

IN HER WORDS

"Our response is about saving lives"

A feeling of anticipation likely hung over most of us as we watched the original, slow evolution of COVID-19 morph into a very steep increase. As the early numbers in the north were so low, it was an unrealistic hope that we would be spared. However, these early, low numbers gave us the time to prepare for the situation that now faces us, and which will be with us well into 2021 or beyond.

The cornerstone to our preparation in the north has been coordination, for which we built upon the already strong structure in place. Through transparency and inclusiveness in the early stages from March, we have formed a response mechanism that is efficient and supportive: we built on the experience of refugees with medical backgrounds and enabled them to disseminate precautionary



measures, we facilitated testing through working with municipalities to set up testing sites, and our Rapid Response Teams are ready around the clock to evaluate needs of refugees who test positive. The virus does not discriminate and neither do we; we have been participating in Governor-led task force meetings, to expanding government hospitals to increase ICUs and bed space and establish isolation facilities to host those of all nationalities who cannot home-isolate. We responded to the pandemic and scaled up our response to those affected, be it the socio-economic vulnerability, the increase in domestic violence, or wider protection incidents.

I waited anxiously for the inevitable, first refugee positive case. But it was those first cases which gave us, the agencies and the government, the most valuable lessons to adjust the process to meet the reality. We hit our stride and really do work as one big team in preparing isolation centers, responding and tracking positive cases and simply finding needed solutions as we go.

There is a palpable and genuine feeling in the north that we are all in this together; thus we do manage to find solutions. The evolution has been an interesting process as we went from really not knowing what to expect and doing some guessing, drawing on previous emergencies as reference, to now learning from our own experiences with the virus in Lebanon and across the world. At the beginning of the pandemic response, the lack of system or knowledge of the virus kept me up at night. Now, I am reassured that UNHCR in the north is contributing to the country-wide response and have installed 22 extra ICU units in two chronically underfunded government hospitals in the North and Akkar, supplied ventilators, expanded public hospitals with a total 95 beds with the needed equipment, aiming that no one in need of treatment is

left behind. Refugees and Lebanese, alike, are now better able protect themselves, and stop the spread. This all took vision at the beginning of the outbreak by senior managers in Beirut to start the lengthy procurement and approval process, but the embedded values of integrity and humanitarianism drove the achievement of this level of preparedness.

Despite the progress we have made in coping with the pandemic, it is impossible to overlook the increasingly difficult living conditions of all those living here, regardless of origin. All are impacted by the economic impact brought on by COVID-19, that is felt worldwide. But as well, the crisis that is particular to Lebanon has us all working even more to find ways to ease the very real burden of unemployment and hunger that will not be overcome soon.

Head of the Tripoli sub-office Anne Dolan

A 3-FOLD RESPONSE PLAN

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

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 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.





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 has capacity for supporting the

or supporting the establishment of dedicated isolation shelters within the areas where tented settlements exist, and has 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.

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.





UNHCR'S SUPPORT TO LEBANON'S COVID-19 RESPONSE - OCTOBER 2020

Step 1

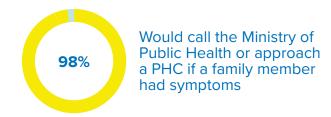
PREVENTION

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





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



264,569 calls related to COVID-19 assistance responded to by the joint UNHCR - WFP Call Center.

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 **480,509** individuals living in such overcrowded conditions. Dividing work, UNICEF focused on tented settlements and UNHCR on collective shelters.





















More than **7,184 masks** and **6,978 soap bars** produced by refugees and distributed to refugee and host communities.

