Lebanon Crisis

Service Availability Assessment

29 August 2006





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Introduction

Since the beginning of the crisis in Lebanon on July 12, 2006, it has been reported as of August 24, 2006 that 1,184¹ of people were killed and more than 4,059¹ were wounded. Internally displaced population (IDP) were more than 900,000² of which 550,000¹ have returned home and 'as a result of damage to property and Unexploded ordnances (UXOs) as many as a third have not yet returned. Proximity to the Israeli border (Blue Line) may also be a reason for slower returns'¹.

In addition, the Israel Defence Forces (IDF) military operation has caused enormous damage to residential areas and key civilian infrastructure such as power plants, seaports, fuel depots, and hospital and health centres were destroyed. Seventy-two bridges and virtually all road networks have been systematically destroyed leaving entire communities in the South inaccessible. This profound damage to traffic arteries is posing key challenges to Government institutions and humanitarian agencies alike, particularly in remote areas of the South. The remains of unexploded ordinance splattered all over form a major ongoing threat to the health of the population.⁴

The humanitarian priorities resulting of the cessation of hostilities include addressing the health needs of the rapidly returning population, including the threat of unexploded ordinance (UXO) and cluster bombs in South Lebanon and strengthening the UN humanitarian hubs in Tyre and Saida. The focus of health partners is shifting to early recovery and reconstruction of the health system.³

Led by the World Health Organization (WHO) and the Ministry of Public Health (MOPH), health partners have been supporting the national authorities in providing immediate assistance to affected populations, including access to safe drinking water, disinfection, health care, vaccines and medications to ensure the availability of the non communicable disease drugs as antidiabetic, anti-hypertensive, according to the health profile of Lebanon and the actual need, and over all Coordination of the Health Cluster, in close collaboration with the MOPH, as the health cluster leading UN agency and the MOPH partner.

Rationale

33 days of continuous bombing on mainly South Lebanon and South Beirut, as well as the Bekaa valley, have left a long lasting mark on the Lebanese population and infrastructure. The impact on the health sector is three-folded:

- 1. **Damage** to health facilities infrastructures and functional disruption mainly at the PHC and key functioning hospitals.
- 2. Damage to roads and bridges limiting the access to health facilities
- 3. **Exhaustion of supplies** causing shortages of fuel, drugs, medical supplies, etc. and causing increases in health expenditure at national level.

The need to conducting an assessments of the health facilities and services availability in the affected areas to have a clear data about the magnitude of the damages and supporting planning for early recovery and reconstruction of the health sector to ensure medium and long-term sustainability in meeting the health needs of the affected populations.³

Objectives

General objective Assessment of the functional damage and service availabilities in the health facilities in the affected areas after the July 2006 hostilities.

Specific Objectives

- Assessment of the physical damage in relation to the capacity to provide service to the conflict affected population.
- Assessment of the resources availability;
 - Physical resources: power and water supply, physical structure as a damaged functional unites.
 - $\circ~$ Human resources: medical staff, and support staff available in the Health facility level .
 - o Drugs, consumables, and medical supplies.
- Asses the accessibility to the facility; road conditions, and financial access, transportation tools
- Asses the services availability: emergency surgical and obstetric care, maternal and children care, immunization, and general consultation in the primary Health care centres.

Outcome

- An updated data of the health facility capacity by the end of August 2006.
- Baseline data to be used in monitoring of the intervention in the revitalization of health care system
- A comparable data with the pre-hostilities MOPH health facilities data .
- A living document to be the base for further regular assessment with the same scope.

Limitation

- Security of the roads due to the UXO, military presence affecting the access
- Political ownership of the health facilities with too many partners to coordinate.
- The reliability of the base line data.
- No engineering assessment and a direct costing calculation out of the collected data.

Project Implementation

Phase 1 Planning and Teams Distribution

<u>Basic Information</u>: we extract the basic information from the Ministry of Public Health resources (Ministry of Public Health official Web site, Geographic Information System GIS, Ministry of Public Health archive).

<u>Distribution of health facilities</u> : we group the health facilities in each Qada to multiple zones change from 1 zone in Jezzin to 6 zones in Baalbeck, to accomplish the plan of distribution we put the following main criteria:

- 1. Number of facilities: the number of facilities is an important criteria compose the zones we assume that the questionnaire of dispensary or health centre (Part One) need up to 30 minutes to be filled and the questionnaire of the Hospital (Part two) need up to 45 to be filled
- 2. Distance between Beirut and the zone centre: the distance between Beirut and the zone centre change from 10 minutes in Beirut and up to 3 hours in Hermel and Bint Jbeil, these criteria affect the transportation cost and the number of centres for each team.
- Distribution of the facilities in the zone: the distribution of the facilities and the distance between the facilities (10 to 20 minutes) affect the number of the facilities for each team and the time needed to accomplish the mission.
- 4. Accessibility of main roads: These criteria play an important role in the safety of the teams, the accessibility of facilities and the time needed to move from one location to the other.
- 5. The dead line of the project: the short time that we had to plan, collect, enter and analyze the data push as to put our effort to get data as faster as we can.

Qada	Zone	Estimated Number of Facilities	Estimated time to reach zone centre (minutes)	Estimated time to move between facilities (minutes)	Estimated time to fill questionnaire (minutes)	Total Time to accomplish the mission (hours)
	1	22	180	110	814	18.4
Nabatieh	3	17	180	255	629	17.7
	4	14	180	210	518	15.1
Beirut	1	28	20	280	1036	22.3
suburbs	2	28	20	280	1036	22.3
Bint Jbeil	1	15	360	150	555	17.8
Dirit Jbeli	2	19	300	190	703	19.9
	1	21	10	210	777	16.6
Beirut	2	19	10	190	703	15.1
Denut	3	26	10	260	780	17.5
	4	17	10	170	765	15.8
Jezzin	1	17	180	170	629	16.3

Depending on the above criteria, we distribute the zones as follows:

Qada	Zone	Estimated Number of Facilities	Estimated time to reach zone centre (minutes)	Estimated time to move between facilities (minutes)	Estimated time to fill questionnaire (minutes)	Total Time to accomplish the mission (hours)
	1	11	300	110	407	13.6
Hasbaya	2	6	300	60	222	9.7
	3	4	360	40	148	9.1
	1	20	240	100	740	18.0
Sour	2	15	240	225	450	15.3
Cour	3	12	240	180	444	14.4
	4	15	240	150	555	15.8
	1	32	90	160	1184	23.9
Saida	2	25	60	250	750	17.7
	3	26	60	260	780	18.3
Marjayoun	1	11	240	110	407	12.6
warjayouri	2	18	240	180	540	16.0
	1	14	240	140	420	13.3
	2	8	300	80	240	10.3
Baalbeck	3	9	360	90	270	12.0
Daalbeck	4	14	240	140	420	13.3
	5	14	240	140	420	13.3
	6	9	240	90	360	11.5
Hermel	1	9	360	90	360	13.5

Total number of	
zones:	31

Total number of workinghours486.4

Transportation:

The management of transportation of such a number of teams (22 teams) in a short period was difficult, so we decide to pay money to the teams, and they can manage the way of transportation.

Teams Training and Distribution:

We arrange a meeting to the volunteers to train them on the questionnaire and to distribute them among the zones.

- Training: On the data collection form, on both Arabic and English languishes.
- Distribution of teams: In the meeting of volunteers, each volunteer register their personal information (Name, Phone, and Email), the preferred zone, and the name of his colleague. The distribution of teams among the zones took in consideration the preferred zone for each team and if the team had a place to stay in the zone in the period of assessment.
- *Distribution database development:* To process all this information (Qadas, Zones, Centres, Criteria, preferred zones for each person, Teams) we developed a small database and software to:
 - Group the volunteers in teams and distribute them among their preferred zones
 - Register the phases of the project for each team (receiving the package, data collection in process, delivering the package,..).

- Team fail recovery: if a team fails to collect data for any reason the software allow us to redistribute the available teams in the missing zones.
- Reports: the software provide as the necessary reports to manage the data collection process (List of the facilities for each team, list of volunteers, list of zones, distribution of the volunteers among zones)

The software group 47 volunteers into 23 teams and distribute them among 31 zones.

Package delivery and road training:

We provide each team a list of health facilities and hospitals, a set of questionnaires, a set of identification letters, a map and a set of telephone numbers in case of emergency including the project manager, the data officer, the head of the district office. The security officer in WHO provide them instruction about mines and safety and we train them how they can reach each centre by follow the main roads in the maps.

Phase 2 Data Collection

The data collection phase was organized in two steps:

- 1. South of Lebanon(Saida, Sour, Jezzin), Nabatieh, Beirut suburbs and Beirut
- 2. Bekaa and Hermel

The first step of Data collection phase started in Monday, 21 Aug and it takes 3 days to finish, except the zone 1 of Saida Qada, because a volunteer fail to accomplish the task so we deliver a part of this zone to another team.

The second step started on Friday, 25 Aug and it takes 2 days to accomplish.

<u>Contacting the Heads of district health offices and NGOS</u>: before starting the data collection phase, we contact the heads of district health offices and NGOS and ask them to help the volunteers to collect data.

<u>Teams Follow-up</u>: during this phase we contact each team several times to assure the running of the process, in some areas like Bint Jbeil and Nakoura there was no coverage for mobile phones and the fixed telephone network was damaged, we contact local NGOS and get the location of mobile coverage (ex: Bint Jbeil Gov Hospital) and we deliver it to the teams.

Questionnaire receiving and teams briefing:

After accomplishing the data collection process, we receive the questionnaires from the volunteers, we check the content of the questionnaires to assure the quality of information, and we made a briefing for each team.

Redistribution of teams:

In case on team could not manage to achieve the task on time, we re-assign the task to the 2nd team in the same governorate, to cover the missing area (Saida case).

Data Collection crosschecking:

After receiving information and checking the content of the questionnaires, one team (WHO staff) was tasked to re-contacted 30% of the facilities per team to assure the visits, and validate the data with a different representative from the health facility.

Pictures:



Bint Jbeil Gov Hospital



Debl Dispensary



Road status to a dispensary



Yater Dispensary



Yaroun Health centre



Red Cross Dispensary in Rmaich



Debl Dispensary



Deir Intar dispensary



Kafra Dispensary



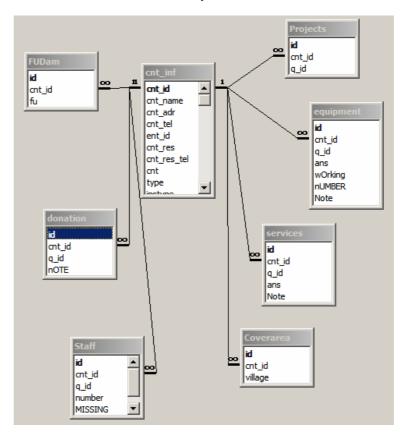
Phase 3 Data Entry

During the Data collection phase we start designing and developing the database and the data entry software, as a rapid development tool we use Microsoft Access Database, which allows us to develop interfaces for data entry for Health Facilities and hospitals.

System Design and development:

The database was created in a relational model to assure the stability of data and the flexibility of modification and upgrading in case of the existence of changes in the content of questionnaire, per example the options for a certain question are exist in a separated table which allow us to add options to this question easily without changing the structure of the database. The database includes 8 main data tables, 2 parameter tables, and several temporary tables.

We use an interface to create the questionnaire of the health facility and to allow users to enter and check the data. The software is divided in 2 files one for the hospitals and the other of the health facilities. The database was installed on a server and the application on 7 computers to allow users to make data entry.



<u>Data Entry</u>: the users (6 users) made the data entry under supervision of the Data Officer and the project manager.

<u>Data Cleaning</u>: After entering the questionnaire for a certain Qada, we check the validity of data and we made the necessary modification

<u>Data Preparation for Analysis</u>: We prepared a flat table that contains all data from different tables.

Data Analysis Plan

I) Outpatient facilities

<u>Type of Analysis:</u> Descriptive analysis to examine the distribution of functional/not functional, possible reasons for not functioning, shortage of resources in functioning of outpatient health facilities to detect urgent need by district

<u>Targeted Population</u>: all dispensaries, health care centres and outpatient hospital departments in targeted districts in Lebanon (Beirut, Beirut Suburbs, Bent Jbeil, Baalbeck, Hasbaya, Jezzin, Marjayoun, Nabatieh, Hermel and Sour)

<u>Outcome variable</u>: Functioning status; a categorical variable including 4 categories (Functioning, partially functioning, not functioning and no information*)

Variables of interest:

- Type of facility: Dispensary, health centre and outpatient hospital department
- *Ownership of facility*: different owners (Ministry of health, Ministry of social affairs, Municipality and non-governmental organizations)
- Road accessibility: (Yes/No)
- *Physical damage to buildings*: totally destroyed, severe damage, minor damage, equipment damage and no damage
- Resources availability in terms of Central Electricity, Generators, Mazout and fuel storage, running water, drinking water, sewerage system, and transportation
- Human resources availability in terms of doctors, nurses, paramedics and others
- Services provided: medical, maternal, paediatric, diagnostic, and surgery services.

Services provision in outpatient health facilities were initially 18 ones and for simplicity reasons were recoded and became 5 categories:

- 1. The first one is maternal health that includes antenatal care, delivery, emergency obstetrician, family planning, and postpartum care.
- 2. The second one is health education that includes environmental health, health education, and nutrition advice/breast feeding advice.
- 3. The third is general consultation that includes care of the older people, medical conditions, mental health, minor surgical care, and others.
- 4. The fourth is paediatric services and that includes immunizations, rehydration, and well baby care.
- 5. The last one is diagnostic services and that involves laboratory services and radiological services.

The outpatient facilities with no information were due to no response, unreachable, does not exist and missing records. It was sorted by district, road accessibility, and ownership for further investigation.

II) Hospitals

<u>Type of Analysis:</u> Descriptive analysis to examine the distribution of functional/not functional, possible reasons for not functioning, shortage of resources in functioning Hospitals to detect urgent need by district

<u>Targeted Population:</u> all hospitals in targeted districts in Lebanon (Beirut, Beirut Suburbs, Bent Jbeil, Baalbeck, Hasbaya, Marjayoun, Nabatieh, Hermel, Saida, and Sour.

<u>Outcome variable:</u> Functioning status; a categorical variable including 4 categories (Functioning, partially functioning, not functioning and no information*)

Variables of interest:

- Ownership of hospitals: Ministry of health, Military, Private and not defined
- Total number of beds
- Road accessibility: (Yes/No)
- Physical damage to buildings: Severe damage, minor damage and no damage
- *Resources availability* in terms of Central Electricity, Generators, Mazout and fuel storage, running water, drinking water, sewerage system, medical waste disposal and transportation
- Human resources availability in terms of doctors, nurses, paramedics and others
- Services provided: blood bank services, diagnostic, laboratory, maternal, medical, oncology, renal dialysis, and surgical services.
- Shortage of medications; regarding the surgical, medical usage

* The hospitals with no information were due to no response, no visit, and missing records. It was sorted by district, road accessibility, and ownership for further investigation

Results

1. Out-patient clinic in primary health care centres

As the direct destruction of health facilities was a major impact of the latest hostilities on the health services, major destruction of PHC in Marjayoun, Bent Jbeil table (1), southern areas of Sour table (2) which affect both the physical structure and the functional one, as the population moved mainly to north and east direction, fortunate enough the PHC in Hermel, Bekaa, was the least affected and continued to serve the displaced population during the month of military operation.

The ownership of the PHC give a clear idea about the potential partner for the recovery phase as NGO's have an average of 65% of the PHC in south table (1) ,and Bekaa valley Table (2) with the implication for implementation mechanisms .

Accessibility to the health facilities by road is a challenge as only 65% are accessible due to the road conditions as direct destruction or due to the UXO, which mean by clearing the road the access will be effectively improved.

The degree of damage was variable; from mainly total damage in Bent Jbeil, Marjayoun, to minor one in Sour, Hermel as broken windows, doors, but no major physical damage Table (1,2)

Figures 1-5 show the percentages of the variant mentioned in the above section.

