



Protection Sector Lebanon

Prioritization Guidance Note

May 2025

Purpose of the Guidance Note

The document provides **Protection Sector members, including Child Protection and Gender-based Violence sub-sector partners**, with key guidance on prioritizing protection programming in light of the projected reduction in Protection Sector funding in 2025. It also provides guidance for partners on protection programming for new arrivals, Syrians voluntarily returning to their country and other groups that require specific protection interventions. This guidance is informed by the broader [2025 LRP Protection Strategy](#), which outlines the overall strategy and comprehensive set of protection activities that the Protection Sector, including Child Protection and GBV, plans to implement in 2025.

While the sector was well-funded in the first quarter of 2025 with 35% across the sub-sectors, some partners did see funding cut that affected key services and a significant decrease in humanitarian funding is expected in Q2, impacting on the protection environment and protection partners in Lebanon (see [funding gap analysis for Q1](#)). As partners begin to face funding cuts and freezes that will impact the scale and scope of protection programming throughout the country, the sector organized consultations on reprioritization efforts to support prioritisation. At the same time, protection needs in the country continue to evolve with internal displacement and returns within Lebanon, as well as returns to and arrivals from Syria, creating specific protection risks and considerations for different groups. The Sector also developed a comprehensive [Protection Analysis Report December 2024-March 2025](#) highlighting protection risks, sector responses and advocacy messages.

This guidance seeks to ensure that despite insufficient funding to meet the range of protection needs and associated programmatic adjustments, key protection principles and core concepts such as a rights-based approach, non-discrimination and do-no-harm are upheld, and a core package of protection services is provided to affected populations. The note provides guidance to ensure that all Inter-agency resources are focused on addressing the specific needs of those most at risk, informed by a robust protection analysis for different population groups at risk, in the most cost-effective, impactful manner.



Protection Approaches across the Protection Sector

Across the sector, the below approaches guide the overall work of the Protection Sector to maximize impact and contribute to a conducive protection environment at both the national and subnational level.

Centrality of Protection: working with relevant inter-sectoral platforms as well as the HCT to identify limited number of key protection risks and develop a cross-sectoral plan to mitigate those risks and monitor progress.

Support and engagement with national systems: the Protection sector recognizes the leadership of the Ministry of Social Affairs and the importance of the national system, including Civil Society Organizations and national actors for sustainable protection programming and a protective and inclusive environment. Sector partners will work together on a systems strengthening strategy developed by the Systems Strengthening Task Force. This includes supporting the social welfare system to respond to the needs of all affected populations and alignment of humanitarian protection response with the national protection system.

Protection analysis and advocacy: the sector generates knowledge for protection sector and other humanitarian actors on protection risks, the impact of these risks and the capacities to address them to inform programming and advocacy through a protection analysis and monitoring task force. All protection monitoring and analysis activities at field and national level are informed by the sector's protection monitoring and analysis framework, and assessments and monitoring are coordinated through this forum to ensure comprehensive analysis and avoid duplication.

Protection mainstreaming: protection mainstreaming activities within the sector and other humanitarian sectors is undertaken through mainstreaming and risk mitigation focal points, review of sectoral risk assessments and staff training including on safe disclosure/ identification and referrals. GBV risk mitigation and CP mainstreaming activities are aimed at reducing the risk of GBV and child rights violations across humanitarian programs.

Suggested Prioritization of Protection Programs

Activity-based prioritization

The Protection Sector, including Child Protection and Gender-based Violence sub-sectors, have identified a comprehensive package of critical activities to be prioritized to ensure access to lifesaving protection services across groups and locations. While the Sector recognizes the need for dedicated programming on specialized legal, GBV and Child Protection interventions (see dedicated sections), the guidance note also includes



the below list of interventions that can be implemented in an integrated manner across the sub-sectors considering the programmatic similarity and synergies of some of the Child Protection, GBV and Protection activities. These include:

- Information sharing and awareness raising on risks and access to services
- Safe disclosures, identification and referrals to protection and non-protection, life-saving services
- Community-based interventions
- Legal aid programs (particularly awareness on legal procedures)
- Protection assessments, monitoring and analysis
- Protection Advocacy
- Protection mainstreaming, including inclusive approaches for persons with disability, GBV risk mitigation and child protection mainstreaming
- Behavioural and social norm change activities aiming at sustainably improving the protection environment (may not be prioritized in some locations).

List of integrated Protection Programs (CP/ GBV/ legal/community-based)

Intervention	Protection	Child Protection	Gender-based Violence	Cross-cutting themes
Communication with Communities	Information and awareness Harmonized messaging			Centrality of Protection National systems strengthening Protection monitoring, analysis and advocacy
Community engagement	Community volunteers Community-based support programs			
Social and behaviour change activities aiming at sustainably improving the protection environment		Addressing violence against women and children Addressing gender inequalities, social norms and power dynamics leading to harmful practices		
Legal aid programs (particularly awareness on legal procedures)	Legal awareness Legal aid programs serving CP and GBV risks			
Protection assessments, monitoring and analysis Protection Advocacy	Cross-sectoral protection risk analysis including CP and GBV			
Protection mainstreaming, including inclusive approaches for persons with disability, GBV risk mitigation and child protection mainstreaming	Safe disclosures, identification and referrals Training of sector and staff members Sectoral risk analysis Disability inclusion			



Core Package of Prioritized Interventions

The below section includes a comprehensive list of prioritized interventions by sub-sector.

