

EMERGENCY RESPONSE PLAN LEBANON

2023

ISSUED April 2023



About

This document is consolidated by OCHA on behalf of the Humanitarian Country Team and partners. The Humanitarian Response Plan is a presentation of the coordinated, strategic response devised by humanitarian agencies in order to meet the acute needs of people affected by the crisis. It is based on available data in the country.

PHOTO ON COVER

Craig Anderson / OCHA / September 2022 - *(artist: Christian Guemy)*

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.

Table of Contents

06	Part 1: Crisis Overview
06	Context and Impact
09	Part 2: ERP Strategic Objectives
11	Part 3: Response Strategy
11	Gender Equality and Mainstreaming
12	AAP and PSEA
13	Localization
13	Cash
14	Coordination Structure
15	Part 4: Annex 1: Sector Plans
15	Education Sector
18	Food Security Sector
23	Health Sector
26	Nutrition Sector
29	Protection - Child Protection
31	Protection - Gender-Based Violence (GBV)
34	WASH Sector
37	Migrants
40	Coordination & Support Services



Credit: Abdul Dennaoui / December 2022 / MEDAIR

Part 1:

Crisis Overview

Context and Impact

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.

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. In July 2022, the country was downgraded to a lower middle-income country for the first time in 25 years. 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.

The unwavering economic and financial crisis Lebanon has faced since 2019, has severely impacted all the facets of the society and pushed a large group among the population into crisis conditions. Inflation and depreciation of the LBP has significantly affected the income and purchasing power of workers and

employees and their capacity to meet basic needs is further eroded by increasing prices of basic goods. As of February 2023, annual inflation reached 190 per cent. The cost of the food Survival Minimum Expenditure Basket (SMEB) per person in February 2023 in LBP increased by 48 per cent from January 2023. Food inflation since October 2019 has increased by 11,300 per cent and by 4,400 per cent the energy inflation.¹

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.

Health care system has been significantly affected. 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. Skilled human resources also declined considerably as health personnel emigrated in search of better employment opportunities.² Hospitals cut down their bed capacity by 50 per cent, leading to an overall insufficient number of functional hospital beds³ per population. While the risk of disease outbreak such as cholera and measles increases, due to poor sanitation systems, lower immunization and rising poverty, the system is increasingly unable to cope with new shocks.

The crisis has also severely impacted the education sector, compromising the wellbeing of school aged children in Lebanon. Many among the most vulnerable

¹ WFP Market Monitor report (March 2023).

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

³ 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.

TOTAL REQUIREMENTS (US\$)**\$200.2M****NUMBER OF PEOPLE IN NEED****3.9M****NUMBER OF PEOPLE TARGETED****1.26M**

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 currently access education, mainly due to economic vulnerabilities. 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. Even when schools function, lack of transport and safety issues are often reported as barriers to accessing school especially for girls.⁴

An increasingly high number of individuals are facing dramatic challenges with accessing safe and sufficient quantities of water for drinking and domestic use.⁵ The recent cholera outbreak in Lebanon has further highlighted that the water infrastructure in the country is on the verge of almost total collapse. 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.⁶

There are several drivers of protection risks across community groups in Lebanon many pre-dating the current socio-economic crisis. 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. The deteriorating economic conditions in the country, unemployment and poverty are expected to further impact the child protection needs in the most severely affected areas. As a result of the ongoing crisis, negative coping mechanisms, such as child labour, child marriage and different forms of violence and abuse lead to an overall increase of child protection needs, particularly among the most vulnerable and marginalized population groups. GBV is affecting all population groups while women and girls remain more affected 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.

In addition, economic collapse, high inflation and rising fuel prices further exacerbated by the war in Ukraine, have severely impacted the electricity supply in the country. 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 up.⁷ 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.

Moreover, 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.

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, 1.5 million Syrians refugees, 81,500 migrants living in Lebanon, and the 211,400 Palestine refugees in Lebanon and from Syria (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.

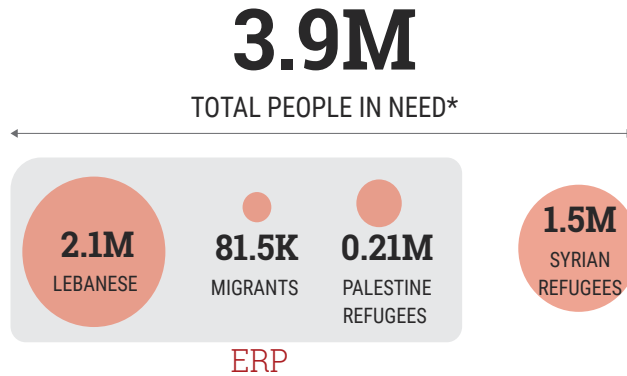
4 Multidimensional poverty index, administrative enrollment data MEHE, 2022.

5 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>

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

















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

People in Need by Population Type



* Escalating needs in Lebanon, a 2023 overview.

People in Need by Sector

SECTOR	PEOPLE IN NEED
 Health	3.7 M 
 Food Security and Agriculture	3.1 M 
 Water, Sanitation And Hygiene (WASH)	2.7 M 
 Education	1.4 M 
 GBV	1.4 M 
 Child Protection	1.1 M 
 Nutrition	1. M 
 Migrants	0.08 M 

Part 2:

ERP Strategic Objectives



Credit: Joseph Matar / OCHA / December 2022



Strategic objective 1

Saving Lives

Provide essential humanitarian support to most vulnerable people affected by the economic crisis in Lebanon for them to meet their critical needs.



Credit: Fouad Choufany / UNICEF 2021



Strategic objective 2

Disease Outbreaks

Support the response capacity of the Lebanese health and WaSH systems in coping with disease outbreaks, including waterborne diseases.



Credit: Joseph Matar / OCHA / February 2023



Strategic objective 3

Migrants

Enhance timely, unhindered and equitable access to protection assistance for migrants.










People in Need and People Targeted

TOTAL REQUIREMENTS (US\$)	NUMBER OF PEOPLE IN NEED*	NUMBER OF PEOPLE TARGETED**
\$200.2M	3.9M	1.26M

Note:

* This number includes Syrian refugees and Palestinian refugees from Syria (PRS). Response to these populations is not included in the ERP.

**This is calculated based on the Sector with highest number of people targeted amongst Lebanese, migrants and PRL only which financial requirements are included in the ERP. This is the WASH.

SECTOR	PEOPLE IN NEED	PEOPLE TARGETED	TOTAL REQUIREMENTS
 Food Security	3.1 M	2.97 M	NA
 Water, Sanitation And Hygiene (WASH)	2.7 M	1.26 M	\$48.16 M
 Health	3.7 M	1.22 M	\$67.02 M
 Child Protection	1.1 M	0.15 M	\$24.42 M
 Nutrition	1.0 M	0.14 M	\$11.31 M
 Education	1.4 M	0.14 M	\$21.91 M
 GBV	1.4 M	0.12 M	\$13.45 M
 Migrants	0.08 M	0.03 M	\$12.41 M
 Coordination & Support Services			\$1.52 M
TOTAL	3.9 M	1.26 M	\$200.2M

Part 3:

Response Strategy

Lebanon Emergency Response Plan for 2023 is strictly of humanitarian nature to respond to the critical needs of the most vulnerable people among Lebanese, migrants and Palestine Refugees in Lebanon (PRL). This response plan articulates the humanitarian interventions to save life of people in need through targeting the vulnerable at household and community levels. The humanitarian assistance is planned, implemented, and monitored to ensure efficient and prioritized interventions that do no harm for the affected population in Lebanon.

The ERP complements the support already provided through UNRWA programs and the Lebanon Crisis Response Plan (LCRP) aiming at avoiding duplication and ensure meaningful interventions that address the short and medium term needs of the people in need in Lebanon.

In 2022, the ERP increased operational coordination across response frameworks – particularly the LCRP – that will continue in 2023 including consolidate situation and needs analysis across populations, informing targeting; avoid duplication of meetings (including through single national working groups and core groups); aligned inter-sectoral coordination on key themes (eg. AAP, cash-based assistance, Cholera response); and contribute to coherent strategic sectoral approaches for sectors delivering against both response plans. In 2023, further steps will be taken to reinforce joined-up sector strategies.

This response plan is a time bound interventions pending the implementation of comprehensive long-term development plans and structural reforms by the Government of Lebanon to address the roots causes of the crisis as the only sustainable solution.

In 2023, the humanitarian community will require \$198.21 million to provide life-saving assistance to vulnerable Lebanese, migrants and PRL in Lebanon. The financial requirement for the 2023 Lebanon ERP is based on a hybrid method combining the unit-based costing and project-based costing. The initial financial

requirements have been calculated by Sectors using unit-based costing followed with detailed project planning (projectization) at a later stage to provide details to the initial calculations and to give visibility to participating humanitarian organizations. This will enable a better overview of operational planning while ensuring clearer links with monitoring and reporting at activity-level; and establish linkages between Sector activities and financial reporting through the global Financial Tracking System (FTS).

Gender Equality and Mainstreaming

Lebanon's multi-layered and unprecedented political and socio-economic crisis, underpinned by a history of violence, corruption, and inequality, is deepening gender inequalities. As of 2022, Lebanon ranks 119 out of 146 countries in the World Economic Forum Global Gender Gap, due to low rates of economic participation, political representation, and patriarchal socio-cultural norms. These systemic gendered inequalities create more unstable communities and make women and girls in particular more vulnerable to exploitation and violence, poverty, food insecurity, and negative health outcomes. In addition to gender, other intersectional identity factors have a large impact on affected populations' vulnerability and access to humanitarian assistance – such as age, physical and mental ability, sexual orientation, gender identity, gender expression, and sex characteristics (SOGIESC), legal status and geographical area of residence. Gaps in humanitarian service provision and equal access to assistance continue to be significant concerns for the lesbian, gay, bisexual, trans*, intersex, and queer + (LGBTIQ+) populations in Lebanon.

The ERP ensures that the specific and diverse needs, capacities and priorities of women, girls, men, boys and gender non-conforming individuals are identified and responded to. Attention to gender equality will be prioritized in all aspects of the ERP: including

needs assessments, strategic planning, coordination, implementation, and monitoring and evaluation. Sex, age, and disability disaggregated data (SADDD) will be collected and analyzed, to the extent possible, across sectors and used to improve access and impact to diverse marginalized groups. Each sector in the ERP includes gender specific and inclusive planning priorities that are monitored during implementation and evaluation.

Humanitarian coordination, technical assistance, information management, and advocacy efforts related to gender equality will be supported by Lebanon's Gender Working Group and the LGBTIQ+ Task-Force (sub-working group), which oversees gender related coordination across the humanitarian-development and peace nexus.

AAP and PSEA

The humanitarian and development community in Lebanon have a 'zero-tolerance' policy on sexual exploitation and abuse (SEA) and are committed to combatting SEA across all areas of humanitarian, development, and peace-building interventions.

The 2022-2023 PSEA strategy for Lebanon has a vision that the humanitarian community treats beneficiaries with dignity and respect, and a strong message is sent that there is no place for SEA within the delivery of humanitarian aid. This will be done by establishing a robust and sustainable system among all actors to prevent, investigate and respond to incidents of SEA based on the lessons learned. Communities and individuals will be empowered to report SEA incidents and are confident that their complaints will be handled efficiently, safely, and confidentially. Perpetrators will be held to account and disciplinary action is taken to promote justice and accountability, to support victims, and as an example to others.

Accountability to Affected People (AAP) is the active commitment of humanitarians to use power responsibly and to ensure people affected by crisis have the power and influence to determine, and act on, their own priorities. Being accountable to communities also obliges humanitarian actors to respect the needs, concerns, capacities, and disposition of populations they work with, and to answer for their actions and decisions including the way they communicate to and engage with the affected populations.

