

Lebanon Contingency Plan [V.2]



Contingency Plan [version 2]

The purpose of this CP is to define the preparedness & response actions to cope with a single scenario:

A more mass influx of refugees into Lebanon (than RRP5):

- a) Situation in Syria leading to mass influx of ~ 50,000 refugees into Lebanon in a single day (through all crossing points)
- b) An influx that significantly exceeds current trends → i.e. nearly a million more than RRP5 projection, arriving by end-2013

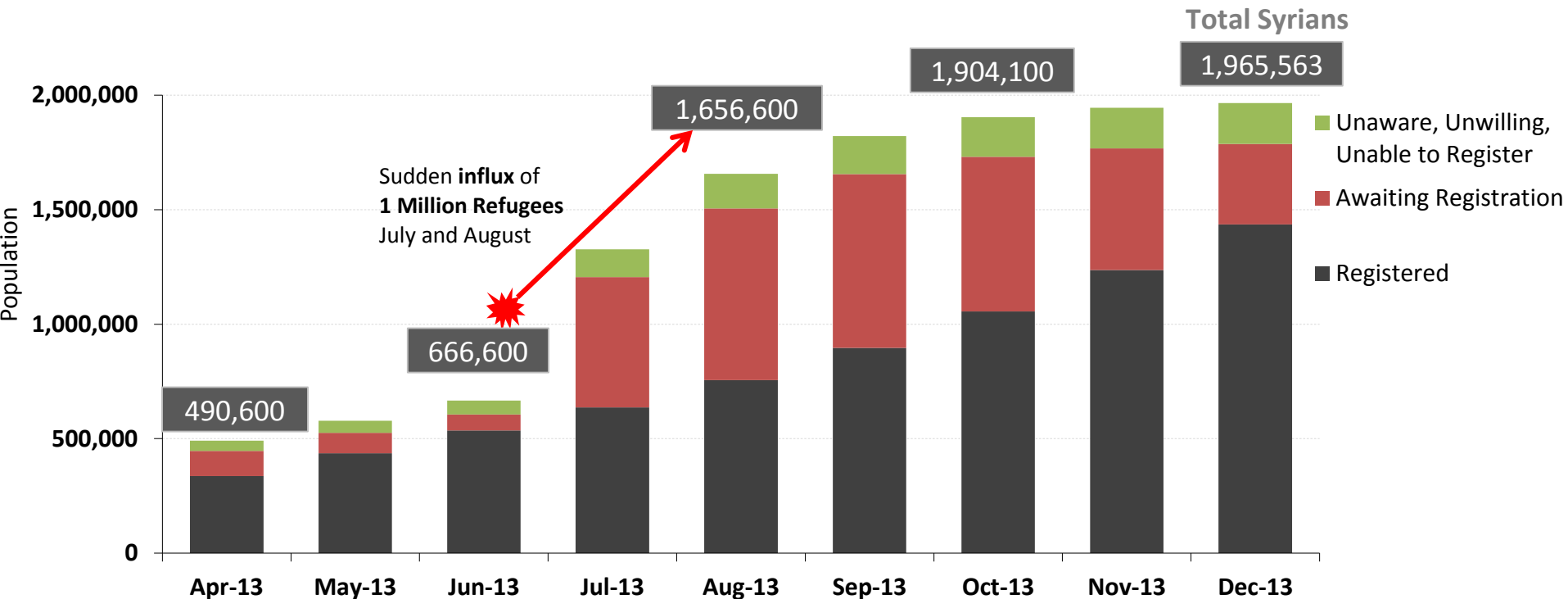
Not included in this plan, but in the UNCT CP:

- Earthquake
- Epidemic
- Complex Emergency (either due to internal conflict, a spill-over of Syrian conflict, &/or 'regional entanglement')

Population Projection

Assuming that the crisis occurs during July (& into August)

Population Category	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13
Unaware, Unwilling, Unable to Register	44,600	52,600	60,600	120,600	150,600	165,600	173,100	176,825	178,688
Awaiting Registration	110,000	90,000	70,000	570,000	750,000	760,000	675,000	532,250	350,875
Registered	336,000	436,000	536,000	636,000	756,000	896,000	1,056,000	1,236,000	1,436,000
Totals	490,600	578,600	666,600	1,326,600	1,656,600	1,821,600	1,904,100	1,945,075	1,965,563
<i>Increase per month</i>	<i>93,600</i>	<i>88,000</i>	<i>88,000</i>	<i>660,000</i>	<i>330,000</i>	<i>165,000</i>	<i>82,500</i>	<i>40,975</i>	<i>20,488</i>





I-A Contingency Plan for Refugees [V.2]


CONTENTS


1. Scenarios
 - i. Context analysis
 - ii. Scenario descriptions & triggers
2. Key Features of the situation & response
3. Preparedness & Response Strategy (= list of National / Area level tasks)
4. Annexes
 - A. Refugee population projection under the CP scenario
 - B. Maps
 - C. CP coordination structure
 - D. Rapid assessment forms
 - E. Area-specific descriptions
 - F. Preparedness & response matrix
 - G. Contingency stocks


Assumptions (1)


 **Key Resources included in RRP5:** Need to determine funding mechanism to accelerate RRP5 in case of massive influx or launch a Flash Appeal.


 **Registration:** no. of refugees will multiply → existing registration centers will need to grow / duplicate to meet the growing demand for registration.

 **Protection:** no. of illegal entries will rise significantly → increasing the potential for conflicts, child protection cases & other concerns.

