COVID-19 response - Lebanon bi-monthly situation report

17 April 2020

This report is prepared by OCHA, on behalf of and in collaboration with UN agencies and partners involved in the Lebanon COVID-19 response efforts. The report covers the period from 21 February to 16 April 2020.

Highlights/overview

- Since the first case of the coronavirus in Lebanon on 21 February 2020, 663 people have now been confirmed as infected with the COVID-19 (as of 16 April 2020). This includes 50 healthcare workers-mostly working in institutions dealing with the COVID-19 response. So far, there is only one confirmed case of a Palestine refugee living outside a camp, who has already recovered, with no other cases confirmed in refugee communities. Confirmed cases have been traced with limited local transmission and Lebanon is still in the phase 3 of the COVID-19 outbreak.
- While schools had been closed since 29 February, on 18 March, Lebanon went under full lockdown, shutting down its land borders, airport and seaports to stop the further spread of the coronavirus. The Government then announced strict measures on 22 March and 4 April, instructing enforcement by security forces, and implementing a daily country-wide curfew from 19.00 to 05.00.
- The United Nations and partners have been working closely with the Government to plan and provide assistance in line with the national response under the leadership of the Prime Minister and the interministerial task force on COVID-19 set up on 2 February. The response is premised on the principle of a single health system under the oversight of the Government and offering the same services to all, without distinction on the basis of gender, nationality or status.
- Key elements of the UN and partners support are being articulated in a
 coherent Emergency Response Plan to be published shortly. The appeal
 aims to highlight critical areas of humanitarian interventions to protect the lives and livelihoods of people in
 Lebanon most at risk due to the COVID-19 outbreak. The local plan will feed into the COVID-19 Global
 Humanitarian Response Plan.

KEY FIGURES (as of 16 April)

663 confirmed cases since 21 February 2020

21deaths

137 recovered

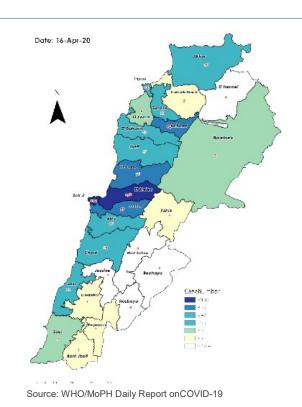
(RHUH reported recoveries)

15,633 PCR tests conducted*

Sources: WHO/MoPH daily report on COVID-19
*Lebanon National Operations Room daily report on COVID-19

Situation

- The UN and its partners continue to support the Government of Lebanon's efforts to fight the COVID-19 by strengthening the preparedness and response capacity of the health system; increasing engagement and communication with communities; promoting good hygiene practices; and, ensuring the continuation of critical pre-existing activities under the LCRP that are an enabler of COVID-19 response.
- The onset of the COVID-19 comes at an extraordinarily difficult time economically and sociopolitically in Lebanon, compounding existing weaknesses and further increasing vulnerabilities, particularly for the most vulnerable Lebanese such as youth, daily workers, female-headed households, older people, people with specific needs, as well as migrants and refugees.
- Women are disproportionally affected by the impact of the COVID-19, particularly with increased reports of domestic violence and abuse. Protection against Sexual Exploitation and Abuse (PSEA) must be incorporated across the local response.
- Partners conducting critical activities face sporadic access issues across Lebanon due to the recent



movement restriction measures introduced by the Ministry of Interior and Municipalities on 5 April. The UN requested that exceptions, similar to those in place for UN staff, be granted to non-UN partners carrying out critical humanitarian activities.

Response per pillar

Pillar 1 (Coordination, planning and monitoring):

- The Lebanon emergency appeal for COVID-19 will be finalized and presented to the Government and donors before end April.
- Continuing support to the Disaster Risk Management (DRM) unit in the Prime Minister's Office with the implementation of the National COVID-19 response plan in line with WHO framework and guidance.
- Advocating for one coordinated and coherent national response to the COVID-19 regardless of
 nationalities; non-discriminatory application of movement restrictions and curfews; and, a moratorium on
 the eviction of refugees and Lebanese, in addition to setting up help-lines, improved communications
 messaging and emergency cash for vulnerable people.
- Strengthening a coordinated approach to combating COVID-19, by consolidating the Lebanon emergency appeal.

Pillar 2 (Risk communication/community engagement):

- Finalizing a Risk Communication and Communication Engagement (RCCE) action plan.
- Producing several communication packages (videos, posters, animations for children, social media
 messages and visuals etc.) and campaigns focused on life-saving messages. addressing misinformation
 and fake news, preventing stigma, and helping people cope with stress, among others. Developed
 special awareness messages for Syrian refugees and migrant workers, adapted to their local language
 and dialetcts.
- Key messages around the COVID-19 for the upcoming holy month of Ramadan are being developed, based on the WHO recently issued global specific recommendations.
- Ongoing two-way communications with refugee communities to integrate their views in the response and empower individuals and communities to take the necessary precautionary measures to prevent infection, identify symptoms and access medical advice, and self-isolate when required.

