



Comorbidity of Crises in Lebanon

November 2020



For over one year, Lebanon has been faced with multiple compounded crises that have resulted in increased vulnerability of residents of the country across the board.

The economic and financial crisis unraveled with a pivoting point in October 2019. In addition to the economic repercussions of this crisis on the country, it also triggered civil unrest, mass protests, and political instability and vacuum. Following the protests of October 2019, then Prime Minister and cabinet resigned. Since then, there have been 3 selected prime ministers, only the first has been able to form a cabinet, while the last is still in this process.

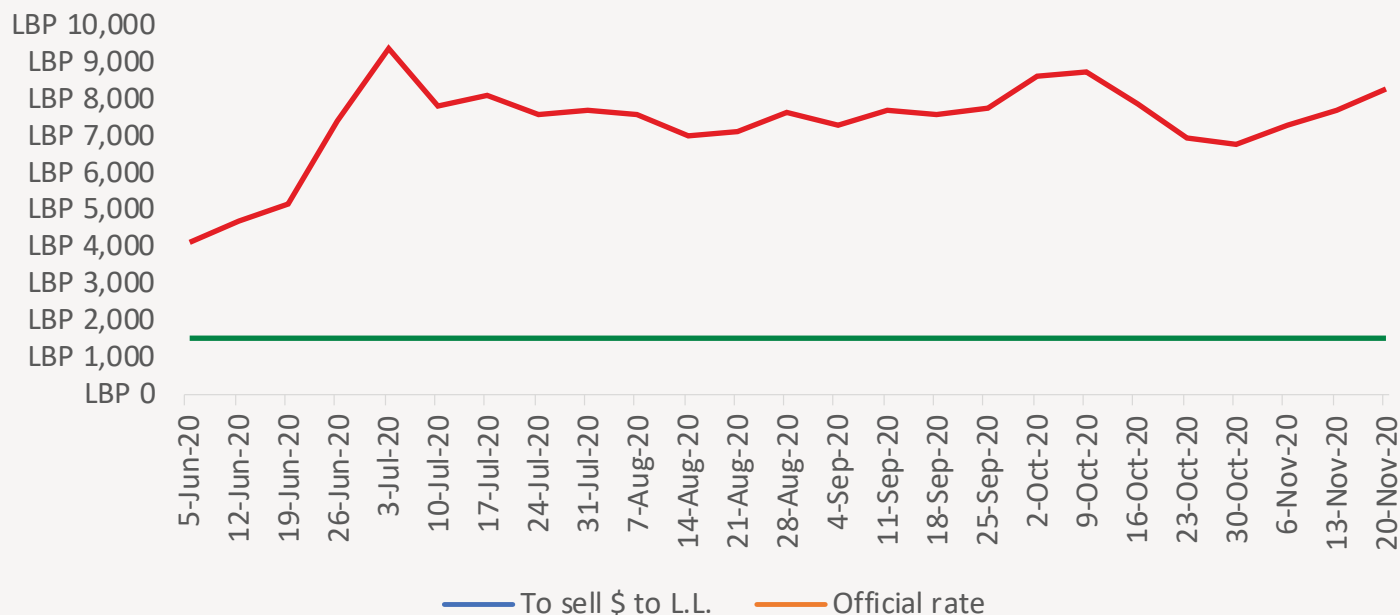
The onset of the global health pandemic due to COVID-19 reached Lebanon in February 2020. It placed a further burden on the health infrastructure and system in Lebanon which was already facing challenges. The lockdown and prevention measures taken by the government since the start of the pandemic have also resulted in additional economic burden to the population, as well as challenges to service provision in other sectors, such as education, humanitarian, etc.

On top of the two crises, a devastating blow was dealt to Lebanon, and to Beirut specifically on August 4th with the massive explosion at the port. The Beirut explosions, resulted in mass destruction of large parts of Beirut including the port, and an estimated 9,700 buildings within a 3km radius. It also resulted in almost 200 casualties, and around 6,500 injured people, many of which were children and youth.

The combined crises have magnified the impact of each. This document presents key information that provide an overview of the worsening situation in Lebanon, with a focus on women and children.

ECONOMIC SITUATION

USD to LBP Buy Exchange Rate



Official rate (1 USD)
pegged at

1,507L.L.

Parallel market price (1USD)
endorsed by the Central Bank

3,900L.L.

Black-market rate (1USD)
increasing daily and has now
reached

8,200L.L.

