

CHILDREN IN THE CROSSFIRE

THE TOLL OF THE ISRAEL-LEBANON CRISIS ON ITS YOUNGEST VICTIMS

A REPORT BY

"Are we safe yet?"

"Are we safe yet?"

That is all ten-year-old Ali could say, over and over, to his severely injured brother, Nabeel, after their family had fled, first from one village, then to another. While they are just two of the innocent victims of the escalation of violence in Lebanon and Israel, a disproportionately high number of children are being killed, injured and displaced. According to UNICEF, while children under age 18 make up 30 percent of the Lebanese population, they represent 45 percent of those who have been displaced. Children comprise 35 percent of those who have been killed, and one third of those who have been injured.

WAR'S TOLL ON CHILDREN

- 300 + KILLED
- I,000 INJURED
- 500,000 DISPLACED

SOURCE: UNITED NATIONS

INTRODUCTION

As summer begins to wind down, most children around the world are starting to prepare for another school year. But school is a distant hope for children in Lebanon and many parts of Israel, as they spend their time hoping merely to survive the next air raid or missile strike.

Even if they are lucky enough to come through the bombs and shelling physically unharmed, these children must still face not only psychological distress, but also the rapid spread of communicable disease that so often accompanies war.

This report from California-based International Medical Corps, one of the largest emergency medical response organizations in the world, is intended to highlight the plight of war's youngest victims. While it is far too early to draw any firm conclusions about the effects this conflict will have on the youth of Lebanon and Israel, we know from more than two decades of work helping the young victims of war and natural disaster, that the road to recovery and self-sufficiency is long and difficult. For many children, the scars of war—whether physical or psychological—may never completely heal.

"International Medical Corps provides relief to vulnerable populations that have been cut off from all other aidregardless of race, politics or religion. We are particularly horrified by the impact this crisis is having on children. We remain committed to doing whatever it takes to provide life-saving assistance to the tens of thousands of children caught in the crossfire of this war, so that they can recover and eventually resume their normal lives."

-Nancy A. Aossey, President and CEO, International Medical Corps

DISEASE

The current crisis will likely exacerbate childhood communicable diseases. Diarrhea and respiratory illnesses, which were rampant in Lebanon during the earlier civil war, are expected to resurface. Measles is endemic to Lebanon, with occasional outbreaks—the latest occurred this year, with more than 2,000 reported cases.

Given the current conditions of overcrowding in homes, schools and other public buildings, the limitations of national immunization services will have serious consequences on child health. Furthermore, community settlements with poor infrastructure will increase the risk of communicable diseases. The probability of a diarrheal disease outbreak, common in Lebanon in the summer months, will certainly increase under the current circumstances.

"FOLKS HERE ARE JUST LIKE FOLKS ANYWHERE ELSE: THEY ARE WORRIED ABOUT THEIR FAMILIES, HOW THEY WILL FIND JOBS, HOW THEY WILL SURVIVE. WOMEN, CHILDREN AND THE ELDERLY ARE PARTICULARLY VULNERABLE." — DR. NEIL J

--- DR. NEIL JOYCE, IMC MEDICAL OFFICER IN BFIRUT.

PSYCHOLOGICAL STRESS

Children are particularly vulnerable to emotional distress. "The main issues for children in conflict are, how well are the people around them coping? How well are their parents doing? How calm is the situation around them? How secure is it?" says child psychiatrist Lynne Jones, IMC's technical adviser in mental health. "IMC's approach is always to look after the whole family, to try to keep families together and to make sure that the family is as secure as it can be in the whole situation, because if mothers and fathers are doing well, their children will do well."

IMC doctors are witnessing noticeable behavioral changes in children and adolescents. Many children have taken on the role of provider and have become preoccupied with the distribution of supplies. This has brought on increased incidents of violence and quarrelling, with conflicts about food, water and clothing occurring between refugee and internally displaced children who are standing in distribution lines.



There are about 135,000 displaced people living in schools, camps and other public sites in Lebanon. Another estimated 470,000 are staying with friends and relatives. In addition, some 180,000 people have streamed across the border into Syria - approximately 67,000 of them taking refuge at public sites. Of particular concern for parents and school officials is the continuity of the children's education. School is scheduled to start in just a few weeks, yet many Lebanese children have fled their homes and are no longer near their schools. And with so many children taking refuge in schools in Syria and Lebanon, this also risks disrupting the new academic year for the host population. Meantime, fear of having to change shelters is prevalent among displaced children, causing many families to refuse to leave the schools where they were originally housed.

