



ESCALATING NEEDS IN LEBANON

A 2023 OVERVIEW

PHOTO ON COVER

©MEDAIR/Abdul Dennaoui- Rwaida, 69 years old, is a Lebanese woman living in Haouch Er Rafqa, Baalbek district and receiving cash for rent assistance from MEDAIR NGO. - December-2022.

The designations employed and the presentation of material in the report do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

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Joint Needs and Situation

This document is produced in collaboration with and on behalf of the Lebanon Humanitarian Country Team (HCT) and humanitarian partners working in Lebanon. It provides a shared understanding of the impact of the multi-layered crisis in Lebanon on the population, the systems and services and the operational space of the aid community in the country. It outlines an analysis of the most pressing humanitarian and stabilization¹ needs in the country, and the estimated number of people who need humanitarian assistance.

The document aims to provide as consolidated as possible an analysis of the situation to inform coordinated, efficient and accountable humanitarian and stabilization response planning for 2023.

The analysis covers the period from April 2022 to January 2023. Severity analysis and people in need estimations specifically are based on primary data collected through the Multi-Sectoral Needs Assessment, Vulnerability Assessment of Syrian Refugees in Lebanon – both conducted in the second half of 2022, and a number of other data sources (see Part IV: Technical Annexes). Figures and findings reflected in this document are based on independent analysis of the United Nations and humanitarian partners, built on information available to them. Many of the figures provided in this document are best possible estimates, based on sometimes incomplete and partial data sets², using the methodologies for data collection and triangulation of information which were available at the time.

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The UN characterizes the flight of civilians from Syria as a refugee movement and considers that these Syrians are seeking international protection and are likely to meet the refugee definition. The Government of Lebanon considers that it is being subject to a situation of mass influx. It refers to individuals who fled from Syria into its territory after March 2011 as temporarily displaced individuals and reserves its sovereign right to determine their status according to Lebanese laws and regulations.

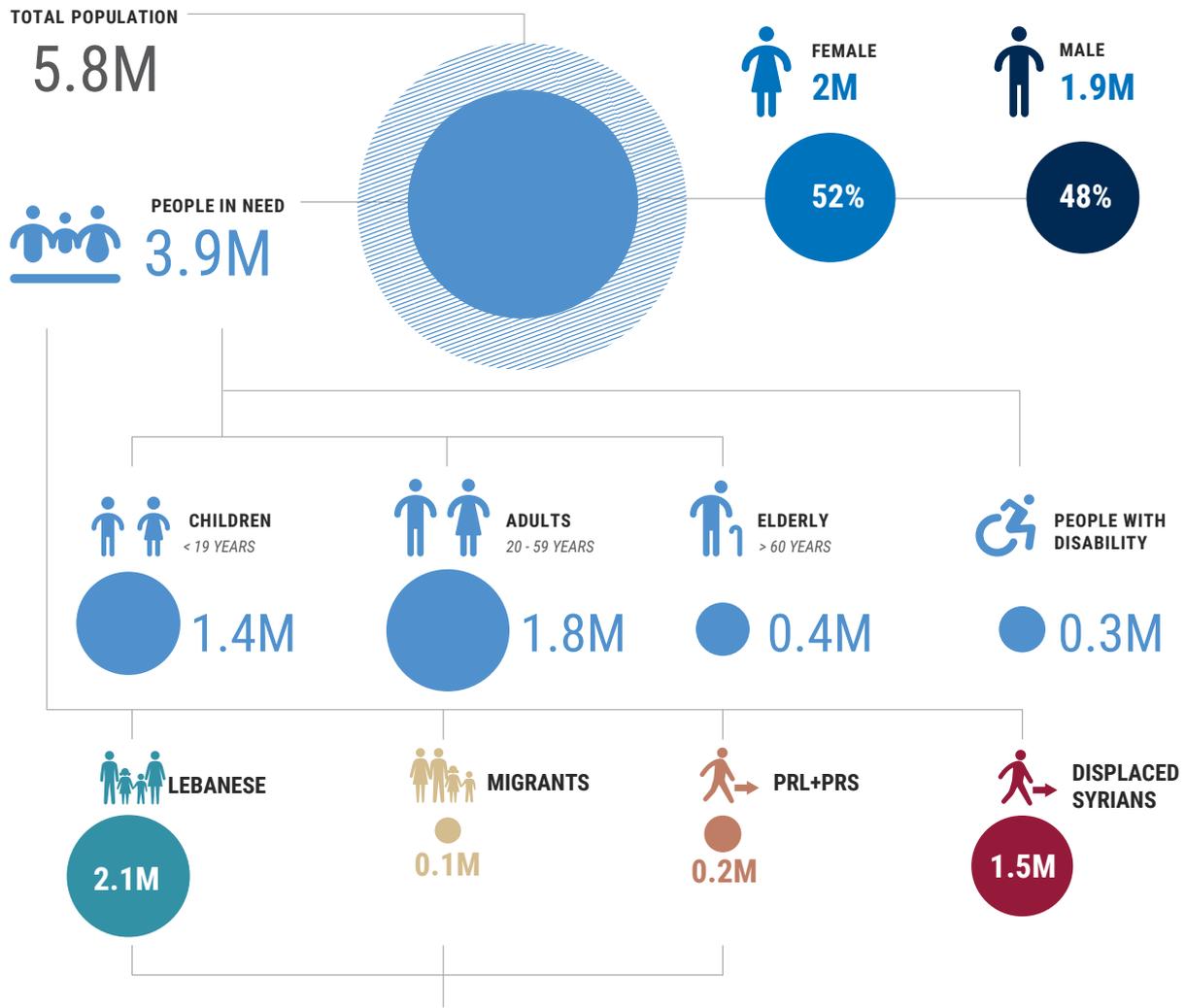
This document – in line with the Lebanon Crisis Response Plan - uses the following terminologies to refer to persons who have fled from and cannot currently return to Syria:

- *“persons displaced from Syria” (which can, depending on context, include Palestinian refugees from Syria as well as registered and unregistered Syrian nationals);*
- *“displaced Syrians” (referring to Syrian nationals, including those born in Lebanon to displaced Syrian parents);*
- *“persons registered as refugees by UNHCR” and;*
- *“Palestinian refugees in Lebanon” (referring to 180,000 PRL living in 12 camps and 156 gatherings) and;*
- *“Palestinian refugees from Syria” (referring to 31,400 PRS across Lebanon).*

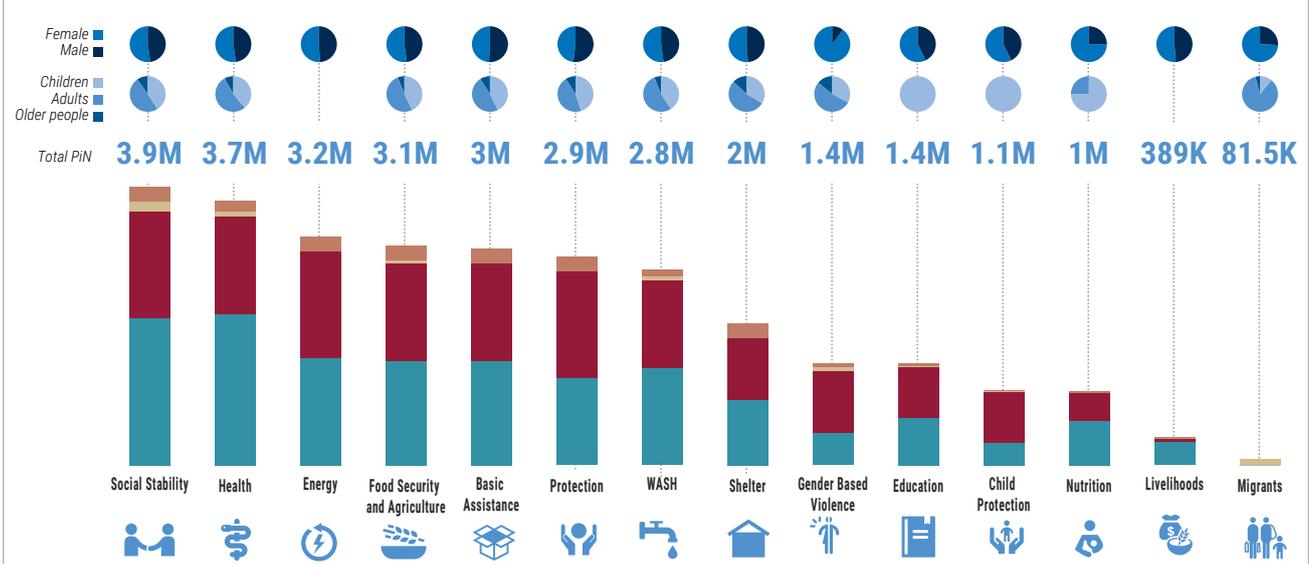
¹ In the context of this report, “stabilization” refers to strengthening the ability of individuals, households, communities, and societies to withstand shocks and stresses, recover from such stresses, and work with national and local government institutions to achieve transformational change for sustainability of human development in the face of future shocks.

² MSNA data was not collected in El Nabatieh district only.

AT A GLANCE



PEOPLE IN NEED BY SECTOR Lebanese - Displaced Syrians - Migrants - PRL/PRS

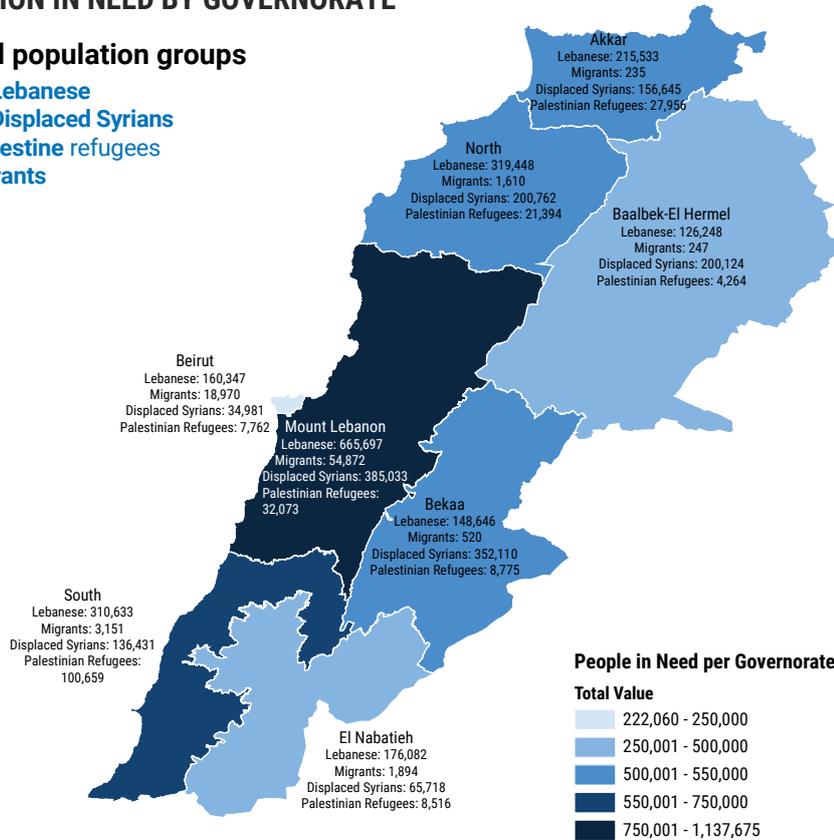


AT A GLANCE

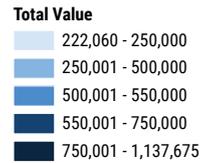
POPULATION IN NEED BY GOVERNORATE

Across all population groups

- 2.1 million **Lebanese**
- 1.5 million **Displaced Syrians**
- 211,400 **Palestine** refugees
- 81,500 **Migrants**



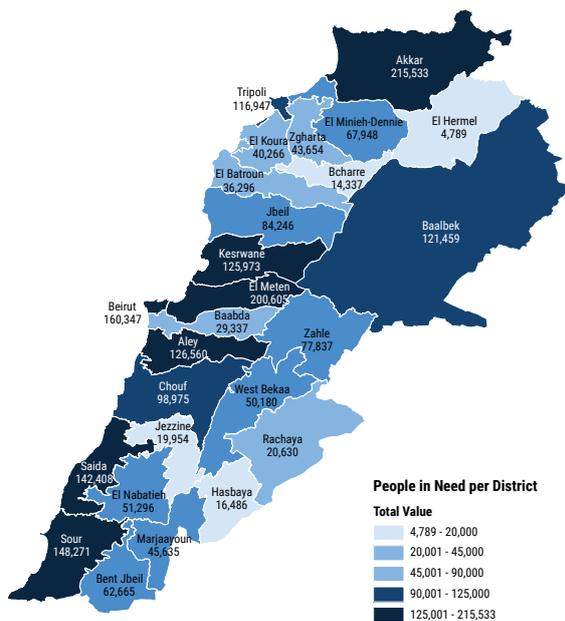
People in Need per Governorate



POPULATION IN NEED BY AREA

Lebanese

2.1 million **Lebanese** in need

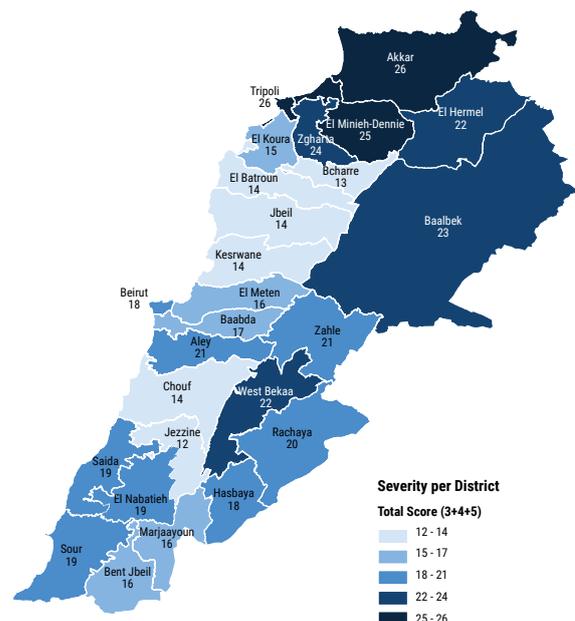


People in Need per District

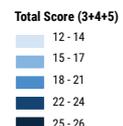


SEVERITY

Lebanese Inter-Sectoral



Severity per District



The intersectoral severity map is obtained by summing severities across the sectors, where the severity was 3 or above.

Part I: Impact of the crisis and humanitarian situation

1. Context Overview

Lebanon is experiencing a constantly evolving multi-layered crisis which is exacerbating long-term structural vulnerabilities, reversing previously made development gains, and leading to acute and increasingly visible humanitarian needs among the most vulnerable populations.

Since 2019, the country has been going through a complex economic and financial crisis, further deepened by a political deadlock, a steady deterioration of social stability and systems, and additional internal and external shocks. The massive 2020 Beirut port explosions, the summer 2021 fuel crisis and the most recent cholera outbreak in the country highlighted the deeply rooted unfolding crisis as well as multiplied the needs. Global and regional developments, including the COVID-19 outbreak and more recently the impact of the Ukraine crisis and global economic deterioration, further impacted on the situation. Lebanon also continues to manage the spill-over from the Syrian crisis and hosts the largest number of refugees per-capita in the world. While Syrian communities continue to be largely welcomed, antagonistic sentiments and statements regarding refugees have been further increasing as the society struggles to adjust to the rapidly evolving context and the growing humanitarian needs among its residents.

The capacity of the country to cope with all these overlapping shocks is expected to continue decreasing in the absence of the implementation of comprehensive long-term development plans and structural reforms.

1. The financial and economic crisis are major drivers of growing needs

Since 2019, Lebanon has been facing an unwavering economic and financial crisis that has severely impacted all the facets of the society and

pushed a large group among the population into crisis conditions.

Lebanon's financial and economic crisis is ranked by the World Bank among the top 10 most severe crises episodes globally since the mid-nineteenth century.³ In July 2022, the country was downgraded to a lower middle-income country for the first time in 25 years.⁴ The crisis has been characterized by a near collapse of the banking sector and a brutal contraction of the Gross Domestic Product (GDP) which has decreased from US\$ 55 billion in 2018 to US\$ 21.3 billion as projected for 2022.⁵ Such type of contraction is usually only seen in countries experiencing conflict. Banks barred depositors from accessing their savings, stopped offering loans and closed hundreds of branches, cutting thousands of jobs and affecting the overall economic market in the country.

With the near collapse of the banking system, the country's middle-class has faced a massive wealth destruction with many families now relying heavily on remittances provided by the diaspora for their basic needs. A November 2022 report characterizes Lebanon as the most remittance-dependent country globally, with an estimated total of US\$ 6.6 billion in remittances received in 2021.⁶ The proportion of households depending on remittances from non-residents has also increased from 10 per cent in 2019 to 15 per cent in 2022, according to a recent Labour Force follow up survey.⁷ Among Lebanese families receiving remittances, 41.7 per cent indicated that the household would be able to cover 'some but not all basic needs' in the absence of any remittance, and 32 per cent indicated that they would not be able to cover their household's expenses, because the remittance is the main source of household income.⁸ Such mechanisms are however unreliable, cannot

3 World Bank Lebanon Economic Monitor (2021).

4 <https://blogs.worldbank.org/opendata/new-world-bank-country-classifications-income-level-2022-2023>.

5 World Bank Lebanon Economic Monitor (2022).

6 Ibid. Also see KNOMAD/World Bank (2022), Migrant remittance inflows (USD million). Retrieved at: <https://www.knomad.org/data/remittances>.

7 http://www.cas.gov.lb/images/Publications/LFS_2022/Presentation%20-%20Follow%20Up%20LFS%20Lebanon%202022.pdf.

8 Ibid.

substitute long-term social protection and are also not available to the most vulnerable populations.⁹

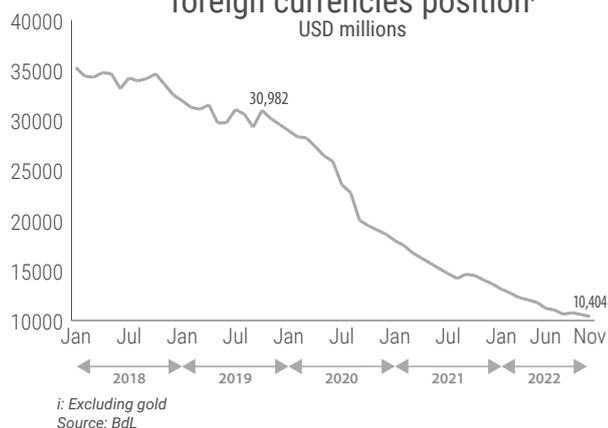
Between January and December 2022, the exchange rate went from around LBP 26,000/US\$ to LBP 47,000. Annual inflation as of December 2022 was 122 per cent but this is expected to rise sharply following a further currency slump in January 2023 which recorded an exchange rate exceeding LBP 60,000/US\$. As Lebanon has traditionally been relying on imports for most of its food and non-food needs,

the depletion of cash and foreign currency reserve assets of the central bank, as well as the fluctuating exchange rate has had a considerable impact on prices and availability of critical imports such as food, fuel and medication. Between 2019 and 2021, imported fuel, wheat, medicines were being subsidized at the official exchange rate. However, due to the persistent economic challenges the country faces, most subsidies on these items – besides those on wheat for local bread production and for certain medicines – have been withdrawn gradually by the government since then.^{10,11}

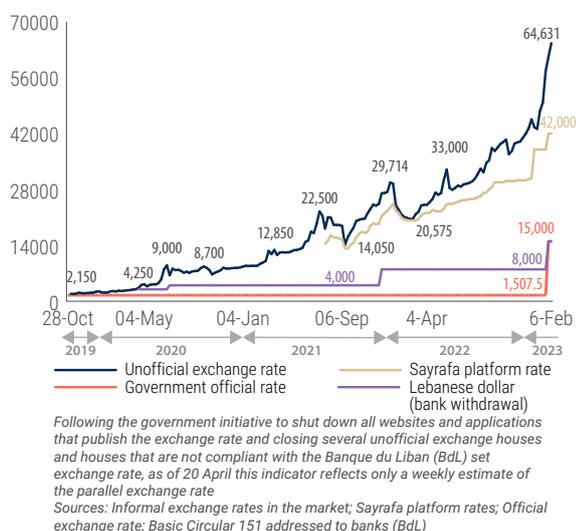
Unemployment has also significantly increased over time. As of January 2022, the Labor Force Participation Rate¹² (LFPR) of the Lebanese population was 43.4 per cent,¹³ a decline from 48.8 percent in 2018-2019, with a significantly lower rate for female (22.2 per cent) compared to male (66.2 per cent). The youth LFPR was 34.3 per cent, considerably lower than the rate for adults (46 per cent). Distance to available jobs and inability to cover related transportation costs were among the top three obstacles to finding employment as reported by Lebanese families.¹⁴

Nationally the unemployment rate is 29.6 per cent, with men and women at 28.4 and 32.7 per cent respectively.¹⁵ This however is not an indication that women have a higher rate of employment but rather a result of the high outside labor force rates standing at 82 per cent for women compared to only 27 per cent for men.¹⁶ In other words, women are not actively being part of the labor force, neither as employed nor as currently and actively looking for a job. For Lebanese and displaced Syrians, unemployment rates for both men and women have increased between 2018 and 2022.¹⁷ For both Lebanese and displaced Syrian women, high unemployment is particularly prevalent in areas outside Beirut as well as for women with lower levels of education, and only 5.5 per cent of women with disabilities participate in the workforce.¹⁸ In addition, women are active only in specific sectors, such as banking, health, education, and the public sector. Social norms around women's responsibility for household and care work are key factors preventing women from entering the paid economy: marriage

**Banque du Liban
foreign currencies positionⁱ**
USD millions



USD/LBP exchange rates



9 LCAT (2022). Understanding remittances as a coping strategy amidst Lebanon's crises: Opportunities and challenges for aid actors. Thematic Report <https://mercy Corps.org.lb/wp-content/uploads/2022/11/Understanding-remittances-as-a-coping-strategy-amidst-Lebanons-crises-opportunities-and-challenges-for-aid-actors-1.pdf>

10 WFP Lebanon - Food Security and Vulnerability Analysis of Lebanese Residents (July 2022). <https://reliefweb.int/report/lebanon/wfp-lebanon-food-security-and-vulnerability-analysis-lebanese-residents-july-2022>.

11 In September 2022, the government announced the discontinuation of subsidies on fuel imports. <https://www.thenationalnews.com/mena/lebanon/2022/09/12/lebanon-lifts-remaining-petrol-subsidy/>

12 The Labor Force Participation rate calculates the percentage of the working-age population either working for pay or profit, or seeking employment.

13 Lebanon Labour Force follow up survey (2022). https://www.ilo.org/wcmsp5/groups/public/---arabstates/---ro-beirut/documents/publication/wcms_848353.pdf

14 REACH, Lebanon Multi-Sector Needs Assessment (MSNA), July - November 2022. https://www.impact-repository.org/document/reach/ef5e5359/REACH_LBN_Cleaned-Data-MSNA_December-16-1.xlsx.

15 Lebanon Labour Force follow up survey (2022). https://www.ilo.org/wcmsp5/groups/public/---arabstates/---ro-beirut/documents/publication/wcms_848353.pdf.

16 VASyR 2022 and VASyR 2021.

17 Labour Force and Household Living Conditions Survey (LFHLCS) 2018-2019, Lebanon Labour Force follow up survey (2022), and VASyR 2022.

18 Labour Force and Household Living Conditions Survey (LFHLCS) 2018-2019.

as well as limited availability of affordable childcare services reduce the likelihood of joining the labor force for women.

The employment status of migrants is considerably different between men and women. In 2022, 37 per cent of males above the age of 16 years reported being out of the labor force neither looking for work nor being employed for the past 7 days.¹⁹ A rising number of female migrant domestic workers have found themselves without sponsors as Lebanese households increasingly are unable to pay for a live-in migrant domestic worker or for their residency renewals. As a result, more migrant domestic workers are working as freelancers (live-out) with even less legal protection, no set minimum wage and many of them without documentation and/or legal residency.²⁰

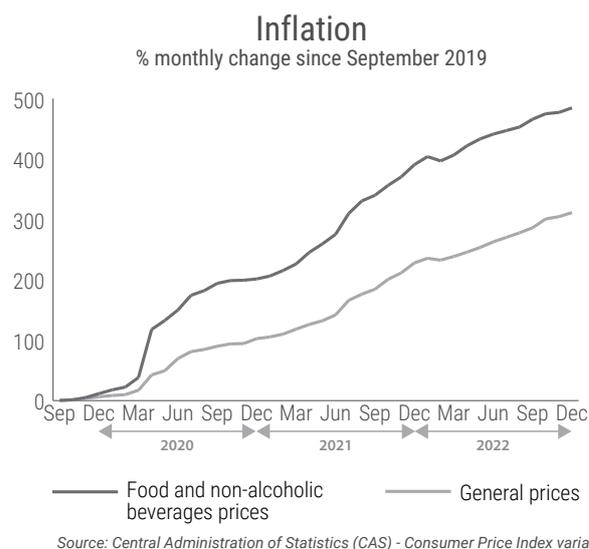
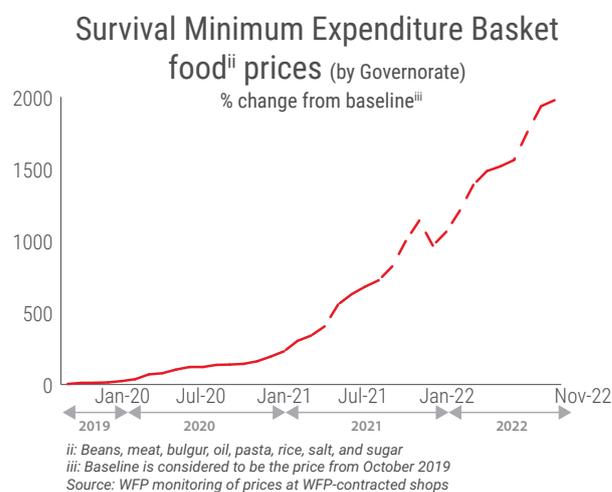
In parallel, inflation and depreciation of the LBP have significantly affected the income and purchasing power of workers and employees, including civil servants, paid in LBP. The minimum wage is now equivalent to US\$ 11.25 per month,²¹ one of the lowest globally.

In parallel to decreasing income, **households' purchasing power and their capacity to meet basic needs is further eroded by increasing prices of basic goods.** The Consumer Price Index (CPI), which measures the average change of prices over time, rose by 1,066 per cent between October 2019 and June 2022 and recorded an increase of 158.46 per cent in October 2022 compared to October 2021. In addition, the Food Price Index rose by nearly 4,696 per cent between October 2019 and June 2022.²² The cost of the food Survival Minimum Expenditure Basket (SMEB) per person in November 2022 is about 20 times higher than the cost of the basket in October 2019, an increase by almost 2,000 per cent.²³

Between September and December 2022, about 1.99 million Lebanese residents and Syrian refugees (37 per cent), were estimated to be in Integrated Phase Classification (IPC) Acute Food Insecurity Analysis (AFA) Phase 3 (Crisis) or above. **It is projected that between January and April 2023, about 2.26 million people (42 per cent) will be experiencing high levels of food insecurity** (classified in IPC Phase 3 or above) and requiring urgent humanitarian action to reduce food gaps, protect and restore livelihoods and prevent malnutrition.

In parallel to mounting food insecurity, nutrition services and feeding and nutrition practices have

deteriorated, resulting in major nutritional deprivations among most vulnerable groups. **Over a million children, adolescents and women - namely pregnant and lactating - are suffering from a triple-burden of malnutrition and related developmental and wellbeing deprivations.** In 2021, more than 40 per cent of women were found to be suffering from a degree of anemia during pregnancy.²⁴ In addition, 70 per cent of infants in Lebanon are not exclusively breastfed in the first six months of their lives. Breastfeeding is an important practice that provides the best start in life, protects babies against malnutrition, many childhood illnesses, and reduces the risk of new-born deaths. Further deterioration is anticipated in the absence of timely interventions and as the economic downturn, depreciation of the Lebanese Pound, protracted inflation and soaring international prices continue.²⁵



19 MSNA 2022.

20 MoL work permit numbers, and consultations with migrant sector partners and migrant-led organizations on contextualizing the MSNA 2022 data, held in November 2022.

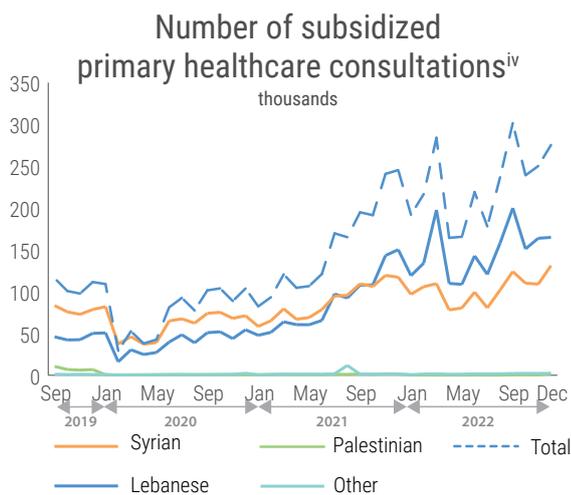
21 Calculated with an exchange rate of LBP 60,000/US\$ as of January 2023.

22 Central Administration of Statistics (2022). Consumer Price Index - CPI.

23 Based on WFP price data.

24 National SMART Nutrition Survey, Lebanon 2021. <https://www.unicef.org/mena/media/15741/file/National%20Nutrition%20SMART%20Survey%20Report%20.pdf>

25 Nutrition in times of crisis. Lebanon Nutrition Sector (2022). <https://www.unicef.org/mena/media/15746/file/Nutrition%20in%20Times%20of%20Crisis.pdf>



*iv: Excluding mobile medical units (MMUs)
Source: Ministry of Public Health and LCRP partners reporting on ActivityInfo*

The overlapping crises have also **severely impacted availability and affordability of basic services such as healthcare, education, safe clean drinking water and sanitation services.**

Public services which were already struggling prior to the economic crisis are now reaching emergency thresholds and on the brink of collapse. While a large range of services including energy, education, water and healthcare have been traditionally provided by the private sector in Lebanon, the fallout of the economy has driven a large group of the population, notably from the middle-class, towards cheaper public options. However, due to neglect, mismanagement and years of under-investment, public services are not able to meet the full scale of needs. Options for private services have reduced and remain prohibitive for most. In addition, the ability of the State to play a regulatory role has also been compromised, increasing the risks of unsafe products – including medicine, food and water – available on the market and some private providers taking advantage of the situation, exposing the most vulnerable groups who are at higher risk of exploitation, including sexual exploitation. The provision of quality and affordable services is an essential function of the government, with the involvement of the private sector, and remains critical for the well-being and protection of citizens and social stability.

Health care system has been significantly affected while the crisis also impacted insurance schemes such as the National Social Security Fund (NSSF) and the ability of the Ministry of Public Health to play its role

as guarantor of final resort for the most vulnerable uninsured population.²⁶ Increasing costs for the import of medications and medical supplies coupled with the unavailability of critical medicines, as well as maintenance of all health facilities, contributed to skyrocketing patients' costs for hospitalization and treatment. In parallel, the energy crisis forced some primary healthcare centres (PHCs) to reduce their working hours while they faced an increased workload. Skilled human resources also declined considerably as health personnel emigrated in search of better employment opportunities.²⁷ Some hospitals cut down their services and bed capacity by 50 per cent, leading to an overall insufficient number of functional hospital beds²⁸ per population. While the risk of disease outbreak such as water-borne disease (cholera, hepatitis A) and vaccine preventable diseases (measles, diphtheria) increases, due to poor water and sanitation systems, lower immunization and rising poverty, the system is increasingly unable to cope with new shocks.

Overall, households are deprioritizing non-urgent healthcare services and hospital admissions as well as preventive primary healthcare such as vaccination, antenatal and postnatal care, and mental health services.²⁹ Routine vaccination of children under five decreased around 35 per cent from 2020 to 2022 and so did the use of immunization services in both public and private health centers. There is growing evidence that population overall health is progressively deteriorating, with increased risk of high mortality and morbidity due to inadequate and delayed access to basic healthcare services. Maternal mortality more than doubled in 2021 with 45 reported cases of maternal death compared to 18 cases in 2020 and 16 cases in 2019.

Syrian women were less likely to receive sufficient antenatal care before giving birth. Only half of Syrian women who had given birth had four or more antenatal care visits compared with 76 per cent of Lebanese. Only about half of both Syrian and Lebanese married women currently use any form of contraception, an issue that is still largely taboo.³⁰

The crisis has also severely impacted the education sector, compromising the wellbeing of school aged children in Lebanon. Many among the most vulnerable are being deprived of their right to education and at higher risk of exploitation and abuse. More than 10 per cent of the 1.2 million Lebanese children do not

²⁶ Originally the NSSF and the MOPH pay 85-90 per cent of hospital cost. In the current financial and fiscal crisis, the NSSF and MOPH payment is in Lebanese pounds, and constitutes, with the limited adjustments done vis a vis the exchange rate, less than 10 per cent of the total bill, hence the patients have now practically to pay around 90 per cent of the bill, which is unaffordable for the vulnerable populations covered by NSSF or MOPH.

²⁷ LCRP, 2nd Quarter Health Sector Dashboard (2022).

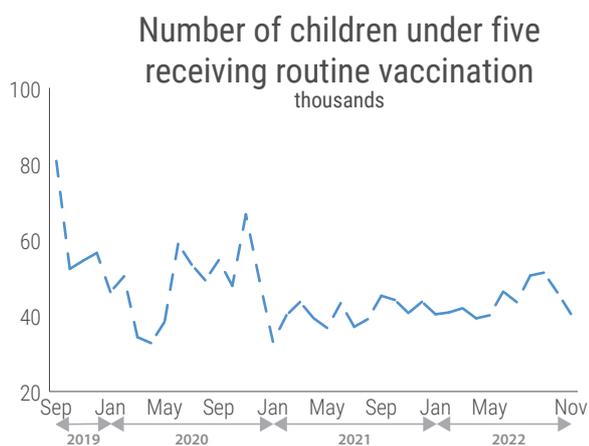
²⁸ Beds which are regularly maintained, well equipped and staffed, supported by available medical labs and diagnostic radiology tests and immediately available for the care of admitted patients.

²⁹ Ibid.

³⁰ Ibid.

currently access education, mainly due to economic vulnerabilities, and out of 715,000 displaced Syrian children, more than 430,000 (about 60 per cent) are out of formal education. As a positive trend which might be attributed to partners' interventions such as cash for education for second shift schools, the attendance in primary education saw a general increase compared to the previous two years.

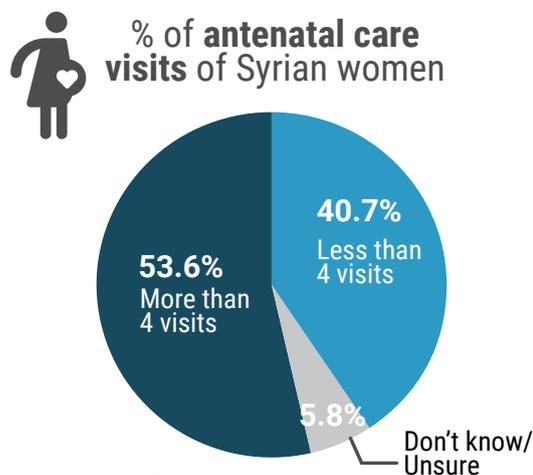
Teacher strikes, linked to their low salaries and the high costs of fuel and transportation, have largely contributed to the disruption of learning for a third scholastic year. The start of the school year was postponed several times, public schools opening in October for the first shift and mid-November for second shift students.³¹ Strikes have resumed early January 2023 and public schools remain closed to date, further increasing learning losses and risk of drop out. Even when schools function, lack of transport and safety issues are often reported as barriers to accessing school especially for girls.³²



Source: Ministry of Public Health

An increasingly high number of individuals are facing dramatic challenges with accessing safe and sufficient quantities of water for drinking and domestic use.³³ The recent cholera outbreak in Lebanon has further highlighted that the water infrastructure in the country is on the verge of almost total collapse. Without public water services, people are left with no choice but to buy water from private sources. The most widely available alternative is the use of private water trucking services, which are

able to influence and control the market, imposing inflated fees, with little oversight from the state for the price and quality of water. Women, girls, persons with disabilities and older persons are increasingly depending on private providers and intermediators to access clean water, exposing them to exploitation, including sexual exploitation.



Source: VASyR 2022

The country is also facing a sanitation crisis. Most wastewater treatment plants are no longer functioning due to electricity cuts and unaffordability of fuel to run the back-up power generator.³⁴ At the same time, the environmental damage caused by dumping of untreated wastewater is increasing,³⁵ both on the coast and inland, with severe consequences for the water quality of water bodies and underlying aquifers across all of Lebanon.³⁶

Economic collapse, high inflation and rising fuel prices further exacerbated by the war in Ukraine, **have severely impacted the electricity supply in the country.** Around 40 per cent of Lebanon's national debt is due to subsidies that the Government of Lebanon has transferred to Electricité du Liban (EDL) to cover the cost of fuel since the 1990s.³⁷ Private generators have become the main suppliers of electricity in the country for institutions, private sector, and the general public. The increasing global fuel prices led to a sharp increase in the cost of running and maintaining generators, making them unaffordable for most residents of Lebanon while severely hampering economic activity and driving the costs of services

31 The second shift public schools were opened to accommodate the extra demand for primary education in the public school system following the Syrian crisis. Both the first- and second-shift schools follow the Lebanese curriculum. The first-shift schools accommodate schoolchildren of all nationalities with priority to Lebanese children, while second shift accommodate only non-Lebanese.

32 Multidimensional poverty index, administrative enrollment data MEHE, 2022.

33 Lebanon WaSH Sector. (2022). When water becomes a privilege: the consequences of shutting down the public water system in Lebanon. <https://reliefweb.int/report/lebanon/when-water-becomes-privilege-consequences-shutting-down-public-water-system-lebanon>.

34 Preliminary results from the ongoing WaSH Sector Water and Sanitation Infrastructure Vulnerability Mapping. WaSH Sector, 2022.

35 Struggling to keep the taps on Lebanon's water crisis continues to put children at risk. UNICEF Lebanon, July 2022.

36 Lebanon WaSH Sector. (2022). When water becomes a privilege: the consequences of shutting down the public water system in Lebanon. <https://reliefweb.int/report/lebanon/when-water-becomes-privilege-consequences-shutting-down-public-water-system-lebanon>.

37 AUB - Keeping the Lights on: https://www.aub.edu.lb/ifi/Documents/publications/Other%20Publications/2021-2022/202103_Keeping_the_Lights_on_paper.pdf.

up.³⁸ In parallel, 10 per cent of Lebanese households, 18 per cent of migrant households and 4 per cent of PRL households cited solar panels as one of their energy sources. For Lebanese households interviewed, this was most commonly reported by households from Baalbek-Hermel governorate (36 per cent).³⁹ Lack of electricity from the public electrical grid severely impacts the water supply as the public grid forms the main energy source for 87 per cent of the water supply systems across Lebanon. Similarly, the majority of wastewater treatment plants are no longer functioning due to electricity cuts and the unaffordability of fuel to run the backup power generators. In this context, the WaSH sector has prioritized and contributed to the solarization of over 50 water supply systems across the country, which will contribute to lower reliance on fuel for water provision and reduce the carbon footprint.

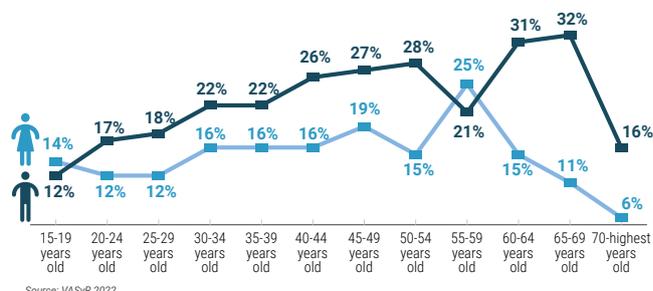
Only 11 per cent of households nationwide, through a combination of EDL services and private generator subscriptions, reported receiving an average of twenty-four hours of electricity per day in July 2022, compared to 74 per cent in April 2021. Without electricity, households are unable to keep food refrigerated and safe and houses warm in winter, ultimately affecting their health and wellbeing. Children are unable to study after dark and there are safety concerns for women and girls at night. In addition, the livelihoods of many households are affected where jobs are dependent on electricity.

There are several drivers of protection risks across community groups in Lebanon many pre-dating the current socio-economic crisis. Key drivers include an unprotective legal framework, harmful social norms and attitudes, which are now compounded by the worsening socio-economic conditions. Households are increasingly relying on negative coping mechanisms, further driving their exposure and susceptibility to the damaging effects of shocks and incidents of violence, deliberate deprivation, and coercion. 98 per cent of Syrian households, 82 per cent of Lebanese, 63 per cent of migrants and 77 per cent of PRL report using at least one negative food coping strategy (VASyR and MSNA 2022). Single headed households (in particular female-headed households (FHH) with at least one member with a disability or a chronic illness, older persons and migrant male-headed households (MHH)), are much more likely to report financial barriers, reducing expenditures on education and health, resorting to begging, and selling of assets. In addition, 7 per cent of migrants and 12 per cent of displaced Syrians in Beirut report having accepted high risk, dangerous or exploitative work because of a lack of

food. In parallel, protection monitoring demonstrates a decline in available family and community support for persons with specific needs.

