



# World Health Organization

## Lebanon Crisis Appeal:

WHO's appeal to support relief operations  
24 July 2006

### A. Introduction

The purpose of this document is to present donors with a current situation analysis and an idea of the current needs of WHO, in its mission to support the Ministry of Health (MOH) and affected population of Lebanon. This appeal can be read in conjunction with the UN Flash Appeal, in which WHO has and will continue to work closely with all health stakeholders.

### B. Current Health Situation Analysis

- Lack of access has thus far made any comprehensive assessments impossible. Hence, reliable information on numbers affected and the magnitude and scope of impact/needs are not yet available. However, sporadic reports from the Government, UN and NGO sector consistently highlight: war injuries, seriously disrupted access to basic health care (including access to specialized care for the chronically ill), alarmingly low availability of drinking water, diminishing fuel supplies, food insecurity and precarious hygiene and sanitation.
- Current reports (as of 21 July) are of increasing numbers of dead (over 325) and wounded people (1,330 wounded), and over 500,000 displaced, of which around 98,000 are temporarily housed in schools and other public sector/communal locations. Coupled with limited access to the country in general and the worst affected areas in the south in particular, provision of lifesaving relief to the affected – food, shelter, health care, safe drinking water and waste disposal – is proving extremely difficult.
- Lebanon is a country experiencing demographic, economic and epidemiological transitions; a double disease burden – diseases of affluence (kidney and heart ailments, diabetes, hypertension and cancer) coupled with infectious and communicable diseases – compounds the health impact of the current crisis, and makes health relief costly and complex.
- Due to the destruction of infrastructure and insecurity, provision of specialized care and medicine and consumables for the chronically ill (diabetics, hypertensive, patients with heart and renal impairments, HIV/AIDS, etc.) and the provision of basic health and sanitation services – immunization, antenatal care, trash/waste removal, etc. – to the majority of the Lebanese population have been curtailed. The consequences for the ailing are serious and the risk of disease outbreaks is increasing for everybody.
- The result of this context is and will continue to be: increasing needs for triage, trauma and referral care, including for maternal and newborn problems; for alternative forms of management of chronic diseases and safe access to quality primary health care (maternal, newborn and child health, reproductive health and mental health included); and physical rehabilitation and care for the disabled (which will also have to start early in the humanitarian/relief phase).
- Given the displacement of large parts of the Lebanese population to neighboring countries (as of 21 July over 150,000 to Syria alone), there is considerable need to support relevant Ministries of Health and other health actors in assessing and providing health services to those refugees affected and in need.
- Humanitarian response from a health stand point is being envisaged from a regional perspective i.e. with surge capacities established in tandem in neighboring countries –

Amman, Jordan; Damascus, Syria; and Larnaca, Cyprus to afford flexibility and operational freedom to the operations in wake of geographical expansion of conflict and/or changing security situation. This regional presence will symbiotically provide the capacity to coordinate and offer health assistance to the aforementioned refugee populations in neighboring countries.

- Based on past experiences (the South East Asia Earthquake, Tsunami and others) it is also imperative that the support and assistance for the relief phase is linked to sustenance of essential health services. That means that the revitalization and recovery of the health system takes place in a coherent and comprehensive manner, addressing challenges from a holistic approach, so that no critical gaps are left during the transition from relief to early recovery, because it is in the latter part where the resource influx and international organizational support usually tapers abruptly.

### **C. WHO Expected Results, Objectives and Activities**

Given the current situation, WHO aims to support the Ministry of Health (MOH) and health partners in sustaining lives and alleviating suffering through the following key expected results, objectives and activities:

#### ***Expected Results***

- Health needs identified and coordinated health response from all partners mounted, including effective mechanisms for health information collection, reporting and dissemination and critical capacities to facilitate transition from relief to recovery;
- Reduction of avoidable mortality and morbidity from trauma as well as communicable and non-communicable diseases and maternal risks, through access to safe and quality primary, secondary and tertiary health care services, as well as environmental health for all affected populations;
- Capacity of the Ministry of Health in health crisis management strengthened.

#### ***Objectives***

- Effective mounting and coordination of the humanitarian response in the health sector, including establishing a flexible capacity and regional approach to operations;
- Assessment of health impact, damage to health infrastructure and emergency needs of the health system;
- Monitoring of health threats and risks, including provision and / or enhancement of the early warning surveillance and outbreak response systems;
- Address critical threats with appropriate and quality primary health care actions and strengthening secondary and tertiary levels of medical care in the affected areas;
- Provide logistical and other operational support for a high risk environment<sup>1</sup>, to ensure efficient management of humanitarian supplies and medical donations;
- Address gaps in health services delivery, and support in reestablishing essential and emergency medical, public health and environmental health services;
- Supporting the relevant Ministries of Health and other health stakeholders in coordinating and responding to the health needs of the Lebanese refugees, displaced to neighboring countries.
- As soon as is feasible, assist the MOH and health stakeholders through technical guidance and support, in ensuring a seamless transition from relief to recovery, so that the local health systems (infrastructures as well human resources) and the capacity of national/local health authorities are repaired and strengthened.