Pillar 3 (Surveillance):

- Developed and operationalized an online database that links epidemiological and laboratory data to monitor cases and conduct timely data analyses.
- Implemented a series of training sessions, targeting 528 *qadaa* physicians, heads of services, surveillance officers, and physicians in 150 different hospitals to ensure rapid response to suspected and probable reported cases.
- Launched the COVID-19 Dynamic Infographic Dashboard for Lebanon (link).

Pillar 4 (Points of entry/infection prevention and control):

- Finalized the recruitment and deployment of additional medical and non-health staff at the five border points with Syria (23 nurses) and airport (eight nurses and two medical doctors) to screen travelers.
- Procured complete sets of Personal Protective Equipments (PPEs) including N95 masks, surgical
 masks, nitrile gloves, goggles, disposable gowns and coveralls and delivered them to points of entry,
 primary healthcare centres (PHCs) and Rafiq Hariri University Hospital (RHUH).
- Provided Information, Education and Communication (IEC) materials, case definition forms and home quarantine recommendations at points of entry.
- A series of training workshops on infection prevention and control (IPC) were conducted for nurses and paramedics at the five land crossings and the airport.
- Completed series of awareness and prevention sensitization meetings on COVID-19 prevention and safety of staff targeting 135 General Security Directorate (GSO) front-liners at the points of entry.
- Additional training for the GSO staff at the airport to safely facilitate the on-going repatriation of Lebanese expatriates from abroad.

Pillar 5 (National Lab):

- Procured a total of 14,000 diagnostic RT PCR tests for COVID-19, so far, along with necessary reagents and supplies for RHUH laboratory.
- To increase the testing capacity of the RHUH laboratory to around 500 tests per day, procured and operationalized an automated extractor for reverse transcription polymerase chain reaction (RT- PCR) test.
- Completed support for external quality assurance (EQA) of five COVID-19 designated laboratories (RHUH, American University of Beirut Medical Centre (AUBMC), Saint George Hospital University Medical Centre (SGHUMC), Lebanese American University Medical Centre (LAUMC), Hôtel-Dieu de France (HDF)). EQA for seven public hospitals are under preparation.
- Provision of COVID-19 testing at Hamshari Hospital in Saida, pending MoPH approval.
- Commitment to cover costs of PCR testing for refugees as part of the overall international community support and response to COVID-19.

Pillar 6 (Infection prevention and control (IPC)):

- Expanded capacity of MoPH dedicated COVID-19 hotline with ten additional operators (trained nurses) and equipment to take 30 simultaneous calls.
- Conducted a Training of Trainers on IPC, with focus on use of PPEs, reaching a total of 140 nurses from 115 hospitals, and 243 nurses from 175 PHCs.
- Developed a guide for front-liners for COVID-19 preparedness in prisons, coupled with training for key health and non-health staff in Qobbeh, Roumieh, and Zahle prisons); the focus is on IPC measures.
- Conducted hygiene promotion/awareness sessions and distribution of soaps in 5,508 sites for a total of 301,036 individuals (62,913 households) living in overcrowded conditions (5,020 informal settlements, 441 collective shelters/collective centres and 25 sites marked as "Other").
- Distributed disinfection kits to 12.453 households.
- Finalizing preparations to open a 96-bed quarantine and isolation centre for Palestine refugees at Siblin Training Centre campus, which is dedicated for those who cannot be self-isolated/quarantined at home.
- Engaged Syrian refugees with medical background to advise community on infection prevention and identification of symptoms, and help refer individuals to MoPH COVID-19 hotline for screening.
- List of 24 assessed sites for isolation across governorates submitted to relevant authorities and currently being vetted by the Order of Nurses and LAF for the High Defense Council COVID-19 coordination.

Pillar 7 (Case management):

- Conducted case management capacity assessment for 27 public hospitals and 48 private hospitals.
- Hospital expansion works ready to commence and designs completed for several hospitals pending approvals by the relevant authorities.
- Procured 18 ventilators, with 100 more in the pipeline, and other relevant and life-saving ICU equipment
 to be delivered to designated hospitals. A patient monitoring system, one ventilator and four cardiac
 monitors procured and installed at RHUH isolation rooms.
- Developed checklist for staff at places of quarantine on how to deal with mental health patients (including specific considerations for children).
- Developed and disseminated Guidance on Home Isolation in Overcrowded Areas to be used for isolation in overcrowded areas, including informal settlements for refugees.

Pillar 8 (Operational support and logistics):

- Established a common platform for consolidating supply plans to further inform procurement decisions and identify opportunities for joint sourcing and procurement.
- Developed guidance note about the import requirements and regulations for international imports under COVID-19 (with specific focus on medication).