



KARAGHEUSIAN ASSOCIATION  
PRIMARY HEALTHCARE  
CENTER IN LEBANON

# ANNUAL REPORT 2020-2022



Beirut, 2023



**THE KARAGHEUSIAN FAMILY**

*Howard, Zabel, Leila and Mihran Karagheusians  
(left to right)*



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PRIMARY HEALTHCARE CENTER  
IN LEBANON**

**ANNUAL REPORT  
2020-2022**

**SEROP OHANIAN**

General Manager  
Karagheusian Association in Lebanon

Beirut, 2023

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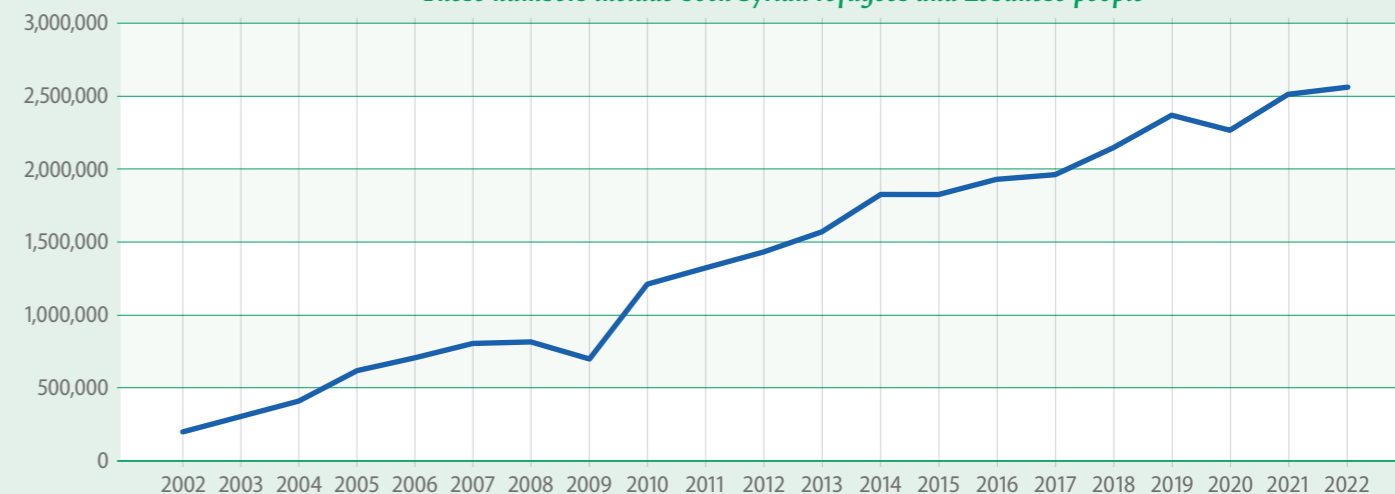
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# EXECUTIVE SUMMARY

Navigating the healthcare delivery through the last 3 years was not an easy task. We had to manage our healthcare services through multiple crisis on all levels : the economic and political crisis that started mid-October 2019 and is still going on, the COVID-19 pandemic with multiple days of centers' closure, doctors and patients not being able to come, staff catching the infection and hence working with staff shortage, re-organization of schedules according to the multiple lockdowns, the Beirut Blast of August 4<sup>th</sup> that destroyed not only our spaces but also our population, facing the influx of a heavier load of vulnerable Lebanese who lost all their purchase power due to the currency break and inflation and specially keep delivering high standards of care by professional doctors while seeing a lot of our resources fly the country to seek better opportunities abroad. Nevertheless, we kept providing the same quality of care of multiple services to serve a mixed population who needed help more than ever.

**The Rise of PHC Beneficiaries Numbers in Lebanon 2002-2022**  
*These numbers include both Syrian refugees and Lebanese people*

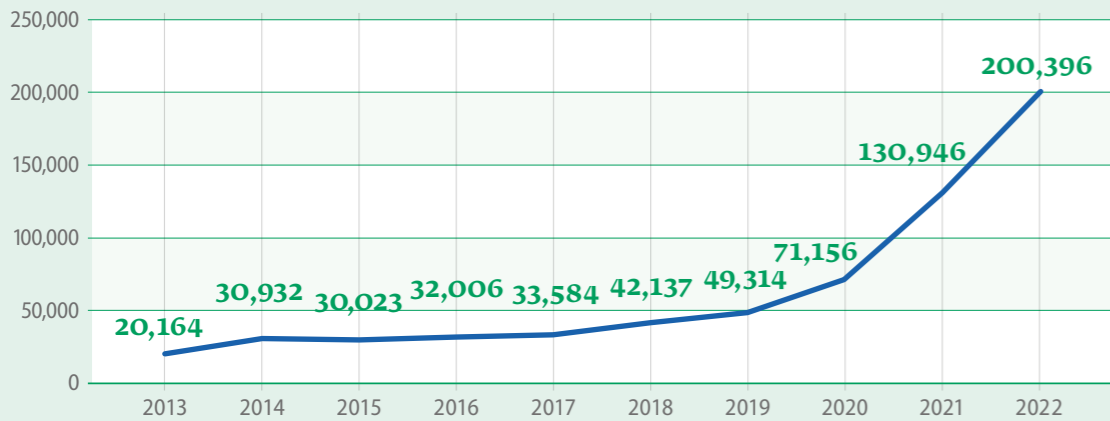


Source: the annual reports of the Lebanese Ministry of Public Health - Primary Healthcare Division  
<https://www.moph.gov.lb/en/Pages/749/3/primary-health-care#en/view/1198/reports-and-publications>



However, those 3 years of 2020, 2021 and 2022 were unarguably the most productive and memorable years for KA-PHC in terms of strengthening the Primary Healthcare Unit, more community outreach work, providing more services in the Children with Special Educational Needs Unit, improving our partnership with significant collaborations, and maximizing our efforts in improving our structure to be able to accommodate a growing population.

**Number of Beneficiaries' Visits to KA-PHC 2013-2022**



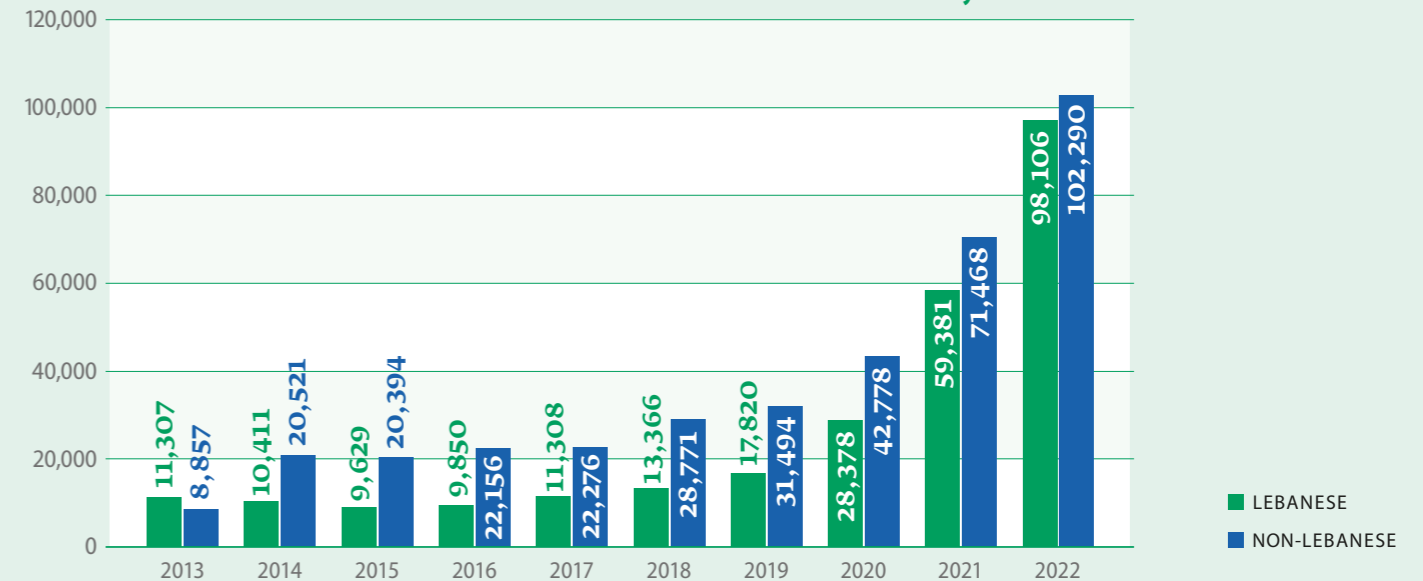
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Patients' visits	20,164	30,932	30,023	32,006	33,584	42,137	49,314	71,156	130,946	200,396

During those 3 years, we were able to accomplish many goals, we got nominated for the UN NCD Task Force & the WHO Special Programme on Primary Health Care, in June 2022 and won the AWARD in September 2022. We also received in June 2022 the American University of Beirut NGOi PLATINUM AWARD for NGOs Accreditation in Lebanon. Being part of the larger vehicle of change for growing local Lebanese Host communities, disadvantaged families and refugees, we expanded our operations and continued our structural renovations and rehabilitations, and our process improvement to better serve our community and its needs.

Since October 2019, the Lebanese economy was hit so badly which led to an increase in unemployment and a decrease in the purchasing power of the Lebanese people. Due to the Socio-Political situation in Lebanon, as political unrest, high unemployment rate, and the downgrade of the purchasing power of Lebanese Lira due to the depreciation of exchange rate, we have started to witness many Lebanese people seeking health services in Primary Healthcare Centers (PHCs).

In these difficult times, we kept our doors open to proactively provide the best possible primary healthcare as well as psycho-social

**Number of Beneficiaries' Visits Per Year & Per Nationality 2013-2020**



services to all those who needed these types of services. The involvement of the medical director and administration team was urgently needed to maintain a stable environment for staff and beneficiaries.

More and More Lebanese patients could not afford the care in private clinics or hospitals and were hence seeking care at our premises. For the first year since 2013, we witnessed an increase in the number of the Lebanese beneficiaries to reach a level higher than the refugees beneficiaries as shown in the below graph as a proof to how much our own Lebanese population is in need of our medical and psychosocial services and how our center is a refuge for them in those difficult times.

The total number of patients' visits increased tremendously to reach more than 200,000 patients visits in 2022 scoring a 400 % increase in the demand as compared to the year of 2019 where nearly 50,000 patients'

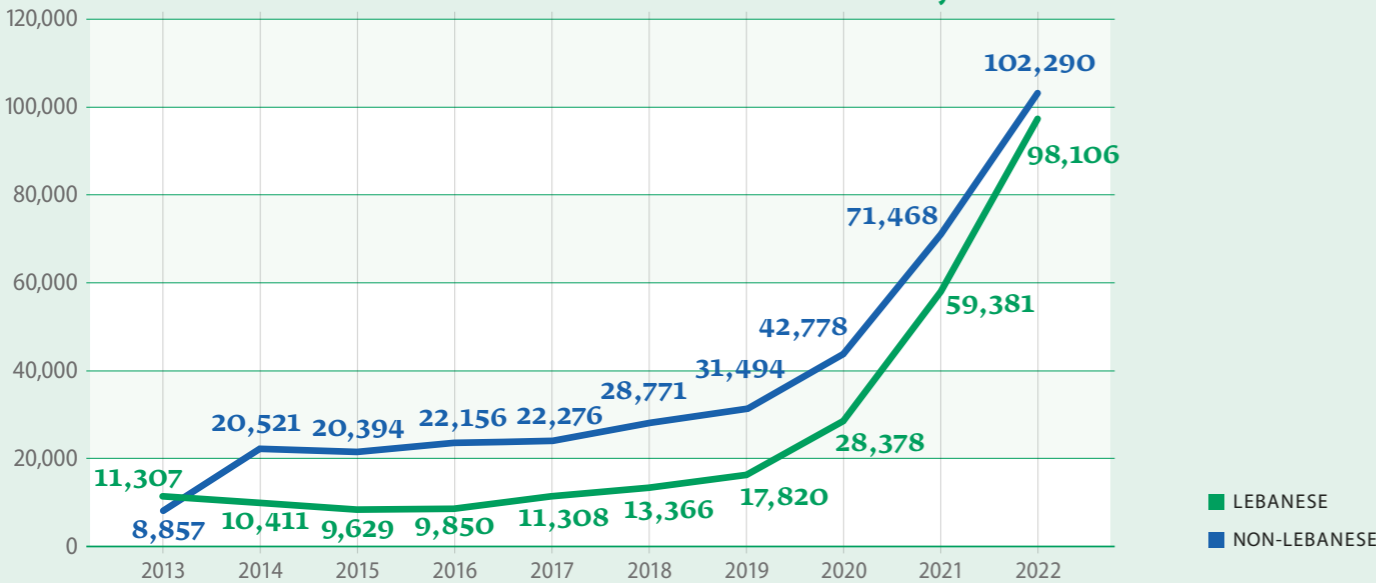
visits were recorded. The graphs below indicate the trend of patients visits and nationalities throughout the years.



**SDG Goal #17: PARTNERSHIP FOR THE GOALS**

Partnership, Cooperation, and Networking are key methods that inform agencies about our work and services. Keeping in mind the importance of maintaining continuous collaborations with our stakeholders, over the years, we have cooperated with local and international governmental and non-governmental organizations, educational institutions, Armenian and non-Armenian organizations, local community members, parents, and all other entities that care for the complete wellbeing of the child and his family. At no other time were these collaborations more productive than during the past decade.

### Trend of Beneficiaries' Visits Per Year & Per Nationality 2013-2022



Partnership, cooperation and collaboration with the Lebanese Ministry of Public Health, the UN Agencies (UNHCR, UNICEF, UNDP, UNHABITAT, UNOCHA, UNFPA) along with the World Health Organization (WHO), Academic institutions and Medical Schools of Universities, International NGOs such as the International Medical Corps (IMC), ACTED, The Pontifical Mission in Lebanon, Manos Unidas, the Calouste Gulbenkian Foundation, L'Œuvre d'Orient, Embrace the Middle East - UK, Centre Français de Protection de l'Enfance, and other entities increased the capacity of our organization in developing to serve more and to empower our staff to provide the best possible services to the people in our catchment area.

This amazing partnership created a synergy and confirmed the Astana declaration of Primary Healthcare stating that “We envision Primary Healthcare and health services that are high quality, safe, comprehensive, integrated, ac-

cessible, available, and affordable, for everyone and everywhere, provided with compassion, respect and dignity by health professionals who are well-trained, skilled, motivated and committed” (Declaration of Astana, Kazakhstan, 25-26 October, 2018. [www.who.int/primary-health/conference-phc/declaration](http://www.who.int/primary-health/conference-phc/declaration)).

It is throughout the collective efforts of these entities, that we were able to do our job and serve more than 200,000 patients' visits for different services, from 2020 to 2022.

Please scan the QR:  
the 2018 Declaration  
of Primary Healthcare, Astana

## KARAGHEUSIAN ASSOCIATION IN LEBANON

In 1921, Mihran and Zabel Karagheusian launched The Howard Karagheusian Commemorative Corporation (HKCC) in New York in memory of their son Howard—a victim of the great “Spanish Influenza” pandemic in 1918—who died from pneumonia at the age of 14. Their goal was to provide shelter to the young Armenian orphans who had survived the 1915 genocide.

From its inception, the focus of the foundation has been on the physical, moral, mental, spiritual, and social well-being of children of all groups and races.

After serving decades in Turkey, France, and Greece, HKCC extended its benevolent medical and social services to Armenia and Lebanon.



Karagheusian Association Lebanon staff and doctors (April 2022)

The Karagheusian Association (KA) was registered in Lebanon with the Lebanese Ministry of Interior as “Karagheusian Association for Child Welfare in Lebanon” on November 25, 1946 under Permit No. 2899 signed by the Minister of Social and Interior Affairs at that time, HE Mr Saeb Salam.

As part of the Lebanese Primary Health Care (PHC) network, KA Lebanon functions under the auspices of the Lebanese Ministry of Public Health and is a member of the High Council of Child Welfare in the Lebanese Ministry of Social Affairs.

At KA Lebanon, our mission is to follow children in the family, in the school, in the street, in their environment, and in their leisure time and prepare them to face the difficulties that lie ahead.

The purpose of the KA Lebanon Board of Directors Committee is to oversee the work and services of the Karagheusian Foundation in Lebanon and to advise, counsel and lead the Lebanon Field Director in his community work. The members of the Committee are selected from the various Armenian communities in Lebanon.



## THE KA LEBANON MISSION & VISION

We firmly believe that if the Karagheusian Association Lebanon Primary Healthcare Unit provides an accessible, affordable, reliable, high quality primary healthcare to those in our catchment area, then, we can expect to see healthy children and families in our society.



KA Lebanon Board of Directors members with the late HKCC NY Board President, and Managing Director (December 2018)

### The KA Lebanon Board of Directors:

- Mr Garbis Markarian – Chairman
- Ms Irina Lazarian – Vice Chairman
- Mrs Sossie Balian – Secretary
- Mr Raphael Oumoudian – Treasurer
- Judge Zohrab Ayyazian – Legal Advisor
- Mr Jean Salmanian, PhD – Advisor
- Mr Sarkis Keushkerian – Advisor
- Mrs Azadouhi Simonian – Advisor
- Mr Vahe Barsoumian – Advisor
- Mr Serop Ohanian – General Manager

### Our Mission

To provide Primary Healthcare services that are accessible, attainable, affordable, sustainable and continuous with high quality of care for all people without any discrimination.

To achieve this mission, we base our services on the three pillars of primary health care, which are:

- Prevention and early disease detection (Vaccination, Non Communicable Diseases screening, malnutrition assessment, mental health assessment, patient education, awareness campaigns, school health visits, home care etc.)
- Treatment and Cure according to evidence-based international medical guidelines (Medical or psycho-social)
- Proper Follow-up and continuous care through personalized plans of care

### Our Vision

- To ensure the complete well-being of the child & his family
- To relieve those in distress and support their physical, moral, and social development within their families and their environment.







### MESSAGE FROM THE MANAGING DIRECTOR OF THE HKCC NEW YORK BOARD OF DIRECTORS

It was with great pride in May 2014 that I assumed the position of Managing Director of the Karagheusian Foundation, and later, as a vice-chair of Karagheusian Association. While maintaining the vision and mission of its founders, the Karagheusian Association evolved into a 21<sup>st</sup>-century contemporary institution, employing new technologies and modern management style.

Largely operated for over 102 years, the name Howard Karagheusian holds a special place in the hearts of thousands of children, families and entire communities—all touched by the Foundation since it gave refuge to a handful of homeless Armenian boys and girls who had somehow survived the horrors of the Armenian Genocide of 1915.

The mission was simple—to bring hope and healing to vulnerable youth in the face of crisis and hardship. The execution of that mission was a different matter entirely. Delivering social and health services amidst upheaval and turmoil, often in perilous and unstable parts of the world, was a highly complex challenge with many twists and turns along the way.

Not only has the Karagheusian Association mission prevailed against the odds, but, it has far exceeded the expectations of its founders, Mihran and Zabel Karagheusian. Were they alive today, these visionary founders would surely be amazed to see all the accomplishments in the name of their only son Howard, whose life was cut short by Spanish influenza in 1918, at the tender age of fourteen.

Never could they have imagined a permanent center in Lebanon that would grow into an accredited Primary Health Care Center providing medical and social assistance to the local population, serving over 200,000 patients annually. Nor could they envision how the Foundation, which committed the funding of the entire worldwide mission from its inception would attract additional state, public, private and in-kind support from a larger international community toward bigger goals. The Foundation embraces the latest changes in science, medicine, education, and technology, keeping its work current to meet the needs of every generation.

In the uncertain world of today, especially in the Middle East, our mission is tested anew, demanding greater ingenuity and agility as conditions dictate. Nearly a century later, as pandemic hits the world once again, the Karagheusian Foundation makes an extra effort to continue its operations and provide much-needed services, while most of the country is in lockdown, amid pandemic. All in the name of a son, Howard Karagheusian.

As the organization nears its centennial in 2021, on behalf of our Board of Directors, I thank our dedicated and talented executive, professional and administrative staff for marking this inspiring milestone in the history of this remarkable force for good in the world—the one and only Howard Karagheusian Foundation.

**Irina Lazarian**

Managing Director  
HKCC NY Board of Directors



### MESSAGE FROM A MEMBER OF THE KA LEBANON BOARD

Year 2020, 2021 and 2022 have been the most critical years of Armenian and non-Armenian communities in Lebanon. It all started with the economic crisis in 2019 that brought the Lebanese Pound over the past four years to its lowest value. It naturally speeded up poverty for thousands of middle-class Lebanese citizens and further impoverished the poorer sector of the population. The Karagheusian Primary Healthcare Center attended to the care of more than 15,000 beneficiaries each month for an affordable, attainable, accessible and high quality of medical consultations with provision of medications secured by the Lebanese Ministry of Public Health. This initiative turned out to be a great blessing for the Armenian Community and for others living in the area of Bourj Hammoud.

The second calamity was the August 4, 2020 most destructive non-nuclear explosion of the Beirut Port that killed more than 200 people and destroyed thousands of buildings around its immediate vicinity. The devastation reached even Bourj-Hammoud and the Karagheusian buildings were damaged as well. In spite of its blundered physical state, wounded victims from the blast's surrounding areas, rushed in thousands for emergency medical care. The administration and staff of the Karagheusian Center in Bourj Hammoud assumed responsibility for these patients; all premises were used to treat the wounded. The place looked like an open air hospital. All those who were treated on the spot with utmost hygienic precautions, remained ever grateful for this most humanitarian service provided by the Karagheusian family.

The third blow to the people of Lebanon was the COVID-19 pandemic that ruthlessly reaped lives of a large number of young, middle-aged and old people. Karagheusian Center became a center for medical consultations to combat the effects of the Covid-19 virus. Karagheusian staff worked long hours under the most trying circumstances always apprehensive of the possibility of contamination. They braved through it with utmost courage and determination.

Covid extended its malicious arms towards Karagheusian staff's family too, unfortunately. We lost HKCC New York Board President Mr. Zaven Tachdjian, a highly esteemed member of our family. His leadership was greatly appreciated and his contribution especially to Karagheusian Association Lebanon and Armenia promoted ambitious plans and projects that are being processed in present times.



Zaven Tachdjian (1947–2022)



We had a second victim Dikran Kalaidjian, the young son of our Lebanon Board member Ms. Azadouhi Simonian Kalaidjian, a voluntary consultant of our Director for managerial and financial matters, also a member of the Armenian National Church Assembly of the Prelacy of Lebanon.

Our third great loss was a longtime valuable member of Lebanon Board member Dr. Haroutune Samuelian. He had great contribution in the performance of our Board over the years and his expertise as Vice governor of the Central Bank of Lebanon, became an asset in the smooth functioning of our plans and procedures.

It is with great satisfaction that I would like to comment on the most constructive role Lebanon Board has played over the years. It has kept excellent ties with the HKCC New York Board, advised the Lebanon Field Director at every step, undertook big projects like the renovation and addition of a floor to the old building by signing a contract with UNDP and installation of the statue of young Howard at the entrance of Karagheusian Center. Each member of the Board with chairman Mr. Garbis Markarian, has contributed according to his/her specialization in maintaining a visionary perspective of the work ahead through wise decisions.

I have witnessed the genuine cooperation among members and with Director Serop Ohanian, who always had the great support of the Board on his side to go ahead with very ambitious plans. Such a plan was the enlargement of the team of doctors and nurses that allowed the Karagheusian Center to serve to more than 15,000 patients each month. The Board was very compassionate also in dealing with the staff and their rights. This created a family atmosphere of mutual respect and appreciation. The staff worked wholeheartedly out of love of their institution rather than out of the call of duty, which makes all the difference.

The Karagheusian Association in Lebanon has demonstrated a commendable service to the Lebanese Armenian community during the major calamities that hit Lebanon in these past years. I believe these supreme efforts by Karagheusian family to relieve the suffering of the Armenians in Lebanon during these trying times will go down in to history enriching the annals of Karagheusian's glorious past.



**Dikran Kalaidjian (1973–2021)**



**Dr Haroutune Samuelian (passed away in 2020)**

**Azadouhi Kalaidjian-Simonian**  
Board Member of Karagheusian Association in Lebanon





## DELIVERING HEALTHCARE IN CRISIS

### A. The Deterioration of the Socio-Economic Situation in Lebanon After the October 2019 Revolution “Thawra”

Since October 2019, the Lebanese economy was hit so badly which led to an increase in unemployment and a decrease in the purchasing power of the Lebanese people. Due to the Socio-Political situation in Lebanon, as political unrest, high unemployment rate, and the downgrade of the purchasing power of Lebanese Lira due to the depreciation of exchange rate, we have started to witness many Lebanese people seeking health services in Primary Healthcare Centers (PHCCs).

More and More Lebanese patients could not afford the care in private clinics or hospitals and were hence seeking care at our premises. Hence, we had to find to act fast and increase the presence of our Family Medicine (FM) physicians to have a total of 15 FM Doctors and 10 FM Residents to cover 7 parallel daily FM clinics during our working hours. We even decided to open a “walk in family medicine clinic” to serve the patients who needs acute urgent care (who cannot wait for their appointment) and to serve patients with chronic diseases who started flowing to get their chronic medications.

### B. The Fuel Crisis

With the deterioration in the situation, came the fuel crisis during summer 2021, where the KA-PHC had to find innovative solutions to keep our daily operations as normal as possible while facing the high cost of private generators. Our engineering and admin teams worked hard to secure funding for installment of solar panels and using them for generating power, as using also batteries to keep our medications and vaccines refrigerators safe during the night. Another generator was also installed in order to cover all the electrical needs of

our growing spaces. We had also to secure internet connections because all our operations are recorded online on the Phoenix Health information system of the MoPH, and all the patients’ interventions need to be approved through this software immediately to receive the service. While we had to take the difficult decision to close on Saturdays we saved the full access of the patients all week long.

### C. The Covid-19 Pandemic

As the Novel coronavirus emerged in China in December 2019, Lebanon found itself facing the most contagious infectious disease crisis of the century.

With the start of the epidemic, and all the difficulties at that time within our own healthcare system, KA-PHC had to overcome barriers and update its daily operational plans to take part in the community containment plan of the infection. Through updating the already existing policies and procedures of hand hygiene and disinfection, creating new policies to ensure proper triage of patients to increase the chances of early recognition of suspicious cases, and mobilizing all the healthcare workers to be in the frontline of care, KA-PHC developed a new strategic plan to be a proactive member in the community.

KA-PHC as a primary care center had to be creative and adapt to operate in this health crisis. By listening to our population needs, applying for funding and seeking new collaborations accordingly, we were able to provide essential care to vulnerable populations infected by this virus. The center’s reputation was always glowing as it continued to serve all the complaints with high quality and professional care.

Preparedness of our healthcare facility regarding availability of necessary medical supplies and equip-

ment was the first point to address. By ensuring an effective communication with our collaborators (MoPH, IMC...) we made sure to receive all the needed safety supplies and equipment: personal protective equipment (PPE) such as surgical masks, face shields, goggles, non-sterile long-sleeved disposable gowns... Throughout the whole pandemic, our staff, doctors and even patients were provided with as much PPEs needed to ensure their safety and decrease the risk of transmissibility.

Ensuring adequate ventilation and environmental cleaning was a priority. On several occasions, disinfection of the whole center was done using a certified hospital based disinfectant, with the help of the Bourj Hammoud Municipality and of St-Marc diagnostic center. Disinfecting solutions such as alcohol based hand gels, soap and surface disinfectant were also continuously provided by MoPH and other collaborators (IMC, Anera...). Proper ventilation of all the center was revised by our civil engineer, clinics and work spaces were rehabilitated to ensure better airflow and decrease the airborne transmission of germs.

Several trainings were done by the MoPH, the medical director and the head nurses to our nurses and staff regarding infection control policies and procedure, training on isolation protocols, training on triage of beneficiaries at the door according to their symptoms and the MoPH check list for detection of suspicious infected cases and the procedure to be taken if such a case was found.

During the governmental lockdowns, the Center had to adapt and decrease its operating hours and working areas were confined to the Ground Floor to allow all other floors to be ventilated and closed. Space disinfection was done daily after working hours. Doctors had to be flexible since we had new patients’ flow and triage and their schedule was sometime updated on daily basis. We made sure to decrease the staff exposure as much as possible

in a way that a maximum of 15 employees were working daily inside the center and the ones with special conditions (immunodeficiency, pregnancy...) remained working remotely from home.

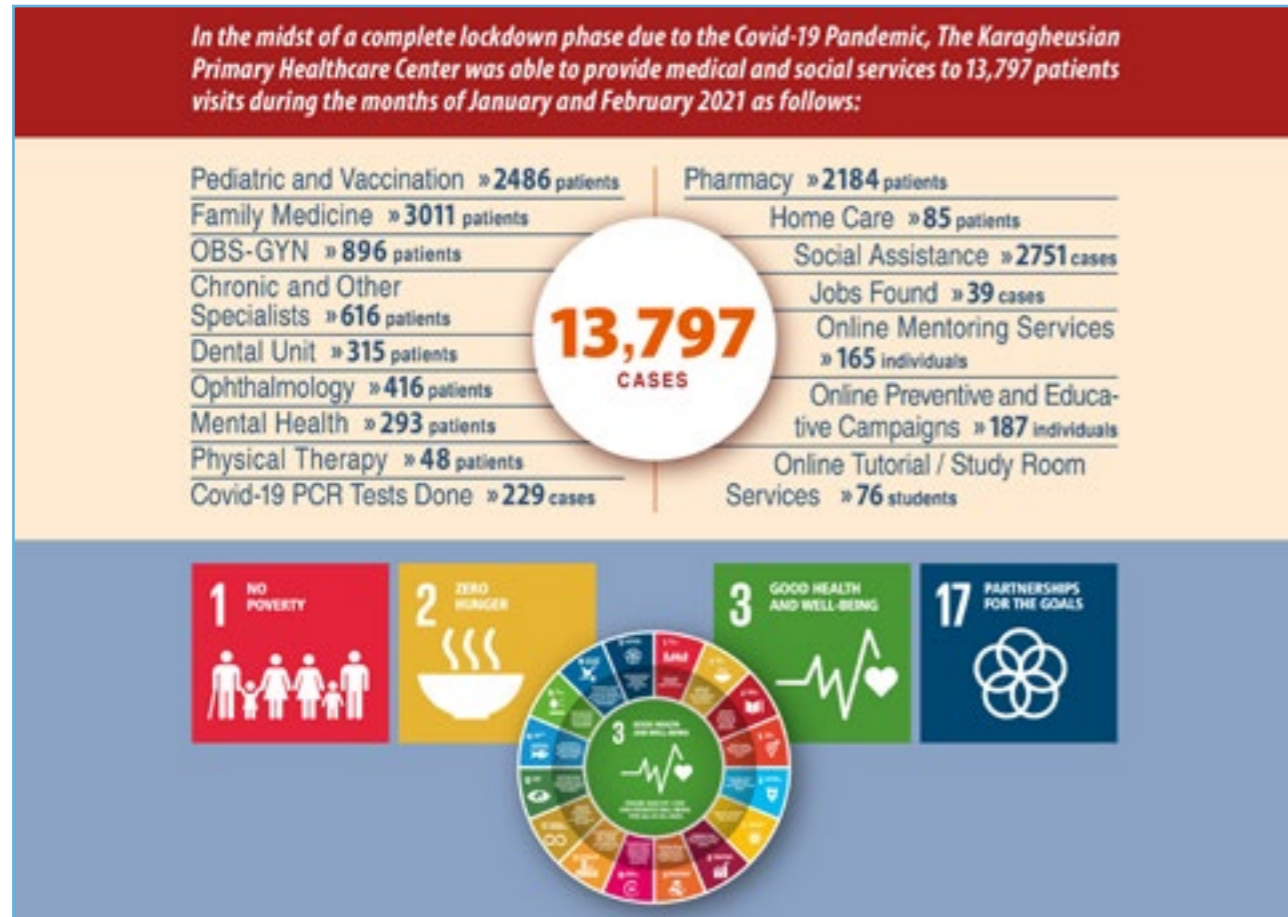
Early recognition of suspicious cases to decrease the risk of infection needed to refine our patients’ flow and assume strict triage regulations.

We started using one entry door only, where a well-trained triage nurse was always present with a well-equipped triage station (surgical masks, hand gel, patients’ education material) at the main entrance of KA-PHC. No patients were allowed without proper triage as per the MoPH checklist. Hygiene measures were explained to all patients, they were handed surgical masks and asked to properly disinfect their hands with the hand gel. No companions with patients were allowed (unless children and elderly).

Patients coming to take their medications were directly guided to the new pharmacy unit facing the main road without having to go inside the center.

An isolation room with single-use and disposable or dedicated equipment was created in an area away of other clinics to receive any patient with respiratory symptoms. A dedicated FM or pediatrician was assigned each day to examine those suspicious cases without having the risk of transmission to other patients. (See the below patients’ flow during Covid-19 Pandemic.)

Since social gatherings were all stopped we had to find a way to reach our population and educate them on multiple health topics including the Covid-19-related awareness (hygiene, symptoms, treatment, vaccination...). Hence a collaboration between our social departments, medical team and administration team was developed, to create social media contents (flyers online, educational videos shared on WhatsApp groups, health awareness shots from our doctors) to be diffused to the community to reach the most possible beneficiaries.



All karagehusian staff were supported during their infection with Covid-19, whether them or any of their family members. All PCR tests were covered by the administration, all their sick days were covered. Whatever laboratory or diagnostic tests were done for free along with all the medications and equipment they needed. They were all followed closely by our medical director who made sure they received the care they needed to get better, 2 cases only needed hospitalization due to heavy covid symptoms and were discharged healthy. The administration made sure to have more than 95% of the staff were fully vaccinated to ensure their own safety and the safety of their family members and of our patients.

A collaboration with the MoPH started in December 2020 through the Sentinel Surveillance System in Lebanon. KA-PHC was chosen to be one of the

limited number of healthcare facilities responsible for detecting and enrolling target cases and collecting PCR specimen for free one day per week.

Since we had a set number of 25 tests weekly to be done for free, we had to accommodate the huge load of patients requiring to be tested. Through its creativity and sense of service, the leadership of KA-PHC decided to buy kits for the Rapid Antigen test and to perform those tests for free for the needy community.

Patients who were testing positive were already experiencing symptoms and many of them were requiring medical care and interventions with oxygen therapy and even hospitalization. The hospitals were loaded with patients requiring oxygen and ventilators, and many people were not able to afford the basic medical care and medications. Being part of this community and

seeing the need of these patients, along with the demand of the mayor of Bourj Hammoud who requested medical cooperation to help the positive Covid-19 patients of this area, KA-PHC initiated a medical team consisting of physicians and nurses to serve these patients by providing oxygen machines (14 oxygen machines were provided in collaboration with Pontifical Mission) and home visits to provide the needed care and medications.

Since the demand was increasing, KA-PHC started to search for funding as it was way above its capacity to continue alone. This is when the IMC (International Medical Corps) proposed a new collaborative project for Covid-19 home visits called BHA (Bureau for Humanitarian Assistance). This collaboration with the IMC for the BHA project started on September 15, 2021, thus a new team of medical professionals including physicians and nurses was trained to do Covid-19 home visits including all the medical needed care, along with medications, education, guidelines for family members, and distribution of thermometers and saturimeters. Additionally, these patients were monitored and evaluated daily to make sure their condition was not worsening.

This project generated a remarkable change that affected not only the residents of Bourj Hammoud but also a lot of beneficiaries regardless of their residential area in Lebanon. In total from October 2021 till end of October 2022, 447 home visits were provided, from which 84 included physician visits, and 363 nurse visits. More than 80% of the patients were provided the necessary care and management at home avoiding disease progression and hospitalization and 20% of the patients manifested moderate symptoms that needed a physician's intervention. This helped the hospitals in decreasing the patient load as most of the hospital's beds were occupied and admissions were nearly impossible.

**D. The Beirut Blast**

The world had its 2020, but Lebanon's 2020 was

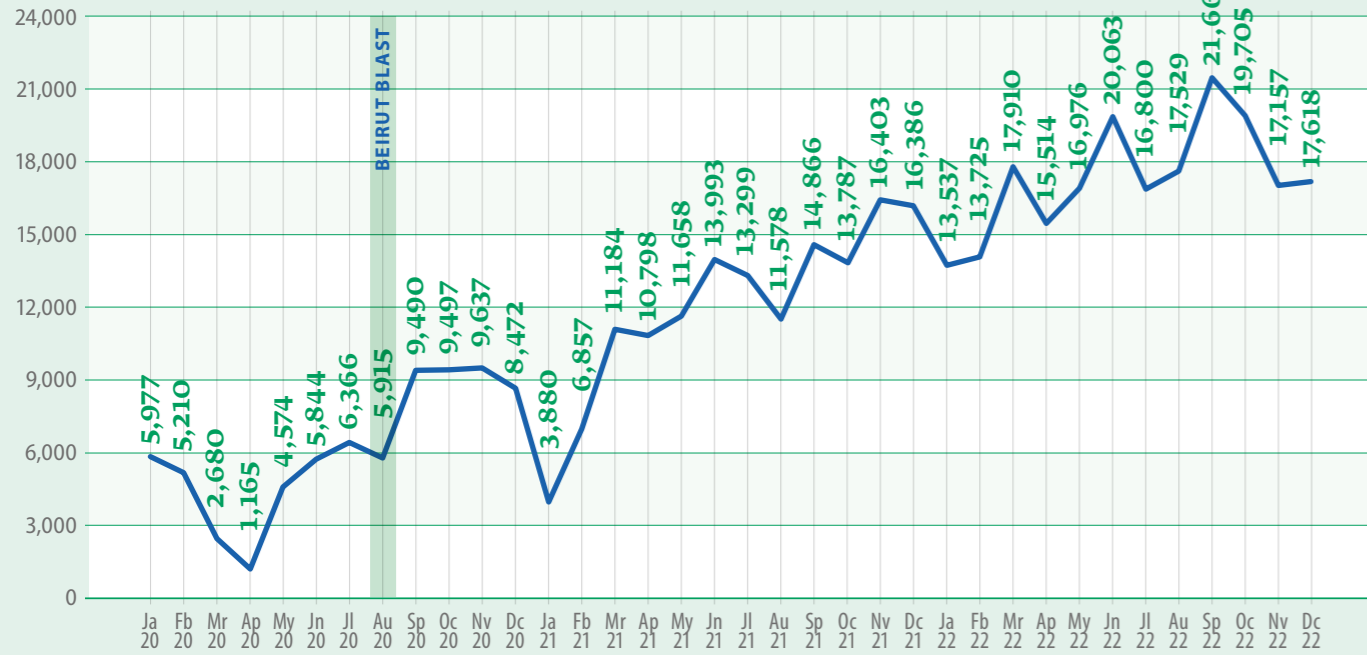
different. The Beirut Blast that happened on August 4, 2020 at 6:07pm, considered the second biggest non-nuclear explosion of the world's history, hit an already broken country very hard, in a point to shatter all its physical, mental and resources potentials. The KA-PHC was not spared. While our space was completely destroyed, we were lucky enough to be miraculously saved and had no physical injuries or loss.

Following the blast, the entire center including the new renovated building incurred huge damage. While the center's personnel took one day to clean the glass debris and rearrange what was left from the furniture and medical equipment, patients started to show up since hospitals were overloaded. We needed to treat urgent injuries within our destroyed premises and limited resources. Forty-eight hours after the blast, doctors came to consult patients in clinics without windows, in summer temperatures without air conditioning. Eye and Ear surgeons removed debris from for patients who couldn't reach an emergency unit. We called for donations and help from all our partners, all our extended community. We received emergency help of equipment and medical resources help from various organizations including healthcare organizations in the South of Lebanon who volunteered to help our nurses and doctors in healing our patients' wounds after the Blast. Full activities were resumed within 48 hours to serve stronger a destroyed and helpless population.

The demand on the mental health services increased dramatically specially after the Beirut blast of August 4, 2020. The mental health cases detected were people suffering from anxiety, post traumatic stress disorder (PTSD), and depression. Children who were under the direct effect of the blast have shown delay in their speech. This led us to recruit more psychiatrists and psychologists, and to provide mental health services for a minimal charge knowing that those services are not covered by any third party. KA-PHC became a mental health center



Number of Patients' Visits Per Month 2020-2022



of referral for neighboring area where patients from outside the center could come, get a consultation by a psychiatrist and receive their psychotropic medications for free. All this while preserving the patients' dignity and right to confidentiality with a maximum of privacy and respect.

After the Beirut Blast and seeing all the despair of the surrounding community, KA-PHC was in direct contact with the affected families and saw the effect of the tragedy on the children. Some of which started having night terrors, others had mutism or speech problems... From the feeling of insecurity and despair, 2 projects were born to help children and youth groups in getting hopeful and dream again in a better future.

The Beirut My Child and Girls for Change projects reached out to around 200 Lebanese and Syrian

children and teenagers to empower them through a training of 8 weeks in improving their skills in photography and film making. Some of the trainings took place in our premises where renowned artists, actors and film makers came to share their expertise with the young people. Food was served from our community kitchen and children had an amazing and fruitful artistic times.

The Right to Play project took place for 1 month during summer 2021 also at KA-PHC where 200 children aged less than 12 years were received by our psychologists to for different psychosocial activities through which they learned how to express their emotions and feelings through play. Children had proper space to play and listen to their feelings while mental health specialists were surrounding them and teaching them with professionalism and dedication.

**E. The Currency Depreciation & Political Uncertainty**

The increasing political unrest had very tough consequences on the healthcare system in general and also on the primary health care centers. Due to the severe currency depreciation, the Lebanese



Please scan the QR for a video on KA 1 month after Beirut Blast



# BEIRUT BLAST DAMAGES

At the Karagheusian Center in Bourj Hammoud - August 2020



Please scan the QRs for videos on: After the Beirut Blast 2020-22 Beirut Blast - 1 year memorial





families were not able to sustain themselves anymore, barely meeting the nutritional needs of their kids. The major health challenges to note were:

The patients could not afford to consult in private clinics or hospitals anymore. The national security fund and other third party payers stopped covering the cost of tests and hospital admissions.

The medication crisis between the pharmaceutical companies and the government led to the unavailability of a lot of essential chronic drugs and also essential antibiotics for children and adults.

- Patients started delaying their care and their acute and chronic conditions worsened.
- A lot of cases of malnourishment started to appear especially in children.
- Mental health started to deteriorate where more than two third of the population were experiencing symptoms of despair and PTSD.

Through all this darkness, the KA-PHC was able to welcome everyone who was in need by being accessible and attainable at all times, by opening new clinics and increasing the number of healthcare workers, by making its services affordable and updating

its services based on the community needs, by providing essential medications and vaccinations provided by the MoPH and other collaborators at the time where community pharmacies were empty, by providing sustainable care throughout its various departments, and all of this by providing the best quality of care with respect and dignity to everyone, regardless of age, gender, nationality and religion.

The MoPH directly supports the KA-PHC by supplying our pharmacy with essential & chronic medications for our NCD patients (including anti-hypertensive, anti-diabetic and insulin medications) as well as mandatory vaccines through the WHO Lebanon and the YMCA, and antibiotics and analgesics are received from the IMC through the EU Madad trust fund. Around 500 chronic and acute patients have their prescription drug dispensed daily for free from our pharmacy unit.

Through the various funds and help we received, we could even renovate our space and extend it to make it accessible to all. We have now access to disabled patients to all the centers' department by special sidewalks developed for wheelchairs and by a central elevator connecting all the 3 floors together.