Table (1) Main Characteristics of Outpatients Facilities Assessed-1

	Mount Lebanon			Nabatieh	
	Beirut Suburbs	Bent Jbeil	Hasbaya	Marjayoun	Nabatieh
	(n=42)	(n=30)	(n=19)	(n=26)	(n=48)
Functioning Status					
Functioning	22 (52%)	5 (17%)	13 (68%)	2 (8%)	29 (60%)
Partially functioning	3 (7%)	4 (13%)	0	1 (4%)	1 (2%)
Not Functioning	11 (26%)	19 (63%)	5 (26%)	16 (62%)	9 (19%)
No Information*	6 (15%)	2 (7%)	1 (6%)	7 (26%)	9 (19%)
Ownership		χ , <i>γ</i>	、		
Ministry of Health	2 (5%)	3 (10%)	3 (16%)	4 (15%)	4 (8%)
Ministry of Social Affairs	8 (19%)	12 (40%)	3 (16%)	9 (35%)	12 (25%́)
Municipality	5 (12%)	Û	2 (10%)	0	3 (6%)
Non Governmental	25 (59%)	12 (40%)	10 (53%)	12 (46%)	29 (61%)
Organization	2 (5%)	3 (10%)	1 (5%)	1 (4%)	Û
Not Defined				× ,	
Facility Type					
Dispensary	22 (56%)	21 (70%)	13 (68%)	15 (58%)	18 (37%)
Health centre	17 (44%)	8 (27%)	6 (32%)	10 (38%)	30 (63%)
Hospital outpatient /ER	Û	1 (3%)	О́	1 (4%)	О́
Road Accessibility		ζ, γ		· · ·	
Yes	15 (35%)	14 (47%)	15 (79%)	15 (58%)	34 (71%)
No	27 (65%)	16 (53%)	4 (21%)	11 (42%)	14 (29%)
Physical Damage**		· · ·			· · · · ·
Totally destroyed	3 (7%)	8 (27%)	0	1 (4%)	0
Severe damage	4 (9%)	10 (33%)	1 (5%)	7 (27%)	5 (10%)
Minor damage	3 (7%)	1 (3%)	0	2 (8%)	3 (6%)
Equipment Damage	2 (4%)	Û	0	0	Û
No Damage	30 (73%)	11 (37%)	18 (95%)	16 (61%)	40 (84%)
*No Information: Include Line		doop not ovict fooi			. ,

*No Information: Include Unreachable, no response & does not exist facilities

Table (2) Main Characteristics of Outpatients Facilities Assessed-2

	Beirut	So	uth	Ве	kaa
	Beirut	Jezzin	Sour	Hermel	Baalbeck
	(n=50)	(n=17)	(n=53)	(n=4)	(n=39)
Functioning Status					
Functioning	27 (57%)	12 (71%)	28 (53%)	4 (100%)	30 (77%)
Partially functioning	1 (2%)	0	4 (8%)	0	2 (5%)
Not Functioning	2 (4%)	2 (12%)	14 (26%)	0	5 (13%)
No Information*	20 (37%)	3 (17%)	7 (13%)	0	2 (5%)
Ownership					
Ministry of Health	5 (10%)	2 (12%)	7 (13%)	0	8 (21%)
Ministry of Social Affairs	4 (8%)	4 (23%)	14 (27%)	1 (25%)	7 (18%)
Municipality	0	1 (6%)	6 (11%)	0	2 (5%)
Non Governmental	39 (78%)	10 (59%)	26 (49%)	3(75%)	20 (51%)
Organization	2 (4%)	0	0	0	2 (5%)
Not Defined					
Facility Type**					
Dispensary	27 (64%)	15 (88%)	40 (75%)	3 (75%)	35 (90%)
Health centre	14 (33%)	1 (6%)	13 (25%)	1 (25%)	4 (10%)
Hospital outpatient /ER	1 (2%)	1 (6%)	0	0	0
Road Accessibility					
Yes	27 (54%)	13 (76%)	45 (85%)	4 (100%)	32 (82%)
No	23 (46%)	4 (24%)	8 (15%)	0	7 (18%)
Physical Damage					
Totally destroyed	0	0	0	0	0
Severe damage	1 (2%)	0	1 (2%)	0	1 (3%)
Minor damage	0	0	14 (26%)	0	0
Equipment Damage	0	0	0	0	0
No Damage	49 (98%)	17 (100%)	38 (72%)	4 (100%)	38 (97%)

* No Information, includes unreachable, no response and does not exist facilities ** Missing data

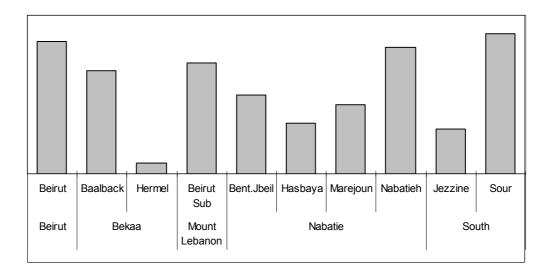
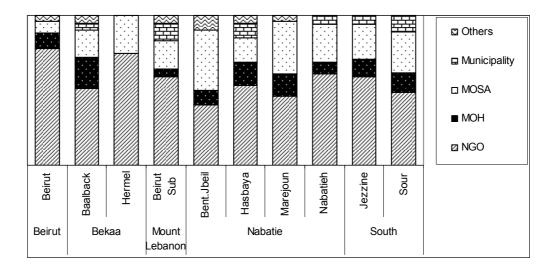


Figure (1) Primary health care facilities distribution by district

Figure (2) Outpatient facilities distribution by ownership



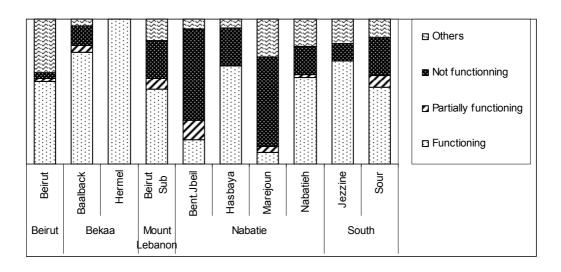
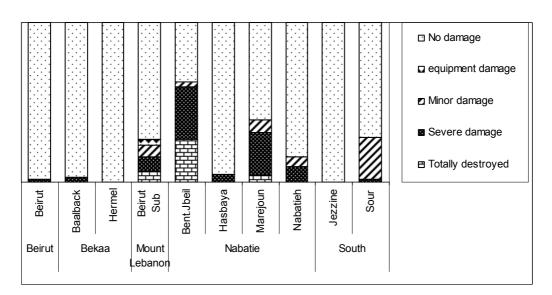


Figure (3) Outpatient facilities distribution by functioning status

Figure (4) Outpatient facilities distribution by physical damage



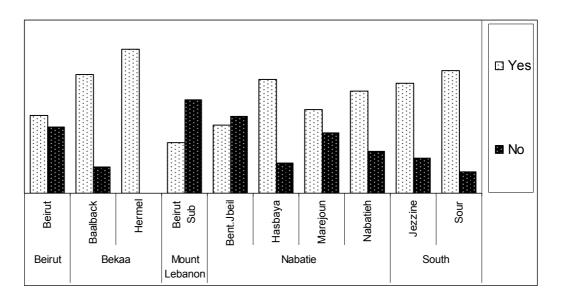


Figure (5) Outpatient facilities distribution by road accessibility

The infra structure and resources availability addressed in the following Tables 3-4 shows that

- Regarding the **power supply**: the main problem is in Marjayoun, Bent Jbeil and Nabatieh where 0-22% of functioning or partially functioning health facilities has a central city power supply, and the main source of power is the usage of generators which available in about 46% of the PHC, out of this centres about 13% has enough fuel storage (for one week) to run this facility.
- **Water supply**: while running water available in 50-90 % of the functioning PHC drinking water is the challenge as in Nabatieh, Marjayoun, and Bent Jbeil, which need water purification unites in this Facility as an urgent intervention.
- **Sewerage system** is a problem in Bent Jbeil, Southern Sour, while it not a priority one in the rest of the affected areas
- **Transportation** by Ambulance is a gap in almost all the affected areas as either a number of vehicles or the integrity of it. In addition, it is basic needs for sound emergency services.

Table (3) Resources Availability at Assessed Outpatients Facilities

				Lebanor							Nabati				
	Bei F	rut Subu P	urbs N	F	Bent Jbe	eil N	F	asba P	ya N	F	Marjayou P	in N	F	Nabatieh P	N
	(n=22)	(n=3)	(n=11)	(n=5)	(n=4)	(n=19)	(n=13)	•	(n=5)	(n=2)	(n=1)	(n=16)	(n=29)	(n=1)	(n=9)
Transportat	_	_			_				_						
ion	3	0	0	1	2	1 (5%)	4		0	1	1	1 (6%)	4	1	1
Ambulance	(14%)	0	0	(20%)	(50%)	1 (5%)	(31%)		0	(50%)	(100%	0	(14%)	(100%	(11%)
Vehicle	2 (9%)			2 (40%)	0		1 (8%)			(50%)) 0		7 (24%))	0
Power	(970)			(40 %)						(50 %)	0		(2470)		
resources															
Central	20	3	1	1	0	0	2		1	1	0	1 (6%)	12	0	1
power	(91%)	(100	(9%)	(20%)	2(50%	2 (11%)	(15%)		(20%)	(50%)	1	2	(41%)	1	(11%)
Generator	17	%)	1	1)	2 (11%)	6		1	1	(100%	(12%)	14	100%)	2
Mazout	(77%)	2	(9%)	(20%)	0	0	(46%)		(20%)	(50%))	0	(48%)	1	(22%)
storage	8	(67%)	0	1	0		0		1	2	1	0	7	(100%	1
Fuel storage	(36%)	0	0	(20%)			1 (8%)		(20%)	(100	(100%		(24%))	(11%)
	(32%)	0		(20%)					ı (20%)	%) 1)		5 (17%)	0	ı (11%)
	(32 /0)			(2070)					(20 %)	(50%)	0		(1770)		(1170)
Water										(0070)					
Running	20	3	0	1	2	1 (5%)	8		2	2	1	6	28	1	2
water	(91%)	(100	0	(25%)	(50%)	0	(62%)		(40%)	(100	(100%	(37%)	(97%)	(100%	(22%)
Drinking	6	%)		1	1		6		2	%))	0	24)	5
water	(27%)	0		(25%)	(25%)		(46%)		(40%)	0	0		(83%)	0	(55%)
Sewerage	21	3	1	1	0	1 (5%)	10		2	2	0	5	27	1	2
	(95%)	(100	(9%)	(25%)			(77%)		(40%)	(100		(31%)	(93%)	(100%	(22%)
		%)								%))	

F: Functioning facilities P: Partial functioning

N: Not functioning

Table (4) Resources Availability at Assessed Outpatients Facilities

		Beirut Beirut			Jezzin	South		Sour	Hern	nel	Bekaa	Baalbeck	
	F (n=27)	P (n=1)	N (n=2)	F (n=2)	P (n=28)	N (n=4)	F (n=14)	P N (n=5)	F (n=4)	PN	F (n=30)	P (n=2)	N (n=5)
Transportation		. ,	. ,	. ,	. ,	. ,	. ,	. ,	. ,		. ,	. ,	
Ambulance	14	0	0	0	10	1	1	0	0		5	1	0
Vehicle	(52%) 17 (63%)	0	0	0	(36%) 4 (14%)	(25%) 1 (25%)	(7%) 1 (7%)	0	0		(17%) 3 (10%)	50%) 1 (50%)	0
Power resources	(0070)				(11/0)	(2070)	(170)				(10,0)	(0070)	
Central power	27	1	1	2	12	4	1	1	4		28	1	0
Generator	(100%)	(100%)	(50%)	(100%)	(43%)	(100%)	(7%)	(20%)	(100%)		(93%)	(50%)	Ō
Mazout storage	18	1	1	1	16	4	3	1	4		11	0	0
Fuel storage	(67%)	(100%)	(50%)	(50%)	(57%)	(100%)	(21%)	(20%)	(100%)		(37%)	2	0
0	`15 <i>´</i>	` 1 <i>´</i>	`1 ´	`2 ´	`5 ´	` 1 <i>´</i>	`1´	` 1 <i>´</i>	`2 ´		`12 <i>´</i>	(100%)	
	(56%)	(00%)	(50%)	(100%)	(18%)	(25%)	(7%)	(20%)	(50%)		(40%)	Ò Ó	
	12	່ 1 ໌	<u></u> 1	2	2	່ 1 ໌	0	1	0		5		
	(44%)	(100%)	(100%)	(100%)	(7%)	(25%)		(20%)			(17%)		
Water													
Running water	27	1	1	1	24	3	5	2	4		28	2	0
Drinking water	(100%)	(100%)	(100%)	(50%)	(86%)	(75%)	(38%)	(40%)	(100%)		(93%)	(100%)	Ō
5	`24 ´	` 1 <i>´</i>	` 0 ´	`2 ´	`10 ´	`1 ´	` 0 ´	`2 ´	`3 ´		`23 ´	` 1 <i>´</i>	
	(89%)	(100%)		(100%)	(36%)	(25%)		(40%)	(75%)		(77%)	(50%)	
Sewerage	`25 ´	. 1 ´	1	`2 ´	`27 [′]	`4´	7	` 2 ´	`3 ´		` 20 ´	`2 ´	0
-	(93%)	(100%)	(50%)	(100%)	(96%)	(100%)	(50%)	(40%)	(75%)		(67%)	(100%)	

F: Functioning facilities P: Partial functioning

N: Not functioning

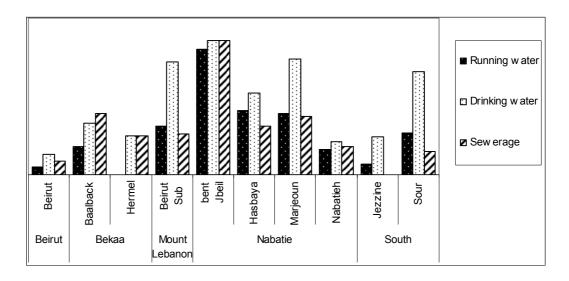


Figure (6) Outpatient facilities distribution by water and sewerage shortage



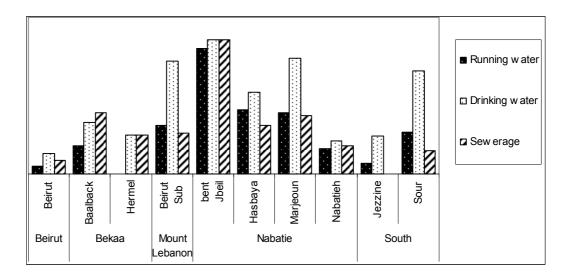


Table (5) Human Resources Availability at Assessed Outpatients Facilities

	Mount Lebanon			Nabatieh	
	Beirut Suburbs (n=42)	Bent Jbeil (n=30)	Hasbaya (n=19)	Marjayoun (n=26)	Nabatieh (n=48)
Dentist	λ γ		()		, , , , , , , , , , , , , , , , , , ,
No	36 (86%)	28 (93%)	18 (95%)	26 (100%)	47 (98%)
Yes	6 (14%)	2 (7%)	1 (5%)		1 (2%)
ENT					
No	1 (2%)				
Yes	41 (98%)	30 (100%)	19 (100%)	26 (100%)	48 (100%)
Eyes					
No					
Yes	42 (100%)	30 (100%)	19 (100%)	26 (100%)	48 (100%)
General Practitioner					
No	18 (43%)	19 (63%)	7 (37%)	13 (50%)	22 (46%)
Yes	24 (57%)	11 (37%)	12 (63%)	13 (50%)	26 (54%
Health Educator					
No	32 (76%)	27 (90%)	15 (79%)	25 (96%)	
Yes	10 (24%)	3 (10%)	4 (21%)	1 (4%)	48 (100%)
Internist					
No	21 (50%)	23 (77%)	15 (79%)	25 (96%)	29 (60%)
Yes	21 (50%)	7 (23%)	4 (21%)	1 (4%)	19 (40%)
Laboratory technician					
No	36 (86%)	27 (90%)	17 (90%)	25 (96%)	46 (96%)
Yes	6 (14%)	3 (10%)	2 (10%)	1 (4%)	2 (4%)
Midwife					
No	36 (86%)	29 (97%)	19 (100%)	25 (96%)	47 (98%)
Yes	6 (14%)	1 (3%)		1 (4%)	1 (2%)
Obstetrician					
Yes	20 (48%)	21 (70%)	11 (58%)	21 (81%)	25 (52%)
No	22 (52%)	9 (30%)	8 (42%)	5 (19%)	23 (48%)
Pediatrician					
No	17 (40%)	18 (60%)	10 (53%)	15 (58%)	23 (48%)
Yes	25 (60%)	12 (40%)	9 (47%)	11 (43%)	25 (52%)

