

HR25: Sowing Change to Harvest Justice

**Concurrent 26:
Diverse Needs, Compassionate Care**

**Integrating Drug Response into Public Primary
Healthcare: A Case Study from Lebanon**

**Prepared and presented by:
Tatyana Sleiman
Executive Director
Skoun, Lebanese Addictions Center**



Background and Context

Highly privatized healthcare system

Historically, Lebanon's healthcare system is dominated by the private sector, with a underfunded public sector. The crisis setting shifted resource mobilization towards public healthcare facilities, namely primary healthcare centers

Compounded Crises

The COVID-19 pandemic , the Beirut port explosion, and the economic collapse in 2019-2020 further highlighted the urgent need to strengthen Lebanon's fragile public healthcare system.

Substance use criminalized

While the Lebanese law on drugs criminalizes drug use, the law does afford the right to seek treatment as an alternative to prosecution. The law also mandates the state to make treatment services available however up until 2019, no harm reduction services or treatment services for people with people with SUDs were available in public healthcare centers settings

The context of Lebanon's highly privatized healthcare system, the historical criminalization of criminalization of substance use, and the recent crises have set the stage for the integration of integration of harm reduction and SUD treatment services in the country's primary healthcare healthcare system.

Health Sector Situation Overview

Subsidized Primary Health Care Consultations



Number of Subsidized Primary Health Care Consultations in PHC Centers

Years: 2018, 2019, 2020, 2021, 2022, 2023, 2024 (Source: Activity Info)

11% Increase from 2018 to 2019

20% Decrease from 2019 to 2020

63% Increase from 2020 to 2021

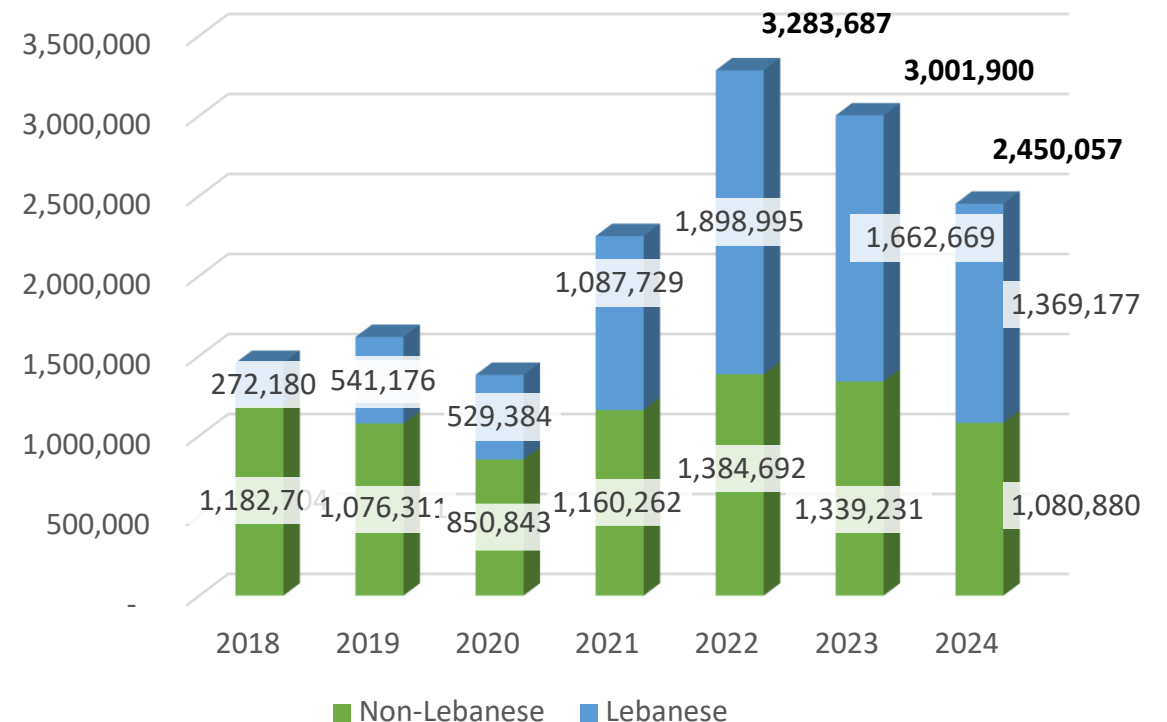
46% Increase from 2021 to 2022

9% Decrease from 2022 to 2023

106% Increase from 2018 to 2023 (5 year)
(125% in 2022)

Lebanese out of total:

17% in 2018, 31% in 2019, 38% in 2020,
48% 2021, 58% in 2022!, 55% in 2023, 56%
in 2024



Objectives of Integration

Increase and decentralize access to harm reduction services

The initiative aimed to expand access to essential harm reduction services, such as OAT treatment, VCT, Overdose prevention and psychosocial support, for people who use drugs and other vulnerable populations.

