

# **Protection** (including SGBV and Child Protection) **LCRP End of Year Dashboard 2020**



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).

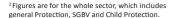


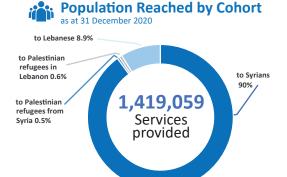




#### 3.2 m people in need<sup>2</sup> 1,883,700 Targeted<sup>2</sup>

1,419,059 Services provided to people in need





# **Progress against targets**

Key Ach	nievements	Re	eached / Target
# of individuals who assistance and repre		•	30,050 / 40,000
# of individuals who assistance and legal including birth and n	representation regar	0. 0	tration 54,001 / 100,000
# of persons at the co outreach and feedba (average per month)		-	ication, 11,742 / 8,195
# of individuals with counseling, case mar	•	-	t 14,780 / 17,370
# of women, girls, m SGBV prevention and	•		ccessing 44,923 / 140,000
# of women, girls, m	en and boys sensitiz	ed on SGBV	79,093 / 286,750
# of boys and girls ac and/or assisted thro			
# of caregivers acces (caregivers' program		prevention	13,519 / 26,000
# of boys and girls er protection activities	ngaged in communit	y-based child	26,785 / 65,000
%			100%
4 Children receiving more	than one service may h	a counted more th	aan anca

Children receiving more than one service may be counted more than once 5 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.

Outcomes <sup>6</sup>	LCRP 2017/2020 Baseline			2020 Results				2020 Target				
OUTCOME 1:	SYR	LEB	PRS	PRL	SYR	LEB	PRS	PRL	SYR	LEB	PRS I	PRL
% of persons over 15 with legal stay	26%7	N/A	N/A	N/A	20%8	N/A	N/A	N/A	40%	N/A	N/A	N/A
% of children born in Lebanon whose birth is registered at the Nofous level	36%7	N/A	N/A	N/A	44%8	N/A	N/A	N/A	50%	N/A	N/A	N/A
% of children born in Lebanon whose birth is registered at the Foreigners' Registry level	17%7	N/A	N/A	N/A	28%8	N/A	N/A	N/A	40%	N/A	N/A	N/A
# of persons benefitting from resettlement or other humanitarian pathways <sup>9</sup>	7,771	N/A	N/A	N/A	4,284	N/A	N/A	N/A	12,000	N/A	N/A	N/A
OUTCOME 3: % of women aged 20-24 who are married before 18 <sup>10,11</sup>	41%	6%	25%	12%	N/A <sup>11</sup>	N/A	N/A	N/A	32.8%	4.8%	20%	9.6%
OUTCOME 4:  % of children aged 2-14 who experience violent disciplinary practices <sup>10, 12</sup>	65%	57%	77%	82%	N/A <sup>12</sup>	N/A	N/A	N/A	45%	40%	45%	45%
% of children aged 5-17 engaged in child labour <sup>10,13</sup>	7%	6%	4%	5%	N/A <sup>13</sup>	N/A	N/A	N/A	4.5%	3.6%	3.5%	4.5%

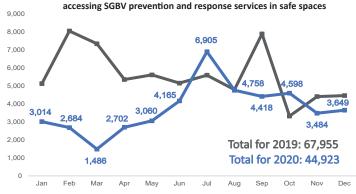
- <sup>6</sup> Only activity indicators for Outcome 2 are available for 2018. Outcome indicators were redefined for 2019.
- Vulnerability Assessment of Syrian Refugees in Lebanon (VASyR) 2017.
- 8 VASyR 2020.
- <sup>9</sup> proGres; end-year results. Figure is for those who have departed
- Baseline survey, UNICEF, MoSA, 2016; biennial results (2018, 2020)
- 11 UNICEF data not published in 2020. However, VASyR 2020 results indicate that 24% of Syrian females between ages 15 and 19 are married (27% in 2019). 12 UNICEF data not published in 2020. However, VASyR 2020 results indicate that 57% of Syrian children
- aged 1-1 were subjected to violent discipline (66% in 2019).

