



# LEBANON



## Health Emergency Response

Situation update #6

27 - 31 October 2024

**\*\*MOPH hotline for the displaced 1787\*\***

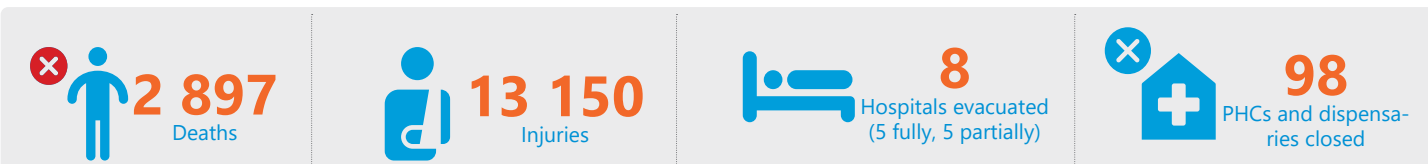
### Highlights of the week

- During this reporting period (26 October – 31 October), **892** injuries were reported with **267** registered deaths.
- Thousands of people were forced to flee Baalbek city following city-wide evacuation orders leading to increased forced displacement to different areas.
- In the past two days, there have been **6** attacks on health care, resulting in **9** deaths and **5** injuries among health workers. The continuous attacks on health care are hindering the lifesaving response operations of front-line health care workers.
- **10** trauma kits were prepared and delivered to Zahle Governmental Hospital and **12** trauma kits were sent to Turkish Hospital in Saida as a contingency stockpile.
- Three field assessments were conducted in **3** trauma centers with additional visits planned for the remaining three centers.
- WHO's WASH response to possible AWD outbreaks has been activated to strengthen surveillance, support water testing laboratories and building capacity of the healthcare system to respond.
- The influenza vaccine rollout targeting high-risk groups is moving forward, and over **6 319** doses of influenza vaccine have been administered at **307** PHCCs so far.
- The conflict is having an impact on the specialized PHCCs offering mental health services, and only **68** out of **72** facilities are functioning.
- **Three** field assessments were conducted in **3** trauma centers with additional visits planned for the remaining three centers.
- Thousands of people fleeing Baalbek city following city-wide evacuation orders leading to increased forced displacement to different areas.
- Procurement and distribution of medications and supplies to hospitals is ongoing to ensure adequate mass casualty management capacity and ensure continuity of essential services.

### People in need 2024



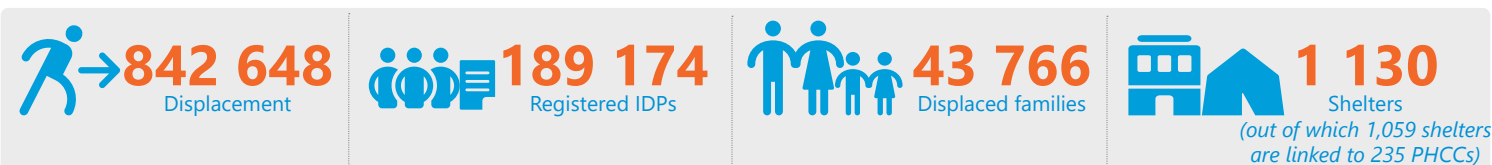
### Facts & Figures as of 31 October 2024



**Hospital functionality:** Out of hospitals in conflict areas (Baalbek, Baabda, Marjeoun, Bint Jbeil & Tyre district)  
**8** non-functional | **7** semi-functional | **4** infrastructural damage

### Displacement

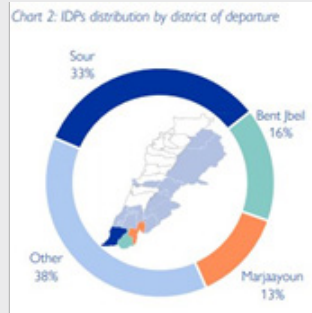
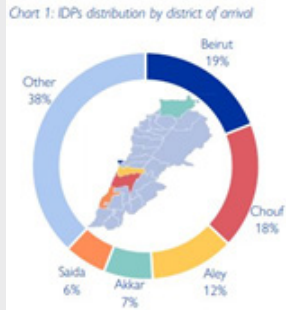
(Reported by IOM-DTM round 58 and National Operations Room for Disasters and Crisis Management, 31 October)



#### Cross over to Syria

- **522 305** people estimated to have crossed from Lebanon to Syria as estimated by the Lebanese General Security as of 29 October.

## Attacks on health care (Surveillance System for Attacks on Health Care (SSA) as of 31 Oct 2023)



Source: IOM/DTM 31 October 2024

### Continuity of health services for IDPs (Updated as of 31 October 2024)

- 98 health centers (PHCCs and dispensaries) in war zone out of 207 are closed
- 245 MMUs teams.
- 97 784 IDPs received consultations in PHCs/MMUs
- 239 PHCs serving displaced
- 303 centers received medications to support IDPs
- 69 326 IDPs receiving chronic medications.

## IN RESPONSE

### Supplies

- During the reporting period, **23** TESK kits were delivered to **4** hospitals in Beirut, Saida and Zahle as of 29 October. Per the request of the MoPH, **12** kits were sent to Turkish Hospital in Saida and another **10** kits to Zahle Governmental Hospital, as a contingency stock if the roads got blocked, to be able to distribute to the hospitals in need in the near areas.

#### In the pipeline

- **1 500** First Aid kits procured locally and under preparation to be distributed in shelters.

### Case Management Capacity for trauma care

- Mass trauma management and other critical health services capacities in Bekaa, Baalbek and Nabatiyeh continues to diminish due to closure of hospitals and PHCCs.
- Ongoing weekly Trauma working group meeting with PHEOC to address key challenges and urgent needs to enhance the mass trauma management capacity.
- WHO Emergency Medical Team periodic emergency meetings are taking place with MoPH and partners for technical support.

