



Situation Report

Lebanon- Beirut Port Explosion

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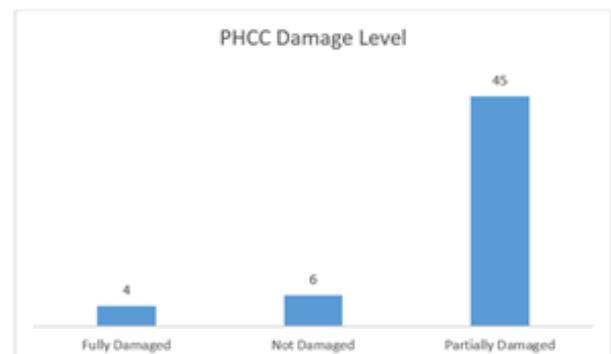
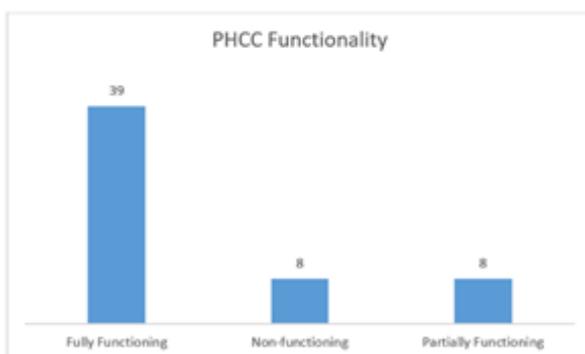
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Situation overview

- A month has passed since large quantities of ammonium nitrate at a warehouse in the Beirut port exploded, causing massive humanitarian and financial losses. According to the Ministry of Public Health, the death toll has reached 190, with three people still missing, more than 6,000 injured, and more than 300,000 displaced. In addition, many people are showing symptoms of severe psychological distress.
- The Rapid Damage and Needs Assessment (RDNA), launched by the World Bank Group (WBG), in cooperation with the United Nations (UN) and the European Union (EU), determined that the blast caused between \$3.8 and \$4.6 billion in damages to infrastructure and physical stock. With a major focus on the worst affected areas within a five-kilometre radius of the explosion site, the RDNA covered 16 sectors, including health, housing, education, culture and social protection and jobs.
- According to a UNFPA assessment of 55 Primary Health Care Centers (PHCC) within 5 kilometres of the blast, less than 50 per cent of the centres reported that they provide the full package of sexual and reproductive health (SRH) services, including maternal and newborn care, and treatment for sexually transmitted infections (STIs). While almost 71 per cent of health facilities are still functional, only 47 per cent of surveyed facilities can provide full routine health services.



18,365
confirmed cases of
COVID-19
in Lebanon

23,000
dignity kits
distributed to women
and girls

Of those displaced,
84,000 are women
and adolescent girls
of reproductive age

4,000 women are
currently pregnant
with 444 to give birth
in the coming month

- The steady increase of COVID-19 infections continues to pose a threat to the population. 598 cases were reported in Lebanon on 2 September 2020, with the cumulative number reaching 18,365 confirmed cases - a daily increase of about 5 per cent since the blast. Among the new infections that day 6 cases were reported among healthcare workers raising the total number of infected healthcare workers to 679. The cases are reported from Tripoli Governmental hospital, Makassed hospital, Geittawi hospital and the American University of Beirut Medical Center. In the meantime, the Ministry of Interior and Municipalities, in consultation with citizens and businesses, has relaxed the coronavirus lockdown measures on Friday 28 August, cutting curfew by four hours (from 22.00 to 6.00) and allowing most businesses to reopen at a 50 per cent capacity.

Humanitarian Needs

- An estimated 300,000 people are currently displaced as a result of the explosion, approximately 84,000 of whom are women of reproductive age (15 - 49 years), including 24,000 adolescent girls. These women and girls continue to require support to meet their need for sexual and reproductive health, protection, psychosocial support, dignity and menstrual hygiene, as well as water and sanitation.
- Almost 4,000 women are estimated to be pregnant, with an estimated 444 expected to give birth in the coming month. These women would require prenatal care, delivery care, and postnatal care services. Local health facilities are overstretched, and transportation is required to access undamaged centres.
- A gender assessment, carried out by CARE, OCHA and UN Women, identified 178 pregnant or lactating women who were living in 171 households. At least 45 per cent of these women said they needed access to women's and children's healthcare, including gynaecological support, breastfeeding support, or vaccinations.
- According to reports by the National Mental Health Programme of the Ministry of Public Health, there is an immediate need to address the psychological needs of women and girls affected by the explosion, with a focus on post-traumatic stress, psychological first aid and psychological support needs for sexual and reproductive health and gender-based violence (GBV).
- With hundreds of thousands of people left without a home and suffering economic loss, gender-based violence and sexual exploitation and abuse continue to be a significant concern. An assessment of GBV in Lebanon since the beginning of the coronavirus pandemic showed that there has been a marked increase in the number of calls to domestic violence hotlines, as compared to the same time last year.
- As COVID-19 continues to spread, there is an ongoing need for infection prevention and control and personal protective equipment (PPE) for humanitarian first responders and health care providers.



