

## THE LEBANESE ASSOCIATION OF THE KNIGHTS OF MALTA (LAKM) / THE ORDER OF MALTA LEBANON IS LOOKING FOR A CONSULTANT

The Order of Malta Lebanon has been operating in the health and social welfare sectors since 1957. It manages a network of 40 projects serving the most vulnerable populations, across the Lebanese territory including Community Health Centers (following the MoPH Primary Healthcare Program), Mobile Medical Units, Elderly Day Care Centers, Hosting Centers for the Differently Abled persons and projects for the displaced and refugees.

The Order of Malta Lebanon (OML), with the support of its partner Malteser International (MI), has recently developed a comprehensive multi-annual program to strengthen its health and social services as well as its agriculture programs.

In this framework, OML is releasing a call for proposal submittals for a:

### **Consultant for Policy Assessment of Primary Health Care in Lebanon**

#### **I. Background**

The Lebanon financial and economic crisis is possibly to rank in the top three, most severe crises episodes globally since the mid-nineteenth century<sup>1</sup>. More than half the population is living below the national poverty line, with the bulk of the labor force-paid in LBP- suffering from plummeting purchasing power. With the unemployment rate on the rise, an increasing share of households is facing difficulty in accessing basic services, including health care<sup>1</sup>. Although Lebanon went through several health reforms in the past in response to the recurrent crises of recent years, the current deteriorating economic situation demands policy changes to ensure a comprehensive and accessible primary health care (PHC) system<sup>2</sup>.

In 2017, the WHO conducted a “PRIMARY HEALTH CARE SYSTEMS (PRIMASYS) - Comprehensive case study from Lebanon”, which had already highlighted a tremendous strain on the health system, both in case load and financially, and questioned long- term sustainability of the Lebanese PHC system<sup>3</sup>. Nevertheless, this case study pointed out the following priorities needed to be addressed at the governance, financing, and delivery arrangement levels of the health system in order to strengthen PHC in Lebanon<sup>3</sup>.

Priorities of the governance arrangement levels, for example included to a) create the right mix of incentives for both providers and patients to enable a functional gatekeeping system in a context such as Lebanon b) leverage incentive systems that link contractual agreements, regulations, accreditation, and performance indicators to strengthen PHC performance c) conduct a standardized community needs assessment at the national level d) promote intersectoral collaboration to address the social and environmental determinants of health<sup>3</sup>.

Priorities of the financing arrangement level were described as for example to: a) help secure sufficient financial resources to support expansion and scaling up of PHC b) consider how best to integrate community-based health insurance within the broader health financing system to achieve universal health coverage c) encourage the international humanitarian community to meet the funding requirements to sustainably respond to the Syrian refugee crisis in Lebanon<sup>3</sup>.

Finally, regarding delivery arrangement level, priorities were described to address for example to: a) expand the number and scope of services provided by the National PHC Network and ensure they reflect the needs of the population b) adopt a hub-and-spoke service delivery model in PHC,

whereby each primary health care centre (or hub) is linked to satellite units (nearby dispensaries or spokes) to ensure effective and efficient coordination of care at the primary level c) scale up the accreditation of PHC centers and monitor the quality of services on a regular basis d) conduct network mapping between different and same levels of care in order to make services more accessible and comprehensive and to improve patient and information flow<sup>3</sup>.

Finally, the WHO's case study stated that future considerations should be given to positioning PHC to become a central component for achieving the health-related Sustainable Development Goals (SDGs)<sup>3</sup>. This would entail reorienting PHC plans, programs and activities to ensure they align with SDG targets; raising awareness and educating PHC workers, managers and leaders about the SDGs; and mobilizing collaboration across social, economic, and political domains to align and prioritize efforts to achieve the health-related SDGs<sup>3</sup>.

The Order of Malta Lebanon, an apolitical humanitarian organization brings together communities, through its network of 40 different projects, amongst which 9 Community Health Centers (CHC) and 6 mobile medical units (MMU) across the territory, working with the Lebanese government and citizens of all faiths and confessions to serve the forgotten people all the while respecting their differences. The CHCs are located in Kobayat, Khaldieh, Barqa, Kefraya, Zouk, Roum, Siddikine, Ain el Remmaneh, and Yaroun.

In response to the multiple crisis facing the country, and in order to strengthen its structures, the Order of Malta Lebanon would like to conduct a policy assessment for primary health care that could influence potential health policy change at national level based on research and evidence from the PHC field and specifically from the its own CHCs network. Although, as described above in 2017 the WHO did a "PRIMARY HEALTH CARE SYSTEMS (PRIMASYS)- Comprehensive case study from Lebanon", the consecutive challenges of the 2020 Beirut blast, the ongoing COVID-19 pandemic and the deteriorating economic crisis, which the Lebanon continues to phase, demands a revision of the current state of PHC in Lebanon and its policies<sup>4</sup>.

