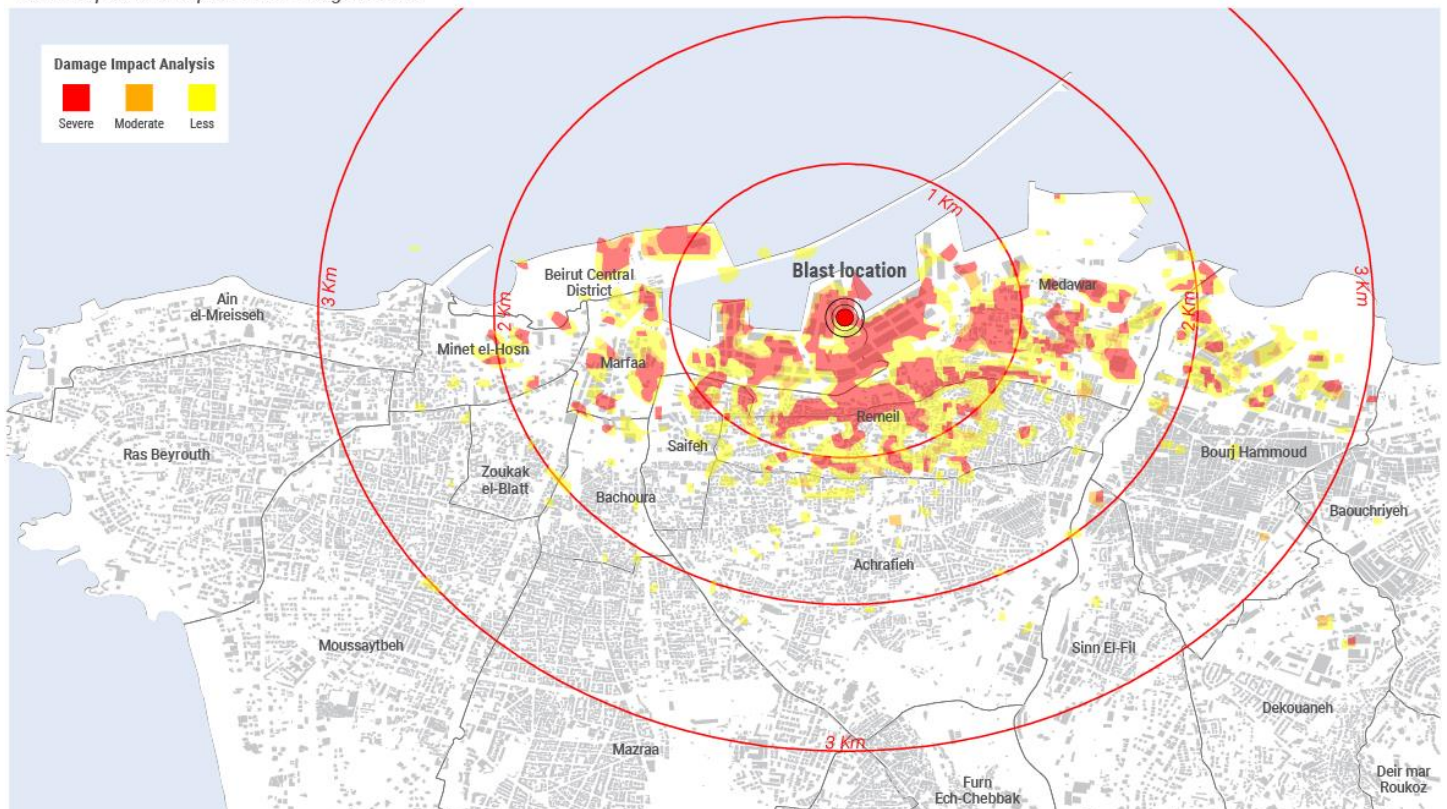


Situation Reports are produced by OCHA Lebanon in collaboration with humanitarian partners. This Situation Report covers the month of December 2020, while also reflecting on the overall and cumulative response to the Beirut Port explosions. This Situation Report is the last one to be issued to cover the response to the Beirut Port explosions.

