



LEBANON

Health Emergency Response

Situation update #12

7 - 13 December 2024

MOPH hotline for the displaced 1787

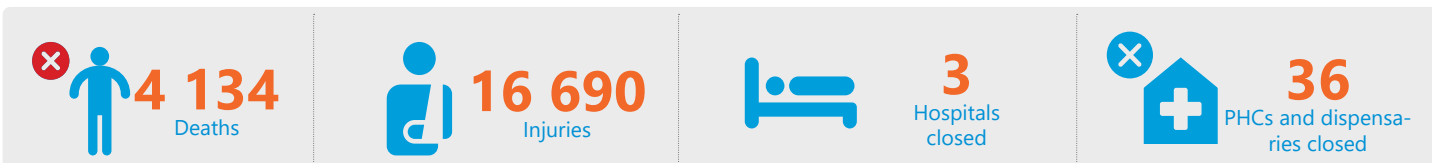
Highlights of the week

- Three weeks into the ceasefire agreement that came into effect on 27 November, WHO's priority is to restore health services and medical supplies, prepare a battered health system for the future, and ensure continued strong disease surveillance.
- Despite several reports of ceasefire violations resulting in **52** injuries and **87** deaths, there have been no reported attacks on health care since the ceasefire took hold.
- Health infrastructure all over Lebanon has been impacted by the conflict; with areas that have not been directly hit or impacted taking on patients from regions where health services had collapsed.
- **3** hospitals remain closed with **4** hospitals already gradually reopening following repairs.
- Distribution of medical supplies and capacity building for frontliners continues despite cessation of hostilities. **Two** Trauma Care Management trainings took place in the reporting period.
- As of 11 December, some **38** nurses have been trained on MHPSS on e.g. breaking bad news.
- An additional 4 first aid kits were distributed to a Primary Health Care Center in Tripoli on 11 December, totaling in more than **1 000** kits distributed since November.
- WHO and PHEOC teams continued to assess the evolving situation in Bekaa and Baalbek-Hermel and needs of the populations who recently arrived from Syria to the collective sites.

People in need 2024

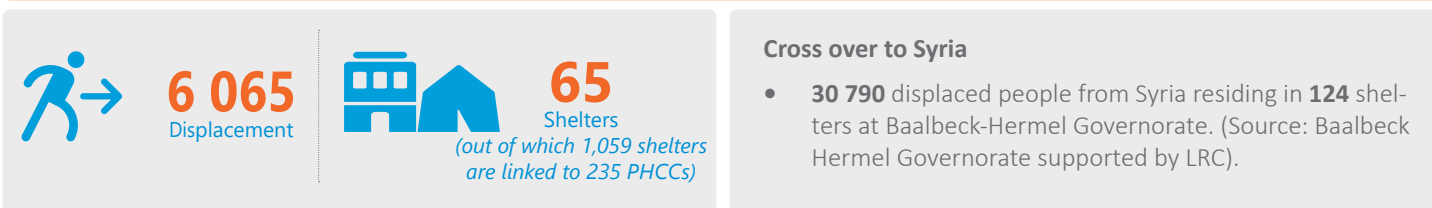


Facts & Figures as of 10 December 2024



Hospital functionality: Out of the 7 previously closed facilities, 4 hospitals have reopened in Baalbek and Mount Lebanon while 3 more are to re-open in coming days.

Displacement (Reported by IOM-DTM)



Attacks on health care (Surveillance System for Attacks on Health Care (SSA) as of 6 December 2024)



IN RESPONSE

Medicine and supplies

During the reporting period:

- 4 first aid kits were distributed to a Primary Health Care Center in Tripoli.
- An ECHO humanitarian flight with medical supplies is expected on 14 December.
- Adequate trauma emergency kits and other essential medical supplies are prepositioned at MOPH warehouses and hospitals across the country.
- The YMCA and MOPH began distributing chronic medication to some of the primary health centers and dispensaries that had been reopened.

