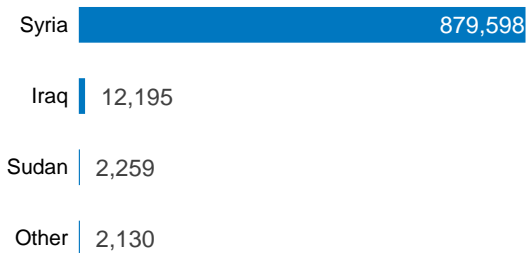


Lebanon

April - June 2020

POPULATION OF CONCERN

Country of origin

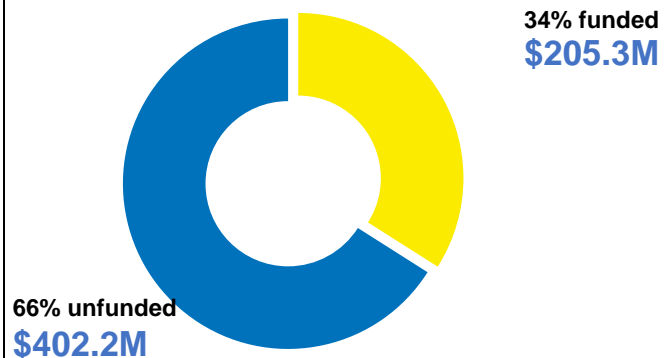


Registration figures as of 31 August 2020. UNHCR registration of Syrian refugees in Lebanon has been suspended since May 2015 through a decision by the Government of Lebanon. The Government estimates there are 1.5 million Syrians in Lebanon.

FUNDING (01 JULY 2020)

USD 607.5 million

requested for the Lebanon operation



OPERATIONAL CONTEXT

Lebanon continues to host the largest refugee population per capita in the world, with some 1.5 million Syrian refugees according to Government estimates and almost 18,000 refugees and asylum-seekers of other nationalities. The second quarter of 2020 was marked by the COVID-19 ‘general mobilization’, including a lockdown from March that started to ease in May. These measures, while acknowledged as necessary to prevent the spread of COVID-19, accelerated the deterioration of the socioeconomic situation of people in the country, Lebanese, refugees and migrants alike. Many more people have lost their incomes and many businesses did not reopen after the lockdown. In parallel, a large devaluation of the Lebanese Lira has significantly decreased the purchasing power of most households living in Lebanon, plunging many further into poverty.

It is estimated that close to 90 per cent of the refugee population in Lebanon now lives below the extreme poverty line. UNHCR’s quarterly monitoring of the effects of the economic deterioration on refugee households (MEED) shows that economic problems continue to be at the top of the list of concerns, with many refugee households unable to find an income and pay rent, food and other basic needs. The second wave of the MEED, finalized in May 2020, shows that more than 90 per cent of households have taken on new debt, increasing the average debt per household to over USD 1,300 at the official exchange rate. In addition, 70 per cent of households do not have a working member (up from 44 per cent in the first wave of MEED completed in March 2020). People are forced to seek any form of income to provide for their families, including resorting to low quality and sometimes exploitative jobs, child labour or selling assets. They are also reducing expenditures on the basics such as food, health or children’s education.

KEY ACHIEVEMENTS AND RESULTS

COVID-19 RESPONSE

The effect of the health crisis have compounded other crises and pre-existing vulnerabilities to bring a rapid deterioration of the situation of refugees. During the reporting period, 77% of consulted refugees reported that the COVID-19 pandemic made it more difficult to buy food, pay rent, move freely, generate income, get essential medicine and ensure the education of their children. This pushed refugees towards coping mechanisms such as contracting additional debt (71 per cent), reduce their food consumption (69 per cent) and spending on health care (25 per cent). Incidents of domestic violence, intimate-partner violence, violence against children and abuse or exploitation perpetrated by landlords have also been reported as a consequence of lockdown.



UNHCR is raising awareness about COVID-19 and supporting vulnerable families who have become more vulnerable because of the measures taken to limit the spread of the virus.

UNHCR provided support for the implementation of the Ministry of Public Health's (MOPH) PCR testing campaign, where it focused on refugees living in overcrowded settings; 3,599 PCR tests were conducted across 94 informal settlements and collective shelters countrywide with no positive cases detected. Every Syrian national that tested positive to COVID-19 during the reporting period did so in the context of an outbreak in their host communities. As a consequence, the risk of stigmatization related to an outbreak among the refugee community has not materialised but remains possible.

