

## Lebanon Crisis

### Health Cluster Bulletin # 14

Friday 2 February 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 on a monthly basis.*

January 2007



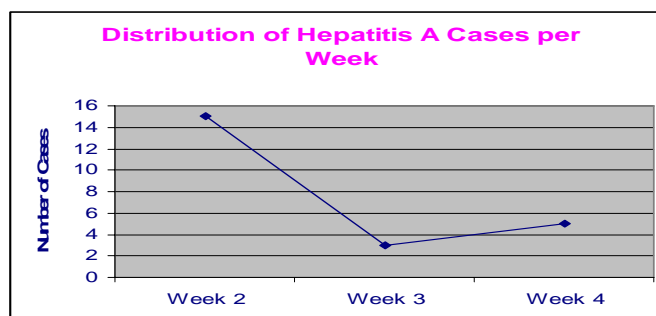
QRCS "Eye Camp" consultations including children from orphanages.

#### Highlights

- 18 new case of Hepatitis A were reported and confirmed through the Early Warning and Response System (EWARS).
- 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, water samples were collected by WHO from various sites and tested by the water authorities. The results showed no contamination and the chlorination process is ongoing.
- According to the EWARS 18 new cases of hepatitis A were reported and confirmed by serology in Tyre and Marjeyoun, in addition to two suspected Measles cases in Tyre being investigated. Tyre District doctor in collaboration with WHO conducted field visits to the affected villages. Health Education regarding Jaundice prevention was provided to the communities. On the other hand, UNICEF and water authorities collected water samples and the results showed high contamination as most of the villages use water from the main village well or collected rainwater, having no access to the main water public network. Furthermore, 5 cases of Hepatitis A were reported from an orphanage in Nabatieh and necessary interventions were taken.



- 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

- The Faculty of Health Sciences (FHS) at the University of Balamand (UoB) is finalizing the project funded by WHO on the "Well Being of Elderly in Times of Crisis". So far data on the needs of elderly gathered from a sample of 350 person in the district of Nabatieh is being analyzed. The report is expected in March 2007.
- WHO public health focal points conducted field visits to 15 and 23 health facilities in Bent Jbeil and Marjeyoun respectively, providing technical support to increase the reporting sites and improve the quality of data. The number of reports from Marjeyoun and Bent Jbeil increased substantively.
- WHO team in Tyre conducted field visits to Deir Keefa and Deir Intar to assist in improving access and coverage for basic Primary Health Care services.

### 2. Health coordination

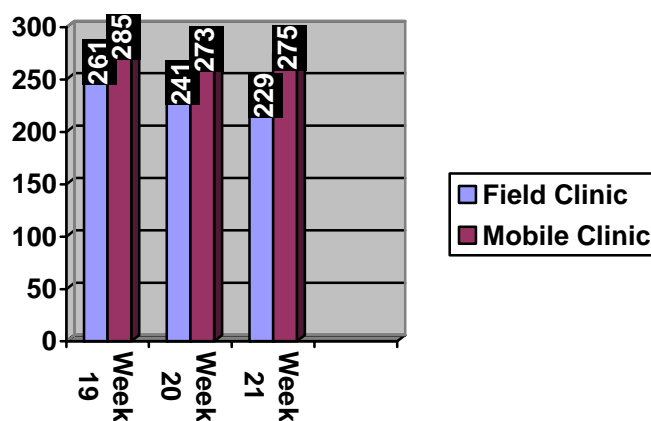
- Two health cluster meetings were conducted and attended respectively by 6 and 7 UN agencies, international and national non-governmental organizations. The next health cluster meeting will take place on February 6 at 15:00, WHO office within the Ministry of Public Health office in Tyre.
- The Mental Health and Psychosocial Support sub-cluster coordination meeting in Tyre was held and attended by 9 national and international NGOs as well as UNHCR. The next meeting will take place on February 19 at 12:00 WHO office-Tyre.
- The Health Cluster and Mental Health Matrices are regularly updated and shared with partners.

