



HANDICAP INTERNATIONAL

Multisectorial Assessment Report

Bekaa Valley, Lebanon

August 2012

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INTRODUCTION

BACKGROUND

General context:

The unrest in Syria began in the southern city of Deraa in March 2011 and the military crackdown failed to stop it, instead triggering anti-government protests in other towns and cities across the country, including Baniyas, Homs, Hama, Idled, Aleppo and the suburbs of Damascus. The Syrian authorities have responded to anti-government protests with overwhelming military force since they erupted. Since the beginning of the crisis, 26,000 people were killed according to the last toll of the Syrian Observatory for Human Rights. In addition, 1.2 million of people are relocated due to the unrest. It has also caused the displacement of civilians fleeing from violence in the neighbouring countries, mainly in Lebanon, Jordan and Turkey. According to UNHCR, the total number of Syrian refugees registered in these countries stands at 192, 427 persons, with 18, 682 in Iraq, 48, 014 in Jordan, 45, 3012 in Lebanon and 80, 410 in Turkey¹.

Lebanon:

Over 57,000 displaced Syrians are receiving protection and assistance in Lebanon through the efforts of the Government of Lebanon and UN and NGO partners. Of this number, 42,947 are registered, with an additional 14,952 people having been in contact with UNHCR to be registered².

A total of 17,827 Syrians (3,846 families) have been registered with UNHCR in the Bekaa. Half of the populations of refugees are minors and most of them are accommodated by host families or rent some accommodation. However, an increasing tension is to be noted between Syrian refugees and host communities as prices are rising and humanitarian assistance is targeting refugees only. Bekaa and Akkar are historically the country's poorest districts, and targeted support has been reported for the last 3 months by community leaders as socially destructuring. Finally, the coming winter will contribute to deteriorate their conditions of life, improving therefore the vulnerabilities of the families.

Handicap International [HI] has started its emergency response in Northern Bekaa Valley in March 2012, providing support for most vulnerable households – with a special attention to persons with disabilities, injuries or chronic diseases – through the “Disability & Vulnerability Focal Point” [DVFP] approach.

In summer 2012, the conflict-affected population influx has drastically increased in Bekaa Valley and HI decided to launch a comprehensive multisectorial assessment in order to adapt its intervention to the dynamic humanitarian context.

OBJECTIVES

General objective: Improve HI knowledge of the humanitarian situation in Lebanon to feed HI positioning for coming months.

Specifics objectives:

- Assess current and upcoming needs in Bekaa Valley;
- Assess humanitarian capacities to answer current and upcoming needs in Bekaa Valley;
- Provide technical and operational recommendations to answer the identified needs;
- Provide recommendation for HI positioning in basic needs coverage, taking into consideration both humanitarian situation and HI capacities.

Assessments have been carried out by other agencies, such as:

- DRC Livelihood assessment (May 2012);
- ACF WASH assessment (June 2012);
- UNDP/DMI assessment (August 2012);

¹ <http://data.unhcr.org/syrianrefugees>, September 5th 2012

² UN Inter-Agency Response, Monthly overview, August 2012



- MSF study (August 2012).

HI assessment took into consideration all the inputs and therefore tried not to redo an existing work.

TARGET AREA

The assessment focused on 4 *Czas* in Bekaa Valley, Lebanon: Hermel and Baalbeck (North Bekaa), Zahle (Central Bekaa) and West Bekaa (West Bekaa).

TARGET POPULATION

Conflict-affected population (Syrian refugees, Lebanese returnees and minorities such as Palestinian refugees) and **host communities**.



I. METHOD

I.1. OVERVIEW

The main steps of the forecasted assessment – detailed hereafter – are the following:

| N° | Description | Collaborators | Outputs |
|----|---|--|--|
| 1 | Internal Coordination at Headquarter level | Desk Officer, Deputy Desk Officer, Logistics Referent. | Briefings and document sharing |
| 2 | Internal coordination at field level | Head of Mission, Logistics Coordinator, Administration Coordinator, Technical Referent, Technical Advisor, DVFP Program Manager. | Briefings and document sharing |
| 3 | External Coordination | <u>Local authorities</u> : municipality, High Relief Committee, Community Leaders. <u>Humanitarian coordination</u> : UN agencies, I/L NGOs, Red Cross / Red Crescent Movement. <u>Local Charities</u> . | 4W Mapping (Who/What/Where/When) Minutes of meetings Meeting database |
| 4 | Needs assessment featuring: field observations, informal group discussions and household surveys. | <u>HI Field Team</u> : Head of Assessment, Assessment Assistant, Team of 4 Assessors. <u>Target population</u> : Refugees and Host communities. | Field observation reports Informal discussion group reports Assessment forms Statistical analysis |