Beyond being a responsibility, AAP improves system-wide response efforts. By collectively listening to and incorporating the views, preferences and initiatives of affected people humanitarian assistance is more targeted and useful to people in need.

To strengthen AAP in Lebanon, the HCT came together in June 2022 to agree on joint priorities and actions for delivering a collective approach to accountability, based around the IASC five AAP priorities. Following this, more resources will be dedicated to inter-agency AAP capacity and efforts will be made towards establishing efficient methods of sharing, and jointly analysing and validating information with communities. Likewise, best practices for keeping affected communities collectively, reliably, and consistently informed about developments across the response will be explored and implemented.

Opportunities for humanitarian agencies to further increase the participation of affected people in humanitarian programming will also be reviewed and developed. This includes supporting a more community centered and inclusive approach to response humanitarian project planning, building capacity of local organizations, and ensuring more synergies between new and existing mechanisms, tools, and operational frameworks. Following a foundational mapping exercise of AAP related opportunities and challenges in Lebanon, work will also be undertaken to adopt standardized tools and benchmarks and jointly implementing strategies that will harmonize different AAP activities, including CFMs, that stakeholders have already embedded in their projects.

The voices of affected people will continue to be closely consulted in 2023. The 2022 MSNA included an AAP-specific section, which will be repeated and honed during the 2023 cycle. The information in this assessment regarding the needs of affected populations is and will remain a critical asset to help steering the sectoral response planning. Efforts will also be undertaken to synchronize and jointly analyze the multiple needs assessments that exist across operational framework to ensure a collective understanding of, and response to the needs of the large variety of groups that reside across Lebanon.

The localization workstream will ensure that these initiatives take a coordinated approach to localization and contribute to the goal of strengthened collective accountability to help to improve access and sustainability.

Localization

Localization is the process of recognizing and strengthening the role of local and national humanitarian actors. Localization can also include engaging with individuals from local communities and is thus closely linked to accountability to affected populations, even though local and national NGOs (LNNGOs) are not automatically representative of local populations. Along the years, LNNGOs actors have demonstrated strong willingness and potential in responding to humanitarian and emergency crisis in Lebanon being at the forefront of the multiple responses with an active, diverse and large civil society. It is estimated that there are now approximately 1,000 LNNGOs functioning in Lebanon.

According to a recent study on the localization of aid in Lebanon, there has been progress towards the inclusion of LNNGOs as equal stakeholders to collective response to crises, but barriers remain to really walking the talk (including structural changes required in the humanitarian system to better promote inclusion, the engagement of government as a key player and the continued inequitable 'transactional' approach still prevalent when working with local and national partners). Regarding their engagement in humanitarian coordination structure in Lebanon, LNNGOs are members of the HCT and are co-leading/co-coordinating 3 out of 8 humanitarian Sectors.

During the past years, localization has been prioritized by the HCT and the work will continue in 2023 to 1) define localization funding targets, 2) harmonize the compliance and due diligence, 3) improve delivery and efficiency by promoting participation and leadership of LNNGOs and 4) improve coordination at the sub-national level.

Cash

In the 2023 ERP, the implementation of both sector-specific and multipurpose cash modalities will have a strong emphasis in the response in accordance with

the 2016 Grand Bargain commitment on promoting the use and scale up of cash assistance in emergencies.

In Lebanon, cash assistance provides several benefits to vulnerable families whose purchasing power have significantly been impacted by the ongoing economic crises including ensuring flexible household income support to prevent the adoption of negative coping strategies and improve their access to basic services, which have become unaffordable due to skyrocketing exchange rates and inflation. In addition, the multiplier effects of cash assistance in the local economies will also contribute positively to sustaining local supply chains and the expansion of livelihood opportunities amid rising unemployment.

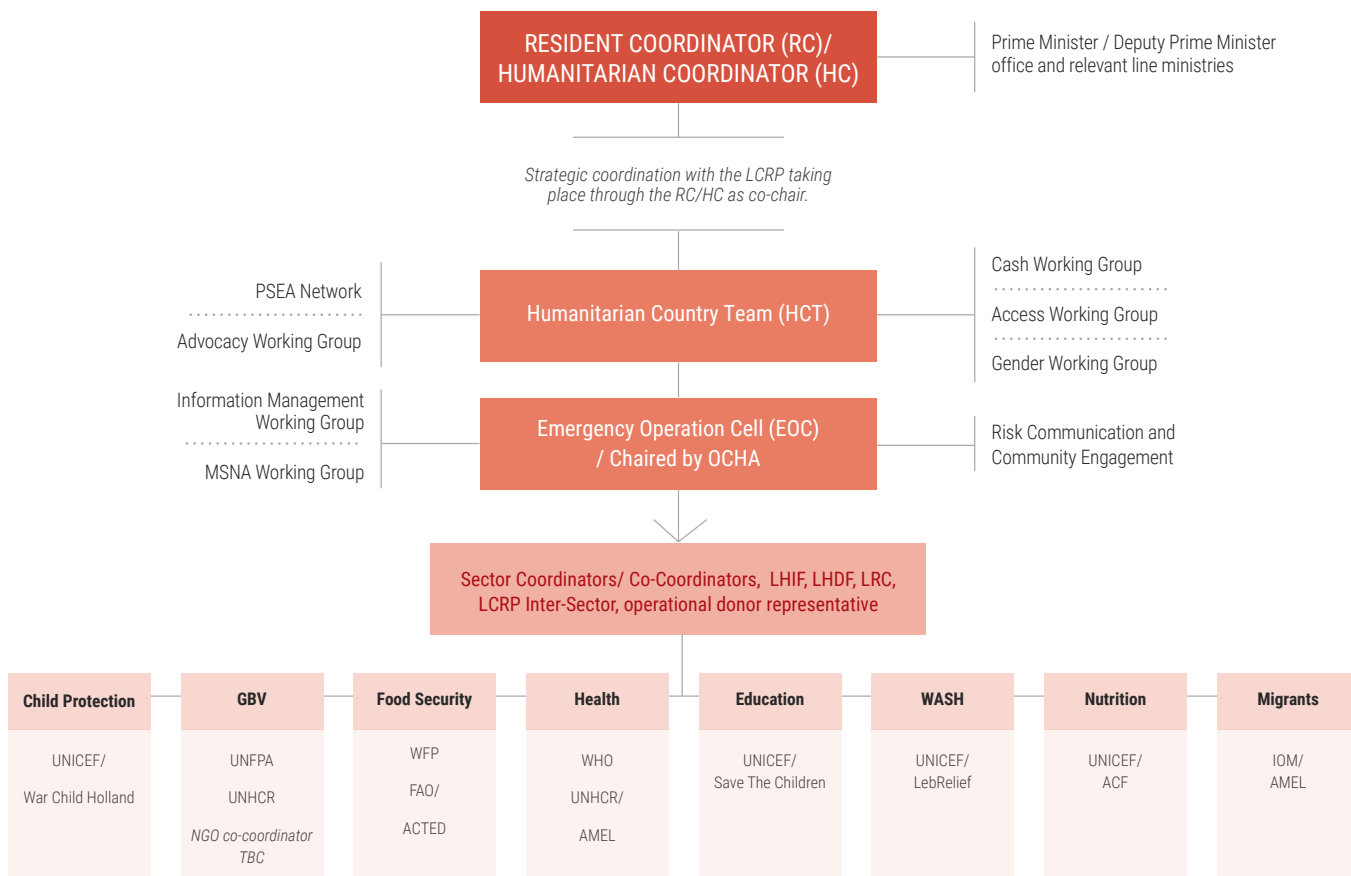
Cash assistance under the 2023 ERP will complement cash modalities under other frameworks and include emergency protection cash assistance to address child protection needs and support victims of GBV and individuals at risk of GBV, cash for education, and multipurpose cash assistance to cover specific migrant needs, and complementary cash support to ensure utilization of nutrition services. These activities will aim to contribute directly to Strategic Objectives 1 and 3, and will draw upon lessons from previous experiences involving the use of cash assistance under the ERP in 2022 and during the Beirut Port explosions response.

Cash-related activities under the ERP will undertake in coordination with the sectors – many of which have developed cash guidance for partners and agreed standard rates for specific cash activities.

Meanwhile, the Cash Working Group will serve as a dedicated technical forum aligned with the global cash coordination model launched in March 2022 to improve cash harmonization across frameworks, jointly analyze operational risks related to banking and other services, and formulate common strategies for cash delivery. Efforts will also be made to strengthen linkages between short-term humanitarian cash assistance (including those within the 2023 ERP) and government-led social protection schemes such as the National Poverty Targeting Program (NPTP).

Coordination Structure

LEBANON COORDINATION STRUCTURE FOR EMERGENCY RESPONSE PLAN (2023)



All sectors, except Migrant Sector, are joined up sectors between ERP and the Lebanon Crisis Response Plan frameworks.

Part 4:

Annex 1: Sector Plans

4.1

Education Sector



PEOPLE TARGETED	REQUIREMENTS (US\$)
140K	\$21.91M

Contact information:

NAME	EMAIL
Talin Sahakian	tsahakian@unicef.org
Caitlin Manning-Riley	Caitlin.Manning-Riley@savethechildren.org

Appealing Organizations and implementing partners:

Al Fayhaa Association, Alpha, Amel Association International, Ana Aqra Association, Anera, AVSI, Caritas Lebanon, Caritas Switzerland, Dorcas/tabitha, Finn Church Aid, FISTA, FRATELLI, Humanity & Inclusion, International Alert, IOCC, IRC, LOST, LSESD/MERATH, Mouvement social, NRC, Oppeness Development Association - ODA, Relief International, Rene Moawad Foundation, Ribat, Save the Children, SCI, Sector Coordination team, shareQ NGO, TDH Italy, Tdh Lausanne, UNDP, UNICEF, WeWorld-GVC, WFP, World Food Programme, World Vision and IOM.

Sector Response Plan

The Education sector has been impacted severely by the multi-layered crisis, with the most marginalised girls and boys prevented from advancing their education due to ongoing school closures resulting from COVID-19 and the socio-economic crisis. Unaffordable or inaccessible basic needs have increased the

vulnerability of households contributing to the further deprioritization of education by households.

The Sector strategy is based on the premise that, under MEHE's strategic guidance, Lebanon's education system can be strengthened to provide protective, safe, inclusive and gender-equitable access to quality learning. Children and young people, especially the most vulnerable, will have the opportunity to develop the requisite skills for the labour market, enhancing their employability and personal empowerment. Sector partners will ensure the protection of vulnerable populations, support service provision through national systems, and reinforce Lebanon's economic, social and environmental stability, with the aim to support children, parents/caregivers, teachers, schools and learning centres, with the necessary resources to ensure children's psychosocial wellbeing and their safe return to quality learning that supports them to recover lost learning. The Education Sector response will aim to contribute to the following objectives and related outcomes:

Outcome 1: Increased equitable and inclusive access to, participation in and completion of safe and protective education for all learners in Lebanon, with a focus on the most vulnerable children and their caregivers. The Sector response is designed to improve access to education (formal and non-formal) for all school-aged children (3–18 years old). The 2023 response will focus on ensuring the access of the most vulnerable children, paying particular attention to access of children with disabilities to quality learning environments that motivate them to continue their education, and access for children lacking legal residency/documentation including children from

migrant households. Sector partners will focus on activities to increase enrolment and retention in flexible and inclusive learning through two outputs:

Children, youth and their caregivers are provided with the necessary support to expand their access to and retention in education.