In the second quarter, UNHCR continued to work within the framework of the Government's response to the COVID-19 emergency to ensure that refugees' needs are addressed in a coordinated, equal and coherent manner. UNHCR's contribution to the refugee component of the response remained within three main areas:

- Prevention through community engagement and awareness-raising:
 - UNHCR widely communicated to refugees information on precautionary measures to prevent infection (hygiene, social distancing, movement restrictions and curfews), on identification of symptoms and screening via the MoPH COVID-19 hotline, and cost coverage by UNHCR.
 - In consultation and coordination with partners including WFP and UNICEF, UNHCR distributed food and hygiene parcels to thousands of families in need.

- Containing transmission by supporting refugees to adhere to mitigation measures and enabling quarantining/isolation of refugees living in overcrowded settings:
 - UNHCR mobilized more than 450 refugees with a medical background as community health volunteers to support the response.
 - UNHCR also mobilized 1,649 site community groups at informal settlements and collective shelters hosting more than 10 tents. These groups have 5,900 members whose roles are to promote safe practices such as social distancing, protect the most vulnerable, identify symptoms in a timely manner, and liaise with community health volunteers.
 - Two UNHCR-supported municipal-level isolation facilities were functional by the end of the reporting period, with the capacity to host 119 COVID-19 infected persons in need of isolation outside their home.
- Treatment and case management by supporting testing and hospitalization capacity:
 - UNHCR has been covering in full the cost of COVID-19 testing for refugees conducted according to MoPH guidelines, as well as treatment for COVID-19 positive cases.
 - A first phase of capacity expansion works was completed in Baalbek, Halba (Akkar), and Tripoli governmental hospitals was completed ahead of the delivery of necessary equipment. The rehabilitation of a 72-bed capacity ward in Rafik Hariri University Hospital was also completed and the ward operational.

UNHCR continued to push for one coordinated and coherent national response; the non-stigmatization of any individual or community based on real or perceived infection; the non-discriminatory application of movement restrictions and curfews; allowing refugees with medical background to support the national response to COVID-19; a moratorium on evictions initiated by landlords or municipalities; and scaled up support and access to basic assistance.

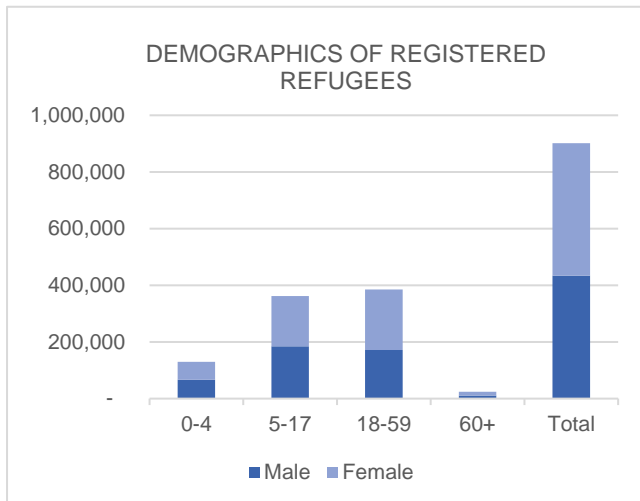
Finally, UNHCR started providing 11,000 Syrian families, thus far unassisted, with temporary cash assistance of LBP 320,000 per month between May and July to alleviate the economic impact of the combined crises they face.

In order to abide by the Government's guidelines and protect the health of UNHCR's people of concern, face-to-face activities have been maintained for the most urgent cases during periods of strict lockdown and to a lower capacity when restrictions were partially eased. Activities have been adapted to achieve the same goals through remote modalities, to the extent possible.

ACCESSING PROTECTION

Registration and data management

At the end of June 2020, 884,266 Syrian and 17,224 refugees and asylum-seekers of other nationalities were registered with UNHCR in Lebanon.



- Since the instruction by the Government to stop new registration of Syrians in early 2015, the number of Syrian refugees registered with UNHCR in Lebanon continues to gradually decrease, mainly due to departures (resettlement and repatriation) and deaths. UNHCR continued to update the data of Syrians registered prior to 2015 and register children born in Lebanon to registered Syrian refugees, jointly with the Ministry of Social Affairs (MOSA). Syrians approaching UNHCR for protection who cannot be registered are counselled on the Government's instruction to suspend registration, and assessed for vulnerabilities so that their critical needs can be addressed.

- Iraqi refugees and asylum-seekers continue to make up the majority (74%) of refugees and asylum-seekers from countries other than Syria, followed by Sudanese (13%) and Ethiopians (5%).

