



Agenda

I. LRP Update:

- LRP 2025 Overview
- o Timeline

2. Update on the US Funding

3. HSM Presentation and Discussion on Extension Proposal

4. AoB

- Update on Contingency Planning Exercise for influx from Syria to Lebanon
- Reporting Calendar
- Calendar of Deadlines for Sector Coordinators

Action Points

Follow Up

Meeting	Action Point	Status
31-Jan-25	Sector Coordinators to conduct capacity assessment for new partners. Deadline: Wednesday, 5 February 2025 COB.	Ongoing
17-Jan-25	Sectors to submit their LRP 2024 EoY Sector Dashboards. Deadline: by 24 January 2025.	Ongoing
17-Jan-25	Sectors to submit their LRP 2025 Annual Workplan. Deadline: by 31 January 2025.	Ongoing
17-Jan-25	Sectors to submit their LRP 2025 Working Group and Core Group ToRs. Deadline: by 28 February 2025.	Ongoing
17-Jan-25	ISCG Co-Chairs to prepare and share a brief document outlining findings from the Lessons Learned Exercise. Recommendation: ISCG Co-Chairs to note the findings of the Lessons Learned Exercise that participants provided feedback at National-Level.	Ongoing
17-Jan-25	ISCG Co-Chairs to provide guidance in the form a document on cross-sectoral opportunities and interventions that can be implemented in 2025.	Ongoing
17-Jan-25	Sectors that developed Protection Risk Analysis to liaise with Protection sector for revision and to reach out to IS Co-chairs for any additional guidance.	Ongoing
17-Jan-25	ISCG Co-Chairs to prepare and send an email for Partners to include a paragraph on protection risk analysis in their reporting. Recommendation: ISCG to explore adding a tab on ActivityInfo to allow partners to input protection risks (only for sectors that conducted a protection risks analysis).	Ongoing
10-Jan-25	ISCG Co-Chairs to share updated reporting calendar.	Ongoing
10-Jan-25	Social Stability, Education, and Protection (incl. CP) to meet and coordinate on awareness raising and other activities related to UXO.	Ongoing
I-Nov-24	The Access Working Group will conduct further analysis of access constraints to inform the identification of hard-to-reach areas as the situation evolves.	Ongoing

January 2025



LRP Update

Elena Ferrari, Senior Inter-Agency Coordinator (UNDP)



Overview for 2025 LRP

Elena Ferrari, Senior Inter-Agency Coordinator (UNDP)

Strategic Objectives



Provide immediate humanitarian assistance to vulnerable populations to ensure critical needs are met.



Ensure protection of the vulnerable populations.



Support service provision through national systems including national rapid response capacity

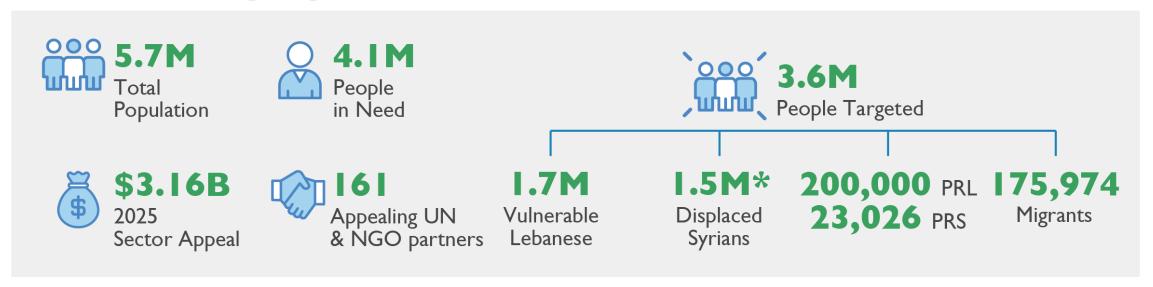


Reinforce Lebanon's economic, social, and environmental stability.

16 October 2024 the LRP 2024-2025 was endorsed by the LRP Steering Committee

Planning Figures

2025 Planning Figures



^{*}The number will be revised down to 1.4M in light of ongoing population movement by the first quarter of the year.

Funding

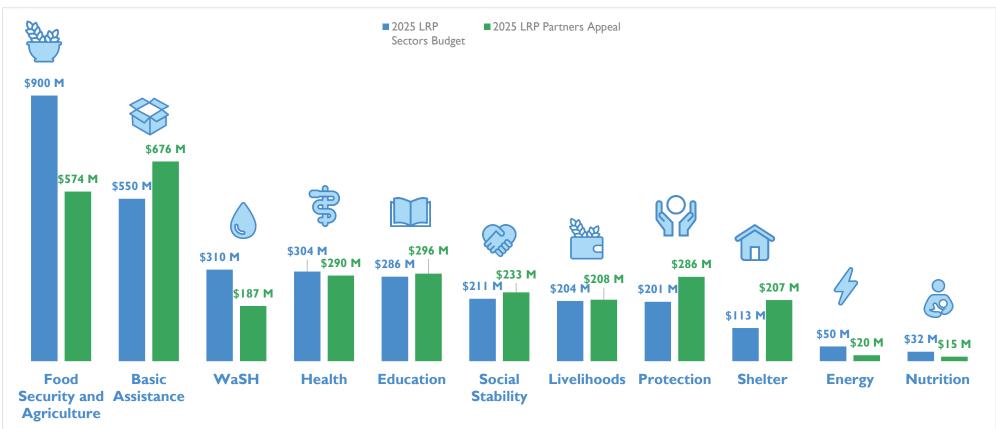
2025 Funding Requirement by Sector (US\$)



