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### Cholera Outbreak Lebanon

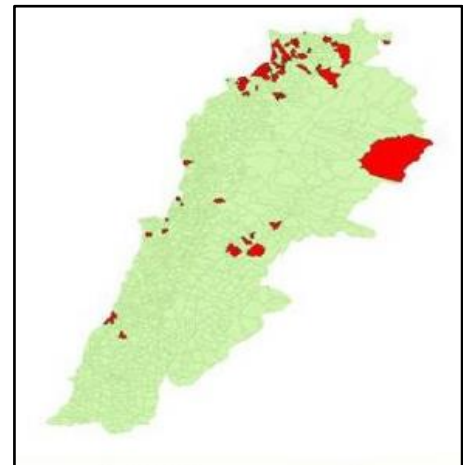
Situation Report #3  
27 October 2022

## Highlights

- Since 8 October, UNICEF has distributed **118,703 litres of fuel** to water pumping stations and waste-water treatment stations in locations with confirmed and suspected Cholera cases.
- **Trained 486 health workers** on Cholera prevention and treatment.
- Supplied partners with **4,934 Chlorine Family Hygiene Kits**.

## Situation Overview

Rates of Cholera across Lebanon have soared during the outbreak's third week, with **1,095 confirmed cases and 15 deaths reported as of 27 October**. Hotspot areas include Akkar, Minieh Dannieh, and Tripoli localities. Out of those with suspected or confirmed cases, **children between the ages of 0-4 are the age group with the highest number of cases (26%)**. Cholera, a virulent bacterial infection transmitted through contaminated water or food, can spread quickly in areas with limited access to basic services like clean water, sanitation, and healthcare. If left untreated, the disease can be deadly within just hours of infection as it can cause severe dehydration. Children are more likely to die than adults as they are smaller and their bodies contain less fluid, with malnourished children particularly susceptible to developing severe cases of cholera.



Recent overlapping crises have resulted in poor sanitation systems, weak water management, and increased poverty which may have contributed to this outbreak. As cases are expected to continue to increase, a national multidisciplinary taskforce - led by the Ministry of Public Health (MOPH) and in coordination with UNICEF, the World Health Organization (WHO), and NGO partners – has been established and has developed a joint response plan. The plan aims to contain the outbreak and reduce mortality and morbidity through effective preparedness and response at all levels.

## UNICEF's Response

UNICEF continues to deliver lifesaving services across Cholera hotspot areas by strengthening the existing water and wastewater systems to prevent the rapid spread of Cholera, as well as supporting affected communities to improve their hygiene practices. As the outbreak escalates, UNICEF continues to adjust its response strategy to increase its focus on emergency water provision and sanitation measures. If existing water and wastewater systems function effectively, the disease can still be contained. UNICEF's response centers on the following:

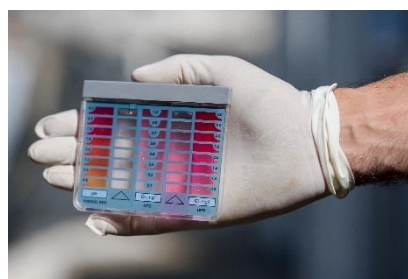
1. Improving access to safe water, sanitation, and personal hygiene through support to Water Establishments (WE), Wastewater Treatment Plants, water trucking and desludging activities to Informal Settlements and vulnerable communities;
2. Conducting early case detection, appropriate and timely case management, testing and laboratory capacity, surveillance and reporting network, infection prevention, availability of adequate supplies, and the collection and disposal of infectious waste;
3. Carrying out community engagement and communication using multimedia channels on Cholera prevention;
4. Preventing Cholera in schools through the provision of sanitization and risk communication and community engagement (RCCE) materials.

## Water, Hygiene, and Sanitation (WASH)

### Support to Water and Wastewater Systems

Since the start of the outbreak, **118,703 litres of fuel** have been distributed across Lebanon, including 74,000 litres to the North Lebanon Water Establishment (NLWE), 17,703 litres to the Bekaa Water Establishment, and 27,000 litres to the Tripoli Wastewater Treatment Plant.

