



Lebanon Update

Support on Displaced Syrians

March 09 - March 16 2012



UNHCR staff registering a displaced Syrian family in Wadi Khaled. © UNHCR – Dalia Khamissy – October 2011

Highlights of the week

Numbers

The number of displaced Syrians currently registered with UNHCR and the High Relief Commission (HRC) in north Lebanon is 7,913 persons. Many of the newly registered are in the Tripoli area.

Listings from various actors and assessments conducted by UNHCR teams place the number of Syrian displaced in the Bekaa valley at approximately 5,000 persons.

Persons continue to arrive on a daily basis to different villages in the Bekaa such as Mashari al Qaa, Hermel, Arsal, Jdeide, Fakeha and in various locations in Central/West Bekaa. Efforts to verify these numbers and locations are undertaken on a daily basis.

Protection and Security

The vast majority of new arrivals have come into the Bekaa from Homs, Qusayr, Zabadani and Hama. Most displaced families have entered Lebanon through the official border crossing of Masnaa, while few families came through the

unofficial border crossing points. Lebanese authorities have permitted displaced Syrians to enter Lebanon.

Some 40 wounded Syrians were admitted to hospitals and one person passed away after arriving to Rahal hospital in critical condition. This brings the total number of wounded Syrians, since September, to 307 people.

Assistance in North Lebanon

Distribution

The HRC, UNHCR and partners assisted over 300 persons through distribution of food and non-food items (NFI).

The HRC, UNHCR and partners notably DRC and Islamic Relief provided food kits, hygiene kits, diapers, sanitary materials and fuel coupons, to displaced and hosting families. UNICEF provided additional hygiene kits as well as torches to provide much needed light during electricity cuts.

During distribution visits, outreach teams continued to discuss and identify specific issues including health concerns, referring persons to specialized care as needed.;

Shelter

UNHCR working with the Danish Refugee Council (DRC) and partners began basic rehabilitation on the abandoned Freidis school in Halba, including installation of electricity, plumbing, water pumps and proper kitchen facilities. These shelters should be ready within the next few weeks to host up to 60 people (10 families).

Elections were held in the Mwanseh and Ashlak shelters to select committees that will manage daily shelter issues. The committees, composed of local mayors and members of the displaced and host communities, will be supported by DRC outreach workers who will advise when needed and respond to the committees' needs.

Education

Remedial classes aimed at integrating the displaced Syrians into the Lebanese school curriculum are now reaching 435 children between the ages of 6 and 14 years. While activities were cancelled on Friday due to demonstrations in Wadi Khaled, UNHCR and partners stressed the importance of regular attendance and uninterrupted education for children at the primary level during their home visits.

In addition to remedial classes, children participated in recreational activities such as drama, painting, making handicrafts, and watching and discussing films. For younger children ages 6-11 years old, child friendly spaces facilitated three educational activities –making puzzles, music- with the help of ten *animateurs*. Currently there are five child friendly spaces in Bani Sakher, Nabaa El Awada, and El Rama schools, the Mounseh shelter and the Mashta Hamoud organization established by UNICEF.

Health

The newly identified Machha Primary Health Care Center began receiving displaced Syrians from Halba and

surrounding areas for primary care. Supported by UNHCR and the International Medical Corps (IMC), it is the third facility to assist Syrians in the north. The Makassed Primary Health Care Center in Wadi Khaled has been assisting since September and the Karameh Primary Health Care Center in Tripoli since December. Assessments for further hospitals and primary care centers with the potential of assisting Syrians are underway. IMC also provided Tripoli Governmental Hospital with IV supplies to aid the wounded.

In addition, health awareness sessions took place through the Medical Mobile Units in many villages facilitated by health professionals. The sessions educated the displaced on various issues such as personal hygiene, maternal care and the importance of vaccinations.

HRC alerts to funding constraints

The HRC announced this week that it will have to stop all its assistance efforts as of March 23, unless it receives additional funding approved by the government.

This is cause of considerable concern and UNHCR has been following up with the government to see whether this can be averted.

Assistance in other parts of Lebanon

Coordination

The first inter-agency coordination meetings and sectoral working groups on shelter and distribution of food and non-food items took place in the Bekaa and a regular schedule will be established.

Distribution

UNHCR provided basic assistance to displaced Syrians in the Bekaa through local partners. This includes food kits, mattresses, blankets and fuel.

In addition, UNICEF provided hygiene kits while private donors distributed winter

clothing and additional food items. UNHCR teams continue to liaise with the local municipalities, communities and the coalition of NGOs to expand distributions in a coordinated manner.