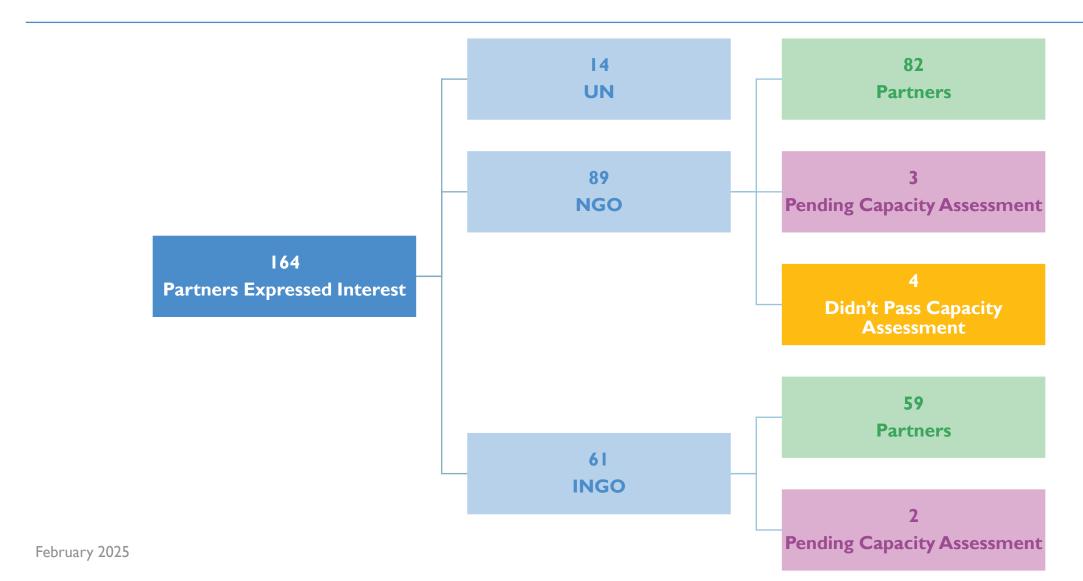
Total funding request



Total funding appeal

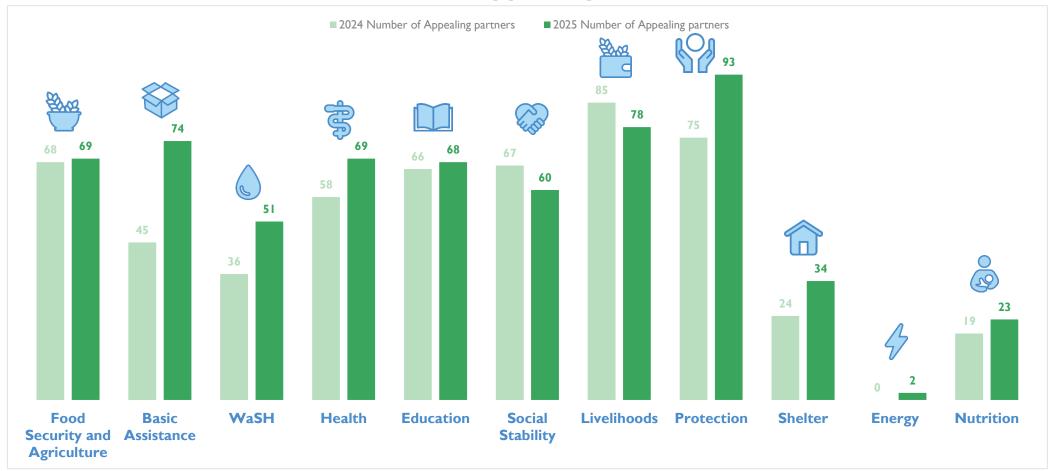


Partner Appeal: Data as of 7 February 2025



Number of Appealing Partners: Data as of 6 February 2025

Number of Appealing Partners



Population Targets

2025 Population Targets by Sector

Sectors	People Targeted	Vulnerable Lebanese	Displaced Syrians	PRL	PRS	Migrants
Basic Assitance	2,636,042	1,142,102	1,261,355	162,000	23,026	35,189
Education	981,531	571,653	349,800	50,508	6,177	3,393
Energy	1,140,000	855,000	285,000	0	0	0
Food Security and Agriculture	2,595,205	1,142,102	1,261,355	104,500	12,031	75,217
Health	2,491,343	1,098,220	1,260,000	20,000	23,026	90,097
Livelihoods	76,701	65,483	10,651	307	260	O
Nutrition	923,617	658,870	218,798	22,770	2,854	20,325
Protection, Child Protection, GBV	1,502,655	516,395	856,533	59,052	19,206	44,969
Shelter	613,908	195,975	382,600	24,500	3,145	7,688
Social Stability	3,502,685	1,603,712	1,500,000	200,000	23,026	175,947
⊘ WaSH	2,325,666	1,693,666	570,000	40,000	12,000	10,000



Timeline

Elena Ferrari, Senior Inter-Agency Coordinator (UNDP)

2025 LRP

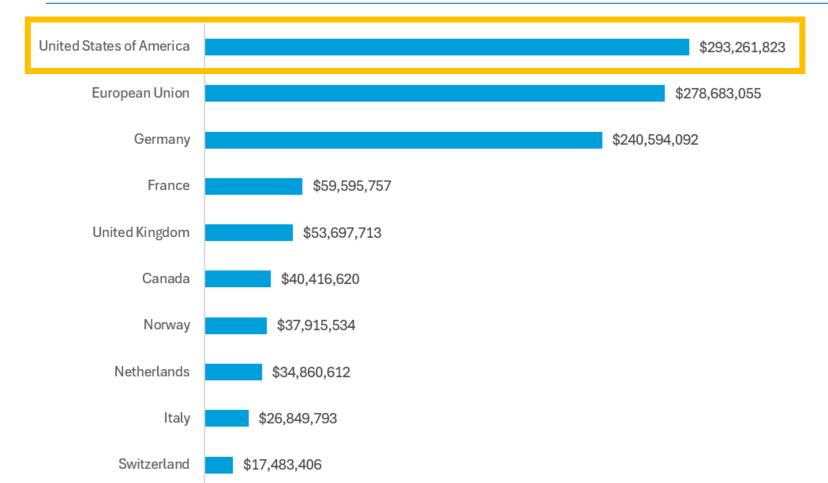
Timeline (Indicative)

Timeline	Planned actions
Ongoing	Revision of 2024 EoY dashboards and logframes and main results by sectors
Early February	ISCG Preparedness Plan
II February	Joint Task Force Meeting (Sectors at deputy level, donor focal points and technical focal points for line Ministries)
Mid-February	ISCG Contingency Plan
Second half of February	Light Lessons Learned for OctDec. 2024 response and preparedness Circulation of finalized LRP 2025
End of QI	Revision of strategies (new GoL, end of CoH, Suspension of US funds, additional data) Publication of the 2025 LRP Updated BCP



Rawad El Zir, Head of Coordination (OCHA)

Top Ten Donors in 2024 – LRP & FA



^{*}Funding data is based on Lebanon Aid Tracking data up to 16 December 2024.