## KA LEBANON PRIMARY HEALTHCARE CENTER

### Core Activities and Units:

- 1 PEDIATRIC & VACCINATION CLINIC
- 2 OBSTETRIC & GYNECOLOGY CLINIC (OB-GYN)
- 3 FAMILY MEDICINE & GENERAL MEDICINE CLINIC (curative & preventive services)
- 4 CHRONIC CARE (endocrinology, cardiology, pulmonology, nephrology, gastroenterology)
- 5 SPECIALIZED CARE (dermatology, ear-nose-throat, diagnostic radiology...)
- 6 DENTAL AND ORAL HEALTH UNIT
- 7 OPHTHALMOLOGY UNIT
- 8 PSYCHIATRY UNIT
- 9 NUTRITION/DIETITIAN UNIT
- 10 PHYSICAL THERAPY UNIT
- 11 HEALTH SUPERVISION IN SCHOOLS
- 12 HOME BASED HEALTH VISITS
- 13 PREVENTIVE & EDUCATIONAL CAMPAIGNS (GROUP WORK)
- 14 SOCIAL ASSISTANT SERVICE (CASE WORK)
- 15 MENTAL HEALTHCARE & PSYCHO-SOCIAL SUPPORT
- 16 CHILDREN WITH SPECIAL NEEDS UNIT
- 17 PHARMACY UNIT

KA-PHC Lebanon is a member of the growing network of the Primary Health Care Centers in Lebanon. The Lebanese Ministry of Public Health (MoPH) supports and guides the health interventions through our different clinics. The MoPH asks for a detailed monthly report about the

number of cases and their corresponding diagnosis and treatments, detailed weekly EWARN report of infectious diseases diagnosed at our center, and daily reports of Covid-19 (March 2020 and ongoing) and Cholera (end of 2022) suspected cases. Severe cases needing secondary interventions or hospital

admissions should also be reported after we do the necessary referrals. Furthermore, the MoPH directly supports the KA-PHC by supplying essential medications and mandatory vaccines through the World Health Organization and the UN Agencies such as the UNICEF and the UNHCR, The World Health Organization, the YMCA, as well as the International Medical Corps through the EU Madad trust fund.

**Strategic Initiatives:**

In order to face the challenges of the high demand of Primary Healthcare services within our Center in Bourj Hammoud, we are still improving the quality of our services through “Donabedian’s structure-process-outcome quality of care model”.

According to Donabedian’s health care quality model, improvements in the structure of care should lead to improvements in clinical processes that should in turn improve patient outcome and hence have a positive impact on the healthcare of the people within our catchment area. This

model has been widely adopted by many Primary Healthcare Systems in the world. In Lebanon, the Lebanese Ministry of Public Health coordinates with “Accreditation Canada” in order to improve the quality services of the Primary Healthcare Centers in Lebanon. KA-PHC Lebanon passed the first phase of the Accreditation process during 2014 and the second phase assessment visit during November 23, 2018. Since then due to the Covid-19 Pandemic, the international accreditation visits were stopped and were replaced by local Accreditation committees. During summer of 2021, KA-PHC was nominated by The American University of Beirut (AUB) Global Health Institute (GHI) to be one of the Lebanese NGOs to participate to a certification through the Non-Governmental Organizations Initiative (NGOi). On April 21<sup>st</sup> 2022, a professional team from the NGOi visited our center for an accreditation day after which we received the PLATINUM Organizational Certification AWARD.

Furthermore, to accommodate better the huge load of patients, we continued to improve the following:

during December 2019 and an opening of the newly renovated unit (Section A) happened on December 27, 2019. This funding came as part of improving the capacity of Primary Healthcare Centers in Lebanon and as section of “Lebanon Host Community Support Project” and through it three of the already existing buildings in Bourj Hammoud underwent structural changes.

At the beginning of 2020 we have started the second phase of the UNDP funded project at the section B of the center. At the ground floor, the renovation included the 6 pediatric clinics, 2 nursing stations and a waiting area. At the first floor we got 4 new additional clinics, a procedure room, a waiting area and a receptionist area. At the second floor extension we got 6 new clinics where the of Children with Special Needs Unit was transferred in 2021 to be included in our center right next to our mental health unit in addition to a reception and waiting area following a children-friendly design. During the project execution an elevator has been installed in order to facilitate people flow and to have all our departments accessible to all visitors.

These structural changes rendered the clinics compatible with the requirement of infectious control procedures with an isolation room for suspected infected cases, the patient flow was better; people with disabilities having full access through trails and an elevator; linking the medical unit to the social assistance unit; separate triage rooms were created for patients ‘confidentiality while retrieving their medical and social history; a separate Mental healthcare unit was created and renovated, etc.

A multi-disciplinary team was created to supervise a better design of the structural changes and rehabilitation process. The

committee is composed of three board members (the president, Mr Garbis Markarian; the legal advisor; Judge Zohrab Ayvazian; the engineer, Mr Sarkis Keushguerian) , add the facility manager Mr. Ahmad Awada in addition to the Lebanon Field Director, Mr Serop Ohanian.

**Pharmacy Unit Relocation and Restructure**

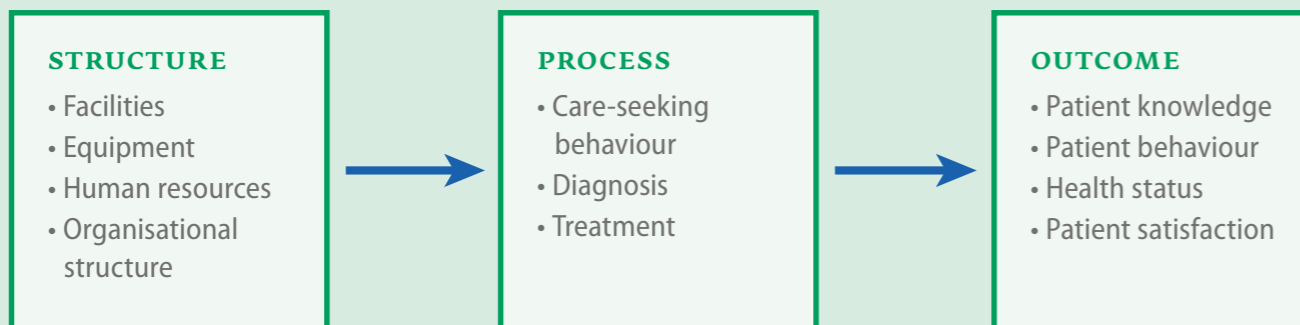
After doing our facility studies we envisioned that the pharmacy unit started to become overloaded in 2020 after the start of the financial crisis. We decided to have an innovative idea of dividing the load of the existing pharmacy into one central pharmacy (with access from inside the center in its ground floor as a central position) for patients coming to take their medications after consulting our doctors, and one external pharmacy unit (with private access from the main road) where all chronic patients come to take their monthly prescriptions without the need for them to get in contact with the patients and wait for their turn. This was a creative turning point in our patients’ flow especially after the start of the Covid-19 pandemic where we were able to decrease the exposure of the patients and provide the same care with better infection control.

**The Rehabilitation of the Center After the Blast**

KA-PHC was heavily affected by the Beirut Port Blast of August 4<sup>th</sup> 2020. On the second day, being aware of the high need to ensure the first aids of an injured surrounding population we have immediately proceeded with our plan to do the rehabilitation works and resumed our clinical activities on August 6<sup>th</sup>.

From rehabilitation of aluminum windows and doors, glass works, wall gypsum board mounting, painting to electrical and mechanical works, it took us one month to finish our rehabilitation

**The Donabedian Model, Adapted from the Quality of Care (Donabedian, 1988)**



**STRUCTURE:** The physical structure of our premises needed to undertake certain rehabilitation and renovation processes in order to cope with the increasing demand

of cases and in order to have better flow of patient care. The first phase of rehabilitation that started during 2016 and was funded by the UNDP alongside with its partners, ended



with the support of the Order of Malta Organization. Our center was fully renovated on September 8 2020, after 35 days of continuous construction works in parallel with receiving patients all day long.

**The Pediatric Unit**

Was also renovated to have 6 adjacent fully functional clinics working in parallel daily full day to receive children for their wellness and vaccination checkups and also during their sickness.

**The OB-GYN Unit**

due to the increase patients load in the Obstetrics and gynecology unit, we recruited a second midwife to be in charge of a new OBGYN clinic that we fully equipped on the renovated first floor.

**The Point of Care Rehabilitation Through the IMC Zaman Project and the Embassy of Japan Project**

During May 2021 we did a full rehabilitation of our point of care unit where we installed new benches and cardboards to organize the space following the accreditation standards, electrical and mechanical installations were done also to receive new laboratory machines including a CBC machine, electrolyte and chemistry machines, a microscope and a hormone machine.

**The Dental Unit Expansion with Panoramic Machine**

During May 2021, renovation was done in our dental department to install the panoramic machine booth following the international and national safety guidelines. This service was necessary to our patients since they couldn't afford to do it at the private radiology departments.

**The E.N.T. and Hearing Test Unit**

Due to the high demand, we had to increase the presence of our ENT doctors to have one doctor daily, and since the hearing tests cost became unaffordable in the market, we applied and won funding of an audiogram/tympanogram machine with their isolation booth. In June 2021, a new audio clinic has been prepared by expanding an existing clinic on the first floor than dividing it into two clinics and execute all needed works. One of the two clinics has been furnished by installing a new modular soundproof booth and fully equipped hearing test unit in order to provide patients with hearing tests of high quality directly checked by our ENT doctors.

**The Installation of a New Diesel Engine Generator**

During summer of 2021 a huge fuel crisis started in the country. We had to endure several days of complete electrical cuts, working without air conditioning in the high summer temperatures, we had to find our own sustainable energy sources. With the support of Intersos and UNHCR we installed a new generator of 250 KVA to feed the center in electricity and to be used as a backup during emergencies. We also installed 20 batteries connected to solar panels to have 24-hour electricity to feed our critical equipment such as the server room and the pharmacy and vaccines refrigerators.

**The Filing Rooms Renovation**

In order to get more space in 2020 to receive and store patients' medical files we decided to profit from our existing filing room by adding a mezzanine to its ground floor section, both are communicating through the installation of a new dumbwaiter lift to facilitate and accelerate files transfer from one floor to another reaching the clinics more easily.



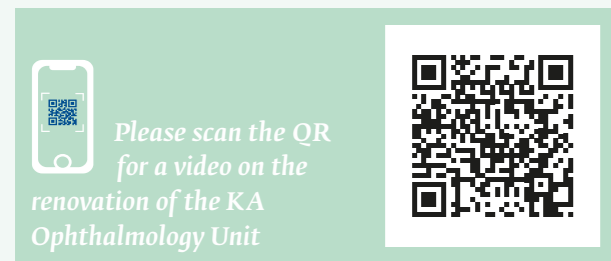


However, soon after its inauguration, this extended filing room was filled up in 2021 by the huge amount of new patients' medical files opened daily (average of 75 new patients daily). We needed to find an additional space, so we profited from the backstage area at the ground floor by executing a new project during September-October 2021 consisting of installation of new mezzanine in addition to all needed civil, mechanical and electrical works.

By the end of this project we got an additional room of 2 floors to be used as an extension for the existing filing room.

**The Ophthalmology Unit Expansion, Rehabilitation and Equipment**

The ophthalmology unit at KA-PHC also had to expand its services in 2020 especially after the Beirut Blast in order to cater for the needs of patients who had eye injuries, as well as patients who had visual disturbances due to the shift into online teaching and remote work during the pandemic. The ophthalmology visits nearly doubled in the last 2 years explaining the high need for the community for this services. Therefore, a fund was received from the Misereor Project in order to renovate and equip a second ophthalmology clinic that started receiving patients in March 2022, working in parallel with the first clinic with the help of a dedicated Nurse for this unit.



**The Rotary Dental Clinic Rehab in Ainjar**

In May 2021 a full rehabilitation of the dental clinic on Ainjar was funded by the Rotary club.

All needed civil, mechanical and electrical works were executed and a new dental chair was installed, with a new panoramic machine and an autoclave. This renovation was a huge improvement in the quality of dental service provided in the Bekaa area.

**The Reception Unit**

During June-July 2022, we executed a new project consisting of joining the 3 reception units of patients' registration, cashier and operator/ appointments, in the hall at the main entrance in order to facilitate the patients' flow in the center and to help them finish their administrative work before moving to consulting our doctors and specialists, and store patients' medical files we decided to profit from our existing filing room by adding a mezzanine to its ground floor section, both are communicating through the installation of a new dumbwaiter lift to facilitate and accelerate files transfer from one floor to another reaching the clinics more easily.

**HUMAN RESOURCES UNIT**

The Human Resources Department at KA attracts, develops and retains a high performing, inclusive and diverse workforce and fosters a healthy, safe, well-equipped and productive work environment for employees, their families, departments, community partners and the public in order to maximize individual potential, and expand organizational capacity.

Throughout the past three years the KA was facing a competitive labor market due to the country's bad economic situation, competing opportunities abroad, and brain drain. The human resources unit at the KA is focusing on proactively sourcing a diverse pool of candidates via social media,

developing a new brand for KA employment and promoting programs such as internships and flexible work schedules.

Despite all the difficulties the country was facing, KA worked hard on enhancing the employee experience through a culture of employee engagement, wellness, diversity and inclusion, that leads to overall employee well-being, productivity and retention.

In addition, employees were also exposed to different training topics through the past 3 years:

1. Effective management of Vaccinations
2. Electronic medical records on Tablets
3. HLA fundraising strategies in health marketing
4. Quality, Management and Nursing
5. Obstetric and neonatal emergencies
6. Effective mechanisms for receiving and handling suggestions and complaints
7. Interpersonal Therapy (IPT)
8. Vaccination promotion activity for dropouts
9. Hand Hygiene
10. Medical Waste Management
11. Improving quality of service
12. Fire Safety
13. Non-Medical Waste Management
14. Vaccination training & new system of vaccination data entry
15. Community Needs Assessment
16. Child Protection
17. Wellness and Mental Health Week/Happiness at the workplace
18. Infection prevention and control measures against Covid-19
19. Health communication and education skills against Covid-19

20. Mother and child health - Nutrition and breastfeeding
21. Mental health Assessment for Covid-19 patients
22. Malnutrition Screening & Treatment
23. First Aid
24. Firefighting
25. Disinfection
26. Initiation for Risk Reduction
27. Recycling
28. Harassment at workplace and safeguarding policies
29. PCR and Rapid Covid-19 Testing
30. LPSP IMC/MoPH Preventive Packages Training
31. Cholera Emergency Response

Besides the full-time staff, we also have volunteers, nursing students, and medical students who come and serve at the center throughout their academic year. Below is a table which summarizes the total number of employees & university interns for the past three years. These students have a tremendous added value to the quality of service provided at the center, their presence made reaching out to the most vulnerable population possible and more attainable.

All these human resources are combined with a talented team of physicians including Pediatricians; Family Medicine Specialists; Obstetric and Gynecologists; Endocrinologists; Cardiologists; Nephrologists; Gastroenterologists; Sports Medicine and Orthopedists; Ophthalmologists; Ear-Nose-Throat Specialist; Dermatologists; Radiologist; Dentists; Pedo-Dentists; Endo-Dentist; Periodontist; Orthodontists; Psychiatrists; and the list goes on...

For the coming years, the human resources unit will continue to offer learning and development programs that include leadership development



workshops, and trainings which will help develop and retain talent for the years to come.

### Total Number of Employees & University Interns 2020-2022

	2020	2021	2022
Full Time Employees	34	55	70
University Interns (Volunteers, Nursing Students, Medical Students...)	68	41	175
<b>TOTAL</b>	<b>102</b>	<b>96</b>	<b>245</b>

### Equipment

In order to serve better, as of 2014, we received the necessary basic primary healthcare equipment such as Ultrasound; Echo-Cardiograms; Dental Chairs; Autoclaves; Point-of-care lab machines; Audio-reflectometer; Echo-morpho scan; fetal monitor; ECG...

Starting 2020, with the increase in demand to new services we had to procure the following equipment: electrosurgical cautery used for minimal bleeding, 3 more ECG machines to sustain the screening of more NCD patients, with the need to provide more services, a spirometer to start performing spirometry breathing tests for people with chronic lung diseases especially after the Covid pandemic, advanced ophthalmologic equipment such as an indirect ophthalmoscope and a 20D/90D lenses. Beside equipment that were financed by the KA-PHC, we had to apply to several funds in order to secure more expensive equipment.

We received several donations for office desks, filing cabinets, pharmacy cabinets, CCTV cameras laptops and desktops in all the clinics and nursing areas, refrigerators, air conditioners, printers and photocopy machines, medical equipment such

as autoclave and sterilizers, laboratory machines and dental Panoramic machine and intra-oral X-rays, ophthalmologic equipment and machines, audiometry equipment, ECGs...

**PROCESS:** Strategically, we improved our use of the digital Health Information System (HIS).

In 2018. We started using Primary Healthcare Network Information and Communication System (Phoenix) provided to us by the Lebanese MoPH. Now all patients at the KA-PHC Unit have their own file recorded on a Digital Healthcare platform on the System to ensure a better patient-centered care approach. All of our staff received all the appropriate and necessary trainings to be able to use this platform in all its aspects.

This system was a revolutionary part of the public healthcare needs within our community and it added tremendous value to the care and services of our Center. We are now registering all the investigations that the patients do inside the platform, to consult at any time all their previous visits to the center, all the results of their laboratory tests and other investigations. The pharmacy unit is also totally linked to the platform where all our medications are inserted with their expiry date, the system helps us get an accurate storage plan and medication inventory. All the patients' medications prescriptions are also digitalized where the pharmacist have access online to the patients' prescriptions and dispense the medications accordingly.

We also started giving appointments through the online Phoenix platform, and sending reminder sms for all the patients before their appointment and reminder that it's the patients time for their yearly checkup or time for their kids' vaccination schedule. It was a strategy to decrease the waiting time to get

an appointment, to increase accessibility to our clinics without the need to displacement. This system implemented early 2022 will permit us to study the trend of appointments and show up of our patients (load of patients for a certain specialty or doctor, load of no show or cancellation, growing need in a certain department...). Decisions and actions will be taken according to the findings.

Recently another function was used through the Phoenix, the one of printing direct receipt to the patients instead of manually writing them by hand. This saved us a lot of time and also papers' cost.

We also started sending the patients' their laboratory result through emails and/or WhatsApp on the same day of the blood withdrawal in a timely manner to decrease waiting time and facilitate direct access to care.

Now through the digitalized system, we are able to extract the data and do the necessary community disease trend analysis specially regarding NCD patients to create a follow-up strategy. By digitization of the data and improving the process on the ground we are able to satisfy more and more the need of the community and act fast in order to stay in advance of the increasing patients' demand.

The PHENICS Health Information System paved the way to improve communications between the units to ensure continuity of care for patients, between doctors of multiple specialties, to decrease the redundancies of testing, and to assure a holistic approach to the patient.

Therefore, in this way, we were able to transfer data into useful information and from the information into a useful decision-making tool enhancing the necessary community healthcare need analyses. The achievements of the last 3 years in terms of digital information using the Phoenix HIS are:

- A) Integration of the Dental unit patients and procedures into this PHENICS HIS system
  - B) Integration of the pharmacy unit into the system with a clear medication management protocol
  - C) Integration of all the laboratory and diagnostic tests requests and results into the PHENICS HIS
  - D) Activation of the appointment system through the PHENICS HIS
  - E) Activation of the communication pattern with patients reminding them of their appointments and their children's vaccination time
  - F) Generating all kinds of weekly and monthly reports of activities of all the center's departments and communicating those reports with the MoPH and the collaborating partners such as IMC.
  - G) Printing direct consultation receipts to the patients instead of manually writing them by hand.
- Future Projects through the PHENICS HIS:
- Train all of the physicians to start using the system directly from their consulting room
  - Start using the data extracted for research purposes
  - Involve all the departments in the PHENICS Appointment system

### OUTCOME-BASED PERFORMANCE AT KARAGHEUSIAN:

The outcome-based performance management system at the Karagheusian Primary Healthcare Center is based on a process of continuous feedback, driven by health outcome indicators. In order to achieve the best quality of services, we developed a set of Key Performance Indicators (KPIs). These KPIs were divided into three categories: patient-centered KPIs, employee-centered KPIs and process-centered KPIs.



The two patient-centered KPIs are patient satisfaction and patient safety. The patient satisfaction KPI is the percentage of satisfied patients over total of patients. It is assessed twice a year through a 12-item questionnaire about human resources, building, medications and services. The patient safety is the percentage of proper hand hygiene over total number of contacts with patients. It is assessed twice yearly through observation of staff during their daily activities.

The employee-centered KPI includes job satisfaction that is assessed once yearly with a 40-item questionnaire administered to all employees in interviews.

The two process-centered KPIs include the Non-Communicable Disease (NCD) follow-up and the compliance of patients to the vaccination schedule. The NCD follow-up is the percentage of patients that are followed by a doctor over total of patients screened for NCD. This KPI is assessed twice yearly by reviewing all charts of patients screened for high risk of Non-Communicable-Disease (NCD) symptoms such as diabetes, hypertension, etc. The compliance to the vaccination schedule is the percentage of children coming back for their next vaccine over all children vaccinated. It is also assessed twice yearly by reviewing the charts of children vaccinated.

These Key Performance Indicators were regularly monitored and evaluated, and gaps in performance were addressed. This helped the overall performance at the center to continuously improve and reach better outcomes.

Another type of Outcome-based performance indicators used at the Karagheusian Association PHC Unit is Through various outreach initiatives as well as preventive and educative campaigns. We were able to improve the patient's knowledge about basic healthcare topics such as Smoking cessation, early detection of breast cancer and

awareness campaign, early detection of awareness of cervical and colon cancer, the importance of vaccination, breastfeeding, the early detection of anxiety disorder, depression, awareness about legal matters, and much more.

“ **What worked yesterday won't work today**

- *Yesterday natural resources defined power. Today knowledge is power.*
- *Yesterday hierarchy was the model. Today synergy is the mandate*
- *Yesterday leaders commended and controlled. Today leaders empower and coach.*
- *Yesterday leaders were worriers. Today leaders are facilitators.*
- *Yesterday leaders demanded respect. Today leaders encourage self respect.*
- *Yesterday shareholders came first. Today customers come first.*
- *Yesterday managers directed. Today managers delegate.*
- *Yesterday supervisors flourished. Today supervisors vanish.*
- *Yesterday employees took orders. Today teams make decisions.*
- *Yesterday seniority signified status. Today creativity drives process.*
- *Yesterday production determined availability. Today quality determines demand.*
- *Yesterday value was extra. Today value is everything.*
- *Yesterday everyone was a competitor. Today everyone is customer.*
- *Yesterday profits were earned through expediency. Today profits are earned with integrity. ”*

Excerpt from Denis Waitley's *Empires of the Mind: Lessons to Lead and Succeed in a Knowledge-Based World*

# KA STAFF ACTIVITIES

## Staff Christmas Celebration - December 2021



## Staff Valentine's Day Celebration - February 2021





### Celebrating Nurse's Day at KA - May 2021

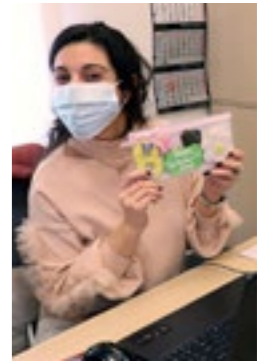


Please scan the QRs:  
 ◆ Nurse's Day at KA (video in Arabic)  
 Nurse's Day at KA (video in Armenian) ◆

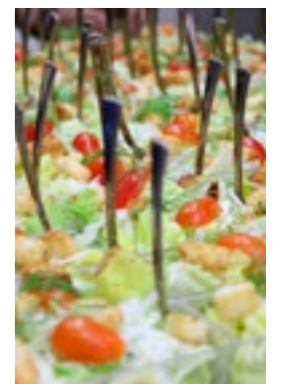
### Staff First-Aid Training - March 2022



### Celebrating Women's Day at KA - March 2022



### Staff Easter Celebration - April 2022





### Nurse's Day Celebration - May 2022



### Staff First-Aid Certification - August 2022



### KA Staff Participating in the Beirut Marathon - November 2022



Please scan the QR to watch a video on KA staff participating in the Beirut Marathon event.





# HONORING OUR STAFF

Dr Noura Kaadi, in her final day as Medical Director at KA-PHC - April 2022



KA saying farewell to Mrs. Christine Tanielian-Sarkissian - December 2022



KA is thankful to Dr Esther Van Der Kniff of GZB for her service at the Center since 2021



## THE KA-PHC LEBANON PROCESS OF UNIFYING THE MEDICAL RECORDS & CREATING AN INDIVIDUALIZED PATIENT'S MEDICAL FILE NUMBER

ONLINE system "PHENICS" launched in 2016 by the Lebanese Ministry of Public Health is a comprehensive system, user friendly and contains individuals' Electronic Medical Record.

The PHENICS system is implemented and managed by the Lebanese Ministry of Public Health Primary Healthcare IT division unit. It is housed in the MoPH and has the following features:

- Serves all PHC activities in addition to Emergency Primary Healthcare Restoration Project (EHPRP) needs
- Currently covers 108 PHCs (out of the 223 PHC centers)
- Including 71 centers in EHPRP Project
- 101 centers underwent Data Conversion process
- More than 100 training sessions and 350 one-to-one meeting and field visits were conducted on the various modules.



### Modules of PHENICS

- Outreach and Enrollment Module
- Patient and EMR Module
- Procurement and financial module
- Stock Module
- Other Administrative and reporting modules
- Center's profile
- Field visits check lists
- Patient satisfaction
- Progress report, MoPH Reports, Disease trend analysis, Appointment system...





## KA-PHC LEBANON MEMBERSHIP

Besides caring and contributing directly to the public health of the community, we are members of the following Lebanese and Armenian networks:

### Lebanese Ministry of Public Health

The Karagheusian Association in Lebanon is a member of the growing network of Primary Healthcare Centers in Lebanon. The Lebanese Ministry of Public Health supports and guides the health interventions through our different clinics. The Ministry asks for a detailed monthly report about the number of cases and their corresponding diagnoses and treatments. If there are severe cases that need secondary interventions, we do the necessary referrals. Furthermore, the Ministry directly supports us by supplying medications through the World Health Organization and the UN Agencies such as UNICEF and others. Every year the Ministry supplies the following medications and drugs:

**A. Essential Drugs:** Essential drugs are vital for preventing and treating illness which affects many people. Essential drugs save lives and improve health.

- i. Essential Non-Chronic Drugs;
- ii. Essential Chronic Drugs: The Essential Chronic Drugs are channeled from the Lebanese Ministry of Public Health through the Young Men's Christian Association (YMCA) to KA-PHC.

**B. Vaccination Program:** To promote health and protect children from communicable disease, the Lebanese Ministry of Public Health urges parents, guardians and adults to maintain their children's immunizations up to date and all adults to be immunized according to the Lebanese Ministry of Public Health's recommendations. The goal of those concerned with immunization is the

elimination of vaccine preventable diseases. Therefore, the Ministry provides the "Mandatory" vaccines to all Primary Healthcare Centers.

### Lebanese Ministry of Social Affairs

#### The Higher Council for Childhood in Lebanon:

The Higher Council for Childhood is the national framework for complementary work between non-governmental organizations and the public sector as to child care and development in compliance with international conventions and especially the Convention on the Rights of the Child and in collaboration with international organizations.

The Council seeks to implement the general principles of children's rights in order to improve the situation of children in Lebanon and ensure their rights to survival, development and protection.

The council was established in 1994 by virtue of the decision No 29/94 issued by the Council of Ministers. It is presided by the Minister of Social Affairs, the Director General of the Ministry as Vice President and it includes members from several ministries, non-governmental organizations and international organizations are specialized in children issues. We are an active member in this Council.

### Lebanon National Central Health Working Group

The Central Health Working Group (CHWG) is the synergy of the cooperation between the World Health Organization (WHO) the Lebanese Ministry of Public Health and the UNHCR and all of the International and National NGOs who are active in the health sector in Lebanon. KA-PHC is an active member in this group where once every month we receive an invitation to attend to these meetings. The CHWG meetings is chaired by the WHO and co-chaired by the UNHCR.

### UNHCR Health & Nutrition Working Group

KA-PHC is an active member in the UNHCR Health and Nutrition Working Group where once per month we receive an invitation to attend to these meetings along with other National and International NGOs.

### Lebanon Non-Governmental Organization Forum Network

KA-PHC is an active member of the LNGO Network where once per month we attend this network's meeting and improve our active participation.

### Lebanese Union for Child Welfare

The Lebanese Union for Child Welfare was established in 1948 as a non-governmental organization (NGO) to promote the complete well-being of the childhood in Lebanon. There are more than 50 other NGOs who are members in this Union. We were one of the active members of this Union since 1960s. The Union is still active to this date and currently the KA-PHC Lebanon Field Director attends their meetings.

### Union of the Coordination Committee of the NGOs in Bourj Hammoud and Sin El Fil

This Union was established during the 1970s and its objective is to improve the coordination and communication network between various NGOs working in the Cities of Bourj Hammoud and Sin El Fil. The municipalities of Bourj Hammoud and Sin El Fil are also actively involved in this Union. Our social worker, Raquelle Ketchedjian represents KA-PHC on this Union.

### Armenian Organizations

In order to collaborate, coordinate and cooperate effectively about the works and services of the Armenian community in Lebanon, KA-PHC, throughout its 78 years of service in Lebanon, was one of the advocates to establish several coordination committees or unions. Hence, we have kept our commitment and membership for these coordinating committees and unions for the uplift of the

community in Lebanon. During 2019 we have chaired, participated, and actively became involved in the following committees:

Committee	Represented by
Union of the Social Workers working in the Armenian Community	Christine Tanielian – Social Worker Raquelle Ketchedjian – Social Worker, head of the Mental Healthcare Unit Krikor Aynilian – Social Worker Janine Tanielian – Social Worker
Union of the Armenian Benevolent Organizations	Serop Ohanian – General Manager
Zvartnots: Centre for Special Education and Rehabilitation	Christine Tanielian – Social Worker Raquelle Ketchedjian – Social Worker
EHLAN: Enteraide Pour l'Habitat des Libanais Armeniens Necessiteux Au Liban	Serop Ohanian – General Manager
Armenian Prelacy in Lebanon	Serop Ohanian – General Manager Christine Tanielian – Social Worker
Armenian Evangelical Boarding School in Ainjar	Serop Ohanian – General Manager
Union of the Armenian Evangelical Churches in the Near East – Social Action Committee	Serop Ohanian – General Manager
Armenian Fund for Economic Development (AFED)	Serop Ohanian – General Manager
Armenian fund for Health Insurance in Lebanon (AFHIL)	Serop Ohanian – General Manager Christine Tanielian – Social Worker

Besides the above listed Armenian organizations, committees and unions, KA-PHC kept its close and sincere coordination and ongoing, regular meetings with the Jinishian Memorial Program, St. Marc laboratory and diagnostic center, the Armenian Relief Cross in Lebanon, The AGBU, The CAHL, and various other Armenian organizations.



## LEILAVAN CLINIC

During 1968, under the leadership of Leila Karagheusian and in direct cooperation and partnership with the Armenian Catholicossate of Cilicia, KA Lebanon was involved in the development of Housing Project by financing the construction of housing projects in the area of fanar and building more than 300 apartments to help Armenian families settle into a decent small housing apartments away from the tent swamp area of Karantina.

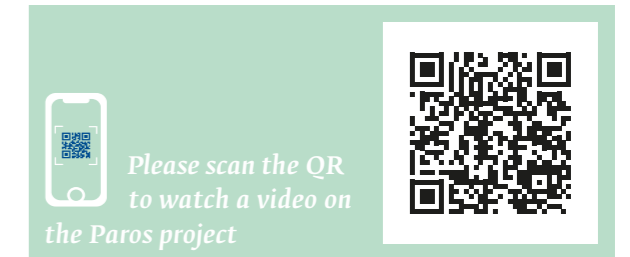
During December 2018, on the occasion of the 50<sup>th</sup> anniversary of the establishment of the LEILAVAN housing project, we renovated and rehabilitated our clinic inside the LEILAVAN compound and started our outreach project of providing healthcare services inside our already existing clinic inside the compound.

During 2019, the regular presence of a physician alongside a nurse added value in providing medical care to the people in that area, and the demand started to increase in 2020. During April- May 2021 we started construction works at our clinics at Fanar by fully renovating the unit in order to accommodate a new dental clinic and renovate the family medicine clinic, both were ready and fully equipped to welcome patients who couldn't reach our Bourj Hammoud center.



## OUTREACH ACTIVITIES: HOME CARE

In our efforts of making the primary healthcare services attainable, affordable and accessible for everyone, we wanted to expand our services and start doing home care services for those who are unable to come to our center due to physical challenges and difficulties. During the year 2019, with the help of our partners and community members, we were able to reach out and provide home care support program to 154 elderly or people with disabilities living in the area of Bourj Hammoud. We dedicated a multidisciplinary team of three members (a Family Medicine physician, a nurse and an outreach social worker) to be able to do the proper and necessary assessment about these cases and actually do the home visit and provide all of the needed primary healthcare services for these people within their home. We realized that the need is much more and we have decided to integrate this program to be part of our already existing and regular primary healthcare unit's services.




**Declaration of Astana**  
GLOBAL CONFERENCE ON PRIMARY HEALTH CARE  
ASTANA, KAZAKHSTAN 25-26 OCTOBER 2018

**Global Conference on Primary Health Care**  
From Alma-Ata towards universal health coverage and the Sustainable Development Goals  
Astana, Kazakhstan, 25 and 26 October 2018

**We envision**  
Governments and societies that prioritize, promote and protect people's health and well-being, at both population and individual levels, through strong health systems;  
Primary health care and health services that are high quality, safe, comprehensive, integrated, accessible, available and affordable for everyone and everywhere, provided with compassion, respect and dignity by health professionals who are well-trained, skilled, motivated and committed;  
Enabling and health-conducive environments in which individuals and communities are empowered and engaged in maintaining and enhancing their health and well-being;  
Partners and stakeholders aligned in providing effective support to national health policies, strategies and plans.

**We envision**  
Primary health care and health services that are high quality, safe, comprehensive, integrated, accessible, available and affordable for everyone and everywhere, provided with compassion, respect and dignity by health professionals who are well-trained, skilled, motivated and committed.

ASTANA, KAZAKHSTAN  
25-26 OCTOBER 2018  
GLOBAL CONFERENCE ON PRIMARY HEALTH CARE



## CONCLUSION

KA-PHC Lebanon made a tremendous shift in quality of care, in having new programs responding to the need of the people within the community. Staff members were appointed having the proper and needed human resources to perform the tasks compassionately and professionally. The necessary structural changes and process management and impact oriented strategy were implemented. To top it all, the active involvement of the Board of Directors with dedicated vision implemented wise governance in leading the Center just like its founder wanted it *“to comfort those who mourn, to relieve those in distress whether group or race and in our small human way endeavor to make the will of God prevail.”*

The collective efforts of the multidisciplinary team members of KA-PHC Lebanon contributed in strengthening the healthcare system in Lebanon. Our efforts were praised and encouraged by the Government of Lebanon and various high official members of the UN agencies, the World Health Organization and several of our partners. KA-PHC Lebanon became a hub where we witnessed the visit of the Lebanese Minister of Health as well as many foreign UN entities, ambassadors, officials from the World Bank, representatives of multinational corporations, faith-based institutions, embassies, academic institutions, whose partnership added value to the care that we have been providing to the people in our catchment area.

### Serop Ohanian

KA Lebanon General Manager



serop.ohanian@hkcc.org.lb

## NOTABLE VISITS TO KA-PHC

### THE EU DELEGATION HEADED BY PRESIDENT OF THE EUROPEAN COUNCIL, MR CHARLES MICHEL, ACCOMPANIED BY AMBASSADOR OF THE EU TO LEBANON, H.E. MR RALPH TARRAF AFTER THE BEIRUT BLAST - AUGUST 2020



The EU delegation head, president of the European Council, Mr Charles Michel (far left), and the Ambassador of the European Union to Lebanon, H.E. Mr Ralph Tarraf (right, facing Mr Serop Ohanian).



Please scan the QR for a video on this visit of the EU delegation

### Visit by Mr Zareh Sinanian, High Commissioner of the Diaspora of Armenia - August 2020





Visit by Mr Vincent Gelot, Project Manager of Lebanon & Syria at L'Œuvre d'Orient - August 2020



Visit by the Ambassador of the Kingdom of Norway to Lebanon, H.E. Mr Martin Yttervik - March 2021



Visit from the US Embassy - May 2021



Visit from the French Embassy - June 2021



Visit by the Official Delegate from Members of the EU - 2021





Visit by Mr Martin Skylv of the EU - December 2021



Visit by Raya Abirached, celebrity and goodwill ambassador for UNHCR - February 2022



Visit by the World Bank, Headed by Mr Juan Pablo Uribe, World Bank's Global Director for Health, Nutrition & Population and the Global Financing Facility - July 2022



Visit by the World Health Organization, Headed by Dr Abdinasir Abubakar, acting WHO Representative in Lebanon - August 2022





Visit by the Director General of the Lebanese MoPH and Mr Patrick Chebli - August 2022



Mr Patrick Chebli (3<sup>rd</sup> from left) and H.E. Dr Fadi Sinan, Director General of the MoPH (4<sup>th</sup> from left).

Visit by Lebanese Minister of Social Affairs - September 2022

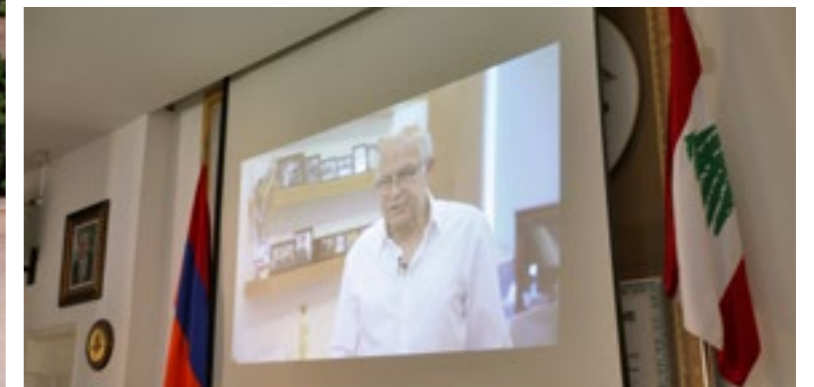


Mr Serop Ohanian welcoming H.E. Mr Hector Hajjar, Minister of Social Affairs in Lebanon (left), and PM Rev. Edgard Traboulsi (middle).



# MEMORIAL FOR ZAVEN TACHDJIAN (1947-2022)

The Late President of the HKCC New York Board of Directors



Please scan the QR for a video on the memorial event for the late Mr Zaven Tachdjian





# INAUGURATION CEREMONY FOR JAPAN'S GRANT ASSISTANCE PROJECT FOR THE PROVISION OF MEDICAL EQUIPMENT 31 AUGUST 2022

H.E. Dr Firas Abiad, Lebanese Minister of Public Health

H.E. Vahagn Atabekyan, Armenia's Ambassador to Lebanon

H.E. Takeshi Okubo, Ambassador of Japan to Lebanon

Mr Hagop Pakradouni, Lebanese M.P.

Mr Mardig Boghossian, Mayor of the Municipality of Bourj Hammoud

Dr Randa Hamadeh, Head of the Primary Healthcare Division at the Lebanese Ministry of Public Health

Mr Edward Tschan, International Medical Corps Country Director

Representatives of the Armenian Community

Members of the Karagheusian Association Board of Directors

Representatives from academic institutions such as the AUB, LAU, Balamand, Haigazian and NDU Universities

Dear guests اصحاب السيادة والسعادة والمعالي

Welcome to our center

I would kindly ask all of us to Stand up to respect the victims of the Beirut blast on August 2020 during which some of us could have possibly been one of those victims but We were miraculously saved and our lives were spared.

### Story of me:

1. The legacy of Karagheusian started because of a tragedy, where an Armenian American family living in New York City, USA, lost their 14 years old son, young Howard, due to an influenza pandemic

in 1918 used to be called the terrible Spanish flu.

2. Three years before his death, In 1915, the Armenians faced the terrible genocide, Մեծ Եղեղը (Armenian: medz yeğern) killing more than 1.5 million innocent people and also some of the survivors were forced to leave out from their land to be scattered around these areas which used to be called the "Great Lebanon" reforming the Armenian diaspora.

3. As an organization and as Lebanese Armenian people we tasted the bitterness of pandemics and the bitterness of refugees. We felt it on our bodies the hurt and the agony and sufferings of life. Unfortunately, now, after 100 years we are still witnessing pandemics, refugee crisis, sufferings and unjust world. Hence, from the original inception of our organization, the compassionate care is embodied within our culture and lifestyle.

4. Officially Registered as an NGO by the first Government of Lebanon in 1946 signed by HE late Saeb Salam, Lebanon, the karagheusian organization is here to put its effort for the concept nowadays called the universal healthcare coverage (UHC) and health for all as well as Continuity of care.

5. If we look on the numbers over the past 9 years, the numbers indicate that over these past two years, we were able to serve more than 130,000 patients' visits in the year 2021, and until yesterday, already the numbers exceeded 110,000 patients' visits this year 2022. And growing.... An influx of people seeking care and medical support.

6. We are here to make the PHC accessible, attainable, continuous with high quality of care knowing that through the power of synergy, a multiplication process occurs bearing the fruit of being light and providing care to Many....



From left to right: Bishop Kévork Assadourian, Archbishop Shahe Panossian, Ambassador of Japan H.E. Takeshi Okubo, H.E. Dr Firas Abiad, Mr Raphael Oumoudian, Ambassador of Armenia in Lebanon H.E. Vahagn Atabekyan, and Mr Serop Ohanian, during the ribbon-cutting ceremony.



Please scan the QR for a video on this inauguration event at KA



**Story of us:**

Restoring the agency in us.

1. A while ago we witnessed the inauguration of various medical equipment donated generously by the people of Japan. These medical machines and equipment empowered us to serve more and make the primary healthcare services to be reachable and attainable for all.
2. This is the third time within the past 11 years that GGP is extending a landing hand to us to restore the agency within us by empowering us to serve more. Thank you once again and note here that all of the needed machinery & medical equipment that we received since 2010 are still operational and have been and still becoming a blessing to many.
3. Writing this project proposal and submitting it to Japan's Grant Assistance for Grassroot's Human security Projects" was not an easy task. Our team members worked hard to complete the requirements. It took us 16 different versions to finalize it and the last draft, the final draft, draft # 17 was the perfect one to apply. Thank you dear GGP officials for accepting our proposal. finally the hard work works.
4. Thank you for igniting the hope within us by empowering us and improving our capacity so that in our small human way, we endeavor to make this little world entrusted to our care a bit more peaceful, more just and a better place to live.
5. Here, now, Hima, we can witness the synergy of various local humanitarian agencies under the auspices of H.E. minister of public Health where everyone coming together to be light, this us-ness is contagious where our emotions and hard work coincides & we do have hope because of this.

**Story of now:**

1. Join me in renewing our commitment together between the public private partnership, between the government and NGO & local municipality and parliament member and academia and various other social And humanitarian agencies coming

together to provide care and support to various community members to people who are in dire need of our care and support.

2. Strongly believing that in order to achieve universal healthcare coverage, investing in primary health-care centers is a must and a reality where prevention is as equally important as cure. Primary healthcare is needed now more than ever which can help in reducing risks and promoting healthy lives.