Civil documentation

- Documentation remains a cornerstone of protection and thus a constant priority for UNHCR, despite the pandemic. As many in-person activities at UNHCR Reception Centres had to be suspended from mid-March up to mid-June 2020 because of lockdown measures, the operation developed remote ways of reaching refugees whilst appointments were maintained for the most critical cases. UNHCR and partners provided individualized legal counselling to 3,150 families on how to register the birth of their children, and directly supported around 790 families to register their child's birth. 16 families whose children are considered at highest risk of statelessness (such as single female heads of households, separated families, and couples without proof of marriage) were assisted to obtain proof of kinship from the Sharia court to prove the child's lineage and age.
- Another 40 couples who had married unofficially were supported to obtain retroactive proof of their marriage and more than 2,200 families were counselled on marriage registration to facilitate the birth registration of their children and increase protection of women in case of separation, divorce or disappearance of their husband.
- Non-Syrian refugees continue to face greater challenges to obtain civil documentation in general. Notably, non-Syrians do not benefit from the waiver on the one-year deadline on birth registration.

Legal aid

Because of the pandemic, judicial and religious courts were closed during the reporting period and the personal status departments were operating with a limited capacity to respond to urgent cases. In May, a welcomed law suspending registration deadlines of civil events during the period from 18 October 2019 until 30 June 2020 was issued. UNHCR provided legal counselling by phone, awareness sessions remotely and legal representation in person when necessary.

- During the reporting period, some 11,200 refugees and asylum-seekers received legal aid from UNHCR and its partners. This included legal awareness and individual counselling, legal assistance and representation in front of a court or administrative body. Legal aid covered key areas such as obtaining residency, protection from refoulement and detention, addressing exploitation and abuse – including evictions, trafficking in human beings, human rights violations and harassment – and family and labour law.
- UNHCR suspended its activity related to accompanying refugees to the Directorate General of General Security (GSO) centres to submit their renewal residency applications since the GSO temporarily stopped receiving or processing requests in the regional departments and centres as part of COVID-19 measures. In June, the

GSO announced the resumption of receiving applications with an exemption from the overstay fees for all residencies that expired starting 17 October 2019 up to 30 July 2020.

Child protection, SGBV and targeted responses for groups with specific protection needs

- The economic crisis and the strong measures adopted to limit the spread of the COVID-19 pandemic have increased the protection concerns, emergency needs and mental distress faced by refugees, particularly persons with specific needs, women at risk, and children. UNHCR prioritized individualised support¹ for SGBV survivors and children at high risk, which continued without interruption through remote modalities as well as face-to-face for emergency cases.
- In the reporting period, UNHCR and partners provided case management to more than 550 **vulnerable children** and conducted over 670 Best Interests Assessments to protect vulnerable children. In addition, close to 15 Best Interests Determinations were ongoing to implement solutions in line with the children's best interests. The low number of children reached reflects the challenges of carrying out these assessments remotely. UNHCR nonetheless continued to support virtual activities with families to raise awareness about

COVID-19 and prevention of child abuse.

- UNHCR also worked to maintain access and quality of services to **SGBV** survivors despite the pandemic. Jointly with its partners, UNHCR provided case management services to more than 1,750 survivors and 75 survivors were provided with emergency accommodation in safe shelters. Since March, only high-risk SGBV cases were managed face-to-face, while other cases were supported through remote modalities. More than 1,250 survivors received individual psychosocial (PSS) remotely. During the lockdown, SGBV prevention activities included wide outreach through awareness-raising on domestic violence, intimate-partner violence, and stress/anger management.

- UNHCR and its partners also continued to provide individualised support and a comprehensive package of services for **persons with specific needs (PwSN)**. Specialized Outreach Volunteers (OV) supported PwSN by identifying vulnerable cases, referring them to UNHCR and partners, and providing awareness and information sessions related to their area of expertise (child protection, paralegal, health and education).

- More than: 2,800 vulnerable PwSN received non-cash support such as counselling and PSS; 2,000 received Emergency Cash Assistance (ECA); and 2,200 received Protection Cash Assistance Programme (PCAP)².



UNHCR's partners are key to its response and contact with refugees. As an example, IRC helps us provide ECAs to refugees so that they can prevent and mitigate protection risks.

¹ This support, commonly referred to as 'Case management' follows a holistic approach focusing on the individual, aiming to provide a tailored response to each situation. Such response combines legal aid, safe shelter, PSS, counselling cash support, seeking permanent solutions, etc. as relevant in each case, to address all causes of protection issues or risks each person faces, prevent negative coping mechanisms and support them out of such situations.

