

Lebanon Crisis

Health Cluster Bulletin # 13

Friday 12 January 2007

The Lebanon Crisis Health Cluster Bulletin aims to give an overview of the health activities conducted by the health cluster partners in the areas affected by the latest conflict in Lebanon. It compiles health information received from the different organizations working in Beirut, South Lebanon, South Beirut, and the Bekaa valley.

The Health Cluster Bulletin will be issued every other Friday.



Picture: RI/Lebanon

Response International (RI) home visits community nursing services.

January 2007

Highlights

- No outbreak alerts were reported.
- Various UN agencies and NGOs are developing their intervention plans for the recovery period.
- Unexploded Ordnances (UXOs), cluster bombs and mines are still affecting the various life aspects of the Lebanese population in the affected areas.

Situation Overview

- Regarding the Acute Jaundice Syndrome cases in Qasmia camp reported in the last issue, investigation were conducted to confirm 16 cases. Water samples were collected by WHO from various sites and samples tested by Technisches Hilfswerk (THW). Results of water samples tests revealed fecal contamination and absence of Chlorine. Chlorination of the water source in the camp started supervised by CISP. Further follow up for new cases and monitoring for acute jaundice syndrome as well as water chlorination and assessment is undertaken in collaboration with UNRWA and CISP.
- According to the National Demining Office (NDO) and UNDP Mine action, the total number of military and civilian casualty figures due to landmines/UXOs/cluster bombs is 204 divided as follows: 163 injured civilians, 19 killed civilians and 22 military casualties as of end of December 2006. Approximately 34.4% of the injured victims and 22.2% of the killed are among children and youth. Main reasons behind civilian's injuries and deaths are home reconnaissance and agricultural work.

Health Response to the Humanitarian Crisis

National and international Health Cluster partners are providing support in four core areas:

1. Assessment and monitoring

- WHO public health focal point conducted field visits to 8 health facilities in Bent Jbeil, providing technical support to increase the reporting sites and improve the quality of data.
- WHO in collaboration with the Ministry of Public Health is planning to conduct In February, a follow up assessment regarding the severely damaged and war related non-functional health facilities. The assessment will cover the physical damage as well as the functional status of these health facilities.

2. Health coordination

- Two health cluster meetings were conducted and attended respectively by 7 and 6 UN agencies, international and national non-governmental organizations. The health cluster meeting will take place every Tuesday at 15:00, WHO office within the Ministry of Public health office in Tyre.
- The Mental Health and psychosocial support sub cluster coordination meeting in Tyre was held and attended by 7 national and international NGOs. The next meeting will take place on the 22nd of January 2007 at 12:00 WHO office-Tyre.
- The Health Cluster and Mental Health Matrices are regularly updated and shared with partners.

3. Filling health gaps

- The Ministry of Public Health, UNICEF and WHO second round of the door-to-door national Polio vaccination and vitamin A supplementation campaign in collaboration with other partners, reached 280.604 children. The final number for the first round reached 263.314 Polio vaccinated children.
- WHO warehouse distributed 119 pallets (1 pallet=1m³) of chronic and acute medications as well as hospitals supplies to public and private hospitals and NGOs' dispensaries in the different Lebanese Mohafazats.
- WHO hub in Tyre provided Aita Al Jabal clinic with one Canadian Doctor kit.
- University of Saint Joseph (USJ) finalized the structural and WATSAN rehabilitation of the first floor of Qana governmental hospital. The facility can accommodate the health teams intervening in the south.
- Handicapped International (HI) donated Amel Association different equipments for handicapped people such as wheel chairs for adults and children, water matrices as well as other equipments thus allowing the association to respond to the current need.
- WHO supported the Ministry of Public Health in establishing 4 Regional Epidemiological Observatories in Saida, Zahle, Nabatyieh and Tripoli. The support covered full office furniture's in addition to complete office supplies and equipments, enabling the observatories to collect and analyze epidemiological information at the district level providing feedback to the concerned in the health response structure.
- WHO provided both Bent Jbeil and Marjeoun Qada Doctors premises, completely destroyed during the recent crisis, with 14 full office furniture's including two conference rooms as well as offices supplies and equipments.
- Response International (RI) clinic in Qlaileh continues the provision of its services: 314 patients consulted for pediatric, gynecology and general services, with an average of 30 to 40 patients a day. In addition, the mobile clinic delivered School health program services as well as home visits community nursing to 261 students and 31 patients in the 6 villages around Qlaileh.