This project should ensure a comprehensive and accessible identification of gaps of specific national policies that the OML research will be based on to improve the national primary health care system. This project should also portray OML as a major player in influencing national health care policies. Most importantly however, this project is expected to have sustainable impact, as it aims to address the causes of inequality in health service delivery and poor health through the formulation of policy/legal options and recommendations.

### **Project Steps:**

Step 1: Identification of policies gaps and recommendations

Step 2: Decision on specific policies to be selected

Step 3: Establishment of research (methodology, timelines, ToRs) that will generate evidence from the field level to influence the policy selected

Step 4: Translate the results of the research into policy briefs/recommendations for change the selected policy

Step 5: Conduct a stakeholders' analysis

Step 6: Conduct a series of workshops with the stakeholders identified to present the results of research in policy brief/recommendations form

## II. Scope of Work

Under the supervision of the OML research team, the consultant is expected to:

1. Design and implement a gap assessment of currently primary health care policies in Lebanon, highlighting their potential systemic and structural deficits and focusing on barriers to service provision.
2. The gap assessment should include a desk review as well as an on-ground analysis of members of PHCCs and relevant stakeholder interviews (e.g., MoPH, PHCCs health directors, Order of Physicians, relevant NGO personnel coordinating programs).
3. Recommendations to address the identified gaps and evidence needed from field level should be communicated in a draft policy brief.

## III. Expected Outputs and Deliverables

Outputs/ Deliverables	Estimated Duration to Complete
Prepare work plan outlining the activities and time frame for the conducting of the gap assessment;	5 working days
Conduct a desk review and prepare draft desk review report;	4 weeks
Conducting data collection + write policy analysis report including the situational review, gap and barrier analysis.	6 weeks
Policy Briefs (including recommendations to address policy gaps) including findings from LAKM research team in PHCCs	5 working days

## IV. Institutional Arrangement

For the duration of the contract, the consultant will report to and work in close coordination with the OML Research team. All outputs of the consultants will be subjected for review and endorsement of the OML Research team.

## V. Duration of the Work

This TOR should be accomplished in three (3) months; with a total 60 working days spread over four/five months (August - December 2021)

## VII. Qualifications

The Consultant must possess the following qualifications:

Academic Qualifications:

Post-graduate degree, at least a Master's degree, in public health policy, or equivalent

### Experience:

At least 5 years of relevant experience in policy and legal analysis focusing on primary health policies and programs and socio-economic development.

A minimum of 3 years of relevant experience in the field of the humanitarian/Development sector working with NGOs at Advocacy/Influencing capacity and in partnership with local Governments Familiarity with the Lebanese primary health care system (PHC), Lebanese Ministry of public health and PHC health policies.

## REFERENCES

1. World Bank. "Lebanon Sinking into One of the Most Severe Global Crises Episodes, amidst Deliberate Inaction" , June 2021.
2. **Ministry of Public Health Lebanon. "Health Reform in Lebanon", 2021.**  
<https://www.moph.gov.lb/en/view/1279/health-reform-in-lebanon>
3. World Health Organization. " PRIMARY HEALTH CARE SYSTEMS (PRIMASYS) - Comprehensive case study from Lebanon" , 2017. [https://www.who.int/alliance-hpsr/projects/alliancehpsr\\_lebanonabridgedprimasys.pdf?ua=1](https://www.who.int/alliance-hpsr/projects/alliancehpsr_lebanonabridgedprimasys.pdf?ua=1)
4. Hamadeh, R.S., Kdouh, O., Hammoud, R. et al. Working short and working long: can primary healthcare be protected as a public good in Lebanon today?. *Confl Health* 15, 23 (2021). <https://doi.org/10.1186/s13031-021-00359-4>

**Tenders must be submitted in two separate sealed envelopes (one including the original proposal and one for the copy), before the deadline of August 2nd, 2021 at 12:00 and delivered by hand against receipt to the following address:**

**Mrs. Rindala Bou Harb - Lebanese Association of the Knights of Malta, 1020 Ashrafieh building (previously Olivetti), 3rd floor - Mathaf Area, Beirut / LEBANON Tel: 03-784135**

IF YOU ARE INTERESTED TO QUOTE, PLEASE SEND US AN EMAIL NO LATER THAN **MONDAY AUGUST 2ND, 2021** AT 12H00 PM TO MRS. RINDALA BOU HARB, THE EXECUTIVE MANAGER OF THE DEVELOPMENT PROGRAMS AT [RINDALA.BOUHARB@ORDREDEMALTELIBAN.ORG](mailto:RINDALA.BOUHARB@ORDREDEMALTELIBAN.ORG) AND DR. JULIEN LAHOUD, IN CHARGE OF STUDIES AT [JULIEN.LAHOUD@ORDREDEMALTELIBAN.ORG](mailto:JULIEN.LAHOUD@ORDREDEMALTELIBAN.ORG).

\* SPECIFY THE *PROJECT NAME* IN THE SUBJECT.