

See discussions, stats, and author profiles for this publication at: <https://www.researchgate.net/publication/344246045>

Lebanon's humanitarian crisis escalates after the Beirut blast

Article in *The Lancet* · September 2020

DOI: 10.1016/S0140-6736(20)31908-5

CITATIONS

3

READS

1,172

5 authors, including:



Samer Jabbour

Faculty of Health Sciences, American University of Beirut

78 PUBLICATIONS 1,698 CITATIONS

[SEE PROFILE](#)



Ali Mokdad

University of Washington Seattle

1,038 PUBLICATIONS 133,278 CITATIONS

[SEE PROFILE](#)

Some of the authors of this publication are also working on these related projects:



Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clusters of risks, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015 [View project](#)



Create new project "Tobacco research" [View project](#)

Lebanon's humanitarian crisis escalates after the Beirut blast



Lebanon is a fragile state whose political elite have long neglected to protect its people. With the Aug 4, 2020, devastating explosion in Beirut, Lebanon's dire health and humanitarian crises have escalated. The blast left 190 dead and more than 6500 injured.¹ Senior Lebanese officials reportedly knew for 6 years of ammonium nitrate storage at Beirut Port but failed to act,² showing blatant disregard for public safety. The destruction from the explosion has been widespread, with about 40% of Beirut severely damaged, leaving around 300 000 residents with devastated dwellings.³ According to WHO reports, impacts on health infrastructure include three hospitals rendered non-functional, three substantially damaged, 500 hospital bed equivalents lost, and many primary care facilities damaged.⁴ Essential food and medical supplies were also affected, including damage to grain silos and the destruction of 17 containers of medical supplies and a shipment of personal protective equipment.^{3,4} Other infrastructures, including roads, businesses, educational facilities, and cultural heritage buildings have also sustained damage.³ Initial World Bank estimates cost the physical damage at US\$3.8–4.6 billion and economic losses at \$2.9–3.5 billion.⁵ The blast has generated a new humanitarian emergency in Lebanon.

Lebanon's context is one of chronic development challenges. The country's health, social, and transport systems are overburdened and its infrastructures struggle to accommodate growing population needs and the influx of more than 1 million Syrian refugees since the beginning of the Syrian conflict. Corruption is rife.⁶ Long-standing economic and fiscal mismanagement have rendered Lebanon the third most indebted country in the world.⁷ Clientelism and widespread *wasta* (favours by personal connections) offered by political factions in exchange for allegiances and a confessional, sectarian political system have generated entrenched structural inequalities.⁸

Political and economic mismanagement had set Lebanon on a trajectory towards a health and humanitarian disaster long before the explosion.⁹ The scale of the country's political and economic crises led to widespread protests for political reform in 2019. Exacerbated by the impact of sanctions and dwindling US dollar reserves, Lebanon's economy has been in freefall, with the currency devalued by around 80%,

hyperinflation, and extreme capital control measures imposed by banks.¹⁰ Foreign currency shortages curtailed imports and in June, 2020, food price inflation approached 200%, with rising food insecurity and hunger and fears of possible famine within months.¹¹ Widespread shortages of essential medicines together with lay-offs and emigration of health personnel have reduced hospital services.^{12–14} In July, 2020, there were reports that calls to Lebanon's suicide hotlines had increased.¹⁵ The estimated head-count poverty rate in Lebanon increased from 28% in 2019 to 55% in May, 2020, with 23% of the population in extreme poverty.¹⁶ These figures are expected to soar further after the explosion with continuing inflation and as Lebanon's middle class contracts and emigrates.¹⁶

COVID-19 and country-wide lockdowns further exacerbated the political and economic turmoil. Lebanon adopted an early and aggressive COVID-19 containment strategy, followed by phased reopening in late April, 2020.¹⁷ Lebanon reopened its airport early, on July 1, 2020, a measure necessary both for repatriation and remittance flows. Poor compliance and weak enforcement of quarantine led to a surge in COVID-19 case numbers and Lebanon re-entered partial lockdown in late July, 2020. In the acute blast emergency, its aftermath, and the protests that followed, compliance with social distancing and COVID-19 containment measures waned.¹⁴ COVID-19 cases have tripled in the month since the blast,¹⁸ with a cumulative total of 21324 cases and 200 deaths as of Sept 8, 2020.¹⁹ COVID-19 cases are also occurring among health workers.²⁰ A lockdown reimposed after the blast was eased within days due to economic pressures. Lebanon's health system capacity is now under real threat.

The state continues to fail in its obligations. In the wake of the explosion, the state was noticeably absent from hazardous clean-up efforts. Instead, Lebanon's citizens took to the streets to remove debris, demonstrating community solidarity, resourcefulness, and strength, akin to that seen during the 2006 war in Lebanon.²¹ The Lebanese people have had to rebuild from rubble many times. Widely hailed for their resilience and ability to overcome recurrent adversities, the Lebanese have endured enough, and their resilience is not reason for ongoing lack of political accountability and reform.²²



Joseph Eidi/Getty Images

Published Online
September 10, 2020
[https://doi.org/10.1016/S0140-6736\(20\)31908-5](https://doi.org/10.1016/S0140-6736(20)31908-5)

- 20 OCHA Lebanon. Lebanon: Beirut port explosions, situation report no. 9. Sept 2, 2020. https://reliefweb.int/sites/reliefweb.int/files/resources/Beirut%20Port_SitRep%20No.9.pdf (accessed Sept 6, 2020).
- 21 Nuwayhid I, Zurayk H, Yamout R, Cortas CS. Summer 2006 war on Lebanon: a lesson in community resilience. *Glob Public Health* 2011; **6**: 505–19.
- 22 Abdelaziz R. Lebanon's people don't want to be resilient anymore. They want change. *The Huffington Post*, Aug 6, 2020. https://www.huffingtonpost.com.au/entry/lebanon-people-resiliency-reform_n_5f2acd8ec5b6e96a22ac74eb?ri18n=true (accessed Sept 4, 2020).
- 23 Massena F. After Beirut blast, mental health is Lebanon's next crisis. *The New Arab*, Sept 1, 2020. <https://english.alaraby.co.uk/english/indepth/2020/9/1/after-beirut-blast-mental-health-is-lebanons-next-crisis> (accessed Sept 4, 2020).
- 24 Mooro A. Between tragedy and hope: survivor's guilt in the Arab diaspora. *The New Arab*, Aug 11, 2020. <https://english.alaraby.co.uk/english/society/2020/8/11/survivors-guilt-in-the-arab-diaspora> (accessed Sept 4, 2020).
- 25 Woo Y. Donors pledge 253 million euros in emergency aid for Lebanon after blast. *Reuters*, Aug 9, 2020. <https://www.reuters.com/article/us-lebanon-security-blast-conference/frances-macron-to-host-donor-conference-for-blast-stricken-lebanon-idUSKCN255099> (accessed Sept 4, 2020).
- 26 Transparency International. The Beirut Blast Recovery and Reconstruction Monitor. Aug 25, 2020. <https://www.transparency.org/en/press/the-beirut-blast-recovery-and-reconstruction-monitor#> (accessed Aug 26, 2020).
- 27 Jabbour S, El-Zein A, Nuwayhid I, Giacaman R. Can action on health achieve political and social reform? *BMJ* 2006; **333**: 837–39.