



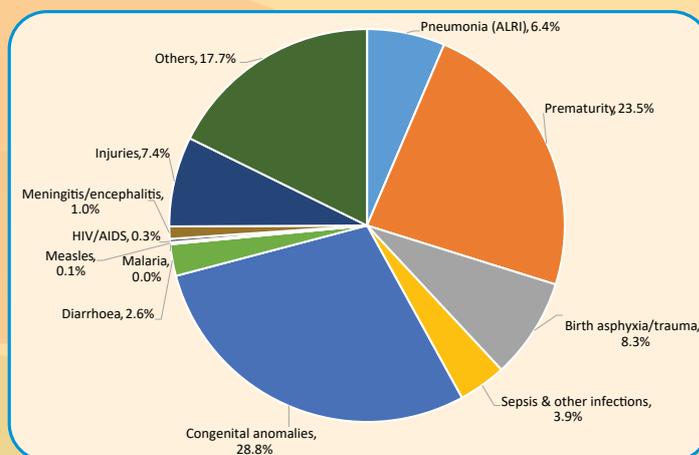
### Universal health coverage

UHC service coverage index (2021)	73.0
Primary health care facilities per 10 000 population (2021)	1.8
Hospital beds per 10 000 population (2016)	27.3
Demand for family planning satisfied with modern methods (%) (2021)	62.1
Antenatal care visits (4+ visits) (2017)	90.0
Measles immunization coverage among 1-year olds (%) (2021)	67.0
Tuberculosis treatment coverage rate (2020)	87.0
DTP3-containing vaccine/pentavalent coverage among 1-year olds (%) (2021)	67.0
Out-of-pocket expenditure as percentage of current health expenditure (2017)	33.0
Domestic general government health expenditure as % of general government expenditure (2017)	13.0

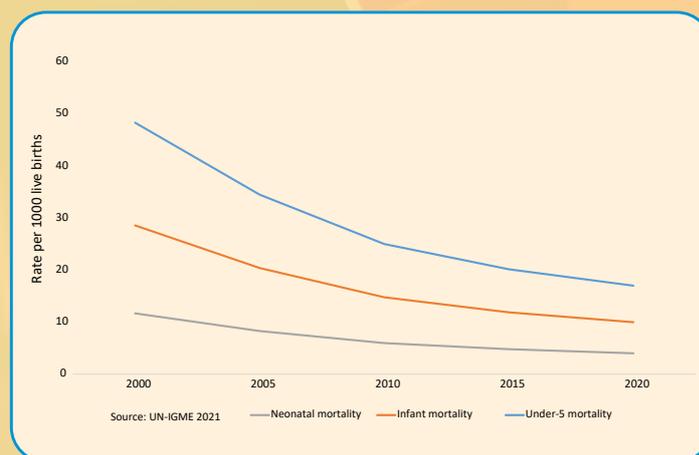
### Selected determinants of health

Population living in urban areas (%)	...
Annual GDP growth (%) (2021)	-7.0
Population growth rate (%) (2020)	1.2
Children aged < 5 years with pneumonia symptoms taken to a health care provider (%) (year)	...

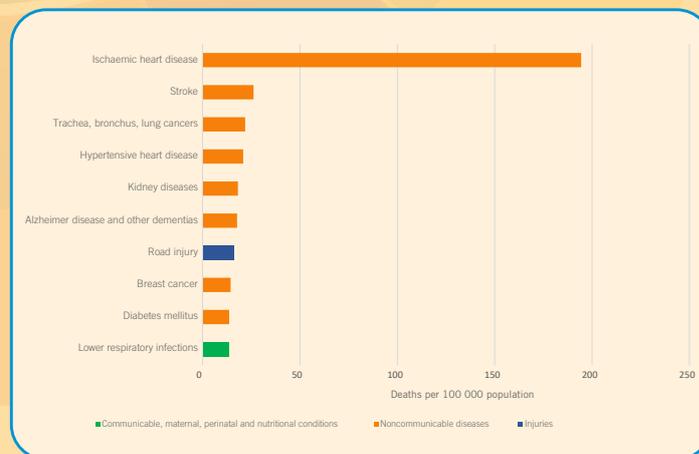
### Distribution of causes of death among children aged < 5 years (%)



### Neonatal, infant and under-5 mortality rates per 1000 live births



### Top 10 causes of death for both sexes and all ages (2019)



# Selected health-related SDG indicators\*

## 1 NO POVERTY

Population below the international poverty line (%) ...

Proportion of employed population below the international poverty line 15+ (%) (ILO modelled estimate, 2019)	Male	0.1
	Female	0.1

## 2 ZERO HUNGER

Children under 5 (%) who are (year)  
stunted ...  
wasted ...  
overweight ...

## 4 QUALITY EDUCATION

Literacy rate (15–24 years) (%)	Total	...
	Male	...
	Female	...

Net primary school enrolment ratio per 100 school-age children (year)	Total ratio	...
	Male ratio	...
	Female ratio	...

