

LEBANON CHOLERA EMERGENCY SITREP #5

15th November 2022 (data updated on Friday 11th November 2022)

Situation overview

The number of **confirmed and suspected cases continue to raise progressively reaching a total of 3,253 (which 26% are children under 5 years old),** fortunately **no new deaths have been registered** during the past week (18 in total until the moment) as cholera advances through Lebanon (according to the Lebanese Ministry of Public Health (MoPH) as of 11th November 2022).

Since the first case registered in the northern region of Akkar, the disease has proliferated rapidly and is affecting all communities in the country. The maps illustrate the spread of confirmed cases by locality across

20th October 11th November

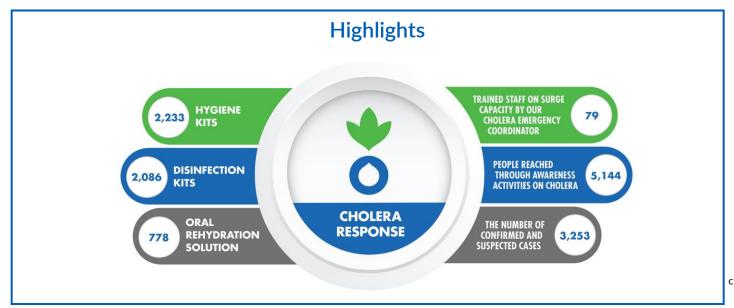
Lebanon between the 20^{th} of October and the 11^{th} of November (source: MoPH).

Inadequate access to drinking water, sanitation, and poor hygiene practices and wastewater management directly contribute to the rapid escalation of the outbreak. The fragile socio-economic situation of the country, the lack of humanitarian funds and the limited resources of public institutions can result in dire health consequences.

Cholera is an acute diarrheal disease that can quickly dehydrate the patient and may cause death within hours in severe cases if untreated.

How is cholera spread?

- By drinking contaminated water (most common).
- By eating contaminated food that has come in contact with human feces.
- By direct contact with the faces of a contaminated persona (usually via the hands).





Action Against Hunger officers disinfecting a site with chlorine solution sprayer in Baalbeck-Hermel governorate (Lubiana Gosp-Server for Action Against Hunger)



OUR EMERGENCY RESPONSE

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Access to safe water

- → Action Against Hunger delivers 35 liters of clean water to all individuals in ITSs in Aarsal and Dar el Ahmar clusters and to individuals living in ITSs without any access to water in Qaa and Labwe clusters.
- → The team is monitoring the water quality by testing the chlorine levels (0.8mg/liter) in suppliers' trucks and water tanks in Baalbeck-Hermel and Bekaa governorates daily.
- → On the 14th of October **43 water tanks were cleaned during** a water tank cleaning campaign at household level in an affected sites in Baalbeck-Hermel, and Bekaa Lebanon governorates.
- → As a preventive measure, on the 21st of October, Action Against Hunger donated 410kg of chlorine to the Bekaa Water Establishments for drinking water treatment in priority areas.
- → Action Against Hunger team shared cholera preventive measures to be adopted to water and desludging suppliers.



Access to sanitation

- → Action Against Hunger is continuing the desludging of wastewater in all ITSs in Baalbeck-Hermel governorates daily.
- → As of 11th November, 2,086 disinfections kits have been distributed in affected sites in Baalbeck-Hermel and Bekaa governorates.
- → Action Against Hunger led site disinfection campaigns in households, latrines, solid waste collection points.
- → In Baalbeck-Hermel and Bekaa governorates, 1,906 m³ of sludge have been disinfected from 27 affected sites.

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Hygiene promotion

- → Action Against Hunger has distributed **2,135** hygiene kits in affected sites in Baalbeck-Hermel and Bekaa governorates.
- → Action Against Hunger has distributed **98 hygiene kits and 28 baby kits in South Lebanon.**



Nutrition and health

→ As of 11th of November, **778 Oral Rehydration Solution units have been distributed** to affected and suspected cases in Baalbeck-Hermel and Bekaa governorates.



Communication, awareness, and community engagement

- → Promotion of safe drinking water practices and cholera awareness (and preventive) sessions have reached a total of 3,449 individuals in Baalbeck-Hermel and Bekaa governorates and 1,695 individuals in the South of Lebanon with the support of community mobilizers and Action Against Hunger officers.
- → **2,020 Cholera related brochures, flyers and posters have been shared with community members**, including during Infant and Young Child Feeding and Community Nutrition (IYCF) sessions in Bekaa governorate, but also **through WhatsApp and social media.**



IDENTIFIED NEEDS

- → Limited access to safe water sources and sanitation services for vulnerable populations.
- → Lack of knowledge at the community level about Cholera spread and risk along with stigmatization of minority groups associated with the disease.
- → Community engagement and lack of knowledge of hygiene practices and items needed to prevent and control infectious disease outbreaks.
- → **IYCF-E rapid assessment** to identify those with specific needs.
- → Lack of a rapid response and coordination mechanisms given the increasing number of cases in the country.

RECOMMENDATIONS

- 1. Increase adequate funding to respond to the cholera outbreak, and to urgent water, hygiene and Sanitation (WASH) and nutrition needs in remote and vulnerable areas (cf. "<u>Dire WASH needs identified in Baalbek Hermel area</u> factsheet).
- 2. Support public services covering vulnerable areas for wastewater management and access to safe water.
- 3. Deliver cholera awareness and hygiene promotion messages together with cholera hygiene and disinfections kits to the population at risk.
- 4. Launch a Public Cholera WASH Awareness Campaign.
- 5. Reinforce Rapid Response disinfection activities.
- 6. Improve response standardization and coordination among partners.
- 7. Ensuring that IYCF and nutrition services are scaled-up and knowledge is widely shared
- 8. Strenghten coordination with Ministry of Public Health and partners to ensure awareness raising and coordination in the whole country.

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ACTION AGAINST HUNGER IN LEBANON

We as Action Against Hunger Lebanon take decisive action against the causes and effects of hunger through advocacy and programming.

We provide development support and humanitarian response with years of experience in hard to reach urban and rural areas, delivering Water, Hygiene, and Sanitation, Emergency and Nutrition services, and fostering self-reliance of vulnerable communities building food security and livelihoods opportunities.

We are experienced in negotiating access in complex environments, while ensuring the provision of high-quality service delivery in a timely and efficient manner.







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