Sector partners will continue to reach out to the most marginalised and vulnerable populations through appropriate community outreach to better understand the situation of out-of-school children, referring them to formal and non-formal education; children with disabilities; children without legal residency/documentation; and children who are enrolled but facing challenges to continue their learning. Partners will carry out the following activities:

- Coordinating at inter-sectoral and cross-sectoral levels: The unstable situation requires a full understanding of all available referral pathways and an integrated outreach approach. This includes collaborating within the sector and with other relevant sectors, such as Health, WASH, Child Protection (CP), Migrant sector, and Basic Assistance.
- Removing barriers in access to education through social assistance: Partners will focus on cash for education and nutritional support for learning.
- Providing awareness & development sessions to parents/caregivers: Partners will, as part of their outreach efforts, raise awareness among parents/caregivers on the importance of education and available resources that will support children to enroll in school, continue their education and avoid any learning interruptions.
- Providing Supportive and Complementary Learning Opportunities: Education sector partners will continue to provide remedial and retention support for children and youth to cover learning gaps.

Children and youth have improved access to appropriately equipped public schools, learning centres and other learning opportunities, particularly in underserved areas.

MEHE and partners are closely collaborating to ensure the availability of well-constructed and equipped public schools and learning spaces to facilitate not only access, but also enriching and productive learning experiences for all children and youth. Activities include:

- Collaborating on the construction and rehabilitation of learning spaces and improving the infrastructure of schools: This includes the construction or

rehabilitation of buildings, classrooms and play spaces; the provision of school furniture; the construction or rehabilitation of inclusive, gender-sensitive and age-appropriate WASH facilities; and solarisation, following MEHE's standards and specifications.

- Guidance for digital learning: MEHE and Education sector partners will work to further develop the virtual environment in public schools and learning spaces by equipping schools and learning spaces with the needed information and communication technology (ICT) infrastructure, equipment and capacity to support blended learning modalities.

Outcome 2 - QUALITY of education services: By ensuring improved teaching and learning and focus on learning outcomes for children and youth through enhanced quality of formal and non-formal education services that are safe, protective, adapted, and inclusive for multi-crisis situations. To achieve meaningful and grade-appropriate learning for children and youth, partners will focus on the quality of the education services across different learning environments by both optimising the professional development of education personnel and maintaining a child-friendly environment in schools and learning spaces. This will be achieved through the following outputs:

- Teachers, education personnel and educators have enhanced capacities to provide quality, learner-centered pedagogy in public schools or learning spaces. Partners will focus on providing teacher training to develop teachers' skills and enhance their knowledge.
- Learning spaces and their communities are capacitated to contribute to an inclusive, safe, healthy and protective environment that is conducive to learning. Led by MEHE, Education sector partners will coordinate with the CP sector to support the development of school improvement plans in all public schools and regulated non-formal education (NFE) centres that protect the well-being of schoolchildren and guarantee an appropriate and inclusive physical, mental, psychological and social environment, ensuring that children grow up supported by effective care. This will be facilitated through the deployment of volunteers inside schools, outreach volunteers and social workers who will raise awareness around the importance of education and increase the engagement of parents/caregivers and the community.

- Children in learning spaces have enhanced academic and non-academic competencies (psycho-social support (PSS), life skills and organisational skills through recreational/ extracurricular activities). MEHE and Center for Education Research and Development (CERD) will initiate the revised framework for the national curriculum, which clearly states the need to conduct curriculum reform and revise learning assessments, focusing on integrating inclusive citizenship and life to enhance academic and non-academic learning outcomes. Partners will focus on supporting children to develop their academic, technical and life skills.

Description of gender-sensitive, mainstreaming of accountability to affected people and inclusive planning

To improve accountability to affected populations, Education sector partners will ensure harmonized approaches and define common key messages to reduce dissatisfaction and misunderstanding, building trust among communities. These messages include information about programmes, referral pathways, and safe and effective feedback and response mechanisms. The sector is working with the Child Protection (CP) sector to ensure that CP cases in schools are reported and followed up through a clear system based on the CP policy, and with the Migrant sector to support access for children from migrant households to education. More work will be done this year to ensure that children in NFE have similar safeguards and access to feedback mechanisms.

The Sector will work closely with stakeholders to ensure that proper measures are in place to prevent and respond to SEA risks. The Education sector will continue to advance child well-being within education by mainstreaming PSS in NFE. The Sector will also work closely with the CP sector to ensure the timely, effective and safe identification and referral of children out of learning, including those who have recently dropped out of school. Across the Education sector, partners will use age-gender and diversity sensitive programming to tailor responses to boys and girls. For example, specific plans will be made for children at risk, including those engaged in child labour (mostly boys) or at risk of child marriage (mostly girls), through adapted programmes that consider their capacities, needs and availability.

Exit Strategy & Linkages/sequencing with Non-Humanitarian Frameworks and programs

To address the critical education needs of all children, MEHE continues to implement its five-year General Education Plan (2021–2025). The 2023 ERP and LCRP Education sector response strategies are developed under the umbrella of MEHE’s plan, with the vision to assist all children to complete basic education and have equitable access to secondary education, technical and vocational education and training (TVET) and higher education. Furthermore, it lays out the ambition to enhance the education system and to improve learning outcomes including foundational literacy, numeracy and life skills needed for employment and to break cycles of intergenerational poverty and exclusion.





4.2 Food Security Sector

PEOPLE TARGETED	REQUIREMENTS (US\$)
2.97M	NA

Contact information:

NAME	EMAIL
Pardie Karamanoukian	pardie.karamanoukian@wfp.org
Elie Choueiri - FAO	elie.choueiri@fao.org
Pauline Eid – ACTED	pauline.eid@acted.org
Nour Azzi – CARE	Nour.Azzi@careliban.org

NOTE: The Food Security and Agriculture sector strategy in 2023 is based on a unique response and log frame for both ERP and LCRP, streamlining a comprehensive food security and agricultural livelihoods support based on the current socio-economic context and the overall increase in terms of food insecurity for populations living in Lebanon. Needs, targets, and financial requirements across all population groups (Lebanese, Syrian refugees, PRS, PRL, migrants and refugees of other nationalities) are considered holistically to respond to the needs of the affected populations, regardless of the frameworks. As the system currently does not allow for a single appeal, all financial tracking will be reflected under the LCRP, in anticipation for a reformed unified response framework in 2024.

Appealing Organizations and implementing partners

ACF Spain, ACTED, ADRA, Akkarouna, Al Majmouaa, Al Makassed, Al Shouf Cedar Association, ANERA, Arche Nova, AVSI, B&Z, Borderless, CARE, Caritas Lebanon, CONCERN, COOPI, DCA, DRC, DPNA, Fair Trade Lebanon, FAO, Farah Social Foundation, Ghirass for Society Development, GVC, IOCC Lebanon, ISWA, Jafra Foundation, Leb Relief, Live Love Lebanon, LOST, LSESD, MCC, MDSF, Mercy Corps, Migration Services and Development – MSD, Nabaa, Nusaned, NRC, OXFAM, PCMM, PU-AMI, RI, RMF, Salam LADC, SCI, Shafak Lebanon, shareQ, SIF, Tabitha-Dorcas, UN Women, UN-Habitat, UNICEF, WFP, WVI.

Sector Response Plan

The food security situation in Lebanon continues to deteriorate over the last three years given the severe economic, financial and social crises while also hosting the largest number of refugees per capita in the world due to the war in Syria. Record-high global food and fuel prices are adding to the already dire situation in Lebanon. In 2023, 3.1 million Lebanese, Syrian Refugees, Palestinian refugees from Syria, Palestine Refugees in Lebanon and migrants are expected to be in need of food security assistance. High and rising inflation, currency depreciation, discontinuation of state subsidies, wage disparity, limited jobs, political inaction, and the deterioration of basic services have been identified as key drivers of food insecurity in Lebanon. The situation is expected to further deteriorate as a result of continuous inflation and currency depreciation, further impacting people's access to nutritious and diversified food and other basic needs, while disrupting agricultural production and livelihoods means.

In 2023, the food insecurity of Lebanese households is expected to further worsen, with 1.46 million Lebanese (38 per cent)⁸ likely to face high Acute Food Insecurity (AFI) levels (IPC Phase 3+), while more than half the population is likely below the national poverty line.⁹ Nearly 85 per cent of Lebanese households have been consuming less preferred less expensive foods while more than two third had to reduce the number of meals eaten. Around 1.37 million Syrian Refugees¹⁰ are unable to meet their minimum basic needs. Almost all Syrian Refugees (97 per cent) are resorting to food-based coping strategies, with 96 per cent relying on less preferred less expensive foods and 74 per cent reducing portion sizes. The poverty rates among the Palestinian refugees are further expected to worsen (93 per cent in 2022),¹¹ especially with their limited access to jobs and high dependence on humanitarian assistance. Nearly 90 per cent of Palestinian refugees reported purchasing leftovers from the market, while almost two thirds reported reducing the number of meals they had eaten.

⁸ Integrated Phase Classification - Acute Food Insecurity January – April 2023 projection

⁹ World Bank

¹⁰ VASyR 2022

¹¹ Socio-economic Situation of Palestinian Refugees in Lebanon – Crisis Monitoring Report – September 2022 - UNRWA

Since the crisis, more migrants no longer live with their employers 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, 44,700 (33 per cent¹²) reported having trouble meeting their essential food needs.

Small-scale farmers' inability to purchase agricultural inputs is putting at risk their food security and livelihoods and the agricultural season, therefore increasing the risks of not providing nutrition-rich, fresh, safe and seasonal food to their households and the communities. The prevalence of moderate or severe food insecurity among farmers was 34 per cent as of July 2022.¹³ Nearly all (99 per cent) surveyed farmers reported adopting coping strategies to meet their food needs. The main food-based coping strategies adopted by farmers to meet their food needs were the decrease in their expenses for agricultural inputs (93 per cent), reduction in the health expenses for the household (78 per cent) and use of their savings (57 per cent). Cash assistance was reported as the overall main need of farmers. The three main needs reported by crop producers are access to fertilizers (80 per cent), access to pesticides (75 per cent) and access to seeds (40 per cent). Whereas livestock producers reported a need for animal feed (33 per cent), veterinary services (28 per cent) and veterinary inputs (25 per cent).

The food insecurity situation of all those currently residing in Lebanon is expected to continue to deteriorate as the availability and accessibility of food continues to be hampered and left unstable. Urgent action is required to reduce food gaps, protect, and restore livelihoods and prevent acute malnutrition.

The FSA sector aims to respond to the urgent needs through a holistic approach, under a single joint response plan. The sector intends to target all those residing in Lebanon who are facing acute food insecurity by improving their access and availability to diversified nutritious foods to reduce food gaps and prevent acute malnutrition; strengthen agricultural production and productivity and enhance livelihood capacities. The FSA joint sector strategy will be implemented in line with the Ministry of Agriculture's National Agriculture Strategy (NAS) 2020-2025,¹⁴ the Ministry of Social Affairs' development and poverty-

reduction goals and Lebanon's commitments towards the achievement of SDG 1 (No Poverty), SDG 2 (Zero Hunger) and SDG 17 (Partnerships for the Goals).

The sector aims to achieve its overall objective through three outcomes:

Under Outcome 1, the FSA partners will ensure the most vulnerable and food insecure populations living in Lebanon receive food assistance to reduce their food gaps and diversify their food intake. Food assistance will be implemented through various transfer modalities, emphasising the continued support to service delivery and the strengthening of the national social safety-net systems. Lebanese households will be supported through the government National Poverty Targeting Programme (NPTP) that utilizes cash transfers; as well as through e-vouchers and in-kind and ready-to-eat meals provided by community kitchens by the various sector partners. The sector will continue to coordinate closely with the World Bank's funded Emergency Social Safety Net (ESSN) programme, to ensure harmonisation among the beneficiaries. The sector will be pushing forward with harmonised targeting, response, and monitoring by promoting the use of a sustainable database to ensure assistance is directed to those most in need, avoiding gaps or duplication. Similarly, the sector will encourage partners to coordinate with local food producers for in-kind food assistance packages.

