Rooted in Trust

Community Bulletin #8

Lebanon

1 to 31 July 2022

33 Deaths

15,069 Cases until July

5,602,398 Doses Administered

Introduction to Rooted in Trust

Rooted in Trust (RiT) is a USAID Bureau of Humanitarian Affairs (BHA)-funded project run by Internews to support humanitarian and public health agencies combat and manage the spread of rumors and misinformation about COVID-19. *(1)* The project was recently re-launched in September 2021 with its second chapter (RiT2.0) expected to run until end of 2022.

In this bulletin, Internews profiles commonly occurring rumors across social media sites and offline through our partners' activities in Lebanon between 1 and 31 July 2022. Our partners "Endless Medical Advantage" are active in engaging both the Syrian & Lebanese communities in the Bekaa region, and "Maharat" engage with different communities of all nationalities living in all regions of Lebanon.

During this period, 56 rumors were collected from Facebook, WhatsApp, Twitter, and Instagram, in addition to private groups and accounts that have a relatively high user engagement. An additional 140 rumors were collected offline through aimed activities conducted by our partners, with the goal of reaching populations and groups that are less active online and who are exposed to rumors through word of mouth.

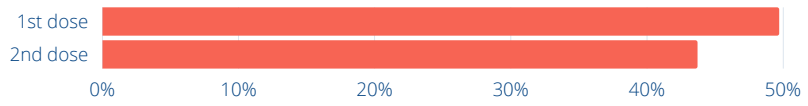
3 rumors were subsequently selected for this bulletin which fall under the recurring themes of "COVID-19", "COVID-19 Vaccination Doses", "Vaccination Programs" and "Symptoms."

COVID-19 situation overview in the country

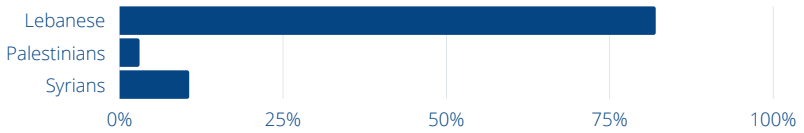
Lebanon has seen 15,069 active cases in quarantine over the period spanning the beginning until the end of July, *(2)* with 33 new deaths, *(3)* and with the virus spreading more prominently among young adults aged 20 to 29. *(4)* There are 182 ICU (Intensive Care Unit) beds available for the COVID-19 response across Lebanon with an **occupancy rate of 30%** and Lebanon is now situated in **Level 4 of community transmission**, *(5)* which is now characterized by having a high number of severe COVID-19 cases and a high risk of strain on the already deteriorating local healthcare system, *(6)* which has been suffering from decreased capacity than before to handle COVID-19 waves *(7)*, as there is not the same number of beds as before as well as a shortage of staff.

The new population estimates for Lebanon in 2021 is 5,631,0008. These new figures have not yet been considered yet in calculating percentage of people vaccinated against COVID-19 locally, so percentages might be much less than what we know. Data we currently have is:

Percentage of population who are vaccinated including only 12+years old



The breakdown of administered vaccinations over nationalities



MoPH (Ministry of Public Health) recommendations

1st Dose	Everyone over the age of five years
2nd Dose	Available to all those who have received the vaccine 3 weeks or more prior
3rd Dose	Available to all those who have received the second dose five months ago or more
4th Dose	Available to all, six months after receiving the third dose

Vaccine roll-out:

People of all nationalities living in Lebanon can get vaccinated, including Syrians, Palestinians, and migrant workers, even if their residency documents are not up to date, and no prior registration is needed to receive the vaccine: *(9)*
List of vaccination centers: https://cdn.me-qr.com/pdf/7695678.pdf

Important Numbers and Helplines

- MOPH Hotlines: Corona **1787** | Vaccine **1214** (both free)
- COVID-19 call center **01-594459**
- Airport Quarantine Section **01-629352**
- Preventive Medicine Center **01-843769** | **01-830300**
- Epidemiological Surveillance Unit **01-614194** | **01-614196**
- WHO Lebanon **01-612970/1/2**
- Hospital Admission Hotline **01 - 832700**
- LRC Emergency Hotline **140**
- LRC Medical Consultations and Oxygen Machine Request for COVID-19 Patients Hotline **1760**
- Endless Medical Advantage – Bekaa number for information and referral services **76-864 721**