General Protection

Within the framework of Protection Sector, the below list of interventions is the recommended **core package of protection interventions** to be delivered for different population groups by partners. Partners may decide to implement additional protection activities to those listed below if they have resources and capacities, provided the activities below are provided by their organisation or other partners in the specific geographical location.

Communication with communities providing information on i) access to services ii) feedback, complaints and response and PSEA reporting mechanisms and iii) key protection issues. This includes information in relevant languages through safe online/social media modalities and call centers, as well as face-to-face information through community-centers, protection desks and/or mobile protection outreach teams.

Community engagement and outreach priority community-based protection activities include: i) identification of persons in need and referral to multisectoral needs; ii) community outreach volunteers to conduct community engagement and support community-led protection initiatives; iii) small-scale community-grants and/or capacity building to support community-based organisations, community centers (e.g. in hard to reach locations, for specific population groups not adequately addressed or where community centers cannot meet demand).

Case Management – in line with the sectoral guidelines, access to lifesaving individual case management services

Cash for protection including emergency cash after a shock/ emergency situation and recurrent protection cash provided in the context of case management aiming at generating long-term, concrete and measurable protection outcomes.

Legal aid programs to support access to civil documentation, legal residency, etc legal counselling/mediation and representation.

Identification and Referral of persons with specific needs to multisectoral services and to UNHCR recording for persons with protection and urgent medical needs in line with UNHCR guidance.

Specialized services for Persons with Disabilities including assessment and referral to case management, the National Disability Allowance, and care services for high-risk



cases without support, assistive devices, accessibility enhancement for shelter and disability allowances

Psychosocial support including key messages to promote mental health and psychosocial well-being; orient frontline workers and community leaders in basic psychosocial support skills especially PFA; Provide MHPSS through case management services; implement evidence-based Brief Psychological Interventions¹ and identify and referral refer people with severe mental health needs to specialised mental health services.

Protection monitoring and analysis in line with the protection monitoring and analysis task force tools and plan to inform advocacy and programming. Protection monitoring and analysis will document patterns of abuse, violations of international humanitarian and human rights law, and structural discrimination as well as capacities and causes of protection risks to inform programming and advocacy.

Modalities: It is also recommended that partners collaborate and identify existing protection community centres, including SDCs to serve as one-stop shops especially in underserved areas or return hotspots to provide protection activities listed above to a range of population groups. It is also recommended to support mobile approaches such as outreach teams, mobile protection desks etc to conduct outreach into most affected locations and reach the most at risk (see geographical prioritisation section below).

Child Protection

Safe identification and Referral: Identifying children at-risk and ensuring they receive necessary protection and multisectoral services.

Child protection case management: in line with the sectoral guidelines, access to lifesaving individual child protection case management services for children at risk of grave and other serious child rights violations including unaccompanied and separated children, children in conflict or in contact with the law, children subjected to violence and abuse, children in Labor including WFCL. For refugee children, the implementation of the specific aspects of child protection case management outlined in [UNHCR Best Interests Procedure Guidelines](#). **Cash for Child Protection purposes** is supported in line with the Sector Cash Guidelines and Child Protection actors assess careful the use of ECA and RPCA in line with case management outcomes.

Mental Health and Psychosocial Support and Parenting: Providing multi-layered mental health and psychosocial support to children and their families (including Community

¹ See [Relevant guidelines, standards and tools - MHPSS MSP](#) and [MHPSS Annex of Public Health Strategy 2021-2025 | UNHCR](#)



Based PSS and FPSS) This includes key messages to promote Mental Health and Psychosocial wellbeing of children and parents², community-based and structured, non-specialised psychosocial support³, and identification and referral of children to specialised mental health services and adults to relevant⁴ MHPSS services. It also includes parenting programs to prevent violence⁵.

Justice for Children: Ensuring access to justice for affected children in contact and in conflict with the law including legal support and promotion of alternatives to detention, including diversion for children in conflict with the law.

Capacity building and support to frontliners: Provide capacity building to child protection frontliners on key child protection competencies including Safe Identification and referral, Psychological First Aid (PFA), Case Management and Child Safeguarding, Child Protection in Emergencies etc.

Information provision and messaging: to prevent grave and other serious child protection violations among children, caregivers, and community members, awareness raising and sensitization sessions will include; child protection risks, referral pathways and available services, with targeted messaging on violence prevention, Family Tracing and Reunification (FTR), Alternative Care, Child Labour, Child Labour, PSEA, MHPSS, EORE etc.