COVID-19 Cases Among Refugees

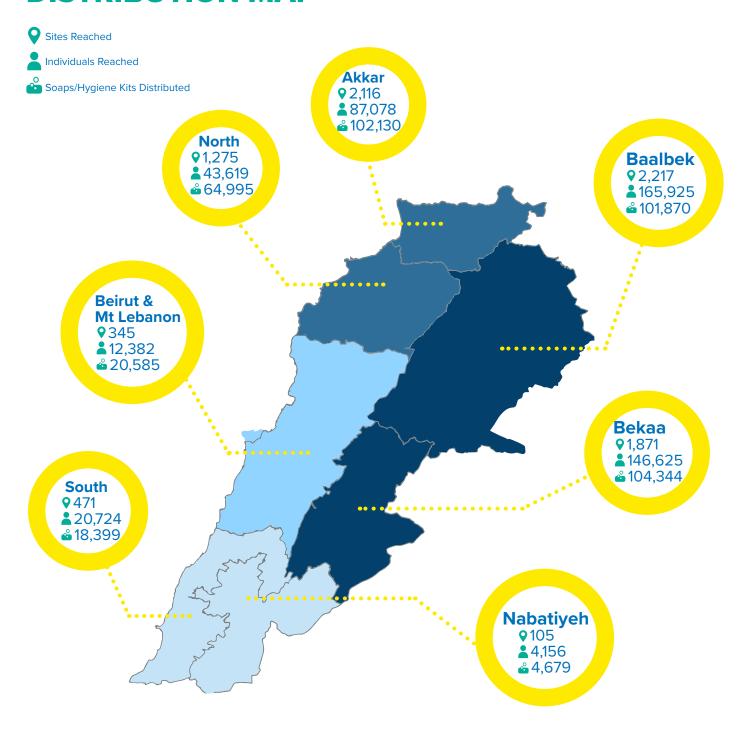


▲ 38 in infromal tented settlements

983 recovered

31 deceased

DISTRIBUTION MAP



Percentage of coverage per governorate





















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 finalised 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 finalized 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.



1,759 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



A second round of additional cash assistance for 3 months, targeting **12,000** extremely vulnerable refugee families not benifitting from any assistance, was launched in August to help them cope with the emergency situation and capacitate them to comply with the precautionary measures. This follows a first COVID-19 cash assistance programme to **11,000** refugee families who were supported for 3 months starting May.

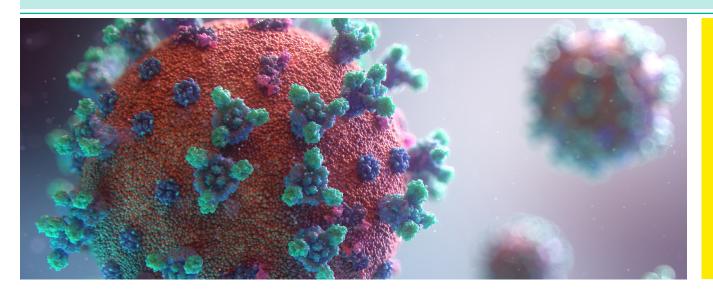
Support Sample Testing in Overcrowded Settings

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



MAP OF SUPPORT FOR ISOLATION CAPACITIES

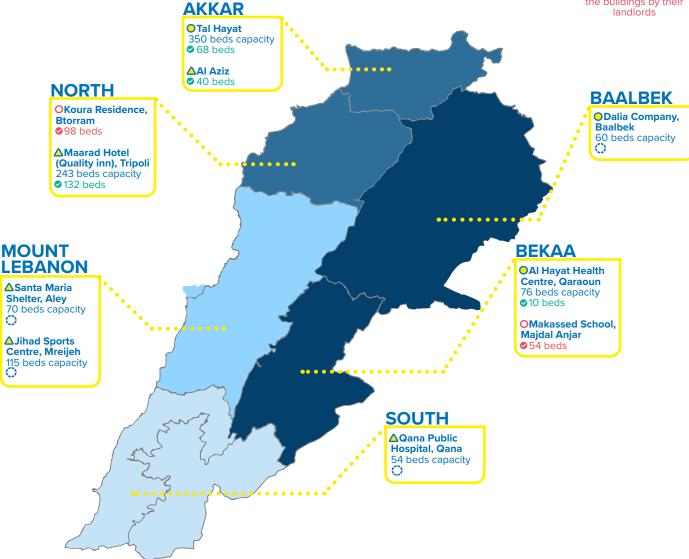
in informal settlements and collective shelters

isolation centres being set up in refugee hosting areas

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

a capacity of **250 beds**

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



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

2,197 sites assessed for L2 isolation capacities

476 suitable sites retained

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



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 6 additional dialysis beds distributed over 3 phases.



