

"Governments need to ensure the welfare of people who have lost their income and are in desperate need of food, sanitation and other essential services" - WHO DG, Dr. Tedros Adhanom Ghebreyesus

Highlight

- A total of 53,734 (3,695 today) confirmed cases from 21 countries in the East Mediterranean Region and total deaths are at 3,099 (153 today).
- Lebanon is still in level 3 of COVID 19 transmission scenarios "Lebanon is experiencing cases clusters in time, geographic location and/or common exposure (Clusters of cases)".
- WHO has updated the [Operational guidance for maintaining essential health services](#) during an outbreak to help countries maintain essential health services during the COVID-19 pandemic.
- Starting Thursday 2 April 2020 at noon the current call center number will be replaced with **01-594459**.

Global update

as per [WHO dashboard](#) 31 March 2020 at 9pm

Globally cases	754,948 (61,724 new)
Countries, areas or territories with cases	202 countries (0 new)
Total deaths	36,571 (3,465 new) (CFR: 3.4%)
Confirmed cases in China	82,545 (98 new)
Confirmed cases in USA	140,640 (17,987)
Confirmed cases in Italy	101,739 (4,050)
Confirmed cases in Spain	85,195 (6,398)
WHO RISK ASSESSMENT Global Level - Very High	

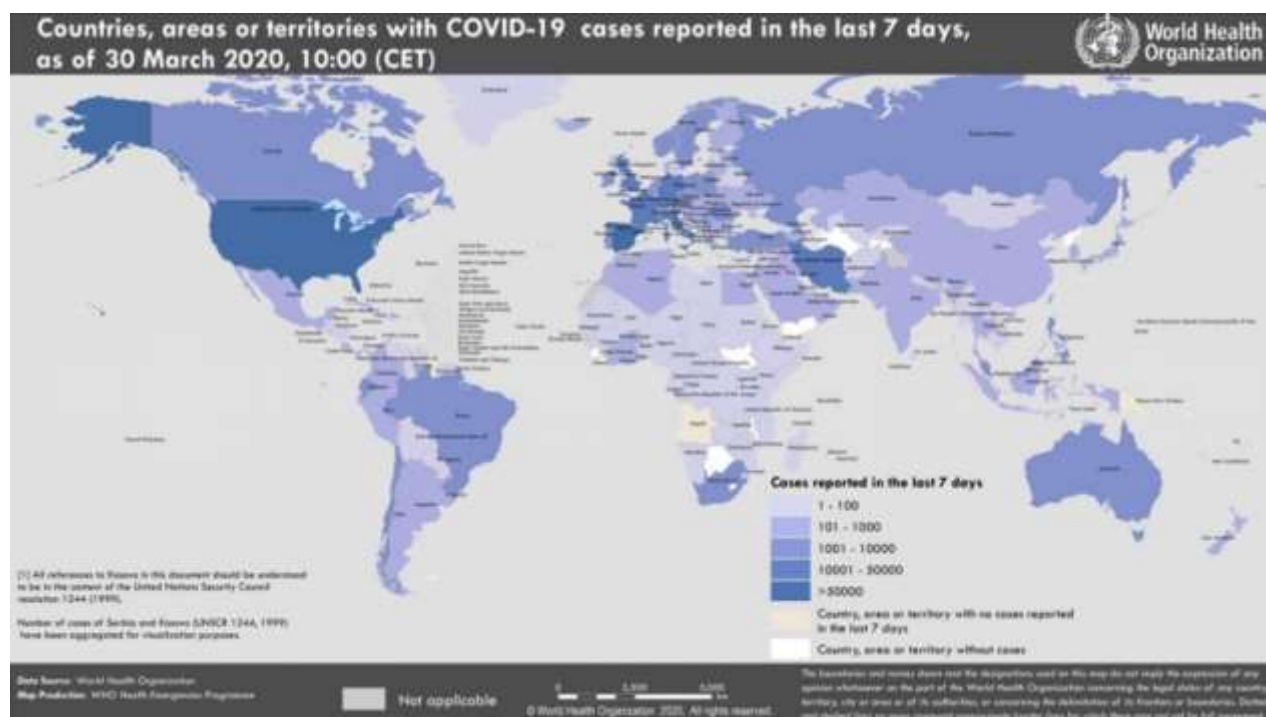


Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 30 March 2020

Distribution of COVID-19 cases as reported by the Epidemiological Surveillance Unit at the MOPH dashboard at 4pm