- UNICEF completed the repair of the Abou Halka Water Station's generator, which serves at least half of Tripoli city (approx. 200,000 direct legal beneficiaries). The repair will support greater operational capacity.
- Over **15 tons of liquid chlorine** were distributed to the NLWE, the South Lebanon Water Establishment (SLWE), and the Beirut and Mount Lebanon Water Establishment (BMLWE).
- Maintenance and repair works of the chlorination systems of the following locations were completed: Deir Amar, Markebta, Jradeh, Kfarhabo, Machta Hammoud, Mashta Hassan, Kwachra, Qobayat Station, Kadi spring, Chakdouf, Hekr el Koussa, and Sir el Dinnieh village.



### WASH Support to Communities

In Informal Settlements, with the support of partners, UNICEF delivers at least 35/l/p/d of clean drinking water in all areas of interventions. UNICEF also continues to clean and disinfect water tanks and WASH hardware is being replaced where needed. Thus far, UNICEF has reached the following results:

- Supplied partners with **4,934 Chlorine Family Hygiene Kits**.
- **96 Disinfection Kits and 724 Family Hygiene Kits** have been distributed to 32 informal settlements.
- **500 kg of liquid chlorine** has been distributed to partners in North governorate and **130.5 kg** has been distributed by partners to informal settlements in Akkar.
- **2,000 packs of chlorine tablets** (NaDCC) have been distributed through partners in Bebnine and Aarsal.
- To disinfect sludge from household latrines in settlements where cases are identified, **10 tonnes of lime was distributed**. UNICEF partners in Zahle received one ton of lime, while six tons were sent to partners in North Lebanon and Akkar, two tons to Baalbek, and one ton to West Bekaa.
- This week in Halba hospital in Akkar, which has received the majority of cholera patients in the area, UNICEF replaced essential pumps, repaired the holding tank and conducted daily desludging activities.
- Held a Cholera Taskforce meeting regarding the Palestinian camps with UN agencies and local and international NGOs to discuss preparations for a potential Cholera response in camps.

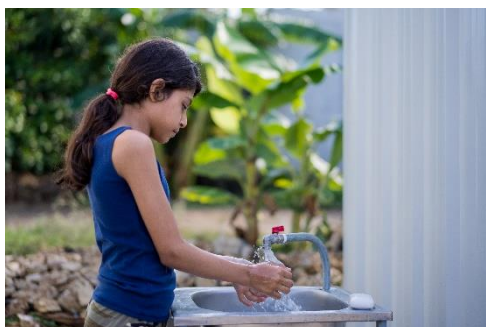
UNICEF is continuing to expand its response as the outbreak escalates. Upcoming activities will include the following:

- Targeting **145,400 beneficiaries** with hygiene awareness sessions and prevention messages.
- Reaching **261,647 beneficiaries** through increased wastewater desludging – although access to the Tripoli Wastewater Treatment plant remains tenuous and unpredictable with only three trucks gaining access this week.
- Supporting **255,834 beneficiaries** in Informal Settlements with access to clean water through water trucking.



## Health and Nutrition

UNICEF's health programming works closely with the MOPH to ensure early case detection, timely case management, surveillance and reporting networks, infection prevention, provision of supplies, collection and disposal of infectious waste, and community awareness and engagement.