The sector partners plan to reach Syrian refugees, Palestinian refugees, and migrants with food assistance, mainly through cash-based assistance. The food Survival Minimum Expenditure Basket (SMEB) will be used as a baseline to determine the adequate and recommended transfer value to cover various food needs. Regular market monitoring will inform adjustments to the value of the transfer to ensure it consistently provides the right level of assistance amid unpredictable exchange rate fluctuations and market disruptions. The level of transfer will be coordinated through joint efforts with other sectors and the Cash Task Force, under the ultimate leadership of the RC/HC's Office. To avoid duplication and gaps, the sector will continue working towards a harmonised beneficiary targeting system.

¹² Based on Food Security data from the MSNA 2022

¹³ Data in Emergencies Monitoring brief, round 3. Results and recommendations. September 2022. FAO-MoA

¹⁴ As the strategy was an extension of the 2015-2019 strategy, where the economic impact on agriculture is not reflected fully, the FSA sector will work closely with the MoA to identify priority areas for emergency response to farmers

In 2023, the sector intends to target 2.4 million Lebanese, Syrian refugees, Palestine Refugees in Lebanon, Palestinian Refugees from Syria, and migrants with food assistance. The planned food assistance programmes aim to reach around 1 million Lebanese under IPC Phase 3+, 1.35 million Syrian refugees who fall below the SMEB line, 31,400 Palestinian Refugees from Syria, 180,000 Palestine Refugees in Lebanon and 22,000 migrants, for a total estimated value of 1.2 billion USD.

The FSA sector Outcome 1 will contribute to the LCRP Strategic Objectives 1, 2 and 4; and ERP Strategic Objective 1.

Under Outcome 2, the FSA sector partners will implement projects aimed to improve the agricultural production and productivity in Lebanon to protect, restore and sustain agricultural livelihoods and the food security of 35,000 of the most vulnerable small-scale farming households, benefiting 175,000 individuals. The sector will ensure that partners' interventions are in line with the NAS 2020-2025 developed by MoA, reflecting the national priorities of the agri-food sector in Lebanon. Agricultural assistance will be provided throughout the agricultural value chain through various modalities. Cash, voucher, and grants support will be increasingly adopted by sector partners. The assistance will be provided directly to small-scale farmers for crop and livestock production, for the purchase of agricultural inputs (seeds,¹⁵ fertilizers, etc), livestock feed and veterinary inputs and services. Capacity building and direct support to farmers on Good and Sustainable Agricultural Practices, Integrated Pest Management, climate-smart interventions, water-use efficiency, and water conservation will continue throughout 2023. To adapt to the current economic hardships, farmers will be trained on how to reduce their reliability on imported agricultural inputs and resort to the adoption of local on-farm inputs (such as composting and seed preservation). Activities under this outcome will also include capacity building and interventions to control the spread of transboundary animal diseases and plant pests during emergencies (e.g. vaccination campaigns of cattle and small ruminants). Together, interventions will strengthen the overall agricultural production and mitigate climate risks and shocks. Agricultural cooperatives and MSMEs will also be supported with capacity building and provided with grant schemes for direct support to their innovative business plans and management. Vulnerable Lebanese and refugee

households, will receive short-term conditional cash-based transfers with the aim of improving the livelihoods and resilience of 40,000 households, benefiting more than 200,000 individuals with temporary employment. Interventions will build human capital and provide support to communities through activities geared toward protecting, restoring, creating, or enhancing key assets and basic infrastructure. Lebanese host communities and refugees living in the municipalities where these activities are implemented will benefit from new and/or rehabilitated long-term environmental and agricultural assets that contribute to the basic needs and livelihoods of the wider community. The activities will be implemented in districts with the highest rates and incidents of people falling under IPC Phase 3 and above.

The FSA sector Outcome 2 will contribute to the LCRP Strategic Objectives 1, 2 and 4; and ERP Strategic Objective 1.

Under Outcome 3, the sector will continue to coordinate and provide technical support to various public institutions at national and decentralised levels and humanitarian organisations to strengthen service delivery capacities in food security, agriculture, and social protection. Among planned interventions at the institutional level is the roll-out of the farmers' registry hosted by the MoA and its decentralised agricultural centres. The registry will provide the platform for farmers to register their agricultural activities, which will facilitate future agricultural livelihoods interventions to reach the most vulnerable farmers. Capacity-building initiatives along the overall programme cycle and cross-cutting issues, targeting public and humanitarian staff, will be implemented throughout the year. To ensure updated information on food security and agriculture, the sector will support and regularly disseminate food security needs assessments and analysis including the regular update of the IPC AFI analysis, agriculture value chain assessments and market-monitoring reports. To verify and/or enrol programme participants, the sector partners will continue to employ a variety of coordinated targeting and selection approaches to allow for the prioritisation of resources, avoid duplication or gaps and ensure harmonised assistance to those most in need. Sector guidance will be provided to partners on how to avoid and/or address overlaps to improve complementarity and coverage, and to ensure that households receive a diverse package of assistance that meets their differential needs. The

¹⁵ Example of inputs include soft wheat, forage crops, medicinal plants, etc

sector will also continue coordination and close work with relevant sectors, mainly Basic Assistance, Nutrition, Education, Protection/Child Protection working group and Livelihoods sectors.

The FSA sector Outcome 3 will contribute to the LCRP Strategic Objectives 1, 3 and 4; and ERP Strategic Objective 1.

To reach 2.9 million food insecure Lebanese, Syrian refugees, Palestine Refugees in Lebanon, Palestinian Refugees from Syria and migrants, the sector requires 1.3 billion USD. Areas with highest levels of IPC AFI Phase 3 and above classification are at particular risk for the FSA Sector and will be the focus of the response.

Description of gender-sensitive, mainstreaming of accountability to affected people and inclusive planning

Gender and SGBV: Ensure gender-sensitive programming by strengthening the targeting, delivery and monitoring of interventions that take into consideration the differential needs of women, men, girls, and boys. Assessments and monitoring surveys will collect data disaggregated by gender and age, promoting gender and age analysis and participation of all groups in programme design and implementation. Special focus will be placed on female-headed households, women of reproductive age, and pregnant and lactating women and single mothers, to ensure inclusive, adequate, and commensurate responses to their specific needs. Sector's partners will continue to abide by the Global Food Security Cluster and the Inter-Agency Standing Committee guidelines for integrating gender-based violence considerations into their interventions. Agriculture is a critical sector for women's livelihoods, and the sector's strategy will continue to strengthen women farmers' capacities and women cooperatives/associations/groups and inclusion in its programmes.

Protection and PSEA: Strengthen the safe identification and referral of persons with specific needs and individuals at risk. The sector will contribute improving the understanding of barriers to safe and dignified access, accountability, and participation in relation to food security and agricultural interventions and to identify mitigation measures to strengthen these components considering rapidly evolving challenges. Good practices will be promoted to ensure inclusive programming models for persons with disabilities. Accountability to affected populations will continue to be the backbone of partners' work in 2023 and

be guided by interagency minimum standards on complaint and feedback mechanisms. In addition, given the large number of women and adolescent girls working on agricultural sites across Lebanon, and the exploitation and protection risks for women and girls linked to the provision of cash and in-kind assistance, the sector will continue to inform and raise awareness related to PSEA. The sector will also ensure that partners receiving capacity building and are reporting on main protection risks, incidents, or patterns in relation to their activities and operations for both protection and non-protection referrals and programme adjustments.

Conflict Sensitivity: Food insecurity is a driving tension - and could do so even more in the future. Lebanese, displaced Syrians and Palestinians alike remain extremely concerned about access to essential goods and services, such as food, fuel, water, medicine, and medical care. Similarly, transfer modalities and transfer values have high risk to exacerbate tensions between the various communities. The sector will work closely with its counterparts at the governmental, interagency, and operational levels to strengthen the capacity for and use of conflict-sensitive programming approaches in their efforts to implement the current FSA response plan. Further efforts will be made to collaborate with the Social Stability sector, particularly when it comes to monitor and analyse the existing/potential stabilizing effects that various modalities or currency of assistance can have on inter- and intra-communal stability. The sector will aim to capture and share best practices and lessons learnt from the field, building on the work done in 2022 to develop the conflict sensitivity guidance note on conflict sensitive cash assistance in Lebanon. The sector will support strengthening conflict sensitivity and do no harm approaches for partners through sharing existing Social Stability guidance and training opportunities. Programme adjustments (including changes in value and distribution arrangements, selection, and identification of participants) will be accompanied by clear outreach and communications strategies to ensure beneficiaries and other operational and strategic counterparts are informed about programmatic changes impacting their participation in programme activities and redistribution of benefits, and the reasons behind these changes.

Environment: The Sector will work closely with the Environment Task Force led by the Ministry of Environment to ensure that sector partners adopt environmental markers when planning their projects and mainstream environmental concerns by mitigating

the impact of climate change and particularly through agricultural interventions (protection of agrobiodiversity and agro-ecosystems).

Exit Strategy & Linkages/sequencing with Non-Humanitarian Frameworks and programs

The 2023 FSA joint sector strategy will contribute towards forging direct links between humanitarian and reliance programming and national safety nets, for building linkages for longer term prospects. The joint

plan will attempt to bridge the gap across the existing response plans, linking programmes previously planned under the LCRP and ERP, until full implementation and possible further expansion of government assistance schemes, including the ESSN program. To facilitate transition, the sector will ensure the necessary linkages with the various assistance programmes, including for beneficiary booking, deduplication, convergence of outreach, targeting, eligibility verification instruments, and coordination of efforts to sustain assistance beyond 2023.



Credit: NUSANED / January 2023

4.3 Health Sector



PEOPLE TARGETED

1.22M

REQUIREMENTS (US\$)

\$67M

Contact information:

NAME	EMAIL
Myriam Sassine (a.i)	sassinem@who.int
Stephanie Laba (UNHCR)	labas@unhcr.org
Maher Tawil	healthresponse@amel.org

Appealing Organizations and implementing partners

LNNGOs: AMEL Association International, EMBRACE Lebanon, Tripoli Arteries Association, Project HOPE- René Moawad Foundation, Children Cancer Centre of Lebanon, Soins infirmiers et développement Communautaire, Lebanon Needs, Alshifaa for medical and humanitarian services.

INGOs: Première Urgence Internationale, International Rescue Committee, MedGlobal, Syrian American Medical Society Foundation, International Medical Corps UK, Relief International, Handicap International - Humanity & Inclusion, ARCS ARCI Cultura e Sviluppo, Caritas Lebanon, MEDAIR.

UN: IOM, UNFPA, UNHCR, UNICEF, WHO.

Sector Response Plan

The Health sector through the 2023 ERP will pursue a 4-pronged approach to respond to the current crisis:

Outcome 1: Ensured access to life-saving and life-sustaining health services for those most vulnerable and in need in the context of worsening socio-economic conditions – primarily focused on expanded coverage for in-patient hospital care, as well as supply of additional medicines to complement existing interventions and address increased caseload among vulnerable Lebanese, PRL and migrant patients. This includes covering life-saving and limb-saving hospital costs for vulnerable Lebanese, PRL and migrant

patients as well as covering advanced diagnostic costs as a precursor to hospital admission and referring patients to hospital care.

