



**UNHCR'S SUPPORT TO
LEBANON'S COVID-19
RESPONSE**
JANUARY 2021

IN HER WORDS



I arrived in the beautiful region of the Bekaa on Monday 10th August as the new head of Sub-Office Zahle, with a huge amount of trepidation: not only was Lebanon at the height of the pandemic, but less than a week before, Beirut had been blighted by a massive explosion at the port - reportedly the third largest explosion in the world. The country was reeling from this catastrophic tragedy, which had injured over 6,500, made 300,000 homeless and had very unfortunately occurred at a time when the country was already going through an extraordinarily grim political, social and economic crisis.

Assuming leadership of the largest sub-office in Lebanon was, in itself, a tall order. Although I consider myself to be fairly used to operational challenges - having worked in Yemen, Central African Republic, Afghanistan and Somalia - the unprecedented global situation caused by the pandemic had added a whole new layer of complexity to my assignment. I remembered hearing about the world-famous Lebanese resilience - we all saw the news reports of the DJ-led raves during the October 2019 protests - and I thought to myself: 'I hope some of that Lebanese resilience rubs off on me because I'm definitely going to need it!'

Since the start of the pandemic, there had been dire predictions about the fact that crowded refugee camps would become fertile breeding grounds for the virus; the Bekaa alone is home to over 3,500 informal settlements and over 340,000 Syrian refugees. Very fortunately for me, my predecessor and the team in Sub-office Zahle, in close collaboration with the Ministries of Public Health (MoPH), Interior and Municipalities and Social Affairs, governors, municipal authorities, sister UN agencies, NGO partners and refugees themselves had already established a remarkably impressive operational framework to deal with the multiple challenges the virus presented in our context.

A testament to the extraordinary work that had been accomplished was the fact that the first positive case amongst refugees in the Bekaa was recorded in July 2020, and to date we have had a relatively modest number of 51 tragic deaths amongst refugees.

Despite our very best efforts, it's important to remind ourselves that refugees have been particularly impacted by the pandemic in various ways: rising economic destitution as informal work opportunities have dwindled; threats of eviction due to non-payment of rent; inability to purchase essential sanitary items to protect themselves from the virus; stigmatisation and discrimination. These factors have led to increased domestic tension and abuse due to prolonged periods of confinement; resort to harmful coping mechanisms such as reducing food intake, pulling children out of school and putting them to work; reduced access to healthcare and understandably, rising mental distress.

But as with every calamity, we have been given the opportunity to demonstrate the importance of working together, leveraging and optimising capacities and strengths, and sharing responsibilities in order to reap tangible outcomes. So what have we done?

In the Bekaa, 150 refugees with medical backgrounds were mobilised to work as Community Health Volunteers to support COVID-19 awareness campaigns and surveillance and response-related activities, and we established 1,500 Site Community Groups to enhance awareness-raising and preparedness in informal settlements. By the end of 2020, over 17,000 awareness sessions had been conducted in over 3,300 informal settlements, 255 collective shelters, and 525 private accommodations, reaching more than 500,000 refugees. We've distributed innumerable numbers of hygiene and Infection Prevention kits to further bolster our preventive efforts.

In support of the Government's National COVID-19 Response Plan, in coordination with UNDP and UNICEF, UNHCR Bekaa quickly established an isolation facility in July 2020 where both Lebanese and refugees can safely self-isolate. Today, two isolation facilities are operational, with a further one in progress. We made sure to distribute cleaning and hygiene materials to our government counterparts: municipalities, General Security Directorate, Internal Security Forces, prisons and detention centres.

To support the MoPH in increasing ICU capacity throughout the country, very early on, UNHCR had had the foresight to procure 100 ICU units. In November, the COVID-19 Unit expansion at Baalbek Government hospital was inaugurated, with an overall capacity of 50 simple beds and 24 ICU beds. We are in the process of donating a further 5 ICU Units to the Zahle Governmental Hospital. Along with the Municipality, we've supported MoPH-led PCR testing campaigns in Aarsaal, in North Bekaa where testing facilities are lacking and refugees sometimes face restrictions on their movements.

Obviously, we've had to innovate – and recognising the exponential rise in stress and uncertainty caused by the pandemic, we have stepped up mental health and psychosocial support to refugees by ensuring remote support through tele-counselling services; and we've also made sure to continue to dispense vital protection services for the most vulnerable.

Finally, we have supported MoPH by establishing an Operations Cell, which ensures that our Rapid Response Teams composed of dedicated UN and NGO partners visit refugees in informal settlements who test positive and provide multisectoral support (including food packages, water and sanitation support, hygiene kits, etc.); these dedicated Teams are on call 24/7, seven days a week.