  13 UNICEF data not published in 2020. However, VASyR 2020 results indicate that 4.4% of children aged 5 to 17 are engaged in child labour (2.6% in 2019)

# **Analysis: SGBV - Access to Safe Spaces**

Access to women and girls' safes spaces in 2020 was severely impacted by the restrictions imposed to contain the spread of COVID-19. During March 9,000 2020, in-person activities in safe spaces were drastically reduced and access was limited to the most urgent and high-risk cases due to the lockdown measures. Starting April with the easing of the movement restrictions, more women and girls could access safe spaces, with an uptick during

Challenges to access to safe spaces were also related to the limited availability of safe transport options, as well as increasing costs associated with transportation. To ensure that vulnerable women and girls and members of marginalized groups could still receive information and counselling, GBV partners continued to provide psychosocial support, including case management, in remote modalities via phone or different online platforms.



Number of women, girls, men and boys at risk and survivors

# Achievements of the Sector at the Output Level and Challenges



In 2020, 84,051 individuals benefited from legal aid in the form of legal counselling, assistance and representation. This includes 54,001 individuals accessing legal aid related to civil documentation (54% of the annual target, down from 72,653 in 2019) and 30,050 individuals accessing legal aid related to legal residency (75% of the annual target, up from 28,764 in 2019). Displaced Syrians made up 95% of the beneficiaries of legal aid; they were supported to understand their rights, obtain information on regularizing their stay and accessing documentation (including birth, marriage, divorce and death registration) that is essential for their future, both in the country of asylum and in case of return to Syria. 14,518 persons in need (41% of the target) also benefited from tailored counselling on their rights and duties as well as from support for mediation with their landowner in relation to housing, land and property rights. Such interventions were key in preventing and responding to eviction threats and cases, an issue that has been particularly on the rise in 2020 largely due to the affected population's inability to pay rental costs.

Despite protection partners' efforts to implement innovative remote modalities to ensure continuity of services, these results were affected by COVID-19 related measures that severely limited outreach and the ability to provide in-person counselling for complex cases as well as leading to the closure of administrative offices and courts. Results were also affected by the staggering economic downturn that drastically impeded individuals' ability to cover civil documentation and legal residency-related costs. The pandemic also significantly limited tailored outreach activities to increase women's awareness on the importance of legal residency, including due to the fact that refugee women and girls are even less likely to have access to communication means than men, exacerbating a significant gap between men (18,343) and women (11,629) having received support to renew their residency.

Persons with specific needs received more attention in 2020 and were increasingly offered tailored support in the form of individual counselling, case management and psychosocial support with 14,780 beneficiaries this year (85% of the annual target), compared to 12,372 in 2019. 7,200 persons with disabilities received specialised services (60% of the target, compared to 7,064 in 2019) and 2,325 older persons (25% of the annual target, compared to 2,592 in 2019): these two groups were particularly hampered by precautionary measures related to the pandemic and barriers to accessing remote modalities due to technological requirements. 2020 saw a higher proportion of Lebanese accessing specialized services through the LCRP response (10% of older persons assisted and 31% of persons with disability) due to the interruption of the support they and their families were previously receiving from public structures. 32,966 persons with specific needs received protection and emergency cash in 2020 (225% of the initial target), contributing to reducing risks of exploitation, eviction and resorting to harmful coping mechanisms, and to enhancing access to essential services for the most vulnerable. The deterioration of the economic situation and the inability of the population to access livelihoods and meet their basics needs indeed increasingly exposed people to protection risks and pushed them to resort to harmful coping mechanisms, leading to a huge increase in the need for protection and emergency cash assistance. Despite the numerous barriers posed by the pandemic and associated lockdowns, partners were able to scale up the delivery of protection and emergency cash assistance in 2020 (up from 5,979 cases supported in 2019) through the use of innovative, adapted modalities. The scale, however, remains insufficient in the long run given the exponential needs of all population groups.