Additionally, the sector aims at strengthening the PHC network capacity to deliver quality essential services through conducting outreach and providing preventive midwifery care for high-risk pregnant women, conducting social mobilization and outreach to vulnerable and affected communities including COVID-19, health promotion, Sexual and Reproductive Health (SRH), mental health and deploying home care teams to provide care to patients with limited mobility during outbreaks.

Furthermore, the sector aims at supporting patients with emotional support and suicide prevention services through expanded 24/7 support of the National hotline “Embrace Lifeline” or other telehealth support services. In parallel, the sector intends to support patients with quality, essential medicines, and supplies to meet increasing health system demand by procuring and dispatching acute, chronic, selected medications for catastrophic illnesses (including dialysis, cancer, and catastrophic illness), reproductive health commodities, medical consumables for home uses and basic medical supplies to Health Units at Points of Entry (POEs).

Outcome 2: Health facilities supported to maintain operations during the ongoing emergency context – will enable: continuity of services in select health facilities to ensure continued access to emergency and critical care (operational) and expanded hours of operation at selected health facilities to ensure access and provide for increased demand among vulnerable Lebanese and migrant patients. This includes providing PHCs with in-kind transportation modality to increase patient access during the ongoing emergency context, as well as supporting acute and residential care facilities on an emergency basis to maintain operations.

Outcome 3: Response to outbreaks in Lebanon strengthened – will follow the pillars approach laid out in the WHO global Strategic Preparedness and Response Plan for outbreaks, with particular

emphasis on bolstering multi-sectoral coordination during emergency health response, strengthening surveillance and laboratory capacity, training and take in charge of case management (hospitalization) and infection, prevention and control (IPC) and support in vaccination activity, harmonize risk communication and community engagement (RCCE) campaigns. This also includes training healthcare workers on IPC in high-risk clinical and related settings, as well as procurement of basic medical supplies (such as personal protective equipment (PPE)) for health facilities and POEs, deploying specialized human resources in COVID-19 care and pregnancy care, and deploying health staff to POEs to conduct health screening.

Outcome 4: Enabled, cross-cutting support to coordinated, safe, timely and quality health preparedness plans and responses with an emphasis on vulnerable communities – will entail health sector coordination, mainstreaming of protection efforts, and overall community engagement focusing on Lebanese, PRL, and migrant communities, including the most vulnerable and in need as well as persons with disability. This includes enhancing the protection environment in humanitarian health response through training healthcare workers on GBV safe identification and referral, reporting the existence of feedback and complaints mechanisms by Health Partners, training frontline workers on culturally sensitive approaches to improve health access for migrants, and distributing dignity kits to women and girls.

The Health sector aims to address the immediate threats to mortality and morbidity in Lebanon, primarily working through the health system to enable continued functionality and operation of critical services such as hospital care, quality essential medicines, and outbreak response (by supporting and enhancing emergency preparedness at the Ministry of Public Health (MoPH)). Patient access is also emphasized with efforts to support increased caseloads at PHCs and hospitals, including medication, as well as new service modalities for maternal health and mental health and psychosocial support (MHPSS) among vulnerable communities. Community engagement underpins all components of the response with efforts to engage under-served and disenfranchised communities of Lebanese, Palestinian Refugees in Lebanon (PRL) and Migrants through a variety of approaches and tailored, accessible messages in order to promote health-seeking behavior as well as awareness and preventive actions.

Description of gender-sensitive, mainstreaming of accountability to affected people and inclusive planning

Joint planning with LCRP counterparts and with the Protection sector ensures coordinated efforts to guarantee the availability of safe identification and referral of GBV cases among health providers and clinical management of rape (CMR) services, as well as SRH services for vulnerable women and adolescent girls among all populations. Special attention will be paid to raising awareness on preventive services, especially maternal mortality, particularly among pregnant and at-risk women, by improving preventive care as well as In-patient care for Lebanese, PRL and migrants will be implemented in complementarity with LCRP and targeting at-risk women with increased awareness efforts on prevention.

Vulnerability criteria for coverage of hospital costs will be aligned with the vulnerability criteria under LCRP and will include considerations of gender and disability, and reporting for this activity shall be disaggregated by sex, age, nationality, and disability status. Among Risk Communication and Community Engagement (RCCE) activities, messaging shall be accessible to individuals with different languages and cultures, as well as persons with disability with an emphasis on using different formats of communication to enable maximum understanding and uptake.

Exit Strategy & Linkages/sequencing with Non-Humanitarian Frameworks and programs

The health-related activities under the ERP, LCRP (top-up approach to LCRP with focus on vulnerable Lebanese, PRL and Migrants), UN Sustainable Development Cooperation Framework (UNSDCF) and the Reform, Recovery and Reconstruction Framework (3RF) all work primarily through the health system under the joint National Health Sector Working Group (NHSWG) are driven by epidemiological data, building blocks of the health system, health equity and the priorities and plans of the MoPH.

ERP support entails a stop-gap effort to enable continuity of the existing critical health services, coverage of increased caseloads as a result of the socio-economic crisis particularly among vulnerable Lebanese and migrants, and mitigation of certain negative impacts of the current crises on both the health system and the populations. However, this limited scope still requires extensive coordination to avoid duplication and confusion. Longer-term planning is critical to address higher-level health system threats

such as quality of care, inequity in access and health coverage, low levels of community participation and accountability, and particularly, human resources retention and development. Moving forward, preparatory work for an integrated plan for supporting the health system in Lebanon, in line with the UNSDCF guidance, has been initiated, calling for complementary efforts aimed at addressing immediate humanitarian needs and linked with development goals to ensure aid efficiency, robust accountability and monitoring, and

health system resilience in the face of future crises; this is to strengthen Lebanon's efforts to reach Sustainable Development Goal 3: Ensure healthy lives and promote well-being for all at all ages (SGD3.8 Universal Health Coverage) and SDG3 health population. Additional efforts will be focused on supporting emergency preparedness at MoPH through operationalization of the Public Health Emergency Operation Center for future emergencies.



Credit: Kawthar Fahs / OCHA / December 2022

4.4 Nutrition Sector



PEOPLE TARGETED

0.14M

REQUIREMENTS (US\$)

\$11.31M

Contact information:

TITLE	NAME	EMAIL
Sector Coordinator	Amirhossein Yarparvar	ayarparvar@unicef.org
Co-Coordinator	Mira El Mokdad	mmokdad@lb.acfspain.org

NOTE: Nutrition sector is based on a unique response and logframe for both ERP and LCRP. Target population groups differ between the two response plans. Although there is no data on nutritional needs for the migrant population, the response will include migrant population.

Appealing Organizations and implementing partners

International Orthodox Christian Charity (IOCC), ACF, Mercy USA, Premier Urgence (PU), UNFPA, Relief International (RI), Save the Children, Medair, International Medical Corps (IMC), WFP, International Rescue Committee (IRC).

Sector Response Plan

The Nutrition sector has identified four main sector objectives for the response strategy in 2023 contributing to the ERP strategic objective 1 “Provide essential humanitarian support to most vulnerable people affected by the crisis in Lebanon for them to meet their critical needs”. These objectives are based on the sector’s analysis of the context, nutritional vulnerabilities across the life cycle and informed by the premise of the nutrition response that prevention comes first, and multiple delivery platforms must be accountable and utilized to deliver essential nutrition interventions to prevent all forms of malnutrition.

The strategy calls for a systems approach to improving nutritional outcomes. This approach aims to further utilize the five systems – food, health, water and sanitation, education, and social protection – with the greatest potential to deliver nutritious diets, essential nutrition services and positive nutrition practices for children, adolescents, and women.

An explicit focus on addressing malnutrition in all its forms. Malnutrition, in all its forms, is a violation of children’s right to nutrition and has impacts on the wellbeing of the population throughout the life course. The response aims to contribute to addressing the triple burden of malnutrition – undernutrition, both stunting and wasting; deficiencies in vitamins and other micronutrients; and overweight and obesity.

The strategy will also capture a comprehensive life cycle approach to nutrition programming. Maternal and child nutrition during the first 1,000 days coupled with a nurturing care framework – from conception to age 2 years – remains core to the response. In addition, the Sector strategy calls for an increased focus on nutrition in middle childhood and adolescence – a window of nutrition opportunity for girls and boys and a chance to break the intergenerational cycle of malnutrition.

A deliberate emphasis on improving diets, services, and practices. The goal of the strategy is to protect and promote diets, services and practices that support optimal nutrition, growth and development. Acknowledging the triple burden of malnutrition, it highlights the centrality of nutritious, safe, affordable, and sustainable diets with adequate nutrition services and practices as the foundation of good nutrition for children, adolescents, and women.

The Nutrition sector response strategy will have four objectives following the life cycle approach:

Objective 1: Young children and their caregivers have access to and demand for services aimed at prevention of all forms of malnutrition and the associated developmental risks (0-5 years of age).

Objective 2: School age children and adolescents have access to and demand for services aiming at prevention of all forms of malnutrition— particularly among girls.

Objective 3: Women have enhanced access to and demand for services aiming at prevention of all forms of malnutrition— particularly during pregnancy and lactation.

Objective 4: Children have access to growth monitoring, screening, early detection and treatment of wasting in early childhood.

Description of gender-sensitive, mainstreaming of accountability to affected people and inclusive planning

The Nutrition sector's strategy aims at mainstreaming SGBV, Protection, and PSEA. In 2023, the Nutrition sector will maintain efforts to strengthen the mainstreaming of the core protection principles: 'meaningful access without discrimination', 'safety, dignity and do-no-harm', 'accountability' and 'participation and empowerment' within the sector's strategy. To ensure quality safe and accessible nutrition services, and reach the most vulnerable population, the nutrition sector aims at the integration of GBV through the nutrition strategy. GBV is one of the drivers of malnutrition and caregivers' experience of GBV can have negative implications for child nutrition outcome. Gender/power dynamics in the home have major implications for effectiveness of nutrition interventions and uptake of the services. Lack of food as a driver for forced marriage among adolescent girls below the age of 18 and increase risk of sexual exploitation and abuse. Increased GBV risk is also associated with the location and timing of nutrition services. Given the increased risk of GBV, the nutrition sector will increase response capacity. This includes scaling up capacities of nutrition actors to respond and refer to GBV cases.

The sector will aim at integrating nutrition and early childhood development services supported by partners. These services will be utilized to provide comprehensive support to children and their caregivers who are facing emergency situations. It is a place where women and girls can go to feel safer, access information and support, participate in activities, and strengthen relationships with peers.

The Nutrition sector will place special attention on nutrition interventions for boys, girls, men, and women including children under five years of age, pregnant and lactating women, adolescents including adolescent girls married before the age of 18, persons with disabilities, older people, survivors of gender-based violence, persons living with HIV/AIDS, persons facing gender-based discrimination, and other vulnerable groups. Acceptability barriers will also be tackled, including social stigma, especially RH seeking behaviors for adolescent girls. As a response to this, the sector will aim to have Infant and young child feeding specialists available in health facilities and at the community level (through national hotline) to reach girls and boys with nutrition age-appropriate information. The sector will adopt a family approach to childcare giving and nutrition, by ensuring everyone including fathers and other male caregivers being trained on the importance of healthy nutrition and nurturing and responsive care. The sector will also work with child protection actors to strengthen gender transformative interventions training fathers and grandmothers to support children's nutrition.

In addition, the Sector is aiming at strengthening the community outreach component of the nutrition programs and providing services in a manner that reduces the time spent at, traveling to and returning from nutrition service points to increase the safety, availability and accessibility of nutrition services for women, girls and other at-risk groups. through mobilizing community outreach workers for provision of nutrition service at community level. Community-based nutrition programs will also monitor households' resource scarcity and any resulting conflicts at the family and community levels; and refer to GBV focal point assigned by the sector or services. Nutrition programs can provide nutritional support to survivors, including those who may have specific nutritional requirements for supporting the healing process. The sector log frame aims at identifying, collecting, and analyzing a core set of indicators—disaggregated by sex and age, to monitor GBV risk-reduction activities throughout the program cycle.