So to conclude, we recognize of the toll the pandemic and essential precautionary lockdowns are taking on the refugees. Prolonged uncertainty, dwindling resources, lack of livelihood opportunities, concerns about healthcare, anxiety about children's education, deteriorating intercommunal relations, discrimination and so on, all make for a very bleak future. I am proud of what we've achieved collectively through dedication, commitment and tireless efforts. When we speak with refugees, I'm always amazed at their ability to adapt and to persevere and to hope – in short – their resilience. And that's what keeps us going.

Head of the Zahle sub-office
Gwendoline Mensah

A 3-FOLD RESPONSE PLAN

What role is UNHCR playing in the fight against COVID-19 in Lebanon?

1 Prevention

Community engagement and awareness-raising

A high degree of insight, solidarity and discipline is required to mitigate the spread of COVID-19 through strict personal hygiene, coughing etiquette, self-monitoring and social distancing measures. Community engagement is key in preventing and reducing further spread. Hand in hand with UNICEF, UNHCR actively engaged in awareness campaigns among refugees in Lebanon through all communication channels. In addition, UNHCR has mobilized and trained refugee volunteers and frontline staff on COVID-19, as well as refugees with medical background to support the communities. Hygiene materials and kits including soap, sanitizer, bleach, are also distributed to all refugees living in overcrowded settings across Lebanon.



2 Containing Transmission

Isolation procedures in overcrowded settings

UNHCR is working with the concerned authorities, WHO and other organizations on contingency planning and has created capacity and guidance for self-isolation and containment for any case that might be detected within the refugee community. UNHCR supported the establishment of dedicated isolation shelters within the areas where tented settlements exist, and established isolation facilities at the municipal level, by identifying vacant buildings and setting up all necessary equipment. Alongside humanitarian partners, UNHCR is also engaged in the supervision of these facilities and provides the required personal protective equipment (PPEs) for the frontline staff and caretakers. These facilities are open to all persons in need, regardless of nationality or status.

3 Treatment & Case Management

UNHCR supports the expansion of the health sector's existing capacity for testing and hospitalization levels to ensure refugees have access to services when needed and that all COVID-19 infected persons requiring hospitalization can be given treatment in a timely manner without creating competition for care.



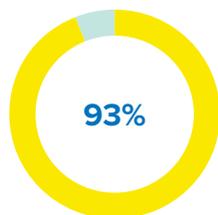
Step 1

PREVENTION

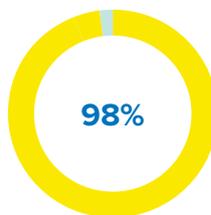
Community Engagement & Awareness-Raising

Our team works around the clock to capacitate and empower refugees in order to prevent infection and transmission within their families and the community.

Refugees Awareness



Know preventative measures to protect against COVID-19



Would call the Ministry of Public Health or approach a PHC if a family member had symptoms

**Based on the latest protection monitoring results*

Communicating with Communities

100% of refugees known to UNHCR were reached through all social media platforms with information on:

- COVID-19 symptoms and transmission
- Hygiene awareness and prevention methods
- Diagnostic and treatment procedures
- Government instructions on movements and curfew
- Self-isolation procedures



354,417 calls related to COVID-19 assistance responded to by the joint UNHCR - WFP Call Center since mid-April 2020

Awareness Sessions, Hygiene Kits Distributions and Community Engagement

Humanitarian agencies conducted hygiene promotion and awareness sessions and distributed hygiene kits in informal tented settlements, and similar sites reaching **531,928** individuals living in such overcrowded conditions. Dividing work, UNICEF focused on tented settlements and UNHCR on collective shelters.



531,928
persons



488
refugees with medical background doing community health surveillance



14,652
Covid-19 information sessions conducted (by outreach and community health volunteers)



106,385
families



650
UNHCR staff and frontline workers trained



7,433
refugees trained and mobilized



7,515
informal tented settlements



1,135
collective shelters



Rapid Response Teams established in **1,311** cadasters



More than **79,384** masks, **67,415** soap bars were produced by refugees at UNHCR supported community centres and distributed to refugee and host communities.