Priority phase 1 targeted **6** governmental hospitals in Tripoli, Halba, Baalbek, RHUH, Baabda and Saida. Phase 2 will further expand the capacity in 4 governmental hospitals (Tripoli, Halba, Baalbek and RHUH) as well as in the private hospital of Riyak.



Baabda Governmental Hospital, as well as the Riyak Private Hospital, have been approved for expansion.

UNHCR is also adding a total of 6 dialysis units for COVID-19 patients in Tripoli and RHUH and in either Baalbek or another hospital (TBC) in the Bekaa. Zahle governmental hospital was removed from the plans following investigation. A replacement is being considered

Progress

With public hospitals' near full capacities and while the works of phase 1 are still ongoing, all efforts are currently deployed on the activation of phase 2 of the hospitals expansions to create additional capacity to treat COVID-19 cases.



HOSPITAL EXPANSIONS FOR REGULAR BEDS

Phase 1:

- 261 planned
- 197 ready for use

Phase 2:

134 planned



HOSPITAL EXPANSION FOR ICU BEDS

Phase 1:

- 41 planned
- 20 ready for use

Phase 2:

- 31 planned
- 8 ready for use



HOSPITAL EXPANSION FOR DIALYSIS BEDS

Phase 2:

6 planned

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, including the 100 ICU beds, 800 hospital beds and 100 stationary and 20 portable ventilators. So far, 28 stationary and 8 portable ventilators have been distributed to ICU units in the hospitals.

A second procurement round of key medical equipment and supplies, including an additional 20 ICU ventilators, is being expedited.

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.



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



 $245\ \mbox{COVID-}19$ tests were covered under UNHCR's referral care programme.

Expansion of the MoPH COVID-19 Hotline



UNHCR is still providing telephony support through a cloud-based phone system and collaboration software.

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. Since the start of the pandemic, the hotline has received **91,474** calls.

of 1 October, UNHCR has handed over its support in human resources to the national MOPH COVID-19 call centre operation to WHO.