Pharmacist

	Mount Lebanon			Nabatieh	
	Beirut Suburbs (n=42)	Bent Jbeil (n=30)	Hasbaya (n=19)	Marjayoun (n=26)	Nabatieh (n=48)
No	33 (79%)	26 (87%)	19 (100%)	24 (92%)	42 (88%)
Yes	9 (21%)	4 (13%)		2 (8%)	6 (12%)
Physiotherapist	· · · ·				
No	36 (86%)	29 (97%)	19 (100%)	25 (96%)	45 (94%)
Yes	6 (14%)	1 (3%)		1 (4%)	3 (6%)
Practical Nurse	· · · ·	· · ·			
No	35 (83%)	25 (83%)	15 (79%)	19 (73%)	39 (81%)
Yes	7 (17%)	5 (17%)	4 (21%)	7 (27%)	9 (19%)
Radiographer	× ,		, , , , , , , , , , , , , , , , , , ,		
No	38 (90%)	29 (97%)	18 (95%)	25 (96%)	46 (96%)
Yes	4 (10%)	1 (3%)	1 (5%)	1 (4%)	2 (4%)
Registered Nurse	× ,	· · · ·	, , , , , , , , , , , , , , , , , , ,	× ,	
No	23 (55%)	23 (77%)	14 (74%)	24 (92%)	32 (67%)
Yes	19 (45%)	7 (23%)	5 (26%)	2 (8%)	16 (33%)
Skin	· · ·	· · · ·		· · /	
No	1 (2%)		1 (5%)		
Yes	41 (98)	30 (100%)	18 (95%)	26 (100%)	48 (100%)
Social worker		· · · ·	· · · ·		
No	36 (86%)	26 (87%)	14 (74%)	23 (88%)	40 (83%)
Yes	6 (14%)	4 (13%)	5 (26%)	3 (12%)	8 (17%)
Surgery	× ,		, , , , , , , , , , , , , , , , , , ,		
No	37 (88%)	27 (90%)	18 (95%)	26 (100%)	47 (98%)
Yes	5 (12%)	3 (10%)	1 (5%)		1 (2%)

As clearly addressed in Table 5, Human resources was a major gap in the affected areas, as only 50% of the PHC has a General practitioners as a service provider, and a sever shortage in other specialties with major gap in obstetric and surgical fields, and the qualified nursing staff was a 75% shortage of the required for the operation of the PHC, and that shortage affect both the southern region and also the northern, and eastern one.

Table (6) Human Resources Availability at Assessed Outpatients Facilities

	Beirut Beirut	So Jezzin	uth Sour	Hermel	Bekaa Baalbeck
	(n=50)	(n=17)	(n=53)	(n=4)	(n=39)
Dentist					
No	48 (100%)	17 (100%)	46 (87%)	3 (75%)	33 (92%)
Yes			7 (13%)	1 (25%)	3 (8%)
ENT					
No				1 (25%)	1(25%)
Yes	1 (100%)	17 (100%)	53 (100%)	3 (75%)	3 (75%)
Eyes					
No				0	1 (12%)
Yes	1 (100%)	17 (100%)	53 (100%)		7 (88%)
General Practitioner				0	
No	23 (47%)	5 (29%)			10 (26%)
Yes	26 (53%)	12 (71%)	18 (34%)		29 (74%)
			35 (66%)		
Health Educator				0	
No	41 (84%)	16 (94%)	44 (83%)		34 (92%)
Yes	8 (16%)	1 (6%)	9 (17%)		3 (8%)
Internist					
No	36 (73%)	11 (65%)	36 (68%)	2 (50%)	22 (58%)
Yes	13 (27%)	6 (35%)	17 (32%)	2 (50%)	16 (42%)
Laboratory technician				0	
No	41 (84%)	16 (94%)	42 (79%)		32 (89%)
Yes	8 (16%)	1 (6%)	11 (21%)		4 (11%)
Midwife				0	
No	42 (86%)	16 (94%)	44 (83%)		27 (75%)
Yes	7 (14%)	1 (6%	9 (17%)		9 (25%)
Obstetrician				0	
Yes	28 (57%)	12 (71%)	28 (53%)		16 (42%)
No	21 (43%)	5 (29%)	25 (47%)		22 (58%)
Pediatrician	· · ·	· · ·	、 <i>,</i>		. ,
No	23 (47%)	8 (47%)	22 (42%)	1 (25%)	14 (36%)
Yes	26 (53%)́	9 (53%	31 (58%)	3 (75%)	15 (̀64%)́
Pharmacist	、 <i>,</i>	•	· · · ·	О́	. ,

	Beirut	South			Bekaa
	Beirut (n=50)	Jezzin (n=17)	Sour (n=53)	Hermel (n=4)	Baalbeck (n=39)
No	35 (71%)	16 (94%)	46 (87%)		28 (76%)
Yes	14 (29%)	1 (6%)	7 (13%)		9 (24%)
Physiotherapist					
No	44 (90%)		50 (94%)	0	34 (94%)
Yes	5 (10%)	17 (100%)	3 (6%)		2 (6%)
Practical Nurse					
No	29 (59%)	9 (53%)	35 (66%)	3 (75%)	21 (54%)
Yes	20 (41%)	8 (47%)	18 (34%)	1 (25%)	18 (46%)
Radiographer					
Ňo	43 (88%)	16 (94%)	48 (91%)	3 (75%)	31 (86%)
Yes	6 (12%)	1 (6%)	5 (9%)	1 (25%)	5 (14%)
Registered Nurse					
No	25 (51%)	13 (76%)	37 (70%)	3 (75%)	24 (63%)
Yes	24 (49%)	4 (24%)	16 (30%)	1 (25%)	14 (37%)
Skin				. ,	
No					1 (17%)
Yes		17 (100%)	53 (100%)	1 (100%)	5 (83%)
Social worker				, , , , , , , , , , , , , , , , , , ,	
No	35 (71%)	15 (88%)	41 (77%)	3 (75%)	31 (86%)
Yes	14 (29%)	2 (12%)	12 (23%)	1 (25%)	5 (14%)
Surgery	. ,		· · · ·		
No	48 (100%)	17 (100%)	49 (92%)	2 (50%)	34 (94%)
Yes	. ,	· · /	4 (8%)	2 (50%)	2 (6%)

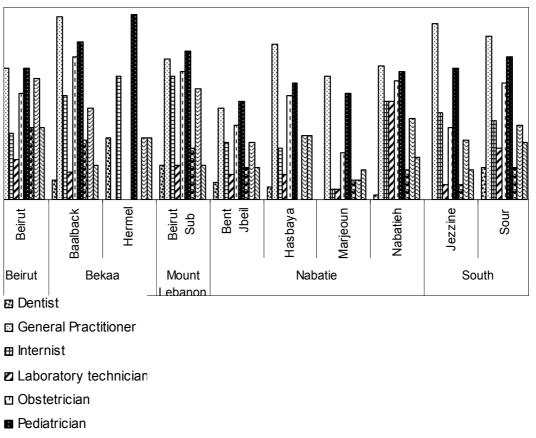


Figure (8) Human resources available in outpatient facilities

- Pharmacist
- Registered Nurse
- Social w orker

Service delivered during the last hostilities

Services provided during the war for women and children include antenatal, delivery, and postnatal care, emergency obstetric care, and well childcare such as immunizations, however, very few facilities are offering skilled care. Less than a quarter of facilities are providing antenatal or postpartum care, and even fewer, about ten percent, are providing delivery and emergency obstetric services. In addition, less intensive nutritional/breast-feeding and family planning counselling are provided at less than 20% of facilities. Immunization and well-child care are provided by slightly less than a third of the facilities. The scope and quality of these services is also unspecific and probably variable between sites.

District wise, only one, provides ANC through about a third of its facilities; other districts range from 11%-39%. Deliveries services are absent in two districts, and are only available in one or two facilities in all but one district. Emergency obstetric care (EmOC) care has a similar pattern with five districts functioning at about 10% or less. There is a great variation among districts in FP services ranging from 2% - 76% of facilities. Among the functioning units, only 23% of the total appeared to provide antenatal care but the package is unclear. It was reported that only less than 10% of those provided delivery care to pregnant women. Similarly, less than 10% was reported to provide emergency obstetric care, which is unclear whether it is an essential or comprehensive Obstetric care. About 20% of the units appear to provide postpartum care, which is where the majority of pregnancy related complications occur. Similarly, in about 20% health facilities provide well baby care, while family planning services on the other hand are provided in about 15% of the functioning centres.

Meanwhile the diagnostic service was an addressed gap in most of the regions, which include laboratory facilities with a direct impact on the quality of diagnosis and the services provided by the health centres.

Table (7) Services Availability at Assessed Outpatients Facilities

	Mount Lebanon		Nabati		
	Beirut Suburbs	Bent Jbeil	Hasbaya	Marjayoun	Nabatieh
Maternal Services			-		
No	32 (76%)	21 (72%)	14 (74%)	21 (81%)	26 (54%)
Yes	10 (24%)	8 (28%)	5 (26%)	5 (19%)	22 (46%)
Pediatric services					
No	31 (74%)	20 (69%)	12 (63%)	22 (85%)	28 (58%)
Yes	11(26%)	9 (31%)	7 (37%)	4 (15%)	20 (42%)
General consultation	· · · ·				, , , , , , , , , , , , , , , , , , ,
services					
No	30 (71%)	19 (66%)	7 (37%)	19 (73%)	21 (44%)
Yes	12 (29%)	10 (34%)	12 (63%)	7 (27%)	27 (56%)
Educational services					, , , , , , , , , , , , , , , , , , ,
No	32 (76%)	21 (72%)	9 (47%)	26 (100%)	44 (92%)
Yes	10 (24%)	8 (28%)	10 (53%)	, , , , , , , , , , , , , , , , , , ,	4 (8%)
Diagnostic services	· · · ·				
No	35 (83%)	29 (100%)	17 (90%)	25 (96%)	43 (90%)
Yes	7 (17%)	. ,	2 (10%)	1 (4%)	5 (10%)

Table (8) Services Availability at Assessed Outpatients Facilities

	Beirut	So	uth	Ве	kaa
	Beirut	Jezzin	Sour	Hermel	Baalbeck
Maternal Services					
No	32 (64%)	4 (24%)	40 (76%)	3 (75%)	22 (61%)
Yes	18 (36%)	13 (76%)	13 (24%)	1 (25%)	14 (39%)
Pediatric services					
No	26 (52%)	7 (41%)	34 (64%)	1 (25%)	11 (31%)
Yes	24 (48%)	10 (59%)	19 (36%)	3 (75%)	25 (69%)
General consultation					
No	29 (58%)	5 (29%)	29 (55%)	4 (100%)	25 (69%)
Yes	21 (42%)	12 (71%)	24 (45%)		11 (31%)
Educational services					
No	23 (46%)	10 (59%)	39 (74%)		13 (36%)
Yes	27 (54%)	7 (41%)	14 (26%)	4 (100%)	23 (64%)
Diagnostic services					
No	31 (62%)	16 (94%)	42 (79%)	3 (75%)	27 (75%)
Yes	19 (38%)	1 (6%)	11 (21%)	1 (25%)	9 (25%)

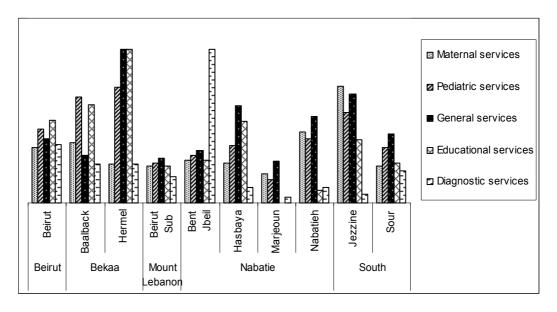


Figure (9) Services provided during war in outpatient facilities

PHC with no information was mainly due to refusal, followed by unreachable mainly due to road conditions, most of these centers were owned by municipality, with major concentration in Beirut as in table 9.

Ownership	Does Not Exist	No Response	Unreachable	Missing Record
Ministry of Health Ministry of Social Affairs Municipality Non Governmental Organizations Not Defined	1 (11%) 0 7 (78%) 1 (11%)	2 (8%) 2 (8%) 1 (4%) 19 (76%) 1 (4%)	1 (5%) 3 (15%) 7 (35%) 8 (40%) 1	1 (33%) 0 2 (67%) 0
District				
Baalbeck	0	2 (8%)	0	0
Beirut	1 (11%)	7 (28%)	9 (45%)	3 (100%)
Beirut Suburbs	2 (22%)	3 (12%)	1 (5%)	
Bent Jbeil	0	0	2 (10%)	
Hasbaya	1 (11%)	0	0	
Jezzin	0	3 (12%)	0	
Marjayoun	5 (56%)	1 (4%)	1 (5%)	
Nabatieh	0	7 (28%)	2 (10%)	
Sour	0	2 (8%)	5 (25%)	
Road Accessibility				
No	NA	23 (92%)	19 (95%)	3 (100%)
Yes		2 (8%)	1 (5%)	0
Total NA: Not Applicable	9	25	20	3

Table (9) Characteristics of Outpatients Facilities with No Information

2. Assessment of the hospitals

Referring to direct physical damage, secondary health care facilities were in a better position than the Primary Health Centres (PHC). 33% of total damaged hospitals in southern Sour, while in Marjayoun and Bent Jbeil where were the major destruction of PHC the Hospital totally damage was not more than 22%, which explain the surgical emergency care provision to victim of war during the hostilities.

Although the total destruction had a low percentage in Marjayoun and Bent Jbeil, but the hospital were not functioning due to destruction of the support resources as power supply, water, and shortage in drugs.

Hasbaya as it has only one hospital and was not damaged, it was the one of the main service provider to the displaced population as it has a functioning power, and water supply, with a 24 access to drugs, while it is one of the gaps in all the other hospitals, which have a direct effect on the provision of quality emergency care and this gap exist in all the region, with no relation to the ownership of the facility, but it could be explained by the lack of pharmacist.

In contrary to the PHC the ownership of the hospital were mainly by MOPH in the affected areas in the south while it is shared with the private sector in Beirut, Sour, and Nabatieh.

The availability of power source was a major gap in Marjayoun, Nabatieh, and Bent Jbeil with a shortage in the alternative sources as generator and the fuel for operating the alternative source, the shortage of fuel was addressed in Nabatieh, Sour, Mountain Lebanon, and Baalbeck.

Water supply, in spite of the fair access to running water in Baalbeck, Sour, the water supply either for running water and drinking water was a serious shortage specially in Marjayoun, and Bent Jbeil which matching the magnitude of infra-structure damages in this region.

The damaged sewerage system and leakage of the pipeline was registered in Bent Jbeil and marjeon, which give an alarming indicator for the fragility of the environment, and the public health risk when combined by destructed water supply system.

Road access to the hospitals registered as challenge in Bent Jbeil, Marjayoun, and even Hasbaya, mainly due to UXO.