Community child-friendly spaces and community-led child protection initiatives: The child protection activities listed should be provided within existing community safe spaces. This can include children and family spaces such as Makani, broader community centers such as SDCs, CDCs or for adolescent girls, women and girls safe spaces. It can also include community outreach to conduct activities in CBOS or other community spaces, and supporting community-led child protection initiatives.

Gender-based Violence

Information sharing and community awareness raising: to prevent and mitigate risks of GBV within the community and ensure information on GBV services is available to the community. This can include focused awareness raising sessions and/ or information sessions on i) availability and access to GBV services ii) feedback and response and PSEA mechanisms and iii) key GBV risks and messaging – see the standard for [community](#)

² See [Home - MHPSS MSP Action 3.3](#)

³ See [Prevention and Response Psychosocial Support Activities for Children and Caregivers_2022_Final.pdf](#)

⁴ Depending on the level of distress, caregivers may either be referred to evidence-based brief psychological interventions by protection or health actors or for severe mental distress to specialized mental health services provided by mental health actors.

⁵ See [Prevention and Response Psychosocial Support Activities for Children and Caregivers_2022_Final.pdf](#)



[messaging on GBV](#) see also the [GBV sub-sector flyer for community outreach](#) developed by the GBV sub-sector. The GBV sub-sector has defined awareness sessions in GBV more as a focused activity on a GBV-specific topic such as harmful social norms, GBV core concepts, child/ forced marriage; sexual harassment; safe disclosure and referrals and SRH related aspects. GBV awareness raising sessions are usually conducted in smaller groups and often includes a needs assessment before the awareness sessions with a targeted community. Awareness sessions are always conducted in a safe space identified by the actor and considering cultural and social considerations as well as conflict sensitivity related aspects. Information sessions follow a more flexible modality, and the subject is mainly related to information on GBV services and potentially other relevant humanitarian services (at times jointly done with other sectors). The sessions might be provided in a short time frame and are less structures and do not require a safe space.

Community engagement, outreach and empowerment: support and strengthen existing Women and Girls Spaces and other GBV service facilities offering support and services for GBV survivors and those at risk through a range of activities and services, including counselling, referrals to services, case management, recreational activities, empowerment and gender equality activities; small scale community-grants to support women-led protection initiatives inside and outside Women and Girls Safe Spaces (for a full list of activities inside WGSS – please see the [WGSS Guidance Note](#)).

Survivor-centred GBV Case Management: Provide accessible, confidential, survivor-centred services in line with [Global GBV Case management guidelines](#)⁶ and most recent Lebanon-specific GBV SOPs, access to lifesaving individual case management services linked to [protection cash to address, prevent and mitigate GBV risks](#).

Legal aid programs: to support access to specialized legal counselling, legal information, explaining survivors' rights and legal options and representation for survivors of GBV, including on divorce and custody disputes.

Psychosocial support for survivors of gender-based violence: provide a range of emotional and social support that help survivors of GBV including group and individual approaches to cope with trauma, rebuild their confidence and resilience of survivors.⁷ Prioritized psychosocial support activities include: dissemination of key messages to

⁶ [Interagency Gender-Based Violence Case Management Guidelines: Providing Care and Case Management Services to Gender-Based Violence Survivors in Humanitarian Settings 2017 \[EN/UK\] - World | ReliefWeb](#).

⁷ See study on MHPSS Approaches in the GBV sub-sector in Lebanon: https://lebanon.unfpa.org/sites/default/files/pub-pdf/2024-08/Guidelines%20on%20MHPSS%20approaches%20in%20the%20GBV%20Sector%20in%20Lebanon_0.pdf



promote mental health and psychosocial wellbeing for survivors of GBV; support group-based community-based PSS activities to strengthen social support and coping (such as peer support or group psychosocial activities); provide PSS as part of GBV case management, and access to psychological interventions such as evidence-based psychological interventions to manage prolonged psychological distress (such as Cognitive behavioural therapy (CBT) in various forms, stress management/ relaxation trainings, problem solving counselling, etc.). See [here](#) for a longer list of evidence-based interventions.

Provision of dignity kits: to help vulnerable girls and women in reproductive age maintain personal hygiene, dignity, mobility, and safety linked to GBV awareness interventions and programs – see guidance note on [Dignity Kits](#).

Women and Girls Safe Spaces (WGSS): support WGSS where women and adolescent girls - especially survivors or those at risk of gender-based violence (GBV) - can access life-saving services, psychosocial support, information, and empowerment opportunities in a safe, confidential, and supportive setting. Activities within WGSS can include GBV Case management, PSS, Information and awareness, recreational and life skills activities and providing a point of referral. See [GBV sub sector WGSS guidance note for Lebanon](#).