COVID-19 Cases Among Refugees



2,734
positive cases

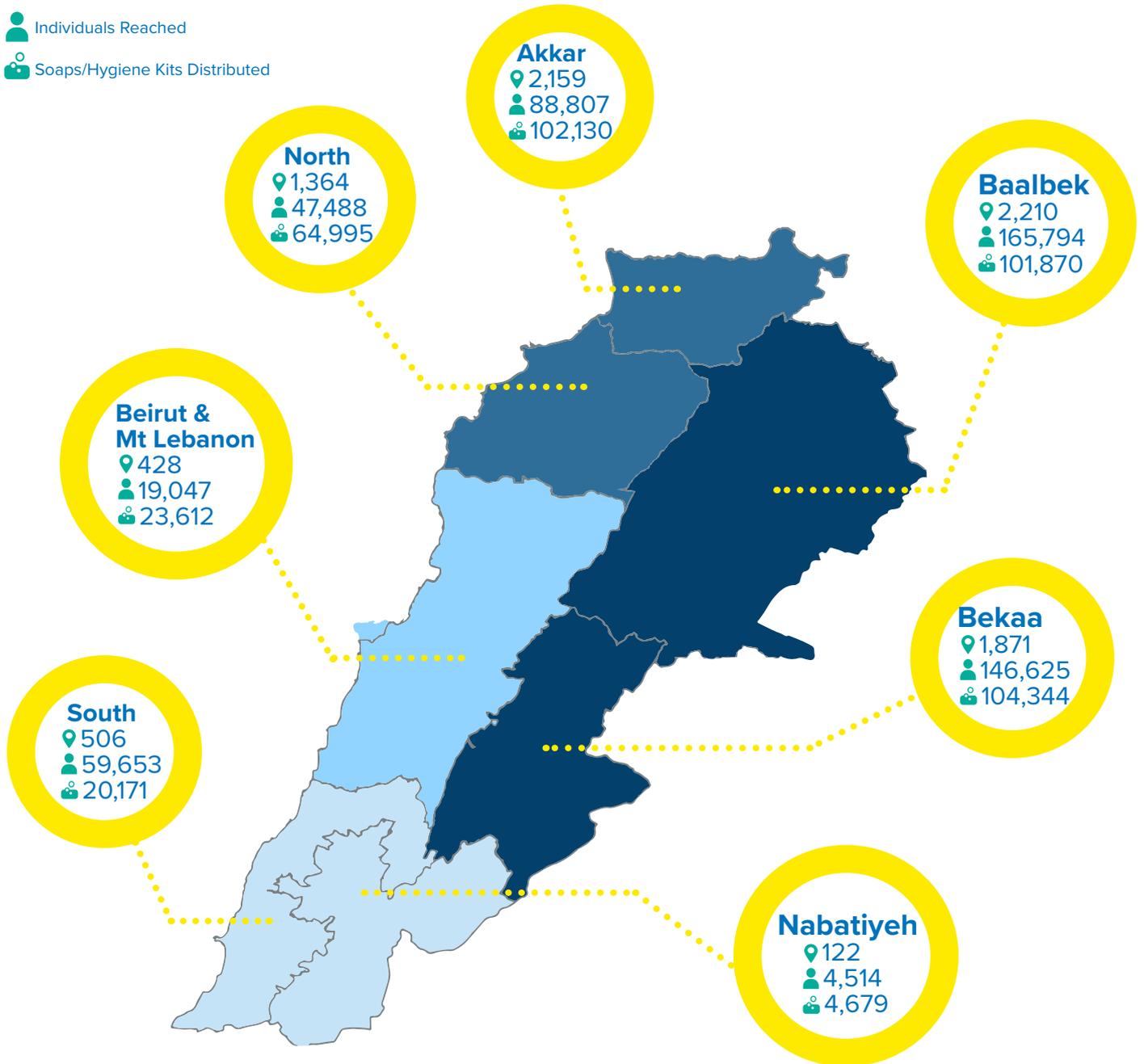
▲ 228 in informal tented settlements

♥ 2,049 recovered

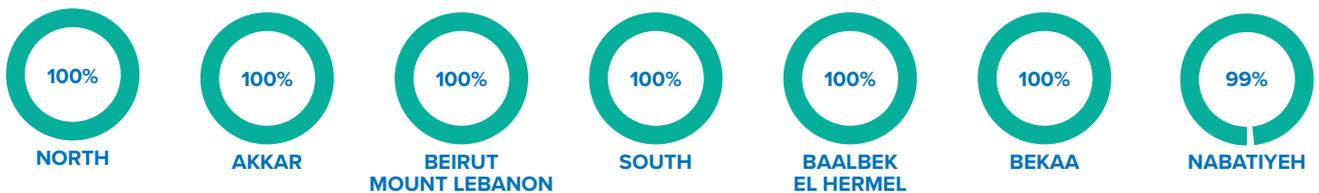
● 119 deceased

DISTRIBUTION MAP

-  Sites Reached
-  Individuals Reached
-  Soaps/Hygiene Kits Distributed



Percentage of coverage per governorate



Scan the QR code to learn more about the PCR Testing Campaign



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Step 2

CONTAINING TRANSMISSION

Isolation procedures in overcrowded settings

We are setting up and supporting isolation facilities as well as providing related guidance in over-crowded settings where people might not have the possibility to isolate at home.

Guidance on Isolation

Standard Operating Procedures on isolation and quarantining of refugees confirmed or suspected of having COVID-19 were produced in compliance with national guidelines.

User Guide for refugees on the isolation and quarantining procedures shared with all refugees known to UNHCR and humanitarian partners providing support.