Community-based mechanisms have been particularly critical in 2020 to ensure the circulation of accurate and updated information for services providers to maintain contacts with persons in need and to foster timely identification and response to protection cases. A total of 553,726 persons (237% of the annual target, up from 438,886 in 2019) were engaged in information sessions, mostly through remote modalities on accessing services and COVID-19 precautionary measures, testing and treatment, and they also provided feedback on their needs and on programmes. Due to precautionary measures and lockdowns, only 59,710 beneficiaries accessed community centres in 2020 (50% of the annual target, down from 110,751 in 2019). However, an average of 11,742 members of the community per month were trained, supported and monitored to engage in community-based mechanisms (143% of the target, up from 1,695 in 2019), thus enhancing community-based support in a situation of extremely limited access to the population. Women represented 53% of the people benefiting from information session and 49% of those supported to engage in community -protection mechanisms.

In 2020, the **Child Protection (CP)** sector and partners adapted their programmatic interventions to continue to deliver services to ensure the protection of vulnerable boys and girls against neglect, violence, abuse and exploitation, reaching a total of 62,721 individuals (45,916 Syrians, 13,858 Lebanese and 2,947 Palestinians) through CP prevention and response services. In addition to the development of tools and guidelines, trainings and coaching sessions were rolled out and adapted to support partners in remote implementation of Case Management and Psycho-Social Support (PSS) for children and their caregivers. In term of system strengthening, 1,112 CP practitioners (70% female and 30% male), of which around 180 were government/SDC staff, demonstrated increased knowledge and usage of the National Child Protection Standard Operating Procedures and case management tools. In addition, the Ministry of Social Affairs launched its 2020-2027 Strategic Plan for the Protection of Women and Children, which also includes "Qudwa", a national social behavioural change and communication (SBCC) plan to prevent child marriage, child labour and violence against girls, boys and women.

Despite the challenges, including lack of privacy during the sessions, internet connection problems, a lack of phone devices for many people in need and limited staff capacity, CP partners succeeded in continuing to provide holistic and inclusive child protection services to boys and girls at risk or exposed to abuse, as well as to their families. A total of 10,667 children (64% boy and 36% girls) at high risk of violence, exploitation, neglect and abuse benefited from individual case management (including judicial and non-judicial protection pathways through face to face and remote modalities). This represents 101% of the initial planned yearly target and includes children exposed to child labour (47%), children subject to violent discipline (32%), children in contact with law enforcement (12%), separated children (6%), child marriage (2%) and unaccompanied children (1%). Of the total number, 2,319 remain open and were carried over to the next year while 8,348 cases were closed, out of which 4,007 (about 50%) were successfully closed by meeting their needs and all the actions set in the protection plan in an appropriate, systematic, and timely manner. The 50% ratio is perceived as a very good indicator in the Case Management standards considering the complexity of some cases (which are eventually closed by reducing the harm to the child) and the challenges faced by case workers to intervene and secure all the resources needed to successfully close a case. Some of these challenges may also include transfer of the case to judicial pathways, the child and family being unreachable, or the child turning 18 and subsequently being transferred to protection agencies.





11,750 children (51% girls and 49% boys) at medium- to high risk (59% of the target) benefited from Focused Psychosocial Support (FPSS) activities contributing to enhancing their well-being, coping mechanisms and social support. Due to the COVID-19 imposed restrictions, organizing face to face group sessions was severely affected. Partners also faced challenges in engaging more than 4-6 children in online remote psychosocial support sessions.

