HIGHLIGHTS

- The death toll of the two explosions that hit the city of Beirut on 4 August has risen to over 160 people, with more than 6,000 injured, of which over 1,000 are children, and 110 people are still reported missing.
- At least three hospitals have been severely damaged or destroyed, and out of 55 medical facilities preliminary assessed, only half are fully operational and around 40 per cent have suffered moderate to serious damage.
- UNICEF has facilitated the distribution, logistics and cold chain of the 10,000 donated tetanus vaccines.
- UNICEF has provided Psychological First Aid (PFA) to 720 children and adults through face to face sessions, phone calls and door-to-door visits to families.
- Under the current circumstance, the risk of COVID-19 spreading rapidly is extremely high and Lebanon has entered the community transmission phase.
- For the third consecutive day, people took to the streets on 10 August to protest against the government, with an increasingly violent response from security forces. After four ministers resigned on 9 and 10 August, Lebanon’s Prime Minister Hassan Diab announced on 10 August the resignation of his Cabinet and will remain active as a caretaker administration until a new Cabinet is formed.
SITUATION OVERVIEW

Today the city of Beirut marked a week since the catastrophic explosions that killed over 160 people and injured around 6,000 people. We are a long way from having comprehensive figures on deaths and injuries among children. For now, we know of at least three children killed and 31 children who required hospitalization. Partners report approximately a thousand children among the injured. According to UNHCR latest report, at least 34 refugees are also among the victims. Search and rescue efforts are still on going, however, with 7 days already passed, the difficult terrain and the high temperature, the chance for finding survivors becomes slimmer by the hour. On 10 August, the emergency rescue team were still searching for seven people reportedly alive but buried under rubble. Some injured children were initially separated from their families and have since been reunited. Two are still separated from their parents and are now with extended family and are part of case management services for alternative care.

The blast that almost destroyed the Lebanese capital’s port, sent shockwaves throughout the city causing multiple casualties and widespread damages as far as 20KM. According to initial assessments, Gemmayzeh, Mar Mikhael, Ashrafiyeh and Qarantina are among the most affected neighbourhoods. The immediate impacted area is a highly diverse one including many poor and vulnerable households, including migrant workers, as well as much wealthier households. According to the Beirut Governor, up to 300,000 people have lost their homes and have been displaced, with up to 100,000 children directly affected.

Significant damages have been reported on the water and electricity infrastructure. Even if preliminary findings of an assessments conducted with the “Beirut and Mount Lebanon Water Establishment” (BMLWE), indicates no major damage on the main water network, many households still do not have access to clean water supply because of damages to the connections between water sources and buildings, and within buildings. The WASH cluster coordinated by UNICEF has surveyed 558 buildings out of an estimated 3,000 that were affected. Of the 558 buildings, 337 are accessible, and of them, 135 do not have access to water. Waste management is also delayed and limited, increasing the risk of water born disease.

The explosion has also caused extensive damages to essential public services. At least three hospitals were severely damaged or destroyed, and a preliminary rapid assessment within a 15-kilometer radius of the explosion, has revealed that out of 55 medical facilities, only half are fully operational and around 40 per cent have suffered moderate to serious damage and need rehabilitation. It is commendable that despite the damages and extremely challenging working conditions, most of the health facilities managed to resume critical activities within 48 hours.
The explosion has also coincided with a recent significant rise in COVID-19 infections, with the country’s highest number of new cases reported just two days after the blast – almost ten times the numbers seen in March. Hospitals were already overstretched, and front-line workers exhausted. The areas around the blast are among those with the most active clusters and community transmission, but it is now extremely difficult for those affected to practice safe distancing. Given the chaos in the immediate aftermath of the blast with emergency rooms of all hospitals in Beirut area filling up rapidly, infection prevention and control measures were difficult to maintain. The majority of new cases in the last days were reported in Beirut and surroundings, the very same area impacted by the blast. Ten new COVID-19 cases among health staff in two of the main hospitals responding to the blast were reported in one day only. With currently around 1,200 cases under investigation, Lebanon has entered the community transmission phase. While general lockdown measures have been understandably suspended for the two-week state of emergency, the risk of COVID-19 spreading rapidly is extremely high. The situation is particularly concerning for the thousands of youth and volunteers from all over Lebanon that came to support in cleaning and rehabilitation activities.