PLANNED HOSPITAL EXPANSION PHASE 1



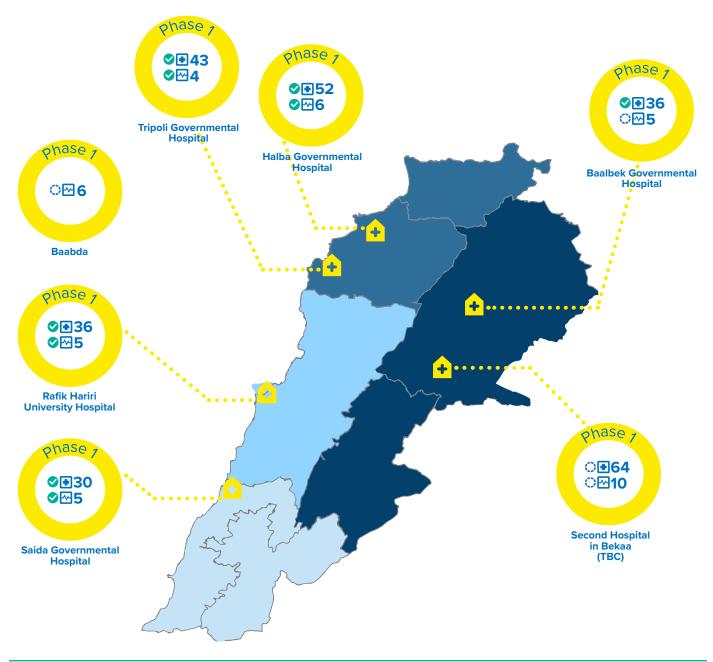
Governmental hospitals



261
Additional hospital beds planned



Additional ICU beds planned



Beds ready for use

197 Additional hospital beds

20 Additional ICU beds

Total target over 3 phases

800 Additional hospital beds

100 Additional ICU beds



Hospital bed



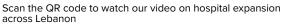
Ready for use



In progress









PLANNED HOSPITAL EXPANSION PHASE 2

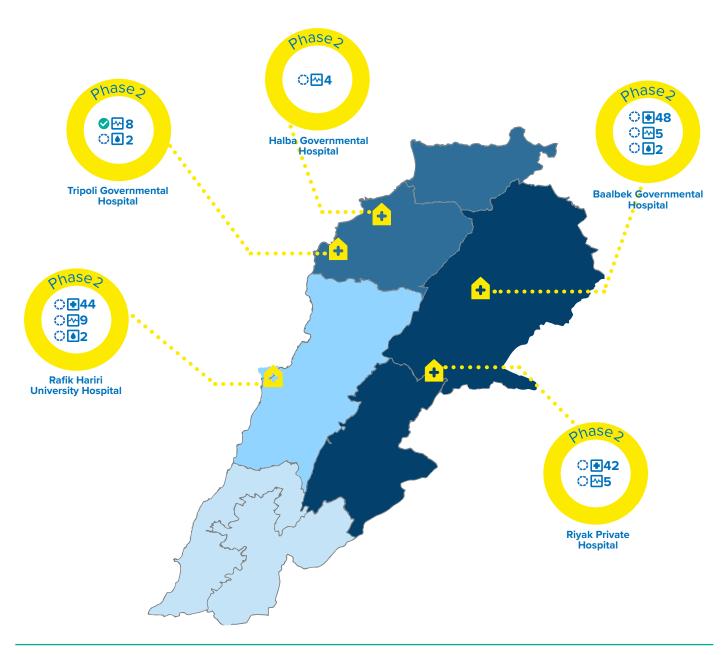
AS OF 26 OCTOBER 2020











Beds ready for use

8 Additional ICU beds

Total target over 3 phases

800 Additional hospital beds

100 Additional ICU beds

Hospital bed

ICU bed

Dialysis bed

Ready for use

In progress

STORIES

FROM THE FIELD & BEYOND

INNOVATION: SETTING UP SELF-HELP BOOTHS ACROSS LEBANON SO REFUGEES CAN ACCESS VITAL SERVICES



With the COVID-19 pandemic and the economic crisis in Lebanon, it is more difficult for refugees to travel to our centers as easily. Therefore, we worked with them to find a solution and give them an easier access to our services.

A self-service booth which will allow them to access a number of services from 120 different locations across Lebanon.

They can now remotely validate their cards, update basic data in their files and scan important documents.

Scan the QR code to watch our video on the self help booth

UN HIGH COMMISSIONER FOR REFUGEES FILIPPO GRANDI IN BEIRUT

During his visit to Lebanon in August, the UN High Commissioner for Refugees Filippo Grandi witnessed UNHCR's support to the national COVID-19 response in Lebanon. He visited Tripoli Governmental Hospital where UNHCR funded a 43-bed COVID-19 expansion. High Commissioner Grandi also visited an isolation center supported by UNHCR in Akkar, northern Lebanon, which was fully equipped to receive individuals from all nationalities who need to self-isolate and do not have the capacity to do so at home.

During his visit, Grandi decided to allocate an additional USD 3 million to reinforce UNHCR's COVID-19 response, in addition to the previously allocated USD 40 million.

Our COVID-19 support to hospitals will cover 800 additional beds and 100 additional ICU beds in total, including ventilators and other advanced equipment, as well as medicine stocks.

Scan the QR code to read more on the high commissioner's visit





UNHCR DONATING 5 PORTABLE VENTILATORS TO THE LEBANESE RED CROSS

As part of our COVID-19 response, UNHCR is donating 5 portable ventilators to the Lebanese Red Cross, our close partners not only in the fight against COVID-19 but also in the response to the devastating Beirut blast.

During his latest visit to Lebanon in August, UN High Commissioner for Refugees Filippo Grandi visited the Lebanese Red Cross' headquarters in Beirut and reaffirmed the two organizations' longstanding partnership.

SURVIVING COVID

Lamia was due to deliver her child when her PCR test results came in. They were positive.

"I was afraid there would be no beds available. I was scared I would lose my baby."

She then headed to the Tripoli Governmental Hospital where she was admitted without delay and gave birth to a beautiful little girl, Aya. Lamia spent two weeks at the hospital to receive the necessary COVID-19 treatment, and today, she and Aya are both in great health. Thanks to funding from the EU, UNHCR is providing additional bed capacity, including Intensive Care Unit (ICU) beds, to six government hospitals across the country. This makes it possible for COVID-19 patients of all nationalities to access the vital care they need.



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

















































UNHCR

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