Partners faced similar challenges regarding community engagement and group sessions with the under-achievement of targets for community-based child protection activities (reaching 41% of planned target) and Caregivers' Programmes (reaching 52% of planned target). Despite these challenges, a total of 26,785 children (50% boys and 50% girls) were engaged in community-based child protection preventive activities through remote modalities, which supported them to negotiate risks and know where to go for help. In addition, 13,519 caregivers (84% female and 16% male) were able to exchange with peers on positive experiences, difficulties and solutions through the provision of mental health and psychosocial support group sessions. Topics included COVID-19 stigma, support to cope with the current situation in addition to tips for positive parenting skills. As part of the prevention plan, community members participated in a total of 244 Social and Behavioral Change (SBCC) initiatives (70 % of annual target) conducted to address key identified issues at community level such as violence against children, child labour, drug abuse and COVID-19 stigma. These sessions were organized in collaboration with child protection duty bearers including religious leaders, local authorities, employers, and landlords. Partners used voice notes to disseminate designated lessons requiring a lower level of connectivity than online conferences, and some partners provided beneficiaries with credit to cover their internet expenses. Other methods included sharing simple content before a PSS session so that children and caregivers could familiarize themselves with the material before a scheduled call.

In 2020, the **SGBV sector** focused on three main priorities: strengthening the capacities of local institutions to prevent and respond to GBV, ensuring service provision for survivors and people at risk, and promoting community engagement to identify and mitigate the risk of GBV in targeted communities.

A total of 520 institutional actors (133 males and 387 female), including members of the Ministry of Social Affairs, the Ministry of Interior and Municipalities, the Lebanese Red Cross, and the Lebanese University/Faculty of Public Health, were trained on SGBV core concepts and safe disclosure and referrals. Following these training sessions, some 74% of the participants demonstrated a clear increase in knowledge. A total of three local institutions and 13 MoSA SDCs benefited from capacity building, as well as technical and financial support to provide quality psychosocial support and case management services.

In 2020, 44,923 individuals in need (including 33,298 Syrian, 10,963 Lebanese, 662 Palestinian refugees, 70% female and 30% male) benefitted from essential services provided by the SGBV sector (32% of the annual target, significantly affected by COVID-19). Despite a rapid adaptation of services to remote modalities and the development of technical guidance for SGBV actors, restrictions on movement and difficulties faced by community members in securing access to phones and internet connection had a negative impact on the number of people benefiting from SGBV services. In addition, even when movement restrictions were eased, women and girls' safe spaces had to reduce the number of beneficiaries attending in-person activities due to the need to ensure social distancing. Challenges faced by women and girls in securing safe options for transportation to safe spaces and community centers further impacted the results. Moreover, with the increase in the number of reported COVID-19 cases in the last quarter of the 2020, partners had to take additional precautionary measures to limit risks, and in some cases, partners had to suspend service delivery when staff tested positive for COVID-19. Nevertheless, the sector continued to consistently provide assistance to urgent and high-risk cases during the lockdown periods.

In 2020, the SGBV sector increased its efforts to further improve accessibility and inclusiveness of SGBV services through awareness raising and investment in the capacity development of staff, contributing to 104 persons with disabilities accessing GBV prevention and/or response services. Despite the challenges in adaptation of activities to remote modalities, 91% of individuals who received GBV services reported feeling empowered by these SGBV interventions.

The sector also continued its community-level interventions, reaching out to 79,903 individuals (78% female, 22% male, 56,422 Syrians, 21,001 Lebanese, 1,670 Palestinians) through sensitization activities on SGBV prevention and response, which covered a variety of topics, such as how to deal with increasing stress during COVID-19, as well as how to reach out for support and mitigate the risk of violence, including online harassment. This represents almost 30% of the total target for 2020. Community sensitization activities were severely limited due to the impact of the pandemic, the related restrictions on movements and the difficulties of conducting large awareness- and outreach initiatives using remote modalities.

SGBV risk mitigation interventions were conducted both in-person in small groups to ensure social distance, as well as remotely through social media platforms. Following trainings, 85% of community members trained demonstrated increased knowledge and improved attitudes towards SGBV.

