



**Inter-Agency
Coordination**
Lebanon



DECEMBER-JANUARY UPDATE

- News from December and January
- Launch of the Lebanon Crisis Response Plan 2017-2020
- The mental hurdles Syrian refugees face in Lebanon
- The trauma of exile: Alaa's story

DEVELOPMENTS

FUNDING

Agencies and the Government of Lebanon have requested USD 2.48 billion in the 2016 Lebanon Crisis Response Plan (LCRP). As of December 2016, over USD 1.12 billion has been allocated in support of the LCRP, almost 50 per cent of the plan's requirements

REGISTERED SYRIAN REFUGEES

A total of 1,011,366 individuals are currently registered with UNHCR in Lebanon

Launch of the Lebanon Crisis Response Plan 2017-2020

Lebanese Prime Minister Saad Hariri together with UN Special Coordinator Sigrid Kaag and UN Resident and Humanitarian Coordinator Philippe Lazzarini launched on 19 January the Lebanon Crisis Response Plan 2017 – 2020.

As the conflict in Syria approaches its seventh year, the Government of Lebanon and its national and international partners appealed for USD 2.8 billion to provide critical humanitarian assistance and protection to persons of concern as well as much needed investments in Lebanon's public infrastructure, services and local economy in 2017.

The Lebanon Crisis Response Plan (LCRP) brings together more than 104 partners to assist 2.8 million highly vulnerable people living in Lebanon. It aims to provide protection and immediate assistance to 1.9 million individuals - including Syrian refugees, vulnerable Lebanese and Palestine refugees - deliver basic services to 2.2 million people, and to invest in the Lebanese infrastructure, economy and public institutions.

2016 Vulnerability Assessment of Syrian refugees in Lebanon

The complete findings of the 2016 Vulnerability Assessment of Syrian Refugees (VASyR), conducted by UNHCR, UNICEF and the World Food Programme (WFP) were published in December 2016.

The annual study found families had exhausted their limited resources, and were adapting to survive on the bare minimum, deploying harmful or asset-depleting coping mechanisms to survive. It showed that over one third of refugees were moderately to severely food insecure, a 12 per cent increase when compared to 2015. The share of households living below the poverty line remained at an alarming 71 percent.

The full report details a series of recommendations that will inform future humanitarian programming in Lebanon. It is available at: <http://data.unhcr.org/syrianrefugees/download.php?id=12482>

World Vision's WASH Awareness Campaign

World Vision launched a media campaign in Lebanon's Bekaa valley to raise awareness on water preservation, hygiene, the use of water meters and the benefits of subscribing to the Bekaa Water Establishment's water network system.

Over one third of Syrian refugees are moderately to severely food insecure

World Vision’s Water and Sanitation project aims at reducing the risk of water, sanitation and hygiene-related diseases and mortalities

UNHCR estimates that over 850,000 vulnerable refugees and Lebanese are in need of support to survive this winter

World Vision’s Water, Sanitation and Hygiene (WASH) project aims at enhancing basic infrastructure and economic recovery in Ablah and Taalabaya in central Bekaa, through improving the water supply network. The latter provides access to safe water, sanitation facilities, and hygiene services, which in turn helps reduce the risk of WASH-related diseases and mortalities.

The campaign highlighted the importance of frequent handwashing, and the benefits of installing water meters, the need to check water floaters, the economic use of a washing machine, as well as ways to limit the excessive consumption of water at car washes.

“Donate Warmth” – UNHCR’s Regional Winter Campaign

With millions of vulnerable Syrian and Iraqi refugees as well as internally displaced people in the region still in need of assistance this winter, UNHCR launched in December 2016 a public appeal - “Donate Warmth”- for contributions to its winter programmes that aim to protect refugees and vulnerable host communities in neighbouring countries from the cold winter months.

Through the campaign’s online platform - <https://donate.unhcr.org/gu-en/winter> - UNHCR invited individuals to make contributions to help UNHCR provide refugees and vulnerable host communities with essential items to survive the cold season.

UNHCR’s winter programme is well underway. It includes cash assistance from November to March to enable families in need to purchase fuel and other winter essentials, as well as the distribution of blankets, stoves and materials to weatherproof frail shelters.