Legal residency remains critical to the ability of persons displaced from Syria to receive protection, access basic rights and services, and to live in safety in Lebanon. Legal residency rates have remained at an all-time low, with just 17 per cent of displaced Syrians, 49 per cent of PRS and 20 per cent of refugees from other nationalities accessing legal residency while 44 per cent of migrant 'live-out' households report that some or no members have legal residency. Rates are lowest for women, youth and adolescent girls, therefore limiting freedom of movement and affecting women's ability to apply for jobs. Lack of legal residency exposes women and men to exploitation, for example, delayed or non-payment of wages, denial of weekly time-off, confiscation of passports and limitations on their freedom of movement. Lack of legal residency hampers access to justice with individuals less likely to approach authorities which, for example, leaves women at higher risks of sexual harassment. Syrians and PRS who entered irregularly (more commonly women) or are unregistered face greater barriers to accessing legal residency. For migrants, lack of legal residency also puts them at a high risk of detention and deportation, and/or falling victims to trafficking and exploitation.

% of Syrian individuals above 15 years old holding legal residency permits by gender and age group



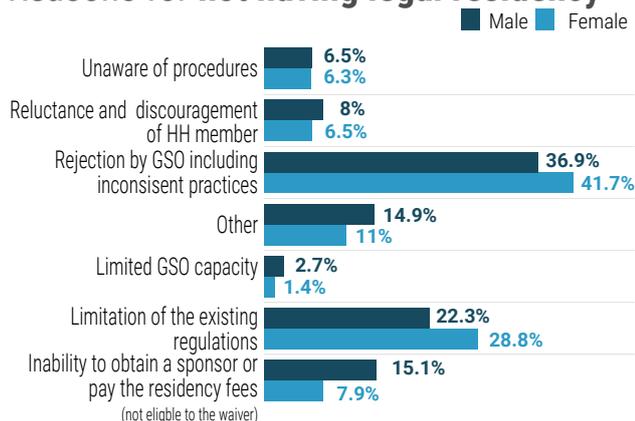
Birth registration is essential to ensuring a child's legal identity under domestic and international law and reduces the risk of statelessness. In 2022, VASyR results show that 36 per cent of displaced Syrian births were registered at the Foreigners' Registry, compared to 33 per cent in 2021 and 28 per cent in 2020. Only two per cent of births have no documentation, with families completing the first step of the birth registration process for nearly all births. 75 per cent of Palestinian refugees are not fully registered and the number of unregistered births within the Lebanese community remains unknown. According to the VASyR,

38 VASyR 2021. https://ialebanon.unhcr.org/vasyr/files/vasyr_chapters/2021/VASyR%202021%20-%20Energy.pdf.

39 MSNA 2022.

over three quarters of displaced Syrians' marriages met the minimum needed documentation of either a marriage contract from a religious authority or proof of marriage from the Sharia Court. While twenty-four per cent of marriages have no legal documentation. The proportion of marriages registered at the level of the Foreigners' Registry increased slightly to 33 per cent in 2022. In parallel, the Government introduced in 2022 a number of important policy changes to facilitate the birth registration process for refugees.

Reasons for not having legal residency



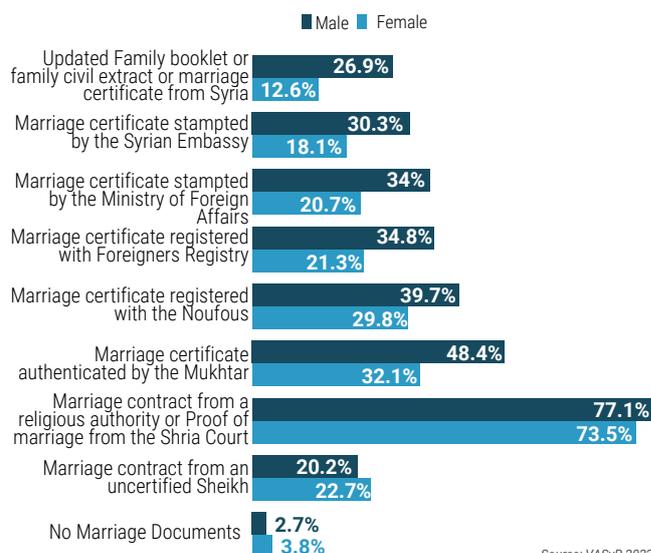
Source: VASyR 2022

Eviction trends are on the rise with 7 per cent of Syrian households with an eviction notice, compared to 5 per cent in 2021, 5 per cent in 2020 and 4 per cent in 2019.⁴⁰ In 2022, 68 per cent of Syrian households that were evicted indicated their inability to pay rent as the primary driver. Evictions have multi-dimensional impacts. According to protection monitoring findings, the main reported impacts are psychological distress, loss of livelihood, lack of food, and increased debt. While poor Lebanese households also face significant challenges in paying rent only 30 per cent of the Lebanese population lives in rental accommodation compared to 98 per cent of the Syrian population.

Displaced Syrians continue to experience restrictive measures in particular in the Bekaa region targeting men. In the third quarter of 2022, there was a notable

increase in measures reported largely taking the form of military raids targeting informal settlements alongside the confiscation of wifi-routers and other belongings and resulting in an increased number of arrests and detentions. At the municipal level, there has been an increase in direct and indirect economic restrictions by way of taxes applied to Syrians for municipal services, or in the form of wage restrictions. These measures, in addition to declining rates of intercommunal relations, are impacting people's feelings of safety and security. Importantly, a recent Protection Sector survey evaluating the impact of the socio-economic crisis on protection interventions identified key factors hindering the ability to deliver quality protection services and individuals from meaningfully accessing their protection and assistance needs. Chief among them were fuel price hikes hindering access to transportation, telecommunication price hikes, and donor funding cuts across sectors. Protection partners continue to observe the negative impact of such factors on safe access to cash and in-kind assistance for women, persons with disabilities and the elderly. For example,

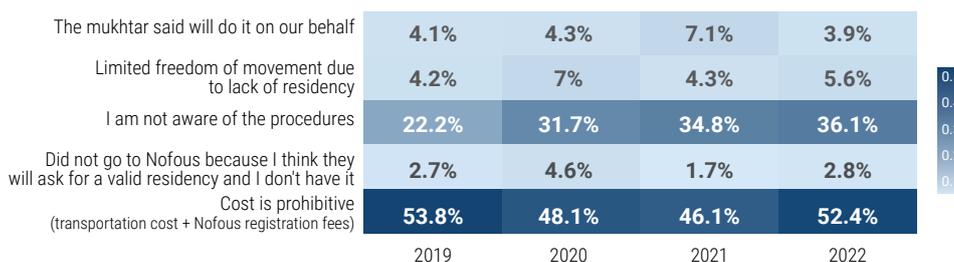
Level of marriage registration - married in Lebanon by sex of head of household



Source: VASyR 2022

Reasons for children only reaching the level of Mukhtar birth registration

Awareness of procedures is decreasing overtime



Source: VASyR 2022

40 VASyR 2022.

the increased cost of transport and non-operation of some cash machines has pushed individuals, often the most vulnerable, to delegate the withdrawal to 'intermediaries', exposing them to exploitation.

Lebanon's deteriorating situation has triggered one of the largest waves of emigration in the country's history. While skilled workers, the middle class and dual citizens can emigrate safely, those with low skills or limited resources do not have safe and legal migration opportunities. Between 2020 and 2022, a growing number of refugees, largely Syrians, but also increasingly Lebanese nationals attempted to leave irregularly by sea, often with the help of smugglers and human traffickers. According to UNHCR, between January and November 2022, 4,296 people attempted the journey, compared to 1,570 in 2021, 794 in 2020 and 270 in 2019. In 2022, of the passengers for whom nationality was known, 62 per cent were Syrian, 26 per cent were Lebanese and 11 per cent were Palestinian, with a small number of passengers of "other" nationality. UNHCR has also received numerous reports of individuals departing Lebanon via other routes, such as through Beirut Airport with a visa to a third country (Libya, Russia, as examples) before attempting to move on irregularly towards Europe from there.

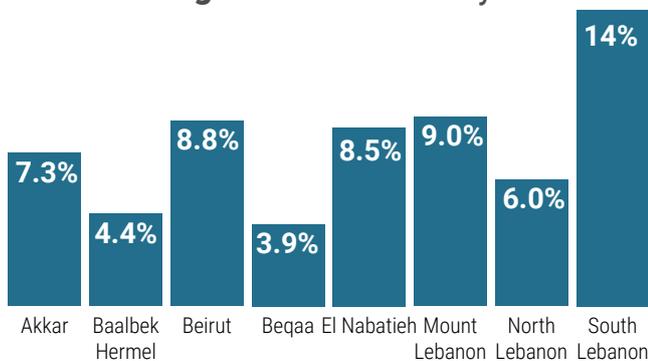
and missing persons: between 160 and 170 individuals having departed from Lebanon are reported missing or dead in 2022 alone compared to a combined number of 64 for 2015-202.⁴³ In addition, individuals engaging in irregular migration are extremely vulnerable to several secondary protection risks including the risk of trafficking, other forms of exploitation, document confiscation and GBV.

Other noteworthy trends concerning irregular onward movements from Lebanon include a shift in primary destination for boats. Recent trends have further indicated that Cyprus is no longer the major destination for irregular boat movements, but that irregular sea migration routes are increasingly targeting destinations beyond Cyprus, particularly Italy and Greece.⁴⁴ Furthermore, the longer route being taken by these boats has led to an increased number of incidents of distress at sea including those resulting in a loss of life, in 2022. In previous years, the number of individuals who attempted to depart from Lebanon by boat and went missing or lost their lives in the process were overwhelmingly Syrian, while in 2022, nationalities included Lebanese, Palestinians as well as nationals from Ethiopia and Sudan.

The crisis is affecting the social fabric and disturbing community relationships. Political instability and eroding governance are driving crimes and dramatically worsening perceptions of physical safety and security, nationwide, also shrinking the operational space for aid actors.

Communal relations are deteriorating at all levels and are increasingly leading to incidents, rhetoric escalations and violence. The relations between displaced Syrians and host community members remain strained in some locations, and this is mainly driven by economic factors. In July 2022, through the regular UNDP-ARK perception surveys, 37 per cent of respondents reported negative inter-communal relations, as compared to 21 per cent in July 2018. Relations are the most fragile in Bekaa, Akkar and the South. The pressure points range from access to services (30 per cent) to job competition (50 per cent) and unfair aid distribution (26 per cent). Meanwhile, over the last four years, intra-Lebanese relations, which were previously very positive, have been deteriorating. In 2018, 4 per cent of Lebanese cited negative relations between different communities while as of July 2022, 39 per cent of respondents now report negative relations according to the UNDP/ARK Perception Survey. Job competition is reported as a

Percentage of Syrian households living under eviction by district



Source: VASyR 2022

The number of those choosing to seek irregular migration options is expected to continue to increase with more Lebanese taking part. As of October 2022, the number of Lebanese arriving to European countries through irregular routes (595 arrivals)⁴¹ surpassed the total recorded during the three previous years (400 arrivals).⁴² The increase in the number of irregular departures is also reflected in the number of deaths

41 IOM Flow Monitoring. Preliminary data. Data on arrivals to Greece and Italy in 2022 is available only for January - September.

42 150 arrivals in 2019, 94 arrivals in 2020, and 156 arrivals) in 2021. IOM Flow Monitoring. <https://migration.iom.int/europe/arrivals>.

43 IOM Missing Migrants Project: <https://missingmigrants.iom.int/>.

44 IOM Flow Monitoring. <https://migration.iom.int/europe/arrivals>; analysis of Lebanese arrivals between 2019 and 2022 specifically.

source of intra-communal tension by 34 per cent of respondents.⁴⁵

Women are especially impacted, as men commonly respond to perceived or real inter-communal tensions by restricting women’s movement and access to public space. Such patterns have been observed among displaced Syrians and the Lebanese host communities. As a result of such tensions, women are less likely to work and to participate in the workforce and in public life, fostering dependency on men and/or the humanitarian system. At the same time, 5 per cent of women and girls reported feeling very unsafe and 4 per cent reported never walking alone at night, though this may be underreported.

Political instability, as well as the impact of the crisis on State institutions, including at the local and municipal level, has translated into an **increase of security incidents and restrictions on freedom of movement in Lebanon**. Criminality such as kidnappings for ransom, robberies as well as shooting incidents continue to take place sporadically, in particular in rural areas. This contributes to exacerbating the general perception of decreased security and safety.

The security situation in some areas such as Wadi Khalid in North Akkar and Aarsal, has continued to be extremely volatile, particularly in informal tented settlements (ITSs), compromising the safety and security of affected populations and in some cases, aid workers and impeding relief operations. In July, some humanitarian activities were suspended temporarily after the burning down of about 35 shelters in an ITS in Tal Hayat in Akkar governorate. Specific services for Palestine refugees also continued to be impacted

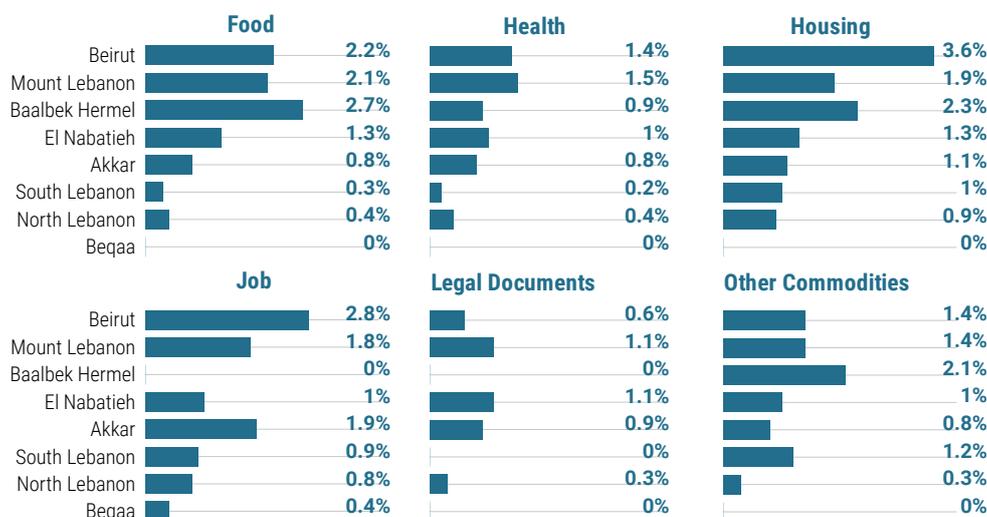
by protests, threats against humanitarian staff and violent incidents that have limited access to UNRWA installations.

Partners have experienced access-related incidents in areas such as Aarsal where roadblocks and protests followed reports of the possible reductions in critical services such as water provision due to increasing costs. In early September, strikes in the telecommunications sector also had a severe impact on the communication with affected populations and hampered the operation of humanitarian organizations (mostly INGOs, national and local NGOs and, to a certain extent, UN Agencies/Funds and Programmes). Occurrences of administrative and bureaucratic impediments have also been reported.

Like 2022, humanitarian access in Lebanon is expected to be difficult in 2023. Socioeconomic and political challenges linked to the ongoing crises will continue to affect access across the country unless structural reforms are put in place. If the current socio-political situation continues to worsen, there is a risk of a further collapse of basic social services, such as those related to telecommunications, which could mean agencies will require emergency telecommunications support to ensure humanitarian interventions can continue to reach the most vulnerable in 2023.

Other key risks on the horizon which can further impact the access situation in Lebanon in 2023 include the approaching winter season, exchange rate fluctuations leading to price volatility affecting logistics service providers and beyond, as well as the potential increase in cholera cases, which if politicized, could make the situation more precarious for specific communities, including displaced Syrians.

Households that have heard of a case where a person was sexually exploited accessing services in the past 3 months



Source: VASyR 2022

45 UNDP/ARK Perception Survey.

Protection from Sexual Exploitation and Abuse (PSEA)

With some 11,000 UN peacekeeping personnel, more than 8,000 UN national and international personnel, around 4,500 INGO staff, as well as thousands of staff from national NGO and CSO partners and community volunteers working for UN and NGOs and suppliers, Lebanon is a context with a large number of actors involved in humanitarian, development and peacekeeping activities. Many of these actors have direct access to and engagement with affected populations, including groups who are particularly vulnerable to SEA.

To understand the risks of SEA, different FGDs were conducted with refugees in 2015, 2018 and more recently in 2022. Studies showed that SEA was a tangible concern among the women and girls interviewed. Participants consistently reported instances of men in positions of power using their status to abuse and exploit women, to harass them in the street. A recent study by GWI and Care International in Lebanon⁴⁶ showed that SEA by aid and other related personnel is pervasive, most frequently experienced by people seeking or receiving humanitarian assistance for shelter or cash assistance, but also in the context of WASH and food assistance. These incidents occur during interactions at distribution points, traveling to and from distributions, during shelter repair visits, and in information-seeking contexts where those in need are trying to learn more about how to receive aid. Perpetrators often include both individuals directly distributing aid, and also associated actors including drivers, contracted manual laborers, landlords, religious leaders, among others – commonly men in power. As with many forms of violence, society's most vulnerable are most at risk of SEA: women and girls, particularly adolescent girls without parents, widows, female heads of household, refugees, persons of diverse sexual and gender orientation and those without income.⁴⁷

In a recent UNICEF study conducted by IPSOS in collaboration with the PSEA network, women, and girls also reported significant barriers to report on SEA incidents, including, but not limited to, fear and lack of trust in reporting systems, fear of not being

believed or listened to, fear of repercussions including from perpetrators, the risk of losing assistance and/or repercussions within the household. In terms of reporting mechanisms, the study noted a majority preferred a variety in reporting channels, with half of survey respondents favoring in-person reporting mechanisms, and the other half favoring a phone- or remote-based method. The knowledge of reporting mechanisms also varies, reaching the highest percentage of populations who did not know where to report a complaint against a humanitarian worker, in Bekaa for Lebanese (60 per cent), in the South for migrants (86 per cent) and in Akkar for PRL (72 per cent).⁴⁸

2. Impact on the social fabric and different groups within the population

Women and people with marginalized identities continue bearing the brunt of the crisis. Across the population in Lebanon, factors such as age, gender, religion, disability status, sexual orientation, legal status, nationality, political affiliations, documentation-status, socio-economic status, and regional locality impact the experiences of individuals and communities, especially in times of crisis.

Gender inequalities are continuing to widen during the crises⁴⁹

Lebanon's multi-layered and unprecedented political and socio-economic crisis, underpinned by a history of violence, corruption and inequality, and an unprotective legal framework is deepening gender inequalities. Lebanon has one of the highest overall gender gaps in the world, ranking 119 out of 146 countries in the World Economic Forum Gender Gap report 2022.⁵⁰ Economic collapse, high unemployment and increasing poverty are affecting all genders, but it is women who are bearing the brunt of the social and economic consequences. This includes being economically sidelined and/or exploited, taking on more unpaid labor in the home, and being subjected to increasing domestic violence, sexual exploitation, and abuse. Gender inequality is extremely visible in the economic exclusion of women in Lebanon, which makes them less likely to have savings or income and limits their

46 GWI and CARE Lebanon (2020). Empowered Aid: Transforming Gender and Power Dynamics In The Delivery Of Humanitarian Aid. <https://globalwomensinstitute.gwu.edu/sites/g/files/zaxdzs1356/f/downloads/GWI-CARE-EmpoweredAid-Lebanon-Results%20Report-remed.pdf>.

47 Ibid.

48 MSNA 2022.

49 UN Women, Gender and Social Inclusion Analysis is primarily based on MSNA Round 2 data. Due to the methodological constraints e.g. MSNA designed as a primarily household assessment, household members' individual needs were only able to be disaggregated by gender for some of the sectors. Only the household level findings for Lebanese households are representative at district level. All other comparative analysis (e.g. comparing female-headed households, male-headed households and co-headed; or households with disability and without disability) or analysis using a subset data or PRL or Migrant data are indicative.

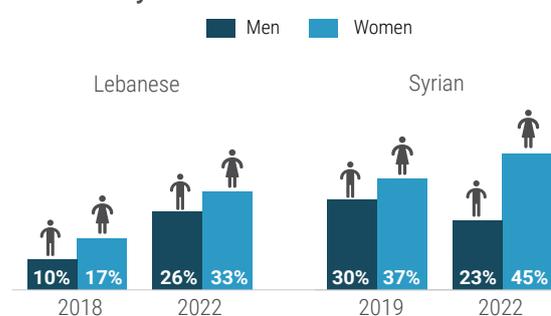
50 World Economic Forum. 2022. Global Gender Gap Report. 2022. Benchmarks progress towards gender parity and compares countries' gender gaps across four dimensions: economic opportunities, education, health and political leadership.

access to employee-paid social protection schemes that could help them cope with the current crises.⁵¹ The economic crisis has impacted Syrian, Lebanese, migrant and PRL women's economic participation in specific ways. In response to the crisis, more Syrian women, who largely work in agriculture, have joined the labour force over time, but face the highest rate of unemployment of any group and are largely consigned to low-paid work. Syrian refugee men are six times more likely to be working compared to Syrian refugee women: 56 per cent of men were employed compared to only 10 per cent of women,⁵² and Syrian women earn far less than Syrian men and Lebanese women on average.⁵³ On the other hand, Lebanese women appear to have left the labour force as a result of the economic crisis, as their labour force participation decreased from 30 per cent in 2018 to 23 per cent in 2022.⁵⁴ Labour force participation of Lebanese men remains three times higher than that of Lebanese women, though men's economic participation has also decreased during the crisis. Due to deteriorating work conditions and wage devaluation, the number of documented migrant domestic workers decreased from 184,000 in 2019 to 66,000 in 2021, suggesting a significant exodus of women who were employed to undertake domestic labor and an increase in undocumented/irregular migrant domestic workers relying on intermittent daily work. This large-scale departure implies the crisis led to poor work and living conditions for migrant women and could also partially account for the decrease in Lebanese women's participation in the labor force, as middle-class Lebanese women would have needed to resume caretaking responsibilities formerly assumed by migrant domestic workers.

Syrian and Lebanese men and women have suffered from skyrocketing unemployment, but the economic crisis has left more women of both nationalities unemployed than men. Syrian women's unemployment has increased to 45% in 2022. The gap between Syrian men and women's unemployment remains significant, with an unemployment rate of 23% for Syrian men – far lower than Syrian women.⁵⁵ The jobs that Syrian women have joined the labour force to perform, mostly in the agriculture sector, are among the lowest paid jobs in the country. Estimated average daily wages

have increased marginally alongside the ongoing hyperinflation, but Syrian women were working for an average of 84,915 LBP or \$2.50 per day. This amounts to 46% of the wage of Syrian men and 56% of the average wages of Lebanese women.⁵⁶ Lebanese women's unemployment doubled from 17% in 2018 to 33% in 2022 and remains 7 percentage points higher than the unemployment rate for Lebanese men (26%).⁵⁷ Women's unemployment was extremely high outside of Beirut and Mount Lebanon, approaching as high as 55 per cent in Baalbek-Hermel and 49 per cent in the South. According to the MSNA, LFPR for PRL women was 28 per cent compared to 59 per cent of PRL men and unemployment was 29 per cent for women compared to 17 per cent for men.⁵⁸

Unemployment Rate for Lebanese and Syrian men and women



Women's limited economic participation across population groups is likely why MSNA-assessed FHHs report higher reliance on family and community support for their main source of income (26 per cent compared to 15 per cent MHH),⁵⁹ with older female-headed households even more reliant on this type of support.

As conditions in the crisis worsen and the capacity of family and community support wanes, FHHs may be more likely to be dependent on humanitarian aid compared to MHHs. An increase in FHHs' aid dependency has been observed amongst Syrians in Lebanon over recent years, where over half (54 per cent) of Syrian FHHs were dependent on humanitarian cash assistance as their main source of income.⁶⁰ When humanitarian cash assistance is factored into the calculation, 68 per cent of Syrian MHH compared

51 World Bank and UN Women, "The Status of Women in Lebanon : Assessing Women's Access to Economic Opportunities, Human Capital Accumulation and Agency," 2021, accessible here: <https://openknowledge.worldbank.org/handle/10986/36512>.

52 VASyR 2022.

53 UNDP/ARK. 2022. Perceptions Survey Wave XIV.

54 Lebanon Labour Force follow up survey (2022).

55 VASyR 2022.

56 UNDP and ARK wage monitoring periodical surveys from June 2021 and September 2022 (unpublished). Dollar values from <https://lirirate.org/> as of the last date of data collection for each ARK survey.

57 Lebanon Labour Force follow up survey (2022).

58 MSNA 2022.

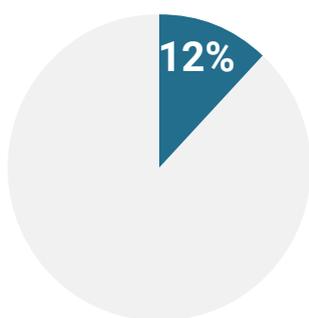
59 UN Women, Gender and Social Inclusion Analysis of MSNA Round 2 data, October 2022.

60 VASyR 2022. Gender Chapter (in collaboration with UN Women).

to 61 per cent of FHH are under the survival minimum expenditure basket (SMEB). Without including income from assistance into the calculations of per capita expenditure, the proportion of FHH below the SMEB (84 per cent) is slightly higher than MHHs (82 per cent) - a clear indication of the heavy reliance of FHHs on assistance. As FHH continue being targeted as a vulnerability category, more Lebanese, Syrian, and PRL FHH reported having received assistance in the past 12 months compared with MHH.⁶¹

Women and girls across all population groups have specific sanitation, hygiene and protection needs compared to men and boys. A recent analysis indicated that an estimated 2 million Lebanese and Syrian females in reproductive age (i.e. 15-49 years old) are suffering from period poverty in Lebanon of which around 927,693 are estimated to lack the means and resources to secure their sanitary supplies.⁶² As prices of sanitary pads and other products have continued to increase, access to menstrual products has become challenging in Lebanon, with some assessments pointing to period poverty in the country.⁶³ According to the MSNA, among households with at least one female member, one-third of all assessed households in Lebanon (35 per cent) reported issues in accessing menstrual hygiene products with most reporting they relied on less preferred items as a way of coping.⁶⁴ Approximately one-third (30 per cent) of Syrian households reported struggling to access menstrual hygiene items, with FHH (36 per cent) more often facing this challenge than MHH (29 per cent).⁶⁵

% Households reporting that there were areas in their location which **women and girls avoid because they feel unsafe**



Source: MSNA 2022

61 UN Women, Gender and Social Inclusion Analysis of MSNA Round 2 data, October 2022 and UNICEF, UNHCR, WFP. 2022. Vulnerability Assessment of Syrian Refugees. Gender Chapter (in collaboration with UN Women).

62 UNFPA, Building further evidence for the relevance and importance of adopting sustainable solutions for tackling period poverty in Lebanon, December 2022, unpublished.

63 Plan International. 2021. Period Poverty in Lebanon.

64 UN Women, Gender and Social Inclusion Analysis of MSNA Round 2 data, October 2022. These questions were only asked to female respondents by female enumerators, meaning these findings are from a subset of 2,260 (42 per cent) of the total 5,342 households.

65 VASyR 2022. Gender Chapter (in collaboration with UN Women).

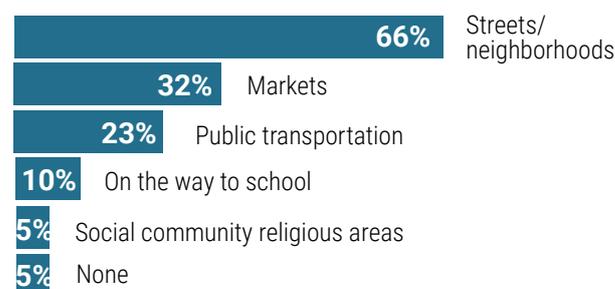
66 UN Women, Gender and Social Inclusion Analysis of MSNA Round 2 data, October 2022.

67 Helem. 2022. LGBTQ+ Rights Violations Report 2021.

68 Yalla Care, "Study on the needs of the LGBTQIA+ community in Beirut," December 2021.

Feeling unsafe and concerned about being robbed, kidnapped, threatened with violence or harassed continued to be reported as an issue for women in at least one in ten Lebanese, migrant and Syrian households and one in three PRL households. These households reported at least women in their households avoided areas because they felt unsafe, mainly in streets, markets, and public transportation. Such safety concerns were exacerbated for women and girls in more rural areas, with rates increasing to 25 per cent of Lebanese households in the Bekaa where women avoided public spaces due to lack of safety.⁶⁶ Half (49%) of PRL households in Akkar reported women felt unsafe, and they overwhelmingly reported they felt unsafe in markets. These safety concerns in Lebanon's unfolding crisis corroborate other findings that women and girls in Lebanon often feel unsafe in public spaces.

Main places reported by households where **women feel unsafe**



Source: MSNA 2022

Safety concerns and risks are also strikingly high for LGBTQIA+ women in Lebanon. 57 per cent of the calls to Helem's support line were from LGBTQIA+ individuals who had received death threats, been blackmailed, or subjected to verbal violence.⁶⁷ Another study from 2021 found that 52 per cent of queer, lesbian or bisexual women, and 67 per cent of trans women in the Greater Beirut area reported feeling unsafe and at risk of physical attacks in their neighborhood.⁶⁸

Needs and concerns for people with diverse sexual orientation, gender identities, expression, and sex characteristics (SOGIESC).

In Lebanon, people of diverse sexual orientations, gender identities and expressions and sex

characteristic (SOGIESC) are criminalized.⁶⁹ According to an OXFAM and European Union study, in one of the first ever humanitarian assessments in Lebanon that specifically assesses the needs of the LGBTIQ+ groups, 73 per cent of assessed LGBTIQ+ individuals reported that the deteriorating living conditions impacted their psychological wellbeing, nearly half reported that they do not have access to support systems, 41 per cent could no longer afford rent, and 39 per cent reported losing access to safe spaces. A very high proportion (70 per cent) of study respondents had lost their job in the past year.⁷⁰ As the crisis worsens, it is likely that people of diverse SOGIESC will require more humanitarian assistance. The 2021 Yalla Care coalition report estimated that 59 per cent of assessed LGBTIQ+ persons in the greater Beirut area alone rely on at least one form of assistance from NGOs.⁷¹ However, comprehensive information on LGBTIQ+ populations remains limited due to a lack of reliable statistical data.

Growing concerns of the children and youth in Lebanon

As the socio-economic situation in Lebanon continues to deteriorate, families struggle to meet their basic needs leading to an increase in the overall child protection needs, particularly among vulnerable and marginalized groups. The political instability has also impacted the social services available to address these risks, pushing families deeper into poverty and leading to increasing negative coping mechanisms, such as child labor, child marriage and violent discipline. Drivers of child protection needs include child labour, safety and security concerns, and non-attendance of school (often inter-linked). Moreover, around 725,500 displaced Syrian and Palestinian Refugees from

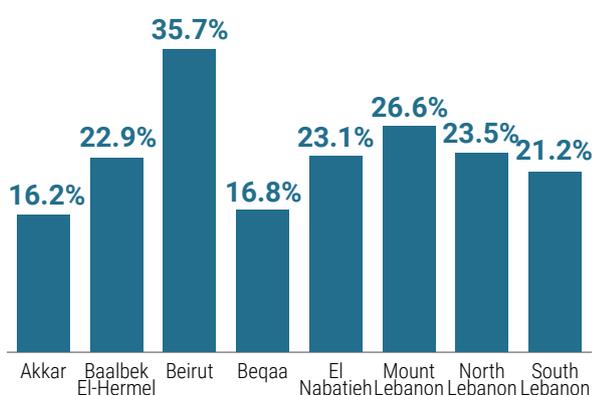
Syria (PRS) children are in need of specialized child protection prevention and response services, driven mainly by inadequate sustainable solutions, increased debt levels and increased community tensions. This leads vulnerable families to adopt harmful coping mechanisms, such as the worst forms of child labor, child marriage, onward movement/migration, mainly by sea, and violent child discipline, including physical, emotional abuse and neglect.

VASyR 2022 shows that violent child discipline is increasing whereby more than half of Syrian children (57.8 per cent) between the ages of 1 and 14 years of age have experienced at least one form of violent discipline compared to 2021 (56 per cent). Almost half of the parents (47 per cent) reported resorting to either physical aggression or to psychological aggression (46.8 per cent), while severe violence was reported in 6.7 per cent of cases, an increase compared to 2021 (4 per cent).

Child marriage continued to be prevalent among displaced Syrian girls: one out of five adolescent girls between the ages of 15 and 19 were married at the time of the VASyR 2022 survey. This is mainly due to the increased levels of debt resulting from the deteriorating financial situation, forcing some families to adopt child marriage as a coping economic strategy.⁷² Similarly, child marriage is increasing among PRL and PRS, also driven by deep-rooted social and cultural norms that make it acceptable/normal to wed off adolescent girls and young women, particularly as families continue to struggle to meet their basic needs.

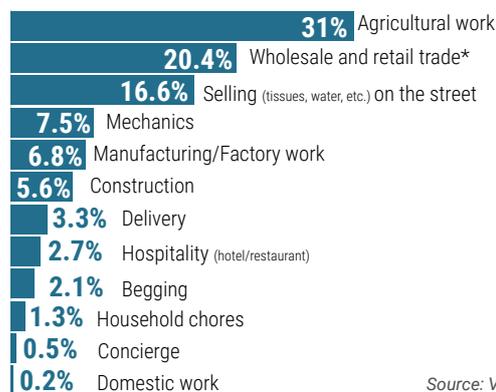
Adolescents and young people are increasingly out of learning and lack opportunities for second-chance

% Total number of female marriages aged between 15 and 19 years



Source: VASyR 2022

What types of labour is this child involved in?



Source: VASyR 2022

* (including all types of work in/for small shops and supermarkets)

69 Consensual same-sex acts are penalized under article 534, which criminalizes 'unnatural sex,' and article 521 criminalizes trans individuals under the pretext of 'disguising their gender.'

70 Oxfam, "Queer community in crisis: trauma, inequality and vulnerability," Policy Brief, June 2021.

71 Yalla Care, "Study on the needs of the LGBTIQ+ community in Beirut," December 2021.

72 Thematic report on increase of GBV against children, GBV IMS report Q3, 2021.

education. In total, 62.3 per cent of youth aged 15-24 (31.1 per cent male and 66.9 per cent female) are not engaged in education, employment or training as per the ILO latest report issued in July 2021. The rate of the youth who are not in Employment, Education or Training (NEET) between ages 15-18 for males is 36.6 per cent compared to 63.4 per cent for female. For youth between ages 19-24, the female NEET is 69.6 per cent and the male NEET rate is at 30.4 per cent which indicates that females are more engaged in household tasks. Outdated school curricula contribute to limited acquisition of market-relevant, 21st century and future-proof skills.

Youth unemployment (ages 15-24) increased from 23 per cent in 2019 to 47.8 per cent in 2022.⁷³ Moreover, adolescents and youth do not have adequate opportunities for participation and engagement in issues that affect their lives at home, school, in their communities or nationally. Their participation is constrained by negative social and gender norms and limited safe spaces for expression, including participatory approaches in decision making. Additionally, mental health issues are on the rise with one in three adolescents aged 15-24 reporting feeling depressed and over half reporting that their lives had worsened over the past year; while mental health services are either unavailable or unaffordable⁷⁴. In addition, school health projects are on hold for the past three years.

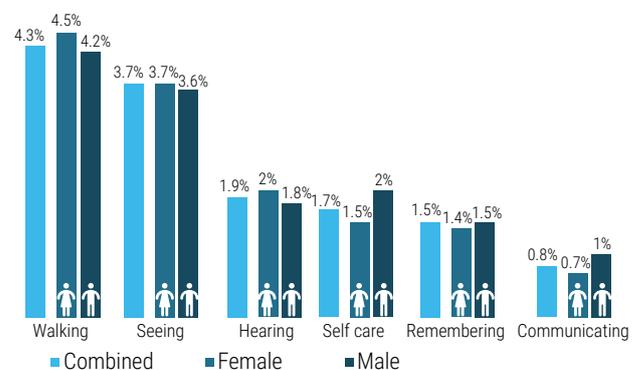
Older people face specific risks

Shocks and humanitarian needs are experienced differently by people based on their gender and age, as well as pre-existing vulnerabilities and coping capacity. On average, older people are more likely to have health concerns, and experience vision and hearing impairments, and in some cases mobility issues. In the absence of enabling and inclusive services, older people, particularly women, will experience difficulties in accessing life-saving information and assistance, which will have adverse impacts on their life and wellbeing. Older persons are most likely to experience violence, abuse and neglect in public settings (8.6 per cent) than at home (1.2 per cent).⁷⁵ Lebanese and PRL female heads of household were more often older. Almost half (48 per cent) of Lebanese female heads of household were 60 or older compared to 31 per cent of Lebanese male heads of household. Likewise, more

than half (55 per cent) PRL female heads of household were 60 or older compared with 21 per cent of PRL male heads of household.⁷⁶ Older persons can be at risk due to their age intersecting with other factors, such as chronic illness or disabilities. Disability rates increase with age as 16 - 21 per cent of persons aged 65+ have a disability compared with 2.6 per cent of the population aged 15 - 64.⁷⁷

According to a recent study on the rights and well being of older persons in Lebanon, it is estimated that only 9.8 per cent of older persons received a pension in 2020.⁷⁸ An earlier report also estimated that only 33 per cent of Lebanese women have pensions compared with 67 per cent of Lebanese men, and despite older men and women having similar rates of disability, only 39 per cent of public disability card holders are women.⁷⁹ Older persons living alone or without a caretaker are also at increased risk, and the increase of emigration from Lebanon may lead to even more older people living alone as younger populations seek economic security outside of the country. Meanwhile, older Syrian women have extremely high rates of illiteracy compared to older men, and far fewer Syrian FHH (39 per cent) report having no access to internet at home than MHH (24 per cent).⁸⁰ With the collapse of lifetime savings, the devaluation of pension and absence of any basic social protection system, many older people are unable to meet their basic needs and are facing a desperate future.⁸¹

% Individuals reporting having a disability



Source: MSNA 2022

Structural inequalities, discriminations and barriers disproportionately affect people with disabilities

In Lebanon, people with disabilities face discrimination, exclusion and numerous barriers to equal participation

73 Lebanon Labour Force follow up survey (2022).

74 UNICEF, 2022.

75 The Rights and well being of older persons in Lebanon, UNFPA and HelpAge International, 2022, Country profile - LEBANON 22-2-2022 (unfpa.org).

76 UN Women, Gender and Social Inclusion Analysis of MSNA Round 2 data, October 2022.

77 The Rights and wellbeing of older persons in Lebanon, UNFPA and HelpAge International, 2022, Country profile - LEBANON 22-2-2022 (unfpa.org).

78 The Rights and well being of older persons in Lebanon, UNFPA and HelpAge International, 2022, Country profile - LEBANON 22-2-2022 (unfpa.org).

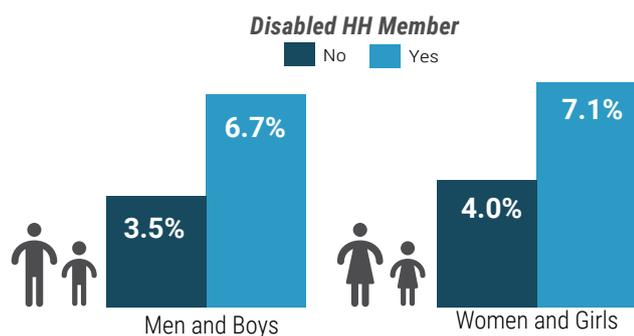
79 Overseas Development Institute. 2019. Social Protection in Lebanon: A Review of Social Assistance.

80 VASyR 2022. Gender Chapter (in collaboration with UN Women).

81 ILO and HelpAge International, A glimmer of hope amidst the pain, 2022.

in society. They often face difficulties accessing public spaces, assistance, and services, and are often reliant on caregivers, which can make them more vulnerable to exploitation, violence, neglect or abuse. A recent study that aimed at analyzing the context of GBV against women and girls with disabilities in Lebanon concluded that factors that increase the risk of GBV against women consist mainly of type of disability, poverty and access to education and lack of information in reporting and acting against GBV.⁸² Approximately 7 per cent of MSNA-assessed Lebanese individuals and 14 per cent of PRL individuals had at least one disability, and most individuals with disabilities were 60 or older - as per the Washington Group questionnaire.⁸³ These figures are close to the most recent figures in the Labour Force and Households Living Conditions Survey (LFHLCS 2018 – 2019), where an estimated 4 per cent of people in Lebanon were reported to have at least one disability, and approximately half of them were older people. Only 2 per cent of assessed migrants had disabilities, with men (4 per cent) possibly over-represented.⁸⁴ Syrians were twice more likely than Lebanese to have disabilities, with 13 per cent of individuals assessed by the VASyR reporting at least one type of disability, with little difference between men and women.⁸⁵ At the household level, one in three PRL and Syrian households included members with disabilities compared to 22 per cent Lebanese households and 5 per cent migrant households. PRL FHH were the most likely to include members with disabilities: more than half (55 per cent) of PRL FHH report this vulnerability.

Reporting on feeling 'very unsafe' walking alone in the area at night by Gender



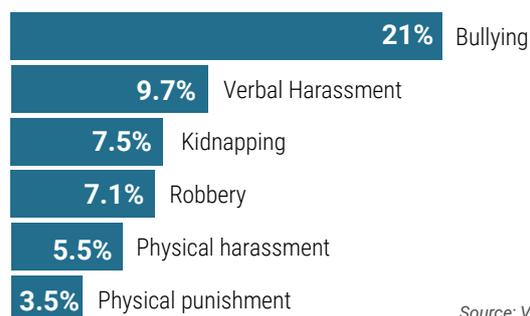
Source: VASyR 2022

Lebanese FHH (27 per cent) were also slightly more likely to include at least one member with a disability than Lebanese MHH (21 per cent).⁸⁶ The 2019 LFHLCS showed that people with disabilities, particularly women, participate in the labor force at extremely low rates and face high levels of unemployment, and this has likely been magnified by the crisis. Such barriers to women and men with disabilities accessing the economy have a profound impact, making them more vulnerable to poverty and aid dependency.