UNFPA Response

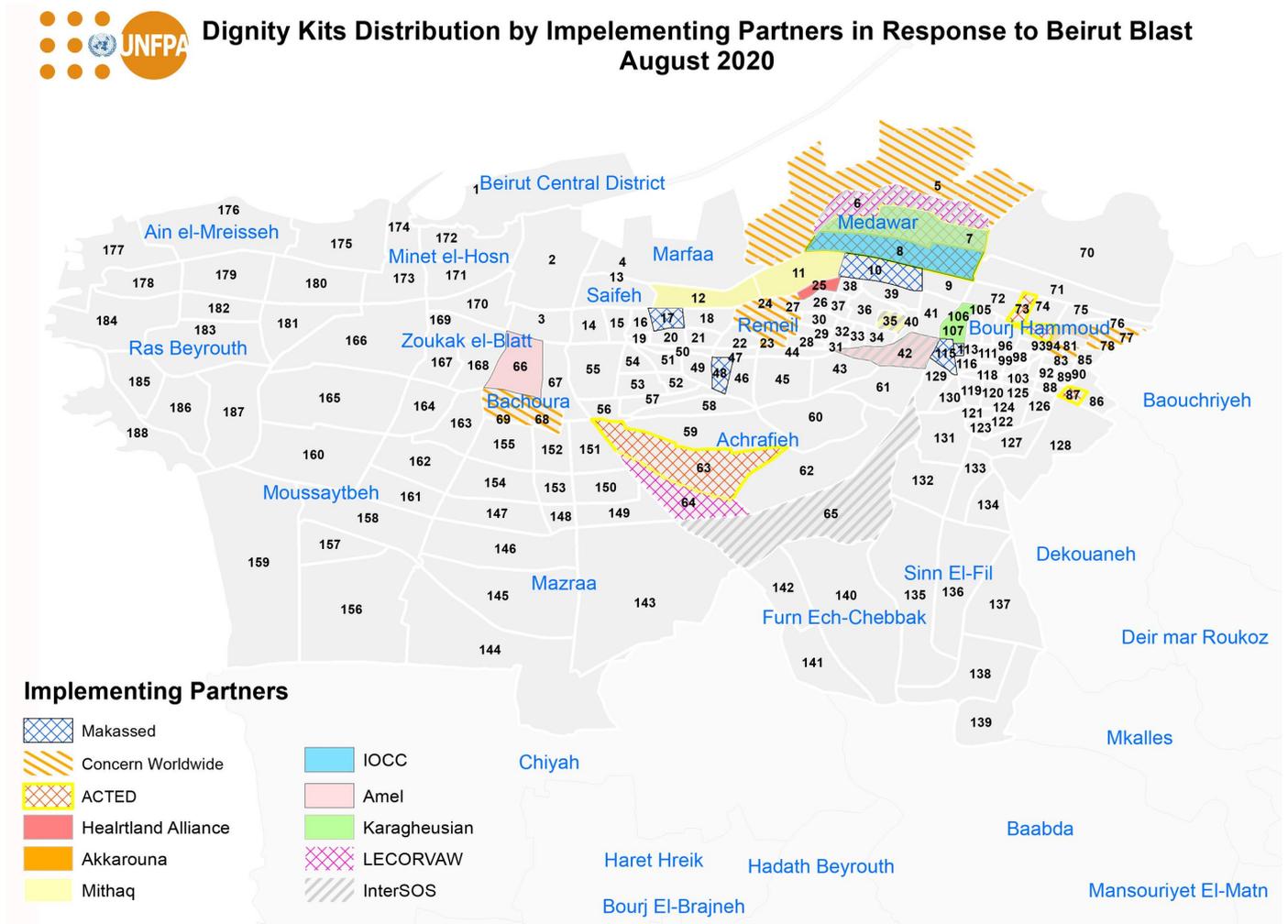
Coordination

- UNFPA and UN Women hosted the Resident Coordinator/Humanitarian Coordinator in a visit to UNFPA-supported partners INTERSOS and Al Makassed that are providing integrated SRH and GBV services and information in the Al Bachoura Primary Health Care Centre.
- UNFPA is working with the Ministry of Public Health, the Ministry of Social Affairs, UN agencies, INGOS, local NGO partners and other stakeholders to respond to the immediate needs of the affected population, with a focus on women and girls of reproductive age.
- UNFPA is co-leading the Sexual and Gender-Based Violence (SGBV) Task Force and supporting the field level GBV Working Group, which is in charge of the coordination of the Beirut Blast Response. UNFPA represented the GBV sector in the process of revision of the GBV proposals for the United Nations Flash Appeal. During the reporting period, UNFPA continued to participate in the Emergency Operations Cell as co-lead of the GBV sector. New indicators and reporting guidelines for the GBV sector have been developed.
- UNFPA has also participated in the Mental Health and Psychosocial Support (MHPSS) Task Force, an inter-agency group led by the Ministry of Public Health that coordinates the response and provides technical support for the promotion of mental health and psychosocial support.
- UNFPA is a member of the Cash Working Group, an inter-agency group led by WFP, UNICEF and UNHCR that coordinates the interventions related to cash assistance. The Group is currently discussing modalities and targeting of the cash interventions.
- UNFPA is co-leading the sexual and reproductive health sub-sector working group with the Ministry of Public Health to coordinate SRH interventions.
- UNFPA is attending the assessment and analysis cell meetings led by OCHA and the Resident Coordinator's Office. This coordination mechanism aims at providing a knowledge-sharing platform to generate continuous updates about the latest conducted assessments by humanitarian actors with reference to the Beirut Blast. UNFPA shared the assessments of the field hospitals and public health centres.
- UNFPA partners with the National Mental Health Programme of the Ministry of Public Health and contributed to the elaboration of the post-Beirut explosion action plan, ensuring the integration of sexual and reproductive health and GBV services. This partnership includes other UN agencies such as WHO and UNICEF. UNFPA also contributed to the development of "tip sheets" around mental health and women in reproductive age that were distributed to all SRH stakeholders.
- In addition, UNFPA participates in several coordination meetings, advocating for the SRH and GBV needs and women's rights, including:
