



Lebanon: Beirut Port Explosions

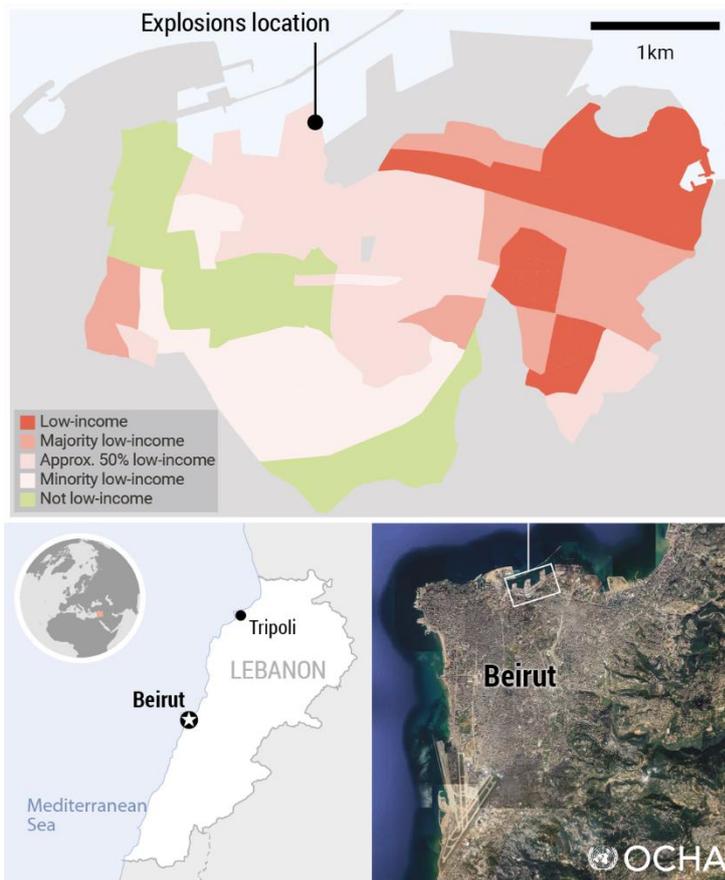
Situation Report No. 7

As of 25 August 2020

This report is produced by OCHA Lebanon in collaboration with humanitarian partners.

HIGHLIGHTS

- Offloading of the 12,500 metric tons of wheat flour received on 18 August is ongoing.
- Since 9 August, WFP provided 200 food parcels to support communal kitchens, serving 3,000 hot meals a day across three most affected neighbourhoods.
- Shelter partners distributed 1,562 weatherproofing kits between 19-22 August. Since the explosions, a total of 4,163 households were reached by shelter partners.
- WASH partners installed 277 water tanks to serve 480 households in Gemmayzeh and Mar Mikhael, and 80 per cent of buildings without water points are now reconnected to the public network.
- The total number of damaged private and public schools reached 178, up from an initial estimation of 120.
- As of 25 August, 564 health workers were diagnosed with COVID-19.



Map Sources: Google, OCHA, SDATL, UNGIS, UNHABITAT.
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Map created 13 August 2020.



\$565M

Financial requirements



180+

Reported deaths



6,500+

Reported injured

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SITUATION OVERVIEW

Following initial assessments of needs in the immediate aftermath of the Beirut Port explosions of 4 August, a more comprehensive picture of the impact is forming. Priority needs for the assessed affected population include access to healthcare and food; rehabilitation of shelters; cash assistance; and livelihoods support. Needs of the affected population may however change as the response on the ground evolves and adapts.

According to UNDP, a total of 200,000 housing units were affected by the explosions, with an estimated 40,000 buildings damaged, of which 3,000 severely. Over 15,000 establishments – some 50 per cent of all Beirut establishments – are also estimated to be damaged, the majority in the wholesale, retail and hospitality sectors. This affects especially the most vulnerable who, in the affected areas, may have lost both their homes and incomes.

Poor households, refugees and migrant workers are particularly vulnerable, as they have less resources to reconstruct damaged shelters, and buy food and essential items. These groups also often live in densely populated neighbourhoods with limited access to services, including WASH and health services. Refugees of all nationalities, who were living in areas impacted by the 4 August explosions, are severely affected.

The loss of homes often result in overcrowded households and communities, thus raising other risks, including increasing the risk of COVID-19 transmission, and/or sexual and gender-based violence. According to the Lebanese Red Cross (LRC), the highest numbers of households reporting ten or more people staying under the same roof were in Mdaouar, Achrafieh and Quarantina. UN-Women and ACTED completed a descriptive gender analysis of data collected through the LRC needs assessment, and preliminary findings show that women-headed households are more likely to report physical and/or mental disabilities, as well as indicate the need for care and hygiene kits. It also shows a high number of households affected by the explosions consists of single elderly women.