Terms of reference for site management produced in compliance with national guidelines and through a consultative process outlining the administrative, management and service delivery accountabilities and responsibilities for Level 3 isolation facilities.



Supporting Communities' Capacities to Isolate

 Capacity of **10,000** contingency shelter kits ready to be deployed within hours to support L1, L2 and L4 isolation situations.

 **488** refugees with medical background mobilized and trained on isolation procedures.

 **1,781** site community groups of 3 to 5 refugee volunteers established across the country to play an active role on isolation procedures.

 Rapid Response Teams of humanitarian partners established and mobilized in **1,311** out of 1,612 cadasters, ready to support on isolation procedures.

 Personal Protective Equipment (PPEs) procured for all UNHCR staff, health workers and Rapid Response Team members.

 Distribution of food/hygiene parcels with humanitarian partners, targeting **10,000** vulnerable families.

 **22,500** vulnerable refugee families (22,000 Syrian families and 500 families of refugees of other nationalities), not benefiting from any support, received temporary cash assistance as part of the COVID-19 response in 2020 to help them cope with the emergency situation. This was on top of the 57,630 families assisted with the regular monthly multi-purpose cash assistance in 2020.

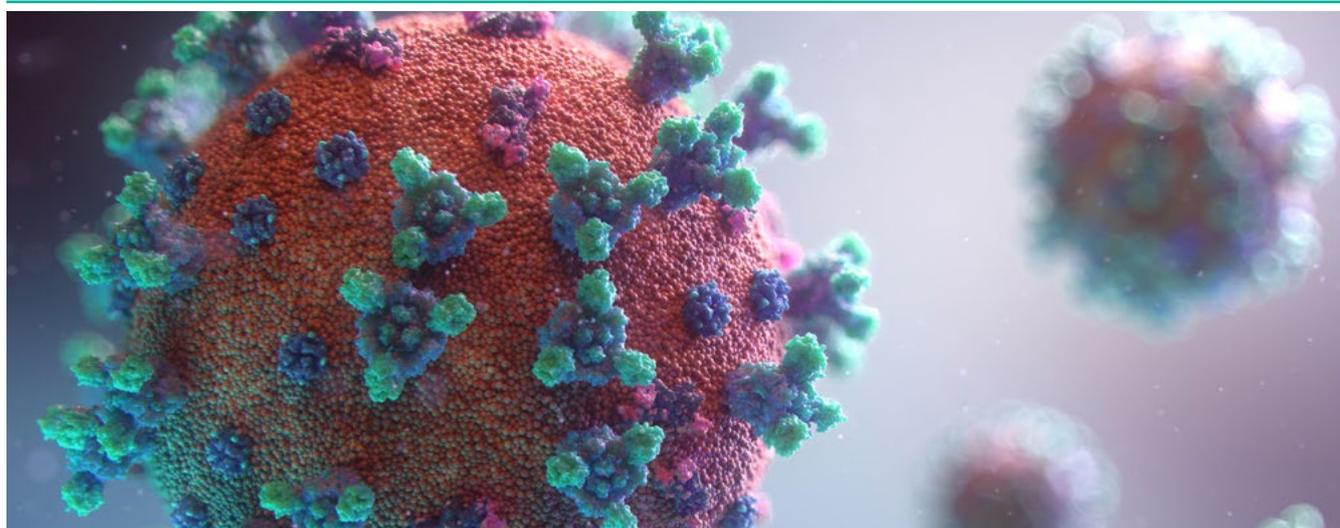
Support Sample Testing in Overcrowded Settings

 In collaboration with WHO, AMEL and IOCC, UNHCR facilitated sample COVID-19 testing for refugees living in overcrowded settings together with MoPH at a planned rate of 200 PCR tests per day and over a period of 5 weeks between May and June.

147 sites covered across the country

3,599 samples collected

3,599 results received, all negative



*Any prefabricated, rubhalls or additional structures established will be dismantled when no longer required for isolation within the national COVID-19 response.

MAP OF SUPPORT FOR ISOLATION CAPACITIES

22%

of Syrian refugees in Lebanon live in informal settlements and collective shelters