² ECA is a one-time payment provided to mitigate an immediate protection risk. PCAP is a regular payment provided to individuals and families experiencing or facing a risk of serious protection problems, such as child labor, SGBV, exploitation or harassment. PCAP directly contributed to both responding to the protection issue (e.g. paying transportation to go to court or relocating away from an exploitative landlord) and providing a safety net to help meet basic needs during that crisis period without having to resort to negative coping mechanisms.

Border monitoring

- Throughout the second quarter, official border crossing points were closed for refugees seeking to return to Syria. UNHCR nonetheless verified 2,232 individual returns that took place during previous periods. No GSO-facilitated or self-organized group movements took place between April and June.
- Deportations have practically halted since mid-March following border closures and efforts to reduce overcrowding in detention facilities.

Detention monitoring

- Due to COVID-19 prevention measures, regular monitoring was conducted by phone while partners continued in-person visits for urgent cases to provide food, core relief items (CRIs) and medical services. Legal services continued to be provided both remotely and at courthouses when required. Overall, UNHCR and partners conducted almost 1,200 monitoring visits and over 3,000 phone calls to detention facilities including prisons, police stations and justice palaces, but remained unable to access military detention facilities or refugees detained at the airport.
- In addition, UNHCR partners conducted 78 health awareness sessions on COVID-19 for detainees and Internal Security Forces (ISF) personnel, and provided 154 hygiene and sanitation kits to the ISF to contribute to hygiene measures taken by detention facilities.
- The average duration of detention at police stations significantly increased during Q2. In response, UNHCR conducted advocacy with the General Public Prosecutor for the release of detainees known to UNHCR and detained solely on immigration-related charges. Following legal counselling, legal assistance and representation, support for bail payments and administrative follow-up at courthouses to expedite release requests, 64 Syrians and 21 asylum-seekers and refugees of other nationalities were released across the country. UNHCR partners also responded to the needs of the most vulnerable with 161 food kits, especially as families that would normally bring food are not permitted to visit anymore.
- Finally, through its regular activities, which continued either remotely or in person for the most urgent or critical cases, UNHCR assisted over 1,200 refugees in detention, prioritized based on specific risks and vulnerabilities, with PSS, legal support, medical attention and CRIs, including blankets, mattresses and hygiene kits. Among these, 44 children were provided with case management, legal aid, medical services and CRIs.

Community mobilization and outreach

UNHCR continued efforts to build on the capacity of community members to engage in their own protection. This included supporting refugees to engage in two-way communication with UNHCR, safely identify and refer persons at heightened risk in need of protection and assistance, as well as implement solutions for themselves.

- **Community engagement** includes a network of 666 OVs, 24 Community Development Centres (CDC) and 174 community groups, as well as OV-led Facebook pages. OVs reached more than 78,000 persons through over 5,000 awareness and information sessions and 2,900 follow-up calls with PwSN via social media and WhatsApp. The number of persons reached by OVs greatly increased in the second quarter, particularly through the increased use of online outreach methods because of COVID-19 restrictions and precautions. Awareness sessions focused on COVID-19 messages as well as legal residency, birth registration, and available healthcare services, among others. More than 3,300 refugees at heightened risk were referred by OVs to the relevant specialized services.
- Group activities at CDCs were suspended in March, with face-to-face contact limited to cases needing urgent support. As a response, UNHCR supported CDCs to increase online awareness and skills training sessions. As an example, through the centres, skilled refugees and Lebanese produced 5,000 masks and 6,000 pieces of soaps for distribution through municipalities and at informal settlements.



UNHCR and Partner's teams are near ATMs in areas with large refugee presence, to support with physical distancing and distribute mask, gloves and hand sanitizer to all -refugees and Lebanese alike.

DIGNITY AND RESILIENCE IN EXILE

UNHCR aims to help refugees meet their daily basic needs and maintain access to health care, education, shelter, and water, sanitation and hygiene (WASH) to reduce their vulnerability to exploitation, harmful coping strategies, and other protection risks.