Safety Concerns for Syrian Refugee Children with Disabilities

Kidnapping is a greater concern than robbery, physical harassment/punishment



Source: VASyR 2022

3. Accountability to Affected Populations (AAP)

Assistance is necessary for many vulnerable people but still not enough to cover increasing needs. There are variations among households regarding assistance received and their level of satisfaction. Around 19 per cent of Lebanese households⁸⁷ and 8 per cent of migrant households⁸⁸ surveyed reported that they received assistance in the last 12 months.⁸⁹ Close to half of PRL households (44 per cent)^{90,91} and displaced Syrian households (49 per cent)⁹² interviewed also reported receiving assistance over the same period. Levels of dissatisfaction with the assistance received also vary among population groups, with 6 and 11 per cent of PRL and Lebanese households⁹³ respectively not being satisfied with the assistance they received. However, the figure is higher among the migrant

82 Situation Analysis on Gender Based Violence against Women and Girls with Disabilities in Lebanon, UNFPA, 2022 [gbv_disability_report_-_december_2_2022.pdf](#) (unfpa.org).

83 MSNA 2022.

84 UN Women, Gender and Social Inclusion Analysis of MSNA Round 2 data, October 2022.

85 VASyR 2022. Gender Chapter (in collaboration with UN Women).

86 MSNA 2022.

87 Of this percentage for Lebanese, 36 per cent reported receiving assistance in the past 3 months.

88 Of this percentage for Migrants, 31 per cent reported receiving assistance in the past 3 months.

89 MSNA 2022.

90 Of this percentage for PRL, 44 per cent reported receiving assistance in the past 3 months.

91 MSNA 2022.

92 VASyR 2022.

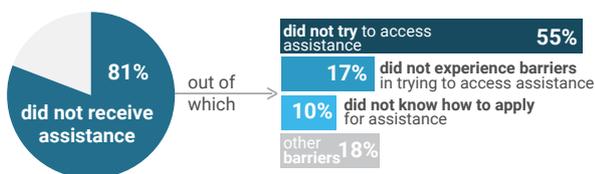
93 MSNA 2022.

population (21 per cent)⁹⁴ and displaced Syrians (39 per cent).⁹⁵

The primary reason for dissatisfaction with assistance cited by Lebanese, migrant and PRL households (who received assistance in the past 12 months) were that quantities were insufficient (43 per cent) and that the assistance delivered was not adequate to the needs of the household (40 per cent).⁹⁶ Non-gender conforming persons and migrant female respondents were the groups that had received the least assistance in the past 12 months with only 4 per cent of female migrants⁹⁷ having done so within this period.

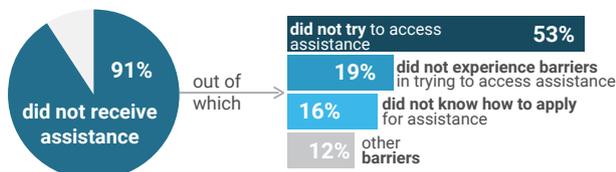
The proportion of households dissatisfied with assistance and reasons for this also varies at governorate level. The largest proportions of displaced Syrians and PRL households surveyed who were not satisfied with assistance were in Baalbek-Hermel (52 per cent⁹⁸ and 27 per cent⁹⁹ respectively) and Mount Lebanon (47 per cent¹⁰⁰ and 15 per cent¹⁰¹ respectively).

% Lebanese households not having received assistance during the last 12 months and barriers faced



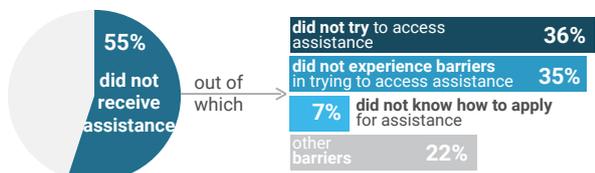
Source: MSNA 2022

% Migrant households not having received assistance during the last 12 months and barriers faced



Source: MSNA 2022

% PRL households not having received assistance during the last 12 months and barriers faced

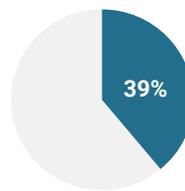


Source: MSNA 2022

In terms of reasons, in Mount Lebanon, 48 per cent of Lebanese, migrant or PRL households who were not satisfied with assistance reported that the quality was not good enough. In both Baalbek-El Hermel and North governorates, the key reason cited by more than half of dissatisfied households (52 per cent and 65 per cent respectively)¹⁰² was that the quantity was not good enough.

Households interviewed reported facing at least one barrier in accessing humanitarian assistance with 10 per cent of Lebanese households, 7 per cent of PRL households and 16 per cent of migrant households reporting that they did not know how to request assistance, with 100 per cent of the non-gender conforming respondents citing this as a reason.¹⁰³

% Households know how to use complaints and feedback mechanisms



Source: MSNA 2022

Communities feedback to guide changes in the response

For Lebanese, PRL and Migrant households, variations between governorates were also reported, with Bekaa and Akkar and Bekaa governorates showing the lowest levels of awareness of reporting mechanisms (61 per cent and 60 per cent respectively did not know how to report), followed by the North (53 per cent), Nabatieh (49 per cent), South and Mount Lebanon (47 per cent), Beirut (43 per cent), and Baalbek-Hemel (40 per cent).¹⁰⁴ The main reason why respondents did not feel comfortable using complaint mechanisms to provide feedback about the aid received and/or aid workers behaviors was the lack of positive change seen as a result (32 per cent),¹⁰⁵ with some variation among the population groups and governorates. This was especially the case in Baalbek-Hemel, Nabatieh, and Akkar where 100 per cent, 89 per cent and 80 per cent¹⁰⁶ respectively reported so.

94 Ibid.
 95 VASyR 2022.
 96 MSNA 2022.
 97 Ibid.
 98 VASyR 2022.
 99 MSNA 2022.
 100 VASyR 2022.
 101 MSNA 2022.
 102 Ibid.
 103 Ibid.
 104 Ibid.
 105 Ibid.
 106 Ibid.

Other reasons that were cited included worries about future aid being impacted (6 per cent), and the complaint feedback mechanisms available not being transparent enough (3 per cent).¹⁰⁷ Worrying about the negative consequences of giving feedback or complaining was a particular concern among the migrant population, where 43 per cent¹⁰⁸ reported this as a reason why they would not use the existing feedback mechanisms. In contrast, 50 per cent of the Lebanese, migrant and PRL households¹⁰⁹ in Baalbek-Hemel reported lack of transparency in the reporting and feedback processes was an issue.

Aid workers' limited communication with communities

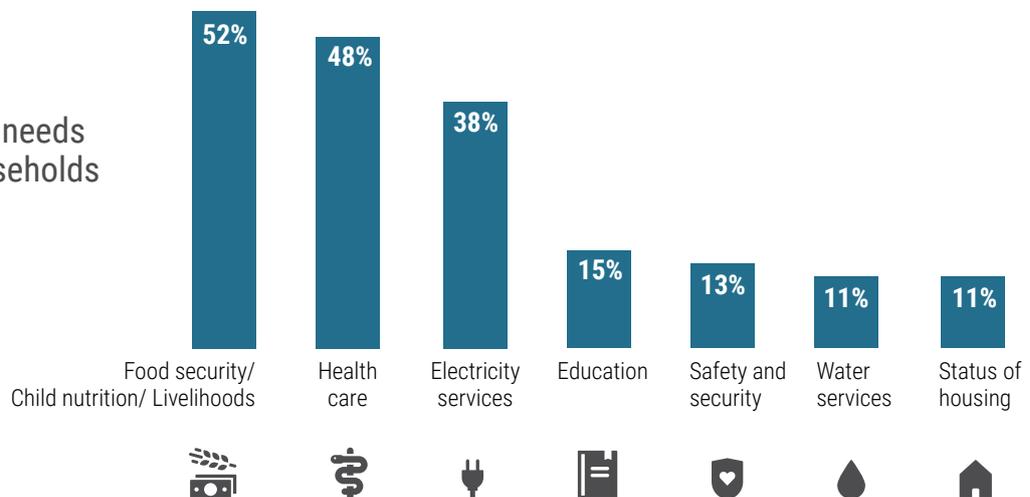
While 27 per cent of the Lebanese respondents¹¹⁰ were not satisfied with the behaviour of aid workers, this

number was only 10 per cent among the migrants, and 23 per cent among the PRL households.¹¹¹ In terms of geographical spread, people in Akkar, North and Bekaa were the least satisfied with the conduct of aid workers (nearly 40 per cent).¹¹² The main overall reasons for dissatisfaction were lack of communication, both in terms of listening to (29 per cent) and speaking with (24 per cent) members of local communities, not seeing changes despite giving feedback (25 per cent). Moreover, 18 per cent of Lebanese households and 21 per cent of migrant households are not receiving sufficient information about assistance available and registration, eligibility, or distributions compared to only 5 per cent of PRL households.¹¹³



Top information needs reported by households

Source: MSNA 2022



Credit: UNDP/March 2022

107 Ibid.

108 Ibid.

109 MSNA 2022.

110 Ibid.

111 Ibid.

112 Ibid.

113 Ibid.

2. Impact of the Situation on the Humanitarian Needs of Population Groups

In January 2023, it is estimated that a total of 3.9 million people need some form of humanitarian assistance in Lebanon. This figure includes 2.1 million vulnerable Lebanese,¹¹⁴ 1.5 million displaced Syrians, 81,500 migrants living in Lebanon, and 211,400 Palestine refugees (PRL and PRS).

While there are some variations among the population, notably in terms of protection risks, overall the severity and magnitude of humanitarian needs is primarily driven by people's inability to meet their basic needs and access basic services. This is compounded by harmful coping strategies, which result in heightened protection risks.

2.1. In focus: Needs of Lebanese

Population profile

Of the current total population in Lebanon, there is an estimated 3.9 million Lebanese comprising 2 million females and 1.9 million males. Among them, around a third are children (1.3 million) and 15 per cent are older people above the age of 60 (0.6 million). Baabda and El Meten districts in Mount Lebanon governorate have the highest population, hosting 11 per cent and 10 per cent of all the Lebanese population, respectively, followed by Akkar district in Akkar governorate (8 per cent) and Beirut district in Beirut governorate (6 per cent). According to 2022 MSNA data, the average Lebanese household has four people. Some 19 per cent of Lebanese households are female-headed, 4 per cent are co-headed by male and female members, and 77 per cent are male-headed. Almost one in four Lebanese households assessed reported having at least one member in the household living with a disability.¹¹⁵

Humanitarian needs and their contributing factors

About 2.1 million people (54.9 per cent of the resident Lebanese population) are estimated to be in need of some form of humanitarian assistance. Akkar district in Akkar governorate and El Meten district in Mount Lebanon governorate host equally the highest percentage of People in Need (PiN) with 10.1 and 9.4 per cent each. Beirut district in Beirut governorate hosts 7.5 per cent of PiN, followed by Sour and Saida districts in South governorate with each district hosting 6 per cent of PiN. On the whole, the severity of

needs¹¹⁶ among Lebanese is driven by unmet health care and food needs in addition to inaccessible WaSH services and it is overall higher in Akkar district in Akkar governorate; El Minieh-Dinnie and Tripoli districts in North governorate; followed by Baalbek and El Hermel districts in Baalbek-El Hermel governorate and in West Bekaa district in the Bekaa governorate due to intersecting and overlapping severe health and nutrition needs, and food insecurity, as well as by water, sanitation and hygiene needs, gender-based violence and child protection risks and shelter needs.

With fewer household income sources, vulnerable Lebanese families continue to face significant humanitarian needs. Access to health care services is a challenge mainly due to the increasing costs of consultations, treatment and transportation or the limited availability of services. This is particularly challenging for household members with a disability who already face several barriers when it comes to physical, employment and other access constraints. As a result, some families are forced to deprioritize meeting one need or another while some are forced to adopt harmful coping strategies such as foregoing critical health care and resorting to the use of cheaper substitutes for medication, withdrawing children from schools so they can contribute to family income or to migrate out of the country including via dangerous boat departures from Lebanon. This pattern is also evident when it comes to water and hygiene access, whereby about 20 per cent of households reported using adaptation strategies to mitigate lack of water to cover at least one need (drinking, cooking, bathing, washing, domestic use) including reducing water consumption and modifying hygiene practices such as bathing less or relying on less preferred (unimproved/untreated) water sources for drinking water.¹¹⁷

Employment and reduced income

Daily or intermittent work was reported by Lebanese households as the main source of income (41 per cent), followed by contracted employment (35 per cent) and support from friends and/or family inside the country (20 per cent), with 64 per cent of households reporting monthly earnings ranging between LBP 3 million and LBP 15 million (between US\$ 75 and US\$ 375 at average exchange rate of LBP 40,000 to

114 Estimate of Lebanese PiN is calculated as the sum of district level highest sector PiN.

115 MSNA 2022.

116 Intersectoral severity analysis of needs was done for Lebanese based on the highest sector PiN. This analysis applies to the ERP and will support targeting within the response.

117 MSNA 2022.

US\$ 1).¹¹⁸ Similar to the situation in 2021, increased competition for jobs, not enough jobs, as well as long distances to work (and transportation being expensive) continue to be major obstacles preventing Lebanese from finding work. Employers' preference for other nationalities is reported by Lebanese households as an additional barrier in 2022 (increased from 7 per cent in 2021 to 20 per cent in 2022).¹¹⁹ More than three-quarters (82 per cent) of Lebanese households reported challenges in affording basic needs because of loss of or reduced employment, financial or access/availability issues.¹²⁰

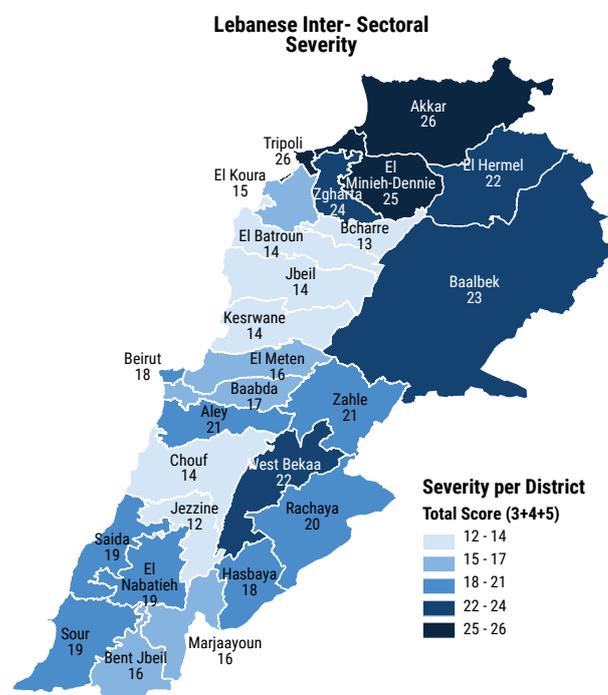
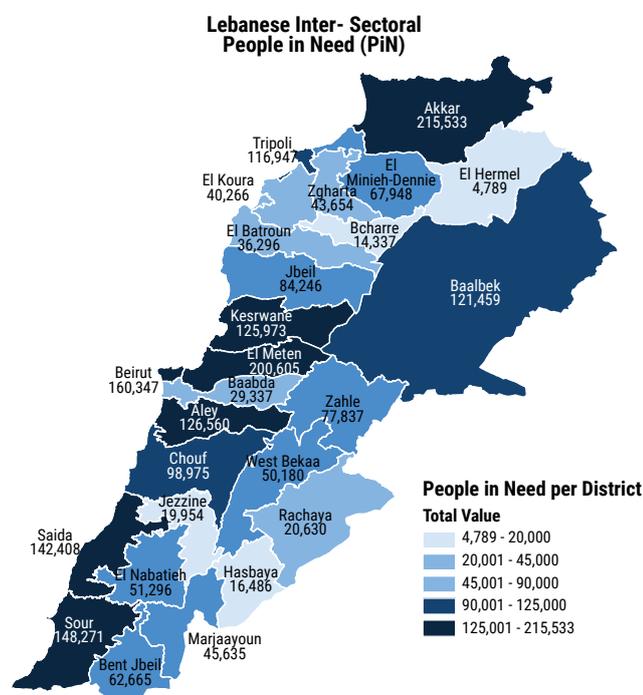
To cope with the situation, a common practice among households was to take on debt mainly to cover health and food expenses but also education, rent and utilities. Almost 70 per cent of the Lebanese households surveyed reported having borrowed money informally (from friends, relatives, landlord, shop owners) that had not yet been paid back.¹²¹ According to the MSNA, current total amount of debt in LBP (informal debt) not yet paid back by Lebanese households was around LBP 7.7 million on average (about \$ 193 at the exchange rate of LBP 40,000 to US\$ 1).

The latest Household Economy Analysis (HEA) study in Beirut, Akkar and Baalbek governorates conducted between March and May 2022 also found that the poorest households were unable to cover the cost

of basic needs, including education, healthcare and nutritious food, without taking on debt. They were being forced to spend more on food but also further decrease the quality and diversity of foods amid rising inflation.¹²² The recent IPC for Lebanon also shows that besides food and energy price inflation, key drivers of food insecurity among Lebanese households in most districts include the withdrawal of subsidies, depreciation of the domestic currency and unemployment. Based on the IPC January - April projection period, 1.46 million Lebanese are expected to have high food insecurity rates (IPC Phase 3 and above). Around 67 per cent of Lebanese households were also found to be using at least one negative livelihood-based coping strategy.¹²³

Limited access to services

Nearly one-third (31 per cent) of surveyed Lebanese households in the 2022 MSNA reported having at least one member with unmet healthcare needs, and the main barriers to health care reported by Lebanese households were the costs of treatment, consultation, and transportation to a health facility. The main health-related coping strategies included delaying or canceling hospital admissions, doctors visit or other treatment, switching to a public health care facility instead of private, or opting to manage with home remedy. Even so, the unaffordability and unavailability of medicine in the health facility (e.g. hospital primary



118 Ibid.

119 Ibid.

120 Ibid.

121 Ibid.

122 Save the Children (2022). Household Economy Analysis (HEA) Outcome Analysis: Beirut, Akkar and Baalbeck (March – May 2022) <https://reliefweb.int/report/lebanon/household-economy-analysis-hea-outcome-analysis-beirut-akkar-and-baalbek-march-may-2022>.

123 MSNA 2022.

health care center) or pharmacy are huge barriers (cited by nearly 40 per cent of households with unmet healthcare needs across all governorates).¹²⁴

A significant proportion (94 per cent) of Lebanese school-aged children were reportedly enrolled during the 2021-2022 school year.¹²⁵ However, the households with Lebanese children who had reportedly dropped out of school during the academic year cited unaffordable education related costs (including fees, transportation, education materials, and snacks), disability, and engagement of children in labour to support the family as the main reasons for this decision.¹²⁶

Specialized GBV services for women and girls seem to remain limited across all governorates, due to low awareness of the services and being out of reach to some households who cite financial constraints as the main barrier to accessing them.

Around 61 per cent of Lebanese households reported having access to a sufficient quantity of water to cover transversal needs (drinking, cooking, bathing, washing, domestic use).¹²⁷ All population groups including Lebanese face an increasing risk of discontinued access to water stemming from the worsening challenges affecting water supply in the country including persistent electricity and fuel shortages.¹²⁸

The most vulnerable households who cannot afford the cost of potable water are likely to resort to unsafe alternative drinking and domestic water sources, and this comes at a time the country is grappling with a cholera outbreak with cases spreading rapidly across most districts. Furthermore, around 27 per cent of households with a female member reported menstrual hygiene items were too expensive.¹²⁹

About 28 per cent of Lebanese households also faced difficulties in covering the cost of electricity supplied by EDL, private neighborhood generators, or household solar appliances because of reduced employment, financial or access/availability issues. To cope with this, many households have been forced to reduce their electricity consumption which in turn has implications on children's online learning, food storage and small home businesses.¹³⁰

Protection risks and harmful coping strategies

Notable protection concerns exist among vulnerable Lebanese men, women, girls, boys, and children with disabilities. The main safety and security concerns for both men and women in the community were almost similar, as reported by Lebanese households assessed, including fear of being robbed (around 28 per cent), as well verbal harassment (around 4 per cent for women), and kidnapping risks (around 3 per cent).¹³¹ For girls and boys in the community, the main concerns reported were risk of being robbed (around 21 per cent), and kidnapping (both around 4 per cent).¹³² Similar concerns were reported for children with disabilities, but with the fear of threats of violence and physical and verbal harassment being notably higher among them. The districts with the highest proportion of Lebanese households reporting safety and security concerns were found to be Baabda in Mount Lebanon governorate, Tripoli in the North governorate, and Zahle in the Bekaa governorate.¹³³

Also worrying is the phenomenon of child labour which is likely to be underreported among households and concerns remain that child marriage rates are likely to increase as households are forced to take desperate measures to cope with the economic situation.^{134,135}

GBV-related risks continue to negatively affect females, with one in ten Lebanese women and girls reporting streets, markets, and public transportation as public areas or facilities they avoid.¹³⁶ Access to specialized GBV-related services also remains uneven across districts, according to the data from partners reported in the GBV Information Management System (GBV IMS). The situation is particularly precarious for people with disabilities who face physical and other barriers in accessing these services and those few with caregivers, often dependent on them for daily support. The protection needs and risks for LGBTIQ+ individuals across populations remain high given the precarious legal, socio-cultural, and political context discrimination against people's gender identity, sexual orientation and sex characteristics.

124 Ibid.

125 Ibid.

126 Ibid.

127 Ibid.

128 Lebanon WaSH Sector (2022). When water becomes a privilege: the consequences of shutting down the public water system in Lebanon. <https://reliefweb.int/report/lebanon/when-water-becomes-privilege-consequences-shutting-down-public-water-system-lebanon>.

129 MSNA 2022.

130 MSNA 2022.

131 Ibid.

132 Ibid.

133 Ibid.

134 UNICEF (2022). Multidimensional Child Poverty: A qualitative overview of Lebanon. <https://www.unicef.org/lebanon/media/9071/file/Deprived%20Childhood%20Research%20Brief%20EN.pdf>.

135 UNICEF (2022). Deprived Childhoods: Child poverty in crisis-wracked Lebanon. <https://www.unicef.org/lebanon/media/9056/file/Deprived%20Childhood%20EN.pdf>.

136 MSNA 2022.

2.2. In focus: Migrant communities in Lebanon: Less migrants, greater needs

Population profile

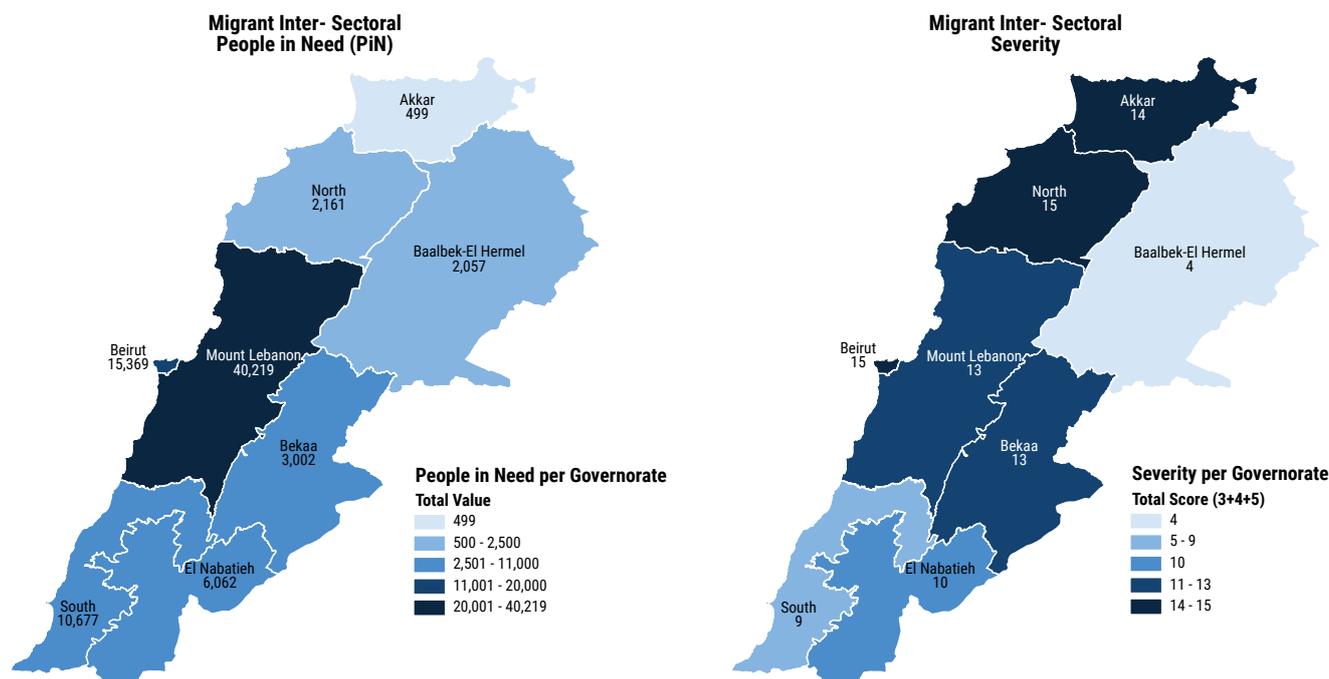
The migrant community in Lebanon has been heavily impacted by the crisis, and 35 per cent of the pre-crisis population is assumed to have left the country over the last two years. The remaining migrant population is estimated at a minimum of 135,420 migrants. The majority of migrants reside in urban areas, especially in Mount Lebanon (56 per cent) and Beirut governorates (18 per cent),¹³⁷ but migrants are present in all districts. With the crisis, and increase of live-out migrants and rental costs, there has been a significant shift from Beirut (81 per cent decrease) to Mount Lebanon (85 per cent increase) likely due to lower rent in these areas.

The migrant population in Lebanon is highly diverse, with a total of 84 nationalities identified in Lebanon, the majority being Ethiopian (37 per cent), Bangladeshi (22 per cent), and Sudanese (9 per cent) nationals.¹³⁸ According to IOM's most recent Migrants Presence Monitoring (MPM) conducted in 2022, 74 per cent of migrants are female. The female-to-male ratio varies by nationality: 99 per cent of Ethiopians and 97 per

cent of Filipino are female, while only 24 per cent of Egyptians and 26 per cent of Sudanese are female.¹³⁹

According to the 2022 MSNA results for migrants, migrant households are overall younger and smaller in size than the Lebanese and PRL households surveyed. The average age of migrant respondents is 34 years,¹⁴⁰ compared to 53 and 48 years old for Lebanese and PRL respectively, and the average household size is comprised of 1.5 people, compared to four in the case of Lebanese and PRL households. 70 per cent of migrants surveyed are living with their employer (henceforth referred to as live-in migrants),¹⁴¹ whereas 30 per cent of migrants live in rented apartments or have separate accommodation provided by their employer (henceforth referred to as live-out migrants).¹⁴²

Among all population groups, migrant households are significantly less likely to report disability in their families (5 per cent),¹⁴³ compared to Lebanese (22 per cent) and PRL (35 per cent). This could be attributed partially to the fact that migrants in Lebanon are overall younger, and the main reason for their migration to the country is to work, often with manual labor.



137 IOM Migrant Presence Monitoring, October 2022.

138 Ibid.

139 Ibid.

140 MSNA 2022.

141 Enumerators were unable to survey a larger percentage of live-in migrants in more wealthy areas of Beirut and Mount Lebanon due to a higher number of refusals from either the migrant or their employer. The percentage of live-in migrants is therefore likely to be underrepresented, and the number of live-in migrants compared to live-out migrants in the two most populous governorates might be higher.

142 Live-out migrants who have accommodation covered by their employer but do not live with the employer, mostly refer to migrants working for companies providing collective housing, doormen or night shift security guards provided accommodation in the concierge room of buildings.

143 Ibid.

Humanitarian needs and their contributing factors

The protracted multi-layered crises have affected all population groups. For migrants it has also significantly worsened protection risks, such as sexual exploitation, aggravated migrants' socio-economic situation, and exacerbated their exclusion from basic services. According to the MSNA for 2022, 72 per cent of migrants are considered in need, which is a significant increase from 42 per cent of migrants in need as per the MSNA of 2021.

Needs are particularly high in certain geographic areas – 61 per cent of migrant households in need of food are located in Beirut (70 per cent of male respondents in Beirut and 44 per cent of female respondents in Beirut).¹⁴⁴ Similarly, trouble meeting essential shelter needs are particularly high among (overwhelmingly male and live-out) respondents in Beirut (10 per cent) and Mount Lebanon (10 per cent).¹⁴⁵

Women represent 74 per cent of the migrant population in Lebanon. While many are engaged in domestic work, the deepening of the ongoing crisis has resulted in fewer opportunities for full-time, paid work. As less Lebanese can afford to pay for live-in, full time domestic workers, but still require part-time help, an increasing number of migrants have either chosen, or been forced to, live and work independently from an employer or sponsor, and rely on daily intermittent work to get by. This is particularly the case in Beirut and Mount Lebanon governorates where 46 per cent and 36 per cent respectively rely on daily intermittent work as their main source of income.

With the limited income generating opportunities and competition over resources and jobs, many are likely to accept unsafe or exploitative working conditions.¹⁴⁶ According to the MSNA, one in ten respondents (8 per cent) accepted unsafe or exploitative working conditions in the 30 days prior to the survey.¹⁴⁷

Living conditions for migrants vary greatly depending on their working arrangements (i.e. live-in, live-out), their gender, and whether their accommodation is provided by their employer (domestic worker's own room/quarter, concierge room, collective shelters). With the crisis, there is also an increasing trend of migrants working for accommodation only (e.g. night guardsman at buildings, domestic workers), having to

take multiple jobs to cover other basic needs and, if possible, that of their families at home.

Migrants are significantly more likely to face crowded living conditions than PRL or Lebanese. Migrants are either living in rooms/appartements (72 per cent) or in concierge's room in residential building (26 per cent), with as many as 62 per cent reporting that all household members live in one room.¹⁴⁸ 16 per cent of live-out migrants reported very poor living conditions such as insufficient space, insufficient sleeping mats/mattress and inability to keep warm or cool due to absence or dysfunctional temperature regulating devices and insufficient winter clothes.¹⁴⁹

58 per cent of migrants live with their employer or have their living arrangements covered for by their employer, while 11 per cent have informal verbal lease agreement.¹⁵⁰ For live-in domestic workers, this commonly means living with their employer(s), which could entail protection risks¹⁵¹ but remains the only legal working/living arrangement according to the current legal framework. With the current crisis however, an increasing number of migrant domestic workers have become live-out and are without sponsors as fewer Lebanese employers can afford a full-time, live-in migrant, while still requiring part-time help. For male migrants, some might be provided accommodation by their employer, often collective shelters or concierge rooms. Work in-kind for accommodation (not in addition to pay, but as a substitute), while not the norm or regulated by the current legal framework - is becoming more frequent.

Migrants, more than Lebanese and PRL, are more likely to lack documentation and legal residency, without which they cannot exercise some of their most basic rights, including to return to their country of origin, access justice and basic services. 16 per cent of the surveyed migrant households have at least one family member not in possession of an ID document, compared to only 6 per cent in 2021, and to 2 per cent among PRL and Lebanese in 2022.¹⁵² For migrants the severity of not having documentation is also higher, as it puts them at immediate risk of detention and deportation. Recent research also shows a direct link between lack of documentation and an increase

144 MSNA 2022.

145 Ibid.

146 Ibid.

147 Ibid.

148 Ibid.

149 Ibid.

150 Ibid.

151 See for instance, Jasmin Lilian Diab, Banchi Yimer, Tsigereda Birhanu, Ariane Kitoko, Amira Gidey, and Francisca Ankrah, "Acknowledged but Forgotten: The Gender Dimensions of Sexual Violence Against Migrant Domestic Workers in Post-Crisis Lebanon", IMS Policy and Working Paper Series 2/2022. GIZ, The Mental Health and Psychosocial Wellbeing of Migrant Workers Under the Kafala System (2022). Lebanese American University, Arab Institute for Women, UN Women, ILO, IOM (2021). Migrant Workers' Rights are Women's Rights: Women Domestic Workers in Lebanon – A Gender Perspective.

152 Ibid. This is likely to be underreported, with Migrant Sector partners operational data indicating the number of migrants lacking valid documentation to be much higher (20-50 per cent).

in protection risks, such as sexual harassment, exploitation, abuse, exploitative working conditions.¹⁵³

Almost half of migrant households are struggling to make ends meet. 43 per cent of migrant households reported having trouble meeting their food needs due to the high prices of goods.¹⁵⁴ Furthermore, with the increase of the communication prices in Lebanon, 28 per cent of migrant households reported having difficulties meeting their communication needs (phone credit, provider costs) and 12 per cent have solely internet as network coverage to use the mobile phone most of the days.¹⁵⁵ For most migrants, phones and WiFi is a lifeline to their families back home, as well as their main source of information on availability of services (59 per cent of migrant households surveyed).¹⁵⁶

With the current crisis, an increasing number of migrants are stranded and unable to return to their country of origin, meet their basic needs, let alone, support their families back home, and potentially as many as a quarter of the population seek assistance to return home.

Migrant households have access on average to 13.5 hours of electricity per day. To cope with electricity shortage, 8 per cent reduced electricity consumption and 33 per cent reported have no ability to do any coping mechanism.¹⁵⁷ Migrants living with their employer, or having accommodation provided for by their employer, generally have better access to electricity with 19 hours per day, than live-out migrants (10 hours electricity per day). However, many live-out migrants de-prioritize paying for electricity (generator costs) as they work outside the home for large parts of the day, and the generators generally cut off at night.

A working population, still struggling to get by

Similar to 2021, 70 per cent of migrants rely on contracted employment as their main source of income. Additionally, 31 per cent of all migrants rely on, or supplement their income with, intermittent work. While most migrant households have at least one income-generating job, still 58 per cent of all migrants report inability to meet essential needs. For the unemployed migrants, increased competition for jobs or not enough jobs (64 per cent) were viewed as major obstacles preventing unemployed family members from finding work along with preference for other

nationalities (30 per cent) or expensive commuting cost (20 per cent).¹⁵⁸

The overall economic stresses and pressures felt by the migrant households directly impacts their capacity to buy food. Approximately half of the assessed migrant households (42 per cent)¹⁵⁹ reported difficulties to meet their food needs compared to 37 per cent in 2021. 20 per cent of migrant households reported selling goods (radio, furniture, television, jewelry), 30 per cent spent some or all of their household savings and 37 per cent reported buying food on credit one month prior to 2022 MSNA. 9 per cent of migrant households reported selling their productive assets and/or means of transport (sewing machine, wheelbarrow, car, bicycle, livestock), and many others reduced non-food expenditures on education (17 per cent), health (26 per cent) to buy foods for their families.¹⁶⁰

A lot of these coping mechanisms, along with receiving remittances, are not available to a large proportion of migrants who do not have savings, assets or the documentation to take up loans, and are therefore at greater risk of resorting to harmful coping mechanisms such as accepting exploitative working conditions and/or falling victims to trafficking.

Access to assistance remains limited

Migrants face specific barriers that make it harder for them to access humanitarian aid and are largely excluded from national social protection programmes. Findings from the 2022 MSNA indicate that only 9 per cent of migrants had received humanitarian assistance in the last 12 months prior to the survey, compared to 45 per cent of Palestine refugees and 19 per cent of Lebanese.

Just like last year, unaffordable costs related to treatment, consultation and transportation were still overwhelmingly reported as the main barriers in accessing health care by the 21 per cent of migrant households who reported having household members who needed to access health care. The main coping strategies adopted by households included going to the pharmacy instead of the doctor or clinic, delaying or canceling doctors visit or other treatment, or managing with home remedy.¹⁶¹

19 per cent migrant households surveyed reported not having enough water to cover personal hygiene

153 Jasmin Lilian Diab, Banchi Yimer, Tsigereda Birhanu, Ariane Kitoko, Amira Gidey, and Francisca Ankrah, "Acknowledged but Forgotten: The Gender Dimensions of Sexual Violence Against Migrant Domestic Workers in Post-Crisis Lebanon", IMS Policy and Working Paper Series 2/2022.

154 Ibid.

155 Ibid.

156 MSNA 2022.

157 Ibid.

158 Ibid.

159 MSNA 2022.

160 Ibid.

161 Ibid.

compared to 10 per cent last year. Comparably to Lebanese and PRL, 29 per cent of migrant households considered menstrual materials are too expensive and 24 per cent relied on less preferred types of hygiene items.¹⁶² However, 25 per cent of live-out migrant households (vs. 15 per cent of live-in migrants) reported sharing sanitation facilities with other households which raises important hygiene and protection concerns specifically considering the current cholera outbreak.¹⁶³

A population at risk

Protection risks among migrants pre-date the current crisis.¹⁶⁴ Indeed, many migrant workers in Lebanon were, and continue to be, routinely subjected to violence, exploitation and abuse, including human trafficking. Their vulnerability is exacerbated by the Kafala system and the fact that many migrant workers, such as domestic workers, are not protected by national labour legislation.

Migrant girls and women avoid or feel unsafe on the street/in the neighborhood (66 per cent), in public transportation (25 per cent) and in markets (12 per cent).¹⁶⁵ And a recent study by Eгна Legna Besidet and Lebanese American University showed that 68 per cent of a total 913 migrant domestic workers surveyed in Beirut and Mount Lebanon are survivors of sexual harassment.¹⁶⁶ Male employers carried out the abuses in the majority of the cases (70 per cent), but other perpetrators outside the home/place of employment include taxi drivers (65 per cent of victims), and police officers (15 per cent of victims).¹⁶⁷

2.3. In focus: Increasing vulnerabilities of Palestine refugees in Lebanon

Population profile

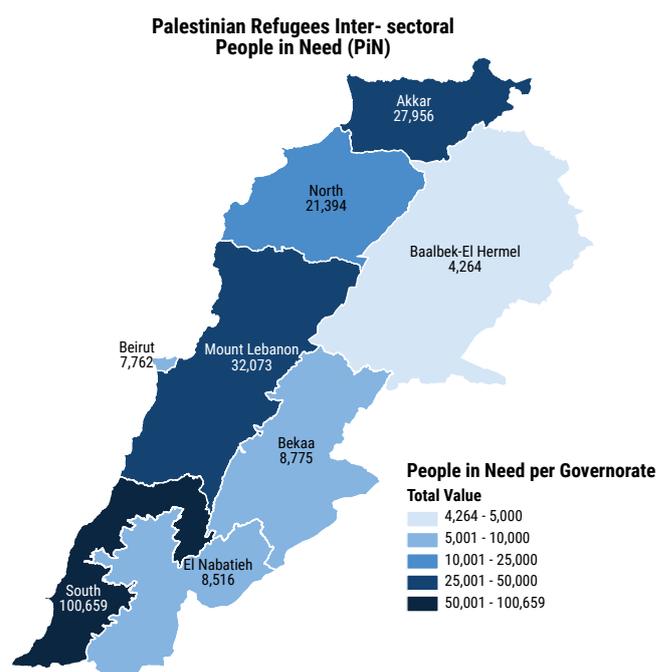
Despite their longstanding presence in Lebanon, Palestine refugees¹⁶⁸ remain excluded from key aspects of social, political and economic life in the country. They have very limited social and civil rights, restricted access to the government's public health or educational facilities, and no access to public social services. Restrictions are also applied to the

right to work. The majority of Palestine refugees in Lebanon live in one of the 12 official camps or in the unofficial gatherings, usually in the vicinity of the camp (approximately 53 percent of Palestine Refugees live in one of the 12 official camps). The camps in Lebanon are characterized by overcrowding, substandard shelters and infrastructure, high rates of unemployment and poor health, all contributing to endemic poverty and social marginalization. Despite these poor conditions, rents are rising forcing some families to voluntarily move to lesser-standard or shared accommodation in the face of eviction.¹⁶⁹

As explained in the previous joint needs analysis document, the profile of PRL households is very similar to the Lebanese households on many fronts: as per the MSNA, some 14 per cent of PRL households are female-headed, and 86 per cent are male headed.

Overarching Humanitarian Needs

UNRWA estimates that all 180,000 Palestine Refugees in Lebanon (PRL) require some form of humanitarian support, in addition to the 31,400¹⁷⁰ Palestine Refugees from Syria (PRS) that are currently registered in



162 Ibid.

163 Ibid.

164 IOM, Walk Free Foundation (2015). The Other Migrant Crisis: Protecting Migrant Workers against Exploitation in the Middle East and North Africa. See also: Lebanese American University, Arab Institute for Women, UN Women, ILO, IOM (2021). Migrant Workers' Rights are Women's Rights: Women Domestic Workers in Lebanon – A Gender Perspective. 165 MSNA 2022.

166 Jasmin Lilian Diab, Banchi Yimer, Tsigereda Birhanu, Ariane Kitoko, Amira Gidey, and Francisca Ankrach, "Acknowledged but Forgotten: The Gender Dimensions of Sexual Violence Against Migrant Domestic Workers in Post-Crisis Lebanon", IMS Policy and Working Paper Series 2/2022.

