

## Lebanon Crisis

### Health Cluster Bulletin # 3

Friday 15 September 2006

*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 is issued every Friday.*



Picture: WHO/Lebanon

The WHO team of engineers in the assessment of structural damage of health facilities in Tebnine.  
12 September 2006

#### Highlights

- WHO reports that the urgent needs for acute and chronic disease medication have been met and urges international donor agencies not to donate any more medicines unless shortage of specific drugs are clearly identified.
- Four cases of whooping cough and one case of diphtheria were reported and are subject to investigation.
- Unexploded Ordnances (UXOs) still pose a major threat in the south of the country leading to restrictions in movement.
- The health cluster meetings in Beirut are becoming more focused on the national strategy for early recovery of the health sector.

#### Situation Overview

- There is a general consensus among various partner organizations that there is no more need to donate essential drugs to Lebanon. According to various assessments, drugs are available and stocks are adequate. WHO urges donor agencies not to send any more drug donations. This is also to avoid risks of over prescription and to avoid environmental health problems in the disposal.
- According to the National Demining Office (NDO), the number of casualty figures due to landmines/UXOs/cluster bombs is 14 deaths and 59 injuries, of which 2 children killed and 19 injured as of September 12, 2006.
- A total of 10 Explosive Ordnance Disposal Teams are now operating in Lebanon, from the United Nations Mine Action Coordination Centre (MACC), the United Nations Interim Force in Lebanon (UNIFIL) and the Lebanese Army. To date, 464 cluster bomb strike locations have been identified and 8,500 pieces of ordnance remain unexploded. The unexploded clusters affecting large areas such as homes and farmland will stay for months and possibly years causing every day, people mutilation, injuries and death.

- At the September 8 Health Cluster coordination meeting, the World Health Organization (WHO) outlined the Ministry of Public Health (MOPH) national strategy for early recovery of the health sector. Based on the joint MOPH and WHO assessment of the health infrastructure in the conflict-affected areas in August, the strategy identifies the need to address the following issues: the high number of injured and disabled people; unmet health needs of IDPs and returnees; disruption of public health functions; damage to health facilities; impediments to health care access; and disruption to the fuel and drug supplies. In the short-term, the strategic plan notes that the challenge is to meet the immediate health needs of IDPs and returnees, particularly for vulnerable groups. In the medium- and long-term, the plan calls for re-establishing and further improving the functionality of the health system and rehabilitating damaged health.

## Health Response to the Humanitarian Crisis

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

### 1. Assessment and monitoring

- On September 8, the U. N. Office for the Coordination of Humanitarian Affairs (OCHA) conducted assessments in El Bayad, Nabatiye District, and Deir Ntar and Jmajjime, Bent Jbeil District. According to OCHA, workers have restored electricity to the town for up to 12 hours per day. The restoration of electricity has increased access to water for residents, although tankers are still necessary to fully address all needs. The team reports that there is no UXO in the village, although the presence of UXO in surrounding agricultural lands remains unclear.
- OCHA undertook assessments in Chamaa, Chihine, Tair Harfa and Majdel Zoun on 11 September. The main concern areas were in relation to the lack of electricity and the need for water tankers. There were no reports of cluster bombs in any of the villages, however they were believed to be present in surrounding orchards and fields.
- An OCHA team visited the villages of Insar, Zefta and Nmairiye; the mayors of the villages reported that they had received abundant food aid from a variety of sources and adequate numbers of blankets and other household items. However restoring water and electricity supplies still remain a major concern.
- Rumor investigation was conducted into several suspected cases of gastroenteritis outbreak in Aita El Chaab as well as animal deaths in the village of Soutanie. The rumor was verified and discarded.
- The preliminary report of the service delivery or health facility damage assessment organized by Ministry of Public Health and WHO is available online at: [http://www.who.int/hac/crises/international/middle\\_east/Lebanon\\_Crisis\\_Service\\_Availability\\_Assessment\\_29Aug06.pdf](http://www.who.int/hac/crises/international/middle_east/Lebanon_Crisis_Service_Availability_Assessment_29Aug06.pdf)
- WHO is still in the process of implementing the water and sanitation assessment in all health facilities in the South. Thirteen facilities have been assessed so far.
- UNICEF has completed documentation of all WATSAN related assistance provided to communities since August 28, 2006, thus presenting all the health partners with a crucial tool for programme planning.
- MDM Greece, and in cooperation with Qatar Red Crescent, is undertaking an assessment regarding children immunization in the areas of Marjeyoun and Khiam. The assessment includes general statistics on medicine distribution such as age groups and type of medicine distributed.
- WHO conducted an engineering assessment for the structural damage of health facilities in order to start planning for rehabilitation. The team of engineers undertook visits to 15 Hospitals and 70 Primary Health Care centers in Beirut, Saida, Tyr, Bent Jbeil, Marjeyoun, Nabatiyeh, and Baalbeck.