I.2. QUALITY TOOLS

I.2.1. The URD Quality Compas

As from the URD website: “The Quality COMPAS is the result of a six-year research project on quality issues in the humanitarian sector. The Quality COMPAS is a **Quality Assurance method** which comes equipped with its own set of tools, training modules and consultancy services. These components have been designed specifically for aid agencies with the overall aim of improving services provided to crisis-affected populations.”³

HI currently uses the URD Quality COMPAS during project implementation. During this assessment, HI team used it to keep in mind the key criteria and processes of a quality project when recommendations and concept notes have been drawn.

I.3. LIMITATIONS

- The political nature of the Syrian crisis restrained some participants from responding to sensitive questions, such as whether Syrian refugees constitute a burden on Lebanese hosting families;
- Difficulties to select a random sample: most of the time, no beneficiaries list exist and conflict-affected populations keep changing location. Therefore, real margin of error is higher than calculated one;
- Necessity to coordinate with local authorities before launching field activities;
- Some local authorities requested time to process HI request and therefore could not be covered by the assessment.

³ <http://www.compasqualite.org/en/index/index.php>



II. COORDINATION

II.1. EXTERNAL COORDINATION

Objective: to understand the current management of the crisis by local authorities and humanitarian agencies. Collected data helped the Assessment Team to draw a clear picture of assistance capacities and compare them with existing and/or residual needs.

Sum-up of meeting held by the assessment team:

| Type | Title | Organization | Date |
|-----------------------|------------------------------|------------------------------|-------|
| Local authorities | Introduction meeting | Jdeideh Municipality | 17/08 |
| | Introduction meeting | Hermel Municipality | 18/08 |
| | Introduction meeting | Britel Rural Development | 21/08 |
| | Introduction meeting | El Ain Municipality | 24/08 |
| | Introduction meeting | Aarsal Municipality | 25/08 |
| | Introduction meeting | Douris Municipality | 27/08 |
| | Introduction meeting | Baalbeck Municipality | 27/08 |
| | Introduction meeting | Majdel Anjar Municipality | 30/08 |
| | Introduction meeting | Saadnayel Municipality | 31/08 |
| | Introduction meeting | Terbol Municipality | 01/09 |
| | Introduction meeting | Bar Elias Municipality | 01/09 |
| Humanitarian agencies | NFI Cluster Meeting | Humanitarian agencies | 22/08 |
| | WASH/Shelter Cluster Meeting | Humanitarian agencies | 22/08 |
| | Information sharing | DRC and SIF | 22/08 |
| | Information sharing | ACF Spain | 28/08 |
| | NFI Cluster Meeting | Humanitarian agencies | 05/09 |
| | WASH/Shelter Cluster Meeting | Humanitarian agencies | 05/09 |
| LNGOs / Charities | Information sharing | Al Irshad Wal Islam | 27/08 |
| | Information sharing | Al Rifai | 28/08 |
| | Information sharing | Dar EL Fatwah | 29/08 |
| | Information sharing | Al Weis organization for Dvt | 01/09 |
| | Information sharing | Jdeideh convent responsible | 21/08 |

11 meetings with Local Authorities, 6 meetings with humanitarian agencies and 5 meetings with LNGOs / Charities leading to a total of **21 meetings**.



III. FIELD SURVEY

Objective: get a global picture of the access to basic services, cross-check collected data at coordination level, get a feeling of refugees & host communities' current situation and try to collect opinion from various groups.

The field visits were led by technical staff, experienced in assessing quantity & quality of local infrastructures providing basic needs⁴ to both Syrian refugees and Lebanese host communities.

Observations were made taking into consideration the Bekaa Valley climate, especially during the upcoming winter.