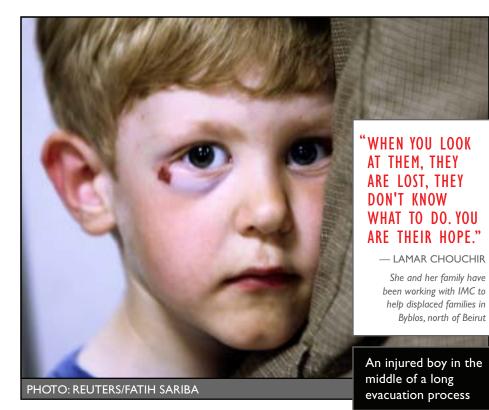
Young children are experiencing higher rates of sleep disturbances such as fear of the dark and nightmares. The absence of employment and leisure activities, combined with the stressful circumstances of refugee life, has also brought about a tendency toward violence in adolescents.

IMC is planning comprehensive psychosocial, mental health, and learning programs to address these disturbing trends.

LANDMINES AND UNEXPLODED MUNITIONS

Landmines and unexploded ordnance (UXO) will be a concern when children and families begin returning to their homes. IMC estimates that up to 300 UXOs per day could be landing within the conflict zone, posing a serious threat to returnees and humanitarian workers. According to the U.N., an estimated 2.1 million square meters in Lebanon are landmines by contaminated and booby-traps endangering 250,000 people in 151 communities. An estimated 500,000 landmines remain in southern Lebanon. The most dangerous ones exist mainly along the blue line separating Lebanon and Israel.

IMC MEDICAL TEAMS HAVE TREATED HUNDREDS OF LANDMINE VICTIMS IN AFGHANISTAN AND ANGOLA — COUNTRIES WITH SOME OF THE HIGHEST CONCENTRATIONS OF LANDMINES IN THE WORLD — AND ELSEWHERE AROUND THE GLOBE.



IMC'S OPERATIONS

- RUNNING NINE MOBILE MEDICAL UNITS AND MEDICAL TEAMS IN LEBANON AND SYRIA.
- TREATING CIVILIANS FOR CONFLICT-RELATED INJURIES, BURNS, DEHYDRATION, SKIN AND EYE INFECTIONS, DIARRHEAL DISEASE AND OTHER COMMUNICABLE DISEASES AND ACUTE CARDIOVASCULAR COMPLICATIONS.
- PROVIDING LIFESAVING MEDICINES TO REFUGEES CROSSING THE LEBANESE BORDER INTO SYRIA.
- PROVIDING MEDICAL SUPPLIES TO FOUR HOSPITALS IN TYRE AND NABATIEH DISTRICTS.
- DISTRIBUTING MATTRESSES, PILLOWS, SHAMPOO, SOAP, SLIPPERS, BABY FORMULA, COOKING OIL, RICE, SUGAR AND OTHER ESSENTIAL SUPPLIES TO PEOPLE LIVING IN EIGHT SCHOOLS, COMMUNITY CENTERS AND MOSQUES OUTSIDE OF BEIRUT.
- DISTRIBUTING HEALTH PAMPHLETS TO EDUCATE DISPLACED PEOPLE ABOUT WATER SUPPLY AND PURIFICATION, FOOD HANDLING, HYGIENE, HAND WASHING AND SANITATION, AND COMMUNICABLE DISEASES.
- INITIATING MENTAL HEALTH AND PSYCHOSOCIAL SERVICES, INCLUDING PLANS FOR ORGANIZING CHILD-FRIENDLY SPACES AND LEARNING ACTIVITIES.



USG HUMANITARIAN ASSISTANCE TO LEBANON



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IMC IS A GLOBAL HUMANITARIAN ORGANIZATION DEDICATED TO SAVING LIVES AND RELIEVING SUFFERING THROUGH HEALTH CARE TRAINING AND RELIEF AND DEVELOPMENT PROGRAMS.



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