COVID-19 Surveillance in Lebanon

31 March 2020 UPDATE

Figure 1: Cases by age group

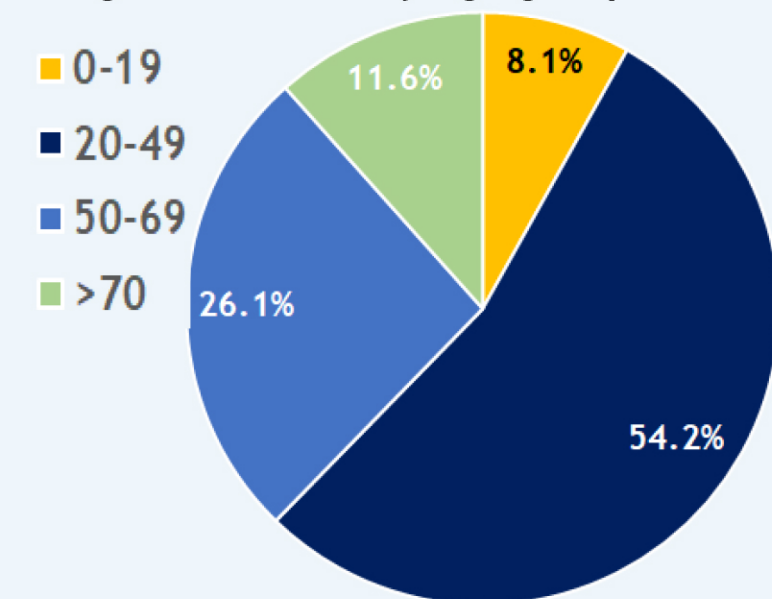


Figure 2: Cases by source of exposure

