جامعة بيروت العربية
BEIRUT ARAB UNIVERSITY

SUSTAINABLE DEVELOPMENT GOALS

SDG 17: PARTNERSHIPS FOR THE GOALS







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Beirut Arab University
SDG 3 Good Health and Wellbeing

University and Community Alignment Report | Lebanon

Evidence review updated 19 October 2026

Understanding the goal

SDG 3 seeks healthy lives and wellbeing across the life course. Its targets cover maternal and child health, communicable and non-communicable disease, mental health, access to healthcare and a capable health workforce. Universities contribute through clinical services, prevention, professional education and research. For BAU, the distinction between care available to its own students and staff and outreach delivered to external communities is central to understanding the breadth of its contribution.

Evidence: United Nations SDG 3 targets

BAU's contribution

BAU combines health-profession education with campus healthcare, a Psychosocial Counselling Unit and several clinical and community services. Recent examples include nursing participation in vaccination, pharmacy-led chronic-disease education, children's oral health and a women's health fair in 2026. The university's contribution involves students in supervised practice, academics in clinical and educational leadership and administrative staff in service support.

Relevant UN targets	Focus of this report
3.4	Chronic disease prevention and mental wellbeing
3.7 and 3.8	Health information and access to appropriate care
3.c	Education and practical preparation of health professionals

Students staff and community

Students learn through supervised clinical and community activity. Academic staff provide professional leadership and education, while clinical, technical and administrative employees support safe service delivery. Schools, municipalities and health organisations connect university expertise with community needs. Staff and students also benefit from services directed at their own wellbeing.

Evidence approach: dated activities and research from 2021–2026 are prioritised. Standing services are identified as such; policies and agreements have no date cutoff. Original links accompany the evidence. The final page proposes improvements and does not claim they are already implemented.

Health and wellbeing within the university

Campus healthcare and access routes

BAU publishes health and wellness arrangements for students across its campuses and a Healthcare Center providing clinical services. The centre serves as part of the university's health infrastructure. Service availability, appointments and payment arrangements should follow the relevant published service conditions; access does not mean every treatment is universally free.

Evidence: BAU campus health and wellness provision | BAU Healthcare Center services and access

Accessible university healthcare matters because illness can interrupt study or work and because early advice can help people navigate a wider care system. Students should be able to understand where to seek routine support and how referrals work. A coherent service pathway also helps academic and administrative staff respond appropriately when a learner needs assistance without taking on a clinical role.

Psychosocial support established in 2024

On 29 February 2024, the Faculty of Human Sciences opened BAU's Psychosocial Counselling Unit. Its stated functions include psychological, social and educational support for students, preventive programmes, guidance and the dissemination of psychological awareness. The opening record connects the service with the university's institutional strategy.

Evidence: BAU Psychosocial Counselling Unit opening

This gives mental wellbeing a visible place alongside physical health. The contribution should be understood as a professional support service, with confidentiality and appropriate referral central to its operation. Useful indicators include waiting times, access across campuses and whether users can obtain further help when needed. The presence of a unit is an institutional achievement; its effect on wellbeing needs suitable evaluation.

Staff wellbeing and clinical learning

Human Resources describes health and dental benefits and leave arrangements for employees. These form part of BAU's support for academic and non-academic staff, alongside professional development and family-related assistance.

Evidence: BAU Human Resources services and staff development

The Physical Therapy Outpatient Clinics provide another clinical learning and service setting. Their published purpose connects professional training with rehabilitation care. Such settings allow students to practise under supervision while staff maintain responsibility for care quality and the organisation of services.

Evidence: BAU physical therapy outpatient services

Taken together, these arrangements support a campus where health concerns can be recognised and directed towards suitable assistance. Their sustainability depends on consistent communication, qualified supervision and attention to the experience of both service users and the people delivering care.

Supervised health outreach in local communities

Chronic disease prevention in 2025

On 14 November 2025, senior pharmacy students worked with the Ministry of Public Health and Makhzoumi Foundation at its Primary Healthcare Center. Under academic supervision, they delivered chronic-disease education and measured blood pressure and glucose. Topics included cardiovascular and respiratory conditions, cancer, diabetes and smoking cessation.

Evidence: BAU community chronic disease campaign November 2025

A further campaign at Iman High School in Saida, reported on 15 November 2025, combined diabetes education for parents with risk assessment and lifestyle counselling. BAU records student participation as experiential training under faculty supervision.

Evidence: BAU Iman High School family diabetes campaign

These activities take learning into settings where families already gather or receive care. Students practise explaining evidence and responding to questions, while professional supervision helps maintain accuracy. Screening should be connected with clear referral advice; a single measurement is a point of assessment rather than a diagnosis or a demonstrated long-term health outcome.