Basic needs

- Between April and June, UNHCR assisted on average 38,000 refugee families (260,000 individuals) per month with **multi-purpose cash assistance** (MPCA). May and June have seen a combined increase in the number of families supported of 16,800. The transfer value also increased to reach LBP 320,000. This increase enables families to mitigate the effects of inflation and devaluation.
- Responding to the rapid rise in extreme poverty accelerated by the loss of incomes and inflation, in May UNHCR started assisting 11,500 severely vulnerable refugee families who do not receive any regular monthly form of cash or food assistance with temporary unrestricted cash assistance for three months. Affected families received a monthly transfer of 320,000 LBP until July. Findings from monitoring show that 91% of families spent the assistance to buy food, 29% spent it on rent, while 18% used it to buy hygiene items. Despite the assistance, families were still resorting to negative coping strategies, namely incurring debt (92%), skipping rent payments (86%), and reducing non-food expenditures (82%). Nevertheless, most families reported that the assistance reduced the household's level of financial stress.
- UNHCR also distributed over 6,000 food parcels to unassisted refugees and vulnerable Lebanese families in coordination with WFP.

Health care

UNHCR continues to support refugees' access to comprehensive primary, secondary and tertiary health care by subsidizing services through a hospital network and implementing partners.

- During the reporting period, UNHCR supported close to 10,000 **primary health care** consultations, including for antenatal care, non-communicable diseases, and mental health.
- UNHCR's **secondary health care** programme facilitated refugees' access to life-saving care and supported more than 12,750 referrals, of which 60% were for deliveries.

A diminution in access to healthcare was observed, linked to the movement restrictions put in place by the Government as part of lockdown measures and fears of contracting the COVID-19 virus.

Education

- In the second quarter, 109 Education OVs disseminated education-related information to the refugee community and supported children and parents with distance learning. Given the closure of schools, UNHCR's 370 Education Community Liaisons were re-assigned to ensure continuous communication between schools and parents and reinforce the refugee community's commitment to education, even during lockdown. 188

homework support facilitators shared learning materials in line with the official curriculum, giving special attention to children who were enrolled in second-shift schools that did not implement distance learning. Additionally, remote communication networks were established for 198 parents in Parent Community Groups to discuss education-related matters such as the importance and benefits of education, available education pathways (formal and non-formal), how to address barriers to education, etc.

- In line with the guidelines from the Ministry of Education and Higher Education, in-person non-formal education was suspended in the second quarter. Nevertheless, 143 children (aged 10-14) and 42 youths (aged 15-24) benefitted from remote Basic Literacy and Numeracy (BLN) classes (2020 totals: 325 in BLN and 51 in Youth BLN). Similarly, in-person activities to support children with disabilities have been largely suspended, but partners remained in close contact with 72 children and their parents to assess their situation and support them remotely.

Shelter and WASH

- Regular shelter and WASH activities were largely suspended due to the imposed lockdown measures. Nonetheless, UNHCR was able to assist 401 households (2,425 individuals) in the second quarter with shelter kits to reinforce or rebuild their shelters.
- Towards the end of the quarter, a progressive resumption of regular shelter activities, notably shelter rehabilitation and collective site improvements, allowed 26 households (77 individuals) to move into upgraded shelters and benefit from secure tenure with free occupancy for one year.

SUPPORTING HOST COMMUNITIES TO PRESERVE SOCIAL STABILITY

- In the second quarter, both inter-communal and intra-Lebanese tensions were on the rise. Most of the reported incidents in May and June were related to competition over scarce resources and aid-bias perceptions, in contrast to April when reported incidents were mainly related to COVID-19 related matters, including stigmatization of the refugees due to the pandemic.

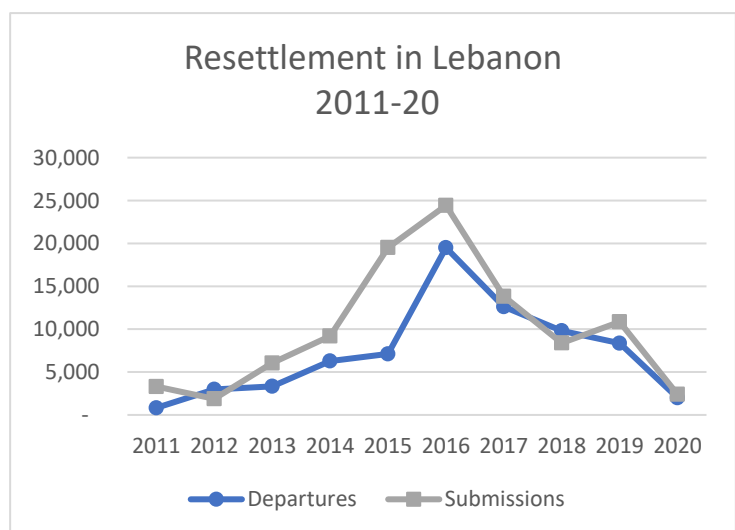
REALISING SOLUTIONS TO DISPLACEMENT

Resettlement

UNHCR continued to prioritize refugees for resettlement based on their protection vulnerabilities despite the suspension of in-person interviews.