 1. UN Humanitarian Country Team and Assessment and Analysis Cell meetings under the overall Emergency Operations Cell for coordination of the emergency response
 2. Health sector coordination mechanism led by WHO Crisis Cell/Health Care Coordination
 3. Primary health care coordination committee led by the Ministry of Public Health. UNFPA is ensuring input on SRH activities, including information on the recruitment of midwives to help service provision in the affected areas.
 4. National Mental Health Task force to ensure needs of displaced women and girls and mental health needs of affected women and girls are addressed.

Meeting immediate sexual and reproductive health (SRH) needs:

- UNFPA has distributed more than 23,000 dignity kits to women and girls in affected areas through SRH and GBV implementing partners. More than 1,326 were distributed from 27 August to 2 September through partners such as the Howard Karagheusian Commemorative Corporation, Amel Association, Al Makassed Association, Al Mithaq Association, Lecorvaw, Heartland Alliance, Concern Worldwide, Acted and Intersos.

- The kits contain sanitary pads, soap, towels, toothbrushes and toothpaste. The kit recipients were also provided with information on services for SRH, GBV, mental health and psychosocial support, prevention of sexual exploitation and abuse, referral to specialized services, awareness raising activities as well as COVID-19 precautionary measures.
- The two UNFPA-supported Mobile Medical Units continue to provide sexual and reproductive health and psychological first aid services through Al Makassed Association and Amel Association. A total of 348 women have received consultations by general physicians and midwives through these units during the period 26 August-3 September.
- UNFPA has deployed 10 midwives in 10 Primary Health Care centres (PHCs) located in the Beirut blast area.



Continuing GBV Services

- UNFPA and partners provided gender-based violence services to 227 people (149 women, 57 girls and 21 men). The services included psychosocial support to people in the affected neighbourhood mostly through mobile teams. Nine implementing partners under a SIDA-funded project provided the services.
- UNFPA conducted gender-based violence outreach and risk mitigation activities reaching 225 Lebanese women and Syrian refugees living in the affected area, including awareness raising on services available.
- UNFPA continues to support the coaching of 40 frontline workers deployed to the affected area by experts through online sessions. The group was originally trained after the blast on psychosocial support, including the psychological first aid approach, and is currently mentored by a group of experts supported by UNFPA.