Targeted prevention programs: including specific curriculum-based programs selected by the GBV sub-sector, such as Girl Shine, EMAP and other relevant social-behaviour change programs that address structural inequalities between men and women as root causes of GBV.

Safe Shelter for persons at heightened risk of GBV: case management and psychosocial support as well as other recreational services are offered to women and girls at risk; for a full list of activities and standards on safe shelters, see also [Standards on Safe Shelters in Lebanon](#).

[Efficiencies and effectiveness in implementation modalities](#)

The guidance below outlines approaches to enhance efficiencies and effectiveness to maximise the impact of programs while providing the above core package of protection programming. This approach is supported by various tools including [Service Mapping](#), [Severity Mapping](#) of the Sector and other tools developed at Task Forces or other Inter-agency standards linked to the sector. This may include:

- **Targeting:** protection partners use a cross-population approach - including refugees including Syrians, Palestine refugees and refugees of other nationalities, most vulnerable and at-risk migrants and Lebanese, stateless persons - while addressing those most at risk. Targeting must always be guided by the protection context and



most recent protection analysis to identify who across and among these population groups or segments of the population are most at risk, taking into consideration the protection environment, community networks and individual or family capacity or resources.

- *Refining targeting and intake criteria and approaches* to ensure protection programmes reach those most at risk of protection threats, as well as the most vulnerable who are least able to support themselves. Under the Protection Case Management Task Force, the Protection Analysis Framework has been adapted to identify and prioritise the most at-risk across the sector. Partners implementing case management programs should revise protection case management intake criteria to focus on protection risks rather than providing case management services based primarily on pre-defined vulnerability criteria (see [Protection Case Management Guidelines](#)). For GBV and CP, specific discussions in the relevant TFs need to take place to update prioritized cases in line with global GBV and CP Guidelines.
- *Using cost effective methodologies* to reach larger number of people and more cost intensive methodologies for the most vulnerable – for instance, scaling up information provision through online modalities and focus in person information provision to those that cannot use online modalities or scaling up evidence based group brief psychological interventions for people with mild to moderate distress and refer only those with severe mental distress to individual psychological treatment services.
- *Reinforcing community-based protection programming* such as having outreach volunteers support low-risk cases (non-case management but in support of daily life activities, including monitoring of care activities) and supporting community-led protection initiatives
- *Scaling up partnership and support to local partners.* Investing in partnership with local organisations and community-based organisations and networks to deliver protection services, particularly community-based protection interventions. Developing transition plans with local partners and identify referral mechanisms to other protection services as needed e.g. case management.
- *Consolidation of protection programmes* across sector member agencies such as delivery of multiple services by partners within one community centre (see above)
- *Standardising programme delivery* and having one organisation provide training and tools to other organisations e.g. standard training on basics of protection for all partners, standard PSS package of services
- *Reinforcing integrated programming across sectors* is a strategic approach to prioritize protection activities by designing interventions that deliberately combine protection and other sector objectives to achieve mutually reinforcing protection outcomes. Unlike protection mainstreaming, which ensures all sectoral actions are



safe and inclusive and is the responsibility of each sector, protection integration goes further by embedding protection activities - such as case management, legal assistance, or psychosocial support within broader sectoral programs like health, education or shelter – for instance e.g. provision of protection information during food distribution. Ensuring that life-saving and rights-based protection services are jointly designed and implemented supports collaboration across sectors, as well as maximising the effectiveness and impact of humanitarian interventions.

Geography-based prioritization

The Protection Sector recommends using a three-fold approach to assess geographical programmatic needs. Geographical prioritization aims to **avoid geographical duplication** and **prioritise programming implementation in the most affected locations**, thus contributing to providing protection programming in the most effective and cost efficient manner. This entails regularly reviewing geographical division of labour among partners based on the most up-to-date service capacity.

To ensure that a comprehensive package of services is provided and is accessible to the prioritized target groups including vulnerable populations, three parameters and tools should guide the geography-based prioritisation:

- 1) **Availability of Services:** review the [Inter-agency Service Mapping](#) to understand programmatic coverage and implementation of core protection/CP/GBV programs to reduce duplications. The tool is designed to highlight the services partners are providing in the different locations across the country. It is also used as a diagnostic tool for coordinators to assess service coverage and implementation of services. At sub-national level, and national level partners and coordinators should ensure a harmonized geographical coverage while avoiding overlap of services unless high needs are identified (see below).
- 2) **Prioritisation of certain geographical areas through the Severity analysis of the Sector and (revised PIN calculation)** (at cadastre or district level): the sector has developed and updated its [severity analysis and sectoral PIN](#) based on a set of indicators that demonstrate the severity of protection risks in certain geographical areas. To assess areas most in need or underserved, this tool uses proxy indicators to estimate the severity of protection risks in a given district. The revised prioritised PIN considers both the population in a specific geographical region and the proxy indicators of the severity of their protection risks to identify the revised people in need of protection services. Districts with higher levels of severity and PIN should be prioritised for protection programming (levels 4 and 3) and those with lower severity and PIN given less priority (level 1 and 2).



