



مؤسسة عامل الدولية
amelassociation International

SYRIAN REFUGEE EMERGENCY RESPONSE

Activity Report

April – October 2013



Editorial

“We need to help Lebanon help Syria”

“The world is watching the United States, Russia and Europe negotiate the surrender of Syria’s chemical weapon arsenal. While a solution of the Syrian conflict is imperative, the current focus on the chemical weapons powerplay leaves little space for attention to the **displacement of almost seven million people**, and the heavy burden of the countries that host these refugees.



Since the last Amel report in April 2013, the **number of Syrian refugees in Lebanon has grown to almost 1 million**. This means that in the last six months more refugees have arrived than in the 1,5 years before. Could we imagine a similar percentage of refugees, 20 million for example, entering a country like France?

Since April 2012, **Amel has committed its network and resources** to the protection of Syrian refugees in Lebanon through healthcare, education, child protection and livelihood support. During these almost two years of action, Amel has built great knowledge not only as a service provider, but as an active supporter of a Lebanese civil response to the emergency crisis.

Unlike other hosting countries, Lebanon has not established official camps for Syrian refugees. **The hospitality of the Lebanese people and Palestinians** for so long is exceptional and should be emphasized. Yet, it becomes unbearable for some hosting communities to receive Syrian families much longer.

The burden of hosting high numbers of refugees is weighing heavy on the Lebanese state as well. According to World Bank estimates, **Lebanon has lost 7,5 billion dollars since the start of the crisis**, which is proof of the catastrophe we are going through. We are sincerely grateful for the help of all our donors. However, the **international community**

should take responsibility for the crisis and provide real support to Lebanon in order to stabilize this explosive and catastrophic situation. For this, all aid should go to the communities affected by the crisis and not be spent on overhead costs or visibility campaigns. We must pressure the international community to find a political solution to end the Syrian crisis. Meanwhile, we also need to answer the urgent needs of Syrian refugees. Depending on the following scenarios, **I would like to recommend three possible actions:**

In case the crisis keeps its present course, **the first action** should consist of developing a comprehensive plan in the economic, social, health, education and relief sectors by the Lebanese government, municipalities and Lebanese Civil Society Organizations, in coordination with the United Nations and international NGOs.

The second action includes the creation of a contingency plan should the battle of Damascus take place. In that case, we can expect at least 1 million additional Syrian refugees coming to Lebanon and we should be prepared to receive them.

The third action should be applied if a political solution ends the Syrian crisis. In that case, we will need to bring our support to help in the reconstruction of Syria and strengthen civil society.

Amel has stressed the need for an equal-to-equal partnership between foreign and Lebanese agencies, so to avoid creating parallel structures or competition for funding resources. This report, after all, shows the great capacity of a Lebanese response to the Syrian refugee crisis with the support of international humanitarian actors. **We need to help Lebanon help Syria.”**

Dr. Kamel Mohanna, President of Amel Association International. General Coordinator of the Lebanese network of Arab NGOs.

A handwritten signature in black ink, appearing to read 'Kamel Mohanna', written in a cursive style.



Beneficiaries on an outing in Horsh Beirut



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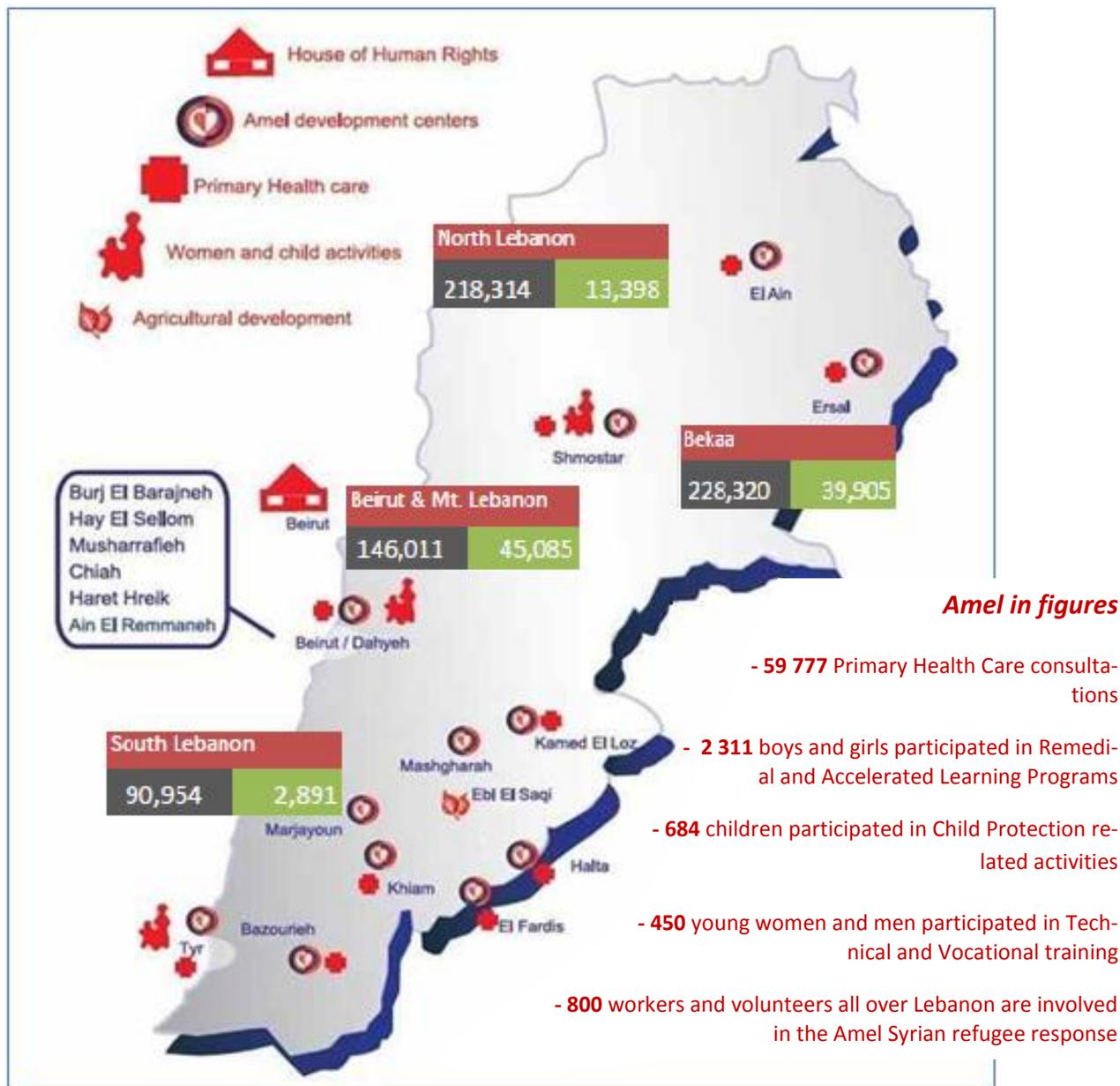
About Amel

Amel Association International is a non-governmental organization established in 1979. Through its 23 centers across Lebanon, Amel Association International provides access to healthcare services and implements development programs targeting underprivileged populations, regardless of their nationality or political and religious affiliations. Amel Association International also aims to strengthen the culture of rights among citizens, refugees and migrants and to promote access to their rights and their involvement in public life.