Shelter

Displaced Syrians in the Bekaa are staying with host families or renting and initial assessments indicate a stretched shelter capacity of the host community. The Norwegian Refugee Council (NRC) assessed houses of displaced families in need of rehabilitation in northern Bekaa and Saadnayel. The assessment also identified abandoned structures with potential to serve as collective shelters in the case of a bigger influx and explored transitional shelter options. NRC will start renovating host community houses that do not meet minimum shelter standards and identifying additional abandoned structures that can host displaced families.

Education

Most displaced children in the Bekaa are not enrolled in school given their displacement to Lebanon towards the end of the school year. UNICEF and UNHCR's

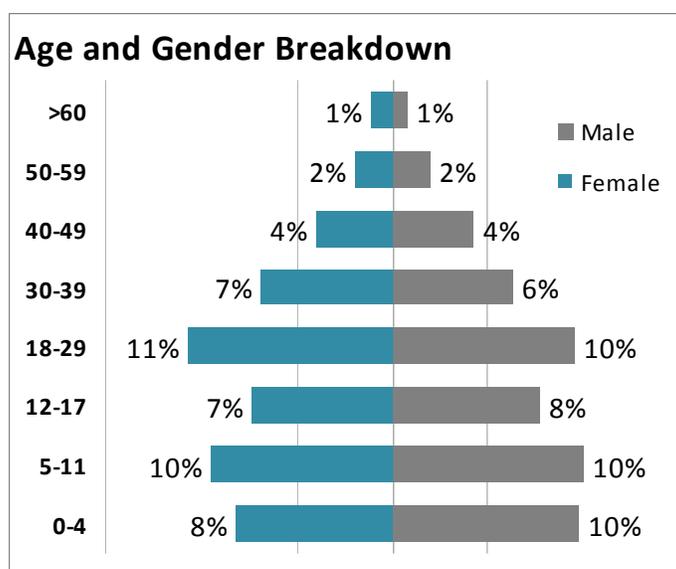
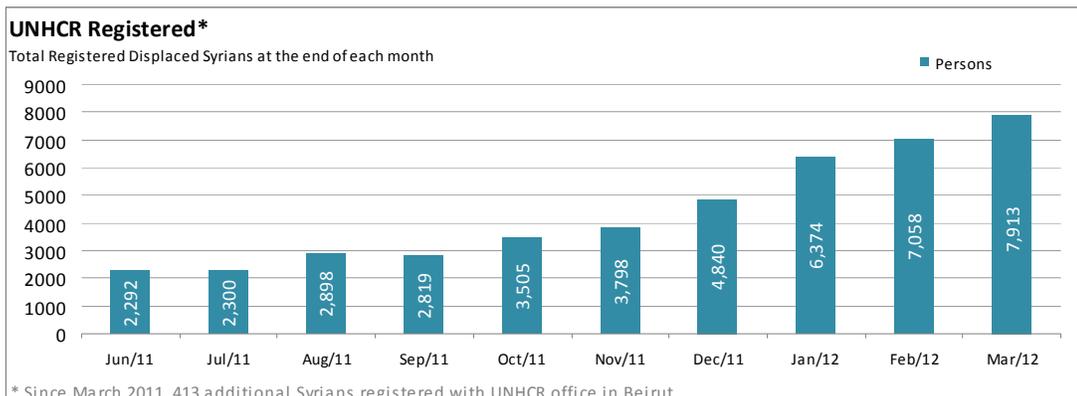
implementing partner Save the Children Sweden (SCS) will conduct a detailed assessment of the education needs of displaced students in both North and East Lebanon with a view to expand special education programmes and activities for these students.

Health

The International Committee for the Red Cross (ICRC) started covering the hospitalization of wounded people unable to be transported for health reasons to North Lebanon. For other hospital care interventions, UNHCR and IMC have concluded agreements with three hospitals in the Bekaa to improve the health referral mechanism in the area.

WHO undertook a health assessment to the Bekaa. The agency noted that while vaccinations and chronic medication were available, there were gaps within the national systems. This includes a shortage of medicine supplies for asthma, insulin others. Greater emphasis was also needed in terms of health awareness, especially related to maternal and child health care.

Situational Overview



Beginning in April 2011, Lebanon witnessed an influx of some 7,000 Syrians into north Lebanon. Many subsequently returned to Syria, while others relocated within Lebanon. Cumulatively, since April 2011, UNHCR and the HRC have registered and assisted over 11,000 persons in the north.

Currently there are 7,913 persons in the north. Local mayors and NGOs have played an active role in referring displaced Syrians to UNHCR-HRC teams for registration.

There are also concentrations of displaced Syrians residing in other parts of Lebanon. UNHCR's latest estimates with partners

indicate that there are over 5,000 persons in need in the Bekaa and south of Beirut.