Reduce stigma in healthcare settings

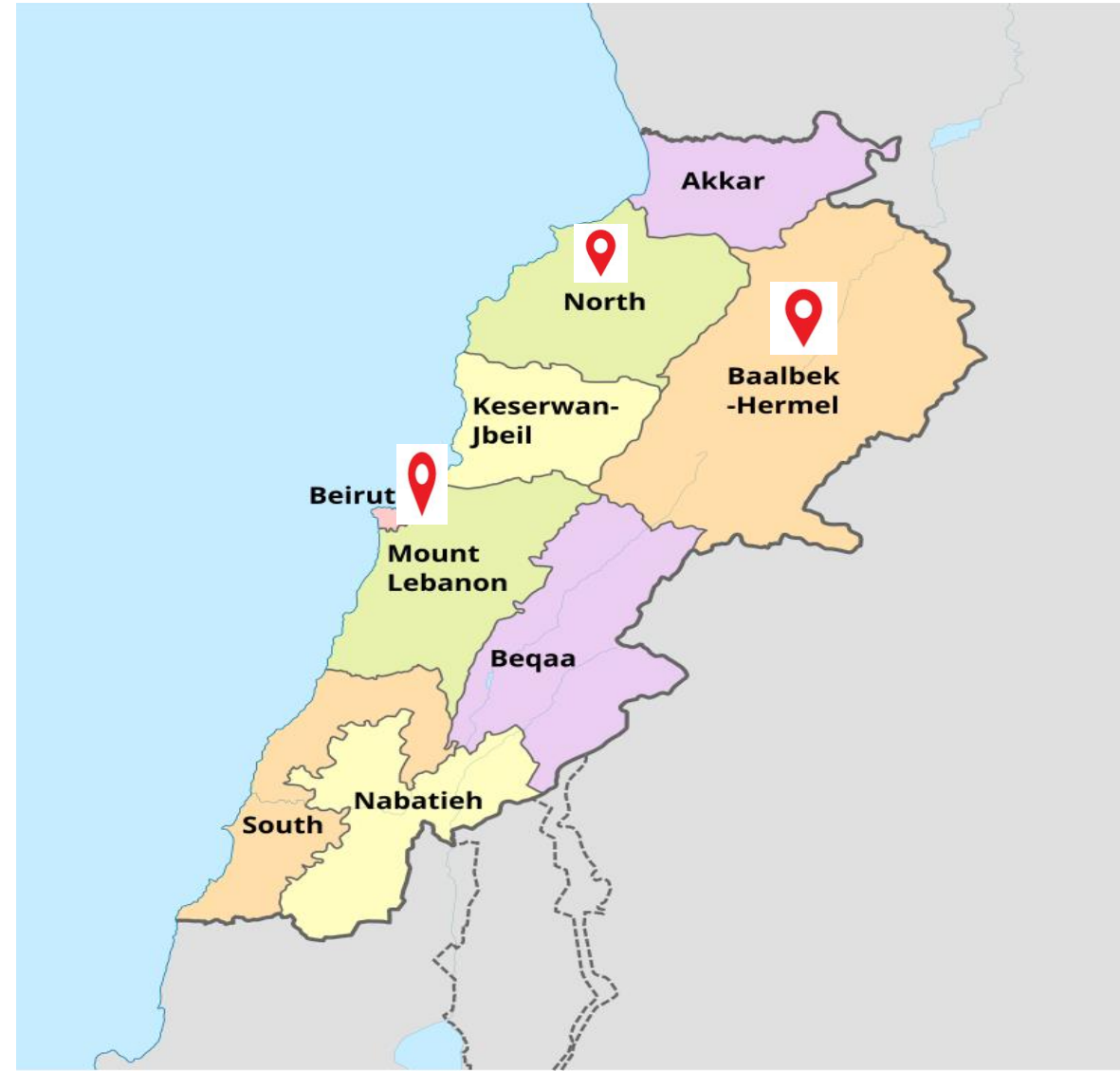
A key objective was to address the persistent stigma towards people who use drugs within the healthcare system and the broader community, creating a more inclusive and non-judgmental environment for service provision.