167 Ibid.

168 There are four groups of Palestinian refugees in Lebanon: 1. Palestine Refugees in Lebanon (PRL) who are descended from those who lived in Palestine during the period 1 June 1946 to 15 May 1948, and who lost both home and means of livelihood as a result of the 1948 conflict; 2. Those not registered with UNRWA who were displaced as a result of the 1967 and subsequent hostilities, and who are registered with the Lebanese Government (referred to as "Not-Registered" or NR by UNRWA); 3. Palestinian refugees who lack identity documents and are neither registered with UNRWA nor with the Lebanese authorities (referred to as "Non-IDs"); and 4. Palestinian refugees from Syria (PRS), who have arrived in Lebanon since 2011 and who may or may not have regular status in Lebanon (referred to as PRS). For the purposes of this report.

169 UNRWA LFO Protection Monitoring Q2 2022.

170 The current figure (as of November 2022) shows there are 31,400 PRS residing in Lebanon.

Lebanon with UNRWA. As in the case of migrants and Lebanese, their needs remain often unaddressed.

Similar to Lebanese families, the socio-economic situation is having severe impact on PRL households. MSNA data highlights that Palestine refugees face particular difficulties meeting their food needs 63 per cent report being unable to meet these needs, 52 per cent reported being unable to meet their health needs and 37 per cent have difficulty to access electricity because of lost or reduced employment, financial or access/availability issues.¹⁷¹ UNRWA's bi-annual High Frequency Monitoring Report notes that 93 per cent of Palestine Refugees in Lebanon are living below the poverty line as of September 2022, a sharp increase from the 73 per cent reported in July 2021.

Due to soaring costs, telecommunications are also becoming inaccessible to many since the rise in prices, with 21 per cent of PRL households lacking network coverage to use the mobile phone most days, and 19 per cent reported having access to only internet coverage.¹⁷² That said, UNRWA's Q3 2022 Protection Monitoring report suggests that Palestinian refugees are prioritizing retaining at a minimum their WhatsApp accounts. Limited connectivity could add additional accountability concerns due given potential interruptions in two-way communication channels between affected people and the aid community.

According to MSNA data, PRL households reported having on average 13 hours of electricity per day from the government, private generators and/or neighborhood generators, similar to migrants and Lebanese. PRL reported households adopted several coping mechanisms to deal with the shortage of electricity - similar to those of Lebanese households - who reported reducing money spent on other items in order to cover electricity bills, in addition to reducing electricity consumption.

Palestine Refugee camps have seen a considerable population growth in the last decade, mainly due to the influx of Syrian refugees, including Palestinian Refugees from Syria (PRS) fleeing the civil war in Syria, as well as other refugees, migrants and vulnerable groups. This has posed additional and serious challenges to the existing ones faced by PRL, placing a burden on already severely limited resources.

Poor shelter conditions remain a great concern for this population. As per MSNA data, although only 2 per cent of PRL households reported living in agricultural areas, engine or pump rooms, or on active constructive sites, most of the families' reported damage to or structural

defects in their shelters that make them unsuitable for long-term living. For example, 14 per cent reported damaged structures, and 30 per cent leaking roofs, and 21 per cent reported a lack of insulation from the cold. Furthermore, the living conditions inside the shelter are poor and overcrowding is common. 11 per cent of PRL households reported living in one room, 10 per cent of PRL families reported that at least one member of the household has to sleep outside or on the floor.

It is also worth mentioning that the overall environment in the Palestinian camps and gatherings remains insecure in 2022 with potential escalation of disputes into armed violence. According to UNRWA Q3 Protection Monitoring, feelings of insecurity among Palestinian refugees intensified as petty theft has increased in the camps, including muggings, coupled with ongoing sporadic violent incidents usually involving inter-personal disputes.

Employment and Income

Finding a job is a shared concern among all population groups who reported increased competition for jobs, citing the high cost of transportation to reach their work location and a noted preference on the part of employers to hiring other nationalities. All these factors create further obstacles to securing employment.

With regard to the main source of income for PRL households, MSNA data noted that there is a 48 per cent reliance on intermittent work and 23 per cent reliance on international remittances.¹⁷³ UNRWA also notes a strong reliance on cash assistance amongst its target populations.

Palestine refugee households' monthly expenditure is reported to have reached LBP 5.5 million in September 2022. In the face of these severely elevated cost, borrowing money informally is the main coping mechanism reported by all population groups including PRL households to cover healthcare, food, education and electricity bills.¹⁷⁴ 46 per cent of Palestinian refugees reporting taking on debt in the last three months.¹⁷⁵

Food Security

Among PRL households participating in the MSNA, 71 per cent reported that food was the primary reason for taking on debt, a significant increase of 52 per cent from 2021. Respondents to UNRWA's September 2022 Crisis Monitoring reported that monthly expenditure on food had increased from 39 to 45 per cent. From Q2 2022 to Q3 alone, the cost of the basic food basket

171 MSNA 2022.

172 Ibid.

173 MSNA 2022.

174 Ibid.

175 UNRWA Crisis Monitoring Report – High Frequency Survey Results, September 2022.

in the Palestinian camps rose by 25 per cent from an average of LBP 823,000 to LBP 1,025,000.

As a result, a total of 62 per cent of Palestine families report having reduced the number of meals consumed within the 7 days preceding the survey, and 53 per cent of families have reduced the quantity of food within meals. A total of 89 per cent of households purchased leftovers from the market and 35 per cent reported seeking assistance or borrowing foods from family.¹⁷⁶

Limited Access to Basic Services

According to the MSNA, the main barriers reported by PRL households in accessing health were the costs related to treatment (46 per cent), absence of functional health facility in the nearby area (25 per cent) and unavailability of the specialized treatment or device needed (23 per cent). Compared to the Lebanese population, the main coping strategies adopted by households included switching to a public health care facility (53 per cent), going to the pharmacy instead of the doctor or clinic (23 per cent), or delaying or canceling doctors visit or other treatment (21 per cent). Like 2021, almost 60 per cent of PRL households in all governorates reported they did not access the needed medication because it was too expensive and unavailable in private pharmacies. Deteriorating economic conditions also mean that more households are turning to other UNRWA services, which are in turn under increasing pressure, particularly given shortfalls in the agency's budget.¹⁷⁷

Demonstrating a slight increase from last year, 88 per cent of PRL children were reportedly enrolled in school during the 2021-2022 school year, as per MSNA data. Among those not enrolled, 32 per cent could not be due to their age, 10 per cent due to work, and 8 per cent due to a disability. These same barriers were also the key drivers of school drop-out during the 2021-2022 academic year.

Compared with Lebanese and migrant households, PRL households responding in the MSNA across the country reported having insufficient access to water to meet their personal hygiene needs (20 per cent) and their domestic needs (46 per cent) such as cleaning. To cope with this lack of water, PRL households - similar to Lebanese households - reported fetching water at a source further away than usual and reducing water consumption wherever possible. However, PRL households (18 per cent) were the only population group who reported reducing water consumption for drinking as a coping mechanism.

Protection Risks

Similar to Lebanese and migrants, Palestine Refugees were also obliged in 2022 to prioritize their basic needs. Palestine refugee families reported buying food on credit and spending some or all of their household savings to buy food, similar to many Lebanese and migrant households. In addition, many PRL households also reported reducing non-food expenditures on health (22 per cent) and education (19 per cent) in order to have money to buy food.¹⁷⁸

Child labour remains a risk for all families facing economic and financial problems. MSNA found that 3 per cent of PRL households reported involving school-aged children in income generation activities to cover food needs of the family. However, these figures are likely underreported. Furthermore, the trends of accepting high risk and dangerous working conditions among all population groups including PRL households (6 per cent) is an alarming protection concern.¹⁷⁹ The risk of child marriage stands at 2 per cent of PRL households in 2022 reporting marrying children to cope with the crisis, a significant increase from 0.72 per cent in 2021. That said, UNRWA Q3 2022 Protection Monitoring noted that child marriage figures have not increased further this year, most likely linked to the fact that families cannot afford the costs associated with marriage.

Palestine refugee women and girls are likely to be more exposed to safety and security incidents. MSNA found that amongst PRL, three-quarters of had reported such incidents, compared to a third or less of Lebanese and migrant women and girls. It is understood that this results from their refugee status and associated living conditions. Being robbed, verbally harassed and kidnapped were the main concerns reported in the MSNA by PRL women and girls with sexual harassment increasing from 8 to 10 per cent this year and reaching 27 per cent for PRL children. As a result, many women and girls avoid markets (71 per cent), certain neighborhoods (45 per cent), and public transportation (18 per cent) because they feel unsafe, as found in the MSNA.

It should also be noted that key government departments including the Department for Political Affairs and Refugees (DPAR) have been regularly closed, complicating civil registration, which is critical to maintaining legal status and, for PRL, is needed for access to UNRWA services. It has been reported that people are increasingly turning to brokers to facilitate access to these and other Government services; this option is unaffordable for many Palestinian refugees.

176 UNRWA Crisis Monitoring Report – High Frequency Survey Results, September 2022.

177 UNRWA Protection Monitoring Q3 2022.

178 MSNA 2022.

179 Ibid.

PRS without residency or those without regular legal status in Lebanon (known as non-IDs), are particularly vulnerable as they struggle to obtain or renew residency permits.¹⁸⁰ Over half of all PRS in Lebanon are thought to be without residency rights and are therefore restricted in their movements and ability to gain employment. This has a profound effect on the well-being of PRS families and only compounds their above-mentioned difficulties.

All the above have led to growing numbers of Palestine refugees attempting to emigrate from Lebanon through irregular boat movements increased sharply over the quarter. A reflection of growing desperation, irregular boat movements continue to lead to the tragic loss of life. This includes the recent sinking of a boat off the coast of Syria in late September in which at least 94 individuals died. 13 Palestinian refugees are known to be amongst the dead and nine remain missing, with many of those residents of Nahr-El-Bared camp. This incident has had a profound impact on a close-knit community. Refugees report that dire socio-economic conditions and a lack of hope about a future in Lebanon are largely driving attempts to emigrate.¹⁸¹

2.4. In focus: Needs of Displaced Syrians

Population profile

The current estimated population of displaced Syrians in Lebanon is around 1.5 million,¹⁸² including 760,130 women and 739,870 men. Among them, around 45 per cent are children under 15 (687,130 children) and 2.3 per cent are older people above the age of 60 (35,920). According to the 2022 VASyR data, the average Syrian household in Lebanon has five people, while 18 per cent of households are female-headed. Almost one in three Syrian households assessed reported having at least one member living with a disability, with no gender difference in the proportion of disabilities recorded. Women (and FHH) are more often widowed, divorced or separated than men and MHHs. FHHs more often are single parents and include older people.¹⁸³

Socio-economic vulnerabilities, employment and reduced incomes

In 2022, families across Lebanon continued to face depleted purchasing power, affecting vulnerable peoples' ability to meet their basic needs. 94 per cent of Syrians surveyed through Protection Monitoring in

2022 reported that they had difficulties buying food due to lack of money, while 81 per cent reported an inability or increased difficulty in paying rent.

Displaced Syrians are among the hardest hit by the ongoing economic crisis. 55 per cent of Syrians within the working age group remain outside the labour force, with women LFPR as low as 19 per cent. Construction and agriculture are the two main employment sectors in which displaced Syrians can engage, yet many of those working are still unable to cover the costs of their food and non-food essential needs. On average, Syrian households were only making 21 per cent of the monthly SMEB value from employment at the time of the VASyR data collection. The unemployment rate stands at 33 per cent, while the LHPR stands at 45 per cent.¹⁸⁴

90 per cent of Syrian households live below the SMEB, when excluding assistance.¹⁸⁵ 59 per cent of household expenditures are represented by food, gas, rent, hygiene and electricity. The average expenditure per capita per month (cash only) is LBP 1,179,961. When including credit, this rises to LBP 1,575,613. The credit taken for consumption increased the average debt per household to a crippling LBP 12,008,549,¹⁸⁶ compared to LBP 3,430,208 in 2021.¹⁸⁷ Food (93 per cent of the cases) and rental costs (46 per cent of the cases) are the most frequent reasons for debt accrual. The most frequent sources of borrowing are friends in Lebanon (in 85 per cent of the cases) and supermarkets (52 per cent).¹⁸⁸ The quality of food consumption decreased in 2022: 43 per cent of Syrians¹⁸⁹ had an 'acceptable' food behaviour, compared to 54 per cent in 2021 and 51 per cent in 2020.

Food insecurity and coping strategies differ for FHH and MHH. FHH are more food insecure and dependent on assistance and/or support from friends or relatives for their food security, while MHH are highly dependent on debt. Across all food consumption indicators, FHH were more likely to be food insecure (77 per cent) than MHH (65 per cent) and they depend heavily on assistance for their food security: FHH under the SMEB rises from 61 per cent to 84 per cent when assistance is removed from the calculation. On the other hand, MHH report owing three times the amount of debt owed by FHH per household and twice as much debt per capita, the majority of which they have taken on to purchase food.

180 UNRWA protection monitoring, Q2 2022.

181 UNRWA protection monitoring, Q2 2022.

182 Planning figure for the Lebanon Crisis Response Plan (LCRP), endorsed by the Government of Lebanon.

183 VASyR 2022.

184 VASyR 2022.

185 Ibid.

186 Ibid.

187 VASyR 2021.

188 VASyR 2022.

189 Ibid.

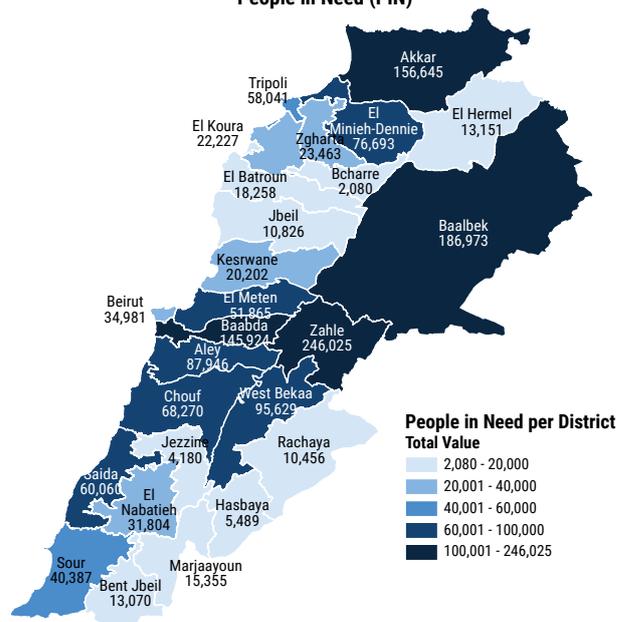
Limited access to services

Of the Syrian households surveyed through the VASyR 2022, 48 per cent reported to have at least one member with a health issue, while 18 per cent of displaced Syrian individuals reported that they had health problems that required healthcare in the last three months. Out of the accessed healthcare services, 38 per cent were reported to be delivered through PHCs, 21 per cent through a private clinic or other private medical facility and 18 per cent in a pharmacy. Individuals reported that one of the main coping mechanisms to address barriers to accessing healthcare is to go to the pharmacy instead of the doctor or clinic, with a high in Baalbek El Hermel (48 per cent of the respondents resort to this coping behaviour).¹⁹⁰ Based on the VASyR, Syrian women were less likely to have received the COVID-19 vaccine. Overall, 34 per cent of individuals had received the COVID-19 vaccine with men (38 per cent) more likely to have received one or more shot than women (30 per cent). However, members of FHH (57 per cent) were more likely to have received at least one dose of the COVID-19 vaccine than members of MHH (46 per cent), suggesting men may have been prioritized within the households for the vaccine and that health risks remain for Syrian women in regards to COVID-19.

VASyR data also confirmed that the main barriers to access medication are the cost of the medication (63 per cent of the cases), and the cost of doctor visits to obtain a prescription (36 per cent). The main coping mechanisms to address those barriers are switching to substitutes / generics (50 per cent), borrowing money to afford medication (35 per cent) or rationing existing medication (25 per cent). Only half of Syrian women had more than four antenatal care visits (WHO recommends eight). Most of the women surveyed (92 per cent) had given birth in a health facility, but there was significant governorate variation – with Akkar and North with the highest prevalence of births at home.¹⁹¹

Amongst Syrian households, 56 per cent reported insufficient or barely sufficient water for washing and domestic purposes,¹⁹² a noticeable spike compared to 33 per cent in 2021.¹⁹³ Bottled water remains the highest drinking water source amongst all population groups, except for Syrians living in ITS who rely primarily on trucked water. Access to sanitation and hygiene items remain constrained, particularly for households living in substandard shelter conditions.

Displaced Syrian Inter- Sectoral People in Need (PiN)



70 per cent of displaced Syrians live in residential and ten per cent in non-residential shelters while 21 per cent live in non-permanent structures in informal settlements. Overall, fifty-eight per cent of displaced Syrians live in inadequate shelter conditions distributed across the three shelter types with the highest percentage of inadequacy (78 per cent) found in ITS.¹⁹⁴ With regard to education (formal and non-formal), the learning attendance rate compared to 2021 increased slightly. For children aged 3 to 5, the attendance rate records 15 per cent in 2022¹⁹⁵ compared to 11 per cent in 2021. For 6 to 14, the attendance rate moved from 53 per cent to 60 per cent, while for 15 to 17 the rate is stable at 27 per cent. 16 per cent of the households think their child's school is unsafe.¹⁹⁶

Protection risks and harmful coping strategies

Just 17 per cent of displaced Syrians above 15 years old hold legal residency permits.¹⁹⁷ The number of households in which all members hold legal residency remained at 8-9 per cent in the last few years, compared 28 per cent in 2015 and 19 per cent in 2017. Young people are less likely to access residency, and women (as well as members of FHHs) have lower rates of legal residency in general.

24 per cent of newly wed couples are married with no legal documentation. The final step of birth registration at the Foreigner's Registry for children born in Lebanon increased to 36 per cent from 31 per cent in 2021,

¹⁹⁰ Ibid.

¹⁹¹ VASyR 2022.

¹⁹² Ibid.

¹⁹³ VASyR 2021.

¹⁹⁴ VASyR 2022.

¹⁹⁵ Ibid.

¹⁹⁶ Ibid.

¹⁹⁷ Ibid.

while very few births have no documentation. Like the previous years, the main reasons for not completing the full birth registration process includes associated costs followed by lack of awareness of the procedures.

The reported rate of children engaged in child labour stood at 4 percent in 2022, with mostly boys between 12 and 17 having to work. Meanwhile, 22 percent of the girls between 15 and 19 are currently married,¹⁹⁸ an increase of 2 per cent compared to 2021, with the highest incidence in the Beirut area.

Tensions between renters and property owners are increasing: eviction threats increased from 5 per cent

in 2021 to 7 per cent in 2022, with the overwhelming reason given by respondents as the inability to pay rent. 4 percent of Syrian households¹⁹⁹ reported a curfew specifically imposed on Syrians in an area where they live (compared to 5 per cent in 2021). The primary drivers of community tensions are competition for jobs (in 28 per cent of the cases),²⁰⁰ political or cultural differences, and others. 18 percent of Syrian households believe it's unsafe for women and girls walking alone in the area at night. The main safety concerns for girls, women, boys and men identified were bullying, harassment, robbery, and kidnapping.²⁰¹



Credit: CARE/Paul Assaker, Minieh- Lebanon

198 Ibid.

199 VASyR 2022.

200 Ibid.

201 Ibid.

Part II: Risk Analysis and Potential Evolution of Needs

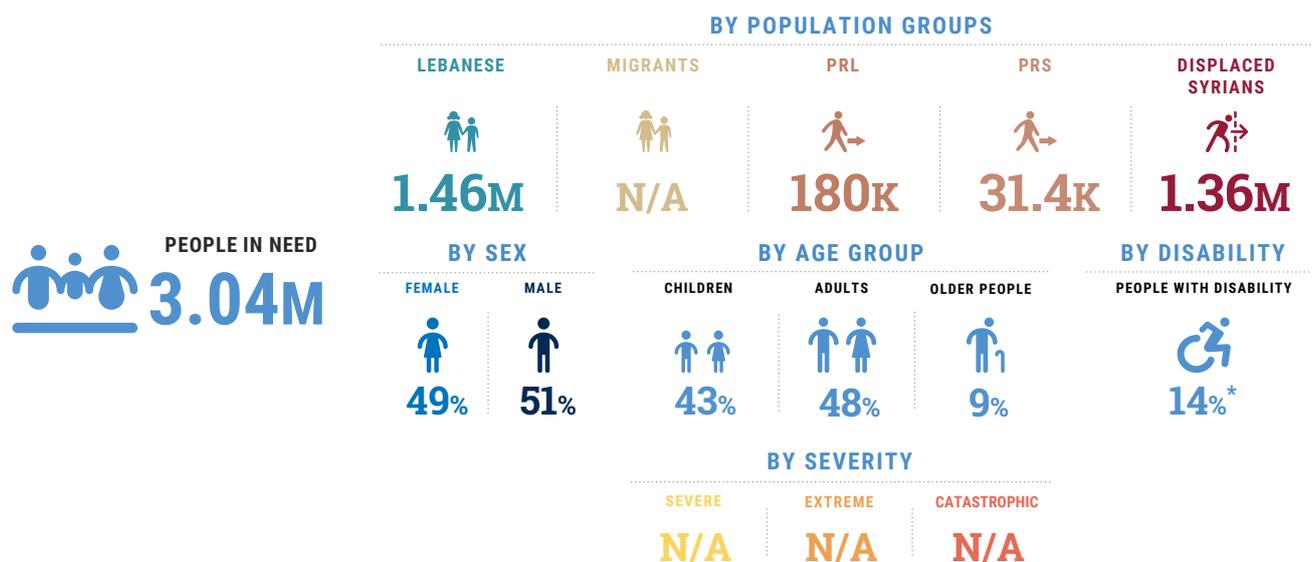
As part of the preparedness efforts of the aid community in Lebanon, the Humanitarian Country Team has identified 3 major risks that have potential humanitarian consequences on all population groups in the country. A pool of emergency experts representing different sectors have identified the indicators and their potential impacts that require preparedness and response planning.

In view of such continued political impasse and lack of structural reforms, and in line with documented growing needs and anticipated forecasts, included by development actors, the humanitarian situation in Lebanon is not expected to improve throughout 2023-2025.

| RISKS | POTENTIAL HUMANITARIAN IMPACT |
|--|--|
| Economic (Disruption of remittances, further devaluation of the LBP, hyperinflation, breakdown in fuel supply chain, major shortages of essential goods, etc.) | <ul style="list-style-type: none"> • Interruption of Lifesaving humanitarian assistance. • Increase the adoption of harmful coping strategies by affected people • Further loss of purchasing power, particularly for people most in need specially to meet their food and basic needs. • Further increase of prices of goods and services including fuel, electricity, medicine, etc. • Limit the access of children and teachers to schools leading to learning gaps. • Violence causes interruption in schools and potentially leads to closure of schools and as a result increase of child protection and gender-based violence concerns. |
| Governance/Political (Major breakdown in basic services: water, health, education and telecommunication; political paralysis) | <ul style="list-style-type: none"> • Interruption of humanitarian activities. • Lack of access to affected people and interruption of two ways of communication with aid workers. • Decrease of student's attendance leading to high dropouts. • Increase in adoption of negative coping mechanisms by PiN. • De-prioritization of preventive health services and delayed hospitalization potentially worsen health indicators and increase mortality and morbidity rates. • Rapid spread of cholera outbreak all over the country, reliance on unsafe water sources and delay in seeking medical care potentially increasing morbidity and mortality. |
| Security | <ul style="list-style-type: none"> • Reduce humanitarian access, mainly access to affected people. • Further restriction on movement of people and in particular the displaced Syrian and migrants. • Drastic decrease in accessibility of affected people to basic services due to roadblocks or tensions. • Interruption in provision of life saving activities due to the attack targeting aid workers. |

Part III: Sector Analysis Chapters

3.1. Basic Assistance Sector



*Based on estimations of proportions of persons with disabilities among Lebanese and Syrians.

OVERVIEW

Under the basic assistance sector, 3,035,220 individuals need humanitarian assistance to meet their basic needs, including 1,487,258 women and 1,305,145 children. Since 2019, poverty levels across Lebanon have skyrocketed due to the on-going economic crisis. LBP has continuously depreciated since October 2019 impacting the price of goods and services while jeopardizing the purchasing power of individuals. CPI recorded an annual increase of 163 per cent from September 2021 to September 2022. This, coupled with a decrease in income generation and shortages in essential goods and services, has challenged the ability of vulnerable populations to meet their basic needs.

AFFECTED POPULATION

Lebanese: In September 2022, IPC Acute Food Insecurity Analysis was undertaken in Lebanon, which found that 1,460,000 Lebanese are expected to be facing high acute food insecurity in 2023. Food insecurity and socio-economic vulnerability are very much interlinked in this context. Assessments have shown that a little under three quarters of Lebanese

households were de-prioritizing health and education needs to save money for other expenses and 41 per cent had sold household assets. Lebanese families were also relying on remittances as a key income source to cover the cost associated with basic needs.²⁰²

Displaced Syrians: The 2022 VASyR estimates that 91 per cent of the total displaced Syrian population needs assistance to meet their basic needs. This equates to 1,365,000 individuals living in poverty. A large proportion of families were reducing spending on health and education as well as selling assets. According to the IPC results, 799,000 displaced Syrians are expected to be facing high acute food insecurity in the January-April 2023 projection period.

PRS: Based on the high levels of vulnerability among this population, all PRS are targeted for basic assistance, this includes 31,400 individuals who are registered with UNRWA.

PRL: Like PRS, due to high levels of vulnerability, all PRL are in need for basic assistance

202 World Food Program, Food Security and Vulnerability Analysis of Lebanese Residents, July 2022.

ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

Since 2019, Lebanon has been facing an unprecedented financial and economic crisis that is likely to rank among the top ten most severe crises globally, this has impacted all populations and communities across the country. Due to Lebanon's high reliance on imports for basic goods and commodities, the fluctuation and depreciation of the local currency has had a direct effect on prices in the country. SMEB have served as main indicators to monitor the costs of living in Lebanon. The price of the SMEB has increased by more than six times by September 2022, compared to June 2020, and has increased by 50 per cent in 2022 alone. Income generated through work was not able to compensate with the tremendous rise in prices. While average income among Syrians increased in 2022 (reaching an equivalent of US\$ 60), the rate was not commensurate with the increase in prices. MHHs had incomes that were 57 per cent higher than FHHs, and a smaller proportion of females, in general, were part of the workforce. A quarter of Lebanese employees were earning less than LBP 1,100,000 monthly, ie. less than 20 per cent of the SMEB. Inflation coupled with lack of income has pushed families deeper into poverty.

This is even more concerning for households that have specific needs and increased expenditures, namely, elderly and individuals with a disability who have higher medical needs and expenses than the average individual. The Lebanese elderly have been specifically highlighted as a particularly vulnerable group, linked to loss of value of money of pensions and savings. Children within FHHs may be at heightened risk of engaging in child labor due to the lower levels of income among women.

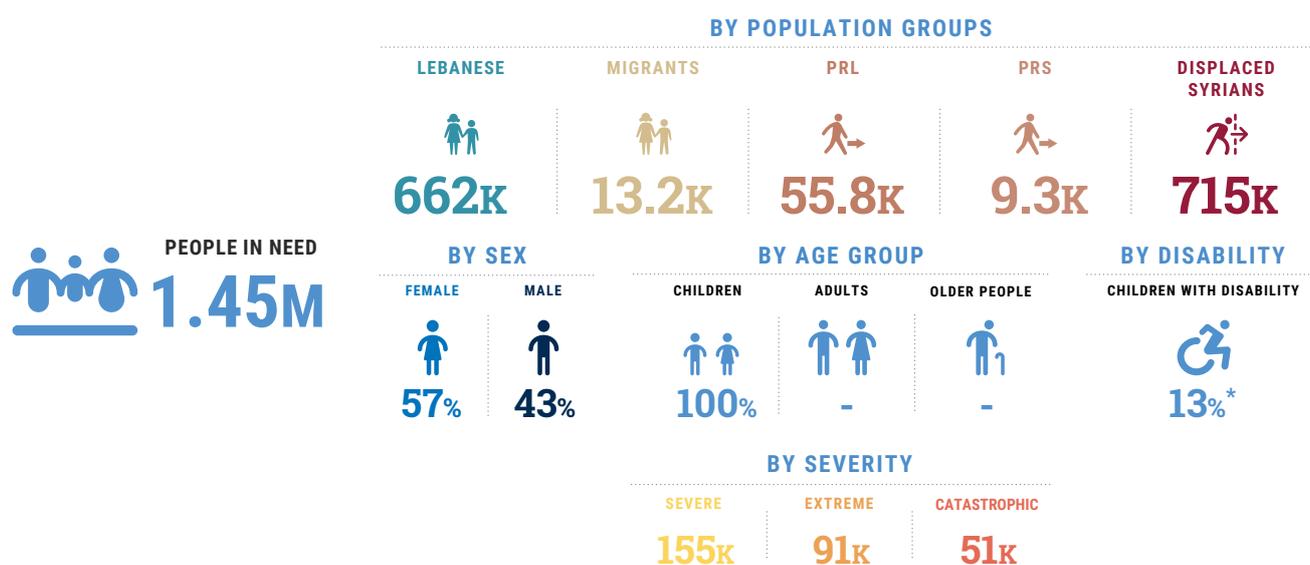
EVOLUTION OF SITUATION AND NEEDS

The expected deterioration of economic and social stability in the country in 2023 will inevitably pose further challenges and barriers to households' ability to meet their basic needs. Moreover, specifically for Syrians, coverage of cash assistance through multi-purpose cash support is expected to decline by at least 20 per cent. The IPC results for food insecurity for both Lebanese and Syrians show a deterioration in acute food insecurity in the first quarter of 2023, as compared to already high current levels.



Credit: CARE/Milad Ayoub, Tripoli- Lebanon

3.2. Education Sector



*UNICEF 2021 disability data global data survey

OVERVIEW

The socio-economic crises including the political instability, Beirut Port explosions, the protracted Syrian crisis, the COVID-19 pandemic, the depreciation of the national currency, in addition to global reduced funding for Lebanon, have impacted access to education in the country. Overall, it has taken a heavy toll on learning, preventing girls and boys from advancing in their education due to school closures amongst other reasons. Unaffordable or inaccessible basic needs have increased the vulnerability of households, leading to deprioritization of education and disrupting learning for the most vulnerable school-aged children across all population groups. Common negative coping mechanisms such as child labour, mainly affecting boys, and child marriage, mainly affecting adolescent girls, are depriving many of their rights to education. Competition for access to services has increased social tensions in the community: 29.6 per cent of Lebanese and 33 per cent of Syrians reported competition for services and utilities, of which 7 per cent of service-related incidents recorded were related to education. The economic crisis has also affected the wellbeing and motivation of teachers, and at school level, inflation has meant that services and supplies are more expensive than ever.

AFFECTED POPULATION

The most vulnerable children across all populations are those not accessing education at all, including

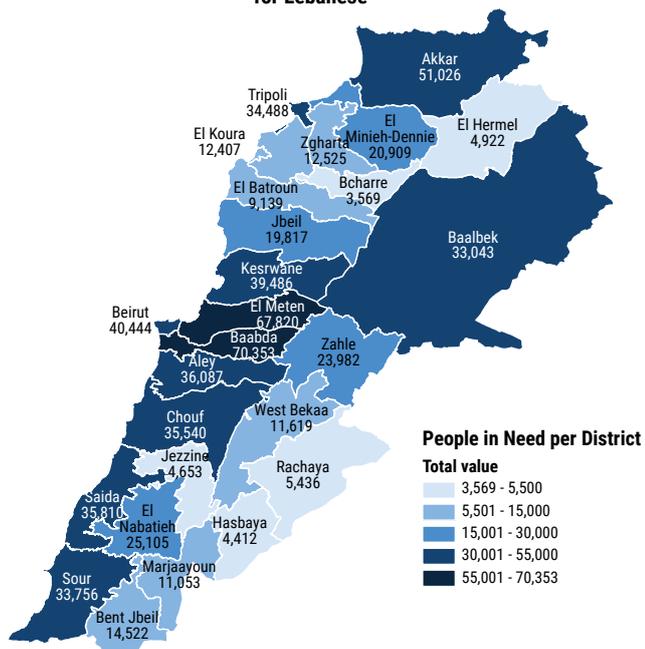
those with protection risks, those who have learning disruptions and low attendance due to negative coping mechanisms such as child labour and early marriage to help meet their families' basic needs, and those at risk of dropping out due to the increasing deterioration of the economic situation in Lebanon.

Based on the multidimensional poverty index,²⁰³ an estimated 1.45 million school-aged children are considered in need of support to access basic services, including education, of whom around 662,000 are Lebanese (52 per cent girls), more than 715,000 Syrians (51 per cent girls), around 13,300 migrants (73 per cent girls) and about 56,000 Palestine refugees (52 per cent girls). The findings of the 2022 VASyR reveal a dire situation, with nine out of ten displaced Syrians still living in extreme poverty. Refugees are struggling to pay for the basic life essentials including rent, food, and health care. Most refugees continue to resort to harmful coping strategies to survive, such as begging, borrowing money, not sending their children to school, reducing health expenses, or not paying rent.

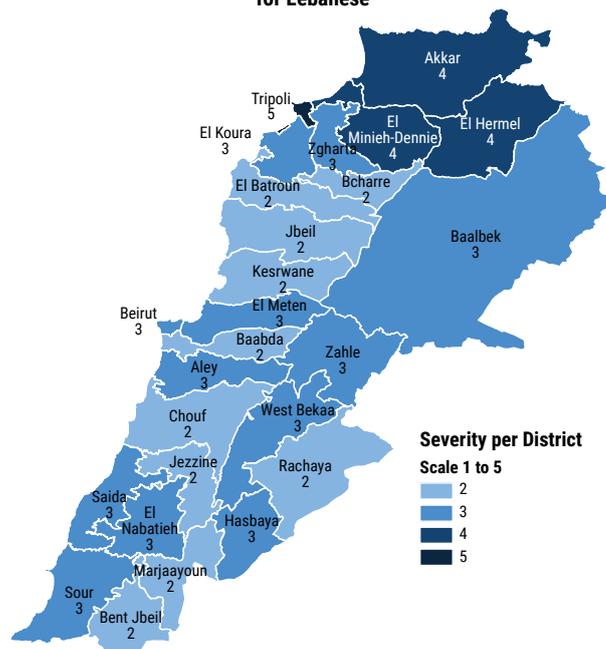
Of the 1.2 million Lebanese children, more than 10 per cent do not access education at all mainly due to economic vulnerabilities. Out of around 715,000 Syrian displaced children, more than 430,000 (which constitutes around 60 per cent) are out of formal education school, of which around 47,000 Syrian children were enrolled in various non-formal education programmes up to September 2022 (57 per cent being girls) in need of pathways to formal education.

203 Lebanon Multidimensional poverty index 2019 (March 2022), as well as World Bank group July 22, Lebanon Finance Review, Ponzi, Finance.

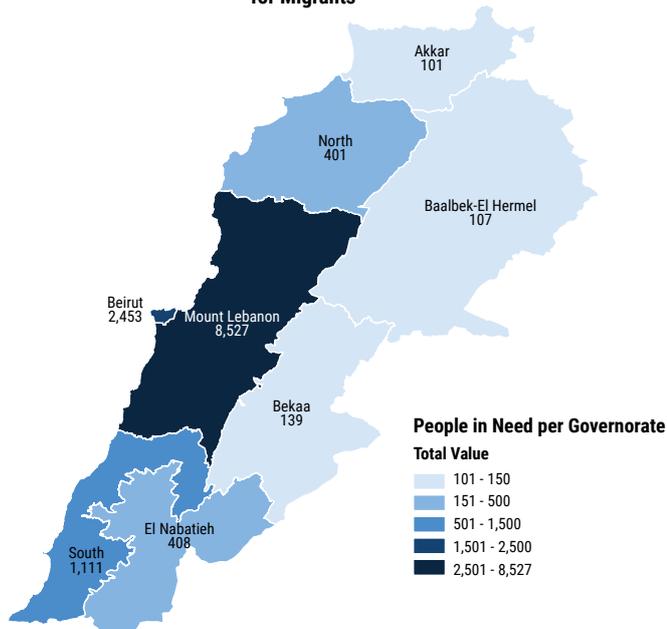
Education People in Need (PiN) for Lebanese



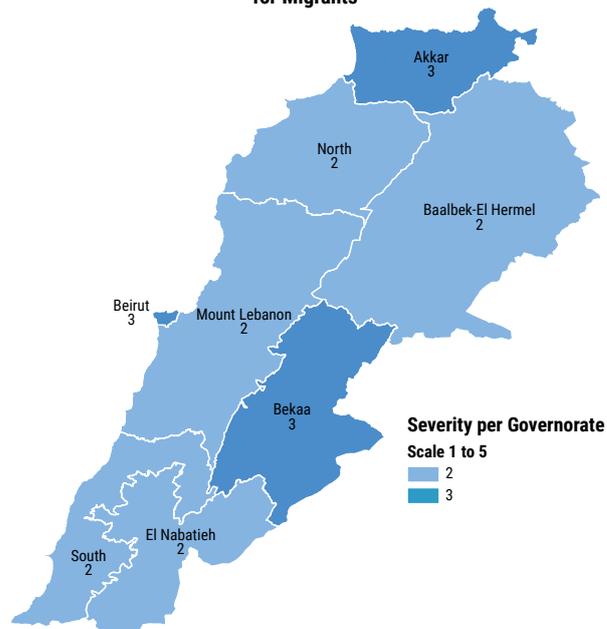
Education Severity for Lebanese



Education People in Need (PiN) for Migrants



Education Severity for Migrants



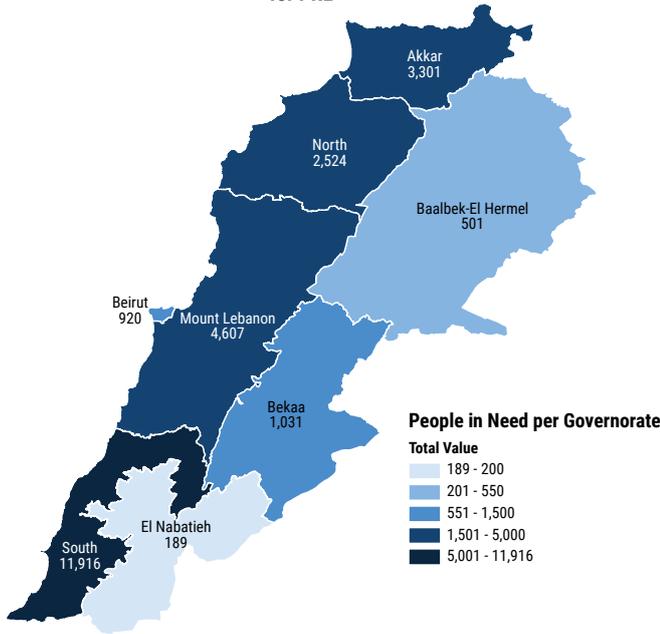
Children with disabilities are further vulnerable. Based on secondary data collection, around 300,000 children aged 0-17, a total of 13 per cent of this age group, live with disabilities. Of children with disabilities, 52.2 per cent are Lebanese, 33.8 per cent are Syrian, 3.2 per cent are Palestinian and 10.8 per cent are from other nationalities (including migrants). However, only 1 per cent of school-aged children with disabilities are enrolled in mainstream public schools in which access to inclusive education thus far remains limited. Around 72 per cent of displaced Syrian children with disabilities are not attending school while 29 per cent

of Palestinian refugee children with disabilities are not enrolled in any kind of education.

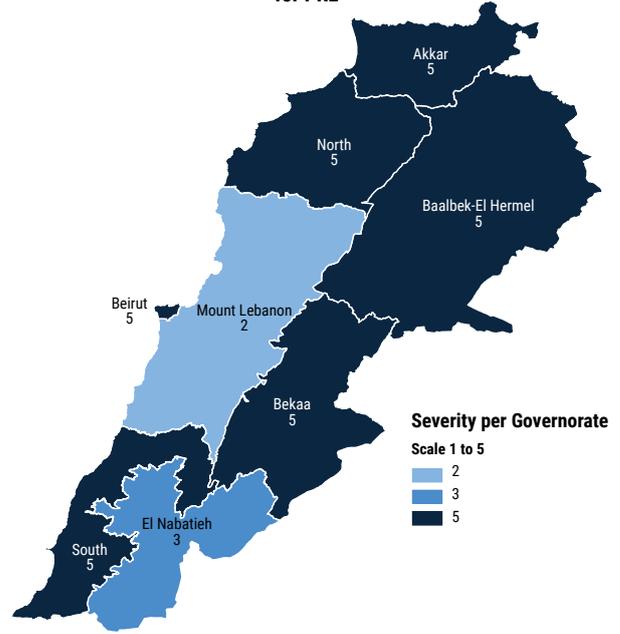
ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

The main driver of education-related vulnerability is poverty among all population groups induced by the economic crisis leading to the need for emergency education support. Adaptation and coping mechanisms include parents transferring their children from private to public schools in the last scholastic year (with an average of 13 per cent of Lebanese and 22 per cent of migrant households at national level

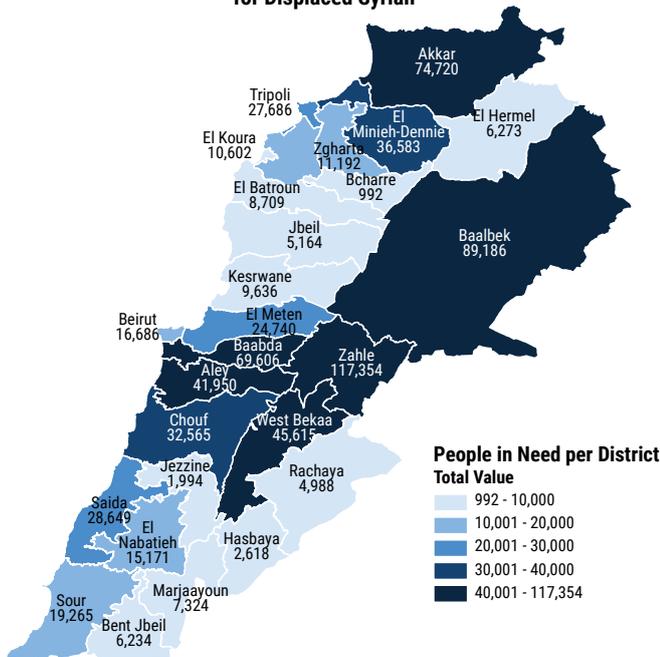
Education People in Need (PiN) for PRL



Education Severity for PRL



Education People in Need (PiN) for Displaced Syrian



This was also notable for UNRWA students moving from private schools to public schools. Children are also dropping out of school and engaging in negative coping mechanisms such as child labour (mainly affecting boys) and child marriage (mainly affecting adolescent girls), depriving many of their rights to education.

