICEF supports 11 hospitals with NICU and PICU cases. During Oct-Dec 2024, 316 neonates and pediatrics were supported, with out-of-pocket payments, for them to access lifesaving services in NICU and PICU, out of which 190 were males and 126 were females—the below picture a before and after for one of the beneficiaries who received support from UNICEF.

Hayat Newborn Kit

Post hospitalization for deliveries and NICU patients, UNICEF provided Hayat Newborn Kit to 340 mothers. The kit contains items to support the mother's postpartum journey and the care for the baby. Items include: thermometer, scratch mittens, short-sleeved and long-sleeved vests, clothes, condoms and diapers.



Quality Improvement of NICU Services

UNICEF has partnered with the American University of Beirut to perform quality checks on 11 hospitals with NICU services to ensure quality improvement of NICU services. Through this partnership, AUB audits medical reports to check if the treatment plan correlates with the diagnosis of the case, in addition to building the capacity of NICU nurses and neonatologists. The findings of the AUB audit will be shared with the Ministry of Public Health by the end of Q1 2025.

Action Against Hunger (ACF)

Donor: LHF

Supporting Noura: Care and Guidance During a Challenging Pregnancy

Noura, from Toul in Nabatiyeh, had experienced multiple pregnancy losses in the past. This time, her pregnancy presented a new challenge: she was diagnosed with placenta previa, a condition that posed serious risks to both her health and her baby. When she started experiencing vaginal bleeding, the situation became more concerning.

In response, ACF covered Noura's hospitalization costs at Nabatiyeh Governmental Hospital, ensuring she received the necessary medical care. Additionally, an ACF midwife visited her before delivery, providing essential counseling on managing placenta previa, proper nutrition, and breastfeeding. Noura also received micronutrient supplements to support her well-being during the pregnancy.

After a successful delivery, the midwife continued her support, offering breastfeeding guidance, maternal nutrition counseling, and newborn hygiene education. Noura was also provided with a maternal and newborn kit containing essential hygiene supplies such as diapers and baby shampoo, easing the transition into motherhood.

"Throughout my pregnancy, the midwife was always checking on me and giving me the confidence to care for my baby. The support I received made a huge difference," Noura shared.

Her husband, Mohamad, echoed her sentiments: **"The kit we received was incredibly helpful. It had everything the baby needed from day one."**

Action Against Hunger remains committed to supporting mothers, providing the care and resources they need to ensure their health and that of their children. By equipping women with the knowledge and support to navigate their pregnancies, ACF helps provide a safer start to motherhood.



Noura, from Toul Nabatiyeh, diagnosed with high-risk pregnancy, received support from ACF to deliver at Nabatiyeh Gov. Hospital in addition to ACF Midwife follow up prior and after the delivery

Premiere Urgence Internationale (PUI)

Donor: ECHO

Enhancing the Continuum of Care through Birth Cash Assistance among Women with High-Risk Pregnancies in Lebanon - 2024

Under PUI's EU-funded project, the Birth-Cash Assistance (BCA) component targets high-risk pregnancies to improve maternal and neonatal health outcomes in Lebanon. The intervention spans the South, Nabatiyeh, Beirut, Mount Lebanon, North, and Akkar governorates, supporting vulnerable Lebanese and Syrian populations.

By providing financial assistance alongside antenatal and postnatal care through a midwife-led approach, the program ensures a continuum of care, addressing key medical and socioeconomic gaps. This approach guarantees safe deliveries and reduces maternal and neonatal mortality rates by offering continuous support throughout pregnancy, delivery, and the postnatal period. As of December 2024, the program has supported 2,078 women.



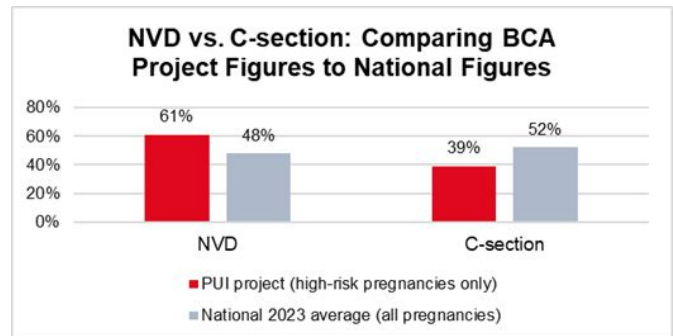
PUI Midwife conducting a sonogram test during an ANC consultation at a PHCC in Chebaa, Nabatiyeh

Premiere Urgence Internationale (PUI) - cont.