- 3) **Reasonable access to the affected area:** while needs might be severe, protection actors should prioritise areas for the direct delivery of their services where they do not face considerable access challenges. For inaccessible or hard-to-reach areas, other approaches may be utilised, including remote processing modalities for case management, and provision of services through already identified and trustworthy grass-roots organisations. Where access issues exist, protection partners should report this to the sub-national ISCG to address these issues, monitor the access and amend programs for if and when these areas are accessible.

Role of the Sector coordinators

The PWGs at subnational and national level should regularly review the existing service mapping to identify gaps in service provision in districts with high PINs (level 3 and 4) and those with over coverage of services in deprioritised districts (with PIN level 1 and 2). Subnational and national coordination groups should agree on a plan with their partners to:

- Reduce geographical duplication
- As much as possible, have a clear geo-split (also known as a geographical division of labour) with partners providing the core package of services described above in one geographical location, rather than multiple partners providing different parts of the core package of services.⁸

Subnational and national levels may also use other information to further refine the geographical prioritisation within districts including different operational and security contexts, local capacity, needs assessment or protection monitoring. However, where such information is used, it is important to account for potential bias arising from the possible lack of information across all populations, notably between populations inside or outside collective shelters, and among categories of populations. Subnational and national PWGs should strive, to the extent possible, to prioritise the needs of all populations both inside and outside shelters.

As the situation develops, the protection sector will continue to monitor coverage and gaps in protection activities. Protection actors will communicate in a timely manner when specific protection activities are scaled back or closed and when possible amend programming to address emerging priority programming gaps.

⁸ As not all partners can provide legal services, this service may be provided by a different partner than the rest of the core package of protection services where a partner is not specialised in legal services.



Prioritized protection interventions for specific groups or locations

Population-based specific programs

The Protection Sector commits to ensuring access of all population groups to protection services in an equitable manner. To uphold the cross-population approach and to focus activities on the most vulnerable regardless of nationality, particularly in light of funding reductions, it is essential to **intensify efforts to identify the most vulnerable** and ensure their effective access to critical protection interventions. In addition, this includes ensuring that the protection interventions address the specific situation and protection risks of district groups, by adopting tailored response strategies for the specific groups where appropriate as described below. Data on the different population groups can also be found on the Lebanon Country Portal page: [here](#).

Internally Displaced Persons (IDPs) across population groups

Following the 27 November 2024 ceasefire and the cessation of most hostilities, the majority of IDPs, previously accommodated in collective shelters or other forms of temporary housing, have returned to their areas of origin. However, while many have returned to their former cities or villages, numerous households are unable to reside in their homes due to complete or partial destruction, or because their current condition does not ensure safety and dignity.

Internally Displaced Persons (IDPs) in communities

Protection partners should provide the [comprehensive package of services](#) to IDPs across the country focusing on locations with high prevalence of IDPs and returning IDPs. While activities are listed under the activity-based prioritization sections, it is important to ensure that partners adapt outreach and community engagement activities as well as legal aid services to the specific needs and challenges facing in accessing/ identification of IDPs living in the communities. Due to the responsibility of the Government to extend protection and assistance to IDP populations and their leadership in the response, close collaboration with the relevant governmental structures at national and municipal level are crucial to support IDPs and end their displacement situation.

IDPs in collective sites

The small number of IDPs hosted in collective sites remain among the most vulnerable as they have not been able to find accommodation outside the collective sites. In addition, landlords or authorities are requesting to close a number of these sites. Given the small number of families and individuals living at these sites, the priority should be for protection actors in collaboration with shelter actors to undertake joint protection/shelter assessments of the individual needs of these families to try to find alternative shelter for these families and address their specific needs. This may include



working with shelter actors to provide information on available shelter options and referral to shelter solutions, as well as addressing the specific vulnerabilities that individuals or families may face, such as health needs or accessible accommodation for persons with disabilities through referral to available multi-sectoral services. In addition, the Sector developed a Guidance Note on support of IDP families to exit collective sites through a collaboration between the Protection, Shelter and SMC Sectors (see the [link](#)). The aim of protection interventions for IDPs in collective sites should be to support their exit from collective sites and to support their relocation and integration into the community.

For IDPs (across populations) remaining in collective sites, as much as possible, the full package of the above services should be provided with the exception of protection cash which should not be provided in CS. Where conditions do not allow the full package of services due to be delivered due to limitations in space, capacity or other access limitations the activities listed in the table below should be provided.