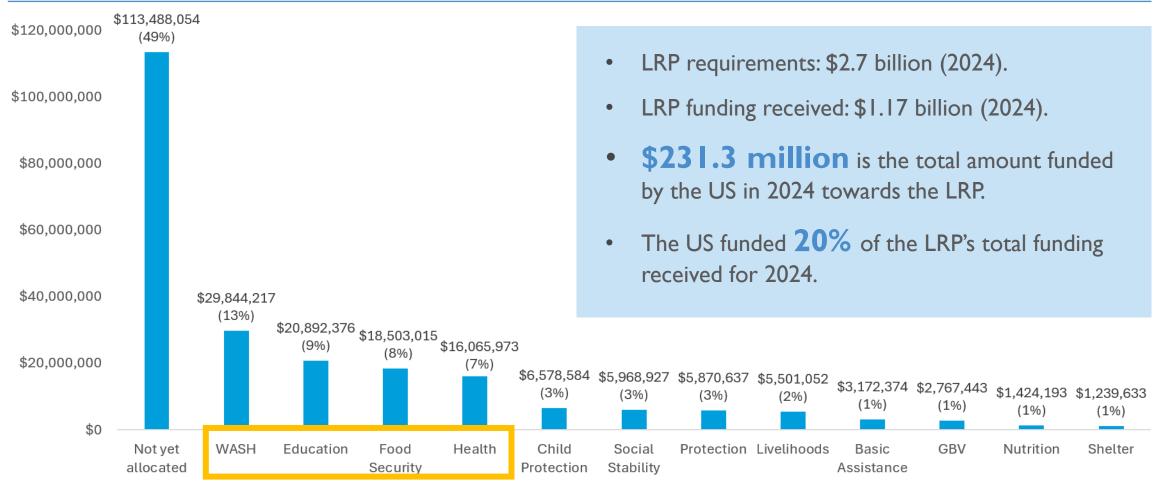
\$1.33 billion

Total funding received by donors in 2024



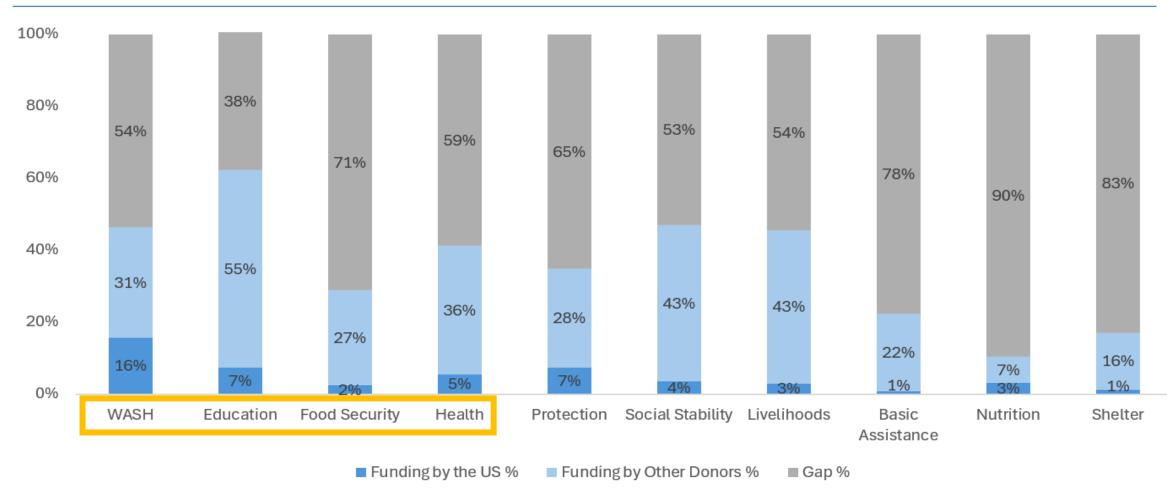
- The United States of America is the top donor in Lebanon – funding \$293 million in 2024
- (and an additional \$65 million committed)
- but yet to be reported to LAT)

LRP Funding by the US Across Sectors in 2024



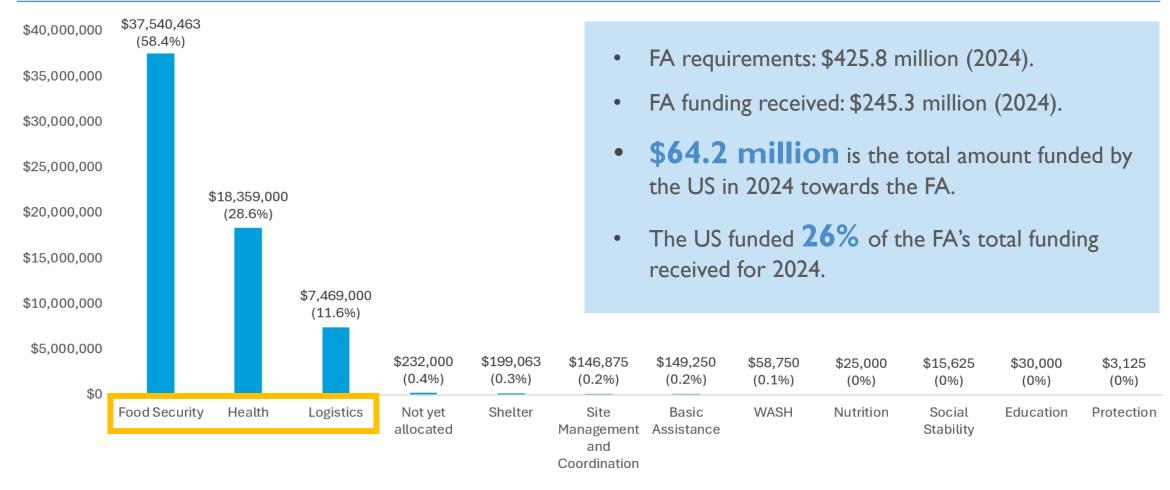
^{*}Funding data is based on Lebanon Aid Tracking data up to 16 December 2024.