Exit Strategy & Linkages/sequencing with Non-Humanitarian Frameworks and programs

The Nutrition sector response is guided by the National Nutrition Strategy which has been developed through a rigorous multi-sectoral consultative process with

key national nutrition stakeholders¹⁶. This strategy comes at a critical time where the country is facing several crises that have severe impacts on the health and nutrition of people in Lebanon. With the current pandemic and challenging economic situation in the country, it is crucial to accelerate coordinated, multi-sectorial and targeted efforts to avoid exacerbation of the nutrition situation. While responding to immediate needs is critical, strengthening the nutrition governance in Lebanon for longer term results will contribute massively to the development agenda and hence it must be also prioritized. The strategy is shaped around

5 strategic result areas each focusing on utilizing the capacity of five main delivery systems including but not limited to health, education, food, social protection, and governance systems. The 2023 Nutrition response not only falls within the scope of this long-term national nutrition strategy but will also prioritize a number of result areas which will contribute to longer term and sustainable nutrition results. Sector will also enhance the sustainability through developing technical, policy and system capacities of the existing delivery systems.

16 National Nutrition Strategy and Action Plan, 2022-2026 [https://www.moph.gov.lb/en/Pages/2/62803/national-nutrition-strategy-action-plan-#:~:text=National%20Nutrition%20Strategy%20and%20Action%20Plan%20\(2021%2D2026\)&text=The%20strategy%20aims%20to%20ensure,in%20nutrition%20and%20health%20services.](https://www.moph.gov.lb/en/Pages/2/62803/national-nutrition-strategy-action-plan-#:~:text=National%20Nutrition%20Strategy%20and%20Action%20Plan%20(2021%2D2026)&text=The%20strategy%20aims%20to%20ensure,in%20nutrition%20and%20health%20services.)



Credit: Joe Matar / 2022 / OCHA - IOCC

4.5 Protection - Child Protection



PEOPLE TARGETED	REQUIREMENTS (US\$)
151.7K	\$24.4M

Contact information:

TITLE	NAME	EMAIL
Coordinator	Aleksandra Vidojevic	avidojevic@unicef.org
Co-Coordinator	Fatima Naba	fatima.naba@warchild.nl

Appealing Organizations and implementing partners

Alawite Islamic Charity Association, Danish Refugee Council, Himaya, International Organization for Migration, Mena Organization for Services Advocacy integration and Capacity Building, ONG Tabitha, Plan International, René Moawad Foundation, Right to Play, Save the Children, Secours Islamique France, SPHERE Building Tomorrow, Terre des Hommes - Italy, Terre des Hommes - Lausanne, United Nations Children's Fund, United Nations Population Fund, United Nations Relief and Works Agency for Palestine Refugees in the Near East, War Child Holland and World Vision International.

Sector Response Plan

More than one million children are in need of specialized prevention and response child protection services across population cohorts (vulnerable Lebanese, Syrian refugees, migrants and Palestine refugees in Lebanon and from Syria). The 2022 MSNA indicates that deteriorating economic conditions in the country, unemployment and poverty are expected to further impact the child protection needs in the most severely affected areas. As a result of the ongoing crisis, negative coping mechanisms, such as child labour, child marriage and different forms of violence and abuse lead to an overall increase of child protection needs, particularly among the most vulnerable and marginalized population groups.

This requires immediate prevention, early intervention, and response services such as lifesaving activities that include child protection case management services and focused mental health and psychosocial support services in addition to working at the community level to empower families to safely identify and refer cases at high risk of violence, abuse and/or exploitation.

In response, the Child Protection sector will continue to provide focused psychosocial support services targeting children and their caregivers across the country, while prioritizing locations with high severity of needs, namely North, Akkar and South governorates in the case of Lebanese and PRL, and Beirut and Mount Lebanon governorates in the case of migrant children. Efforts will also be made to safely identify and manage cases of children impacted by the continuous deterioration of the socio-economic situation, including children involved in child labor, street connected children and child marriage, and provide them with integrated child protection case management services, including emergency cash assistance provided to address certain protection shocks. By building the stronger linkages with the social protection programme as to support the strengthening of the overall social welfare sector so that marginalized children receive cash plus social welfare and child protection services, the overall positive impact on children's wellbeing, including education, nutrition and protection, will be enhanced.

Additional social and behavioral change initiatives will be scaled up as a core component of accelerated prevention and early intervention services with child protection related communication/awareness raising sessions in order to prevent child protection violations at the community level to ensure the protection of children against all forms of violence, abuse and/or neglect through close collaboration with other sectors, including mainly the Education, Nutrition and Health sectors.

Description of gender-sensitive, mainstreaming of accountability to affected people and inclusive planning

The Child Protection sector partners will utilize age and gender-sensitive approaches in the planning, implementation and monitoring and evaluation of required programmes/projects. The sector will ensure the use of targeting methods, and strengthen its outreach to improve access of boys, girls and caregivers of all cohorts, particularly those most vulnerable and marginalized, including populations such as children with disabilities, children in child/early marriages, orphans, and LGBTIQ+ children. The Child Protection sector will further ensure that all sector partners are sensitized on good practices, guidelines and standards such as the Secretary-General's Bulletin on special measures for protection from PSEA, child safeguarding (CS) and the established reporting mechanisms for SEA/CS cases. The Sector partners will also regularly monitor vulnerable children's/people's satisfaction with the quality and effectiveness of services and assistance, using feedback mechanisms and other monitoring methods (including third-party monitoring if needed). The Child Protection sector partners will document and report on AAP/PSEA/CS issues and challenges faced, lessons learned and any proposed changes to activities based on changes in the context, and feedback and other data from vulnerable people – in particular for women and girls through available channels.

Exit Strategy & Linkages/sequencing with Non-Humanitarian Frameworks and programs

The Child Protection sector emergency response plan will be linked to relevant Sustainable Development Goals (SDGs), including SDGs 3, 5, 8, and 16 which seek to contribute to the health and development of all children and adolescents. It will promote the enjoyment of same rights, access to resources and opportunities and the protection of girls and boys in Lebanon. This will specifically help address Child Labor including Worst Forms of Child Labour (WFCL) as well as curb the recruitment of children into armed groups. The sector will work to prevent and respond to the different kinds of violence children face by supporting the local capacities and government institutions to build a stronger child protection system in the country. The envisioned interventions will also contribute to the achievement of the Lebanon 2023 – 2025 United Nations Sustainable Development Cooperation Framework (UNSDCF) results, particularly under the categories People (Outcome 2: Strengthened provision of and equitable access to quality services, including basic services) and Outcome 3: (Enhanced protection for the most vulnerable) and Peace (Outcome 1: Strengthened inclusive social contract grounded in human rights to enhance good governance, effective and accountable institutions, and women's participation).



Credit: Milad Ayoub / 2022 / CARE

Protection - Gender-Based Violence (GBV)



PEOPLE TARGETED

117.2K

REQUIREMENTS (US\$)

\$13.4M

Contact information:

TITLE	NAME	EMAIL
Co-Coordinator	Pamela Di Camillo, UNFPA	dicamillo@unfpa.org
Co-Coordinator	Sophie Etzold, UNHCR	etzold@unhcr.org

Appealing Organizations and implementing partners

Al Fayhaa Association, Al-Jana, Amel Association International, CARE, Caritas Lebanon, DRC, Humanity & Inclusion, IOM, Lebanese Council to Resist Violence against Women, MENA organization for Services, Advocacy Integration and Capacity Building; NCA, NRC, Rene Moawad Foundation, Save the Children, TDH Italy, Tdh Lausanne, UNICEF, UNFPA, UNWOMEN and World Vision.

Sector Response Plan

Three years of economic crisis, compounded by the onset of the COVID-19 pandemic, Beirut Port explosions and political instability have left families living in Lebanon struggling to survive, plunged them into poverty and is affecting their health, welfare, education and access to other basic services. With the limited functionality of public services, administrative offices and courts, this multi-layered crisis had severe consequences on women, girls, children, and marginalized groups including older survivors of GBV, people with diverse sexual orientations and gender identities as well as persons with disabilities who are often at a heightened risk of GBV. These risks have also exacerbated existing vulnerabilities to protection risks and resulted in increased incidents of violence, abuse, neglect and exploitation of children and women.

Consequently, the number of people in need amongst all populations living in Lebanon increased significantly compared to the previous year. According to the GBV Information Management System data reports of 2022, there is an increase in GBV incidents reported including mainly intimate partner violence at homes of the survivor or the perpetrator. Girls and women from all population groups have resorted to harmful coping to support household needs by working as househelpers or street vendors where they are at higher risk of sexual assault and exploitation. Rape, including marital rape and sexual assault are reported to service providers and continue to be a considerable risk but remain underreported due to fear of stigma, retaliation and limited knowledge and trust in services.

Increased vulnerability and limited ability to cope with the socioeconomic crisis, expose women and girls to harmful coping strategies and increase risks of sexual exploitation and abuse (SEA). This has impacted particularly existing risk groups such as women living alone or with children, older women, undocumented migrants, and persons living with disability. Women and girls face safety and security concerns in their area, for 27% of assessed households with little difference between nationalities, the percentage goes up to half of the households in Akkar (MSNA 2022). Main reported concerns for women are being robbed and kidnapped, and for girls kidnapping as well as verbal and sexual harassment were raised as critical concerns.

Under the ERP and complementary to the LCRP framework, the GBV sector targets a total of 117,232 persons, including 93,786 Lebanese individuals as well as 14,068 Palestine refugees in Lebanon and 9,378 migrants at heightened risk. Targeting has followed a consultative approach amongst sector members using severity analysis at district level in line with previous ERP targeting while considering reduced funding and capacities and resources of sector partner agencies. The targeting also followed the principle of non-discrimination and inclusion considering the exacerbated needs of the Lebanese, PRL and migrant population over the past years. In terms of targeting the sector, after consultation with partners on capacity

to respond to needs and in complementarity with the LCRP response, agreed on an incremental percentage of people to be targeted in areas identified by the sector as having the highest severity of need. Due to the nature of gender-based violence disproportionately affecting women and girls, 64 per cent of the target population is female and 36 per cent are males. Children make some 30 per cent of the total target population with a focus on response and prevention of child marriage and sexual violence.

To address GBV risks, the sector applies a two-tiered approach in supporting prevention, risk mitigation and response activities. Furthermore, the proposed activities are in line with the GBV/CP prevention and response activities in the LCRP ensuring all vulnerable population receive needed services based on vulnerabilities and not their status.

Outcome of GBV sector: Lebanese, migrants and Palestine refugees in Lebanon are able to live in a protective environment where their human rights are respected at household and community levels and their protection risks are addressed in a comprehensive manner to enable them to live in safety and dignity. National systems to prevent, mitigate and respond to GBV are strengthened and accessible to all. Community-level perceptions and attitudes on power, GBV, women's rights are changed, and actors have the capacity to respond to immediate and acute life-saving GBV risks and shocks.

Output 1: Through targeted prevention activities at community level, risks of GBV within families and communities are reduced and prevented. This includes sensitization on GBV, gender inequalities, women's rights, existing legal frameworks related to GBV/gender, awareness on PSEA, and could include sessions on sexual and reproductive health (SRH), menstrual hygiene management information sessions held in safe spaces, through CSOs and at community level. Prevention activities are informed by annual safety audits conducted in all field locations with participation of specialized GBV community volunteer groups. Activities aim at longer-term behavior and attitude change on concepts of power, gender equality, gender norms and roles of males and females in the society aiming at changing traditional and normative concepts within the different communities and the society at large.