- In the second quarter, 945 Syrian refugees and 184 refugees of other nationalities were submitted for resettlement from Lebanon.
- Unfortunately, no refugee departed on resettlement from Lebanon due to the suspension of international flights. In the first half of 2020, the resettlement departures of 1,241 Syrian refugees and 183 refugees of other nationalities were cancelled as a result of government restrictions and airport closures.

Affected refugees who reported specific protection problems were referred for assistance, such as cash assistance, medical support, shelter/housing, and psychosocial support, as relevant.



Repatriation

- Throughout the second quarter, official border crossing points were closed for refugees seeking to return to the Syrian Arab Republic (Syria). Similarly, no GSO-facilitated or self-organized group movements took place between April and June.
- UNHCR is, however, aware that significant numbers of individuals attempted to leave Lebanon through unofficial border crossings during the reporting period. Many of these individuals found themselves 'stranded' for several days in the no man's land between Lebanon and Syria (near Masnaa), reportedly awaiting confirmation of space in quarantine facilities in Syria. Individuals UNHCR was able to meet during a visit in the area cited their inability to sustain themselves and their families in Lebanon as an important factor impacting their decision to attempt to leave Lebanon at this point in time. Their primary request expressed was to be admitted into Syria.

STATELESSNESS

During the reporting period, 117 individuals received legal assistance. Out of this total: 105 received legal counselling, which was conducted over the phone due to the COVID-19 measures; and 12 individuals received legal representation on confirming the nationality or late birth registration, which also includes provision of DNA assistance, documentation assistance and full counselling. In addition to this, 49 individuals continue to benefit from strategic litigation cases that started in previous years.

PROGRESS AGAINST TARGETS

January – June 2020

Syrian refugees and asylum-seekers

	Reached Jan-June	2020 Target (prioritized)	2020 Target (if fully funded)
Protection			
Persons receiving legal assistance	20,266	33,000	44,000
Persons assisted with civil status registration or documentation	17,479	40,000	62,500
Persons submitted for resettlement and humanitarian admission	3,140	7,900	7,900
Persons assisted through SGBV psychosocial support	2,533	6,768	8,768
Individuals/cases receiving protection or emergency cash assistance	6,439	11,247	11,247
Basic Assistance			
Average number of households assisted with monthly multi-purpose cash grants	34,643	55,563	100,800
Health			
Individuals benefitting from life-saving emergency and obstetric referral health care	28,329	66,516	66,516
Education			
Students enrolled in secondary education	1,126	1,555	3,200
Shelter and WASH			
Shelter maintenance tool kits and materials provided	1,478	33,656	45,000
Individuals sensitized to hygiene and health practices	301,174	46,100	188,038
Host Communities			
Number of projects implemented to the benefit of host and displaced communities	0	36	137
			2020 Planned Budget (USD)
Institutional and community support			
Institutional support (rehabilitation of infrastructure, staffing and training, equipment, supplies, medications and vaccines)			8.7 million
Community-based projects (health, education, livelihoods, WASH, roads and community facilities)			2.5 million
Total invested			11.2 million

Refugees and asylum-seekers (other nationalities)

Protection	Reached Jan-Jun	2020 Target (prioritized)	2020 Target (if fully funded)
Persons receiving legal assistance	4,109	6,000	8,000
Persons assisted with civil status registration or documentation	80	490	900
Persons submitted for resettlement and humanitarian admission	385	900	900
Individuals/cases receiving protection or emergency cash assistance	371	368	600
Individuals with specific needs receiving non-cash support	990	1500	2,000
Persons assisted through SGBV psychosocial support	125	170	250

Basic Assistance

Average number of households assisted with monthly multi-purpose cash grants	1,385	1,500	2,939
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Health

Individuals benefitting from life-saving emergency and obstetric referral health care	151	520	1,000
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Education

Sensitization and community mobilization campaigns conducted to promote school enrolment	26	91	100
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Stateless

Protection	Reached Jan-Jun	2020 Target (prioritized)	2020 Target (if fully funded)
Persons receiving legal assistance	117	300	500

UNHCR Lebanon is grateful for the support of its donors, including major donors of unearmarked and regional funds, as well as private donors.