Yesterday hierarchy was the model,  
today synergy is the mandate  
Yesterday leaders commanded & controlled.  
Today leaders empower & coach  
Yesterday leaders were worriers.  
Today leaders are facilitators.  
Yesterday employees took orders.  
Today teams make decisions.  
Yesterday seniority signified status.  
Today creativity drives process.  
Yesterday value was extra.  
Today value is everything.

It is because of you, all of you, academia included, that our capacity as primary healthcare center is developed and nurtured and our team of 200 health-care workers is empowered and energized to provide affordable, accessible, attainable PHC and psycho social services to more than 1,000 patients per day.

I am hopeful because together we can!

Thank you people of Japan

Thank you your excellency

Thank you ministry of public health

**Serop Ohanian**

KA Lebanon General Manager  
Inauguration Speech

# VISITS FROM OUR DONORS

## Partnership and Collaboration with International Medical Corps (IMC)



An IMC visit to KA in August 2021 was headed by Country Director Mr Edward Tschan (second from right).



With Mr Edward Tschan, Lebanon Country Director of IMC.






### Partnership with Pontifical Mission and Misereor In Lebanon



Left to right: Msgr Peter I. Vaccari, President of CNEWA International, Ms Marlene Constantin - CNEWA Lebanon, Serop Ohanian, and Mr Michel Constantin, Director of CNEWA Middle East.



Please scan the QR for a video on the contribution of the Pontifical Mission in KA's Community Development Program



### Partnership with Manos Unidas



Ms Africa Marcitllach and Mr Juan Ángulo of Manos Unidas, with Serop Ohanian and KA Medical Director, Dr Zeinab Darwish-Salam.

### Partnership with Embrace The Middle East - UK



With Mr Tim Livesey - Chief Executive Officer of Embrace the Middle East, UK.



The leadership team from Embrace the Middle East, UK, from left to right: Mr Jamie Eyre, Director of International Programmes and Partnerships, Ms Sophia Peiris, Programmes and Partnerships Manager, Serop Ohanian, and Mr Iyan Livett, Director of Fundraising.

### Partnership with the World Health Organization (WHO)



With Dr Abdinasir Abubakar, acting WHO Representative in Lebanon as of 2022.



With Dr Richard Brennan, WHO Regional Emergency Director.



# THE 3 RELIGIOUS LEADERS OF THE LEBANESE ARMENIAN DIASPORA - IN VISITS

Visits to His Holiness Catholicos Aram I at the Holy See of Cilicia of the Armenian Apostolic Orthodox Church



With His Beatitude Raphaël Bedros XXI Minassian, Patriarch of the Armenian Catholic Church.



With His Eminence Archbishop Shahe Panossian, Prelate of the Armenian Orthodox Church in Lebanon.

Participating in the annual AMAA (Armenian Missionary Association of America) meeting in their head office in New Jersey, USA



With Rev. Dr Paul Haidostian, President of the Union of the Armenian Evangelical Churches in the Near East, and President of Haigazian University



With Monseigneur Kévork Assadourian, Auxiliary Bishop of the Armenian Catholic Church in Beirut.



# COMMUNITY LEADERS VISITING AND SUPPORTING KA-PHC



Member of Parliament and head of the Tashnag Party in Lebanon, Mr Hagop Pakradouni (center) together with Dr Elie Tashdjian, visiting KA with boxes of aid.



HKCCNY Managing Director, Irina Lazarian and KA General Manager, Serop Ohanian, with Berge Setrakian (center), President of AGBU.

## Visit by H.E. Mrs Vartine Ohanian, Lebanese Minister of Youth & Sports (2020-21) - March 2021



## Visits by the Municipality of Bourj Hammoud



With Mr Mardig Boghossian, Mayor of Bourj Hammoud.

## Visits by H.E. Dr Firas Abiad, Minister of Public Health in Lebanon



# KA BOARD ACTIVITIES



The KA Board of Directors in different meetings with HKCC NY Managing Director, Irina Lazarian.



Serop Ohanian with Irina Lazarian at the HKCC head office in New York, USA.



Serop Ohanian with President of the KA Board of Directors, Garbis Markarian.



# KA-PHC LEBANON DEPARTMENTS



## PRIMARY HEALTHCARE UNIT

The concept of primary health care and prevention is no more related to Benjamin Franklin's famous quote: "An ounce of prevention is worth a pound of cure", furthermore it is a type of strategy adopted by health care systems to reduce health cost burdens, achieve Sustainable Development Goals and ensure Universal Healthcare Coverage.

Health promotion, early detection and prevention of complications, treatment and follow-up services are the titles that can summarize the activities of the Primary Healthcare Unit at the KA-PHC Lebanon.

Providing care to our patients regardless of their cultural background or individual differences was not a dilemma, but a strong commitment to the organization's mission. On the other hand, offering high quality and evidence-based care was one of the challenges of the last few years. The numbers of patients seeking our help were in constant increase and the requirements of providing professional care through adopting international guidelines and standards were necessary.

Throughout history, KA-PHC is known to be a child welfare center, moreover the constant scrutinizing of the needs to have a healthy child was the best tool used by the management team to accomplish optimum results and offer services to the community.

In this context, the medical department has developed to exceed the parameters of offering a specific and focused care and has reached the ability to offer a holistic approach through a multidisciplinary team.

Despite having very challenging last 3 years we were able to provide the same quality of care and multiple services to serve a mixed population who needed help more than ever. The involvement of the medical director and the administration team was urgently needed to maintain a stable environment to our staff and beneficiaries.

For the first year since 2013, we witnessed an increase in the number of the Lebanese beneficiaries to reach a level higher than the refugees beneficiaries as shown in the below graph as a proof to how much our own Lebanese population is in need of our services and how our center is a refuge for them in those difficult times.



Please scan the QR  
to watch a short  
video on primary healthcare  
centers in Lebanon



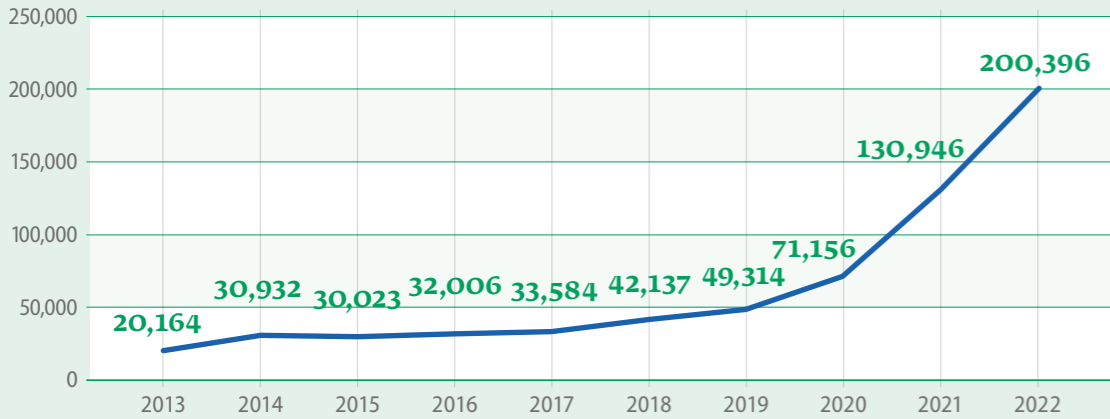


We were able to serve more than almost 130,000 patients' visits for different services during the challenging year of 2021, with the raging pandemic, and until 30 September 2022, more than around 148,000 patients' visits were recorded, expecting

to reach more than 200,000 patients' visits by end of year.

The diagram below illustrates the total number of patients' visits that we provided since 2013:

**Number of Beneficiaries' Visits to KA-PHC 2013-2022**



Our team of 50 doctors by the end of 2019 was increased to reach 85 doctors of multiple specialties accompanied by 34 residents in 2020, to increase to 100 doctors accompanied by 47 residents during the year 2021. After the start of the financial crisis, we faced a high load of doctors who had to relocate abroad, with the challenge of finding new qualified ones to replace them. At the start of 2022, we had a team of 77 multiple specialties doctors and 25 residents.

They all work together at KA-PHC along with a team of registered and practical nurses, laboratory technician, radiologist, 2 midwives, 1 nutritionist and 1 physical therapist to provide our population with a holistic individualized patient-centered care.

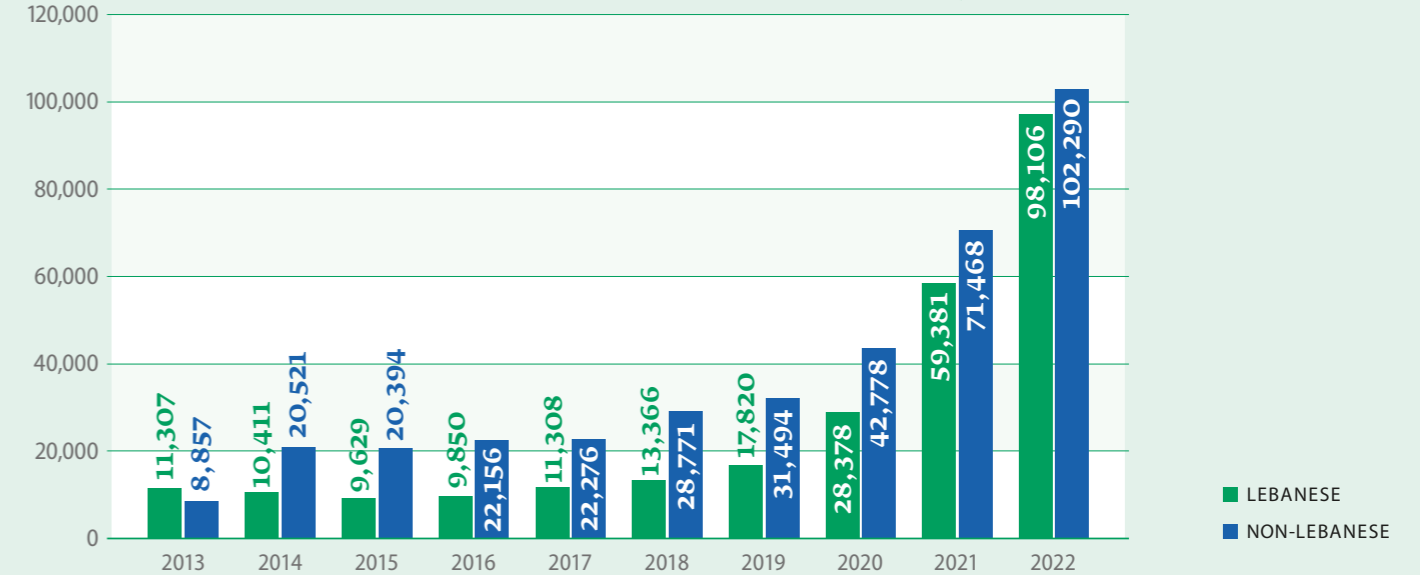
The 3 pillars of patient's care physical, mental and social well-being are met through the diverse collaborations and services provided at KA-PHC, that are affordable and accessible with high

quality standards driven by a great sense of teamwork and evidence-based medical practice, all of this monitored by patients' outcomes key performance indicators.

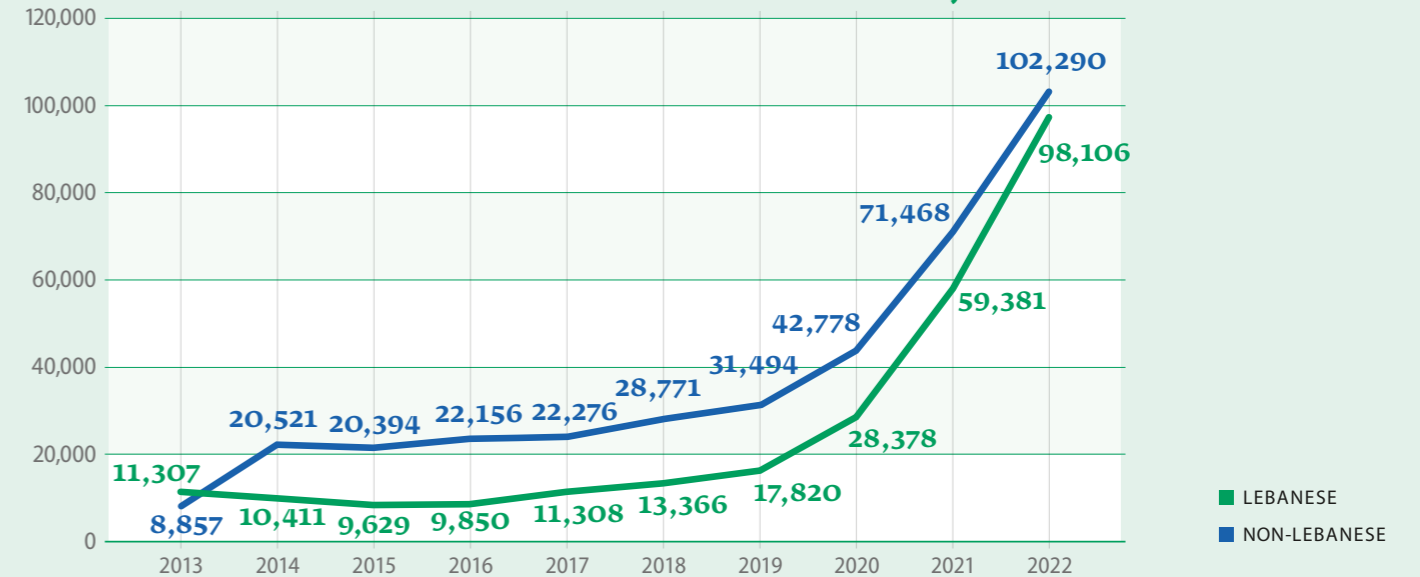
The following units and services are provided are KA-PHC:

- Pediatric Services (Consultations, Vaccination, Health Maintenance and Malnutrition Assessment)
- Obstetric and Gynecological Services (Consultations, Antenatal and Postnatal Care, PAP Smear, Ultrasound Interpretations and Morpho-scan)
- Family Medicine and General Medicine (Consultations, Non communicable Diseases Assessment and treatment, curative and preventive services)
- Chronic Care (endocrinology, cardiology,

**Number of Beneficiaries' Visits Per Year & Per Nationality 2013-2020**



**Trend of Beneficiaries' Visits Per Year & Per Nationality 2013-2022**



- Specialists Care (dermatology, ear-nose-throat, diagnostic radiology...)
- Dental and Oral Health Services (Preventive and Curative Consultations – Panoramic X-ray)
- Ophthalmological Services (Screening and

- Curative Consultations)
- Psychiatry
- Physiotherapy
- Nutritionist
- School Health Services (Follow Up for complete wellbeing of students)



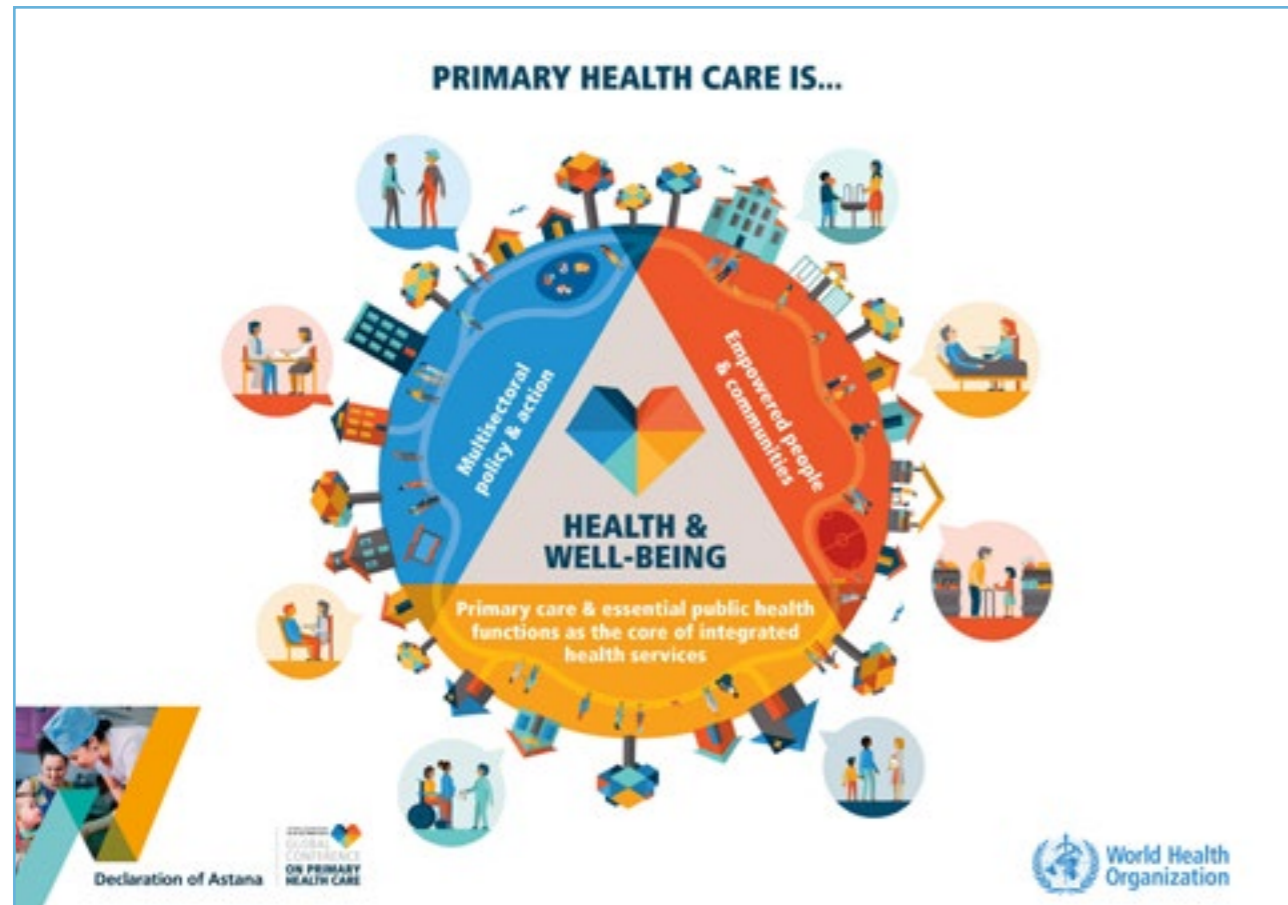
• Medication Provision and Distribution

This multidisciplinary team of 172 Health human capital resources headed by our Medical Director, managed to provide the best possible primary healthcare services for more than 200,000 patients' visits last year 2022 where 24,270 of them (the 49%) are in the pediatric clinic and vaccination unit indicating that half of the population served are children.

The Primary Healthcare Unit (PHU) enjoys the partnership and mutual collaboration with the Lebanese Ministry of Public Health (MoPH), the UN Agencies, the World Health Organization (WHO), International Organization such as the International Medical Corps, Embrace the Middle East, the European Union, and seven University Hospitals.

The Primary Healthcare Unit has a patient-centered care approach, firmly believing the principals of the Universal Healthcare Coverage and adopting the declaration of Astana of Primary Healthcare in pursuit for Health for all "Primary health care and health services that are high quality, safe, comprehensive, integrated, accessible, available and affordable for everyone and everywhere, provided with compassion, respect and dignity by health professionals who are well-trained, skilled, motivated and committed". \*

\*Declaration of Astana, Kazakhstan, 25-26 October, 2018. [www.who.int/primary-health/conference-phc/declaration](http://www.who.int/primary-health/conference-phc/declaration)



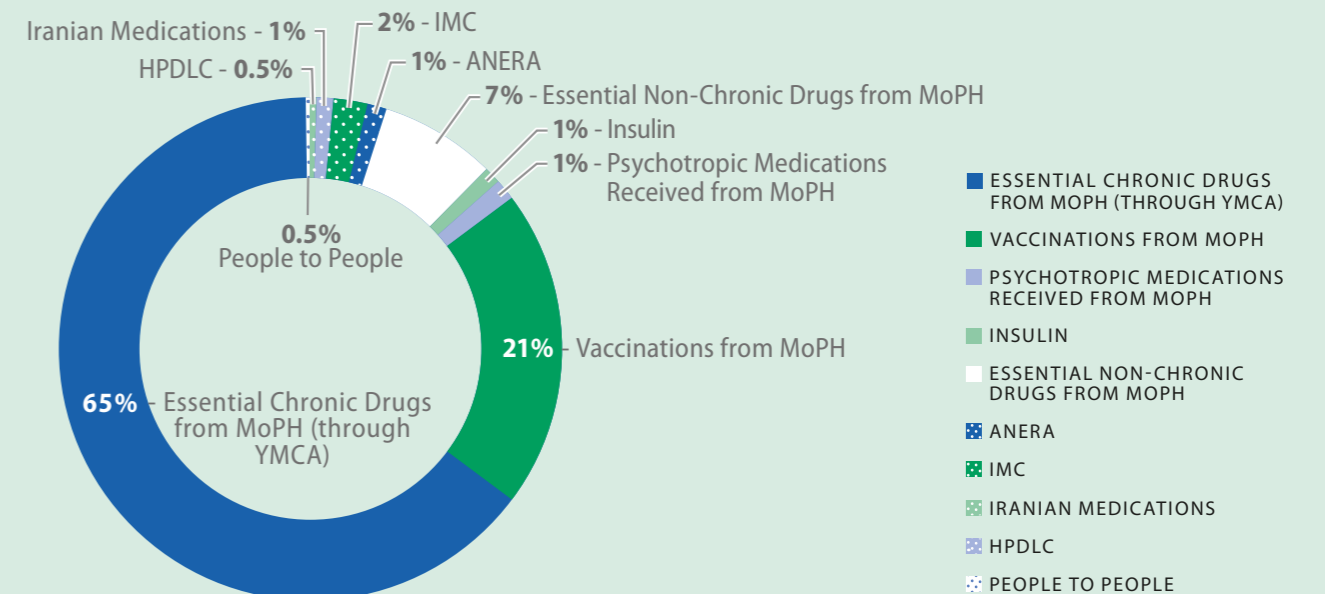
## In Kind Contribution of Medications:

Our partnership and collaboration with the Lebanese Ministry of Public Health, International Medical Corps (IMC), the Young Men's Christian Association (YMCA), Universities, various UN agencies and the World Health Organization (WHO) added value to the services the KA-PHC Primary Healthcare Center unit provided. During this year, as we have seen more cases, hence, accordingly, we have received more medications from these various sources, and simultaneously, we have dispensed more medication to these cases.

Vaccinations received from the Lebanese Ministry of Public Health	\$479,294.09
Essential Chronic Drugs from the Lebanese Ministry of Public Health (through the YMCA)	\$460,039.70
Essential Non-Chronic Drugs from the Lebanese Ministry of Public Health	\$38,002.19
Insulin received from the Lebanese Ministry of Public Health	\$13,340.25
<b>Total of the Amount of the Value of Drugs and Vaccinations Received from the Lebanese Ministry of Public Health</b>	<b>\$990,676.22</b>
Value of Non-Chronic and Chronic Drugs received from the International Medical Corps (through the European Union's Madad Trust Fund)	\$36,180.34
Value of Medications received from the various other sources	\$1,535.75
<b>TOTAL</b>	<b>\$1,028,392.31</b>

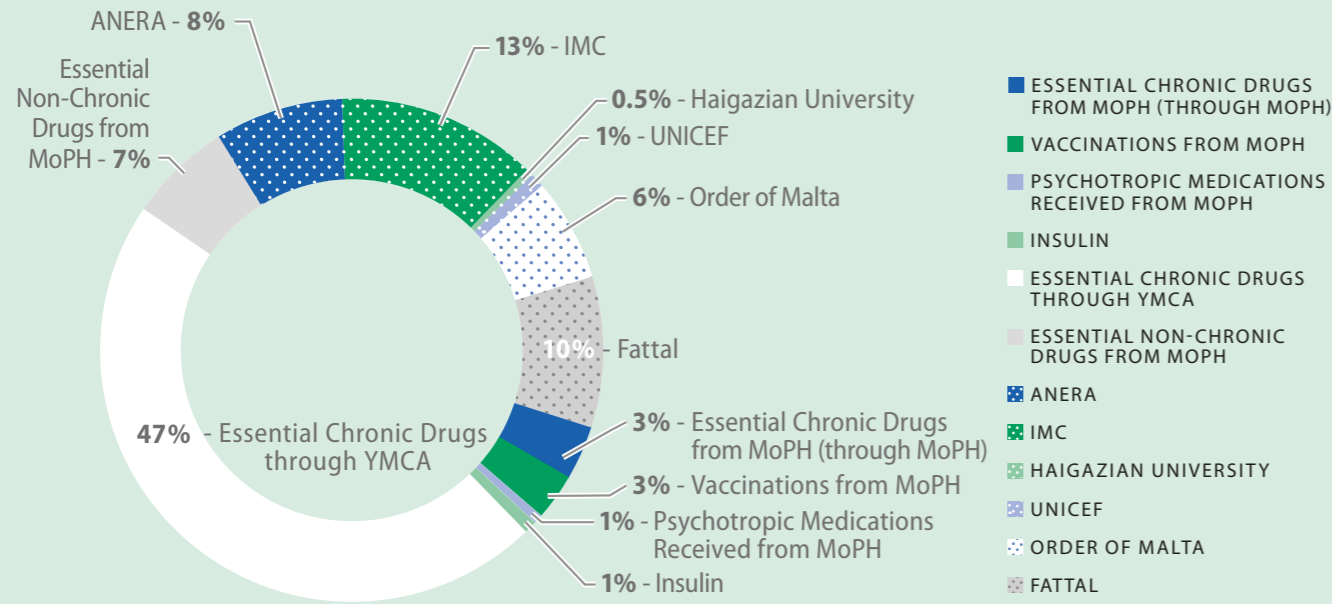
These drugs were distributed through our Pharmacy Unit to all of our PHC cases (200,396 cases throughout 2022) who received consultation from our physicians and to 8,268 children who received vaccination for free from our Center.

### Drugs and Vaccines Received January-December 2021





### Drugs and Vaccines Received January–December 2022



### Accreditation Achievements:

In Lebanon, the MoPH coordinates with “Accreditation Canada” in order to improve the quality services of the Primary Healthcare Centers. KA- PHC Lebanon passed the first phase of the Accreditation process during 2014 and the second phase assessment visit during November 23, 2018. Dr Noura Kaadi-Abi Nader added tremendous value to our work in this domain, as our Medical Director and as a Family Medicine physician in practice, she collaborated and worked hard with our PHC Multidisciplinary team members to ensure providing the best possible primary healthcare services to our beneficiaries with high quality of care.

Since Quality is a responsibility and a commitment, it is a part of every single department, aspect, and element of the organization. As we continued to closely monitor and implement changes in our operating

systems by updating the policies and procedures, a multidisciplinary team was expanded to include the head nurse and later on her assistant, the head midwife and her assistant as well, administrative officers, the head of the mental health unit and the head of the social unit.

Moreover, since the mindset of Quality must exist in the leadership at the executive-levels, we improved our ways of working, thinking, and leading by creating a Leadership team who was assigned to meet once every 2 weeks and discuss transparently all types of current or potential operations and projects. Several issues related to the center were discussed, brainstormed and documented in meeting minutes. Those leadership meetings not only increased the way the team communicates effectively but also helped in building trust between the different departments of the center all together.

In Early 2020, and through the collaboration



with the IMC, KA-PHC started to implement the strategy of performance based financing or PBF. A set of quality indicators were put in order to have standardized criteria to follow regarding the documentation of medical and nursing acts, and also the work at the pharmacy unit regarding safe storage and dispensing of the medications.

Throughout all the processes, the Ministry of Public Health (MoPH) had continuous effort in developing the quality of care in the primary healthcare sector. On December 20, 2021 KA-PHC was invited to a project in collaboration with the Ministry of Public Health, PUI, IMC and IMPROVE called "Quality Indicators for Performance (QUIPs) Measurement in REBAHS". This project’s goal was

to evaluate the already used and assessed quality indicators and to discuss additional facilitators and barriers experienced by the Primary Care Centers for the implementation of the indicators. The medical director attended this training and worked on the assessment document and had an impact on suggesting new and better quality indicators to be assessed in the future.

When we started implementing the different types of indicators, it was difficult to get full compliance. We had to do several meetings with the staff, each section alone, to convince them of the importance of work to be done, not only to get the financial benefits, but also to ensure the high quality of care we provide



our patients. With time and with involvement of the key persons in our facility, the staff attitude started to incriminate the quality culture and they felt how each of them has an important role in maintaining the work at high standards. The staff started to feel part of the project and the compliance to the quality indicators increased within few months of implementation to reach 100% in more than 80% of the indicators.

The work done in the quality section was so obvious that our reputation has been always positive within our beneficiaries, community, neighborhood and collaborators. It helped also in attracting renowned doctors, chairmen of all medical schools, research academies and a lot of universities to started sending their students to learn from our team's professional and high quality services.

#### **A. The PLATINUM Organizational Certification**

During the pandemic, the international accreditation visits were postponed. However, during summer of 2021, KA-PHC was nominated by The American University of Beirut (AUB) Global Health Institute (GHI) to be one of the Lebanese NGOs to participate to a certification through the Non-Governmental Organizations Initiative (NGOi). Again and again, a whole team was mobilized from all the departments of the center in order to fulfill the requirements of this new certification. The team worked hard for 9 months to create documents required, to review and update old policies and procedures, to improve the already existing processes and to abide with new quality standards for NGOs. In April 21 2022, a professional team from the NGOi visited our center for a day where they checked all the standards during a general leadership meeting that united all the center's departments

(administration, accounting, human resources, medical director and assistant, head nurse and assistant, head social department...)

Two weeks after studying our documents, we were informed that the KA-PHC received the PLATINUM Organizational Certification. This achievement made us very proud as it is a proof of how quality is a long journey that never stops to pay off. The whole team was thanked for their efforts and were so proud of their ability to be one of the top NGOs in Lebanon. A ceremony was held at the NGOi at AUB on June 21<sup>st</sup> 2022 where KA-PHC team of 11 persons headed by the general manager Mr Serop Ohanian, were invited to receive the PLATINUM certificate and award.

#### **B. The UN NCD Task Force & the WHO Special Programme on Primary Health Care Award**

After receiving NDU nursing students for community rotations at our center, their PHD nursing supervisor decided to honor the KA-PHC efforts and nominated us to the UN NCD Task Force & the WHO Special Programme on Primary Health Care, in June 2022. With the help of the medical director, a detailed document showing the general activities of the center and more specifically all the work that is done for combatting Non Communicating diseases and mental health diseases was written and submitted to the WHO and UN Task Force.

The report discussed how the NCD patients started flowing to get their yearly checkups done



and receive their chronic medications from our center since they couldn't find them anywhere else in the Lebanese Pharmacies. It showed all the strategies undertaken by the KA-PHC in order to accommodate those patients and serve them with the best possible resources, equipment and evidence based medicine. Since those patients have NCDs they had to be seen immediately by a doctor to get the needed laboratory done as well as electrocardiography. A lot of success stories were reported of patients who were at the verge of a heart attack and were saved only by getting a proper assessment and treatment.

On September 20, 2022 we received an email from the UNITAF that Karagheusian Association primary healthcare center won the 2022 UN Interagency Task Force and the WHO Special Programme on Primary Health Care Award in recognition of our achievements in providing and scaling up high quality, safe, comprehensive, integrated, accessible, available and affordable primary healthcare services, including NCD screening and control and mental health and psychosocial support in Lebanon.

The award was presented to us and other winners during the UN General Assembly High Level meeting in New York, at the UN Interagency Task Force for the Prevention and Control on Non Communicable Diseases on Wednesday, 21 September 2022 where the name of Karagheusian Association was recognized and congratulated internationally.

#### **The Role of Academia: Collaboration with University Medical Schools: Description, Importance and Quality of Care**

Beside the medical consultations done by physicians, Karagheusian Primary healthcare center provides a complete and unique climate

for academic and clinical teaching opportunity through the residents' clinics in affiliation with renowned medical schools.

Six out of the seven medical schools in Lebanon have solid collaborations with KA-PHC. Five medical schools are sending their residents to work and learn at Karagheusian: American University of Beirut Medical Center (AUBMC), Université Saint-Joseph (USJ), Balamand University (BU), Lebanese American University (LAU) and Lebanese University (LU), as well as the Beirut Arab University (BAU) who sends their medical students for daily clinical shadowing of our doctors.

Their daily presence enables the center to receive more patients by having daily operational clinics, to provide them with timely quality of care, and more importantly to open collaborative opportunities to the special or critical cases, in cooperation with the hospitals and medical centers affiliated with those medical schools.

Five departments are benefiting from this collaboration: the pediatric and vaccination unit, the family medicine unit, the obstetric-gynecology unit, the ophthalmology unit, and the dental unit. However, during the Covid-19 lockdowns, residents withheld their rotation at KA-PHC to be fully resumed in 2020. The dental residents did not resume their presence yet.

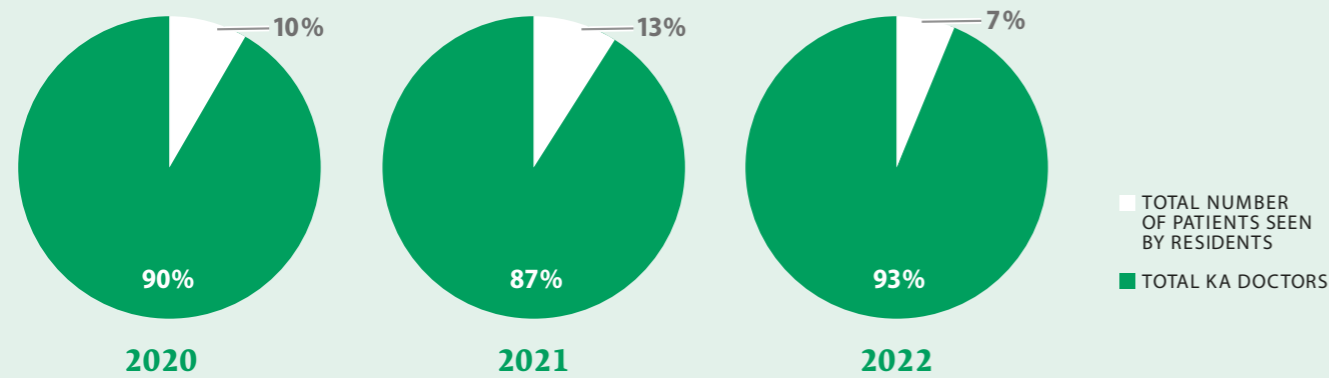
So now we have 6 out of 7 medical schools in Lebanon who are already collaborating with The Karagheusian Association Primary Healthcare Center:

1. American University of Beirut Medical Center (AUBMC): through their Family Medicine and Obstetrics and Gynecology departments



- 2. Balamand University (BU): through their Family Medicine department
- 3. Lebanese University (LU): through their Family Medicine department
- 4. Université Saint-Joseph (USJ): through their Pediatric and Dental departments
- 5. Lebanese American University (LAU): through their Ophthalmology department
- 6. Beirut Arab University: through the clinical rotation of their undergraduate medical students.

### Total Residents' Contribution in Comparison with Total Departments



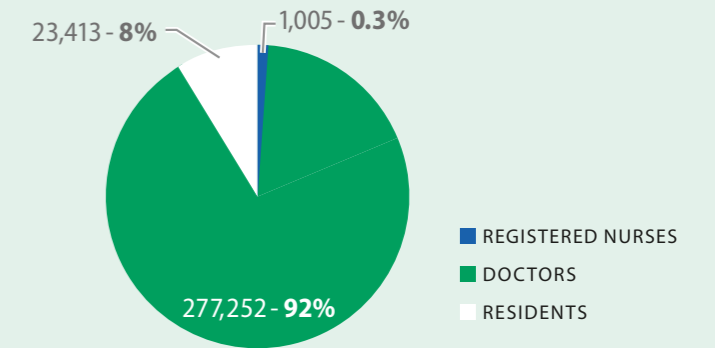
In 2020, we also welcomed 2 medical students from River Plate University in Argentina, for an 8 months' community rotation program at our center, where the undergrad students have the opportunity to get in direct contact with doctors and patients of different departments, participate in school health and awareness campaigns, conduct screening assessments of multiple chronic disease, and complete their thesis research projects required for their graduation.

These residents and students helped us consult

4,586 patients during 2020, 10,411 during 2021, and 8,416 during 2022. They also accompanied our School Health team and gave school health check-ups in 15 different schools in our catchment area. Moreover, their involvement in providing preventive and educative lectures in our health promotion and disease prevention campaign added tremendous value in the care and services that we were able to provide.

To note that in 2020 due to the pandemic of Covid-19, the residents' presence was decreased at KA-PHC for a certain time hence explaining

### Total Visits to RNs, Doctors and Residents for the Years 2020-2022



that their contribution did not improve between 2019 and 2020. It is in the year 2021 that the residents fully resumed their activities at our center (except for dental residents) and saw by themselves more than 10,000 patients' visits, contributing to 13% of our patients' load as shown in the pie charts and tables on these two pages.

The table below shows the total patients visits provided by the team of 100 different doctors accompanied by 47 residents who worked at KA-PHC during the years 2019, 2020 and 2021 divided into each department (excluding the patients seen by our midwives, nurses, and by the nutrition/physical therapy/children with special needs units).

It is very obvious how the residents' consultations of all kinds increased throughout the years and even doubled in certain departments as shown in the following table.

Residents Patients' Visits	2020	2021	2022
Pediatric	2,560	3,093	3,432
Family	1,780	6,827	4,596
OB-GYN	117	216	140
Ophthalmology	109	275	248
Dental	20	-	-
<b>TOTAL</b>	<b>4,586</b>	<b>10,411</b>	<b>8,416</b>



# PHC UNIT DIVISIONS: PEDIATRIC & ADOLESCENT CLINIC

The Pediatric Clinic thrives to embrace children of all ages with expert pediatric care. Our team offers a wealth of services to patients with careful attention to their medical histories, individual needs, as well as the needs of their immediate family.

We provide one-to-one education to the parents of the children, preventive campaigns such as vaccination and treatment for the children who need immediate counseling by the pediatrician.

In the clinic, we serve children from birth to young adulthood, providing them with access to cutting-edge diagnostic and treatment resources, as well as a total commitment to family-centered care and the management of both every day and terminal illnesses.

Through its evidence-based holistic approach, the clinic offers the following services:

- Health maintenance care, including postnatal care, well-child exams, screening developmental delays, and immunizations
- Management of chronic health conditions in children
- Care for acute illnesses
- Referral to specialists and/or hospitals, when needed, and care coordination
- Patient education and follow-up
- Malnutrition screening and assessment for all

children below 5 years of age, malnutrition treatment and close follow up for diagnosed cases

In this unit we provided service and care to 24,270 patients visit during 2019 including our outreach services inside the Armenian schools by providing health checkups for the students. The Registered Nurses play a very important role in this unit as they were empowered to triage the children according to severity of symptoms and do the necessary screenings and education to the parents and their children.

Based on our community needs and our doctors' recommendations, new pediatric sub-specialists joined our team: pediatric neurology and general surgery, added to our pediatric cardiologists and dermatologist. We started the year with only 9 pediatricians and ended it with a very dedicated team of 13 pediatricians.

The Registered Nurses played a very important role in this unit as they were empowered to vaccinate the children alongside the pediatricians because of the high load of daily cases.

A total of 13 general pediatricians, 11 pediatric sub-specialists (cardiologists, neurologist, general surgeon, endocrinologist, hemato-oncologist, gastroenterologist) along with 15 pediatric residents from USJ were providing all types of consultations for KA-PHC pediatric and adolescent patients: well baby and vaccination, school health,

sick baby consultations as well as specialized secondary care (cardiac consultations and echocardiography, neurology, endocrinology and general surgery consultations). Unfortunately, the gastroenterology and hemato-oncology services for the pediatrics happened only for few months in 2020 due to doctors' shortage.

Due to high load of patients needing consultations we started in 2021 to have 6 parallel pediatric clinics in the morning, 2 of them stayed functional the full day. All doctors were involved in vaccination of the kids at any time of the day. Malnutrition assessment and treatment was also done by all doctors who were trained by MoPH and IMC. All the staff in the pediatric unit was also trained regularly for malnutrition screening and first aid care for babies.

Ten pediatric residents from USJ (PGY3) attended every day during AM clinics. They were involved

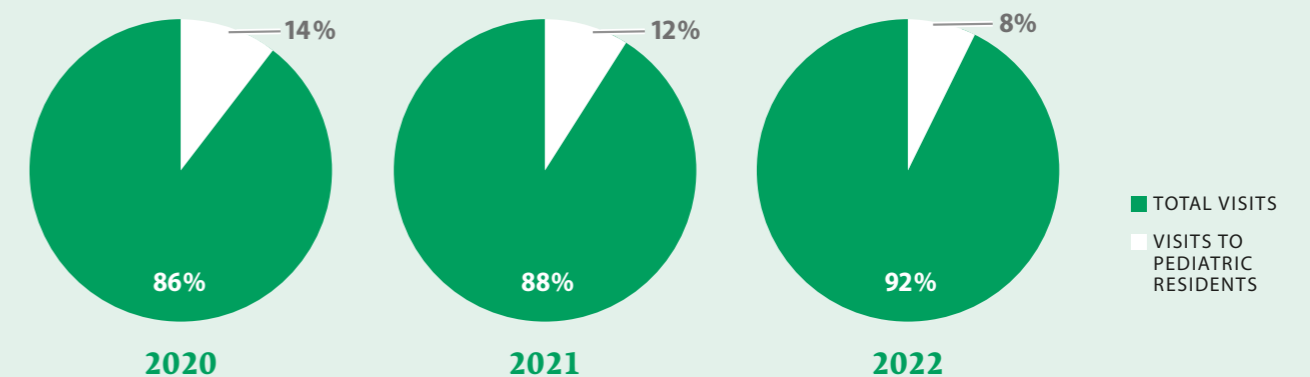
in well baby visits, vaccination and school health. Their rotations at KA-PHC let them acquire more confidence and expertise that will be useful for their final senior residency year.

AUBMC PGY2 Family Medicine Residents are also involved in our pediatric unit during their pediatric rotation. They help our pediatrician in consulting more patients and go to school health visits.

	2020	2021	2022
Nº of Pediatricians	17	21	17
Nº of Pediatric Residents from Hôtel-Dieu de France - USJ Department of Pediatrics	8	8	11
Nº of pediatric visits	28,318	33,662	52,801

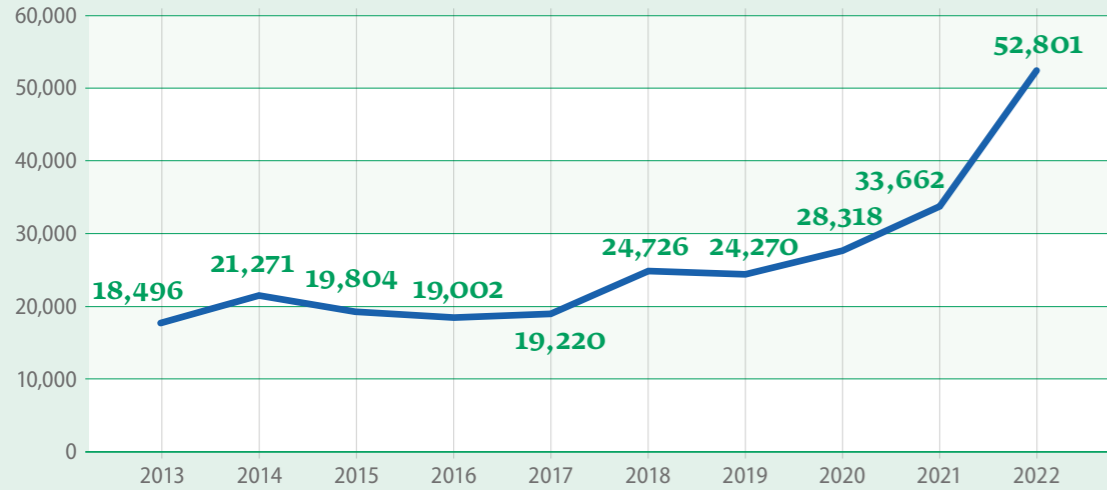
The pie charts below show the percentage of children's visits to the pediatric residents in comparison to the total number of children's visits to the pediatricians in the years 2020-2022, with the total number of visits reaching 114,781 by the end of 2022.