 **Shelter:** lack of shelter opportunities → in summer people will be sleeping outdoors, in winter taking over mosques, churches, schools, etc.

 **WASH:** increased demand for water at height of summer → contaminated water use → waterborne disease could increase in all populations.

 **Food:** localized shortages of food may occur due to inefficiencies in distribution, but the main problem will be lack of \$ to purchase it.

 **NFIs:** as with food, access will be the problem more than availability, due to lack of \$ → more radical prioritization to the most needy will be necessary.

Assumptions (2)



Health: a significant deterioration of the current situation → increases in morbidity & mortality, not just confined to the refugees.



Education: possible conflict of interest as Lebanon seeks to sustain its educational activities, but schools might be needed for shelter, etc.



Logistics: limited logistic capacity, e.g. entry points, poor road conditions, more checkpoints → local market could become more volatile; possible shortages of fuel leading to lack of electricity & water.



Security of operations: the real risk of Lebanon being drawn into the Syria conflict; also of localized conflicts within Lebanon → in the worst case possible relocation/evacuation of staff/programme suspension (but outside the scope of this CP).

- ⇒ In general this deterioration would further raise tension between host communities & refugees → possibility of internal displacement...
- ⇒ Initial situation may be overwhelming → responders may have to provide life-saving assistance only in key centers rather than range widely across the country as at present, finding the refugees where they are...

Bekaa Area Workshop Conclusions

- Capacity in Bekaa would be overwhelmed by 1,250 new arrivals per day for 3 days (i.e. double the current 4,000 persons per week), necessitate a contingency response, possibly caused by:
 - A mass influx of up to 30,000 into Arsel, moving on to Wadi Khaled or Central/West Bekaa.
 - A major reverse for 1 side or the other in Rif Damascus / Damascus could trigger a large influx of women & children, with a problematic mix of civilians & combatants.
 - A large influx into North / Central Bekaa simultaneously; if into Hermel they will likely move on to Baalbek & South Lebanon; if through Masnaa, they will likely go to Marj, Ghazze, Sawiri, Dalhamiye, Saadnayel, Taalabaya, Bar Elias, Kherbet Rouha, Rashaya, Jib Jenin, & Mansoura.
- Some areas may become cut off (they have already had this experience), making operations more difficult & potentially dangerous → reliable local partners will be essential, though they may also be overwhelmed.

Implications:

- *All agencies need to consider how they would manage their critical operations by 'remote control', & coordinate their efforts to prepare for this.*
- *The lack of capacity would force the response community to focus on urgent emergency cases only for at least the first 3 days, in terms of shelter, WASH, food health, & other critical sectors.*
- *As well as monitoring at the borders, flows of refugees across the country should also be monitored.*
- *In terms of shelter, Bekaa Area is therefore already close to the contingency scenario at the moment, even at the lower number of refugees now entering.*

North Area Meeting Conclusions

- Response capacity for Akkar+T5 would be overwhelmed by 2,500 new arrivals per day even with a group intervention approach, & some sectors including WASH & shelter have lower thresholds of only half this, meaning that activation of the CP would be needed simply in order to trigger additional human/financial resources & release stocks.
- The majority of the households may enter illegally which means their onward movement will be restricted, especially in areas with many checkpoints (e.g. Wadi Khalid & Akroum), & some districts may take measures that restrict the settlement or movement of refugees, most likely those where the security situation may prevent humanitarian actors from intervening.
- Plan for continuity of operations in an escalation of fighting in Jabal Mohsen / Bab el-Tabbaneh & possible spread to Qobbeh & Abu Samra, causing prolonged closure of the northern highway. Alternative transportation arrangements are needed, including by sea.

Implications:

- *Improve networking & communication with authorities & all partners on CP planning issues.*
- *Continue to look for alternative shelter solutions through pre-identification of sites on govt & vacant land – even ‘farm’ sites after disinfection – based on preset min. criteria & full involvement of municipalities, together with tents, ‘sealing-off kits’ & WASH facilities.*
- *Allocate (& physically move) key stocks need into the regions & establish a strategic reserve at national level for major emergencies.*
- *Consider establishing common warehouses in strategic locations in Akkar such as in Wadi Khalid & Halba (to serve both Akkar & Minnieh-Denniye).*
- *Try out the alternative routes for the movement of relief items by truck, & examine the option of movement from Tripoli to Akkar by sea.*

South Area Workshop Conclusions

- Response capacity in the South would be overwhelmed by 1,250 persons per day over 3 days, triggering a shift from HH to 'group' approach.
- In the South the most alarming trigger for a mass internal displacement is an intervention by Israel (covered by the UNCT-CP), but a plan is needed in case the main Saida-Tyre highway is cut, restricting movement & normal functioning of markets, etc., & the most likely scenario is that certain areas will become cut-off, making it necessary to respond by 'remote control'.
- Critical difference between the South & other areas is UNIFIL, & it is essential to clarify the relationships & possible support, especially for security, that could be provided by UNIFIL.