Amel Centers

Amel's community centers are located across Lebanon, with 16 centers currently specifically targeting Syrian refugees. These centers are located in:

- **Beirut:** Haret Hreik, Chiah, Ain el Remmaneh, Hay el Sellom and Bourj el Barajneh
- **Bekaa:** Ersal, El Ain, Shmestar, Kamed el Loz and Mashghara
- **South Lebanon:** Tyre, Bazourieh, Kham, Halta and El Fardis



Amel centers in Lebanon are located in areas with high numbers of Syrian refugees, both registered (in grey) and awaiting registration (green).

(Data accessed at UNHCR data web portal, October 10, 2013)

Executive summary

In April 2012, Amel launched an Emergency Response Program in response to the Syrian refugee crisis. Within this framework, Amel has provided more than 200,000 services to the Syrian refugees in the sectors of health, mental health education, livelihood and distribution of food and non-food items. Amel puts great efforts to base its interventions on rigorous assessments of the situation. As such, Amel has undertaken several needs assessments and analysis of the humanitarian response and contributed to the information management and coordination of the humanitarian action since the beginning of the crisis.¹

The past six months have seen an exponential increase in the number of Syrian refugees in Lebanon. The total number of refugees registered or awaiting registration with UNHCR in April 2013 was 200 000 and this number has reached almost 800 000 in October 2013². This massive influx of refugees in such a short period has put immense pressure on the Lebanese host communities, as the majority of refugees have sought refuge in the most deprived areas of Lebanon, where poverty levels are at the highest. Amel has successfully increased and adapted its response capacity in order to improve the quality of the services provided and in order to enhance accountability towards the stakeholders.

With 16 community centers across Lebanon (Beirut, Bekaa and South Lebanon) active in the response to the Syrian refugee crisis, Amel has been able to provide a comprehensive support to the affected Syrian refugees and other vulnerable populations affected by the Syrian crisis such as host communities, Lebanese returnees from Syria, and Palestinian refugees.

In the **health sector**, Amel is providing primary health care services and facilitates the access to medication and laboratory tests. Maternal and childcare are the most sought after services in Amel medical centers, as almost 40% of the total

number of beneficiaries are pregnant women. Meanwhile, women receive family planning commodities and participate in related awareness sessions.

In the field of **education**, one of the current programs is the Back to School campaign supported by UNHCR, where Amel has taken the shared responsibility with Caritas and Save the Children to facilitate the enrollment of 10 100 Syrian refugee children to public schools in South Lebanon and the Bekaa region. Children of school age benefit of Remedial classes and Accelerated Learning Programs in order to bridge school gaps or to upgrade their level to be able to integrate in Lebanese schools. Children enrolled in the education program with Amel have access to psychosocial support and are regularly participating in recreational activities aiming to become more resilient within their current situation in displacement. The education programs are implemented in coordination with UNHCR.

Child Protection activities are currently undertaken in six centers in the Bekaa region and Beirut. More than 600 children participated in recreational activities between April and October 2013 and their parents benefited from awareness sessions on child protection issues. Through this program, children can also access psychological and psychosocial support, as well as organize and participate in community events. The child protection program is implemented in coordination with UNICEF.

Livelihood and social cohesion activities are being implemented in the area of Beirut and consist of providing professional and technical trainings for young women and men. Almost 450 Syrian refugees and members from the host community are currently part of the program. From November 2013 on, Amel will expand numerically and geographically its livelihood component by launching the program "Empowerment of Syrian Refugee and Vulnerable Host Community Youths in Lebanon", supported by the European Union. One of the main objectives of the livelihood program of Amel is to enhance the professional and life skills capacities affected by the Syrian crisis. Creating work opportunities and thus improving means of livelihood would contribute a great deal to the appeasement of tensions in the most vulnerable areas.

¹www.amelassociation.org, Needs assessment Bourj El Barajneh and Haret Hreik; "One year of humanitarian action". April 2012- April 2013

²UNHCR

Background Information

Amel has been active and has provided support to the affected populations in the various crises that affected Lebanon throughout history, gaining a deep understanding and a great capacity for response. Since the onset of the Syrian refugee crisis, Amel has been able to assess through its centers both the needs of the refugees as well as the host communities, and to plan **emergency relief and support programs** tailored to meet the most urgent demands.

Despite consistent measures adopted by the humanitarian actors to answer the needs of the refugees, huge implementation gaps exist in almost all the fields. Besides the difficult living conditions, many Syrian refugees residing in Lebanon face dire issues with education (high drop-out rates, difficulties in enrolling, & differences between the Lebanese and Syrian curricula), health (communicable diseases, & limited access to secondary health care), livelihood (heavy reliance on humanitarian aid, & inadequate housing conditions) and more recently identified issues such as child labor, malnutrition, and delinquency. To the burden of exile, adds the mounting resentment of the host communities towards the refugees, as they enter in competition for employment, access to public services and social aid. Many Lebanese have a growing feeling of insecurity and fear, added to a sense of estrangement in their own country.

The Syrian refugee crisis in Lebanon and in the surrounding countries is expected to last several years and in this context reinforced efforts must be done in order to respond to the humanitarian and non-humanitarian needs of the refugee and host community population. Social cohesion is affected in a context of strained resources, political and economic instability and growing social dissent. In the absence of an integrated response and action that will cover the needs of the host communities as well as those of the refugees in a more developmental approach, there is a risk for the situation to arrive at a breaking point.



A local and community-based response

In the centers, Amel has of a team of local volunteers and local field staff that comes from different backgrounds and regions throughout Lebanon. Their experience and thorough knowledge of the region and local situation have proved to be very valuable in providing a measured response to the massive influx of beneficiaries in the centers.

Thus, Amel is able to stay in close contact with the communities that are directly affected by the crisis. Local situations are dynamic and can change rapidly. By taking into account the needs and concerns of local communities rising tensions can be mitigated and violent outbursts can be prevented. Amel has identified areas of concern that will be addressed hereafter.

Aid effectiveness

Amel insists on working in close coordination with local communities, the Lebanese government, and local and international NGOs. However, coordination remains a challenge resulting in overlapping of services, competition between agencies covering certain areas, and confusion among Syrian refugees. Moreover, there is lack of coordination between UN bodies and, due to overlapping mandates, visibility and competition become obstacles for an effective and coordinated relief response.