Despite some fluctuations in the currency, inflation continues to rise and additional banking restrictions have placed even higher restrictions for people and businesses alike, resulting in a decrease in imports, consumption, rising unemployment, and a devalued currency.

Inflation and purchasing power

According to the Central Administration of Statistics, the consumer price index shows an inflation of 131% from September 2019 to September 2020¹. Similarly, the WFP have reported a 423% inflation in prices of food within the same time frame². Moreover, in August 2020 the Head of the Central Bank announced that the Central bank would not be able to subsidize fuel oil, wheat, and pharmaceutical products for much longer, though he did not specify a specific timeframe³. Whilst it is unclear when this may stop, this will have a critical impact on the purchasing power and inflation



131%

inflation from September 2019 to September 2020



423%

inflation in prices of food from September 2019
to September 2020

Currency devaluation

Since July 2020, the rate of the Lebanese Lira (L.L.) remains highly unstable with a general upwards trajectory. This has impacted, along with the overall economic crash, the purchasing power of the consumer, driving up prices of goods and services significantly. Considering the black market rate, the L.L. has faced an over 450% devaluation to date⁴.



Unemployment

Since the last update in July, there are still no clear projections or updated numbers on unemployment, though there are anecdotal reports of increases in unemployment. This is both due to economic crisis as well as restrictions due to COVID-19 pandemic. The unemployment rates reported by the Central Administration of Statistics using figures available before October 2019 indicated an overall unemployment of 11% among the working age population (15-64).

HEALTH

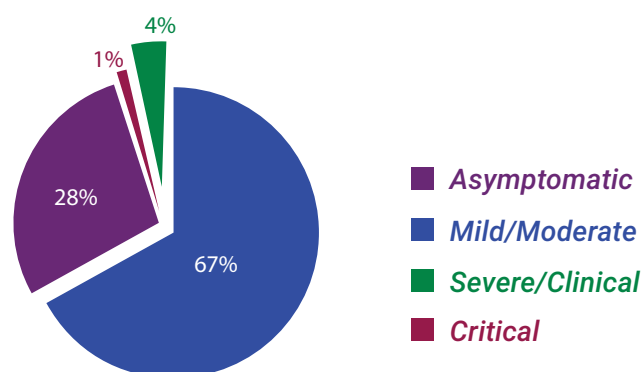
COVID-19 at a glance:

as of 26th November 2020.