4

isolation centres being set up in refugee hosting areas

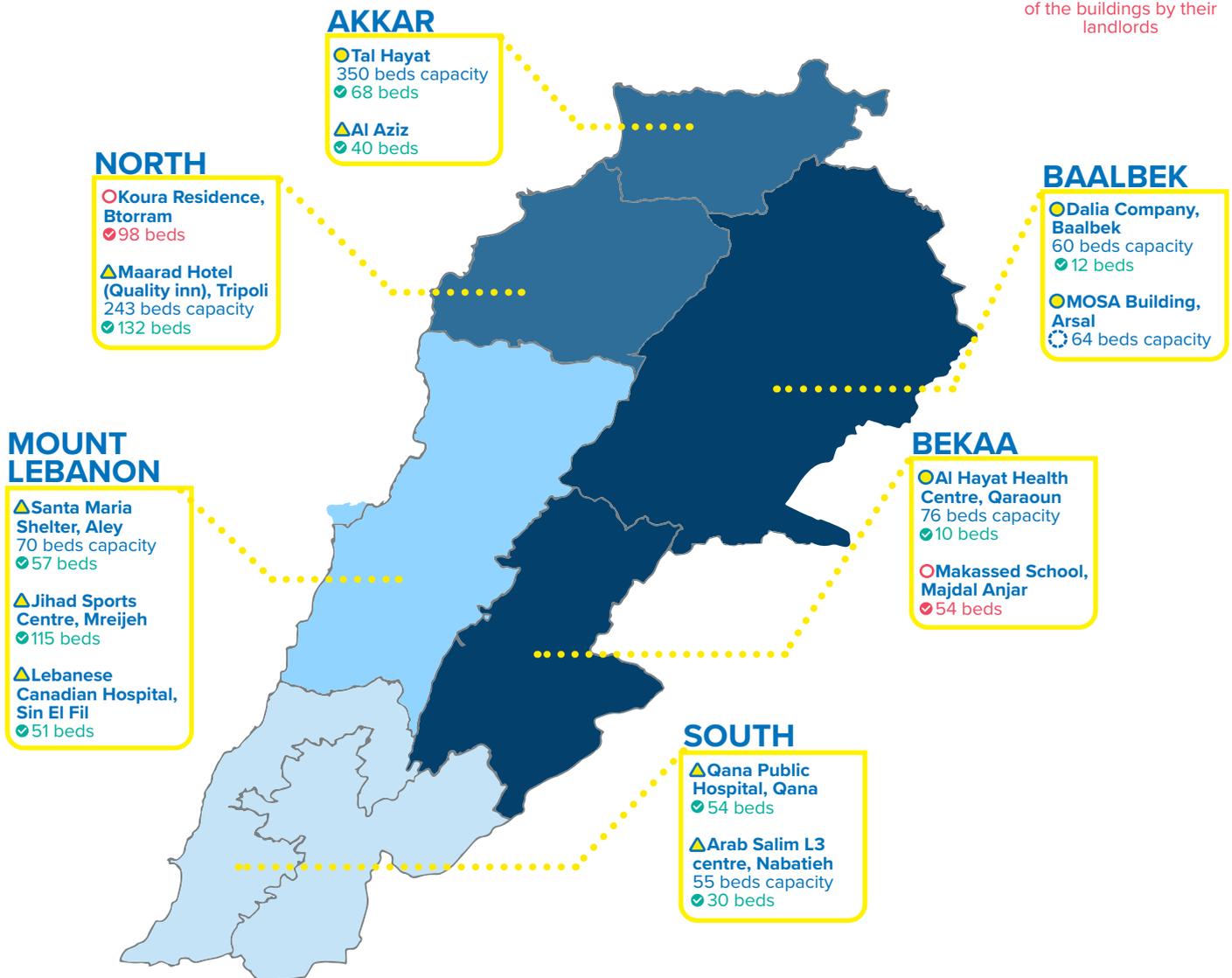
9

municipal isolation centres supported by UNHCR in North, South, Bekaa and Mount Lebanon

10

sites already in use with a capacity of **569 beds**

2 of the 6 initially completed centres have closed due to repurposing of the buildings by their landlords



The sites showed on the map are available to all persons in need regardless of nationality or status.

2,268 dedicated COVID-19 assessment conducted (L1 to L3 isolation)
577 sites suitable with L2 isolation capacity

- Isolation centre
- Municipal isolation centre
- Centre closed down
- Ready for use
- Work in progress



Scan the QR code to watch our video on Isolation Centres in Lebanon



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Step 3

TREATMENT AND CASE MANAGEMENT

The expansion and rehabilitation seeks to capacitate selected public and private hospitals across Lebanon to receive and treat COVID-19 patients and avoid competition for care. Care should be accessible to all patients, regardless of nationality.

Projection



An overall target of **800** additional hospital beds, **100** additional ICU beds and **8** additional dialysis beds for COVID-19 patients are being distributed over 3 phases.



Priority phase 1 targeted **5** hospitals in Tripoli, Halba, Baalbek, RHUH and Saida. Phase 2 further expands the capacity in **8** hospitals across the country. UNHCR is also adding a total of **8** dialysis units for COVID-19 patients in Tripoli, RHUH, Baalbek and Saida, where an as-sessment is still ongoing.