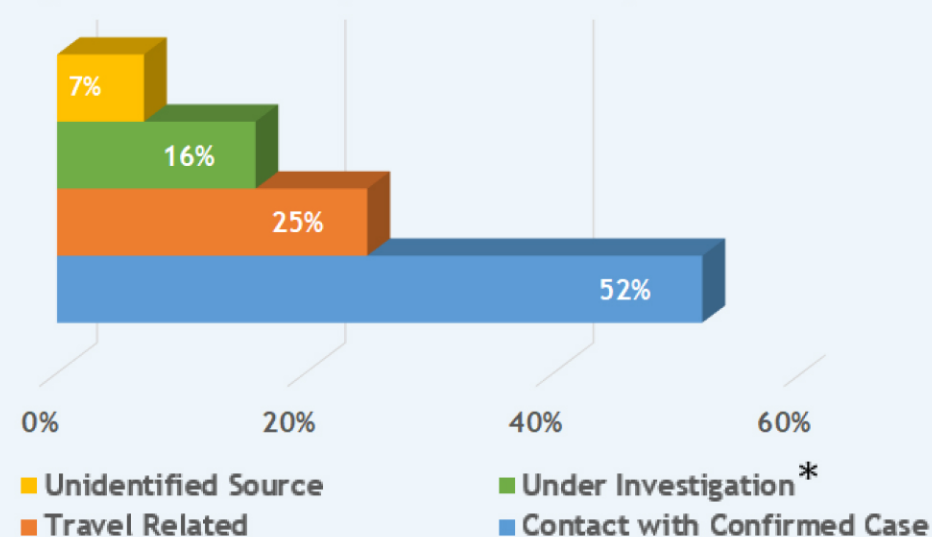


Figure 3: Cases by clinical presentation

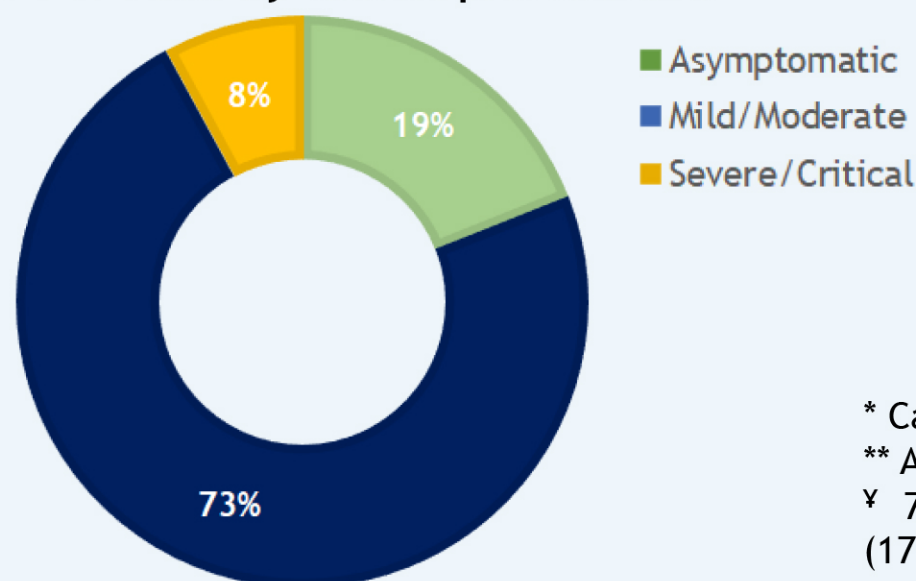
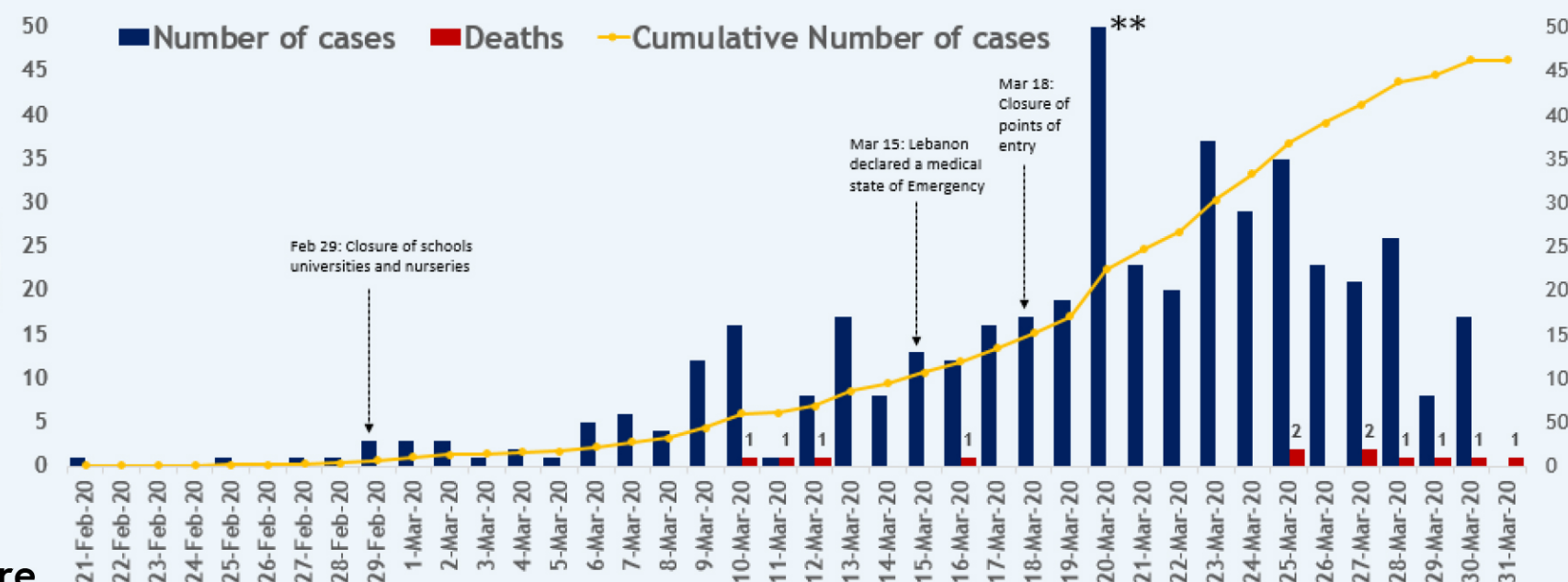