120,300 Total cases



✓
950 deaths



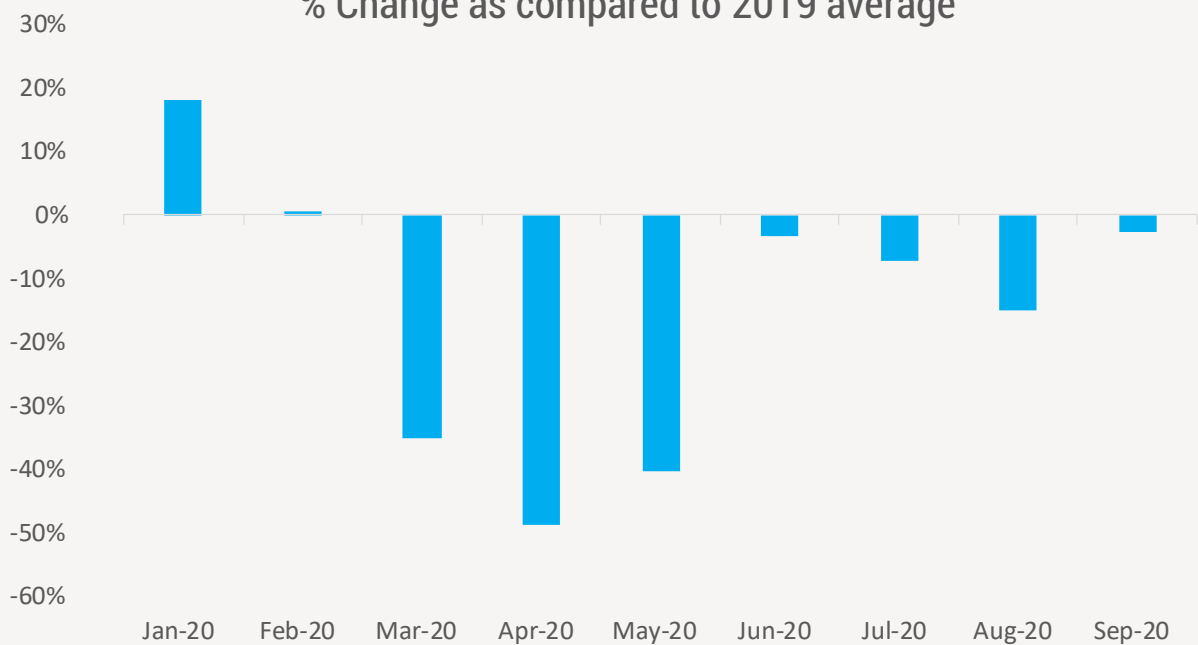
Clinical presentation⁵

The Beirut Explosions further compounded the burden of the economic crisis and health pandemic on the health sector. Six major hospitals, a new-born and pediatric unit supported by UNICEF, 20 clinics, 23 Primary Health Care Centers (PHCCs), dispensaries and the Central Drug Warehouse – including its cold chain and dry room – require rehabilitation. The 23 PHCCs alone were providing on average 33,000 consultations a month.

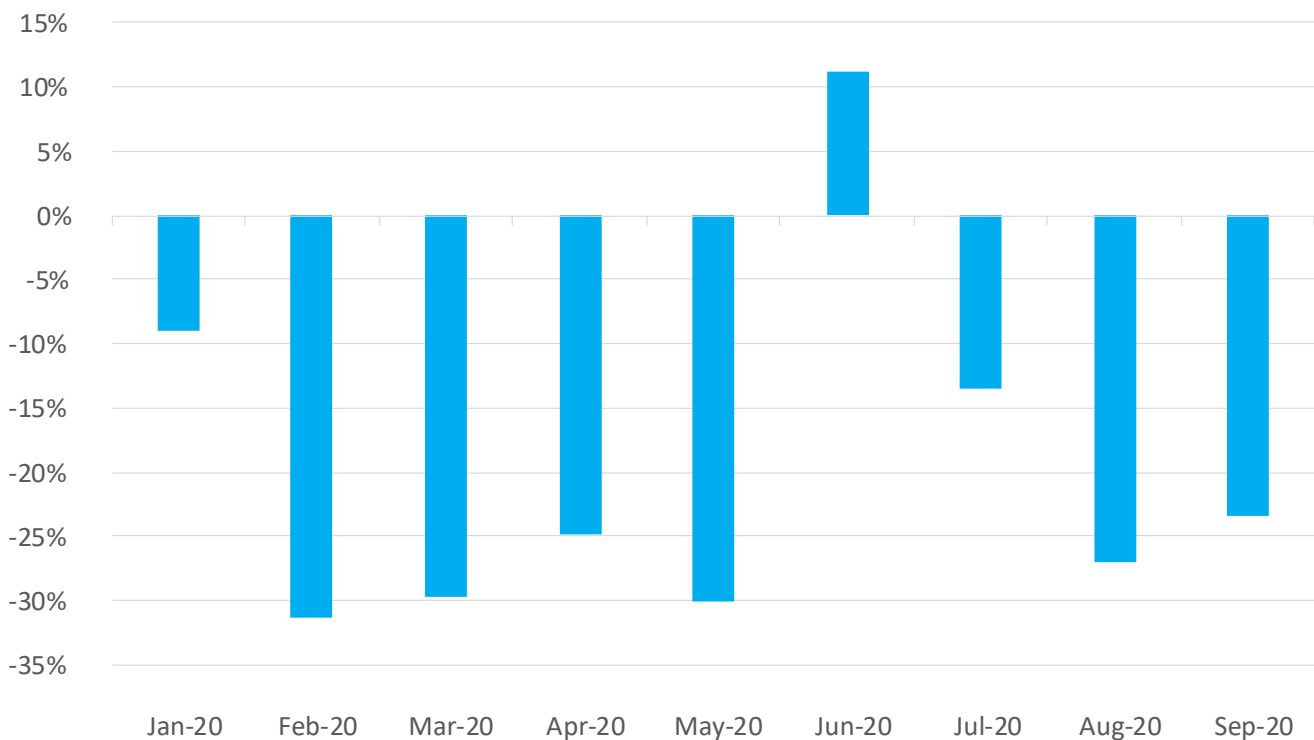
Access to Health care services

Access to health care services has been greatly affected by the ongoing economic crisis in Lebanon following COVID-19 and Beirut blast. The Ministry of Public Health's (MoPH) Primary Health Care Network data shows that there was a major dip during confinement months (up to a decrease of 49% in April), then consultations increased, with a slight drop as a consequence to the Beirut Blast. Similarly there was a drop in the number of consultations for pregnant women due to the pandemic, continuing up until September, with some release in June, followed by a major drop of between 11% and 31% from 2019 to 2020.