## Pediatric Resident's Contribution in Comparison with Total Pediatrics Department

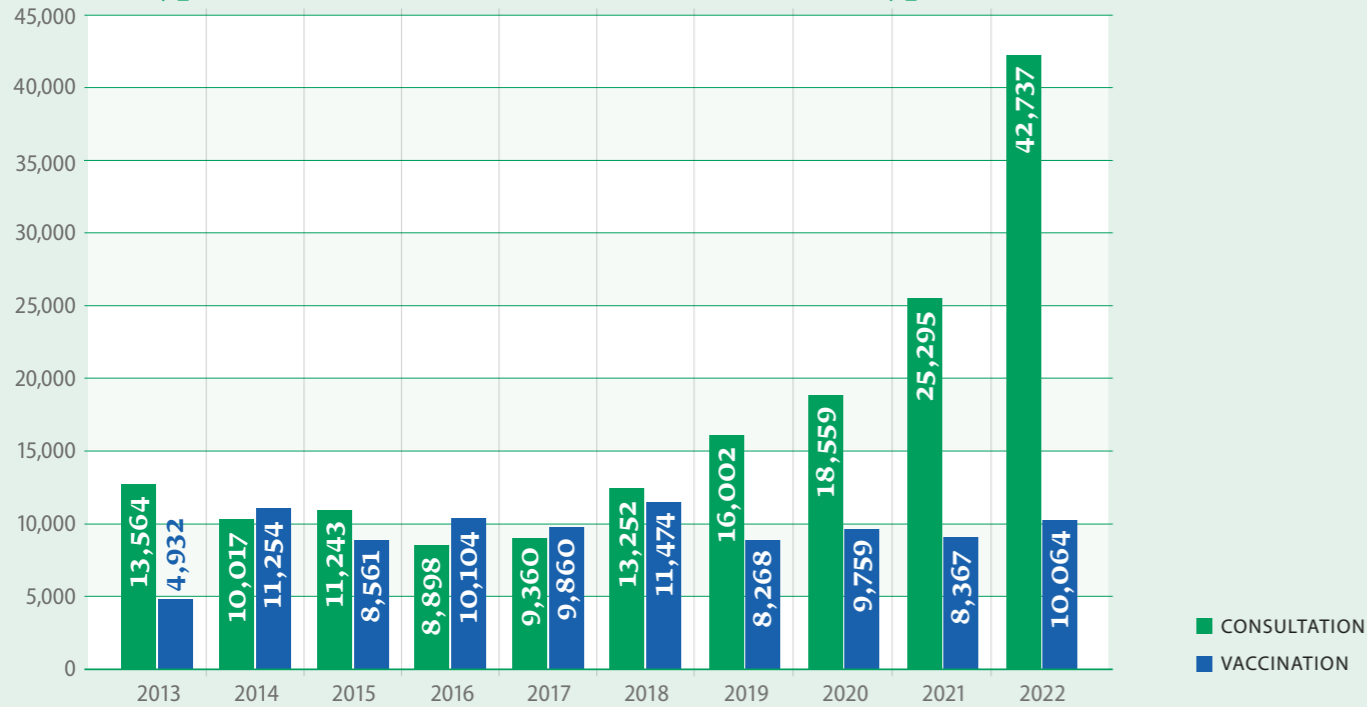




**Total Pediatric Visits Per Year 2013-2022**



**Types of Pediatric Services Per Year and Per Type 2013-2022**

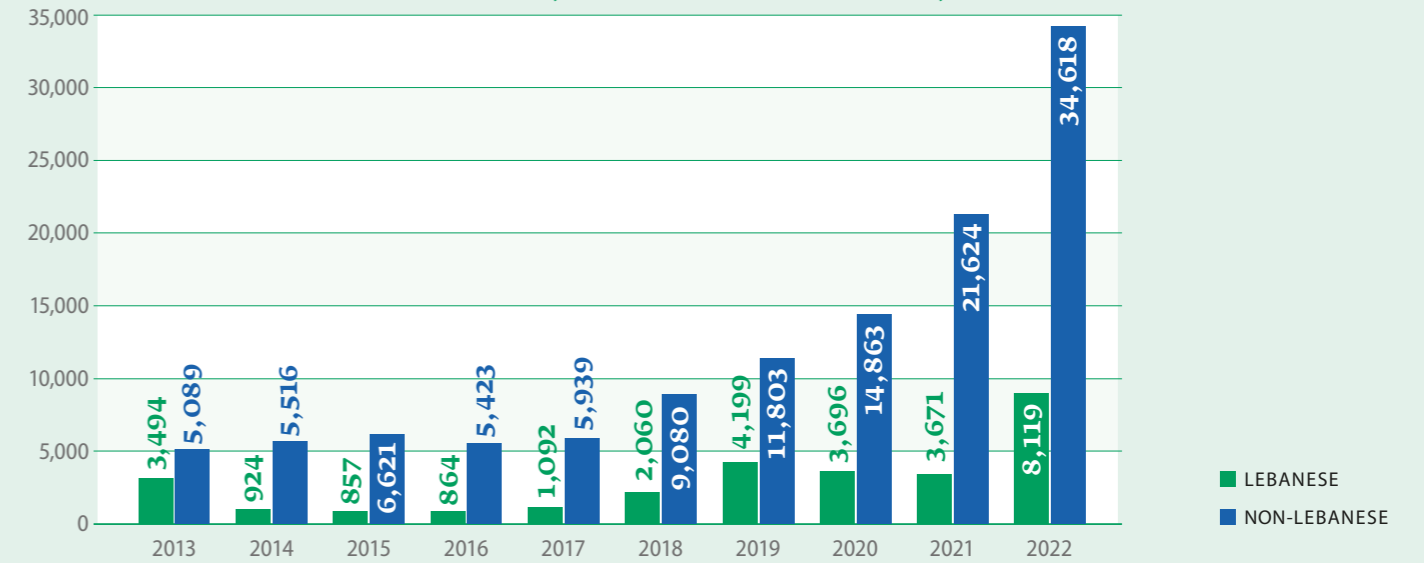


**Pediatric Services 2013-2022**

	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Consultation	13,564	10,017	11,243	8,898	9,360	13,252	16,002	18,559	25,295	42,737
Vaccination	4,932	11,254	8,561	10,104	9,860	11,474	8,268	9,759	8,367	10,064
<b>TOTAL</b>	<b>18,496</b>	<b>21,271</b>	<b>19,804</b>	<b>19,002</b>	<b>19,220</b>	<b>24,726</b>	<b>24,270</b>	<b>28,318</b>	<b>33,662</b>	<b>52,801</b>

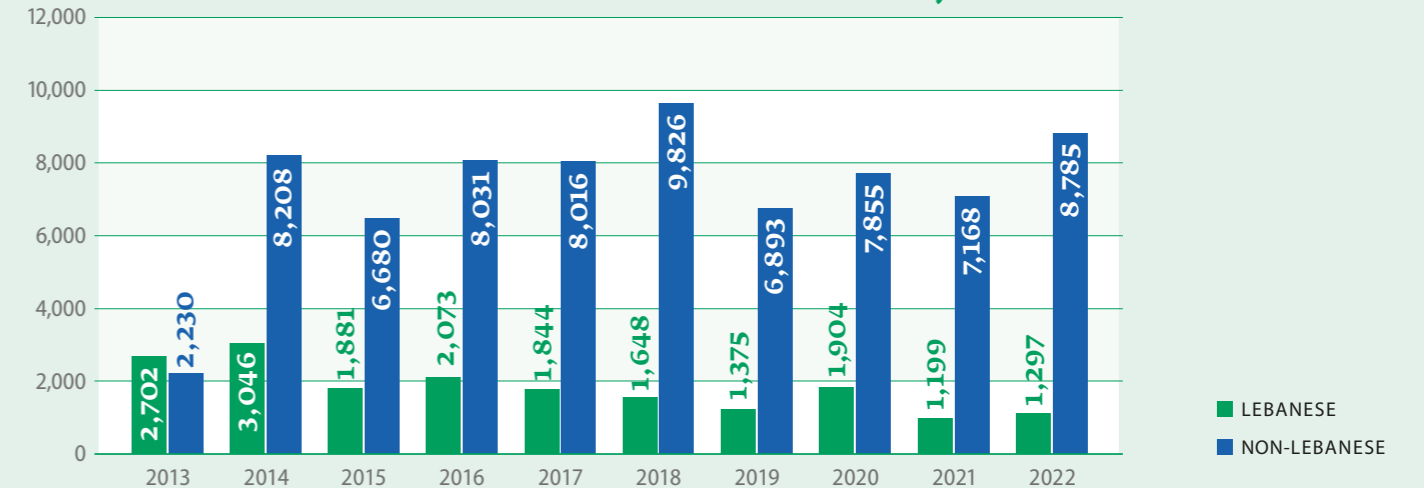
**A. Consultation**

**Number of Children's Consultations at the Pediatric Unit Per year and Per Nationality 2013-2022**



**B. Vaccination**

**Number of Children Vaccinated Per Year and Per Nationality 2013-2022**





## PEDIATRIC CLINIC & VACCINATION SERVICES

### National Calendar for Vaccination

At Birth (During the first few hours in the hospital)	Hepatitis B	Zero Dose (Hospital)
2 months	IPV (Inactivated Polio Vaccine)	1 <sup>st</sup> Dose
	Penta (DPT, Hib, HepB)	
4 months	OPV (Oral Polio Vaccine)	2 <sup>nd</sup> Dose
	Penta (DPT, Hib, HepB)	
	PCV13 (Pneumococcal Vaccine)	1 <sup>st</sup> Dose
6 months	OPV (Oral Polio Vaccine)	3 <sup>rd</sup> Dose
	Penta (DPT, Hib, HepB)	
	PCV13 (Pneumococcal vaccine)	2 <sup>nd</sup> Dose
9 months	Measles	Zero Dose
12 months	MMR (Measles, Mumps, Rubella)	1 <sup>st</sup> Dose
	PCV13 (Pneumococcal Vaccine)	Booster
18 months	OPV (Oral Polio Vaccine)	1 <sup>st</sup> Booster
	Penta (DPT, Hib, HepB)	
	MMR (Measles, Mumps, Rubella)	2 <sup>nd</sup> Dose
4-5 years	OPV (Oral Polio Vaccine)	2 <sup>nd</sup> Booster
	DPT (Diphtheria, Pertusis, Tetanus)	
10-12 years	OPV (Oral Polio Vaccine)	3 <sup>rd</sup> Booster
	dT	
16-18 years	OPV (Oral Polio Vaccine)	4 <sup>th</sup> Booster
	dT	

KA-PHC works closely with the Lebanese Ministry of Public Health to implement its recommended schedule on vaccination, shown in the table above.



## PHC UNIT DIVISIONS: OBSTETRICS & GYNECOLOGIC CLINIC (OB-GYN)

The Obstetrics and Gynecology Clinic provides a wide array of services that cater to the needs of every woman at every age. We believe women need to take an active role in staying healthy through preventative care and specialized medical treatments.

The clinic strives to offer quality services to women seeking professional health care. These services emphasize preventative measures besides the curative ones. Along with prenatal and preventive care, the clinic also plays a major role in promoting the concept of family planning. The services we offer include the following:

- Antenatal care for pregnant women and Postpartum care for mothers with newborns
- General gynecologic care and routine primary care for women of reproductive age
- Preventive care with PAP smear and breast ultrasound and mammography
- Counseling and prescriptions for different types of family planning methods, including emergency contraception
- Early detection of fertility problems and care for menopausal women
- Health education and promotion through educative campaigns
- Sexual dysfunction screening, counseling and treatment
- Lactation counseling

- Sexually transmitted infections screening and treatment

These services were provided to women of all backgrounds, religions and ethnicities, all the while respecting the privacy of each woman, and her cultural and social norms.

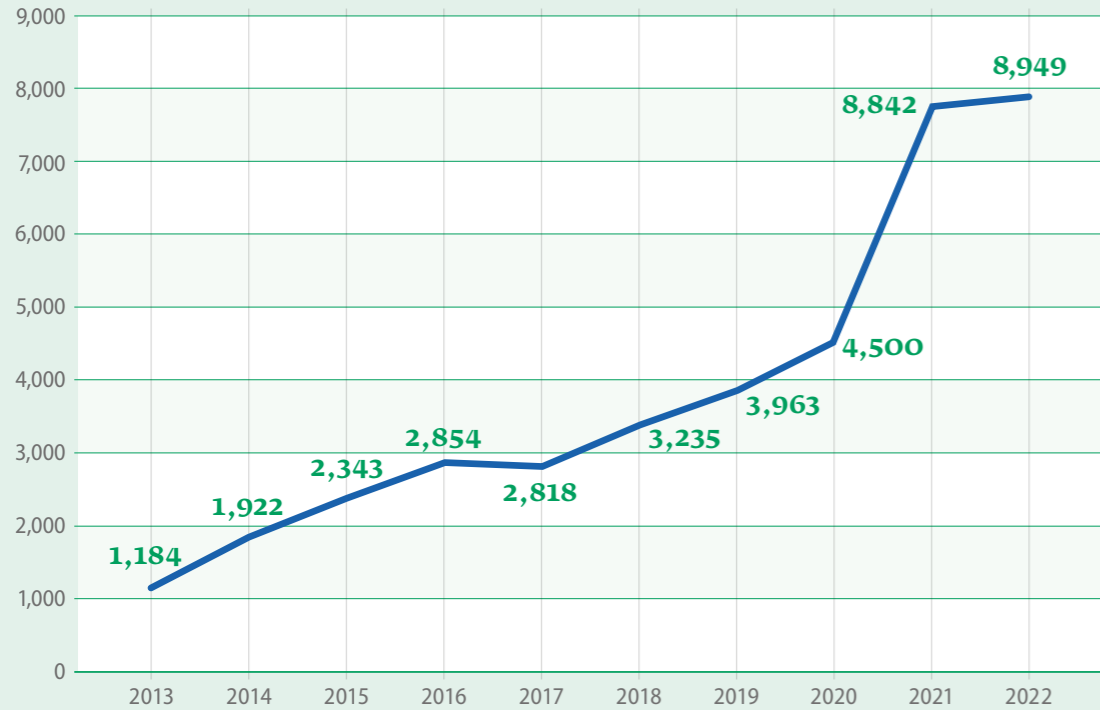
The OB-GYN Clinic has touched the lives of many women, and continues to remain loyal to its core mission: offering high-quality care for women through its holistic approach.

KA-PHC OB-GYN unit consisted over the past 3 years of a total of 7 OB-GYN doctors and one or two OB-GYN residents from AUBMC who come each week once in afternoon hours. All senior residents PGY4/PGY3s rotate throughout the year to provide our patients with high quality of care where they are supervised by Dr. Salah Malas who is one of KA-PHC and AUBMC doctors at the same time. This service is provided for free and consist of 3% of our total OB-GYN yearly consults. It is linked to the expertise of the OB-GYN doctors at AUBMC in case of need. A total of 16 OB-GYN residents came to KA-PHC rotated in KA-PHC during the years 2020 and 2021.

Our midwife, Ghada Gabriel Hanna, added tremendous value and care in this unit as she followed up on the cases, provided one-to-one counseling and care, educated women about the importance of breast feeding, family planning,



**OB-GYN Services 2013-2022**



post-partum depression, antenatal care, referred new born babies to our pediatric and vaccination unit, followed up and trained the students coming from the school of midwifery from USJ and the Lebanese University, helped and followed up with the OB-GYN residents.

Due to the increase patients load, we recruited a second midwife Mrs. Iman Chaccour to be in charge of a new OB-GYN clinic on the renovated 1<sup>st</sup> floor. All OB-GYN doctors and residents work in concordance with our midwives Mrs. Ghada and Miss. Iman as a complete team to provide ladies coming to KA-PHC all the gynecologic diagnosis, treatment, screening and preventive care (breast ultrasound and mammography, pap smear...), Family planning and contraception, as well as all care related to child bearing (prenatal, pregnancy visits and counseling, obstetric ultrasound, and postnatal care...). One high risk OB-GYN doctor

performs also morpho-scans at KA-PHC for pregnant ladies.

Family planning counseling improved through the last several years. This was attributed to many factors that was offered in the center. The main cornerstone was the counseling that was done by the medical team including doctors, our midwife and nurses from one side and the supporting stakeholders from the other side. Nevertheless, many educational charts were present in the unit that helped in spreading the new culture among the clients in the center. Another important aspect was the initiation of counseling from the time of pregnancy, in which this will lead to an easy decision in the post-partum period. In addition, and abiding to the international recommendations ultrasounds were done before and after each intrauterine device insertion. Nevertheless, risk assessment for oral

contraception is done before prescribing any medication.

**Feto-maternal Medicine in KA-PHC**

The center is equipped with a 3 well-formed ultrasound that can help the department of obstetrics and gynecology perform the regular morphology scans. It helps in easier detection of anomalies or any high risk pregnancy.

**Women’s Health Screening at KA-PHC**

In addition to the obstetric care, the center focuses on the gynecological health of women in which it screens for gynecological cancers as cervical cancer and breast cancer, especially after the start of the Women’s Health Preventive Package initiated by IMC in June 2021 covering each lady for her yearly mammogram and pap smear. Our midwives did an amazing job helping more than 1000 lady in 2021 to get this free preventive service.


The center also through the ultrasound may help in diagnosis of associated malignant signs of both ovarian and endometrial cancer. To note, as success stories, some sexually transmitted diseases such as HIV, Hepatitis B and Hepatitis C were detected in patients through regular screening and patients were referred to other institutions to get the proper treatment and follow up.

Moreover, the OB-GYN unit collaborates with other departments such as the FM department to screen and treat other women health issues such as osteoporosis, diabetes, dyslipidemia and others.


**OB-GYN Clinic’s Role in Education**

The center does not only provide medical service, yet it also provides an extra educational service for many universities as Beirut Arab University (BAU) and American University of Beirut Medical Center (AUBMC). This is through the shadowing of BAU students with the doctors of the center and through the practice of the OB-GYN AUBMC residents in the center, which added value to our services provided.

	2020	2021	2022
Nº of OB-GYN physicians	7	7	6
Nº of OB-GYN residents	9	11	8
Nº of midwives who did their clinical rotation in this unit (USJ + Lebanese University)	6	6	6
Nº of staff designated in this unit	2 midwives	3 (2 midwives & 1 secretary)	3 (2 midwives & 1 secretary)
Nº of OB-GYN cases served including pregnant ladies	4,500 patients' visits	8,842 patients' visits	8,949 patients' visits
Nº of pregnant women seen	542	943	1,041
Nº of ultrasounds done	2,077	4,401	4,621
Nº of fetal monitoring	38	31	36
Nº of PAP smears	533	1,845	1,501
Nº of Echo-Morpho	87	190	183
Nº of IUD insertion	117	241	270
Nº of IUD removal	73	97	122

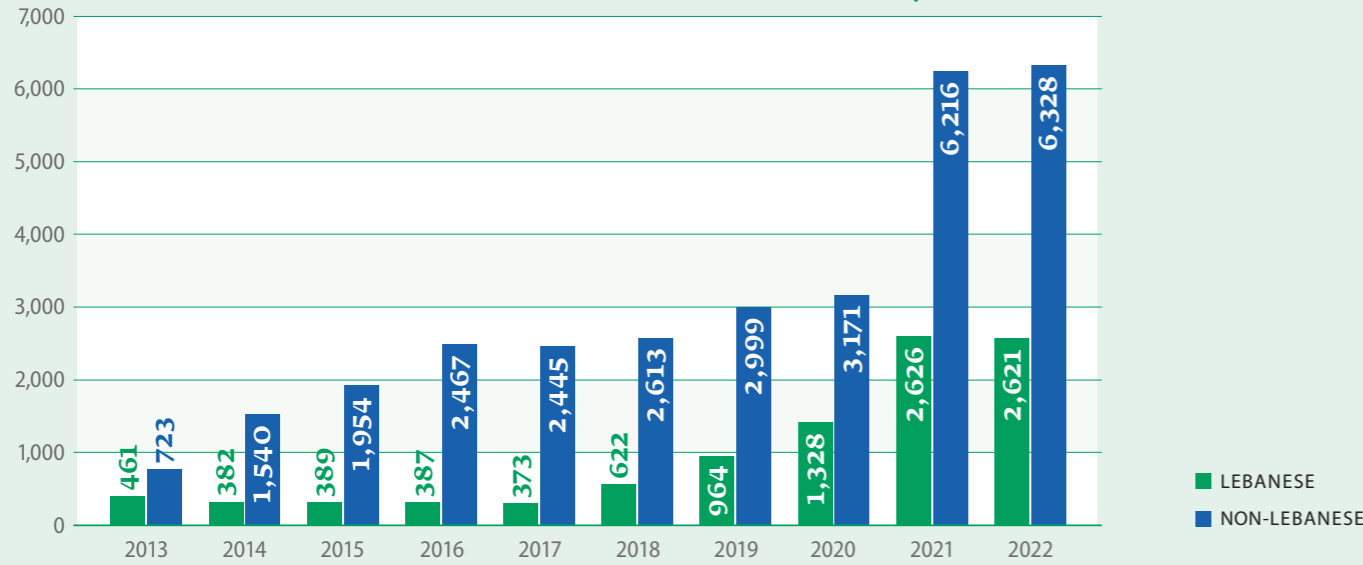


Please scan this QR to watch a video celebrating International Midwives Day





**Number of Patients' Visits to the OB-GYN Clinic Per Year and Per Nationality 2013-2022**



**OB-GYN Clinic and Refugees**

Since the Syrian crisis of 2014, the majority of the patients at our OB-GYN unit were Syrian refugees. Yet, this did not stop the attraction of other nationalities to visit the center due to several plans that was assigned by the administration for keeping this appeal and helping more vulnerable

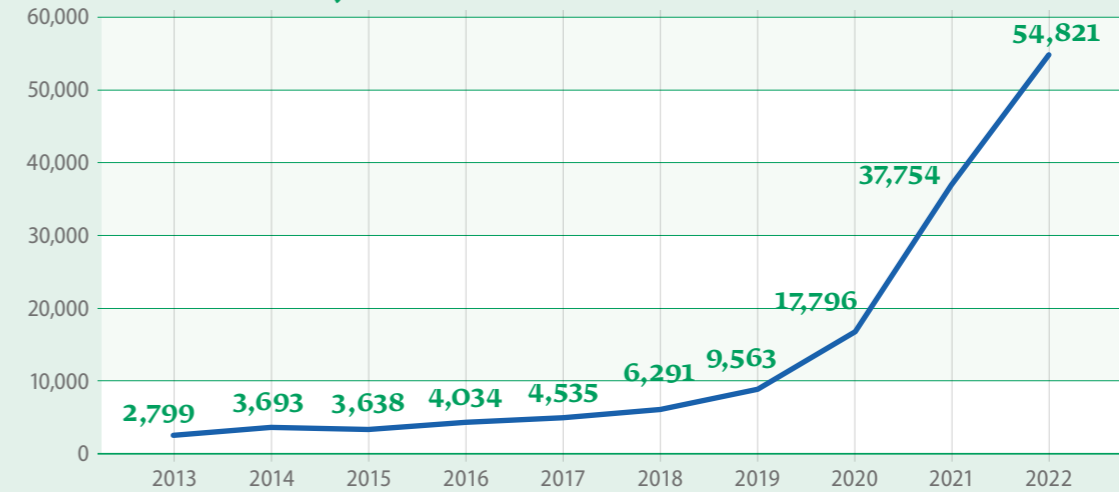
Lebanese population. It is of major importance to mention that while the Lebanese patients attending to our OB-GYN unit were 32% in 2019, this number increased to reach 43% in 2022 where more and more Lebanese ladies are now following up with our OB-GYN doctors and receiving all the services for free.

PHC UNIT DIVISIONS:  
**FAMILY MEDICINE & CHRONIC CARE CLINICS**

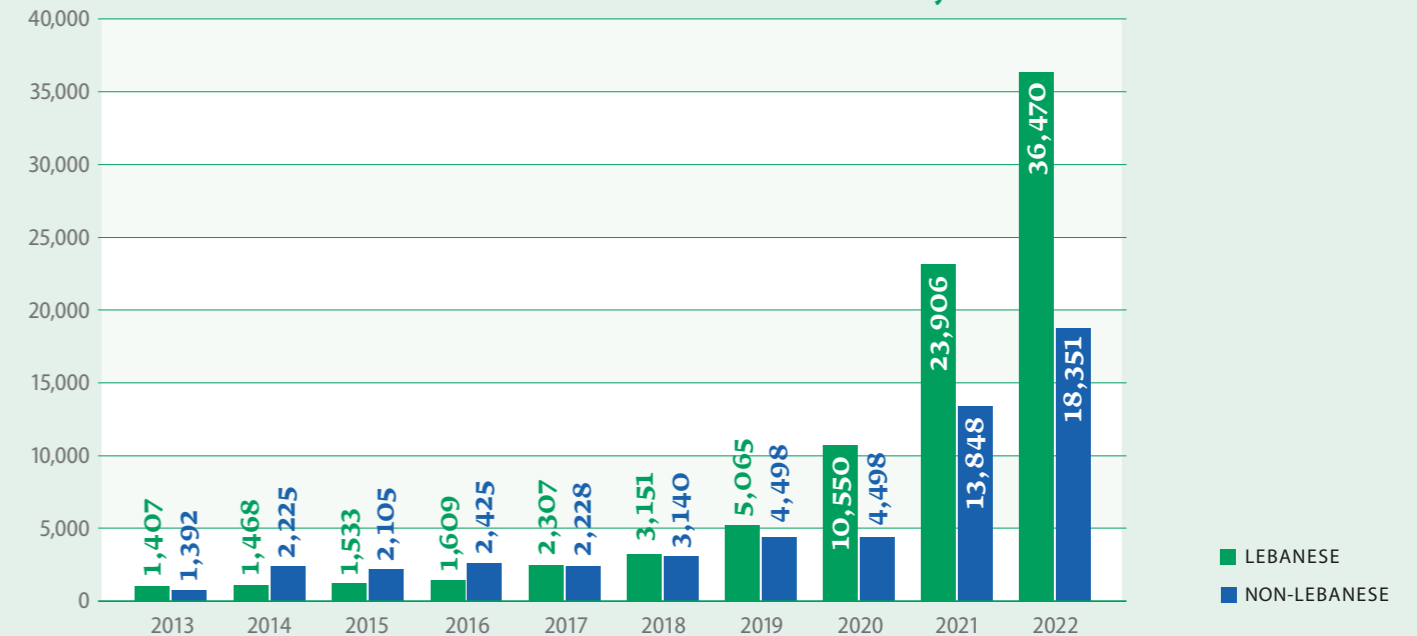
**Family Medicine & Chronic Care Services 2013-2022**

	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Patients' visits	2,799	3,693	3,638	4,034	4,535	6,291	9,563	17,796	37,754	54,821

**Family Medicine and Chronic Care Services 2013-2022**



**Patients' Visits to the Family Medicine and Chronic Care Unit Per Year and Per Nationality 2013-2022**





Family Medicine (FM) doctors, known as primary care physicians in western countries, serve as gatekeepers in efficient healthcare systems. They do the first assessment of all patients and they can treat more than 80% of all patients' complaints including both adults and pediatric patients. Their presence is necessary to be able to serve a growing community by number and age, as they limit the number of referrals and the load pressure of other specialists.

At Karagheusian Primary Healthcare Center, we started applying the concept of FM gatekeeping since 2018 where all patients coming for the first time to our center must be seen by an FM doctor first (physicians or residents) then and only if needed, the patient is referred to one of our other specialists who deal with chronic diseases (diabetes, thyroid, hypertension, cardiac problems, kidney problems...).

**Family Medicine Doctors' Tasks at KA-PHC**

The Family Medicine (FM) Unit is the biggest operating unit at KA-PHC with full time daily clinics from 8am to 4pm, 6 days per week, it comprised initially in 2019 6 FM doctors and one gastroenterologist (who worked also as GP) and 10 FM residents who come from 3 university hospitals (AUB and UOB and LU). We now have in 2022 a team of 15 FM doctors along with 27 residents and medical students' supervisors who came in the last 2 years.

The collaboration with these renowned medical schools has benefits both for their residents through teaching activities and for our center and beneficiaries for the high quality of care they are receiving through expert opinions, evidence-based medicine and awareness and educational campaigns. In 2021 the FM residents contributed to 23% of our total FM consultations as showed in the chart below.

With a growing load of patients and the need to pro-

vide urgent care for patients after the Beirut blast and the shortage of medication crisis, we decided to open walk in clinics where patients without appointments are able to be seen in a timely and professional manner. By the start of 2022 we were operating with 5 parallel family medicine clinics on appointments along with 2 daily walk in clinics.

FM doctors and residents are the ones who see the patients coming for the first time to Karagheusian. They have to deal with all their complaints (acute and chronic) besides checking all their prior conditions/medications / laboratory tests... and properly documenting everything in the chart before deciding the need to refer to a specialist.

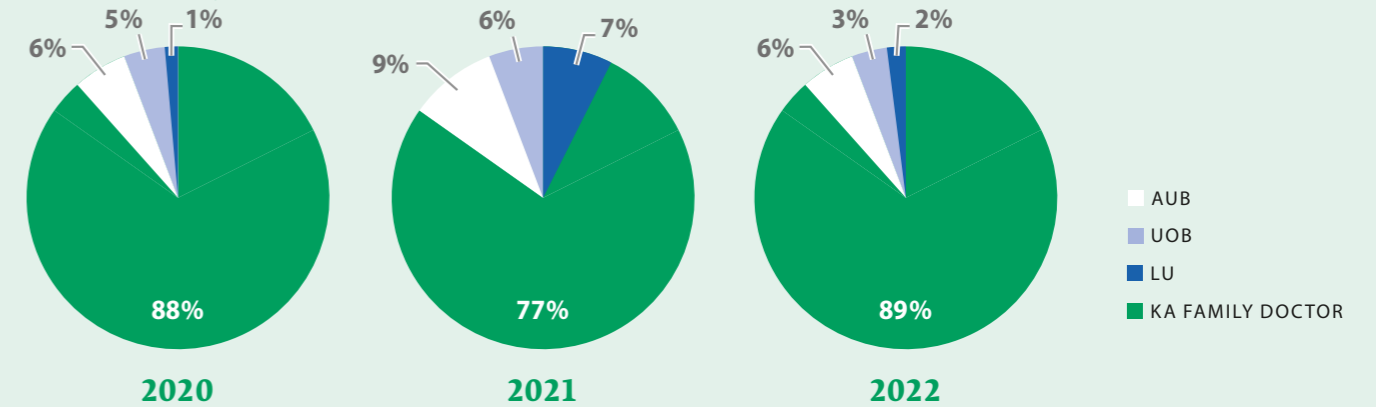
**One Doctor for All**

Eighty percent of the patients' conditions are diagnosed and completely treated by the family medicine doctors without the need for any referral. KA-PHC is implementing the concept of primary care gatekeeping to decrease the burden on specialists and provide each patient with holistic medical care.

**Home Care**

The Family Medicine Physicians also conduct Home care outreach services by providing primary care consultation services for the people with disabilities and elderly population who are either bed ridden or are unable to visit our center. During 2019 we were able to do 154 home visits providing care for the disabled and the elderly, and 217 vulnerable home-bound were visited in 2020. After this success, IMC started covering the home visits in 2021 and through this collaboration we could provide home-based medical care to 1136 patients in 2021 and 793 patients in 2022 until October 31. So far, a total of 2,300 vulnerable disabled or bed bound patients were provided with high standards of care from the comfort of their homes.

**Family Medicine Resident's Contribution in Comparison with Total Family Medicine Department**



**Diagnostic Tests**

The Family Medicine physicians, after consulting the patients, are responsible for ordering the necessary diagnostic tests to diagnose properly the patients' condition. At KA-PHC, we can provide basic laboratory tests for patients (CBCD, Creatinine, liver functions, lipid profile...) and ultrasound services done by diagnostic radiologists who come daily. Thanks to our collaboration with Saint Marc Diagnostic Center, we are able to provide patients with the rest of their needed blood tests, imaging and more advanced investigations (stress test, EEG, MRI...). All results are communicated between St Marc and our medical director to ensure proper follow up on critical cases.

**Referrals to Our Chronic Department**

When needed, patients are referred from the FM clinic to the Chronic Care Unit.

The chronic care department that included 3 units of 8 doctors in 2020 improved in 2021 to have 4 units of 12 doctors. They all work in complete harmony with the FM unit where patients are referred from and back.

**Cardiology:** from 2 cardiologists in 2020 we had

to increase to 5 doctors in 2021 and 2022 to have daily cardiologists at our center to perform cardiac patients' consultations and echocardiographs.

**Nephrology:** a team of 3 nephrologists consulted our growing needs of chronic kidney disease patients.

**Endocrinology:** 2 endocrinologists were covering 5 days per week.

**Gastro-enterology Unit:** due to the high community need we had to add one to our chronic care department that included 1 doctor in 2020, to increase to 2 doctors in 2021, to reach 3 gastroenterology doctors in 2022.

The daily presence of the FM residents and the FM doctors and chronic specialists enables the center to receive more patients by having daily morning and afternoon clinics, to provide them with timely quality of care, and open collaborative opportunities to the special or critical cases.

**Referrals to Our Secondary Specialists Unit**

Sometimes FM doctors need to refer patients to other specialists (Orthopedist, Neurology, Dermatology...) hence the Other Specialists Unit was created early 2020 from the need to organize



the referrals to doctors of other specialties. The department included 3 units of 12 doctors (ENT, Orthopedic and Radiology) but then was expanded to include 8 more units (Dermatology, Urology, Neurology, Hemato-oncology, Pulmonology, General surgery, laboratory and pathology and most recently rheumatology) based on the patients' needs in 2021 and 2022.

A total of 24 doctors in this unit worked in complete harmony with the FM, pediatrics and chronic care units where patients are referred to them and back to the primary care clinics:

**Musculoskeletal Clinic / Orthopedic Care / Sports Medicine Clinic:** 1 Sports medicine and 1 orthopedic doctor assess patients with chronic joint pains and perform joint injections and refer some cases to orthopedic surgery if needed. They also refer patients to our physical therapy unit. Due to the high need, another orthopedic doctor joined in 2022 and now we have every day a doctor present for urgent matters like fractures to apply casts for adults and pediatric patients.

**Rheumatology:** One rheumatologist also joined the team in 2022 to be able to complete the holistic care of patients with joint and bone diseases.

**Ear Nose Throat (ENT):** Due to the high demand, the team increased from one to 4 ENT doctors in 2021-2022 to cover all days of the week, to assess pediatric and adult patients referred from the other units for ENT complaints. This unit improved also by initiating the Hearing Test unit where audiograms and tympanograms are done on the spot by our nurses and the results are checked by our own doctors. An amazing teamwork exists between the ENT unit/the pediatric department and the Children with special needs department

where kids with hearing or speech problems are being identified and referred for proper speech therapy inside our center.

**Diagnostic Radiology (Ultrasounds):** The team increased from one to five radiologists who cover daily diagnostic ultrasounds clinics done inside the center for KA-PHC patients who need them.

**Dermatology:** After the Beirut blast, a lot of patients needed follow up on their skin lesions. We started with 1 dermatologist in 2020 then the team increased to have 2 dermatologists in 2021 and 2022.

**Urology:** the need for a urologist was obvious also so 1 urologist joined the team in 2020 and 2021, then had to travel abroad so 3 other doctors started covering the needs.

**Neurology:** The need for an adult neurologist increased, so one doctor joined for few months in 2021 but then had to leave as well. We are in the process of recruiting another neurologist in 2022.

**General Surgery:** A general surgeon also joined the team in 2021 to cater for the minor surgery needs of the patients who cannot afford to do them anymore in private settings.

**Pulmonology:** Due to the Covid-19 pandemic, our patients needed to consult a doctor for their pulmonology complaints. So 2 doctors joined in 2020. Only 1 is still coming in 2022.

**Hemato-oncology:** the need for a doctor treating blood and cancer complaints was increasing. So 1 Hemato-oncology doctor joined our team in 2021.

**Laboratory and Pathologists Doctor:** in 2021 a new unit was inaugurated in Karagheusian after winning the Japanese Fund. We received new

Laboratory machines and we needed a Laboratory doctor to start operating this unit. Later on in July 2021, with the new women's health preventive package from IMC, we recruited a Pathologist doctor to read all of the pap smears done in our center within a timely manner to deliver the most efficient care.

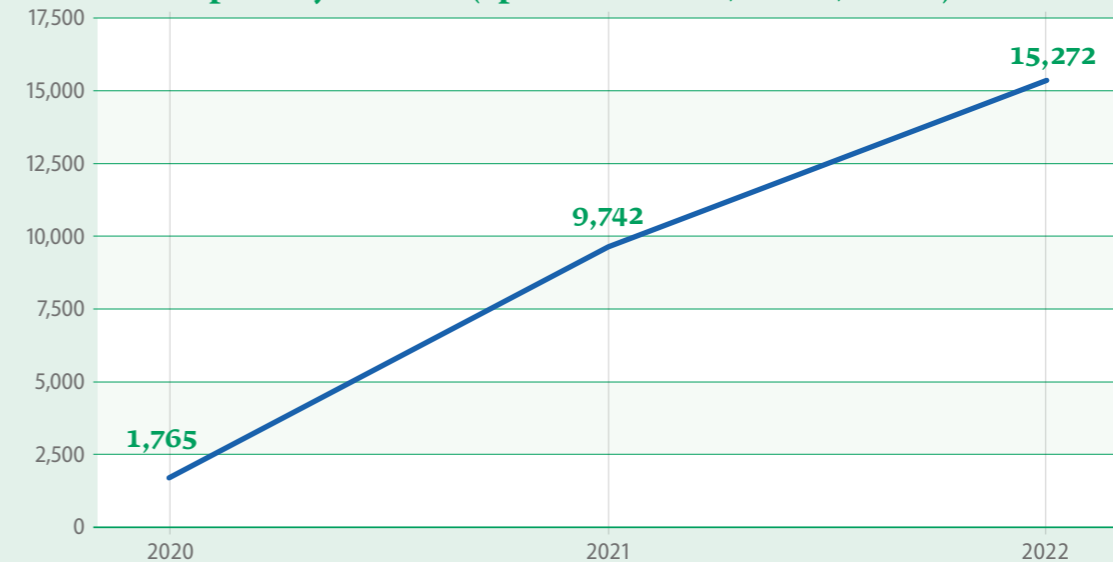
For all other specialties that we do not have at KA-PHC, we formed more collaborations with university hospitals to receive our patients for reduced fees. KA-PHC developed a special

referral sheet where all the details of our patient are filled and sent to the specialist at another institution. Starting 2021, all those referrals were also digitalized into our Health Information System Phoenix where all patients referred to other institutions can be followed by the Ministry of Public Health.

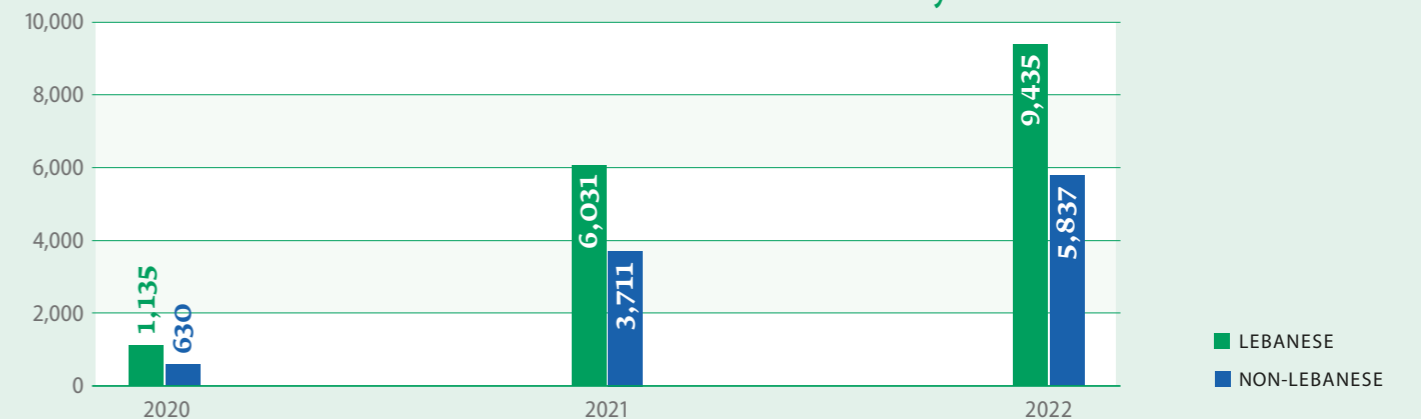
The current collaborations are with:

- American University of Beirut Medical Center (AUBMC) Out Patient Department (OPD)

Other Specialty Services (Sports Medicine, Ortho, ENT...) 2020-2022

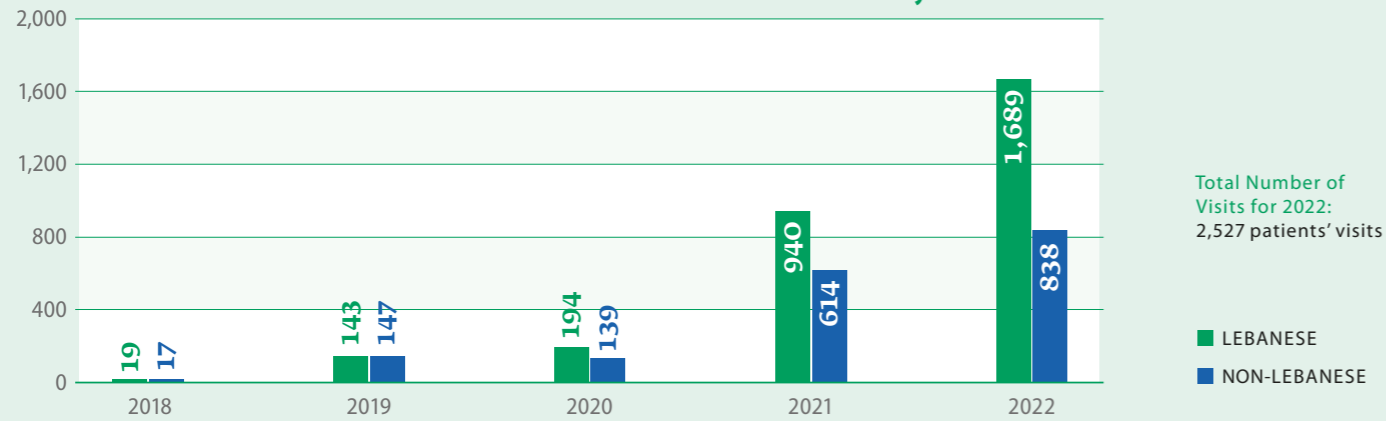


Number of Patients' Visits to the Other Specialty Services Unit Per Year and Per Nationality 2020-2022





### Number of Patients' Visits to the Radiology Unit Per Year and Per Nationality 2018-2022



- University of Balamand (UoB) Saint Georges Hospital Out Patient Department (OPD)
- Hôpital Libanais Geitaoui - Centre Hospitalier Universitaire

#### Referrals to secondary care - Hospitals

Despite all doctors' efforts to keep the patients in good health, sometimes patients, mainly the elderly population, need to be admitted to the hospital for complications of diseases.