The sector also developed key messages on available services (including hotlines for crisis response) that were shared with over 25 PHCs across the country and other relevant sectors. The sector also organized training sessions for about 60 staff from ten COVID-19 isolations centers on SGBV core concepts and safe referrals.



### **Key Contributions to LCRP Outcome and Impact**





For the last quarter of 2020, it is expected that significant challenges will still be posed by restrictions and precautionary measures related to COVID-19, by the impact of the economic crisis and by mobility challenges. The focus will be placed on the identification and referrals of the persons who are most at risk, across all population groups, in order to facilitate their access to critical services. The Protection sector will keep building on innovative modalities to ensure provision of services to vulnerable persons, including children, adolescent girls and women, persons with disabilities, older persons and those marginalized from the community who are often difficult to reach. Priority will be given to initiatives aiming at preventing and addressing harmful coping mechanisms (including child labour, child marriage, survival sex, and dangerous onward movements), which could increase due to the current compounded crises. The sector will also focus on initiatives that promote individual psychological well-being and community engagement to tackle the deteriorating mental health situation of affected populations, as well as tensions within- and between communities. The provision of emergency and protection cash will remain a priority and will be delivered in coordination with other sectors, such as Livelihoods and Shelter, to promote a more sustainable response. The sector will also strive to enhance access to legal residency and civil documentation through tailored awareness raising, as well as through outreach and intensified individual support to those who undertake the procedures.

The Child Protection sector, through its PSS Committee, will prioritize the finalization of an adapted, focused, and non-specialized PSS Emotional Support curriculum for caregivers who are at high levels of distress due to the current situation and/or who are directly affected by COVID-19. The aim will be to support them to better address their and their families' emotions. Similarly, the sector, through its Case Management Task Force and real time monitoring, will continue to monitor child protection violations and trends in the country (such as increased child labour and violence against children). Another key priority for the sector is advocacy efforts to address the issue of treatment of children and sensationalism in the media. A CP sub-committee will be established in order to advocate with different relevant ministries such as the Ministry of Justice, Ministry of Social Affairs, Ministry of Media, Ministry of Interior and Municipalities) for (i) a decent treatment of children who are exposed to any kind of abuse and exploited by the media, specifically pushing back on the sensationalist use of children in media; and (ii) to hold perpetrators accountable. The advocacy group is now in the final stages of writing letters to the different ministries. Lastly, the sector will prioritize the finalization of the Child Protection Emergency Cash Assistance guideline for harmonization across actors and interventions.

The SGBV sector will continue to prioritize service delivery for survivors of SGBV and individuals at risk both through safe spaces and remotely. The sector will focus on ensuring that women and girls' safe spaces can operate and deliver services while respecting social distancing and taking all the precautionary measures to avoid the spread of COVID-19. At the same time, the sector will promote the exchange of experiences and lessons learnt among SGBV partners on how to provide remote psychosocial support and case management to foster knowledge sharing and good practices among partners.



#### **Key Priorities for 2021**

The Protection sector is prioritizing key activities to enhance the inclusiveness, accessibility and affordability of legal procedures related to civil documentation, legal residency and security of tenure and to foster their accurate and even implementation, as well as to enhance individuals' knowledge about their rights and ability to exercise them. This will be achieved through: evidence-based advocacy to improve the legal framework and rule of law; capacity building of local institutions; tracking of discriminatory measures and collective evictions and corresponding advocacy; as well as awareness raising and information dissemination in relation to legal residency, civil documentation and housing, land and property rights; legal aid including counselling, accompaniment at the General Security Office (GSO) and representation in relation to legal residency, civil documentation and housing, land and property (including evictions); and tailored legal interventions based on age/gender/disability/geographical locations including towards prioritized groups (e.g. youth and women for legal residency).