IV. INFORMAL GROUP DISCUSSIONS

Given the following considerations:

- Other agencies comprehensive assessment providing reliable, consistent and clear outputs;
- Complexity of field constraints (lack of access to beneficiaries, mandatory strong coordination with local authorities...);
- Decrease of assessment acceptance from both conflict-affected population and local authorities;

The Head of Assessment decided not to include formal Focus Discussion Groups. However, informal group discussions were carried out on an ad hoc basis.

V. HH SURVEYS

A specific form was designed in collaboration with HI headquarters, DVFP PM and assessment staff. It was used by assessors to facilitate interviews, data collection and integration in an EXCEL™ database.

V.1. SAMPLE CALCULATION

The chart below shows the registered refugees in Bekaa valley (July 27th 2012):

Note: number of households are estimated using the average ratio of 4.5 persons / household (UNHCR).

| Caza | Refugees population | | % of total |
|-------------------|---------------------|--------------|---------------|
| | Persons | Households | |
| Bekaa | 6.226 | 1.384 | 52,4% |
| Hermel | 361 | 80 | 3,0% |
| West Bekaa | 1592 | 354 | 13,4% |
| Zarleh | 3711 | 825 | 31,2% |
| TOTAL | 11.890 | 2.643 | 100,0% |

In order to calculate the sample size, HI considered the household being the measured unit. As shown in the chart, the number of registered households is 2.643 (July 27th 2012). However, as the figures increased when assessment started, HI based further sample calculation on a basis of 3.000 households. (Note: at the time of reporting, number of registered households is over 3,800).

Below 100.000 targeted units, the following formula is used:

$$n = \frac{385}{1 + \frac{385}{N}}$$

⁴ e.g. accommodation, schools, water networks, toilets, drainage systems, public buildings...



Where n = sample size, N = target population (3,000 households). Calculation leads to **n = 341**

In order to break the total target by towns, HI based its estimation on UNHCR’s population data. Only the main cities hosting conflict-affected populations have been considered.

However, some constrains appeared during the work:

- According to municipalities and UNHCR, there are no refugees in Terbol and Joub Jannine;
- Taalabaya Municipality requested too much time to process HI request.

As a consequence, the sample breakdown was changed. The following chart gives the initial and the final plans:

| District | Village | HH | Initial estimation | | Final Sampling | |
|--------------|--------------|-------------|--------------------|------------|----------------|------------|
| | | | % | Sample | % | Sample |
| Baalbeck | Aarsal | 500 | 21.9% | 67 | 23.2% | 73 |
| Baalbeck | Baalbeck | 388 | 17.0% | 54 | 17.1% | 54 |
| Baalbeck | Britel | 20 | 0.9% | 3 | 1.0% | 3 |
| Baalbeck | Douris | 43 | 1.9% | 6 | 1.9% | 6 |
| Baalbeck | El Ain | 88 | 3.9% | 13 | 4.2% | 13 |
| Baalbeck | Fakehe | 77 | 3.4% | 11 | 3.5% | 11 |
| Baalbeck | Laboue | 16 | 0.7% | 2 | 0.3% | 1 |
| Baalbeck | Qaa Baalbeck | 154 | 6.8% | 21 | 6.7% | 21 |
| Hermel | Hermel | 82 | 3.6% | 13 | 3.2% | 10 |
| West Bekaa | El Marj | 63 | 2.8% | 14 | 4.4% | 14 |
| West Bekaa | Ghazze | 66 | 2.9% | 14 | 4.4% | 14 |
| West Bekaa | Joub Jannine | 78 | 3.4% | 15 | 0% | 0 |
| Zahle | Bar Elias | 149 | 6.5% | 22 | 11.1% | 35 |
| Zahle | Dalhamyie | 38 | 1.7% | 7 | 3.5% | 11 |
| Zahle | Majdel Anjar | 69 | 3.0% | 11 | 6% | 19 |
| Zahle | Qabb Elias | 103 | 4.5% | 15 | 0% | 0 |
| Zahle | Saadnayel | 204 | 9.0% | 30 | 9.5% | 30 |
| Zahle | Taalabaya | 44 | 1.9% | 8 | 0% | 0 |
| Zahle | Terbol | 96 | 4.2% | 15 | 0% | 0 |
| TOTAL | | 2278 | 100.0% | 341 | 100.0% | 315 |

As the sample size slightly changed, it is necessary to estimate the associated margin of error from:

$$e = z \sqrt{\frac{p(1-p)}{n}}$$

Where e = margin of error. z = a constant from the Normal Law (1.96 is commonly used). p = repartition (0.5 is commonly used). Calculation leads to **e = 7.8%**.