LRP Funding Received vs Gaps Across Sectors 2024



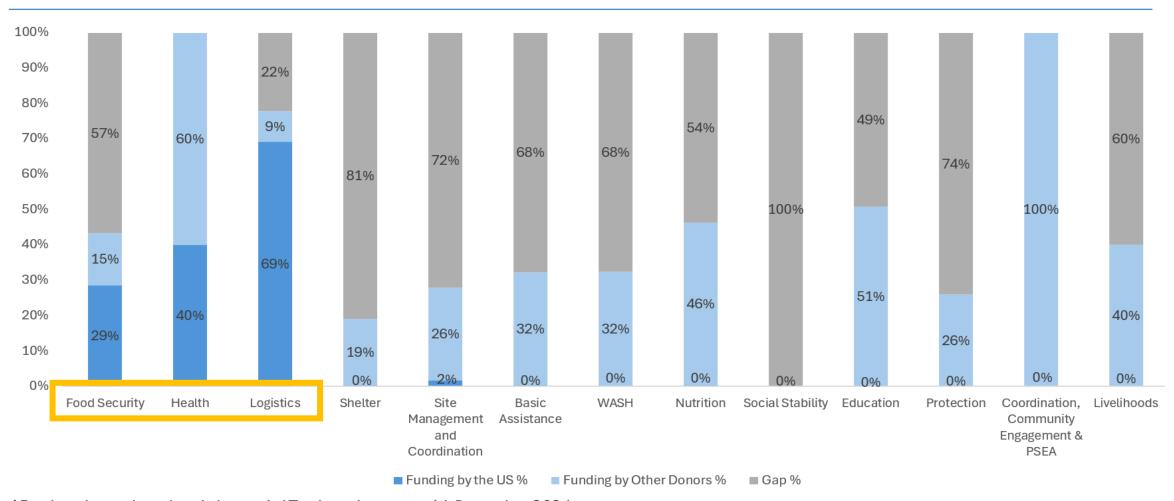
^{*}Funding data is based on Lebanon Aid Tracking data up to 16 December 2024.

FA Funding by the US Across Sectors in 2024



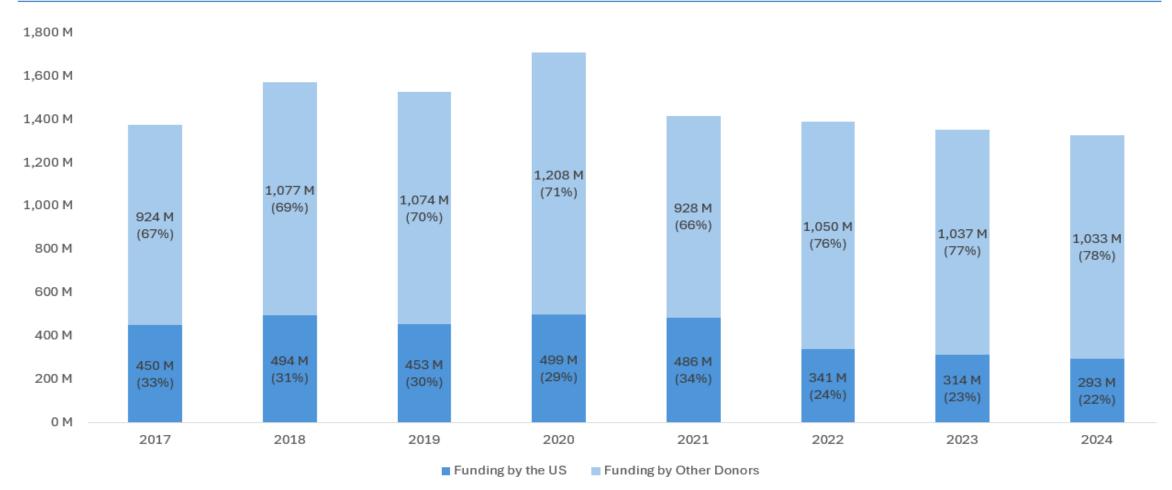
^{*}Funding data is based on Lebanon Aid Tracking data up to 16 December 2024.

FA Funding Received vs Gaps Across Sectors 2024



^{*}Funding data is based on Lebanon Aid Tracking data up to 16 December 2024.
** Health sector's funding received % is based on the total funding received, as funding received exceeded 100% of the sectoral requirements. February 2025

Donor Funding Share 2017 - 2024



^{*}Funding data is based on Lebanon Aid Tracking data from 2017 - 2024.

Impact of US Foreign Assistance Suspension



WASH

- I70,000 Syrian refugees living in Informal Settlements will stop receiving WASH services, including life-saving water trucking, life-saving desludging, repair and maintenance of facilities etc (85% covered by US).
- Nearly 36% of all funds received by WASH in 2024 were from the US.
- Unsafe drinking water, poor sanitation and inadequate hygiene may lead to an increase in water-borne diseases such as **cholera outbreaks** and an increase in tensions between communities.
- 12 partners impacted: 2 UN, 8 INGOs and 2 NNGOs.



Food Security

- **758,523** out of 1,943,055 people will not receive assistance this month (cash or in-kind). This includes 570,000 Syrians, 170,000 Lebanese, 18,523 Palestinians and other population groups.
- \$89 million in funding impacted.
- 5 partners received stop-work orders (SWOs): 2 UN and 3 NNGOs.



Education

- Over 400,000 children are at risk of losing access to education support.
- The SWOs affect retention support, cash for education for Lebanese and other vulnerable groups, non-formal education initiatives and integrated services for Syrians.
- \$16m in funding impacted; 5 out of 7 partners received SWOs.

Impact of US Foreign Assistance Suspension



Health

- Reduced access to comprehensive **primary health care** (subsidized consultations at 35 PHCCs & PSUs), reduced access to **hospital** and advanced referral care (pre-hospital care at 20 EMS stations) and reduced ability for **emergencies**, outbreak, and infectious diseases preparedness and response.
- The suspension will deepen health inequities and place additional burdens on already disadvantaged groups.
- 7 partners impacted: 3 UN, 3 INGOs and 1 NNGO.



Protection (including GBV and CP)

• Most protection/GBV/CP activities affected including GBV and CP case management, MHPSS, safe spaces, legal aid activities, targeted assistance for persons with specific needs, emergency cash assistance (ECA), trainings etc.



