This dashboard summarizes progress made by partners involved in the Lebanon Crisis Response Plan (LCRP) and highlights trends affecting people in need. The Protection sector in Lebanon aims to achieve the following results: OUTCOME 1: Displaced persons from Syria and individuals at risk live in a safe protective environment; OUTCOME 2: Communities are empowered in creating a safe protection environment; OUTCOME 3: SGBV risks are reduced, and access to quality services is improved; OUTCOME 4: All boys and girls are protected against neglect, violence, abuse and exploitation (including prevention and response).

2021 Sector Funding Status
As of 31 March

21% 45.9M
Total received (since Jan-21)

11% $23.9M
Total carry over (from 2020)

Required $213M
Required (ref. 2021 appeal)

2021 population reached

481,368 Services provided*
Target (services to be provided)

20,605 Services provided*
Target (services to be provided)

457,758 Services provided*
Target (services to be provided)

1,653 Services provided*
Target (services to be provided)

1,352 Services provided*
Target (services to be provided)

2021 population figures by cohort

336,000 Lebanese individuals in need

1,500,000 Displaced Syrians in need

27,700 Palestinian Refugees from Syria (individuals)

20,000 Palestine Refugees in Lebanon (individuals)

Key Achievements

# of individuals who benefitted from legal counseling, assistance and representation regarding legal stay
7,615 / 40,000

# of individuals who benefitted from counseling, legal assistance and legal representation regarding civil registration including birth and marriage registration
10,211 / 100,000

# of individuals at the community level providing information, outreach and feedback to persons of concern
758 / 8,195

# of individuals with specific needs receiving individual counseling, case management and psychosocial support
5,701 / 17,370

# of women, girls, men and boys at risk and survivors accessing SGBV prevention and response services in safe spaces
11,841 / 140,000

# of women, girls, men and boys sensitized on SGBV
15,489 / 229,400

# of boys and girls accessing focused psychosocial support and/or assisted through CP case management services
8,743 / 35,500

# of caregivers accessing child protection prevention (caregivers’ programmes)
5,228 / 31,000

# of boys and girls engaged in community-based child protection activities
10,111 / 78,000

# of cases of Syrians submitted for resettlement/other humanitarian admissions
892 / 8,520

*To be noted that one person can benefit from several services

Partners per governorate

List of partners (PRT + SGBV + CP, Q1 2021)

53 partners: ABAAD, ACF, ActionAid, AMEL, AND, ARCPA, Borderless NGO, CARE, Caritas Lebanon, CONCERN, Denmark, DRC, GVC, HI, Himaya, IMC, Intersos, IOCC Lebanon, IRC, KAFA, Key of Life, LAW, LECORVAW, LUPD, Makhzoumi, Mouvement Social, Nabad, NEF, NRC, Plan International, PRIVATE DONORS, PU-AMI, Red Oak, RET Liban, RMF, RtP, SAWA Group, SBT, SCI, SHEILD, SIF, SWSL, TdH-It, TdH-L, UNHCR, UNICEF, UNRWA, UPEL, URDA, WCH, WRF, WVI, YNCA

*Children receiving more than one service may be counted more than once
*Includes Parents’ Support Groups and parenting skills programmes

NB: Figures in this box are based on targets and sums of beneficiaries for activities under each outcome.
In Q1, the Protection Sector provided legal aid and specialized services to persons in need, as well as community-based protection activities.

Despite the total countrywide lockdown from January through March and the closure of public institutions, the sector moved forward to ensure that women, men, boys and girls know and exercise their rights especially in relation to civil documentation, legal residence and HLP. Some 26,098 individuals (15% of the annual target; 50% female and 50% male) received legal awareness sessions on their rights and how to exercise them, mostly through individual remote modalities instead of group sessions. Some 10,211 individuals (10% of the target) benefited from tailored counselling, legal assistance and legal representation on civil documentation, 7,615 on legal residency and 1,096 caregivers (932 female and 164 male, with 51% female) on legal representation. Some 81% of participants demonstrated a clear understanding of the services provided by the SGBV partners. This represents an increase compared to the of the 7,184 people reached in Q1 2020 and shows how partners were able to quickly shift to the remote modality in 2021. Despite the challenges of delivering all group activities using remote modalities, almost 75% of individuals who received GBV services reported feeling empowered by these interventions. Some 81% of the people accessing services were adults and 19% were individuals below 18 years of age. Among these, 1,600 were girls and 655 were boys. Partners continued to increase efforts to target adolescents with specific tailored activities including through remote modalities. The number of people with disabilities who were reached slightly decreased compared to the average in 2020 showing the need to continue to invest in promoting accessibility of service both in presence and remotely, and support capacity building of staff on disability inclusion. A total of 140 institutional actors were trained on SGBV core concepts and safe disclosure and referrals. Some 81% of participants demonstrated a clear increase in knowledge thanks to the capacity building program.