Table (10) Main Characteristics of Hospitals Assessed

	Mount Lebanon		Nabatieh		
	Beirut Suburbs (n=8)	Bent Jbeil (n=3)	Hasbaya (n=1)	Marjayoun (n=2)	Nabatieh (n=5)
Functioning Status				ζ, γ	
Functioning	3 (38%)	0	1 (100%)	0	3 (60%)
Partially functioning	2 (25%)	2 (67%)	0	0	0
Not Functioning	1 (12%)	1(33%)	0	2 (100%)	1 (20%)
No Information*	2 (25%)	0	0	0	1 (20%)
Ownership**					
Ministry of Health	0	1 (50%)	1 (100%)	1(100%)	1 (25%)
Military	0	0	0	0	0
Private	5 (71%)	1 (50%)	0	0	3 (75%)
Not defined	2(29%)	0	0	0	1(25%)
Total number of beds**	507	84	54	82	272
Availability of drugs on					
24h Basis					
Yes	3 (37%)	1 (33%)	1 (100%)	0	2 (40%)
No	5 (63%)	2 (67%)	0	2 (100%)	3 (60%)
Physical Damage					
Severe damage	2 (25%)	1 (33%)	0	0	1 (20%)
Minor damage	2 (25%)	0	0	0	2 (40%)
No damage	4 (50%)	2 (67%)	1 (100%)	2 (100%)	2 (40%)

* No Information, includes unreachable, no response & does not exist hospitals ** Out of 82 hospitals, ownership was recorded for 57 thus percentages were calculated based on the collected data

Table (11) Main Characteristics of Hospitals Assessed-2

	Beirut Sou		uth	Bekaa	
	Beirut	Saida	Sour	Hermel	Baalbeck
	(n=28)	(n=14)	(n=6)	(n=4)	(n=11)
Functioning Status					
Functioning	11 (39%)	9 (64%)	5 (83%)	3 (75%)	5 (46%)
Partially functioning	3 (11%)	0	0	0	2 (18%)
Not Functioning	9 (32%)	4 (29%)	1 (17%)	1 (25%)	2 (18%)
No Information*	5 (18%)	1 (7%)	0	0	2 (18%)
Ownership**					
Ministry of Health	1 (6%)	0	1 (20%)	1 (33%)	1 (13%)
Military	1 (6%)	1 (11%)	4 (80%)	0	0
Private	14 (76%)	8 (89%)	0	2 (66%)	7 (87%)
Not Defined	0	0	0	0	0
Total number of beds**	1321	1004	398	108	509
Availability of drugs					
Yes	15 (52%)	3 (20%)	5 (83%)	1 (25%)	3 (27%)
No	14 (48%)	12 (80%)	1 (17%)	3 (75%)	8 (73%)
Physical Damage				. ,	
Severe damage	0	1 (7%)	2 (33%)	0	1 (9%)
Minor damage	0	`О́	1 (17%)	0	О́
No Damage	28 (100%)	13 (93%)	3 (50%)	4 (100%)	10 (91%)

*No Information: Include Unreachable, no response & does not exist Hospitals ** Out of 82 hospitals, ownership was recorded for 57 thus percentages were calculated based on the collected data

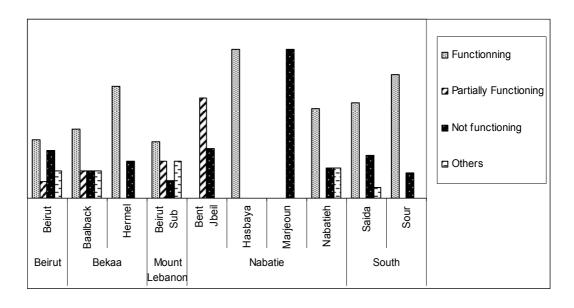
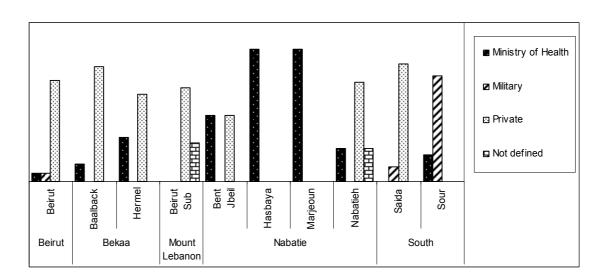


Figure (10) Hospitals distribution by functioning status

Figure (11) Hospitals distribution by ownership



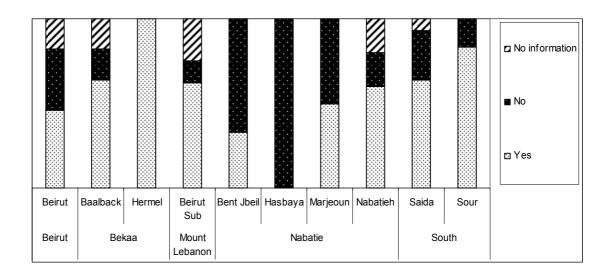
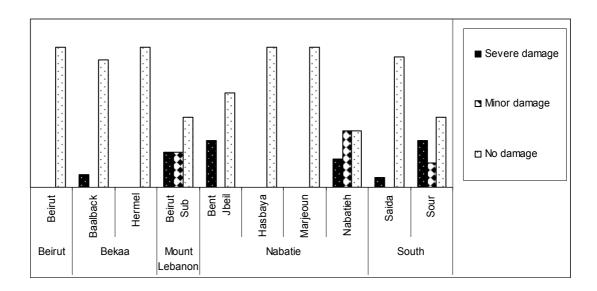


Figure (12) Hospitals distribution by road accessibility

Figure (13) Hospitals distribution by physical damage



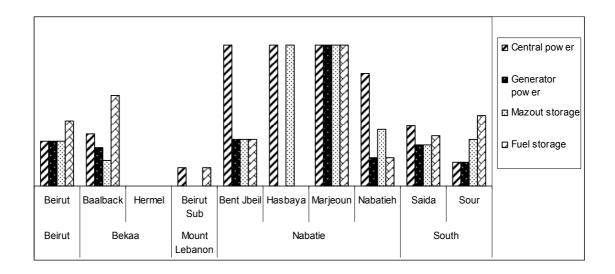


Figure (14) Shortage of power resources at assessed hospitals

Figure (15) Shortage of water / sewerage at assessed hospitals

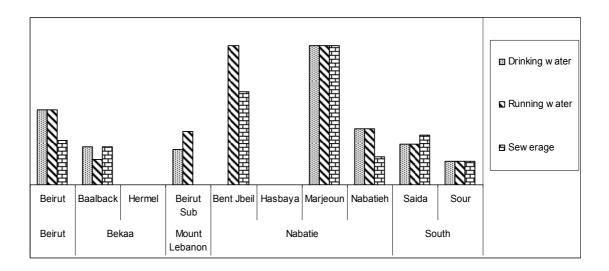


Table (12) Resources Availability at Assessed Hospitals

		unt Leba							I	Naba	atieh			
		irut Subu		-	Bent Jbe		Hasba		-	-	Marjayoun*		abatieh	
	F (n=3)	P (n=2)	N (n=1)	F	P (n=2)	N (n=1)	F (n=1)	ΡΝ	F	Ρ	N (n=2)	F (n=3)	P (n=0)	N (n=1)
Transportation	(11=3)	(11=2)	(=.)		(11-2)	(= .)	(=.)				(11=2)	(11=3)	(11=0)	(11-1)
Ambulance	1 (33%)	2 (100%)	0		1 (50%)	0	0				0	2 (67%)		0
Power	,	()												
resources														
Central power	2	2	1		0	0	0				0	0		0
	(67%)	(100%)	(100%)									3		0
Generator	3	2	1		2 (100%)	0	1				0	(100%)		0
	(100%)	(100%)	(100%)				(100%)					2 (67%)		0
Mazout storage	3	2	1		2 (100%)	0	0				0	3		
	(100%)	(100%)	(100%)				1					(100%)		
Fuel storage	2	2	1		2 (100%)	0	(100%)				0			
	(67%)	(100%)	(100%)											
Water														
Running water	2	1	1		2 (100%)	1	1				0	2 (67%)		0
Drinking water	(67%)	(50%)	(100%)		0	(100	(100%)				0	2 (67%)		0
	1	1	1			%)	1							
-	(33%)	(50%)	(100%)		4 (500()	0	(100%)				•	<u> </u>		~
Sewerage	3	2	1		1 (50%)	0	1				0	3		0
	(100%)	(100%)	(100%)		0	0	(100%)				0	(100%)		0
Medical Waste	3	2	1		0	0	1				0	3		0
Disposal Disposal	(100%)	(100%)	(100%)		0	0	(100%)				0	(100%)		0
Blood Bank	2	1	1		0	0	0				0	0		0
Services	(67%)	(50%)	(100%)		0	0	0				0	4 (000/)		0
Renal Dialysis	2	0	1		0	0	0				0	1 (33%)		0
Services	(67%) 3	1	(100%)		1 (500()	0	0				1 (500/)	2		0
Road	•	1	I (1000/)		1 (50%)	U	0				1 (50%)	3 (100%)		0
Accessibility	(100%)	(50%)	(100%)		e							(100%)		

* At bent Jbeil & Marjayoun there are no hospitals fully functioning **At Hasbaya there is one functioning hospital

Table (13) Resources Availability at Assessed Hospitals

		Beirut Beirut			Saida	So	uth	Sour			Hermel	Be	ekaa	Baalbeck	
	F (n=11)	P (n=3)	N (n=9)	F (n=9)	P (n=0)	N (n=4)	F (n=5)	P (n=0)	N (n=1)	F (n=3)	P (n=0)	N (n=0)	F (n=5)	P (n=2)	N (n=2)
Transportation Ambulance	5 (45%)	1 (33%)	0	3 (33%)		0	2 (40%)		0	1 (33%)			4 (80%)	2 (100%)	0
Power resources Central power	10(91%)	3	1	7		0	5 (100)		0	3			3	2	0
Generator Mazout storage	10`´´ (91%)	(100%) 3	(11%) 1	(78%) 9		0 0	5 (100%)		0 0	(100%) 3			(60%) 4	(100%) 2	0 0
Fuel storage	10 (91%) 7 (64%)	(100%) 3 (100%) 2 (67%)	(11%) 1 (11%) 1 (11%)	(100%) 9 (100%) 8 (89%)		0	4 (80%) 3 (60%)		0	(100%) 3 (100%) 3 (100%)			(80%) 5 (100%) 2 (40%)	(100%) 2 (100%) 0	0
Water		、		、 ,		_	_			· · · ·					_
Running water Drinking water	10 (91%) 10 (91%)	2 (67%) 2 (67%)	1 (11%) 1 (11%)	9 (100%) 9 (100%)		0 0	5 (100% 5 (100%)		0 0	3 (100%) 3 (100%)			4 (80%) 5 (100%)	2 (100%) 2 (100%)	0
Sewerage	(91%) (91%)	(07 %) 3 (100%)	(11%) 1 (11%)	(100 %) 8 (89%)		0	(100%) 5 (100%)		0	(100%) 3 (100%)			(100%) 5 (100%)	(100%) 2 (100%)	0
Medical Waste Disposal	9 (82%)	3 (100%)	Ò	7 (78%)		0	1 (20%)		0	3 (100%)			4 (80%)	2 (100%)	0
Blood Bank Services	4 (36%)	3 (100%)	0	4 (44%)		0	2 (40%)		0	2 (67%)			3 (60%)	1 (50%)	0
Renal Dialysis Services	5 (45%)	2 (67%)	0	5 (56%)		0	4 (80%)		0	1 (33%)			2 (40%)	(50%) 1 (50%)	0
Road Accessibility	10 (91%)	3 (100%)	0	9 (100%)		0	5 (100%)		0	3 (100%)			5 (100%)	2 (100%)	0

Table (14) Human Resources Availability at Assessed Hospitals

	Mount Lebanon		Nabatieh		
	Beirut Suburbs	Bent Jbeil	Hasbaya	Marjayoun	Nabatieh
Anaesthesiologist	4 (500())	0 (07%)		0 (100%)	0 (400()
No Yes	4 (50%)	2 (67%)	1 (1009/)	2 (100%)	2 (40%)
	4 (50%)	1 (33%)	1 (100%)		3 (60%)
Cardiologist No	4 (50%)	1 (33%)		2 (100%)	2 (40%)
Yes	4 (50%)	2 (67%)	1 (100%)	2 (100 %)	2 (40 %) 3 (60%)
ENT Specialist	4 (50 %)	2 (07 /0)	T (100 %)		3 (00 %)
No	6 (75%)	3 (100%)		2 (100%)	2 (40%)
Yes	2 (25%)	0 (10070)	1 (100%)	2 (10070)	3 (60%)
General practitioner	- ()				
No	4 (50%)	1 (33%)		2 (100%)	2 (40%)
Yes	4 (50%)	2 (67%)	1 (100%)		3 (60%)
Health educator					
No	6 (75%)	3 (100%)	1 (100%)	2 (100%)	4 (80%)
Yes	2 (25%)				1 (20%)
ICU Intensivist					
No	7 (87%)	2 (67%)	1 (100%)	2 (100%)	2 (40%)
Yes	1 (13%)	1 (33%)			3 (60%)
Internist					
No	4 (50%)	2 (67%)	1 (100%)	2 (100%)	3 (60%)
Yes	4 (50%)	1 (33%)			2 (40%)
Laboratory technician	- (222()				
No	5 (63%)	2 (67%)	1 (1000())	2 (100%)	2 (40%)
Yes	3 (37%)	1 (33%)	1 (100%)		3 (60%)
Midwife	4 (500())	0 (07%)			0 (000()
No Yes	4 (50%)	2 (67%)	4 (4008()	2 (100%)	3 (60%)
	4 (50%)	1 (33%)	1 (100%)	2 (100%)	2 (40%)
Nephrologists (Renal) No	4 (50%)	3 (100%)		2 (100%)	3 (60%)
Yes	4 (50%)	3 (100 %)	1 (100%)	2 (100 %)	2 (40%)
Obstetrician	+ (3070)		1 (100 %)		2 (40 /0)
No	5 (63%)	2 (67%)		2 (100%)	2 (40%)
Yes	3 (37%)	1 (33%)	1 (100%)	2 (100 /0)	3 (60%)
100	0 (07 /0)	1 (00 /0)	1 (100 /0)		0 (00 /0)

	Mount Lebanon		Nabatieh		
	Beirut Suburbs	Bent Jbeil	Hasbaya	Marjayoun	Nabatieh
Oncologist			-		
(Haematology)	4 (50%)	3 (100%)	1 (100%)	2 (100%)	3 (60%)
No	4 (50%)				2 (40%)
Yes					
Ophthalmologist					
No	5 (63%)	2 (67%)		2 (100%)	2 (40%)
Yes	3 (37%)	1 (33%)	1 (100%)		3 (60%)
Orthopaedic					
No	3 (75%)	2 (100%)		1 (100%)	2 (100%)
Yes	1 (25%)				
Paediatrician					
No	4 (50%)	1 (33%)		2 (100%)	2 (40%)
Yes	4 (50%)	2 (67%)	1 (100%)		3 (60%)
Pharmacist					
No	4 (50%)	2 (67%)		2 (100%)	2 (40%)
Yes	4 (50%)	1 (33%)	1 (100%)		3 (60%)
Physiotherapist					
No	6 (75%)	3 (100%)	1 (100%)	2 (100%)	3 (60%)
Yes	2 (25%)				2 (40%)
Practical Nurse					
No	5 (63%)	1 (33%)		2 (100%)	2 (40%)
Yes	3 (37%)	2 (67%)	1 (100%)		3 (60%)
Radiographer					
No	4 (50%)	2 (67%)		2 (100%)	2 (40%)
Yes	4 (50%)	1 (33%)	1 (100%)		3 (60%)
Registered Nurse					
No	5 (63%)	1 (33%)		2 (100%)	2 (40%)
Yes	3 (37%)	2 (67%)	1 (100%)		3 (60%)
Social Worker					
No	8 (100%)	3 (100%)	1 (100%)	2 (100%)	3 (60%)
Yes					2 (40%)
Surgery					
No	7 (87%)	2 (100%)		1 (100%)	2 (40%)
Yes	1 (13%)				3 (60%)