Social Stability

At least 12 mine action teams stopped working impacting at least 1,000 persons per month, increasing risk of accidents and deaths.



Livelihoods

- Impact on livelihood opportunities (e.g. access to jobs, MSMEs) could lead to an increase in social and economic tensions
- 7 livelihoods partners have been affected.

Impact of US Foreign Assistance Suspension



Basic Assistance

• Discontinuation of MPCA programmes to cover essential goods and services and provision of core relief items.



Nutrition

- Nutrition and ECD programmes for **50,000 children** under 5 years of age and **30,000 pregnant and breastfeeding women** affected, leaving malnourished children and pregnant women at higher risk of morbidity and mortality.
- At least 3 INGOs impacted.



Shelter

- An estimated **4,000 individuals** will not be supported with **cash for rent** to mitigate their risk of eviction.
- Over 2,000 individuals will continue to live in substandard urban shelters.
- At least I UN, I INGO and 2 NNGOs impacted.



Site Management and Coordination

854 individuals living in remaining open collective sites will likely be impacted.



Coordination (Assessments)

Insufficient funds to carry out assessments: REACH will not be able to carry out **LENA** and IOM's DTM will not be able to continue its weekly **Mobility Snapshot** and upcoming intention survey.

Mitigation Measures

Cross-Sectoral

- Seek **new funding sources** and leverage existing donor networks.
- Explore co-financing opportunities with the Government of Lebanon.
- Geographic **prioritization** of resources to sustain the most critical services/activities.
- Increase collaboration to enable more multisectoral responses.
- Increase **localization** to further reduce costs and increase reach.
- Further utilization of cash assistance over in-kind support, to increase cost efficiency.
- Map affected services at subnational level for critical activities to be **referred** to non-affected actors.
- Reduce assessment cost by having one common assessment to be used by all partners.

Mitigation Measures

Sector-Specific

- WASH: Prioritize areas/informal settlements for service provisions based on the water-borne diseases risk map and water-related tensions index.
- Food: Reduce assistance to reach more people in need.
- **Health: Internal reprogramming** (already conducted by 2 partners); suspend new external hiring; expand remote mental health services and facilitate GP referrals; group therapy.
- **Protection: Transfer of case management activities** wherever feasible; some partners requested waivers from PRM for life-saving activities.
- **Shelter:** Limited mitigation measures as the sector is only 17% funded. Suggest coordinating with other sectors to explore **temporary assistance mechanisms** such as emergency cash assistance or alternative service provisions.
- Nutrition: Limited mitigation measures as the sector is only 10% funded. Suggest integrating critical nutrition interventions into ongoing programmes of other sectors.
- Basic Assistance: apply stricter targeting.

Key Asks

- Engage with the **government at a high level to advocate with the US** on the implications of the aid suspension.
- **Diversify funding sources** through donor engagement including with non-traditional donors and the private sector.
- Advocate for an increase in LHF/CERF allocation, considering key gaps.
- Examine flexibility in existing funding and reprioritize around the most critical gaps.
- Request the HCT's support in facilitating engagements with donors through organized funding roundtables.
- Agree internally on common messages to be communicated with authorities.



HSM Presentation and Discussion on Extension Proposal

Clara Lefrancois, Country Representative (REACH)

Humanitarian Situation Monitoring

Presentation and Discussion on Extension Proposal February 2025

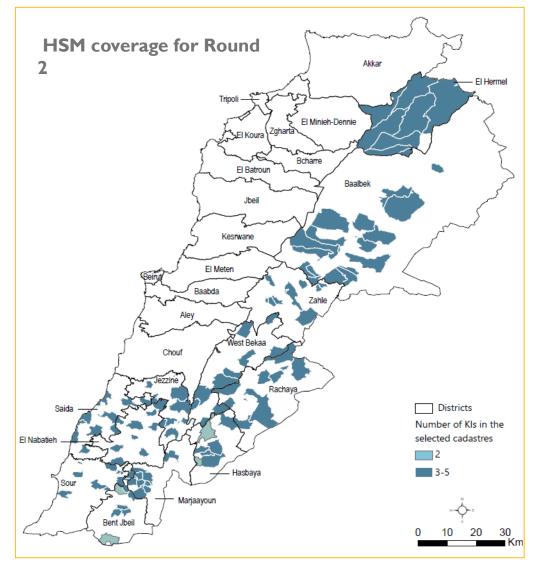






Humanitarian Situation Monitoring (HSM) Methodology

- Round I: November, 2024, Baalbek el Hermel & Beeka
 - Results available: Resource Centre | Impact
- Round 2: December 2024, Baalbek el-Hermel, Beeka, South & Nabatieh
 - Results from South & Nabatieh available: here
 - Baalbek el-Hermel & Beeka will be available later today.
- Round 3: Planned for February 2025:
 - Baalbek el-Hermel, Bekaa, Dahiye
 - 150-200 Kls per governorate (Bekaa, Baalbeck-el Hermel) or area (Dahiye)
- Methodology:
 - Quantitative, KI-level, structured, multi-sectoral questionnaire
 - Key informants: NGO workers, local authorities, community experts (doctors / teachers)
 - Provides a broad picture of the humanitarian situation at the governorate/area level, and analysis by key informant type



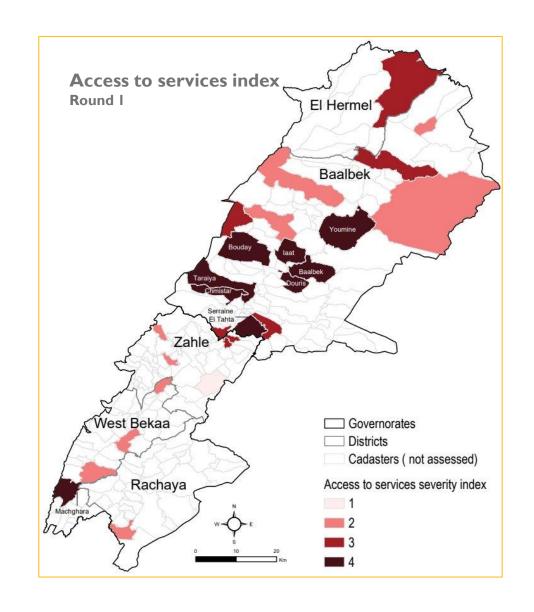
HSM – types of findings included in Rounds I and

