Setting the scene
In August 2020, Lebanon’s capital city of Beirut was rocked by an explosion at the Port of Beirut. Nearly 200 people died, some 6,500 were injured, and billions of dollars of damage were caused. UK-Med, a frontline medical aid organization, immediately deployed to Lebanon, providing urgent medical support to a fledging healthcare system that was responding to the acute needs resulting from the explosion, while also struggling to maintain essential health services in the midst of Lebanon’s first wave of the COVID-19 pandemic. Medical facilities urgently needed support to manage the rising COVID-19 cases amidst all the other urgent medical needs, and UK-Med focused on strengthening clinical case management, infection prevention and control, and water, sanitation, and hygiene activities in six hospitals.

The integration journey
Though UK-Med’s work in Lebanon was medical-focused and short-term, the team understood that the communities’ needs went beyond health. They prioritized making connections with community-based organizations and volunteer networks that were already offering multi-sectoral services to refugees, immigrants, and hard-to-reach communities, and integrating risk communication and community engagement into their work.

What can you learn from this story?
- Building relationships with local actors is critical for ensuring an effective response. Existing national and subnational coordination mechanisms can offer a platform to create and start such relationships.
- Adapting existing tools and evidence-based strategies can save time and effort during the beginning stages of outbreak response. For example, RCCE resources such as the READY Initiative’s RCCE Readiness Kit or the World Health Organization’s RCCE for COVID-19 vaccination: Implementation tool can be quickly adapted and utilized to support response efforts.
- Integrating response activities by collaborating with partners delivering multi-sectoral services can lead to a greater impact that extends beyond any particular sector.

UK-Med used the READY initiative’s Communicating with Communities in Epidemics and Pandemics: Risk Communication and Community Engagement Readiness Kit (RCEE Readiness Kit), a tool designed with special considerations for humanitarian actors, to connect health workers, health facilities, and communities. The team adapted information from risk communication and community engagement workshops with updated content from the RCEE Readiness Kit. They trained local teams that provided services for food security, health, education, and water, sanitation, and hygiene, and developed context-specific COVID-19 strategies and key messages, collaborating with local influencers and leaders in Mount Lebanon and South Lebanon.

The team worked with 23 local actors from diverse religious groups including scouts, volunteers, and youth groups. Through them, the response team reached 75,000 individuals with tailored COVID-19 messaging and personal protective equipment.

By designing and implementing integrated interventions to engage health and non-health partners, connecting and liaising with local stakeholders, and prioritizing multi-sectoral collaboration, UK-Med reinforced local partners’ trust, increased the community’s acceptance of the team’s COVID-19 prevention and mitigation activities, and strengthened communities’ overall understanding about COVID-19—all crucial elements to ensure effective multi-sectoral collaboration in outbreak response.

Suggested additional reading and videos

- [UK-Med Lebanon Response Overview](#), n.d.
- Communicating with Communities in Epidemics and Pandemics: Risk Communication and Community Engagement Toolkit, READY Initiative, March 2022.

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