All the areas of intervention are dynamic and different and require a locally tailored response, in close coordination and with ownership of the local host community. In the poor and underdeveloped areas where many refugees are concentrated, the presence of international agencies paying relatively high salaries to their staff has resulted in local conflicts related to recruitment. While Amel acknowledges the expertise international agencies bring to the field, new interventions within the context of the Syrian refugee response should be adapted to the local setting.

Shelter

Shelter continues to be a main area of concern in Lebanon. Whereas Turkey and Jordan have created camps to provide shelter, this is not the case for Lebanon. Syrian refugees are dispersed throughout the country and have found shelter with host families and relatives, rented and shared apartments or empty build-

ings. Due to the increase in demand for living space all costs in Lebanon have risen steeply in the last two years, with landlords sometimes asking exorbitant prices to low-income families. Refugees who cannot find affordable living space are increasingly seeking shelter in informal tented settlements in the South and the Bekaa. At the end of September 2013 there were approximately 350 informal tented settlements in Lebanon.

The housing conditions are often of low quality, lack sanitation and have negative effects on health conditions, causing infectious diseases to spread among refugees. Moreover, some Syrian refugee families residing in informal tented settlements or occupying spaces illegally, risk eviction. Finally, the upcoming harsh winter period will make life even more challenging.

As a response Amel will start a winterization campaign, with support of UNICEF and MEDICO, to help refugees face winter conditions through distribution of clothes, fuel, mattresses and blankets. Children and vulnerable families in Bekaa and Beirut will benefit from this campaign.

Social cohesion

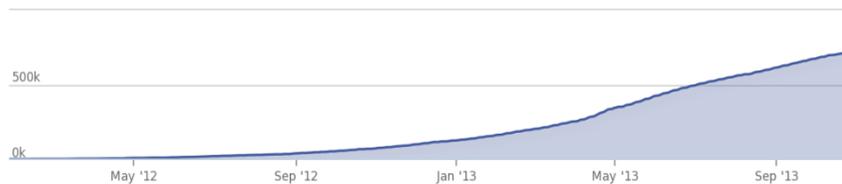
Since the beginning of the crisis, Lebanese and Palestinian host communities have warmly welcomed Syrian refugees into their homes, villages or towns, offering them food and shelter. However, the continuing presence of Syrian refugees in many of Lebanon's most deprived areas has added to inter-communal tensions and put local economies under strain. The added pressure of the increase in population is leading to problems with healthcare services and education systems. Whilst wages are decreasing due to competition for jobs and an increase in cheap labor, family expenditures are on the rise. Amel centers in particularly in Northern Bekaa are witnessing a degradation of the situation, where local communities host refugees in their own dwellings. The increase in demand and prices, and the closure of borders, which limits import of low cost products from Syria, has sometimes caused an important increase of expenditures for low income Lebanese families. This decreasing financial capacity of host communities is an alarming trend.

In addition to increased economic difficulties, the extremely large refugee influx in Lebanon amounts to a growing feeling of estrangement among host communities. Historically, part of the Lebanese people supports the Syrian regime,

while the other part does not. The Syrian crisis has increased pre-existing tensions in Lebanon which causes deterioration in the feeling of security for both Lebanese host communities and Syrian refugees.

The declining security situation has its effects on the provision of relief to affected communities. Fears to travel and pass checkpoints or cross into other areas have hindered beneficiaries in receiving much needed assistance. The economic and security strain the crisis is putting on the Lebanese community requires an adapted approach to the provision of services to Lebanese and refugees alike.

Monthly progress of UNHCR registered refugees³



| | | |
|---|----------------|------------|
|  | 802,253 | Total |
| | 717,631 | Registered |
| | 84,622 | Awaiting |

³Source: Syria Regional Refugee Response, Inter-Agency Information Sharing Portal. October 30, 2013.

Gender-based violence

A study by Amel⁴ has made clear that Lebanese women are highly affected by the influx of Syrian refugees. Lebanese women and girls are particularly affected by the Syrian refugee crisis, in a context of reinforced insecurity and a considerable rise in violence, whereas men are having difficulties in providing for their families, creating deep frustration and contributing to increased levels of domestic and gender-based violence.

Syrian refugee women are facing protection threats and because of their vulnerability are more subject to abuse. Assessments made by other agencies revealed that there are changes in family power dynamics, which lead to domestic violence, women taking on other roles, young boys abandoning school in order to provide for their families, as well as early marriages. These issues are difficult topics to address, both among hosting communities and refugees, and therefore require a culturally sensitive approach.



⁴“Gender Analysis of host communities affected by Syrian refugee crisis in Lebanon”. Amel Association International. August 2013 - unpublished



Health

Amel has been operating Primary Health Care medical centers in the most deprived areas of Lebanon for over three decades. Since the onset of the Syrian refugee crisis, these centers opened their doors to refugees in need of medical care and rapidly expanded their capacity in order to respond to the growing needs. Three mobile clinic units have been launched in order to outreach a higher number of refugees living in remote areas. Awareness sessions on health related issues are continuously taking place in Amel's centers in order to inform and promote prevention and good practices.

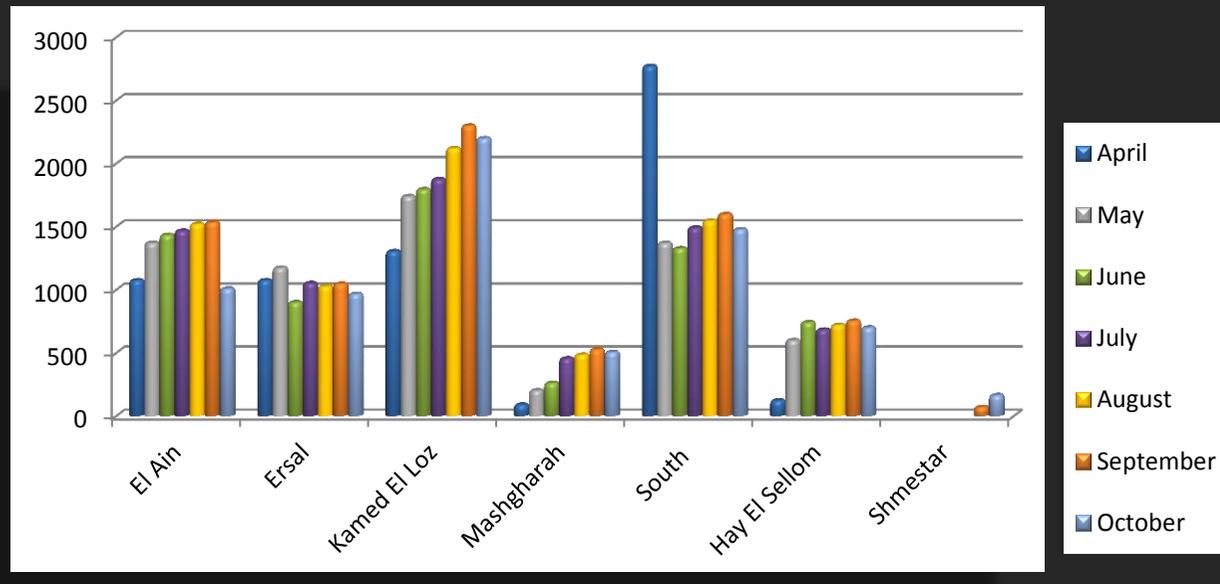
Situation

The bad living conditions, the lack of hygiene and access to potable water, added to poor nutrition, considerably affect the health situation of the refugees and pose a sanitary problem. Cases of respiratory tract infections multiply during cold weather season and cases directly related to hygiene like scabies and lice are also on the rise. Considerable efforts are being made to avoid the outbreak of contagious diseases.