Assessments on education indicate that 20 public Technical and Vocational Education (TVET) and training schools that cater to around 8,000 adolescents and young persons have also been damaged. This is in addition to the initial assessments carried out by the Ministry of Education and Higher Education which identified 120 public and private schools that have suffered varying degrees of structural damage.

The greater consequences have yet to be fully grasped, as the Beirut Port explosion took place amid a faltering economy and weak governance. The explosion has resulted in a resurgence of protests, fueled by public anger looking for accountability. Several days of protests and clashes with the security forces led to the resignation of the Lebanese Government on the 10 August. UNICEF and the International Community are trying to further assess the economic consequences of the explosion on the livelihoods of the most vulnerable in order to prevent long lasting negative impact on children.

**RESPONSE**

UNICEF is responding to the immediate needs and is working to support the Government and partners in providing a multisectoral response focusing on Child Protection, WASH and Primary Healthcare activities. UNICEF is exploring leveraging its expertise to deliver social assistance to the most vulnerable children and their families. In coordination with the humanitarian community, UNICEF will support the design and implementation of an Accountability to Affected Populations response framework.

**HEALTH**

UNICEF is providing technical guidance to the Primary Health Care Department in assessing the needs of health facilities, including hospitals, PHCCs, newborn unit, cold chain and Infant and Young Child Feeding (IYCF)

- UNICEF facilitated the distribution, logistics and cold chain of the Sanofi donated 10,000 tetanus vaccines, 42 emergency kits and emergency drugs to PHCCs in needs.
UNICEF is procuring PPE/IPC material, vaccine commodities and acute medicine cold chain support, health emergency kits, obstetric, newborn and midwifery kits and nutrition supplies to replenish essential diminishing stocks.

Provision of PPEs/IPCs and equipment for Palestinian Red Crescent Society hospitals in Palestinian camps and procurement and distribution of personal hygiene and IPC supplies to affected families is underway.

UNICEF supported lactation specialists and community health educators in providing face-to-face counselling to 32 families.

UNICEF is providing technical support to the Ministry of Public Health (MoPH) in developing a “PHC re-start package”. This includes minimum rehabilitation of buildings for immediate outpatient treatment, including IPC measures needed for COVID-19, space for wounded, antenatal care and paediatric consultations. The package will also include medical equipment and emergency supplies for treatment of injured and medical follow up of blast.

Rehabilitation of 16 PHCCs and the Newborn Unit will be prioritized to ensure continuation of services.

Collaboration is underway with academic institutions to identify teams of medical students, doctors, nurses and volunteers that can support medical staff that are overwhelmed by the current case load and pre-existing COVID-19 epidemic.

WASH

UNICEF supported water-trucking and desludging services to three Lebanese Red Cross hubs providing basic assistance to victims.

Water, personal hygiene items including sanitary pads and IPC materials have been distributed to 80 families in temporary shelters, including 20 baby kits. An additional 250 kits provided by UNICEF to the Lebanese Red Cross were distributed and 150 kits are prepositioned for immediate use. Distribution of water, personal hygiene items, IPC materials and baby kit for the most vulnerable families will continue.

In close coordination with the Beirut and Mount Lebanon Water Establishment (BML WE) team, UNICEF coordinated an assessment of the public part of the water systems in affected areas, (the public water source to the buildings’ connections) and managed to reactivate the service the day after the blast. Finalization of the assessment of the water network from the pumping station to the buildings will be prioritized.

The WASH Cluster coordinated by UNICEF is undertaking an assessment of the buildings’ connections to the roof tanks, assessments of 558 building have taken place so far, of which 337 are accessible and occupied. The water system of 135 of these 337 building is not functioning, consequently they do not have access to water and need urgent repair. The assessment of water needs at building level and ensuring immediate repair for the water to reach roof tanks will continue. Furthermore, in close collaboration with the Shelter cluster, assessments will be conducted at the household level once rehabilitation starts.

EDUCATION

UNICEF will work with the concerned Ministry of Education and Higher Education (MEHE) departments to:

- Prioritize the most damaged buildings, including primary schools and 20 TVET schools, based on established and agreed damage assessment criteria.
. Project the number of children enrolled in the affected schools based on administrative datasets from the previous scholastic year, with a view to estimate the number of school children who cannot access their school premises. This includes both public and private schools.

. Understand the impact of the Beirut blast on children with special needs enrolled in the Inclusive Pilot schools. This includes health, well-being, material, and family needs.