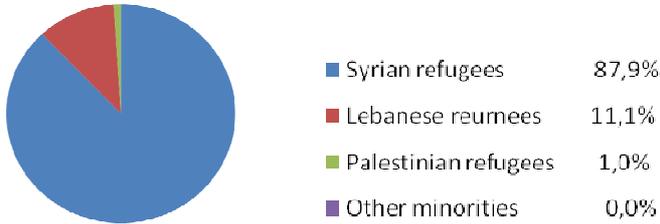
Note: as sampling cannot be 100% random due to field constraint, real margin of error is over calculated one.



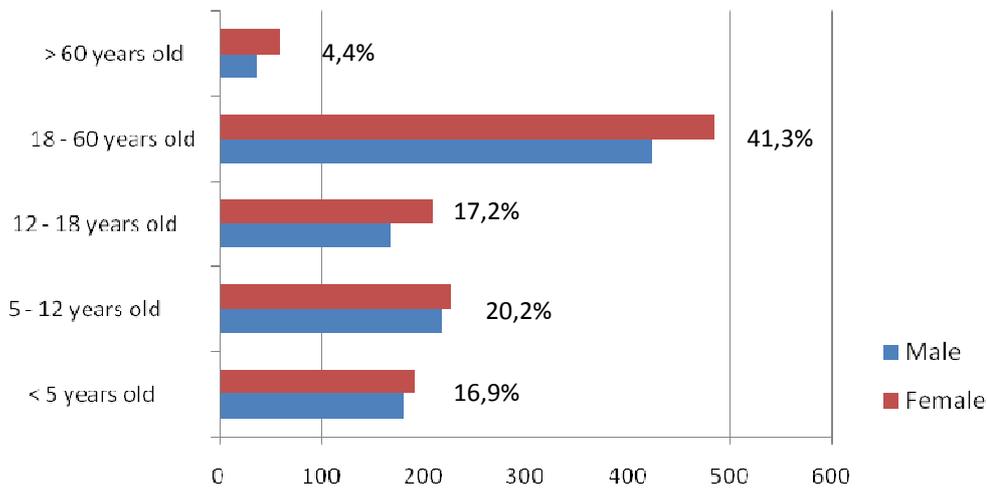
V.2. RESULTS

V.2.1. Household data

Status of Household



Age repartition of households' members (total of 2,203 people)



Number of people per household:

Minimum = 1

Maximum = 27

Average = 7

Standard deviation = 3,4

Household members' vulnerability:

36 persons with injuries (16%);

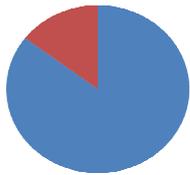
35 persons with disabilities (16%);

60 pregnant and/or breastfeeding women (27%);

Protection:

22 tortured persons (10%);

11 GBV survivors (5%);

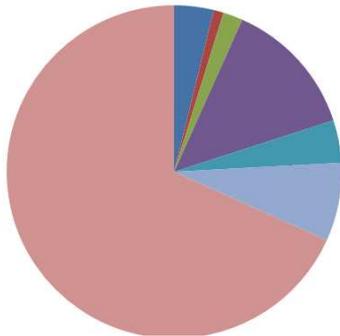


■ Male 85%
■ Female 15%

Presence of the head of household:

80% of the time, the Head of household was present for the interview

Status of Head of Household:



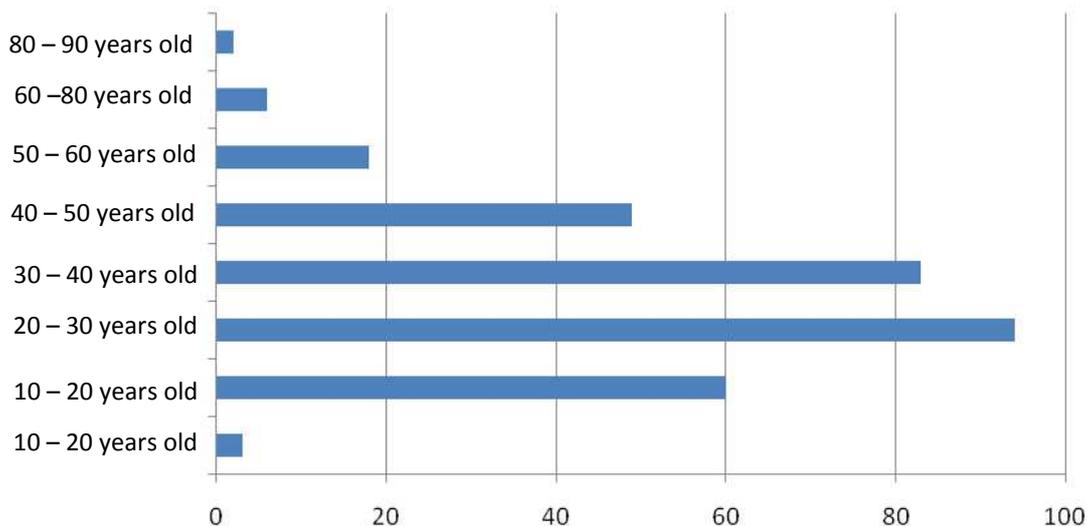
■ Widow 2,8%
■ Widower 1,0%
■ Person with Disability 1,9%
■ Person with Chronic Disease 13,3%
■ Person with Injury 4,1%
■ Orphan < 18 years old 0%
■ Elderly > 60 years old 7,6%
■ None of these 68,3%

18 interviewed head of households (5.7%) presented 2 of the listed criteria.

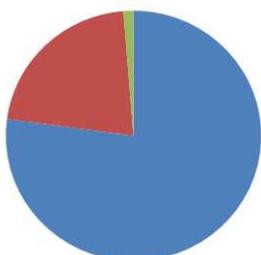
Mostly are elder widows or elderly suffering from chronic disease

Age of Head of Household

Minimum = 18 years old Maximum = 84 years old Average = 42 years old Standard deviation = 12



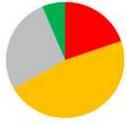
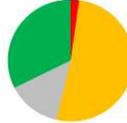
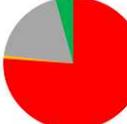
Family links:



■ All Household members are here 77,1%
■ Most of Household members are here 21,6%
■ Most of Household members are elsewhere 1,3%

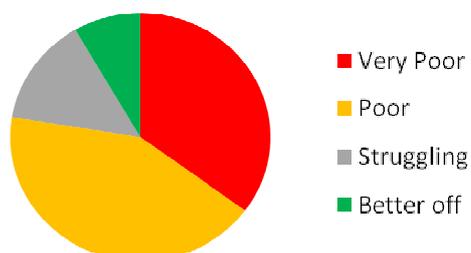


V.2.2. Socio-economical data

| | A – Very Poor | B - Poor | C - Struggling | D – Better Off |
|---|---------------------------|-----------------------------|-------------------------------|--------------------------------|
| Rent  | Too expensive (high debt) | Expensive (medium debt) | Affordable (small debt) | Easily affordable (no debt) |
| | 8,1% | 26,6% | 16,0% | 49,3% |
| Furniture  | None | Little or in bad conditions | Some basic furniture | Enough |
| | 19,7% | 47,0% | 27,0% | 6,3% |
| Electricity  | None / not affordable | Less than half the time | Most of the time | Always (network + generator) |
| | 2,2% | 51,4% | 14,0% | 32,4% |
| Communication  | Nothing | 1 mobile phone, no credit | 1 mobile phone with credit | > 1 mobile phone with credit |
| | 20,3% | 52,4% | 15,5% | 11,7% |
| Transport  | Nothing | Bicycle | Bike or car in bad conditions | Bike or car in good conditions |
| | 76,2% | 0,6% | 19,0% | 4,1% |
| Employment  | Nobody is working | | > 1 person is working | |
| | 54,3% | | 45,7% | |
| Income  | None | Low / irregular | Medium / most regular | High and regular |
| | 52,6% | 39,7% | 7,0% | 0,7% |

Total socio-economy:

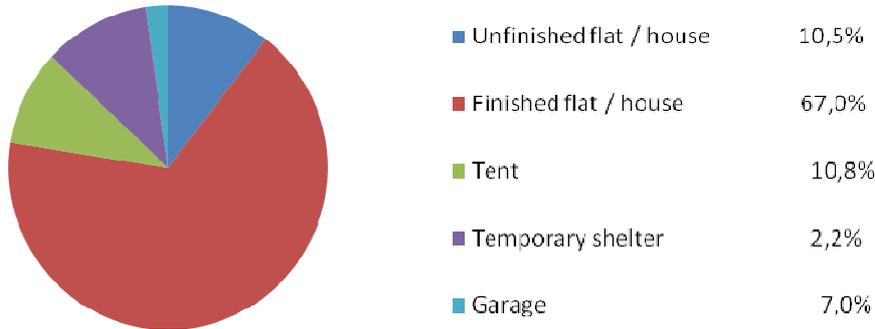
| Very Poor | Poor | Struggling | Better Off |
|-----------|-------|------------|------------|
| 35,1% | 42,5% | 14,1% | 8,3% |





V.2.3. Habitat

Type of habitat

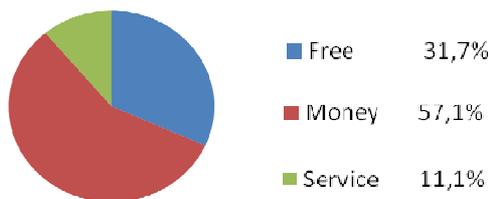


Unfinished flats / houses are concrete buildings with a finished structure (columns, beams and roof) and concrete brick walls. Floor is not always finished and there are no doors or windows. A temporary electricity supply is set up and water is supplied by water trucking or neighboring taps.

Tents are installed most of the time in private lands or fields. They are made of a wood or metallic structure covered with rages, plastic sheet or cardboard.

Garages are closed by a metallic door and usually are located directly on a street.

Rental fees



Facilities

78.7% have access to a proper kitchen. 19.7% share their kitchen with other families.

83.2% have access to proper bathroom (not taking into consideration water heating system). 27.9% share their bathroom with other families.

14.0% have access to a living room. This tends to show that houses are crowded and do not ensure individual privacy. 4.8% share their living room with other families.

People per sleeping room

Minimum = 1 Maximum = 16 Average = 5 Standard deviation = 2

Available surface per person

This data has to be compared to the minimal SPHERE standard (3.5 m² / person).

Minimum = 2 m²/person Maximum = 63 m²/person Average = 1 m²/person Standard deviation = 9

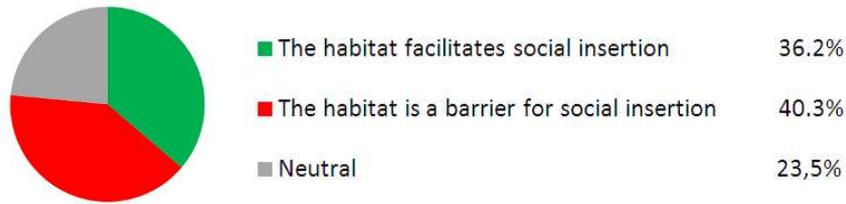
Winter preparedness

61.3% of the houses are not prepared to face winter (lack of windows or doors and any isolation gap).

45% of households do not have any heating system. Given the harsh winter season in Bekaa Valley, it is a real threat to living conditions, especially for persons at risk (children, pregnant women, persons suffering from chronic diseases...)



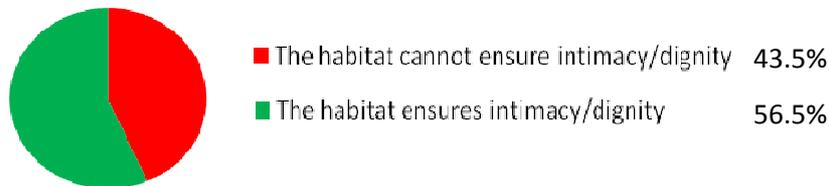
Habitat VS social insertion



The habitat is considered to facilitate social insertion when:

- There are no major difference between the conflict-affected household's habitat and the locals' habitat. For example, tents do not facilitate social insertion;
- The conflict-affected family can receive guests for socialization (enough space, basic furniture...);

Habitat VS intimacy / dignity

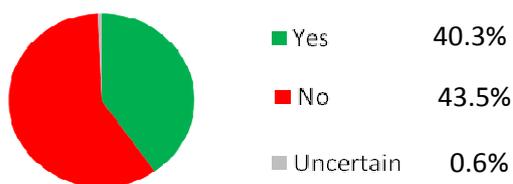


The habitat is considered to ensure intimacy/dignity when:

- Parents have their own room, separated from children;
- Minimum space is available for private activities.*

Habitat VS protection

Can the habitat easily be spotted as hosting refugee from outside?