The sector will also prioritize the strengthening of protection against Sexual Exploitation and Abuse (SEA) mechanisms through awareness raising interventions, mitigation of the risks of SEA across all interventions and strengthening of mechanisms to handle complaints by all organizations and their implementing partners in the sector.

In order to ensure that protection services are available, accessible and inclusive to all, including to persons with specific needs, the sector will prioritize disability inclusion mainstreaming and the provision of specialized services to PwSN including older persons, persons with disabilities and with serious medical conditions, together with the provision of emergency and protection cash assistance, in line with guidance to reduce harmful coping mechanisms. The sector will foster and increase coordination with the Livelihoods and Basic Assistance sectors. Finally, the Protection sector will support women, men, boys and girls to improve their protection including through strengthened community and family support with information dissemination to empower displaced and host communities; capacity building of communities to strengthen community-based mechanisms and enhance resilience to shocks, inclusion and participation; enhanced coordination with the Social Stability sector to mitigate inter- and intra-communal tensions; and strengthened accountability mechanisms of local institutions and service providers vis-à-vis affected people. Identification of persons displaced with compelling protection needs and their referral to resettlement or other humanitarian admission programmes will remain an essential activity, together with advocacy to increase opportunities for resettlement for persons at risk, in order to ensure that discussions on return plans take into account protection thresholds.

For Child Protection, priorities include improving guidance for online modalities through lessons learned reflected by staff members and beneficiaries, enhancing monitoring of activities conducted remotely, and adaptation of activities to guarantee the inclusion of unreachable children and those who are most in need. This will also include focusing on children with disabilities and hidden vulnerable populations, in addition to enhancing coordination with local authorities and with other sectors to improve safe identification and referral. Lastly, focus will be placed on continuing the capacity building of staff on adapted remote modalities with further trainings and coaching, as well as on addressing the well-being of staff to cope with the new work modalities and the challenges posed by the multiple crises.

To respond to identified needs and challenges, the SGBV sector will continue to prioritize service delivery for survivors of SGBV and individuals at risk through static, mobile and remote safe spaces. The sector will focus on ensuring that safe spaces can operate and deliver services while



#### **Key Priorities for 2021 (cont.)**



respecting social distancing and taking all the precautionary measures to avoid the spread of COVID-19. At the same time, the sector will promote the exchange of experiences and lessons learnt among SGBV partners on how to provide remote psychosocial support and case management, and will continue to develop technical guidance for remote service delivery, which will also include recommendations on monitoring the quality of remote activities, collecting feedback from recipients of aid and promoting frontline workers' well-being and staff care. Community engagement initiatives promoting GBV risk identification and mitigation will continue to be prioritized in 2021, too, along with system strengthening initiatives aimed at enhancing the capacity of communities and local actors to respond to GBV.

#### Case Study

The COVID-19 measures, including lockdowns imposed by the Government following the pandemic outbreak, resulted in worsened access to services and increased protection concerns for many elderly refugees and other groups at risk during 2020. The need to support beneficiaries to not only ensure that services were available remotely, but also that they remained relevant to the needs of the concerned groups, encouraged the Danish Refugee Council (DRC), along with UNHCR's support, to develop elderly psychosocial peer support groups, delivered alongside comprehensive case management addressing the specific needs of elderly beneficiaries.

The combination of tailored prevention and response programming for these groups led to enhanced outcomes, which were crucial during a year when the pandemic together with the economic crisis placed them at unprecedented risk. Most participants in the Persons with Specific Needs (PwSN) services were unable to meet their basic needs, health and shelter needs due to the shifting situation, which has led to an increased risk of exploitation, heightened abuse, and diminished coping mechanisms. Through engagement in individual targeted case management, elderly beneficiaries were supported to access an integrated support package including counselling, legal and psychosocial support and referrals to other sector partners (including health and shelter). DRC was also able to provide emergency cash assistance to support the acute protection risks identified. Through engagement in psychosocial activities, including the development of peer groups, community support was strengthened, and older persons, as well as protection focal points in their communities, increased their awareness about how to access specialized support. The support groups also served as a channel for the provision of tailored COVID-19 information and awareness sessions in appropriate formats that had previously been under-utilized prior to the pandemic.