Among the displaced Syrian children who were enrolled in schools the most reported reasons for not attending school for children of both genders aged 3 to 17 were the cost of transportation to schools (34 per cent), an increase of 5 per cent compared to 2021, and the cost of educational materials (29 per cent). However, for boys, the main reason for not attending school was due to their engagement in child labour, with 31 per cent reporting that they are working. This was followed by the unaffordable cost of transportation (30 per cent). In contrast, only 5 per cent of girls reported not going to school due to work, while around 7 per cent reported not attending school due to marriage, with only 1 per cent of boys reporting this barrier. At the same time 8.2 per cent of households reported that school did not allow registration and/or enrollment, according to VASyR 2022. However, since the lifting of some of the administrative restrictions regarding registrations at the start of 2022-23 school year, increase in registration has been informed by MEHE among second shift school children serving mainly displaced Syrians.

For Lebanese and migrant children, according to 2022 MSNA data, the main reason for not being enrolled in school was the cost of education (registration fees, transportation to school, education materials, snacks,

having taken this action).²⁰⁴ The highest numbers were found in Marjaayoun (33 per cent), Hasbaya (27 per cent), Chouf (26 per cent) and Akkar (24 per cent). Despite this, the information provided by the Ministry of Education and Higher Education (MEHE) indicates that, while data around registration is still being collected, there is a noticeable decrease in the number of registered students in public schools at national level which emphasizes the vulnerability families are facing with limited understanding of the situation and the pathway of those who dropped out.

204 MSNA 2022.

etc.), at 52 per cent for Lebanese children and 28 per cent for migrant children (likely underreported being the reason for migrants children not attending school the lack of documentation/legal residency). Additionally, 3 per cent of Lebanese and 3 per cent of PRL children who were enrolled in school in the 2021-2022 school year did not attend school regularly (less than four days per week), again commonly due to the cost of education. Lebanese households also indicated another striking reason for children not attending school regularly, with 31 per cent reporting children were having difficulties with the curriculum, emphasizing the loss of learning that has resulted mainly from the COVID-19 outbreak to education which burdened the public education system with the challenges of distance learning for two consecutive years.

Young people who are not in NEET tend to be at higher risk of social exclusion, with little to no income and lacking skills to improve their economic situation. Thus, reducing the NEET requires effective school-to-work transitions, improved access to decent work conditions, and income generating opportunities. The NEET rate as per the ILO's latest report in 2021,²⁰⁵ among youth (15–24 years) from the most vulnerable households in Lebanon registered 62 per cent. The youth NEET rates were highest among displaced Syrians (72 per cent), followed by Palestinians (62 per cent), and Lebanese (51 per cent). According to this survey 33 per cent of

the youth NEET were in ages between 15-18 years, an age group covered by the Education sector response.

EVOLUTION OF SITUATION AND NEEDS

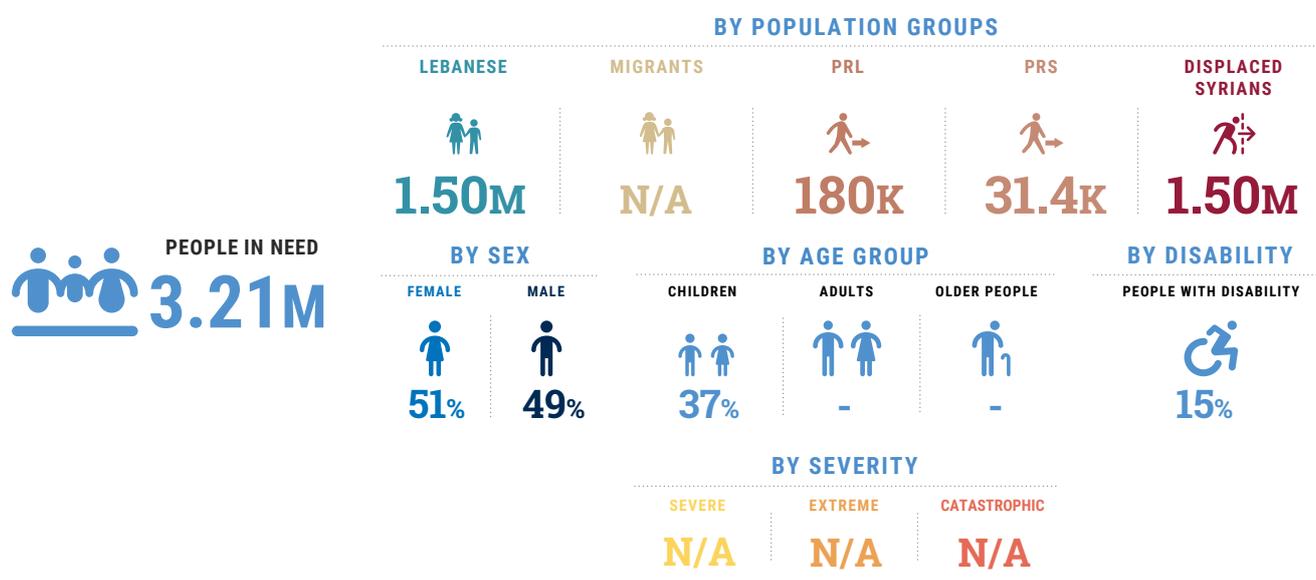
The combined impact of the crises has led to mounting challenges that are leading to increased vulnerability of school-aged children across all populations in Lebanon. These challenges mainly represent the increasing obstacles to accessing education due to high living costs and the difficulty in providing basic education needs, where many parents are prioritizing securing other urgent needs. Thus, disruptions in the education of the most vulnerable children are leading to increased risks of drop-out and an increase in negative coping mechanisms, which pose high protection and well-being risks on children. Additionally, the current deteriorated socio-economic situation has had a remarkable negative impact on the education system in the country, both in regards to wellbeing and therefore motivation of teachers as well as the increasingly burdened public school system and overwhelmed its capacity due to the shift of students from private to public schools. The cholera outbreak will further increase the needs of schools in terms of support for rehabilitation regarding WaSH in schools. As per VASyR 2022 findings, it is anticipated that competition for access to services related to education will continue to increase social tensions in communities and therefore the increasing need for conflict sensitive programming.



Credit: UNOCHA, TDH-IT/Jo Matar, Lebanon

205 Assessing Informality and Vulnerability among Disadvantaged Groups in Lebanon: A Survey of Lebanese, and Syrian and Palestinian Refugees Technical report, June 2021.

3.3. Energy Sector



OVERVIEW

The energy sector in Lebanon has been a significant burden on the national economy and people. Lebanon imports over 98 per cent of its primary energy into the country, exposing Lebanon to the full impacts of international oil price fluctuations. Moreover, it excessively relies on expensive and polluting fuel oil and diesel for most of the power demand. Given that energy is vital for all the essential public service provision, such as water, healthcares and education, all vulnerable population groups are equally in need of the support. However, from the viewpoint of conflict sensitivity, the energy interventions have historically focused on institution/community-level support (e.g. support to hospital/school), rather than at the household/individual-level. Regarding informal settlements, it should be noted that the Government of Lebanon’s policy is that no permanent infrastructure should be installed in informal settlements.

AFFECTED POPULATION

Over three million people across the country need support to have access to affordable and clean energy. The overall needs in the Energy sector have substantially increased due to the worsened economic crisis, surge of fuel price and decreased capacity of EDL as a public utility.

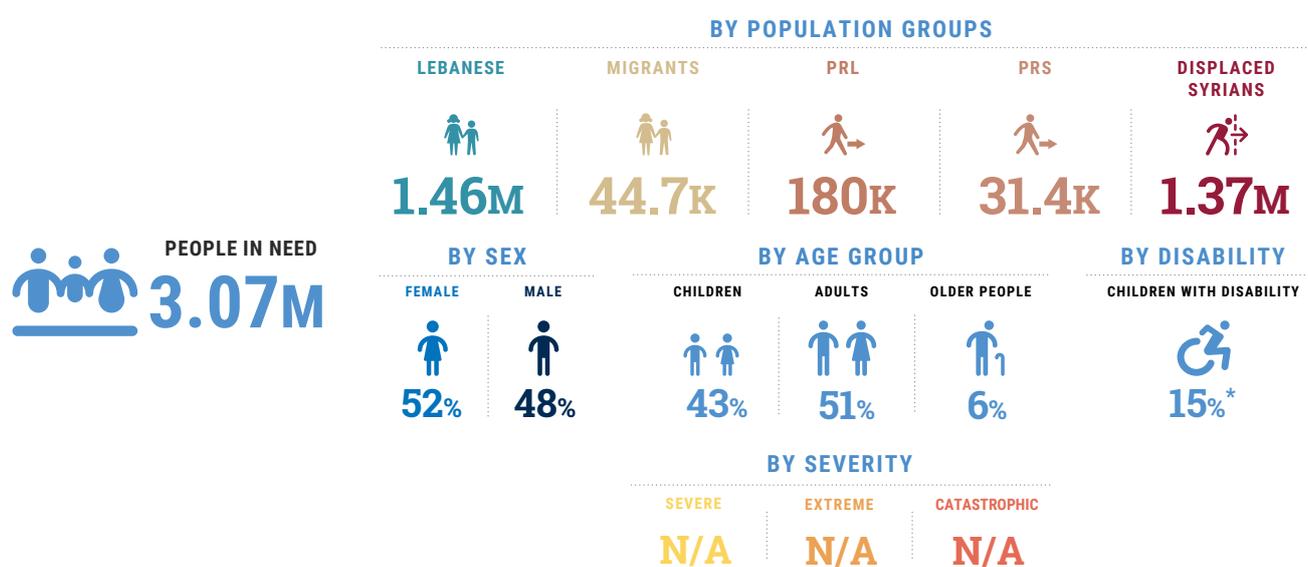
ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

An inability of the national utility, EDL, to provide reliable power, leads to the daily electricity outage across the country, as well as penetration of costly, polluting and unregulated private diesel generators. The situation has been exacerbated by the ongoing Syrian refugee crisis, and further impacted by the onset of the economic crisis in October 2019. Meanwhile, there has also been a sharp increase in the generator bill, largely driven by the war in Ukraine, the stable supply of electricity has become affordable for many populations in Lebanon. As a result, the energy-related needs in Lebanon have drastically increased across the different sectors to maintain essential services such as water, education and health.

EVOLUTION OF SITUATION AND NEEDS

The necessary energy sector reform remains to be implemented. Thus, the needs in the energy sector are expected to remain in 2023.

3.4. Food Security and Agriculture Sector



*The Washington Group Question, utilized in MSNA, recommends using as “a lot of difficulty” or “cannot do at all” in at least one domain as the cut off point for disability.

OVERVIEW

In Lebanon, 3.07 million people are in need of food security assistance. The situation continues to deteriorate over the years including by the impact in Lebanon of the crisis in Syria, the COVID-19 pandemic, the Beirut Port explosions and the economic and financial crisis. High and rising inflation, currency depreciation, discontinuation of state subsidies, wage disparity, limited jobs, political paralysis and deterioration of basic services have been identified as key drivers of food insecurity in Lebanon. Increasing inflation and additional currency depreciation are expected to further impact access to food and other basic needs and disrupt agricultural production and livelihoods. Overall, the highest levels of needs are reported in Akkar, Bekaa and Baalbek-El Hermel. Urgent action is required to reduce food gaps, protect and restore livelihoods and prevent acute malnutrition.

AFFECTED POPULATION

Lebanese: Based on IPC AFA for the projection period January - April 2023, 1.46 million²⁰⁶ Lebanese (38 percent) are expected to face high acute food insecurity (IPC Phase 3+). Households headed by women and with low education level, households with a member with a disability, and larger households are among those at most risk.

PRL and PRS: Around 200,000 Palestine Refugees (93 per cent of the population) in Lebanon are facing high poverty rates. Around 180,000 PRL and 31,400 PRS need food security assistance as a result of their inability to access food, basic needs and services.

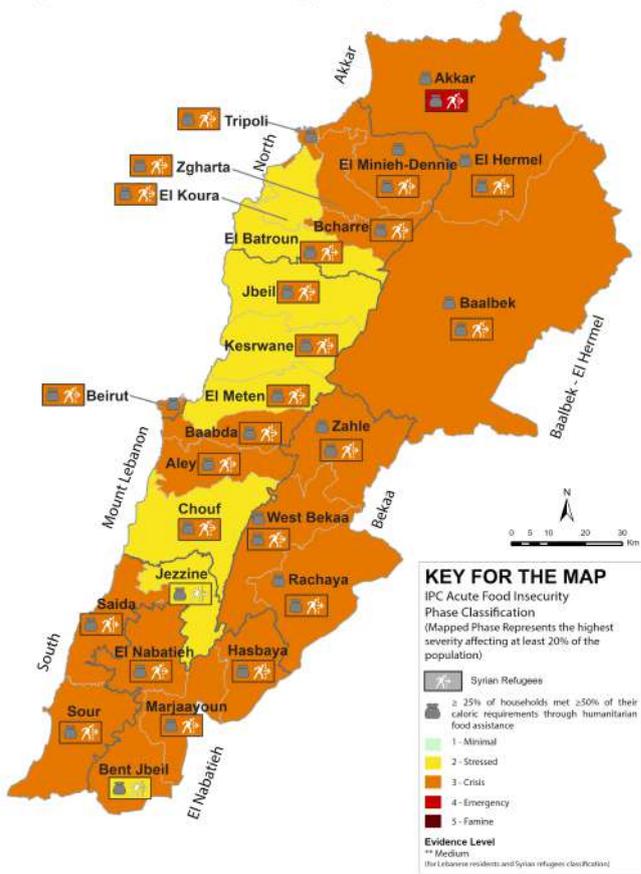
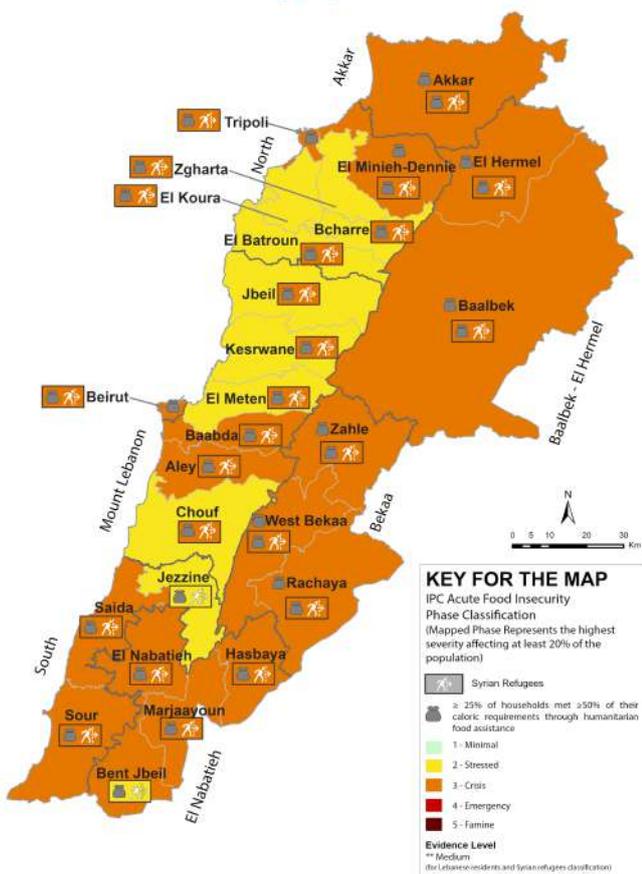
Migrants: Many migrants are reporting inability to meet their essential needs with around 45,000 migrant individuals (43 percent)²⁰⁷ are considered in need of food security assistance. The most vulnerable are the live-out migrants and single-mother migrants with children.

Displaced Syrians: Based on the IPC AFA Analysis, 53 percent of displaced Syrians (799,000 individuals) are classified in IPC Phase 3 or above for the period January – April 2023. Even though the IPC figures show high levels of food insecurity among displaced Syrians, given the high coverage of humanitarian assistance, the needs are higher. When excluding the value of humanitarian assistance, around 1.37 million²⁰⁸ displaced Syrians would be unable to meet the minimum basic needs and need food security assistance. Among the most vulnerable are female-headed households, households in non-permanent and non-residential shelters, households with no working members and households with at least one member with disability.

206 IPC 2022 – January – April 2023 projection.

207 Based on combination of HHS and rCSI – MSNA 2022.

208 Based on the number of people who fall under the Minimum Expenditure Basket (MEB)line – VASyR 2022.



ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

Lebanese: Based on the IPC projection, in January-April 2023, 19 out of the 26 districts have been classified as Phase 3 (crisis level), including two additional districts compared to 2022. The situation in Bcharre and Zgharta is expected to further worsen to crisis level. The highest incidence of food insecurity is expected in Akkar (65 per cent of Lebanese population in Phase 3+; 194,000 individuals), Baalbek (60 per cent in Phase 3+; 115,000 individuals) and El Hermel (60 per cent in Phase 3+; 16,000). The highest number of individuals in IPC Phase 3 and above is in Mount Lebanon Governorate, with a total of 403,000 individuals facing crisis levels of food insecurity.

Demographic factors such as a high dependency ratio, households headed by women, low education of the head of households, disability or a larger household size were negatively impacting both food consumption and coping strategies and increasing the likelihood of food insecurity. Food security contributing factors also include access to health insurance, receiving remittances from abroad and having an employed member in the household. Moreover, 57 per cent of Lebanese households have reported severe economic

challenges to access food, while 33 per cent could not meet their minimum dietary requirements. Nearly 85 per cent of the households have been consuming less expensive or less preferred foods. More than 63 per cent of the households had to limit portion size during meals while 68 per cent of the families reported having to reduce the number of meals eaten. Restricting consumption of adults in favour of children, the most severe consumption-based coping strategy, has been exponentially increasing over the years.

Small-scale farmers' inability to purchase agricultural inputs is putting at risk their livelihoods and the agricultural season, therefore increasing the risks of not providing nutrition-rich, fresh, seasonal food to the communities. Additionally, the prevalence of moderate or severe food insecurity among farmers was 34 per cent as of July 2022. The main coping strategies adopted by farmers to meet their food needs were to decrease expenses for agricultural inputs (93 per cent), reduce health expenses for the household (78 per cent) and use up their savings (57 per cent).²⁰⁹

PRL and PRS: With the rise in food prices, nearly 90 percent Palestinian/Palestine Refugees reported purchasing leftovers from the market, while almost two-thirds reported reducing the number of meals

209 Data in Emergencies Monitoring brief, round 3. Results and recommendations, FAO, September 2022.

they had eaten.²¹⁰ The price of a survival minimum expenditure food basket in Palestine/Palestinian refugee camps rose by 25 per cent from the second to the third quarter in 2022 alone, reaching an average of 1,025,000 LBP, making the basics inaccessible for many.²¹¹ Limited access to jobs, especially for females (with only 5 per cent of females above the age 16 years being in the labour force) further exasperates Palestinian/Palestine refugees' heavily dependence on humanitarian assistance.

Migrants: Since the crisis, an increasing number of migrants no longer live with their employers (46 per cent of migrants) and are often reliant on multiple jobs and/or accepting lower salaries to meet their essential needs. While migrants who do not live with their employers are considered more food insecure than live-in migrants, they also reported significant food needs due to restrictions imposed by the employers. Overall, 43 per cent of migrants reported having trouble meeting their essential needs for food.²¹² Food assistance was reported as their priority need, with highest levels reported for live-out migrants and those residing in Mount Lebanon. Single mothers with children are among the most vulnerable as their access to daycare and schools are limited, further limiting their employment opportunities to provide for their children.

Displaced Syrians: Based on the IPC AFA classification, 46 per cent of displaced Syrians are classified in Phase 3 or above in 2022. The figure is expected to increase to 53 per cent based on the IPC projection for January – April 2023. With more than 90 percent of households unable to meet their MEB, displaced Syrians residing in

Akkar (97 per cent), Bekaa (97 per cent) and Baalbek-El Hermel (96 per cent) governorates are among the most vulnerable. The highest concentration of vulnerable displaced Syrians is in the Bekaa (340,000 individuals) and Mount Lebanon (329,000 individuals) governorates. Demographic factors that further impact their inability to meet their basic needs include those households headed by women, with low or no level of education and households with at least one member with a disability.

EVOLUTION OF SITUATION AND NEEDS

The food insecurity situation of all those currently residing in Lebanon is expected to continue to deteriorate as the availability and access to food continues to be hampered and unstable. Areas with the highest levels of food insecurity (IPC Phase 3 and above classification) for both Lebanese and displaced Syrians, are at particular risk in terms of food security. Overall, based on the IPC analysis projection, 9 out of 26 districts are expected to have more than half of the residing populations facing food insecurity levels. In Akkar, more than 67 per cent of the population is expected to be in a crisis food insecurity situation in the beginning of 2023, where refugee populations are expected to fall into an emergency level of food insecurity, even with the anticipated humanitarian assistance. The situation will also continue to worsen in El Hermel with more than 61 per cent of residents to fall in crisis food insecurity levels; Baalbek 60 per cent; El Minieh-Dennie 57 per cent, West Bekaa 56 percent, Zahle 53 per cent, Tripoli 52 per cent and half the population in both Rachaya and Saida.



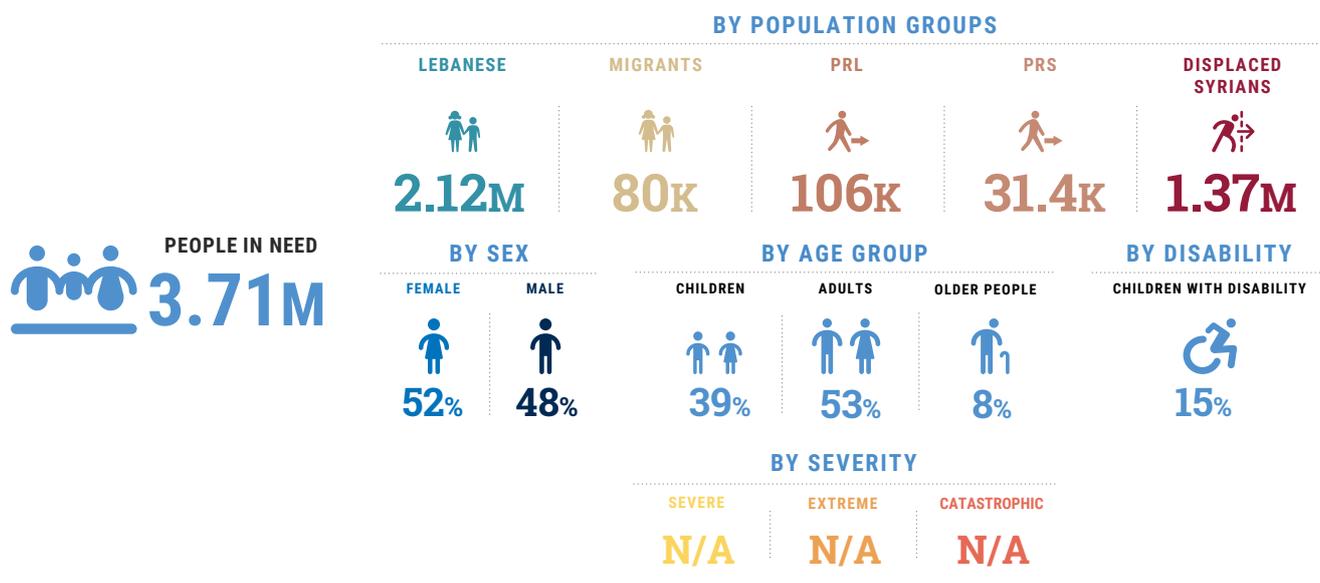
Credit: Nusaned, Lebanon

210 Socio-economic Situation of Palestinian Refugees in Lebanon – Crisis Monitoring Report – September 2022 - UNRWA.

211 Protection Monitoring report, UNRWA , Second Quarter 2022.

212 MSNA 2022.

3.5. Health Sector



OVERVIEW

Approximately 3.7 million people across all districts in Lebanon need improved equitable access to quality health services. The number of PiN increased by almost 10 per cent from 2022 to 2023 due to the growing vulnerabilities and financial hardship for all population groups resident in Lebanon. The rapid deterioration of the Lebanese economy has created one of the deepest downturns recorded in modern times and has consequently led to an increased need in service provision and weakened institutional capacity. Access for the most vulnerable groups to primary and hospital care services was hindered by financial, geographical, availability, and acceptability challenges at both the individual and the institutional level with the cost of care remaining the number one barrier to accessing healthcare, according to the MSNA & VASyR results for 2022.

AFFECTED POPULATION

Approximately 3.7 million people representing 67 per cent of the total population in Lebanon need increased inclusive equitable access to quality health care services, including almost 1.4 million children, 1.9 million women, 300,000 older persons, and around 400,000 persons with disabilities. Among the most vulnerable groups who experience more restricted access are refugees, children under five years of age, adolescent girls and boys, survivors of gender-based violence, FHHs, older people, persons with disabilities, and people living with catastrophic illnesses. In 2022, both MSNA & VASyR results showed a rise in negative health coping mechanisms across populations.

Lebanese: 2.1 million Lebanese need primary health and hospital care services including 167,220 children under five, 544,074 women of reproductive age, 230,000 older people, and nearly 175,117 persons with disability. Districts with the largest number of Lebanese in need are Akkar, El Meten, Beirut, Sour, and Saida.

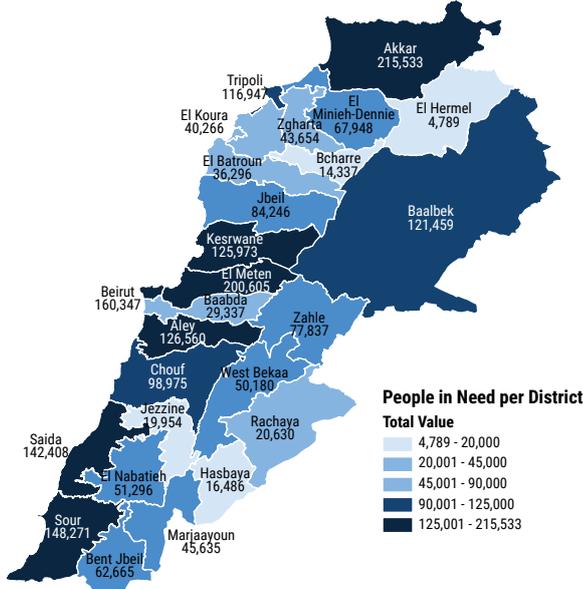
Displaced Syrians: Around 1.4 million displaced Syrians need primary health and hospital care services including 201,604 children under five, 332,164 women of reproductive age, 19,592 older people, and nearly 186,323 persons with disability. Districts with the largest number of displaced Syrians in need are Akkar, Aley, Baabda, Baalbek, and Beirut.

PRL: 106,369 PRL need primary health and hospital care services including, including 8,727 children under five, 26,925 women of reproductive age, 10,454 older people, nearly 9,414 persons with disability. Governorates with the largest number of PRL in need are South, Mount Lebanon, and Akkar.

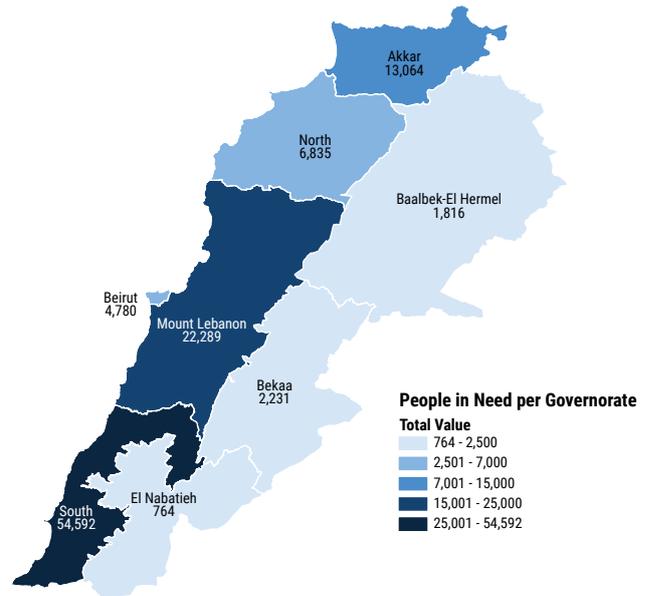
PRS: 31,400 PRS need primary health and hospital care services including 2,512 children under five, 7,721 women of reproductive age, 2,999 older people, and nearly 4,710 persons with disability. Governorates with the largest number of PRS in need are in South, Mount Lebanon, and Bekaa.

Migrants: 80,045 migrants need primary health and hospital care services including 4,413 children under five, 50,645 women of reproductive age, 3,454 older people, and nearly 7,302 persons with disability. Governorates with the largest number of migrants in need are Mount Lebanon, Baalbek-El Hermel, and North Lebanon.

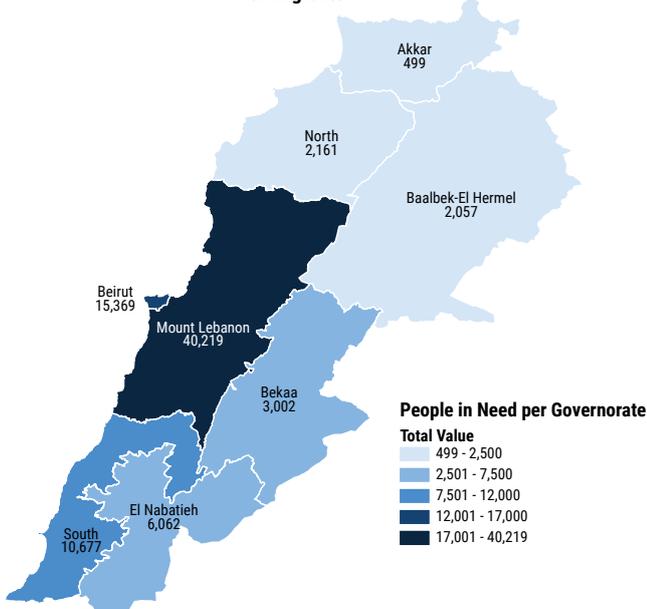
Health People in Need (PiN) for Lebanese



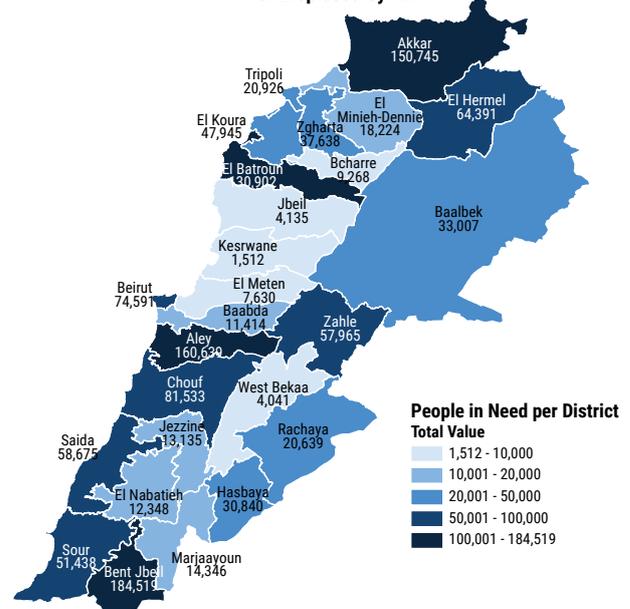
Health People in Need (PiN) for PRL



Health People in Need (PiN) for Migrants



Health People in Need (PiN) for Displaced Syrian



ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

About 20 per cent of Lebanese and migrants,²¹³ 18 per cent of displaced Syrians,²¹⁴ and 31 per cent of PRL²¹⁵ reported a need to access care in the last 3 months. 74 per cent across populations were able to access the needed health care. As per the MSNA 2022, Zgharta (32 per cent), Hermel (31 per cent) and West Bekaa (29 per cent) had the highest percentage of Lebanese

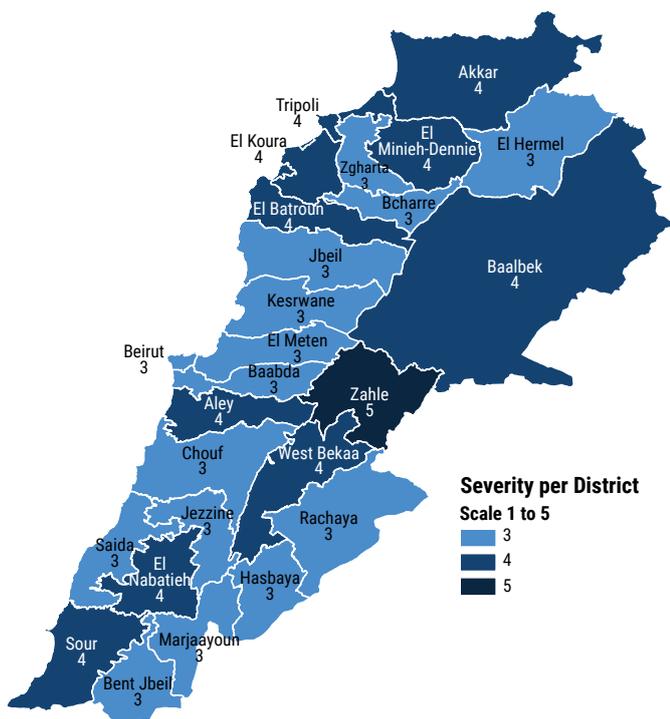
in need of care, and Akkar (38 per cent), Baalbek El-Hermel (36 per cent), and South (30 per cent) had the highest percentage of PRL in need of care. While according to the VASyR 2022, Baalbek El-Hermel (29 per cent) and the South (19 per cent) had the highest percentage of displaced Syrians in need of care. Among individuals in need, the number of those who required primary health care was higher than the number of those who required secondary health care

213 MSNA 2022.

214 VASyR 2022.

215 MSNA 2022.

Health Severity



for all nationalities according to MSNA & VASyR 2022. The percentage of households in need who were able to access primary health care was higher than the percentage of households who were able to access secondary health care services. Older persons and people with disabilities face greater challenges in accessing healthcare.

Cost was by far the main barrier to accessing care for all population groups. This included direct costs, such as treatment or consultation fees, and indirect costs, such as transportation. Based on the MSNA 2022 results, male Lebanese and migrants (82 per cent) had more difficulty affording the cost of treatment, compared to females (72 per cent).

According to the MSNA for Lebanese, Palestine Refugees in Lebanon, and migrants, and the VASyR

for Syrians, in 2022, the main coping mechanisms for difficult access to medication included switching to substitutes/ generics (69 per cent for Lebanese, Palestine Refugees in Lebanon, and migrants, and 49 per cent for Syrians), acquiring medicine from outside Lebanon (29 per cent for Lebanese, Palestine Refugees in Lebanon, and migrants) and rationing existing medications (25 per cent for Lebanese, migrants, Palestine Refugees in Lebanon, and 25 per cent for Syrians). Most women (95 per cent - VASyR, MSNA, 2022) delivered their babies in a healthcare facility. Moreover, 75 per cent of Lebanese,²¹⁶ and 54 per cent of displaced Syrians²¹⁷ women had at least four antenatal care visits during their pregnancy.

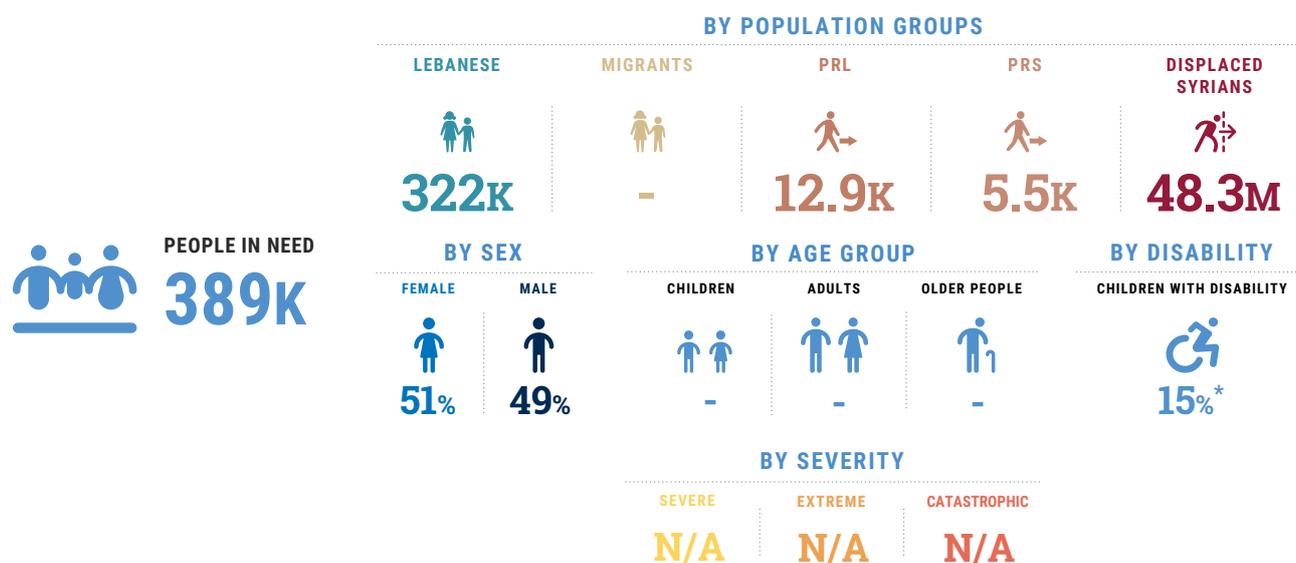
Mental health problems are on the rise across all populations for women and men. Older people and especially women have increased mental health and psychosocial support needs, mainly due to the changing social roles at the time of retirement and increased household chores. Gender-based violence, including sexual violence, is increasing.

EVOLUTION OF SITUATION AND NEEDS

Considering the ongoing unprecedented health, economic, financial, social, security, and political crises, the demand for public health services is expected to increase across populations while available resources are anticipated to decline, with increased financial, geographical, availability, and acceptability barriers to access needed care from both the supply and demand sides and at individual and institutional levels. The top three barriers experienced by household members from all nationalities were all related to cost: either direct cost of the service or indirect cost of transportation. Other barriers include the unavailability of the services, difficulty in ensuring the operational cost to run health facilities because of electricity and water disruption at the maximum capacity, and migration of human resources for health. Consequently, there is a risk of increased morbidity and mortality and worsened health indicators and outcomes over the medium and longer term particularly for the most vulnerable groups.

216 Ibid.
217 VASyR 2022.

3.6. Livelihood Sector



*The Washington Group Question, utilized in MSNA, recommends using as “a lot of difficulty” or “cannot do at all” in at least one domain as the cut off point for disability.

OVERVIEW

The Lebanese unemployment rate more than doubled from 11.4 per cent in 2018-19²¹⁸ to 29.6 per cent in 2022²¹⁹ and less than half of the working-age population were either working for pay or seeking employment. In January 2022, 23 per cent of employees were low pay workers as compared to 21.8 per cent in 2018-19.²²⁰ Similar to previous years, women’s unemployment rate stood at 32.7 per cent and their labour force participation rate (LFPR) was 23 per cent (compared to 66 percent for men). The youth unemployment rate was almost double that of adults at 48 per cent versus 26 per cent.²²¹ Although unemployment increased nationally, the largest increase in unemployment was in Baalbek-El Hermel, which rose from 11 per cent in 2018-19 to 40.7 per cent in January 2022.²²² With their pre-existing vulnerabilities, displaced Syrians are among the most hit by the crises. The unemployment rate of 13 per cent does not reflect a high percentage of employment (which stands at 33 per cent) but is rather the result of the low LFPR standing at only 45 per cent. In 2022, the rates of males within the labour force have decreased to 75 per cent from 81 per cent in 2021.²²³ Syrian women’s unemployment has increased to 45% in 2022. The

gap between Syrian men and women’s unemployment remains significant, with an unemployment rate of 23% for Syrian men – far lower than Syrian women.²²⁴ Lebanese women’s unemployment doubled from 17% in 2018 to 33% in 2022 and remains 7 percentage points higher than the unemployment rate for Lebanese men (26%).²²⁵ PRL and PRS are also at the end of their rope with skyrocketing unemployment rates and increasing despair.

AFFECTED POPULATION

Across all the population groups, the Livelihoods sector used the total population number within the age group the sector can target (15-64), LFPR and the unemployment rate. This allowed the identification of the PiN who are unemployed individuals within the above-mentioned age group. Another proxy was also used which reflected on the number of targeted individuals as set in the log frame. These are the result of previous years’ achievements and discussions with the partners on how the sector will progress. Furthermore, the gender disaggregation for all population groups was 51 per cent females and 49 per cent males. This comes as a recognition of women’s increased vulnerabilities and the marginalization they

218 Lebanon Labour Force and Household Living Conditions Survey (2018-2019).

219 Lebanon Labor Force Follow-up Survey (2022).

220 Ibid.

221 Ibid.

222 Ibid.

223 VASyR 2022 and VASyR 2021 and MSNA.

224 VASyR 2022.

225 Lebanon Labour Force follow up survey (2022).

face in the labor market and economic activities due to several factors such as social norms and unpaid care work within their families.