To be able to follow up on our patients, collaborations happen at all levels:

1. FM doctor and medical director / administration team
2. FM doctor / medical director and social team
3. KA-PHC and patients' family in charge
4. KA-PHC and Governmental Hospitals

The special referral form filled also online, is used to send the patient with all the needed medical information, results of tests already done, suggestions for work up at hospital... The patient, with the help of our social department, is sent to

one of the governmental hospitals nearby that we have collaborations with:

- Karantina Governmental Hospital
- Baabda Governmental Hospital
- Daher El Bachek Hospital
- Rafic Hariri University Hospital

The social department is in charge of following up on the status of the patients during their stay at the hospital and after their discharge, to organize the follow up visit with our doctors and the needed interventions to continue the hospital's instructions (walking aid, physical therapy, wound care...).

#### Preventive and Educational Campaigns

The specialty of family medicine or primary care, is the one in charge of advocating for prevention of diseases. Our FM physicians apply the pillar of primary health care stated by the World Health Organization (WHO) as "Primary care and essential public health functions: through prevention and early detection of diseases".

FM Physicians at KA-PHC are involved throughout

the year, in educational and awareness campaigns done for our community and beneficiaries, regarding multiple health issues that could lead to prevention of diseases. They are also involved in keeping the students healthy by participating to school health check-ups (general examination, dental, visual, immunization...) and following up on the diagnosed cases.

#### Non Communicable Disease (NCD) Screening

Non communicable diseases (NCDs), also known as chronic diseases, tend to be of long duration and are the result of a combination of genetic, physiological, environmental and behavioral factors. The main types of NCDs are cardiovascular diseases (like heart attacks and stroke), cancers, diabetes and dyslipidemia.

Those dysregulations in blood sugar, blood lipids (Triglyceride and Cholesterol), and blood pressure are the cause of 71% of all deaths globally as per the WHO. Detection, screening and treatment of NCDs are key components of the prevention of death due to cardiovascular diseases, cancers, respiratory diseases and diabetes.

As part of our work as a primary care center in preventing diseases, KA-PHC actively performs daily screening of the Non Communicable diseases systematically to all visitors of KA-PHC who are above the age of 40. Patients who are identified as being at moderate to high risk of having NCDs are directly referred to our FM physicians for proper education, evaluation and order of necessary investigations.

Therefore, we decided to open a "walk in family medicine clinic" to serve the patients who needs acute urgent care (who cannot wait for their appointment) and the NCD patients who started flowing to get chronic medications. Since

those patients have NCDs they had to be seen immediately by a doctor to get the needed laboratory done as well as electrocardiography. A lot of success stories were reported of patients who were at the verge of a heart attack and were saved only by getting a proper assessment and treatment.

All NCD patients are also referred for a yearly free eye check up to make sure their retina and vision are intact. They also receive help in case curative or surgical eye treatment are needed. All NCD patients also get a yearly free dental check up to make sure their oral and teeth hygiene is respected and free of dangerous infections and complications. Referral to para medical specialties are also done in order to work on decreasing the risk by healthy nutrition, exercise, physical therapy, mental health...

A total of 4,200 patients were screened for NCDs during the year 2021, and 2,200 patients screened until now during the first 5 months of 2022.

Due to our NCD patients' community needs, a smoking cessation program was initiated in collaboration with the Adventist University and visiting medical students coming all the way from the River Plate university of Argentina on two consecutive years. A lot of success stories were reported of people quitting the cigarettes after this 8 weeks' program.

By this strategy, KA-PHC provide a full free care for patients with NCDs by starting with raising awareness, educating patients about the symptoms and prevention of NCDs, early detection of NCDs by doing a general screening for all the population above the age of 40, proper treatment of NCD by specialized doctors and provision of medications by our pharmacy unit, as well as referrals to para-medicals professionals with continuous follow up.

On September 20, 2022 we won the 2022 UN



Interagency Task Force and the WHO Special Programme on Primary Health Care Award in recognition of our achievements in providing and scaling up high quality, safe, comprehensive, integrated, accessible, available and affordable primary healthcare services, including around NCD screening and control and mental health and psychosocial support in Lebanon.

**Long-term Primary Healthcare Subsidization Protocol (LPSP) Packages**

As part of the preventive services provided by our FM physicians, the LPSP packages covers diagnostic and laboratory tests to certain categories of

patients according to their age and their existing health conditions. In addition to the NCD packages listed above, the patients having chronic respiratory symptoms can now benefit from the COPD package where a chest X-ray and a spirometry is covered yearly. Several wellness packages cover routine tests for males and females and also more advanced tests and adult vaccination for our senior patients older than 65 years old. Those packages help our population get the basic care they need without having the burden of their cost. A lot of diseases were discovered and treated through those packages.

## PHC UNIT DIVISIONS: DENTAL CLINIC

The mission of the Dental Clinic is to promote oral health through preventive screening methods and treatment as well as through educational campaigns. Experience has revealed that dental care has a huge impact not only on individuals' physical health but also on their psychological and social well-being. For this reason, we have developed our skills, updated our equipment, and collaborated with leading educational institutions to offer high quality care to our community.

Numerous factors besides income and ethnicity can determine oral health status: educational level, age, language barriers, cultural factors, oral health literacy, the ability to perform daily oral health care, unhealthy behavior such as neglecting to brush and floss, and bad nutrition also can adversely affect dental health.

Based on the recommendations of CDC, our clinic offers its services in two ways:

- Preventive and screening care through education about oral hygiene and dental health care using creative methods and during school health supervision.
- Curative care through dental assessment and treatment of oral diseases.

The Dental Clinic operates in collaboration with the Faculty of Pediatric Dentistry at l'Université Saint-Joseph. Through their unique ways, the pediatric dentistry doctors have changed the perception of dentists and dental check-ups in the minds of our children, which has led to an increase in the number of visits to the Dental Clinic.

Parallel to its work at the Center, the Dental Clinic plays a major role in our school health supervision. Beside performing assessments, the dental team provides students with toothpaste and toothbrushes as well as health sessions to promote dental health in schools.

We believe that every child has the right to smile confidently. It is their right but our responsibility to make sure that they know how to take care of their teeth and when to consult us to receive the best care.

Moreover, in adult oral and dental care, all NCD patients also get a yearly free dental check up to make sure their oral and teeth hygiene is respected and free of dangerous infections and complications.

The dental unit at KA-PHC consists of 9 dentists, some are also pedo and endo-dentist along with USJ dental residents (pedo and endo-dentists) who used to come in 2019 to KA-PHC on a different schedule each month. This collaboration helped KA-PHC to serve both pediatric and adult dental patients, however due to the pandemic in 2020, the dental residents came 1 month only in 2020.

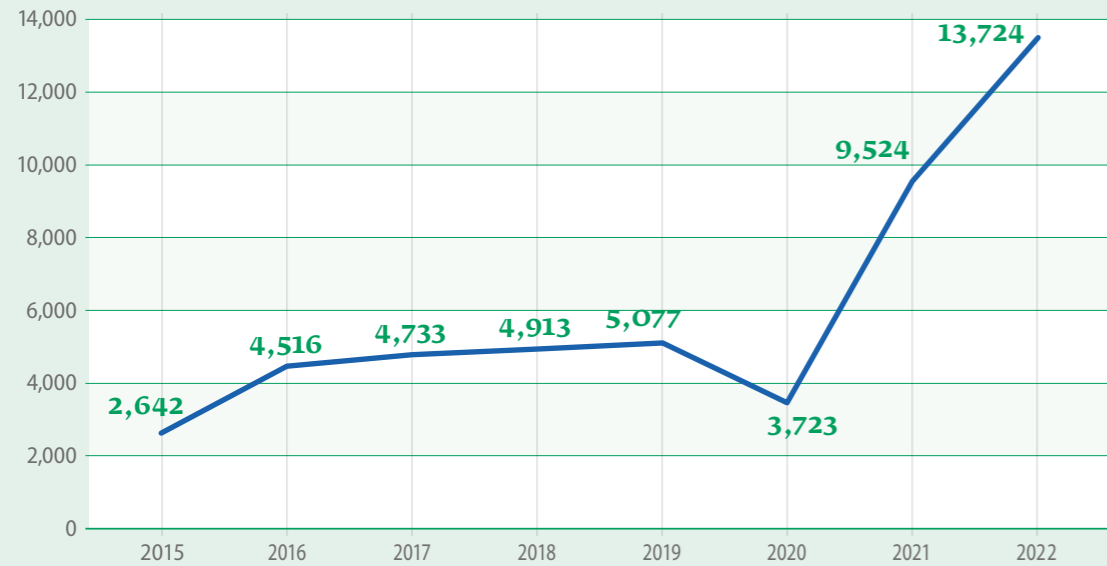
	2020	2021	2022
Nº of Dentists	9	9	10
Nº of USJ Pedodontists	3	0	0
Nº of staff designated in this unit	4	4	6
Nº of cases who received dental care	3,723 patients' visits	9,524 patients' visits	13,724 patients' visits
Nº of dental preventive campaigns in schools	4,588 students 2020-2021-2022 until end of Oct. in 14 schools		

To note that in 2021 IMC started covering some of the dental work which helped more patients receive dental services, explaining the patients' visits that nearly tripled in the year 2021.

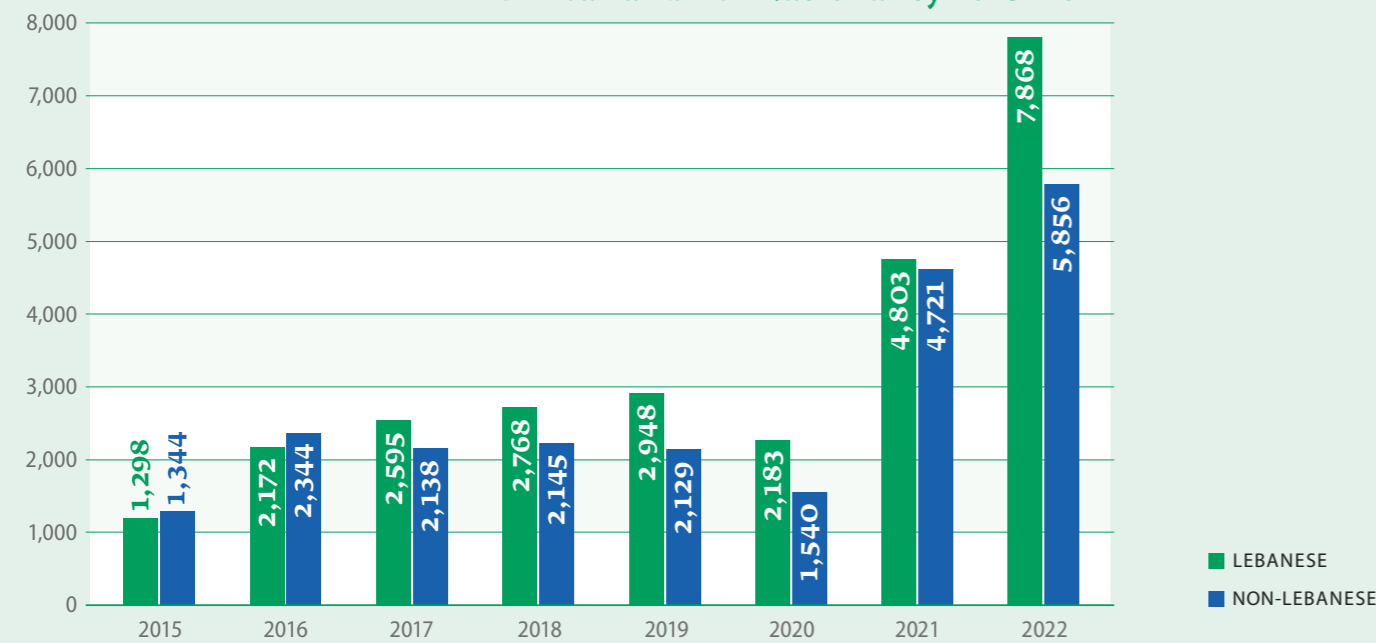
**In 2022, the Dental Clinic received a total of 13,724 patients' visits.**



Dental Services 2015-2022



Number of Patients' Visits to the Dental Unit Per Year and Per Nationality 2015-2022



## PHC UNIT DIVISIONS: OPHTHALMOLOGY CLINIC

In recent years, the Ophthalmology Clinic has emphasized the importance of comprehensive eye examinations and vision screenings by promoting high quality ophthalmic care in schools and in the clinic.

For children especially, eye health plays an important role in normal development, since vision is closely linked to the learning process, and children who have trouble seeing or interpreting what they see will often have trouble with their schoolwork.

In addition to caring for students who seek our clinic following our school health supervision visits, we also treat adult patients who are generally referred by their primary care physician for comprehensive eye examinations.

Our ophthalmologists offer individualized treatment plans that include eyeglasses or contact lenses, eye exercises for muscle problems, medical treatment for eye diseases, screening for complications resulting from chronic diseases (diabetes, hypertension...) and surgeries when indicated (in the cases of glaucoma, cataract...).

The ophthalmology unit at KA-PHC expanded its services in 2020 specially after the Beirut Blast in order to cater the needs of the patients who had eye injuries, as well as patients who had visual disturbances due to the shift into online teaching and remote work during the pandemic.

It consists now of 6 doctors covering daily full day clinics and one senior graduating

ophthalmology resident who comes weekly from Lebanese American University (LAU). The resident is supervised by ophthalmologists from LAU. They are consulting critical cases and helping the patients needing further interventions in their outpatient department at LAU medical center. This service is provided for free and the resident is contributed to around 4% of total patients served in 2021.

The ophthalmology visits nearly doubled between the last 2 years (2,959 patient's visits during 2019) explaining the high need for the community for this services. Therefore, a fund was received from the Misereor Project in order to renovate and equip a second ophthalmology clinic that started receiving patients in March 2022, working in parallel with the first clinic and having a dedicated nurse to organize the work in this unit.

In collaboration with the Pontifical Mission in Lebanon, a program was initiated to provide eyeglasses for free for the most vulnerable people with visual difficulties. Around 80 to 100 eyeglasses were provided monthly for free since the start of 2022 to needy people after being diagnosed with visual disturbances by our ophthalmologists, and following strict evaluation by our social workers for their social and financial status. All patients are referred to a dedicated optometrist to have their eyeglasses customized upon their facial geometry. Our priority was students, individuals whose eye weakness affects their work, and individuals who have high degree of weakness. Around 1000 eyeglasses will be de-

livered till the end of 2022. This project was born after the huge need of people to get eyeglasses that they couldn't afford anymore, hence it will continue for the next 2 years until December 2024.

### Eye Exams During School Health Visits

As part of the school health program that we conduct yearly in more than 14 schools between November and May, we provide all students with comprehensive eye examinations to detect eye diseases of childhood that could be treatable and reversible with a tremendous outcome on improving the child's quality of life and learning capabilities.

We examine all students for visual impairment through Snellen chart testing, accommodated for their age and level of literacy. We can detect untreated strabismus and lazy eye syndrome (amblyopia). All students whose results are not within the normal range have their parents informed and referred to receive more care at our premises.

Visual screenings are done by promoting high-quality ophthalmic care in schools and for patients referred to our clinic. Since the school health visits were affected by the multiple school lockdowns during the Covid-19 surge in 2020 and 2021, a lot of kids needed instead to be seen by our ophthalmologists at the center. Our pediatric ophthalmologists took

care of them. School health program resumed fully in Spring of 2021 and during the new academic year of 2022.

### Referral of Critical Cases to LAU-Rizk Medical Center (LAUMC)

The presence of senior ophthalmology residents at our center enables us to receive more patients and to provide them with timely quality of care, and more importantly to open collaborative opportunities to the special or critical cases, in cooperation with the prestigious LAU medical center and their Ophthalmology Out Patient Department (OPD). Our patients can receive all kinds of advanced eye testing at the OPD of LAUMC where all the latest technologies are available for free to be able to diagnose severe and critical eye conditions, and moreover, receive the appropriate care to their eye diseases provided by renowned eye sub-specialists at LAUMC (retina, glaucoma, oculo-plastic specialists...).

A complete individualized plan of care is done for every patient according to his disease and shared between the medical director at KA-PHC and the ophthalmology specialist at LAUMC.

In 2019 more than 50 patients benefited from the referrals from KA-PHC to LAUMC for further diagnosis and treatment.

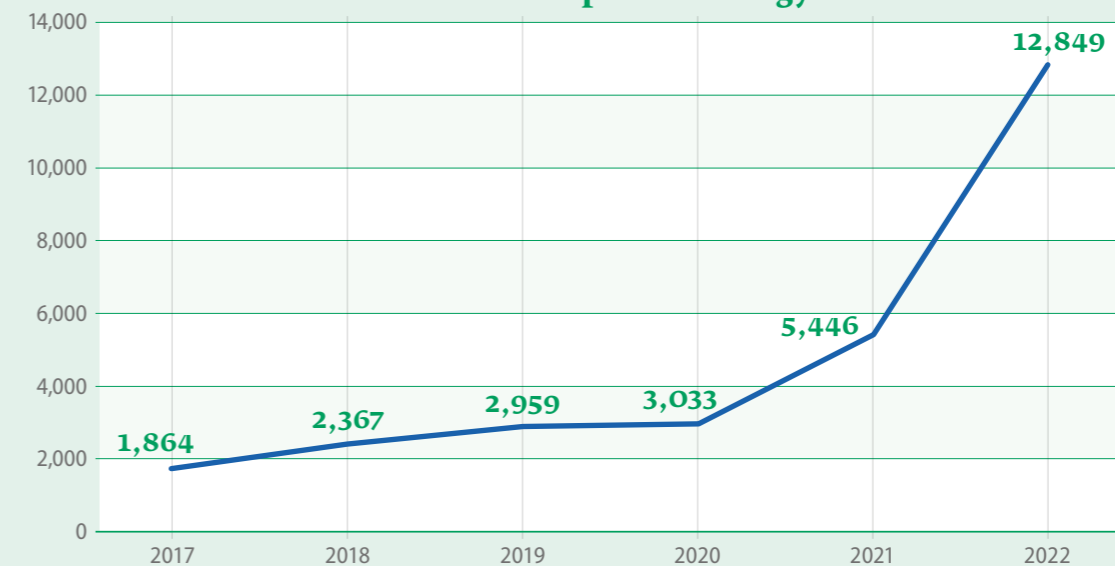
	2020	2021	2022
Nº of Ophthalmologists	6	4	8
Nº of Residents – LAUMC-Rizk Hospital, Ophthalmology-Eye dept.	2	2	1
Nº of staff designated in this unit	1	1	1
Nº of cases who received ophthalmological care	3,033 patients' visits	5,446 patients' visits	12,849 patients' visits
Nº of preventive campaigns in schools	4,164 students in 14 schools from 2020 to end of October 2022		

### Ophthalmology Preventive and Educational Campaigns

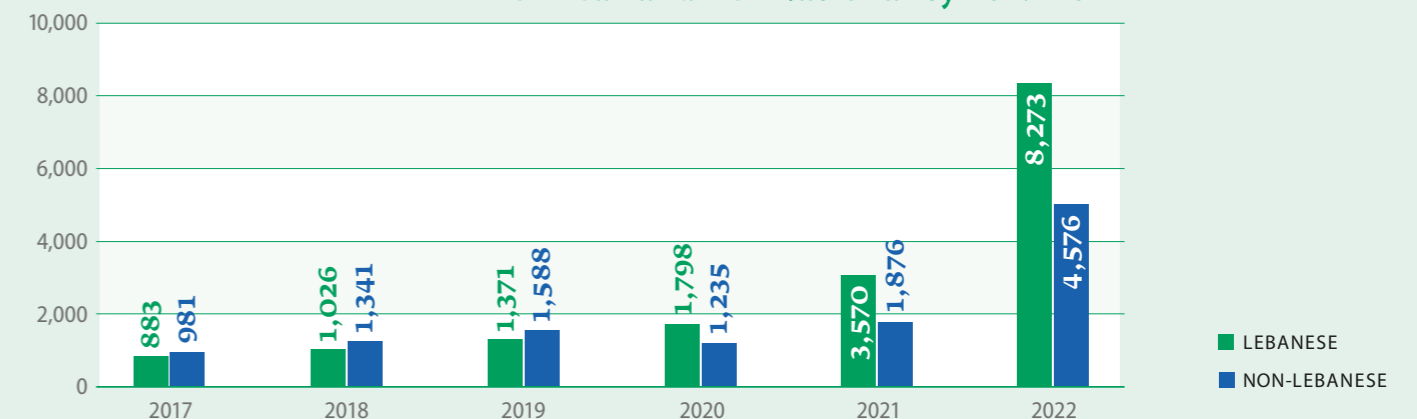
Our ophthalmology department is very active in providing patients and their families with preventive and educational campaigns at the center, at schools and also during our community meetings. Doctors, residents, students and staff were all involved in teaching beneficiaries about health eye care, screen time for children, the impact of chronic diseases on the retina (diabetes...) and the need to follow up regularly with ophthalmologists.

Moreover, through our campaigns of screening for Non Communicable Diseases (NCDs), patients who are found to have a moderate to high risk of diabetes and hypertension are directly referred from our staff or Family Medicine and Chronic unit doctors to our Ophthalmology unit for retina and general eye check-ups. All NCD patients are also referred for a yearly free eye check up to make sure their retina and vision are intact. They also receive help in case curative or surgical eye treatment are needed.

### Ophthalmology Services 2017-2022



### Number of Patients' Visits to the Ophthalmology Unit Per Year and Per Nationality 2017-2022





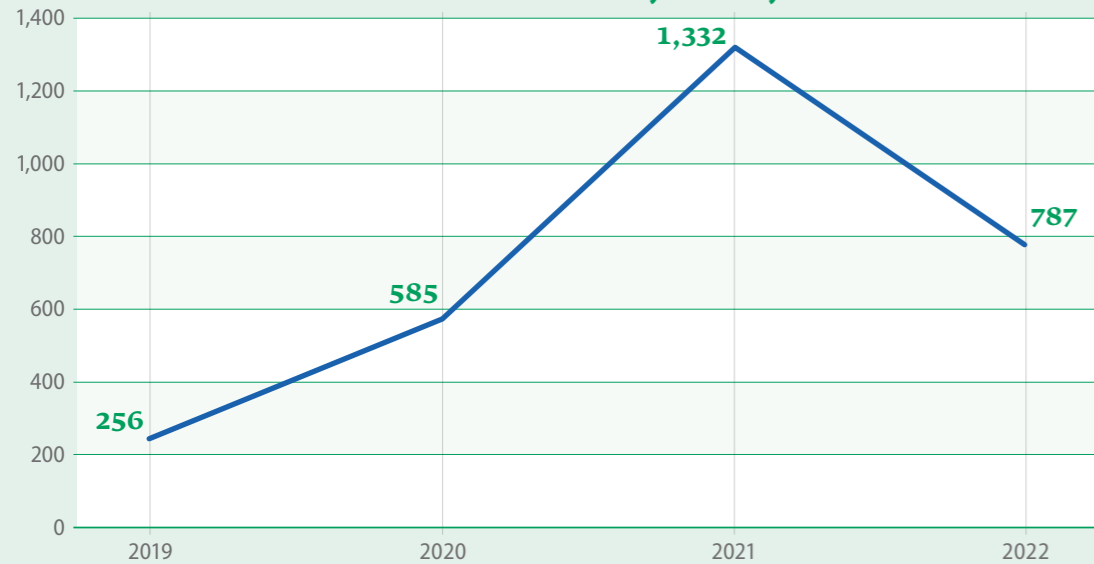
## PHC UNIT DIVISIONS: PSYCHIATRY UNIT

The psychiatry unit works in synergy with our mental health unit (social workers, psychologists and psychotherapists). It receives patients referred from all previous units as well as from the mental health unit. It had 2 psychiatrists in 2020, and grew to include 3 psychiatrists in 2021 and 2022. KA-PHC became in 2021 a community mental health referral center receiving psychotropic medications from MoPH for psychiatric patients from all over the Matn area.

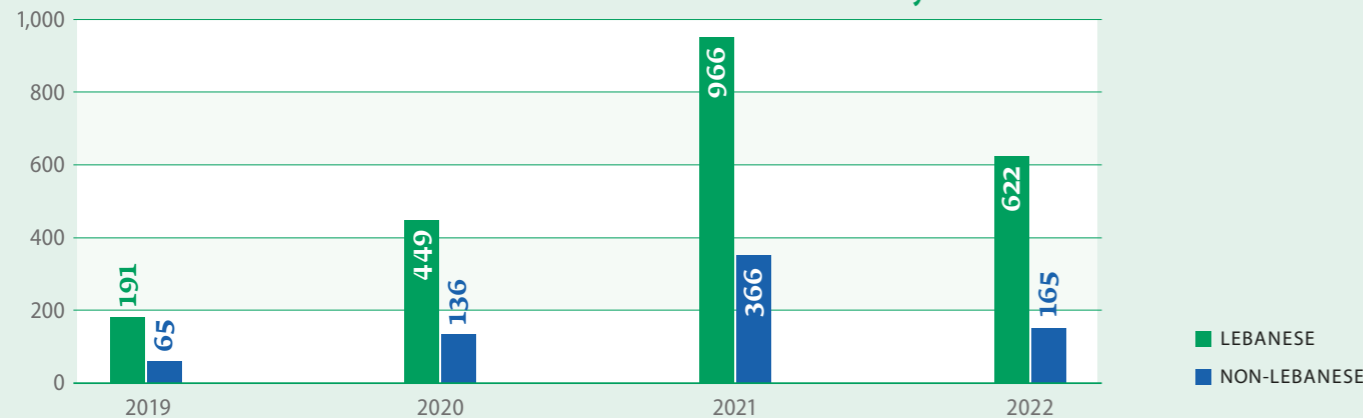
To note that the psychiatrist consultation is not covered by IMC but it was made at the same cost of a regular consulting clinic (3,000 LBP) by KA-PHC administration after seeing the huge need for psychiatric follow-up and treatment due to the Beirut Blast Post Traumatic Syndrome effect and the financial and economic crisis burden on our community.

This explains how the patients visits nearly tripled from 585 visits in 2020 to a total of 1,332 visits in 2021.

Psychiatry Services 2019-2022



Number of Patients' Visits to the Psychiatry Unit Per Year and Per Nationality 2019-2022



## PHC UNIT DIVISIONS: PHYSICAL THERAPY CLINIC

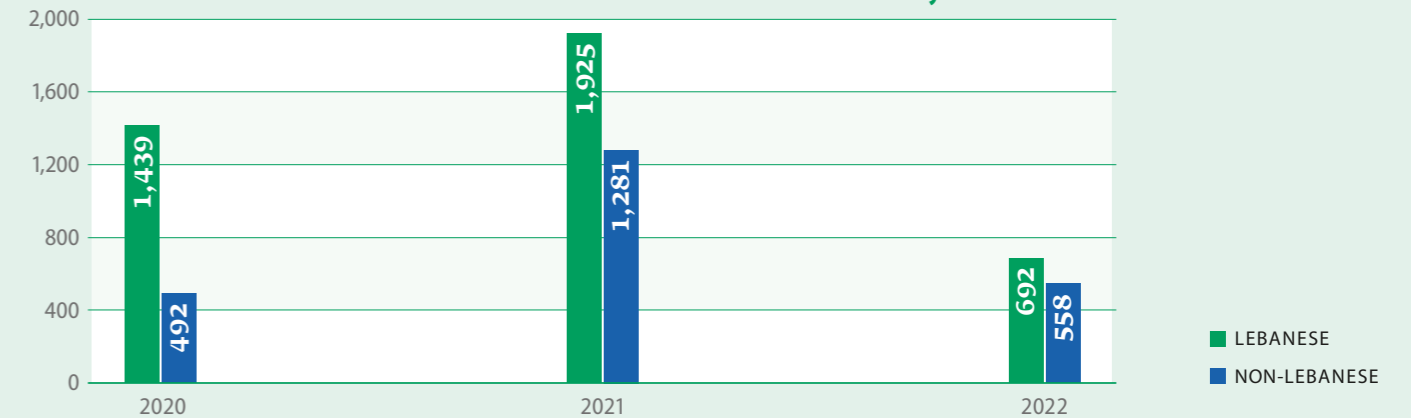
After starting the project "Providing Primary Health-care for People with Disabilities" (PWD) with the International Medical Corps (IMC) in May 2019, which aimed at helping patients with disabilities by covering more of the services needed for their well-being, we had the urge to start providing our patients with physical therapy sessions to help relieve their physical distress and dysfunction.

Hence, we engaged with 3 physical therapists: 1 full-timer at KA-PHC and 2 part timers at the center and their own clinic nearby in Bourj Hammoud, and we started providing the patients physical and rehabilitation sessions individualized to every condition and customized to their needs. Some

patients couldn't leave their homes so we made sure to reach them within their livings and provide weekly sessions to help them regain mobility and a certain amount of independence. Walking aids were also provided according to their need.

Some patients after receiving proper consultations from our sports medicine or orthopedist specialists, and after completing their physical therapy sessions, still need to be referred for surgery of the bones. This is why the orthopedic clinic expanded and more services were added like providing children and adult with casts inside the center when needed. A rheumatologist also joined the team in 2022 to be able to complete the holistic care of patients with joint and bone diseases.

Number of Patients' Visits to the Physical Therapy Clinic Per Year and Per Nationality 2020-2022



Flow Chart of the Consultation and Referral System of the Orthopedic & Physical Therapy Clinic



## PHC UNIT DIVISIONS: NUTRITION UNIT

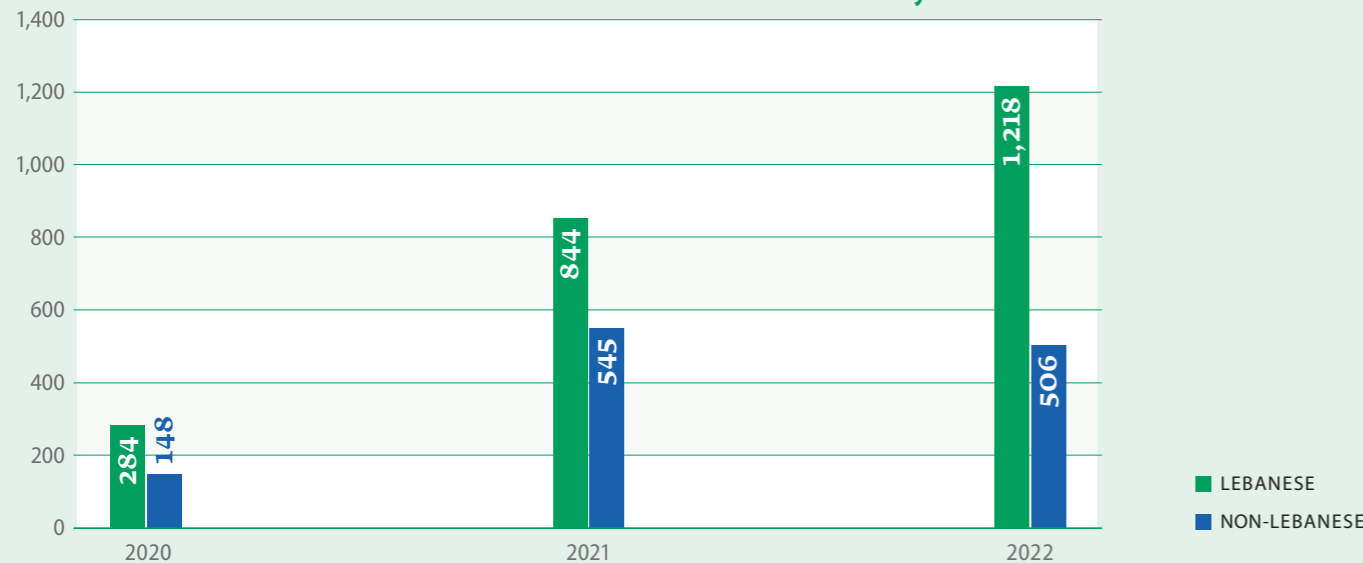
The Nutrition Unit at Karagheusian Association Primary Healthcare Center has been playing an important role in improving the health and wellbeing of the individuals that the Center serves. Many individuals have benefited from the services of the Unit on a clinical level through one-on-one consultations, and on the community level through nutrition awareness and nutrition education.

The dietitian performs nutrition assessment and provides medical nutritional therapy by guiding the patients in changing their diet and lifestyle to improve their health outcomes. Patients of various ages, struggling with obesity and various nutrition-related conditions including diabetes, heart disease, and others are all following up with the nutritionist on regular basis.

All NCD patients are referred to our dietitian for 2 covered visits to improve their general health and decrease their burden of disease through health diet and lifestyle changes.

In addition to the clinical work, nutrition awareness has been raised among the community through group presentations, school health, and nutrition education material development, with the collaboration of universities including the American University of Beirut, University of Balamand, and Notre Dame University, where nutrition students and dietetics interns have shown their active participation, with the coordination and mentorship of our dietitian Houry Babahekian.

**Number of Patients' Visits to the Nutrition Unit Per Year and Per Nationality 2020-2022**



## PHC UNIT DIVISIONS: HEALTH SUPERVISION IN SCHOOLS

“Establishing healthy behaviors during childhood is easier and more effective than trying to change unhealthy behaviors during adulthood. Schools play a critical role in promoting the health and safety of young people and helping them establish lifelong healthy behavioral patterns.” (CDC: School Health, 2012)

Health surveillance in schools is a community-based approach designed to address the unique health needs of the students and their respective communities. Through the years, we have witnessed the critical role that our interventions in schools play in public health by promoting not only the health of the students and their families but also of their communities.

The mission of the School Health Services is to improve the overall health and well-being of students by offering comprehensive health services that include health screenings and diagnosis of acute and chronic illnesses.

To achieve even better results, KA-PHC Lebanon has recently adopted a coordinated school health model that is based on four main services: medical, psychological, and social services, as well as health education. These services are provided by qualified professionals, such as physicians, nurses, dentists, ophthalmologists,

psychologists, social workers, and special educators.

During the academic year of 2019-2020 the Health Supervision in Schools program saw 1,968 children in 14 Armenian school, the last few schools were visited in January and February 2020 right before the start of the Covid-19 pandemic.

Since children continued their studies online, the school health visits were affected by the multiple school lockdowns during the Covid-19 surge in 2020 and 2021. School health program resumed fully in Spring of 2021 and during the new academic year of 2022.

The following services were provided during our school health visits:

- Assessment of development delays, preventable and manageable diseases
- Dental and ophthalmological screening
- Referrals to our center and proper follow-ups
- Health education and workshops about different health topics

More than 6,000 children were examined in their schools from which more than 4,500 came for follow up visits in our center afterwards.

**The Number of Children Examined in the Years 2020 to 2022**

School Year	PHYSICAL ASSESSMENT		DENTAL		OPHTHALMOLOGICAL	
	Total Checked	Follow up	Total Checked	Follow up	Total Checked	Follow up
2020-2021	395	97	265	212	153	28
2021-2022	2,474	1,043	2,029	461	1,929	525
2022-2023	2,869	1,140	2,294	673	2,082	553
<b>TOTAL</b>	<b>5,738</b>	<b>2,280</b>	<b>4,588</b>	<b>1,346</b>	<b>4,164</b>	<b>1,106</b>



# PHC UNIT DIVISIONS: PHARMACY UNIT

Medications at the KA-PHC Primary Healthcare Center are provided by MoPH, and through the International Medical Corps. The medications donated by IMC serve in filling the gaps of MoPH acute medications, and they are given to patients free of charge.

IMC staff co-operate with PHC staff to ensure the compliance of our pharmacy department to the quality indicators and accreditation standards regarding safe storage and dispensing of the medications. Our pharmacy unit promotes the rational use of antibiotics and adherence to the Essential Medication List as per MoPH and WHO policies. Our pharmacy team updates each month the medication list available in consultation rooms in the PHC to make sure that physicians abide by the medications available in the pharmacy to reduce the cost on beneficiaries and prevent them from buying medications from outside pharmacies.

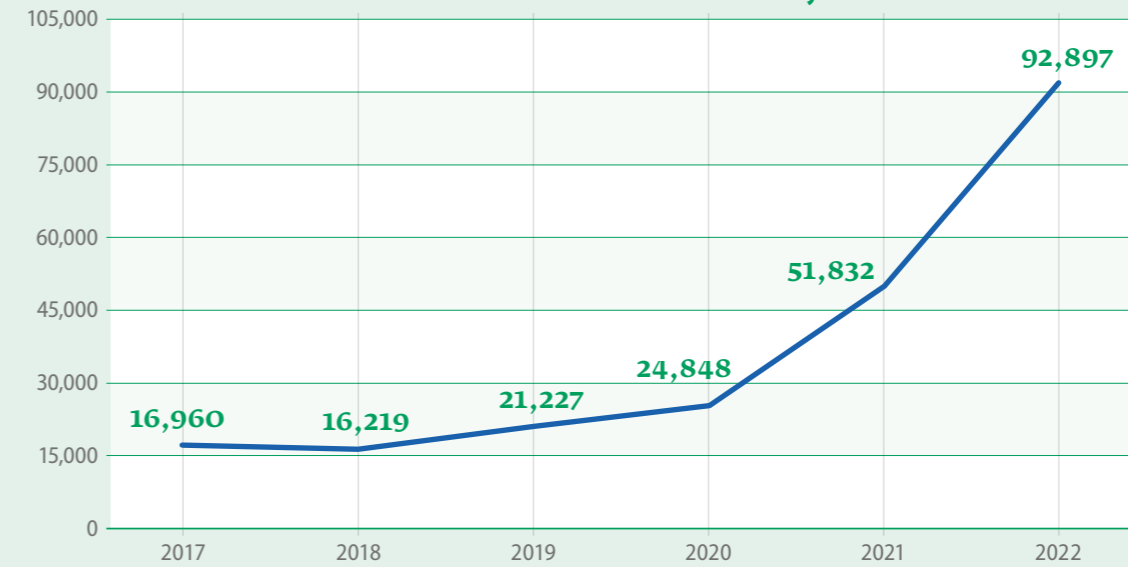
The pharmacy unit is totally linked to the MoPH Phoenix Health information platform where all our medications are inserted with their expiry date, the system helps us get an accurate storage plan and medication inventory. All the patients' medications prescriptions are also digitalized where the pharmacist have access online to the patients' prescriptions and dispense the medications accordingly.

The medication crisis that started in 2020 between the pharmaceutical companies and the government led to the unavailability of a lot of essential chronic drugs and also essential antibiotics for children and adults in the Lebanese pharmaceutical market. The

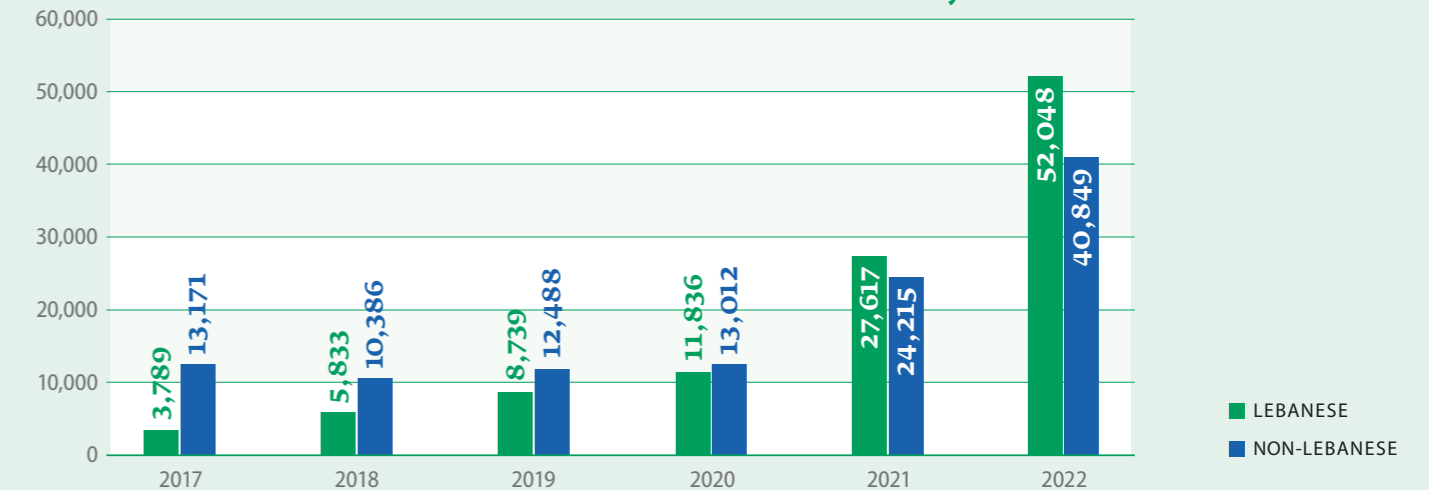
MoPH kept on directly supporting the KA-PHC by supplying our pharmacy with essential & chronic medications for our NCD patients (including anti-hypertensive, anti-diabetic and insulin medications) as well as mandatory vaccines through the WHO Lebanon and the YMCA, and essential antibiotics and analgesics are received from the IMC through the EU Madad trust fund. Around 500 chronic and acute patients have their prescription drug dispensed daily for free from our pharmacy unit.

After doing our facility studies we envisioned that the pharmacy unit started to become overloaded in 2020 after the start of the financial crisis. We decided to have an innovative idea of dividing the load of the existing pharmacy into one central pharmacy (with access from inside the center in its ground floor as a central position) for patients coming to take their medications after consulting our doctors, and one external www unit (with private access from the main road) where all chronic patients come to take their monthly prescriptions without the need for them to get in contact with the patients and wait for their turn. This was a creative turning point in our patients' flow especially after the start of the Covid-19 pandemic where we were able to decrease the exposure of the patients and provide the same care with better infection control.

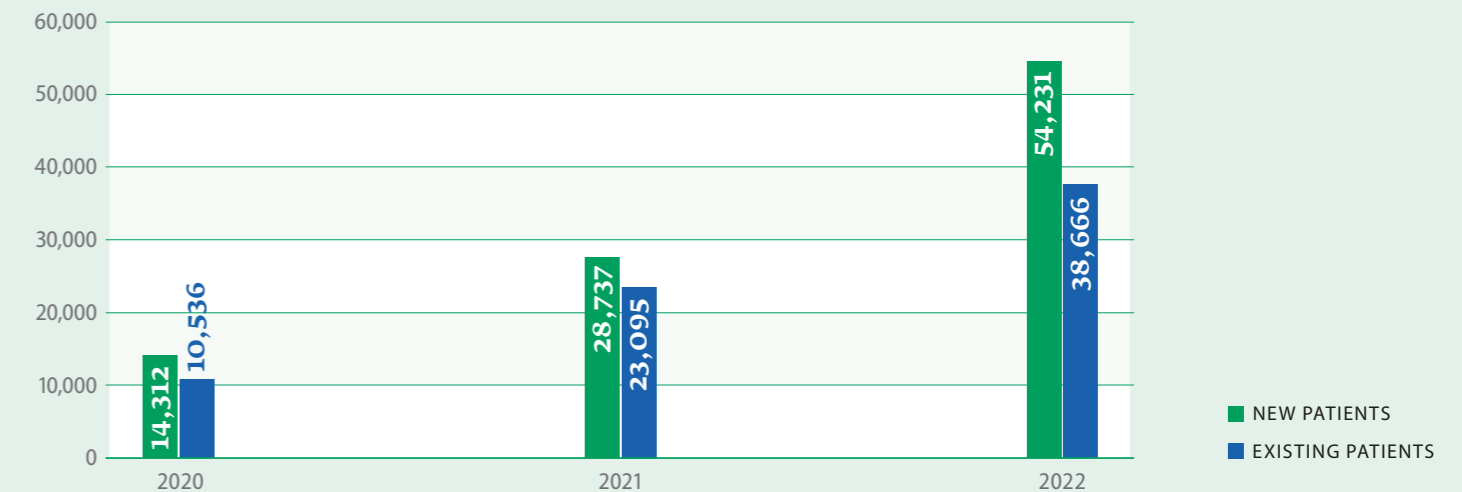
Pharmacy Services 2017-2022



Number of Patients' Visits to the Pharmacy Unit Per Year and Per Nationality 2017-2022



Number of New vs. Existing Patients' Visits in the Pharmacy Unit Per Year 2020-2022



# PHC UNIT DIVISIONS: PREVENTIVE & EDUCATIONAL CAMPAIGNS

Today, primary healthcare plays a central role in sustaining not only healthy individuals, but a healthy community as well. As it aims to improve the conditions of public health to make it attainable to all, it focuses on promoting a healthy population and minimizing the effects of diseases. Beside its medical goals, public health care also enables individuals to increase their productivity, which in turn provides economic and social benefits to society.