Concerning persons with disabilities, similar support was maintained despite the challenges faced in 2020, illustrated by the following example:

Siham left Syria in 2013, and currently lives in North Bekaa, Lebanon with her husband and their three children - two girls aged 5 and 3, and an 18-month-old boy. All three of Siham's children were born here in Lebanon. The young family share a tent with the family of Siham's husband, and work on the land on which they live in exchange for rent. Siham's husband often accepts daily work, such as construction and loading cargo, to make ends meet. Recently, however, he has found few opportunities for work. The area where they live is quite remote, and prohibitively expensive transport costs make it nearly impossible for the family to access basic services.

Siham's second child, Kholoud, was born prematurely in 2017. Siham recounts how the clinic where her daughter was born was poorly equipped and was unable to put Kholoud on a ventilator following her premature birth. The child was immediately transferred to the session.

Kholoud and mother during an occupational therapy rehabilitation

nearest hospital in Arsaal, but endured oxygen deprivation on the way, resulting in cerebral palsy. Due to paralysis, Kholoud is unable to move, crawl or walk.

Like any other child, Kholoud loves to play. As her mother recounts, "Kholoud often cries, as she is "Four months and many rehabilitation unable to join in with the other children in the area". She is completely dependent on Siham to sessions later, Kholoud is able to sit up move around, and cries when left alone for a few minutes while her mother is attending to with a little support, she is also able to household chores. Siham describes how she succumbed to depression when thinking about the eat certain foods unassisted." future that laid ahead for her daughter.

Five months ago, Siham learned about a new center in Arsaal, a partner of Humanity & Inclusion (HI), from a relative. She travelled to the center with her daughter where a multi-disciplinary team of physiotherapists, occupational therapists, speech therapists and psychologists conducted a comprehensive assessment for Kholoud and Siham. Over a period of four months, Khouloud was provided with regular physiotherapy and occupational therapy sessions. Physiotherapists and occupational therapists also trained Siham so that she could continue the rehabilitation exercises at home, and she received psychological counselling, which enabled her to overcome her depression. She was also provided with basic aids and materials to assist Kholoud on a daily basis - a stroller enabled Kholoud to move around with greater ease inside and outside her tent, and a reduction ball ensured that she was able to assist her daughter in completing the exercises required to increase her functional ability.

Upon starting the sessions, Siham recalled that the family was having trouble covering the transport costs required to reach the new Arsaal centre and were afraid they would have to discontinue Kholoud's rehabilitation. HI contacted the International Rescue Committee (IRC), a partner under the DFID Consortium, to mobilize the Equity Fund. The Fund is a shared pool of funds under the DFID Consortium, managed by IRC, which can be utilized to remove unforeseen barriers faced by persons with disabilities when accessing services. IRC ensured that Kholoud's transport costs were covered so that she could continue her sessions.

Four months and many sessions later, Kholoud is able to sit up with a little support. She is also able to eat certain foods unassisted. Siham is continuing the basic rehabilitation exercises she was taught for Kholoud at home and is confident she can take care of her child. Siham said, "I hope there will be a school nearby that would be equipped to accommodate my daughter in the future".