Table (15) Human Resources Availability at Assessed Hospitals

	Beirut	So		Bel	
	Beirut	Saida	Sour	Hermel	Baalbeck
Anaesthesiologist					
No	17 (59%)	8 (53%)	1 (17%)	1 (33%)	4 (40%)
Yes	12 (41%)	7 (47%)	5 (83%)	2 (67%)	6 (60%)
Cardiologist					
No	18 (62%)	8 (53%)	1 (17%)		3 (30%)
Yes	11 (38%)	7 (47%)	5 (83%)	3 (100%)	7 (70%)
ENT Specialist					5 (50%)
No	18 (62%)	8 (53%)	2 (33%)		5 (50%)
Yes	11 (38%)	7 (47%)	4 (67%)	3 (100%)	0 (00 /0)
General practitioner					
No	20 (69%)	8 (53%)	2 (33%)		5 (50%)
Yes	9 (31%)	7 (47%)	4 (67%)	3 (100%)	5 (50%)
Health educator					
No	26 (90%)	13 (87%)	5 (83%)	3 (100%)	8 (80%)
Yes	3 (10%)	2 (13%)	1 (17%)		2 (20%)
ICN Intensivist					
No	24 (83%)	10 (67%)	2 (33%)	3 (100%)	5 (50%)
Yes	5 (17%)	5 (33%)	4 (67%)		5 (50%)
Internist					
No	21 (72%)	10 (67%)	1 (17%)	1 (33%)	5 (50%)
Yes	8 (28%)	5 (33%)	5 (83%)	2 (67%)	. ,
Laboratory					5 (50%)
technician	20 (69%)	8 (53%)	1 (17%)		3 (30%)
No	9 (31%)	7 (47%)	5 (83%)	3 (100%)	7 (70%)
Yes	3 (3170)	7 (4770)	5 (05 %)	5 (100 %)	1 (1070)
Midwife					
No	22 (76%)	9 (60%)	3 (50%)	1 (33%)	3 (30%)
Yes	7 (24%)	6 (40%)	3 (50%)	2 (67%)	7 (70%)
Nephrologists	/ (<u></u> , ,))	0 (07 07)	0 (00 /0)	2 (01 /0)	1 (1070)
(Renal)	18 (62%)	8 (53%)	3 (50%)	3 (100%)	4 (40%)
No	11 (38%)	7 (47%)	3 (50%)	3 (10070)	6 (60%)
Yes	11 (0070)	(1,77,70)	0 (00 /0)		0 (0070)
100					

	Beirut	South		Be	kaa
	Beirut	Saida	Sour	Hermel	Baalbeck
Obstetrician					
No	19 (65%)	8 (53%)	3 (50%)		4 (40%)
Yes	10 (35%)	7 (47%)	3 (50%)	3 (100%)	6 (60%)
Oncologist					
(Haematology)	20 (69%)	10 (67%)	2 (33%)	2 (67%)	4 (40%)
No	9 (31%)	5 (33%)	4 (67%)	1 (33%)	6 (60%)
Yes					
Ophthalmologist					
No	19 (65%)	9 (60%)	3 (50%)	2 (67%)	3 (30%)
Yes	10 (35%)	6 (40%)	3 (50%)	1 (33%)	7 (70%)
Orthopaedic					
No	15 (94%)	11 (100%)	5 (83%)	3 (100%)	6 (86%)
Yes	1 (6%)		1 (17%)		1 (14%)
Paediatrician					
No	18 (62%)	8 (53%)	2 (33%)		3 (30%)
Yes	11 (38%)	7 (47%)	4 (67%)	3 (100%)	7 (70%)
Pharmacist					
No	17 (59%)	8 (53%)	2 (33%)	1 (33%)	3 (30%)
Yes	12 (41%)	7 (47%)	4 (67%)	2 (67%)	7 (70%)
Physiotherapist					
No	24 (83%)	9 (60%)	4 (67%)	3 (100%)	8 (80%)
Yes	5 (17%)	6 (40%)	2 (33%)		2 (20%)
Practical Nurse					
No	17 (59%)	11 (73%)	3 (50%)	1 (33%)	4 (40%)
Yes	12 (41%)	4 (27%)	3 (50%)	2 (67%)	6 (60%)
Radiographer					
No	19 (65%)	8 (53%)	1 (17%)	1 (33%)	4 (40%)
Yes	10 (35%)	7 (47%)	5 (83%)	2 (67%)	6 (60%)
Registered Nurse	. ,				
No	18 (62%)	8 (53%)	2 (33%)	2 (67%)	4 (40%)
Yes	11 (38%)	7 (47%)	4 (67%)	1 (33%)	6 (60%)
Social Worker					. ,
No	27 (93%)	15 (100%)	5 (83%)	3 (100%)	6 (60%)
Yes	2 (7%)	. ,	1 (17%)	. ,	4 (40%)
Surgery	、 <i>、</i>		````		、 <i>、</i> /

	Beirut	So	uth	Be	kaa
	Beirut	Saida	Sour	Hermel	Baalbeck
No	20 (91%)	12 (100%)	5 (100%)	3 (100%)	6 (86%)
Yes	2 (9%)				1 (14%)

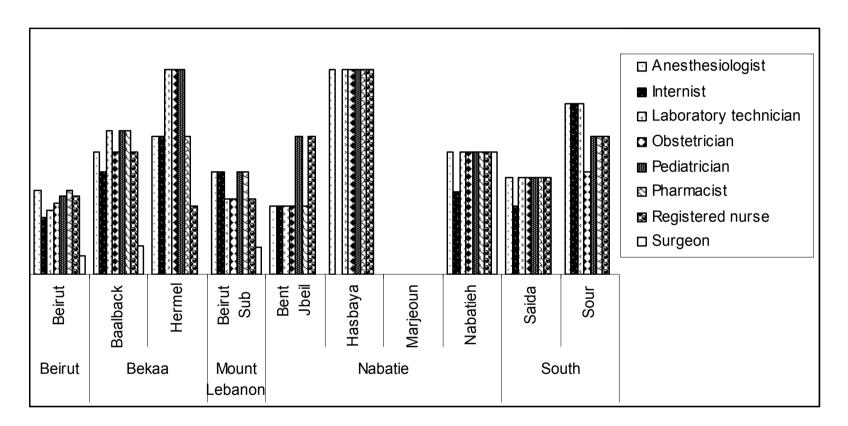


Figure (16) Human resources availability at the assessed hospitals

*Others: include mental health, kidney dialysis, physiotherapy & nutrition services

Human Resources in the hospitals

The critical shortage in medical staff is one of the major gap and future challenges to revitalize the health care system at the hospital levels;

- Shortage in certain capacities: registered nurses, Laboratory technicians, pharmacist, Obstetrician, surgeon, special surgery (ENT, Ophthalmology), internist, and anesthesiologist have a global shortage in the majority of the region (mentioned in descending order).
- Mis-distribution: as addressed by availability of surgeon, nephrologists, cardiologist, mainly in Beirut, Hermel and Saida .
- A considerable number of medical staff moved out from the southern areas with start of hostilities, but while it was not indicated in the data collection form, a common comment was registered that the lack of the above mentioned specialties was preexist to the hostilities and was worsen by the conflict, which should consider as a point for further clarification while planning the recovery strategy.

Availability of services in the hospitals during the period of hostilities

- The diagnostic and laboratory service had the lower coverage in the affected regions.
- Although the registered shortage of staff in the surgical, obstetric services this services were provided during the conflict period with less no. of staff which indicate the over whelmed staff by the increased work load and less human resources, while the service was less provided in the less intense affected region as Beirut which may explained by staff movement to cover the gap in the high intense district.

Table (16) Services Availability at Assessed Hospitals

	Mount Lebanon Beirut Suburbs	Bent Jbeil	Nabatieh Hasbaya	Marjayoun	Nabatieh
Surgical services				, ,	
No	3 (37%)	1 (33%)		2 (100%)	3 (60%)
Yes	5 (63%)	2 (67%)	1 (100%)		2 (40%)
Laboratory services		. ,			× ,
No	3 (37%)	3 (100%)		2 (100%)	3 (60%)
Yes	5 (63%)		1 (100%)		2 (40%)
Maternal services					× ,
No	5 (63%)	1 (33%)		2 (100%)	3 (60%)
Yes	3 (37%)	2 (67%)	1 (100%)		2 (40%)
Medical services					. ,
No	5 (63%)	1 (33%)		2 (100%)	3 (60%)
Yes	3 (37%)	2 (67%)	1 (100%)		2 (40%)
Diagnostic services					. ,
No	6 (75%)	3 (100%)	1 (100%)	2 (100%)	5 (100%)
Yes	2 (25%)				
Oncology services					
No	4 (50%)	2 (67%)		2 (100%)	4 (80%)
Yes	4 (50%)	1 (33%)	1 (100%)		1 (20%)
Others*					
No	4 (50%)	2 (67%)	1 (100%)	2 (100%)	2 (40%)
Yes	4 (50%)	1 (33%)	· · · /	. ,	3 (60%)

Table (17) Services Availability at Assessed Hospitals

	Beirut	South		Bekaa		
	Beirut	Saida	Sour	Hermel	Baalbeck	
Surgical services						
No	19 (65%)	10 (67%)	3 (50%)	1 (33%)	3 (30%)	
Yes	10 (35%)	5 (33%)	3 (50%)	2 (67%)	7 (70%)	
Laboratory services						
No	21(72%)	10 (67%)	6(100%)	2 (67%)	5 (50%)	
Yes	8 (28%)	5 (33%)		1 (33%)	5 (50%)	
Maternal services						
No	20 (69%)	10 (67%)	2 (33%)	3 (75%)	E (E00()	
Yes	9 (31%)	5 (33%)	4 (67%)	1 (25%)	5 (50%) 5 (50%)	
Medical services						
No	21 (72%)	11 (73%)	2 (33%)	1 (33%)	7 (70%)	
Yes	8 (28%)	4 (27%)	4 (67%)	2 (67%)	3 (30%)	
Diagnostic services						
No	28 (97%)	14 (93%)	6(100%)	3 (75%)	10 (100%)	
Yes	1 (3%)	1 (7%)		1 (25%)		
Oncology services						
No	20 (69%)	11 (73%)	4 (67%)	3 (75%)	5 (50%)	
Yes	9 (31%)	4 (27%)	2 (33%)	1 (25%)	5 (50%)	
Others*			. ,		. ,	
No	20 (69%)	10 (67%)	2 (33%)	3 (75%)	4 (40%)	
Yes	9 (31%)	5 (33%)	4 (67%)	1 (25%)	6 (60%)	

*Others: include mental health, kidney dialysis, physiotherapy & nutrition services

Figure (17) Services provided during war at the assessed hospitals

	Mount Lebanon		Nabatieh		
	Beirut Suburbs*	Bent Jbeil	Hasbaya**	Marjayoun***	Nabatieh
Analgesics	37.5	67	0	100	60
Anaesthesia	37.5	33	0	100	60
Antibiotics	37.5	33	0	100	60
Disinfectants	37.5	67	0	100	80
Blood derivatives	37.5	100	0	100	80
Intravenous Solutions	37.5	33	0	100	60
Plasma derivatives	37.5	100	0	100	60
Oral dehydration solutions	50	33	0	100	80
Respiratory	37.5	67	0	100	60
Renal dialysis filters	50	100	0	100	80
Cardiac Drugs	37.5	67	0	100	60
Anti-diabetic	37.5	100	0	100	60
Psychotropic Drugs	50	100	0	100	80

Table (18) Shortage of Medications in Assessed Hospitals

Values are reported in percentages * Data available for 75% of the hospitals in the area

There is only one functioning hospital in the area *No hospitals are functioning in the area

Table (19) Shortage of Medications in Assessed Hospitals

	Beirut	Sout	th		Bekaa
	Beirut*	Saida	Sour	Hermel	Baalbeck*
Analgesics	51	80	33	100	22
Anaesthesia	58	86	33	67	32
Antibiotics	48	80	33	67	32
Disinfectants	48	93	17	100	32
Blood derivatives	72	93	33	100	62
Intravenous Solutions	44	80	33	100	22
Plasma derivatives	58	86	33	100	32
Oral dehydration solutions	65	86	50	100	42
Respiratory	58	80	33	100	22
Renal dialysis filters	75	86	50	100	62
Cardiac Drugs	58	93	33	100	32
Anti-diabetic	54	93	33	100	22
Psychotropic Drugs	78	86	50	100	62

Values are reported in percentages * Data are missing for 18 % of the hospitals because of refusal



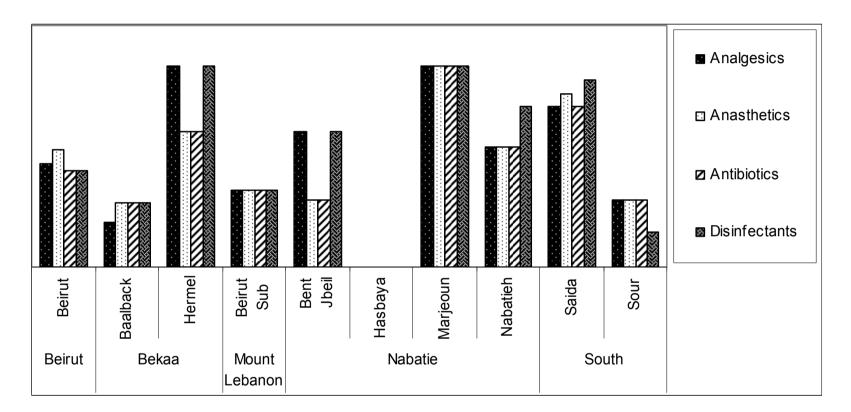
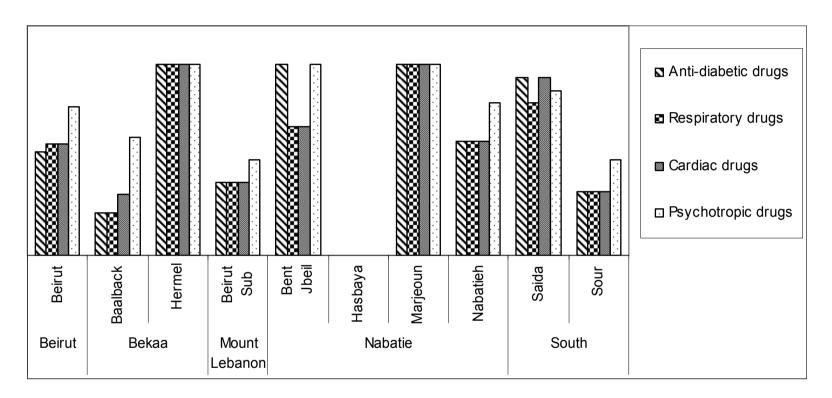


Figure (19) Availability of Medical Drugs



Shortage of drugs

Mainly antibiotic, analgesics, and disinfectant, registered shortages in the hospitals the drugs for diabetic, cardiovascular, and mental illness show a major gap that was in the entire affected district, which indicate a major shortage at the national level with limited pre-positioned buffer stock in the district level.

Table (19) Characteristics of Hospitals with No Information

	Hospital Unvisited	No Response	Missing Record
Ownership	•	•	-
Private		1 (14%)	1 (50%)
Non Governmental Organization		1 (14%)	0
Not Defined	4	5 (72%)	1 (50%)
District			
Baalbeck	2 (50%)	0	0
Beirut	2 (50%)	3 (43%)	1 (50%)
Beirut Suburbs	0	2 (29%)	0
Nabatieh	0	1 (14%)	0
Saida	0	1 (14%)	1 (50%)
Road Accessibility			
No	4 (100%)	7 (100%)	1 (50%)
Yes	0	0	1 (50%)
Total	4	7	2

Most of the no-response hospitals were in Beirut and the reason for that was the sensitivity of the data as they indicate for the validation team, most of these hospitals are owned by NGOs, or private sector.