Some migrants and domestic workers were reportedly abandoned by the families they worked for, and have been forced to live on the streets, often with no documentation, which may hamper their access to assistance. Migrant workers are concentrated in Geitawi, Gemmayzeh and Bourj Hammoud. There are also concern about human and sex trafficking incidents of vulnerable migrants. The dependency on service providers may further exposing them to exploitation and abuse.

In line with the recommendations of the Environment Emergency Cell, the clearance efforts of Beirut Port will be linked to the disaster waste management strategy being developed, with special considerations for hazardous waste. The explosions and ensuing fires reportedly released toxic materials in the environment that could contain asbestos, toxic dust and other hazardous waste. While the smoke that resulted from the blast containing toxic particles and gases have dissipated by now, there may be an ongoing increased risk to residents from particulate air pollution that may be laced with various metals, powdered glass, and toxins from building debris.

Lebanon has seen an increase in COVID-19 transmissions since the explosions, further straining the country's health systems. On 25 August, 532 new COVID-19 cases were reported in the country. Of these, 13 were among healthcare workers, bringing the total to 564. The total caseload in Lebanon stands at 13,687, including 138 deaths – 12 of which reported today – and 3,815 recoveries. As of 25 August, the total number of hospitalized patients is 270, with 73 in intensive care units.

HUMANITARIAN RESPONSE

Protection

Needs:

- UNHCR and protection partners have rolled out approximately 6,000 protection-related calls and assessments of Lebanese, refugees and migrant workers in the affected areas of Beirut, as well as in Bekaa and the North for those who have moved. Many families and individuals expressed psychological distress/anxiety, as well as a deterioration in their living conditions. Across all geographical areas, the main needs expressed were with regards to food, immediate cash needs (for food, rent and basic items), and shelter repair. Monitoring of these needs is ongoing and further detail will be shared as it becomes available.
- Legal issues are expected to arise as structural damage to homes generates housing, land and property issues. A lack of supporting documentation also makes it harder to claim compensation or restoration.
- Persons in the affected areas experienced multiple traumas. If unaddressed, mental health issues will aggravate over the months and years to come, thus preventing those affected from fully recovering and moving forward with their lives. Affected individuals who do not have support networks need to be assisted, including with alternative safe accommodation. In these conditions, children are particularly vulnerable.

Response:

- The Protection response takes a holistic approach, with teams on the ground completing assessments and providing immediate aid, whether through temporary shelter support to enable people to come and go safely from their homes, or by reaching out through phone calls and large-scale information tools (e.g. posters), or by referring cases to specialized services or organizations. Also, the response by specialized organizations and staff enabled to integrate the needs of refugees, women and girls, children, victims of sexual and gender-based violence, the elderly, persons with disabilities and members of the LGBTQIA+ community.
- Between 19-21 August, UNHCR and protection partners responded in areas closest to the explosions, such as Mar Mikhael, Bourj Hammoud, Gemmayzeh, and Achrafieh, as well as in other areas facing lower levels of damage, such as Jdeideh and Dekwaneh. Partners engaged with communities to ensure a well-grounded and participatory approach.



Partners that contributed include:



Also, many partners indicated they have the capacity to scale up their response, notably through the recruitment of staff and volunteers.

- Refugees of all nationalities, who were living in areas impacted by the explosions, are severely affected. As of 21 August, 14 refugees are confirmed dead as a result of the explosions, and 59 remain unreachable or missing. Also, as of 21 August, 250 refugees are confirmed injured, of whom 193 with mild injuries and 57 severely. UNHCR remains actively engaged in tracing all missing persons.

Food Security

Response:



N.B. These figures are not necessarily representative of the entirety of the food security response on the ground.

Operational partners:

WFP	Save the Children	Shareq	Farah Social Foundation	Nusaned	IHH	ACA
WVL	Tabitha-Dorcas	DPNA	Anti-Racism Movement	COOPI	Mada	Merath-LESD
Humanitarian Relief for Development Society	Michael Daher Social Foundation	Food Heritage Foundation	ESDA	AUB	LLWB	Amel Association

