



**UNHCR**  
The UN  
Refugee Agency

## Minutes of Health Coordination Group Meeting – South Region

Locations: Tyre - UNHCR Compound

Time/Date: 1145-1300, 7 November 2013

	Issue	Actor (focal agency)	Deadline
1.	<p><b>Updates on Refugees trends</b></p> <ul style="list-style-type: none"><li>- 94,660 registered in South as of 26 September 2013;</li><li>- 625 awaiting registration;</li><li>- <b>Health information brochure</b></li><li>- Updating – will be circulated for review prior to printing new copies</li><li>- <b>Vaccination in registration centers</b></li><li>- <b>3250</b> vaccinated in October 2013 in the South;</li><li>- <b>Communicable diseases</b></li><li>- 769 cases of leishmaniasis were reported to the MoPH; 243 completely recovered.</li><li>- Following reports that 10 cases of polio were confirmed in Syria; The MoPH in coordination with the humanitarian agencies is launching a door to door anti-polio virus campaign for 5 days each. The first round will start on Nov 8 till 12 November in Lebanon. The second round will be repeated from 6 to 10 December. All children of 5 years and below are required to get to OPV vaccination during the campaigns. Partners were encouraged to provide all the support to the Government.</li><li>- <b>Assessment PHC centers in Saida Area</b></li><li>- Agreement will hopefully be implemented with PHC health center in Saida this week (Ghazieh PHC)</li></ul>		

2.	<ul style="list-style-type: none"> <li>- <b>Health information data, disease trends and analysis</b></li> <li>- Tally sheet will be shared for completion; partners encouraged to share data so that a report can be generated for the region (Information should be sent to: lebbephu@unhcr.org; ahmadja@unhcr.org).</li> </ul> <p>Action points:</p> <ul style="list-style-type: none"> <li>- <b>UNHCR to share tally sheet.</b></li> </ul>		
3.	<p><b>Disease outbreaks</b></p> <ul style="list-style-type: none"> <li>- Continuing outbreak of lice and scabies. AMEL distributing medication for lice and scabies and conducting awareness raising / educational activities. Partners encouraged to report to UNHCR if WASH intervention are needed to intervene.</li> </ul>		
4.	<p><b>Vaccination and child health:</b></p> <ul style="list-style-type: none"> <li>- Millenium facilitated the vaccination of 32 refugee children in Ras Al Ayn ITS in cooperation with AMEL and IMC;</li> <li>- IMC mobile unit to coordinate bilaterally with Millenium regarding polio campaign in Ras El Ayn ITS;</li> <li>- UNICEF will be providing tetanus vaccine for adults.</li> </ul>		
5.	<p><b>Contingency plan</b></p> <ul style="list-style-type: none"> <li>- Being updated and will be shared this week.</li> </ul> <p>Action points</p> <ul style="list-style-type: none"> <li>- <b>UNHCR will share contingency planning document as soon as confirmed by MOPH – has</b></li> </ul>		

	detailed preparedness measures outlined. Once the feedback from partners are completed.		
6.	<p><b>Reproductive Health</b></p> <ul style="list-style-type: none"> <li>- Currently Saida governmental hospital is the only PEP kit custodian. UNFPA with IMC will conduct CMR training for other hospitals in the south, PEP kits will also be provided when the training is accomplished. It is hoped the training will take place</li> <li>- Reports on uncompleted miscarriage and induced abortion by medication purchased at pharmacies necessitating hospitalization. Concerns were noted on the harmful consequences and the necessity of family planning awareness.</li> <li>- Although family planning / contraceptives are available, the demand from families is not high.</li> <li>- Partners reported good feedback on the week where they used the pregnancy cards and requested more copies. The MOPH has halted use of pregnancy cards – meeting to be held on 13 November to discuss further.</li> </ul>		
7.	<p><b>Mobile medical units:</b></p> <ul style="list-style-type: none"> <li>- IMC targeting shelters, settlements, unfinished buildings, areas away from clinics. IMC report that patients do not approach fixed clinics even when they are nearby. Dependency on mobile clinics was expressed as a concern. Reasons suggested for not going to the clinic include financial (MMU is free); and potentially attitudes at the clinic. Also some problem of transportation was reported.</li> </ul>		
8.	<p><b>Mental health</b></p> <ul style="list-style-type: none"> <li>- WHO planning to provide training on PHCs at the end of November on tool for integrating mental health services into PHCs. 20 PHCs will be offered this training; they have been selected from the MOPH list. They need to have a social worker and nurse.</li> <li>- MSF Belgium have noticed patients with pre-existing psychiatric conditions who no longer</li> </ul>		

	have access to their medication		
9.	<b>Nutrition</b> <ul style="list-style-type: none"> <li>- IOCC is planning to conduct training on nutrition in November</li> </ul>		
10.	<b>Updates by all partners on other technical issues</b> <ul style="list-style-type: none"> <li>- NTR</li> </ul>		
12.	<b>AOB</b> <ul style="list-style-type: none"> <li>- CARITAS may be able to support for 25% (in cases where UNHCR covers 75%) depending on vulnerability of patient up to USD 800 (across Lebanon);</li> <li>- MSF Belgium are also covering the 25% in Hasbaya and Marjaayoun for some cases;</li> <li>- Most cases of dialysis are not covered unless by MOPH.</li> </ul> <p>Action point</p> <ul style="list-style-type: none"> <li>- UNHCR to share email of CARITAS focal points and social assessment form to contact in event of need for support</li> </ul>		

**Next Meeting:**

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