



# Protection Monitoring

Situation of Internally Displaced Persons/Cross population  
(Protection Core Group-PM Reference Group)

## Protection Working Group Lebanon - National Report March 2025

### Introduction

This report provides an overview of the key findings and protection risks identified through Protection Monitoring (PM) for Internally Displaced Persons (IDPs) and returning IDPs in March 2025. The exercise was coordinated by the PM Reference Group of the Protection Working Group and implemented by UNHCR, IOM INTERSOS, SHEILD, DRC, IRC, and CARITAS covering Beirut and Mount Lebanon (BML), Bekaa and Baalbek-El Hermel and the South Governorates.<sup>1</sup>

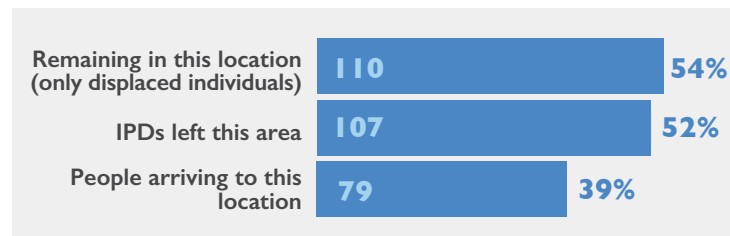
The methodology for this month's exercise consisted of 231 assessments, 204 of which were Key Informant Interviews (KIs) and 27 Focus Group Discussions (FGDs). The FGDs included 126 Syrian participants and 100 Lebanese participants. 76 assessments were conducted in BML (73 KIs and 3 FGDs), 76 assessments in the South (68 KIs and 8 FGDs), and 79 assessments in the Bekaa and Baalbek-El Hermel (63 KIs and 16 FGDs). Data collection primarily included KIs and FGDs with individuals providing data about Lebanese and Syrian nationals. A significantly smaller number had some knowledge on Palestinian refugees and migrants.<sup>2</sup> As a result, the findings refer primarily to Lebanese and Syrian IDPs and apply to both nationalities unless otherwise specified. The assessments covered IDPs residing inside and outside collective shelters, in addition to IDPs who returned to their pre-conflict areas of origin.

### Results of the assessments

#### Displacement and Returns

While a significant number of people previously displaced due to the conflict have returned to their homes, large numbers of internal displacement remain widespread across Lebanon.<sup>3</sup> According to 54% of KI respondents, many IDPs are still displaced and unable to return to their homes for a number of reasons. The primary reason is due to damaged or destroyed homes (46.5%). Other hurdles include a lack of financial means for home repair costs, rent costs, transportation costs, living expenses, etc. (20.5%), safety concerns (15%), and better access to basic services in their areas of displacement (14%). Despite a significant number of IDPs still being displaced, 52% of KI respondents indicated that IDPs have left their areas of displacement, primarily following the ceasefire (50%). Data also shows that 39% of KI respondents reported new people arriving in their areas. Notably most of the people arriving are returning to their original area of residence, while only 9% of KI respondents indicated that those arriving are still displaced.

#### March

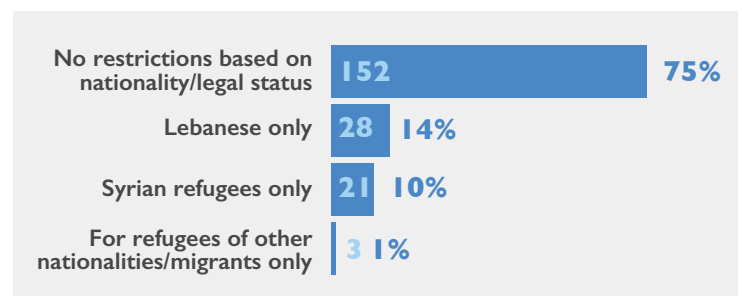


Displacement trends and intentions for those who are still displaced vary depending on nationality. For example, 53% of KI respondents have indicated that Lebanese IDPs plan to remain in their current locations for the time being. Noticeably fewer KI respondents (28%) reported that Secondly Displaced Syrians intend to remain in their current locations. Moreover, only 1 KI respondent (out of the 3 that had information on PRLs) reported that PRL IDPs plan on staying in their current location.<sup>3</sup>