- WHO joined with the Special Rapporteurs for the Human Rights Council and accompanied the Special Rapporteur on the Right to Health, Mr. Paul Hunt, on a visit to Tebnine Governmental Hospital, with purpose to collect information about the hospital damage.
- On September 8, a WHO team visited the villages Srifa, Maarake, Ghandouriyeh, Kafra, Yater, Beit Leif, and Ain Ebel to assess the status of health facilities and services. The assessment team concluded that most of the health facilities are able to provide health services, although the water and power situation still represents an obstacle.
- The findings of a rapid food security assessment carried out over a two week period (27 August- 10 September 2006) by a WFP team from Nutrition, Food Market Analysis and ODAN Regional Bureaux and supported by the WFP Lebanon Office Programme Unit, were presented in a report. The needs assessment focused on food availability, food access, and food utilization.
- A UNFPA delegation visiting Lebanon, headed by the Director of the Division of Arab States, Europe and Central Asia of UNFPA at HQ, undertook a field visit to the Southern Suburbs and the South, specifically to the Mays El Jabal Public Hospital, to assess damages and identify RH needs and deliver RH drugs and kits.
- As guided by H.E the Minister of Public Health, UNFPA initiated an assessment on the RH facilities, mainly public hospitals in affected areas in order to identify their immediate needs in RH commodities. The assessment is expected to be completed by 25<sup>th</sup> September.
- WHO participated in a joint field assessment to Tebnine with UNHCR. The purpose of the assessment was to evaluate the impact of the recent conflict on the health status of the population.
- In Nabatiye Caza, Mercy Corps staff monitored the distribution of food and hygiene kits, interviewed families, and assessed needs through observations and discussions with villagers and administrators in four villages: Sarba, Kfaroua, Houmine El Faouqa, and Kfar Fila.

## 2. Health coordination

- A second coordination meeting for partners providing mobile clinics services was conducted with the participation of 6 national and INGOs. The mobile clinics matrix was finalized for Marjeyoun and Bent Jbeil
- The Tyr health cluster meetings will take place every Tuesday at 6:00 p.m., at WHO office within the Ministry of Health office.
- The Tyr water/sanitation cluster meetings will be held every Tuesday at 5:00 p.m.
- An updated contact list for UN Humanitarian Cluster Leads is available on [www.virtualhic.org](http://www.virtualhic.org).
- In reference to the protection cluster group meeting held on 5 September in the attended by National and International NGOs - a Health Cluster Matrix was compiled by WHO and sent to all the participants to identify who is doing what and where, and ensure optimum geographic and thematic coverage. This document will be in use for the next weeks meetings and to determine what further developments have taken place on these issues during the week.
- The first shelter cluster and NFIs coordination meeting took place on 7 September in the presence of HUMEDICA, Premiere Urgences, Danish Refugees Council, Islamic Relief, IOM, ICRC, and UNHCR. The meeting was an introduction to NGOS activities in South Lebanon and discussion about coordinating of NFIs distribution and possible future involvement of NGOs in permanent shelter and reconstruction.