Implications:

- *Make alternative transportation arrangements in advance, including the possibility of by sea.*
- *Impress upon Lebanese authorities their responsibility for ensuring humanitarian access.*
- *Consider how to manage operations by 'remote control', & coordinate preparation for this.*
- *Strengthen linkages with UNIFIL at different levels, with the exchange of liaison officers.*
- *Enhance border monitoring for pre-screening / fast-tracking the most vulnerable, for mass communication, and to get advance warning of large flows heading to other areas.*
- *Establish a Protection Crisis Team for early identification of the high risk or with specific needs.*
- *Area Shelter Working Group to quantify the available shelter stock in the area, & National Shelter Working Group to start look outside the country to reinforce the response.*
- *Map availability of key stocks & a higher level of reserves in the South.*

Mt Lebanon Area Meeting Conclusions

- In rural Mt Lebanon there are many very small ITS & the authorities have only just perceived the scale of the problem, let alone responded to it.
- In Beirut there are only collective centres & apartments, but rents are rising & capacity to accommodate the gradual but constant flow of refugees into the city is nearly exhausted.
- The city is 'factionalized', and Mt Lebanon is a patchwork of minority areas, which makes it imperative to communicate with the political parties that dominate these areas, since they have more capacity to respond in these locations than the state.

Implications:

- *Establish effective liaison with relevant municipal authorities & security forces (local ISF).*
- *Initiate dialogue / forge relationships with the 'political parties' that dominate certain areas.*
- *Ensure that field office roles, responsibilities, resources & authority to commit funds are clear.*
- *Increase capacity in shelter & WASH (e.g. water trucking), also by finding new partners.*
- *Map 'W-W-W' to support coordination, rather than focusing only on managing own response.*
- *Establish an early warning system of any impending mass arrival (from Bekaa / the North).*
- *In responding, try not to increase existing 'pull factors' to the city, if at all possible.*
- *Engage with municipalities & ISF to try to manage the issue of illegal occupation sensitively.*
- *Contact owners of potential shelter solutions in the city (e.g. stadiums & multi-storey car-parks), & continue to look for more ITS & transit site locations in Mt Lebanon, in advance.*
- *Pre-allocate a proportion of national stocks of NFIs, food, shelter & WASH items to this area.*
- *UNHCR to establish a partnership agreement with Lebanese Red Cross at national level.*
- *Establish an Area Health Working Group to build PHC capacity & possible mobile medical units.*

Preparedness & Response Strategy at National / Area Level

- a. Management, Coordination, Info Management & Fundraising
- b. External Relations & Public Information
- c. Security of Operations
- d. Logistics
- e. Registration
- f. Protection
- g. Child Protection
- h. Prevention & Response to SGBV
- i. Shelter
- j. WASH
- k. Food Security & Nutrition
- l. Non-Food Items (NFI)
- m. Health
- n. Education



Mgt, Coordination, Info Mgt & Fundraising

PREPAREDNESS ACTIONS

- Determine / agree any special additional coordination mechanisms to manage the response.
- Consult donors re. reprogramming of funds contributed for Syrian refugees to support IDPs.
- Develop a strategy for agencies to mobilize additional resources quickly.
- Regularly obtain from all agencies a self-assessment of their current level of preparedness.
- Continue to sensitize GoL to the establishment of 'Transit Sites' in a mass influx scenario.
- Map displacement scenarios & liaise with GoL to be prepared in case access is restricted.
- Strengthen the current border monitoring system / introduce it ASAP with GoL support.
- Continue to enhance coordination with the Red Cross on contingency planning.
- Clarify authority of Field Coordinators - specifically for managing response to the scenarios.
- Review requirements for info management in a contingency response.
- Complete the 3W mapping & produce maps of key facilities in each area.
- Add contingency planning as a standing item to each sector / I-A working group agenda.
- Pre-agree vulnerability / targeting criteria for sectors.
- Determine core tasks to be fulfilled in a crisis & prepare rosters of key staff to perform them.
- Create a core group to oversee 'operationalization' of the CP, and follow-up with Sector Leads & Senior Field Officers to ensure they complete all assigned taskings.



External Relations & Public Information

PREPAREDNESS ACTIONS

- Pre-identify PI/Reporting Officers to be deployed rapidly to an area where needed.
- Revitalize the working group on PI policy, to produce common messaging & template Q&As.
- Develop mass communication capacity, strategy, tools & messages.



Security of Operations

PREPAREDNESS ACTIONS

- Liaise with ISF & LAF to assess the security situation for refugees, staff & host communities.
- Establish an internal security plan & SOPs for staff movements & contingency response.
- Ensure that the warden system is updated & they are briefed on the changing environment.
- Ensure that all staff & partners are briefed on the latest security developments.
- Seek clarification from GoL on how NGOs can use radios for operations & safety.
- Validate training & briefing & test communications by holding a country-wide security drill.
- Assess telecomms requirements of UN agencies & partners, & procure necessary equipment.
- Ensure that the prescribed field security equipment is in place for all locations & staff.





Logistics

PREPAREDNESS ACTIONS

- Establish an information sharing forum to address common logistic problems & solutions.
- Inventorize existing stocks of shelter materials, food & NFIs held by all agencies in country.
- List 'frame agreements' of all agencies/sectors & ask agencies to check that they will work.
- Identify hubs across the country for stockpiles of supplies, & look for common warehousing.
- Draw upon the scenario planning & mapping to identify key locations for reserve stockpiles.
- Analyze transportation network for choke points & possible solutions to logistic problems.
- Establish protocols for re-supply from regional stocks & drawing upon common procurement.



Registration

PREPAREDNESS ACTIONS

- Review & refine the emergency screening & registration methodology & disseminate an SOP.
- Prepare a roster of emergency registration staff, & prepare the centres to absorb more staff.
- Prepare & keep up to date the info to be disseminated to all refugees upon registration.
- Develop the capacity of the emergency registration staff through training.
- Create a contingency stock of registration materials, eg family cards, fixing tokens, manifests.
- Prepare an SOP & assessment form for rapid screening & registration of Lebanese IDPs.