- Damage Index: Reflects the proportion of reported damages across various sectors within the cadasters, as reported by different KIs
- Access to Services Index: Measures the proportion of access to essential services such as WASH, education, health, and markets.
- Access to Humanitarian Assistance Index: Evaluates
 the extent of access to humanitarian assistance and
 disruptions in access.
- More in depth information on: Barriers to access health services, livelihoods, cash and food, shelter damages, protection concerns

Index	Description of the index
I	Minimal/none, mostly cosmetic issues; fully functional
(Low)	Minor or no sectoral deprivation
2	Partial; Infrastructure remains functional but degraded
(Moderat e)	Borderline and Stressed sectoral deprivation
(High)	Severe; large portions non-functional, significant repair needed Elevated sectoral deprivations
4	Total or near-total destruction; infrastructure is non-
(Critical)	recoverable
	Extreme sectoral deprivations

Access to services index:

- Younine, Baalbeck and Bouday, scored 3 or 4, indicating high levels of deprivation in access to basic services such as WASH, healthcare, education, and markets. This is linked to significant damage to infrastructure and services in these regions.
- Only a few areas, including Zahleh El-Maallaqa and Kfarzabad, scored I, suggesting relatively good access and minimal deprivation in basic services.



Barriers to healthcare:

The main healthcare services reportedly experiencing disruptions included **access to medication** (PHC), **diagnostic services** (SHC), and **cancer treatment** (SHC). Some disruptions were also reported in ante-natal and post-natal services (PHC).

Barriers for Health Access	# of Cadasters (out of 29)
Lack of financial means - absence/reduction in incomes	18
Closure of health facilities due to its location in an unsafe area	12
Lack of financial means - unable to access available cash	П
Suspension of some health services at health facilities	9

Barriers to livelihoods:

The main barrier to accessing livelihoods was **related to insecurity**, and its prevalence decreased in the next round.

Barriers to accessing livelihoods	# of Cadasters (out of 29)
Difficulties accessing place of work (farmland, shop, workshop, clients' homes, etc) due to insecurity	22
Reduced demand for daily labor	16
Closure of workplace	15
Disruption to supply chains / reduced access to necessary inputs	8

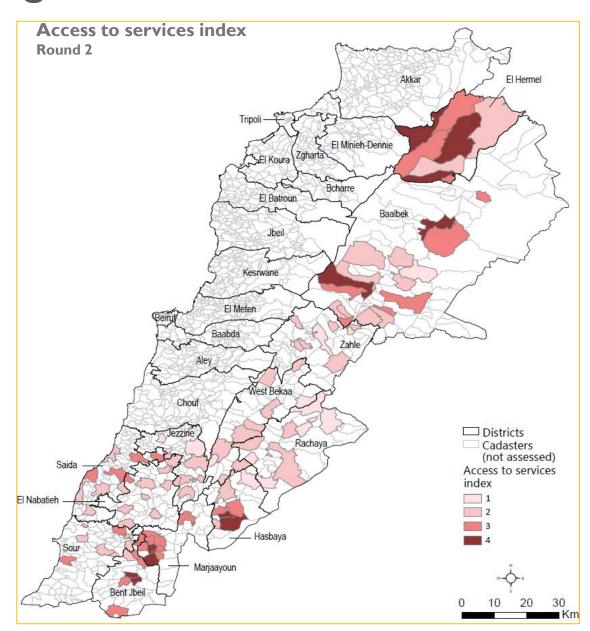
Priority needs

- Food needs: The most needed food items across the cadasters included cooking oil (18 cadasters), cash to buy food (16 cadasters), rice (11 cadasters), and bread and meat (6 cadasters).
- Health needs: The primary health needs reported were medicine for chronic diseases (25 cadasters), followed by healthcare equipment (15 cadasters), and first aid/emergency care (11 cadasters).
- Shelter needs: The most reported shelter needs across the cadasters were cash for repair materials and/or labor (6 cadasters), basic electrical items (wiring, switches, sockets) (4 cadasters), and roofing materials (2 cadasters).

Top Priority Needs	# of Cadasters (out of 29)
Food Support	25
Cash Assistance	23
Health Support	21
Heat Support	14
Shelter Support	4

Access to services index:

- Baalbeck-El Hermel (5 cadastres) and El Nabatieh (6 cadasters) governorates had high reports of deprivations that derived a high access to services index (score = 4). Notable areas include Kfar Hamam and Kfar Chouba in El Nabatieh, as well as Zighrine and Taraya in Baalbeck-El Hermel.
- Cadasters with high damage scores also reported elevated access-to-services index values, reflecting the compounded challenges these areas face due to widespread infrastructure damage and a high rate of returnees.
- In contrast, the **Bekaa governorate** reported the lowest service accessibility needs, with cadasters scoring index values of only I or 2. These scores indicate minimal to no severe unmet needs for basic services, highlighting a relatively stable service situation in comparison to other affected areas.



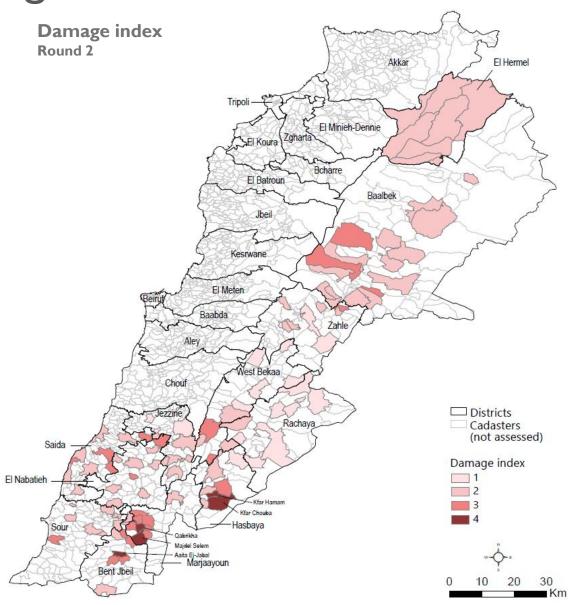
- The top reported healthcare needs included access to essential medications at primary healthcare centers (PHC) and specialized care for cancer treatment (SHC) across all governorates.
- In the South and Nabatieh regions (18 cadasters), there was a heightened demand for emergency and life-saving surgical interventions, including trauma care, as well as laboratory and diagnostic services.
- In Bekaa and Baalbeck-El Hermel, the priority healthcare needs centered on **primary** health consultations and medications for managing non-communicable diseases such as diabetes, hypertension, and cardiovascular conditions, along with acute disease management.