At the heart of the public health care ethos is preventive care that can improve health outcomes, as well as reduce medical costs. Educational campaigns are especially useful at raising awareness regarding health care practices, providing preventive care information and tips to large groups of people, and stressing the importance of early disease detection, among others.

At KA-PHC Lebanon, we focus our efforts on the two major principles of public health:

- Focusing on prevention rather than treatment of diseases
- Addressing the health needs of populations as a whole instead of individuals

With these guidelines, we are able to work in a complementary fashion to clinical medicine, as well as plan campaigns that emphasize health promotion, disease prevention, and health assessment. Currently, the KA-PHC Center has various Women Empowerment initiatives consisting of 400 members who regularly attend weekly awareness sessions and discuss issues concerning social, psychological, ethical, spiritual and physical health. The organizing team is adept at assessing needs, interpreting evidence and research that guide the development

of health programs, and working with a variety of partners to address population health issues.

The themes of the awareness sessions are chosen according to the national and international health schedules of the World Health Organization (WHO).

Centering our services on evidence based medicine and statistical data analysis allows us to provide our audience with high quality awareness sessions through which we observed behavioral changes, women empowerment, early detection of diseases, and community development.

Additionally, our holistic approach led to significant collaborations with higher educational institutions in Lebanon. Senior students, instructors and various healthcare professionals from the University of Balamand, American University of Beirut, Lebanese American University, Lebanese University, Saint Joseph University, Notre Dame University, La Sagesse University, and Haigazian University, and Beirut Arab University cooperated with us to organize and execute health day campaigns.

Beside our collaboration with universities, our experienced physicians and various guest speakers play an important role in the awareness sessions.

Based on the needs of the women 20 sessions were given in-person in 2021 and 2022. The rest of the sessions were videotaped and sent through our social media platforms and also a lot of live online sessions were conducted with different populations and topics.

Those covered different topic areas, from human rights issues to medical problems. Sessions about

## KARAGHEUSIAN ASSOCIATION - Community Empowerment Initiatives

### Awareness Lectures for the year 2021

	DATES	LECTURER	TYPE	MEDIA	LANGUAGE
<b>FEBRUARY 2021</b>					
1	15/2/2021	Dr Mher Melkisetian Gastroenterologist	Awareness Video	WhatsApp groups	Armenian
2	22/2/2021		Poster	Social Media: Facebook, Instagram	English/ Arabic
3	25/2/2021	Dr Christine El Kadi Gynecologist	Awareness Video	WhatsApp groups	Arabic
<b>MARCH 2021</b>					
4	18/3/2021	Ms Houry Babahekan Dietitian	Awareness Video	WhatsApp groups	Armenian
5	5/3/2021	Dr Mher Melkisetian Gastroenterologist	Awareness Video	WhatsApp groups	Arabic
6	4/3/2021	Sako Keshishian Psychologist	Awareness Video	WhatsApp groups	Armenian
7		LSN Awareness	Awareness Video	WhatsApp groups, Facebook, Instagram	Arabic
<b>APRIL 2021</b>					
8		Manoug Ibitian Licensed Clinical Psychologist/Therapist trained in EMDR			Armenian/ Arabic
9	7/4/2021			Brochure	English/ Arabic
10		Dr Serop Demirjian Pulmonologist	Awareness Video	Facebook & YouTube	Armenian/ Arabic

dental health and oral hygiene, osteoporosis prevention, non-communicable disease prevention (hypertension, diabetes, cardiovascular diseases, gastric disorders), cervical cancer prevention, were among the many in 2019. Additionally, special awareness sessions were organized regarding vaccination, first aid management, and different developmental disorders that any child may face. Also lectures concerning various topics, such as stress management, food handling, alcohol

abuse, post-traumatic stress disorder, effective communication, and critical thinking, were featured in the year's campaign.

Public health and clinical medicine are vital partners in a well-functioning health care system, which is imperative to both individual and population health. Our team has gained the trust of the community throughout the years, giving us renewed motivation to continue our mission.





## HOME CARE PROGRAM

### The Home Visit Project that started with PAROS

Thousands of elderly people in Lebanon lack access to affordable and reliable healthcare. Witnessing the increasing need to prevent illnesses and diseases, reaching out to the disabled and the vulnerable, extending a supportive helping hand to them through home visits, and providing home health care are current challenges that have to be addressed. For a healthier society, people with serious chronic illnesses, functional limitations, and other diseases of aging need to be considered with dignity, care and support.

Backed by ACTED and the European Union (as part of the Ta'acir project) and in collaboration with the Municipality of Bourj Hammoud, we at Karagheusian Association PHC, launched our new project in April 2019, **PAROS or Preventive Action in Reaching Out to Support**. PAROS in Armenian means lighthouse, it aims to bring light in dark corners. We firmly believe that if we provide high quality and accessible healthcare to the vulnerable people in our area, we would be able to give hope to families and children in our society and watch them thrive.

Home visits constitute an important part of our

outreach initiatives as a Primary Healthcare Center. They enabled vulnerable people to have affordable, attainable, reliable, accessible, safe, and high-quality primary healthcare services as well as empowering those people through various preventive and educative campaigns.

A total of 154 home visits were conducted to bed-ridden elderly patients in Bourj Hammoud area. Identification of the home-bound patients who need primary care services was done by the KA-PHC social workers. The purpose of the visit was communicated to the elderly and their families and they were recruited based on informed consent.

A team of a family physician, a social worker and a registered nurse conducted the home visits, along with a phlebotomist who went to draw blood at home and send them to the lab.

In addition to a physical exam, a thorough assessment was done to understand the condition of the home, the social situation and the medical condition of the patient. A questionnaire was administered to assess the health condition and the quality of life of the visited elderly.

Then, according to each patient's condition and diseases, diagnostic investigations were required:

laboratory blood withdrawal and Electrocardiography (done at home), imaging (X-rays, Ultrasounds, Echocardiography, CT-scans...) and referrals to other specialists: inside KA-PHC (cardiology, nephrology, psychiatry, gastro-enterology...) or outside KA-PHC (dermatology, neurology...)

Moreover, according to each patient's condition, and following the social worker and the doctors' recommendations, the patients benefited from the following services:

- Physical therapy sessions and rehabilitations (done at home)
- Provision of diapers, of walking aids (crutches, canes, walkers...), of water mattresses (given from the center to the family member)
- Monthly chronic medications provided from the center. If the medications were not available at the center, the patient's family members either get the medication for free or at a much reduced price at a nearby pharmacy.
- Acute medications (pain, urinary infection, vitamin deficiencies...) were provided.
- Wound care were done regularly at home (post op dressings, ulcer care, burn care...)

Follow-ups were done on a daily basis according to the doctor's recommendations for each case: follow up lab tests, prescription renewal... The social worker was always in contact with the patients and their families from one side, and the doctors and medical director from the other side.

Records were kept for the patients' current statuses (passed away, hospitalized, discharge from hospital)

and all was documented in their medical files.

### Results and Outcome of the initiative

The Paros Project that was a success in reaching out to 154 elderlies in their homes in 2019, was repeated in 2020 to include 217 vulnerable home-bound patients. After this success, IMC started covering the home visits in 2021 and through this collaboration we could provide home-based medical care to 1,136 patients in 2021 and 736 patients in 2022 until September 30. So far, a total of 2,243 vulnerable disabled or bed bound patients were provided with high standards of care from the comfort of their homes.

Our home care initiative attracted a public health master's degree student at the American university of Beirut (AUB) who designed a study with her advisor about the health status of 186 patients visited in 220, and with the guidance of our medical director, the effect of the August 2020 Beirut blast on the elderly population in Bourj Hammoud was added to the study. A pre-post Blast study was done and compared the findings of the 52 common patients that were visited before and after the blast. Results showed, for both genders, improved overall physical and general health (see Poster below).

However, little improvement was observed for mental health compared to its counterparts. Overall, results were not as expected given the current Lebanese situation. Focusing on Mental Health for elderly males and females is necessary for holistic care that meets health & social elderly needs. Despite noticeable improvements in quality of care, gaps still exist in physical health, especially among women, and mental health services among both. The world is adopting an age-friendly health-

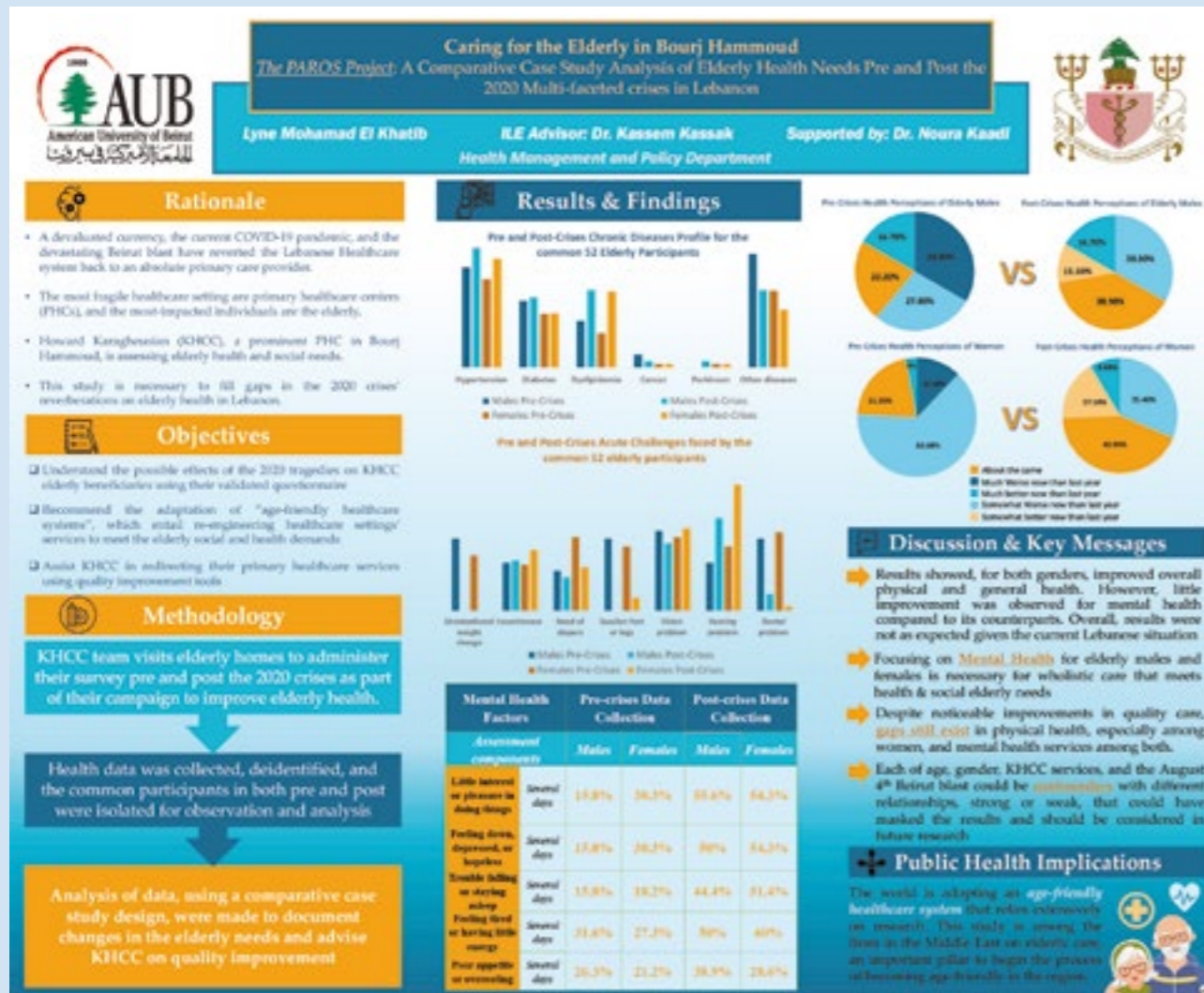


care system that relies extensively on research.

This study is among the firsts in the Middle East on elderly care, an important pillar to begin the process of becoming age-friendly in the region. The results show that there is a need for PHCs to conduct assessments within their communities to kick start a new era of better and healthier communities and neighborhoods including all the vulnerable elderly.

### Conclusion

By having a home care program that is now part of our daily operations, Karagheusian PHC record success stories that change the lives of these vulnerable population and make them benefit from necessary high quality healthcare services. This is the clear evidence for the high demand of accessible and affordable healthcare services to be provided to the people who need them the most.



## LAU PAROS NURSES TRAINING - SEPTEMBER 2020



Please scan the QR to watch a video detailing the PAROS project







# COMMUNITY DEVELOPMENT UNIT

The greatness of a community is most accurately measured by the compassionate actions of its members.

Social welfare is the responsibility of every leading organization operating in communities, and making real impact in the everyday lives of the members involved is a challenge not to be missed. Working in social institutions and reaching out to the vulnerable is an obligation to be taken seriously. Every single day creates an opportunity to bring changes in people's lives; a chance to put a smile on a hurtful face, and an initiative to sow a ray of hope in the hearts of the destitute and the hopeless.

Community development Initiatives at the Karagheusian Association Child Welfare Center are made possible, through women empowerment campaigns, educational and vocational activities for adults, tutorial programs, summer school for underprivileged children, and employment services.

The term "Development" often carries an assumption of growth and expansion, while it may simply imply change or modification in lifestyle or way of thinking.

Through self-strengthening campaigns we tend

to help our community members recognize and develop their abilities and potentials to respond to problems and needs they encounter. They are given the opportunity to learn and develop their skills. We reach out to all those who are excluded or disadvantaged and through teaching them some skills and self-help methods we bring considerable changes in their lives.

Women Empowerment initiatives reach out to people in our community to empower women and groups of people, providing them with skills needed to affect change in their own communities and help them become active and productive members. These skills are often created through the formation of large social groups and skills training sessions of small groups, working for a common agenda.

Over three hundred and fifty ladies, divided into three different large groups used to follow weekly sessions where multiple subjects about hygiene, infection control, vaccination awareness, nutrition, medical issues, social relationships, family planning and mother-child relationship were discussed. Moreover, the Armenian cultural heritage, traditions, and celebrations are always part of the group schema. However due to the

Covid-19 pandemic, those meetings were stopped in 2020 and replaced by videotaped awareness lectures sent through WhatsApp and our social media platforms. After resuming the face to face sessions, A total of 20 awareness lectures were given in-person in 2021 and 2022.

The subjects of the presentations and lectures are chosen upon the requests of the members, which drives them to be interactive during the sessions. Our success lies in the testimonies of the members about incidents they recall about how an acquired medical, social or interpersonal information helped them deal positively and professionally during quandaries.

Part of the empowerment is done through skills training sessions. Taking into consideration the needs in the market and the availability of part time jobs for moms with young children at home, a clear picture is deduced. Professions are needed with no capital and flexible hours. Thus, culinary skills development, hairdressing and facial care sessions are chosen to ensure jobs to women in our community. Through the employment services offered to hundreds of individuals, we witness lives changed, family relationships restored, and healthy atmosphere at homes maintained.

Over the past three years more than 200 women followed the vocational skills training sessions and one fourth of the participants have already turned into income generators in their families.

Some of the positive outcomes measured through assessment and evaluation of group work and skills training sessions:

- Women increase their awareness about legal issues, their roles in family life, and family relations.
- Women take more active roles in the community,

and are able to prevent abuse or violence.

- Women have a more positive image and self-worth and are ready to get engaged in activities that may change the course of their lives to the better.
- Women are more informed about their health-related issues, and social behavioral issues to impede medical complications within their families and psychological trauma among their children.
- Women become active members in society and generate income.

## The Cooking Classes and the Community Kitchen Unit

As part of community development initiatives, cooking classes constitute an important and successful part of our women empowerment initiatives.

For years, cooking classes have been part of our community development programs and under the supervision of talented chefs, we have been able to teach cooking and culinary art to vulnerable women in our community. By empowering and strengthening those women with culinary skills we have succeeded in bringing positive changes in their lives.

For the year 2021, we successfully completed four classes with 10 participants each. 40 ladies learned the basics of nutrition, personal hygiene, food safety and table manners besides sixteen cooking sessions.

It is our pride to witness the tremendous changes we were able to bring in those women's lives. A considerable number have turned their knowledge into small businesses generating small incomes. Others work for restaurants and local kitchens, or as housekeepers in houses.



The deterioration of Lebanon's political, social and economic sectors due to the October revolution in 2019 and followed by Covid-19 and the Beirut Blast, gave way to extreme poverty putting the majority of the citizens on the verge of hunger and starvation. Now, more than ever, women need to work and generate income to meet the needs of their families.

Witnessing the huge need in our community and in our efforts to answer the calls and needs of our community members, we initiated to enlarge our capacities, by refurbishing and rehabilitating a Community Kitchen Unit equipped by all the necessary utensils. This way, we will be able to recruit and better empower a larger number of women and strengthen their skills to become self-dependent individuals.

#### **The Virtual Online Mentoring Program**

The Virtual online mentoring program was initiated by the Karagheusian Association's community development department, after listening to the difficulties parents encountered at home with their children during the period of Covid-19 lockdown. Depression, anxiety, aggression were part of the behavioral problems parents and children came across.

The program was administered through trained mentors who contacted the caretakers and the children on weekly basis.

The objectives of the virtual mentoring program were the following:

- Protect children from abuse and danger. Teach those ways to cope with stress and keep themselves safe.
- Educate parents and children with skills and experiences needed to develop socially,

emotionally, physically and spiritually

- Strengthen families to increase care and support for their children
- Demonstrate God's love in action
- Empower parent - child relationship
- Prevent families from fear, stress and anxiety.

After the completion of eight sessions with 120 families, the feedback of both parents and children were very positive. Changes in relationships and behavior were considerably noticeable.

#### **The Summer Activities**

The summer activities at KA for the year 2021 were done in collaboration with the NGO Right to Play.

For thirteen consecutive years, Karagheusian Association had successfully implemented summer school program, reaching out to more than 350 Armenian children per year from underprivileged families who lack access and facilities to enjoy a productive summer vacation.

During summer 2020, because of the Covid-19 pandemic, all the activities were deterred and children were restricted to staying at home wasting their time and energy. Summer Schools and all institutions were closed likewise. During this time, we initiated a virtual mentoring program as a way to compensate for the restricted summer activities.

For the summer of 2021, we launched summer activities for 90 children divided into small groups and through educational and recreational activities our leaders helped them improve their academic and social skills in order to welcome the new academic year with confidence and developed abilities.

#### **The Film Making Program**

Film making and photography sessions as part of youth development program were executed in collaboration with Beirut Film Society. The program was initiated to help young girls express their thoughts and beliefs confidentially, master ways to use photography as tools for peace building and equality, develop skills for filmmaking to design and implement social change in their communities. The program aimed at teaching adolescent girls the art of cinematography and acting, as well as history and techniques and the important role of

women in this domain. The program fulfilled one of our missions of supporting, educating and strengthening women in our community. 150 teenage girls participated in this program (please check the following page for various photos on this event).

Encouraged by the outcome of Film making program and the positive impact it had on the teens, a new program was initiated for 150 children from ages 8 to 12 over a period of two months. The success of the children's program of filmmaking was also remarkable.







## CD UNIT DIVISIONS: SOCIAL ASSISTANCE

The Social Assistance Program at KA-PHC Lebanon relies on the expertise of professional social workers to ensure the harmonious development of children in their families and community. The team focuses on both individual cases and group work.

With the purpose of changing lives for the better, our social workers intervene by providing basic care and assistance to those who need it. This can be achieved sometimes by listening to them and providing emotional support, and other times through cooperation with other professional agencies.

To perform at their top potential, our social workers adopt a comprehensive approach in all their services, whether it is family counseling, school service, or handling individual cases or group work. Regardless of the situation, they take on the role of helper, counselor, leader, and teacher, providing care with infinite patience and a loving heart.

Beside case work and home visits, our social workers give particular attention to group work, which is part of our preventive and educational campaign programs. The Group Work Program mainly involves group therapy sessions with professionals, tackling different topics on family problems, adolescence issues, and health concerns, among many others.

Through our social workers' interventions, we have achieved the following objectives:

- Referrals of cases to hospitals with a specific follow-up system.
- Referrals of children with chronic and acute illnesses, especially epilepsy cases, to specialist physicians.

- Referrals of children who needed psychologists' or special educators' interventions to the appropriate specialists with thorough follow-ups.
- Referrals of at-risk students to the "Study Room" with further follow-ups to make sure they stay in school.
- Close monitoring of specific cases, especially adolescents at risk, during the summer to prevent them from taking their paths into wrong social directions.
- Thorough follow-ups on mothers who reported abuse incidents with the appropriate interferences.
- Helping pregnant women who need assistance in delivery and maternal care.
- Maintaining a sponsorship program for poor families struggling to keep their children in school.

Coordinating and staying loyal to our mission amidst all the internal and external pressures were the main challenges. Moreover cooperating with international organizations and receiving the constant support of the Lebanese MoPH raised our motivation to better serve and empower our staff members.

In the last 3 years of high socio-economic crisis and health epidemics, we were highly committed to be part of the networks offering mass vaccination campaigns and preventions and we continue working according to the international guidelines, adopting the accreditation standards to ensure high quality of care.

## Duties and Responsibilities of a Social Worker

*Being a social worker is often challenging, yet rewarding. Social workers are responsible for helping individuals, families, and groups of people to cope with problems they're facing, to improve their lives. One aspect of this is teaching skills and developing mechanisms for them to rely on, to improve their lives and experiences. Another is helping them emotionally to overcome their helpless and depressed states to be able to consider new chances and overcome limits. Another is providing support and relief—as provided by the existing sources around them—for the initial stages of change so they have hope of achievement and success in their endeavors.*

Direct counseling of patients, families, and groups is only one aspect of the broader set of responsibilities of a social worker. Social workers at KA-PHC Lebanon often serve as liaisons between different social and Medical institutions amongst the Armenian community to assist patients and collaborate with other health professionals to ensure patient wellness. They become familiar with, and refer clients to existing community resources. They also engage in research, policy development and advocacy for services. During the October revolution crisis and after the Beirut Blast of August 2020, our social workers actively and proactively got involved as to how, when and what to provide as relief work to the people in our catchment area. Being in direct contact with the community members and the most vulnerable populations, they were able to decide how to prioritize the needs of individuals and families of the target population.

In dealing with the multitude of problems they address, our team of social workers, were able to assess the social cases of the various vulnerable and needy families by using the following skills:

**ACTIVE LISTENING** – Giving full attention to what other people are saying, taking time to understand the points being made, asking questions where appropriate, and not interrupting at inappropriate times.

**SOCIAL PERCEPTIVENESS** – Being aware of others' reactions and understanding why they react as they do.

**SPEAKING** – talking to others to convey information effectively.

**CRITICAL THINKING** – using logic and reasoning to identify the strengths and weaknesses of alternative solutions, conclusions or approaches to problems.

**COORDINATION** – adjusting actions in relation to others' actions.

**SERVICE ORIENTATION** – actively looking for ways to help people.

**WRITING** – communicating effectively in writing as appropriate for the needs of the audience.

**COMPLEX PROBLEM SOLVING** – identifying complex problems and reviewing related information to develop and evaluate options and implement solutions.

**JUDGMENT & DECISION MAKING** – Considering the relative costs and benefits of potential actions to choose the most appropriate one.

### SPECIALIZATIONS

Within the field of social work, there are many different specializations and industries that professionals can pursue and focus on. While



all these different fields require practitioners to show the cornerstones of social work: empathy, flexibility, and persistence, and respect for different circumstances; there are some skill sets and knowledge that social workers will need to utilize in order to become as effective at their jobs as possible. Social workers can be required to aid with issues directly caused by trauma, disability, poor family circumstances, abuse, mental and emotional problems, addiction, and acute, chronic, or terminal illnesses. Some social workers prefer to focus their skills on one area of expertise by going into specific fields.

Our Social workers were directly involved in the following domains:

- › Family, child or school social work involves providing assistance and advocacy to improve social and psychological functioning of children and their families. These social workers attempt to maximize academic functioning of children as well as improving the family's overall well-being. These professionals may assist parents, help to arrange adoptions, and address abuse. In schools they address problems such as truancy, bad behavior, teenage pregnancy, drug use, and poor grades. They also advice teachers and act as liaisons between students, homes, schools, protective services, and other institutions.
- › Public health social workers are often responsible for helping people who have been diagnosed with chronic, life threatening or altering diseases and disorders, helping connect patients with plans and resources in order to help them cope. One of the most difficult things a person can go through is dealing with acute, chronic, and terminal illnesses and these social workers provide services to ease these patients' suffering. These services include advising family care givers, providing patient education and counseling, making referrals to other services, case management interventions, planning hospital admission and discharge, and organizing support groups. These social workers

are often employed at health care centers, assisted living homes or in hospitals.

- › Addictions and mental health social workers offer support and services to those struggling with unhealthy grounding techniques, connecting them with facilities that serve to teach healthier behaviors and get patients back on track. These patients often struggle with mental and emotional problems as well as addictions and substance abuse problems. Services that mental health and substance abuse social workers provide include individual and group counseling, intervening during crises, case management, client advocacy, prevention, and education. They also focus on counseling families to assist in understanding and dealing with the patient's problems.

	2020	2021	2022
Home visits	177	732	668
Case work: one-to-one counseling	5,200	6,708	7,086
Public education and awareness campaigns	462	565	680
Mental Healthcare services	1,981	3,463	6,452
Tutorial support	67	131	134
Summer school program	–	300	300
School book support	500	578	1,008
Employment office	213	265	207
Hospital medical assistance received	449	512	788

Besides all these we were the liaison with various Social Institutions, Agencies, Organizations, where we provided direct relief aid (food parcels), clothing (used clothes, new clothes and shoes), books and stationary support (used books and new books) etc.

## CD UNIT DIVISIONS: STUDY ROOM PROGRAM

helps them organize their lives in the summer, and to help them lead healthy lives in happy and harmonious environments, KA-PHC Lebanon launched the Summer School project in 2007 and has been running it on a yearly basis.

The project specifically targets children from Bourj Hammoud and other low-income areas, where family incomes hardly meet their basic needs.

Under the guidance of dedicated leaders, the Summer School project explores social issues, and engages students in group work, educational games and outings with the goal of fostering healthy self-confidence, academic growth, and creative expressions. As these programs help the children mature in a safe environment, they also help them acquire skills to succeed in school.

The Summer School project is a vital service in the community and one that reaches far beyond its immediate boundaries. The program aims at providing a safe, reliable, and a trustworthy place for children aged 3 to 14, a place that allows them to do their summer lessons, as well as learn new material. In addition to academic work, the students learn about their health, personal hygiene, and the environment. They also get to practice sports, arts and music, and different forms of expressing themselves (verbally and physically). All activities and learning sessions are conducted under the guidance and supervision of experienced professionals.

Beside the positive impact the project has on

the different educational and emotional aspects of a child's growth, the diversity of students enhances the entire socialization process. Exposure to a diverse group allows students to prosper in a secure atmosphere where they learn to respect their differences, accept each other, feel welcome, and develop their unique way of solving their daily problems. This was especially important in light of the considerable number of Syrian refugee kids in Lebanon. Fortunately, we witnessed many instances of positive reactions where Armenian children from Syria and Lebanon mingled in a stress-free atmosphere.

In 2019, the Summer School Project received 264 children between June 25 and August 9. Thirty-seven volunteer leaders were involved in the everyday activities of the summer school.

Due to lack of space to accommodate the 264 participants, we joined efforts with the Levon and Sophia Hagopian Armenian College, which received students grades 1 through 6, while we received the kindergarten children.

Special thanks to the volunteers (Village Baptist Church, Lancaster Bible College, New Heights, and others) who helped us to volunteer in this program.



# CD UNIT DIVISIONS: SPONSORSHIP PROGRAM WITH FRANCE PARRAINAGES

Due to tough economic conditions in the country, many families struggle to keep their children at school. To help lift the financial burden, we identified a small sample of 50 families who were in desperate need for help. Through a special sponsorship program with Association France Parrainages, we provided school assistance to these families. The 9,848 euros that we received from France Parrainages went directly to the 50 families. Established in 1947, France Parrainages works in France and internationally to provide assistance to children who live in difficult educational and social conditions.

The service required for the program was handled by our social worker, Ms Raquelle Ketchedjian, who followed up on the sponsored children with Ms Caroline Lequien, the official authority in charge of France Parrainages in Lebanon, India, Bangladesh, and Morocco.

We extend our special thanks to the administration and management of France Parrainages for helping these marginalized children stay at school.





## CD UNIT DIVISIONS: MENTAL HEALTH AND EDU- CATIONAL NEEDS SERVICES GROWTH AND IMPACT

**The Mental Health Department** was conceived as a reaction to the growing expression of need coming from the population we have served over the years. The Syrian Crisis and the influx of refugees in Lebanon as of 2011 made mental health even more projected. As mental healthcare providers, we needed to advocate for and educate women and men about mental health care. We also had to provide advocacy and education to the staff members and doctors, which helped us improve our referral system from the medical to social and mental departments.

Then came the Lebanese Revolutionary Movements, followed closely by the Covid-19 lockdowns and a completely disastrous state of joblessness, hunger, and poverty common to refugees and Lebanese people. The August 4 blast in 2020, patients unable to access health facilities, traumatized adults and children because of their invalids at home, and inaccessibility of medical care and support created a huge wave of disturbed, traumatized, grieving people.

All this took schools to a new level of online learning. Yet, as not all schools had staff who could easily adapt to online teaching, and as not many schools had the equipment needed to accommodate their students' needs (pads, laptops, or even phones), the inconsistent internet possibilities, electricity shortage, and so many other factors, made online class hours, for those who could provide them, a complete disaster, and for the recipients of this service, markedly the students, in most

cases an ineffective experience.

Last year, the academic year 2021–2022, the schools accepted their students back into classes. After spending 2 academic years studying intermittently from home and studying whatever was available online (2019–2020, 2020–2021), the schools opened their doors to their students. The students in the early stages of academic learning had already lost not only an academic learning experience and related information but also the experience of being in class, following rules and directions, communicating needs to adults and peers on school premises, being disciplined and so much more. Therefore, they struggled with their study materials and classroom regulations.

The schools had different issues catching up with curriculums, teachers struggling to ensure learning, completing expected plans, and controlling behaviorally and educationally challenging children, and all topped with insufficient pay (due to the sudden depreciation of the local currency).

Even when these children could attend study room programs and had after-school teachers support their learning needs individually or in groups, their deficiency was still not met and amended. These children needed speech therapists to help them correct their pronunciation, and memory skills, they needed behavioral therapists to help them learn and accept discipline, and learn self-control. They also needed occupational therapists (psychomotor therapists) who could help them harmonize their

eye-hand coordination and improve their fine motor skills, and they needed special educators who could take them back to basics and restart teaching subjects from the basics, so the child gained full knowledge of the subjects that were required to know at their levels of study.

This year, our schools reached out to us, asking for our support in their endeavors of providing full support to teachers and children at Armenian Schools and ensuring healthy progress through the academic year 2022–2023.

Our Mental Health and Special Educational Needs Department is thriving with newcomers (as is seen in the graph below) and it is difficult to refuse them when we know their whole future and success at school rely on this type of support. We are fighting against an immense wave of possible dropouts this year as well because repeated failures will have them out of school and searching for jobs very early in life.

This said, the special educators and the other specialists at the Mental Health and Special Educational Needs Department are coming for additional hours, and providing their specialized services in their different fields to these children. Parallel to this, we have lost as many as 10 specialists in different fields to immigration to countries with better economic opportunities for them.

Our never-ending struggles to ensure the improvement of the educational experience for all children and specifically those with challenging difficulties led us to cooperate with schools and send part-time specialists to schools to support the educational processes there.

There are many success stories related to this department, where children have not only received individualized educational services, assessments, and intervention plans, but also school visits and

recommendations to teachers of these specific children so that we can promote love and interest in them toward education and keep them in academic settings until graduation.

During the last three years, the subject of mental health care has become a central issue for the Ministry of Health in Lebanon. A study conducted by the Ministry and the American University of Beirut Medical Center, shows that more than 35% of people in Lebanon is in need of Mental Healthcare services. This being a huge revelation and one that needed immediate action, the ministry decided to make mental health care services as part of the services a Primary Healthcare Center provides. Since then, the ministry is systematically providing trainings to nurses, social workers, doctors and psychologists for detection, assessment, medical care and psychotherapy provision, to promote the best care possible for those in need.

Coordinating with the Lebanese National Mental Healthcare Unit, we at KA-PHC, participated in the trainings for the available manpower. Our small unit for Mental Healthcare services that was inaugurated in 2018 within our premises kept on growing since then to providing mental health care by cooperating closely with the PHC staff as envisaged by the Ministry.

The department functions with the diligent work of 25 specialists (11 psychologists, 3 psychomotor therapists, 6 special educators, and 5 speech therapists). We have 2 administrative secretaries and a project manager. Only in September 2022, we provided services to 456 clients in 1529 sessions. October 2022 will have a separate report section of our activities at schools where we are supporting the presence of specialists during school hours to help assess children's needs and support teachers in class. We believe our intervention will have a



constructive impact on methods and approaches to teaching in our present day schools..

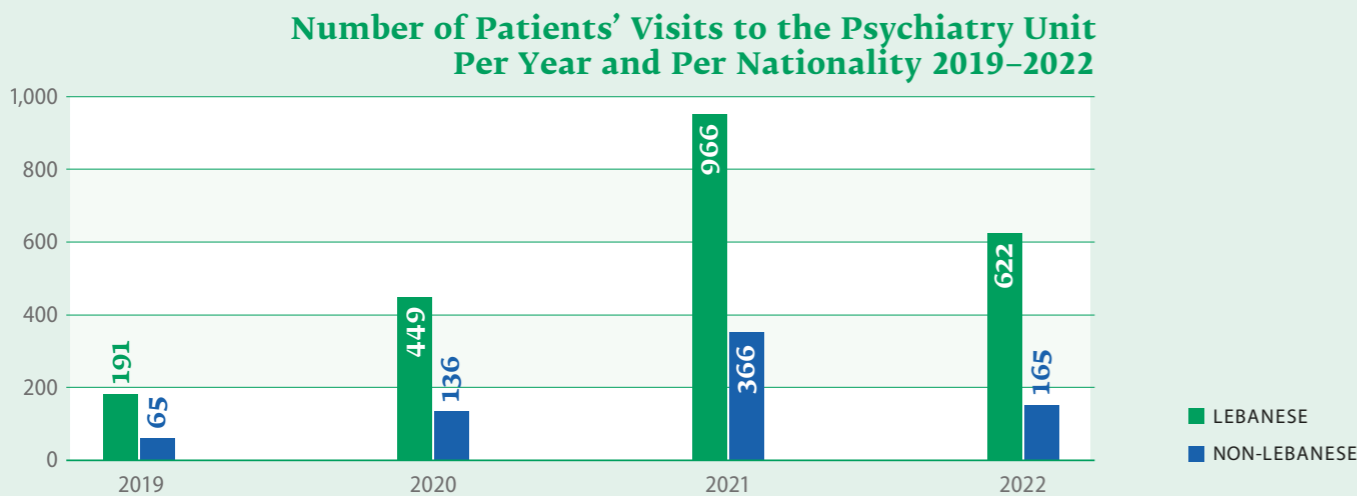
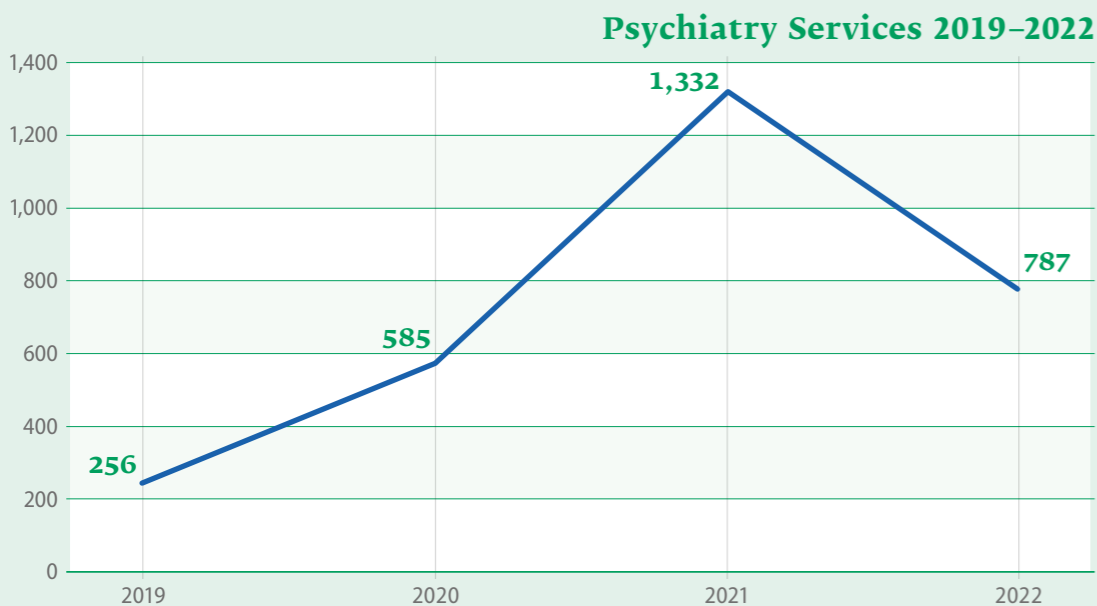
Besides this team, we had Master’s in Clinical Psychology students from Haigazian University and the University of Balamand, who actively participated in the provision of care at all levels.

Provision of mental health care services in primary healthcare facilities is now one of the most leading needs in our community. The present political state of Lebanon has given way to hundreds of employees finding themselves jobless, family

providers are now completely left without income. As for the refugee population, they had hardly been able to adapt to their new homes and environment, when they experienced a second blow to their chances of living a self-sufficient, humble life.

With the augmentation of anxiety, stress and depression, people started using more and more psychiatric medications most of the times without consulting any doctor because mental healthcare services are expensive and became completely unaffordable. The continuous presence of the

The graphs below reflects the trend of growth within the last 4 years.



psychiatrists at KA-PHC added efficiency and facilitated medical assessment, medication access and follow up of the cases who needed medico-psychiatric interventions.

We were able to provide psycho-educational and advocacy sessions to individuals and groups in schools and at KA-PHC. The topics discussed were:

- “Sexual Education and Relationships” at one of the Armenian schools targeting students of 10<sup>th</sup>, 11<sup>th</sup> and 12<sup>th</sup> graders
- “Physical hygiene and development” to 4<sup>th</sup> and 5<sup>th</sup> elementary classes
- “Sexual Education and Relationships” to 6, 7, 8, and 9<sup>th</sup> graders
- “Mental Healthcare and Dangers of Smoking” to technical school students
- “Staff Care” as each staff member has her own difficulties, which causes additional stress to their normal functioning in life. There are problems of depression, managing stress, managing anger and high anxiety.

The goals of providing mental health care is to assist people with mental illness in leading more productive and autonomous lifestyles, and to promote mental health through service, advocacy, and education.

We also aim at providing services for the prevention and treatment of mental and neurological disorders and their associated disabilities. We strive to improve general health services and apply mental health principles to improve quality of life.

The most common mental health problems assessed, detected and provided individual therapy for were as follows: *(Order from the most to the least common)*

**Mood disorder** (depression)/behavioral problems (anger)

**Generalized anxiety disorder** (Anxiety and panic attacks included)

**Personality problems** (Managing the self)

**Relational problems** (interpersonal)

**Trauma** (mostly related to Syrian crisis, and lately Lebanon’s political state)

Communication skills development and parental guidance were needed by most to function better in their circles of friends and family.

Trauma therapy and counseling is to allow clients to discuss what they have experienced and express their emotions and to assist clients as they adjust to difficult family or life situations, such as divorce or financial setbacks or traumatic experiences.

Patient flow is as follows:

Patients can have access or be put in contact with the mental health department in several ways:

**A. Patient comes to the medical departments for any physical ailment**

- Patient is assessed by a registered nurse (trained by the Lebanese Ministry of Public Health - Mental Healthcare Project) during the first visit. The use of PHQ2 /PHQ9 scale helps detect depression symptoms. A note is made in the medical file and after the consultation the doctor or the nurse refers him to the mental health department for further assessment and referral.

- If patients are already on any sort of psychiatric medication they are referred to the psychiatrist so as their medication list is updated, the needed tests are provided and the patient is provided support and follow up on medication intake and state of mental health. If needed, they are also referred to the mental health care provider for psycho-education and therapy purposes

**B. Patient comes to the Social Work department for various social needs**

- The social worker provides counseling and



education and if mental health care is needed, the person is referred to the psychologist for therapy.

- The psychosocial worker:
  - Prepares a social file,
  - Lays groundwork for psychological intervention or psychiatric needs by providing information on individuals mental health state and what to expect
  - Provides information on importance of consistency
  - Explains confidentiality and safety of personal information given during therapy
  - Introduces the case to the psychologist

**C. Self-referrals**

Self-referrals have become very common lately. All the advocacy sessions of the last two years and the trainings the staff in the medical department received from the Ministry of Health, and the group-works our team provided, have been able to promote better understanding of the ‘self’ of our target population and more acceptance of seeing a therapist and less fear of stigmatization. We have started an effective ripple in stagnant waters and it is growing very quickly.