#### Type of Residence, Available Facilities and Restrictions

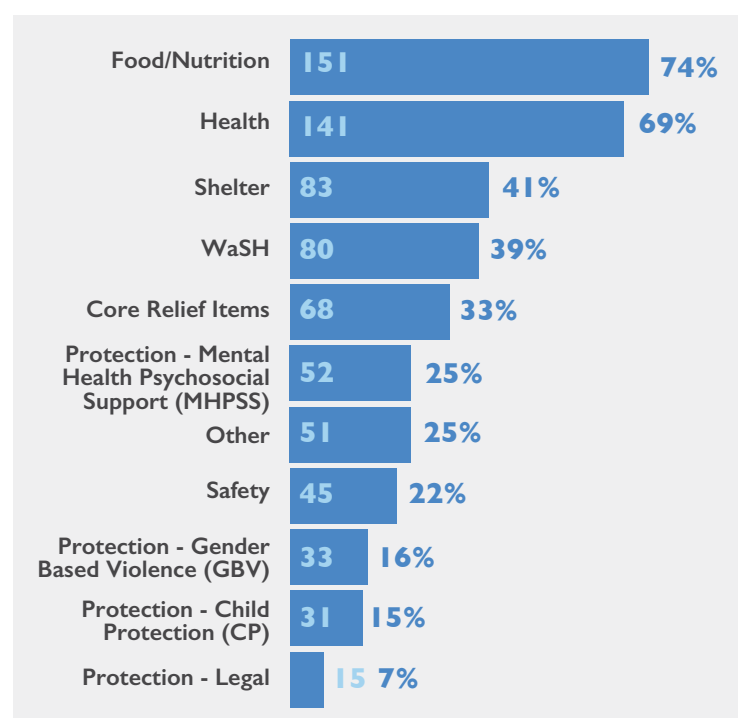
75% of KI respondents indicated that although most types of residences did not present restrictions based on nationality, some still did. For the purpose of KIs, residences may be temporary or permanent and include private accommodations, collective shelters, and informal tented settlements. 14% of KI respondents indicated that access to most types of residences was only granted to Lebanese IDPs, 10% reported that only Syrians had access, and 1% reported that other nationalities (other than Lebanese and Syrians) and migrants only had access. The high percentage of reports of limited restrictions likely relates to many IDPs staying in privately rented or owned accommodations. Restrictions based on nationality were reported in some collective shelters which only allowed access to Lebanese families. Reports indicated that site managers of official government shelters in the Bekaa and Baalbek-El Hermel continued to deny access to Syrians who attempted to access the shelters.

#### Restriction to Access Residences



Almost all KI respondents (94%) reported that available facilities, such as toilets, running water, and food supply, within their locations are accessible regardless of a person's vulnerability. This includes locations such as rental accommodations, people staying with friends and relatives, collective shelters, and informal gatherings such as abandoned buildings and informal tented settlements. However, it should be noted that while 94% of KI respondents reported that there are no restrictions on access to available facilities, this does not translate to all facilities being present in all locations. Many places of residence are overcrowded and lack basic facilities, particularly for those who are unable to afford better quality accommodations.

#### Priority Needs



<sup>1</sup> Data collection was not conducted in the North due to the low numbers of IDPs present there.

<sup>2</sup> Gaps in data collection for Palestinians and migrants will be addressed in the forth coming April IDP Protection monitoring report.

<sup>3</sup> As noted above, information on PRL IDPs is very limited and the overwhelming majority of key informants did not have any information about PRL IDPs.

According to KII respondents, priority needs for both IDPs who are still displaced and those who have returned to their original Cadasters of residence remain similar to those reported in February, namely food, healthcare, and shelter. KII data continues to indicate that IDPs are in critical need of food, both in terms of quantity and quality nutrition. Moreover, healthcare persists as an issue for many IDPs with many unable to afford medical costs. For example, one FGD participant in Barja indicated that he is unable to procure necessary medication for his wife who has multiple sclerosis due to the 150\$ monthly price tag. KII respondents were less likely to report needs related to GBV (16%), Child Protection (15%), and Legal issues (7%). This difference is likely due to IDPs placing more importance on immediate needs pertaining to their survival over other issues, despite their critical importance.