Figure 4: Cases by date of confirmation



463[¥] Cumulative cases of COVID-19

- 17 new cases
- 36 healthcare workers
- 12 associated deaths

Call center:

- 3665 Cumulative calls received
- 290 referred to RHUH

Table 1: Distribution of fatalities by age group

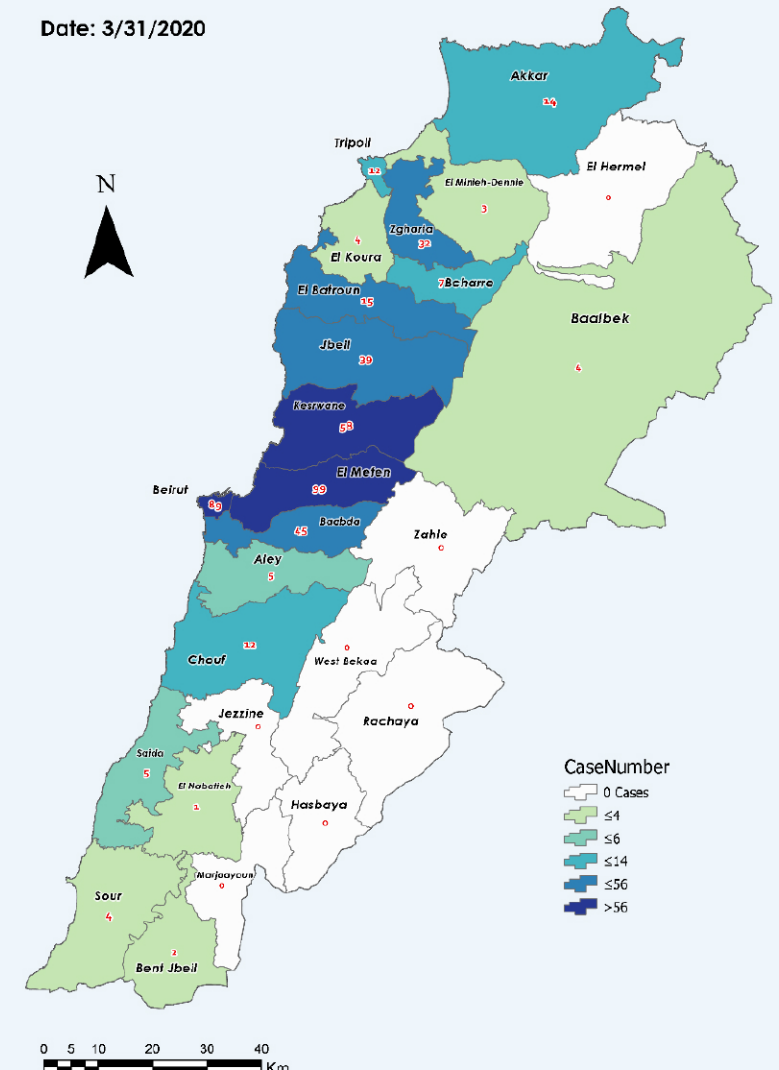
Age (years)	Deaths (n)	CFR
<10y	0	0.0%
10-19y	0	0.0%
20-29y	0	0.0%
30-39y	0	0.0%
40-49y	1	1.4%
50-59y	3	3.8%
60-69y	1	2.3%
70-79y	5	14.7%
80+y	2	10.5%
Total	12	2.6%

* Cases under investigation have not yet been classified by exposure

** Addition of new reporting laboratories

¥ 77.75% recovered or mild cases at home, 19.65% hospitalized (17.71% admitted to regular ward, 1.94% ICU), case fatality of 2.60%

Map 1 : Cases by district of residence



What is WHO's reaction to reports of stigmatization and discrimination in this outbreak?