HIGHLIGHTS

- While the Lebanon Beirut Port explosions' Flash Appeal formally ended on 31 December 2020, the implementation of some of its activities will continue into the first months of 2021. In parallel, recovery work will also continue under the World Bank Group (WBG), UN and European Union's Reform, Recovery and Reconstruction Framework (3RF).
- The COVID-19 outbreak in country remains a massive public health emergency. As community transmission continues to increase – and the related socio-economic fallout continues – the outbreak is aggravating existing vulnerabilities, creating new humanitarian needs, and exacerbating current ones.
- Beyond Beirut and the areas affected by the Port explosions, a close monitoring of the humanitarian situation in, and across, Lebanon is required. Also, and as the COVID-19 virus will continue to have an impact in 2021, adaptable responses, as well as flexible funding, will be essential going forward. Three main areas remain of particular concern – protection, food security, and health – as needs remain high and basic living conditions of already vulnerable communities could rapidly deteriorate further.

Beirut explosions exposure on 4 August 2020



Damage impact analysis by ARIA team scientists at NASA JPL, Caltech, and Earth Observatory of Singapore. Located in Pasadena, California, Caltech manages JPL for NASA - Map produced by OCHA

SITUATION OVERVIEW

The Beirut Port explosions occurred as Lebanon had been facing a multi-faceted crisis that started in October 2019. Since then, the economic and financial crises have accelerated, leading to increasing levels of poverty, food insecurity, and further compounding needs among the Lebanese and non-Lebanese communities alike, including the refugee populations.

The Beirut Port explosions of 4 August 2020 further increased vulnerabilities and inequalities. The intersecting crises the country is experiencing have disproportionately hit and affected vulnerable groups, people with specific needs, and disadvantaged communities, such as female-headed households, children, youth, older people, the LGBTIQ+ community, people with disabilities, refugees and migrant workers.

While the Lebanon Beirut Port explosions' Flash Appeal formally ended on 31 December 2020, the implementation of some of its activities will continue into the first months of 2021. Namely, the Shelter Sector response remains key, with regards to both minor repairs (Level 1, light damage) and rehabilitation work (Level 2, moderate damage). In parallel, recovery work will also continue under the 3RF.

While the humanitarian phase of the response to the Beirut Port Explosions ends, some humanitarian needs remain. Most of these needs pre-existed before the explosions and were caused by the financial and economic situation in country, exacerbated by COVID-19. Needs have now been further compounded by both the explosions and the deepening of the economic crisis, as well as the cumulative impact of COVID-19 containment measures.

Three main areas remain of particular concern, as needs remain high and basic living conditions of already vulnerable communities could rapidly deteriorate further: protection, food security, and health.

Most of the protection needs being identified relate to the pre-explosions situation in country, further aggravated by the COVID-19 outbreak. Despite the good level of funding against the Flash Appeal, the Protection component remained significantly underfunded (nine per cent as of 20 January) compared to the other Sectors (average of 50 per cent funded). The Protection response was possible thanks to the flexibility in redirecting funding from the Lebanon Crisis Response Plan and operation. As of the end of December, nearly 80,300 people, out of approximately 150,000 targeted, benefitted from protection services. Protection partners report psycho-social support needs have increased due to anxiety over the current situation in country, limited livelihoods opportunities, and an overall sense of desperation and powerlessness. Also, gender-based violence (GBV) has been increasing over the past year due to COVID-19, a 2020 UN Women study shows.

Food assistance continues to support those affected and most vulnerable and at risk of being left behind. As of the end of December, and since the beginning of the response, needs in response to the Beirut Port explosions were covered for food vouchers distribution (over 22,400 people received vouchers), hot/ready-to-eat meal-distribution (at least 227,000 hot meals distributed), and multi-purpose cash assistance (nearly 100,000 people assisted at least once). But, as access to food remains hampered by increasing food prices and the loss of income and livelihoods opportunities, as well as consequent indebtedness, the food security response continues in a number of other areas, namely with regards to food parcels distribution and support to micro, small and medium-sized enterprises.