Of note, shelter concerns, including availability, structural issues, and conditions such as overcrowding in shelter, were reportedly higher in the South (53%) than in BML (38%) or the Bekaa and Baalbek-El Hermel (30%). This is likely due to many areas in the South still being inaccessible due to damage and persisting security concerns. Moreover, infrastructure was most affected in the South and interventions for rehabilitation have either been

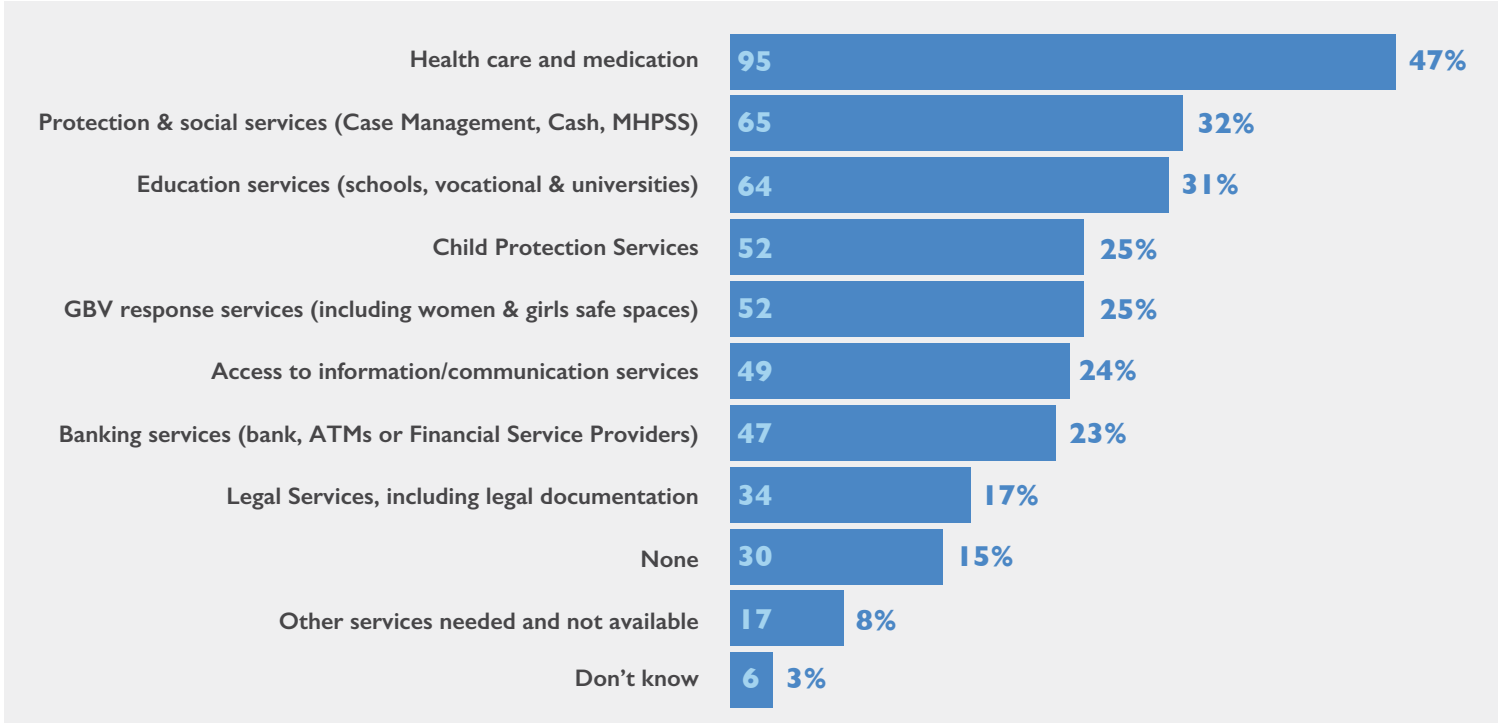
limited. Data indicates that many IDPs in the South continue living in overcrowded substandard housing.

Availability/Accessibility of Services

Service availability across the assessed areas varies. Almost half of KII respondents (47%) indicated a lack of access to healthcare and medication, revealing a critical gap in such services. 32% of respondents reported a lack of protection and social services, and 31% cited a lack of educational services including formal, non-formal, and vocational training.