Output 2: Survivors of GBV and those at-risk access timely and quality case management, ensuring a

multi-sectoral and comprehensive access to services, including medical, psychosocial, legal and financial support. Women, men, boys, girls and people of diverse sexual orientation and gender identities receive age and gender-sensitive information on GBV, have timely access to age-appropriate services and rights to enable informed decision making. The aim is to support survivors to address immediate risks and to build long-term resilience to the protection threats and shocks experienced. Key interventions will include 1) individual and group psychosocial support; 2) specialized GBV case management; 3) provision of legal assistance; 4) safe shelter options by applying an intersectional approach in targeting criteria. The Sector supports the provision of GBV services through women and girls' safe spaces and/or integrated to community centers/health care centers while GBV guiding principles are respected. The Sector also includes the provision of emergency protection and recurrent cash assistance within GBV case management to mitigate consequences and facilitate access to services/ referrals in line with sectoral guidance.

Output 3: Improved capacity of GBV actors to provide multi-sectoral prevention and response to GBV and of non-specialized actors to mitigate GBV risks in their actions. A variety of capacity development activities will be implemented aiming to promote a greater understanding of the risks and consequences of GBV amongst all response actors and to strengthen the quality of survivor centered and compassionate care provided. Monitoring of all activities will be done through dedicated tools developed at global and national levels to be used by members of the GBV sector. With a view to enhance quality of services and strengthen the sector's ability to monitor service delivery and strengthen accountability, sector members shall use the client feedback survey to be applied systematically by all case management actors. Cash assistance will be provided as part of the Cash+ approach linking financial support to structured case management services.

Description of gender-sensitive, mainstreaming of accountability to affected people and inclusive planning

Under the GBV sector, all members commit to an age-gender and diversity sensitive programming addressing the needs and required tailored responses to adolescent girls, youth and older persons at risk of GBV, as well as people with specific needs or sexual orientation, gender identity, expression and sex characteristics (SOGIESC) and persons with

disabilities. The GBV sector further ensures close engagement with the affected population at individual, household and community level through regular consultations at national and field levels, with a special focus on identifying community-based solutions and using existing resources available within the affected population and promoting women leadership. Discussions between relevant stakeholders on ways to improve service delivery take place in regular coordination meetings and focus group discussions with affected populations.

Several feedback and complaints mechanisms are used by sector members and partners including at counseling desks, hotlines, through complaints and suggestion boxes and the community feedback and complaints mechanism. The sector is further ensuring that GBV survivors and those at-risk are able to provide feedback in a safe and confidential manner, including when reporting misconduct and SEA by working on GBV risk mitigation in distributions with key sectors. Lastly, the sector has a key role to play to ensure victim assistance for SEA survivors.

Exit Strategy & Linkages/sequencing with Non-Humanitarian Frameworks and programs

The GBV sector strategy is in line with and complementary to longer-term development plans outlined in the UNSDCF 2023-2025 outlining the need for protection services for most vulnerable population groups and the aim to enable a shift towards more sustainable delivery of services through strengthening of national services and policy framework. The GBV sector strategy is committed to work closely with the national systems including governmental and civil society actors to prevent GBV, mitigate risks and to provide survivor-centered services in line with existing national and global standards. In 2023, the GBV sector intends to increase its work through and with civil society and local/community-based organizations and women-led organizations. The capacity of local actors will be strengthened in its engagement in the humanitarian response and to foster longer-term response mechanisms serving Lebanese persons at heightened risk as well as migrants, PRL and other groups at risk. As such, the different humanitarian responses are aligned and coordinated under one GBV coordination group to ensure service delivery across all populations and to reduce tensions within the communities.



Credit: OCHA Lebanon / 2022



4.7 WASH Sector

PEOPLE TARGETED

1.26M

REQUIREMENTS (US\$)

\$48.2M

Contact information:

TITLE	NAME	EMAIL
Coordinator	Jakub Pajak	jpajak@unicef.org
Co-Coordinator	Michele Citton	m.citton@leb-relief.org

Appealing Organizations and implementing partners

ACTED, Action Against Hunger, American Near East Refugee Aid, Association Nabad for Development, Associazione Volontari per il Servizio Internazionale, Danish Refugee Council, Developmental Action Without Border (Nabaa), INTERSOS Humanitarian Aid Organization, LebRelief, Nabad, Oxfam, Solidarités International, UNICEF, WeWorld-GVC, World Vision.

Sector Response Plan

The WaSH sector response strategy is aligned with the two ERP strategic objectives focusing on: 1) the provision of essential humanitarian support to the most vulnerable people affected by the economic crisis and 2) supporting the response capacity of the Lebanese health and WaSH systems in coping with disease outbreaks, including waterborne diseases.

In line with the WaSH sector 2023 joined up framework, under the ERP the WaSH sector response is structured with one outcome (Outcome 2: More vulnerable people in Lebanon are using safely managed drinking water and sanitation services whilst reducing health and environmental risks and improving water quality by increasing the proportion of wastewater that is safely treated) and 3 main outputs (output 2.1 access to water, output 2.2 access to sanitation and output 2.3 access to hygiene and WaSH behavior).

According to WHO, in an urban middle-income context, 50-100 litres of water per person per day may be the minimum acceptable amount to maintain health and dignity. In the context where most of the population is connected to public water and sanitation infrastructure, though dysfunctional or non-functional, a system approach to addressing the needs of the most vulnerable communities in terms of water supply and wastewater management is the most cost-efficient solution. Public distribution systems are the most equitable, accessible, and safer way to provide water to the maximum number of people, similar to public sanitation systems.

In a short term, the water and sanitation systems will be supported through in-kind operation and maintenance assistance to the Water Establishments and municipalities managing the systems, through the provision of fuel, chlorine, spare parts and other consumables to run the systems. The alternative of providing direct support through water trucking would be more costly, presents higher risks in terms of public health and the environment, and might create inequalities between households and localities and create or exacerbate social tensions, particularly as water trucking or desludging is a very visible support modality.

The systems will be also supported by emergency investments in the water and sanitation infrastructure. Despite the higher initial cost of investment activities supporting WaSH systems are economically justifiable in the mid-term run and are crucial for mitigating public health risks and for enhancing equity and poverty reduction. Given the ongoing energy crisis that heavily impacts water production and distribution as well as wastewater treatment, the sector will focus on reducing the water and sanitation infrastructure dependency on fossil fuels, through systems solarization, powering by other renewable energy, and transformation to gravity-fed systems where feasible. In light of the ongoing cholera outbreak, the sector will continue enhancing water treatment infrastructure, including through solarization, and will conduct minor repair and rehabilitation of water distribution networks and

sewage systems to mitigate the risk of water and environment contamination, targeting cholera high-risk and cholera hot-spot areas.

In addition to strengthening the WaSH systems' capacities to deliver safe, sustainable and affordable services to prevent the further spread of cholera in Lebanon, the containment of the outbreak will continue to be done through a rapid WaSH response to specific hotspot areas using the case area targeted interventions (CATI) approach. Under the CATI across all location types, a field assessment will be carried out to analyze WaSH conditions in the household and the surrounding area to determine the cordon sanitaire and the type of response. Partners will test water at the end-user side as well as at the distribution and source/side, predominantly for free-residual chlorine (FRC) or faecal contamination. Chlorination tablets will be provided to households not supported by humanitarian water trucking and with negative FRC results. Hygiene kits and cholera awareness sessions will be delivered to all confirmed and suspected cases and households within the cordon sanitaire. Spraying will be executed for outdoor unsanitary settings such as garbage accumulation, presence of vomits or open defecation, as well as shared/community latrines.

As a part of the cholera response, the sector partners will also continue to support municipalities by the provision of chlorine, training and monitoring tools in an attempt to chlorinate water supplied by private water trucking vendors. For the time being, the private water trucking market remains largely unregulated, posing a great public health risk to the population. Where deemed necessary, in coordination with the Health sector actors, the WaSH sector will also support wastewater management facilities of cholera treatment centres and cholera treatment units. In collaboration with the Education sector, the WaSH sector will support cholera prevention and response activities for WaSH in schools and learning centres.

The WaSH sector will also target the most socio-economically vulnerable households in coordination with the Food Security, Health and Migrants sectors. Given the alarming results of MSNA and VASyR assessments highlighting that a significant portion of people from all population groups face issues with accessing adequate hygiene materials, the sector focus will remain on ensuring access to critical hygiene items and water treatment consumables for the most vulnerable. Special attention will be given to menstrual hygiene management for women and girls

of reproductive age and to the specific hygiene needs of people living with disabilities, families with young children and the elderly with targeted distributions and hygiene promotion to the most vulnerable and such activities prioritization for LHF allocations.

The targeting will be executed based on needs estimated by the sector using various data sources available in 2022: MSNA, VASyR, WaSH Sector Assessment Platform, Water Market Monitoring, and Water and Sanitation Vulnerability Mapping focusing on the feasibility of solarization. Estimated WaSH sector People in Need, estimated area severity, as well as cholera WaSH risk map and cholera hotspots, will be used for prioritization. Interventions will be coordinated with relevant authorities such as Water Establishments, municipalities and concerned ministries. The sector will monitor the plan implementation using the Activity Info and Referral Distribution and Monitoring System (RDMS) for partners' activities and the Financial Tracking System (FTS) for funds monitoring.

Description of gender-sensitive, mainstreaming of accountability to affected people and inclusive planning

Gender and youth considerations are mainstreamed in the WaSH sector response to ensure the distinct needs and realities of women, men, girls and boys are reflected throughout the response. The sector will continue to consider GBV in assessments, and incorporate GBV risk-related questions in questionnaires and focus group discussions. The WASH Sector is committed to collecting and using sex and gender-disaggregated data during assessments, monitoring and evaluation. In addition, the sector builds the capacity of the staff engaged in outreach activities on WaSH-related GBV risks and referrals. The WaSH sector gender and GBV focal point play an active role in linking the discussions and issues at the WaSH and Protection sector levels.

With close collaboration with the Protection sector and GBV sub-sector, special mainstreaming of youth girls' needs is addressed through specific activities and provision of items (dignity kit and menstrual hygiene items). WaSH sector partners will be trained on protection (safe identification and referrals, safe distribution, etc.), PSEA, and cholera outbreak response (jointly with the health sector). The WaSH sector will ensure prevention and response to SEA and the potential for other forms of misconduct are fully considered and integrated into the sector response. This mainstreaming of PSEA will be

considered in the different emergency distributions and services provision. For example, by ensuring that items distribution and water trucking supply occurs in daylight hours and placing public water points in central locations in the neighbourhood.

The key WaSH sector data from 2022 assessments were gathered directly from the affected population through face-to-face interviews. Data collection included the enumerator's observations on the conditions of households' WaSH facilities. To strengthen accountability to the affected population the 2022 WaSH assessment questionnaires included questions on satisfaction from received humanitarian aid (if any). Similarly, the referral distribution and monitoring system (RDMS) used by the WaSH sector for the cholera response, and previously in the COVID-19, gives an opportunity to beneficiaries to provide feedback and complaints on received support. The collected data is further analyzed with the aim to adjust the response to beneficiaries' preferences. The WaSH sector closely collaborates with both the AAP and GBV relevant structures to provide partners with guidelines on beneficiary's involvement in all steps of the project development and implementation including monitoring, the importance of the complaints and feedback mechanism, issues linked to PSEA etc.