## 7 AFFORDABLE AND CLEAN ENERGY

Population with primary reliance on clean fuels and technologies at the household level (%) ...  
(WHO Global Health Observatory, year)

## 6 CLEAN WATER AND SANITATION

Proportion of population using safely managed drinking water services (%) (World Health Statistics, 2020) 48.0

Proportion of population using safely managed sanitation services (%) (World Health Statistics, 2020) 16.0

## 8 DECENT WORK AND ECONOMIC GROWTH

Unemployment rate (15+ years) (%) (ILO estimate, 2019)	Total	11.3
	Male	9.9
	Female	14.3

## 11 SUSTAINABLE CITIES AND COMMUNITIES

Concentrations of fine particulate matter (PM2.5) (µg/m <sup>3</sup> ) (WHO Global Health Observatory, 2019)	Total	24.2
	Urban	24.4

## 16 PEACE, JUSTICE AND STRONG INSTITUTIONS

Estimates of rate of homicides (per 100 000 population) (WHO Global Health Observatory, 2019) 4.2

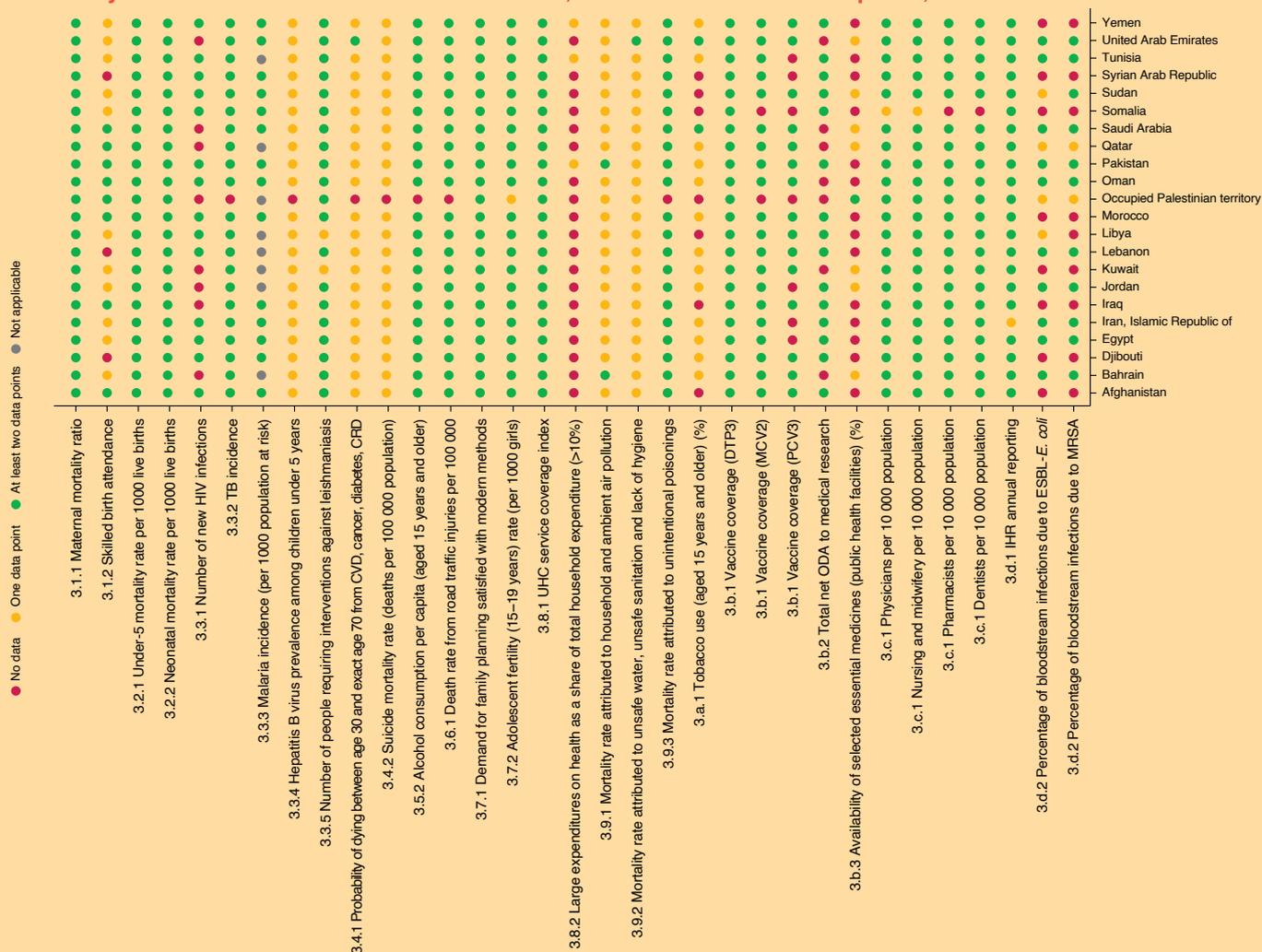
\*Data are unavailable for some indicators. Where possible, data are obtained from the WHO Regional Health Observatory.