Donor: ECHO

PUI midwives, through their efforts, were able to bridge the gaps between the Community, PHCCs and hospitals. Thanks to their dedication, the percentage of women receiving ≥ 5 ANC visits increased to over 57%. Additionally, key indicators such as the rate of normal vaginal deliveries (NVD) and maternal and infant death have shown significant improvement. To ensure equitable access to prenatal care services and maintain a seamless continuum of care, PUI recommends:

- Capitalize on PUI intervention to advocate a national strategy
- Expand more to cover low-risk and high-risk pregnancies
- Manage pregnancy complications, & ensure access to specialized services such as NICU
- Mobilize more resources
- Have Capacity Building initiatives for healthcare professionals in the PHCCS & Hospitals.
- Address transportation barriers



International Rescue Committee (IRC)

Donor: GAC, GFFO, Dutch Relief Alliance

As part of a GAC-funded project launched in Q3 2024, the IRC, in partnership with the local NGO l'mpossible in Akkar, provided integrated gender-based violence (GBV) and SRH services. This project, running until March 2026, aims to enhance access to SRHR, mental health and psychosocial Support, and GBV services for vulnerable women and girls. The project team consists of community outreach volunteers, social workers, and a community midwife.

Community outreach volunteers initiate contact with women and girls in informal settlements and camps across Akkar (Kwaikhat, Semmakiyeh, Kweishra, Qulayaat). Social workers provide psychosocial support and connect women and girls at risk of GBV to SRHR services, and the community midwife offers individualized counseling on family planning, reproductive health, pregnancy monitoring, breastfeeding, and sexually transmitted infections. She also identifies and refers women and girls to GBV services when necessary.

As part of the GFFO-funded project, IRC supported three primary health care centers (PHCC) in Akkar (Habtoor Medical Center, Adam Medical Center, and Remedy Medical Center). The SRH needs were addressed following LPSP. Other family planning services were also covered under the fund, including the provision of contraceptive pills, condoms, and IUD insertion.

Emergency Response

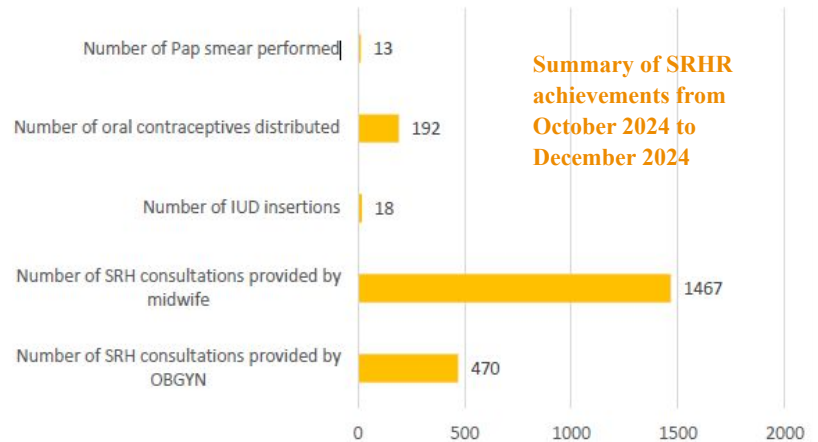
As part of the GFFO-funded project, the supported PHCCs addressed the SRH needs of displaced persons registered in 9 shelters. Displaced people received free SRH services, such as antenatal and postnatal care, diagnostic services, STI treatments, family planning counseling, and related commodities.

To complement these efforts, with the support of the Dutch Relief Alliance, community interventions were supported, including raising awareness in shelters. The activities covered personal hygiene, menstrual hygiene management, STI prevention and treatment, and antenatal and postnatal care. Since October 2024, the project has also hired community midwives affiliated with the PHCCs, facilitating the identification and referral of women and girls needing SRHR services.

International Rescue Committee (IRC) - cont.

Donor: GAC, GFFO, Dutch Relief Alliance

Pregnant women were referred to delivery hospitals through the community midwives, ensuring safe maternal and neonatal outcomes. In the future, IRC aims to expand its areas of intervention in Lebanon to accommodate the SRHR needs of the returnees and other vulnerable communities.



GET INVOLVED

To receive this newsletter, RHSWG announcements, and to join the working group [please sign up here](#).

The [RHSWG Google Drive Folder](#) contains repositories of SRH guidance documents, RHSWG and CMR TF MoM, communication materials, service mapping, and other useful documents.

All 28 organizations mentioned are active members of the RHSWG: ACF, Al Makassed, AMEL, Caritas Lebanon, Gawth, Humedica, IMC, IOCC Lebanon, IOM, IRC, ICRC, Lebanese Order of Midwives (LOM), LRC, Mercy USA, Magna Lebanon, MDM, MEDAIR, MoPH, Makhzoumi, Order of Malta, Plan International, PU-AMI, RI, SIDC, UNFPA, UNHCR, UNRWA, and WHO.

According to RHSWG SRH Service Mapping Exercise conducted in Q4 2024, the major donors supporting SRH interventions under LRP and Flash Appeal are (by alphabetical order): AFD (France), BHA-USAID and BPRM (United States of America), BMZ-DHK (Germany), CERF, CDCS (The Crisis and Support Centre), EU-NDICI and ECHO (European Union), GAC (Canada), GFFO (Germany), Global Fund, IPPF, LHF, Monaco-Foundation Merieux, NORWAC, Private Funds, Republic of Korea, Swedish International Development Agency (SIDA)

For more information, please contact Houssein Sweid, RHSWG Coordinator @UNFPA: sweid@unfpa.org