Protection

PREPAREDNESS ACTIONS

- Enhance border monitoring & rapid pre-screening system, & to try to track refugee flows.
- Continue liaison with LAF & ISF to keep all official crossing points open & prevent refoulement.
- Liaise with GoL & UNIFIL to plan & manage a possible remote response south of the Blue Line.
- Confirm policy, process & capacity for high risk or sensitive cases, including use of 'safe houses'.
- Create a comprehensive list of contacts with respect to the border monitoring function.
- Discuss with GoL protection issues in a mass influx – treatment, follow-up, detention, etc.
- Review staffing requirements at national level to provide more protection support to the field.
- Create a 'training package' for new protection staff in UNHCR & partner agencies.



Child Protection

PREPAREDNESS ACTIONS

- Identify emergency interim care for unaccompanied minors (UAM) & appropriate sites/locations & partners to provide emergency shelter for children at risk.
- Prepare & disseminate SOPs, assessment & monitoring forms for Child Protection.
- Identify & disseminate emergency referral pathways of child protection services per 'hub'.
- Prepare & procure contingency stocks of recreation & early childhood development kits.
- Develop IEC material with key messages on emergency child protection to raise awareness.
- Plan for child-friendly spaces in collective centres, transit sites, ITS & other forms of 'camps'.



Prevention & Response to SGBV

PREPAREDNESS ACTIONS

- Update contact information of SGBV-TF members including GoL & chairs at field level.
- Order & distribute a stock of PEP Kits to the PHCs & hospitals included in the referral pathways.
- Continue ongoing training of medical personnel on clinical management of sexual violence.
- Disseminate minimum standards for the Dignity Kit & review sanitary items provided by WASH.
- Each case management agency to have clear protocols on data security in case of evacuation.
- Finalize key messages & IEC/visuals on the prevention of SGBV.
- Disseminate to members SOPs, safety audit templates & emergency GBVIMS intake forms.
- Translate the PSEA module into Arabic.



Shelter

PREPAREDNESS ACTIONS

- Agree shelter vulnerability criteria; then create & use a standardized assessment approach.
- Identify, map & rehabilitate all potential transit sites & collective shelters.
- Identify, assess & plan layout of all locations on road sides, unoccupied/agricultural land, etc.
- Map existing stocks of building 'sealing-off' kits across all areas, & increase the stocks.
- Assess the stock of tents &/or shelter boxes & increase to sufficient for at least 20,000 HH.



WASH

PREPAREDNESS ACTIONS

- In cooperation with Shelter Sector, identify options / locations to accommodate a mass influx.
- Review & update lists of current stocks & available capacity for critical rapid response.
- Review staffing requirements & support mechanisms against current capacity.
- Pre-position critical WASH materials for response at pre-identified locations, e.g. transit sites.



Food Security & Nutrition

PREPAREDNESS ACTIONS

- Maintain market monitoring system to track price inflation, with baseline before the influx.
- Predefine simple targeting criteria for a mass displacement, to target 'on-arrival' food parcels.
- Estimate likely volume & locations, for use of one-off food vouchers for new arrivals.
- Confirm parameters to scale-up of food parcels, & prepare standby agreements with producers.
- Warn donors that vouchers' purchasing power may reduce just as more will be needed.



NFIs

PREPAREDNESS ACTIONS

- Predefine simple targeting criteria for a mass displacement, to target 'NFI New Arrival' Kits.
- Standardize the NFI kit contents & specifications of individual items, provided by all agencies.
- Warn donors that contingency stocks requested under RRP5 (for 44,000 HH) by all agencies will be quickly exhausted & make them agree to establish strategic reserves.



Health

PREPAREDNESS ACTIONS

- Map capacity, set up coord. agreements & a matrix of services dividing roles / responsibilities.
- Define key medical items for the contingency response, & inventorize the level of stocks held.
- Map out existing PHC & SHC facilities at country level.
- With MoPH assess the risk of an epidemic, & ensure that the response is properly planned.