Similar assessments will be conducted through partners to assess the extent of damage to Non-Formal Education centres and the impact on children enrolled (including those with special needs) in these centres, even though these children were engaged in distance learning due to COVID-19.

Using these assessments, the immediate needs of school children and their families – where needed – will be referred to other sectors that UNICEF is engaged in (Water, Sanitation, Health, Protection). If further needed, families will also be referred to other Sectors/Clusters as needed (e.g. Shelter).

CHILD PROTECTION

. Based on a mapping conducted by UNICEF partners in seven main hospitals, two children remain separated from their families and are now with their extended families and provided with case management services for alternative care.

. UNICEF provided Psychological First Aid (PFA) to 720 children and adults through face to face sessions, phone calls and door-to-door visits to families and 10 counselling sessions were provided. A UNICEF tent has been set up in Downtown Beirut to be used by UNICEF partners for Psychological First Aid (PFA). Three more tents will be installed to provide PFA for children and caregivers.

. A rapid needs assessment conducted by UNICEF of those receiving case management services, resulted in the distribution of 5,000 Sanitary pads through female social workers to affected women and girls. In addition, a total of 2,500 mini-hygiene kits assembled and tailored for women and girls will be distributed.

. UNICEF provided food and water to 700 children and caregivers along with clothes and detergents to the most vulnerable families.

. UNICEF will coordinate with UNHCR to assess children’s needs and required child protection services including case management and PSS, for families who relocated with their families outside of Beirut and Mount Lebanon.

. UNICEF will continue to prioritize damaged women and girls’ safe spaces for renovations.

SOCIAL POLICY

. UNICEF is designing an emergency cash assistance project to serve up to 80,000 vulnerable people, including households with children, differently abled, elderly and migrant workers living in the poorest and most affected areas.
UNICEF mobilized 1170 youth (including Palestinian volunteers) in a community-based response at the damaged sites. Eleven damaged sites, 650 houses and 10 streets were cleaned by youth. Minor rehabilitation of 142 households and shops were completed by young people. Furthermore 2,484 meals and sandwiches were prepared and distributed along with 500 bottled water.

In addition, 210 youth produced and distributed 20,100 cloth masks, along with 400 helmets, 300 goggles and 300 safety vests.

UNICEF will establish youth friendly spaces in different communities, including Palestinian communities, to support adolescent and youth coping with the impact of the explosion. UNICEF will also develop and disseminate a mental health campaign with MOPH geared towards youth.

Graduates of the UNICEF supported TVET course will support in the rehabilitation and reconstruction of the affected areas in Palestinian camps through aluminum processing, plumbing, carpentry and construction work. Youth engagement programmes will be scaled up in Palestinian camps for cleaning the streets and houses in affected areas.

UNICEF has been mobilizing and engaging young volunteers to provide community based basic support. The Lebanese University volunteers are one of the groups with whom UNICEF works on the ground. Learn more through the video:

Also available at https://uni.cf/31IOn6r
PRELIMINARY RESOURCE REQUIREMENT

UNICEF Lebanon country office is in touch with Government counterparts and partners to scale up its support to affected children and their families in order to respond to the immediate and medium-term needs as they emerge. Multi-sectoral assessments are underway and needs are expected to evolve. UNICEF estimates that it will require US 23.2 million. The inter-agency plan is under development and figures will be adjusted accordingly.

<table>
<thead>
<tr>
<th>SECTOR</th>
<th>INITIAL RESOURCE REQUIREMENT (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEALTH</td>
<td>$10,900,000</td>
</tr>
<tr>
<td>WASH</td>
<td>$3,600,000</td>
</tr>
<tr>
<td>EDUCATION</td>
<td>$7,100,000</td>
</tr>
<tr>
<td>CHILD PROTECTION</td>
<td>$750,000</td>
</tr>
<tr>
<td>ADOLESCENT &amp; YOUTH ENGAGEMENT</td>
<td>$650,000</td>
</tr>
<tr>
<td>ACCOUNTABILITY TO AFFECTED POPULATION</td>
<td>$200,000</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$23,200,000</strong></td>
</tr>
</tbody>
</table>

FOR MORE INFORMATION

**YUKIE MOKUO**
Representative
UNICEF Lebanon Country Office
ymokuo@unicef.org

**VIOLET WARNERY**
Deputy Representative
UNICEF Lebanon Country Office
vwarnery@unicef.org

**NAOKO AKIYAMA**
Humanitarian Affairs Manager
UNICEF Lebanon Country Office
nakiyama@unicef.org