Strategic directions for the intervention

The first approach should be a rapid operation, between now and December (?) 2006, concentrated in the affected areas .It should be led by the Ministry of Health, in close cooperation with all pertinent national, local, and international health partners. It should be aimed at ensuring:

- a) Continuity in the provision of essential health services particularly to the most vulnerable including essential PHC and adequate referral to secondary and tertiary health care
- b) Reinforce the capacity of the health system in delivering public health services including epidemiological surveillance and early warning systems for the early detection and control of communicable diseases, immunization and environmental health
- c) Prompt a health system approach to link relief, rehabilitation, recovery and development

The entire operation could be done as an emergency operation run by the Ministry, in support to the local health authorities in the affected areas and should take into strong consideration national Non Governmental Organizations (NGOs) already operative in the health sector. It could encompass the temporary organization of local public health teams, using existing staff of the public sector, from health NGOs and private health care providers as well as individual practitioners.

There would also be a need for strengthening and/or developing the public health infrastructure of the local health authorities .The entire operation would be a way of improving social protection in health for the affected population in the areas that were damaged during the conflict

- A project for revitalization of PHC with ensuring the FREE Access to health care should be addressed in the early recovery phase and a revitalization of the hospital care with a priority for functional rehabilitation and mobilizing resources as Human resources to fill the gap in medical specialties.
- Ensuring safe environment in the health facilities by assuring the quality of drinking water, waste product management, and proper sanitation.

References

- List of Health facilities, MOPH Lebanon, 2005.
- <u>http://ochaonline.un.org/DocView.asp?DocID=4874</u>
- http://ochaonline.un.org/webpage.asp?ParentID=11778&MenuID=11794&Page=2203
- http://www.who.int/hac/crises/international/middle_east/en/index.html
- <u>http://ochadms.unog.ch/quickplace/cap/main.nsf/h_Index/Flash_2006_LebanonCrisis/\$FILE/</u> Flash_2006_LebanonCrisis_SCREEN.pdf?OpenElement

Annexes

Annex 1: Needs Assessment Health Facility Questionnaire	Error! Bookmark not defined.
Annex 2: List of health facilities	Error! Bookmark not defined.
Annex 3: List of hospitals	Error! Bookmark not defined.
Annex 4: Saida	Error! Bookmark not defined.
Annex 5: Volunteers	Error! Bookmark not defined.

Annex 1: Needs Assessment Health Facility Questionnaire

Part One: Outpatient Facilities (To include dispensaries, health centers, and hospital outpatient departments

District	orate (Muhaffazat) (Qada') ocality/Village		
Name o Addres Telepho Facsim E-Mail	one		
Name a	ment Team Members and Position of representative(s) from fac Cell phone	ility providing inf	ormation
Date of	Assessment		
Q1a: Ty	ype of outpatient facility		
	Dispensary Hospital outpatient department/ER	-Health	Center
Q1b: O	wnership of outpatient facility		
	Ministry of Health (MOH) Municipality	Ministry of Soci	al Affairs (MOSA)
	NGO Voluntary Religious group Political Group Indepe	ndent	Others
	NGO on contract with Government Chronic Meds Safe Motherhood	Child Care	Others
Q2: Sta	tus of outpatient facility		
	Not Functioning: Functioning: Partially functioning: Damaged by latest hostilities -Functional units damaged:	since when:	
	-Expected date for re-functioning:		
Q3: Aco	Cess		
	Facility easily accessible by road: YES Road condition: Functional Estimated time to reach facility by walkin Travel time to the nearest referral hospit	ng (in minutes):	

Q4: Describe the geographic area served by facility [Names of village(s)]

Number of persons that have been displaced and have returned:.....

Q5: Facility damage assessment (due to latest hostilities)

	, ,				/		
	Resource		Does fa this too	acility ha lay?	ive		served in vorking condition?
			Yes		No	Yes	No
	Electricity Central Power plant Number of hours/Day available from central Generator power Mazout storage Fuel storage						
	Running Water Drinking Water Bottled Water						
	Linkage to sewerage Main sewer system Cesspool/Latrine Medical waste disposa	I					
	Refrigerator Freezer Vaccine Carrier (Cold o	chain)					
	Ambulance	How M	lany?				
	Vehicles	How M	lany?				
Q6: Se	ervice provision within the	e last mo	onth?				
	Antenatal Care Postpartum Care Family Planning Immunizations Medical conditions Mental health Rehydration Radiological services Environmental health		Deliver	Emerg Well ba Nutritic Minor s Care o Labora Health	ency obstetric aby Care (on advice/Brea surgical care f the older per tory services education	ast feeding	advice
Q7: Hı	uman Resources						
	Category of staff General practitioner Pediatrician Internist Obstetrician Registered Nurse			Numbe	ers	Neede	d/Missing

29 August 2006

Practical Nurse Midwife Pharmacist Laboratory technician Radiographer Physiotherapist Health educator Social Worker

Q8: Service Statistics

What is the breakdown of total attendance at this facility last month?

Age bracket	Men	Women
Less than 5 years		
Age 16-44 years		
Age 45-64 years		
Over 65 years		

Q 9: Did the Health facility received any donation last month: -Drugs Supplies Milk Formula --others...... -Assessment team comments;

Name:

Signature:

Name:

Signature:

Signature:

Date of data delivery to WHO office:..../.../.....

29 August 2006

Governorate (Muhaffazat) District (Qada') Town/Locality/Village

Name of the Facility Address Telephone Facsimile E-Mail

Assessment Team Members Name and Position of representative(s) from facility providing information His/Her Cell phone

Date of Assessment

Q1a: Number of operating hospital beds

Total number of operating beds		
Medical:Surgical	:	-Pediatric:
Maternity/Gynecology:		-Newborn Nursery (All kinds):
Intensive care (All kinds):		
Not differentiated beds:		

Q1b: Basic Hospital "Vital signs"

Average occupancy (last week) Average length of stay (last week)

Q1c: Ownership of hospital facility

Public - Ministry of Health (MOH) Public – Operated by Military Private – Voluntary - Not For Profit Religious Group Community Group Private – For Profit Physician(s) Owned

Q2: Status of hospital facility

Not Functioning:..... Since :..../.... Functioning Partially functioning Damaged by latest hostilities Functional units damaged:....., Expected date for re-functioning:.....

Q3: Access

Facility easily accessible by road: YES Road condition: Functional NO Not Functional

Estimated time to reach facility (in minutes):..... Travel time to the next tertiary level referral hospital (in minutes):..... 61

Q4: Describe the geographic area served by facility	
[Names of village(s), towns and caza]	

Q5: Facility damage assessment (due to latest hostilities)

	Resource		Does facility hat this today?	ave			served in vorking condition?
			Yes	No		Yes	No
	Electricity Central Power plant Number of hours/Day available from central Generator power Mazout storage Fuel storage						
	Running Water Drinking Water Bottled Water						
	Linkage to sewerage Main sewer system Cesspool/Latrine Medical waste disposal						
	Refrigerator Freezer Vaccine Carrier (Cold ch Blood Bank services Renal Dialysis Services	nain)					
	Ambulance Vehicles	How Ma How Ma					
	Physical plant services Medical Equipment Mair	ntenance	: Available	n	not ava	ailable	
Q6: Se	ervice provision within the	last mon	th? (Number o	of cases)			
	Emergency/Urgent Trauma cases- Casualti Surgical cases Medical cases Obstetric cases Gynecological cases Deliveries Pediatric cases Mental health cases Care of the older people Kidney Dialysis sessions Chemotherapy sessions Laboratory services Hematology Bacteriology	- 	Electiv	e			

World Health Organization Lebanon

Parasitology Serology Biochemistry Hormone assays **Blood Bank services** Radiological services General Radiology **CT** Scanner MRI Ultrasound Nuclear Medicine Anesthesia Services Major Minor Physiotherapy services Nutrition/Dietetics Others ..

Q7: Human Resources

Category of staff General practitioner Pediatrician Internist Cardiologist Nephrologist (Renal) Oncologist (Hematology) ICU Intensivist Obstetrician Ophthalmologist **ENT** Specialist Anesthesiologist **Registered Nurse** Practical Nurse Midwife Pharmacist Laboratory technician Radiographer Physiotherapist Health educator Social Worker

Q8: Service Statistics

What is the age breakdown of total attendance at this facility last month?

Age bracket	Men	Women
Less than 5 years		
Age 16-44 years		
Age 45-64 years		
Over 65 years		

What is the medical condition breakdown of total attendance at this facility last month?

Numbers

Needed/Missing

Men Women

63

World Health Organization Lebanon

Casualties	
Surgical	
General	
Orthopedic	
Neurosurgery	
Urology	
Pediatric	
Newborn	
Obstetric	
Gynecology	
Cardiac	
Pulmonary	
Medical	
General	
Mental	

Q9a: Did your facility receive referrals from other facilities (last month)?

From Health Centers/ Dispensaries?	Where from?	Number
From other hospitals?	Where from?	Number
What are the most common causes for re	eferrals to your facility?	

Q9b: Did your facility refer patients to other hospitals (last month)?

To which hospital? Number of referrals Condition of referrals Reasons for referrals

Q10. Inventory of Medicines and Medical Supplies

Medicine Group	Quantity in sto (Unexpired only Number Unit (b		Comments
Anesthetics			
Antibiotics Analgesics			
Intravenous solutions			
Plasma derivatives Blood derivatives			
Disinfectants			
Oral rehydration solutions			
Anti-Diabetics			
Psychotropic drugs (Mental) Cardiac			
Respiratory			
Renal Dialysis filters			
Other groups Are the medicines available on Pharmacist on duty?	a 24 hours/seve	n days basis?	
Q.11 Did the hospital received any dona - Drugs	ation through the Supplie		
-Milk Formula			

Q12: Comments for the assessment team:	
Name of the team's member:	Signature:
Name of the team's member:	Signature:
Data Delivery date:	Signature:

Facility Type	Ownership	NGO Voluntary	Telephone	Status of Facility	
Dispensary	Not Defined		838084/03	No response	
Dispensary	NGO		804564/03	Functioning	
· ·			325245/08		
Health Centre	MOSA		ex:1284	Functioning	
Dispensary	NGO	Religious group	03/127847	Functioning	
			08/325386	Ŭ	
Dispensary	NGO	Independent	Ex:1114	Functioning	
Dispensary	NGO	Independent	514353/03	No response	
Dispensary	NGO	Religious group	703193/03	Functioning	
Dispensary	MOSA		230238/08	Functioning	
Dispensary	Municipality		03/729923	Functioning	
Dispensary	MOH		08/379122	Functioning	
Dispensary	Municipality			Functioning	
			03/674111		
Dispensary	МОН		08/370309	Partially functioning	
Disperioury			08/370891	r andary fariotioning	
Health Centre	MOSA		08/370622	Partially functioning	
			08/373512	T articley fariotioning	
Health Centre	NGO	Religious group	08/373513	Functioning	
Dispensary	NGO	Religious group	373763/08	Functioning	
Dispensary	NGO	Independent	03/599358	Functioning	
Dispensary	NGO	independent	615145/03	Functioning	
ызрензату	NOO		370084/08	Tunctoring	
Dispensary	NGO	Independent	03/038437	Functioning	
ызрензату	MOH and	independent	03/030437	Tunctoring	
Diepopean	NGO	Religious group	08/300151	Functioning	
Dispensary Dispensary	NGO	Religious group	747976/03	Functioning	
	MOH	Religious group	03/597620	•	
Dispensary		Indonondont		Functioning	
Dispensary	NGO	Independent	08/305330	Functioning	
Dispensary	MOSA		305180/08	Functioning	
D:	MOH and		00/000004	F our effectives	
Dispensary	NGO	Religious group	08/330024	Functioning	
Dispensary	NGO	Independent	330777/08	Functioning	
D	NOO	1.1	380826/03		
Dispensary	NGO	Independent	330777/0	Not Functioning	
Dispensary	MOH		330723/08	Functioning	
	MOH and		00/040004		
Health Centre	NGO		08/240234	Functioning	
Dispensary	MOSA		08/240544	Functioning	
Dispensary	NGO	Religious group	332081/03	Not Functioning	
Dispensary	NGO	Others	318362/03	Functioning	
Dispensary	NGO	Others	240413/08	Functioning	
	MOH and				
Dispensary	Municipality		03/597909	Functioning	
Dispensary	MOSA		08/345900	Functioning	
Dispensary	MOSA		373739/08	Functioning	
Dispensary	Not Defined		373740/08	Not Functioning	
Dispensary	NGO		03/573590	Not Functioning	
			345842/03		
Dispensary	NGO	Independent	958690/03	Functioning	

Annex 2: List of health facilities

Facility Type	Ownership	NGO Voluntary	Telephone	Status of Facility	
Dispensary	NGO		372180/03	Not Functioning	
Dispensary	MOSA		327248/01	Centre Unvisited	
Dispensary	MOSA		01327248	Functioning	
Dispensary	NGO	Independent	323345/01	Functioning	
Dispensary	NGO	maoponaom	446005/01	Centre Unvisited	
Dispensary	NGO		337860/01	Centre Unvisited	
Dispensary	NGO		323571/01	Centre Unvisited	
Dispensary	NGO		586731/01	Centre Unvisited	
Dispensary	NGO		329843/01	Centre Onvisited	
Dispensary	MOH		442110/01		
ызрензату	NGO		817182/01	No response	
	Not Defined		017102/01	Not Functioning	
Health Centre	NGO	Religious group	01\856118	Functioning	
Health Centre	MOH	I teligious group	01/737006	Functioning	
			03828048-	Tunctoring	
Dispensary	NGO	Religious group	01824361	Functioning	
Dispensary	NGO	Religious group	613645/01	Does not exist	
Health Centre	MOSA		03/634315		
	NGO	Deligious group		Functioning	
Dispensary Health Centre		Religious group	663409/01	Functioning	
Health Centre	MOH		01/653760	Functioning	
Discourse	NGO	lucione e e elevet	01/311902	No response	
Dispensary	NGO	Independent	664363/01	Functioning	
Dispensary	NGO	Independent	664368/01	Functioning	
	Noo		316920-01		
Health Centre	NGO	Independent	/310948	Functioning	
Dispensary	NGO	Independent	01/633762	Functioning	
Health Centre	MOSA		706267/01	Functioning	
Health Centre	NGO	Others	448175/01	Functioning	
Dispensary	NGO	Independent	703904/01	Functioning	
			749447/01-		
	NGO		855596/01	No response	
	NGO	Independent	302370/01	No response	
Dispensary	NGO	Independent	640813/01	Functioning	
			597313/03-		
Health Centre	NGO	Religious group	01663631	Not Functioning	
	NGO		752766/01	No response	
Dispensary	NGO	Independent	01/310948	Functioning	
Health Centre	NGO	Independent	01 856118	Functioning	
Dispensary	NGO	Independent	551317/01	Functioning	
			01442110-		
Dispensary	MOH		01/830000	Partially functioning	
Health Centre	NGO	Religious group	586880/01	Functioning	
Health Centre	NGO	Independent		Functioning	
Health Centre	NGO	Independent	351528/01	Functioning	
	NGO		855716/01	No response	
Dispensary	MOH		03239650	Centre Unvisited	
Dispensary	NGO	Independent	701944/01	Functioning	
Dispensary	NGO		01/656605	Functioning	
Dispensary	Not Defined		01615300	Centre Unvisited	
Dispensary	NGO		01333305	Centre Unvisited	
Dispensary	NGO		653888/03	Centre Unvisited	
Health Centre	NGO		03/763867	No response	