# Key health indicators

Indicator	Male	Female	Total
Life expectancy at birth in years (2019)	74.0	79.2	76.4
Healthy life expectancy (HALE) at birth (years) (2019)	65.1	67.0	66.0
Healthy life expectancy (HALE) at 60 (years) (2019)	14.0	16.2	15.0
Maternal mortality ratio (deaths per 100 000 live births) (UN-MMEIG 2020 estimate)	—	—	21.0
Neonatal mortality rate (deaths per 1000 live births) (UN-IGME 2021 estimate)	...	...	4.7
Infant mortality rate (deaths per 1000 live births) (UN-IGME 2021 estimate)	7.4	6.6	7.0
Under-5 mortality rate (deaths per 1000 live births) (UN-IGME 2021 estimate)	8.7	7.7	8.2
Tobacco use among persons 15+ years (%) (2017)	48.3	29.7	39.0
Overweight (18+ years) (%) (2017)	...	...	65.0
Obesity (18+ years) (%) (2017)	...	...	27.0
Raised blood pressure among persons 18+ years (%) (2017)	...	...	35.3
Raised blood glucose among persons 18+ years (%) (2017)	...	...	10.5
Raised cholesterol among persons 18+ years (%) (2017)	62.8	67.8	65.4
Mortality between exact ages 30 and 70 from cardiovascular disease, cancer, diabetes or chronic respiratory disease (%) (2019)	24.2	15.2	20.0
Cancer incidence per 100 000 (2020)	159.1	159.8	156.8

**Universal health coverage (UHC)** means provision of quality services to everybody without discrimination of any kind and without exposing people to financial hardship. UHC is one of the targets of SDG 3, and attaining UHC will also contribute directly or indirectly to achieving the other SDGs. Achieving UHC means ensuring healthy lives and promoting well-being for all at all ages with explicit affirmative action for vulnerable populations including refugees and migrants. Thus, disaggregated data will be necessary to assess and address inequities in health. UHC requires intersectoral action. All countries can and must advance towards UHC by 2030, if not earlier.

## Availability of data for each SDG 3 indicator: no data, one and at least two data points, 2014–2019



# Health and the SDGs at a glance in Lebanon

3 GOOD HEALTH AND WELL-BEING



## Voluntary National Review

Completed in 2018: <https://hlpf.un.org/countries/lebanon/voluntary-national-review-2018>

## National Focal Point for 2030 Agenda

N/A

## National Focal Point in the Ministry of Health for the health-related SDGs

Mrs Hilda Harb,  
Head of Statistics Department, Ministry of Public Health

### 1. Summarize efforts at the national level in setting targets for the health-related SDGs.

In 2018, the Government of Lebanon established an inter-ministerial committee, headed by the Deputy Prime Minister, to develop national SDG 2030 targets and plans. The Ministry of Public Health set targets for SDG 3 indicators, with support from WHO and in close consultation with key stakeholders. With support from WHO, the Ministry of Public Health developed a road map for SDG 3 aligned with the SDG 3 Accelerators, which led to significant improvements in health indicators. Unfortunately, the current unprecedented complex crisis has had serious repercussions for the health system and population health, affecting progress on the health-related SDGs.

### 2. How is Lebanon incorporating SDG 3 targets in health policy, strategy and planning?

The Ministry of Public Health with WHO is finalizing a new national health sector strategy that includes priorities aligned with SDG 3 targets and takes into account the current Lebanese context. Detailed strategic documents that define the main areas for intervention and plans of action have been developed, including for reproductive health (addressing targets 3.1 and 3.7), mental health (target 3.4), routine immunization (target 3.2 and 3.b), substance use (target 3.5), noncommunicable diseases prevention and control (target 3.4) and the surveillance, early warning and control of communicable diseases, including HIV and tuberculosis (target 3.3).

### 3. Are there any major partnerships for advancing the health-related SDGs?

In the absence of a comprehensive plan to tackle the socioeconomic impact of the current crisis and in the context of an under-resourced and overextended public sector, the private sector, civil society, nongovernmental organizations (national and international), academia, syndicates, scientific societies, professional associations and UN agencies are collaborating to support training and educational programmes for quality health

service provision and the financing and provision of primary health care services and medications, including for reproductive health, mental health and healthy lifestyles, as well as supporting secondary and tertiary health services.

### 4. Describe a success story or an opportunity for strengthening the health system for COVID-19 that supports efforts towards achieving one or more of the SDG health-related targets.

Overcrowding and poor hygiene in prisons and other places of detention put incarcerated and detained persons at higher risk for COVID-19. To address this, an action plan for COVID-19 preparedness and response in Roumieh, Zahle and Qobbe central prisons was developed with the support of WHO and partners. Buildings were rehabilitated to become quarantine/isolation centres staffed by teams of nurses who provided COVID-19 prevention education (including on vaccination), early detection of cases amongst inmates, contact tracing and referral to hospitals as needed (which were rehabilitated to admit inmates). A central COVID-19 response task force was established by the Internal Security Forces, with technical support from WHO, for the development of guidelines for the safe transfer of arrested people and management of COVID-19 cases and training on infection prevention and control measures. The initiative supported progress towards target 3.8 on achieving universal health coverage, including access to quality essential health care.