Children under 5 - Beneficiaries in PHC networks,
% Change as compared to 2019 average



Pregnant women beneficiaries



UNICEF in coordination with MoPH and a network of NGOs, and UN agencies are working on development of Long-term package of services to target the most vulnerable and encourage their access to PHCs through provision of quality affordable services, reproductive health services, immunization, mental health, and nutrition services.

Immunization

Based on MoPH data shared by the end of September, routine vaccination showed a sharp decline during the first confinement months due to COVID (March to May) and the economic crisis, aggravating the affordability of health services. UNICEF contribution in procuring PPE and IPC materials to Primary health care centers, enabled PHC to continue providing in a safe environment the essential services like immunization, which, even despite low demand, remained continuously available in public centers. Attendance to the Expanded Programme on Immunization raised again by June, with a slight decrease following Beirut Blast, to kick off again by September reaching almost pre crisis levels for most of the antigens. This recent increase in PHC vaccination attendance may also be because caregivers are no longer able to afford private services. On another hand, Private pediatricians report dramatic decrease in child immunization in private clinic to less than 43%⁶.

The second phase of the measles campaign was launched in October 2020, to reach out to all children at high risk of vaccine preventable disease. The pilot phase targeted in two districts: Keserwane and Hasbaya, and in November 2020, the campaign was scaled up to the remaining five governorates, Beirut, Bekaa, Mount Lebanon, South and Nabatieh. Overall until November 25th, 110,483 children have been reached, 103,051 have been vaccinated with OPV, 92,913 with MMR and 4,112 with measles. The campaign will continue taking place until the end of December 2020.



Vulnerable pregnant and lactating women

The most vulnerable pregnant and lactating women (PLW) remain at risk of not accessing quality reproductive health services (antenatal and post-natal care) with subsequent major morbidity (health and nutrition) and mortality risk for women, newborns and children. In addition, the PLW are at risk of the ad-hoc and unsolicited donation of Breastmilk substitute (BMS). As such, a BMS violation template was developed and is utilized by the Nutrition task force to report on the violation of the breastmilk substitute code to protect infant's health and protect and promote breastfeeding.



As a response to the Covid-19 pandemic⁷

Under the provision of critical medical and water, sanitation and hygiene (WASH) supplies and improving Infection Prevention and Control (IPC) Pillar, UNICEF Lebanon has:

- Provided 184,690 people with critical wash supplies (including hygiene items) and services.
- Provided 2,400 healthcare workers within health facilities and communities with personal protective equipment
- Provided essential healthcare, including prenatal, delivery and postnatal care, essential newborn care, immunization, treatment of childhood illnesses and HIV care to 138,856 children and women through UNICEF supported community health workers and health facilities.
- Reached 21,865 caregivers of children less than 2 years old on breastfeeding, young child feeding or healthy diets in the context of COVID through national communication campaigns
- At the land border crossing points, 54,013 individuals including 6,984 children were screened for COVID-19 and provided with guidance on prevention and home isolation messages. The children vaccination status was also checked, and 3,789 children were provided with Measles and Polio vaccines.
- Reached vulnerable groups, including but not limited to girls and boys at risk of abuse, exploitation or gender-based violence, children working on the street, pregnant and lactating adolescents and women in distributing 427,890 fabric masks. All received information on safe usage.
- Provided technical guidance in developing infant and young child feeding in Emergencies (IYCF-E) practices standard of operating procedures targeting key stakeholders in protection and promotion of optimal IYCF-E practices during COVID-19 as a priority for lifesaving interventions to avoid any future increase in malnutrition.

Under the risk communication and community engagement, UNICEF LCO has:

- Reached 3,400,964 people on COVID-19 messaging on prevention and access to services
- 485,891 people participated in COVID-19 engagement actions

As a response to the Beirut Explosions UNICEF has:

- Saved 1,748,660 doses of vaccines by rapidly relocating them within the immediate aftermath of the Explosions. Including, along with MoPH, dismantling the cold room in Hamana and reassembled it next to the Karantina warehouse, and supported Rafik Hariri Hospital (RHUH) with two new solar fridges and maintenance of two cold rooms for vaccine storage.
- Assessed and initiated rehabilitation of 3 Primary Health Care Centers (PHCCs), as well as recruited medical advisors and health staff for them, and deployed 12 staff to strengthen the PHC network at central level to provide primary health care services to people affected by the Blast.
- Trained 65 frontline workers who reached 40,000 caregivers through direct community engagement by providing referrals to quality Maternal Newborn Child Adolescent Health (MNCAH) services.
- Conducted awareness sessions through health educators and lactation specialists on infant and young child feeding (IYCF) in emergencies for affected mothers in the field. 14,568 received counselling on prenatal, breastfeeding and infant and young child feeding (IYCF) practices through lactation specialists, phone calls and at the UNICEF tents, while distributing fabric masks during face-to-face counseling.
- With partners set up an IYCF Hotline, the first under the national IYCF committee, to respond to beneficiaries' reservations and inquiries regarding IYCF practices, and to follow up with pregnant and nursing women in case of problems with breastfeeding or other challenges.
- Trained 70 participants from organizations and individuals distributing breastmilk on the Code of Breastmilk Substitutes and the above-mentioned SOP on IYCF, promoting breastfeeding whenever possible.
- Conducted workshops and trained 51 individuals, from local NGOs, organizations and private groups to limit the random distribution of formula milk that are not in line with international and local guidelines.
- Distributed critical nutrition supplies to partners and PHCCs, including 27,000 multiple micronutrient sachet, 2,500 vitamin A packs, 8,370 therapeutic milk, 5,600 ReSoMal sachet for treating rehydration, 10,650 supplementary spread sachet, 6,500 high energy biscuit sachet, and 1,080 emergency food rations.
- Purchased and distributed PPE and infection prevention and control (IPC) items worth over US\$3.5 million to cover additional needs due to the Beirut Blast. Most items were distributed to 17 most affected primary health care centers. In addition, MOPH and UNICEF replenished the stock of the public hospital in Bouar with 4,430 medical masks, as the hospital depleted its stock while treating injured from the Blast. UNICEF also distributed more than 20,000 fabric masks to vulnerable population affected by the Blast. UNICEF procured 60 PAC of 25 tablets of Aciclovir 200mg, 42,000 vials of Dexamethasone 4mg/mL, 280 PAC of 50 tablets of Dexamethasone 4mg, 500 PAC of 100 tablets of Sulfamethoxazole 800mg and Trimethoprim 160mg, and 2,600 bottles of 100mL Sulfamethoxazole 200mg and Trimethoprim 40mg/5mL as supportive medicines to children with cancer.
- The rehabilitation in Karantina primary health care center temporary service site, entitling electrical and interior works are completed. A mental health officer, a psychologist and a psychiatrist are recruited in the Karantina, Dar Hawraa and Lebanese Red Cross primary health care centers on the Immediate Response Package and the long-term primary health care subsidization protocol.

WATER SANITATION AND HYGIENE (WASH)

The Beirut Explosions caused damages to the connections between water sources and buildings, as well as within buildings. This resulted in the need of varying types of rehabilitation of 1,900 buildings to ensure safe access to water and waste water services. Of the 13,000 buildings assessed by UNICEF and partners, over 1800 need at least one type of WASH intervention and/or support, and 399 have connection issues to the main urban network. In addition, 6,081 water tanks and 544 pumps were found to be damaged.



As a response to the Beirut blast UNICEF with partners have:

- Re-established the water supply connection in 1,060 buildings, reaching, 20,765 people in 4,080 households, and
- Installed 4,882 tanks and 250 pumps. Out of these, 111 water tanks were installed in the three heavily affected hospitals Karantina, Wardiya, and Geitaoui.
- UNICEF in partnership with Veolia Foundation has detected and fixed 102 leakages in the water pipeline.
- Over 3,200 posters were posted across the worst affected areas and 25,000 SMS were sent, referring people to the WASH hotline that supports requests for water trucking, minor plumbing repairs and/or other WASH hardware support.
- Out of the 663 requests, a total of 468 requests could be addressed or referred through the hotline, which was closed on 1 November.

EDUCATION

The COVID-19 pandemic had direct and critical effects on the education sector in Lebanon. The decision of the GoL to close schools in March 2020 affected over 1.2 million school aged children. As such, the Ministry of Education and Higher Education (MEHE) launched a distant learning plan for all public and private schools on March 25th. Despite these efforts, participation rates were uneven across governorates, grade levels and student populations (first/second shift). The MEHE Distance Learning Initiative interim data indicates that overall 51% of second shift schools implemented distance learning.

MEHE's response plan for distance learning is still evolving along with the development of the COVID-19 situation in the country. The plan needs to address the many challenges posed by distance learning modalities, including electricity cuts in many areas across Lebanon, and the lack of a reliable internet network or access to technology to facilitate e-learning. In addition, parents/caregivers are now playing the role of teacher, often with more than one child to support during the concurrent economic crisis, which adds pressures to households.