Facility Type	Ownership	NGO Voluntary	Telephone	Status of Facility	
outpatient	•		•		
department/ER					
Dispensary	NGO		01327414		
Dispensary	NGO	Religious group	01335844	Functioning	
· · ·			754300/01-		
Health Centre	NGO	Independent	01/350000	Functioning	
Dispensary	MOSA			Functioning	
Dispensary	NGO	Independent	437429/05	Functioning	
Dispensary	MOH		03/440669	Functioning	
Dispensary	MOSA		452194/05	Functioning	
Dispensary	NGO		536094/03	Functioning	
Health Centre	Municipality		248244/03	No response	
Health Centre	MOSA		387022/03	Functioning	
Dispensary	NGO	Independent	558203/01	Functioning	
Dispensary	MOSA		409512/03	Functioning	
Health Centre	NGO		796091/03	No response	
Dispensary	MOSA		833522/01	Not Functioning	
Dispensary	NGO	Others	542835/01	Functioning	
	NGO		840967/01	No response	
Health Centre	NGO	Religious group	01/840967	Functioning	
Health Centre	MOSA	r tongroue group	480334/05	Partially functioning	
Dispensary	NGO	Independent	336150/03	Functioning	
Dispensary	NGO	Independent	357889/03	Functioning	
Dispensary	MOSA	independent	832183/03	Functioning	
ызрепзату	NGO		597313/03	Does not exist	
Health Centre	NGO	Others	472110/01	Partially functioning	
Health Centre	NGO	Independent	382458/03	Functioning	
Health Centre	NGO	Religious group	273390/01	Functioning	
Dispensary	Not Defined	Tteligious group	719489/03	Not Functioning	
Dispensary	NGO	Independent	834039/01	Functioning	
Health Centre	MOSA	Independent	450724/01	Functioning	
	NGO	independent	915647/03		
Dispensary				Not Functioning	
Dispensary	NGO		473367/01	Not Functioning	
Llaalth Cantra	NGO	Indonondont	364934/03- 01/451685	Functioning	
Health Centre		Independent		Functioning	
Health Centre	NGO	Independent	03/720574	Functioning	
Disconcert	NCO	Delisione erenn	856922/03-	Eurotioning	
Dispensary	NGO	Religious group	01/454644	Functioning	
Dispensary	NGO	Religious group	210466/03	Functioning	
Dispensary	NGO		833848/01	Not Functioning	
Dispensary	Not Defined		821290/01	Not Functioning	
D .			472934/01-		
Dispensary	Municipality		933-935	Functioning	
Health Centre	Municipality		05\431386	Unreachable	
Health Centre	Municipality		01\544889	Not Functioning	
Health Centre	MOH		03-978942	Partially functioning	
Health Centre	NGO		557281/01	Not Functioning	
Health Centre	Municipality		276181/01	Not Functioning	
Health Centre	NGO		273390/01	Not Functioning	
Dispensary	NGO			Not Functioning	
	NGO		504510/03	Does not exist	
Dispensary	MOSA	Others	668131/03	Functioning	
Health Centre	NGO	Religious group	405149/07	Partially functioning	

Facility Type	Ownership	NGO Voluntary	Telephone	Status of Facility	
Health Centre	NGO	Independent	relephone	Not Functioning	
Dispensary	МОН	independent	848312/03	Not Functioning	
Disperioury			03/277167-	Not Fullotioning	
Health Centre	MOSA		07/450571	Not Functioning	
Dispensary	MOSA		371124/03	Unreachable	
Hospital					
outpatient					
department/ER	МОН		325456/07	Not Functioning	
Dispensary	MOSA	Religious group	370080/07	Partially functioning	
Dispensary	MOSA		668131/03	Functioning	
Health Centre	NGO	Religious group	759257/03	Not Functioning	
Dispensary	MOSA		458695/03	Not Functioning	
Dispensary	NGO	Religious group	405149/07	Not Functioning	
Dispensary	MOH	Independent	03/504935	Partially functioning	
Dispensary	NGO		914762/03	Not Functioning	
Dispensary	MOSA			Unreachable	
Dispensary	MOSA		371124/03	Not Functioning	
,			03/535995		
Dispensary	NGO	Independent	07/470140	Functioning	
Dispensary	NGO	Religious group	03 398735	Functioning	
Dispensary	MOSA	r tongroue group	03/668131	Not Functioning	
Dispensary	NGO	Religious group	370277/07	Functioning	
Dispensary	NGO	Independent	370271/07	Partially functioning	
Dispensary	MOSA	independent	371124/03	Not Functioning	
Dispensary	Not Defined		277167/03	Not Functioning	
Health Centre	NGO		209827/03	Not Functioning	
Dispensary	NGO		295202/03	Not Functioning	
Dispensary	Not Defined		385387/07	Not Functioning	
Health Centre	MOSA		03296377	Not Functioning	
Dispensary	NGO	Religious group	03/083577	Not Functioning	
Health Centre	MOSA	r tongroue group	03/285018	Not Functioning	
Health Centre	Not Defined		346656/07	Not Functioning	
Dispensary	MOH		03578356	Functioning	
Disperioury			07/555850-	1 dhotorning	
Dispensary	NGO	Independent	07/555671	Functioning	
Dispensary	NGO	independent	264374/03	Not Functioning	
Dispensary	NGO		262173/03	Does not exist	
Health Centre	MOSA		999011/03	Functioning	
Dispensary	NGO		264374/03	Functioning	
Health Centre	NGO	Independent	03741884	Functioning	
Dispensary	NGO	Independent	208967/03	Not Functioning	
Dispensary	Municipality	independent	07/551224	Functioning	
Dioponically	Manopanty		07/565120	l anotorning	
Health Centre	MOSA		03/971199	Functioning	
Health Centre	NGO	Independent	07/565140	Functioning	
			03/447965		
Dispensary	Municipality	Political Group	03/904028	Functioning	
Dispensary	MOH	Political Group	03/136152	Functioning	
Dispensary	МОН	Religious group	07/560116	Functioning	
Health Centre	MOSA	i tongiouo group	971199/03	Functioning	
Dispensary	Not Defined			Not Functioning	
Dispensary	NGO		352949/03	Not Functioning	
Health Centre	NGO	Independent	621441/03	Not Functioning	
	1100	macpenaent	521771/05		

Facility Type	Ownership	NGO Voluntary	Telephone	Status of Facility	
Dispensary	NGO	Independent	578356/03	Functioning	
Dispensary	NGO	Religious group	200587/08	Functioning	
Dispensary	MOSA		200464/08	Functioning	
Health Centre	NGO	Independent	08/200089	Functioning	
Dispensary	NGO	Religious group	08/20	No response	
Dispensary	NGO		07/762985	No response	
Dispensary	NGO	Independent	07/781201	Functioning	
Dispensary	NGO	Independent	03/810191	Functioning	
Dispensary	MOSA	Independent	07/781025	Functioning	
Dispensary	NGO	Independent	07/781201	Functioning	
Dispensary	МОН	· · · · · · · · · · · · · · · · · · ·	03/810191	Functioning	
Dispensary	NGO	Independent	03/628315	Not Functioning	
Dispensary	MOSA	· ·	07/740001	No response	
Hospital				•	
outpatient					
department/ER	МОН	Independent	07/780106	Functioning	
Health Centre	NGO	Religious group	03/628315	Functioning	
Dispensary	NGO	Independent	03/628315	Not Functioning	
Dispensary	Municipality	Independent	03/444762	Functioning	
Dispensary	NGO	Independent	03/628315	Functioning	
Dispensary	NGO	Independent	07/781700	Functioning	
Dispensary	MOSA	Independent	03/810191	Functioning	
Dispensary	NGO			No response	
Dispensary	MOSA		881496/03	Functioning	
Dispensary	MOSA		296343/03	Not Functioning	
Dispensary	NGO	Independent	552602/03	Functioning	
Health Centre	MOH		/	Not Functioning	
Dispensary	NGO			Does not exist	
Health Centre	MOSA		03/932348	Not Functioning	
Dispensary	NGO		361964/03	Does not exist	
Dispensary	NGO	Religious group	434703/03	Functioning	
Dispensary	NGO	Political Group	724450/03	Partially functioning	
Dispensary	MOSA		548974/03	Does not exist	
Health Centre	MOSA		03/086542	Not Functioning	
Dispensary	NGO		01/372802	Unreachable	
Dispensary	NGO		762351/03	No response	
	NGO	Political Group	03/434489	•	
Dispensary Health Centre		Folitical Gloup		Not Functioning	
	MOH NGO		03/344727 384600/03	Not Functioning	
Dispensary	NGO		364000/03	Not Functioning	
Dispensary			296343/03	Does not exist	
Health Centre	MOSA Not Defined		290343/03	Not Functioning	
Health Centre	Not Defined		000040/00	Does not exist	
Dispensary	MOH	Deligious group	822240/03	Not Functioning	
Health Centre	NGO	Religious group	03/203709	Not Functioning	
Health Centre	MOSA		830428/03	Not Functioning	
Health Centre	MOSA		668131/03	Not Functioning	
Hospital					
outpatient	MOLL		07/00000 7		
department/ER	MOH		07/83066-7	Not Functioning	
Health Centre	MOSA		07/860080	Not Functioning	
Dispensary	MOSA		548974/03	Not Functioning	
Dispensary	NGO	Independent	03/428358	Not Functioning	
Health Centre	NGO	Independent	430289/03	Functioning	

Facility Type	Ownership	wnership NGO Voluntary		Status of Facility	
Dispensary	NGO		Telephone 717581/03	Not Functioning	
Health Centre	NGO	Religious group	825572/03	Partially functioning	
Dispensary	MOSA	i tengiede gioop	760015/07	Functioning	
Health Centre	NGO	Independent	07/768687	Functioning	
Dispensary	NGO		07764393	No response	
Dispensary	MOH		07760014	No response	
Health Centre	МОН		07\760014	No response	
Dispensary	NGO		767951/07	No response	
Dispensary	NGO	Others	762985/07	Functioning	
Dispensary	NGO	Independent	07/767795	Functioning	
Dispensary	NGO	maoponaom	01/101100	Not Functioning	
Dispensary	NGO		587702/03	No response	
Dispensary	NGO		760151/07	No response	
Dispensary	NGO		761911/03	Unreachable	
Health Centre	MOSA		701911/03	Not Functioning	
	MOSA		871402/03	Not Functioning	
Health Centre	MOSA		07/500014	Functioning	
Dispensary	NGO		500980/07	Not Functioning	
Health Centre	NGO	Indonondont	03430289	Functioning	
	MOSA	Independent		8	
Health Centre	MOSA		825572/03	Functioning	
Health Centre		Deligious group	07/210361	Not Functioning	
Health Centre	MOSA	Religious group	07/210456	Functioning	
Health Centre	NGO	Religious group	210251/07	Functioning	
	MOOA		696072/03-	Even etter eine e	
Health Centre	MOSA		03/790615	Functioning	
Health Centre	NGO	Religious group	821829/03	Functioning	
Health Centre	MOSA		215221/07	Functioning	
Health Centre	NGO	Religious group	633976/03	Not Functioning	
Health Centre	NGO	Religious group	530208/07	Functioning	
Health Centre	NGO	Political Group	07525636	Functioning	
Health Centre	NGO		246355/03	Not Functioning	
Health Centre	NGO	Religious group	07/520515	Functioning	
Dispensary	NGO		472036/03	Not Functioning	
Health Centre	NGO	Independent	07/505344	Functioning	
Dispensary	NGO		587702/03	Unreachable	
Health Centre	MOSA			Functioning	
Health Centre	Municipality		07/540323	Functioning	
			07/831995		
Dispensary	NGO	Religious group	07/511551	Functioning	
			696072/03-		
Health Centre	MOSA	Independent	07/540463	Functioning	
Health Centre	Municipality		07/535066	Functioning	
Health Centre	NGO	Religious group	726320/03	Functioning	
Health Centre	MOSA		215221/07	Functioning	
Health Centre	Municipality		03/625554	Functioning	
Dispensary	MOSA		767660/07	No response	
Health Centre	NGO	Others	03/631956	Functioning	
Dispensary	NGO	Independent	761985/07	Functioning	
			696072/03-		
Health Centre	MOSA		07/540532	Functioning	
Health Centre	NGO	Independent	767653/07	Functioning	
Dispensary	MOH		760014/07	Not Functioning	
Dispensary	NGO	Religious group	525237/07	Not Functioning	

Facility Type	Ownership NGO Voluntary		Telephone	Status of Facility	
Dispensary	MOSA		334364/03	Functioning	
Health Centre	NGO		734938/07	Not Functioning	
Dispensary	Not Defined		07/305610	g	
Dispensary	NGO	Independent	03/378647	Functioning	
Dispensary	MOSA	Others	03/251265	Functioning	
Dispensary	NGO		725104/07	Functioning	
Health Centre	Not Defined	Independent	07/420606	Functioning	
Health Centre	MOSA	independent	07/442070	Functioning	
Dispensary	Municipality	Independent	313802/03	Not Functioning	
Dispensary	NGO	maoponaom	220140/07	No response	
Dispensary	MOSA		07223600	Functioning	
Bioporioury	MOSA		07/751398	l anotorning	
Dispensary	NGO	Independent	03/627015	Functioning	
Dispensary	NGO	Independent	03/522937	Partially functioning	
Dispensary	MOSA	independent	260259	Functioning	
Dispensary	MOSA		525237/07	Functioning	
ызрензату	MOSA		03/724881	No response	
Dispensary	NGO	Political Group	03209582	Not Functioning	
Бізрепізагу	NGO		420456/03	Not i difetioning	
Dispensary	MOSA		751398/07	Functioning	
Dispensary	Municipality		200674/07	Functioning	
Dispensary	NGO		07\728857	Not Functioning	
Dispensary	NGO	Independent	750240/07	Functioning	
Dispensary	NGO	Independent	07/723822	Functioning	
		Independent			
Dispensary	MOSA	Indonondont	721608/07	Functioning	
Dispensary	NGO	Independent	841739/03	Functioning	
Dispensary	NGO	Independent	638025/03	Not Functioning	
Dispensary	MOH	Independent	07/751077	Not Functioning	
Health Centre	NGO	Independent	751077/07	Functioning	
Dispensary	NGO	Independent	918926/03	Functioning	
Dispensary	NGO	Independent	735699/07	Functioning	
Dispensary	NGO	Independent	737277/07	Functioning	
Dispensary	NGO	Independent	07/722267	Functioning	
Health Centre	NGO	Independent	732253/07	Functioning	
Hospital					
outpatient			07/704000		
department/ER	MOH		07/721606	Functioning	
Dispensary	Not Defined		735822/07	Not Functioning	
Dispensary	NGO	Independent	750638/03	Functioning	
Dispensary	NGO	Independent	753502/07	Functioning	
Dispensary	NGO	Religious group	728857/07	Functioning	
Health Centre	NGO		625800/07	Functioning	
	NGO		200434/07		
Dispensary	NGO	Independent	725254/07	Functioning	
Dispensary	NGO	Independent	722393/07	Functioning	
Dispensary	NGO	Independent	752953/07	Functioning	
Dispensary	NGO	Independent	725158/07	Functioning	
	NGO	Independent	07722555	Functioning	
Dispensary	NGO		260780/07	Does not exist	
Health Centre	NGO	Independent	70/164678	Functioning	
Dispensary	Municipality		07/393000	Functioning	
Dispensary	NGO		03/217689	Not Functioning	
Dispensary	NGO	Religious group	741190/07	No response	