The Director-General has called for combatting the spread of misinformation and rumours, the circulation of which has many negative effects, including the stigmatization and discrimination of people from areas affected by the epidemic, which was also one of the Emergency Committee's recommendations to all countries.

Given that COVID-19 is a new disease, it is understandable that its emergence and spread cause confusion, anxiety and fear among the general public. These factors can give rise to harmful stereotypes. Such barriers could potentially contribute to more severe health problems, ongoing transmission, and difficulties controlling infectious diseases during an infectious disease outbreak.

Since the emergence of COVID-19 we have seen instances of public stigmatization among specific populations, and the rise of harmful stereotypes. Stigmatization could potentially contribute to more severe health problems, ongoing transmission, and difficulties controlling infectious diseases during an epidemic.

Stigma can:

- Drive people to hide the illness to avoid discrimination;
- Prevent people from seeking health care immediately;
- Discourage them from adopting healthy behaviours.

What causes stigma

Stigma occurs when people negatively associate an infectious disease, such as COVID-19, with a specific population. In the case of COVID-19, there are an increasing number of reports of public stigmatization against people from areas affected by the epidemic. Unfortunately, this means that people are being labelled, stereotyped, separated, and/or experience loss of status and discrimination because of a potential negative affiliation with the disease.

The International Federation of Red Cross and Red Crescent Societies (IFRC), UNICEF and the WHO are developing community-based guides and global campaigns to thwart the effects of stigma on people and the COVID-19 response.

Everyone should take a part is fighting stigma

Governments, citizens, media, key influencers and communities have an important role to play in preventing and stopping stigma. We all need to be intentional and thoughtful when communicating on social media and other communication platforms, showing supportive behaviors around COVID-19.

Here are some examples and tips on possible actions to counter stigmatizing attitudes:

- Spreading the facts: Stigma can be heightened by insufficient knowledge about how the new coronavirus disease (COVID-19) is transmitted and treated, and how to prevent infection.
- Engaging social influencers such as religious leaders on prompting reflection about people who are stigmatized and how to support them, or respected celebrities to amplify messages that reduce stigma.
- Amplify the voices, stories and images of local people who have experienced COVID-19 and have recovered or who have supported a loved one through recovery to emphasize that most people do recover from COVID-19.



- Make sure you portray different ethnic groups. Materials should show diverse communities that are being affected, and show communities working together to prevent the spread of COVID-19.
- Balanced reporting. Media reporting should be balanced and contextualized, disseminating evidence-based information and helping combat rumour and misinformation that could lead to stigmatization.
- Link up. There are a number of initiatives to address stigma and stereotyping. It is key to link up to these activities to create a movement and a positive environment that shows care and empathy for all.

WHO guide

- [Social Stigma associated with COVID-19](#) – A guide to preventing and addressing social stigma.

Useful Links	Important numbers	
<ul style="list-style-type: none">➤ WHO real time dashboard➤ WHO COVID-19 page➤ Protect yourself (English/Arabic)➤ Q&A (English/Arabic)➤ WHO Lebanon website➤ WHO Lebanon Facebook Twitter Instagram	<ul style="list-style-type: none">➤ MOPH Hotline 1214➤ Airport quarantine section 01-629352➤ Preventive medicine center 01-843769 01830300➤ Call Centre 76-592699	<ul style="list-style-type: none">➤ Preventive medicine center 01-843769 01-830300➤ Call Centre 76-592699➤ Epidemiological Surveillance Unit 01-614194 01-614196
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