- The Women Protection and Reproductive Health sub-cluster is undertaking a needs assessment on women/ girls' needs and problems in the affected areas towards the development of a "women and girls protection action plan" for the immediate and medium term recovery phase. UNFPA is providing technical support and coordination to the various stages of this initiative that will be implemented with the various sub-clusters' partners and UNFPA supported projects, mainly the IEC project (Information, Education, Communication for RH) at the Ministry of Social Affairs.

### 3. Filling health gaps

- WHO is in the process of purchasing 4400 rapid water-testing kits to be distributed to NGOs and other institutions in the districts of Tyr, Marjeyoun, Bent Jbeil, Nabatieh and Hasbayiah, in addition to Southern Suburbs of Beirut and Bekaa.
- On September 7-11, Mercy Corps continued to deliver drinking water and food rations to villages in Nabatiye, Marjeyoun and Jezzine Cazas, supplying 21,937 liters of bottled drinking water and food rations for 16,850 beneficiaries in 24 villages in Baalbek, Nabatiye, Marjeyoun and Jezzine Cazas.
- Islamic relief provided 2 bladder tanks (5000liter) Bayada
- WHO will provide the Ministry of Public Health (MoPH), the water authorities in the South, the Ministry of Water and energy and the Beirut Governmental Hospital with 10 portable water testing laboratories enabling the measure of a large number of parameters.
- UNICEF provided 8 trucks delivering bottled water to 9 villages in the south, providing 12,000 L per village, and totaling to 96,000L. Furthermore, UNICEF provided 10 trucks that delivered 7436 hygiene kits to 17 villages in the South.
- UNICEF will provide a total of 36,000L Bottled water for the following villages: Bir es Sanassel, Borj Qalaouiye, Braachit, Chaqra, Debel Oummiya, Deir Ntar, and Doubiye.
- As part of the ongoing UXO awareness campaign UNICEF has developed an additional brochure depicting the local contexts in which cluster bomb-lets may be encountered by the public. UNICEF has also included UXO information on the label of bottled water delivered to communities where UXOs are commonly found.
- OXFAM provided 100 tanks (1000 liters each) to repair a pod for rainwater in the South.
- WHO and the Ministry of Public Health are in the process of conducting a health facilities damage assessment in the governorates of Mount Lebanon, North including Akkar and the part of Bekka not covered yet. Data collection questionnaires are being presented to the WHO.
- MDM Greece HQs has sent a shipment including Food, Non-Food Items and Medicines to Lebanon on Monday 11<sup>th</sup> of September.
- MDM Greece has set up a "Primary Health Center" in the region of Marjeyoun providing Primary Health Services to the local population, as well as distribution of Chronic Diseases Medication to an average of 50 persons per day.
- WFP has started its second round of food deliveries north and south of the Litani River. In the southern suburbs of Beirut, 5400 packs of bread (6.8 mt) are distributed on daily basis.
- The Roro vessel, Anamcara, departed from Mersin to Beirut on 8 September carrying food commodities from WFP.
- Between the 5<sup>th</sup> and 7<sup>th</sup> of September, over 90 commercial trucks delivered food commodities and other relief supplies for WFP, UNHCR, and UNICEF from Beirut to villages in the south of Lebanon as well as southern Beirut.

#### 4. Preserving and supporting local health systems

- WHO Epidemiology expert trained this week approximately 150 doctors, nurses and other health workers on disease surveillance and outbreak investigation in Marjeyoun, Zahla, Rashaya, and Bent Jbeil. The goal is to implement the Early Warning and Response Surveillance system (EWARS) in all of the affected areas.
- WHO has mobilized a team of experts in LSS-Logistics Support System to collaborate with the task of collecting information about the humanitarian aid received and distributed in Lebanon. The main role of this LSS team is to support the WHO Representation and the Ministry of Public Health in the function on managing the humanitarian aid. The LSS was developed by WHO in conjunction with PAHO, UNICEF, WFP, OCHA, and UNHCR. The LSS-Logistics Support System has been installed in the MOPH warehouse located in Karantina. WHO pharmacists and to the administrative personal in charge of registering the inputs and outputs transaction at the MOPH have been trained on the LSS application System. Data entry has started and reports are being generated.

#### **World Health Organization**

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

<http://www.virtualhic.org>