The scholastic year 2020/2021 started by the gradual opening of schools, as of mid-October. There are however some delays across selected areas due to regional lockdown measures. Schools will follow this hybrid attendance modality for the year (in-person and remote learning) targeting children on weekly rotational basis.

Schools have closed again as early November following an announcement by the MEHE in anticipation of the full lockdown due to a rise in COVID-19 cases across Lebanon. During this period, learning was provided remotely for all grades of formal education.



The explosion in the Beirut Port area and its adjacent neighbourhoods, will obstruct the access to learning and education support, for more than 85,000 children and youth, enrolled in schools – both in public and private institutions, and preventing access to learning and education support to around 50,000 children and youth. The rapid needs assessment recently conducted with the technical support of UNICEF and released by the Ministry of Education and Higher Education (MEHE) indicates that at least 159 schools were damaged with 92 identified as public education institutions at this point. This has created multi-level challenges for children and their families, which will have medium to long term influence, on the enrolment and the continuation of the learning paths for thousands of children and youth in the centre of Beirut.

As a response to the COVID-19 pandemic⁸

Under the access to continuous education, child protection and GBV services Pillar, UNICEF LCO has supported 17,694 children with distance/home-based learning.

As a response to the Beirut Explosions:

- UNICEF will support the rehabilitation of four public primary schools in addition to the refurbishment and replacement of damaged furniture and laboratory equipment for all 90 public schools affected by the blast.
- UNICEF will procure the Microsoft License and support the national teaching platform for the Ministry to initiate online learning.



ADOLESCENTS AND YOUTH



The Beirut Explosions has put additional strain on adolescents and youth already impacted by the compounded economic crisis and COVID-19 pandemic. The socioeconomic conditions of adolescents, youth, and their families have been rapidly deteriorating coupled with increasing unemployment, access to services, notably education and skills building have been impacted. For example, the Youth's KAP COVID-19 2020 research findings show the gender digital divide where females reported twice as much difficulty in online learning modality compared to males as well as significantly less access to devices that enable their connectivity. Furthermore, the majority of male and female youth were struggling with remote learning modalities⁹. Only 10% of male respondents and 25% of female respondents faced little or no difficulties. Moreover, the personal development of youth has also been affected, with impacts on their mental health.

Indeed, the second round of the Youth Poll, conducted after the explosions in September 2020, showed important results that reflected on the situation of youth in Lebanon. Notably both rounds of the Youth Poll showed that the most pressing priority facing youth is regarding employment and generally the economic situation. Of those who had worked in the previous 90 days, a large portion faced work difficulties, including reduction in salary, or cut in number of hours, and loss of employment.

Notably, sense of belonging among youth has become less strong and anchored. The majority of youth did not feel any belonging to a political party in March, and this decreased further in July. This is in line with general discontent towards political parties considered in the ruling class in Lebanon in the current context. Belonging to a religious sect dropped by 50% between March and July. Most remarkably, while belonging to Lebanon is still the dominant identity expressed of the three, there was a major change in youth perceptions of belonging to Lebanon (a 36.4% decrease) between March and September.

In terms of civic actions, community volunteering still remains the form of civic action that the majority perceive as effective in achieving change, and this has been on the increase. Non-party protests are still seen as significantly more effective than party protests in achieving change. Looking closer, these differences have been growing larger over time. This is in line with observations on the ground, especially following the Beirut Explosions, where large numbers of youth were volunteering spontaneously to support in the response.

As a response to the Beirut Blast, UNICEF and partners have:

- Engaged almost 1,800 youth in a community-based response focusing on cleaning, minor rehabilitation of households, and preparation and distribution of meals for vulnerable families.
- Mobilized 1,026 youth volunteers for cleaning 583 streets, houses and sites.
- Equipped 182 youths, previously trained in rehabilitation and construction as part of UNICEF's TVET courses, with material and equipment to support minor rehabilitation for 557 damaged households.
- A total of 18,692 families affected by the blast received hot meals prepared and distributed by 398 youth as part of the UNICEF cash for work programme, with 3,172 families reached during the reporting period. All involved youth previously graduated from UNICEF's vocational course on cooking.
- In collaboration with HOOPS sports club, developed life skills materials and tools for a sport for development programme, aiming at improving mental and physical wellbeing of adolescents and youth.
- Trained 51 coaches, who conducted sports for development sessions for 342 youth and adolescents at the three child friendly spaces set up in the most affected area, and trained coaches and all youth frontliners on identification of child protection cases and referral to case management services.
- As part of UNICEF TVET programme, UNICEF trained 82 youth and adolescents in sewing and provided material for production and distribution of 23,154 masks to affected families and frontline workers.