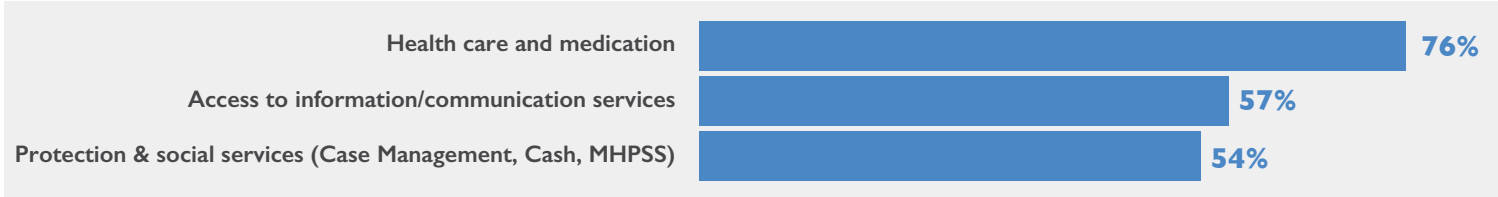
Lack of service availability usually indicates that certain types of services are either lacking entirely from an area or people in the area lack awareness about the different available services (rather than that they are not accessible to specific groups of people). This is corroborated by KII data, 90% of whom reported that when services are available in an area there are no restrictions on access based on nationality. Moreover, 98% of KII respondents also indicated that women have equal access to available services.

Unavailable Services

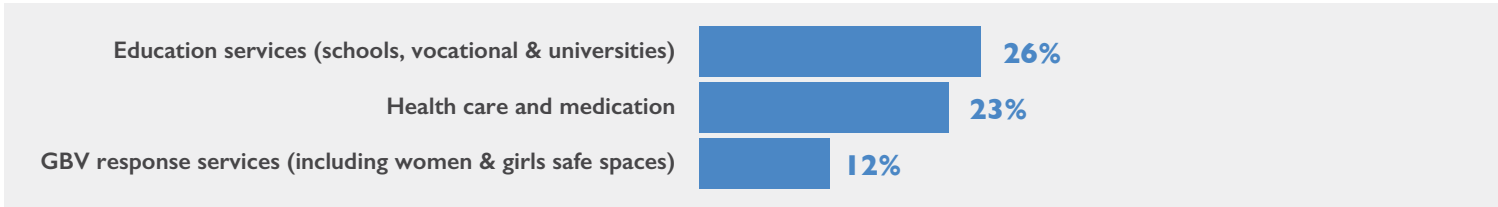


Across the three assessed regions, healthcare, protection and social services, and education services are the most frequently reported unavailable services according to KIIs. However, the specific gaps vary by area. Healthcare is the top concern in the South, while in both BML and Bekaa and Baalbek-El Hermel, education services are the top concern among unavailable services. This suggests that availability of healthcare in the South is more difficult than in the other areas. Notably, access to information and communication services was the second most reported service not available in the South (57%). This is in stark contrast to BML and the Bekaa and Baalbek-El Hermel where only 4% and 11% of KII respondents reported the issue respectively. The difference in lacking services indicates that different areas will need different responses to fill in the necessary gaps.