To ensure that women, men, boys and girls are enabled to improve their protection including through strengthened community and family support, the Sector reached 126,634 persons (42% of the annual target) with information on their rights and how to access services, mostly thanks to the active community networks that the Sector is supporting, making use of remote modalities. This activity has been particularly critical to empower individuals during lockdown periods and to address partners’ limited capacity to conduct outreach and identify persons in need. Some 58% of the beneficiaries are women and girls, thus reflecting the efforts to ensure gender sensitivity and women empowerment.

The Sector reached 15,489 individuals through sensitization activities on SGBV prevention and response (78% female, 22% male, 77% above 18 years of age and 23% below 18 years, including 11,157 displaced Syrians, 4,160 vulnerable Lebanese, 134 Palestinian refugees in Lebanon, and 38 Palestinian refugees from Syria). This sensitization covers several topics such as how to reach out for support, mitigate the risk of violence and manage increasing levels of stress and frustration generated by the worsening of the COVID-19 situation and prolonged lockdown. A total of 24,304 individuals (17,758 children and 6,546 adults, with 68% displaced Syrians, 30% vulnerable Lebanese and 2% Palestinian refugees) benefited from child protection services to ensure the wellbeing of vulnerable and at-risk children and their
services to community members and frontline workers, reaching as public services and communities are overwhelmed amid the are increasingly addressing the needs of the Lebanese population individuals account for 35% of beneficiaries of specialized support emergency or protection cash assistance. Vulnerable Lebanese receiving specialized services (19% of the annual target) and target), 2,310 persons with disabilities and their caregivers in specialized support by exceeding its targets for Q1, with 5,701 interventions. The Sector responded to the increasingly high needs people to navigate legal procedures.

Face-to-face activities were only accessible for individual interventions to children at high risk whilst group activities continued to be provided through remote and online modalities. Despite the challenges faced with online connectivity, Child Protection partners supported 10,111 children (5,157 girls and 4,954 boys, with 61% displaced Syrians, 36% vulnerable Lebanese, 3% Palestinian refugees) and 5,228 caregivers (4,321 females and 907 males, with 73% displaced Syrians, 22% vulnerable Lebanese, 5% Palestinian refugees) through community-based psychosocial support. For groups at higher risk, a more focused version of psycho-social support (Focused PSS [FPSS]) was provided to 4,416 children (2,340 girls and 2,076 boys, with 70% displaced Syrians, 29% vulnerable Lebanese and 1% Palestinian refugees) and 1,096 caregivers (932 female and 164 male, with 51% vulnerable Lebanese, 48% displaced Syrian and 1% Palestinian refugees). Children and caregivers were supported to enhance interactions among themselves but also with other people in their community with the aim of increasing feelings of belonging and self-confidence especially in face of COVID-19 isolation. In light of the continuous challenge in engaging men in Caregivers and FPSS programs, some recommendations by the PSS Committee are being drafted regarding lessons learned and recommendations for remote engagement of male in these activities.

As part of the prevention plan, 21 social and behaviour change communication initiatives took place mostly in the most vulnerable localities with the engagement of key child protection duty bearers including religious leaders, local authorities, employers and landlords. Topics covered through these communication initiatives varied by locality and they addressed key problematic issues and identified within each community, but mostly around key issues such as child marriage, child labour and violence against children. Partners were also able to provide capacity building to a total of 222 staff, including 58 governmental staff and 132 staff from the civil society on child protection and safeguarding topics.

In order to support displaced Syrians to access durable solutions to their displacement, the cases of 892 individuals were submitted for resettlement or other humanitarian pathways in Q1 2020. Meanwhile, 520 Syrian individuals departed Lebanon as part of resettlement and humanitarian admissions schemes during the quarter. While resettlement procedures have picked up since the middle of 2020, Jan-March 2021 submissions and departures still represent a substantial drop from Q1 2020, when 2195 cases were submitted and 1713 Syrians departed Lebanon, before COVID-related movement restrictions took full effect.

