

Abu Bakr: Financial Constraints Are the Biggest Challenge for the Health Sector in Lebanon

During this interview, WHO Representative in Lebanon, Dr. Abdel Nasser Abu Bakr, talked about how “the organization seeks to address health emergencies in close cooperation with the Ministry of Public Health and key partners, including donors whose contributions enable a timely and effective response.” He highlighted the fact that “during emergencies, the focus is on several areas, including emergency preparedness and response, with support to the Ministry of Public Health, as well as urgent support to hospitals affected by the conflict, in addition to responding to disease outbreaks through surveillance and others...” Dr. Abu Bakr also added that “WHO has worked to strengthen the emergency health care capacity in Lebanon through intensive hospital training programs. However, the pressure of the financial and economic crisis has been reflected on the health system. The most pressing challenge remains the financial constraints on the health sector. The organization has worked to address the shortage of medicines, health care workers and essential medical supplies. Nevertheless, the scale of needs exceeds available resources.

The generosity of donors remains critical to the organization’s ability to sustain and scale up its interventions. Without adequate funding, key response efforts, including disease surveillance, trauma care and the provision of life-saving medical supplies are at risk.” He finally concluded that “Despite the enormous challenges posed by conflict, economic collapse and financial constraints, Lebanon’s hospital sector has demonstrated remarkable resilience in maintaining emergency healthcare services. Hospital governance and resilience have been critical in prioritizing emergency response and ensuring that critical medical services remain available despite ongoing instability. Lebanon retains the medical expertise, infrastructure and potential to regain its regional leadership in healthcare, provided that key reforms and investments are prioritized.

However, Lebanon’s restoration of its role in the region will require not only recovery, but also transformation to ensure a more sustainable, inclusive and shock-resistant health system in the future. WHO stands ready to support the country in this regard.”

The following is the detailed interview between “Human & Health” and WHO Representative in Lebanon Dr. Abdel Nasser Abu Baker:



Dr. Abdel Nasser Abu Bakr

Q- How does the World Health Organization play a role during emergency situations in Lebanon, especially during the last phase, the Israeli aggression on Lebanon?

WHO leads efforts to address health emergencies in close collaboration with the Ministry of Public Health (MoPH) and key partners, including donors whose contributions enable timely and effective responses. The Public Health

Emergency Operations Center (PHEOC), supported by WHO, plays a central role in coordinating emergency health response across the country. It ensures mass casualty management, maintains hospital capacity, enables real-time data sharing between hospitals and humanitarian organizations, and mobilizes emergency medical supplies where they are most needed.

During emergency situations, WHO focusses on the following areas:

- **Emergency Preparedness and response:** Providing support to the MoPH to maintain strong and effective preparedness and response capacities for potential public health emergencies.
 - **Trauma and Emergency Care:** Providing urgent support to hospitals affected by conflict, ensuring continuity of emergency services.
 - **Disease Surveillance outbreak response:** Strengthening early warning systems, laboratory capacity, and public health interventions for timely detection, verification and response to potential disease outbreaks
 - **Essential Health Services for Vulnerable Populations:** Maintaining essential health service by expanding outreach programs for displaced people, ensuring continued access to maternal health, mental health, and noncommunicable disease (NCD) management.
 - **Health Sector Coordination:** Sustaining the effective health sector coordination under the Lebanon Response Plan (LRP) and engaging donors to sustain essential healthcare service delivery.
 - **Digitalization & Data-Driven Health Policies:** Enhancing electronic medical records, disease surveillance systems, and digitalized and tracking of public health indicators.
- WHO’s ability to carry out these functions is made possible through the continued engagement and support of its donors, whose contributions are catalytic in maintaining essential healthcare services and responding to emerging needs.

Q- What are the specific obstacles that have hindered the organization from successfully carrying out its work? Are they financial? Logistical?

The political deadlock of the recent years has significantly weakened Lebanon’s governance capacity, limiting the government’s ability to address public health challenges. The ongoing financial and economic crisis has further strained the health system, negatively impacting institutional capacities and increasing dependence on external support. Additionally, the escalation in violence

has further destabilized healthcare service delivery, leading to direct attacks on health facilities, loss of healthcare workers, and severe disruptions in hospital operations.

One of the most pressing challenges remains the financial constraints on the health sector. WHO has worked to address shortages of medication, healthcare workers, and essential medical supplies. However, the scale of need outpaces available resources. The generosity of donors remains critical to WHO’s ability to sustain and scale up its interventions, ensuring that Lebanon’s most vulnerable populations continue to receive essential care. Without adequate funding, key response efforts, including disease surveillance, trauma care, and the provision of life-saving medical supplies, are at risk of being compromised.

Q- In its efforts to support emergency healthcare in Lebanon, the World Health Organization, with the support of the European Commission for Humanitarian Aid, provided a set of emergency surgical equipment and medical supplies to the burn Center of Geitawi Hospital - University Medical Center in Beirut. Were there any other measures from the organization in terms of assistance?

With the support of donors, WHO has delivered over 250 metric tons of emergency medical supplies to 68 hospitals in partnership with the Ministry of Public Health. Other key interventions included:

- Prepositioning and procurement of emergency medical supplies to enhance hospital readiness for mass casualty incidents.