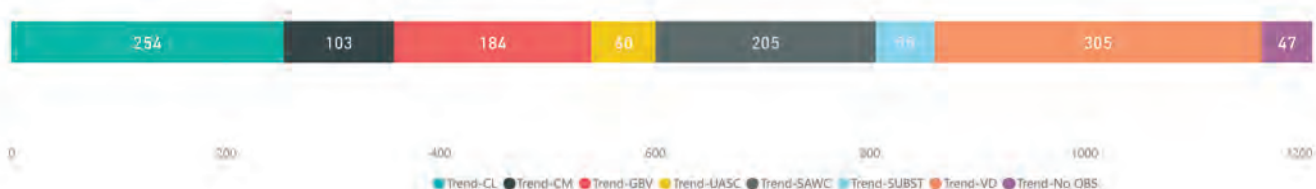
CHILD PROTECTION AND GENDER BASED VIOLENCE

The Beirut Explosions has had a direct impact on the psychological well-being of children and families, in addition to protection concerns related to loss of shelter, and access to services. This only exacerbated the problems already faced due to the health pandemic and economic crisis, which had seen a rise in requests for services and basic assistance, access problems, and increase an increase in child protection concerns such as gender-based violence, violence against children, and child labour¹⁰. In the aftermath of the explosions, households with at least one child consistently prioritized shelter, food, and cash as the priority needs to face difficulties within the coming 7 days¹¹.

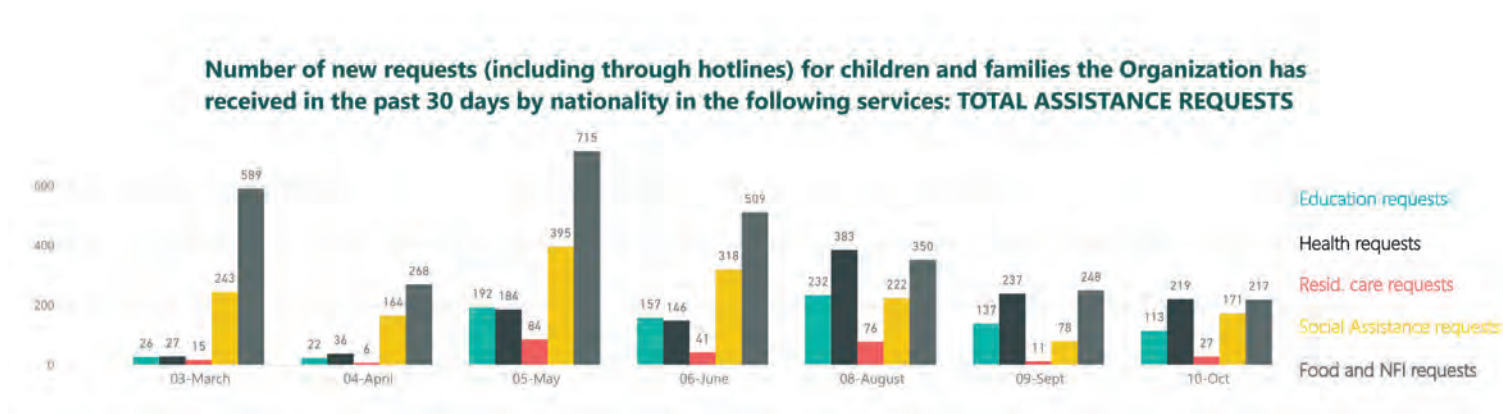
In the monthly survey sent to Child Protection (CP) focal points across the country, the majority continued to report an observed increase in violence against children, child labour, and GBV, (figure added below).

Increase in behaviours/cases based on respondents' outreach and observations in the last 30 days:

(in number of respondents per survey round)



Moreover, since August, the most requested services have been health requests followed by food/non-food items (figure added below).