### 2. Key challenges of the sector

The most critical challenges faced by the Sector were related to the prolonged lockdown that required partners to provide all services via remote modalities, except case management for high-risk cases. Partners reported that for many families the costs associated with internet services and electricity shortages were difficult to sustain due to the rapid deterioration of the economic situation. As part of mitigation plans, Child Protection and Protection partners are covering communication/internet-related costs specifically when activities target medium to high-risk children and their caregivers or sensitive protection cases. A general sense of ‘fatigue’ related to receiving services online has also been reported by SGBV partners among women and girls. The inability to conduct field activities and outreach is also directly impacting partners’ capacity to identify and support new cases, while the closure of institutions is limiting the impact of legal aid that often could not translate into actual delivery of civil documentation or renewal of legal residency. Moreover, the prohibition of most in-person activities during a prolonged period seriously impacted persons with specific needs, especially those with serious medical condition, disabilities and older persons as they could not benefit from essential services, such as physiotherapy.

Partners also faced additional challenges due to the COVID-19 outbreak during January and February, which had negative impacts on staff wellbeing and limited partners’ capacity to fully deliver.

### 3. Key priorities for the following quarter

The priority for the SGBV Task Force will continue to be service delivery to survivors and individuals at risk, with gradual reopening of safe spaces and in person psycho-social support activities. The sector will continue to increase efforts to mitigate the risk of GBV and promote community engagement initiatives aimed at identifying and mitigating the risk of GBV.

The Child Protection Task Force will continue to deliver essential services through a blended approach while working on improving this method through the revision of tools that reflect lessons learned and feedback from both partners and beneficiaries. In face of the deteriorating socio-economic situation, the Sector and partners will continue to prioritize integration and collaboration with other sectors, namely the Livelihood and Food Security and Agriculture Sectors and closer links to social assistance for advancing the holistic approach model for the most vulnerable children and with a focus on children engaged in child labour and its worst forms. This comes in addition to continuous coordination within the Protection Sector and coordination with Education Sector and the Mental Health Task Force (under the Health Sector). The Sector will also work to improve and build on successful Social Behavioural Change (SBCC) initiatives for engaging with community members and leaders for a community change approach.

The Protection Sector will keep focusing on the delivery of needed legal aid to help protection persons of concern access their rights; the provision of specialized services to persons with specific needs, including emergency cash and protection cash as needed, with a specific focus on persons with disabilities and older persons; and on strengthening community-based activities that have proven to be particularly critical in lockdown situations and the ongoing aggravated crises. The Sector will also strengthen coordination efforts with other Sectors, such as Shelter to better address the eviction issue and Health to better identify and respond to increasing mental and psychosocial needs among beneficiaries.
4. Mainstreaming of COVID-19

The Sector quickly adapted to the prolonged lockdown and provided most of the planned support through remote modalities. SGBV partners worked with community members to mitigate the effects of COVID-19 and the impacts of restrictions of movement on mental health, especially for women and girls. This was done mostly through online peer support groups. Similarly, Child Protection Task Force partners continued to adapt and operate within a hybrid modality of delivery with a focus on prioritizing children at high risk with face-to-face case management services for an efficient and rapid response, while taking into consideration COVID-19 safety measures. Information and key messages on COVID-19 precautionary measures were shared by partners during awareness raising activities and these were mainstreamed in community-based child protection prevention activities and other general protection activities. Protection partners adapted their working modalities as needed, replacing large group activities with remote and individual sessions and by providing online support as much as possible. Community-based structures have also been continuously strengthened to ensure dissemination of information and the identification and referral of persons in need, despite restrictions in access. The Protection Sector (including the CP and SGBV Task Forces) have taken stock of the impact of remote modalities on partners’ ability to meet beneficiary needs, identified lessons learned and have set collective recommendations in order to adapt practices for the future. Key recommendations include the need to enhance safe identification and referrals and to identify alternative measures to reach persons facing specific challenges, including hearing and speaking impairments, elderly persons, younger children and persons with limited literacy, in order to systematically improve communication with beneficiaries and regularly reconfirm the best way to reach them, as well as to provide them with specific support to cover costs associated with their access to remote activities. Sector partners also recommended to adapt awareness materials to ensure suitability to different audience groups, to address confidentiality, privacy and data protection challenges to the best extend possible and to develop innovative and adapted monitoring and evaluation modalities for services offered remotely in addition to mental health support to staff and frontline workers.