Public services remain meanwhile weak, over-burdened, and under-resourced. Specifically, the public health system had already been facing structural challenges prior to the COVID-19 outbreak, with an inadequate provision of both primary and secondary health services. Over the past year, the virus has continued to add extra pressure and, if the health system in Lebanon continues to be overloaded, this will inevitably limit the availability of, and accessibility to, life-saving health services, specifically for those vulnerable and/or marginalized groups with limited resources. As critical needs remain unaddressed, the UN and partners continue providing outreach health services, primary healthcare support, mental health and psychosocial support services, and distributing, or donating, medical supplies, alongside completing infrastructure rehabilitation.

While the UN and partners aim to focus their efforts on longer-term interventions, a close monitoring of the humanitarian situation in, and across, Lebanon remains required. Moving forward, humanitarian interventions will continue to be necessary for some extremely vulnerable groups among the Lebanese population, refugees, and migrant workers. And, as the COVID-19 virus will continue to have an impact in 2021, adaptable responses, as well as flexible funding, will be essential going forward.

FUNDING

As of 20 January, the Flash Appeal is slightly over 80 per cent funded (US\$158.7 million, out of an updated financial ask of US\$196.6 million as per the revision carried out in November 2020). Funding towards those Flash Appeal projects that were reviewed and revised in November 2020 continues being tracked in the OCHA-managed [Financial Tracking Service \(FTS\)](#), alongside contributions outside the Flash Appeal, the latter standing at approximately US\$140 million.

As some of the Flash Appeal project ended, or are being wrapped up, the 3RF recovery track is starting, requiring flexible, sustained, predictable, and unconditional funding so to continue addressing priority needs in a transparent, coordinated, and accountable manner.

The Flash Appeal has helped set the stage for longer-term recovery and reconstruction, strengthening linkages between humanitarian and development interventions, and calling for international support and financing for the 3RF, people-centred recovery framework, to come swiftly so that the needed assistance can continue to benefit those in need.

Received funding by Sector (Flash Appeal only)



	requested	received
 Protection	\$23.9M	 9%
 Education	\$18.5M	 74%
 Food Security	\$52.6M	 89%
 Health	\$33.4M	 47%
 Shelter	\$65.4 M	 71%
 WASH	\$2.8M	 33%
Multi-sector	n/a	\$5.8M
Not specified	n/a	\$27.2M

HUMANITARIAN RESPONSE

Protection

Needs:

- Most of the needs being identified relate to the situation in country pre-explosions, further aggravated by the COVID-19 outbreak.
- Needs span from mental health, case management for high-risks cases of violence or exploitation of children, rehabilitation for persons with disabilities, emergency cash for vulnerable groups, including the elderly and LGBTIQ+ individuals, and legal assistance.
- Several partners indicated projects, or activities, to address these needs would either be integrated and absorbed in to the Lebanon Crisis Response Plan and/or the 3RF programming, or continued to be funded bilaterally.

Response:

- Since the beginning of the response, 80,266 people benefitted from protection services.



of people reached through protection and GBV outreach, and risk mitigation activities



of people benefitting from information sessions, awareness sessions and individual consultations on how to access services (excl. legal services)



of people engaged in community-based child protection activities



of people provided with specialized Mental Health Psychosocial Support and Focused Non-specialized Psychosocial Support



of people reached through GBV services



of people with specific needs supported with protection or emergency cash



3,452

of people with specific needs, including disabilities, receiving individual counseling, case management and specialized support



1,056

of people benefitting from counseling, legal assistance and legal representation

N.B. The above figures are not necessarily representative of the entirety of the protection response on the ground.

Gaps & Constraints:

- The pre-existing situation of poor housing, overcrowded neighbourhoods, and sub-standard basic services, including water, electricity, and solid waste management and disposal, are being exacerbated by the COVID-19 outbreak and intersecting crises in country.