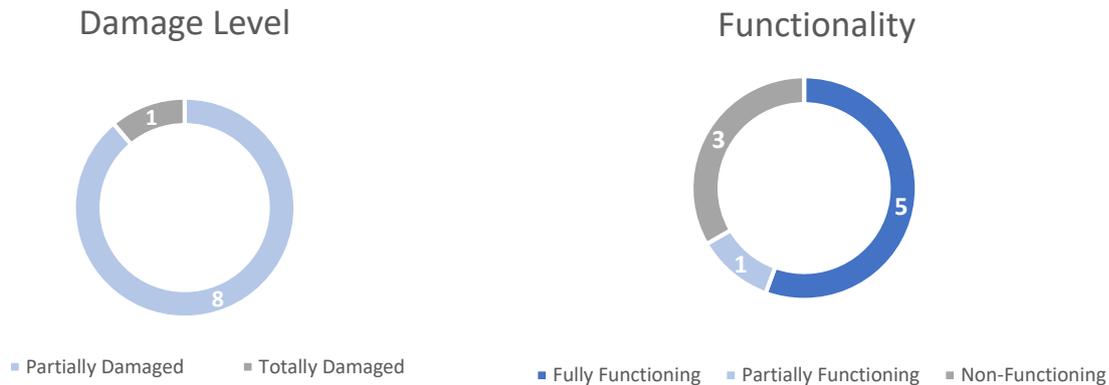
- A WFP shipment of 12,500 metric tons of wheat flour arrived to Beirut on 18 August and offloading is ongoing.
- Nutrition partners targeted 4,000 pregnant and lactating women in four different hubs in Achrafieh, Beirut Central, Mazraa, Marfaa, Bourj Hammoud, Mousaitbeh, Saife and Rmeil. Sessions and messaging on infant and young child feeding were also conducted, included on infants 0-5 months who are not breastfed but rely on infant formula supplies.
- 710 households received cash assistance by Save the Children International and Tearfund in Bourj Hammoud and Achrafieh since the explosions.

Health

Needs:

- Infrastructure:** Rosary Sisters, Geitawi Lebanese University and St. George hospitals all require major structural rehabilitation and repairs; Quarantina Governmental hospital will need to be rebuilt entirely; a further five hospitals require moderate to minor repairs.
- Patient care:** Chronic medications, as well as access to a comprehensive primary health care (PHC) package; and subsidies for reproductive health services, including the cost of consultations, lab tests, and ultrasound and diagnostic tests are needed.
- Medication and supplies:** Personal protective equipment (PPE), consumables and medical supplies needs to be replenished in the centers that provided emergency care after the explosions.
- Mental health and psychosocial support:** Affected communities report a major need for psychosocial support services.

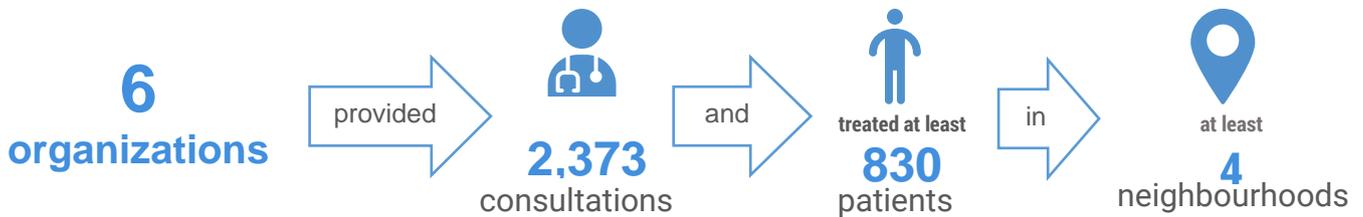
- Functionality and damage levels of hospitals assessed by WHO are as follows:



Response:

Health services

Outreach health services (mobile medical units, medical stations and home-based care)



Since the start of the response, 6 organizations provided at least 2,373 consultations, and treated at least 830 people, including 77 children. In addition, 106 women and girls received reproductive health consultations. Also, at least 890 wound care sessions were provided.

N.B. These figures are not necessarily representative of the entirety of the health response on the ground.

Operational partners:



PHC Centers

- MSF partnered with PU-AMI in supporting two PHCs in Zarif and in Bourj Hammoud working on chronic diseases medications and medical follow up, and since the beginning of the response, the Makhzoumi PHC treated 115 affected individuals.

Mental health and psycho-social support (MHPSS)

- 151 patients received psychological first aid (PFA) sessions at the IMC tents, of which 23 were referred to IMC-supported facilities, while 38 patients were referred to other organizations. CARE Lebanon Social Workers were also present in the affected areas providing PFA.
- In Quarantina, MDM provided new and/or follow-up MHPSS to 54 men and 54 women, including 22 minors. Since the start, 236 MHPSS (111 men and 125 women) interventions were provided, as well as 65 referrals.
- The Order of Malta offered PSS to the families hosted at the Chabrouh Center through a hotline.