- Information-sharing and awareness on how and where to access Protection, CP and GBV services
- Legal awareness sessions
- Community outreach and engagement programs
- Provision of safe disclosure and referral sessions
- Referrals and support to protection and other humanitarian services

Hard-to-reach populations

For groups remaining in areas that are still deemed to be unsafe due to irregular but continuous exposure to attack or conflicts, or due to other access limitations partners will aim to provide the full package of protection services, but where necessary may adapt their programming modalities to reach communities in hard-to-reach areas through:

- Sharing information and raising awareness on how and where to access Protection, CP and GBV services
- Reviewing previous and ongoing caseloads to ensure those with pre-existing protection risks have access to services and are not left without contacts to partner staff
- Assessing the ability to undertake joint, Inter-agency missions and ensure service leaflets are provided with contact information for service access and emergencies
- Supporting community engagement mechanisms either through pre-existing community volunteer structure or community empowerment interventions



In hard-to-reach/ inaccessible areas, partners may need to further amend their implementation modalities including:

- Using remote modalities for case management, and
- Assessing needs and providing community-based protection services through already identified and trustworthy grassroots organisations who have capacity in protection issues.

New arrivals from Syria

For the purposes of this guidance, *new arrivals from Syria* refers to all populations who arrived from Syria following the fall of the Al-Assad regime on 8 December. This includes, among others, populations who crossed the border from the East through Bekaa/Baalbek- El Hermel from December onwards, and those who arrived in the North of Lebanon following events on the Syrian Coast in March 2025.

This population is composed of different profiles, including some who might potentially fall outside the scope of international protection. However, as the suspension of registration activities by Lebanese authorities remains in place for Syrians, advocating for the registration of those with clear international protection needs⁹ remains a priority for Protection actors¹⁰.

In addition, the different profiles and needs of this population are being assessed to determine the scope and nature of interventions. This includes a profiling exercise rolled out in Baalbek and Bekaa by the Ministry of Social Affairs (MoSA) with UNHCR's support. The aim of the exercise is to assess household composition, vulnerabilities, and protection risks of new arrivals, understand coping strategies and future plans, support life-saving responses, and identify individuals in need of more specialized support. Findings are used to inform the interagency response as well as advocacy on legal status, documentation, and joint registration.

A minimum package of emergency protection services offered to this population upon arrival for the first 3-6 months is described in Annex 1 below. Between 3-6 months after arrival, new arrivals should aim to be integrated into the full package of protection services in their geographical location as outlined above. In addition, the box below provides information on the targeted recording of new arrivals by UNHCR which is being

⁹ In line with UNHCR Position on Return to the Syrian Arab Republic, 16 December 2024: [Document - UNHCR position on returns to Syria - 16 Dec 2024](#) UNHCR's December 2024 Position on Returns to Syria acknowledges that while some individuals may choose to return voluntarily due to perceived improvements, others continue to flee due to ongoing risks, and therefore calls on States to ensure access to territory and asylum, uphold the principle of non-refoulement, and recognize emerging protection risks.

¹⁰ Discussions are ongoing regarding potential registration by UNHCR with the Lebanese authorities, however, no decision has been taken yet.



implemented, until and if full registration for this group is approved by the authorities (see above).

Targeted recording for new arrivals by UNHCR

With the prolonged stay, UNHCR with its mandate on refugee protection, in coordination with partners is moving to a structured, individualized protection response, focusing on targeted recording for Syrian new arrivals at heightened protection risk. UNHCR has developed guidance and criteria for a targeted recording approach that complements existing protection referral systems.¹ This contingency measure focuses on individuals with heightened protection risks, including child protection, gender-based violence, and persons with life-threatening medical conditions, while continuing to advocate for full registration with the authorities. Targeted recording does not confer legal status nor serve as a substitute for registration but enables prioritized assistance and protection case management.

This approach is going to be rolled out through referrals from UNHCR's implementing and operational protection partners, who will receive dedicated training. The approach also includes a counselling package to equip partners with the tools to share accurate information and manage expectations within the communities.

Upon referral by Protection actors for targeted recording, interventions will focus on:

- Communication with communities and community engagement through mobile and static approaches
- Providing individual protection interventions, such as case management, and legal assistance
- Protection cash for highly vulnerable individuals to ensure life-saving interventions
- individual support to persons with disabilities may identify and refer cases who fit the criteria for recording of the new arrivals to UNHCR. Referrals for medical cases continue through existing NextCare systems.

Migrants

Migrants should have access to the full package of protection services outlined under [Core Package of Protection programs](#), and all partners should provide non-discriminatory access to their Protection, CP and GBV services for migrants. Partners who face specific restrictions or limited ability to respond to the specific needs of migrants should refer migrant cases to the relevant organizations specialized in migrants or other organisations who provide protection services to all populations including



migrants. Migrants continue to be a group for whom the protection sector has consistently not achieved targets related to the provision of protection services (see [Protection sector 2024 end of year report](#)). Organisations should reinforce outreach and engagement with migrants and may reach out to the Migrant working group and/or IOM to discuss mechanisms to do so. In addition, given the specific legal and protection challenges faced by migrants due to the Kafala system, there continues to be a need for specialized assistance to migrants, e.g. such as individual case management by specialized partners well aware of migrants' specific situation and language needs, direct support to migrant-led organisations and assisted voluntary humanitarian return (AVR).