Food Security

Response:

- In December, nearly 8,000 beneficiaries, the majority Lebanese nationals, received in-kind food parcels. Since the beginning of the response, at least 136,561 people received in-kind food parcels.
- Food security partners continued the distribution of multi-purpose cash assistance (MPCA) to those most economically vulnerable. In December, 605 new beneficiaries joined the MPCA programme, with 71,250 people receiving assistance (approximately \$3.3 million disbursed) catering for households' most urgent basic needs. Nearly 100,000 were reached

by MPCA at least once since August. While most families continued to receive assistance through Western Union or emergency pre-paid cards, some families received the food portion of the transfer value in the form of a food e-card (voucher). Also, the International Committee of the Red Cross (ICRC) continued distributing emergency cash to 1,230 households selected for support for six months, until April 2021.

- In December, over 23,000 people benefitted from hot meals, being distributed, inter alia, through community kitchens. Since the beginning of the response, over 227,000 hot meals were distributed.
- In December, 21 micro, small and medium-sized enterprises (MSMEs) received direct cash support, with a total amount of US\$123,470 disbursed; another 20 MSMEs also received other types of support, ranging from physical repairs to in-kind assistance and trainings. ICRC continued to support 50 small and medium enterprises with monthly instalments (approximately US\$80,000 in value). At least 224 MSMEs were supported with direct financial assistance, and at least another 20 enterprises were supported with rehabilitation since the beginning of the response.
- The thematic group working supporting MSMEs continued the coordination with partners both inside and outside the Flash Appeal. The group continues to rely on a service mapping- and focal point- model to avoid duplication of assistance. Also, twenty-nine referrals on support to MSMEs were done through the Referral Information Management System (RIMS) managed by the Danish Refugee Council.

Nutrition

Response:

- In December, 543 mothers received at least one counselling session by a lactation specialist. Since the beginning of the response, 16,665 pregnant and lactating women were supported with nutrition services.

Health

Needs:

- The COVID-19 outbreak continued to put extra pressure on an already over-burdened and under-resourced health system.
- Overall, health partners continued to identify the following, critical, health needs:
 - Insufficient community-based activities, such as outreach activities, as well as home-based care service provision, and lack of hygiene and care supplies for the elderly and those home-bound and bed-ridden.
 - Weak referral systems between the NGOs and the Primary Healthcare Centers (PHCs).
 - Lack of emergency-response equipment.
 - Lack of medications and supplies, particularly with regards to acute and chronic medications.
 - Insufficient mental health and psychosocial support services, including for the LGBTQI+ community.
 - Lack of hospitalization's fees coverage, lack of fees' coverage for physical rehabilitation and physiotherapy, as well as high cost of diagnostic services.

Response:

Outreach health services, including mobile medical units (MMUs), medical stations and home-based care

- Médecins Sans Frontières, HelpAge and Amel continued to provide home-based care. In December, 460 follow-ups visits were conducted, 130 elderly were reached by outreach volunteer teams, 23 were provided with medical consultations, and 45 received home visits and/or counselling sessions. Since the beginning of the response, 850 patients benefitted from home visits, 662 elderly were reached by outreach volunteers visits, 417 medical consultations were provided, and 674 nursing-care visits were conducted.

Primary Healthcare Center (PHC) support

- Marsa, Soins Infirmiers et Développement Communautaire, Caritas, International Orthodox Christian Charities, Son of Man and Amel Association provided psychosocial support services (PSS), psychological first aid (PFA), and sexual and health reproductive (SHR) services: in December, 5,252 beneficiaries received SRH services and 482 benefitted from PFA and PSS. Since the beginning of the response, at least 23,600 beneficiaries with SRH services and over 30,000 individuals received SRH-related awareness raising sessions.
- In December, Caritas provided medical consultations for 672 beneficiaries, medications for 4, 371 beneficiaries, conducted lab diagnostics tests for 319 beneficiaries, and provided 200 PSS.