Health sector highlights:

- Continuous increase of Syrian refugee patients in all Amel Primary Health Care centers and Mobile Clinics in Bekaa, Beirut and South Lebanon
- Amel operates now 12 medical centers and 3 mobile clinics specifically targeting Syrian refugees
- Mental health care is provided in 5 centers (Bekaa and South) with the support of MdM and IMC
- On average, each medical center of Amel provides 1000 to 1500 single consultations every month.

Number of consultations in AMEL PRIMARY HEALTH CARE CENTERS



South: Tyre, Bazourieh, Kham, Halta, Fardis

Refugees living in villages and in remote areas have to travel long distances to reach medical structures. The high cost of transportation across the country combined with the limited incomes of these individuals severely limits their access to adequate and timely health care.

Maternal Health is an area of particular concern as many of the pregnant Syrian women cannot afford to follow a nutritional diet suitable for their condition and often neglect themselves to prioritize other family members. The poor living conditions are also putting their pregnancies at risk. A large number of pregnant women coming to Amel center for consultations suffer from anemia or reproductive tract infections and are under continuous stress regarding their delivery conditions and the life that the



Ehsan is the head of Amel Medical Center in Kamed El Loz, West Bekaa and has been working with Amel for 24 years. During this long period, she has been part of Amel's response to the several crises

that battered the country and more than once she defied shootings and risked her life in order to get medication for the center. *"Even though the crisis that we are facing today in Lebanon doesn't involve life threats, the Syrian refugees bear the trauma and physical signs of war and responding to their needs is a huge challenge."*

Ehsan recalls the dramatic increase of Syrian refugees coming to the center: *"Before we were working only with Lebanese and we were making huge progress in building the awareness and capabilities of the communities. When the Syrian refugees arrived, we had to start all over again with them and give them the attention they needed. It was not always easy, as they were different of the beneficiaries we had before. A period of adaptation began, both for them and for us, the staff. The refugees started to appreciate our way of working and they are satisfied with the services provided."*

"They are also thankful because in our work, we often went further than just offering medical care. We are always there to answer their questions and give them information on the issues that affect them. Not giving false hopes and being honest on the opportunities that present to them is highly appreciated."

newborn and the family will have. Because of financial issues or mistreatment at some medical structures, many of these women will not seek medical care, hence putting their life in serious danger.

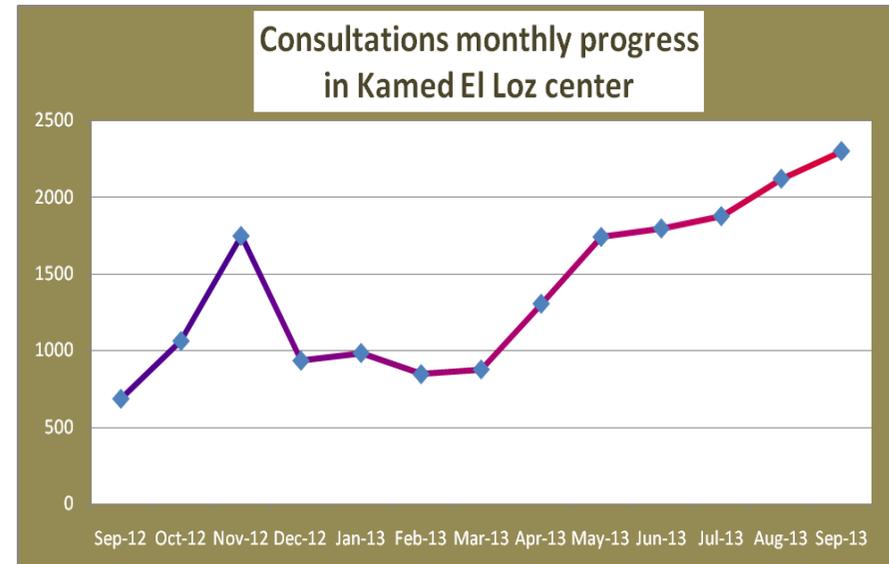


The traumatic experiences that pushed them to exile continue to haunt the refugees and the difficult living conditions in the areas where they found refuge further emphasize the distress. This results in adoption of bad coping mechanisms, like domestic violence and isolation that can lead to serious psychological problems, especially in the case of children who are much more sensitive to these kinds of situations.

Amel response

Amel is currently providing primary health care services in 12 centers across Lebanon and has 3 mobile clinic units covering villages and informal tented settlements around El Ain in North Bekaa, Kamed El Loz and Mashgharah in West Bekaa. In September 2013, Amel started providing medical care in Shmestar (West

Bekaa) as important unmet needs were identified. Amel has operated a successful upgrade in its response-capacity, as in the past 6 months, the volume of beneficiaries increased exponentially in some centers.