Exit Strategy & Linkages/sequencing with Non-Humanitarian Frameworks and programs

While the main objective of the ERP is to respond to the most acute unmet humanitarian needs for Lebanese, PRL and migrant communities, the WaSH strategy synergizes with the LCRP as well as with the non-humanitarian frameworks such as 3RF or UN Sustainable Development Cooperation Framework 2023-2025. The WaSH sector ERP strategy is also closely aligned with the National Water Sector Strategy (NWSS) or the 5-year Water sector Recovery Plan (2022-2027).

If cost-efficient and meeting the timeframe of the emergency response, the sector will support renewable energy solutions for water supply and wastewater treatment systems, in line with the National Water Sector strategy and the 5-year Recovery Plan. In coordination with the WaSH sector's Stabilization, Sanitation, Community Engagement and Water Quality thematic groups the sector will continue to align the response with the emerging needs, revise sector standards and strategies, and coordinate the response with the development actors. All water and sanitation infrastructure-related interventions (for instance solarization of water systems), will be implemented in close coordination with relevant authorities such as the Water Establishments, municipalities etc. and properly handed over aiming to create local accountability of the infrastructures and protecting partners from liabilities during and after the implementation period of the ERP.



Credit: Kawthar Fahs / OCHA / April 2023

4.8 Migrants



PEOPLE TARGETED

30K

REQUIREMENTS (US\$)

\$12.4M

Contact information:

TITLE	NAME	EMAIL
Coordinator	Kaja Blattmann	kblattman@iom.int
Co-Coordinator	Zeina Mohanna	zeinamohanna@amel.org

Appealing Organizations and implementing partners

AMEL - Lebanese Association for Popular Action, L'Union Pour La Protection de L'Enfance Au Liban, Caritas Lebanon Migrants Center, Eгна Legna Besidet Inc., Insan Association, International Organization for Migration, Migration Services and Development, Oxfam GB, Health, Soins infirmiers et développement communautaire, Agency for Technical Cooperation and Development, ONG Tabitha, Protection - Human Trafficking & Smuggling

Sector Response Plan

The overarching objective of the Migrant sector is to secure migrants' access to humanitarian aid and multisectoral assistance, especially migrant-specific protection, to ensure that they are not left behind. To achieve this, a four-pronged approach has been adopted with the aim to address migrant-specific vulnerabilities stemming from exploitation and abuse, anticipate gaps in humanitarian safety nets, and provide alternative solutions. The below outcomes do not however cover all migrant needs, as other needs such as food, health and WaSH are mainstreamed into the appropriate sector plans of the ERP.

Outcome 1: Vulnerable migrants have improved access to, and knowledge of, protection services and how to access specialized assistance such as legal assistance and MHPSS support to protect migrants

against abuse, exploitation, and marginalization, and to reach those unable to access services due to lack of documentation, fear of arrest, stigma, mobility or communication issues. With a worrying increase in protection concerns, severe MHPSS cases, trafficking, the adoption of harmful coping mechanisms, and irregularity, the sector will seek to expand its reach and outreach through awareness raising sessions, screening of requests made directly and through hotlines, community-engagement and empowerment. Vulnerable cases will be provided with direct legal assistance, representation, counseling, and case management.

Outcome 2: Vulnerable migrants have improved access to multi-sectoral, dignified and lifesaving humanitarian assistance, by providing critical assistance and filling crucial gaps across the response, as well as training frontline workers across sectors and organizations on how to provide migrant-inclusive and migrant-tailored assistance that is culturally appropriate. To respond to the increasing shelter needs, both for sensitive protection and MHPSS cases, migrants awaiting return, and evicted migrants, safe shelters will be provided. The number of migrants unable to cover basic needs has also increased since 2022, with the need to increase cash assistance, and complementary NFI distributions for those unable to receive cash due to lack of documentation.

Outcome 3: Vulnerable migrants have access to assisted voluntary return and reintegration (AVRR) assistance to their country of origin. With a quarter of migrants seeking to return, and many of them stranded unable to do so for financial, medical, documentation and/or legal reasons, subsidized travel costs and voluntary return assistance will be provided through coordination with embassies, and relevant state bodies, including the provision of travel documentation, pre-departure medical checks, and specific support for elderly, sick and children.

Outcome 4: Evidence-based humanitarian programming is enabled across sectors due to improved data collection and analysis through both

nation-wide surveys and thematic research, to better capture, and respond to the dynamic situation and emerging needs within the migrant communities as the crisis progresses. This will also inform the sector's advocacy efforts with the larger response, Government counterparts and other key stakeholders. The activities will target the most vulnerable migrants, regular and irregular, residing in Lebanon in areas identified by partners as the ones with the highest concentration of migrants in need of humanitarian and protection assistance. Particular attention will be given to migrants residing in Beirut and Mount Lebanon due to the high density of migrant communities residing in these areas, and the severity of needs identified by the Multi-Sector Needs Assessment 2022. However, the migrant sector will seek to expand its scope to reach, and ideally identify new partners providing assistance in other governorates.

The number of migrants targeted throughout the four outcomes reflects both the increasing needs of migrants (60 per cent in need of migrant-specific assistance) and the current capacity of migrant sector partners, but also the limitations on implementation rooted in the current crisis. It also takes into consideration the capacities of migrant-led organizations and networks, often the first responders when migrants are in urgent need, which the sector and sector partners seek to further strengthen cooperation with in 2023.

Description of gender-sensitive, mainstreaming of accountability to affected people and inclusive planning

The majority of migrants in Lebanon are female (75 per cent) and are considered at higher risk of abuse, such as GBV, and exploitation, including human trafficking and forced labour. These trends align with partners' focus on gender-specific protection, such as all-female temporary shelters, and are backed up by records demonstrating psychological distress is particularly related to female migrants. However, with the current crisis, the sector also notes a drastic increase in male migrants unable to meet their basic needs, and facing increasing psychosocial stress linked with their socioeconomic and legal status, racism and discrimination and the temporariness of their situation in Lebanon. Gender considerations will be integrated into all aspects of the Migrant sector's response, including analysis and data collection, coordination, representation, and programming. The Migrant sector will actively work to mainstream gender and integrate

gender equality in the response, reinforcing a human rights-based approach.

The Migrant sector is committed to fight to the prevention of PSEA through training, awareness raising and supporting the adaptation of PSEA material to migrants' languages.

The Migrant sector will ensure the meaningful and active involvement of migrant representatives in decision-making processes through their regular participation in the core group, and through regular meetings and consultations with migrant-led organizations and networks. Their engagement in the sector is key to ensure community ownership, efficiency, and accountability of the response. In parallel, outreach and awareness raising with migrant communities is integral to sector partners' response, and the sector encourages, and supports, the establishment of diverse and contextually appropriate feedback and complaints mechanisms.

Exit Strategy & Linkages/sequencing with Non-Humanitarian Frameworks and programs

As the ERP is a time-bound humanitarian plan it is unlikely that the root causes of migrant needs, many of them preceding the most recent crises, will be addressed within 2023. With the scope and severity of the needs across the population in Lebanon, including its migrant population, humanitarian assistance may be required beyond 2023. Hence, the migrant sector's exit strategy focuses on a series of incremental steps:

- i) Ensuring the sustainable and consistent access of migrants to humanitarian assistance across sectors, including through the mainstreaming of migrants' needs and concerns in the humanitarian coordination structure and the ERP.
- ii) Supporting the establishment of an enhanced protection mechanism for migrants in Lebanon in a coordinated and systemic manner, including through strengthening the capacities of Governmental institutions and coordination with all relevant patterns and sectors across the response frameworks.
- iii) Strengthen community-based protection, including, but not limited to, the empowerment and capacity building of migrant community leaders and migrant-led organizations, enhancing their capacity to support other migrants in need and shaping the larger response.

iv) Complement and feed into the work of humanitarian actors and coordination structures, including the UN Network on Migration Lebanon, to improve migrants' access to social protection and social safety nets. This would include supporting the Government's efforts to strengthen and implement its social protection system in line with international standards, strengthening community-based support mechanisms, supporting inclusive internationally funded and administered social safety net programmes, and advocating for reciprocity

and extensions of social protection programmes at country of origin. In addition, the sector will support the revision of the governance and legal framework for migrants and migrant workers in Lebanon, in line with the principles of the Global Compact for Safe, Regular and Orderly Migration, which was adopted by the Lebanese Government in 2018.



Credit: Josph Matar / OCHA / March 2023

4.9 Coordination & Support Services



Appealing Organizations and implementing partners

REACH, UNFPA, LHIF, LHDF

Sector Response Plan

In 2023, Coordination and Support Services will support humanitarian actors to deliver principled humanitarian planning, action and advocacy. Coordination and Support Services aims to ensure that the humanitarian response is coordinated, evidence-based, accountable, inclusive and effective.

Support for other thematic areas such as cash and voucher assistance will be facilitated including through the engagement of the Cash Working Group (CWG) and the Strategic Taskforce on Cash (STC). Coordination will facilitate collection of data, analysis and dissemination of regular market updates to inform humanitarian cash response.

Regular information management products and analysis including in the form of reports, datasets, dashboards, snapshots and bulletins will inform decision-making across the response. Coordination will play a key role in the facilitation of the Humanitarian Programme Cycle, including needs assessment and analysis, strategic response planning, resource mobilization, implementation, monitoring, operational review and evaluation to enable and inform the response.

Recognizing the multilayered crises and their disproportionate impact on the different vulnerable groups, including women, children and people with disabilities, Coordination will support the integration of protection, gender, disability and other considerations into response planning and action. This will include ensuring the consideration of protection and other concerns in overarching humanitarian coordination mechanisms as well as supporting specific working groups focused on gender, inclusion, accountability to affected populations and Preventing Sexual Exploitation and Abuse (PSEA).

In accordance with global commitments, Coordination will work to enable the localization of humanitarian aid in Lebanon, it is critical to enhance the participation of local and national humanitarian actors in the decision-making, resource allocation and agenda-setting in Lebanon's humanitarian architecture. Coordination aims to support the Lebanese Humanitarian and Development NGOs forum through institutional capacity building of local and national humanitarian actors.

Furthermore, Coordination will support the efforts of the Lebanon Humanitarian INGO Forum (LIHF) to provide resources, best practices, and training opportunities, to ensure its members have the tools necessary to integrate protection, gender, accountability to affected population and social inclusion into their activities and prevent sexual exploitation and abuse.

In efforts to enable humanitarian action, Coordination will provide support to maintain sustained and principled humanitarian access and an enabling operational environment. This will entail maintaining an evidence base on beneficiaries' access to humanitarian assistance and operating environment and associated key constraints, providing technical and strategic advice to humanitarian leadership and partners. Coordination will also enable effective and timely emergency operations when needed, including through supporting emergency mechanisms as well as ensure preparedness efforts, plans and modalities are developed, updated and coordinated.

Outcome 1: Critical information on the humanitarian situation in Lebanon is provided through coordinated data collection and assessments. Multi-Sector Needs Assessment (MSNA) is a nationwide survey coordinated and delivered by humanitarian actors to inform better understanding of the needs and 2024 humanitarian response planning. Given the challenges that cut across sectoral lines, Coordination is focused on enabling effective, principled multi-sector approaches. It will also facilitate evidence-based humanitarian decision-making, planning and action.

Outcome 2: Coordination between local and national NGOs is facilitated and their participation in the decision-making processes is enabled across the various humanitarian coordination mechanisms in Lebanon.

Outcome 3: Coordination between international NGOs is enhanced and engagement in the humanitarian coordination structure in Lebanon is strengthened.

Outcome 4: Coordination of the Prevention of Sexual Exploitation and Abuse (PSEA) Network is enhanced, and support efforts are facilitated.

EMERGENCY RESPONSE PLAN LEBANON

2023
ISSUED April 2023