



170+

reported deaths

6000+

reported casualties

300,000

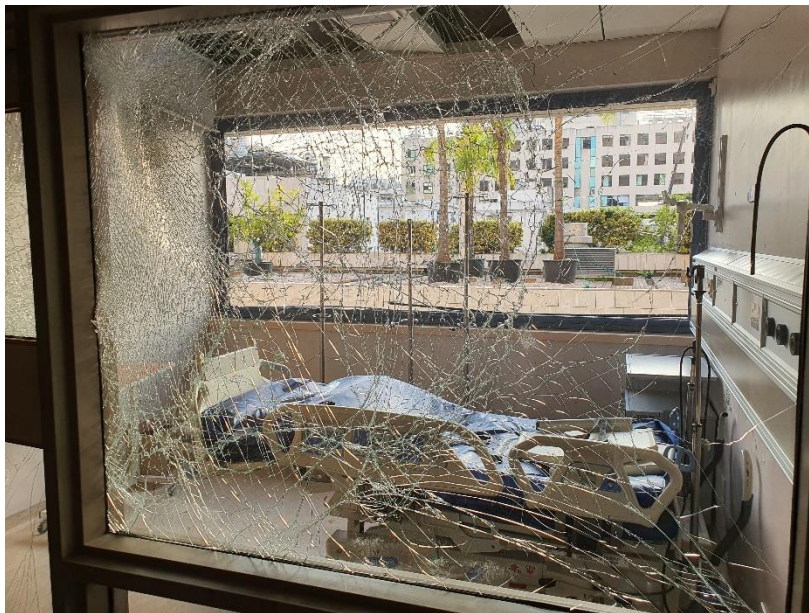
estimated number
of people homeless

117

Trauma patients in
ICU

76m

US\$ required by
WHO to support
health needs across
the country



Six hospitals in Beirut were affected by the blast and rendered either non-functional or partially functional. WHO will support the rapid reactivation and restoration of functionality of priority health facilities through physical rehabilitation and the provision of essential equipment, with a view to longer term reconstruction.

Photo: WHO Lebanon

SITUATION

- The death toll from the Beirut blast has increased to more than 170 people as search teams continue their rescue efforts; more than 30 people remain missing in and around the blast site. Over 6000 people in total have been injured, and more than 120 patients remain in critical condition in intensive care units across the country.
- More than 300,000 people have been left homeless as a result of the blast, of which 6000 are living in schools, and the rest living with family and friends in the community.
- As COVID-19 cases continue to increase on a daily basis, there is a critical need to maintain and expand COVID-19 response efforts while also responding to the blast emergency needs. In the days following the blast and protests, positive COVID-19 cases have been reported among health care workers and trauma patients.
- There is a need to ensure that health care workers involved in the response to the blast are protected against COVID-19, and are able to recognize symptoms among patients seeking follow-up care for trauma injuries or primary health care services. There is also a need to revive and increase public health awareness on protection measures against COVID-19, as public attention remains focused on the impact of the blast.
- A WHO-led assessment of hospitals demonstrates that three hospitals are non-functional and three hospitals are partially functional, out of a total of 16 hospitals in Beirut. The estimated cost to urgently restore essential functioning of the facilities is US\$ 30- 35 million, excluding the cost of replacing medical equipment.

- The Ministry of Health has established fixed posts providing free COVID-19 testing in the five areas most affected by the blast.
- The central drugs warehouse of the National Primary Health Care Center Network was severely damaged, as well as 23 Primary Health Care Centers, four of which were completely destroyed. Immediate and efficient actions were implemented on the night of the explosion to safeguard the vaccine and acute drugs stocks, and transport them to safer storage facilities. Distribution of supplies resumed on 10 August 2020.
- WHO is playing a key role in coordinating the approximately 11 international Emergency Medical Teams (EMTs) that were deployed to support the response to the explosion. Most EMTs had expected to be engaged in trauma response, but the vast majority of injuries have been managed by national health facilities and health care providers. EMTs are now being encouraged to consider repurposing to assist with the COVID-19 response and a number have already committed to doing so. WHO is working with health authorities to establish a “twinning” arrangement between the EMTs and prioritized public hospitals.

HEALTH PRIORITIES

- Support the rapid reactivation and restoration of functioning of priority health facilities through physical rehabilitation, and the provision of essential equipment, with a view to longer term reconstruction.
- Ensure that all pillars of the COVID-19 response remain active and that there is a reliable supply of PPE and other supplies to replace the lost and damaged materials
- Strengthen disease surveillance and ensure disease control measures are in place, especially among displaced communities; work with other sectors to ensure that humanitarian needs are addressed.
- Work with local health authorities to address needs related to mental health and psychosocial support.
- Strengthen coordination for the emergency response, including EMTs and health cluster/sector partners.

WHO RESPONSE

- More than 25 tonnes of PPE items arrived in Beirut from WHO’s logistics hub in Dubai on 11 and 12 August. These will be distributed to WHO partners and 25 private and public hospitals across the country.
- 105 oxygen concentrators were also received from the Dubai hub, of which 100 have already been delivered to 32 public hospitals across the country.
- WHO has deployed an experienced EMT Coordinator to Beirut and an IMT Coordination Cell has been established to oversee the tasking of EMTs, promoting adherence to international EMT standards, and ensuring appropriate monitoring of and reporting by EMTs.
- As needs shift from acute trauma care to up COVID-19 given the rising number of cases. WHO will encourage EMTs on ground to re-purpose their services to COVID-19 care rather than trauma. In addition, support for rehabilitation of complex injuries and mobilization of post- up COVID-19 patients is being planned. In the coming days WHO will help facilitate for two EMTs to support COVID-19 care at four dedicated public hospitals.
- A Psychologic First Aid (PFA) training is underway for frontline health workers and media professionals by the national mental programme, with support from WHO. A set of IEC materials has been developed to this effect. Patients with prior psychiatric disease are also being supported, by ensuring a reliable supply of psychotropic drugs .
- A WHO surge team has been deployed to support the response to the Beirut blast in the areas of external communications, risk communications and community engagement, monitoring and evaluation, emergency medical teams coordination, and health cluster coordination.
- WHO’s Regional Emergency Director for the Eastern Mediterranean visited Beirut from 10-13 August to meet with health authorities, partners, and assess the ongoing response to the blast and COVID-19, as

well as the continuity of essential health services. The Regional Emergency Director met with the minister of MOPH during which the overall impact of the blast and the optimization of international support, including the role of EMTs, was discussed. The minister also expressed support to scale up COVID-19 preparedness at hospitals including materials, PPE, IPC and ICU capacity as well as support to implement latest protocols for optimal ICU care of critically ill COVID-19 patients.

- The RCCE Interagency taskforce for COVID-19 response addressed the resurgence of COVID-19 cases and stressed the importance of identifying innovative approaches and channels to communicate about reviving preventive measures. Partners echoed the importance of capitalising on the spontaneous civic engagement and solidarity currently in response to the blast and building on the momentum to communicate COVID-19 related messaging. A series of focus groups are planned to properly probe into behavioral insights and accordingly draft awareness messages and identify appropriate communication channels.