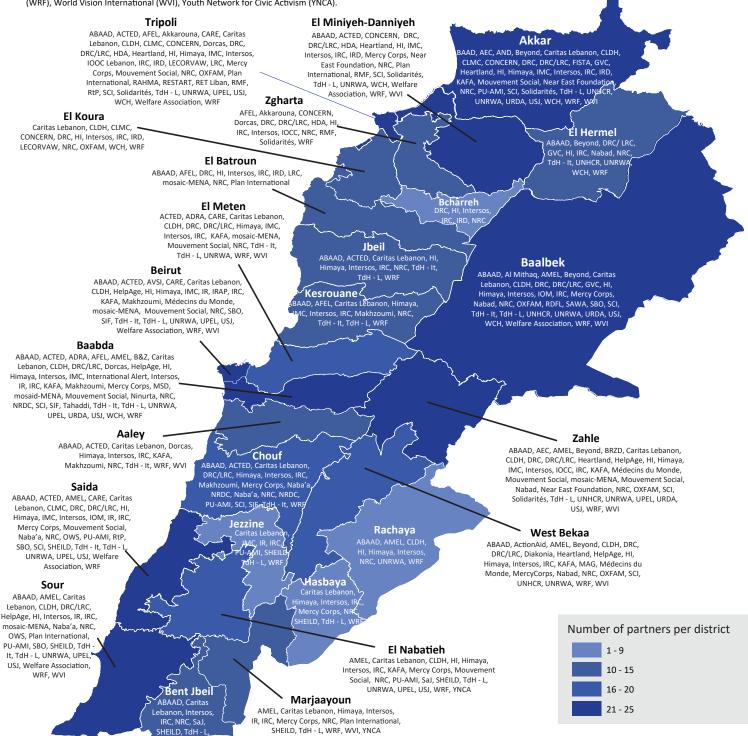




# Organizations per district

The achievements described in this dashboard are the collective work of the following 92 partners:

ABAAD, ACTED, ActionAid, Adventist Development and Relief Agency (ADRA), arcenciel (AEC), Association du Foyer de l'Enfant Libanais (AFEL), Akkarouna, Al Mithaq, AMEL, Akkar Network for Development (AND), Association of Volunteers in International Service (AVSI), Basmeh & Zeitooneh (B&Z), Beyond Association, BZRD, CARE, Caritas Lebanon, Centre Libanais des Droits Humains (CLDH), Caritas Lebanon Migrant Center (CLMC), CONCERN, Danish Red Cross, Danish Red Cross, Lebanese Red Cross (DRC/LRC), Diakonia, Dorcas, Danish Refugee Council (DRC), First Step Together Association (FISTA), Gruppo Di Volontariato Civile (GVC), Himaya Daeem Aataa (HDA), Handicap International (HI), Heartland, HelpAge, Himaya, International Medical Corps (IMC), International Alert, International Orthodox Christian Charities (IOCC) Lebanon, Internation or Migration (IOM), Islamic Relief (IR), International Refugee Assistance Project (IRAP), International Rescue Committee (IRC), International Relief and Development (IRD), KAFA, Lebanese Council to Resist Violence against Women (LECORVAW), Lebanese Red Cross (LRC), Mine Advisory Group (MAG), Makhzoumi Foundation, Médecins du Monde, Mercy Corps, mosaic-MENA, Mouvement Social, Migration for Services and Development (MSD), Naba'a, Nabad, Near East Foundation, Ninurta, Norwegian Refugee Council (NRC), National Rehabilitation and Development Centre (NRDC), Orphan Welfare Society Saida (OWS), OXFAM, Plan International, Première Urgence - Aide Medicale Internationale (PU-AMI), RAHMA, Lebanese Democratic Women's Gathering (RDFL), RESTART Lebanon, RET Liban, René Moawad Foundation (RMF), Right to Play International (RTP), SaJ, SAWA, Save the Children International (SCI), So Overseas (SBO), Service Civil International (SCI), Social, Humanitarian, Economical Intervention for Local Development (SHEILD), Secours Islamique France (SIF), Solidarités, Tahaddi, Terre des Hommes Italy (TdH - It), Terre des Hommes Italy (TdH - It), Terre des Hommes Lebanon (TdH - L), United Nations High Commissioner for Refugees (



Note: This map has been produced by the Inter-Agency Information Management Unit based on maps and material provided by the Government of Lebanon for operational purposes. It does not constitute an official United Nations map. The designations employed and the presentation of material on this map do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.