Syrians voluntarily returning to Syria

Following the fall of the Assad regime in December 2024, displaced Syrians across the region, especially in Lebanon, are expressing a renewed hope in returning home.

UNHCR Lebanon and partners through the Durable Solutions Working Group developed a strategy on voluntary returns which is integrated/annexed to the 2025 Lebanon Response Plan – see [LRP 2025 Return Chapter](#). The cornerstone of the return plan in Lebanon is the principle that all returns must be safe.

The Inter-agency plan for returns, including protection activities is available here: [Inter-Agency Voluntary Return Action Plan Matrix](#). This plan includes a list of prioritized protection interventions to be implemented under UNHCR's leadership together with protection partners:

Protection interventions on return:

- Legal aid / assistance
- Capacity building on voluntary return
- Protection monitoring and analysis on returns and cross-border movements
- Protection data collection and analysis: Returns Intentions Survey
- Communication and engagement with communities on voluntary return
- Protection Case Management
- Protection assessments for Voluntariness and data management

GBV-return specific activities include:

- Awareness on GBV risks and return considerations for those affected by GBV
- Survivor-centred case management for those at risk of GBV in the context of return (women/ girls or other gender-based marginalized groups)
- Provision of dignity kits for returning women and girls in reproductive age.

Child Protection activities specific to return:

- Development and dissemination of child-sensitive information



- Case management and establishing the child's best interests
- Facilitation of child-friendly spaces at return areas
- Child Protection training for governmental and NGO staff involved in the return process.

Implementation, Oversight, and Review

This guidance note was developed by the Protection, Child protection and GBV Coordinators with support of the relevant Core Groups. Its implementation is collective responsibility of all actors involved in the Protection Sector and is monitored by the national and sub-national coordinators. It applies to all new or existing protection partners. Given the fluid situation and changes in the regional and country-specific context, the document is a living document to be adapted and revised as necessary.

Sector partners may:

- Seek advice and guidance from the respective sector and sub-sector as necessary to ensure implementation of a prioritized package of activities in their respective geographical locations.
- Where relevant, partners can further prioritize their respective activities at the subnational level in line with the guidance note.
- Sectors, in collaboration with partners, will regularly monitor the implementation of partners' activities per this prioritized package of activities included in this guidance note.
- Partners should alert sector coordinators if there is a need to update the guidance note and/or challenges in its implementation.



Annex 1: Table of prioritized list of activities per population group

The table below provides an overview of activities and prioritized interventions highlighted in the document. The first column summarises the core protection activities listed above that should be implemented for all population groups except those for which a more specific approach applies. The specific approaches are for the following groups: 1) IDPs in Collective Sites; 2) new arrivals in collective sites; 3) emergency response for new arrivals in communities and; 4) Syrians voluntary returning to Syria. Specific approaches for these groups are required for the following reasons: the constraints and specificities of the living conditions in collective sites (groups 1 and 2); Emergency protection response for new arrivals (group 3) in the community; specific package of adapted protection programming for those returning to Syria to support their voluntary return (Group 4). The aim is to enhance visualization of above concepts. Links are provided to the relevant population groups

Protection activity	<u>IDPs, refugees, vulnerable Lebanese and migrants (pre-existing case load)</u>	<u>IDPs hosted in Collective Sites (formal or non-formal due to conflict) – see guidance note of PRT/ Shelter and SMC sector</u>	<u>New arrivals in collective sites which lack space for confidential protection activities</u>	<u>New arrivals hosted in communities for 3-6 months</u>	<u>Voluntary return of Syrians</u>
Communication with communities	Core package of protection activities listed above including i) access to services ii) feedback, complaints and response and PSEA reporting mechanisms and iii) key protection issues	Dissemination of information on services and protection, including through awareness sessions and provision of Help link and numbers of counselling lines Dissemination of information on AAP including feedback and response mechanisms and PSEA;	Dissemination of information on services and protection, including through awareness sessions and provision of Help link and numbers of counselling lines. Dissemination of information on AAP including feedback and response mechanisms and PSEA;	Mobile outreach and protection desks to support sharing of key messages and information on services Dissemination of information on AAP including feedback and response mechanisms and PSEA;	Key messages and counselling lines on voluntary return, support and process, led by UNHCR CwC team Dissemination of information on AAP including feedback and response mechanisms and PSEA;