Case Management Capacity for trauma care and cholera

- Advance trainings under the Trauma Care Program continued during the reporting period:
 - 2nd round of a 3-day training on the essentials in emergency critical care, targeting **19** nurses from **6** hospitals, totaling **41** nurses trained in **13** hospitals so far.
 - Two rounds of a 3-day training on damage-controlled resuscitation for trauma care in conflict situations for ER nurses and doctors, targeted **59** healthcare workers.
 - Two-days training on breaking bad news in conflict situations targeted **38** health workers.
- Conclusion of the training for cholera preparedness and response with a total of **970** trained staff working in different hospitals and PHC centers from North and Bekaa areas.

Surveillance

- Between 2-8 December, 13 signals of infectious diseases were received among IDPs in shelters through the call center (46%), Epidemiological Surveillance Program or ESP (8%) and DHIS2 (46%). Health facilities were the primary source of information (61%), followed by communities (31%) and municipalities (8%).
- The Epidemiological Surveillance Unit (ESU) selected 69% of signals and excluded 3 rabies and 1 HIV signals that were referred to primary health care centers. Out of those, 100% were verified, with cases of e.g. food poisoning and AWD.
- The Epidemiological Surveillance Unit (ESU) continues testing water sources for possible Hep A and AWD, with 4 samples from different water sources such as Baysour, Batroun and Tripoli, with all samples testing positive for Hepatitis A.
- The 1st phase of a vaccination campaign targeting children in shelters ended with a total reach of **11 870** children under the age of 10, slightly lower than the target of approx. **15 000**. Of these, **10 818** received MMR doses and **6 074** OPV doses.
- WHO continues to support the MOPH 1787 call center, which has received a cumulative of **11 034** calls since September 2024. Last week, **200** new calls were received, averaging **35** calls per day.

Coordination (health sector and PHEOC)

- Health sector partners are making efforts to provide life-saving health services to the displaced returning to the South, Bekaa and suburban Beirut. Together with MOPH, partners are trying to reopen closed health facilities with minor repairs to improve access and services.
- Health sector partners are actively assisting the populations that have recently arrived from Syria to the collective sites in Bekaa. Assessment of health services needs among the new arrivals will be conducted next week in coordination with PHEOC and WHO.
- On 9 December, MOPH conducted a retreat to review, document and analyze achievements, challenges and lessons learned from the emergency response, focusing on the following thematic areas a) Casualty Care b) Care of Displaced Populations including Disease Surveillance c) Medications and Supplies Logistics d) Cross-cutting Areas e.g. Coordination, Digitalization, Monitoring, and Communication.

Continuity of essential health services

- So far, **38** participants from hospitals have been trained in Breaking Bad News in Conflict Situations, with very positive feedback from attendees.
- Despite most shelters closing after the ceasefire announcement, PSUs continue to provide services to the **45** remaining shelters housing IDPs.
- Currently, 85% of the **64** chronic Essential Medicines are available under the Chronic Medication program.

Challenges

- Continued movement of IDPs to areas where health systems have been hard hit – poses a challenge to continuity of life-saving care.
- Increased population movement from Syria to Bekaa and Baalbek-Hermel governorates
- Mass casualty capacity at referral hospitals is limited in some areas.
- Lack of basic services such as water and sanitation in conflict-affected areas heighten the risk of infectious diseases outbreaks
- Funding shortages for health sector partners.

Flash appeal

- WHO Lebanon launched a [Flash Appeal](#) to provide a comprehensive response to the current and unprecedented health crisis, to scale up trauma care, ensure continuity of essential health services and prevent disease outbreaks.
- As of 5th December, approximately 70% of the target has been reached, indicating a need to urgently scale up support in order to tackle persistent post-ceasefire needs.

For more information please contact

- Dr Abdinasir Abubakar, WR, abubakara@who.int
- Dr Alissar Rady, Team Lead, radya@who.int
- Dr Md Shajib Hossain, Health Sector Coordinator, smd@who.int