Hospital support

- Four active Emergency Medical Teams (EMTs) are supporting six hospitals, and WHO is liaising accordingly to ensure systematic approaches and alignment with WHO standards.
- The Swiss Agency for Development & Cooperation/Humanitarian Aid (SDC/HA), in close collaboration with the EMT Module “Mother & Child”, supported the gradual restart of the Mother & Child emergency activities at St. George hospital. At Quarantina hospital, the SDC/HA construction team is rehabilitating several rooms to resume the clinical OPD activities for children.
- URDA provided medication and consumables to Makassed and Notre Dame University hospitals, and ANERA delivered 74 boxes of sutures to Rafic Hariri University Hospital.
- MSF provided support to the nursing home in St. George hospital.

Medicines, supplies and distributions

- UNICEF supported 22 youth to produce 4,840 cloth facemasks and distribute them to the families in the most affected areas, and SDC/HA distributed 450 FFP2 mask to employees at the Port, fire workers, and those involved in cleaning-up work. 2,000 IMC volunteers helping to clean up the streets received hand sanitizers and facemasks.
- ANERA distributed consumer hygiene products to 524 individuals living in affected areas, and Islamic Relief Lebanon distributed 441 hygiene kits for affected families. IMC also distributed 1,140 hygiene kits and IOCC provided dignity kits to 148 women in affected areas.
- IMC provided PPE and medical supplies to 19 PHCCs, eight hospitals and two MMUs. INARA also distributed PPS as well as conducted community outreach and distributing drinking water in affected areas.
- WHO received an Irish Aid in-kind PPE donation containing 1,000 overalls, 22,000 gloves, 48,000 medical facemasks, and 44 gallons of hand gel solution. The donation was distributed to RHUH and government hospitals in Bouar, Tripoli, Nabatieh and Halba.

Awareness raising

- UNICEF tents provided counselling to 294 persons on prenatal, breastfeeding and IYCF practices. IOCC and Makhzoumi teams also provided IYCF counseling, as well as COVID-19 awareness to PLW and caregivers at the UNICEF tents in Quarantina, Geitawi, and Basta. Since the start of the response, 524 PLW and caregivers were reached.
- MDM provided MHPSS awareness sessions to 36 persons (17 men and 19 women).

Shelter

Needs:

- As partners continue distribution of weatherproofing kits in areas further away from the blast, fewer needs are found on the ground. To ensure all needs are being met, UNHCR and partners continue to work together to match geographic zones with partners on the ground.

Response:

- Shelter partners distributed 1,562 weatherproofing kits between 19-22 August. Since the explosions a total of 4,163 households were reached in Geitawi, Mar Mikhael, Gemmayzeh and Quarantina by INTERSOS, Medair, Save the Children and CWW, as well as by ACTED, LebRelief, PU-AMI, and Solidarités International. Of those reached, 80.5 per cent are Lebanese, 16 per cent are Syrians, and 3.5 per cent are of other nationalities. As partners expand distribution to areas hosting a higher number and/or concentration of other affected refugees and migrants, the proportion of assisted Lebanese compared to that of other nationalities has decreased.

Water, Sanitation and Hygiene

Needs:

- Out of 3,644 buildings assessed, 125 were found without water points, and 818 were not accessible at the time of the visit (either unoccupied or lack of willingness to be assessed). The water systems of 541 buildings is damaged in addition to over 3,500 roof-water tanks. Also, the wastewater system of 370 buildings is damaged.

Response:

- LebRelief, DPNA and GVC provided support to ensure that 99 out of the 125 buildings without water points could be reconnected to the public network, and 277 water tanks were installed to serve 480 households in Gemmayzeh and Mar Mikhael.
- UNICEF and partners distributed 3,441 hygiene kits and 424 baby kits to the most in-need families in Bachoura foncière (LRC), Rmeil (Concern and Medair), and Quarantina (ACTED).
- The Water Establishment of Beirut & Mount Lebanon, with technical support from UNICEF, continues to assess potential damages to the water network. Preliminary findings indicate damages to manholes in the area around the explosions.

Gaps and constraints:

- The immediate availability of water tanks is identified as a bottleneck to the timely repair of water systems at buildings' level; UNICEF supply department is looking for additional suppliers to the previously contracted ones.

 Education**Response:**

- The needs assessment led by the Ministry of Education and Higher Education (MEHE) continues: the total number of damaged private and public schools reached 178, up from an initial estimation of 120. Further data on disaggregation, as well as the required resources required for rehabilitation and reconstruction are forthcoming.
- Within the MEHE-established Beirut Blast Response Committee, UNESCO continues to coordinate partners engaged in the rehabilitation works. An exercise is currently underway to map those partners that expressed an interest in supporting school rehabilitation to mobilize funding, as well as highlight any funding gaps.

 Emergency Telecommunications (ETS)**Response:**

- With data connectivity confirmed available at the Beirut Port, the ETS does not foresee the need to proceed with the provision of connectivity, as originally planned and reported. As such, the Humanitarian Country Team agreed the sector would be stood down.

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