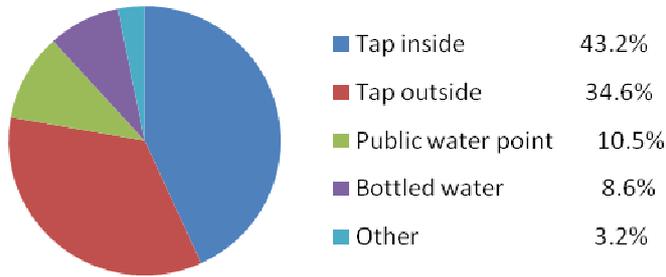
37.0% of the assessed buildings can be easily entered.

Among the unprotected habitats, 81.7% can be easily entered due to lack of functional door and 18.3% due to non resistant walls.



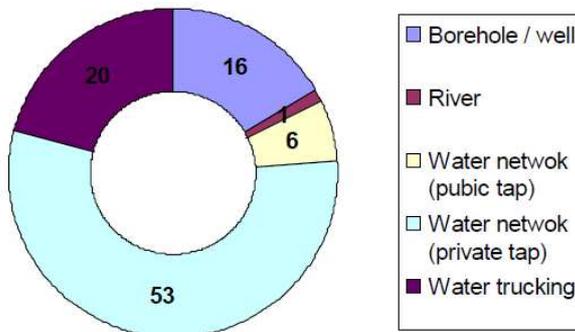
V.2.4. WASH

Source of drinking water



Taps and public water points can be linked to water supply networks, boreholes or tanks filled by water trucks. ACF WASH assessment outputs propose more disaggregated data:

Percentage of water sources use by Syrian families for drinking purpose

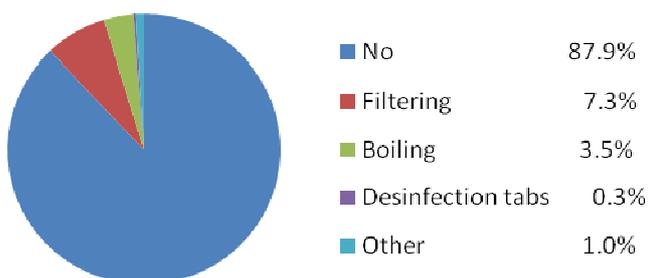


Distance from house to water source (when outside the dwelling):



77.7% of the interviewee thinks the water they use is actually drinkable. However, this perception has to be compared to ACF's water quality testing campaign.

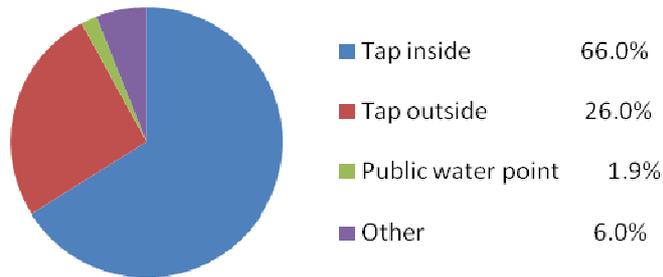
Household water treatment



The majority of households drink tap water without any treatment. According to ACF report, « among the 44 % of the population who has mentioned health problems, 20 % of the population said they have suffered diarrhea during the mentioned period »



Source of water for cleaning & hygiene



Quantity of available water

51.7% of interviewed households state they have enough water to cover their daily needs.

Cost of water

50.8% of interviewed households do not pay for water. Cost of water trucking depends on distance covered by the service provider. A fair estimation is 1 \$ / 100 L.

Access to toilets

86.7% of interviewed households have access to toilets. Among the available toilets, 74.0% are clean and functional, 72.2% secured and 7.7% have their septic tank full.

88.6% of toilets are shared by than 20 persons / unit (i.e. above SPHERE Standards).

Almost all latrines are located less than 50m from the household habitat.