Facility Type	Ownership NGO Volunt		Telephone	Status of Facility	
Dispensary	MOSA		729511/07	Functioning	
Health Centre	NGO	Independent	215660/07	Functioning	
Health Centre	MOSA		215221/07	Functioning	
Dispensary	MOSA		334364/03	Functioning	
Dispensary	NGO		200434	Not Functioning	
Health Centre	Municipality		740070/07	Not Functioning	
Health Centre	MOH		03/532201	Functioning	
Dispensary	MOSA		03/747768	Functioning	
Dispensary	MOH		07/415234	Functioning	
Dispensary	MOSA		07/410723	Functioning	
Health Centre	MOH	Religious group	410407/07	Functioning	
Health Centre	MOSA		07343178	Functioning	
Dispensary	MOSA		07/460463	Not Functioning	
Dispensary	NGO		03/879026	No response	
Dispensary	MOSA	Religious group	243842/03	Not Functioning	
Dispensary	NGO	Religious group	03639828	Not Functioning	
Dispensary	MOSA	. tongious group	07345282	Functioning	
Dispensary	NGO		03/285018	No response	
Health Centre	NGO	Religious group	07/741190	Functioning	
Dispensary	NGO	Religious group	751431/03	Functioning	
Health Centre	NGO	Independent	03864390	Functioning	
Dispensary	NGO	macpenaem	07/400403	Unreachable	
Dispensary	MOSA		07/410723	Functioning	
Dispensary	MOSA	Religious group	03/277413	Functioning	
Dispensary	Municipality	rteligious group	03/663795	Not Functioning	
Dispensary	NGO	Religious group	07/345189	Functioning	
Dispensary	MOSA	rteligious group	07/741009	Functioning	
Dispensary	MOSA		345281/07	Not Functioning	
Health Centre	MOSA		345281/07	Functioning	
Dispensary	NGO	Independent	740070/07	Functioning	
Dispensary	NGO	Independent	348221/07	Partially functioning	
	MOH	independent	07/740297	Partially functioning	
Dispensary Dispensary	NGO	Indonondont	07343108	Functioning	
Health Centre		Independent Independent	345901/07	Functioning	
	Municipality NGO	Religious group	825572/03	Not Functioning	
Dispensary Health Centre	MOH	Religious group	07/740293	Functioning	
	NGO	Independent	741190/07		
Dispensary		Independent	07/430436	Partially functioning	
Health Centre	NGO NGO	Religious group	07/430430	Functioning	
Dispensary		Religious group	247011/07	Functioning	
Dispensary	MOH	Political Group	347811/07	Functioning Unreachable	
Dispensary	NGO	Indonondont	740601/07		
Dispensary	NGO	Independent	344620/07	Functioning	
Dispensary	NGO	Independent	453117/03	Not Functioning	
Dispensary	NGO	Independent	03/771840	Partially functioning	
Dispensary	NGO	Religious group	03/341415	Not Functioning	
Dispensary	NGO	Religious group	07/380745	Unreachable	
Dispensary	NGO	Delitional Object	740070/07	Not Functioning	
Dispensary	Municipality	Political Group	825572/03	Functioning	
Disease	MOGA	luden sole (03/880337-		
Dispensary	MOSA	Independent	07/415088	Functioning	
Health Centre	NGO	Religious group	294185/03	Functioning	
Health Centre	MOSA		07/430423	Not Functioning	
Dispensary	Municipality		822542/03	Functioning	

Facility Type	Ownership	NGO Voluntary	Telephone	Status of Facility
Dispensary	MOH		07430537	Not Functioning
Dispensary	NGO	Religious group		Not Functioning
Dispensary	NGO		07/325588	Unreachable
Dispensary	MOSA		07/345282	Not Functioning
Health Centre	Municipality	Political Group	678644/03-	Functioning
Dispensary	NGO		03/500451	Unreachable

Annex 3: List of hospitals

Qada	Village	Hospital	Туре	NGO	Status
Baalbeck	بعلبك	Ahli hospital			Not Functioning
Baalbeck	بعلبك	AL Rayan			Hospital Unvisited
Baalbeck	بعلبك	Al Tatari Hospital	Private For Profit		Functioning
Baalbeck	بعلبك	Dar El Amal	Private For Profit		Functioning
Baalbeck	بعلبك	Dar El Hayat Hospital	Private For Profit		Partially functioning
Baalbeck	بعلبك	Dar EL Hikmeh Hospital	Vol Non Profit	Religious group	Partially functioning
Baalbeck	بعلبك	Farhat Beit Chama	Private For Profit		Functioning
Baalbeck	بعلبك	Hopital Gouv de Baalbeck	МОН		Not Functioning
Baalbeck	بعلبك	Ibn Sinna	Private For Profit		Functioning
Baalbak	بعلبك	Mortada	Private For Profit		Functioning
Baalbak	بعلبك	Universal Hospital			Hospital Unvisited
Beirut	الاشرفيه_بيروت	Hopital Elie Karam			Not Functioning
Beirut	الاشرفيه_بيروت	Hopital Saiid			Not Functioning
		Hotel Dieu de			
Beirut	الاشرفيه_بيروت	France	Vol Non Profit	Others	Functioning
Beirut	الاشرفيه_بيروت	Rizk Hospital	Private For Profit		Partially functioning
Beirut	الاشرفيه_بيروت	St Georges roum	Vol Non Profit	Religious group	Functioning
Beirut	الرميل_بيروت	Hopital Geutcherian			Not Functioning
Beirut	بيروت	AL Ateba			Not Functioning
				Physician	Partially
Beirut	بيروت	Al Nicaai American	Private For Profit	Owned	functioning
Beirut	بيروت	University Hospital	Vol Non Profit	Others	Functioning
Beirut	بيروت	Beirut Hospital	Not Defined		No Response
Beirut	بيروت	Dar El Ajjaza El Islamya	Vol Non Profit	Religious group	Functioning
Beirut	بيروت	Dr Samy Baydoun Hospital	Vol Non Profit	Others	Functioning
Beirut	بيروت	Fouad Khalife			Not Functioning
Beirut	بيروت	Fouad Khoury Hospital			No Response
Beirut	بيروت	Gaitawi Lebanese Hospital			Hospital Unvisited
Beirut	بيروت	Ghorayeb Hospital	Private For Profit	Physician Owned	Functioning
Beirut	بيروت	Haddad hospital for the Rosary sisters			Hospital Unvisited
Beirut	بيروت	Haidar Hospital			No Response
Beirut	بيروت	Hopital George Bikhaazi	Vol Non Profit	Community group	Functioning

Qada	Village	Hospital	Туре	NGO	Status
		Hopital Gouv de			
		Quarantina -			Partially
Beirut	بيروت	Existant	MOH		functioning
Beirut	بيروت	Iskandar Khoury			Not Functioning
Beirut	بيروت	Khalidi Hospital			Not Functioning
Boildt		Makassed General		Religious	riot i anotioning
Beirut	بيروت	Hospital	Vol Non Profit	group	Functioning
Dell'ut	بيروك	Middle-East	VOLNOITTIOIL	group	runcioning
Beirut	بيروت	Hospital	Not Defined		Not Functioning
Denut	یر رـــ	Поэрна	Not Defined	Religious	Not i unctioning
Beirut	بيروت	Mohamad Khaled	Vol Non Profit	group	Not Functioning
Beirut	بيرو بيروت	Mother and Child	Military	group	Functioning
					•
Beirut	بيروت	Najjar Hospital Rassoul El	Private For Profit		Functioning
Beirut	دد مد میں	Aazzam			Functioning
	بيروت		Drivete Far Dreft		i uncuonny
Beirut Beirut	بيروت	Trad Hospital	Private For Profit	Doligious	
	1 11	Ct waarraa hadath	Net Defined	Religious	
Suburbs	الحدث-بعبدا	St georges hadeth	Not Defined	group Boligious	No Response
Beirut Suburbs	الحدث-بعيدا	Ste Therese	Not Defined	Religious	Functioning
Beirut	الحدث-بعبدا	Ste merese	Not Delineu	group	Functioning
Suburbs	الغبيره	Al Sahel	Vol Non Profit		Functioning
Beirut	العبيرة	Al Sallel	VOLINOITETOIIL	Physician	Partially
Suburbs	برج البراجنة	Al Bourj Hospital	Private For Profit	Owned	functioning
Beirut	برج البراجية	Ai Douij Hospitai	Thvaterorron	Religious	Turicuoring
Suburbs	بعبدا	Al Zahraa	Private For Profit	group	Functioning
Beirut		7 li Zalilaa	T INVALO T OF T TOIL	Physician	Partially
Suburbs	بعبدا	Kamal Jounmblat	Private For Profit	Owned	functioning
Beirut				Community	lanotioning
Suburbs	حارة حريك	Bahman Hospital	Vol Non Profit	group	Not Functioning
Beirut	عين الرمانة-	24		9.000	, tett energy
Suburbs	بعبدا	Al Hayat			No Response
		Bint Jbeil Gov			· · ·
Bin Jbeil	بنتجبيل	Hospital			Not Functioning
		Islamic Health		Religious	Partially
Bin Jbeil	بنتجبيل	Society	Private For Profit	group	functioning
		Tibnin			Partially
Bin Jbeil	تبنين	Governmental	MOH		functioning
Hasbaya	حاصبيا	Hasbaya Hospital	МОН		Functioning
Hermel	الهرمل	AL Assi Hospital	Private For Profit		Functioning
				Religious	5
Hermel	الهرمل	Al Batoul Hospital	Vol Non Profit	group	Functioning
		Hermel Old Gov			<u> </u>
Hermel	الهرمل	Hospital	MOH		Functioning
		Hopital Gouv de			
Hermel	الهرمل	Hermel - Existant			Not Functioning
		Jezzin Gov			
Jezzin	جزين	Hospital	MOH		Functioning
		Marjaayoun			
Marjaayun	مرجعيون	Hospital	MOH		Not Functioning
		Mays eljabal Gov			
Marjaayun	ميسالجبل	Hospital			Not Functioning

Qada	Village	Hospital	Туре	NGO	Status
	U		,	Physician	011110
Nabatieh	النبطية	Gandour hospital	Private For Profit	Owned	Functioning
		Nabatieh			
		govenmental		Political	
Nabatieh	النبطية	hospital	MOH	Group	Functioning
Nahatiah	: t -ti	Naidah Haanital	Val Nen Drafit	Community	Eurotioning
Nabatieh	النبطية	Najdeh Hospital	Vol Non Profit	group	Functioning
Nabatieh	النبطية	Nakib Hospital			Not Functioning
Nabatieh	النبطية	Ragheb Harb Hospital	Private For Profit		No Boononao
Nabalien	التبطيه	поѕрітаі	Flivale For Floil	Physician	No Response
Saida	الصرفند	Alaedine Hospital	Private For Profit	Owned	Functioning
Guida			1 mater of 1 font	Physician	1 anotioning
Saida	الصرفند	Kharroubi Hospital	Military	Owned	Functioning
Saida	الهلالية صيدا	Jbeily Hospital	Private For Profit		Functioning
Saida	صيدا مىيدا	Al Chab			Not Functioning
Saida	۔ صيدا	AL Charek			Not Functioning
Saida	<u> </u>	Al Hajj Iskandar			Not Functioning
Salua	لعبيدر	Al Jounoub		Physician	Not Functioning
Saida	صيدا	Hospital	Private For Profit	Owned	Functioning
		Al Raii Medical		Physician	J
Saida	صيدا	Center	Private For Profit	Owned	Functioning
				Physician	
Saida	صيدا	Dalaa hospital	Private For Profit	Owned	Functioning
Saida	صيدا	Elia Hospital			Not Functioning
Saida	صيدا	Hammoud hospital	Private For Profit		Functioning
0.11		Hopital Gouv de			
Saida	صيدا	Saida - Existant		Dhusisian	
Saida	صيدا	Kassab Hospital	Private For Profit	Physician Owned	Functioning
Salua	لعبيدر	Labib medical	FINALETOFFICIL	Owned	Tunctioning
Saida	صيدا	center	Private For Profit		Functioning
		Professeur Bachir			J
Saida	صيدا	Cham			No Response
				Physician	
Sour	صور	Bachour Hospital	Military	Owned	Functioning
Sour	صور	Elissa Hospital			Not Functioning
_				Physician	
Sour	صور	Hiram Hospital	Military	Owned	Functioning
Cour		Hopital Gouv de	MOLL		Functioning
Sour	صور	Tyr Jabal Amel	МОН	Community	Functioning
Sour	1010	Hospital	Military	group	Functioning
0001	صور			Physician	r anotorning
Sour	صور	Nejm Hospital	Military	Owned	Functioning

Annex 4: Saida

As Saida data came in too late to be included in the overall analysis of the assessment, the data are mentioned separately.

Main Characteristics of Outpatients Facilities Assessed

	N (%)
Functioning Status	
Functioning	10 (19%)
Partially functioning	38 (72%)
Not Functioning	1 (2%)
No Information*	4 (7%)
Ownership	
Ministry of Health	2 (3%)
Ministry of Social Affairs	13 (23%)
Municipality	3 (5%)
Non Governmental Organization	36 (63%)
Others	3 (5%)
Facility Type	
Dispensary	42 (81%)
Health center	9 (17%)
Hospital outpatient /ER	1 (2%)
Road Accessibility	
Yes	13 (23%)
No	44 (77%)

Resources Availability at Assessed Outpatients Facilities

	F	Р	Ν
	(n=38)	(n=1)	(n=10)
Transportation			
Ambulance	12 (32%)	0	1 (10%)
Vehicle	4 (11%)	0	0
Power resources			
Central power	36 (95%)	1 (100%)	2 (20%)
Generator	35 (92%)	1 (100%)	1 (10%)
Mazout storage	17 (45%)	0	0
Fuel storage	13 (34%)	1 (100%)	0
Water			
Running water	38 (100%)	0	2 (20%)
Drinking water	33 (87%)	1 (100%)	1 (10%)
Sewerage	35 (92%)	1 (100%)	2 (20%)

F: Functioning facilities

P: Partial functioning

N: Not functioning

Services provided during war in health centers in Saida

	N (%)
Maternal Services	
No	28 (49%)
Yes	29 (51%)
Pediatric services	
No	20 (35%)
Yes	37 (65%)
General consultation services	
No	23 (40%)
Yes	34 (60%)
Educational services	
No	27 (47%)
Yes	30 (53%)
Diagnostic services	
No	38 (67%)
Yes	19 (33%)

Distribution of human resources in outpatient facilities in Saida

	N (%)	
Dentist		
No	56 (98%)	
Yes	1 (2%)	
ENT		
No		
Yes	3 (100%)	
Eyes		
No		
Yes		
General Practitioner		
No	21 (37%)	
Yes	36 (63%)	
Health Educator		
No	50 (88%)	
Yes	7 (12%)	
Internist		
No	36 (63%)	
Yes	21 (37%)	
Laboratory technician		
No	47 (82%)	
Yes	10 (18%)	
Midwife		
No	5 (91%)	
Yes	5 (9%)	
Obstetrician		
Yes	20 (35%)	
No	37 (65%)	
Pediatrician		
No	18 (32%)	
Yes	39 (68%)	
Pharmacist		
No	41 (72%)	

World Health Organization Lebanon

	N (%)		
Yes	16 (28%)		
Physiotherapist			
Ňo	53 (93%)		
Yes	4 (7%)		
Practical Nurse			
No	32 (56%)		
Yes	25 (44%)		
Radiographer			
No	51 (90%)		
Yes	6 (10%)		
Registered Nurse			
No	30 (53%)		
Yes	27 (47%)		
Skin			
No			
Yes	4 (100%)		
Social worker			
No	50 (88%)		
Yes	7 (12%)		
Surgeon			
No	55 (96%)		
Yes	2 (4%)		

Annex 5: Volunteers

Volunteer name	team	Number of tasks	Km	Km
أحمد النقيب	5	1	150	
أيمن مكّي	3	1	230	
إيهاب حمادة	1	1	230	
بارعة خليل	11	1	50	
باسل العود	4	1	200	
بلال شعيتو	3	1	230	
تمارا يونس	30	1	210	
حسام ياسين	13	1	240	
حسن ديب	30	1	210	
خالد هواري	12	1	230	
دانا صلاحي	12	1	230	
دانيا بساط	12	1	230	
رشا أبو الحسن	6	1	60	
ر شید حمدان	14	1	200	
رمزي حيدر	13	1	240	
رمزية الفرج	9	1	180	
رنا بشیر	20	1	50	
ريان سقلاوي	27	2	100	200
ريما الحاج	17	1	50	
سامر فاعور	35	1	80	
سليم بهذات مرعي	18	1	80	
شانتال حداد	6	1	60	
طارق حجار	5	1	150	
عصام حمزة	35	1	80	
علي حيدر	1	1	280	
علي شعيب	2	1	230	
علي قاروط	4	1	200	
غنى النونو	11	1	50	
فكتور شديد	16	1	220	
كاتي غنطوس	14	1	200	
محمد عمّار الحجار	7	2	200	240
محمود جمال	8	1	190	
مصطفى إبراهيم	8	1	190	
میرا زخریا	10	1	200	
ميسم علم الدين	16	1	220	
میسم نمر	37	1	80	
نادية صيموعة	29	1	160	
هبه سعد الحجّار	18	1	80	
هبه طراد	10	1	200	
هنادي شعيان	20	1	50	
وسام بعلبكي	7	2	200	240
وسام ياسين	27	2	100	200
وسن إبراهيم	9	1	180	

Volunteer name	team	Number of tasks	Km	Km
وليد الحاج	17	1	50	
يوسف عبيد	2	1	230	