- Association pour la Protection de l'Enfant de la Guerre (APEG) supported by WHO delivered mental health services through its clinic in Tyre and Nabatieh reaching 517 patients with 1041 consultations. Five per cent and 7.3% of the patients aged 0-18 years and 19-80 years respectively presented psycho-traumatic syndromes in relation to the war.
- UNIFIL battalions provided, through medical mobile clinics, medical services for Al-Mayadin, Maaraka, and Yanouh (Italian), Al Hinnieh (Chinese), Naqoura and Alma Chaeb (UNIFIL Hospital), Houla and Mais Al Jabal (Nepalese), Chebaa, Kafarshouba, Habbarieh, Elmeri, and Ibel Saki (Indian), as well as Tebnine and Barashete (Belgium). UNIFIL next week mobile clinics will continue in: Naqoura, Alma Chaeb, Tebnine (daily), Hinneyeh (3 days/week), Habbarieh, Chebaa, and Kafar Chouba (1 day/week), and Ibn Sakki (2 days/week).
- Imam Sadr Foundation Tyre in collaboration with Mennonites reached through its Mobile Clinic 72 villages in the districts of Tyre, Nabatieh, Bent Jbeil, Marjeoun and Hasbaya. Free of charge general and specialized consultations in general surgery, pediatrics, orthopedics, ophthalmology, dermatology, cardiology, pneumology-allergology and endocrinology. Four thousands nine hundred women, children and elderly benefited from the services.
- WHO covered the purchase of equipments, Spirometer and consumables enabling the Childhood Protection and Care Association (CPCA) to establish with its partners in the south an Asthma specialized mobile clinic. The Ministry of Public Health and Young Men Christian Association (YMCA) offered infantile Asthma medications.
- United Arab Emirates (UAE) repairs for Marjeoun governmental hospital continue. The hospital services are reduced to emergency services alone.
- Qatar Red Crescent Society (QRCS) sustains its field hospital and mobile clinic services in Bent Jbeil. During the first week of 2007, 185 and 195 patients received medical care from the field hospital and the mobile clinic respectively.
- USJ provided, during a one-day intervention, mammography and Pap smear services through its mobile clinic in the Qana region for 50 and 15 women respectively, in addition to a health education session on STIs attended by 30 women. USJ assessment of the situation highlights the need to sustain such activities; however, allocation of further funds is urgent.
- Caritas Lebanon is providing through the medical team of its 8 mobile clinics free of charge diagnostic tests as well as chronic and acute medications in the various Lebanese villages all over Lebanon. During the last two weeks, 620 villages were visited and approximately 11.200 persons served.

4. Preserving and supporting local health systems

- WHO started the distribution of mental health and Psychosocial support related health education materials addressing the general population and the PHC personnel were distributed to district doctors, WHO public health focal persons as well as health cluster partners in order to channel them to the various health facilities. The three leaflets and posters were developed by UNICEF, WHO, UNFPA and IMC in collaboration with the Ministry of Public Health and the Ministry of Social Affairs.
- WHO in coordination with UNRWA medical officer, Tyre district doctor and the Public committee in the camp conducted a health awareness session targeting community members and attended by more than one hundred person. Related educational materials were distributed to the participants as well as to the schools.
- District doctors and WHO public health focal points are providing continuous technical support to the health facilities in the South. The purpose is to increase the number of reporting sites and to improve the quality of reporting. A specific tool to monitor the progress of performance of reporting sites on a weekly basis is being contemplated.
- RI in collaboration with INTERSOS trained 12 nurses and doctors on mine risk education allowing the Primary Health Care specialists at RI to carry mine risk prevention education in the community and the schools.

World Health Organization

<http://www.leb.emro.who.int/>

<http://www.virtualhic.org>