Women's health and prevention in 2026

On 26 September 2026, BAU Tripoli's Faculty of Health Sciences organised a Women's Health Fair in Sir El-Danniyeh with the municipality and Arab Union of Specialized Women. It included reproductive and later-life health education, cancer awareness, free screenings, consultations and first-aid demonstrations. The event took place at a community venue.

Evidence: BAU community Women Health Fair September 2026

Contribution to national vaccination

BAU nursing students volunteered in the national COVID-19 vaccination campaign at Albert Haykel Hospital. The university's record identifies their participation in an organised public-health response, connecting professional training with service during the pandemic.

Evidence: BAU nursing volunteers in national vaccination

The examples span prevention, health literacy and participation in service delivery. BAU's role is institutional because faculties organise or document the work, staff supervise students and external partners provide the community setting. Maintaining records of referrals, user feedback and subsequent activities would clarify the continuing benefit beyond the event itself.

Clinical education and collaborative health knowledge

Interprofessional primary care

BAU's ICARE project concerns interprofessional student-run primary-care clinics through university and enterprise cooperation. Its Advanced Primary Care Innovation Center at BAUHC provides a practical link between the project and a university care setting. The project brings different health disciplines into a shared approach to professional preparation.

Evidence: BAU ICARE international project | BAU Advanced Primary Care Innovation Center

Interprofessional learning is relevant because many health needs cross disciplinary boundaries. A person may require medical assessment, medication advice, nutritional support and rehabilitation. Students need to understand how these roles connect and when to refer. A university setting can support this learning when supervision and responsibility are explicit and users understand the service they are receiving.

Reproductive health education for the university community

In April 2022, BAU's Faculty of Medicine and International Orthodox Christian Charities organised Road to Maternity for women at the university. The session addressed preparation for pregnancy, nutrition, lactation and contraception through discussion and educational material. This is a dated example of health information being brought to the campus community.

Evidence: BAU and IOCC Road to Maternity education

Health knowledge available beyond specialist audiences

BAU's Life Support Center publishes training and community-oriented activity in resuscitation and emergency response. This extends the university's contribution from treating illness to developing practical preparedness and lifesaving skills.

Evidence: BAU Life Support Center

The health faculties' research and training roles can reinforce one another when community experience identifies a question for investigation and research findings return to teaching or care. This process should preserve the distinction between an educational demonstration, a research finding and a clinical service. Each has its own purpose and requirements for professional oversight.

BAU's health contribution also depends on staff outside clinical disciplines. Administrators organise appointments and communication; laboratory and technical teams support safe practice; teachers help students prepare for placements. Recognising these roles makes the report relevant to employees as well as students and academic staff. It also identifies where service quality can be strengthened through training and clear procedures.

Research toward improved dental materials

In October 2026, BAU reported a Lebanese patent for plant-assisted synthesis of zinc oxide nanoparticles for dental materials. The announcement documents a recognised research invention; it should remain distinct from evidence of routine clinical adoption.

Evidence: BAU dental materials patent reported October 2026

Priorities for strengthening the contribution to SDG 3

BAU has several established routes for health support and a recent record of community outreach. The priorities below are recommendations for connecting these activities into a clearer account of access, quality and follow-up. They build on the documented service and educational platforms.

Clarify the experience of seeking support

A university health directory could bring together eligibility, opening arrangements, costs, confidentiality and referral information. The same information should be understandable to students, academic staff and administrative employees. Community campaigns should identify which services are free and explain what happens after a screening result or a concern is identified.

Area	Suggested evidence of progress
Campus access	Service use, waiting times and completed referrals
Mental wellbeing	Confidential user feedback and access across campuses
Community prevention	Screening reach and referral follow-up
Professional learning	Supervised competencies and placement feedback

Evaluate continuity and quality

Outreach partners could agree a small set of useful follow-up measures before an activity. Examples include whether participants received understandable information, whether people needing further assessment reached a service and whether a host organisation used the teaching material later. Aggregate reporting should avoid identifying individual patients or implying that attendance proves a change in health status.

For students, practical learning should be assessed through competencies and feedback from supervisors and community partners. For staff, training can support consistent referral, respectful communication and the recognition of situations needing specialist help. These improvements concern the way existing services work rather than simply increasing the number of events.

BAU’s alignment with SDG 3 is visible in campus care, mental-health support, supervised outreach and professional preparation. A more connected record of who can access services, how care continues and what users experience would strengthen its contribution to healthy lives and wellbeing in the university and the wider community.