Education

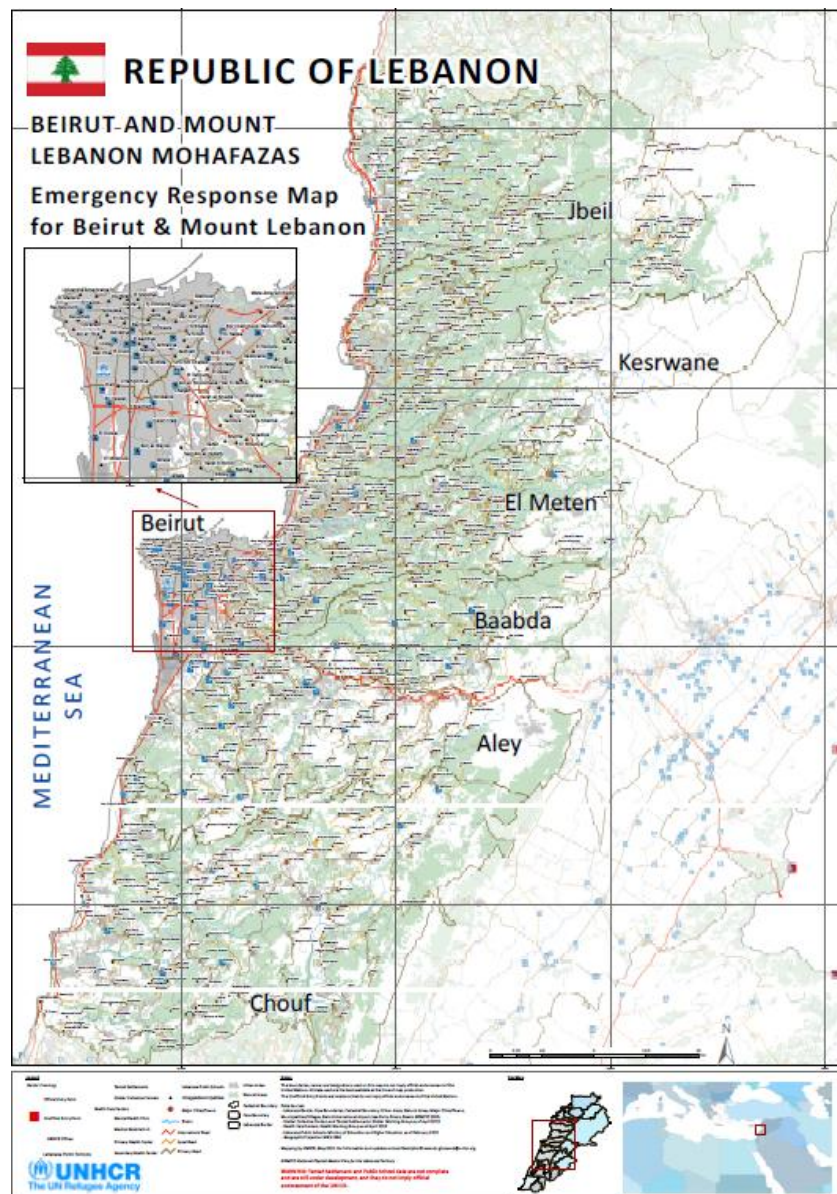
PREPAREDNESS ACTIONS

- Assess & map ITS for access to education, no. of children, environment & space for school tents.
- Only use schools for shelter as a last resort (i.e. if the influx or displacement is v. rapid/large).
- Raise awareness, provide vaccines, hygiene kits, medication, shampoo to all schools.
- Conduct a Joint Education Capacity & Needs Assessment, of all schools across the country.
- Map availability of incentive teachers & provide them with training, facilities & supplies.
- Preposition 'Schools-in-a-Box', Recreational Kits & school tents/prefabs at key locations.
- Procure additional education supplies sufficient for 1 month's mass influx (eg 150,000 children).
- Confirm with MEHE & communicate the curriculum for Syrian refugee children in Lebanon.
- Obtain authorization from MEHE for education to take place in any form of tented settlement.
- Prepare to provide teacher training, enhanced facilities, school supplies, & rehabilitation.
- Reinforce MEHE capacity through deployment of an Emergency Education Team.

Annexes

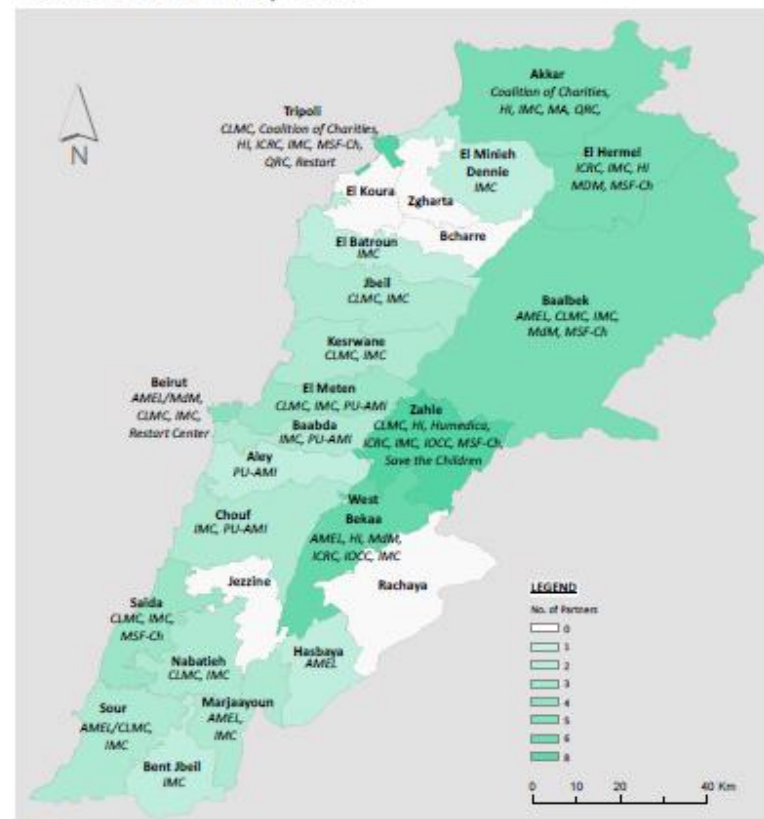
- A. Refugee Population Projection under the CP scenario
- B. Maps
 - Thematic Maps of Key Infrastructure in Lebanon ([link to online 'drop-box'](#))
 - Who-What-Where (partner) maps ([link to 'drop-box'](#))
 - Current Registered Refugee Distribution & Influx Points ([link to 'drop-box'](#))
- C. Contingency Plan Coordination
 - Diagram of Coordination Structure
 - Contact List at <http://data.unhcr.org/syrianrefugees/country.php?id=122>
- D. Rapid Assessment Forms
 - Newcomer Household Assessment Form
 - Multi-Sectoral Rapid Assessment - Group Form
- E. Area-Specific Descriptions (Bekaa, North, South, Beirut & Mt Lebanon)
 - Scenarios & Triggers
 - Assumptions
- F. Table of Suggested Actions for Initial Response Period
- G. Preparedness & Response Matrix
 - National level / Field level
- H. Contingency Stocks
 - Pre-positioned stocks held by all agencies (not just UNHCR)

Thematic Maps of Key Infrastructure



Who-What-Where maps for each sector

SYRIA REFUGEE RESPONSE Health Sector Partners Mapping No. of Organizations Intervening at the caza level. Beirut Lebanon. May 2013.