Barriers to Health Access	Bekaa & Baalbeck	South & Nabatieh
Increased prices of medications	27	28
Closure of health facilities due to damaged structure	23	3
Increased prices of healthcare services	23	28
Lack of financial means - absence/reduction in incomes	21	39

Barriers to Livelihoods Access	Bekaa & Baalbeck	South & Nabatieh
Reduced demand for daily labor	22	18
Closure of workplace	10	22
Damage to workplace or assets (including trucks, cars, etc)	9	27
Difficulties accessing place of work (farmland, shop, workshop, clients' homes, etc) due to insecurity	10	29

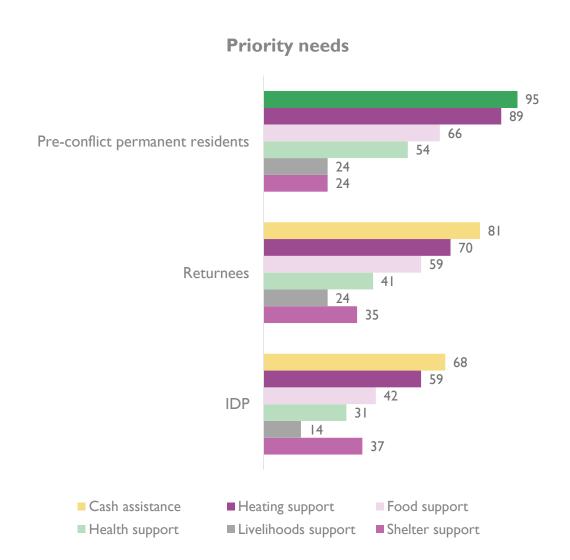
Damage index:

- Cadasters with a **damage score of 3**, indicating significant infrastructure damages and the need for major repairs, were identified in 3 cadasters each in Bekaa and Baalbeck, and 5 cadasters in South Lebanon.
- In South and Nabatieh, **5 cadasters reported a damage score of 4**, indicating total or near-total collapse of infrastructure. The affected areas include Aaita El Jabal, Kfar Hamam, Kfar Chouba, Qabrikha, and Majdel Selem, where critical infrastructure is extensively damaged and in need of comprehensive reconstruction.
- Cadasters with a low damage index (score = I) were primarily found in the Bekaa region, where I6 cadasters, including Rachaya, Kfarzabad, and Manara BG, experienced minimal infrastructure damage.



Priority needs:

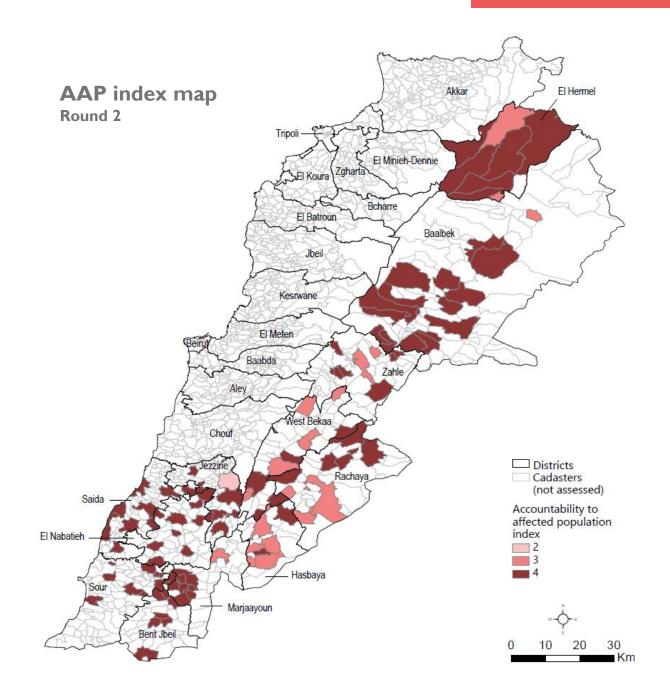
- Cash assistance, heating, and food support were identified as the top three priority needs across all population groups in the majority of targeted cadasters.
- For returnees and IDPs, shelter emerged as a critical need, while for permanent residents, livelihoods support was highlighted.
- Specific food needs included: **Rice** (40 cadasters), **Cooking Oil** (54 cadasters) and **Meat** (34 cadasters). In 56 cadasters, respondents indicated a general need for cash assistance to purchase food.
- Specific health needs included: Medicine (85 cadasters), Healthcare
 equipment (38 cadasters) and Health care professionals in hospitals (23
 cadasters).
- Specific shelter needs included: Cash to pay for repair (63 cadasters),
 Window & door frames (34 cadasters each) and Basic electrical items such as wiring, switches, sockets (8 cadasters)

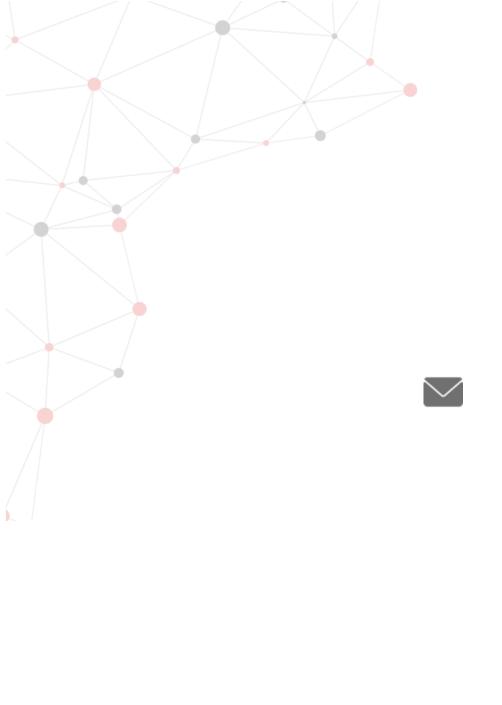


HSM - Next round

• 3rd round

- February
- Key informant level data collection
- Baalbeck el Hermel, Bekaa, Dahiye





Q&A

clara.lefrancois@impact-initiatives.org











AoB(I)

Update on Planning and Preparedness

Post Cessation of hostilities

- Meeting held with national ISCG Sectors on 17 January regarding the above planning scenario.
- Draft preparedness plan is being reviewed by Sectors and ISCG aims to finalize inputs at the national level and then will be shared at sub-national level for review/inputs.