Practical Resources

- WHO dashboard (https://covid19.who.int)
- WHO COVID-19 page (Https://covid19.who.int)
- Protect yourself (English/Arabic) (Https://covid19.who.int)
- Q&A (English/Arabic) (Https://covid19.who.int)
- WHO Lebanon website (https://www.who.int/ar)
- MoPH Lebanon COVID-19 information page (moph.gov.lb)
- WHO Refugee and Migrant Health Fact sheet (Https://covid19.who.int)
- WHO Refugee and Migrant Health Q&A (Https://covid19.who.int)
- MoPH Lebanon COVID-19 vaccination page (www.moph.gov.lb/en)
- WHO Lebanon website (www.who.int/ar)

Rumor #1

Vaccine, Hoax

"It is currently not required for those who have been infected with COVID-19 after taking two or three vaccine shots to take an extra booster. People must complete taking 3 doses of vaccination and consider contracting COVID-19 as effective as taking the 4th dose. The elderly and people with serious chronic problems should take the fourth dose, while 3 doses are enough for other people. In most cases, the situation is under control, and there is no need to be afraid of this matter."

-- Shared on Twitter, by an account with 4,900 followers. Got a relatively high engagement of 140 reactions and 8 comments.

Fact Checking

- Immunity against COVID-19 can be acquired in two different ways, either through natural infection or vaccination. Both will allow the body's immune system to produce antibodies that are necessary to fight the disease, but they are not entirely the same. *(10)*

- **The two main differences are that:**
  - While natural immunity leads to some short-term protection against infection, recent data now clearly shows protection from natural immunity is not as long-lasting as from vaccination. *(11)*
  - Additionally, antibodies acquired from vaccines may be more likely to target new virus variants than antibodies acquired naturally, which will only increase immunization towards the specific variant that caused the case. *(12)*

  Why is that? The immune response from natural infection alone will not be the same across all individuals. However, with a vaccine, most people are administered the same dose, reducing the variability of the elicited immune response, to some extent. *(13)* Factors such as how much virus someone was exposed to and infected with, whether their course of COVID-19 was mild, moderate, or severe, as well as factors such as age and pre-existing medical conditions—which affect the function of the immune system—all play a role.

- **People who get vaccinated against COVID-19 develop strong protection against severe illness, hospitalization, and death** from the disease, but **they can still get infected and have what is called a "breakthrough case", which are usually mild 90% of the time.** *(14)*

- **Breakthrough infections are not recommended as a means to "boost" immunity,** as there are no studies that support evidence that a breakthrough case increases protection against severe illness or hospitalization, unlike boosters, where evidence that they do provide significant protection against disease infection and severity is ample. *(15)*

Recommendations

For the Community

- **Even if you are fully vaccinated**, you still must practice safety precautions such as mask-wearing and social distancing because **you are not 100% protected** against COVID-19, especially during times when there is a new wave and the number of cases is increasing, like right now in Lebanon.

- **Breakthrough infections are not recommended as a method to "boost" your immunity further**, and there is no scientific evidence that they do so, especially if you are immunocompromised and/or have underlying conditions that make you more vulnerable to severe illness from COVID-19.

- **Immunity after a breakthrough case is imperfect:** People who have been infected should wait until after they have gotten better—and they may want to wait up to 90 days (about 3 months) after infection—but it is suggested that they get a booster if they are recommended for it. According to David Dowdy, MD, PhD, an epidemiologist at the Johns Hopkins Bloomberg School of Public Health.

- **To book an appointment, you can view the list of vaccination centers near you, their schedules, and their contact information on the following link: https://cdn.me-qr.com/pdf/7695678.pdf**

- **If suspected, get tested:** Everyone who suspects any COVID-19 infection should get tested. If someone has been exposed to a person with COVID-19 or suspect they might have the disease, it is important to get tested. It is especially important to get tested for people who are at high risk, like those who have had transplants, are on active chemotherapy, have liver issues, kidney disease, on dialysis, are older, or immunosuppressed.