Thus far, UNICEF has responded as follows:

- Distributed of **32,000 Oral Rehydration Salts (ORS)** to Health, WASH, and RCCE partners to ensure symptomatic individuals across the different hotspot areas were reached.
- Provided **12 governmental and private hospitals** designated for Cholera management with Cholera treatment kits.
- Supported the establishment of two Cholera Treatment Units within identified Primary Health Care Centres (PHCCs) in hotspot locations in Bebnine (Akkar) and Arsal (Bekaa). PHCCs were provided with enough Cholera treatment kits to support 400 patients in each locality.
- Supported the development of guidelines to treat Cholera during pregnancy for healthcare workers and community members.
- UNICEF, in partnership with the Lebanese Order of Midwives, **trained 50 community-based midwives** on Cholera preparedness and response.
- **794 staff** from public schools, PHCCs, UNRWA clinics, and Palestinian Red Crescent hospitals were reached with Cholera awareness and prevention messages.
- **486 health workers were trained** on Cholera prevention and treatment under the existing immunization training program.
- Contextual SOPs and key messages on Infant and Young Child Feeding (IYCF) programming in the context of Cholera were developed and shared with all nutrition and health partners.
- An SOP on managing acute malnutrition among children with Cholera was developed and will be used to train healthcare staff treating Cholera.
- Under the inclusion approach and to reach traditionally marginalized populations, Cholera messaging was disseminated to the LGBTQ+ Taskforce in Lebanon.



## Risk Communication and Community Engagement (RCCE)

UNICEF's RCCE response aims to increase the public's knowledge on Cholera prevention and promote positive behaviours. As the RCCE Lebanon Task Force lead, UNICEF is leading coordination efforts with other sectors and actors on the ground to **ensure an integrated response and intervention**. Activities thus far have included the following:

- Through its RCCE partner Balamand University, UNICEF supported **24 Cholera sensitization sessions** with over **5,000 participants**. Attendees included UN partner organizations, teachers, frontline workers, municipality workers, and community volunteers.
- Consultations and workshops took place across South Lebanon, Mount Lebanon, Bekaa, and Baalbek-Hermel to share information about the outbreak with key local stakeholders.
- Cholera IEC materials, such as posters and flyers, have been printed and mass-distributed to municipalities and communities with the Lebanese Red Cross through Mobile Medical Units (MMUs) under the immunization program, as well as through direct distribution to partners and other stakeholders.
- Mass communication packages including simplified messages to answer community questions and counter fake news were developed and disseminated through the media.
- A [website](#) communicating UNICEF's cholera response was launched on 26 October, which includes a press release, a video, and other key updates.



## Education

UNICEF's education programme's Cholera response includes developing preventative and awareness measures in schools through the provision of sanitization materials and RCCE as well as launching a Ministry of Education and Higher Education (MEHE) Cholera Taskforce to prevent any further disruption to children's learning. The response has included the following:

- Through the MEHE Cholera taskforce, a dedicated hotline to address Cholera cases in schools was launched and a map to coordinate interventions with other education actors was developed.
- Through its partner the Lebanese Red Cross, UNICEF delivered Cholera awareness raising sessions to **22 public and private school directors** and provided them with chlorine for their schools.
- Preventative methods for Cholera continue to be shared on the MEHE website.

UNICEF is currently conducting a WASH and Health needs assessment in public and private schools. Based on the current findings, UNICEF will distribute sanitization materials like soap and water purification tablets for **2,092 schools and education facilities** to support **559,795 students** in mid to late November. Online awareness sessions for public and private schools on Cholera will also begin in November.

## Funding Requirements

On 14 October, UNICEF published a flash appeal on the critical humanitarian response needed for the first 3 months of the Cholera response, which includes interventions in WASH, Health and Nutrition, RCCE, and Education. UNICEF has to date borrowed over USD 3 million internally for the Cholera response. **To date, no funding has been received or pledged towards the appeal.**

| Activities  | Funding Needed (\$) |
|---|---------------------|
| Emergency WASH Support (including emergency fuel provision) | <b>24,086,200</b>   |
| Emergency Health Support                                    | <b>2,170,000</b>    |
| Risk Communication and Community Engagement                 | <b>1,185,000</b>    |
| Emergency Education Support                                 | <b>1,936,800</b>    |
| <b>Total Funding Needs</b>                                  | <b>29,378,000</b>   |

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