Mental Health and Psychosocial Support Services (MHPSS)

- In December, HelpAge and IDRAAC provided mental health consultations through their MHPSS hotline to 347 elderly and provided specialized consultations to 59 individuals at their walk-in-clinic. Since the start of their partnership, 675 persons received mental health consultations through the hotline and 102 persons received specialized mental health consultations at the clinic.
- In December, Restart reached 218 individuals with psychosocial support, 117 individuals received psycho-social support, including 20 staff members. Since the start of the response 1,095 individuals received psychosocial support and 239 individuals were provided with medications.
- In December, Jesuit Refugee Services provided MHPSS to 21 individuals, 62 cases were referred to specialists, 31 individuals were provided with psychotherapy sessions, and social workers conducted on-the-phone rapid assessments for 200 families. PFA and PSS sessions were provided to 62 individuals and 59 individuals participated in 15 PFA and PSS group sessions. Mental health medicines were provided to 47 mental health patients. Since the start of the response 913 PSS and PFA sessions were implemented, 388 individuals received needed care, and 1,065 consultations were conducted; medications were distributed to 107 patients.

Donations and/or distribution of medical supplies

- MedGlobal supplied chronic medications and PPEs to hospitals and PHCs; stock is estimated to last three more months, until March 2021. By supporting these facilities, 4,037 beneficiaries were reached, and the donated 14,400 PPE items are estimated to provide care for 9,000 beneficiaries.
- URDA continued supporting the psychiatric department at Rafic Hariri University Hospital, covering for medications, staff training, and paying staff salaries.

Shelter

Needs:

- A rapid-needs assessment exercise was held with partners to both understand outstanding gaps under Level 1 (light damage), Level 2 (moderate damage) and Level 3 (heavy, structural, damage) and agree on the way forward.
- The exercise is informing the extent to which the needs were addressed, specifically when it comes to minor repair and rehabilitation (Levels 1 and 2) interventions.
- Significant needs persisted for both rent- and debt relief- assistance (incurred because of self-recovery), in addition to rehabilitation needs for common areas, area-based projects, and small businesses.

Response:

- As of 11 January, 8,000 shelter kits were distributed to 27,269 people.
- In terms of apartments, 12,855 benefitted from support with either minor repairs or rehabilitation work: 10,794 minor repairs and 2,061 rehabilitations were completed.
- A one-off \$600 cash-for-shelter support was provided to 9,977 households, while another 1,970 households received cash-for-rent support.
- In mid-December, in preparation of worsening weather conditions, and cognizant of outstanding needs and gaps, the Shelter Sector reinstated the emergency weatherproofing kits distribution by UNHCR and NRC.
- In the second half of December, the Shelter Sector refined its referral system intending to ensure partners with remaining capacity/resources cover the households, buildings and zones with remaining needs.

Gaps and constraints:

- Some partners reported difficulties in finding humanitarian shelter needs in the field because of a number of reasons, such as:
 - An imbalance as needs continued to persist in certain zones; this issue is being resolved through the Shelter Sector referral mechanism.
 - Some households remain unaddressed due to Housing, Land and Property (HLP) constraints and issues; the HLP working group is analyzing the cases.
 - Some households blocked interventions due to fear of becoming ineligible under the Government's cash assistance programme.
- COVID-19 hinders progress as the infection rate in Lebanon continues to increase. In January, this has led to a number of Government-imposed restrictions that, while exempting, for the most part, NGOs, are contributing to delays in implementation.

- Weather conditions in Beirut have deteriorated over the last week, with excessive rainfall resulting in water inundation in some areas/buildings, further delaying reconstruction efforts.
- Partners continue to face challenges in the identification of landlords and the signing of memoranda of understanding prior to the start of the actual implementation. This process, although necessary, has been time-consuming and led to implementation delays.

Water, Sanitation and Hygiene (WASH)

Response:

- As of mid-November, the WASH Sector closed the response with regards to WASH interventions for households directly affected by the explosions: 13,243 buildings were assessed for WASH interventions, and water supply connection was re-established for an estimated 23,780 people (4,743 households); also, 4394 tanks and 347 pumps were installed.
- Kits distribution however continued and, since the beginning of the response, a total of 16,603 hygiene kits and 790 baby kits were distributed.

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