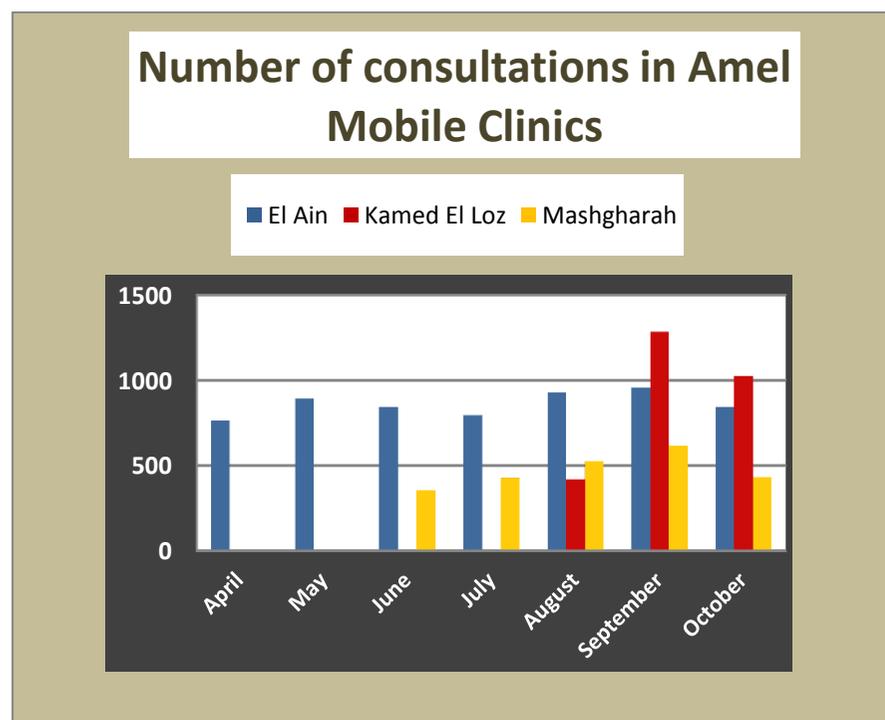


Each of Amel's centers has Pediatric, General Medicine, Gynecology, Obstetrics and other specialist services and provide on average 1000 to 1500 consultations monthly. The most requested services continue to be those dedicated to child-care and maternal care. As mentioned earlier, due to the unhygienic living conditions, the most prevailing diseases are respiratory infections and skin diseases, followed by gynecological and obstetrical cases. Refugees report feeling comfortable in coming to Amel centers for receiving medical care, as they feel they are treated with respect and understanding.

Amel places particular stress on preventive activities and tries to raise awareness about issues likely to affect the health situation of the refugees. Awareness sessions dedicated to maternal care as breastfeeding, newborn care, maternal nutri-

tion and hygiene are held regularly in Amel centers with high rates of participation and positive reception from the part of the attendees. Other topics include family planning, sexually transmitted diseases, healthy nutrition, and personal hygiene.

Amel is offering mental health support in several centers, especially in the Bekaa area where the security situation is unstable and where the Syrian refugees still fear for their lives. Beneficiaries reported disproportionate reactions to noises, images, fear for their physical safety and of their families, difficulty in sleeping and nightmares, feelings of guilt and helplessness and many others. Amel together with its partners, MdM and IMC provide psychological support and helps them express and alleviate their distress.



Challenges

Access to Secondary Health Care threatens to become a severe issue, in the context of scarce resources granted by the humanitarian coordination to the health sector. Amel receives increasing demands from the part of the beneficiaries for secondary health treatments, which shows that the medical condition of the refugees aggravates in Lebanon. Coordination is problematic at this level as well, as patients referred to other partners for treatment do not report back on the cases and the follow-up of the patient is interrupted. Several beneficiaries reported giving up to seek medical care as they were sent to different places without finding an issue to their problem. This asks for the establishment of a consolidated referral system between health care providers that would be able to guide efficiently the refugees and provide them with the services they need.

The cost of medical care, either primary or secondary, still remains exorbitant for a large part of the Syrian refugees and vulnerable host communities. Amel offers free health care for children under 5 years old and pregnant women and implements a small fee for the rest of the patients in order to prevent abuse of services and to guarantee the quality of the services provided. This has helped alleviate tensions between the Syrian refugee and the Lebanese patients who frequently suffer from the same life conditions and revenues. In the meantime, paying for the medical services provided, even if it is a small fee, has proved to be empowering for the refugees, as they feel entitled to reclaim quality services and to be treated as rights-holders.

In many of Amel centers, the Syrian refugees have become to represent the majority of patients seeking medical care. Centers in the Bekaa area have seen a considerable decrease in the number of Lebanese patients. According to several interviews, this is due to the fact that they have to wait in line for a long time, because the waiting rooms are overcrowded by refugees. Lebanese women participating in an assessment conducted by Amel reported that they postponed

a medical consultation several times, because there were too many refugees waiting for the same services. Another participant expressed resentment about Syrian refugees taking poor Lebanese places and their share of services. This discontent has to be addressed in order to prevent further tensions between the local communities and the refugees.

The arrival of winter is another pressing issue for the refugees and for the humanitarian actors alike, as needs in terms of shelter and winterization are

immense. Weather conditions in combination with bad housing conditions will increase the spread of diseases such as respiratory tract infections, especially amongst children.

Amel planning

Amel is planning to enhance the provision of primary health care in Mount Lebanon and the Southern suburbs of Beirut, where the refugee needs are far from being reached. This applies also for South Lebanon, where a mobile clinic unit is planned to be launched.



Mobile clinic in Mashgharah

El Ain Center

Since 1986, Amel Association's center in Al Ain - Northern Bekaa, has been acting as the focal point of El Ain itself and its surrounding villages. The center was inaugurated amid the Lebanese civil war, during which it mainly distributed emergency medications received as an aid from several international NGOs. The center organizes monthly awareness sessions in the center and in public and private schools of the region, principally about health and social issues encountered in daily life such as: early marriage, breast cancer, hygiene and school health care. The center provides Primary Health care services including Gynecology and Pediatrics.

Since the beginning of the Syrian refugee crisis, Al Ain has grown to include Remedial classes and Accelerated Learning Program funded by UNHCR, Child Protection funded by UNICEF, Primary Healthcare and Mental Health funded by Medicines du Monde. In addition, a mobile clinic funded by the French Embassy covers 12 villages in the area of Masharia el Qaaand in the surroundings of El Ain.





Education

Amel aims to provide optimal access to education for all children affected by the crisis. For several years Amel has been implementing educational programs for Iraqi refugee children. Since the beginning of the crisis the Remedial programs have been opened up to include Syrian refugees as well. Amel, in partnership with UNHCR, has scaled up activities in the past six months to include an Accelerated Learning Program (ALP) in six centers.

Situation

Last August, a total of one million Syrian refugee children have become refugees. According to UNHCR estimates, over half of the Syrian refugees are under 18 years old. These children have often been unable to go to school for a long period of time because of war and displacement. In addition to this lack of education, they often suffer from depression, anxiety, and behavioral problems due to the hardship they have faced and continue to face. For these children, 15
a safe and protective environment to learn is a necessity.

Education Sector Highlights

- 10100 Syrian refugee children will benefit of enhanced access to public education within the framework of the 2013 Back to School campaign
- Amel is providing Remedial and Accelerated Learning classes in 9 centers in the Bekaa, South Lebanon and Beirut
- More than 800 boys and girls are enrolled in the Accelerated Learning Program and 1470 children benefit of Remedial classes all over Lebanon

A generation is in danger of missing out on education which increases their vulnerability and diminishes future possibilities. To be able to take full part in society and build a strong and stable Syria in the future, education is essential.

However, there are several and severe difficulties in providing education to refugee children. Two rapid needs assessments conducted by Amel in Beirut and Mount Lebanon area (Haret Hreik and Bourj al Barajneh) last April and June have shown that only half the children that went to school in Syria are continuing to receive some form of education after their displacement. One of the main obstacles named by the respondents was financial constraints (49%). Schooling is mostly free in Syria, and even though there are public schools in Lebanon they are not that numerous. Public schools still require payment of some fees and refugee families usually have several school aged children. Financial constraints can make parents decide to send kids to work instead of going to school to be able to cover for basic needs.