The psychologist provides:

- a. Initial visit, with a thorough interview
- b. Assessment
- c. Treatment plan
  - i. Therapy sessions
  - ii. If need be, referral to psychiatric intervention/ assessment
  - iii. Systematic follow-up

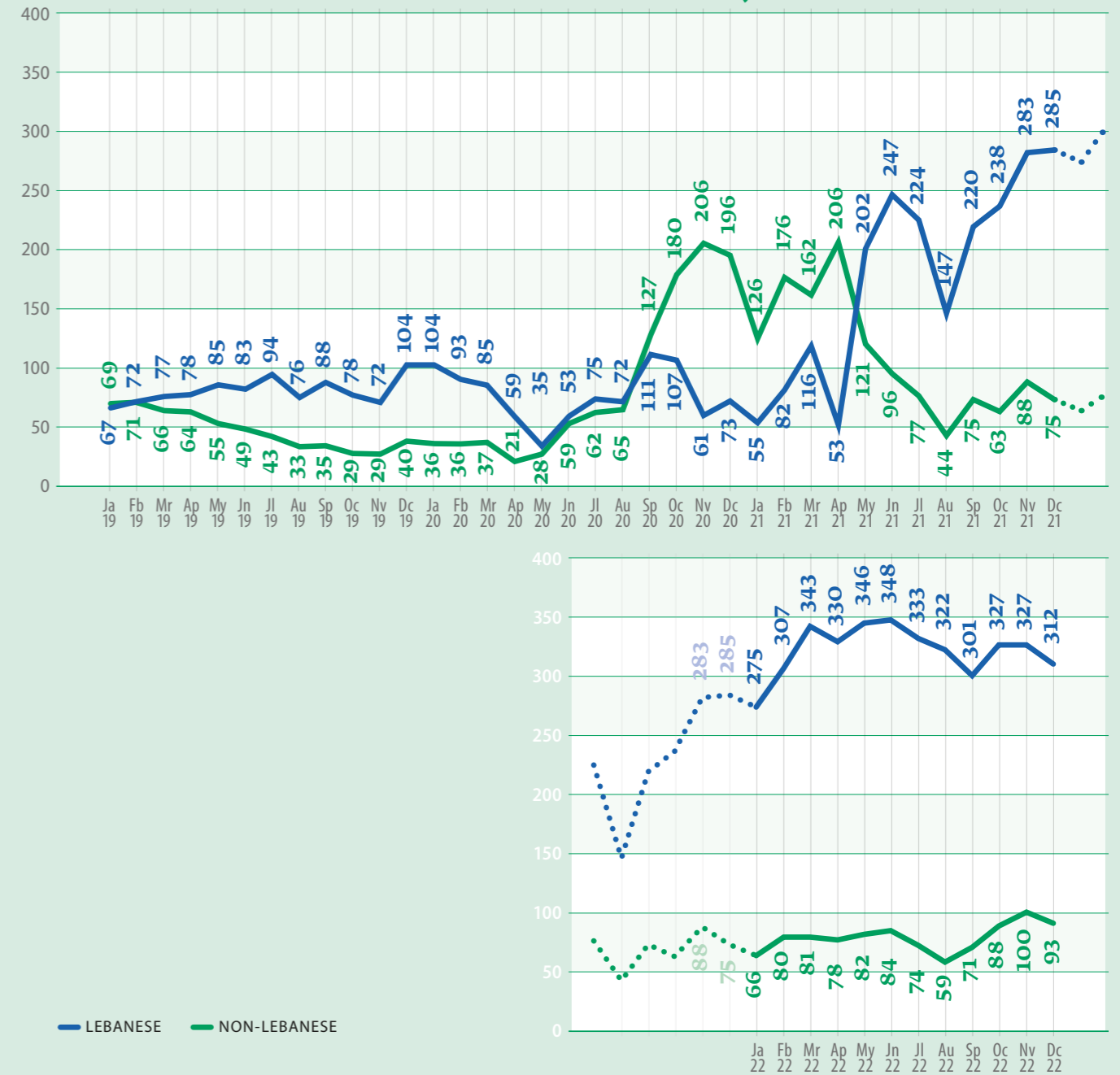
This process includes the client in every step of the way, because they have a say in their treatment plan.

If they do not want to see a doctor, certain measures have to be considered, etc.

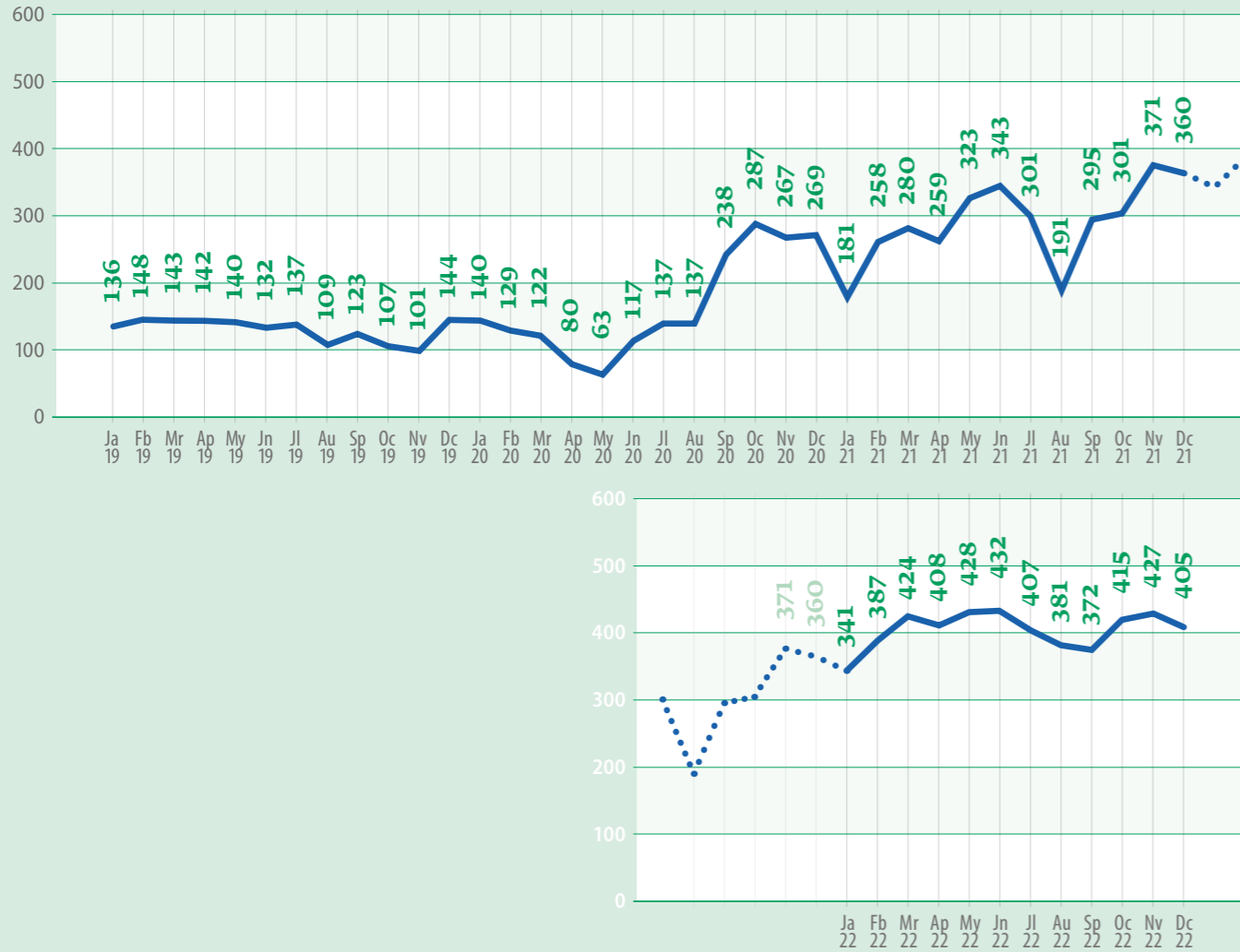
Our achievement in providing this type of service was not only based on its provision aspect, but also on our efforts in educating and psychoeducating our community members through lectures to women’s groups or individually and advocating for mental healthcare awareness, reduction of stigmatization, normalization of the necessity and that is why we now have many self referrals of cases to the specialists.

Mental healthcare made affordable to the destitute people is a huge achievement for us. We have seen people go from bad to worse in a very short space of time. This type of intervention, coupled by the social interventions we provide, will make the chances of development and resilience a possibility for our beneficiaries.

**Trend of Mental Health Beneficiaries’ Visits to the Center Per Month and Per Nationality 2019-2022**



**Total Number of Mental Health Beneficiaries' Visits 2019-2022**



# CHILDREN WITH SPECIAL EDUCATIONAL NEEDS UNIT

The children with special educational unit is in partnership with the Calouste Gulbenkian Foundation.



Our regular health visits in Armenian schools alerted us to the existence of children in need of special educational support. These cases either were referred to us by school principals and teachers, or we detected them through our routine health visits. After identifying these cases, we follow up on them with our team of specialists, which consists of psychologists, speech therapists, and special educators, among others. The unit continues to expand, relying on a well-organized intervention system that includes prevention and awareness, intervention and follow up.

The cases we have detected so far involve the following types of difficulties:

- Learning difficulties in acquiring basic skills in school, such as reading, writing, understanding, or processing basic information.
- Emotional and behavioral difficulties making friends or relating to adults or behaving improperly in school.



*With Dr Razmik Panossian - Director of the Armenian Communities Department at the Calouste Gulbenkian Foundation and Ms Kayane Madzounian - Lebanon representative of the Armenian Communities Department at the Calouste Gulbenkian Foundation.*

- Sensory or physical needs, such as hearing or visual impairment.
- Communication problems in expressing themselves or understanding what others say.
- Special medical or health conditions, which may slow down their progress and / or involve treatment that affects their education.

Currently the unit is composed of 22 different specialists who provide counseling sessions for approximately 253 children.



The social, psychological, and educational obstacles facing the children in Armenian schools create an urgent need for educational institutions to implement measures to help improve the present condition with the goal of securing the proper health and education of the new generations. The initiative taken by KA-PHC in organizing such a seminar is a great step forward. Most importantly, the Center's dedication to providing Armenian children with up-to-date programs of international standards plays a significant role in addressing their issues. Additionally, the adoption of the financial aspect of the program by the department of Armenian Affairs of the Calouste Gulbenkian Foundation for 6 consecutive years as of 2015 is a great encouragement to the Center's Staff to move forward with renewed commitment to the welfare of Armenian children.

The Special Needs Unit:

- Provided one-to-one counseling services and therapy for 253 Armenian children having special educational and psychological needs. Among these children, who are receiving one-to-one professional services, 75 were newly detected during 2019, and the remaining 134 are continuing their therapy sessions from the previous year.
- Provided on a monthly basis, preventive and educational campaign sessions for a program called "Positive Discipline" targeting 40 Armenian mothers who have children with special educational needs.
- Provided in-school training sessions targeting Armenian teachers and specialists working in that specific school about the importance of early detection of cases who need special care and educational support within their schools.

- Provided a collaborative and coordinative approach with 22 different Armenian professional specialists (Speech and language Therapists: 5, Psychomotor Therapists: 4, Psychotherapists: 8, Special Educators: 5)
- Continued receiving 7 professional specialists (among the 22) for community service of 20 hrs to 40 hours per week.

Furthermore, because of the Socio-political and economic difficulties in Lebanon, the Armenian schools are facing financial challenges and we are witnessing, in turn, the closing of Armenian schools due to big financial issues, and those that still stand up are finding ways to reduce the expenses to be able to keep it up. Here comes the necessity of our center to continue to Support the Armenian Schools, and specifically those who cannot afford to enroll specialists in their team or those who have one or two specialists but it's not covering all their needs.

We are very encouraged by the schools' gratitude and are grateful for the project and how much it is a necessity for the success of students who need special intervention and thus we are covering a big need that schools can't afford. This makes us feel stronger and more willing to continue and go far with more specialized and profound interventions to help our children overcome their difficulties and be successful in life.









# OTHER SERVICES

In addition to our extensive services in Beirut, we also have clinics in the Bekaa Valley in Lebanon.

## KA-PHC Ainjar Medical Clinic

The KA-PHC Medical Clinic in Ainjar was established with the building of Ainjar village in the 1940s. The Near East Relief Foundation, together with the HILFSBUND mission, was actively involved in supporting the Armenians to establish a healthy and vibrant community in the village. Throughout the years, KA-PHC took over The Near East Relief Center and started operating as a medical and social center in the village.

Our services in Ainjar have been essential to the Armenian community, a sentiment that the local authorities and the elderly have expressed on several occasions. The mayor of the municipality of Ainjar, Mr Vartkes Khoshian, has expressed his gratitude and appreciation of the services that KA-PHC offers the Armenians there.

Through our close ties with the local schools, we were alerted to the need of a full time social worker in Ainjar, as one of the school principals presented his request during a meeting. Due to budget limitations, however, we haven't been able to meet this need.

Today, KA-PHC serves in Ainjar through the following four sections:

### Ainjar Pediatric Clinic

The Ainjar Pediatric Clinic revived itself in 2011, when we started working with a new pediatrician. Dr Jihad Maadarani attends the Clinic every Monday and Friday to see patients, in addition to performing health supervision visits in three Armenian schools every Wednesday for a period of three months.

Beside our doctor's regular schedule, we also provided regular vaccinations to children in 2019. The Lebanese Ministry of Public Health office in Zahle supplied the vaccines as needed.

### Ainjar School Health Program

Our health supervision program entails visits to three schools and two boarding schools in Ainjar, seeing a total of 428 students. The KA-PHC School Health team visits these schools for general check-ups that include a pediatrician consulting students, while 2 nurses conduct vision tests for each student. During one of our visits in 2014, we detected 2 heart murmur cases, which have been followed up by specialists.

### Ainjar Dental Clinic

Dental treatments were organized in the KA-PHC Dental Clinic in Ainjar under the direct supervision of our dentists. Dr Khajag Aintablian, a resident of Ainjar, attends the Clinic three days per week on a regular basis.



### Ainjar Ophthalmology Clinic

Once a week, the KA-PHC ophthalmologist in Beirut visits our Center in Ainjar to offer his services to school children, their teachers, and a number of adults. Eyeglasses and further treatments are referred to our ophthalmologic service in Beirut.

### KA-PHC Mejdel Pediatric Clinic

In 2019, the KA-PHC Ainjar pediatrician, Dr Maadarani, visited the KA-PHC Mejdel Pediatric

Clinic every Monday and Friday, after seeing the patients in the Ainjar Clinic.

Beside the regularity of the doctor's attendance, the vaccination of children was also regular. In 2014, the Lebanese Ministry of Public Health office in Zahle supplied the vaccines according to the needs to the Mejdel Pediatric Clinic.

The number of medical consultations at the Mejdel Pediatric Clinic continued to soar in 2019, reaching 2,490 by the end of the year.



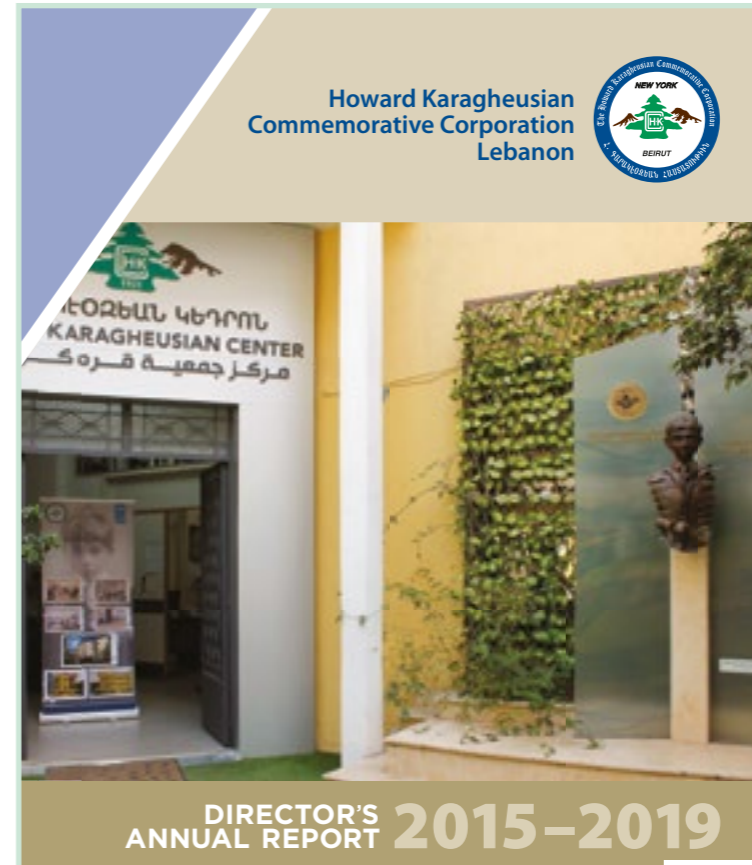




# KA-PHC IN MEDIA AND VISUALS



## IN PRINT:



The cover of the annual report released by KA, covering the years 2015–2019, and published in August 2020.



A KA newspaper ad for a 2020 vaccination campaign targeted at parents for children of 0–18 years of age.



**بمناسبة  
الاسبوع العالمي للتلقيح**  
نشجعكم على إعطاء اولادكم اللقاحات اللازمة، خاصة تلك التي لم يتم أخذها بموعدها المحدد  
يمكنكم زيارة مركز قره كوزيان للرعاية الصحية الأولية يومياً من الساعة 8:00 صباحاً حتى الساعة 4:00 بعد الظهر  
للمزيد من المعلومات، يرجى الاتصال على:  
01-24 16 33 • 01-26 30 30 • 01-25 87 16/7/8

**إن جمعية قره كوزيان للرعاية الصحية الأولية  
تفتح ابوابها يومياً من 8:00 صباحاً حتى 4:00 بعد الظهر**  
من الخدمات المتوفرة لدينا:  
(1) طب الأطفال وخدمة اللقاحات  
(2) طب العائلة  
(3) طب نسائي  
(4) أطباء اختصاصيين (عدد وسكري، قلب وشرايين)  
(5) وغيرها من الاختصاصات  
للمزيد من المعلومات، يرجى الاتصال على:  
01-24 16 33 • 01-26 30 30 • 01-25 87 16/7/8  
الإدارة

**مركز قره كوزيان  
للرعاية الصحية الأولية**  
من الخدمات المتوفرة لدينا:  
(1) طب الأطفال وخدمة اللقاحات  
(2) طب العائلة  
(3) طب نسائي  
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للمزيد من المعلومات، يرجى الاتصال على:  
01-25 87 16/7/8  
01-24 16 33  
01-26 30 30  
الإدارة

**مركز قره كوزيان  
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(1) طب الأطفال وخدمة اللقاحات  
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(5) وغيرها من الاختصاصات  
للمزيد من المعلومات، يرجى الاتصال على:  
01-25 87 16/7/8  
01-24 16 33  
01-26 30 30  
الإدارة

**HOWARD KARAGHEUSIAN  
COMMEMORATIVE CORPORATION**  
IS OFFERING THESE SERVICES FOR FREE

- ALL DOCTORS' CONSULTATIONS FOR ALL DEPARTMENTS
- PHARMACY & MEDICATION
- LABORATORY SERVICES
- PHYSIOTHERAPY
- ALL OPHTHALMOLOGY PROCEDURES
- WOUND CARE

The following Primary Healthcare services are offered FOR FREE

Pediatrics/Vaccination	Orthopedics	Otorhinolaryngology
Gynecology	Sports Medicine	Gastroenterology
Family Medicine	Pulmonology	Physiotherapy
Cardiology	Nephrology	
Endocrinology	Nutrition	

As well as services in Social Work and Psychology

Beirut Hamraoui, Marash Street, Beirut - Lebanon  
01-25 87 16/7/8 - 01-24 16 33 - 01-26 30 30 #HEALTHFORALL

Various KA flyers printed throughout 2020, advertising for vaccination week, new and longer opening hours after a brief period of Covid-19 precautions, and free medical services offered at the KA center.

WE WERE ABLE TO PROVIDE SERVICES FOR MORE THAN  
**10,000**  
PATIENT VISITS IN AUGUST 2020

THIS INCLUDED THE PROVISION OF PRIMARY HEALTHCARE SERVICES INCLUDING MEDICATIONS & WOUND CARE, PHYSIOTHERAPY, DIAGNOSTIC TESTS, PSYCHOSOCIAL SUPPORT, FOOD DISTRIBUTION, MENTAL HEALTHCARE, CARE FOR CHILDREN WITH SPECIAL NEEDS, AS WELL AS HOME CARE FOR THE ELDERLY.

SDG Goal # 17 PARTNERSHIPS FOR THE GOALS

REPUBLIC OF LEBANON MINISTRY OF PUBLIC HEALTH  
European Union European Regional Development Fund Investing in your future  
UNICEF UNHCR  
CALOUSTE GULBENKIAN FOUNDATION  
Manos Unidas  
OCHA arcenciel.aec  
UN HABITAT  
DEFENCE for CHILDREN  
FRANCE parrainages World Vision  
AUB gzb zending verbindt SK & A ST. MARY  
MISEREOR WINE HILFSWERK  
Municipality of Beirut Hamraoui  
LAU NDU Jebid

WE WERE ABLE TO PROVIDE SERVICES FOR MORE THAN  
**10,000**  
PATIENTS' VISITS IN AUGUST 2020  
#HKCCLebanon #HealthForAll

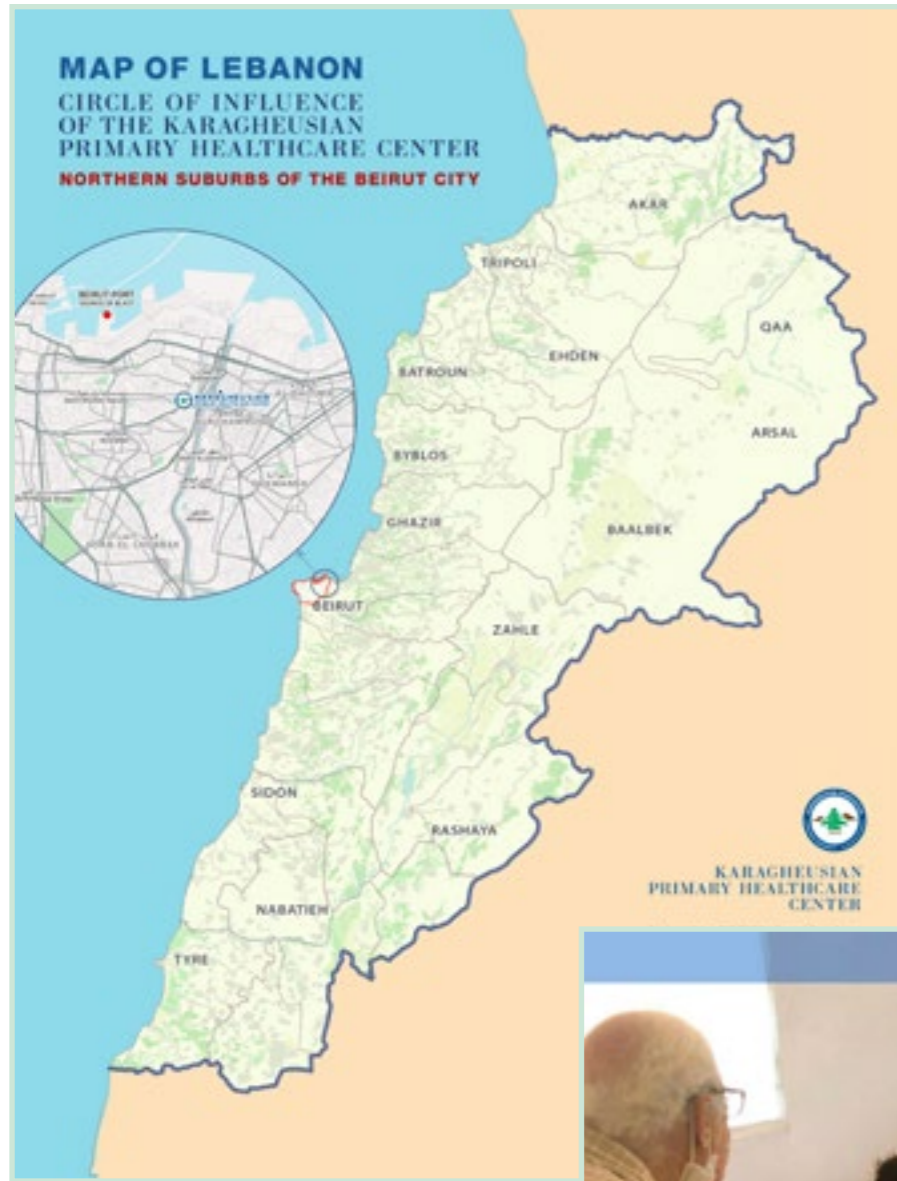
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European Union European Regional Development Fund Investing in your future  
World Health Organization  
UNICEF UNHCR  
CALOUSTE GULBENKIAN FOUNDATION  
Manos Unidas  
OCHA arcenciel.aec EMERACE  
UN HABITAT  
DEFENCE for CHILDREN FRANCE parrainages World Vision FDF HOTEL DIEU DE FRANCE  
AUB gzb zending verbindt ST. MARC  
MISEREOR WINE HILFSWERK PORTHICAL MISSION Lebanon  
LAU NDU Jebid  
SK & A Municipality of Beirut Hamraoui Caritas Lebanon

A poster and a matching banner displaying the number of visits to KA-PHC in the aftermath of the Beirut blast - August 4, 2020.





A 2021 poster showing the reach of KA-PHC in Beirut.

**ՀԱՌԻՐԻՏ ԳԱՐԱԿԷՕՋԵԱՆ**  
 Հասարակարգային իր բժշկական և բնակչության ծառայությունները կողքին ի գործ դրած է նաև «ՓԱՐՈՍ 2» ծրագիրը: Այս ծրագրին հիմնական նպատակն է աջակցել այն հայտնիներուն բնակարանները, որոնք ֆիզիքապես անկարող են փունեն դուրս գալու և անոնց ապահովել բժշկական անմիջական խնամք:

Բոլոր անոնք, որոնք կարիքը ունին այս ծառայության կամ յարելիալ մանրամասնության կրնան կապ հաստատել Տիկ. Շողակաթ Սիխանեան-Մուրատեանին հետ՝  
 ☎ 01/258 717 📠 78/968 169  
 ամէն օր առաւօտեան ժամը 8:00-4:00: **ՏԵՐԵՆՈՒԹԻՆ**

Հետևե՛ք մեզ՝ Karagheusian Association KaragheusianAssociation

A KA newspaper ad directing those in need to the PAROS 2 project - May 2021.

**10,000**

1921-2021 100 YEARS

**NUMBER OF PATIENTS' VISITS AFTER BEIRUT BLAST**

Month	Number of Visits
Dec-19	6,679
Jan-20	5,859
Feb-20	2,991
Mar-20	1,221
Apr-20	4,791
May-20	7,794
Jun-20	6,169
Jul-20	10,201
Aug-20	13,153
Sep-20	13,040
Oct-20	13,169
Nov-20	11,855
Dec-20	6,098
Jan-21	9,411
Feb-21	11,499
Mar-21	11,234
Apr-21	14,425
May-21	11,946
Jun-21	14,480
Jul-21	14,480
Aug-21	14,480
Sep-21	14,480
Oct-21	14,480

Պարոն Համուտ, Մարաշ Փողոց, Պէյրուս - Լիբանան  
 ☎ 01-26 30 30 • 01-26 88 03 • 01-24 18 33 • 01-25 87 16/7/8  
 Karagheusian Association KaragheusianAssociation #KA-PHCLebanon #HealthForAll

A 2021 newspaper ad detailing the number of visits to KA-PHC after the Beirut blast.

**ԳԱՐԱԿԷՕՋԵԱՆ ՀԱՍՏԱՏՈՒԹԻՒՆ**

**ԲԺՇԿԱԿԱՆ ՄԵՐ ԲԱԺԱՆՍՈՒՆՔԸՆ ԵՐՄ ԿԸ ՄԱՏՈՒՑԵՆՔ ԲԺՇԿԱԿԱՆ ՄԱՍՆԱԳԻՏԱԿԱՆ ԾԱՌԱՅՈՒԹԻՒՆՆԵՐ, ՏԱՐԱԼՈՒԾԱՐԱՆԱԿԱՆ ՔՆՆՈՒԹԻՒՆՆԵՐ ԵՒ ԴԵՂԵՐ**

Կը մատուցենք հետևեալ ծառայութիւնները

- Մանկարուծարան / Պատուաստներ
- Ընտանեկան բժշկութիւն
- Կանանց մասնագէտ
- Ոսկորի մասնագէտ
- Գեղձերու եւ շաքարի մասնագէտ
- Ստամոքսի եւ աղիքներու մասնագէտ
- Քիթ, ականջ, կոկորդի մասնագէտ
- Սրտաբան
- Թոքերու մասնագէտ
- Երիկամներու մասնագէտ
- Sports Medicine
- Ֆիզիօթերապիստ
- Սննդագէտ

հնչախ նաե՛ր Ընկերային եւ Հոգեբանական մասնագիտական ծառայութիւններ **#HEALTHFORALL #KA-PHCLEBANON**

Պարոն Համուտ, Մարաշ Փողոց, Պէյրուս - Լիբանան  
 ☎ 01-26 30 30 • 01-26 88 03 • 01-26 05 37 • 01-24 18 33 • 01-25 87 16/7/8  
 Karagheusian Association KaragheusianAssociation

A flyer showing the services offered at KA-PHC in 2021.





A new year's ad displayed in a newspaper in January 2022.

### 3 SCOPES<sup>®</sup> OF LEADERSHIP

Executive MBA Minor in Healthcare Management

1. TELESCOPE / ՀԵՈՒՐԻՏԱԿ  
to explore the stars, to master the vision

2. MICROSCOPE / ՄԱՆՐՈՒՐԻՏԱԿ  
to explore the details of the work and to provide support. Process management

3. PERISCOPE / ԾՐԱՐՈՒՐԻՏԱԿ  
to explore and be mindful of what is happening around me

**SEROP OHANIAN**  
KA LEBANON FIELD DIRECTOR  
serop.ohanian@hkcc.org.lb | ohanianserop@gmail.com

A flyer explaining the principles of the '3 Scopes of Leadership' management concept applied at KA.

REPUBLIC OF LEBANON  
MINISTRY OF PUBLIC HEALTH

KARAGHEUSIAN ASSOCIATION

European Union  
Lebanon Regional  
Development Fund  
Healthcare Sector

World Health Organization

#KaragheusianAssociation

SDG Goal # 17 PARTNERSHIPS FOR THE GOALS

#HealthcareForAll

NUMBER OF PATIENTS' VISITS

Year	Number of Patients' Visits
2013	20,164
2014	30,932
2015	30,023
2016	32,006
2017	33,584
2018	42,137
2019	49,314
2020	71,156
2021	125,564
2022	200,396

الرعاية الصحية الأولية حق للجميع  
لا فرق بين جنسية أو لون أو انتماء أو دين

الرعاية الصحية الأولية  
للجميع

KARAGHEUSIAN ASSOCIATION  
PRIMARY HEALTHCARE CENTER

PO Box: 80340, Beirut, Mount Lebanon - Lebanon

Tel: +961 1 56 80 00  
+961 1 26 00 00  
+961 1 26 00 07  
+961 1 74 74 74  
+961 1 74 47 40 78

karagheusianassociation.org  
Karagheusian Association  
Lebanon  
karagheusianassociation.lb  
Karagheusian Association

A 2022 newspaper ad and a matching banner, originally printed in 2022 and updated in 2023, detailing the number of patients' visits to KA-PHC from 2013 to 2022.



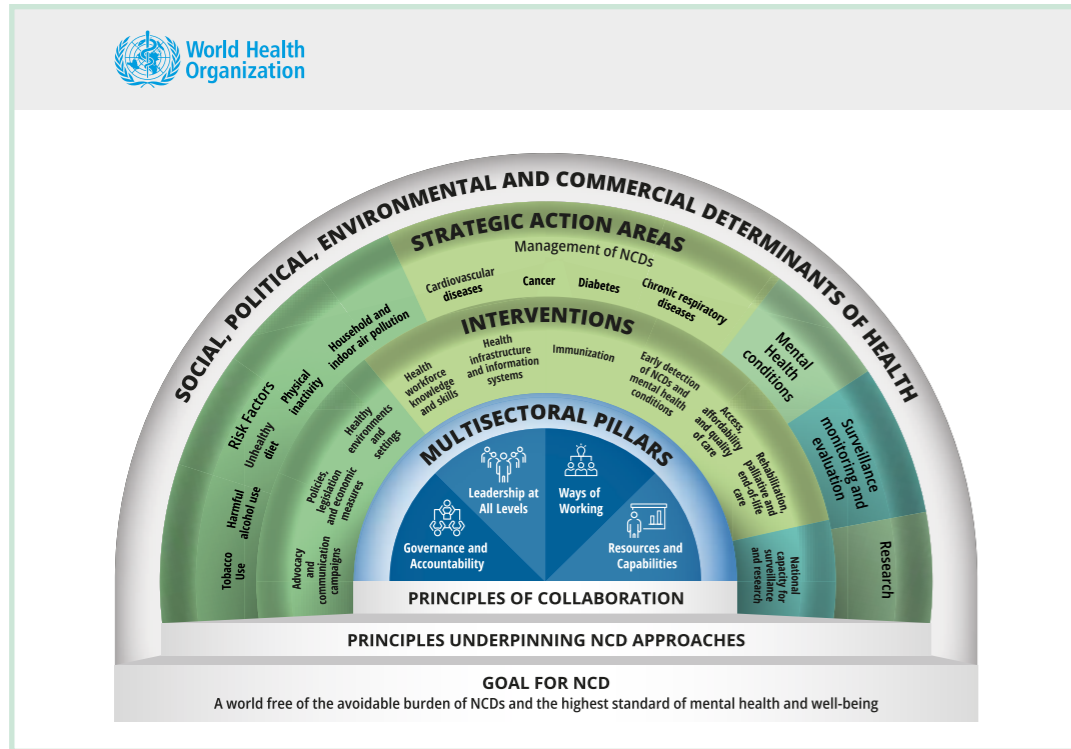
The banner on the left showcases a KA community project in collaboration with CNEWA-Pontifical Mission, and that on the right welcomes guests to the inauguration of the Project for the Provision of Medical Equipment to KA-PHC from the people of Japan - 2022.

Year	Number of Visits
2013	20,764
2014	30,832
2015	30,023
2016	32,006
2017	33,964
2018	42,337
2019	48,314
2020	73,104
2021	130,849

STANDARD	SCORE
i. Governance & Strategic Planning	Very Good
ii. Financial Management	Excellent
iii. Risk Management & Compliance	Excellent
iv. Legal Management	Excellent
v. Community Centricity	Excellent
vi. Staff & Volunteers Management	Very Good
vii. Program and Project Management	Very Good
viii. Resources & Assets Management	Excellent
ix. Proposal Management & Writing	Good
x. Communication & Reporting	Excellent

The banner on the right displays the platinum award received by KA from AUB - NGOi, and that on the right displays the certificate of the same award, highlighting the scores given to KA - 2022.





A series of flyers on WHO's SDG principles detailing NCD Goals (top) and full SDG goals in English and Armenian.



An insert in the KA Christmas card (2022) celebrating Mr Serop Ohanian's 20 years of service.





## KARAGHEUSIAN ASSOCIATION PRIMARY HEALTHCARE CENTER

### HEALTH PROMOTION TOPICS, AWARENESS LECTURES & EDUCATIONAL CAMPAIGNS CALENDAR • 2023

<b>January 2023</b> • Alzheimer's Awareness Month	<b>February 2023</b> • Cervical Cancer Awareness Month • Heart Month • World Cancer Day   4 Feb • Eating Disorder Awareness Week   1-7 Feb • Sexual and Reproductive Health Week   13-18 Feb	<b>March 2023</b> • Colon Cancer Awareness Month • Nutrition Month • Kidney Awareness Month • Epilepsy Awareness Month • World Hearing Day   3 Mar • Dental Assistants Recognition Week   5-11 Mar • International Women's Day   8 Mar • World Glaucoma Week   12-18 Mar • Head Injury Awareness Day   20 Mar • World Obesity Day   4 Mar • World Down Syndrome Day   21 Mar • Doctors' Day   30 Mar	<b>April 2023</b> • Parkinson Awareness Month • IBS Awareness Month • National Oral Health Month • World Autism Awareness Day   2 Apr • World Health Day   7 Apr • World Breastfeeding Day   11 Apr • National Immunization Awareness Week   23-30 Apr • Dental Hygienists Week   14-10 Apr
<b>May 2023</b> • Asthma & Allergy Awareness Month • World Hypertension Month • Mental Health Month • Skin Cancer Prevention Month • Vision Health Month • Speech & Hearing Awareness Month • World Asthma Day   3 May • World Hand Hygiene Day   5 May • World Midwifery Day   5 May • International Nurses Day   12 May • World Family Doctor Day   19 May • World Hypertension Day   17 May • Children's Mental Health Awareness Week   9-15 May • World No Tobacco Day   31 May	<b>June 2023</b> • Cataract Awareness Month • Migraine Awareness Month • Stroke Awareness Month • Brain Injury Awareness Month • World Environment Day   5 Jun • World Food Safety Day   17 Jun • World Osteoporosis Day   24 Jun • PTSD Awareness Day   27 Jun	<b>July 2023</b> • UV Safety Month • International Self-Care Day   24 Jul • World Hepatitis Day   28 Jul	<b>August 2023</b> • National Women's Health Month • World Breastfeeding Week   1-7 Aug • National Immunization Awareness Week   16-12 Aug • Organ Donor Week   18-14 Aug • International Youth Day   12 Aug • World Humanitarian Day   19 Aug
<b>September 2023</b> • Healthy Aging Month & Fall Safety • World Alzheimer's Month • Ovarian Cancer Awareness Month • Prostate Cancer Awareness Month • Arthritis Awareness Month • World Suicide Prevention Day   10 Sep • Fibromyalgia Awareness Week   4-11 Sep • Pharmacy Week   4-11 Sep • World Patient Safety Day   17 Sep • World Heart Day   124-29 Sep	<b>October 2023</b> • Breast Cancer Awareness Month • ADHD Awareness Month • Children's Vision Month • Hypertension Month • Learning Disability Awareness Month • World Mental Health Day   10 Oct • World Arthritis Day   12 Oct • World Spine Day   16 Oct • World Menopause Day   18 Oct • World Psoriasis Day   29 Oct	<b>November 2023</b> • National Domestic Violence Awareness Month • COPD & Lung Cancer Awareness Month • Osteoporosis Month • Prostate Cancer Awareness Month • Pancreatic Cancer Awareness Month • Fall Prevention month • World Diabetes Day   14 Nov • World Antimicrobial Awareness Week   18-24 Nov • Child Day   20 Nov	<b>December 2023</b> • World AIDS Day   1 Dec • International Day of Persons with Disabilities   3 Dec • Human Rights Day   10 Dec • Anti-Bullying Day   17 Dec • National Handwashing Awareness Week   14-10 Dec

References: CDC.gov, WHO.int, canadahealth.ca

Events are in blue, Recurrent Topics in Pink.

**KARAGHEUSIAN ASSOCIATION  
PRIMARY HEALTHCARE CENTER**  
P.O.Box: 80340, Bourj Hammoud, Beirut - Lebanon

Telephone:  
+961 1 28 05 37  
+961 1 28 30 30  
+961 1 28 88 03  
+961 1 25 87 16/7/8  
+961 1 24 16 33

SCAN FOR LOCATION



SCAN TO MAKE MEDICAL APPOINTMENTS




[karagheusianassociation.org](https://www.karagheusianassociation.org)  
[Karagheusian Association-Lebanon](https://www.facebook.com/KaragheusianAssociation-Lebanon)  
[Karagheusianassociation](https://www.instagram.com/Karagheusianassociation)  
[Karagheusian Association](https://www.linkedin.com/company/Karagheusian-Association)

A calendar for health awareness and educational campaigns for the year 2023.

# ON SOCIAL MEDIA:



**«Զորոնա» ժահիրի**  
ստեղծած արտակարգ դրության պայմաններուն տակ,  
որպէսզի բաւարարեն ձեր խնայելիք մեր ժողովուրդի բժշկական կարիքներուն եւ խնայելիք երկրաշարքի 23 մարտին սկսեալ | կ.ա. 8:30-12:30

Կիտի գործնն հաստատութեան հետեւեալ բաժանմունքները-  
✓ Անկարգման  
✓ Ընտանեկան բժշկութիւն  
✓ Դերմատոլոգիա

Պարզաբնէ ինքնիշխան կ'ըլլան յիշուողները:  
**ՄԱՅՑ ՏՈՒՆԷ**  
Միայն աներամբ յոբանս պարտազգին ստեղծ հաստատութիւն:

Յարկեալ մանրամասնութեան համար ինքնամայնէ՛ |  
01-24 16 33 • 01-26 30 30 • 01-25 87 16/7/8

**ՏԵՐԵՆՈՒԹԻՒՆ**



**سبب فيروس الكورونا**  
المستجد. إن جمعية قره كوزيان للرعاية الصحية الأولية حريصة على صحة مرضاها وموظفيها لذلك من أجل تأمين أفضل رعاية طبية. سوف نعاود العمل الإثنين 23 آذار | من الساعة 8:30 من الساعة 12:30

إحدى لغاتنا وإحدى لغاتنا  
إحدى لغاتنا  
إحدى لغاتنا

إحدى لغاتنا  
إحدى لغاتنا  
إحدى لغاتنا

المزيد من المعلومات. يرجى الاتصال على:  
01-24 16 33 • 01-26 30 30 • 01-25 87 16/7/8

الإدارة

A set of Armenian and Arabic social media (SM) ads showing KA opening hours and protective measures during the Covid-19 pandemic - 2020.



**«Պարուսարի համաշխարհային օր»**-ուան առիթով, կը քաջալերենք որպէսզի մեր զաւակներուն տաք համապատասխան պարուսարումները մանաւանդ այն պարուսարները որոնք ճիշդ ժամանակին չ'արտօսան:

Կրնաք Հարազատ Գարակէօզեան Հաստատութիւնն այցելել աճէն օր կ.ա. ժամը 8:00-էն կ.ե. ժամը 4:00  
Յարկեալ մանրամասնութեան համար ինքնամայնէ՛ |  
01-24 16 33 • 01-26 30 30 • 01-25 87 16/7/8



**بمناسبة الاسبوع العالمي للتلقيح**  
نشجعكم على إعطاء اولادكم اللقاحات اللازمة. خاصة تلك التي لم يتم أخذها بموعدها المحدد

يمكنكم زيارة مركز قره كوزيان للرعاية الصحية الأولية يومياً من الساعة 8:00 صباحاً حتى الساعة 4:00 بعد الظهر  
المزيد من المعلومات. يرجى الاتصال على:  
01-24 16 33 • 01-26 30 30 • 01-25 87 16/7/8

A set of Armenian and Arabic SM ads calling for parental awareness during the international vaccine week - 2020.