As a response to the Covid-19 pandemic¹²

Under the access to continuous education, child protection and GBV services Pillar, UNICEF LCO has:

- Provided 5 children without parental or family care appropriate alternative care arrangements
- Provided 16,586 children, parents, and primary caregivers with community based mental health and psychosocial support and messaging
- Trained 607 UNICEF and partner personnel on GBV risk mitigation and referrals for survivors
- Provided 31,402 children and adults with access to a safe and accessible channel to report sexual exploitation and abuse

In addition, under the HAC Social Protection Pillar, UNICEF LCO has:

- Benefitted 170,918 households from new or additional social assistance measures provided by governments to respond to COVID-19 with UNICEF support

As a response to the Beirut Explosions, UNICEF and partners have:

- Supported over 33,000 people coping with the psychological impact of the blast through a range of interventions. These include provision of psychological first aid (PFA), psychosocial support (PSS) activities to children and caregivers, support to those at risk of sexual and gender-based violence (SGBV) and other protection risks following the Blast.
- Supported the creation of field/neighbourhood level coordination subgroups led by one sector NGO in each area. This approach was key in improving collaboration and field level coordination among NGOs, increasing referrals and exchange of experiences, and helped to standardize approaches and harmonize interventions among partners.
- Reached more than 7,200 children, parents and primary caregivers with community-based MHPSS.
- 479 girls and boys have received specialized mental health psychosocial support and focused non-specialized psychosocial support.

- Set up tents for the provision of PFA, basic PSS and dissemination of safety messages for women and girls in the affected areas to ensure provision of GBV related services. In total, 1,571 girls and women were reached with these services.
- Distributed 5,000 packs of sanitary pads and 2,500 mini hygiene kits, which also include COVID19- prevention items and the updated information on SGBV referral pathway.
- A series of posts were shared on social media to raise awareness and disseminate information related to coping mechanisms in the aftermath of the Beirut Blast. Over 24,000 individuals were reached with “How to Help Children Cope with the Current Situation” messages.

SOCIAL POLICY

The economic crisis, compounded by the COVID19- pandemic, has increased vulnerabilities of residents across Lebanon and exposed the weaknesses and inadequacies of its social protection system. In 2020, poverty among Lebanese is estimated to have increased to 55 percent from 28 percent in 2018, and extreme poverty to have tripled to 23 percent from 8 percent¹³. The concentration of vulnerability among larger households that have high dependency ratios, has severely affected the wellbeing of particularly children.

Numerous urgent and longer-term needs similarly surfaced after the Beirut Port explosion on August 4th, 2020, namely: access to alternative housing, education, healthcare, welfare services, heightened income insecurity caused by lost economic activity, erosion of livelihood opportunities, and the lack of appropriate systems for social security. The multiple crises that Lebanon has seen over the past year have considerably expanded income and multidimensional poverty and child poverty.

In the coming months, socioeconomic conditions could worsen yet again as existing subsidies of essential goods, including wheat, medicine, fuel, and a basket of other widely consumed goods, are likely to be lifted with the near depletion of usable Central Bank reserves that currently finance those subsidies. With no concrete steps by government to develop alternative and sustainable policies, such as the expansion and reform of social protection mechanisms, the cessation of subsidies will have a deep impact on the wellbeing of particularly poorer households as purchasing power plummets and inflation accelerates, leading to further economic vulnerability and social unrest.

As a response to deepening socioeconomic vulnerabilities in Lebanon prior to the blast

- In addition to Leading the development of the National Social Protection Response Strategy with key government stakeholders, through extensive consultations, sector mapping, commencement of financing work and high-level buy-in including Cabinet meetings to endorse process UNICEF Social Policy team has also been providing technical support to government in the thinking around social assistance in Lebanon.
- Providing technical assistance to various government and non-governmental partners with the aim of advocating for evidence-based policy making that promotes economic inclusion and the wellbeing of children and vulnerable groups.

POST BLAST

- Emergency Cash Transfer (ECT) – reaching 80,000 beneficiaries from vulnerable categories, including children, persons with disability, elderly above 70 and female headed households, mainly in priority poorer areas affected by the blast. The programme was launched in mid-September 2020 and concluded in December 2020, providing a one-off cash transfer of 120 USD per eligible member (up to 3 members per HH).
- Initiated the Year-end one-off Social grant to Lebanese and non-Lebanese, a social assistance programme that provides cash transfers to over 70,000 vulnerable children across Lebanon in the amount of 460,000 LBP per child up to a maximum of 3 children per family.
- Liaison with Minister of Social Affairs regarding future of national Social Protection system development – plan in place to ‘rescue’ the strategy work from the current political situation.
- Published an op-Ed on subsidies removal and the potential effects, creating some noise in the media
- Organized the first of a series of roundtables to discuss the potential impact of lifting existing subsidies, and to conceive viable alternatives for Lebanon to mitigate the adverse social effects on the most vulnerable groups.



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United Nations Children's Fund (UNICEF)

Lebanon Country Office

www.unicef.org/lebanon