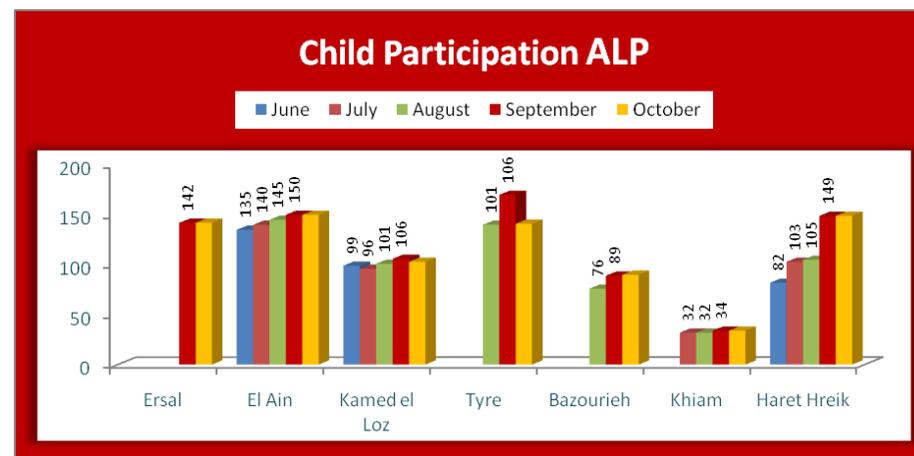
Issues of access to education account for a second major obstacle (16%). Children who are able to go to school face considerable issues as well. Over one third (38%) of respondents named language difficulties as the main obstacle, while 32% have problems adapting to the new curriculum: Lebanese schools differ from Syrian schools in their curriculum. While the Syrian schools teach in Arabic, Lebanese schools teach scientific topics in French and English, depending on the area of the school. Despite this situation and the schooling gaps among Syrian refugee children, only 18% of them have access to Remedial classes.

The Lebanese Ministry of Education has for the second year agreed to open up public schools for refugee children. However, capacity is limited to 300,000 Lebanese children enrolled whereas an estimated 550,000 refugee children will be in need of education at the end of 2013. In accordance with the Ministry of education, the capacity of 70 public schools will be enlarged by installing a 'second shift' in the afternoon for the year 2013-2014 creating an estimate of 210,000

extra places.⁵ While this increases school capacities, it also doubles the costs in teacher salaries and administration for the Lebanese government who is already facing financial difficulties.

Amel Response

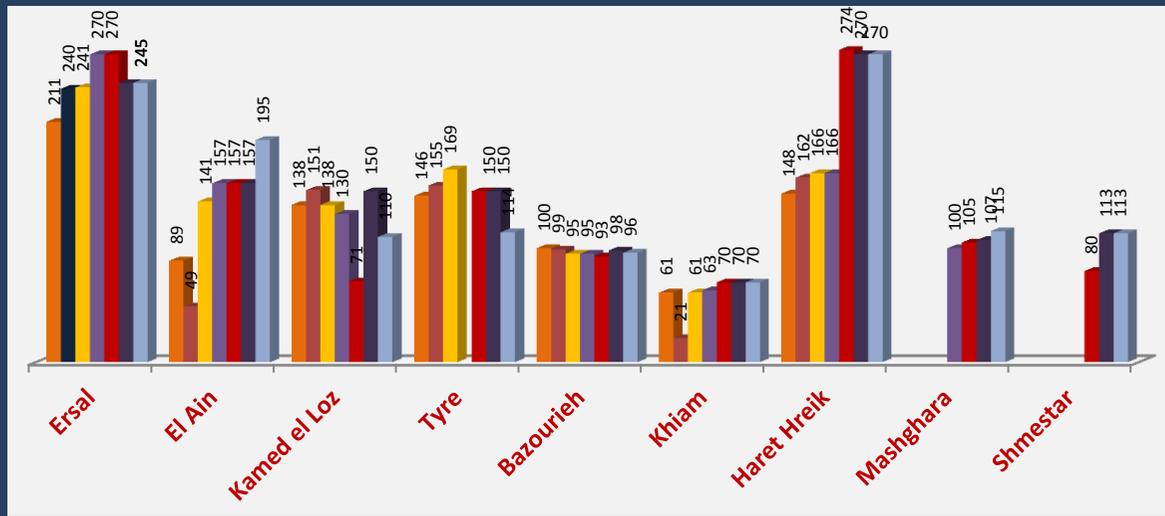
The ALP is provided to children who have been out of school for an extended period of time. In this program, children enroll in classes in Arabic, English, French and Mathematics. The program enables out-of-school children who newly arrive in the middle of the school year to access education and prevent them from further lagging behind. Amel works together with public schools to coordinate with parents and ensure that children get enrolled in school. A total number of 840 children have taken part in the ALP in the centers in the Bekaa (Ersal, El Ain, Kamed el Loz), South Lebanon (Tyre, Bazourieh, Khiam) and Beirut (Haret Hreik).



⁵ Education UNHCR monthly update. August 2013.

Child participation - REMEDIAL

■ April
 ■ May
 ■ June
 ■ July
 ■ August
 ■ September
 ■ October



In addition to the ALP, Amel provides Remedial classes to those enrolled in school to enable them to cope with difficulties and prevent them from dropping out. Together with after school classes, Remedial classes respond to the educational needs of refugee children. A total of 1424 children have participated in remedial classes in the past six months in centers in the Bekaa, South Lebanon and Beirut. Amel has scaled up its remedial teaching activities in the past six months, now offering classes in the Mashghara center in Bekaa as well.

Last summer, these classes were replaced by a summer school. Students show great improvement in their writing and language skills. The children are very enthusiastic about the classes and they love to attend. Children often live far away from the centers and the costs of transportation form an obstacle to class attendance. The provision of transportation by Amel has proved to increase attendance rates for Remedial classes greatly.



Remedial classes in Kamed el Loz

Amel teachers

Farah and Soha have been working as teachers at Haret Hreik for five years, first with Iraqi refugees and since 2012 mainly with Syrian children. They say: *“Working as a teacher here is much more than just teaching. The kids have seen horrible things and they are very sensitive. Working with them is an experience and it teaches us as well. We feel like we are not only teachers, but a family.”*

Amel contributes to social cohesion amongst the host and refugee communities present in the country. The teachers recall: *“We make them sit next to each other and deliberately mix the group. Sometimes they don’t want to be mixed and it’s like a small world war in the class. But after some time they start to work together and help each other out.”*

The educational programs of Amel have a positive impact on the children attending the classes. Not only Syrian refugees can participate, the programs are open to Iraqi, Palestinian and Lebanese nationals amongst others.

To overcome issues of access to public schools Amel works together with the Lebanese Ministry of Education, Caritas and Save the Children to implement the UNHCR Back to School program in the Bekaa and South Lebanon. The aim of Amel is to enable enrolment in public schools for 10,100 children by providing information to parents about registration in schools, reimbursing school fees, and providing vouchers for school uniforms and a school bag with utensils. Amel's field education officers reach out to schools in both regions and coordinate in order to facilitate enrollment of as many children as possible.