- **Seek care from your physician:** For people with a breakthrough infection, their symptoms will likely be mild. But, if they are not, it is important to contact your doctor. You can also find a list of centers that provide subsidized healthcare all over Lebanon here: *https://www.moph.gov.lb/userfiles/files/HealthCareSystem/PHC/phcc.pdf*

Rumor #2

Vaccination Programs

"#Monkeypox active cases are now in Lebanon, but good news for those over fifty. As the Professor of Bacterial Diseases, Jacques Mokhbat, announced: those over the age of 50 who have previously taken the smallpox vaccine are protected from the risk of catching the monkeypox virus. He called for not linking between Smallpox and Chickenpox which affects children, explaining that the chickenpox vaccine does not protect against monkeypox."

-- Shared on Twitter, by an account that belongs to an individual with 14,100 followers. Got a relatively low engagement of 13 reactions, 1 comment, and 3 shares.

Fact Checking

- Smallpox and Monkeypox are two very closely related viruses which belong to the same family. *(16)*
- Clinical studies have shown that smallpox vaccines are up to 85% efficient at protection from Monkeypox. *(17)*
- The above rumor is **a misquote** of Dr. Jacques Mokhbat's statement "People over 50 who received the smallpox vaccine before the 70s will be somewhat protected against monkeypox, keeping in mind that they are now older, and immunity tends to wane over time." *(18)* Dr Jacques Mokhbat is the LAU Chair of the Department of Internal Medicine and Clinical Professor in the Division of Infectious Diseases.
- **But:** While it is true that the smallpox vaccine protects against monkeypox, the effectiveness of the smallpox vaccine becomes weaker over time, and effective protection only lasts 3 to 5 years. *(19)*
- This means that **those in their 50s** in Lebanon who have taken the smallpox vaccine as children **are not protected against monkeypox, nor smallpox.**
- The smallpox vaccine is **currently not available** for commercial selling or use in Lebanon. *(20)*
- The rest of the rumor, which states that there should not be a link between smallpox and chickenpox is true. *(21)* **The chickenpox vaccine, as well as prior infection, do not provide any protection against Monkeypox.**
- **How does a person get sick with Monkeypox?** Monkeypox infection can occur if the person is in close proximity to an infected person (e.g., sharing the same towels, clothes, or bedding; engaging in sexual intercourse; exposure to coughs and sneezes), by touching the skin or fur of infected animals, or by eating improperly cooked meat from an infected animal. *(22)*
- **Lebanon has only seen 4 confirmed cases of Monkeypox,** with 1 residing in Beirut and 3 in Mount Lebanon, *(23)* with the most recent case reported on 21st of July 2022. *(24)*
- So far, all of them were males of Lebanese nationality with travel history, and their ages varied from 31 to 59, *(25)* but that could change, as cases are being observed in all genders and ages in other countries where Monkeypox is endemic. *(26)*
- **The MoPH had the cases isolate at home, with follow-up for contacts.** *(27)*
- Dr. Naji Aoun, a specialist in bacterial and infectious diseases noted that **"it is necessary to re-vaccinate, contrary to what is rumored that the smallpox vaccine must be received once throughout a person's life."** *(28)*

Recommendations

For the Community

- Although Monkeypox is not an aerosol and has less transmission rate than COVID-19, **it can still spread by respiratory droplets,** which require closer contact. Therefore **masking, good airflow, sanitation, and physical distancing** — measures that will also protect people against COVID-19 — **will protect you from monkeypox infection and prevent monkeypox transmission in your community.** *(29)*
- **Monkeypox can also spread via personal or shared items** such as clothes, utensils, and furniture, or surfaces and materials, in particular bedsheets. To protect yourself and prevent Monkeypox infection and spread if you come into contact with surfaces or materials that have been used by a person with suspected or diagnosed Monkeypox it is recommended to disinfect contaminated surfaces with 0.5% sodium hypochlorite or other EPA-approved high-level disinfectants. *(30)*
- **Unprotected contact with wild animals,** especially those that are sick or dead, including their meat, blood and other parts **must be avoided.** *(31)* **Additionally, all foods containing meat or animal parts must be thoroughly cooked before eating.**
- **If you suspect that you or anyone you know might have monkeypox,** contact the MoPH Epidemiological Surveillance Unit's number to report it and **get further assistance and directions:**
  01-614194 | 01-614196
- **Know your facts and follow trusted sources such as WHO:** *Monkeypox (who.int)*, also **available in Arabic:** *https://www.who.int/ar/news-room/fact-*sheets/detail/monkeypox
- **You can also follow MoPH relevant pages:** *Facebook* – *Twitter* – *Website* to stay up to date on the most relevant and accurate real-time news.