---

<sup>1</sup> Optimal safety and security for all UN agencies (MOSS compliance) and all other health actors is vital and as such will accordingly increase operational costs

**Key Activities**

- Establishment of Health Emergency Operation Hubs (Damascus/Amman/Larnaca) and forward operating offices in Lebanon (if and when feasible);
- Establishment of a coordination mechanism involving all health sector partners, and co-led by the MOH;
- Detection, investigation and response to disease outbreaks;
- Improvement in environmental health services for affected populations through, for example, provision of safe water supply and sanitation services at health facilities; quality control and testing of water in IDP and refugee settlements;
- Assist MOH and other health partners in improving access and coverage for basic PHC health services to IDPs, refugees and host communities;
- Ensuring availability of comprehensive secondary and tertiary health services (systems and structures) and timely and appropriate referral services are available for affected populations through adoption of referral protocols; supporting functional ambulance services; strengthening in-patient treatment of medical and surgical conditions;
- Monitoring and mapping the health vulnerabilities of the different affected populations;
- Establishing mobile health care units and strengthening functional health centers capable of delivering maternal and child health, reproductive health, non-specialized mental health services, and chronic disease management;

**D. WHO Health Projects**

Health		US\$
WHO LEB-06/H01	<p><b>Project Title:</b> Emergency Health Response / Sector Coordination and Information Management</p> <p><b>Objective:</b> To establish and lead together with MOH, a coordination mechanism involving all health sector partners</p> <p><b>Beneficiaries:</b> 800,000 directly affected population</p> <p><b>Partners:</b> Ministry of Health, UNICEF, UNFPA, OCHA and all other health stakeholders</p>	225,000
WHO LEB-06/H02AB	<p><b>Project Title:</b> Disease Surveillance and Early Warning</p> <p><b>Objective:</b> To detect, investigate and respond to disease outbreaks.</p> <p><b>Beneficiaries:</b> 800,000 directly affected population</p> <p><b>Partners:</b> Ministry of Health, UNRWA and other stakeholders</p>	550,000
WHO LEB-06/H03AB	<p><b>Project Title:</b> Environmental Health Response</p> <p><b>Objective:</b> To improve the environmental health services for affected populations</p> <p><b>Beneficiaries:</b> 800,000 directly affected population</p> <p><b>Partners:</b> Ministry of Health, UNICEF, UNRWA and other stakeholders</p>	350,000
WHO LEB-06/H04ABC DE	<p><b>Project Title:</b> Provision of primary health care services</p> <p><b>Objective:</b> To assist MOH and other health partners in improving access and coverage for basic PHC health services to IDPs and</p>	3,000,000

	<p>host communities  <b>Beneficiaries:</b> 800,000 directly affected population  <b>Partners:</b> Ministry of Health, UNICEF, UNFPA, UNRWA Response International and other stakeholders</p>	
<p><b>WHO</b> LEB-06/H05ABC</p>	<p><b>Project Title:</b> Hospital/Referral Care Services (Secondary and Tertiary level) and Mass Casualty Management  <b>Objective:</b> To ensure that comprehensive secondary and tertiary health services (systems and structures) and timely and appropriate referral services are available for affected populations  <b>Beneficiaries:</b> 800,000 and host communities  <b>Partners:</b> Ministry of Health, UNFPA, UNFIL, Lebanese Red Cross and other stakeholders</p>	<p><b>3,200,000</b></p>
<p><b>WHO</b> LEB-06/H06ABC</p>	<p><b>Project Title:</b> Emergency Reproductive Health assistance to Women and families affected by the crisis  <b>Objectives:</b> To assist the Ministry of Health and NGOs in increasing access and providing basic RH care services including counseling to IDP women  <b>Beneficiaries:</b> circa 500,000  <b>Partners:</b> Ministry of Public Health, UNFPA UNICEF, local NGOs</p>	<p><b>500,000</b></p>
<p><b>WHO</b> LEB-06/H07</p>	<p><b>Project Title:</b> Relief to Recovery Transition Management  <b>Objective:</b> Assist the MOH through technical guidance and support in relief to recovery phase.  <b>Beneficiaries:</b> 800,000 directly affected population  <b>Partners:</b> Ministry of Health, UNICEF, UNFPA and other stakeholders</p>	<p><b>850,000</b></p>
<p><b>WHO</b> LEB-06/H11</p>	<p><b>Project Title:</b> Contingency Fuel Stock  <b>Objective:</b> To provide fuel to humanitarian agencies to carry out humanitarian activities to assist the affected population  <b>Beneficiaries:</b> Affected population  <b>Partners:</b> Humanitarian agencies</p>	<p><b>1,000,000</b></p>
<p><b>WHO</b> LEB/SYR-06/H01</p>	<p><b>Project Title:</b> Outbreak prevention among Lebanese refugees settled in Syria  <b>Objective:</b> To prevent the spread of communicable diseases among all age groups of Lebanese refugees  <b>Beneficiaries:</b> all refugee populations MOH and NGOs  <b>Partners:</b> MOH and NGOs</p>	<p><b>350,000</b></p>
<p><b>WHO</b> LEB/REG-06/H01</p>	<p><b>Project Title:</b> Initial Assessment and Emergency Operations  <b>Objective:</b> To establish Emergency Operation Hubs (Damascus/Amman/Larnaca) and forward operating offices in Lebanon (if and when feasible)  <b>Beneficiaries:</b> 800,000 directly affected population  <b>Partners:</b> Ministry of Health and selected health stakeholders</p>	<p><b>2,900,000</b></p>

<p><b>WHO</b> LEB/REG- 06/H03ABC D</p>	<p><b>Project Title:</b> Health Services for Lebanese Refugees in Neighboring Countries  <b>Objective:</b> Provision of quality essential health services, surveillance and disease control, reproductive health, health and nutrition under five, to refugees in neighboring countries on an equitable basis  <b>Beneficiaries:</b> Initial estimates of 150,000+ refugees  <b>Partners:</b> Relevant Ministries of Health, UNICEF, UNFPA, UNHCR, National RC/RC societies and other health stakeholders</p>	<p><b>1,000,000</b></p>
<p><b>Total:</b></p>		<p><b>13,925,000</b></p>