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Community engagement, outreach and empowerment	Core package of protection activities listed above including: i) identification of persons in need and referral to multisectoral needs; ii) community outreach volunteers to conduct community engagement and support community-led protection initiatives; iii) small-scale community-grants and/or capacity building to support community-based organisations, community centres (e.g. in hard-to-reach locations, for specific population groups not adequately addressed or where community centres cannot meet demand).	Enhanced engagement with IDPs in collective sites through protection partners for HH level assessment taking lead to support durable exit from IDP shelters (see guidance note)	Establish community groups and ensure AGD sensitive approaches	Establish community groups and ensure AGD sensitive approaches	Use existing community volunteers to support information dissemination of developed lines, involvement of volunteers in referrals of at-risk cases in the context of return; support FGDs on return intentions to amend programs and responses
Protection Case Management	Core package of protection activities listed above in line with the Protection/ CP and GBV case management programs	Protection actors (as per agreed geo-split) will roll out HH level assessments with integrated Shelter questions to comprehensively identify needs, support exit from collective sites and alternative solutions (see detailed guidance note).	Targeted recording through safe disclosures and referral of individuals or HHs with protection needs or at heightened protection risk, including GBV and CP cases in line with relevant guidance and SOPs; see section on targeted recording.	Targeted recording through safe disclosures and referral of individuals or HHs with protection needs or at heightened protection risk, including GBV and CP cases in line with relevant guidance and SOPs; see section on targeted recording.	Case management of persons at risk of forcible return and other previous or current protection risks
Cash for protection	Core package of protection activities listed above in line with Protection Cash Guidelines	No (protection) cash for persons remaining in collective sites, however, ECA or RPCA to support exit strategy from CSs	No (protection) cash inside collective shelters hosting new arrivals; for life-saving purposes and after targeted recording by UNHCR, cash	Provision of protection cash assistance, as part of protection case management for the most vulnerable	No Recurrent Protection Cash for persons returning to Syria (it is not an existing modality unless they have

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		and to ensure high risk cases are supported outside CSs.	can be provided to support exit from CSs and life-saving interventions	including protection-related ECA and other cash for protection modalities in line with current guidance and SOPs on cash assistance;	protection risks and intend to remain in Lebanon).
Legal aid programs to support access to civil documentation, legal residency, etc legal counselling/ mediation and representation	Core package of protection activities listed above through legal actors and specialized partners	Legal awareness for IDPs in collective sites and referrals to individualizes legal aid and representation	Legal awareness through awareness sessions in relevant centres, particularly on civil documentation and residency	Legal awareness through mobile and static approaches as identification of referrals for individualized legal aid and representation	Legal aid support focusing on aspects on return, including birth registration, other civil documentation, HLP, etc. MoSA also operates outreach teams to coordinate, provide counselling or refer cases for LA support.
Identification and Referral of Persons at high risk	Core package of protection activities listed above and referrals through established procedures	Protection partners conducting HH level assessments aiming at identifying specific needs and provide CM services	Identification and referral of high-risk protection cases or Households for fast-track recording and assistance by UNHCR in line with the relevant guidance	Identification and referral of high-risk protection cases or Households for fast-track recording and assistance by UNHCR in line with the relevant guidance	At return sites where counselling takes place and through voluntariness assessment
Specialized services for Persons with Disabilities	Core package of protection activities listed above and referrals through established procedures	Support to persons with disabilities by assessing their needs and provide case management services and support their exit from	Support to persons with disabilities by assessing their needs and provide case management services and support their exit from	Persons with disability to be identified by relevant partners and refer persons to targeted recording by UNHCR to	Support for persons with disability through counselling, voluntariness assessment and linking

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		collective shelters, including provision of assistive devices	collective shelters, including provision of assistive devices	access individualized assistance	those returning to specialized services
Psychosocial support	Core package of protection activities listed above and referrals through established procedures	Emergency MHPSS: Psychological First Aid and provision of information about positive coping mechanism, and referral of persons with severe MH needs to available MH services under the health sector where possible	Emergency MHPSS: Psychological First Aid and provision of information about positive coping mechanism, and referral of persons with severe MH needs to available MHPSS services	Emergency MHPSS: Psychological First Aid and provision of information about positive coping mechanism, and referral of persons with severe MH needs to available MHPSS services	Support for persons with high levels of distress through counselling, voluntariness assessment and linking those returning to specialized services inside Syria
Protection monitoring	Core package of protection activities listed above on protection monitoring	Using existing site monitoring tools for IDPs	Site monitoring tools, profiling and other modalities on protection monitoring for new arrivals	Monitoring through protection actors with dedicated protection monitoring programs	As outlined in the return plan, border monitoring and protection monitoring, return intentions surveys (led by UNHCR)
Protection mainstreaming	Core package of protection activities listed above through cross-sectoral collaboration	Protection mainstreaming: Monitoring protection risks and working with Site Management to mitigate the protection risks and actively follow up with relevant actors to amend as necessary; approach should be through protection actors and other sectors present at the sites to enhance monitoring of sites and support of IDPs with exit strategies (see above)	Protection mainstreaming: Monitoring protection risks and working with Site Management to mitigate the protection risks and actively follow up with relevant actors to amend as necessary	Protection mainstreaming through protection partners and other sectoral actors present in communities; concerns to be raised at SICG subnational level to monitor implementation	Protection mainstreaming through training of actors involved in the process, safeguarding measures, AAP mechanisms