Rumor #3

COVID-19, Symptoms

"A study at the University of Colorado - USA has proven that the Corona virus can cause infections that may play a role in the development of psychotic symptoms: People with Covid psychosis feel stalked and can exaggerate self-esteem like those with paranoia!"

-- Shared on Instagram, by an account that belongs to a local news media outlet, with 13,860 followers. Got a relatively high engagement of 134 reactions, and 4 comments.

Fact Checking

- Although the coronavirus was initially thought primarily to cause respiratory distress, there is now ample evidence of many other symptoms, including **neurological, cognitive, and psychological effects,** but such cases remain **very rare.** *(32)*
- **Just how common is post-COVID psychosis?** The evidence to date suggests it is rare, occurring in about **0.25%** of COVID cases who are not hospitalized (and likely have a mild infection), and **0.89%** of people who are hospitalized for COVID. *(33)*
- Such symptoms can be just as debilitating to a person's ability to function and work, and it's often unclear how long they will last or how to treat them. *(34)*
- Most affected patients have been in their 30s, 40s and 50s. *(35)* While the symptoms of post-COVID psychosis can be varied, there are some commonalities: people usually have problems sleeping, followed by paranoid delusions and hallucinations.
- Fortunately, **those affected were able to recognize that there is something wrong with the way they are thinking and seek help,** *(36)* which is usually uncommon in people who experience psychotic episodes.
- Some research has indicated that the body's reaction to COVID-19 could lead to inflammation around the brain which in turn can affect a person's mental health. *(37)* Researchers believe that the inflammation of the brain could also be responsible for other COVID-19 symptoms such as loss of taste or smell. *(38)*
- Other studies suggest psychiatric effects may be linked to the body's immune system response to the virus, in which the immune system might remain engaged after the patient recovers physically. *(39)* This persistent immune activation is a leading explanation for brain fog and memory problems associated with COVID-19. *(40)*
- There are still many unanswered questions about whether genetic makeup or an undetected predisposition for psychiatric illness increases risk, and how long the case of psychosis lasts. *(41)*
- The scientific evidence of post-COVID psychosis comes mostly from "case reports," which are research papers describing symptoms and recovery of individual patients. *(42)* However, **more research is needed to understand this link.** *(43)*

Recommendations

For the Community

- **Although the risk of post-COVID psychosis is low,** people who have had COVID and their families should look out for **any sudden changes in personality, paranoia or delusions** in the days, weeks and months following infection.
- If these signs are noticed, **seeking medical help is vital.** Most cases of post-COVID psychosis resolve quickly with proper psychiatric care and treatment with medication.
- **Stigmatizing certain groups of people because they are suffering from a mental disease is never acceptable** because it risks further marginalizing vulnerable groups that are already exposed to societal discrimination, and it only adds to their distress, which can delay recovery.
- **Stigma can also become a barrier to addressing and solving the health issue at hand** as it may prevent people from seeking care out of fear of being falsely stigmatized or judged.
- Starting August 2022 until May 2023, SAMS organization **is covering hospital fees, including hospitalization for psychiatric services** to Lebanese, Syrian, Palestinian, or Migrant workers of all nationalities. They also cover all areas in Lebanon. You can contact them on the following numbers:
  - **Beqaa area:** 71-382 754
  - **Mount Lebanon, North and Akkar area:** 81-329 528
  - **South and Beirut areas:** 76-382 071
  - **Working hours:** Monday to Friday from 10:00 am to 4:00 pm
  - **For complaints and/or feedback:** 71-929 806

Sources

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