



*In response to the explosion, International Medical Corps deployed mobile medical units (MMUs) and shelters to neighborhoods that were severely affected by the blast. Through this approach, we were able to quickly provide consultations and medicines to patients in need, where they live.*

On August 4, a massive explosion tore through the port of Beirut, the capital city of Lebanon. The explosion was caused by a fire that erupted in a warehouse storing 2,750 metric tons of ammonium nitrate, a highly explosive chemical. The explosion killed more than 220 people and injured thousands. Nearly two months later, the emergency humanitarian response continues to shift its focus toward medium- and longer-term response projects and activities, including structure rehabilitation and repair, comprehensive and affordable primary healthcare, and mental health and psychosocial support services.

The port is surrounded by some of Beirut's most historic neighborhoods. The dense residential areas of Gemmayzeh and Geitaoui are located to the southwest of the port, and Mar Mikhael and Quarantina are located to the southeast. All four demographically and socioeconomically diverse neighborhoods were severely affected by the explosion. Residential and commercial areas were destroyed or severely damaged. Recent assessments conducted in the Quarantina neighborhood indicate that it could take up to one year for people to return safely to their homes.<sup>1</sup> Additionally, this cluster of neighborhoods is home to many of Lebanon's state and private services—including the electricity provider, a bus terminal and three major hospitals that were severely affected by the explosion.

Moreover, there have been two fires at the port's warehouses since the explosions, the most recent occurring on September 10. The fires have generated panic in nearby neighborhoods, further exacerbating the trauma and anxiety that communities have been dealing with since the initial incident. Our humanitarian partners and primary healthcare centers (PHCCs) have reported a high level of stress among residents.

In addition, the COVID-19 outbreak remains a serious concern. Six major hospitals and more than 20 clinics sustained partial or heavy structural damage due to the explosions, and an estimated 300,000 people were left homeless—many of whom are now living in damaged buildings, temporary sites or shelters, with limited access to water and sanitation. Since the explosion, there has been a consistent, upward trend in daily numbers of new cases. On Sunday, the government confirmed more than 1,000 new cases in a 24-hour period—a new record for the country. Almost 90% of the cases are among residents, confirming continued and widespread community transmission. The country has recorded a total of

## FAST FACTS

### Our Footprint

- International Medical Corps has partnerships with more than 50 primary healthcare centers (PHCCs) throughout Lebanon, supporting primary healthcare services for Syrian refugees and vulnerable Lebanese at facilities in Bekaa, Beirut, Mount Lebanon, Akkar and other areas throughout the north and south.

### Our Response

- Since the explosion, International Medical Corps has delivered 26 shipments of medical supplies and personal protective equipment (PPE)—including masks, gloves and gauze—to 18 PHCCs and eight hospitals in Beirut.
- The team has provided more than 1,100 medical consultations and 1,750 psychological first-aid consultations through mobile medical units that were deployed to highly impacted areas of Geitaoui-Karm El Zeitoun, Mar Mikhael, Bourj Hammoud and Mdawar.

<sup>1</sup> [https://reliefweb.int/sites/reliefweb.int/files/resources/lebanon\\_situation\\_report\\_5\\_1.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/lebanon_situation_report_5_1.pdf)

29,303 confirmed COVID-19 cases and 297 deaths. Of those cases, at least 842 healthcare workers have been diagnosed with the respiratory illness since February.

### International Medical Corps Response

International Medical Corps has been active in Lebanon since 2006. We have partnerships with more than 50 PHCCs and hospitals. Our activities have focused on the needs of both refugees and vulnerable Lebanese residing in Greater Tripoli,



*Through our mobile medical units, International Medical Corps provided consultations to 1,121 patients following the explosion.*

Akkar, Beirut and Mount Lebanon, Bekaa and the South. In the immediate aftermath of the explosion, International Medical Corps deployed two mobile medical units (MMUs), along with mental health and psychosocial support service shelters, to Bourj Hammoud, Karm El-Zeitoun, Geitaou and Mar Mikhael—all areas that were severely affected by the explosion. Between August 4 and August 23, when the MMUs were deployed, our team provided medical consultations to more than 1,121 patients—including wound care for 130 patients—and distributed medications to 549 patients. Medical staff provided patients with medical care for wound dressing, burns and sutures, and treated patients suffering from loss of hearing and sight. Our team also distributed personal protective equipment (PPE) and hand sanitizer to more than 2,000 community volunteers who were participating in clean-up and recovery efforts.

As the response has evolved to more long-term activities, International Medical Corps is continuing to support existing healthcare facilities by procuring and distributing PPE, medical supplies and equipment. So far, International Medical Corps has distributed PPE to 27 healthcare facilities, and medical supplies to 23 facilities, in the most affected areas of Beirut, including Bourj Hammoud and Getaou. As the number of COVID-19 cases continues to increase, our team has also procured additional resources—PPE, supplies and equipment—to support facilities and frontline medical staff through the end of 2020.

In addition to providing supplies and equipment, International Medical Corps is working with our partners to address mental health and protection concerns. The port explosion is only the most recent crisis in Lebanon. To date, the country's currency has lost approximately 80% of its value. Hyperinflation and high unemployment rates have left many households unable to access basic needs. Of the 300,000 people displaced, an estimated 84,000 are women and adolescent girls of reproductive age.<sup>2</sup> Before the explosion, International Medical Corps provided and supported mental health and psychosocial support services (MHPSS) at several facilities run by our PHCC partners. As the need for support has increased, our team has been providing mental health services and gender-based violence (GBV) services via mobile shelters that have been rotating throughout our targeted areas. To date, the team has provided 1,786 psychological first-aid (PFA) sessions, along with 263 GBV consultations, throughout the greater Beirut area. Because the need for mental health services remains high, International Medical Corps is training frontline healthcare workers and staff from other organizations on how to provide PFA, to expand coverage of the service to a wider area. We have so far conducted four training sessions, reaching 59 participants, with more planned. We will continue work with the Ministry of Public Health (MoPH) and the National Mental Health Program to ensure that both psychosocial support and GBV services and referrals are integrated into healthcare services, and remain available as the response continues to evolve.



*In the immediate aftermath of the explosion, International Medical Corps' team distributed personal protective equipment (PPE) to volunteers and residents participating in clean-up and recovery efforts.*

International Medical Corps is also expanding our network of supported PHCCs in Beirut. We have identified two facilities, Herj and Msytbeh, run by International Medical Corps' local partner Makassed. There, we will provide supplies, equipment and primary health services to strengthen care for residents and the most vulnerable populations, including persons with disabilities, by providing specialist healthcare and distribution of assistive devices. As we expand our partnerships, we will continue to work closely with each facility to identify gaps in services, and assess the need for MHPSS and GBV support.

<sup>2</sup> [https://reliefweb.int/sites/reliefweb.int/files/resources/lebanon\\_situation\\_report\\_5\\_1.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/lebanon_situation_report_5_1.pdf)