### 3. Filling health gaps

- WHO warehouse provided Rafic Hariri Governmental Hospital with approximately one ton of supplies for renal dialysis.
- WHO sub-office in Tyre provided Marjeyoun governmental hospital with medical supplies.
- Response International (RI) clinic in Qlaileh and its mobile clinics will stop the delivery of services during February. Resumption of these services depends on availability of funds.
- ANERA in collaboration with the Lebanese Alliance for Breastfeeding Action (LAECD) and partner NGOs conducted a 4 day-training on skills to advocate for best practices in breastfeeding and child nutrition in Beirut reaching approximately 40 doctors, nurses, community workers and mothers. A similar training will take place in the South during February.
- UNIFIL battalions provided, through mobile clinics, medical services for Maroun Al-Ras, Ghandourieh and Toulina (French), Kafar Hamam and Halta (Indian), Ein Arab, Debine and Blat (Spanish), Tebnine and Beit Yahoun (Belgium), Al-Qaranis and Al-Matmurah (Ghanaian), Bani Hayyan, Adshette, Qousser, and Taibeh (Indonesian), Hineyyeh (Chinese 3 days/week), as well as Naqoura (UNIFIL Naqoura Hospital).

UNIFIL next week mobile clinics will continue in: Habbarieh, Chebaa, Kafarchouba, Abu khama, Al-Fardies, Rashaya Al-Fakhar and Ebl Saki (Indian), Tebnine, Qunien, and Beit Yahoun (Belgium), Bani Hayyan, Adshette, Qousser, and Taibeh (Indonesian), Hineyyeh (Chinese 3 days/week), as well as Naqoura and Alma Chaeb (UNIFIL Naqoura Hospital).

- International Medical Corps (IMC) finalized the rehabilitation of the following health clinics: Supreme Shia Council in Kawthariet Al-Roz, Islamic Association for care and development in Yarine, Social and Cultural Club in Maifadoun, Ministry of Social Affairs in Kherbet Selem, Islamic Health Society in Rihaneh, Municipality in Rab Thlathine, Al-Sadr Charity Association in Burj Chemali and Municipality in Kfardonine.
- Tyre Cultural Club staff consisting of 2 Psychiatrists, 3 psychologists and 15 volunteering social workers, teachers, and psychologists is providing consultation and medication twice per week. Continuation of the activities depends on funds' availability.
- United Arab Emirates (UAE) repairs for Marjeoun governmental hospital are finalized. The hospital services are resumed.
- Qatar Red Crescent Society (QRCS) field and mobile clinic services in Bent Jbeil continue. During the 3 last weeks, 261, 241 and 229 patients received medical care from the field hospital as well as 285, 273 and 275 from the mobile clinic.



- QRCS conducted an "Eye Camp" in Lebanon aiming to provide consultations and treatments for Lebanese and Palestinian patients, train doctors at the Hamshari hospitals as well as provide the hospital with up to date equipments and treat cataract patients. The team consisting of 4 surgeons and 4 surgery nurses performed consultations for 1,529 persons and 56 operations.

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

- WHO in collaboration with the Ministry of Public Health resumed the Reproductive Health in Emergencies trainings targeting midwives, registered nurses as well as family and emergency doctors. So far, two trainings took place in Beirut and Zahle reaching approximately 46 participants in each location.
- The Lebanese Health Society (LHS) supported by WHO finalized the project on "HIV/AIDS Awareness, Knowledge, Attitudes and Behavior of out of School Youth in War inflicted regions of Lebanon". The project including assessment, implementation of educational sessions and evaluation of the impact concluded that an overall deficiency in awareness about HIV/AIDS and STIs existed among the out of school young males and females aged 15-21 years in the affected areas namely Bekaa, Southern Suburbs of Beirut and the South. Furthermore, the recommendations underlined the urgent need for a fully integrated HIV/AIDS/STIs prevention program in these areas. Report is available upon request.
- The FHS at the American University of Beirut (AUB) will be holding a short course on "Public Health in Complex Emergencies" from April 16 until 28, 2007. The purpose of the 12-day course is to improve the quality of public health assistance to refugees

and displaced persons in emergencies by helping participants become well-informed decision-makers and managers of public health policy in complex emergencies. For more information, visit: <http://fhs.aub.edu.lb/phce>.

- 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.

**World Health Organization**

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

<http://www.virtualhic.org>