UNHCR estimates that over 850,000 vulnerable refugees and Lebanese are in need of support to survive this winter.

THE MENTAL HEALTH HURDLES FACED BY SYRIAN REFUGEES IN LEBANON

The most prevalent mental health problems observed among Syrian refugees include depression, anxiety-related disorders, PTSD and psychosis

Refugees struggle with a myriad of losses: the loss of houses they spent lives building, the loss of a future for their children, the loss of loved ones, the lack of livelihoods opportunities, and the depleting of savings

Refugees with expired residency live in a constant fear of arrest

The effects of conflict and displacement on the mental health of Syrian refugees are profound. Experiences of conflict-related violence in addition to concerns about the situation in Syria are compounded by the daily stressors of displacement. These include poverty, lack of access to basic needs and services, cramped accommodation and lack of privacy, on-going risks of violence and exploitation, isolation and discrimination, loss of family and community support, as well as uncertainty about the future.

Trends observed

According to Restart Center, International Medical Corps (IMC), Médecins du Monde (MdM) and Fundación Promoción Social de la Cultura (FPSC) – key mental health partners – the most prevalent mental health problems observed among Syrian refugees include depression, anxiety-related disorders, posttraumatic stress disorder (PTSD), and psychosis.

Contributing factors

Refugees struggle with a myriad of losses: the loss of their houses, the loss of a future for their children, the loss of loved ones, and the loss of their livelihoods. These losses are compounded by depleted savings and several challenges at the social and occupational levels.

Finding affordable and decent accommodation is a struggle. Most refugees report not being able to find a job and are highly reliant on humanitarian aid to survive.

Other patterns observed in many Syrian refugee families, particularly families of male victims of torture, is the shifting roles within the family: women and children becoming the breadwinners for the family. The shifting roles of family members creates an imbalance in the family's dynamics and ability to cope with pressures.

Maintaining legal residency remains one of the biggest challenges faced by Syrian refugees in Lebanon. Those with expired residency live in a constant fear of arrest.

The cost of healthcare also poses a problem for refugees, as many cannot afford treatment. A number of Syrian refugees also face challenges with regards to admission to in-patient psychiatric hospitals. Delays in admission and the cost of care, often prohibitive for refugee families, force many to choose not to be admitted in spite of the critical need.

Services provided

Community interventions play an important role in responding to certain mental health issues. Various initiatives including community centres, outreach workers, outreach volunteers and self-help groups such as youth groups play in a key role in providing indirect support and care to refugees in need of mental health care. UNHCR actively promotes the work of over 550 community outreach volunteers in

Over 550 community outreach volunteers in Lebanon are working to bridge the gap between service providers and persons in need of care

In 2013, partners set up emergency response plans for the provision of mental health rehabilitation services for Syrian refugees

UNHCR, IMC and Restart Center support access to mental healthcare at the hospital level

Lebanon, who bridge the gap between service providers and persons in need of care. Over 79 Community and social development centres provide such services across the country. Several skills trainings were provided at community centers, with the aim to empower women, men, and youth with skills to become self-reliant and confident, while providing much-needed psychosocial support activities. More than 20,000 individuals participated in these skills trainings.

In addition to community-based solutions, specialized partners also provide support to individuals in critical need of psychological care. In 2013, a number of partners including Restart Center and MdM set up emergency response plans for the provision of mental health rehabilitation services for Syrian refugees. Prior to that, many refugees in need of healing, trauma-processing, and psychological support were not able to access treatment in part because Lebanese institutions were not able to expand to welcome large numbers of refugees and provide the needed healing environment.

From the onset of the crisis, MdM's mental health programme was integrated within MdM-supported primary healthcare centres. A close partnership between FPSC and MdM ensures that a full range of mental health services, including mental health case management, psychological counselling/therapy, psychiatric consultation, and, if needed, psychotropic medication, are available free-of-charge for patients.

FPSC's Community Mental Health Clinic in Zahle provides specialized, recovery-oriented mental health services to those suffering from mental, neurological, or substance-use disorders.

As part of the referral care programme, UNHCR, IMC and Restart Center support access to mental healthcare at the hospital level for patients with severe mental health problems requiring hospital care. IMC services include psychosocial support and psychoeducation provided by social workers in addition to psychotherapy and psychiatric consultations, all provided free of charge.