Given the fast deterioration of the COVID-19 situation since the start of 2021, UNHCR is currently moving fast to expedite the distribution of the remaining beds and equipment to those hospitals which can quickly take on additional capacity, based on the hospital's staffing and operation capacities and in coordination with other key stakeholders such as MOPH

Supplies



As part of medical supplies procured by UNHCR for the response, UNHCR has meanwhile received medicine stock for over 22,000 Covid-19 patients as well as the majority of the hospital equipment and supplies



Hospital Beds
197 dispatched
603 in warehouse



ICU Beds
67 dispatched
33 in warehouse



Stationary Ventilators
67 dispatched
33 in warehouse



Portable Ventilators
8 donated to the LRC
& 1 to Halba Gov. Hospital
11 in warehouse

Support to Hospitals Network

UNHCR is expanding hospital capacity to benefit COVID-19 patients from both refugee and Lebanese communities, through:



The design, construction and equipping of temporary COVID-19 units annexed to selected hospitals, or rehabilitation of existing unused structure within hospitals to be COVID-19 units.



Personal Protection Equipment (PPEs), renewable medical supplies and medicines to enable them to manage COVID-19 cases.

Coverage of Treatment & Testing

UNHCR covers **100%** of test and treatment for refugee patients.



479 refugee patients have been admitted for COVID-19 treatment under UNHCR's referral care programme.



549 COVID-19 tests were covered under UNHCR's referral care programme.

Expansion of the MoPH COVID-19 Hotline



As of 1 October 2020, UNHCR has handed over its support in human resources to the national MOPH COVID-19 call centre operation to WHO. UNHCR continued to provide the call centre with telephony support until end of 2020. The 10 additional trained nurses continue to serve as operators and as well as a referral system for refugees calling to be immediately transferred to UNHCR for action. By the end of 2020, the hotline had received **138,435** calls.