- Lebanese: 332,228 individuals are in need
- PRL: 12,943 individuals are in need
- PRS: 5,549 individuals are in need
- Displaced Syrians: 48,351

ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

Unemployed individuals are considered vulnerable by default as unemployment leads to decreased abilities to respond to and cope with the socio-economic shocks especially women, youth, and people with disabilities. Furthermore, the private sector, micro, small and medium enterprises in specific were hard hit by the crisis which pushed them to temporary or permanent closure leading to more unemployment and left the owners without their sources of income.

According to the 2022 MSNA, 90 per cent of Lebanese households reported facing challenges meeting essential needs because of financial issues or lost or reduced employment.²²⁶ Meanwhile, the VASyR show that Syrian households are only making 21 per cent of SMEB value from employment.²²⁷

EVOLUTION OF SITUATION AND NEEDS

The GDP was estimated to have declined by 7 per cent in 2021 and was projected to further contract by 5.4 per cent in 2022.²²⁸ The continuing inadequate macro policy responses and the minimum level of stability on the political and security scenes,

foretell further deterioration of both the social and the economic situation. In July 2022 and because of the continuing fall in the GDP and the sizable exchange rate devaluation, the World Bank changed Lebanon's classification to a "Lower Middle Income" country after 25 years of being categorized as an Upper-Middle Income country.²²⁹ The inflation, which reached a devastating 890 percent in June 2022, is disproportionately affecting the poor and the middle class, and more than half the country's population is below the poverty line.²³⁰

Another major concern is that for Lebanese – displaced Syrians relations, the perceived drivers of social tensions are mainly economic, with "competition for lower skilled job" being cited as the main tension driver by 50 per cent of all respondents.²³¹ Over all waves of the UNDP/ARK regular perception survey, which started in 2017, this remains the most frequently cited source of inter-communal tensions. The expected further devaluation of the LBP and increased economic vulnerabilities will likely drive more tensions. The deterioration of the situation will increase the needs for income generating activities to allow the vulnerable groups to meet their basic needs in a sustainable manner. Noting their important role in supporting economic growth and job creation, the engagement of the line ministries (Ministry of Economy and Trade, Ministry of Industry, Ministry of Labour and Ministry of Agriculture) to identify key economic sectors according to the national priorities set by the government is crucial, yet with the current political and governmental gridlock this contribution is expected to be limited.



Credit: UNOCHA/Vartouhi Ourfalian, Lebanon

226 MSNA 2022.

227 VASyR 2022.

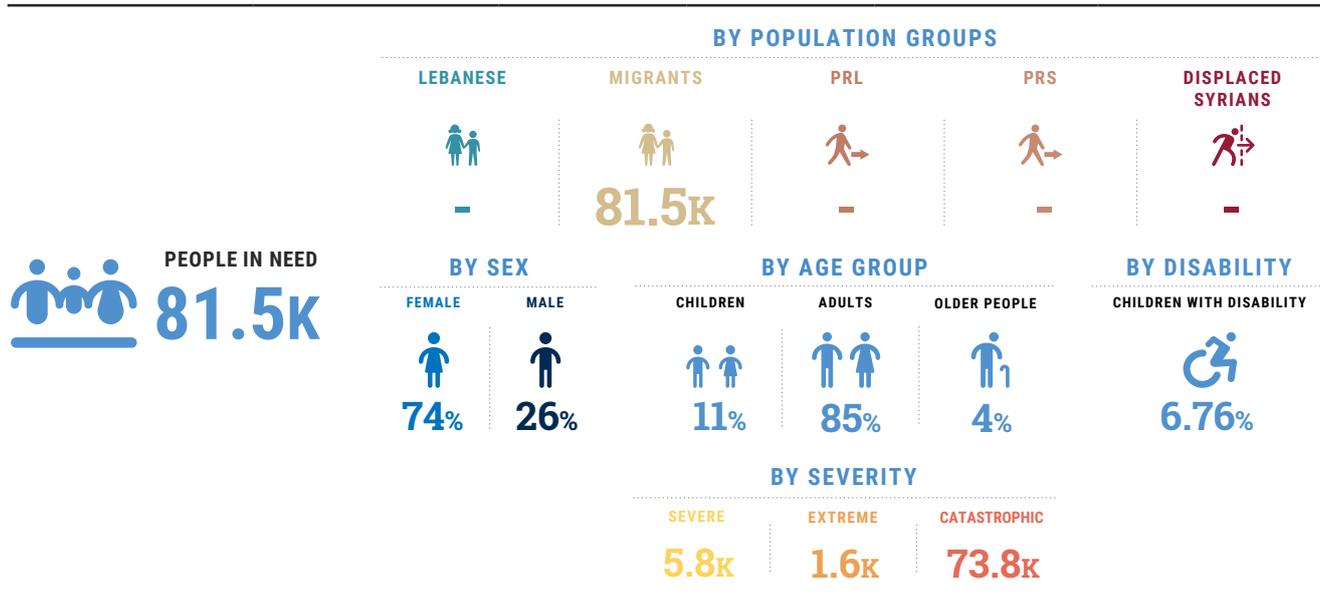
228 <https://www.worldbank.org/en/country/lebanon/publication/lebanon-economic-monitor-fall-2022-time-for-an-equitable-banking-resolution>.

229 <https://economics.creditlibanais.com/Article/211158#en>.

230 World Bank (2022). Lebanon Economic Update, April 2022.

231 UNDP/ARK Regular Perception Survey Aug 2022 (<https://ialebanon.unhcr.org/#Analysis>).

3.7. Migrant Sector



OVERVIEW

Approximately 81,500 migrants (60 per cent) across 8 governorates need specialized assistance which is a drastic increase from earlier in 2022 when 30 per cent of migrants were considered to be in need. While needs are increasing, only 8 per cent of migrants received humanitarian assistance in the last 12 months. The increase in needs is in part due to the socio-economic decline situation in Lebanon, but also the deepening of pre-existing vulnerabilities linked with migrants' legal status and working conditions in Lebanon. Specialized assistance to migrants, as well as access to protection services and voluntary humanitarian return, is required to ensure that they are not left behind in the response.

AFFECTED POPULATION

Estimates point to 35 per cent of the pre-crisis migrant population are assumed to have left Lebanon since the onset of the crisis,²³² and according to the MSNA 2022, as many as a quarter of the migrant population seek assistance to return home. Many of those left in the country are unable to return due to lack of savings/income, debt, not having documentation or legal residency, and/or having children without documentation/legal residency, making them increasingly vulnerable.

Migrants considered especially vulnerable are those detained or in prison, victims of trafficking, single

mothers, children of migrants, migrants working under exploitative working conditions, migrants with diverse SOGIESC, and undocumented, irregular and/or stateless migrants.

Less harmful coping mechanisms (e.g. spending savings, selling their means of transport, receiving remittances from relatives abroad) are not available to the large majority of migrants.²³³ They are therefore at greater risk of resorting to harmful coping mechanisms such as accepting exploitative working conditions and/or falling victims to trafficking.

ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

Of the 135,420 migrants in Lebanon, at least 60 per cent of migrant men, women and children in Lebanon need multisectoral and protection assistance, with needs depending on gender, age, nationality, living and working conditions (live-in and live-out migrants), geographical area, and documentation status. While migrants in need live in all districts, the highest severity and number of migrants in need reside in Beirut and Mount Lebanon (73,842).

For live-in domestic workers,²³⁴ their contractual rights to a day off, regular pay, ticket home, access to their own documentation, is dependent on their employer, who is also their sponsor and provider of legal residency in the country. Those employed by

²³² Based on Ministry of Labour work permit figures and IOM MPM Round 2.

²³³ Between 84-99 per cent depending on the coping mechanism, according to MSNA 2022.

²³⁴ Refers to migrants living in the same house as their employer, the large majority of them, female domestic workers.

an exploitative or abusive employer will often find themselves compelled/forced to remain at their work to avoid falling into an irregular status, excluded from basic services and protection schemes. However as more Lebanese households are unable to pay for a live-in domestic worker or for their residency renewals, an increasing number are working as freelancers²³⁵ with even less legal protection, and many of them without documentation and/or legal residency.

At least 16 per cent of migrants households have at least one member not in possession of a valid ID, and 43 per cent of live-out migrant households have at least one member lacking legal residency.²³⁶ Research shows a direct link between lack of documentation and an increase in protection risks, such as harassment, exploitation, abuse, exploitative working conditions,²³⁷ and many migrants live in constant fear of detention and deportation. Lack of documentation also remains a key barrier to access justice, assistance, and to returning to the country of origin.

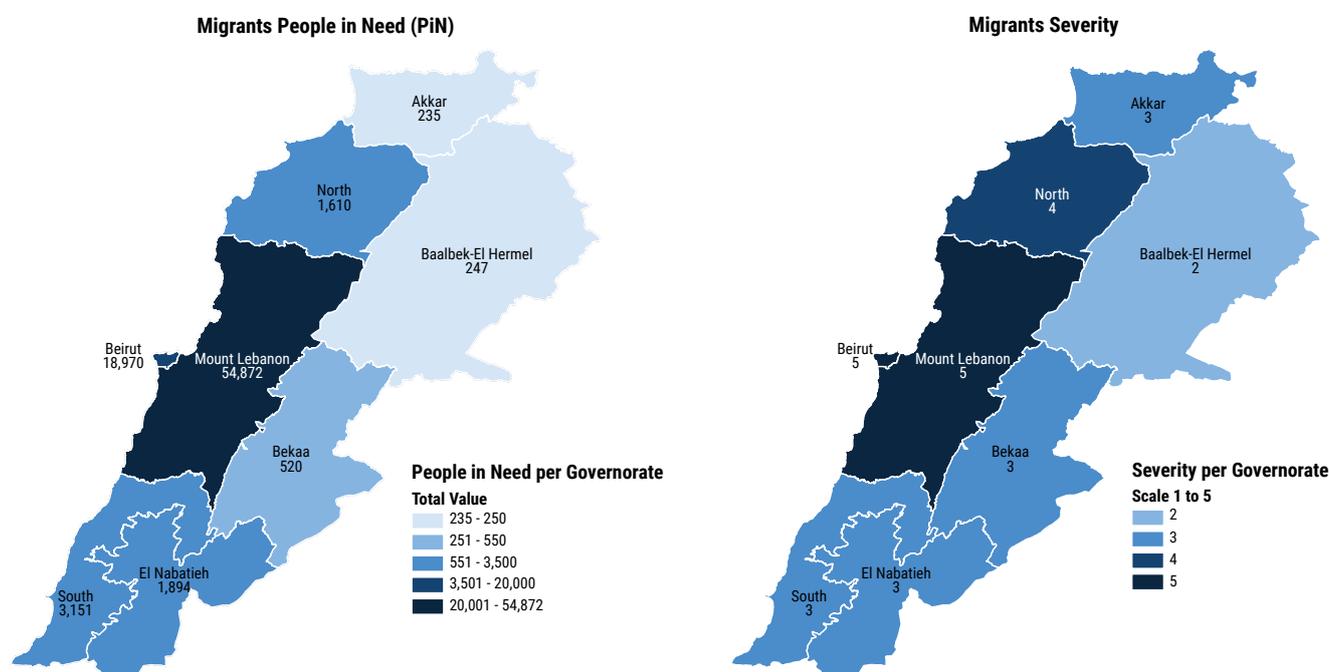
Whilst live-out migrants are facing the same increasing living costs as other population groups, they are often paid much less and/or are forced to adopt exploitative working conditions to get by. While most migrants have some source of income through employment, salaries have been reduced, and more migrants rely on daily intermittent work, with 60 per cent of all migrants reporting inability to meet essential needs.²³⁸

The socio-economic situation, working conditions, discrimination, widespread sexual harassment²³⁹ and chronic temporariness of life as a migrant in Lebanon –have all contributed to the current mental health crisis among migrants in Lebanon,²⁴⁰ with a high number of suicides, and severe mental health cases far superseding the capacity of health providers.

EVOLUTION OF SITUATION AND NEEDS

Until the legal framework for migrants is reformed and migrants are able to work legally as freelancers, an increasing number of migrants will face serious protection risks. Should the crisis worsen, so would the situation for migrants, especially considering the long-term impact of adopting harmful coping mechanisms. The demand for voluntary humanitarian return assistance is expected to remain high and possibly increase if the situation worsens (e.g. cholera). And any additional strain on already limited public services, such as the judicial system, will increase the risk of migrants losing access to assistance.

While a stabilization of the socioeconomic situation would lessen the impact of the crisis on all population groups, migrants included, it could also result in an uptick of migrant workers arriving to Lebanon facing many of the same needs and protection issues as those already here.



235 Refers to migrants living independently from their employer.

236 MSNA 2022, operation data suggests that the number of migrants lacking valid ID is underreported.

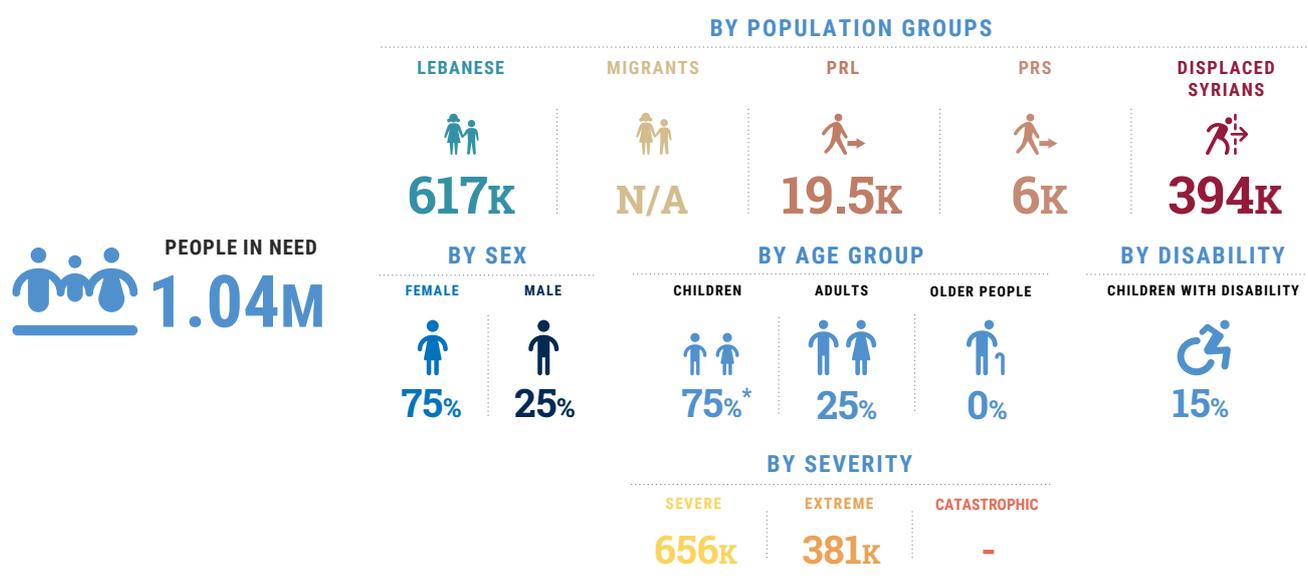
237 Jasmin Lilian Diab, Banchi Yimer, Tsigereda Birhanu, Ariane Kitoko, Amira Gidey, and Francisca Ankrh, "Acknowledged but Forgotten: The Gender Dimensions of Sexual Violence Against Migrant Domestic Workers in Post-Crisis Lebanon", IMS Policy and Working Paper Series 2/2022.

238 MSNA 2022.

239 68 per cent of 913 migrants interviewed were survivors of sexual harassment, many of them at the hands of their employers. Jasmin Lilian Diab, Banchi Yimer, Tsigereda Birhanu, Ariane Kitoko, Amira Gidey, and Francisca Ankrh, "Acknowledged but Forgotten: The Gender Dimensions of Sexual Violence Against Migrant Domestic Workers in Post-Crisis Lebanon", IMS Policy and Working Paper Series 2/2022.

240 GIZ, The Mental Health and Psychosocial Wellbeing of Migrant Workers Under the Kafala System (2022).

3.8. Nutrition Sector



*This is further disaggregated as follows: young children (50 per cent) and adolescents (25 per cent).

OVERVIEW

The socio-economic crises including the political instability, the protracted Syrian crisis, the aftermath of the COVID-19 pandemic, and the depreciation of the national currency due to the economic deterioration, has pushed 1.3 million Lebanese and 0.7 million Syrian Refugees into the high acute food insecurity phase (IPC Phase 3 and above) and it is projected that these figures will increase to 1.46 million and 0.8 million, respectively, in the coming months. Food insecurity together with prevalent unhealthy dietary and nutritional practices and lack of access to nutrition services, has increased the nutritional vulnerability of mainly children and women, leading to increasing trends in multiple burdens of malnutrition for the most vulnerable children and women throughout their critical life stages across all population groups. Continuous rise in negative coping mechanisms such as reducing meal frequency, reducing the diversity of diets and reducing the utilization of essential health and nutrition services mainly affecting children, adolescents and women has put over one million children and women in need of nutritional support during the two major growth spurts during early years, middle childhood and adolescence as well as during pregnancy and lactation.

AFFECTED POPULATION

Overall, 617,117 Lebanese, 394,212 displaced Syrians, 19,545 PRL and 6,000 PRS, children, adolescents and

women experience inadequate nutrition with direct consequences on their health and wellbeing.²⁴¹ While in Lebanon the overall prevalence of wasting is less than 5 per cent, there are major inequalities among population groups and based on the rapid assessment undertaken in the third quarter of 2022 and the data from the national malnutrition program, trends are shown to be increasing.

The findings of the 2022 VASyR reveal a dire situation, with nine out of ten Syrian refugees still living in extreme poverty. Refugees are struggling to pay for the cost of basic life essentials including food, and health care. Most refugees continue to resort to harmful coping strategies to survive, such as reducing health, nutrition and food expenses. Hence there are serious concerns that the rates could rise significantly among the most vulnerable women and children, as the country contends with a devastating economic depression exacerbated by the impact of the COVID-19 pandemic and the aftermath of the August 2020 Beirut Port explosions resulting in increasing food insecurity and unaffordability of basic nutritional needs.

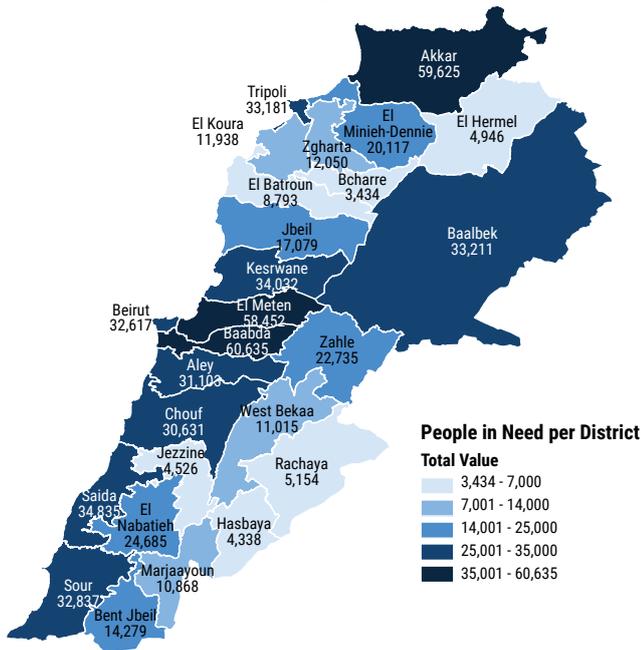
ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

The prevalence of stunting for children aged 6–59 months is 7 per cent nationally,²⁴² compared to 25 per cent among displaced Syrians in informal

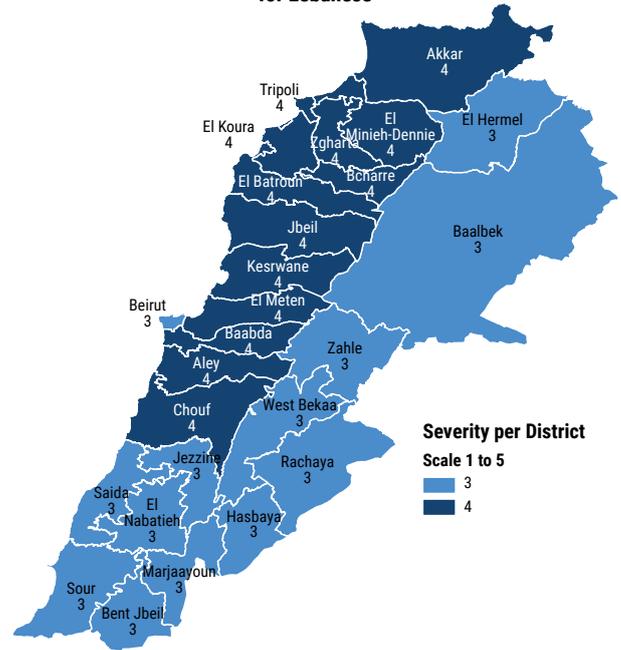
241 Based on the Standardized Monitoring Assessment for Relief and Transition Method (SMART) survey, Aug- Sep 2021.

242 National SMART Nutrition Survey, Lebanon 2021. <https://www.unicef.org/mena/media/15741/file/National%20Nutrition%20SMART%20Survey%20Report%20.pdf>.

Nutrition People in Need (PiN) for Lebanese



Nutrition Severity for Lebanese



settlements,²⁴³ an increase from 17 per cent in 2013.²⁴⁴ Stunting also affects 11.8 per cent of children under-5 among displaced Syrians residing out of ITS and 10.3 per cent among camps hosting Palestinian populations. The prevalence of acute malnutrition among children under 5 years of age is 2.5 and 4 per cent for displaced Syrians and among Palestinian refugees respectively.²⁴⁵ Acute malnutrition among pregnant and lactating women is also highest in Palestinian camps (9.5 per cent) and among displaced Syrians in settlements (8 per cent). More than 40 per cent of women of reproductive age including adolescent girls and children aged 6–59 months have anemia. A study of children 12–18 years old found a high prevalence of overweight and obesity among boys (31 per cent) followed by nearly 21 per cent among girls.²⁴⁶

Sub-optimal infant and young child feeding (IYCF) practices are prevalent nationally, and across Palestinian and displaced Syrian. Exclusive breastfeeding rates were 32.4 per cent for Lebanese, while Palestinian and Syrian refugee had a higher proportion of children being breastfed exclusively, at 43.8 per cent and 65.2 per cent respectively. Diets of over 70 and 80 per cent of young children aged 6-23 months lack the diversity and adequacy needed for their growth and wellbeing. Vitamin A and protein rich foods are missing in the diets of almost 80 per cent of young children regardless of their origin. 17 per cent, 21 per cent and 29 per cent of Lebanese,

displaced Syrians living outside ITSs and Syrian in ITSs respectively are consuming 0-2 food groups out of 8 per day which manifests a serious food poverty among children. Since children between ages 6-17 months are more malnourished compared to the other age categories, the sub-optimal IYCF practices for this age group are considered to be a major contributor.

This picture is attributed to deteriorated food and nutrition security and the economic crisis, family level coping mechanisms and prevalent poor care, dietary and hygiene practices, and lack of access to quality and adequate services. Women and children from poor economic backgrounds are more likely to be malnourished and are the group who find it most difficult to access health and nutrition programs and services, since the policies and legislations are not sensitive to the needs of children.

The provision of childcare services for supporting parents with early stimulation, nurturing and responsive caregiving is dominated by private providers (80 per cent) and not integrated as part of the facility and community-based initiatives. In 2021, families were reported to have faced payment difficulties to access these services as in some cases providers had to increase their fees, and services are likely to have become even more expensive since then. This is against the backdrop of a data gap on the early childhood development status of the children at

243 Ibid.

244 SMART 2013. Joint Nutrition Assessment Syrian Refugees in Lebanon 2013, <https://reliefweb.int/report/lebanon/joint-nutrition-assessment-syrian-refugees-lebanon>.

245 National SMART Nutrition Survey, Lebanon 2021.

246 WHO, Global school-based Student Health Survey, 2017. Available at www.moph.gov.lb/userfiles/files/GSHS_Report_2017.pdf.

national level which includes children not accessing the private services.²⁴⁷

EVOLUTION OF SITUATION AND NEEDS

With the compounded crisis showing no sign of abating, the number of children suffering from different forms of malnutrition and related developmental deprivations could increase drastically, due to prevalent and unhealthy feeding practices. IPC 2022 results show that around 2 million Lebanese and displaced Syrians are facing high acute food insecurity (IPC Phase 3 and above), with projections indicating that this can increase by 25 per cent between January and April 2023. This will have a direct impact on the nutritional status of the children and women. The cholera

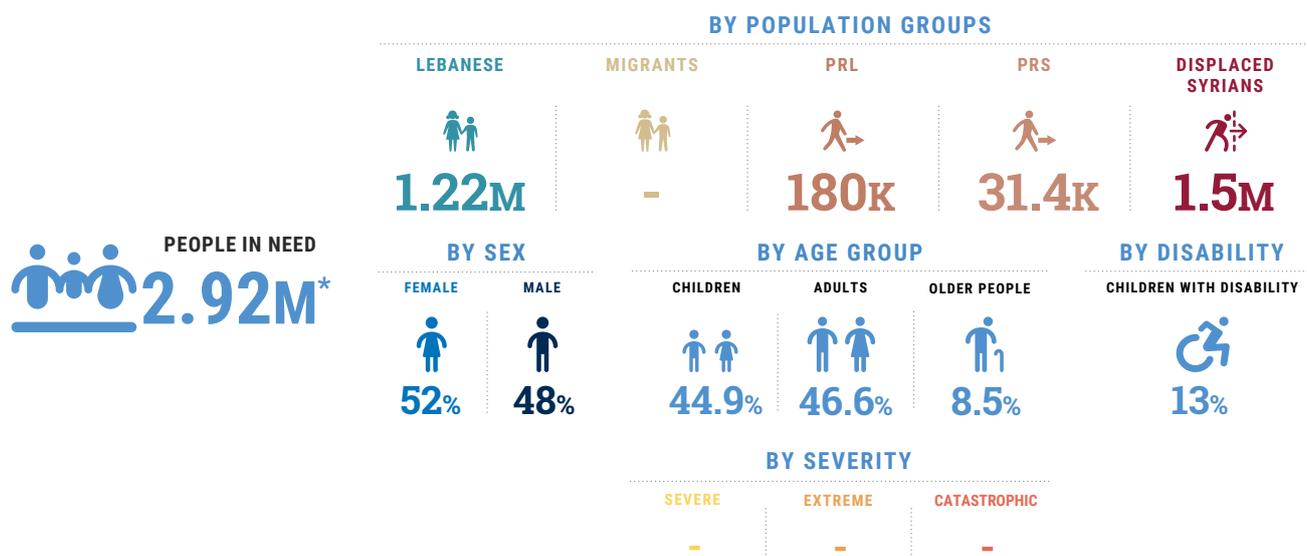
outbreak will further exacerbate the nutritional fragility. Based on a rapid nutrition assessment undertaken in Sep-Oct 2022 in vulnerable localities in North and Akkar among 674 children under-5 from displaced Syrian population, the acute malnutrition rate has increased from 2.5 in 2021 to 3.9 per cent, also confirmed by the admission data from the national malnutrition program. The global food and nutrition constraints have also created serious concerns in a way that the rates of staple food could rise significantly, and this can further worsen the nutritional vulnerabilities of women and children, as the country still contends with a devastating economic meltdown exacerbated by the impact of the COVID-19 pandemic.



Credit: UNOCHA - IOCC/Jo Matar, Lebanon

247 <https://blogs.worldbank.org/arabvoices/study-childcare-services-lebanon-reveals-struggling-sector>.

3.9. Protection Sector



*This is the overarching PiN for the Protection Sector, including Child Protection and Gender-Based Violence sub-sectors.

OVERVIEW

Nearly 3 million women, men, girls and boys across all governorates in Lebanon are in need of community, household and individual level protection prevention and response services. These needs have increased compared to early 2022. Significant factors impacting the protection environment include the socio-economic crisis with price hikes on basic goods and services (fuel, medication, transportation, telecommunication), inflation, growing unemployment; high levels of political instability, declining community relations and anti-refugee statements; and the reduced capacity of public institutions and law enforcement. Persons at risk and their caregivers require access to community-based protection services, high and medium risk cases require individual tailored case management, protection cash, psychosocial support, safe shelters and specialized services, while refugees and migrants are especially in need of legal counselling and aid. At the institutional level, protection systems must be reinforced.

AFFECTED POPULATION

Lebanese: Approximately 1.2 million individuals need protection services particularly those at risk of violence, coercion, and deliberate deprivation and without adequate family and community support. 74 per cent of households resort to at least one negative food coping strategy in particular women, children, older persons, and households with a person with disability as well as older persons and persons with mental health concerns. Stateless, women and LGBTIQ+

individuals require legal aid, persons with disability and older persons require rehabilitation services and assistive devices.

Displaced Syrians: 1,500,000 displaced Syrians have a right to legal and social protection. 83 per cent are without legal residency, 64 per cent without birth and 66 per cent without marriage registration. 98 per cent of households resort to at least one negative coping mechanism, 12 per cent report to accept exploitative labor and 7.1 per cent are at risk of eviction, 17 per cent report feeling anxious and depressed daily. They also have the highest reports of safety and security concerns including robbery, harassment, kidnapping and threats of violence.

PRL: 180,000 Palestinian refugees from Lebanon have a right to legal and social protection. 98 per cent report that some or no household have legal residency, approx. 75 per cent without full birth registration. Along with displaced Syrians they have the highest reports of safety and security concerns including robbery, harassment, kidnapping and threats of violence.

PRS: 31,400 PRS have a right to legal and social protection. Approximately 50-75 per cent are without legal residency and approx. 75 per cent are without full birth registration. 98 per cent are living below the poverty line and at risk of onward movement, negative coping mechanisms and susceptible to exploitation and coercion.

Migrants: 10,021 migrants need legal and social protection. 44 per cent of households report that some or no members have legal residency. 7 per cent report accepting high-risk/exploitative labor. Migrant

men are much more likely to resort to negative coping mechanisms and eviction than women.

ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

Legal residency is critical for securing one's access to safety from arrest, detention and risk of deportation, access to legal remedies, to basic services, free movement, support networks, and access to other forms of civil documentation. Barriers prohibit access including inconsistent practices by the General Security Office (37 per cent), limitations in existing regulations (23.4 per cent) and other factors including fear of approaching authorities and transportation (14.3 per cent).²⁴⁸ Civil documentation is essential for a child's legal identity, to prevent risk of statelessness, to secure inheritance and guardianship rights. Barriers prohibit access including unaffordability (fees and transport) (43.6 per cent) lack of awareness of the procedures (31.2 per cent), limited free movement due to legal residency (8.5 per cent) and lack of ID documents (5.7 per cent).²⁴⁹ Legal awareness, counselling, and aid is required to address barriers targeting non-permeant and non-residential shelters in North, Nabatieh, Bekaa and Baalbek & Hermel for men, women and youth targeted. Eviction has a multi-dimensional impact leading to psychological distress, loss of employment, lack of food, homelessness and disrupts education and community networks.²⁵⁰ Legal awareness and legal aid are required to strengthen security of tenure arrangements and protect against eviction and associated risks including harassment, sexual and non-sexual forms of exploitation and other threats. Community-based protection services provide critical support to at-risk individuals, strengthen positive coping methods including support networks for at-risk individuals, de/escalate inter and intra communal tensions and address information barriers. This is particularly important given the increase in safety and

security concerns, restrictive measures and declining community support. This is particularly important for persons with disabilities, older persons, persons with low literacy, women and girls who may feel isolated due to growing barriers and require support. Hotspot locations should be targeted as well as those with existing community structures.

Individual tailored case management, psychosocial support, protection cash, safe shelters and specialized services are critical to counter exposure and susceptibility to harm as a result of shocks and negative coping as well as incidents of violence, coercion, abuse, deliberate deprivation and neglect. Critical locations to target will be Baalbek-Hermel and Akkar, North and Nabatieh.

EVOLUTION OF SITUATION AND NEEDS

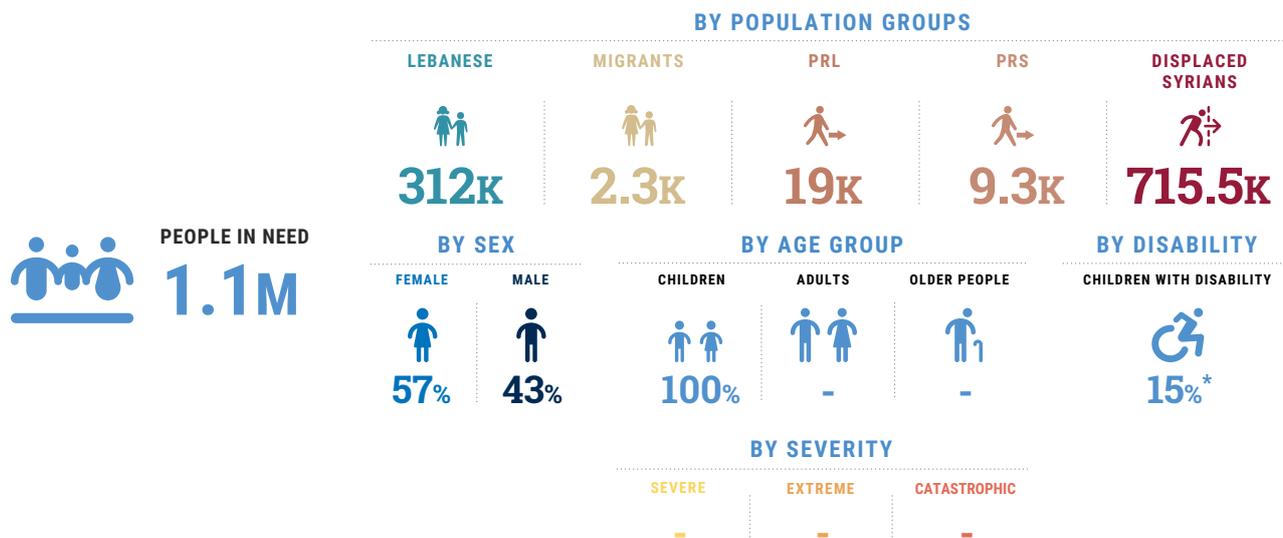
In 2023 it is likely that we will observe a shrinking protection space as a result of continued political uncertainty, reduced municipal and public institution capacities to deliver community services leading to strained community relations, reduced presence of community level local authorities for advocacy, reduced presence of law enforcement, maintained judicial strikes and limited prosecutions, as well as maintained barriers to transportation, communication, electricity and water. Furthermore, if a national reform package is not reached and donor funding cuts take effect, financial barriers, and the ability of protection partners to refer at-risk individuals to critical services is likely to get worse. Debt levels will accumulate and there are likely to be more individuals moving to crisis or catastrophic levels of negative coping with family and community support systems struggling to support vulnerable members. On a positive note, however there may be an increase in birth and marriage registration should a national action plan be passed.

248 VASyR 2022.

249 VASyR 2022.

250 UNHCR Protection Monitoring, 2022.

3.10. Child Protection Sub-Sector



*The Washington Group Question, utilized in MSNA, recommends using as “a lot of difficulty” or “cannot do at all” in at least one domain as the cut off point for disability; to remain consistent with the analytical and reporting recommendation of the Washington Group we recommend all sectors to use the same approach. The sector can consider 2022 MSNA data for a percentage estimate or the global average of 15% when data is not available.

OVERVIEW

More than one million children are in need of specialized prevention and response CP services across different population cohorts (displaced Syrians, vulnerable Lebanese, migrants, PRL and PRS). As the socio-economic situation in Lebanon continues to deteriorate, families struggle to meet their basic needs leading to an increase in overall Child Protection needs, particularly among vulnerable and marginalized groups. The political instability has also impacted the social services available to address exacerbated child protection risks, pushing families into poverty and resorting to negative coping mechanisms, such as child labor, child marriage and violent discipline.

AFFECTED POPULATION

Approximately 312,000 vulnerable Lebanese children are in need of specialized CP prevention and response services according to the PiN calculation conducted by the Child Protection sector based on the MSNA 2022 results. In addition, there are more than 2,300 migrant children and 19,000 PRL children in need. The PiN figures are calculated taking into consideration two key factors informing the increased needs: namely number of children involved in child labor and main safety and security concerns as reported by households. A third proxy indicator (considered a contributing factor to the deteriorating situation) is also weighed: the number of children not attending school regularly. The latter is seen as one of the main reasons for families resorting to negative coping mechanisms (mainly through child labor) as confirmed by the results of multi-sectoral

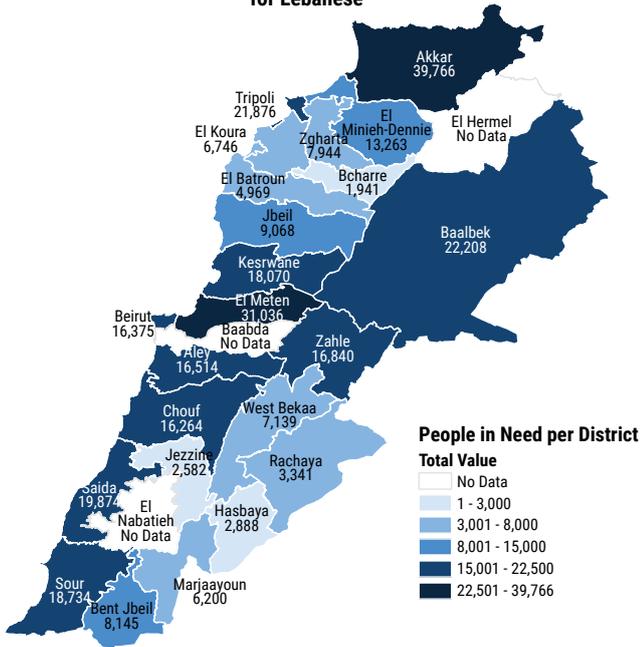
assessments conducted in 2022 which showed that child labor is the third highest reported reason for children not attending schools.

Moreover, around 725,500 displaced Syrian and PRS children are in need of Child Protection specialized prevention and response services, driven mainly by inadequate sustainable solutions, increased debt levels and increased community tensions, leading to a range of impacts including the worst forms of child labor, child marriage, onward movement/migration, mainly by sea and violent child discipline, including physical, emotional abuse and neglect.

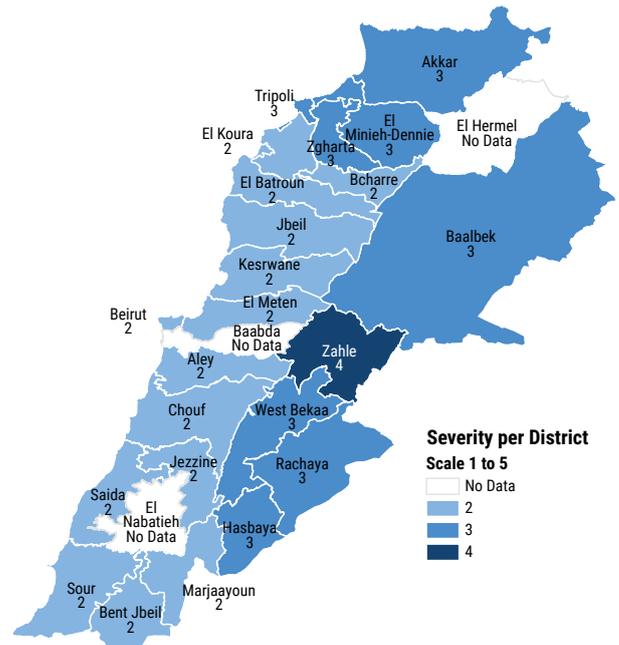
ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

According to the VASyR 2022 results, the number of displaced Syrian children involved in the worst forms of child labor has decreased slightly (from 5 per cent in 2021 to 4.3 per cent in 2022). While this overall decrease represents around 3,000 children less compared to last year, field reports and Child Protection actors argue that these results are not representative of the reality which indicate rather an increase in the number of children involved in child labor as well as street-connected children. Overall, partner data reported through ActivityInfo indicates that there was a 41 per cent uplift between 2020 and 2022 in case management services provided by the Child Protection Sector to children vulnerable to child labor. Additionally, more vulnerable Lebanese, migrant and PRL children are now observed to be involved

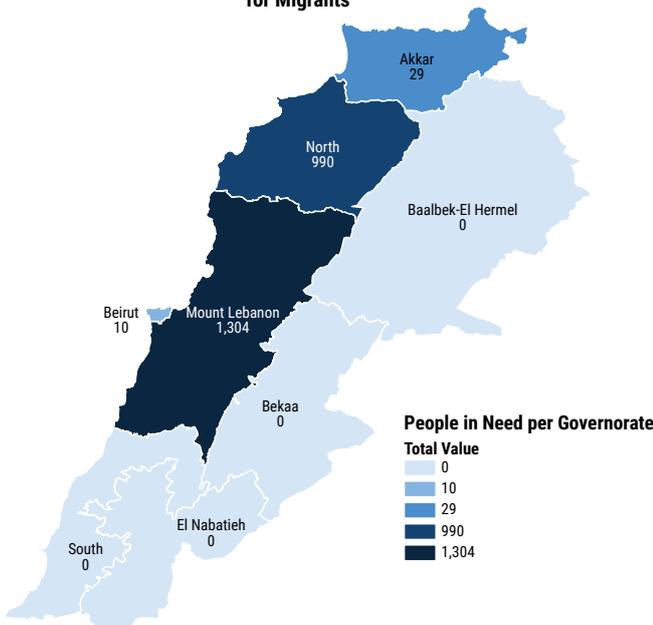
**CP People in Need (PiN)
for Lebanese**



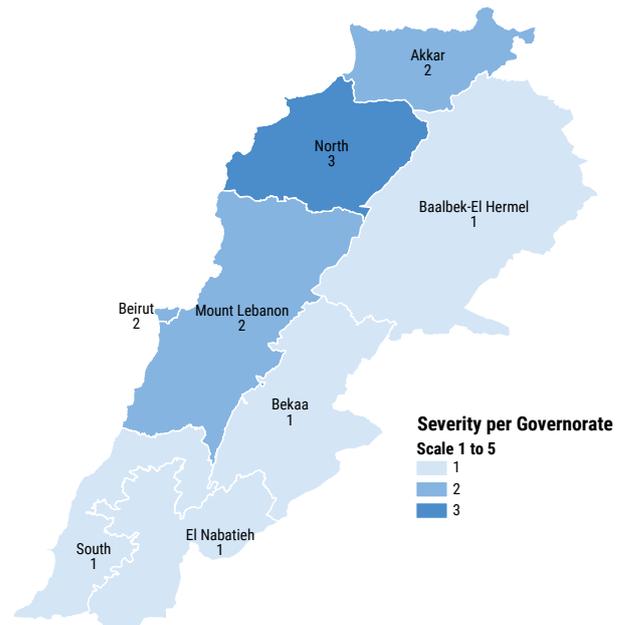
CP Severity for Lebanese



**CP People in Need (PiN)
for Migrants**



CP Severity for Migrant



in child labor/street connected labor as the financial situation deteriorates and families struggle to meet their basic needs.