This information is based on Health Partners reporting to the Health Sector Working Group.
Alice Wimmer, wimmer@unhcr.org; Than Aye Aye, than@unhcr.org
Mapping by UNHCR. For more information and updates,
Contact: Rodolphe Gossiaux, gossiaux@unhcr.org

The boundaries, names, and designations used on this map do not imply official endorsement of the United Nations or UNHCR. All data used were the best available at the time of map production.
Health Care Centers by UNHCR as of April 2013;

AMEL: AMEL Association International; CLMC: Caritas Lebanon Migrant Center; HI: Handicap International; ICRC: International Committee of the Red Cross; IMC: International Medical Corps; IDCC: International Orthodox Christian Charities; MA: Makassed Association; QRC: Qatari Red Crescent; MDM: Medecins Du Monde; MF: Mafkroum Foundation; MSF: Medecins Sans Frontieres; PU-AMI: Premiere Urgence - Aide Medecale Internationale; RESTART: Restart Center for the Rehabilitation of Victims of Violence and Torture; Save the Children

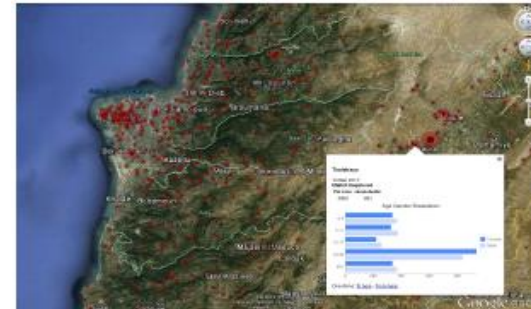
Current Registered Refugee Distribution & Influx Points



Interactive 3D Map (link to online map)

Inter-Agency Emergency Refugee Response Map

An online interactive 3D map showing the location of refugees, information on key sector partners and activities. Accessible through username and password, available upon request.



This feature shows the total number of UNHCR registered refugees per location, by age and sex.

Tented Settlements Collective Shelters

Shows the exact locations of informal tented settlements and collective shelters and includes information e.g.:

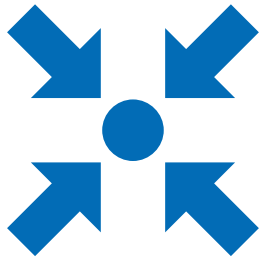
- No. of persons
- Households
- Tents



Health Facilities Available to Refugees

Mapping locations of:

- Hospitals
- Primary health care centres
- Medical mobile units



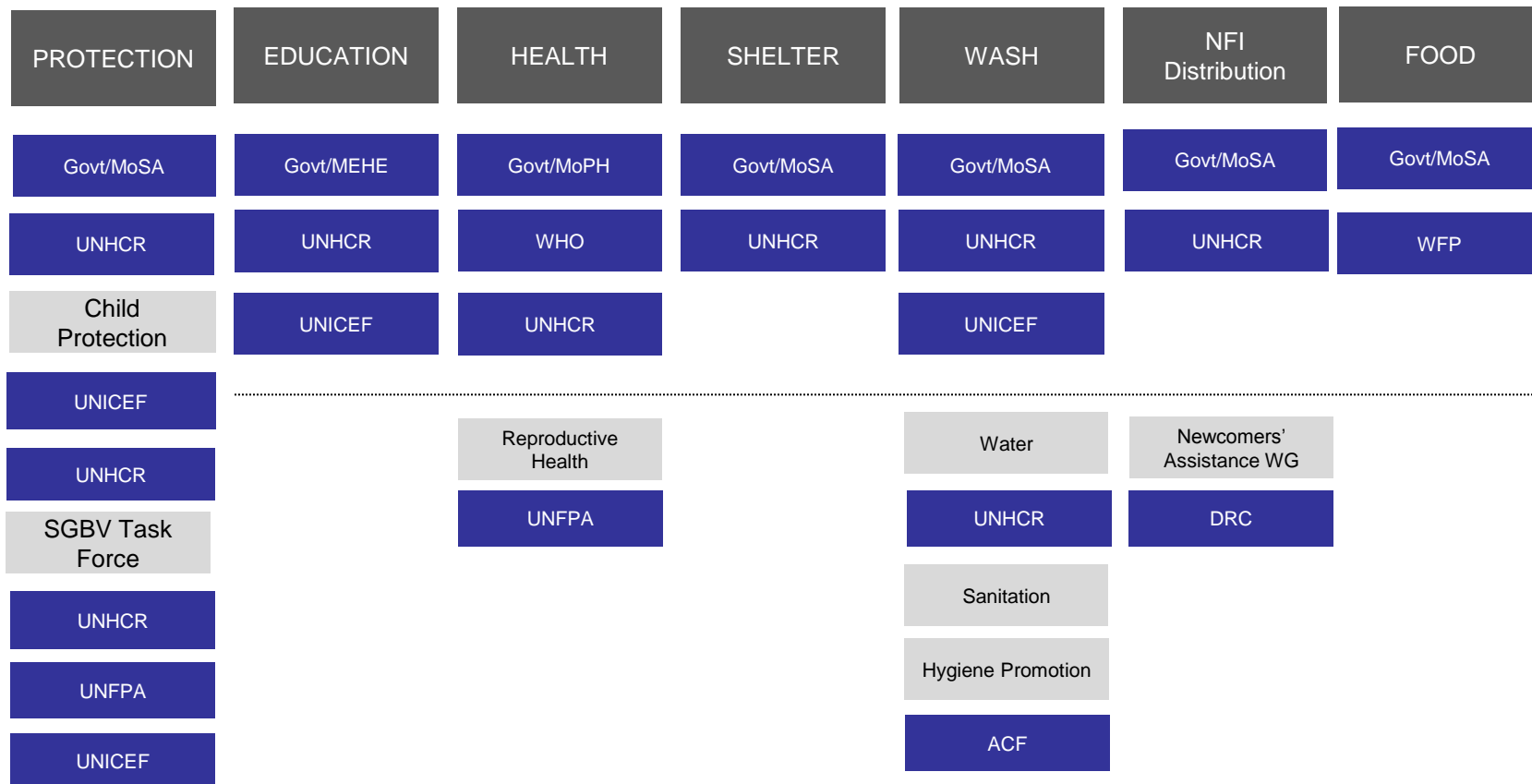
COORDINATION STRUCTURE

INTER-AGENCY COORDINATION
PMO / MoSA / UNHCR

Host Communities

Govt/MoSA

UNDP/UNHCR



Flow Chart of Suggested Actions for initial response period

- **Actions at national level, by Govt, UN & Partners**
- **Within first 24 hours**
- **Within first 48 hours**
- **Within first 72 hours**
- **Within first week**
- **Within first month**

Actor(s)	Within first 24 hrs	Within first 48 hrs	Within first 72 hrs	Within first week	Within first month
MANAGEMENT, COORDINATION, INFO MANAGEMENT & FUNDRAISING					
GoL (MoSA) + UNHCR + all relevant agencies / sectors	<ul style="list-style-type: none"> ▪Activate CP response after verification of numbers & inform UNSCOL, UNIFIL, OCHA & partners ▪GoL start providing population movement data on a daily basis (entries & exits) ▪Agencies adjust / re-deploy staffing for initial 24 hrs response & share lists of staff 	Seek urgent authority from the Council of Ministers to establish 'transit sites' at predetermined locations		<ul style="list-style-type: none"> ▪Review existing national / field level coordination structure & adapt as necessary to the actual situation ▪Ensure regular consultation with ICRC, the Red Cross Movement & any other relevant actors not formally in the coordination structure 	<ul style="list-style-type: none"> ▪Sector working groups review priorities & capacities in the light of the new emergency, & report any alarming shortcomings ▪Coordinate any inter-agency or cross-sectoral rapid assessment & present a 'gap analysis'
EXTERNAL RELATIONS & PUBLIC INFORMATION					
GoL (MoSA) + UNHCR	<ul style="list-style-type: none"> ▪PI staff issue daily updates with info from the field & sectors ▪Deploy the identified Comms / Reporting Officers to each area 	Issue a joint press statement / conference following consultation with agency PI units		Initiate joint GoL-UN donor meeting & repeat periodically	
REGISTRATION					
UNHCR	<ul style="list-style-type: none"> ▪Switch to emergency registration process at all transit sites & registration centres ▪Activate roster of standby registration staff & redeploy some existing capacity to predetermined points ▪Mass info mechanism engaged at borders, transit centres & community centres 	Depending on size of influx, prepare manifesting or fixing tokens at border points for refugee transportation	Engage additional local partners to support reception, registration & identification of the vulnerable		

Actor(s)	Within first 24 hrs	Within first 48 hrs	Within first 72 hrs	Within first week	Within first month
PROTECTION					
GoL (MoSA) + UNHCR + all relevant partner agencies	<ul style="list-style-type: none"> ▪ Mobilize full-time presence at borders to ensure unhindered & safe entry, immediate identification of vulnerable persons & provision of information ▪ Monitor protection situation / identify protection issues on ground, including physical safety at transit sites, etc ▪ Ensure safe transport from border areas to transit sites, camps, other designated areas away from borders 	Centralize tracking of refugee movement from entry points within the country, & communicate this rapidly	<ul style="list-style-type: none"> ▪ Coordinate with relevant partners regarding voluntary returns, possible TCN evacuation & repatriation ▪ Coordinate relocation of populations in need of relocation - if necessary establish humanitarian corridors ▪ Liaise with LAF / ISF on documentation, detentions, application of guidelines on the quick identification & treatment of persons with special needs 		
CHILD PROTECTION / PREVENTION & RESPONSE TO SEXUAL & GENDER BASED VIOLENCE (SGBV)					
GoL (MoSA) + UNHCR + UNICEF + all relevant partner agencies	Liase with other sector lead agencies to mitigate risks / ensure SGBV prevention & response is integrated into their own response	<ul style="list-style-type: none"> ▪ Set up child protection monitoring at the border entry points to identify UAM / SC / children at risk ▪ Disseminate IEC materials & conduct awareness raising on child protection concerns 	<ul style="list-style-type: none"> ▪ Conduct psychosocial & recreational activities in transit sites, & through mobile outreach ▪ Tracing & family reunification for UAM / SC & referral to alternative care, esp. if in transit sites ▪ Implement emergency interim care for UAM & provide shelter for children at risk ▪ Case management of children at risk – child recruitment, physical & sexual violence / exploitation, trafficking ▪ Ensure SGBV is integrated into any emergency protection monitoring & any inter-sectoral assessment 		