Availability of Non Food Items

Criteria:

Jerrycan: > 1 unit / household;

Towel: 1 unit / adult – 1 unit for children;

Soap: 250 g / person / month (SPHERE standards);

Nail cutter: > 1 / household

Tooth paste: > 1 unit of 75 mL / 5 persons / month;

Baby potty: > 1 unit / household

Tooth brush: > 1 unit / person / 3 month;

Green: > 66% of households have access to the item;

Orange: 33 – 66% of households have access to the item;

Red: < 33% of households have access to the item.

| AVAILABLE HYGIENE ITEMS | | | | | | | | | |
|-------------------------|--------------|-------------|------------|-----------|-------|-------------|--------------|------------|------------------|
| Jerrycan | Bathing soap | Tooth paste | Toothbrush | Hairbrush | Towel | Nail cutter | Laundry soap | Baby potty | Personal hygiene |
| 67.0% | 83.8% | 81.9% | 80.6% | 76.2% | 61.9% | 61.3% | 70.2% | 10.8% | 48.9% |

| AVAILABLE OTHER NFI | | | | | | | |
|---------------------|-----------|-------------|---------|----------|-------|----------------|-----------------|
| Matress | Bedsheets | Kitchen set | Clothes | Blankets | Shoes | Other lacking? | Winter clothes? |
| 70.8% | 39.0% | 65.1% | 39.4% | 40.0% | 39.0% | 38.1% | 1.6% |



Psychosocial

Green: < 33% of households present the symptom;

Orange: 33 – 66% of households present the symptom;

Red: > 66% of households present the symptom.

| | | | | | |
|-------------------------|------------------------------|-----------------------|----------------|-------------------------------|----------------------------------|
| Sleeping trouble | Feeling of Loneliness | Eating trouble | Sadness | Feeling of persecution | Fear of family separation |
| 52.1% | 41.3% | 40.3% | 92.1% | 26.3% | 42.5% |

| | | | | |
|----------------------------|------------------------------------|------------------------------|-------------------------------|----------------------|
| Uncontrolled crying | Uncontrolled aggressiveness | Concentration trouble | Flashes about the past | Shame / Guilt |
| 43.2% | 22.9% | 22.5% | 46.3% | 26.3% |

Does the household feel included in the society?



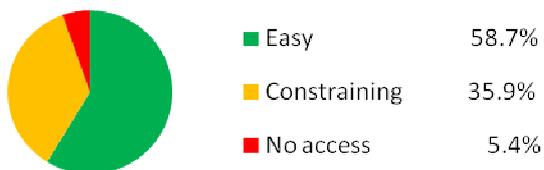
If the household does feel included, through which activities?

- 15.9% through sports
- 17.8% include through games
- 22.6% include through ceremonies
- 25.8% include through work
- 22.0% include through schools
- 55.1% include through religion
- 12.7% include through informal gathering

If the household does not feel included, why?



Access to Primary Health Center





Access to Hospital



Access to Pharmacy



Specific needs

In addition, 123 households (842 persons) were assessed, using a complementary form focusing on specific needs in Central and West Bekaa, where HI does not intervene yet.

Specific needs due to the conflict

1 adult was injured and has now difficulty to move. Needs of mobility devices and rehabilitation care have been reported.

1 child with severe nervous disorders probably linked to trauma.

Specific needs not due to the conflict

2 adults showed significant difficulties to move. Needs of orthotics and rehabilitation care have been reported.

1 adult and 1 teenager with trisomia 21.



LIST OF ACRONYMS

| | |
|-------|---|
| 4W | Who / What / Where / When |
| ACF | <i>Action Contre la Faim</i> |
| DMI | Development Management International |
| DRC | Danish Refugee Council |
| DVFP | Disability & Vulnerability Focal Point |
| GBV | Gender Based Violence |
| HI | Handicap International |
| MoM | Minutes of Meeting |
| MSF | Médecins sans Frontières |
| NFI | Non Food Items |
| NGO | Non Governmental Organization |
| NRC | Norwegian Refugee Council |
| PM | Program Manager |
| UN | United Nations |
| UNDP | United Nations Development Program |
| UNHCR | United Nations High Commission for Refugees |
| URD | <i>Urgence Reconstruction Développement</i> |
| WASH | Water, Sanitation and Hygiene |

Contacts

Head of Mission

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HI Bekaa hotline service

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