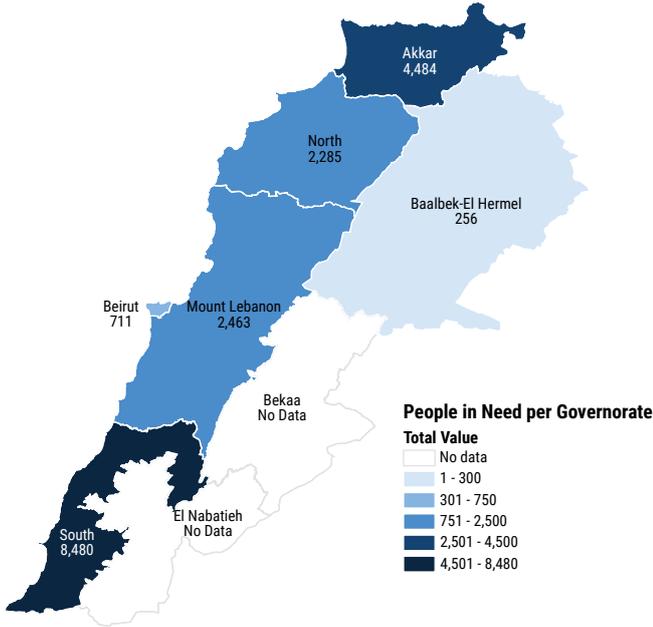
The rate of child and early marriage increased among displaced Syrian girls and young women according to VASyR 2022, which shows 22 per cent in 2022 (as compared to 20 per cent in 2021). This increase can be mainly interpreted by the increased levels of debt due to the deteriorating financial situation. Similarly, child marriage is increasing among PRL and from Syria, also driven by deep-rooted social and cultural norms that make it acceptable/normal to wed off adolescent girls

and young women, particularly as families continue to struggle to meet their basic needs.

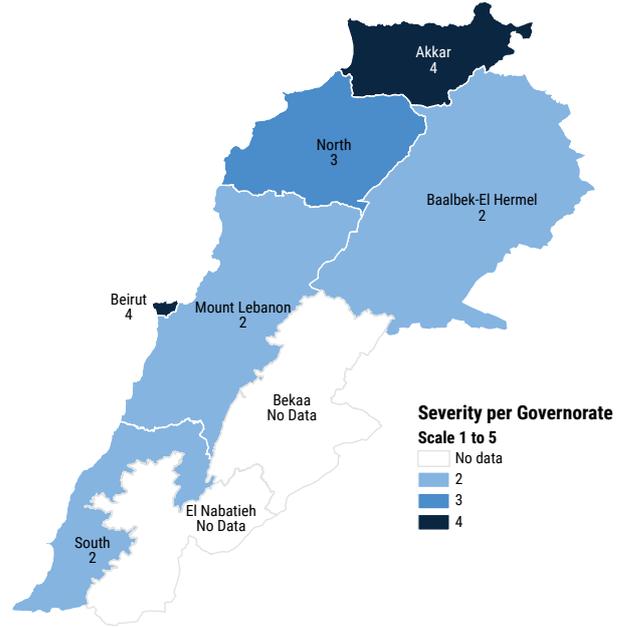
Based on the sector's needs analysis using assessment data, Akkar District continues to record one of the highest severity scores, as child protection risks remain on the rise among Palestine Refugees in Lebanon, while Zahle District showed a high severity among the vulnerable Lebanese population.²⁵¹

251 MSNA 2022.

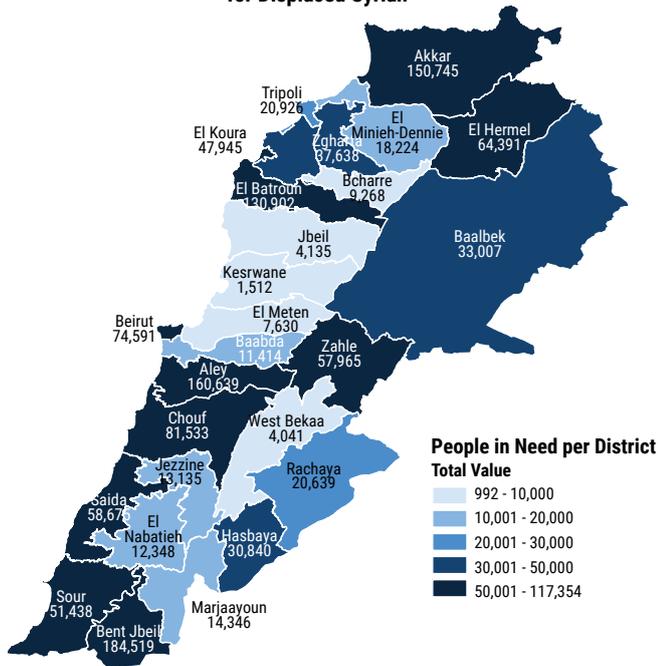
CP People in Need (PiN) for PRL



CP Severity for PRL



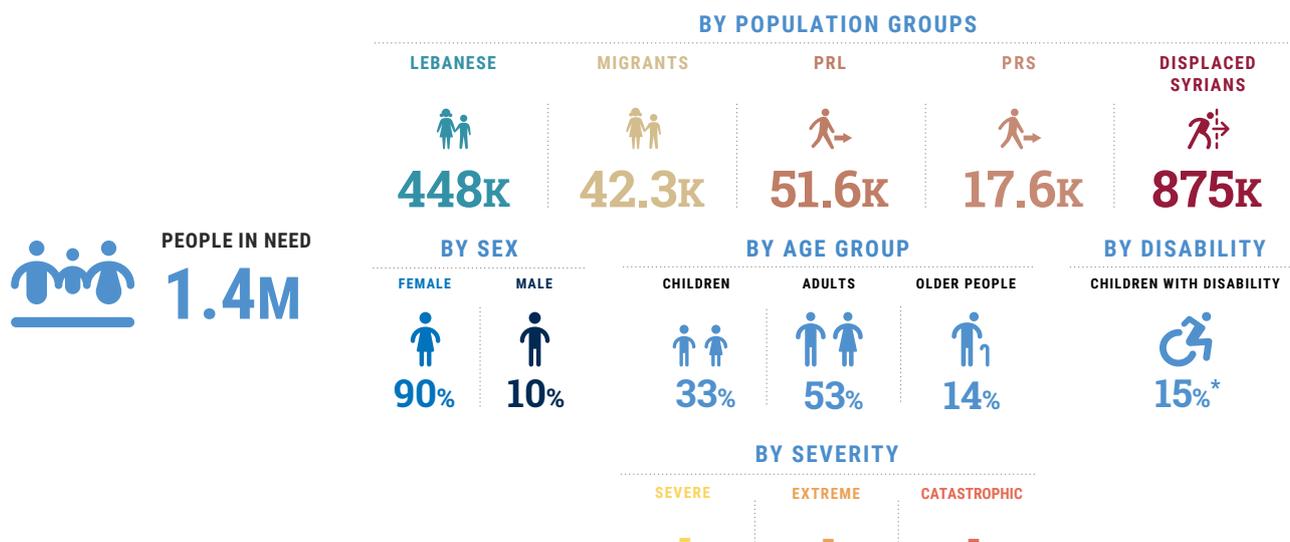
CP People in Need (PiN) for Displaced Syrian



EVOLUTION OF SITUATION AND NEEDS

As the socio-economic crisis in Lebanon continues to deteriorate, it is expected that it will impact the availability of social services to address the protection needs of children and their caregivers who are already struggling to meet their basic needs. As a result, negative coping mechanisms are predicted to increase, where families resort to additional/cumulative debt, children not attending school regularly and instead being sent to work including in difficult working conditions. This might lead to an increased number of vulnerable children joining their caregivers in the onward movements.

3.11. Gender-Based Violence Sub-Sector



*The Washington Group Question, utilized in MSNA, recommends using as “a lot of difficulty” or “cannot do at all” in at least one domain as the cut off point for disability

OVERVIEW

GBV continues to be a risk, especially for women and girls in Lebanon across all population groups: displaced Syrians, vulnerable Lebanese, migrants, PRL and PRS. More than 1.4M people are in need of specialized GBV prevention and services including case management, protection cash assistance, focused and non-focused psychosocial support, referral to shelter, clinical management of rape and other services for survivors as well as targeted activities for women’s empowerment and the promotion of gender equality.

AFFECTED POPULATION

GBV is affecting all population groups, noting major differences in the perception of safety and security and access to services for women and girls. At least one in ten Lebanese, migrant and Syrian households report that girls and women avoid certain areas because they are unsafe. For PRL households, this rises to one in four households where girls and women avoid certain areas because they are unsafe (MSNA, VASyR 2022). There were regional differences and trends for each population group, especially in streets, markets and public transportation. One in four Lebanese households in the North and Bekaa reported a high level of feeling unsafe for women and girls, over half (54 per cent) of migrant households with a female member that felt unsafe were in Mount Lebanon, half (52 per cent) of PRL households in the South. According to GBV

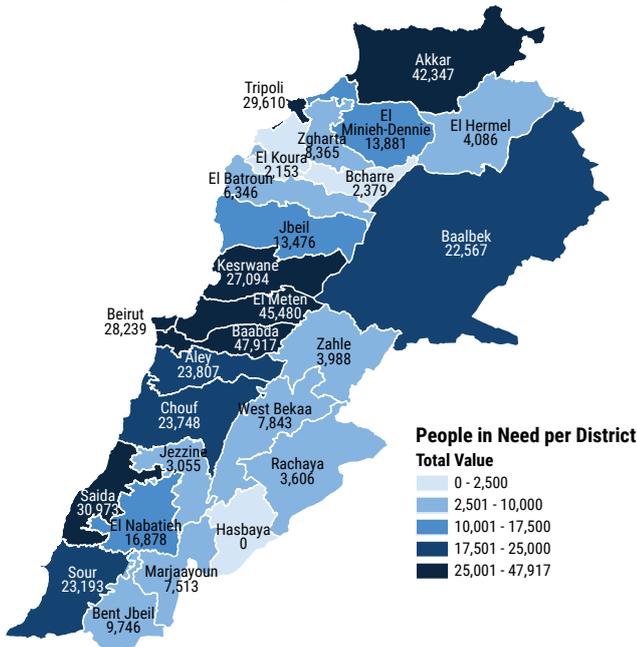
IMS data displaced Syrians continue to make up the highest number of cases of individuals seeking GBV case management services, accounting for 77 per cent followed by 19 per cent Lebanese, 2 per cent of Palestinian and 2 per cent other nationalities. Persons with disabilities, LGBTIQ+ population and female heads of households are at particular risks of GBV yet they face additional barriers in seeking services, for example only 2 per cent of survivors receiving services²⁵² are persons with a disability, compared to an estimated 15 per cent of the total concerned population with a disability.

ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

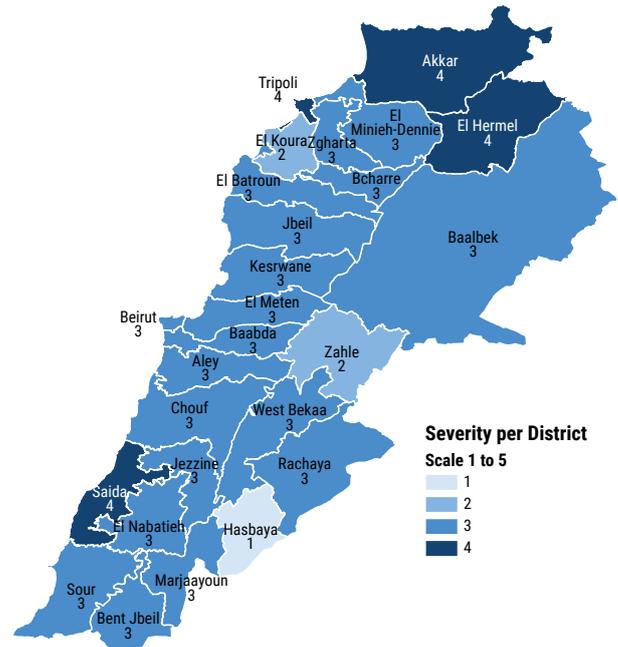
Women and girls remain more affected by GBV (94 per cent of reported cases are by female and 6 per cent by male) due to entrenched gender inequalities. Contributing factors to the increase in GBV are the financial situation and unemployment, drug abuse and unavailability of public basic services. The main forms of GBV reported as of June 2022 were physical assault (36 per cent) and psychological and emotional abuse (34 per cent), and more than half of the cases are in the context of intimate partner violence. Outside the home, women and girls report not feeling safe in streets and crowded public areas, with the highest percentage in Akkar and Tripoli for Lebanese, Beirut

252 GBV IMS, 2022.

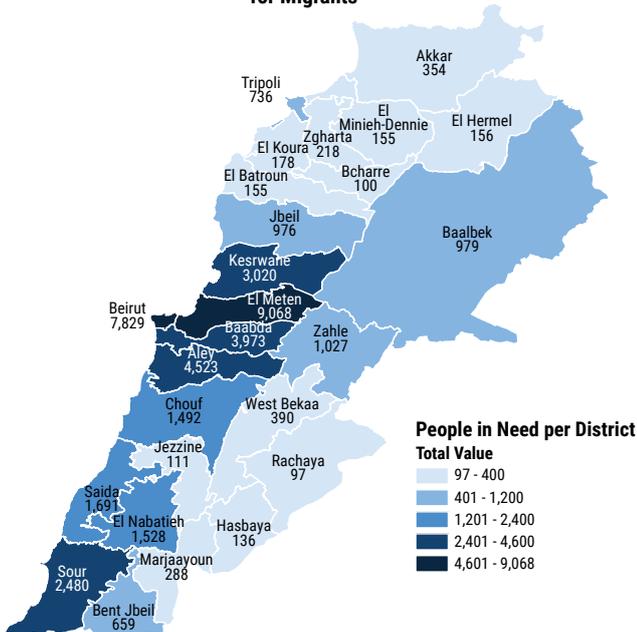
GBV People in Need (PiN) for Lebanese



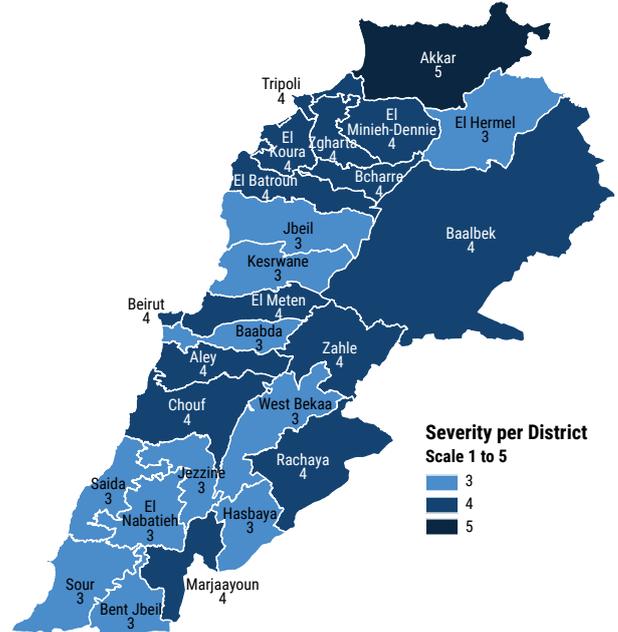
GBV Severity for Lebanese



GBV People in Need (PiN) for Migrants



GBV Severity for Migrants



and Mount Lebanon for migrants,²⁵³ and the South for displaced Syrians.²⁵⁴

Sexual violence remains a risk with devastating consequences but is likely underreported because of the stigma associated with it (17 per cent of all reported cases).²⁵⁵ GBV actors note increasing risks linked to difficulties in paying rent or accessing basic

needs, leading to sexual exploitation, and forced prostitution, including by aid workers, as well as sexual violence for children and in particular adolescent girls. For migrant domestic workers, 68 per cent of 913 individuals interviewed have experienced sexual harassment, many of them at the hands of their employer, making the place of work the home of the perpetrator and the victim one and the same.²⁵⁶

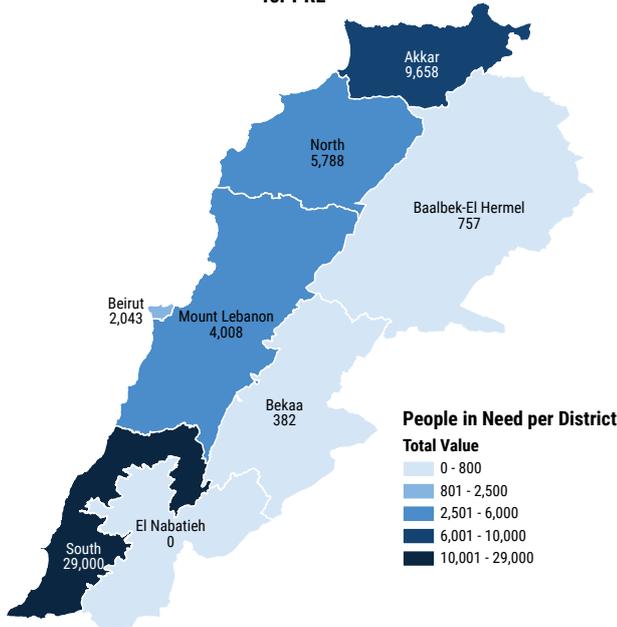
253 MSNA 2022.

254 VASyR 2022.

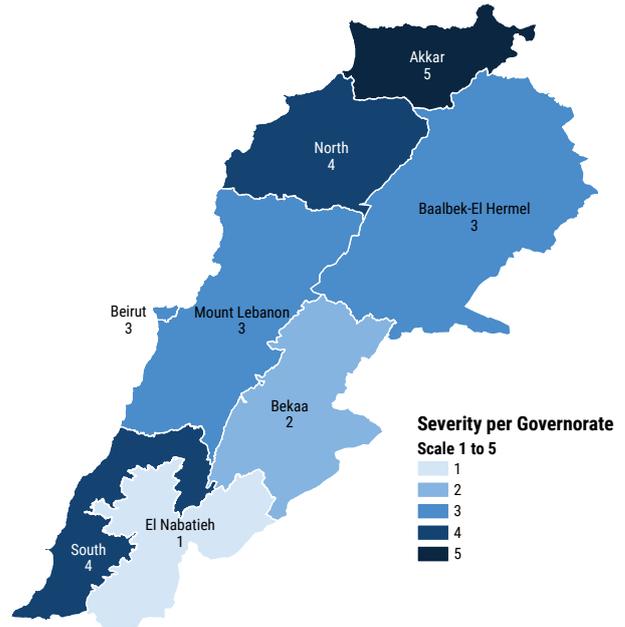
255 GBV IMS, 2022.

256 Egna Legna Besidet, LAU, 2022.

GBV People in Need (PiN) for PRL



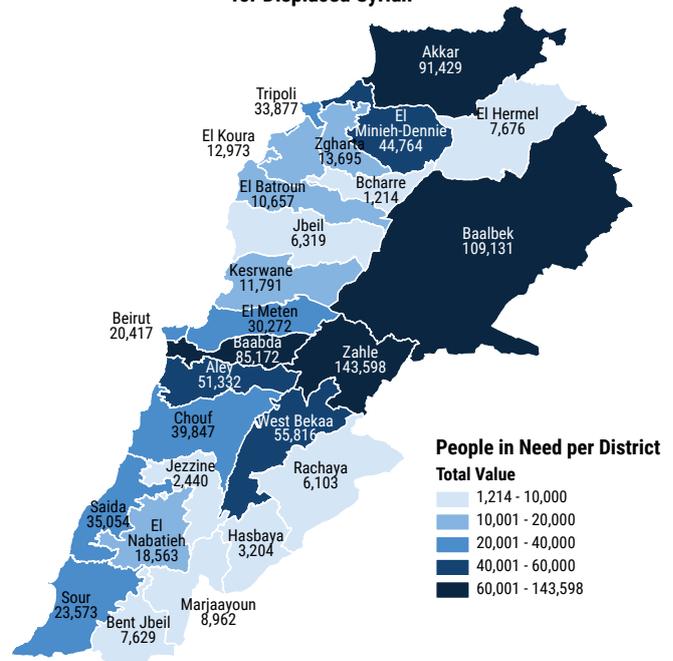
GBV Severity for PRL



A further concern, linked to COVID-19 and the increased reliance on the internet, is technology-facilitated GBV. Online sexual harassment and blackmailing reportedly increased 184 per cent in Lebanon during lockdown.²⁵⁷

The districts with higher PiNs (calculated using GBV indicators on safety and security and additional partner insights) are Beirut and Mount Lebanon for migrants, the North and South for PRL and for Lebanese across different districts from North, Beirut and South. Adolescent girls remain a group at particular risk of different forms of GBV including, child marriage, sexual harassment, controlling behavior and denial of resources and opportunities. There are urgent gaps in terms of specialized GBV case management for LGBTIQ+ persons due to the closure of key service points and limited capacity of other service providers, along with limited access to gender justice for all GBV survivors.

GBV People in Need (PiN) for Displaced Syrian



EVOLUTION OF SITUATION AND NEEDS

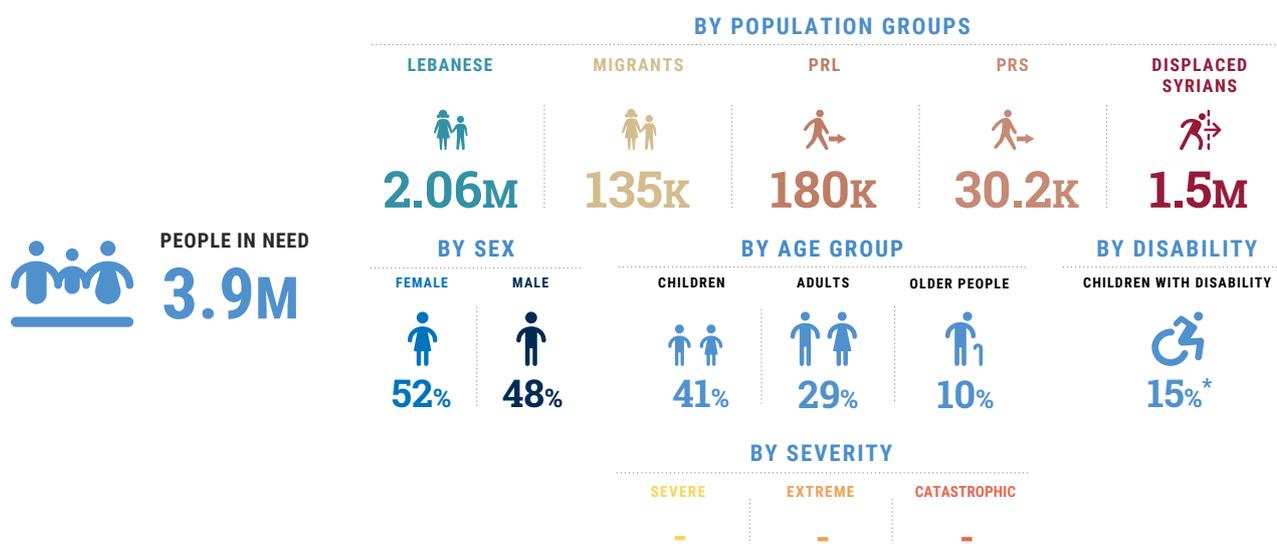
The increase in transportation and telecommunications costs is hampering GBV survivors' access to services as noted by 95 per cent of protection partners, with particular concerns in Baalbek and Bekaa.²⁵⁸ An increase in costs is also affecting partners' capacity to offer quality services and cover the running costs of Women and Girls Safe spaces and community centers. Many deep-rooted sociocultural practices

disincentivize, stigmatize, and even endanger women and girls who seek justice. Moreover, due to the recent judicial strike, this situation contributed to reducing access to protection orders and, as a coping mechanism, women and girls resorted more to the traditional justice system. The need for psychosocial support and GBV case management is elevated due to an increase in reliance on harmful coping mechanisms.

257 UN Women et al, 2021.

258 Impact Assessment, LCRP Protection sector, 2022.

3.12. Social Stability Sector



*The Washington Group Question, utilized in MSNA, recommends using as “a lot of difficulty” or “cannot do at all” in at least one domain as the cut off point for disability; to remain consistent with the analytical and reporting recommendation of the Washington Group we recommend all sectors to use the same approach. The sector can consider 2022 MSNA data for a percentage estimate or the global average of 15 per cent when data is not available.

OVERVIEW

The dire economic situation of the country is having negative consequences on social stability and all community relations. Over the last four years, displaced Syrians-host community relations have been on a negative trajectory, with pressure points ranging from lack of access to services and job competition. As all municipalities in Lebanon are hosting communities (as displaced Syrians/Palestine refugees are living in 97 per cent of municipalities), this is affecting the whole country.

Simultaneously, over the last three years, intra-Lebanese relations, which were previously very positive, have been deteriorating. In 2018, 4 per cent of Lebanese cited negative relations between different communities. As of July 2022, 39 per cent of respondents now report negative relations according to the UNDP/ARK Perception Survey.²⁵⁹

The inability of municipalities to deliver basic services is coupled with rising community insecurity and unprecedented levels of violence, with escalating theft and crime.

AFFECTED POPULATION

Lebanese: the number of Lebanese populations in need has increased to 2,063,582 for 2023 based on vulnerabilities. The Social Stability sector is guided by the “332 localities in Lebanon that host the highest number of displaced Syrians, Palestine refugees and deprived Lebanese” which was updated in 2022 and

replaces the map of the 251 most vulnerable cadasters, produced in 2015. These 332 localities host 87 per cent of displaced Syrian/Palestinian refugees and 74 per cent of deprived Lebanese.

Displaced Syrians: The total population of 1,500,000 displaced Syrians is considered in need for the sector support in 2023. This includes 765,000 females, 735,000 males, 781,500 children and 135,000 persons with specific needs.

PRL: The total 180,000 Palestine Refugees population in Lebanon are considered in need for the sector as they form part of the host community. This includes 93,600 females, 86,400 males, 63,000 children and 18,000 persons with specific needs.

PRS: The total 30,220 Palestinian Refugees from Syria population are in need for the sector support including 15,714 females, 14,506 males, 10,577 children and 2,418 persons with specific needs.

ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

The overlapping of the political and socio-economic crises has impacted access to and quality of services such as health, education, electricity, water, and solid waste management. At the municipal level, many municipalities are now unable or hampered to deliver basic services under their mandates due to limited funds. Requests to LCRP partners for fuel and spare parts, maintenance of machinery, equipment and direct

259 UNDP/ARK Regular Perception Survey wave XIV, <https://ialebanon.unhcr.org/#Analysis>.

support have progressively increased. The extent of the needs and the requests are now impacting the operational environment for LCRP partners that are increasingly under pressure to support municipalities. Such gaps in services lead to tensions at all levels. 30 per cent of the population considers per the latest UNDP/ARK perception survey (wave XIV) that competition for services and utilities is a key driver of inter-communal tensions. This includes electricity and solid waste management which are particularly causing tensions.

As living conditions continue to deteriorate, the situation is adding pressure on already-strained inter- and intra-communal relations. As per UNDP/ARK regular perception survey, in August 2022, 37 per cent of respondents reported negative inter-communal relations, compared to 21 per cent in July 2018. The main driver of inter-communal tensions is economic, including 'competition for lower skilled jobs' (50.3 per cent) and 'competition for services and utilities' (30.2 per cent). It is also worthy to note those inter-communal relations are the most fragile in the Bekaa, Akkar and the South.

Simultaneously, over the last three years, intra-Lebanese relations, which were previously very positive, have been deteriorating. In 2018, 4 per cent of Lebanese cited negative relations between different communities. As of July 2022, 39 per cent of respondents now report negative relations according to the UNDP/ARK Perception Survey.²⁶⁰ As a result, tensions between Lebanese are now at similar levels to Syrian Lebanese relations and are increasingly resulting in various incidents. For intra-Lebanese tensions, the trajectory and drivers are often more political/sectarian in nature. In July 2022, 58 per cent of the Lebanese cited political differences as the main tension driver compared to 33 per cent in July 2019. The second most reported driver of intra-Lebanese tensions is differences in socio-economic status as cited by thirty-eight per cent (38 per cent) of respondents.²⁶¹

The continuous deterioration in the economy, high levels of political instability, persistent concerns about access to food, clean water, electricity and medical care and the inability of security institutions to respond adequately to increased crime rates are notable factors - many of which are also contributing to dramatically worsening perceptions of physical safety and security, nationwide. Despite some minor improvements in perceptions of safety and security, 53 per cent Lebanese and 64 per cent of Syrians still

report feeling unsafe in their area or neighborhood at night. Worryingly, data gathered in July 2022, indicated that 40 per cent of the population believed that violence is sometimes necessary when interests are being threatened, leading to protection concerns, discriminatory measures, and alternative security arrangements.²⁶²

Displaced Syrian households with a member with a disability report higher number of incidents across all violence types; physical harassment, extortion, community violence and sexual harassment. Other concerns some might have include ID confiscation and risk of detention. The highest reports about people not feeling safe were reported in South Lebanon. Syrian households with a member with a disability also report feeling less safe at night walking alone.²⁶³

EVOLUTION OF SITUATION AND NEEDS

With the ongoing crisis, municipalities' increasing inability to provide essential public services is expected to continue. These services include the provision of solid waste management, community security services and water and wastewater at the municipal level. Consequently, this will have a negative impact on tensions, security, environment, and health aspects at different levels.

In terms of inter-communal relations, relationships will likely remain strained, with pressure points ranging from access to services and job competition as tension drivers are largely remaining the same. During the year, there is a risk that intensified political discourse around the displaced Syrians file could continue where political and religious figures at different levels issued statements that politically instrumentalized displaced Syrian issues.

In terms of intra-communal relations, although negative relations are now very high, the percentage of Lebanese describing relations with other Lebanese groups as 'negative' or 'very negative' has declined slightly since 2021 by 12 percentage points. This could, however, be impacted by the upcoming municipal elections.

Finally, as the economic crisis has also affected almost all governmental services, it has also affected the capacity of state security services responsible for maintaining law and order across the country. These factors could be linked to spiking social tensions, in addition to rising community insecurity and unprecedented levels of violence, with escalating theft, crime and clashes which are likely to continue in 2023.

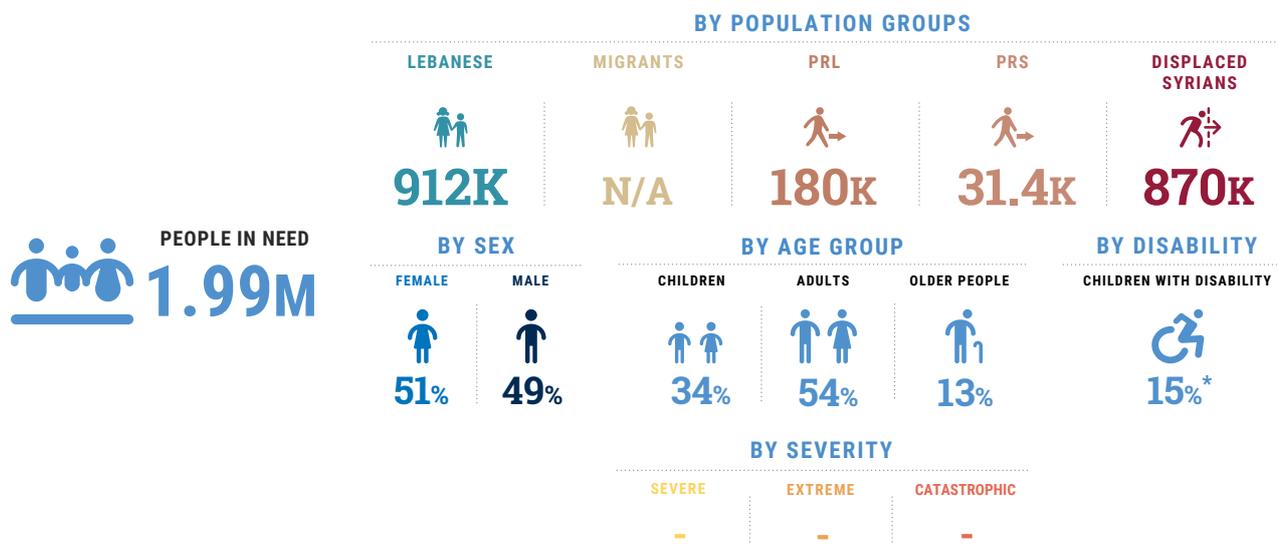
²⁶⁰ Ibid.

²⁶¹ Ibid.

²⁶² UNDP/ARK Regular Perception Survey wave XIV, <https://ialebanon.unhcr.org/#Analysis>.

²⁶³ VASyR 2022.

3.13. Shelter Sector



*The Washington Group Question, utilized in MSNA, recommends using as “a lot of difficulty” or “cannot do at all” in at least one domain as the cut off point for disability; to remain consistent with the analytical and reporting recommendation of the Washington Group we recommend all sectors to use the same approach. The sector can consider 2022 MSNA data for a percentage estimate or the global average of 15 per cent when data is not available.

OVERVIEW

Approximately 2 million people across all districts need shelter assistance so that they live in safe, dignified and adequate shelters, a marginal increase of 2 per cent compared to early 2022. This increase is particularly linked to the increase in the Lebanese PiN due to the recent available data on the housing situation of vulnerable Lebanese from the Multi-sectoral Needs Assessment (MSNA). The dramatic increase in poverty over the past three years and the radical increase in rent prices for all populations has placed additional strain on the ability of already vulnerable populations to access adequate shelters, with evictions²⁶⁴ on the rise and pressure to downgrade shelter standards in order to meet households’ other basic needs.

AFFECTED POPULATION

Lebanese: 12 per cent of the Lebanese population resides in inadequate shelters.²⁶⁵ With the majority of vulnerable Lebanese (2,849,968) living in the 332 most vulnerable cadastres, applying the shelter vulnerability from the MSNA equates to 911,990 individuals living in shelters that either have conditions below humanitarian standards and/or are in danger of collapse.²⁶⁶

Displaced Syrians: The 2022 VASyR estimates that 58 per cent of the displaced Syrian population reside

in inadequate shelters. This equates to 870,000 individuals living in shelters that are either overcrowded, have conditions below humanitarian standards, and/or are in danger of collapse.

PRS: Based on the high levels of vulnerability among this population, all PRS are deemed in need of shelter assistance. This includes 31,400 individuals who are registered with UNRWA. 41 per cent of PRS are hosted in the twelve official Palestine refugee camps with the remaining PRS population living in areas adjacent to camps or in other locations.

PRL: Based on the high levels of vulnerability among this population, all PRL are deemed in need of shelter assistance. This includes 180,000 individuals who are registered with UNRWA. 45 per cent of PRL are hosted in the twelve official Palestine refugee camps with the remaining PRL population living in areas adjacent to camps or in other locations.

The impact of the multiple crises facing Lebanon can be expected to disproportionately affect already vulnerable groups across all cohorts. This includes female-headed households, socially excluded groups, and persons with specific needs who face specific shelter-related protection risks. These groups are particularly susceptible to exploitation by landlords, resorting to negative coping mechanisms to access adequate housing, while others may not be able to

²⁶⁴ Reported evictions are largely due to the increasing inability of tenants to pay rent and increasing unwillingness of landlords to extend credit.

²⁶⁵ MSNA 2022.

²⁶⁶ The MSNA data collection methodology does not allow for an ‘overcrowding’ figure to be calculated that is comparable to the VASyR. As such the sector can only identify shelter needs based on substandard and dangerous conditions.

circulate easily in their shelter or be more prone to sickness as a result of inadequate housing.

ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

In major cities across the country, significant proportions of the vulnerable Lebanese and displaced communities live together in dense and poor urban neighbourhoods. Illustrative snapshots from neighbourhood profiles²⁶⁷ of vulnerable urban and peri-urban areas show that the difficulties in accessing secure, adequate²⁶⁸ and affordable housing are shared by both Lebanese and non-Lebanese low-income groups. With 84 percent of displaced Syrians²⁶⁹ in Lebanon and 23 per cent²⁷⁰ of Lebanese living in rented accommodation, and with a substantial increase in utility fees and rent prices, the ability of vulnerable families to cover rental payments is increasingly strained. This will likely increase the risks of both eviction threats and eviction cases which would require protection-focused shelter assistance in the form of cash for rent to mitigate these risks. Overall, 40 percent^{271,272} of displaced Syrians live in inadequate²⁷³ shelter conditions in urban and peri-urban areas. The majority of the vulnerable Lebanese population live in deprived urban pockets with 32 per cent²⁷⁴ living in buildings with structural or exterior conditions that are in substandard or critical condition, with precarious communal space standards. For PRS and PRL living in Palestinian camps, the majority of shelters lack a foundation and were created with cheap and inappropriate construction materials, leading to cracks,

leakages and in many instances structural failure.²⁷⁵ Systematic information on shelter conditions in areas adjacent to camps is not available. Vulnerable families from all population groups who reside in inadequate urban and peri-urban shelters require physical upgrades coupled with tenure security enhancements to safeguard their health, privacy, safety, security and dignity. Twenty-one percent of Syrian families live in ITSs where shelter inadequacy is the highest at 78 percent. These families require assistance to help reduce the shock of emergencies caused by fire, floods, evictions and adverse weather events as well as help mitigate the knock-on effect of shelter inadequacy on their vulnerability, including worsening the protection and health needs.²⁷⁶

EVOLUTION OF SITUATION AND NEEDS

The continued decline of the socio-economic conditions coupled with the financial crisis will continue to have a significant impact on the rental market leading to a radical increase in rent prices for all populations. This will result in a significant increase in both eviction threats and eviction cases and consequently, an increase in social tension linked to disputes over meeting rental obligations. This will increase the need for shelter/ protection focused assistance to affected families. The shelter needs of families living in ITSs will relatively remain the same while the needs of families living in urban shelters are likely to increase in response to the trend of vulnerable households, who are unable to meet their rental obligations, moving to increasingly substandard or dangerous shelter conditions.



Credit: UNHCR, Lebanon

267 UN-Habitat and UNICEF.

268 One or more of the following: structure in dangerous condition, physical quality of shelter below shelter standard, overcrowding (<4.5sqm per person).

269 VASyR 2022.

270 International Labour Organization (ILO), Labour Force and Household Living Conditions Survey (LFHLCs) 2018-2019.

271 This is based on direct observations by VASyR 2022 enumerators when visiting the shelters.

272 VASyR 2022.

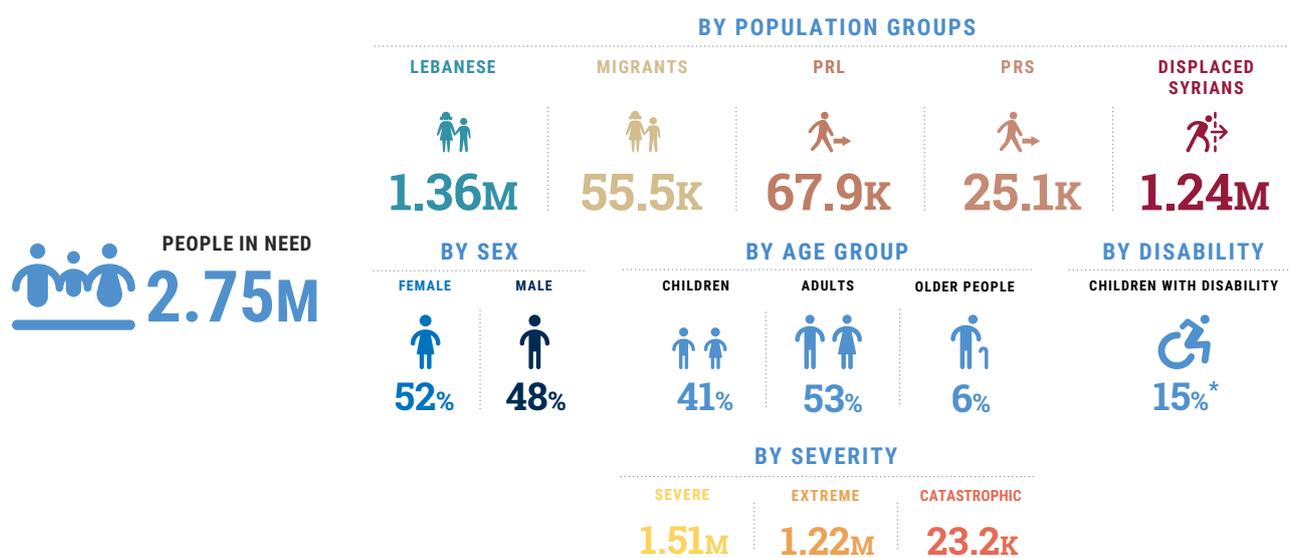
273 One or more of the following: structure in dangerous condition, physical quality of shelter below shelter standard, overcrowding (<4.5sqm per person).