There are approximately 1000 more receiving assistance from UNHCR and partners in other parts of Lebanon.

Syrians who have entered Lebanon reside mostly with host families in difficult circumstances. In north Lebanon, some 200 live in collective centres that have been renovated by UNHCR and partners.

Many individuals and families have been deeply affected by the events that caused them to leave and are reluctant to return home until the situation stabilizes.

Protection

The vast majority of Syrians registered with the HRC and UNHCR have come from Tal Kalakh and Homs. The majority of displaced Syrians in the Bekaa region have come from Baba Amr in Homs and Al Qusayr, south of Homs.

The majority of those who have arrived in recent months to north Lebanon have crossed at official border crossings expressing fear of going through the unofficial ones. They also express concern of the reported presence of landmines on the Syrian side of the border. In the Bekaa, the majority of the displaced have crossed through official border crossings.

UNHCR maintains regular contact with the Lebanese authorities and civil society representatives to follow-up on the security situation of the displaced populations.

Since the outset last April, the Lebanese government has taken a humanitarian approach allowing displaced Syrians to enter Lebanon. There have been very few cases of arrests of illegal entry/stay in the past many months. In all cases, persons were released upon UNHCR's interventions.

Circulation permits have not been issued by the authorities to those who crossed at unofficial border crossings in the North. This has limited their movement within north Lebanon.

Records reveal that 307 wounded Syrians have been treated in various hospitals in Lebanon since the beginning of the influx. Expenses related to their treatment are covered by the Lebanese authorities through the HRC. Their treatment and needs are followed-up by UNHCR and partners.

Assistance

Outside of North Lebanon where the HRC is not operational, refugees are assisted by local NGOs, municipalities, and other partners. UNHCR is contributing to and expanding its efforts to meet humanitarian needs of these communities.

In north Lebanon, a very solid coordinated response and positive working relations with the government's HRC and the Ministry of Social Affairs (MoSA) were established at the outset to the benefit of the refugees and hosting communities. These partnerships continue and together with other UN and NGO partners, the needs of refugees and affected communities are being holistically addressed. They include the following:

- Protection interventions to ensure safety, physical integrity and non-refoulement;
- Assistance to meet basic needs;
- Education and remedial classes;
- Provision of medical and psycho-social care.

A common database is in use by the HRC and UNHCR, and referral mechanisms were established to enable the displaced persons to access assistance through specialized partners in the North. Identification and registration occurs on a daily basis by outreach teams. UNHCR and the HRC verify the numbers during the monthly distribution of food/non-food items. Persons found no longer to be in the area are de-registered. Many of these are known to have returned to Syria. UNHCR is currently expanding its operation in Tripoli in order to reach out to more displaced families in the region.

Community Services Outreach workers from the MoSA and DRC continue to visit the displaced Syrians at homes and in schools in Wadi Khaled, Tall Bire, and Tripoli in order to counsel them, assess their needs, and refer newcomers to UNHCR and HRC for registration. A comprehensive referral mechanism to respond to survivors of violence has been established among key stakeholders for identified cases.

Shelter Most of the displaced Syrians reside with host families. Just over 200 persons are accommodated in three (abandoned) schools in the North -Al-Rama, Al-Ibra and Al-Mouanseh schools- and few families are currently accommodated in a mosque in Aarsal. The three above-mentioned schools were initially not well-equipped (with sanitation and hygiene facilities) to receive large numbers of people but have improved and are regularly monitored. Basic renovation of a fourth abandoned school in Halba, the Freidis school, is underway. The hall of Khorbet Daoud Mosque has also been rehabilitated to host displaced families should there be a need in the future.

UNHCR and the HRC initiated the renovation of Al Rama, Al Mouanseh, and Kashlak schools, and the hall of Khorbet Daoud Mosque, while the renovation of the Al Ibra school was undertaken by the Al-Bashaer Islamic Association.

The Norwegian Refugee Council (NRC) together with partner organizations and outreach workers identified host family residences in pressing need of improvement in preparation for the winter in both north Lebanon and the Bekaa. Through this assessment, NRC provided 90 families with coupons that enabled them to renovate their homes in the North, allowing for better living conditions for both the local and displaced communities. NRC is currently in the process of planning for the potential continuation of this project in the Bekaa.

Distribution (Food/ NFI) UNHCR along with the HRC, DRC, Caritas Migrant Centre, World Vision, and UNICEF distribute food and non-food items to the displaced on a monthly basis. UNHCR continues to provide food and non-food items to newly registered families who were not on the UNHCR-HRC database during the last distribution. Distribution in the Bekaa is facilitated through local partners.