Actor(s)	Within first 24 hrs	Within first 48 hrs	Within first 72 hrs	Within first week	Within first month
SHELTER / WASH					
GoL (MoSA) + UNHCR + UNICEF + all relevant partner agencies	<ul style="list-style-type: none"> Utilize agreed vulnerability criteria in order to radically prioritize most vulnerable for provision of shelter Rapid needs assessment particularly of ITS & potential transit sites not already been assessed & planned 	<ul style="list-style-type: none"> Open new 'transit sites' & extend existing ones to double their planned size if possible Hygiene promotion / awareness raising Provision of water to all main sites through connection to existing network / water trucking Set up water storage facilities at all main sites Mass water treatment (chlorination) Distribute aquatabs / water purification filters Test water quality 	<ul style="list-style-type: none"> Initiate an immediate rapid assessment of the locations of families on the move elsewhere Construct emergency latrines (using pre-fabricated sanitation units) / defecation fields if no alternative 	<ul style="list-style-type: none"> Set up water distribution tap-stands including pipe networks Construct emergency showers Undertake drainage works Distribute hygiene kits (including water containers or buckets) & baby kits to those with infants Install solid waste bins & arrange garbage disposal 	Distribute latrine / camp cleaning kits
FOOD / NON-FOOD ITEMS (NFIs) Distribution					
GoL (MoSA) + WFP + UNHCR + all relevant partner agencies	Prioritize in-kind food & NFI distributions at ITS, transit sites, collective centres, etc., having already mapped out the likely locations & planned associated distribution points	Utilize the simplified targeting criteria to quickly identify the other vulnerable &/or needy families, who are not living in an ITS, transit sites or collective centres			WFP to set up a system to monitor for malnutrition

Actor(s)	Within first 24 hrs	Within first 48 hrs	Within first 72 hrs	Within first week	Within first month
HEALTH					
GoL (MoPH, MoSA) + UNHCR + WHO + all relevant partner agencies	<ul style="list-style-type: none"> Establish teams at entry points to conduct triage / epidemic control / health monitoring / rapid assessment Referral system for stabilised cases, on to the network of existing PHC & SHC, & extend their opening hours 	<ul style="list-style-type: none"> Monitor & control health of population, particularly epidemic monitoring & control Mobile clinics/outposts to deliver emergency response & PHC at new sites or personnel, equipment & medicines at existing facilities to increase capacity 	Establish staffed, equipped & properly resourced field hospitals		
EDUCATION					
GoL (MEHE, MoSA) + UNHCR + UNICEF + all relevant partner agencies				Ensure that education data is collected, consolidated, analysed & disseminated, & perform M&E regularly	<ul style="list-style-type: none"> Initiate Two-Shift schooling country-wide, ensuring that fees, equipment & running costs are covered Set up child-friendly spaces in collective centres, transit sites, & ITS, so that some educational activities continue Under Scenario 1a - mass but gradual refugee influx, & where possible under Scenario 2 - mass IDPs, establish tented schools in collective centres & transit sites Under Scenario 1b or 2, use schools for shelter but initiate Education's plan to get all refugee & displaced Lebanese children back to school within 3-6 months

Contingency Planning Process, so far

- ✓ Workshop on Prep. & Response Actions at national level, 30 April
- ✓ Workshop on Prep. & Response Actions for Bekaa (Zahle), 15 May
- ✓ Meeting on scenarios & assumptions for North (Tripoli), 20 May
- ✓ Workshop on Prep. & Response Actions for South (Tyre), 23 May
- ✓ Meeting on scenarios & assumptions for Mt Leb. (Beirut), 6 June
- ✓ Meeting to harmonize CP for refugee response & UNCT CP, 6 June
- ✓ Meeting with GoL (MoSA), 10 June
- ✓ Share with all inter-agency partners, 27 June
- ✓ Brief UNHCR / UN Agencies / sector leads / GoL, 28 June
- ✓ **Brief partners at Inter-Agency meeting, 5 July**
- ✓ If necessary, another national level workshop on the CP....

Feedback

From Sectors

- Agencies would like GoL to do more to facilitate entry of key personal & critical supplies (e.g. medicines) into the country
- Specific concern about MoPH capacity to respond to epidemic
- All to focus on checking reserve stocks of critical items per sector

From Govt (MoSA)

- MoSA to organise a GoL inter-departmental meeting on CP
- MoSA to participate in further work on the UNCT & the I-A CPs
- Special meeting with MoPH, on epidemics, injured, & question of allowing in foreign medical specialists / field hospitals, etc.
- Special meeting with MoD on border control/monitoring, registration, security of aid workers, humanitarian corridors, etc.

Refugee Contingency Plan – Next Steps

- ❖ Sector Leads to include contingency planning in meeting agenda:
 - Validate the list of preparedness actions – are they correct?
 - Identify responsibilities
 - Assign tasks
 - Agree deadlines
 - Look at the response actions / flow chart in the same way
 - ❖ UNHCR Area Offices have already taken the area level list of preparedness / response actions & are addressing them at their:
 - Inter-agency meetings
 - Sectoral working group meetings
 - ❖ Small steering group to monitor state of readiness / compliance
- And complete preparedness actions, **before it happens**