Services provided by Restart Center range from psychosocial and psychological assessments, to physiotherapy for victims of torture, survivors of gender-based violence, and individuals with psychosomatic complaints, psychiatric and neurological services, and psychomotor and speech therapy.

Improvements have been observed by various partners after treatment, particularly in relation to PTSD symptoms. Symptoms of anxiety and depression in many refugees are more challenging to eliminate given the numerous social and financial hardships they face in Lebanon.

Capacity-building

Very few facilities in Lebanon offer medical care related mental health issues, and limited bed space often leads to delays in admission. This in turn forces partners to occasionally treat unstable patients in the community instead of a specialized

MoPH, UNHCR, and partners are working to expand access to hospital care for mental health patients

MdM, FPSC and WHO conduct regular psychological first aid trainings to non-specialized front-line staff, public primary healthcare centre and MoSA social development centre staff

institution. The Ministry of Public Health (MoPH), UNHCR, and partners are working to expand access to hospital care for mental health patients.

In addition, and due to an observed need in the field, IMC, with support from UNHCR, launched last year a national detection and referral training programme that targets community and outreach workers from a number of non-governmental organizations (NGO), medical staff and social workers from primary healthcare centres. The training is in line with the mental health Gap Action Programme, a tool developed by the World Health Organization (WHO) for non-specialized mental health interventions. Similarly, WHO and Restart Center conduct trainings to primary healthcare centre staff to build their detection and referral capacities. These efforts have helped improve the capacity of non-specialized healthcare providers in public and local clinics to provide adequate diagnoses in relation to mental health patients and successfully refer them to specialized partners if need be.

In addition, MdM, FPSC and WHO conduct regular psychological first aid trainings to non-mental health front-line staff, MoPH primary healthcare centres and Ministry of Social Affairs (MoSA) social development centre staff. First aid training is considered a priority in the 2015-2020 National Mental Health Strategy for Lebanon and involves humane, supportive and practical assistance for individuals suffering from stress, in ways that respect their dignity, culture and abilities.

WHO also supports MoPH in training emergency room staff in all public and private hospitals on the management of emergency psychiatric cases including around attempted suicide and psychotic episodes. WHO is also supporting MoPH in developing a strategic framework for the provision of assistance in Lebanese prisons.

ALAA'S STORY

Alaa's son Adib takes part in a psychomotor therapy group designed to help children traumatised by war at the Restart Centre in Beirut, Lebanon. © UNHCR/Sam Tarling*

Since arriving in Lebanon with her husband and four children in 2012, Alaa has lost 14 relatives back home. Thirteen of them, including two of her sisters and their children, were killed in the ugly brutal conflict, while her mother died “out of sheer grief”, she said, and her sister Samar is the only one who now remains in their hometown in Syria.

Alaa has spent years in Lebanon tormented in her own isolated world, grieving for lost loved ones back home and worrying about those who remained. “For a long time, all I wanted to do was sleep so that I could dream about my family. I used to get so upset when my husband woke me,” she said.

Despite the pain, Alaa is trying to get back on her feet. Since April, she has been attending Restart Centre in Beirut, where she and her family receive psycho-social support. “I look forward to Fridays because I get to go out and meet people.”

Alaa says she wants to feel better so she can take better care of her four children. “They need me, and I want them to be happy, to get an education and be capable of hoping for a better future again.”

Read the full story [here](#).

**Names changed for protection purposes*

AGENCIES THAT CONTRIBUTED TO THIS UPDATE

FPSC, IMC, MdM, Restart Center, UNHCR, UNICEF, WHO and World Vision.

DONORS

Austria, Bahrain, Belgium, Canada, Czech Republic, Denmark, Estonia, European Union, Finland, France, Germany, Ireland, Italy, Japan, Kuwait, Liechtenstein, Netherlands, Norway, Portugal, Qatar, Romania, Saudi Arabia, Spain, Sweden, Switzerland, United Kingdom, United States of America.

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This report is compiled by the UN Refugee Agency (UNHCR) based on information provided by agencies working on the Syrian refugee response in Lebanon. For more information, please contact Dana Sleiman at sleiman@unhcr.org or Lisa Abou Khaled at aboukhal@unhcr.org.