Build sustainable public sector capacity for substance use care

The pilot project sought to capitalize of the MOPH strategy of integrated healthcare service, using the medium of MH integration into PHCCs to strengthen the capacity of the public primary healthcare system to provide comprehensive and long-term substance use services, enabling the integration of harm reduction into the national health framework.

In 2019, Skoun, partnered with Médecins du Monde (MdM), the Ministry of Public Health (MoPH), funded by the French Development Agency - AFD, to pilot the integration of MH and SU services into three public primary healthcare centers (PHCCs) in Beirut, Tripoli, and Baalbeck.

While the success of the integration varied between the PHCCs based on different criteria (resources, case load, availability of human resources etc.), the initiative has demonstrated agility, cost efficiency and adaptability of implementing such programs even in fragile contexts.



Successes and Achievements

- **1,500+ individuals reached**
- **350 initiated OAT**
- **1000 + VCT conducted**
- **120+ healthcare workers trained**
- **Strengthened MoPH and CSO collaboration**

Lessons Learned



Expand the network of resource mobilization beyond the “usual suspects”

Crisis as a catalyst for system reform

Integrated public health care cannot
replace safe spaces for KPs yet

Recommendations

- **Policy reforms**

Decriminalize PWUDs and Institutionalize harm reduction in public health strategy

- **Funding**

Integrate funding for harm reduction services in national health budget and multiyear donor agendas

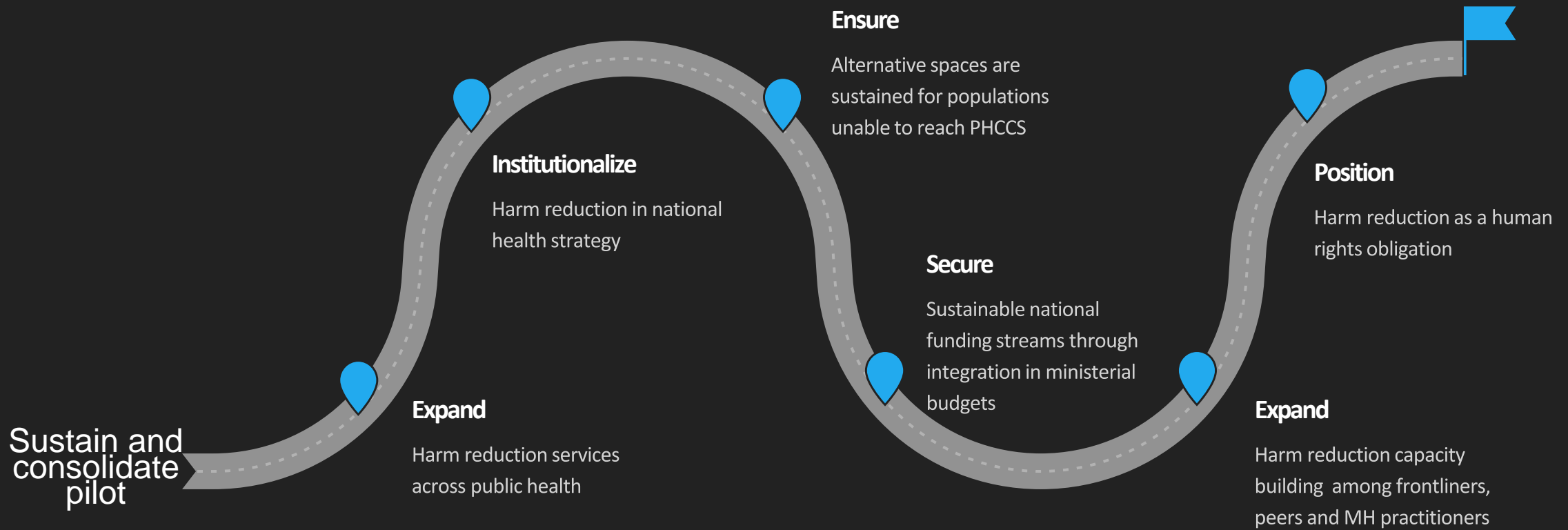
- **Expand Capacity Building**

Integrate harm reduction into humanities and public health university curricula and expand network of trained peers

- **Scale-up**

Replicate the integration model across all governorates

Way Forward





Thank you!

Tatyana@skoun.org