Dr. Abu Bakr with former Minister of Health Dr. Firas Al-Abyad

- Stockpiling trauma care kits and emergency surgical kits at the Central Drug Warehouse (CDW) to maintain contingency stock.
- Ensuring availability of chronic disease and mental health medications at the CDW for primary healthcare centers (PHCs).
- Supporting blood bank supplies by procuring and donating contingency stocks to the Lebanese Red Cross.
- Technical support for emergency medical supply monitoring, ensuring efficient distribution and utilization across frontline hospitals and PHCs.
- Enhancing storage and transport capacities to maintain uninterrupted supply chains for medical commodities.

Beyond providing emergency surgical equipment and medical supplies to Geitawi Hospital's burn Centre, WHO has been at the forefront of strengthening Lebanon's emergency healthcare capacity through extensive hospital training programs. Under the leadership of the Public Health Emergency Operations Center (PHEOC), WHO has supported 125 hospitals across the country in enhancing their trauma care and emergency preparedness:

- o 118 hospitals have been trained in Mass Casualty Management (MCM) to improve coordination and response to large-scale emergencies.
- o 112 hospitals have successfully conducted Mass Casualty Management activation drills, testing and refining their disaster response plans.
- o Geitawi Hospital was among the hospitals benefiting from this capacity-building initiative.

Looking ahead, WHO continues to invest in emergency preparedness through a comprehensive training program in 2025, equipping frontline healthcare providers with specialized skills to manage complex trauma and emergency cases. The ongoing modules include:

- Clinical Approach to Trauma Care – Strengthening clinical decision-making in emergency settings.
- Mass Casualty Management – Enhancing hospital readiness for large-scale emergencies.
- Management of Psychiatric Emergencies & Psychosocial Support – Addressing mental health needs in crisis situations.
- Surgical Skills in Conflict Settings – Ensuring quality surgical care in high-pressure environments.
- Essentials in Emergency Critical Care (EECC) – Improving critical care response in emergencies.
- Damage-Control Resuscitation for Trauma Care – Optimizing trauma resuscitation techniques.
- Breaking Bad News in Conflict Situations – Training



Dr. Abu Bakr inspecting the displaced

healthcare providers in delivering sensitive information during crises.

WHO supported the disease surveillance and prevention/control for emerging infectious diseases through the Epidemiological Surveillance Unit (ESU).

Q- How has WHO been instrumental in strengthening disease surveillance and prevention, and in controlling emerging infectious diseases through the Epidemiological Surveillance Unit (ESU)?

In response to the cholera outbreaks in 2023 and 2024, WHO played a critical role in the containment efforts by training 64 hospitals and equipping 2,005 healthcare workers with the necessary skills to detect, manage, and respond effectively to cases. To further enhance Lebanon's outbreak preparedness, the ESU conducted comprehensive training for over 1,200 healthcare workers, municipalities, and NGOs, reinforcing national capacities for communicable disease surveillance and early outbreak detection. In parallel, WHO supported over 3,000 diagnostic tests by procuring essential laboratory supplies and ensuring the retention of skilled personnel, enabling timely and accurate case identification. Through these initiatives, WHO, with the support of its donors, continues to bolster Lebanon's public health resilience against emerging disease threats.

Q- In your opinion, has the Lebanese hospital sector been able to provide first aid, care, and medications at a good level and maintain its distinguished past reputation, despite all the difficult conditions of war and economic and financial collapse?

Despite the immense challenges posed by conflict, economic collapse, and financial constraints, Lebanon's hospital sector has demonstrated remarkable resilience in maintaining emergency healthcare services. The Ministry of Public Health, in partnership with WHO and other key stakeholders, has provided both technical and financial support to referral hospitals and PHCs to ensure the continuity of critical emergency care.

Hospitals have successfully repurposed their existing resources to enhance readiness and strengthen their emergency response capacity. At the same time, WHO has played a pivotal role in delivering technical expertise and logistical support, enabling hospitals - especially those on the frontline - to sustain operations, manage patient surges, and maintain essential supplies.

The leadership and adaptability of hospital management have also been crucial in prioritizing emergency response, ensuring that critical medical services remain available despite ongoing instability. However, sustaining this level of service in the long run requires continued financial investment and donor engagement to address existing gaps and prevent further deterioration of Lebanon's healthcare system.



Dr. Abu Bakr during the delivery of aid

Q- Based on your observations of the healthcare sector's reality, will Lebanon regain its leading role as the "Hospital of the Orient"?

Lebanon's healthcare sector has long been recognized for its excellence, but its ability to reclaim its status as the "Hospital of the Orient" hinges on addressing deep-rooted structural and financial challenges. Years of economic decline, political instability, and the growing strain of hosting a large refugee population have placed immense pressure on healthcare services. The recent conflict has only exacerbated these difficulties, disrupting hospital operations and access to care.

Despite these challenges, Lebanon retains the medical expertise, infrastructure, and potential to restore its regional leadership in healthcare - provided that key reforms and investments are prioritized. This requires:

- Financial and Institutional Reforms – Strengthening the economy and implementing healthcare policies to secure adequate funding and support for hospitals.
- Retaining and Attracting Medical Talent – Introducing incentives to encourage Lebanese healthcare professionals to remain in the country.
- Public-Private Partnerships – Promoting investments from international organizations and private healthcare providers to restore infrastructure and services.
- Restoring Trust & Promoting Medical Tourism –

Positioning Lebanon as a hub for high-quality, cost-effective medical care once stability is reestablished.

With sustained donor support, strategic investments, and governance reforms, the country has the potential to reclaim its strong regional standing.

However, restoring its leadership in the region will require not just recovery, but transformation - ensuring a more sustainable, inclusive, and shock-resistant health system for the future. WHO stands ready to support the country through this path.