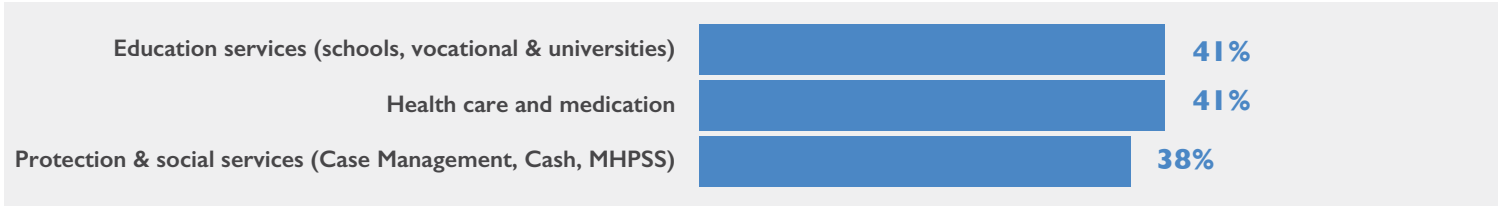
South



BML



Bekaa and Baalbek-El Hermel



## Protection Risks<sup>4</sup>

IDPs were widely reported to face a range of protection concerns. Psychological distress was the most commonly reported protection risk with 42% of KII respondents indicating as such across all regions, with the highest rates reported in the South (62% of KII reporting psychosocial distress as a protection concern) followed by BML (33%) and Bekaa and Baalbek-El Hermel (21%) . This can likely be attributed to the precarious security situation in the South that has persisted despite the ceasefire. The relatively high percentage of psychological distress reports by KII was corroborated by FGD participants. For example, in Chiyah, Lebanese male participants emphasized the need for psychological support, particularly for children whom they deemed to be suffering most from displacement. FGDs in the Bekaa and Baalbek-El Hermel also referenced instances of psychological distress, particularly among children who are afraid of the sound of airplanes. Following this, child protection and GBV risks were cited, both representing 18% of KII responses. Syrian FGD participants indicated that they are on the receiving end of domestic violence from their husbands and have attributed this violence to venting frustrations. Discrimination and stigmatization were also reported as a concern by 16% of KII responses. Legal and civil documentation related risks comprised 10% of responses, and family separation 3%. Syrian FGD participants in the South and the Bekaa and Baalbek-El Hermel have indicated that the lack of legal residency documents continues to be a source of anxiety and stress as they fear potential arrests.



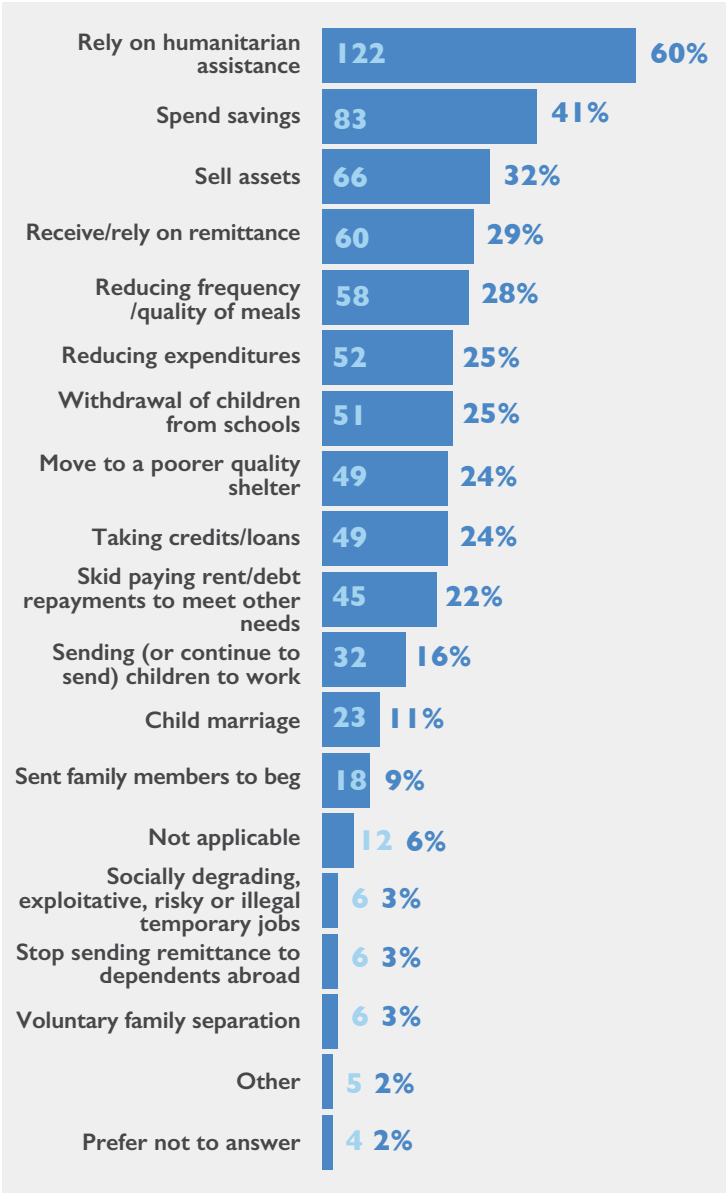
In the service availability section, KIIs highlighted a need for protection and social services. The data regarding protection risks further supports an increased need for such services, particularly with regards to mental health and psychosocial support. Moreover, the lack of child protection services is clearly reflected by KIIs indicating that child protection risks are present among IDPs. A female Syrian FGD participant in the South indicated that she worries about her son's future because he has to work rather than go to school, as well as not having proper legal residency, making him more prone to deportation. Notably, risks related to legal residency or other forms of documentation affect Syrians very differently from how a lack of documentation affects Lebanese IDPs. Syrians who lack legal residency face a myriad of risks such as deportation, inability to register children in school, difficulty finding work, and more.