### Coordination (health sector and PHEOC)

- Health partners are supporting **239** PHCCs and **245** PHC Satellite Units (PSUs) and teams providing health services to **1 059** collective shelters linked with **235** PHCCs to ensure continuation of health services among IDPs.
- Due to insecurity, **98** PHCCs and dispensaries and 8 hospitals are now closed, whereas **7** hospitals are partially operating which is impacting the service delivery. Especially in Nabatieh governorate, access to life-saving obstetric care and deliveries is not available for the people who remained within the conflict zone.
- One field visit was conducted to a collective shelter and PHCC in Kfardebian to understand needs from the community, with the participation of Health sector, UNFPA and UNHCR.
- In close coordination with ESU-WHO, the sample pick up request procedure was agreed upon using a prescribed form and this was tested over the weekend with the 1st sample pick-up going well.
- Distribution of Cholera RDTs to **2** sentinel sites in Aarsaal.
- Collective shelters – PHCC dashboard updated, Emergency Report Issue #4 is out, Relief Web updated, September At a Glance is out.



## Case Management Capacity for trauma care

- Five field assessments conducted to Baabda Governmental Hospital, Karantina Governmental Hospital, Rafik Hariri University Hospital, Sibline Governmental Hospital and Elias Hrawi Governmental Hospital.
  - Public hospitals face major issues with underfunding and low retention of healthcare workers, especially RNs, impacting overall capacity.
  - Key gaps were identified in specialized care roles needed, such as reconstructive and orthopedic pediatric surgeons, as well as ER doctors, which EMTs could help fill.
  - The number of conflict-related patients needing referrals outside the established healthcare system remains low, indicating no need for a major EMT deployment but rather a limited, gap-filling presence.
- Ongoing preparation for the Cholera preparedness and response training for 29 health facilities in the North and Akkar Governorates by PHEOC team together with senior nurses and medical doctors. A series of training courses will be initiated in the coming period.

## Surveillance

- During this reporting period, 34 signals of infectious diseases were received among IDPs in shelters, including AWD, food poisoning, hep A, respiratory infections, suspected TB, measles, scabies and lice. Epidemiological Surveillance Unit (ESU) teams have initiated investigation and verification of signals and referrals.
- Following a confirmed case of Cholera, 75 surveillance investigations were conducted in Akkar and Minieh-Danieh in relation to the confirmed case. During the field investigation:
  - 83 RDTs were performed; of these, 82 negative and 1 positive by RDT, but was later confirmed as negative by culture.
  - Testing targeted household contacts, and AWD cases in ITS, shelters, orphanage and school.
  - 16 samples were collected from water sources, which were all negative for cholera.
- Supported 33 training sessions targeting NGOs, municipalities, schools and medical centers on surveillance and monitoring, with 1,065 participants.
- Supporting the call center 1787 at ESU unit to provide health information and referral to displaced people and other vulnerable people. The call center received over 7973 calls since September 2024.
- Phase 1 of the national supplementary immunization campaign targeting those IDPs 0-59 months of age with bOPV and 9 months to under 10 years of age with MMR is planned to start in November 11. Training material finalized and training of PSUs and other PHC-led interventions was completed.
- Procured and prepositioned 1,000 Rapid Diagnostic Tests (RDT) and Cary Blair/Transport medium.

### For more information please contact

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## Continuity of Essential Health Services

- The assembling of **1 500** First Aid kits is in the final stage and these kits will be distributed to shelters to help the displaced people. The distribution will be coupled with general health education and how to use the kits.
- WHO is working closely with MOPH, PHC Department and NMHP on technical guidance related to health activities in shelters such as the review of guidance for the psychotropic medications dispensing as well as the Emergency Response Model for Internally Displaced Persons in the Context of the Long-Term Primary Healthcare Subsidization Protocol, etc.
- WHO worked with the MOPH and the Nutrition Sector on the review of the simple rapid assessment tool for infant and young child feeding. This tool is used during needs assessments for mothers and caregivers of children under 24 months in shelters.
- WHO is working closely with the MOPH, Nutrition Sector and UNICEF on the technical guidance for the Breast-Milk Substitutes (BMS) kit. This aims to standardize the supplies that accompany infant formula to minimize the risks associated with artificial feeding in emergency settings. In addition to reviewing and updating the national guidance relevant to the prevention and treatment of malnutrition cases.
- The provision of health services to displaced people has been scaled up with over **245** Mobile Medical Units (MMUs) providing health services to the shelters.
- Over **97 784** displaced people received consultations by the PSUs that are linked to the PHC network.
- The utilization of the e-mental health application Step-by-Step has significantly increased, with **20** new users joining between October 21st and 27th.
- **163** new calls to the national hotline for emotional support and suicide prevention, the 1564 Lifeline managed by Embrace
- **68** PHC centers with specialized mental health services are functioning.

## Challenges

- Increased and recurring attacks on healthcare (health workers, facilities, and ambulances) are impacting the access and availability of health services in conflict affected areas
- Increased number of health facilities closing and shortage of health workers.
- Patient referral is restricted in conflict affected areas due to security issues and limited mass casualty capacity at referral hospitals in some areas.
- Large increase in numbers of displaced people with suboptimal shelter conditions may lead to resurgence of emerging infectious disease.
- Funding shortage for health sector partners.

## Flash appeal

- WHO Lebanon launched a [Flash Appeal](#) to provide comprehensive response to the current and unprecedented health crisis, seeking support in the amount of USD 50 million to scale up trauma care, ensure continuity of essential health services, and prevent disease outbreaks.