North Lebanon - March 14TH

Items Distributed	March 14th, 2012	Cumulative
Mattresses	0	4.613
Blankets	0	4.857
Food kits	271	7204
Diapers	3	1028
Baby milk	0	1478
Hygiene kits	276	5198
Hygiene kits by UNICEF for newly comers	22	99
Women Pads (private donation)	28	108
Torches by UNICEF	227	650
Fuel coupons of 20 liters	212	25717
Fuel coupons of 20 liters for hosting families	0	164

Bekaa - March 14TH

Items Distributed	March 14th, 2012	Cumulative
Mattresses	796	868
Blankets	1636	1723
Food kits	173	410
Food kit private donation	0	88
Hygiene kits by UNICEF for newly comers	201	221
Clothes (private donation)	33	33
Jerry cans of 10 liters	750	1000
Fuel coupons of 20 liters	4376	4376
Fuel liters	87520	87520

Education A total of 525 displaced children are currently enrolled in public schools in the North. However, the school enrolment rate in Lebanon is 53% at the primary school level (6-11 year old) and as little as 9% at secondary school level (12-17 year old). Reasons vary between the different age groups.

The main reasons for low retention among primary school-aged children include: late registration, denial of access by some school administrators, unease over their circumstances and anxiety concerning of the different curriculum. Very low secondary school enrolment is largely due to cultural practices and specifically the expectation that boys from the age of 13 years are expected to work and girls from that age are encouraged to get married.

In the Bekaa, displaced Syrian children are not enrolled in schools due to their late arrival to Lebanon in the school year. UNHCR and partners are conducting detailed education assessments with a view to expand education programmes in the Bekaa.

UNHCR is seeking to improve the school enrolment rate in 2012 through provision of awareness sessions and remedial classes. UNHCR is also coordinating with other specialized actors such as Save the Children, UNESCO, UNICEF and others to better address this issue.

Health UNHCR, HRC and UNHCR’s implementing partner International Medical Corps (IMC) have established a referral system so that registered displaced Syrians in the North have access to health care services through the most specialized partner.

Primary Healthcare

Primary Health Care Centres, Social Development Centres of the MoSA, and a few NGO-run health care centres in the region are providing primary health care and medication to the displaced. UNHCR covers the full cost for doctor consultations and diagnostic tests for women and children and up to 85% of diagnostic tests for all displaced persons. Since September 2011, there have been 986 patients who have received primary health care from different health centres and mobile medical units in North Lebanon.

In the Bekaa, vaccination is being provided to all persons in need including displaced Syrians through national channels. Different health actors (UNHCR, IMC, WHO and UNFPA) are ready to build on the referral mechanism that has been developed in the

North. They are now identifying primary health care centres in the region to streamline and strengthen the coverage of medical services, capacity building needs in the local community and awareness sessions needs.

Secondary Healthcare

The HRC covers the cost of secondary and tertiary health care through local hospitals in the North. UNHCR provides additional support where needed. The HRC and IMC reached agreements with five hospitals for discounted rates in the provision of necessary health care. Since September 2011, there have been 455 hospital admissions, mostly covered by HRC.

WHO and UNHCR are liaising with MoPH, IMC, MSF and other partners to increase the provision of chronic medications and to improve the health referral mechanism and health information at the field level.

In the Bekaa, UNHCR will cover the cost of hospital care at three local hospitals through its implementing partner IMC. The International Committee for the Red Cross (ICRC) is covering the hospitalization cost of all wounded displaced pending their transfer to North Lebanon for complete treatment. Other cases in need of hospitalization will continue to be covered by the HRC if transferred to North Lebanon.

Mental Healthcare

Médecins sans Frontières (MSF) started the implementation of a mental health project jointly with the Makassed Public Health Centre (PHC). A psychologist and a psychiatrist have been deployed to Makassed's centre to provide mental health counselling to all Wadi Khaled residents, including the displaced.

In the Bekaa, MSF Switzerland started a mental health programme. In the absence of HRC's involvement, UNHCR with its implementing partner IMC will contribute to covering health care services for displaced Syrians. Referral hospitals are being identified.

Capacity Building

UNCHR has invested in strengthening the capacities of governments and local partners through:

- Regular coordination meetings and joint plans of action;
- Technical and material support to the HRC in regards to registration, data collection and verification;
- Training and guidance to HRC, MoSA, partners, medical, educational and social service providers in a wide range of areas including:
 - protection of refugees and internally displaced persons;
 - effective registration and monitoring practices;
 - psychological first aid and mental health;
 - remedial class management and positive discipline;
 - computer skills for local health service providers.
- Quick Impact Projects such as public gardens, public library and a cine club;
- Establishment of medical referral mechanisms and training for the systematic entry of data in the health referral system.