Challenges

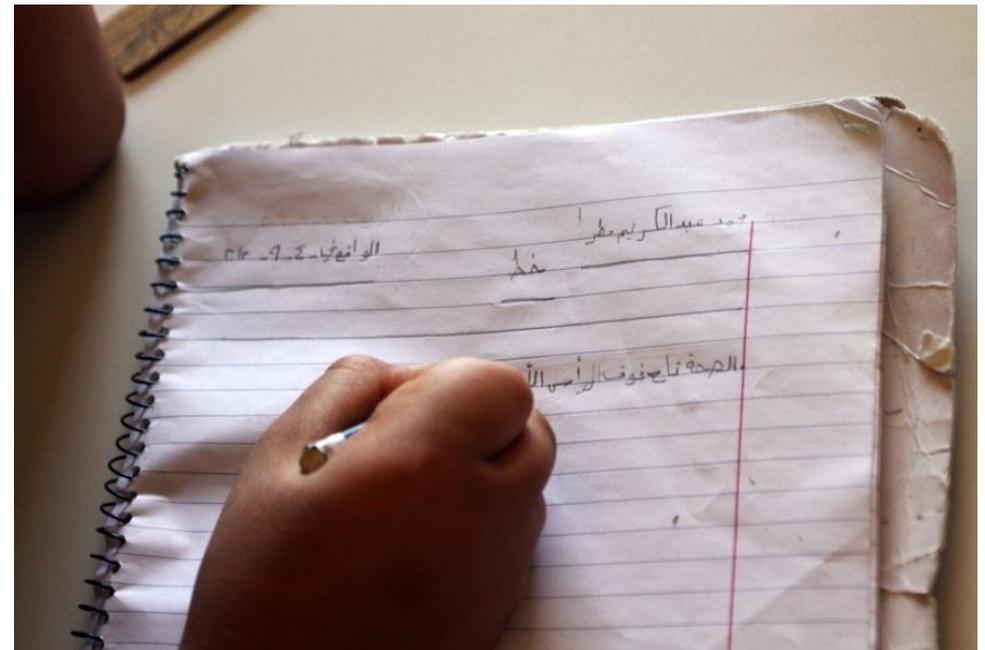
The enormous percentage of children amongst the refugees account for a high demand in educational services. Some centers struggle to be able to offer a place in the Remedial or ALP classes to all the children and have to work with a waiting list. In addition, children often live far away from the centers and have difficulties reaching class. Amel has started providing transportation services, but additional logistical support is needed as demand is much higher than places available. Furthermore, children using transportation provided by Amel are in need of accident insurance.

The children that are enrolled in one of the educational programs in the Southern suburbs of Beirut suffer from the deterioration in security and the increased presence of checkpoints. These security measures were taken after two car bombs exploded in summer 2013, causing dozens of deaths and wounded. However, these checkpoints feed insecurity amongst refugees and increase sectarian tensions.

Due to the often bad living condition of refugees, childhood communicable diseases such as lice and scabies have emerged at the centers. This has caused large numbers of children to miss classes. Extra measures, such as vaccination and health and hygiene awareness sessions, have been taken to prevent the outbreak of such diseases and to make sure the centers do not get affected.

Amel Planning

The Back to School campaign has started in September 2013 and will continue to enable children to enroll in public schools in South Lebanon and the Bekaa until the end of the year. However, chances are that not all school aged children will be able to secure a place in a first or second shift in a regular school. Amel is planning to extend the educational programs in schools for those children. In addition, Amel will start providing ALP to children in Shmestar.





Interactive storytelling in Bourj al Barajneh

Child Protection

Amel aims to improve the psychosocial wellbeing of the Syrian refugee children and vulnerable Lebanese children and their caregivers. Safe spaces where children can relax and play are just as important as shelter and education. Amel has a long experience implementing child protection programs ranging from recreational activities and psychosocial support to rights education and protection against violence.

Situation

The majority of refugee children in Lebanon suffer from trauma because of war. They have often witnessed horrible events, and have to daily deal with the consequences of displacement. Memories of death and violence, loss or injury of family members, friends and neighbors, and living in constant fear cause severe stress and anxiety.

The children who suffered these situations have difficulties overcoming their traumatic experiences. The precarious conditions they live in after displacement leave little space to express themselves. However, parents often do not let their children go out because of security concerns, not finding safety despite their flight. These children are at risk to carry the scars of war for the rest of their lives. Emotional and physical problems can persist and increase the possibilities of perpetual violence in the region when not properly addressed.

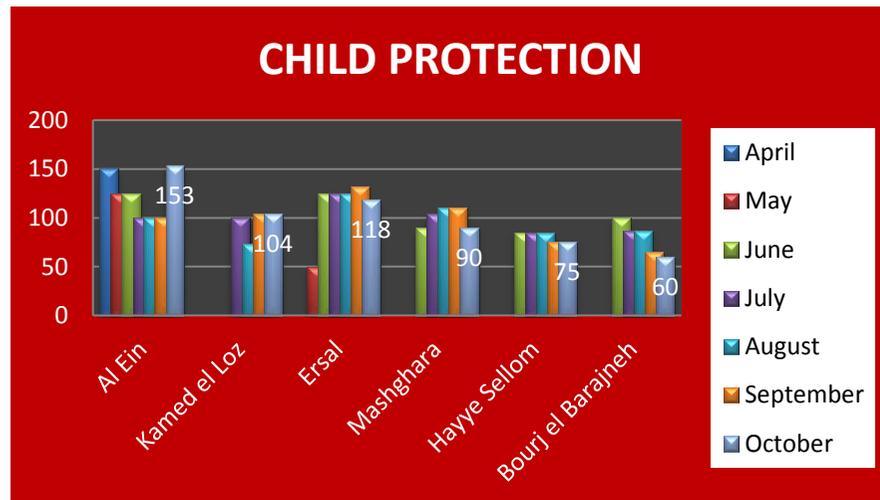
Child Protection Highlights:

- Child Protection is provided in six Amel centers in Beirut and Bekaa
- 684 children have benefited from regular Child Protection activities
- Community events are organized for both refugees and the host community

Amel response

Previously, in coordination with UNICEF, Amel has implemented a Child Protection program in El Ain and Kamed el Loz centers in the Bekaa. In the past six months, Amel has extended the program to include two more centers in the Bekaa (Ersal, Mashghara) and two centers in Beirut and Mount Lebanon (Hay el Sollom and Bourj el Barajneh). These centers have child friendly spaces in which protection, psychosocial wellbeing, and non-formal learning can be addressed. Here, the children are able to play and benefit from social support while their parents receive awareness sessions on child related topics.