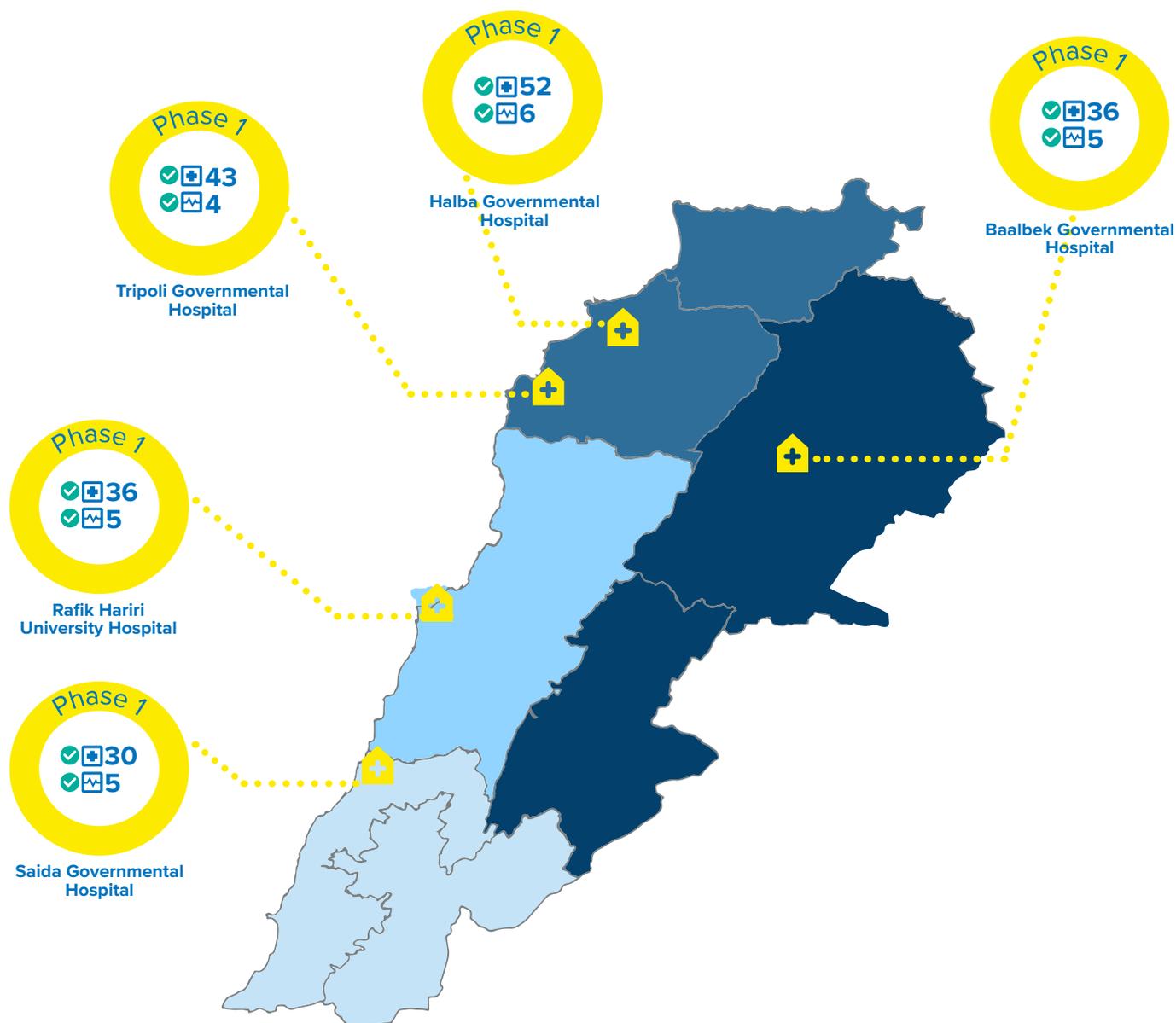
HOSPITAL EXPANSION

PHASE 1 - 100% COMPLETED

5
Hospitals

197
Additional hospital beds

25
Additional ICU beds



Beds ready for use

197 Additional hospital beds

25 Additional ICU beds

Total target over 3 phases

800 Additional hospital beds

100 Additional ICU beds

8 Dialysis beds

-  Hospital bed
-  ICU bed
-  Ready for use
-  In progress



Scan the QR code to watch our video on hospital expansion across Lebanon



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HOSPITAL EXPANSION

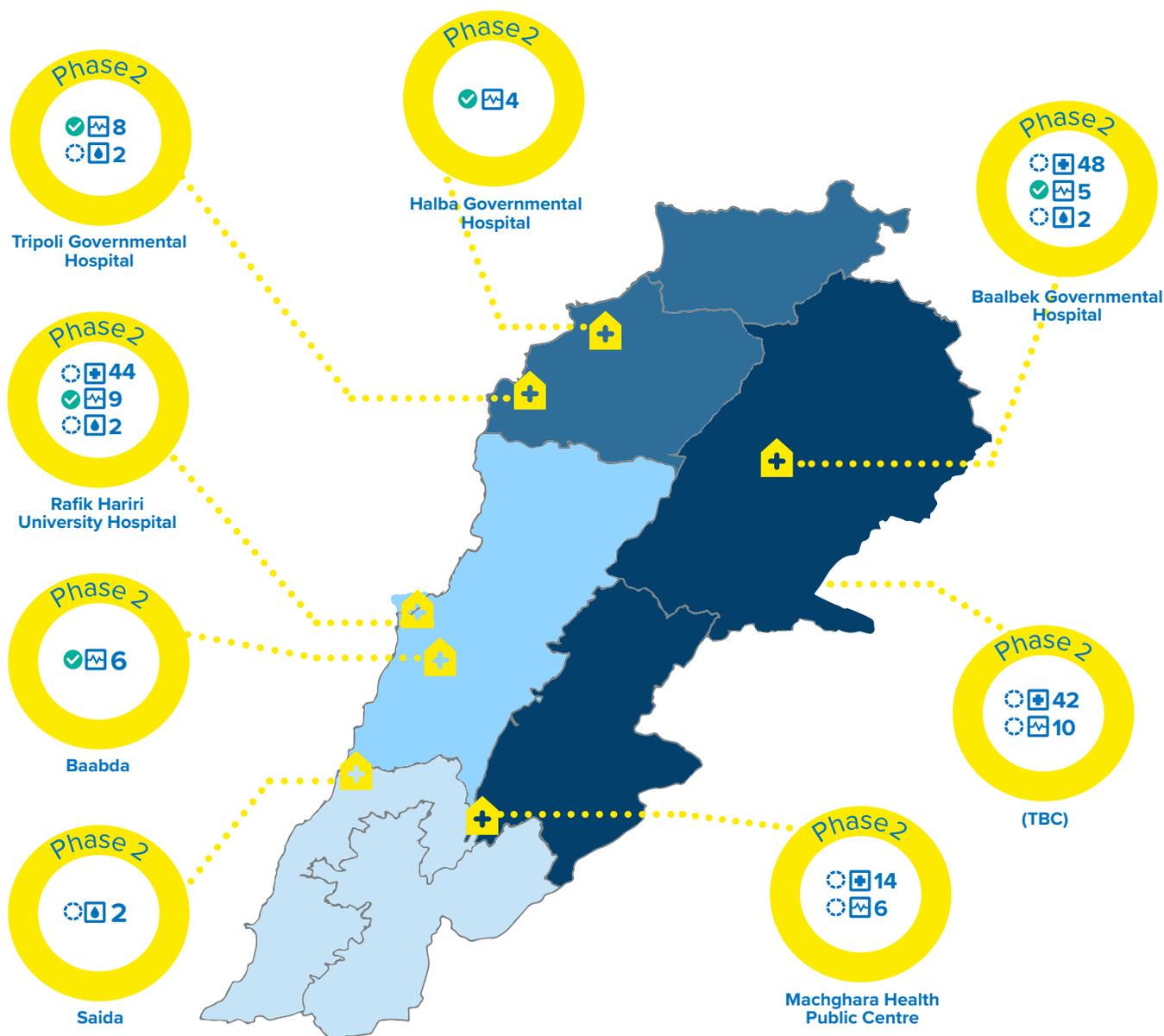
PHASE 2 - ONGOING

8
Hospitals

148
Additional hospital beds

48
Additional ICU beds

8
Dialysis beds



Beds ready for use

32 Additional ICU beds

Total target over 3 phases

800 Additional hospital beds

100 Additional ICU beds

8 Dialysis beds

- Hospital bed
- ICU bed
- Dialysis bed
- Ready for use
- In progress

STORIES FROM THE FIELD & BEYOND

A SECOND CHANCE AT LIFE: A REFUGEE'S SUCCESS STORY IN THE BATTLE AGAINST COVID-19

Lebanon declared its first COVID-19 patient in February 2020, and almost a year later, the country is under a full and strict lockdown to weather the storm of widespread community transmission with over 5000 cases reported daily. With the registration of the first confirmed case, UNHCR rushed to support through the national response plan with awareness campaigns, hospital expansions, and follow up on COVID-19 cases among refugees.

Fawzi, a 38-year-old refugee, living in the Akkar governorate of northern Lebanon, says that he was dreaming of reuniting with his wife and five children, while he was in the Intensive Care Unit in the Halba Governmental Hospital in Akkar, struggling for a breath. Despite taking all precautions possible and limiting his interactions with others because he also suffers from diabetes, he tested positive in November 2020.

To Fawzi, COVID-19 was the worst experience he has ever survived. After a couple of sleepless nights, suffering from shortness of breath, he was admitted to the hospital. He spent six days in the Intensive Care Unit, where he felt inexplicable pain, but with the support of doctors and nurses, who not only treated him but also provided him with moral support, he was able to fight the battle and was transferred to a regular inpatient bed for another five days for monitoring. Doctors say that his survival was a great testimony of the quality of care in the hospital but also of his willingness and grit.

Despite the overstretched hospital capacities and dwindling access to medical equipment in Lebanon, hospital admission was made possible through the European Union's generous contribution of 10 Intensive Care Units and more than 50 regular beds in an isolated COVID extension ward to the hospital. The support was provided all over Lebanon with UNHCR expanding 13 hospitals in Lebanon providing 800 regular inpatient beds, and 100 intensive care units.