274 MSNA 2022.

275 UNRWA (2017), Inventory and Needs Assessment on Environmental Infrastructure and Environmental Health in the twelve Palestine refugee camps in Lebanon, Response Plan 2018 – 2021 by Field Infrastructure and Camp Improvement Programme.

276 For instance, the sealing of shelters (weatherproofing) can enhance the effectiveness of the winter support activities of the Basic Assistance sector, such as cash for fuel or provision of stoves. Also, installing partitions within a shelter to separate the sleeping spaces can reduce risk of GBV.

3.14. Water, Sanitation and Hygiene Sector



*The Washington Group Question, utilized in MSNA, recommends using as “a lot of difficulty” or “cannot do at all” in at least one domain as the cut off point for disability; to remain consistent with the analytical and reporting recommendation of the Washington Group we recommend all sectors to use the same approach. The sector can consider 2022 MSNA data for a percentage estimate or the global average of 15 per cent when data is not available.

OVERVIEW

Nearly 2.8 million people in Lebanon are increasingly facing dramatic challenges with accessing safe and sufficient quantities of water for drinking and domestic use, and safe sanitation. The crises are compromising both institutional capacity to deliver services as well as household purchasing power, driving poverty, deprivation and inhibiting access to services.²⁷⁷ Water systems are working intermittently few hours a day, while the majority of wastewater treatment plants are no longer functioning due to electricity cuts and unaffordability of fuel to run the backup power generators. On top of these challenging circumstances, the recent cholera outbreak in Lebanon poses an additional and urgent threat, severely exacerbating public health risks. The sector estimates that the Water, Sanitation and Hygiene (WaSH) related needs across all 26 districts in Lebanon has increased by at least 25 per cent compared to early 2022.²⁷⁸

AFFECTED POPULATION

Cross cutting factors

All population groups in Lebanon are affected by limitations of the functionality and efficiency of WaSH infrastructure and services, and this is true both in urban and rural communities. The population underserved by public services are collectively in a

worse situation, and so highly dependent on informal water sources, facing water supply shortages and insufficiency, poor water quality, severe issues with sewage disposal or lack of garbage removal services. More than 150,000 people do not have access to any public water supply system and completely rely on private alternatives (84,000 Lebanese, 65,000 displaced Syrians, and the remaining PRL and PRS). The great majority of the underserved population is located in North and Akkar (132,000).²⁷⁹

The most financially vulnerable households, households with Persons with Disabilities (PWD), FHHs or households with children with special needs may face more challenges having equitable access to WaSH services. Such a situation poses significant public health risks that have harmful cascade effects on communities in terms of nutritional status, inequality, and poverty.

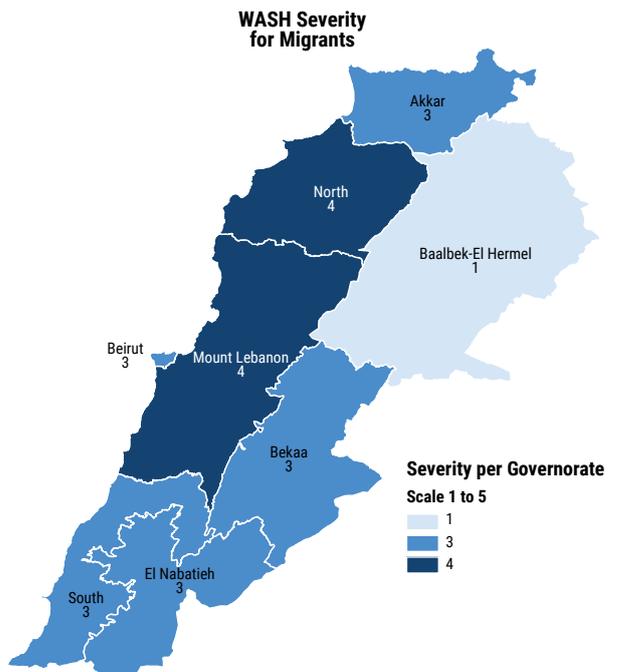
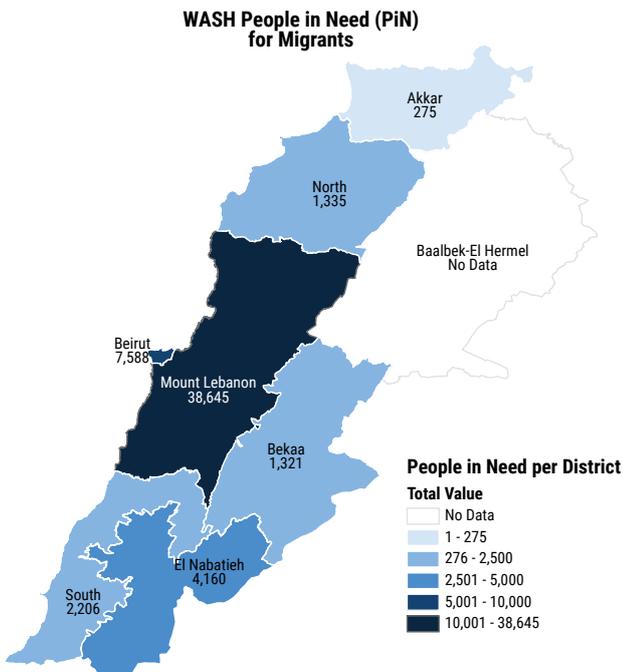
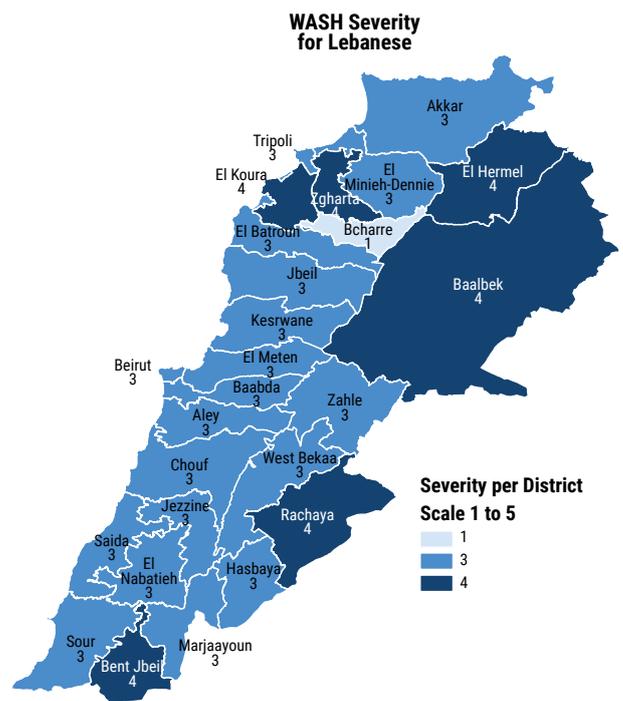
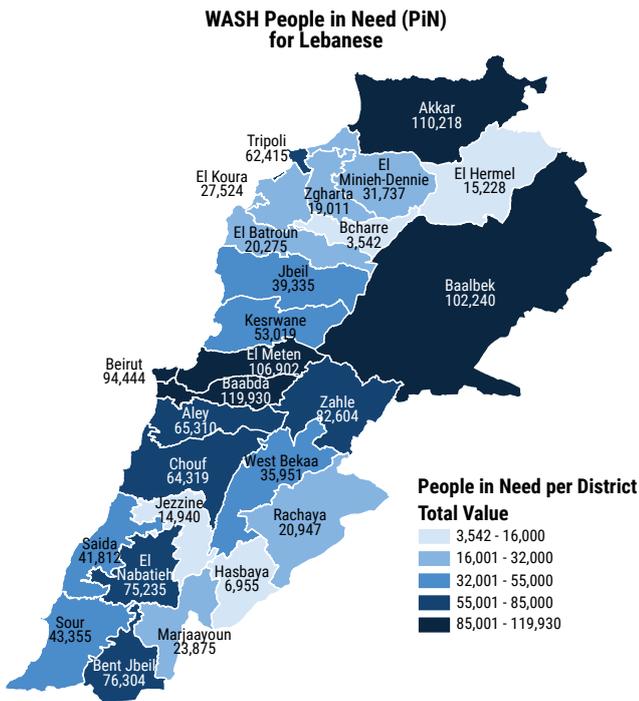
In terms of access to hygiene items, the needs of families with young children (0-2 years old), women in reproductive age (15-49) or households with elderly members (65 and over) are higher than for the rest of the population.

Children under 5 are the age group most affected in the current cholera outbreak (26 per cent of cases). One of the possible explanations for the highest incidents among children might be the use of baby formula,

277 Lebanon WaSH Sector. (2022). When water becomes a privilege: the consequences of shutting down the public water system in Lebanon. <https://reliefweb.int/report/lebanon/when-water-becomes-privilege-consequences-shutting-down-public-water-system-lebanon>.

278 Based on the WaSH Sector PiN analysis for Lebanese 2021 and 2022.

279 WaSH Sector Vulnerability Assessment Preliminary findings for 2022.



which is prepared by mixing milk powder and water.²⁸⁰ Cholera put all groups at risk regardless of sex, age, and social status. However, social roles contribute to individuals' vulnerability to cholera. Studies have shown that women and girls are more affected in cholera outbreaks,²⁸¹ and gender data from the early stage of Lebanon response shows similar trends.²⁸²

Lebanese: 1.3 million Lebanese (42 per cent of the population) have limited or no access to adequate

WaSH. Out of this, over 440,000 Lebanese are facing critical or highly critical water supply gaps,²⁸³ while 380,000 Lebanese have critical and highly critical sanitation and hygiene conditions at household level.²⁸⁴

PRL: The living conditions of the Palestine refugees are especially concerning regarding access to WaSH services and the congestion of the camps. Nearly 68,000 PRL are facing challenges in accessing WaSH services, making it proportionally the population group

280 L'Orient de Jour November 8 2022 <https://today.lorientlejour.com/article/1317351/why-are-children-particularly-at-risk-for-cholera.html>.

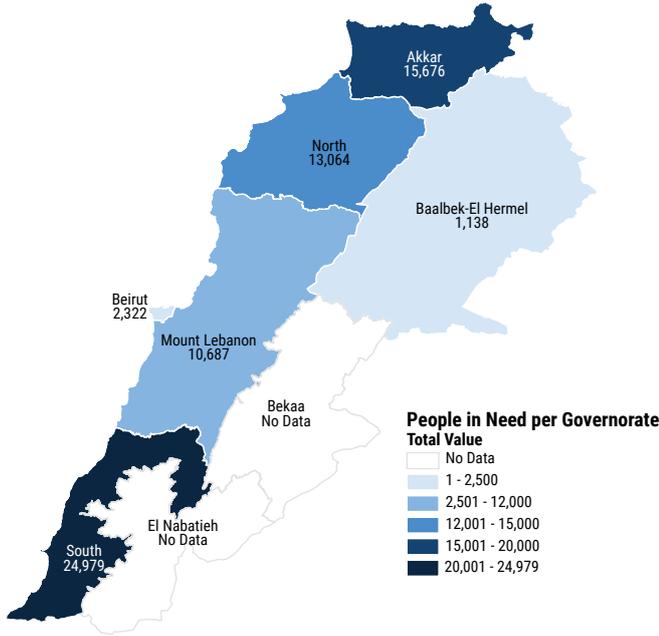
281 Rancourt, N. (2013). Gender and Vulnerability to Cholera in Sierra Leone: Gender analysis of the 2012 cholera outbreak and an assessment of Oxfam's response. Oxfam GB.

282 Lebanon MOPH data on positive cases in Lebanon 57 per cent of the cases are females, against 43 per cent male.

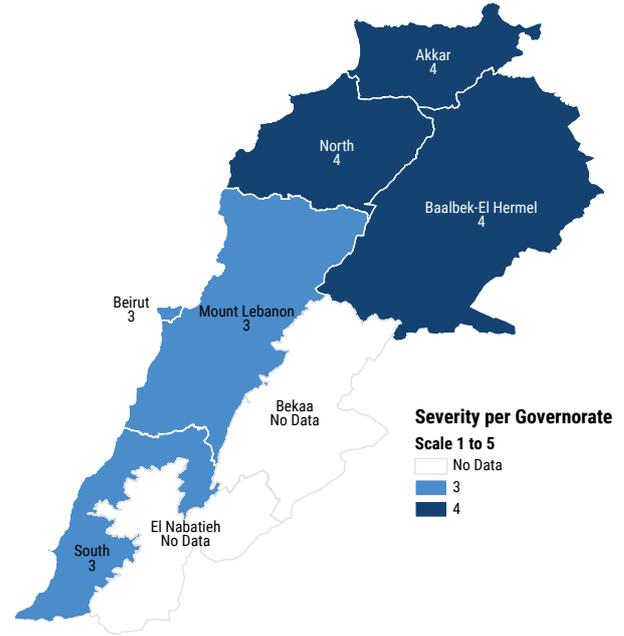
283 Defined as access to only water for drinking (Critical), no water for drinking (highly critical) or using surface water (highly critical). See methodology section for further details.

284 Defined as a hand dug hole in the ground (Critical) OR wastewater stagnant rains into an open area outside of the shelter (highly Critical) and hand washing facility with no access to water and soap (Critical). See methodology section for further details.

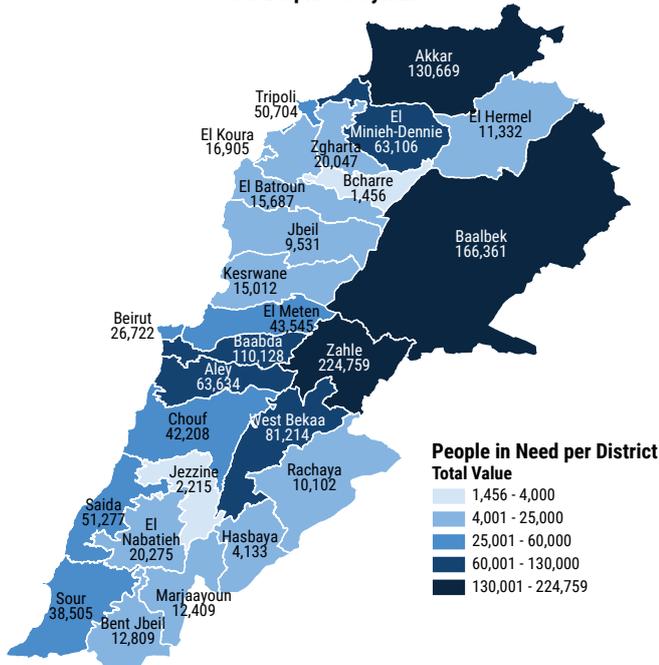
WASH People in Need (PiN) for PRL



WASH Severity for PRL



WASH People in Need (PiN) for Displaced Syrian



with highest WaSH needs (83 per cent of the total population). Of this 68,000 People in need, between 12 to 14 thousand fall in the critical and highly critical.

Migrants: 55,000 Migrants residing in Lebanon are facing limited access to WaSH services. Migrants are the population group with proportionally the highest deficit in accessing safe Sanitation and hygiene (21 per cent in critical and highly critical).

Displaced Syrians: 1.24 million displaced Syrians (83 per cent of the population) have issues accessing WaSH services (996,053 residing in residential units and 248,691 in ITs). Displaced Syrians living in ITs and collective shelters are often fully dependent on humanitarian assistance and often experience worse WaSH conditions which makes them particularly vulnerable, especially when the humanitarian service provision is interrupted. In general, women and girls, people living with disabilities and the elderly, together with FHHs face more constraints and various protection risks in accessing WaSH services: 23 per cent of Syrian households with babies reported not having enough baby care items (diapers etc), while 51 per cent of FHHs are sharing toilet with another household, compared to 32 per cent of MHHs.

ANALYSIS OF HUMANITARIAN AND STABILIZATION NEEDS

Lack of electricity from EDL²⁸⁵ severely impacts water supply as the EDL forms the main energy source for 87 per cent of the water supply systems across Lebanon.²⁸⁶ Increasing number of people from all population groups reported not having access to enough water, 39 per cent of Lebanese households and 48 per cent PRL households reported not having sufficient quantity of water to cover at least one basic need (drinking, cooking, personal hygiene, other domestic purposes) vis-a-vis 20 per cent and 19 per cent in 2021.²⁸⁷ Amongst Syrian households, 56 per cent reported insufficient or barely sufficient water for

285 Along the year only between 2 to 5 hours of electricity from EDL was received in much of the country, with zero hours provided in some parts of Lebanon. From September 2022 there is nearly a total power blackout across the entire country.

286 WaSH Sector, Water Supply Vulnerability Mapping, November 2021.

287 MSNA 2022 and MSNA 2021.

washing and domestic purposes vis-a-vis 33 per cent in 2021.²⁸⁸ The most water insufficient governorates for Lebanese households are Mount Lebanon, Bekaa, Akkar, and Baalbek-El Hermel, while for Syrian households North, South and Baalbek-El Hermel.

Bottled water remains the highest drinking water source amongst all population groups except displaced Syrians living in the ITS nevertheless the noticeable decrease in bottled water use has been observed for all groups. 53 per cent of Lebanese households and 40 per cent PRL households reported bottled water as their primary source of drinking water vis-a-vis 59 per cent and 79 per cent in 2021. For displaced Syrian households, 34 per cent relied on bottled water as the main drinking water source (compared to 38 per cent in 2021 and 37 per cent in 2020). The decrease in bottled water use might be linked to the increase in its price, a more than five-fold increase from 2021.²⁸⁹

The highest usage of bottled water remains in Beirut, while the lowest is in Baalbek Hermel. Similarly, to the price of bottled water the cost of water trucking increased significantly over the one year period. For 28 per cent of displaced Syrian households drinking water source was not available when needed (highest in Beirut and Mount Lebanon 40 per cent and North 32 per cent), and the situation was worse out of ITS (32 per cent) than in ITS (16 per cent). 22 per cent displaced Syrian households use water network as the main drinking water source, but half of them had access for less than 2 hours a day.

Preliminary data shows that more than 1.5 million people are discharging wastewater in the environment without prior treatment, of which 700,000 are directly discharging in a valley or a river.²⁹⁰ Only 30 per cent of wastewater treatment plants perform tertiary treatment and the majority are not operational. Over 8 per cent of Lebanese households drain the wastewater from their toilets into a hand dug hole in the ground what may pose environmental and public health risks, especially during the cholera outbreak. The highest proportion of households disposing wastewater in this way is in Nabatieh (46 per cent) and Baalbek-El Hermel (28 per cent). There is a 25 per cent difference in access to basic sanitation services between Syrian households in

residential locations (67 per cent) and non-permanent (41 per cent) locations.

High proportion of households reported issues related to accessing hygiene items (e.g. soaps, cleaning products, diapers, etc.) and adapted different coping strategies. This reflects the economic conditions and households' impoverishment, with 44 per cent of Lebanese and 33 per cent of PRL households facing such challenges. Similarly, 27 per cent of Lebanese female, 31 per cent of migrants and 19 per cent of PRL claimed that the menstrual materials are too expensive. The highest proportion of households with no soap by hand washing facility or no water have been observed in Akkar, Baalbek-El Hermel and Bekaa (11 per cent).²⁹¹ Migrants and PRL face more issues with appropriate hand washing facilities than Lebanese households. 23 per cent of Syrian households with babies reported not having enough baby care items (diapers etc) the highest in Nabatieh (47 per cent) and in the North (34 per cent).

EVOLUTION OF SITUATION AND NEEDS

In 2023, WaSH needs among all population groups in Lebanon could further increase as the economic deterioration will continue to unfold²⁹² accompanied by fluctuations of electricity supply and thus of water and sanitation service provision, increase in price of water and hygiene items. Combat with the cholera will most likely continue along 2023 and would require substantive resources to address the systemic gaps of the water supply and sanitation systems, resources that would likely not be available considering the competing crises and 29 outbreaks globally.

On the bright side, the increased investments in gravity fed and solar powered solutions for water supply might partly alleviate the gap in the water supply in the coming years. Further there are preliminary commitments from donors for partly funding operational and maintenance costs in support of the Ministry of Energy and Water 5-years Water Sector Recovery plan nevertheless real political support towards the plan is highly critical.

288 VASyR 2022 and VASyR 2021.

289 Water market monitoring, WaSH sector, October 2021.

290 Preliminary results from the ongoing WaSH Sector Water and Sanitation Infrastructure Vulnerability Mapping. WaSH sector, 2022.

291 MSNA 2022.

292 World Bank, Lebanon Public Finance Review : Ponzi Finance?, July 2022.

Part IV: Technical Annexes

4.1. Information Gaps and Limitations

This section provides an overview of the data sources used for the setup of the humanitarian profile in Lebanon for all population groups assessed through the multi-sectoral needs assessment (MSNA), vulnerability assessment for Syrian Refugees (VASyR) and a brief overview of the main data sources used to estimate the number of people in need (PiN) and severity of needs when was applicable.

Demographic data sources

- Lebanese: 3.86 M (excluding people living in non-residential units, such as army barracks, refugee camps and adjacent gatherings, and informal settlements) Labour Force and Household Living Conditions Survey (LFHLCS), 2018–2019.
- Palestine Refugees in Lebanon (PRL): 180,000, UNRWA Lebanese Palestinian Dialogue Committee: Population and Housing Census in Palestinian Camps and Gatherings 2017, CAS and Palestinian Bureau of Statistics (PCBS) x 3.1974 (as growth rate from July 2017)
- Palestine Refugees from Syria (PRS): 31,400 UNRWA 2022 estimates based on registration data.
- Migrants: 135,420 IOM, Migrant Presence Monitoring (MPM) Baseline Assessment, Round 2, July 2021 (report [here](#)) and Multi-Sector Needs Assessment (MSNA), October 2022 for age-disaggregated data.
- Displaced Syrians: 1.5 million, LCRP / GoL Estimate of 1.5 million Displaced Syrians, UNHCR Registration and Assistance Databases March 2022 and Informal Settlements Mapping Project IAMP99.

Household population size

- Lebanese: Average of 4.5 members per household (source: LFHLCS, 2018–2019, CAS & ILO, corroborated by 2022 MSNA).
- PRL: Average of 4.5 members per household (source: MSNA, 2022).

- PRS: Average of 3.2 members per household (source: UNRWA relief and social services database, 2022).
- Migrants: Average of 1.5 members per household (source: MSNA, December 2022).
- Displaced Syrians: Average of 5 members per household (source: VASyR, 2022).

Sex, Age and Disability profile:

- Lebanese: Gender and age interval counts of 0-4, 5-9, 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80-84, 85 and above.²⁹³
- PRL: Gender and year interval counts of 0-4, 5-9, 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80-84, 85 and above.²⁹⁴
- Migrants: Gender and year interval counts of 0-4, 5-14, 15-17, 18-59, 60 and above.²⁹⁵
- National male and female ratio of 48.4 per cent to 51.6 per cent.²⁹⁶
- Disability profile: 2022 MSNA provided a percentage estimate based on considering “a lot of difficulty” or “cannot do at all” in at least one domain (seeing, walking, hearing, etc) as cut off point for disability, in line with the Washington Group Analytical Guidance [here](#). When prevalence could not be determined, a global average of 15 per cent was considered.

Key needs assessments used to estimate intersectoral PiN and severity:

- Multi-Sector Needs Assessments (MSNA), Round 2: In 2022, following a request from the HCT, OCHA and REACH Initiative coordinated the MSNA round 2 with humanitarian partners in Lebanon. The MSNA was designed to provide evidence on humanitarian needs and inform strategic response planning and support prioritization. The

²⁹³ LFHLCS, 2018–2019 (CAS, ILO).

²⁹⁴ UNRWA, CAS and PCBS.

²⁹⁵ IOM MPM Assessment Round 2, MoL work permits data (2020), MSNA 2022 age-disaggregated data (weighted, combined governorates).

²⁹⁶ Labour Force and Household Living Conditions Survey (LFHLCS) 2018–2019 (CAS, ILO).

MSNA is funded by the European Civil Protection and Humanitarian Aid Operations (DG-ECHO), USAID's Bureau for Humanitarian Assistance (BHA), and the Lebanese Humanitarian Fund (LHF), in collaboration and coordination with the United-Nations Office for the Coordination of Humanitarian Affairs (UN-OCHA), the International Organization for Migration (IOM), and the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA). The assessment planning and the MSNA questionnaire was developed jointly with sectors as well as technical and thematic working groups (e.g., MSNA WG). UN Women provided technical assistance throughout the assessment to ensure the meaningful attention to and integration of gender equality and social inclusion issues, as well as conducted data analysis to ensure the disaggregation of gender, age, and disability disaggregated data. The data collection was coordinated by REACH Initiative and took place from July 2022 until November 2022 with support of local and international NGO partners and UN agencies, including: IMPACT Initiatives, the International Organization for Migrations (IOM), Nabaa, Qualisus consultancy. 40 female and 37 male REACH enumerators interviewed alongside partners' enumerators, 5689 affected households in 25 out of a total 26 districts in Lebanon, including 3974 Lebanese households, 590 PRL households and 1125 Migrant households. Most teams were formed of one male and one female enumerator.

- Standardized Monitoring Assessment for Relief and Transition Method (SMART): The Lebanon Anthropometric Nutrition Survey was conducted by the Ministry of Public Health, with the support of the Nutrition Sector led by UNICEF and Action Against Hunger (AAH) and supported by FAO, WHO, UNHCR, UNRWA, WFP, IOCC, Mercy USA, and Save the Children. The survey took place between August and September 2021. The survey involved ten sub-national surveys - eight surveys collected data from Lebanese at Governorates level and two surveys collected data from refugee sub-populations (Palestinians in camps and Syrians in refugee settlements). In this survey, a weighted sample of 3,558 children under the age of five and 9,214 women of reproductive age were surveyed from 853 clusters. Of the total 3,558 children and 9,214 women surveyed, 80 per cent were Lebanese and another 20 per cent were Palestinians in camps and Syrians in ITSS.
- Lebanon m-VAM Vulnerability and Food Security Assessment: This is a jointly conducted countrywide survey of WFP Lebanon and the World Bank (WB), involving remote data collection through phone surveys to gather specific household-level information on the food security, vulnerability, and livelihood situation of the Lebanese population.
- MOPH: MoPH data was processed by the Health sector to calculate the severity scores to OCHA and enable PIN estimations.
- The Vulnerability Assessment of Syrian Refugees in Lebanon (VASyR) analyzes a representative sample of Syrian refugee households in Lebanon to provide a multi-sectoral update of the situation of this population. Conducted annually, 2022 marks the tenth year of this assessment. The contents of this report, jointly issued by the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children's Fund (UNICEF), and the United Nations World Food Programme (WFP), with support from UN Women and a range of NGO partners, show that the situation of Syrian refugees continues to worsen as Lebanon faces a compounded socio-economic and health crisis.
- Migrant Presence Monitoring (MPM) Round 2 is produced by IOM in Lebanon. The information is used to support humanitarian assistance, coordination, and planning. The MPM relies on key informants who are mostly migrant community representatives, Mukhtars, and Municipality officials, to provide reliable information in their geographical area. The assessed areas are small enough to ensure that the information collected is as detailed, precise, and reliable as possible. As during the 2021 MPM, data was collected on population size (number of migrants) and nationalities. The 2022 MPM also collected sex and age disaggregated data.
- The inventory and Needs Assessment on Environmental Infrastructure and Environmental Health in the twelve Palestine Refugee camps in Lebanon produced by UNRWA 2017 was used for the analysis by Shelter sector.
- WAP 2022: WAP assessment is conducted on a regular basis by Sector partners to assess the WASH needs of Syrian refugees at the informal settlements.
- WASH vulnerability and solarization assessment is conducted by Sector partners in 2022 to assess the vulnerability of the Water facilities and on which energy sources are relying.

4.2. Methodology

Following the first humanitarian needs overview issued in April 2022, HCT has tasked the EOC to undertake a second round of Multi-Sectoral Needs Analysis (MSNA) to determine the increasing needs of Lebanese, migrants and PRL. The analysis is therefore complementary to the analysis of needs of Syrian refugees and host communities conducted in 2022 to inform the Lebanon Crisis Response Plan for 2022-2023.

To analyze the scale and severity of the humanitarian needs of these three population groups across the country, the humanitarian community in Lebanon relied on the comprehensive nationwide Multi-Sector Needs Assessment (MSNA) and sectors' specific assessments, such as IPC as Food Security Assessment for food needs, WAP for WASH needs and MOPH for health needs.

The joint inter-sectoral analysis compiled in this document aims to provide a comprehensive overview about the growing needs in Lebanon and therefore inform the decision-making and the response plans in the country. This document reflects the humanitarian needs of the different population groups in addition to the demands of the Lebanese institutions to maintain the basic services.

Sectoral severity and PiN estimation

Following the global clusters' methodology, the sectors calculated the sectoral severity and PiN using multiple sources of data, including MSNA 2022, VASyR, WFP VAM, IPC, MoPH and other surveys.

Intersectoral severity and PiN estimation

The intersectoral PiN for the Lebanese population was obtained by summing the highest Sectoral PiN at district level, for the 26 districts. For migrants and PRL, the same method was applied at the governorate level.

The intersectoral severity maps were obtained by summing severities across the sectors, where the severity was 3 or above.

Sampling and Disaggregation

To maintain a feasible data collection process with statistically representative findings, two sampling strata were considered for the 2022 MSNA: population groups of concern (Lebanese, Migrants and PRL) and geography (district for Lebanese and governorate level for PRL and migrants).

- For **Lebanese** households a Probability Proportional to Size (PPS) two-staged cluster

sampling approach was applied, and findings are statistically representative at district level, with a level of confidence of 95 per cent and a margin of error of 10 per cent.

- For **migrant** households a Probability Proportional to Size (PPS) cluster sampling approach was applied at the governorate level, and findings are representative at governorate level with a 95 per cent level of confidence and a margin of error of 10 per cent.
- For **PRL** households, a two-stage stratified random sampling approach was applied in the 12 PRL camps in Lebanon, using camps as primary sampling units in the six governorates where Palestinian camps are located. The data is representative for the PRL HHs living in camp at governorate level, with level of confidence 95 per cent and margin of error of 10 per cent.

The MSNA sampling method for two strata, namely the division of population by status and by geography, may result in specific needs of some smaller groups (e.g., subset of Lebanese living with disability, PRL female-headed households living with disability) to be under- or over-represented.

Results disaggregated by gender or age, and results related to a subset of the overall population (e.g., only those who answered 'yes' or 'no' to a certain question) are to be considered indicative as they are likely to have a lower precision. Data allows for further understanding of how gender identity, gender roles and power dynamics in the households affect households and individuals' situation and can be used to inform on overall trends but should be used cautiously for prevalence and should not be extrapolated to represent the views/needs of the entire population.

Potential Biases

- Some migrant respondents were responding to the survey in the presence of their employers, which could have affected the results.
- The MSNA data on migrants is statistically representative on the governorate level. Access limitations precluded the surveying of several areas with migrants' presence. Similarly, homeless migrants and live-in migrant domestic workers are more difficult to identify and reach, therefore data is more limited regarding their specific needs.
- MSNA enumerators received a disproportional amount of survey refusals in high-income areas. This might have had an impact on the overall MSNA

results, through a potential overrepresentation of low- and medium-income households in certain areas.

- Several MSNA indicators received a high number of “do not know” answers, which may indicate a limited understanding of these questions, and decreases the representativeness of the overall findings.
- MSNA findings are based on self-reported information, meaning that the information obtained on some areas (particularly on more sensitive topics such as the validity of work permits or other IDs, or psychosocial needs) may be underestimated.
- While MSNA is conducted at a household level, several individual level questions have been included as well. Individual level data should however be considered as indicative rather than statistically representative as a) the MSNA used a household level sampling strategy and, b) data on the individual level was reported by proxy by one respondent per household (usually a physically and mentally healthy household member), rather than by the particular individual HH members themselves. As a result, it might not accurately reflect the lived experience of individual HH members (e.g. children and often more vulnerable household members).
- As different sampling strategies have been used in 2021 and 2022, any trend analysis should be considered as indicative only.

Timeline

- MSNA and VASyR data collection and IPC analysis have approximately started in the same period, and MSNA round 2 has been extended till November to ensure efficient coordination with local authorities.

Geographic Gaps

- The data collection for all population groups have been completed with no gaps except the one related to Lebanese HH in Nabatieh district.

Gaps in population groups

- Current population data sets utilized for this exercise are derived from a variety of sources compiled between 2017 and 2021 which are not reflecting recent immigration and emigration trends. Updates of official baseline population data disaggregated at subnational level were not yet available at the time this report was being prepared.

- While the MSNA includes data for PRL in camps or those living close to official camp boundaries, data is lacking for PRL living in out-of-camp settings.
- Limited information is available for the LGBTIQ community. Additionally, while a few non-gender confirming respondents were included in the 2022 MSNA, this concerns a very small group and only provides indicative findings.

Thematic gaps

- Basic Assistance: no updated data on poverty for Lebanese households.
- Child Protection: lacking comprehensive studies and assessments at the national level to better understand the magnitude and drivers of child protection needs, specifically on emerging new trends such as child labor and child marriage.
- Gender-based Violence: Quantitative surveys that are household based like MSNA and VASyR have limitation in collection of protection information, GBV questions are not asked because of safety concerns and confidentiality. The sector relies heavily on the GBV Information Management System] analysis as data source and triangulation with literature review. The GBV WG this year with the support of the GBV AOR help desk conducted a SDR secondary data review analysis to enrich the situation analysis.
- Education: lacking information on barriers in the supply side of education-situation of the schools, teachers’ supply and well-being, administrative barriers to access education. These barriers are important contributors to limited access of children to education, in addition to lack of data on the pathway of the children who dropped out of schools that cannot be captured through household level assessments. Limited comparison between MSNA and VASyR findings was also challenging.
- Health: VASyR and MSNA do not reflect on the quality of the received care. They measure health access and barriers at both individual and household levels only. Additional representative data on the PRS population is also required.
- Livelihood: The findings of MSNA and UNRWA survey are not representative for one cohort (especially PRL and PRS).
- Migrants: Migrant community in Lebanon is not easily identified and reachable. Protection, shelter-quality of living and children needs are still underreported by migrant community in MSNA and MPM assessments.
- Nutrition: Although the National SMART Nutrition Survey 2021, has provided fresh evidence on

anthropometric and IYCF indicators in Lebanon, given the high prevalence of anemia reported among women and children, more detailed insight into the micronutrient deficiencies is required. To address this major data gap, the sector has planned to conduct a new round of SMART survey in 2023.

- Protection: The data collection and methodology of the various assessments are not standardized. While efforts have been made to align indicators in the VASyR and MSNA in 2022 discrepancies remain. Information gaps exist particularly in relation to sensitive issues such as understanding the scope and nature of coercive practices including exploitation and trafficking, the impact of restrictive measures and safety and security concerns, the extent to which communities rely on informal justice mechanisms to find remedies, as well as positive coping strategies. It will be

important in 2023 to ensure that information gaps are addressed in needs assessments and proxy indicators used for sensitive topics.

- Shelter: The MSNA findings do not include an estimation of the overcrowding figure that can be comparable to the VASyR. Therefore, the sector identified the shelter needs based on substandard and dangerous conditions and calculated shelter sector PiN by applying the percentage of households living in inadequate shelters from the MSNA to the full Lebanese population.
- Social Stability: Lack of information to reflect on the figures of older persons and people with disability supported by the sector.
- WASH: When MSNA data were not available, the governorate average has been used instead.

4.3. Intersectoral Analysis Framework

| NO. | SECTOR | INDICATOR | DATA SOURCE |
|-----|-----------------------|---|-------------------|
| 1 | AAP | per cent of households that reported dissatisfaction with the way humanitarian assistance is delivered | MSNA |
| 2 | AAP | per cent of HHs reporting not to be satisfied with the assistance their received in the past 12 months | MSNA |
| 3 | AAP/Migrants | per cent of HH reported facing at least 1 barrier to access assistance | MSNA |
| 4 | Education | per cent of school-aged children attending school regularly (at least 4 days a week) in the 2021-2022 school year while schools were open | MSNA |
| 5 | Education | per cent of HH that have trouble meeting education needs because of lost or reduced employment, financial or access/availability issues | MSNA |
| 6 | Education | per cent of people identified as multidimensionally poor | CAS, WB |
| 7 | Food Security | Integrated Phase Classification | MSNA, VASyR, mVAM |
| 8 | Health | per cent of people reporting they are unable to access health services when required | MSNA |
| 9 | Health | per cent of HHs that report no insurance coverage or NSSF coverage only | MSNA |
| 10 | Health | PHCs Level 2 per 50,000 population | MoPH? |
| 11 | Livelihood / Migrants | per cent of HH reporting trouble meeting needs because of lost or reduced employment, financial or access/availability issues | MSNA |
| 12 | Migrants | per cent of HH expecting to return to their country or origin (willingly or against their will) | MSNA |
| 13 | Migrants | per cent of HH with at least 1 barrier to access assistance | MSNA |
| 14 | Migrants | per cent of HH with at least one member with intention to move from current location | MSNA |
| 15 | Nutrition | Prevalence of anemia Hb <11g/dl in children 6 - 59 months | SMART |
| 16 | Nutrition | Minimum Acceptable Diet in children 6 to 23 months | SMART |
| 17 | Nutrition (option 1) | per cent of infants 0-5 months of age who are exclusively with breast milk | MSNA |
| 18 | Nutrition (option 2) | per cent of Minimum Dietary Diversity in children 6 to 23 months | MSNA |
| 19 | Protection | per cent of HHs reporting concerns from any harm, physical threats or discrimination in the area where they are living in the last 3 months (including men, women, girls, boys, children with a disability) | MSNA |
| 20 | Protection | per cent of HHs reporting concerns from any harm, physical threats or discrimination in the area where they are living in the last 3 months (only for child) | MSNA |
| 21 | Protection | per cent of HHs reporting concerns from any harm, physical threats or discrimination in the area where they are living in the last 3 months (only for boys) | MSNA |
| 22 | Protection | per cent of HHs reporting concerns from any harm, physical threats or discrimination in the area where they are living in the last 3 months (only for girls) | MSNA |
| 23 | Protection | Dependency ratio (version 1) | MSNA |
| 24 | Protection | Dependency ratio (version 2: by considering HH size) | MSNA |

| | | | |
|----|-----------------------------------|--|------|
| 25 | Protection | per cent of households resorting to negative livelihood-based coping strategies | MSNA |
| 26 | Protection/Migrants | per cent of HH reported at least one person not having ID document | MSNA |
| 27 | Protection | per cent of HHs reporting concerns from any harm, physical threats or discrimination in the area where they are living in the last 3 months (only for women) | MSNA |
| 28 | Protection - CP | per cent of households reporting the presence of children engaged in child labor outside of the home in the past 3 months | MSNA |
| 29 | Protection - CP | per cent of children (age 5 - 17) not attending school regularly while schools were open during the last academic year (2021-2022) [CP] | MSNA |
| 30 | Protection - CP | Main Safety concerns for boys and girls (including CWD) | MSNA |
| 31 | Protection - CP/GBV | per cent of HHs with at least one boy or girl in early marriage | MSNA |
| 32 | Protection - GBV | per cent of HHs reporting concerns from any harm, physical threats or discrimination in the area where they are living in the last 3 months (only for WOMEN and GIRLS) | MSNA |
| 33 | Protection - GBV | per cent of HH reporting women and girls avoid areas because they feel unsafe there | MSNA |
| 34 | Protection - GBV | per cent of HH reported avoiding at least one area in their location that that women and girls avoid because they feel unsafe there | MSNA |
| 35 | Protection - GBV | per cent HH with at least on girl (15 - 19) in child marriage | MSNA |
| 36 | Protection - GBV | per cent of HH reporting at least one of the GBV safety and security concerns for girls and women: | MSNA |
| 37 | Protection/migrants | per cent of HH reported at least one person not having ID document | MSNA |
| 38 | Shelter | per cent of HH living in non-residential shelters | MSNA |
| 39 | Shelter | per cent of HHs whose dwelling enclosure provides adequate safety to the occupants, protection from exposure, and low risk of failure in predictable hazards | MSNA |
| 40 | Shelter | per cent of HH living in rented shelters | MSNA |
| 41 | Shelter / Protection | per cent of HHs who are living under a threat of eviction/ living under an eviction notice | MSNA |
| 42 | Telecommunication and electricity | per cent of households without access to any electricity source (per number of hours) | MSNA |
| 43 | Telecommunication and electricity | per cent of households with no member with network coverage to use the mobile phone most days | MSNA |
| 44 | Telecommunication and electricity | per cent of households in an area without access to any electricity source | MSNA |
| 45 | WASH | WSSI | MSNA |
| 46 | WASH | per cent of HHs reporting having access to sufficient quantity of water to cover transversal needs (drinking, cooking, bathing, washing, domestic use) | MSNA |
| 47 | WASH | per cent HH without access to an improved sanitation facility | MSNA |
| 48 | WASH / Health | per cent of HHs reporting not using good hygiene practices to wash their hands | MSNA |