Psychosocial support is provided through the organization of activities for adolescents, children and adults. These activities include awareness sessions on a range of topics such as hygiene, environment, child's rights, puberty, recycling and respect. These sessions are often given in a creative way using handicrafts, singing, playing, discussions, exercises, theatre play, storytelling, and drawing. Animation sessions help the children relieve stress and art therapy sessions enables them to deal with atrocities they've lived through in a relaxed and creative way.



Through a referral mechanism, home visits are conducted to identify vulnerable persons in need of counseling. Counseling sessions are provided through parents and children that face difficulties at the center or at school. Among the most common cases are bullying, aggression, domestic violence, car sickness, behavioral problems, low self-confidence, being shy or hyperactive, fears due to the war in Syria and loneliness were reported. Children who are most in need can be referred to a psychologist.

Challenges

As already mentioned in the Education section, several incidents in the country and in the Southern suburbs of Beirut in particular have resulted in fear among both Lebanese and Syrian refugees. Parents are concerned about the security of their children and will prefer to keep them at home as much as possible. Apart from the general deterioration of the security situation, individual cases like harassment of children in the street, domestic violence, early marriages and child labor are affecting the development of the children and the implementation of activities.

Amel Planning

Amel is planning to enhance the child protection programs and better adapt them to the needs of the children. Since the start of the new school year there has been increased demand to include a learning component in the Child Protection program. Non-formal learning elements will be included in the recreational activities to enhance children's skills in foreign languages. In addition, spaces in which children can do their homework will be provided, as living conditions at home are often not suitable to study in.



Livelihoods and Social Cohesion

Amel is working to promote decent standards of living and is currently implementing programs to improve the social and economic condition of vulnerable women and men across Lebanon. This translates itself in trainings and entrepreneurship sessions to create opportunities for development. Since the onset of the Syrian refugee crisis in Lebanon, Amel has supported youth and female refugees in rebuilding their livelihoods.

Situation

For the past decade Lebanon has been facing high rates of unemployment and limited livelihood opportunities. The current crisis in Syria has put immense pressure on the Lebanese economy and has brought it to a breaking point. The political instability and lack of action to reactivate the economic growth has led thousands of people to despair. The massive influx of refugees, who left their country of origin often without any possessions, have entered in competition with the local community for low skilled jobs, strongly disrupting the job market and producing a high rise in prices of rent, goods and services.

In order to deal with the current situation, some refugees have engaged in livelihood activities that are illegal, like smuggling or prostitution and many have been forced to keep their children out of school and send them to work. The lack of work opportunities and the difficulty in providing for their families makes them rely heavily on insufficient humanitarian aid.

Livelihoods and social cohesion Highlights:

- More than 200 women and youth are benefiting from income generating activities
- 450 young women and men are benefiting from technical and vocational training
- Amel enables women to market their products

Youths represent 20.8% (15-24 years old) of the Syrian refugee population and they are the most at risk of adopting bad coping mechanisms in the absence of programs targeting them directly to help them build their resilience capacities. Most of the young Syrian refugees haven't attended school properly in Syria for the past two years and many have dropped out of school in Lebanon.

According to the information available, including NGOs assessments, the majority of young Syrian refugees in Lebanon are unemployed. The employed minority is mostly working in unskilled labor. Moreover, it has been noticed that when jobs are being offered they are exploitative in many cases and involve huge amounts of extra hours, unpaid or not well paid. Syrian refugee youth are unable to improve their situation as they lack the professional capacities to do so and even if they benefit from vocational or other professional/technical training, the integration opportunities are very limited. Young women face even greater difficulties in engaging in a professional experience because of traditional family restrictions. Many girls/women (particularly those originating from rural areas) are not encouraged to work and are preparing to get married. They are also easily targeted by gender-based violence.

Amel response

Amel has included Syrian refugee youth and women in its livelihood activities in Beirut area, namely Haret Hreik and Ain El Remmaneh. Currently, 450 Syrian refugee youth are benefiting from Technical and Vocational training in the field of computer/cell phone maintenance, hairdressing and make-up. In order to improve their chances of being employed, they are also receiving life skills trainings such as time management, CV and cover letter writing, communication and conflict resolution. Amel is permanently in contact with potential employers and trainees are supported to obtain a work-related experience, either by internships, apprenticeships or community services. These particular actions are directly empowering youth notably at the social level and create links between the two communities, helping to alleviate tensions and to improve social cohesion.

In Ain El Remmaneh center, Syrian refugee women are participating in handicraft activities and are received marketing trainings in order to be able to commercialize their products. Trainings also include computer usage, languages, leadership and business management.

Young beneficiaries of the program express satisfaction about the services provided and consider these activities as a precious first step in their life.

Story from the field

Younes (21) is a young Syrian refugee who arrived in Lebanon in 2012. He participated in the vocational training provided by Amel center in Haret Hreik. With the support of Amel he has been able to become an apprentice in a hairdressing salon. When he has the time and opportunity he returns to the center to gain more knowledge and participate in additional trainings such as computer literacy and English language.



Beneficiary from Ain el Remmaneh:

"When we come to Amel we deal with colors that transmit life. These colors are different from the colors of death and war that we used to see in our home country"

Challenges

Building livelihood opportunities for youth and women, both from the refugee and host communities, should be a main priority for the actors present in the field. A more developmental approach has to be adopted in order to grant these people with opportunities for building their future, as this is a crucial age for them choosing their professional path and advancing in their career. However, Syrian refugee youth are facing major difficulties in accessing employment or training in Lebanon, which severely compromises their future livelihoods. They should not wait for the end of the crisis to developing their professional skills, as this is a pre-condition for their empowerment and for the reconstruction of their country when the time will come. A similar situation applies also to the Lebanese youth, as the Syrian crisis is incontestably affecting their access to work and development opportunities.



Amel planning

Amel is placing particular focus on developing future livelihood projects dedicated to Syrian refugees and Lebanese host communities youths and expand them on the territory. In this sense, Amel will shortly start a project of empowerment for these target populations through vocational training and work opportunities in North Bekaa, Southern suburbs of Beirut and South Lebanon, supported by the European Union. Amel is studying the market in order to identify new work opportunities and will adapt the program according to the outcomes.

Haret Hreik Center

The Amel center in Haret Hreik was opened in February 2009 in partnership with Save the Children Sweden. At that time it was working with Iraqi and Sudanese refugees and Lebanese beneficiaries. Now it has grown to be one of the most active centers in the response to the Syrian refugee crisis. The center is located in Mount Lebanon, the Southern suburbs of Beirut, in Baabda district.

The center receives daily 800 to 1000 refugees; adults, children and youth, who participate in a broad range of activities such as:

- Education: Remedial classes and Advanced Learning Program in English, French, Arabic and Sciences;
- Recreational activities: sports, yoga, music, chess, dance, outings;
- Technical and Vocational training: computer trainings, graphic design, hairdressing, make-up.
- Psychosocial support: awareness session on various topics such as emotions, conflict management and health.



Partners

Amel wishes to thank its partners for their collaboration:



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