These expansions have proven crucial for Fawzi and thousands others, allowing additional capacity to hospitals to provide life-saving treatment for COVID-19 and patients suffering from other health conditions. The virus does not discriminate, and everyone should be able to access medical care when needed.

He feels lucky to be have won the battle against COVID-19 and says that he now feels fortunate that he was able to seek hospitalization given the surge and the high occupancy rates. "Were it not for the support of UNHCR with the bill, I would not have been able to afford any of this" says Fawzi. He works in a small grocery shop that makes a little below what is enough to bring food to the table. He is now more motivated than ever to personally raise awareness on the horrors of the virus but also on the fact that healthcare should be accessible to all. The fight against the pandemic has been impacted by many hurdles including the crushing economic crisis, and inflated prices of basic goods making isolating and working from home, a luxury not everyone can afford.

Fawzi missed his family while in isolation, it is was particularly tough for him to explain to his three-year-old why he could not give him his daily hug. As Fawzi continued to isolate at home following his discharge from the hospital, his family stayed safe through continuously disinfected using the disinfection kit provided by UNHCR.

The increase in the capacity of hospitals in the Akkar governorate of northern Lebanon has been crucial to all residents. With the expansion and complimentary upgrades, residents of Akkar and its surrounding can seek life-saving treatment despite the stretched capacities of hospitals. The low bed capacity in Akkar has been a critical gap even before the pandemic, with patients having to spend long hours on the road to reach a close hospital in the North governorate or further down to the capital Beirut.

Fawzi feels like he was given a second chance at life, a blank script, which he intends to fill with memories and quality time with his wife, three daughters, and two sons, with a feeling of reassurance that if he or his loved ones' lives were in danger, he has the accessibility to treatment.

WATCH AND SHARE



An operational snapshot into UNHCR's COVID-19 support plan, which includes both Lebanese and refugees. Scan this code discover more.



What is UNHCR in Lebanon doing to prevent and respond to COVID-19? Scan this code to find out what our health expert Dr. Asaad Kadhum has to say.



UNHCR's COVID-19 hospital support extends beyond life-saving medical equipment. Scan to find out how we supported uninterrupted power supply in hospitals receiving COVID-19 patients.

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UNHCR Lebanon is grateful for the critical support of its donors, including to our COVID-19 response, in 2020:

Thank you



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