None-the-less, it is important to note that there remained a lack of awareness about protection risks among key informants, with 53% of KIIs who were asked about protection risks indicated that they did not know about the specific protection risks affecting the population. Despite the fact that protection risks were asked to a reduced number of KIIs, many still did not know the specific protection risks that IDPs were suffering from.

## Coping Mechanisms

According to KII data, IDPs rely on a variety of coping mechanisms in order to cope with displacement. The top coping mechanism across the assessed areas was a reliance on humanitarian assistance, reported by 60% of KII respondents. The fact that more than half of key informants reported IDPs' reliance on humanitarian assistance highlights both a need for continued support and suggests that displaced people, including returning IDPs have a wide range of humanitarian needs. This finding is reinforced by other reported coping strategies such as spending savings (41%), selling assets (32%), reliance on remittances (29%), with more severe actions such as reducing quality and frequency of meals (28%), withdrawal of children from school (25%) and child marriage (11%). Needless to say, people resort to different coping strategies based on their situations. These strategies likely change based on legal status, economic situation, nationality, and geographic location. The findings predominantly pertain to Syrians and Lebanese.

FGDs further reinforce the fact that IDPs employ multiple and different coping strategies in order to sustain themselves. For example, Lebanese FGD participants in Barja highlighted that they accumulated debt at local supermarkets in order to secure basic necessities like food. Syrian FGD participants in Tyre explained that they regularly reduce food consumption, sell their assets, and struggle with debt.



<sup>4</sup> It is important to note that while the majority of this report is based on 204 KIIs, this section in particular was only conducted with people who have knowledge about protection. As a result, this section draws answers from 160 KIIs rather than 204

# Recommendations



Conduct awareness campaigns on available services through information sharing and clear communication, in different languages, by local actors and authorities.



Support communities understanding on protection issues through information sharing, dialogue by protection actors. Communities need to be made more aware of key protection risks and the differences between protection, security, and basic assistance issues in order to be better able to identify and address protection issues.



**Food security and Basic Assistance:** Continue food distribution and cash assistance programs and ensure that prioritization of cash assistance addresses the most vulnerable, including those at risk of or experiencing protection violations. This can include all types of cash assistance in order to help mitigate protection risks such as negative coping mechanisms that arise from instability as a result of a lack of basic needs.



**Health sector:** Expand the coverage of essential medication, and healthcare awareness training through community structures and healthcare actors, targeting maternal health, chronic diseases, and preventative healthcare.



Address barriers for IDPs to access health services that are far from their location such as expanding mobile health services or providing cash for transportation for vulnerable people.



**Protection sector and donors:** Advocate with donors to expand coverage of protection programs which target vulnerable populations in order to mitigate protection risks such as violence, exploitation, and mental health issues.



**Protection and health sector:** Develop plan to expand MHPSS services particularly in the South where the needs are highest, including providing positive coping mechanisms; training frontline staff in Psychological First Aid; scaling up evidence based brief psychological interventions; reinforce identification and referral of persons with severe mental health to specialized mental health services.



Expand outreach by legal actors to the most affected areas particularly in the South and Bekka to provide legal support to IDPs with missing documents, particularly Syrians, migrants and refugees of other nationalities, who face significant challenges when lacking official documentation, and challenges in recuperating their documents.



**Social cohesion and livelihoods:** Provide technical support by international and local humanitarian organizations to local community initiatives which focus on aid, employment, and social integration for IDPs, promoting self-reliance and social cohesion.



**Coordination with Authorities:** support, advocate and initiate rehabilitation projects targeting damaged infrastructure in heavily damaged areas in order to help displaced people return to their pre-conflict places of origin, while ensuring that protection principles are integrated into the rehabilitation and recovery plans.