**ՀԱՌԻԲՑ ԳԱՐԱԿԵՕՉԵՆՆ**  
**ՀԱՍՏԱՏՈՒԹՅԱՆ Այնձար**

«Թագածահր»-ի ստեղծած ստիպողական դադարէն ետք, Հաուըրտ Գարակեօզեան հաստատութեան Այնձարի դարմանատան մանկարուժական բաժինը պատրաստ է ընդունելու ձեր զաւակները (0-18 տարեկան) ամէն օր 9:00-12:00:

Լաւ կը բաշարենք սրահայտ անհրաժեշտ պարտապարտները եւ յարկապէս այն պարտապարտները, որոնք ձեզ ժամանակէն չպարտապարտ:

**Նախարարութեան կողմէ ճշդում պարտադիր պատուաստները հաստատութիւն կը մատուց անվճար:**

Կը մատուցենք նաեւ հետեւեալ ծառայութիւնները.-  
 ✓ Մանկարուժարան եւ պատուաստներ  
 ✓ Ատամնարուժարան  
 ✓ Ակնարուժարան

Բոլոր անոնք, որոնք կը փափաքեն իրենց զաւակներուն համար պատուաստ ստանալ, կը խնդրենք, որ նախապէս հեռաձայնով կապ հաստատեն դարմանատան հետ ու արձանագրեն փոքրիկն անունն ու պատուաստի անակը:

Յանկեալ մանրամասնութեան համար կրնաք հեռաձայնով դարմանատան ամէն օր առաւօտեան ժամը 8:00-12:00՝ 00-62 06 27 իսկ կեղերեակեան դարմանատան՝ 01-25 87 16/778 - 01-24 16 33 - 01-26 88 03 **ՆՅՕՐԵՆՈՒԹՅԱՆ**

**ՀԱՌԻԲՑ ԳԱՐԱԿԵՕՉԵՆՆ**  
**ՀԱՍՏԱՏՈՒԹՅԱՆ Փանար-Լէյլաւան**

«Թագածահր»-ի ստեղծած ստիպողական դադարէն ետք, գործակցաբար Հ.Յ.Գ. «Է. Ակնունի» կոմիտեան եւ «Քորոնա Ծգնաժամային Տագնապ»-ի յանձնախումբին Հաուըրտ Գարակեօզեան հաստատութեան Լէյլաւանի դարմանատան Ընտանեկան Բժշկութեան, Մանկարուժարանի եւ պատուաստներու բաժինը հերթական դրութեամբ պատրաստ են ընդունելու ձեր զաւակները (0-18 տարեկան) սրահայտ անհրաժեշտ պարտապարտները եւ յարկապէս այն պարտապարտները, որոնք ձեզ ժամանակէն չպարտապարտ:

**ամէն ուրբաթ օրերը առաւօտեան ժամը 9:00-12:00:**

Ըստ յարգելի բնակչութեան պահանջին եւ առաջարկին հաստատութիւն պատրաստ պիտի ըլլայ յառաջիկայ ամիսներուն երկուշաբթի եւ չորեքշաբթի օրերը եւս դարմանատան ծառայութիւնները մատուցելու:

Կը բաշարենք ձեր զաւակներուն (0-18 տարեկան) սրահայտ անհրաժեշտ պարտապարտները եւ յարկապէս այն պարտապարտները, որոնք ձեզ ժամանակէն չպարտապարտ:

**Նախարարութեան կողմէ ճշդում պարտադիր պատուաստները հաստատութիւն կը մատուց անվճար:**

Յանկեալ մանրամասնութեան համար կրնաք հեռաձայնով ամէն օր կ.ա. ժամը 8:00-էն կ.ե. ժամը 4:00 հետեւեալ թիւերուն.- 01-24 16 33 - 01-26 88 03 (EXT: 135 կամ 120): **ՆՅՕՐԵՆՈՒԹՅԱՆ**

Armenian SM ads calling parents living near the KA Ainjar (left) and KA Fanar-Leilavan (right) clinics to vaccinate their children - 2020.

**100 YEARS**

The purpose of the Foundation was as Mikhael Karagheuzian wished it: the PHYSICAL, MORAL, SOCIAL & SPIRITUAL WELL-BEING OF CHILDREN.

SDG Goal = 17 PARTNERSHIPS FOR THE GOALS

"To comfort those who mourn, to relieve those in distress whether groups or race and in our small way endeavor to make the will of God prevail"

ՀԱՌԻԲՑ ԳԱՐԱԿԵՕՉԵՆՆ  
SEROP OHANIAN  
NCC - School Field Director  
serop.ohanian@ka-pHC.org

KA celebrates the joy of Christmas and the new year (2021) on SM.

**ՀԱՌԻԲՑ ԳԱՐԱԿԵՕՉԵՆՆ**  
**ՀԱՍՏԱՏՈՒԹՅԱՆ Մեր դասարան 2020-2021**

14-րդ տարին ըլլալով, փոքրատուն եւ մասնակցական ուսուցիչներու խմբակներու, աշակերտները կը սկստեն իրենց ամենօրեայ դասերը:

**Վերանա՛ր՝ նոյնքեր ամիս**

**Ամէն օր կէտքով եղ ժամը 3:00-6:30**

**Վարձ՝ Համիլան-Փաթիկեան դպրոց**

✓ Մաս կրնան կազմել տեղական կամ հարեւան դպրոց յանձնարող 1-7-րդ դասարանի իւր աշակերտները:

Շնորհիւ Միջազգային Անողջապահութեան հաստատութեան եւ գրողացեան թանգարանի եւ որպէսզի ապահովենք աշակերտներուն առաւելագոյն հասնելու ու խրատ-փոփոխ խնդրում. սերտագրանի դասընթացները պիտի իրան կրկին հաստատանան:

ա. Իսկարան կէտքով եղ ժամը 3:00-4:30  
բ. Իսկարան կէտքով եղ ժամը 5:00-6:30

Յանկեալ մանրամասնութեան համար հեռաձայնով 01-519 011 **ՆՅՕՐԵՆՈՒԹՅԱՆ**

A SM ad, in Armenian, announcing the KA Study Room Program services for the academic year 2020-21.

**Պարտադիր արշար**

Ցածականէն մինչեւ 18 տարեկան փոքրիկները պիտի ստանան ստրանտութեան (ցոնձ) եւ հարսակնի (մոտոն) պատուաստները նոյնիսկ 101 ստացան նա:

Տեղի պիտի ունենայ մեր հաստատութեան մէջ նոյնքերը 3-էն 25-էն նոյնքերը 14 ամէն օր առաւօտեան ժամը 9:00-4:00

Բոլոր անհրաժեշտ պարտապարտները պիտի ստանաք ինքն ինքն:

Յանկեալ մանրամասնութեան համար կրնաք հեռաձայնով՝ 01-25 87 16/778 - 01-24 16 33 - 01-26 88 03 - 01-26 30 30

An Armenian SM vaccination campaign - 2020.

**Հաստատութեան դռները բաց կը մնան, ձեզի մատուցելու անհրաժեշտ բժշկական խնամք՝ անվճար**

**Երկուշաբթի եւ ուրբաթ, 9:00-12:00**

Յունուար 14-էն 22, 2021 Լիբանանի ամբողջական փակումի միջոցին

Կը մատուցենք հետեւեալ ծառայութիւնները-

1. Մանկարուժարան եւ պատուաստներ
2. Ընտանեկան բժշկութիւն
3. Կանանց բժշկութիւն
4. Դեղարանի բաժին
5. Ստային եւ հողքբանական խնամք

Պարտադիր ինքնուրուշտ դասընթացներ կ'ըլլան շքանշանով:

**ՄԱՅՑ ՏՈՒՆԵ**

Միայն անհրաժեշտութեան դեպքերու համար կրնաք հեռաձայնով յարկապէս յարկապարտ:

Յանկեալ մանրամասնութեան համար հեռաձայնով՝ 01-24 16 33 - 01-26 30 30 - 01-25 87 16/778 **ՆՅՕՐԵՆՈՒԹՅԱՆ**

**إن جمعية قره كوزيان للرعاية الصحية الأولية تفتتح أبوابها لتأمين الرعاية الطبية الضرورية مجاناً من الإثنين إلى الجمعة، الساعة 9:00 صباحاً حتى 12:00 ظهراً من 14 إلى 22 كانون الثاني للعام خلال فترة الإغلاق العام.**

الخدمات المتوفرة:

- 1) طب الأطفال
- 2) طب العائلة
- 3) طب نسائي
- 4) الصيدلية
- 5) الصحة النفسية

القرى من المعلومات: يرجى الاتصال على: الإدارة 01-24 16 33 - 01-26 30 30 - 01-25 87 16/778

A set of Armenian and Arabic SM ads calling for parental awareness during the international vaccine week - 2020.



**KARAGHEUSIAN Primary Healthcare Center**

**EPILEPSY AWARENESS**

EPILEPSY is a neurological disorder in which brain activity becomes abnormal, causing seizures or periods of unusual behavior and sometimes loss of awareness

**+ Seizure FIRST aid**

- KEEP THE PERSON SAFE**
  - Lay them flat (on the floor, on the bed, ...)
  - Move any hazards out of the way
  - Cushion their head
  - Make sure nothing hinders their breathing
  - Don't put anything in their mouth
  - Stay with them until they have fully recovered
- AFTER THE SEIZURE** put them in the RECOVERY POSITION
- MAKE A RECORD** of what happened before, during and after the seizure, and time its duration.
- CALL FOR AN AMBULANCE IF ...**
  - They are not breathing or are blue around the lips
  - The seizure lasts more than 15 minutes
  - They are not responding after the seizure has stopped
  - They have sustained an injury during the seizure

**PEDIATRIC NEUROLOGY SPECIALISTS ARE AVAILABLE AT OUR CENTER FOR YOUR CONSULTATIONS**

Please call us on: 01-24 16 33, 01-26 30 30, 01-25 87 16/7/8

FOLLOW US ON: Facebook Howard Karagheusian Commemorative Corporation, Instagram HowardKaragheusianCenter

**مركز قره كوزيان للرعاية الصحية الأولية**

**داء الصرع** هو اضطراب في الجهاز العصبي المركزي يصبح فيه نشاط الدماغ غير طبيعي، مما يتسبب نوبات أو فترات من السلوك غير العادي، وفي بعض الأحيان فقدان الوعي

**+ اسعافات أولية لنوبة الصرع**

- ابقى المريض بأمان**
  - وضع الشخص مسطوحاً على الأرض أو السرير
  - نقل أي مخاطر بعيداً عنهم
  - وضع وسادة تحت رأسهم
  - التأكد من أن لا شيء يعيق تنفسهم
  - عدم وضع أي شيء في أفواههم
  - البقاء معهم حتى انتهاء النوبة
- بعد النوبة** وضعهم في وضع الاسترداد
- سجل ما حدث** قبل النوبة وخلالها وبعدها، مع تسجيل مدة النوبة
- اتصل بسيارة اسعاف** إذا كان هناك حالة عدم تنفس أو إرقاق حول الشفاه، استمرت النوبة لأكثر من 15 دقيقة، لا يستجيبون بعد توقف النوبة، تعرضوا لإصابة أثناء النوبة

**اطباء أخصائيين بأعصاب الأطفال موجودين في مركزنا لتأمين استشاراتكم**

تصل بنا على الرقم: 01-24 16 33, 01-26 30 30, 01-25 87 16/7/8

تابعونا على: Facebook Howard Karagheusian Commemorative Corporation, Instagram HowardKaragheusianCenter

Set of English and Arabic SM ads for epilepsy awareness - February 2021.

**KARAGHEUSIAN ASSOCIATION**

**21 MARCH WORLD DOWN SYNDROME DAY**

Down syndrome is a condition in which a person has an **EXTRA CHROMOSOME**

**EXTRA LOVE**

General Pediatricians as well as pediatric neurologists  
Additional services such as: - ABA therapist - Psycho-motor therapist - Speech therapist - Psychologist are available at our center for your consultations.

Bourj Hammoud, Marash Street, Karagheusian Bldg - P.O. Box: 80340 Bourj Hammoud, Lebanon  
For more information, please call us on: 01-24 16 33 • 01-26 30 30 • 01-25 87 16/7/8

FOLLOW US ON: Facebook Karagheusian Association, Instagram KaragheusianAssociation

A SM ad on world Down Syndrome day - 2021.

**KARAGHEUSIAN Primary Healthcare Center**

**مركز قره كوزيان للرعاية الصحية الأولية**

In the midst of a complete lockdown phase due to the Covid-19 Pandemic, The Karagheusian Primary Healthcare Center was able to provide medical and social services to 13,797 patients visits during the months of January and February 2021 as follows:

Pediatric and Vaccination » 2486 patients	Pharmacy » 2184 patients
Family Medicine » 3011 patients	Home Care » 85 patients
OBS-GYN » 896 patients	Social Assistance » 2751 cases
Chronic and Other Specialists » 616 patients	Jobs Found » 39 cases
Dental Unit » 315 patients	Online Mentoring Services » 165 individuals
Ophthalmology » 416 patients	Online Preventive and Educational Campaigns » 187 individuals
Mental Health » 293 patients	Online Tutorial / Study Room Services » 76 students
Physical Therapy » 48 patients	
Covid-19 PCR Tests Done » 229 cases	

**13,797 CASES**

We were able to provide all these services thanks to our committed doctors, nurses and staff members. We will continue to provide our best, because your health is our priority.

For more information, please call us on: 01-24 16 33 • 01-26 30 30 • 01-25 87 16/7/8  
Address: Bourj Hammoud, Marash Street, Karagheusian Bldg - P.O. Box: 80340 Bourj Hammoud, Lebanon

**Տեղեկատվություն 2021-ի խնդիրների զարկերի և շահագործման շահագործումների մասին**

**13,797 Վճարված դեպքեր**

Համառոտ կերպով մեր գործը ստորագրված վիճակից, որը պայմանավորված էր կորոնավիրուսի արտաբերման լիակատար փակման մեջ կը գտնվե՛ր, Կարաղևոսյանի Հիմնադրված Ծառայությունն և Արաբյն Անտրոպոլոգիան շահագործողները գնալով իրենց ունեցած հասան 3667 այդ անհատներին այսպես -

Անվաստություններ օգնություն » 1208 ցուցանիշ	Oxygen-ի մեղքներ ասպահույժ » 23 մեղքներ
Անցյալի անհատներ օգնություն » 366 ցուցանիշ	PCR-ի ցուցանիշներ » 229 անհատներ
Երեխաները կարի օգնության կարծիք » 100 անհատ	Տարրադասարանի օգնություն » 306 անհատներ
Տարրադասարանի օգնություն » 50 անհատ	Գործի հարցազրույց » 39 անհատներ
Անվաստություններ շրջակա օգնություն » 50 անհատ	«Անտրոպոլոգիա»-ի ամենօրյալ ասցանց ուսուցում » 76 անհատներ
Անվաստություններ կամ անհատների հիմնադրված ստանդարտները թշնաման օգնություն » 85 ցուցանիշ	Երեխաների հիմնադրված ստանդարտները օգնություն » 165 ցուցանիշ
Շահագործողների օգնություն » 100 անհատ	Ռատոնալացիան շահագործողների օգնություն » 187 անհատներ
Հիմնականում շահագործողներին կողմ շահագործողները » 220 անհատ	Արաբյն և Ինգլիզյան Անտրոպոլոգիան օգնությունները հիմնադրված » 281 անհատներ

Այս բոլորը և անցին կրթական իրազեկման շնորհիվ մեր 200 կուրսերի աշխատակազմից: Աստուծոյ օրհնությամբ և մեր մարզկազմի կարիքներին սահմաններում մեզ պիտի շարունակենք, մեր ծառայությունները մասնագիտացված կունենան:

Տեղեկատվություն հասնել հիմնադրված: 01-24 16 33 • 01-26 30 30 • 01-25 87 16/7/8

A set of English and Armenian SM ads detailing the flow of patients in KA-PHC during the Covid-19 pandemic - 2021.

**HOWARD KARAGHEUSIAN CENTER**

**مركز جمعية قره كوزيان للرعاية الصحية الأولية**

من الخدمات المتوفرة لدينا:

- 1) طب الأطفال وخدمة اللقاحات
- 2) طب العائلة
- 3) طب نسائي
- 4) أطباء أخصائيين (عدد وسكري، قلب وشرايين)
- 5) وغيرها من الاختصاصات

إن جمعية قره كوزيان للرعاية الصحية الأولية تفتتح أبوابها، من الإثنين إلى الجمعة، من 10:00 صباحاً حتى 6:00 مساءً، السبت، 10:00 صباحاً حتى 1:00 بعد الظهر

للحجز من العيادات يرجى الاتصال على: 01-25 87 16/7/8, 01-24 16 33, 01-26 30 30

الإدارة

Karagheusian Association

ASM ad in Arabic, announcing new and longer post-Covid-19 working hours at KA - 2021.



A SM ad for Mental Health awareness - 2022.

A SM ad showing the AUB-NGOi certification to KA - 2022.

KA shares the joy of Christmas and the new year (2022), along with a commemoration of Mr Serop Ohanian's 20 years of service at the Center, on SM.



The project of "Reducing risks and promoting healthy lives" is an initiative in providing compassionate and humanitarian services focuses on healthcare prevention & education.

SEROP OHANIAN  
Lebanon Field Director | Karagheusian Association

A SM visual displaying a quote by KA General Manager, Mr Serop Ohanian.



# IN THE LPSP PACKAGES CAMPAIGN:

5 sets of LPSP posters in Armenian (left), Arabic (right) and English (bottom center), as part of an information campaign on testing and awareness offered at KA-PHC on diabetes, hypertension, pregnancy care, NCDs detection, and childhood vaccination.

**Ազդարարիչ կը պատասխին Աչքերդդ Սիրոյն**

**Քննուիր Անվճար**

- ✓ Շաբաթաւորական կատուկ եւ անհրաժեշտ արեան քննութիւններ\* Տարին անգամ մը
- ✓ EKG (էլեկտրոկարտոգրամ) Տարին անգամ մը
- ✓ Աչքի քննութիւն Տարին անգամ մը

\* CBC, SCPT, SODI, Lipid Profile, Creatinine, HbA1c

**عندك سكري؟ احرص على عينيك! مجاناً**

**افحص مجاناً**

- ✓ فحوصات الدم الكازمية\* مرة واحدة سنوياً
- ✓ تخطيط قلب مرة واحدة سنوياً
- ✓ فحص نظر مرة واحدة سنوياً

VC: Blood Glucose, Microalbumin (Spot Urine)

**Are you diabetic? Protect your eyes!**

**Receive the following for free:**

- ✓ Diabetic patients essential blood tests\* Once per year
- ✓ EKG (Electrocardiogram) Once per year
- ✓ Retinal check up Once per year

\* CBC, SCPT, SODI, Lipid Profile, Creatinine, HbA1c, Blood Glucose, Microalbumin (Spot Urine)

**Check your blood pressure Watch out for the silent killer!**

If you have **hypertension**, KA-PHC offers you almost for free:

- ✓ Essential blood test\* Once per year
- ✓ Electrocardiogram (EKG) Once per year

Blood Pressure Category	Systolic	Diastolic
Normal blood pressure	less than 120	& less than 80
Elevated blood pressure	120-129	& less than 80
Hypertension (Stage 1)	130-139	or 80-89
Hypertension (Stage 2)	more than 140	or more than 90

\* CBC, Electrolytes, Lipid Profile, Creatinine, Uric Acid, Calcium, Blood Glucose, Urine Analysis, Microalbumin (Spot Urine)

**انتبه مع ضغطك! تا ما يقتلك عالىساكت!**

إذا كنت تعاني من ارتفاع ضغط الدم مركز قره كوزيان يقدم لك شبه مجاناً:

- ✓ فحوصات الدم اللازمة\* مرة واحدة سنوياً
- ✓ تخطيط قلب مرة واحدة سنوياً

مستوى ضغط الدم	ضغط الدم الانقباضي / ضغط الدم الانبساطي
ضغط الدم الطبيعي <td>أقل من 120 و أقل من 80</td>	أقل من 120 و أقل من 80
ارتفاع ضغط الدم <td>129 - 129 و أقل من 80</td>	129 - 129 و أقل من 80
ارتفاع ضغط الدم من المرحلة الأولى (فترة ضغط الدم)	139 - 139 أو 89 - 89
ارتفاع ضغط الدم من المرحلة الثانية (فترة ضغط الدم)	149 أو أعلى أو 90 أو أعلى

**Check your blood pressure Watch out for the silent killer!**

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- ✓ Essential blood test\* Once per year
- ✓ Electrocardiogram (EKG) Once per year

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Hypertension (Stage 2)	more than 140	or more than 90

\* CBC, Electrolytes, Lipid Profile, Creatinine, Uric Acid, Calcium, Blood Glucose, Urine Analysis, Microalbumin (Spot Urine)



**Եթե դու ես եւ կ'ուզես հետեւիլ քու եւ զաւակիդ առողջական վիճակին**

Ձրութանը լրիւ շրջանին Գարակեօզեան հաստատութիւնը քեզի կը տրամադրէ:-

- ✓ 8 բժշկական այցելութիւն գրեթէ անվճար
- ✓ 2 անգամ լրիւներու գերձայնային հետազոտութիւն (Obstetric Ultrasound) անվճար
- ✓ Արեան եւ մեզի անհրաժեշտ քննութիւններ անվճար
- ✓ Անվճար այցելութիւն մը դայակին ծննդաբերութենէն ետք 8 շաբաթոյս ընթացքին

**Խորհրդակցէ բժիշկիդ հետ ԳԱՐԱՎԵՕԶԵԱՆ ՀԱՍՏԱՏՈՒԹՅԱՆ մէջ**

Տեղեկութիւններ: +961 1 25 87 16  
+961 1 26 05 37 +961 1 25 87 17  
+961 1 26 30 30 +961 1 25 87 18  
+961 1 26 88 03 +961 1 24 16 33

**لكل امرأة حامل لمراقبة وضع طفلك**

مركز قره كوزيان يقدم لك طيلة فترة الحمل:

- ✓ 8 زيارات لطبيب النسائي خلال فترة الحمل شبيهة مجانية
- ✓ صورة صوتية للجنين (عدد 2) مجاناً
- ✓ فحوصات دم وبول أساسية مجاناً
- ✓ معاينة مجانية للام خلال 8 اسابيع ما بعد الولادة

**استشيرتي طبيبك! مركز قره كوزيان شبيه مجاناً**

شبكة الرعاية الصحية الأولية وزارة الصحة العامة

الرعاية الصحية الأولية حق للجميع لا فرق بين جنسية أو لون أو انتماء أو دين

تلفون: +961 1 25 87 16  
+961 1 26 05 37 +961 1 25 87 17  
+961 1 26 30 30 +961 1 25 87 18  
+961 1 26 88 03 +961 1 24 16 33

**ԱՅՐ ԿԱՍ ԿԻՆ ԿԱՐԻՔԻՂ 40 ԿԱՐԵՆԿԱՆԷՆ Վ՛ԵՐ Է**

**Որովհետեւ կարծիք մը կանխարգիլումը նախընտրելի է բաժակ մը բուժումը**

**NCD (NON-COMMUNICABLE DISEASE) SCREENING**

Գարակեօզեան հաստատութիւնը գրեթէ անվճար կը տրամադրէ:-

- ✓ Ոչ վիրահատական հիանդոզիաներու վաղ յայտնաբերման արեան քննութիւն\* Տարին մէկ անգամ

**Խորհրդակցէ բժիշկիդ հետ ԳԱՐԱՎԵՕԶԵԱՆ ՀԱՍՏԱՏՈՒԹՅԱՆ մէջ**

\*Շաբաթի եւ քրտնաթորի քննութիւն

Տեղեկութիւններ: +961 1 25 87 16  
+961 1 26 05 37 +961 1 25 87 17  
+961 1 26 30 30 +961 1 25 87 18  
+961 1 26 88 03 +961 1 24 16 33

**عمرک أو عمرک فوق الأربعين؟ ولاخو خیر من قنطار علاج**

**NCD (NON-COMMUNICABLE DISEASE) SCREENING**

مركز قره كوزيان يقدم لك شبيه مجاناً:

- ✓ فحص دم\* للكشف المبكر عن الأمراض غير الانتقالية

**استشير طبيبك! مركز قره كوزيان**

\*فحص دم للسكري المائم وفحص للدهنيات

شبكة الرعاية الصحية الأولية وزارة الصحة العامة

الرعاية الصحية الأولية حق للجميع لا فرق بين جنسية أو لون أو انتماء أو دين

تلفون: +961 1 25 87 16  
+961 1 26 05 37 +961 1 25 87 17  
+961 1 26 30 30 +961 1 25 87 18  
+961 1 26 88 03 +961 1 24 16 33

**To every pregnant woman Monitor your condition and that of your baby**

KA-PHC offers you throughout your pregnancy:

- ✓ 8 visits to the OBGYN doctor Almost free
- ✓ Two obstetric ultrasounds For free
- ✓ Blood and urine tests For free
- ✓ Free postpartum checkup up to 8 weeks after delivery

**CONSULT YOUR DOCTOR at KARAGHEUSIAN ASSOCIATION**

PRIMARY HEALTHCARE IS THE RIGHT OF EVERY INDIVIDUAL, WITHOUT ANY DISCRIMINATION AGAINST NATIONALITY, RACE, ALIGNMENT OR RELIGION.

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+961 1 26 30 30 +961 1 25 87 18  
+961 1 26 88 03 +961 1 24 16 33

**MEN OR WOMEN If you are above 40 years old**

**Because prevention is better than the cure!**

**NCD (NON-COMMUNICABLE DISEASE) SCREENING**

KA-PHC is providing (almost free):

- ✓ Screening tests for Non-communicable diseases\* Once per year

**CONSULT YOUR DOCTOR at KARAGHEUSIAN ASSOCIATION**

PRIMARY HEALTHCARE IS THE RIGHT OF EVERY INDIVIDUAL, WITHOUT ANY DISCRIMINATION AGAINST NATIONALITY, RACE, ALIGNMENT OR RELIGION.

\*Fasting blood sugar and lipid panel

تلفون: +961 1 25 87 16  
+961 1 26 05 37 +961 1 25 87 17  
+961 1 26 30 30 +961 1 25 87 18  
+961 1 26 88 03 +961 1 24 16 33





**Միշտ յիշե՛ք Ձառակիր պատուաստումը անհրաժեշտ է**

**Ձեռն փաթեցված են մինչև 18 փաթեցված**

Վակցինացիաների անվանումները	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16-18
Hepatitis B Vaccine	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)
Inactivated Poliovirus Vaccine	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)
Oral Poliovirus Vaccine	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)
5-in-1 Vaccine (diphtheria, tetanus, pertussis, polio, Hib)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)
Rotavirus Vaccine	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)
PCV (Pneumococcal Conjugate Vaccine)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)
Measles Vaccine	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)
MMR Vaccine (Measles, Mumps, Rubella)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)
DTP (Diphtheria, Tetanus, Pertussis)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)
Diphtheria, Tetanus	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)	Առաջին օրվան (նորածին)

Այս օրվանքը Գարակեօզեան հաստատության մանկաբուժին մտ, որպեսզի իմանաք ձեր զավակներուն անհրաժեշտ պատուաստները

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 +961 1 26 07 38  
 +961 1 26 08 03  
 +961 1 26 10 33



**مركز قره كوزيان  
للرعاية الصحية الأولية**

**اللقاح لطفلكم أساسي. ما تنسوه!**

**من عمر صفر لـ 18 سنة**

العمر	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16-18
اللقاح	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة	جرعة واحدة
التحصين	التحصين	التحصين	التحصين	التحصين	التحصين	التحصين	التحصين	التحصين	التحصين	التحصين	التحصين	التحصين	التحصين	التحصين	التحصين	التحصين

راجعوا طبيب الأطفال لدى مركز قره كوزيان لمعرفة اللقاحات الأساسية المجانية لطفلكم

شبكة الرعاية الصحية الأولية  
وزارة الصحة العامة

جمعيّة قره كوزيان  
للرعاية الصحية الأولية  
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# OTHERS:



A visual showing the KA Core Value System - 2022.



**Don't miss it Vaccinating your child is very essential!**

**From zero to 18 years old**

Age	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16-18
Hepatitis B Vaccine	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth
Inactivated Poliovirus Vaccine	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth
Oral Poliovirus Vaccine	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth
5-in-1 Vaccine (diphtheria, tetanus, pertussis, polio, Hib)	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth
Rotavirus Vaccine	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth
PCV13 (Pneumococcal Conjugate Vaccine)	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth
Measles Vaccine	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth
MMR Vaccine (Measles, Mumps, Rubella)	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth
DTP (Diphtheria, Tetanus, Pertussis)	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth
Diphtheria, Tetanus	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth	At birth

Consult the pediatrician at Karagheusian to know the essential free vaccines for your child.

شبكة الرعاية الصحية الأولية  
وزارة الصحة العامة

Primary Healthcare is the right of every individual, without any discrimination against nationality, race, alignment or religion.

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+961 1 26 10 33



A visual showing the values on which KA-PHC bases its services - 2022.





A visual showing the various organizations that KA has collaborated with as part of implementing goal number 17 (Partnerships for the Goals) of the WHO "Health in the SDG Era" Goals - 2022.

الرعاية الصحية الأولية حق للجميع  
لا فرق بين جنسية أو لون أو انتماء أو دين

شبكة الرعاية الصحية الأولية  
وزارة الصحة العامة

**"We envision**  
Primary healthcare and health services that are high quality, safe, comprehensive, integrated, accessible, available and affordable for everyone and everywhere, provided with compassion, respect and dignity by health professionals who are well-trained, skilled, motivated and committed."

Declaration of Astana: Global Conference on Primary Healthcare - from Alma-Ata towards Universal Health Coverage and the Sustainable Development Goals.  
Astana, Kazakhstan, 26-25 October 2018

A visual on the Declaration of Astana.

مركز قهكوزيات  
وزارة الصحة العامة

SDG GOAL #17 PARTNERSHIPS FOR THE GOALS  
collaboration with Universities & Medical Schools

AUB LAU  
USJ  
ST. MARC  
USEK  
AUST  
ADVENTISTA

**"We envision**  
Primary health care and health services that are high quality, safe, comprehensive, integrated, accessible, available and affordable for everyone and everywhere, provided with compassion, respect and dignity by health professionals who are well-trained, skilled, motivated and committed."

Declaration of Astana: Global conference on Primary Healthcare - from Alma-Ata towards Universal Health Coverage and The Sustainable Development Goals.  
Astana, Kazakhstan 25-24 October 2018

A banner showing the Lebanese universities that collaborate with KA-PHC.

The flag that was carried by KA staff during the Beirut Marathon event (November 2022).

KARAGHEUSIAN ASSOCIATION  
LEBANON

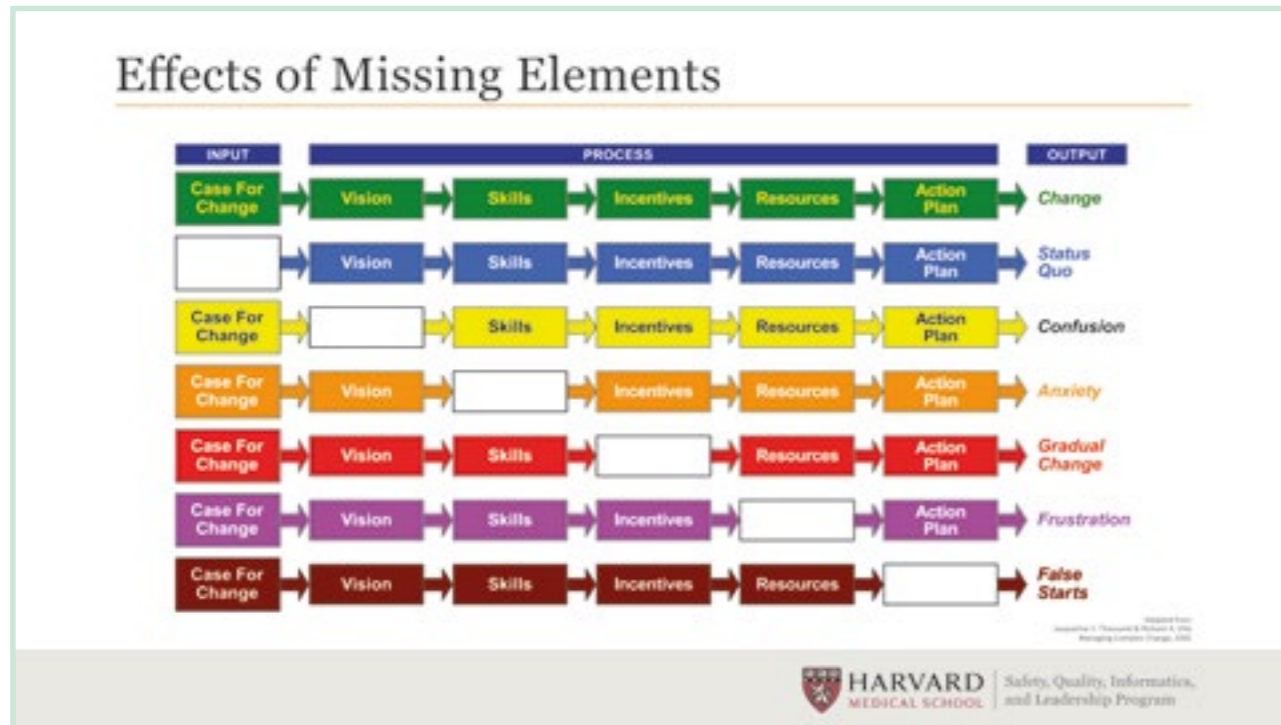
**i RUN FOR  
#Healthcareforall**

الرعاية الصحية الأولية حق للجميع  
لا فرق بين جنسية أو لون أو انتماء أو دين

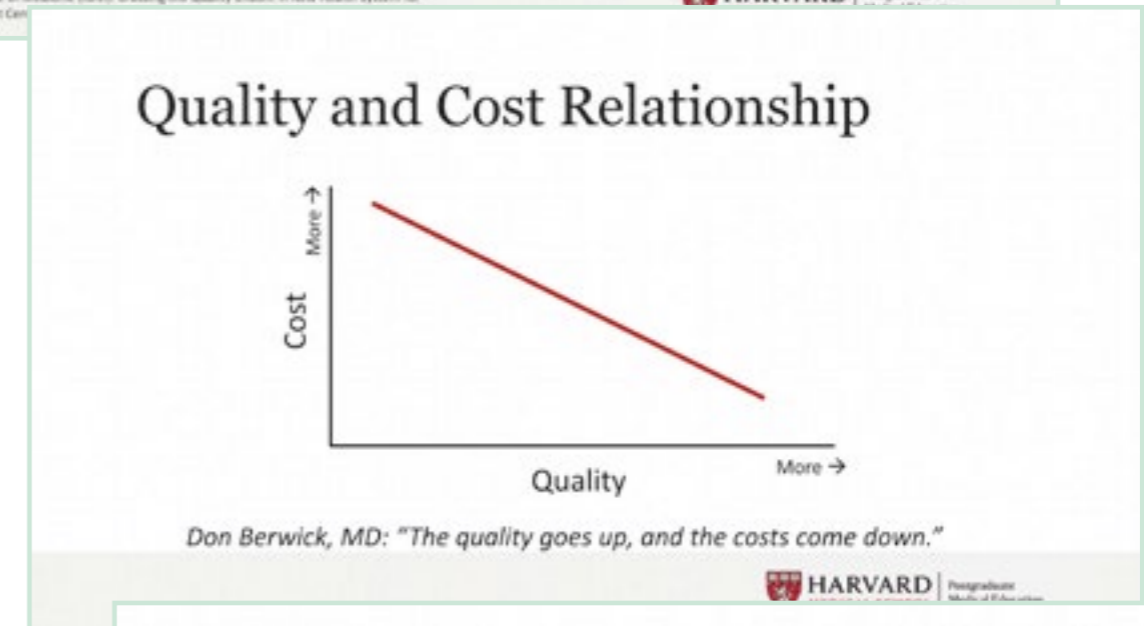
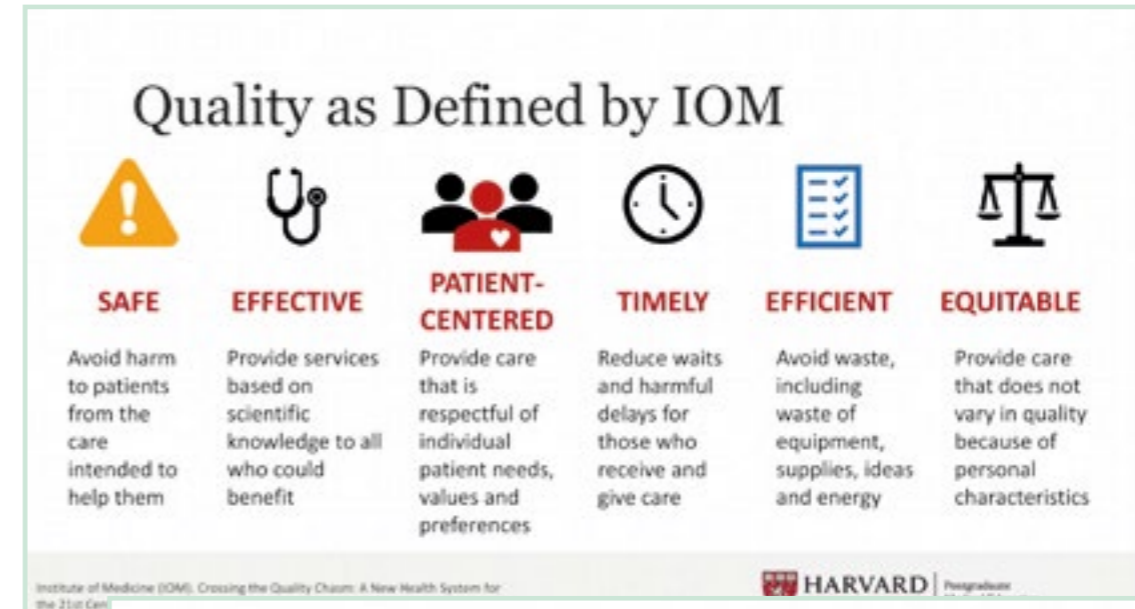
شبكة الرعاية الصحية الأولية  
وزارة الصحة العامة

**#KaragheusianAssociation #PHCCLebanon**





A series of visuals on management principles from Harvard Medical School that are closely implemented at KA-PHC.



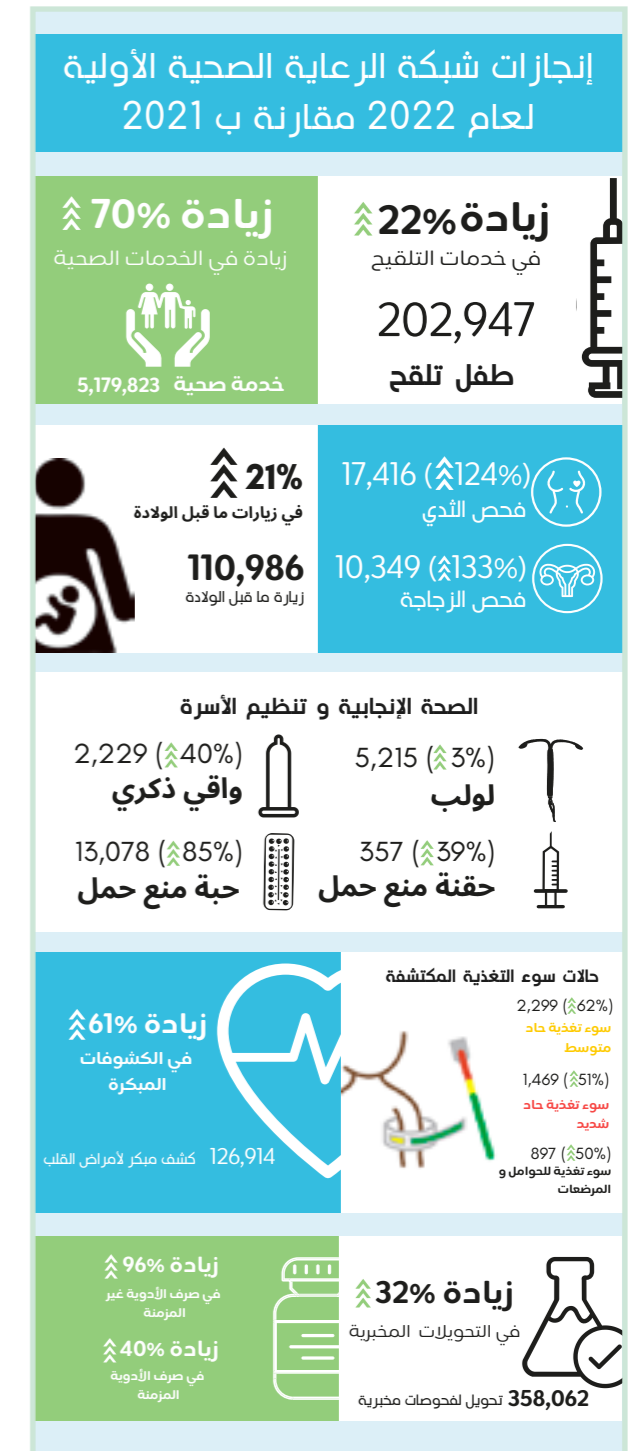
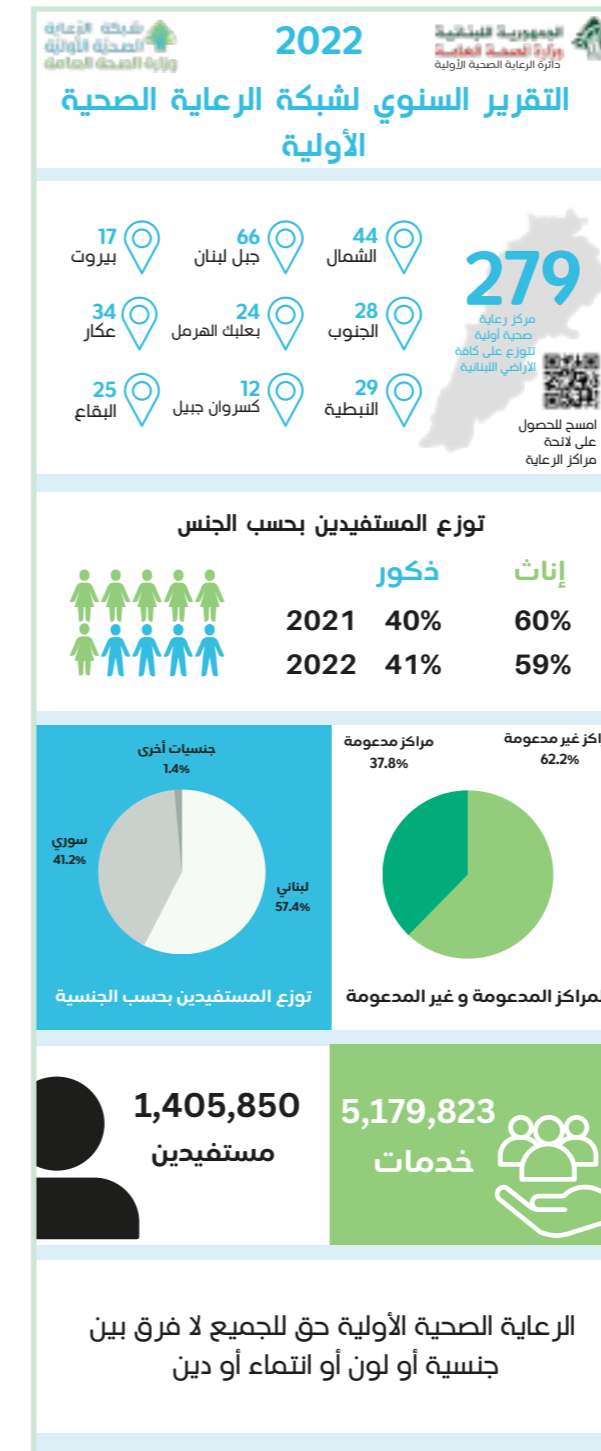


## APPENDIX



# THE OFFICIAL STATISTICS OF PRIMARY HEALTHCARE BENEFICIARIES IN LEBANON

A series of infographics by the Lebanese Ministry of Public Health on the 2022 statistics of PHC beneficiaries, in Arabic.





## ACKNOWLEDGING Chirak Printing & St Marc Laboratories



*It is with great gratitude that I would like to acknowledge the great service that St. Marc Medical & Diagnostic Center, and the owner, Mr Sam Racoubian, are rendering to Karagheusian Association Center's medical sector. Their professionalism is on the highest level, and during all these years of our cooperation with them not a single incident has happened to mar their excellent reputation.*

*We feel indebted to Mr Racoubian also for being compassionate towards our needy patients who receive free medical care, including laboratory tests, imaging and various other expensive services. We consider ourselves fortunate to have such a humanitarian partner in our efforts to relieve the heavy burdens of our people in Lebanon.*

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*Their absolute care to detail and perfection in delivery have been their trademark.*

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