Influx from Syria to Lebanon

- Meeting held with national ISCG Sectors on 31 January regarding the above planning scenario.
- Draft preparedness plan in development and will be shared with national ISCG Sectors for review/inputs before sharing with sub-national ISCG.

AoB (2)

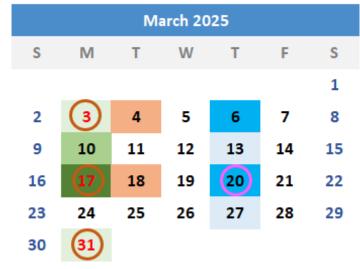
Overall Reporting Calendar

Inter-Sector 2025 Reporting Calender



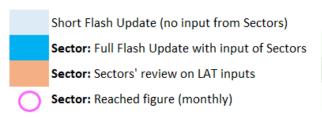
January 2025						
S	M	Т	W	Т	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

February 2025							
S	M	Т	W	Т	F	S	
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2	3	4	5	6	7	8	
9	10	11	12	13	14	15	
16	17	18	19	20	21	22	
23	24	25	26	27	28		



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Deadline FA 2025 reporting framework set up (by Sectors/Clusters)



Partner: Lebanon Aid Tracking (bi-weekly)

Partner: ActivityInfo for LRP (monthly reporting)

Partner: ActivityInfo for LRP (monthly verification) AND Flash Appeal (bi-weekly)

Partner: Activity.Info for Flash Appeal ONLY (bi-weekly)

Y Partner: CS reporting (IDP) (bi-weekly)

AoB (2)

Partners Reporting Calendar

Inter-Sector 2025 Reporting Calender



January 2025							
S	M	Т	W	Т	F	S	
			1	2	3	4	
5	6	7	8	9	10	11	
12	13	14	15	16	17	18	
19	20	21	22	23	24	25	
26	27	28	29	30	31		

February 2025						
S	M	Т	W	Т	F	S
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9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	

March 2025						
S	M	Т	W	Т	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

Partner: Lebanon Aid Tracking (bi-weekly)

Partner: ActivityInfo for LRP (monthly reporting)

Partner: ActivityInfo for LRP (monthly verification) AND Flash Appeal (bi-weekly)

Partner: Activity.Info for Flash Appeal ONLY (bi-weekly)

XX Partner: CS reporting (IDP) (bi-weekly)

AoB (3)

Calendar of Deadlines for Sector Coordinators

- The calendar of deadlines (on next slide) will be reviewed and updated by the Inter-Sector Co-Chairs
- Sectors who might need additional time based on their caseload may contact the Inter-Sector on a case-by-case basis.

LRP 2024 End of Year (EoY) Sector Dashboards				
LRP 2025 Annual Work Plan				
LRP 2025 New Partners Capacity Assessment				
LRP 2025 WG and CG Sector TORs				
Inter-Sector				
Not Yet Initiated: LRP 2025 EoY Support to Lebanese Dashboard				
Not Yet Initiated: Updating the BCP				

Item	Details	Original Deadline	Status
LRP 2024 End of Year (EoY) Sector Dashboards Note: This exercise is conducted quarterly	Inter-Sector Team updates templates and shares them with the Sector Coordinators	8 Jan 2025	Done
LRP 2024 End of Year (EoY) Sector Dashboards	Sectors Coordinators submit the LRP EoY Sector dashboard narrative and logframe	24 Jan 2025	Submitted: BA, EDU, FSA, NTR, LH, SoST, WaSH (Health pending MoPH) Pending: Protection, Shelter
LRP 2024 End of Year (EoY) Sector Dashboards	Inter-Sector Team & Mainstreaming Focal Points review and provide feedback and comments	29 Jan 2025	Reviewed: Conflict Sensitivity Pending: Inter-Sector (UNHCR, UNDP, OCHA), Protection, Gender
LRP 2024 End of Year (EoY) Sector Dashboards	Sector Coordinators incorporate feedback and comments, highlighting specific issues as needed and re-send the narrative to Inter-Sector for final approval	31 Jan 2025	Pending
LRP 2025 Annual Work Plan	Sectors Coordinators submit the LRP 2025 AWP	31 Jan 2025	Submitted: NTR, WaSH, Livelihoods, SoST Pending: BA, EDU, FSA, Health, Protection, Shelter
LRP 2025 New Partners Capacity Assessment	Sector Coordination Teams to conduct capacity assessment for 30 new LRP appealing partners	3 Feb 2025	Pending
LRP 2024 End of Year (EoY) Sector Dashboards	Sector IMs prepare the final version of the dashboard and send it to Inter-Sector for final clearance	3 Feb 2025	Pending
LRP 2024 End of Year (EoY) Sector Dashboards	Final review by Inter-Sector (including design and data) and publishing by sector coordinators	4 Feb 2025	Pending
LRP 2025 Annual Work Plan	Inter-Sector Team & Mainstreaming Focal Points review and provide feedback and comments	4 Feb 2025	Pending
Inter-Sector analysis	Impact of the USA Assistance Suspension	4 Feb 2025	Pending
	Sector Coordinators address the comments and Sector IMs publish the AWPs on the Data Portal (link to be shared with Inter-Sector)	5 Feb 2025	Pending
Preparedness Plan – post CoH	Review of the sectors and intersectoral components	10 Feb 2025	In process
	Finalization of the IPC analysis cross-sectoral impact and prioritization	11 Feb 2025	In process
	Sectors follow a consultative process when developing their Working group (WG) and Core Group (CG) ToRs and share the finalized documents with lebbeia@unhcr.org , copying the ISCG Co-Chairs.	28 Feb 2025	Pending
LRP 2025 EoY Support to Lebanese Dashboard	Note: Request not yet sent, pending the finalization of EoY dashboards first.	Usually 3 days from request	Not yet initiated
Updating the BCP	Note: to be discussed in February 2025.	Usually 5 days from request	Not yet initiated

